Radio—Spreading the Word on Family Planning

Editors’ Summary. Radio reaches almost everybody. Worldwide, there are an estimated 1,600 million radio receivers—one for every three people—and nearly 32,000 radio stations. Thus radio has great potential to bring family planning and related health messages to the world’s people. On the whole, this potential is underutilized. A number of new projects are putting radio to work for family planning, however. Combined with other channels of communication, radio is now speaking directly to men, women, and young people about the benefits of family planning.

New creative approaches are being used. In Latin America songs by two popular young artists, Tatiana and Johnny, encourage sexual responsibility among young people. They hit the radio popularity charts in early 1986. In Jamaica Naseberry Street, a soap opera set in a family planning clinic, attracts a large and loyal audience. In Costa Rica Diálogo, a long-running, popular show, uses interviews, dramatizations, panel discussions, and listeners’ letters to discuss family planning and family relationships. In Indonesia a soap opera, Grains of Sand in the Sea, brings family planning messages to the public over more than 100 radio stations. In Zimbabwe the four national radio channels carry family planning information and dramas for different audiences and in different languages. In Bangladesh, India, Indonesia, Nepal, the Caribbean, El Salvador, Guatemala, Honduras, Jamaica, Mexico, Egypt, Ghana, and elsewhere, contraceptive social marketing programs advertise their products on radio as well as in other media. Family planning broadcasts are having an impact. For example, they have increased inquiries to youth guidance centers in Latin America, lengthened contraceptive use in Honduras, increased clinic attendance in Nigeria, improved attitudes toward condoms in Colombia, and brought clients to private-sector services in Hong Kong and Egypt.

Achieving Good Quality

Producing persuasive family planning materials for radio requires good quality in both content and presentation. Creative imagination makes the communication interesting, entertaining, or attention-getting. The principles of good communication require that communicators learn from the audience what is meaningful and convincing. Mass media communication is a process consisting of initial research and analysis, design, message development, pre-testing, implementation, and evaluation. Audience research and constant feedback are essential throughout. Communication professionals often can help public health programs and family planning agencies to achieve good-quality content and presentation. Good quality need not be expensive. Family planning organizations can develop useful radio projects with big or small budgets.

Radio and Other Communication Channels

Radio is only one of many channels for family planning communication. Communication efforts that use multiple media reach the most people and best reinforce the message. When closely tied to service delivery, such multimedia efforts can increase contraceptive use. The role of radio, together with press, television, billboards, print materials, and personal communication, depends on goals, costs, access to broadcasting, and how well radio reaches intended audiences. But radio is always an attractive medium because almost everyone listens to radio; radio has an attention-getting immediacy that makes it convincing; and radio programming is flexible. If family planning communicators learn how to use radio better, radio can play a bigger role in promoting family planning, child spacing, and child survival.

End of Editors’ Summary.

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WHY RADIO?

On a Mexico City street youngsters hold transistor radios to their ears. In Kenya tribesmen keep radios on the ground near them while tending cattle. In rural Thailand primary school students in a one-room school study arithmetic by radio. In Manila taxicab, jeepney, and bus drivers charge through traffic with radios turned up full-blast. For most people in developing nations, radio is the primary link to the rest of the world. And what people hear on radio powerfully influences what they talk about, what they think, what they buy, and how they behave. Thus radio offers important opportunities for family planning and other social programs.

These opportunities come at a time when family planning programs increasingly recognize the importance of effective communication:

- to broaden and sustain people's interest in family planning;
- to reach new audiences, such as men and young people, who rarely come to health centers, or women who stay close to home;
- to tell people where they can find supplies and services;
- to meet the special needs of consumer-oriented programs such as social marketing and community-based distribution (CBD) of contraceptives;
- to counter harmful rumors and misinformation about contraceptive methods; and
- to offer alternatives to commercial mass media messages that glorify sexual irresponsibility.

For these reasons family planning professionals are considering radio—used in coordination with other channels of communication—with new enthusiasm.

Radio Reaches the Largest Audiences

There are an estimated 1,650 million radios in the world, or one radio for every four people (25). This figure is approximate, and the distribution of radios is very uneven, but it is clear that the reach of radio is broad. In Latin America, for example, there is one radio for every three people; in Asia and in sub-Saharan Africa, one for every 10 (25) (see Table 1, p. 1-856). Even in some of the poorest nations there are many radio stations broadcasting long hours in local languages, and they have many listeners. There are now radio receivers in most households, sometimes even in remote areas, and others often have access to community radios. For example, in 1982 over 50 percent of households in parts of rural Pakistan had radios (127), and in Egypt 84 percent of households have radios (25).

There are many reasons that radio reaches so many people. People like to listen to radio because:

1. Radio programming is often entertaining, intriguing, or informative.
2. Radio listening is convenient; you can listen to the radio while doing other things, and it provides pleasant background entertainment. Also, modern radios can easily be carried anywhere.
3. Inability to read is no barrier to radio listening.

At the same time, many people can listen to radio because receivers are inexpensive. While prices vary enormously, simple radios may sell for as little as $1.40 (US), as reported in the Philippines. Where import duties, taxes, and foreign exchange problems make radios costly, as in many African countries, there is a thriving trade in cheaper, smuggled radios (62). Many governments encourage radio ownership because they can reach the public easily, directly, and immediately by radio. In Ghana, for instance, the government sells, at below cost, radios that can be tuned only to government stations (114).

Other Advantages

In addition to its general appeal and broad coverage, radio has other specific advantages for family planning and other development communication:

- Radio is credible and influential. Hearing information via mass media bestows a legitimacy not always achieved in personal communication.
- Radio can reach more people more cheaply and more often than field workers or other mass media.
- With receivers so common, radio reaches places and social groups that have access to no other mass me-
Radio informs all those listeners equally.
- Radio can repeat messages often, which helps listeners remember them.
- Radio messages reach casual listeners—those who did not seek out these messages. People who listen for entertainment can hear information and educational messages intermixed with entertainment or presented in entertaining ways. Thus radio listeners often learn without intending to.
- Radio programming can be developed quickly to respond to immediate needs—to combat a new rumor, for example, or to announce availability of new family planning services.
- Radio programming is flexible. Many formats, long and short, are available for entertainment, information, and education (see box, p. J-858).
- Air time can sometimes be obtained free of charge. Public service announcements (PSAs) are often aired free (see box, p. J-876). News and feature programs cover important events without charge.
- Radio programs can draw audience participation by mail or telephone in some areas.
- High-quality radio programs, while not cheap to produce, are cheaper than films or television. One skilled radio professional with a good tape recorder can produce high-quality material for radio.
- Audio tapes for radio broadcast are cheap and can be easily duplicated, stored, retrieved, and distributed.
- A radio script can be adapted for use in different countries and so reach many more people than the initial audience.

Problems

While radio has many advantages, there also are problems:
- Access to radio broadcasting, as to all mass media, is in the hands of “gatekeepers”—government broadcast services, private or government radio stations, or various regulatory bodies—who sometimes restrict references to family planning on the radio (see box, p. J-872).
- Because radio is often present in the background, many listeners pay little attention to it.
- Radio receivers break down and are difficult to get repaired. Batteries are difficult and expensive to obtain in countries that lack battery factories or foreign exchange for imports. In some places economic difficulties have aggravated these problems. In fact, radio ownership may be declining in some countries (63, 127).
- For many, including some family planning managers, radio lacks the glamour of television. Thus some may want to use television even when radio would reach a larger audience or a specific audience more effectively.
- Radio is not well-suited for teaching manual or clinical techniques—although it can update or supplement previous instruction and can teach subjects that require little graphic presentation (see p. J-873).
- In contrast to print material, which can be saved and re-examined, radio cannot be used as a reference.
- Where there are many small radio stations, as in much of Latin America, it may be difficult to reach a large audience through any one station. In some urban areas television may be more efficient than radio for reaching large numbers of people. (At the same time, however, the existence of small radio stations makes it possible to transmit local information to highly specific audiences.)
- Where there are few stations, as in much of Africa, it may be difficult to schedule family planning messages at popular listening times unless the messages are well-produced, creative, and entertaining.
- In some mountainous countries, such as Bolivia, Nepal, and Peru, radio signals do not reach far. This problem is sometimes overcome by use of shortwave radio, which travels farther.
- While the cost per listener of producing and broadcasting radio programs is usually quite low, the absolute cost of good programs can be high. It is easy to underestimate these costs.

Radio and Other Communication Channels

Radio is most effective when used in conjunction with other channels of communication (97, 99). Several media are best used together to reinforce each other or to compensate for each other's shortcomings. Different media reach different audiences. The guiding rule is: Use the media that give best access to intended audiences. For example, radio is usually the most effective medium for
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Source: British Broadcasting Corporation (25), Frost & Sennitt (226), Mytton (127), UNESCO (198)

Note: Transmitter data are from most recent UNESCO estimates (1983) except for 1985 data on transmitters from Frost & Sennitt (226). "Governmental" transmitters include those owned and operated by the government as well as those that receive government support even though they are privately managed.

*aIncludes stations, transmitters, FM translators, and boosters, and relay stations used for domestic broadcasts to the general public.
*bIncludes stations, transmitters, FM translators, and boosters, and relay stations used for domestic broadcasts to the general public.
^Peninsular Malaysia only
&Central region only
±Montevideo only
*mostly urban
^Doha only
reaching rural areas, while television may be most suitable for reaching urban elites. Any communication project that wants to reach both audiences probably will use both media. Using two media to reinforce each other, health educators in Senegal chose a combination of radio and widely distributed flyers with color-coded pictograms to teach mothers how to mix oral rehydration solution. The flyers pictured the sequence of steps to follow. But mothers generally were unable to interpret the pictograms until a radio voice led them through the flyer, as if following a recipe (117) (see p. J-875).

Television is a powerful medium with growing influence, but its reach is still limited in most countries. In developing nations television often is available only in urban areas, since TV signals cannot travel as far as radio signals. More areas are gaining access to television, however, and the combination of visual images and sound make its messages convincing. Since wealthy people, including policy-makers and other influential people, are the first to have television sets, the medium is particularly attractive for reaching decision-makers. Television will become more important as new technologies, including communication satellites, microwave relays, and solar generators, expand its reach. Videotapes, a by-product of television, are already being brought to villages to be played in mobile “video-vans” or in community centers. For the near future, however, the relatively high cost of TV production, broadcasting, and receivers is the main impediment to rapid expansion.

Print media have one major advantage over both television and radio: copies can be kept for reference. Newspapers and magazines, like TV, reach decision-makers and other city dwellers. They seldom reach rural areas, however, and are of little use to those who cannot read. Print materials can communicate through illustrations, however. Picture booklets that serve as guides to the use of contraceptives or to breast-feeding are now used in some countries, sometimes in conjunction with radio (150, 151). Simple signs are important everywhere. Billboards tend to be concentrated in cities. Posters, although useful when they tell where to obtain family planning supplies and services, are most used inside health centers.

Films are very popular with the public. Also, they can teach workers skills, such as surgical procedures, that require visual demonstration. Films are expensive to make, however. Showing them requires a power supply, projector, projectionist, and screen, which can be difficult to provide in rural areas (24). Videotapes are being used more and more, where television monitors are available, because they are cheaper to produce and sometimes more convenient.

It has long been recognized that person-to-person communication is a powerful channel of communication, but views of how it works are changing. For years it was generally thought that people learned facts from the mass media but were moved to change their behavior only by people with whom they talked directly—friends, relatives, or community leaders (96). Now the persuasive power of the mass media—partly due just to the great and growing volume of exposure—is increasingly recognized (174). Persuasion is thought to result from complex processes that may involve either mass media or individuals or, usually, a combination of the two (167). For example, in a Honduran community-based family planning project, local distrib-

utors visit households, talk to families, and provide supplies. At the same time, local radio announcements about the program give the names of local distributors (89). While a personal contact may be the final, decisive factor in prompting a couple to use family planning, hearing about family planning—and about distributors and various methods—on radio or other mass media can legitimize family planning and add to the status and credibility of the community workers. Thus the recent trend has been to treat radio and other channels of communication as components of larger systems. These components are no longer perceived as competing but rather as complementary. Furthermore, communication efforts must always work in tandem with service delivery efforts. Both are necessary to a complete family planning program or any other health or development program.

FAMILY PLANNING ON RADIO IN ASIA

Radio is used to promote family planning in many different ways. Radio can help to make the idea of family planning acceptable to people who know little about it and need assurance that it is beneficial and socially approved. Radio can advertise brand-name contraceptives to couples who want to plan their families but need to know what and where to buy. Radio can tell listeners how important birth spacing is to protect the health of mother and children. Radio can tell people the names of community-based distributors of contraceptives in their villages.

There are about 3,400 radio stations in Asia (198), and most households have radio receivers (25). In Asia, with some of the oldest and largest national family planning programs and a broadcast industry that is largely government-operated, radio has been widely used for family planning. Much of this experience has not been well-documented, however. The governments and family planning associations that run communication programs are more interested in results than in research.

All India Radio sponsored a family planning lottery in Kerala State in 1985, open to women who were sterilized. Here a Kerala official presents the prize to the winner. (All India Radio)
A Variety of Formats for Radio on Family Planning

Formats are basic types of programs. Different formats suit different messages, program goals, and audiences. They also differ in requirements for studio equipment and trained personnel (240). Some of the most common formats are:

- **Spot announcements**, which last from 10 seconds to two minutes. They can motivate listeners or convey information in many forms: simple spoken announcements, short dramas, short stories that make a specific point, slogans, and jingles. Each spot should cover just one topic (87, 99)—for example, clinic hours, promotion of a brand-name contraceptive, or the health benefits of child spacing. An advantage of spots is that many short broadcasts in a given period almost always reach more people than one or two longer programs. Producing spots does not necessarily require highly sophisticated equipment or trained personnel, but script writing requires skill and creativity (110). Radio stations will sometimes broadcast spots free as public service announcements (PSAs).

- **News broadcasts**, which range from a single announcer reading wire service reports to an elaborate presentation with live and recorded reports from journalists in the field, interviews with newsmakers, and even commentaries by celebrities. News broadcasters often have high credibility with listeners (20, 87, 99). Obtaining radio news coverage for family planning requires making a news-worthy story easily accessible to broadcasters (see box, p. J-876).

- **Interviews** with doctors and other health experts or with family planning users and potential users. Family planning professionals can organize and record their own interview programs or can be interviewed on programs produced by broadcasters. Interview programs that take questions from a studio audience or, via telephone or letters, from the radio audience are often popular. Interviews can be produced with simple, inexpensive equipment (87).

- **Speeches, lectures, or talks**, delivered by a single speaker—a person in a high position, an educator, or other expert (46). One person reading is not always enough to hold the interest of open-broadcast listeners. Lectures are most suitable for educational radio directed at highly motivated listeners.

- **Panel discussions, round tables, and group discussions**. Several people discuss a topic with the guidance of a moderator or host. The ideal number of participants is three, plus the moderator (87). Discussions can be produced with simple, inexpensive equipment.

- **Drama**, in which fictional events are depicted by actors, usually with sound effects. Serial dramas, or soap operas, are stories that continue from one episode to the next, broadcast on a regular schedule (87). Radio soap operas are popular in many countries and have been used in several countries to promote family planning. They are especially useful for convincingly portraying the personal importance of family planning and for helping listeners to think through family planning decisions. Also, dramas often serve as vehicles for spot announcements (99). Producing dramas usually requires skilled personnel and a sound effects library, but facilities and equipment need not be extensive.

- **Music**. Songs with family planning themes or promoting sexual responsibility can become very popular when promoted on radio (see pp. J-863 and J-870–871). Obtaining the maximum impact from songs requires making and distributing records or tapes—a difficult and expensive process. Songs can be used on a more limited scale, however. For example, in Kiribati, an amateur family planning song contest rewarded winners with a chance to perform their songs on the radio (191).

- **The magazine**, a radio variety program that combines several formats into a single show. These might include short dramas, interviews, news items, commentary, musical selections, and spot announcements. Magazines vary in length from 10 to 45 minutes (87). They may require skilled coordination and fairly elaborate studio equipment.

Other formats, such as debates, quiz shows, documentaries, roving reporter shows, and telephone call-in programs, also can have a place in family planning radio. Indeed, any format can be used effectively for family planning messages when broadcasts are produced by skilled and creative people.

India, South Korea, the Philippines, and Taiwan were among the first to establish strong national population policies. Like other Asian countries, these countries have government-owned radio stations, although South Korea and the Philippines also have privately owned stations. The combination of high policy priority and ease of access to radio led to several experiments in use of radio to promote family planning. Some of these early projects included:

- In the Songdong Gu area of Seoul, South Korea, starting in 1964 several channels of communication, including radio and home visits, were used to tell some 45,000 young women about contraceptive services and where they were available. In a survey of 3,045 women, radio proved to be the single most important source of information, ahead of neighbors, home visits, and group meetings. It also was most popular with the women (136).

- In Taiwan's Kaohsiung City in 1967 a multimedia campaign aimed at increasing use of IUDs and oral contraceptives (30). In a postcampaign survey women most often cited radio as their source of information about family planning. Also, radio got the information to the women at a lower cost per listener than films or other media (194).

- In the Hyderabad District of Pakistan in 1967, 30- and 60-second family planning radio spots were broadcast five times a day. Some 64 percent of women using POPULATION REPORTS
family planning clinics reported hearing family planning messages on the radio (83).

- In Gujarat state, India, in the mid-1960s, family planning radio programs reached half of the men and women who listened to radio—and each of them, in turn, passed on the family planning message to an average of six other people (140).

- The Family Planning Organization of the Philippines and the Rural Broadcasters Council broadcast a daily 15-minute family planning “school on the air” to farmers for three months in the early 1970s. The “school” sessions consisted of talks by doctors and other experts. Before the “school” started, a month of promotional spots broadcast three to five times daily invited listeners to enroll (218).

Radio spots and announcements are the most widely used format because they are easily produced and reach the largest number of people. Contraceptive social marketing programs have broadcast radio spots and other messages to advertise specific products and brand names. Serial dramas, or soap operas, although more difficult to produce, have been popular in several Asian countries.

Social Marketing in Asia

Contraceptive social marketing programs sell brand-name contraceptives at subsidized prices through existing commercial outlets (see Population Reports, Contraceptive Social Marketing: Lessons from Experience, 1-30, July-August 1983). These programs use commercial marketing techniques, including advertising, to promote their products. There are now 20 major social marketing projects underway, with 6 more in the planning stages. For most of these programs, radio is an important promotional medium. In India the Nirodh condom project—the first contraceptive social marketing program—has used radio since its start in 1967. Major social marketing programs in Asia that use radio extensively now are in Bangladesh, Indonesia, and Nepal.

Since 1975 the Bangladesh Social Marketing Project has used commercial advertising and distribution channels to sell subsidized condoms, oral contraceptives, and foaming tablets at low prices. A semi-autonomous organization operating under an agreement with the Bangladesh government, the Bangladesh Social Marketing Project receives technical assistance from Population Services International and support from the United States Agency for International Development (US AID). Half of the advertising budget goes to radio, with the other half divided among newspapers, cinema, outdoor, television, and point-of-purchase advertising (105).

Before 1983 virtually all advertising for the social marketing project focused on products. In 1983 motivational advertising was added to break down resistance to family planning among the 81 percent of couples in Bangladesh who were not using contraception. Manoff International, an advertising agency that specializes in social marketing, held focus-group discussions and interviewed people to learn why they were not using contraceptives. Major resistance points turned out to be fear of harmful side effects, lack of knowledge of contraceptive options, religious objections, and failure of husbands and wives to communicate. Male dominance of family life—including a near monopoly by men on listening to the radio and shopping—made it necessary to aim advertising mainly at men (110).

Radio and television spots were designed on the basis of these observations. They dramatized husband-and-wife discussions about contraception in an effort to legitimize such discussions. Attacks on other points of resistance were woven in (105, 110). To prevent the advertising from growing stale, these spots have been replaced by new ones with new themes (105). Besides spots, the Social Marketing Project produces a radio soap opera, the theme of which is the benefits of family life of practicing family planning. The 15-minute program is broadcast twice weekly (105).

In a 1983 survey 67 percent of respondents said that they had heard at least one Social Marketing Project radio program. Some 83 percent had heard about family planning from radio—more than from television, radio’s nearest competitor, at 28 percent, or newspapers, at 12 percent. Almost all respondents thought that the information on the programs was useful. From 80 to 100 percent of respondents correctly understood the messages of the motivational advertising. Urban residents more often understood the messages correctly than semi-urban or rural residents (121).

In Indonesia the National Family Planning Coordinating Board (BKKBN), with technical assistance from Social Marketing for Change (SOMARC), recently launched social marketing sales of Dualima condoms in the cities of Surabaya, Bandung, and Medan. Advertising is by radio, newspapers, magazines, cinema, television, mail, billboards, posters, and stickers. According to a survey by Survey Research Indonesia, radio and newspapers tied as the largest contributors to product awareness. Consequently, a larger share of the project’s advertising budget was devoted to radio in a new phase of the project that began in Jakarta in October 1986. Radio is inexpensive in Indonesia. Thus the shift will increase cost-effectiveness (170, 188). When SOMARC was preparing to launch the campaign in the first three cities, a local popular music group recorded a song about condoms that became popular. Although the music group had no connection with the project, the song boosted the campaign (40).

Soap Opera in Indonesia

Grains of Sand in the Sea is a popular Indonesian radio serial drama that promotes family planning. The show...
Strategies in the Use of Radio

Radio can be used in various ways to support social and economic development. These are referred to as strategies. Any of these strategies—or a combination of them—can be used in family planning and other radio programming for development. Ideally, they function as part of a broad-based communication effort that uses many communication channels, all reinforcing each other. These communication efforts, in turn, must be coordinated with service delivery. Radio strategies fall into three categories:

- open broadcasts,
- listening groups, and
- campaigns (38, 112, 189).

Open broadcasts are for unorganized audiences—whenever tunes in—and include almost all radio programs including family planning broadcasts. They can use many different formats (see box, p. 185). The cost per listener is lower than with other strategies because no field staff is required. Open broadcasts usually reach the largest audiences, which may cut across age, sex, and other lines. The fact that they can attract so many casual listeners of many different types is a major advantage.

Open broadcasts have their limitations, however. The most popular and effective formats—serial dramas and music, for instance—require more sophisticated production skills and equipment than other formats. Also, because the audience is dispersed and unorganized, it is difficult to reinforce open broadcasts with face-to-face contact (112).

Listening groups are organized to listen to broadcasts prepared specifically for them—for example, children or adults gathered for formal instruction in schools or other community centers, rural opinion leaders hearing “radio farm forums,” or adults gathered informally under the guidance of volunteers to learn literacy or other basic subjects. Listening groups provide opportunities for discussion and face-to-face reinforcement of new information or skills. This helps people learn more easily. The groups also can provide feedback to the originators of the radio programs.

The main disadvantage of listening groups is that they require extensive logistic support—a place to meet, trained leaders, often print materials, and, when there are many listening groups, even large administrative organizations. Most listening groups have been fairly short-lived. It is difficult to keep people attending voluntarily over long periods, a problem that worsens as more people obtain radios and stay home to listen to them. Listening group broadcasts are by definition highly specialized and attract fewer listeners than open broadcasts (79).

Campaigns on radio have a specific, often time-limited objective, such as promoting designated vaccination days. They commonly use public service spot announcements or paid advertisements, which can be broadcast between regular radio programs. This publicity is only one part of a much larger effort that combines communication through many channels and intensive service delivery efforts that mobilize both workers and political support (119). Such campaigns can have impressive short-term results, but some experts worry that they may divert attention and resources from building ongoing service delivery programs (206, 207). This problem can be minimized when campaigns function as phases in longer-term programs, using those programs as a base for periodic intensive efforts.
radio producers in rural villages. Radios are distributed to women in the villages, and listening groups are organized (92).

- The Family Planning Association of Hong Kong uses spots and other formats to broadcast family planning messages on radio (77). Radio programs were major components in multichannel campaigns in the early 1980s to encourage male responsibility in family planning (93) (see Population Reports, Vasectomy—Safe and Simple, D-4, November-December 1983).

- In Bangladesh the government's Radio Bangladesh produces Sukhi Sangsar (Happy Family) and broadcasts the show nationwide six days a week. The programs consist of talks, interviews, dramas, music, documentaries, replies to listeners' letters, and other formats—all related to health and family planning (69). In a 1983 survey 86 percent of respondents said that they listened to family planning shows on the radio. About half the respondents recalled the name Sukhi Sangsar (129).

- The Philippine Commission on Population has used radio as the major communication support for its family planning programs. Among the formats are soap operas, forums, variety shows, spots, jingles, and "minidramas" (155).

- The Family Planning Association of Sri Lanka recently sponsored a weekly family planning radio program in the Sinhala language. Each 15-minute show consisted of a brief segment dramatizing a particular family planning problem followed by a talk by the medical director of the association (3). The Sri Lanka Association for Voluntary Surgical Contraception also broadcasts a radio program, in Sinhala and Tamil (77).

- The Family Planning Association of Pakistan has used radio spots and dramas to promote family planning (71). Pakistan plans a new contraceptive social marketing project and a mass media communication project, which intend to use radio advertising and other mass media publicity (170).

- Radio Nepal in recent years has had a weekly hour-long family planning radio program (98).

- In Thailand radio is used so extensively to promote family planning that 90 percent of respondents in a 1984 survey reported having heard such broadcasts (77). A 30-minute radio program is broadcast weekly in every region of the country, in local dialects, by the Planned Parenthood Association of Thailand. A 3-to-5-minute radio program is broadcast daily, also in all regions, to increase knowledge about family planning and related topics, including sexually transmitted diseases and family relationships (235).

- In China radio is widely used to promote family planning. For example, a "family planning publicity month" in 1983 used a variety of communication channels, including radio, to explain the relationship between population growth and consumption of natural resources and food. Radio and television programs were broadcast some six million times (179).

**FAMILY PLANNING ON RADIO IN LATIN AMERICA AND THE CARIBBEAN**

Radio has been enlisted in a number of different ways to promote family planning in Latin America and the Caribbean. Some programs have been long-lived and attracted loyal followings. Others have been shorter-term projects, testing new approaches. Some of these, too, have won large audiences.

The Latin American and Caribbean region has higher concentrations of radio stations and receivers than any other developing region. There are over 5,000 radio stations in the region—about 14 per million people. By comparison, there are about 1.8 stations per million in sub-Saharan Africa and one per million in Asia (198). Similarly, Latin America has about 340,000 radio receivers per million people, and the Caribbean, about 600,000 per million, compared with about 125,000 to 150,000 per million in sub-Saharan Africa and in Asia (25).

Latin American radio stations are a mixture of large and small privately owned stations, government stations, and religious stations. The typical station is a small commercial

**Honduras:**

**Your Local Distributor**

In 1985 radio spots for the Asociación Hondureña de Planificación de Familia (ASHONPLAFA) promoted local community-based distributors by name. Spots such as this were broadcast on low-power stations that reach just the areas within easy reach of the distributor's post.

(Jingle in background.)

**Announcer:** Attention, inhabitants of the community of San Jeronimo in the province of Copan: The family planning site closest to your house is that of Mrs. Mariá Rodríguez in the El Centro district.

Remember, you can obtain the best medical supplies at the lowest prices for planning your family. Look for them today at the home of Mrs. Mariá Rodriguez, in the El Centro district of San Jeronimo in Copan. Be convinced and don't pay more, because today family planning is everyone's right.

**The typical radio station in Latin America is a small, low-power operation that reaches a small area. Such stations can broadcast local messages, such as the names of CBD distributors or the addresses of family planning clinics. (JHU/PCS)**
facility with few production resources, limited programming, and a small, local audience (4, 68).

This heterogeneous broadcast industry offers diverse opportunities to promote family planning. Just as volunteer associations have led in developing family planning programs in Latin America, privately owned radio stations may be able to broadcast messages that government-owned stations would be reluctant to air. Also, small stations can provide specific information about local family planning programs, such as names of local distributors and clinic locations and hours of operation.

The Caribbean, too, has a mix of government and privately owned stations. Government stations started first, when these nations were colonies, but many nations began permitting private stations after independence in the 1960s. Government stations have a mandate to promote social and economic development. Many now accept paid commercials, offering private organizations the opportunity to buy air time for their messages. Private stations in most of these countries are required to devote some air time to social and development purposes (108).

**Diálogo**

A good example of consistent, planned, long-term use of radio to encourage family planning is **Diálogo** in Costa Rica. A nationwide 10-minute radio program, **Diálogo** is produced by the Centro de Orientación Familiar (COF), a private organization that promotes responsible parenthood through sex education. Five national or regional radio stations now carry the show as often as five times a week each.

**Diálogo** offers “integrated sexual education,” including messages about family planning, sexuality, parent-child relations, and divorce. It began in 1970 as an attempt to break down taboos against discussion of sexual issues. Over the years **Diálogo** has used many formats: dialogues between a professor and a laywoman, dialogues between two women, dramatized life stories of women, and others (89). A key feature of **Diálogo** is that it answers letters from listeners—on the air, in a newspaper column, and in personal replies by mail. Letters received sometimes suggest the themes for radio programs (164, 189).

The program was intended at first to reach lower-class women, and it has succeeded. A 1978 survey showed that **Diálogo** reached poor people—female and male, urban and rural—to an extent unusual in development communication efforts. The poor made up 80 percent of the audience, just as they made up 80 percent of the population. Many listeners were men. Indeed, **Diálogo** reaches a large part of Costa Rican society. Some 36 percent of the nation’s adults were regular listeners in 1978 (164). An evaluation by Stanford University at that time also showed that regular **Diálogo** listeners at all social levels had better knowledge of and attitudes toward family planning than nonlisteners and also were more likely to practice family planning (164).

In 1984 and 1985, with the help of Population Communication Services at the Johns Hopkins University, **Diálogo** underwent a 15-month review and upgrading of content and technical quality. Family planning and the role of women in development were emphasized. Listeners were increasingly involved in various ways. For instance, women and women’s groups were asked to monitor the program and give their opinions. Letters from listeners increased from 30 to 50 a week. The number of national and regional stations broadcasting **Diálogo** increased from three to five (29).

To help support the show, COF sells booklets on such subjects as the condom, female sexuality, Natural Family Planning, and sharing household tasks. COF also has sold tape cassettes of radio shows. COF depends partly on donors, including local groups and the United States Agency for International Development (US AID) (29, 148).

According to the Stanford researchers, one reason for the popularity and effectiveness of **Diálogo** is that it helps listeners to consider their own sexuality in relation to other issues, such as child-rearing, divorce, and unemployment. Another is its response to listeners’ letters. As the researchers noted, this has created two-way communication unusual among family planning radio projects (164).

Evaluation in 1985 showed continuing impact: listeners proved to be much more knowledgeable about family planning than nonlisteners (89). In 1986 the program won a national broadcasting prize.

**Songs and Soap Opera in Jamaica**

In Jamaica radio is a primary medium in two family planning communication projects, one conducted by the government’s National Family Planning Board and the other by the Jamaica Family Planning Association. The government project, developed by the Jamaica office of the interna-
A well-known Jamaican scriptwriter, Elaine Perkins, writes the scripts. Currently, USAID supports The radio soap opera time in Jamaica—on Mondays, Wednesdays, and Fridays. 1982, when the government project began, and 1984, visits were still being played by radio disc jockeys in late 1985. The 15-minute show is aired at 9:15 a.m.—prime time in Jamaica—on Mondays, Wednesdays, and Fridays. A well-known Jamaican scriptwriter, Elaine Perkins, writes the scripts. Currently, USAID supports Naseberry Street, but a private sponsor is being sought.

The government project has been conducted in two phases. The first phase (1982–84) used the slogan “Two is better than too many.” The slogan was repeated in radio advertisements and other ads. These ads featured two characters— Judy Smith, who was poor because she had four children to raise, and Bev Brown, who was portrayed as better off because she had only two children. The two characters are now well-known to Jamaicans (169).

The second phase (1985–86) featured a pregnant schoolgirl facing a bleak future. The slogans of this phase were “Before you be a mother, you got to be a woman” and “Before you be a father, be a man.” The first slogan is the chorus of a song, sung to a reggae beat, that was the centerpiece of this phase of the campaign (130) (see Population Reports, Youth in the 1980s: Social and Health Concerns, M-9, November-December 1985). The song was written especially for the National Family Planning Board. It was introduced in 1985 by a well-known disc jockey and performed by Gem Myers and the Fab Five, a popular group in Jamaica. It was still being played by radio disc jockeys in late 1986.

The theme is that young girls who are sexually active risk getting pregnant and facing serious problems:

I had to drop out of school.
Now I can’t get a job.
I have no education, and I have no man.
So, young girls, get wise, have fun while you can.
Children can wait until you become a woman.

Besides the song, this phase of the campaign included spots on radio and television with the same theme, a young girl alone and friendless after she became pregnant (169). The National Family Planning Board obtained free time or concessionary rates for its broadcasts from both the government’s Jamaica Broadcasting Corporation and the private Radio Jamaica Limited (160).

With nearly one radio for every two Jamaicans (198), messages reach many people. A 1984 evaluation found that 94 percent of respondents were familiar with the government project’s 2-child message. In a 1986 evaluation about 90 percent recalled the early pregnancy message. Rates of recall were high at every socioeconomic level. Between 1982, when the government project began, and 1984, visits to Ministry of Health family planning clinics rose from under 80,000 a year to more than 130,000 a year (27, 169).

Announcer: Ladies, planning your family does have advantages. Think about it!
chose him as their favorite character may not approve of

The National Family Planning Board has recently begun a

Street center of male respondents chose Scattershot as their favor­

te character they most disliked. (Of course, the men who

ershot as their favorite (185).

The National Family Planning Board has recently begun a
call-in program, which airs immediately after Naseberry

Street on Wednesday mornings. It is supported in part by
a private business group. The program answers listeners’

questions about family planning (27, 67). Thus the private
Family Planning Association and the government work to­
together to maximize the impact of their radio shows.

Radio Spots in Colombia

Two special family planning radio campaigns have been
carried out in Colombia—one over a decade ago, promot­ing
family planning services, and the other recently, pro­
moting condoms. Both were carefully studied to measure
their impact. Pro-Bienestar de la Familia Colombiana
(PROFAMILIA), the private family planning association,
sponsored both efforts.

The first consisted of campaigns for several months each
year in 1969–72 and 1974. The campaigns involved inten­sive
broadcasting of radio spots designed to increase the
knowledge and legitimacy of family planning and to bring
new clients to PROFAMILIA clinics (11, 12). A Bogota adver­tis­ing
agency donated management and production services.
The 15- and 30-second spot announcements were
broadcast several times during the day and early evening
in 14 cities and on many radio stations. The spots pointed
out the benefits of having only the number of children that
a family could reasonably care for. Each ended with the
name and address of a PROFAMILIA clinic. Messages were
aimed mainly at women. The rationale was that many
women did not want more children but did not know
where to find family planning services. Specific contracep­tive
methods were not mentioned in the broadcasts. There
was no pre-testing of messages (12).

By presenting simple information on clinic hours and loca­tions, the radio spots brought many new clients to family
planning clinics. It is estimated that 6,050 women came to
the clinics in response to the radio announcements of the
1971 campaign, for instance. This is about 18 percent more
than the number that came in response to all other promo­tions. In general, the campaigns were more effective in
attracting new clients in large cities than in small and
medium-sized towns (12).

The campaigns also may have increased the legitimacy of
family planning in Colombia: People became more willing
to discuss family planning openly. According to a 1973
survey by Interamerican Research, 45 percent of 3,594
randomly selected men and women had first heard about
family planning on the radio, and 24 percent could recall
some part of the PROFAMILIA radio messages. A new
government population policy became possible perhaps in
part because of greater openness about family planning
following the radio campaigns (11, 12, 186).

Legitimizing Condoms in Colombia

In 1984 and 1985 a generic condom promotion campaign
in Colombia used radio to improve the image of condoms,
which were associated in many minds with prostitution.
The campaign was conducted in Cali, Colombia’s third
largest city, and sponsored by PROFAMILIA with the help of
the Futures Group and Johns Hopkins University Popu­
lation Communication Services. Radio advertising was de­
volved and produced by Toro Publicidad, a Colombian
advertising agency, which also conducted research before
and after the campaign. Seven radio stations aired the
spots 10 times a day from Monday through Friday for five
months. Five spots were used, all of them aimed at men. In
all, they were broadcast 3,300 times (152).

Of the five spots, the one best remembered portrayed a
scene in a drugstore (208). The male druggist and a male
customer discuss condoms in the presence of a female
clerk. She hands the druggist a box of condoms for the
customer after the customer says, “I came to buy some
condoms. What you achieve in life must be protected.
That’s why I’m careful.”

After the customer leaves, the clerk asks the druggist:
“That’s a man of character, isn’t that right, Victor?”

“Yes, Miss,” he replies.

“It’s true, to love with responsibility is also a man’s con­
cern,” says an announcer. Then he ends the spot with the
announcement, “This is a message from PROFAMILIA.”
No condom brand name was mentioned in the spots.

The campaign appeared to improve the image of con­
doms, according to panel surveys:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Before Campaign</th>
<th>After Campaign</th>
</tr>
</thead>
<tbody>
<tr>
<td>Using condoms is responsible</td>
<td>86</td>
<td>88</td>
</tr>
<tr>
<td>Men have a responsibility for family</td>
<td>9</td>
<td>19</td>
</tr>
<tr>
<td>planning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Use condom currently</td>
<td>34</td>
<td>39</td>
</tr>
<tr>
<td>Condom has a bad image</td>
<td>78</td>
<td>45</td>
</tr>
<tr>
<td>Dissatisfied using condom</td>
<td>63</td>
<td>42</td>
</tr>
<tr>
<td>Embarrassed to use condom</td>
<td>53</td>
<td>31</td>
</tr>
<tr>
<td>Shouldn’t bring condom home to use with permanent partner</td>
<td>71</td>
<td>52</td>
</tr>
<tr>
<td>Condom is unpleasant</td>
<td>72</td>
<td>48</td>
</tr>
</tbody>
</table>

Source: Population Communication Services (152), De Buchelli (43), Worstell & Lucaire (208)

The campaign also broke new ground in the policy arena.
For two weeks early in the campaign, the Ministry of In­
formation prohibited the advertisements because officials
thought that they would offend the public. But the Minis­
try reversed itself and approved the ad when PROFAMILIA
presented the results of precampaign research showing
that the word “condom” and advertising for condoms did
not offend most people (152). A further indication that the
ads were welcome was a column in Colombia’s largest
newspaper that applauded the campaign (236).

The campaign could not demonstrate increased sales of
PROFAMILIA brand condoms, however. Perhaps this was
because, as the campaign began, large supplies of contra­
band condoms arrived in the country, and other condom
manufacturers began to sell their products in Cali (42, 208).
These events suggest increased demand for condoms,
which may have come in response to the radio campaign.
Other Radio Projects

Radio has supported family planning in various other ways in Latin America and the Caribbean:

- Songs that encourage young people to put off starting sexual activity have won wide popularity on radio in a number of Latin American countries (see pp. J-870–871).
- Most contraceptive social marketing programs in Latin America and the Caribbean use radio in conjunction with other media to advertise oral contraceptives, condoms, and other contraceptives. These include programs in El Salvador, Guatemala, Honduras, Jamaica, Mexico, Peru, and in Barbados, St. Vincent, and St. Lucia (181).
- In Brazil the Sociedade Civil Bem-Estar Familiar No Brasil (BEMFAM) in 1986 started a weekly family planning radio program in the state of Paraíba, assisted by Family Planning International Assistance (FPIA). Since 1976 BEMFAM has produced family planning radio programs in several other states, including Rio de Janeiro, Piauí, Rio Grande do Norte, Pernambuco, and Alagoas. The 20-minute magazine programs include interviews, dramas, testimonials, and regional songs related to family planning. Some of the new Paraíba programs will be reproductions of programs used elsewhere (55).
- In Porto Alegre, Brazil, the Associação Brasileira Proteção Familiar (PROFAM) started a year-long project in August 1986 that will provide family planning information and supplies door to door to about 4,260 clients and in a clinic to about 2,700 clients. The project is promoted through twice-daily announcements on Radio Farroupilha, a “talk station” in Porto Alegre. Once a week the station’s most popular announcer reads material on a particular family planning theme that has been prepared for him by the director of the PROFAM project. Two days later the project director and the announcer discuss the theme on the air. The radio station also operates a call-in service that can refer callers for family planning services. The project is assisted by FPIA (219).
- In Honduras radio spots were used to promote community-based distribution of contraceptives, including mention of distributors by name. They appear to have helped sustain contraceptive use, but formal evaluation is not yet complete (90).
- In Chiclayo, Peru, radio spots on family planning and clinic services are broadcast by local radio stations both as free public service announcements and as paid advertisements. The spots are sponsored by the Asociación Marcelino as part of a project to provide community-based services in Chiclayo and nearby cooperatives and villages as well as to provide clinic services. The project is assisted by FPIA (220).
- The Ministry of Health in Mexico, the Futures Group, and CONASUPO, a government-owned chain of grocery stores, launched a new brand of condoms in 1986. The new brand, Protektor, is sold in CONASUPO stores throughout Mexico. Initial promotion included three weeks of radio advertising beginning June 9, 1986, in conjunction with the World Cup soccer matches in Mexico. In radio advertisements consumers were quizzed about romantic attachments of World Cup players. This was tied to Protektor by identifying the condom brand as “the contraceptive . . . for champions” (239).
- In the Dominican Republic in the 1970s the Dominican Family Planning Association set up a Radio School for Family Education, which broadcast five days a week. The purpose was to reach rural residents who lacked other sources of family planning information. Radio programs covered a variety of family life topics including family planning. The project also involved promotores populares, who supervised contraceptive distribution in the villages and went from house to house encouraging women to visit family planning clinics. Posters, leaflets, and calendars also were used (217).

FAMILY PLANNING ON RADIO IN AFRICA

Government-supported family planning programs are just beginning in many sub-Saharan countries. Therefore use of the government-owned media, such as radio or television, to promote family planning also is just beginning. Zimbabwe, with a strong national family planning program and the highest levels of contraceptive use in Africa (104), is also the most advanced in use of radio to discuss family planning.

In all Africa there are no more than 1,000 radio stations, many of them low-powered and designed only to relay programs from larger stations (68, 198). Most stations are government-owned or controlled. The entire continent has only a handful of privately operated commercial or religious stations (126).

Africa also has relatively few radio receivers. The continent has only 4 percent of the world’s radio receivers but 11 percent of its population (126). The number of receivers is increasing fast, however. A 1976 estimate for all of Africa put the number at 31 million (197). An estimate for 1984—only eight years later—for sub-Saharan Africa alone was 50 million (25, 126). These estimates err on the low side because they are based on radios for which government license fees have been paid. They do not count smuggled radios.

Most African broadcast systems have a mandate to promote social, economic, and educational development, and radio is often used for education. Cameroon, Kenya, Mauritius, Nigeria, Senegal, Tanzania, and others have used radio for various instructional purposes. Radio in Africa tends to give great prominence to the speeches of national leaders and to political messages. African radio stations also often broadcast materials in tribal languages.
such as traditional music and stories and advice from respected elders (126).

Often Africa's centralized radio stations do not reach rural majorities. Weak transmitters and rugged terrain combine to make it difficult to serve remote areas (122). Despite the difficulties, radio is Africa's most pervasive mass medium. Thus its potential for promoting family planning is great.

## A Variety of Formats in Zimbabwe

Zimbabwe uses radio extensively to promote family planning. The Zimbabwe National Family Planning Council (ZNFPC), a quasi-governmental organization under the Ministry of Health, produces radio shows as part of a multimedia effort in which radio plays the prime role. One of ZNFPC's original purposes was to change traditional values that favor high fertility. Another initial goal was to think, for instance, that, if their wives use oral contraceptives, they may be unfaithful—especially if they continue taking pills when husbands are away from home (84).

Radio is Zimbabwe's most important mass medium because many people own radios. Moreover, radio is important for reaching nonliterate people. Zimbabwe Broadcasting Corporation (ZBC), a unit of the Ministry of Information, broadcasts on four channels, all of which include family planning information. Broadcasts are in a variety of languages. The Zimbabwe Reproductive Health Survey in 1984 showed that 56 percent of ever-in-union Zimbabwean women had heard radio programs that referred to family planning (210).

Radio Two, the general purpose channel, broadcasts two 15-minute family planning programs weekly in the Shona and Ndebele languages. ZNFPC plans the programs, produces them with ZBC help, and pays ZBC for air time. Formats are primarily interviews and discussions. ZNFPC staff members, including provincial managers, organize panels for programs, which sometimes are produced in the provinces. Elected officials often appear on programs because ZNFPC thinks they will be trusted when they say that family planning is not an effort to limit the African population. Clinic staff often explain contraceptive methods. Letters from readers are encouraged and often are answered on the air. They also are helpful in identifying audience needs (84).

ZNFPC has produced four family planning songs in both the Ndebele and Shona languages. Two of them stress male responsibility, a major new emphasis. The songs are played on the interview and panel shows. A soap opera, also with male responsibility as a theme, is being produced and pilot tested.

Radio Three, the English-language channel for young people, broadcasts a ZNFPC program, "Tomorrow's People," mainly for youth still in school. Many topics are covered, including schoolgirl pregnancies, male responsibility, and sexually transmitted diseases. News programs and documentaries on Radio Two often cover ZNFPC activities. Radio Four, the educational channel, broadcasts two vernacular programs for ZNFPC. Radio Four produces live programs in villages using mobile broadcast units. ZNFPC has participated in one such program and has been asked to participate in future ones. ZNFPC officials have been interviewed from time to time on the English-language Radio One (84).

### URTNA

The Union of National Radio and Television Organizations of Africa (in French, Union des Radiodiffusions et Télévisions Nationales d'Afrique—URTNA) is beginning to encourage and help African broadcasters develop more and better family planning and health-related broadcast programs.

In a 1984 survey of URTNA member organizations, 12 of 16 respondents said that they were ready to start family planning programs. Most have regular radio programs that sometimes mention family planning along with a broader range of topics including, for example, maternal and child health and breast-feeding. Two countries—Tunisia and Zimbabwe—already have regularly scheduled family planning radio programs. All countries responding were interested in meeting with health officials to learn more about family health and birth spacing. None reported opposition in any country to broadcasting spots or programs on birth spacing. Interviews are the most common format for health and family planning programs by the URTNA members, mainly because they cost so little to produce. According to the survey, however, music and dramas are most popular with audiences (138).

URTNA has sponsored two workshops, one in 1984 for Anglophone Africa in Nairobi, Kenya, and one in 1985 for...
Professional broadcasters record radio programs for the series Your Healthy Family, supported by Voice of America. Scripts were written with the help of African doctors and cover such subjects as family planning, prenatal care, and infant care. (VOA)

Francophone Africa in Dakar, Senegal. Johns Hopkins University Population Communication Services helped organize the workshops. They brought together high-level African broadcasters and family planning experts to develop family planning material for radio and television and to arrange for sharing of radio and television tapes. URTNA makes small grants to radio and TV producers and broadcasters to produce new family planning materials. It also publishes a bulletin for broadcasters in French and English. Included in the bulletin are scripts for family planning radio spots, short news items, tales, and short dramas (138, 147). URTNA also operates a Program Exchange Center in Nairobi (see box, p. J-881).

Other Radio Projects

A number of other radio projects dealing with family planning are underway or planned in Africa:

- In Zambia the United Nations Economic, Social, and Cultural Organization (UNESCO) and the United Nations Fund for Population Activities (UNFPA) are helping to train radio personnel in population communication. Also, weekly radio dramas on family planning are broadcast by the Makeni Ecumenical Center in Zambia (56).

- In Lesotho the Planned Parenthood Association and the Ministry of Information and Broadcasting have begun twice-weekly development broadcasts that sometimes cover family planning (81).

- In Mauritius the Family Planning Association, assisted by the International Planned Parenthood Federation (IPPF) and UNESCO, broadcasts 20-minute weekly programs in two local languages, Creole and Bhojpuri (134). The association also promotes family planning on the island of Rodrigues, a dependency of Mauritius, through a biweekly radio program. This program is assisted by FPIA (57).

- In Nigeria a contraceptive social marketing project, managed by Sterling Products Ltd. with contraceptives provided through FPIA, advertises condoms and oral contraceptives on radio and television and in newspapers. In another project, this one assisted by Johns Hopkins University Population Communication Services, radio spots promoting family planning in Nigeria's Kwara and Anambra states appear to have brought many new clients to family planning clinics (162, 232).

In Ogun state “talking drums” advertise contraceptives on radio and television. The drum language is widely understood in the area. The drum messages are followed by jingles advertising the same contraceptives. Both tell listeners that Gold Circle condoms and Confident foaming tablets are reliable contraceptives. The “talking drum” messages are part of a project in which traditional market women sell contraceptives along with more conventional wares such as soap and cosmetics. The project is funded by the Population Crisis Committee and managed by Population Services International (105).

- Working as a volunteer, Babatunde Roland May, a journalist in Sierra Leone, prepared radio broadcast materials for the Planned Parenthood Association of Sierra Leone. They were broadcast in 1983 as part of his Sunday magazine program for youth. They included interviews dealing with adolescent sexuality as well as shorter pieces. One such piece warned parents of the dangers of not communicating about sex with adolescent children. Another was a 60-second dramatization of a scene between a pregnant adolescent girl and a boy who denies responsibility for the pregnancy. The scene ends with the girl asking, “What am I going to do now?” Informal surveys indicated that young people welcomed information on contraception presented in the programs but that older people worried that the information could lead to promiscuity (233).

- A new contraceptive social marketing project in Ghana, assisted by the Futures Group, began sales in June 1986. Radio advertising is being used (114).

- The Family Life Association of Swaziland produces weekly radio broadcasts on family life education (58).

- In Burkina Faso family planning slogans, speeches, and songs were broadcast on radio in an intensive 7-day family planning campaign in September 1986. The multi-channel campaign also involved television, newspapers, banners, and other media (94). The Burkinabé Midwives Association plans radio spots on family planning (54).

- The government-owned Voice of Kenya plans a series of family planning programs in various formats and is especially interested in serial dramas. Also in Kenya the National Council for Population and Development, with help from UNESCO and UNFPA, is developing an integrated mass media campaign, which is planned to include half-hour radio programs and short advertisements (81).

- Officials of the Family Guidance Association of Ethiopia gave radio and television interviews and lectured on a number of family planning and population issues in 1985 and 1986. Topics included methods of contraception, family planning as it affects youth, and population issues (212).

- The Family Planning Association of Uganda in 1986 secured air time for a 30-minute weekly radio program (203).

- In Niger volunteers tape interviews with villagers, asking their views on various development topics. Radio producers then create programs using the interviews. The volunteers organize listening groups—called “Radio Clubs”—to listen to the programs and provide feedback. Later programs, called “Crossroads” programs, are based on the earlier shows and feedback. Themes have included aspects of health, civics, and agriculture. Discussions are under way about covering family planning as well (175).
FAMILY PLANNING ON RADIO 
IN THE NEAR EAST AND NORTH AFRICA

Use of radio to promote family planning has been limited in the Near East. Even in Tunisia and Morocco, where there are active government family planning programs, broadcast media have not been extensively used to publicize family planning. An early pilot project in Iran and mass media programs in Egypt are the major examples of radio used to promote family planning.

Virtually all 450 radio stations in the region are government-owned or controlled. Management is either through a government ministry or through a public corporation. In Lebanon some private stations are permitted in addition to the government system (85).

With a large majority of households in the region owning radios—as high as 99 percent in urban Morocco, for instance (25)—the potential for family planning radio is excellent. The main barriers have been government policies that give low priority to family planning or government reluctance to use radio in support of family planning programs. In some countries, however—especially in cities—new technologies are beginning to shoulder radio aside.

Television is popular wherever it is available, and in parts of North Africa video houses and video-vans are building a new market based on recorded videotapes.

Isfahan Pilot Project

Radio was the primary medium in a pilot communication project conducted in Iran’s Isfahan province in 1970–71. One of the first research-oriented family planning communication projects, the Isfahan Communication Project sought to tell couples about family planning, to increase contraceptive use, and to evaluate audience impact. The project showed that mass media could transmit family planning messages very well and increase contraceptive use, at least in the short term. The Iranian government, the Population Council, the Isfahan Health Department, and US AID developed the project.

The campaign was conducted in two 3-month phases. The first used radio only. The second used radio along with newspapers, mailings, banners, and slides in cinema houses. Government radio stations furnished free air time. Various radio formats were used—spot announcements, dramas, discussions, news items, interviews, and talks. Also, script writers inserted family planning materials into weekly programs for special audiences such as farmers and soldiers.

During the two campaigns one-minute radio spots were broadcast three times a day, and longer programs were aired weekly. The spots described the advantages of the 2- or 3-child family and the pros and cons of contraceptives. They also provided a telephone number so listeners could call an operator who offered further information and mailed leaflets to callers.

The Isfahan Communication Project was one of the first to pre-test its material extensively. Ten radio spots were played to 119 people, who were asked to state their preferences. Respondents liked balanced messages listing good and bad effects of contraceptives better than those listing only good effects. But they also needed reassurance that oral contraceptives and IUDs were indeed safe, because they had heard reports that they were not (100).

The short-term impact of the project was impressive. Familiarity with at least one contraceptive method increased from 77 percent of respondents in a precampaign survey to 89 percent in a postcampaign survey. Clinic reports showed that the average number of new users of oral contraceptives increased from 1,223 per month before the campaign to 1,967 per month after; new IUD users, from 69 per month before to 85 per month after; and new condom users, from 670 per month before to 1,184 per month after (100). The total numbers of new users of contraceptives increased by 18 percent during the radio-only phase of the campaign and by 54 percent during the multimedia phase. Radio was the most important source of family planning information for 26 percent of new clients at clinics during the first phase and for 39 percent during the second phase. There was no long-term follow-up to determine whether increases in contraceptive use were sustained (100), and lack of strong grass-roots or national support made the project short-lived.

Egyptian Radio Encourages Family Planning

In Egypt at least three projects have put family planning on the radio. The State Information Service (SIS) has conducted a communication project on family planning since 1979 using radio, television, newspapers, billboards, and face-to-face contacts. Family of the Future, a contraceptive social marketing project, uses a variety of media, including radio, to sell contraceptives. And the Ministry of Health uses radio for public education on maternal and child health and family planning.

SIS’s initial goal was to increase knowledge of family planning. Because that goal has been reached in most areas, the agency has begun to promote the practice of family planning. Its messages stress health issues: the harm to health of early, late, or repeated pregnancies; the benefits of child spacing; the greater likelihood of birth defects with later pregnancies. Verses from the Koran and the Bible that support family planning have been stressed, especially in broadcasts to rural areas.

A new theme is the need for sustained and more effective use of contraceptives. Messages now try to address myths and mistaken impressions. For example, some women mistakenly think that oral contraceptives work by killing sperm, and therefore they take them only on days when they have sexual relations (102, 157). Broadcasts stress the need for “correct” use of contraceptives but leave the description of correct use to pharmacists and other dispensers who meet users face-to-face (102).

SIS family planning materials are frequently broadcast and widely heard, say SIS officials. In 1986 Egypt’s four radio networks have together devoted over an average of one hour a day to family planning messages. It is estimated that, if all of Egypt’s 50 million people listened to radio, each would hear family planning messages an average of five times each month (49, 157).

SIS has done little systematic audience research or pre-testing of radio messages in recent years. Audience research is planned for 1987. SIS officials stay in touch with their audience through seminars that SIS local offices hold in smaller towns for social workers, nurses, midwives,
other health workers, and local religious leaders. Journalists from radio, television, and newspapers attend these seminars and report on them. Village health workers, usually women who are natives of the villages where they work, bring questions from villagers (49, 51, 102, 157).

A 1983 evaluation, carried out by the University of Chicago, showed that the SIS project increased knowledge of family planning but did not necessarily increase use of contraception, especially among the urban and rural poor and in upper (southern) Egypt. While awareness of family planning was widespread, detailed knowledge of contraceptive methods was not. Also, false or exaggerated rumors about the harm of contraceptives were rife (19). Surveys show a significant decline—from about 77 percent in 1980 to about 60 percent in 1984—in rural upper Egypt (50, 171, 204). In response, SIS reports that it is now working harder to reach rural people, especially in upper Egypt (157).

Family of the Future, the Egyptian contraceptive social marketing program, uses a variety of media to promote sales of specific contraceptives, including IUDs, oral contraceptives, condoms, and foaming tablets. Because most of its market is in urban areas, where television is more popular than radio, Family of the Future devotes far more of its advertising budget to television than to radio (107, 181). Marketing has begun in rural areas, however, and use of radio can be expected to increase. Family of the Future presents two kinds of messages: (1) brand advertising and promotion and (2) instruction for doctors and pharmacists in the correct use of the products (52). A prime goal of Family of the Future advertising has been to dispel false rumors about contraceptives (53, 181).

The Egyptian Ministry of Health has recently begun to use mass media, especially radio, for public education on maternal and child health and family planning. A radio doctor show answered mailed-in audience questions on these topics, and a soap opera was broadcast during prime time in central and lower Egypt. Well-known script writers and radio voices are used (202).

Other Radio Projects

Aside from the several Egyptian efforts, current use of radio for family planning is limited in the Near East and North Africa. The Family Planning Association in Morocco has promoted family planning through radio, as well as other media, since 1982 (124). In Tunisia there has been some promotion of family planning by radio in both French and Arabic, but not to an extent commensurate with service delivery efforts in the strong national family planning program (94).

The Arab States Broadcasting Union, in cooperation with UNESCO, has produced several radio programs on population and family planning in collaboration with various radio organizations in Arab nations. These include programs on the socioeconomic effects of large families, on polygamy, on population growth problems in Arab nations, and on family planning and use of natural resources (109).

RADIO IN AGRICULTURE, EDUCATION, AND HEALTH

Radio has been used to promote development programs in such other fields as agriculture, education, health, and nutrition. Not all the pioneering radio projects have been effective. Lack of time, money, training, or equipment—or of research, planning, and evaluation—have handicapped some efforts (113, 149). But radio has proved itself effective for certain tasks and audiences—if it is used in the right combination with other media, and if the message is well-designed, tested, and presented.

Agriculture

One of the first and still most widespread uses of radio for social development is in agriculture. As early as the 1930s, government-sponsored open broadcasts in the United States and Canada gave farmers information about market conditions and improved agricultural techniques. In 1941 a more systematic approach was born with Canada’s “Radio Farm Forum” listening groups: Farmers gathered to listen to radio broadcasts about farming and community development and to discuss what they heard. The farm forum approach was widely adopted in the developing world, starting in India in the 1950s through an All India Radio station in Poona. An evaluation in India showed that in many villages participating farmers used what they had learned on the radio and in discussions. For example, they vaccinated chickens against common diseases, pooled savings to buy purebred bulls, and hired schoolteachers. Others built tile-lined ditches to drain streets (132). Farm forums encourage rapid diffusion of new technology because they make use of group interaction to mobilize farmers’ interest and increase motivation. But it is sometimes difficult to sustain farm forums for a long period. The need for a new topic each week sets “too relentless a pace” for both radio producers and group organizers (118).

Most broadcasts on agriculture are open broadcasts—directed at any farmer listening. Such programming can cheaply reach widely dispersed farmers. In Malawi, for instance, the cost of an hour of radio broadcasts is estimated at 0.4 cents per farmer (in 1980 US$) compared with...
"Cuando Estemos Juntos" ("When We're Together"), a popular song urging sexual responsibility among young people, was the most often played song on the radio in Mexico in March, April, and May of 1986 and on the top 10 or top 20 list in several other Latin American and Caribbean countries (241). It is sung by two popular young performers, Tatiana and Johnny. The ballad's message comes in these words, sung by Tatiana:

You will see that I'm right
When I say no
Even though my heart
Is burning.

The popularity of "Cuando Estemos Juntos" and a companion song "Detente" ("Wait") was no accident, but the result of creative thinking, extensive planning, and thorough execution. The project that produced the hit record linked a technical assistance and funding agency, the commercial music industry, and youth counseling centers in 10 Latin American countries. The ingredients of success were careful research, a high-quality product, well-known artists, full use of commercial production and distribution systems, a multimedia approach, and an extensive publicity campaign.

Research was the first stage. Johns Hopkins University Population Communication Services, which sponsored the project with funding from US AID, insisted on laying the groundwork carefully. Focus-group studies suggested that certain messages would be both attractive to youth and not offensive to the media managers whose decisions determine what is aired. The messages: (1) Young people should be responsible for their sexual actions. (2) It is acceptable for young people to say "no"—to postpone sex. (3) Young men should be sexually responsible, too. (4) Young people can go to counseling centers in various countries—identified by name and address on posters and in radio and TV advertisements—for professional guidance.

The songs were produced and marketed by a Mexican marketing company, Fuentes y Fomento Intercontinentales (FFI). FFI coordinated distribution and promotion with record companies, family planning associations, and youth organizations in various countries. Packages for radio and television stations included 45-rpm records of the songs, radio or television spots, and music videos for television stations. The record jacket folds out into a colorful, full-size, 2-sided poster. These materials were sent to 3,020 radio stations and 250 television stations in 11 countries. Press kits went to 350 newspapers, magazines, and journals. Brochures about the project were mailed to 3,500 individual journalists. Extra records were sent to radio and television stations for prizes in contests.

The popularity of the songs exceeded expectations (241). The hope was that popular music stations in Mexico City, for example, would each play the song an average of three times a day for three months. Actually, stations played it 5 to 15 times a day for a much longer period. Many radio and television stations wanted to help a socially responsible cause. They often played the spots—one promoting the song, the other using the song to promote the local organizations—free of charge. In Mexico a survey of about 500 young people visiting the Centro de Orientación para Adolescentes (CORA) showed that about 84 percent of 11 to 25 year olds had heard "Cuando Estemos Juntos." Hundreds of young people wrote letters to CORA. Contests were held for the best letters from listeners, with Tatiana and Johnny records as prizes. In Lima, Peru, such a contest generated 7,000 letters in three months. The songs were used in schools in the Dominican Republic to help start discussions of sexual issues. In Bolivia a television station made the songs the basis for a panel discussion program including an archbishop. In Mexico a long-playing record by Tatiana, which includes "Cuando Estemos Juntos" and "Detente," sold almost 300,000 copies in 1986. Numbers of visits and letters by youth to several of the guidance centers mentioned in the promotional spots (exclusive of letters in response to contests) have increased by 200 to 2,000 percent. The songs have been popular even beyond the countries originally planned.

The success of the project can be attributed to these factors:

- Quality was better than usual for popular songs. Top composers, music arrangers, and musicians were involved. The two songs were chosen in a contest entered by more than 20 composers. "Cuando Estamos Juntos" was written by the Argentine composer Juan Carlos Norofla, and "Detente," by the Mexican composer and singer Prisma.
- The audience was clearly defined—as young people age 13 to 18 in Latin America and the Caribbean—and messages were carefully researched. The concepts and the songs were pre-tested with youth groups and radio and television executives.
Singers with ready-made audiences were chosen. Johnny Lozada Correa, 18, from Puerto Rico, is a former member of the group Menudo—one of the most popular in Latin America—and had recorded one LP as a solo artist. Tatiana Palacios, 17, from Mexico, had recorded one LP and was starting her second. Pairing them created a novelty effect that was synergistic. And both agreed to contribute their royalties to support similar efforts in the future.

An extensive public relations campaign, including a major press conference, helped to win support among journalists and the public. The songs received wide and favorable publicity in the print media not only in Latin America but also in international news magazines such as People and Newsweek (211, 229) and on US television.

Raul Velasco, the host of a popular television program, Siempre en Domingo, premiered both of the songs and gave them continued support on his weekly variety show, which reaches 150 million viewers.

Project managers convinced radio and television stations that a song with a socially responsible message could be a commercial success.

The project offers several lessons. First, entertaining packaging can help messages reach the intended audience. They must be presented through media popular with the intended audience. To create the most entertaining messages in the most popular media, communication professionals need to be involved at all stages—from concept development to final evaluation.

Second, the product has to be of high quality—high enough in a song, for instance, that broadcasters will want to play it free of charge. When family planning associations produce radio and television spots, press releases, photographs, and other materials for the media, these materials should be attractive enough to make the media want to use them.

Third, in some countries record companies were the most active in promoting “Cuando Estemos Juntos” to broadcasters—more so than the voluntary youth or family planning agencies. This is not surprising, because record companies are accustomed to working with broadcasters and have various links with them including, sometimes, common ownership. Family planning and other health-related agencies need to learn how to work more closely with broadcasters and indeed with the whole entertainment industry in order to make their messages more effective.

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Problems of Access to the Broadcast Media

Because of problems of access, the potential for promoting family planning and other development goals through radio often goes unrealized. Whether radio stations are government-owned or private, whether they accept advertising and sell air time or not, access for the purpose of presenting family planning messages often is difficult. There are several reasons:

- Taboos exist against mentioning family planning or contraceptives on the air.
- Little air time is devoted to any development messages.
- Production and air time cost too much for family planning organizations.
- Appropriate, high-quality material that broadcasters will use is not available.

Taboos against family planning messages can be overt, as in the policy of many US radio stations to refuse contraceptive advertising (1, 178). Sometimes objections are more subtle. Government stations, for example, may refuse family planning messages, not because of clear-cut policies prohibiting them, but because of fear of disapproval by political or religious authorities—sometimes even in countries where the government actually supports family planning services. Family planning organizations should not assume, however, that broadcasters are unwilling to use any family planning messages. Even in Africa, where contraceptive use levels are relatively low, and until recently most governments gave family planning low priority, broadcasters are not opposed to airing family planning messages (138) (see p. 1-866). Working together, family planning organizations and broadcasters may be able to develop programs that suit both groups.

Air Time Limited

Lack of access for family planning messages is often an aspect of a larger problem of scant air time devoted to educational and development messages in general, especially messages intended for poor majorities (17, 38, 78, 98, 110, 122, 156). Surveys indicate that broadcasting for rural development receives only one to five percent of all air time in most developing countries (64, 68). Broadcasting for development in general may receive somewhat more air time (139).

Government radio stations usually have a legal mandate to support social and economic development. That is no guarantee, however, that any particular development message will receive attention. Stations often are units of ministries of post and telecommunications and must make themselves available for development messages from many other ministries—health, agriculture, education, economic development. Unless there is strong government support for family planning, it may receive little air time.

Political or commercial priorities likewise may limit use of radio for family planning and other development messages, even when governments support family planning. Government stations sometimes devote large blocks of time to political messages, reducing time available for other messages. In contrast, private commercial stations tend to broadcast only what will appeal to the largest number of listeners—usually entertainment. Recently some government stations have begun to accept commercials. As they do, they tend to become even more interested in entertainment because it is easier to sell advertising when audiences are large. For example, All India Radio, a government system, has stations that broadcast popular music, commercials, and little else (168). The types of programming that stations broadcast may influence the formats available for family planning messages.

Costs

Sometimes family planning groups think that they cannot afford production or air time. Even with the most limited resources, however, efforts can be made to obtain free coverage and even free technical assistance from broadcasters (see box, p. 1-876). Organizations that produce their own material find that production costs depend largely on the format and purposes of the programming. For example, producing an hour of Radio Math in Nicaragua cost $2,000 (US) in the mid-1970s (78) (see p. 1-874). In contrast, producing and broadcasting a 15-minute episode of Naseberry Street, Jamaica’s family planning soap opera, costs $115 (67) (see p. 1-863). The much higher cost of Radio Math is explained by the meticulous testing and many revisions necessary to assure effective teaching. The result is a product that can be used for decades. In contrast, Naseberry Street does not need such careful preparation, and episodes are not intended for reuse.

Costs of air time, too, can vary greatly. Radio Bangladesh lists a charge of $10.45 (US) to broadcast a 30-second spot announcement nationwide, about $200 for a 15-minute sponsored program, about $50 to produce a signature tune, and about $80 to produce a jingle (105). The Broadcasting Corporation of Niger State, Nigeria, charges about $30 (including tax) for a 30-second spot in prime time and about $27 at other times. Thirty minutes costs about $340 (216). In Sri Lanka 30 seconds costs $1.20, and 15 minutes costs $65 (105). In Turkey a national broadcast costs about $10 per word (including tax) just before the morning newscast and about $12 per word in evening prime time (227). Family planning organizations may be able to negotiate special rates or take advantage of time set aside for free public service announcements (39).

Good Materials Needed

A serious problem everywhere is the lack of appropriate, good-quality family planning materials for radio. For many stations the problem is not too little time available, but too little good-quality material on development, including family planning. Most stations are reluctant to air material that is below their usual level of technical quality. Broadcasters themselves will sometimes help produce good-quality material. Sometimes private market research or advertising firms will help free or at a reduced fee. In addition, a number of agencies offer special assistance in putting family planning on radio (see box, p. 1-881). Ultimately, family planning professionals need to develop expertise in the use of radio and to assemble libraries of good-quality materials.
Another international agriculture program using radio is the Developing Countries Farm Radio Network (DCFRN), sponsored by the Canadian International Development Agency, Massey-Ferguson Ltd. (a Canadian farm equipment manufacturer), and the University of Guelph in Ontario, Canada. The network produces taped radio programs as well as scripts for translation. The programs promote low-cost ways for small farmers to increase production using locally available materials. Programs cover a variety of subjects, such as better use of manure, getting more milk from dairy cows, and marketing farm goods. The format is a short talk, very informal, as if one farmer were advising another. Length is from 2 to 10 minutes. Programs are estimated to reach 100 million farmers (6).

DCFRN often relies on its listeners to choose subjects. Broadcasters in developing countries relay farmers’ concerns to DCFRN. When enough listeners express interest in a subject, DCFRN studies it and produces a program. Recently, for instance, DCFRN produced a program on fruit and vegetable soft rot in response to requests from broadcasters in Bolivia, India, Mexico, Montserrat, Papua New Guinea, Paraguay, Sierra Leone, and Western Samoa (47). While treatment of some subjects, such as this one, are widely useful, international programs such as DCFRN cannot address specific local conditions (118).

Another international agriculture program using radio is run by the INADES-FORMATION organization founded by the Jesuit religious order of the Roman Catholic Church and now operating in 14 African countries. Using radio and print materials, INADES provides correspondence courses in agricultural topics for farmers and agricultural extension agents. INADES also publishes a magazine on agriculture and conducts seminars. National offices are located in Burkina Faso, Burundi, Cameroon, Chad, Ethiopia, Ivory Coast, Kenya, Rwanda, Togo, and Zaire (118, 143).

Radio has been used elsewhere to help achieve a variety of agricultural goals. In Botswana it was a key medium in efforts to convince herdsmen that traditional grazing practices harmed the land (35). In West Bengal, India, radio was essential to a correspondence school project teaching farmers modern techniques for cultivating wheat and summer paddy (rice), two cash crops (36). In Pakistan the Barani Project used radio and other media to persuade farmers that they should increase production of wheat, maize, and peanuts by using irrigation, modern methods of seeding and fertilizing, and other modern technologies (34).

**Education**

The use of radio to teach children in school is nearly as old as broadcasting itself. Radio was used to teach children in Europe and the United States as early as the 1920s (78). In the 1940s in the US, radio was used successfully for diverse educational purposes, from teaching psychology in college to teaching music in elementary school (173). Radio was used in Japan in a 1956 project to teach English to students at various grade levels. These students performed as well or better than students in conventionally taught classes (173).

The use of radio to teach adult “learning groups” out of school began in the small town of Sutatenza, Colombia, in 1947, when a parish priest, Father José Joachim Salcedo, saw radio as a way to bring basic education to the town’s people. The idea spread to other rural areas in Colombia, and a private organization, Acción Cultural Popular (ACPO), was formed to manage these efforts. Help came initially from the Colombian government and the United Nations Educational, Scientific, and Cultural Organization (UNESCO), but the movement relied primarily on volunteers. ACPO’s international branch has brought similar adult education projects to other Latin American countries.

ACPO participants are organized into “radio schools,” groups of 6 to 10 adults who live near each other. The groups gather to hear and discuss radio broadcasts designed for them. ACPO furnishes textbooks. In addition to teaching basic subjects, the programs attempt to encourage a sense of productive membership in the larger society. ACPO programs sometimes also promote specific agricultural innovations (21, 112, 205). Adult education by radio now is widespread in Latin America. Radio Santa Maria in the Dominican Republic, which provides primary school equivalency education for adults and children, is a leading example (111). Radio has been widely used by developed nations to teach their languages to ethnic minorities both in the classroom and outside it.

**Interactive Radio Instruction**

Radio teaching has improved over the years. Lectures are giving way to more animated styles. In the mid-1970s interactive radio instruction was developed as an improvement of radio instruction for the classroom. Instead of requiring children to be passive listeners, interactive instruction requires participation—verbal and even physical. The 30- to 60-minute radio programs take the form of a fast-paced dialogue between two or three speakers. The radio voices...
USA:

**Learning to Say "No"**

As part of a radio series, Robert Hatcher of Emory University passes on practical suggestions from the Northwest Atlanta Parents' Council about learning to resist peer pressure.

- Practice saying "no." Imagine situations and practice your responses. It's important to be prepared.
- Make it simple. You have a right to say "no," and a long explanation is not necessary.
- Avoid the situation. It might be easier to stay away than to have to walk away.
- Change the subject.
- Pick friends who have similar values and interests.

ask a question and the children respond aloud, circle pictures on worksheets, or write in notebooks. Questions asked on the air are answered after a pause for the children's response. The children's correct answers are thus reinforced immediately, and incorrect answers are corrected. Teaching is liberally interspersed with music, and radio teachers sometimes ask the children to sing or do light exercises in place (225).

Classroom teachers need not be highly trained to use interactive radio instruction. Indeed, in a Dominican Republic pilot program, the technique is used in rural areas where there are no formal schools or teachers, only literate villagers who supervise the children (73). In general, interactive radio instruction makes the most difference to students' performance where the quality of local teaching is low or where there are no local teachers or schools (223).

After more than a decade, interactive radio instruction has proved its worth in several countries, including the Dominican Republic, Kenya, Nicaragua, and Thailand. It has been promoted by US AID, the World Bank, and various private organizations (16, 76, 224, 238). Mathematics has been taught in Nicaragua and Thailand (224); and language arts, in Kenya (33). A "Radio Science" project will soon start in Papua New Guinea with assistance from the Education Development Center (88).

Evaluation of several pilot projects has showed that interactive radio instruction often surpasses traditional classroom instruction in similar schools in the same countries. Radio Math, a pioneering 5-year test conducted in Nicaragua in the mid and late 1970s by Stanford University, with support from US AID, was tried with students in grades one through four. Radio Math first graders' average test score was 65 percent, compared with 39 percent for conventionally taught first graders. Over all four grades involved, Radio Math students' average score was 70 percent, and conventionally taught students' average score, 62 percent (176, 224, 238). In Kenya, in a project conducted by the Kenya Institute of Education and the Academy for Educational Development, interactive radio students learning English as a second language performed better than conventionally taught students in all aspects of English usage (33, 135).

Radio listening groups, whether in the classroom or not, have been used only occasionally in family planning and population education (189)—for example, with mothers' clubs in Bangladesh and in family planning campaigns in China. Listening groups dealing with family planning might consist of students in school, adult groups organized by local family planning workers, or health workers receiving initial or refresher training.

**Health**

Radio has been used in health education and promotion for decades. Radio stations furnished information and schedules for polio vaccination campaigns in the United States in the 1950s and 1960s, soon after the development of polio vaccines. Mass campaigns to promote immunization and other health measures were carried on by radio and other media in China and Brazil in the 1950s and in these and many other countries since (70). China uses radio to broadcast physical exercise programs for office and factory workers. In a major US research project in the early 1970s, radio and television campaigns in selected areas sought to persuade people to eat less fat (78).

About two million people joined radio listening groups in Tanzania during the Mtu ni Afya (“Man is Health”) campaign, which lasted for 12 weeks in 1973. Each week they listened to a 20-minute radio program. Then leaders elaborated on what was broadcast, discussing material from a text designed for the campaign. The purpose was to promote control of common diseases such as malaria, hookworm, dysentery, schistosomiasis, and tuberculosis. Emphasized were control measures such as latrine building, better personal health habits, and destruction of reservoirs of stagnant water that breed malaria-carrying mosquitoes. One outcome was the construction of some 700,000 latrines. Another was a nearly sixfold increase in households eliminating vermin-harboring vegetation.

Careful planning, starting 18 months before the first broadcast, was a key to success. Audience research after each broadcast helped in planning the next broadcast. Another important element was coordination of radio with other channels of communication. The total cost was about $1 million (US), or about 50 cents (US) per villager reached (70, 80, 189). The campaign was characterized by a high level of political commitment (189), which appears to be necessary for intensive campaigns of this kind, and which is difficult to sustain over the long term.

Another popular use of radio in health has been "radio doctor" programs. A sympathetic announcer, sometimes but not always a real physician, tells listeners how to improve their health—sometimes in response to letters from listeners. The "Dr. Hakim" project in Tunisia, conducted by the government National Institute of Nutrition (NIN) with support from US AID, informed poor mothers of the nutritional needs of infants. (The project began in 1976 after a national nutrition survey showed serious nutrition-related problems among infants and small children—goiter, rickets, caries, and obesity, among others.) Frequent spot announcements emphasized the need for more balanced diets for infants, for breast-feeding, and for exposing infants to sunlight. An actor in the role of Dr. Hakim read the spots on the air. When possible, instruc-
tion in health clinics supplemented the broadcasts. NIN continued the project after US AID support ended in 1978 (183). The main character, Dr. Hakim, became very popular in Tunisia—portrayed in newspaper cartoons and quoted by shopkeepers (183).

Radio was a key component of campaigns conducted in Egypt, Honduras, and The Gambia, with national government and US AID support, to teach mothers how to manage infant diarrhea. The campaigns promoted oral rehydration therapy with homemade or manufactured mixtures of sugar and mineral salts, which are dissolved in water and drunk to replace the water and salts lost in diarrhea (117). Worldwide, this dehydration kills an estimated five million children annually (see Population Reports, Oral Rehydration Therapy (ORT) for Childhood Diarrhea, L-2, November-December 1980). The campaigns also stressed improved nutrition. The campaign in Egypt began in 1983 with technical assistance from the John Snow Public Health Group. The Honduras campaign began in 1980, and the campaign in The Gambia, in 1981, both with technical assistance from the Academy for Educational Development. Print materials and personal contacts were used along with open radio broadcasts in The Gambia and Honduras. Evaluation in The Gambia indicated that some mothers with little exposure to print materials and few direct contacts with health workers or volunteers learned about oral rehydration just from listening to the radio. The best results were obtained from a combination of communication channels, however (7).

Evaluation showed that the campaigns in the three countries markedly increased knowledge and use of oral rehydration therapy. They reduced death rates from diarrhea in Honduras (7) and, reportedly, in Egypt (74). (In The Gambia, poor child nutrition due to drought and economic problems made it impossible to attribute changes in child mortality to treatment of diarrheal disease.) Similar projects are under way or planned for Burma, Ecuador, Indonesia, Jordan, Lesotho, Malawi, Peru, and Zaire, generally with help from the US AID funded Healthcom project administered by the Academy for Educational Development. A project in Swaziland has been completed and favorably evaluated (75). In Bangladesh, Nepal, and Thailand, social marketing programs have begun to promote and sell packets of oral rehydration salts as well as contraceptives. In Nepal they are advertised over the radio, and sales have been brisk (116, 161).

Radio continues to be widely used in immunization campaigns, especially to alert the public to days when vaccinations are given. In Colombia in 1984 and El Salvador in 1985, for example, heavy radio and other mass media coverage of vaccination campaigns added substantially to the numbers of children vaccinated (9, 48, 66). In the Owo district of Ondo state, Nigeria, immunization rates were low until a campaign was launched in 1983. The campaign enlisted tribal chiefs, schoolteachers, and religious leaders—and used radio and television. Clinics were quickly besieged by mothers with their children (66). In Turkey in 1983 radio was an important element in a multimedia campaign that resulted in the vaccination of nearly 5 million children—92 percent of Turkish children under age five (13).

**IMPROVING RADIO**

There is room for endless creativity in promoting family planning and other development programs on radio. Diverse approaches have been used—from soap operas with a family planning theme to popular music that promotes sexual responsibility to commercials that advertise brand-name contraceptives. Whatever the format, persuasive communication requires sensitivity to audience concerns and preferences. Assuring this sensitivity requires a systematic, step-by-step approach including:

1. **Analysis** of potential audiences and available resources;
2. **Initial design**—the selection of audiences, objectives, messages, and media;
3. **Development of the message**, including pre-testing;
4. **Implementation, monitoring, and assessment**;
5. **Review and replanning** (99, 120, 149, 240).

This step-by-step process is often ignored, with unfortunate results. For example, health care workers and other speakers on radio programs for poor people in a Latin American country recently used, without explanation, such terms as “pathology,” “positive malignancy,” “multipara,” and “dysmenorrhea” (125). And in a North African country in the early 1980s, managers of an otherwise sophisticated communication project aimed at popularizing family planning made no attempt to counter widespread false rumors about the side effects of contraceptives (19).

In contrast, following the process can avoid messages that fail to communicate or, worse, offend the audience. In Scotland in 1979 copy prepared for a radio and newspaper campaign to combat schoolgirl pregnancies used such phrases as “behave yourself” and “getting into trouble.” When the material was pre-tested, young people found the wording offensive. The copy was changed before the ads were used (22).
The Communication Process

Analysis, including research, is the first step in successful family planning communication. Potential audiences should be identified in terms of (1) language, religion, gender, education, age, socioeconomic status, and other personal characteristics; (2) family planning knowledge, attitudes, and practices; and (3) media habits—how often do people listen to radio, when, what stations, what programs, and what other media do they see and hear? (For a description of methods for audience research, see pp. J-879–882.)

At the same time, a family planning organization considering a mass media communication effort needs to find out about the media, including: (1) What is the coverage of various media—how many people, where, and in what groups? (2) Who are the "gatekeepers" who control access to the media, and what are their attitudes? (3) What are government and media policies on family planning or communication that affect access to media and the content of messages? (4) What resources exist in the communication industry—such as advertising firms, market research firms, production studios, and record distributors—that could help produce materials (99, 149)?

Working with the Media to Promote Family Planning

By working with the mass media, family planning organizations often can get their messages on the radio and into other media free of charge. Radio stations especially may often need interesting material to fill their broadcast hours. This is an opportunity that family planning groups should not miss. They should consider that:

- Policy-makers and community leaders are more likely to support family planning when media coverage is favorable.
- Persuading radio stations to use family planning material at no charge is cheaper and may be more cost-effective than paying for air time.
- Programs produced by broadcasters may have more credibility than if a family planning organization paid to have them broadcast.

There are caveats, too. Most importantly, a family planning organization cannot control how the media use material that they are given. The media may report it inaccurately, distort it, use it out of context, or present an opposing point of view in a more favorable light. Whether this happens depends on the ability, policies, and attitudes of station executives and reporters. Family planning groups need to learn the policies and attitudes of the media and the reporters they deal with. In addition, a good way to help keep coverage accurate is to give the media material that is ready to use on the air or in print.

There are many ways that family planning organizations can encourage media coverage of family planning and population matters. In all cases, getting family planning messages on the air requires providing what the media want rather than trying to force on the media what family planning experts want.

- Organizations can establish themselves as willing, reliable sources of information and opinions for news media about family planning and population and can make top executives accessible to reporters. A prime rule: Never try to deceive the news media.
- Family planning organizations can issue press releases on various topics: the opening of a new clinic, the completion of new population studies, the issuance of a policy statement, a response to a critic.
- They can hold news conferences on especially important stories.
- They can invite broadcasters to cover events, providing background information and helping them arrange interviews.

- They can volunteer to participate in talk shows. Family planning groups should stay alert to the development of public debates—over sex education in the schools, for instance—that their staff members are qualified to discuss on the air.
- They can place public service spot announcements with radio and television stations. In some countries the law requires stations to carry public service announcements from nonprofit social agencies. Sometimes stations carry them voluntarily and even allow social agencies to use their studios to record them.
- They can persuade actors, well-known athletes, and other celebrities to endorse family planning—and then arrange for media coverage. They should make sure in advance that the audience will find the celebrity's endorsement credible.
- They can conduct media contests—for the best family planning story of the year on radio, for instance. This gives family planning organizations an opportunity to honor reporters who have helped family planning and encourage responsible reporting about family planning. Some family planning organizations, such as the National Family Planning Coordinating Board (BKKBN) of Indonesia, have encouraged the formation of associations of family planning journalists (146).
- A variety of other possibilities exist—some of them very imaginative. A family planning group in East Java, Indonesia, for instance, uses coupons issued by a popular radio music request program to ask that songs be played to honor employees, long-time clients, and volunteer workers for their family planning activities (163).

A cardinal rule in working with the media is to keep an up-to-date list of all media and media personnel interested in family planning. Turnover is common, and lists should be reviewed frequently.

An illustrated guide to media relations is available by writing for Packet #6 to:

Media/Materials Collection
Population Communication Services, Box R
The Johns Hopkins University
624 North Broadway
Baltimore, Maryland 21205, USA
Working with Communication Professionals

Communication efforts for family planning can be organized in different ways. Money, of course, determines how much can be done. Developing good relations with existing media and getting as much free coverage as possible is the best way to stretch scarce resources (see box, p. J-876).

With more money, family planning organizations can maintain their media relations efforts and also produce some of their own material for the media. Some may be tempted to save money by adding communication production tasks to the responsibilities of current staff. Increasingly, however, family planning organizations are finding that effective mass media communication requires skilled, experienced communication professionals. In the communication marketplace, where so many messages compete for the attention of the audience, the messages that are heard and heeded are those with the most sophisticated appeal and best technical quality. These are best provided by communication professionals.

Should professional communication skills be obtained by hiring staff or contracting with commercial agencies? A large organization with a substantial, ongoing communication program might want to hire staff. It may be difficult, however, to compete with salaries in the advertising and communication industries. For anything short of major, continuing efforts, finding outside help may be more cost-effective. It avoids start-up costs such as equipment purchases and learning time. It avoids management responsibilities for additional personnel. It avoids creating a permanent staff that may not always have enough to do. At the same time, it allows access to the top talent in commercial agencies, if affordable. And it allows access to teams of professionals experienced at working together. The necessary people and firms are available at least in most capital cities (18).

Family planning organizations that work with communication professionals may need to educate them to the differences between promoting family planning and promoting commercial products. For instance, commercial campaigns usually aim at broadening the market share for a specific brand, while family planning communication is aimed, in effect, at expanding the entire market—increasing the number of contraceptive users. Also, advertising

Design, the next step, involves the selection and matching of audiences, objectives, messages, and media. Choices are based directly on research findings. In a process called audience segmentation, specific audiences are identified according to economic, geographic, cultural, demographic, psychological, and other characteristics (149). Then objectives, which should be specific and realistic, are defined for each intended audience. For instance, married women of reproductive age who live in a certain city might be chosen as the audience, with the objective of increasing oral contraceptive use by five percentage points. The basic content of messages is chosen at this stage, although not the actual format or words. Also at this stage, steps must be taken to be sure that the services to be promoted are actually available. Budgets are made, and management responsibilities are defined. Finally, media are selected on the basis of coverage and effectiveness in reaching the selected audiences and transmitting the desired messages.

Although a powerful communication channel in most areas, radio is only one of many channels to consider. Whether radio is used depends on several factors:

- Will radio reach intended audiences?
- Will the government support—or at least permit—radio for family planning communication? Will radio management permit it?
- Is radio time available either free or at an affordable cost at an hour when the intended audience will be listening?
- Can radio broadcasts be produced at an affordable cost?
- What other communication channels are available, and how should they be coordinated with radio?

Development, pre-testing, and revision, the next step, starts with preparing preliminary scripts. Here the initial choices of format and wording are made, and various options are developed. These are then tested on representatives of the intended audience to learn which are most effective. On the basis of this pre-testing, materials are revised. Then they are pre-tested again—and yet again, if possible—to insure that the audience perceives the intended message.

Implementation, monitoring, and assessment involve carrying out the project, measuring results against expectations, and making further revisions on the basis of findings. The media are monitored to be certain that material is used as often as agreed.

Review and replanning starts the cycle again. Postproject analysis should be aimed at examining all aspects of the project, successful and unsuccessful, and then using the findings to plan future projects (18, 149, 189, 240).

Colombia: A Husband's Responsibility

PROFAMILIA, in its generic condom campaign in 1984 and 1985, broadcast this spot, set in a factory.

Man 1: Hey, John, they tell me you're going for foreman.

John: Sure, to make progress, you have to know what you're doing.

Man 1: I try to . . . but my wife doesn't think I'm responsible.

John: She probably has her reasons . . . because a true man has to be responsible in everything. In work, with women, and in love.

Man 1: You know, you're right. But how does one become responsible in love?

John: Simple . . . it's understanding the woman. It's loving her with responsibility, using condoms.

Man 1: Of course. I didn't know that before. And where do you buy them?

John: In any drugstore or at PROFAMILIA. And besides, they're very inexpensive.

Announcer: Definitely, to love with responsibility is also a man's concern. This is a message from PROFAMILIA.
Agencies and marketing firms are accustomed to addressing audiences with money to spend—the urban middle class—while family planning organizations may want especially to reach the poor. Commercial firms are familiar with promoting changes in purchasing behavior. They are not familiar with trying to change ideas, beliefs, or behavior associated with sexual relations or with relationships between the sexes. In some places the delicate nature of discussion about family planning may require an indirect approach that is unfamiliar in product marketing (110). Also, commercial firms are accustomed to dealing with private enterprise and may charge high fees—although some firms are willing to work free or at reduced fees for worthy causes.

Achieving Content Quality

There are two kinds of quality in radio. One is the quality of the content—its attention-getting ability, relevance, terms of the absence of hiss, clicks, rumble, unwanted worthy causes. Also, commercial firms are accustomed to dealing with commercial firms are accustomed to dealing with commercial firms are accustomed to dealing with private enterprise and may charge high fees—although some firms are willing to work free or at reduced fees for worthy causes.

Achieving Content Quality

There are two kinds of quality in radio. One is the quality of the content—its attention-getting ability, relevance, usefulness, credibility, and entertainment value. The other is the quality of the sound itself, which often is defined in terms of the absence of hiss, clicks, rumble, unwanted fading, and distorted tone balance. Both are vital. Poor sound quality can make content less acceptable. Likewise, fine sound quality is wasted if the content is poor.

Content quality depends on:

- **Attention arousal.** Material at the start of a program—even a brief spot announcement—should be arresting. “Minute one is the time of decision for the listener,” says one communication expert (192). Emotional dialogue, provocative questions, and peculiar voices are sometimes used (192). Other devices include music that is very familiar or that has a rapid tempo or full orchestration; a question or joke to introduce a speaker; and loud applause from an audience (141).

- **Liveliness.** As one expert puts it, “Listeners can hear smiles on the faces of radio announcers” (192). Enthusiasm is communicated through high energy levels in performers, announcers, lecturers, and actors. This quality has been most fully developed in commercial radio advertising.

- **Unity.** Programs should be unified, with no more than a few, clearly defined purposes. Elements that do not contribute to these purposes should be eliminated. Transitions between various portions of a program should tell listeners what relationship the new material has to program purposes. Even a series of programs should have unifying purposes, themes, elements, or settings (141). For instance, a recurring element in Jamaica's family planning soap opera, Naseberry Street, is the setting: a family planning clinic (see p. J-63).

- **Timeliness.** Radio messages can be linked with recent, current, or upcoming events in various ways. For example, a condom social marketing program may broadcast the endorsement of a player who has just helped win an important soccer match (192).

- **Need satisfaction.** Messages should give listeners an information they want to have. Music or drama should help to satisfy listeners' emotional needs. Drama, in particular, offers vicarious emotional experience and therefore is one of the most appealing radio formats (192).

- **Realism and credibility.** Audiences should be able to identify with actors in a drama. They must find speak-ers on informational programs believable. (In Honduras a soccer player promoting breast-feeding provoked laughter (23).) If experts on family planning do not speak with assurance, professional speakers might be substituted. In media-saturated countries, however, opinion or information may be more credible if it comes from the man-on-the-street or from actual experts rather than actors (192). Achieving realism and credibility depends on good audience research and careful choice of speakers (240).

- **Variety.** The same theme or idea needs to be expressed in many different ways. In Colombia, for instance, five different radio spots all made the point that using condoms is responsible (see p. J-863). Even within a single radio program, various ways of expressing the theme should be found. The longer the program, the more variety it should offer (141).

- **Pace and sequence.** Programs should build toward a climax. Interest not only should be aroused at the beginning but also should be maintained throughout the program, often with small climaxes leading up to the final climax. Every sound, word, or piece of music must propel the story forward (141, 192).

- **Local appeal.** Familiar voices, music, and events on the radio are appealing. Well-known local figures draw audiences for interview programs.

Achieving Sound Quality

Sound quality depends partly on technique, partly on equipment—although expensive, state-of-the-art equip
ment is by no means necessary for high-quality audio production. Definitions of good sound quality can be highly technical. Still, a few simple rules are helpful:

- **Take good care of equipment.** Tape recorders and microphones, the basic tools of radio, are delicate. They should be protected from dust and sand. Tape heads—the devices that record, play back, and erase tapes—should be cleaned periodically with alcohol or they will begin to produce fuzzy sound or blank spots (82, 87).

- **Mix sounds judiciously.** Radio production often involves combining—"mixing"—sounds in various ways. Background sound effects create atmosphere and help listeners visualize the setting of the action. While it sometimes is appropriate to mix music and voices, music should not overwhelm the voice.

- **Understand the meaning of audio techniques.** Every audio technique has a meaning. For example, a crossfade, in which one sound element is faded out as another is faded in (193), may suggest to the listener a change in time. A hard splice—an abrupt change from one sound element to another—may suggest a change of place but not of time.

- **Avoid bad tape splices.** Radio production usually involves editing tapes to remove unwanted sounds. A special splicing block should be used so tape can be cut on a bias to avoid noticeable clicks (82, 87).

- **Use microphones properly.** Omnidirectional microphones, which pick up sounds from all directions, sometimes should not be used outdoors, where they will pick up extraneous sounds. Cardioid microphones are sensitive to sounds coming from only one direction and thus are sometimes better for outdoor work (87). During interviews, cardioid microphones should be held at about shoulder level and moved from person to person. Optimal distance is from 6 to 12 inches from the speaker. Microphones generate extraneous noise if something rubs against them or their cables (87, 193).

Books that offer more detailed guidance on sound quality are listed in the box on p. J-878. These books also can help family planning organizations judge the production capabilities of radio stations.

Successful radio does not always require expensive equipment, skilled producers, or talented actors. By choosing the right format, beginners with simple equipment can produce good-quality radio. For example, interview programs can be recorded on a simple, inexpensive tape recorder (87). In contrast, a weekly soap opera calls for a well-equipped studio, skilled writers, trained actors, and a sound effects library.

Much depends on what listeners are accustomed to. Wherever family planning organizations work in radio, they need to attain high technical quality according to local standards.

### MONITORING AND EVALUATION

To assure high quality and maximum impact, radio broadcasting about family planning needs monitoring and evaluation at every stage. This continuing audience feedback helps to direct ongoing planning and to identify problems.

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#### Audience Research

Family planning communication projects use a variety of methods to gather information from audiences and potential audiences. These methods can range from the simple and inexpensive to the complex and costly. The data gathered answer such questions as: (1) Is the material broadcast? (2) Is it reaching the intended audience? (3) Is the content understood? (4) Is the message culturally appropriate? (5) Does the message change knowledge or attitudes? (6) Does the message influence behavior? Research on radio audiences has a long history. The British Broadcasting Corporation began audience research in the UK as early as 1936 (182).

Surveys are one of the most common methods of monitoring communication activities. They may range from small, informal surveys, which cost very little, to large surveys based on probability samples, which can be expensive. Various types of audience awareness surveys and pre- and post-evaluation surveys are used.

In an audience awareness survey, people may be asked if they have heard or seen any message, story, or advertisement about family planning during a specified period of time. They may be asked to listen to specific spots or jingles and identify them. Sometimes "tracers" are used—special messages reserved for different media—so that researchers can track which media reached the largest


Australia: 

Saying “No”

This radio spot is broadcast for the Family Planning Association of Queensland, Australia.

Teenage Male No. 1: Come on, you would if you loved me.
Teenage Female No. 1: If YOU really love ME, you won't pressure me.
(Pause—change of scene)
Teenage Female No. 2: Hey, I thought I really turned you on.
Teenage Male No. 2: You do, but gee, you’re only 15.
Announcer: If it’s not the right time, the right person, or the right place, say “no.” It’s your life; it’s your decision.

Going beyond just awareness of programing, surveys often try to measure the impact of a particular program or advertisement on knowledge or behavior. In a 1978 survey in Bangladesh found that the percentage of people who were aware of mass media messages on family planning varied from 74 among urban men to 31 among rural women. Among those who were aware of the messages, however, 83 percent of all respondents had heard them on radio (121). A 1984 survey in Jamaica found that 94 percent of respondents were aware of the 2-child message of the National Family Planning Board campaign (see p. J-86). A year later, another Jamaican survey found that 75 percent of those interviewed listened regularly to the family planning soap opera Naseberry Street (see p. J-863). In 1986 an Indonesian survey found that 31 percent of men interviewed were aware of the campaign promoting Dualima condoms (see p. J-859). Among current users and ever-users of condoms, 53 percent had heard a Dualima ad on the radio (188).

Communication projects sometimes can make use of surveys conducted by others—at considerable savings. Contraceptive prevalence surveys, which usually sample married women of reproductive age, sometimes include questions on exposure to family planning messages through the mass media (10, 15, 104, 128). Table 2 shows results from four surveys taken in the late 1970s. Questions about awareness of mass media family planning messages are also included in some of the Demographic and Health Surveys, now planned for about 30 countries. To be useful for evaluation, of course, these data need to be correlated with information about program efforts.

Family planning programs may be able to add questions to consumer surveys conducted by market research firms. For example, in Indonesia the National Family Planning Coordinating Board (BKKBN) pays about $3,000 (US) to have seven questions about family planning messages and media included in a quarterly survey of 2,000 urban housewives conducted by P.T. Survey Research Indonesia (146).

Focus groups may be consulted at various stages (22, 199). These consist of about 6 to 12 people representative of the intended audience. They discuss the subject in their own words and may comment on messages or materials that have been developed (59, 199). For example, in 1984 focus groups were used in Mexico to pre-test radio spots for the Federación Mexicana de Asociaciones Privadas de Planificación Familiar (FEMAP). As a result some spots were deleted or changed. For example, most focus-group participants thought that tubal ligation was expensive and thus unavailable to them. Therefore the spot promoting tubal ligation was changed to emphasize that clinic services are free of charge (222).

A similar source of information is “listening panels”—community leaders who report on their own and other villagers’ reactions to radio programs (87). Field trips can gather audience information, too. All India Radio, for instance, sends radio producers, accompanied by health and social workers, to rural villages to learn more about villagers’ concerns (159). Individual interviews by skilled interviewers are another possibility (110).

Table 2. Percentage of Women of Reproductive Age in Union Who Have Heard or Seen at Least One Family Planning Message via Mass Media, by Medium, as Reported in Contraceptive Prevalence Surveys, 1978–1979

<table>
<thead>
<tr>
<th>Country</th>
<th>Ref. No.</th>
<th>Year</th>
<th>Any Mass Medium</th>
<th>Radio</th>
<th>Television</th>
<th>Poster</th>
<th>Pamphlet</th>
<th>Newspaper</th>
<th>Cinema</th>
</tr>
</thead>
<tbody>
<tr>
<td>El Salvador</td>
<td>15</td>
<td>1978</td>
<td>94</td>
<td>88</td>
<td>21</td>
<td>43</td>
<td>47</td>
<td>26</td>
<td>5</td>
</tr>
<tr>
<td>Guatemala</td>
<td>15</td>
<td>1978</td>
<td>65</td>
<td>57</td>
<td>9</td>
<td>27</td>
<td>20</td>
<td>11</td>
<td>3</td>
</tr>
<tr>
<td>Jamaica</td>
<td>154</td>
<td>1979</td>
<td>NA</td>
<td>91</td>
<td>46</td>
<td>55</td>
<td>53</td>
<td>NA</td>
<td>NA</td>
</tr>
<tr>
<td>Panama</td>
<td>15</td>
<td>1979</td>
<td>86</td>
<td>47</td>
<td>28</td>
<td>64</td>
<td>42</td>
<td>20</td>
<td>15</td>
</tr>
</tbody>
</table>

NA = not available
Sources of Assistance for Radio on Family Planning

International, regional, and national organizations offer a variety of assistance with radio programming for family planning—ranging from substantial technical and financial assistance to scripts that can be adapted to local needs.

Johns Hopkins University Population Communication Services (JHU/PCS), administered through the Population Information Program and supported by US AID, provides a full range of technical and financial assistance to public and private organizations in developing countries that want to expand and improve family planning communication. Assistance may involve needs assessment, project development, funding, training, audience analysis, pre-testing, and evaluation (147). The Media/Materials Collection at JHU/PCS consists of family planning brochures, posters, tapes, and other materials from over 80 countries. Radio programs are available on tape or in scripts free of charge to developing countries. (Population Communication Services, The Johns Hopkins University, 624 North Broadway, Baltimore, Maryland 21205, USA)

Clearinghouse on Development Communication, operated by the Academy for Educational Development (AED) with support from US AID, is a center for materials and information on applications of communication technology to development including family planning. A quarterly newsletter and summaries of communication projects are available free to developing countries. (Clearinghouse on Development Communication, Academy for Educational Development, 1255 23rd Street, N.W., Washington, D.C. 20037, USA)

International Planned Parenthood Federation (IPPF) provides its affiliates with technical assistance in communication and other aspects of family planning program operations. IPPF offers an audio tape cassette, "Grass Roots Radio," of examples of radio used by family planning associations, with accompanying manual, for $5 (US) (87). (International Planned Parenthood Federation, Regent's College, Inner Circle, Regent's Park, London, NW1 4NS, United Kingdom)

Voice of America (VOA) has produced a 52-part radio series, Your Healthy Family, on tape in several languages. Two programs deal with reproductive health: No. 22, "Family Spacing," and No. 23, "Fertility and Venereal Disease." An 8-part series, Staying Healthy—Health Talks for Men, includes such topics as "Pregnancy Control," "Infertility," "Venereal Disease," and "AIDS." Both series were produced primarily for African radio stations. VOA tapes in various languages and scripts in English are free to stations and interested persons outside the US (123, 201). (Voice of America, Africa Field Service, Room 1617, 330 Independence Avenue, S.W., Washington, D.C. 20547, USA)

Asia

Development and Communication Planning (DTCP), the Asia and Pacific service unit of the United Nations Development Program, provides technical assistance in communication including program development, training, management, and monitoring and evaluation. (UNDP/DTCP, P.O. Box 2-147, 19 Phra Atit Road, Bangkok 10200, Thailand)

The Asia-Pacific Institute for Broadcasting Development (AIBD), funded by UNESCO, provides broadcasting training and program development assistance. AIBD recently produced 100 prototype radio and TV programs dealing with population matters (2). (Asia-Pacific Institute for Broadcasting Development, P.O. Box 1137, Panti Bharu, 59700 Kuala Lumpur, Malaysia)

The International Press Foundation of Asia offers the news service Depthnews, providing broadcast-ready copy on population and family planning issues in Asia. (Depthnews, International Press Foundation of Asia, P.O. Box 1843, Manila, Philippines)

The PCF Media Service, a project of the Philippine Population Center Foundation, publishes Development Communication Reports twice monthly in English. It provides Philippine broadcasters with news and information on population and family planning. (PCF Media Service, P.O. Box 2065, MC, Makati, Metro Manila, Philippines)

Latin America

The UNESCO Regional Office for Education in Latin America and the Caribbean provides communication training and technical assistance for broadcast production dealing with a variety of development topics including family planning. (UNESCO Regional Office for Education in Latin America and the Caribbean, Casilla 3187, Santiago, Chile)

Africa

L'Union des Radiodiffusions et Télévisions Nationales d'Afrique (URTNA) operates the Family Health Broadcasting Project with help from JHU/PCS. The project expands URTNA technical assistance to cover family planning. This assistance goes to URTNA's 42 broadcast organization members (196). The URTNA Programme Exchange Centre in Nairobi collects radio and TV tapes on family planning and maternal and child health and distributes them to members. A catalogue is scheduled to be published in 1987. URTNA publishes a bulletin, Family Health Communication, in French and English, containing broadcast-ready copy on family planning and related health issues. (U'Union des Radiodiffusions et Télévisions Nationales d'Afrique (URTNA), Boite Postal 3237, Dakar, Senegal, or URTNA Programme Exchange Centre, P.O. Box 50518, Nairobi, Kenya)

The Pan-African News Agency (PANA) provides daily news and information by teletype in English, French, and Arabic to broadcast and print organizations in 39 member-nations. In 1985 it began a weekly Science and Technology Bulletin, which focuses on development issues including family planning and maternal and child health. (Pan-African News Agency, P.O. Box 4056, Dakar, Senegal)

(continued on next page)
Sources of Assistance for Radio on Family Planning
(continued from previous page)

The African Council on Communication Education (ACCE), a private, nonprofit organization, offers needs assessments, training, and information on media and curriculum development in communication. ACCE publishes various materials on communications training and development for Africa. (ACCE, P.O. Box 47495, Nairobi, Kenya)

The UNESCO Regional Office for Science and Technology for Africa, located in Nairobi, provides communication training and technical assistance for radio program production. (UNESCO, P.O. Box 30592, Nairobi, Kenya)

Middle East and North Africa

The Arab States Broadcasting Union (ASBU), with funding from UNESCO, supports population communication activities including development of family planning broadcast materials. ASBU also operates a training center for broadcasters and transmits regional programming via satellite. (Arab States Broadcasting Union, ASBU/UNESCO Project, B.P. 65 El-Menzah, 1004 Tunis, Tunisia)

Listeners' letters are a less formal but useful and inexpensive source of feedback from literate audiences. One long-running family planning radio program, Grains of Sand in the Sea in Indonesia, has never been formally evaluated because listeners' letters indicate ongoing support for the program (see p. 859) (145).

Diálogo, the Costa Rican radio program, receives thousands of letters each year asking for information and assistance (see p. 862). Material in the letters often suggests topics for use in future broadcasts (133, 164, 169). In 1975 a content analysis was carried out on 800 letters sent to Diálogo. Content analysis measures message content by counting how often certain words, concepts, or themes appear (215, 228). In the Diálogo study the topics most frequently mentioned by women were menstruation, virginity, conception, female sexual dysfunction, courtship, and marriage. Men most often wrote in with questions about masturbation or frequency of coitus. Many men also had questions about the male genitalia, sexual dysfunction, and family planning. One observation from the analysis was that listeners still had much to learn about human sexuality and contraception (133). Content analysis is also performed on radio programs themselves to assess whether intended messages and themes are actually being broadcast.

In 1986 Latin American radio stations sponsored contests centered on Tatiana and Johnny's songs (see p. 870-871). Thousands of young people wrote letters in response. In Peru, for example, as part of a contest 7,000 young people wrote in explaining what “responsible parenthood” meant to them. Preliminary analysis of the letters by the Instituto Peruano de Paternidad Responsable shows that young people understood the concept of sexual responsibility (65).

Sales and service statistics can be used to evaluate the impact of mass media advertising. Social marketing programs rely on sales data as a continuing indicator of program performance and particularly of advertising effectiveness (14, 44, 172, 181). Since most social marketing projects advertise in several media, it is often difficult to evaluate radio separately on the basis of sales data alone. To gather more specific information, many social marketing programs have carried out small surveys, interviews at pharmacies, and focus-group sessions (see Population Reports, Contraceptive Social Marketing: Lessons from Experience, 1-30, July-August 1985).

Some family planning organizations measure the impact of radio promotion by the number of new clients who attend local clinics. An early Honduran study found that during a 5-week family planning radio campaign the number of new clinic clients increased from 11 per week to 35 per week, then declined to 15 per week following the campaign (187). A Colombian study in the early 1970s reported a similar pattern of increases in the number of new clients during each of several radio campaigns, three to six months in length, followed by declines three to five months later (12, 37) (see p. 864). A 1984 project in Honduras found that the number of new users did not increase but that current users were less likely to discontinue use during a brief radio and print campaign (90). Findings from these and other projects suggest that the reinforcement provided by family planning radio campaigns is important to sustain the overall growth of contraceptive use.

Evaluation Costs

Monitoring and evaluation are often skipped because of time and money. Yet monitoring and evaluation are essential to maximize project impact, and they can be tailored to the scale and budget of the project. There is little or no cost for “man on the street” interviews used to measure
opinions of the radio listening audience. Small-scale evaluations using focus groups vary widely in cost depending on the country involved, the resources available, and the information sought. Estimates range from $500 to $2,000 (US) for each group (86, 144). Most of the expense comes from training focus-group leaders, analyzing results, and preparing the report. Surveys cost considerably more both because sample frames are needed to be sure that those surveyed are representative and because more people are interviewed. It has been estimated that a typical evaluation survey involving 2,000 interviews costs from $15,000 to $40,000 (US) (209). Piggybacking family planning questions onto larger surveys can save substantially (see p. J-880).

Getting the Most Out of Monitoring and Evaluation

Monitoring and evaluating the use of radio to promote family planning involves many considerations. Some general principles have been suggested (147, 166, 189):

- **Monitoring and evaluation should be included in all family planning communication projects.** Evaluation is an ongoing process that takes place at each stage of a project. Monitoring and evaluation are essential, not a luxury. They enable staff to determine whether objectives are being met and, if necessary, to make changes.

- **The primary purpose of monitoring and evaluation is to improve the project.** Evaluation plans should be drawn up with this in mind. If monitoring and evaluation are seen as aimed chiefly at rewarding or punishing past performance, the evaluation will focus on unproductive concerns, and staff may be resentful and uncooperative. Since improving the project is the purpose of monitoring, special attention should be paid to monitoring early in the project, while there is still time for changes to make an impact.

- **Project performance should be measured against realistic, quantitative objectives.** First, objectives must be set at modest levels. A communication effort alone cannot be expected to bring about rapid and radical changes in many people's thinking or behavior. Second, the changes measured must be reasonably attributable to a communication effort. Reasonable measurements would include the level of familiarity with messages, increases in clinic attendance, or the level of awareness of sources of supplies and services. In contrast, changes in the crude birthrate are not a good measure for evaluating communication efforts. Too many other factors influence birthrates. Third, the measurements must fit project goals. For example, clinic attendance would be a poor measure of a proj-

In Bangladesh women with their children gather around a radio to listen to a family planning broadcast. Radio reaches many people with no access to other communication media and very little other contact with the rest of the world. (Kay Chernush, World Bank)
• Evaluation should, as much as possible, be planned and carried out by project staff, with outside technical assistance as needed. Insiders are more likely to obtain accurate, timely information that can contribute to the project. Also, by conducting the evaluation, staff learn how to improve the project, rather than receiving information secondhand.

• There is no one best methodology to evaluate all family planning communication projects. Different situations call for different techniques of evaluation. Using multiple methods increases comprehensiveness, validity, and reliability, but also expense.

BIBLIOGRAPHY

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