

# **New Directions in Family Planning Communication: 12 Predictions for the 1990s**

*Why should scarce resources be spent for IEC  
when almost every woman in Asia  
knows about family planning?*

**By Phyllis T. Piotrow and Jose G. Rimon II**

Family planning communication is not a new subject in Asia. Organized family planning programmes began in Asia as early as the 1960s. Bangladesh, China and Taiwan province of the People's Republic of China, Hong Kong, India, Indonesia, the Republic of Korea, Singapore, Sri Lanka and Thailand have led the way not only in offering family planning services but also in developing information campaigns and educational programmes to inform and persuade

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people to practise family planning. While other parts of the world were debating whether the words “family planning” and specific types of contraceptives could even be mentioned in public, Governments in Asia were subsidizing mass media promotion of smaller families and of specific contraceptive methods. The evidence is clear that Asia has led the world in family planning communication.

In most of Asia today, well over 90 per cent of married women of reproductive age know at least one modern method of family planning. In some countries the figure is an astonishing 100 per cent.<sup>1/</sup> Why then is more attention needed for family planning communication in Asia? Why should scarce resources be spent for information, education and communication (IEC) when almost every woman in Asia already knows about family planning? Why not focus resources instead on more clinics, more services, more research and lower prices for contraceptives?

This article will try to answer those questions and to point out the new directions that family planning communication in Asia need to take – and is already beginning to take – to become more effective in the 1990s.

Good communication about family planning is needed for many reasons:

First, what many people think they know about family planning is wrong. Many people mistakenly believe that family planning is more dangerous than childbearing – when in fact it is many times safer.<sup>2/</sup> Surveys all over the world show that many women still think oral contraceptives cause cancer – even though, in fact, the pill is the only medication known that prevents two common female cancers, namely cancer of the uterus and cancer of the ovaries. Many men still think vasectomy is the same thing as castration or at least that vasectomy will weaken them physically. Many young people think that condoms are ineffective and break easily. Even physicians still think that hormonal contraceptives may be dangerous.

Second, about 25 per cent of the population of Asia is between the ages of 10 and 19 years. There are more than 600 million young people in Asia aged 10-19.<sup>3/</sup> If government and family planning programmes wait until they learn from their own experience that unprotected sexual activity can lead to sexually transmitted disease, pregnancy, and even AIDS (Acquired Immune Deficiency Syndrome), then they will not have done these young people – or their parents – any favour. In the long run, most people will learn about sex from experience, but do Asians really want to let over 600 million Asian adolescents enter adulthood without the help of solid information and education on reproductive health and family planning? Even if no one were worried about unwanted pregnancy, today everyone should be worried about AIDS – and should take advantage of the new frankness that AIDS education

requires in order to be more specific in communicating with young people about contraception.

Third, family planning is not a supervised activity like playing soccer, where the coach can explain the rules and the umpire enforce them. It is usually performed at home or at least in some privacy. Doctors and nurses are not standing by to take blood pressure or tell clients how to do it. Individuals have to use family planning independently, entirely on their own, to be ready to use it, to know how to use it, and, above all, to be willing to use it, despite some cost and inconvenience. Without good information and reinforcing communication that makes individuals want to use family planning for their own good, they will not use it regularly, all the time, effectively. So it is not enough to educate the doctors and nurses and other providers. All the users and potential users need to be informed and educated, too. This is a massive, on-going communication challenge.

Fourth, information that recommends and promotes family planning is not all that people hear. There are competing messages which say the exact opposite – and there always will be. On the traditional side, many religious groups may tolerate sex for procreation, but frown on sex for recreation. On the modern side, the salesmen of the world have discovered that sex sells anything from automobiles to toothpaste, from blue jeans to popular songs.

Family planning communication does not take place in a vacuum. It takes place in a world where commercial and other promoters of sexual activity probably have at least \$1,000 to spend for every dollar that family planning programmes can spend. Therefore, even though Asian women say that they know about family planning, the need to let people know what, why, where, when and how to use it remains as acute as ever.

The Johns Hopkins University Center for Communication Programs (CCP) has enjoyed working on many projects in Asia. From experiences in Asia and elsewhere, and from lessons learned in other parts of the world, 12 predictions can be made about what is likely to happen in the field of family planning information, education and communication in the 1990s.

- 1. Family planning communication will have many different audiences because family planning will have many different clients – the young, the old, men, women, urban and rural residents, dropouts, current users, married couples, unmarried people.**

Therefore, messages and media will have to be developed for very specific groups. For example, young people are a major new audience. With young people, music and popular songs, such as in the Lea and Menudo and Lea and

Charlie project in the Philippines, are much more appealing and persuasive than a textbook on family planning. The Lea and Menudo project of the Population Center Foundation (PCF) of the Philippines was adapted from the experience of the Johns Hopkins Population Communication Services project in Latin America. There, two young singers, Tatiana and Johnny, performed two very popular songs with sexual responsibility messages aimed at teenagers. One of the songs became a number one hit song in most of Latin America, selling a million copies of records and cassettes and benefitting from an estimated million hours or more of free radio and television air time.<sup>47</sup>

In the Philippines, 16-year old Filipina singer Lea Salonga sang the song "That Situation" with the internationally acclaimed group Menudo. (Menudo is reported to have fan clubs in the Philippines including 400,000 members.) At no cost to the project, the Menudo producers launched the song in December 1987 in three huge commercial concerts and two free mini-concerts, the latter to an estimated crowd of about 12,000 teenagers in two shopping malls. Later, she sang another song, "I Still Believe," with popular former Menudo Charlie Masso. Both songs stressed the need to avoid "that situation" where a girl could become pregnant before she was ready, and they encouraged young people to believe in romantic love without instant sexual gratification.

The second song was also a hit. The 45-rpm records were sold out, as was Lea's long-playing album, which contained both songs. Building on the popularity of the second song and splices of the music videos, telephone hotlines called "Dial-a-friend" were established. The hotlines were advertised on television and radio, urging teenagers to call four telephone numbers if they needed to "talk about their problems." The response to the telephone hotlines was overwhelming. In the first five days 1,500 calls were received. The telephone counsellors immediately began referring callers to a network of counselling centres and clinics all over Metro Manila so that they could respond to more calls.

For men, messages will need to be different. An interesting result of focus group audience research among farmer leaders in the Philippines revealed that many farmers aspired for their children not to remain farmers but to finish college or university and get a degree. Focus groups in Asia as well as in Africa find that men tend to respond better to economic appeals than to health appeals.

These findings suggest that communication planners will have to differentiate among different audiences and not simply aim their messages at "the general public" if communication campaigns are to be successful. Especially in Asia, where awareness of population and family planning is already

high, and where, in some countries, contraceptive prevalence levels seem to have plateaued, appeals to action will have to be designed especially for audiences of potential new users.

**2. More time will be spent on research, learning about the specific audiences, the media and background before developing messages. After they have been developed, messages and products will be carefully tested before being widely distributed.**

Effective communication does not try to change an audience's mind. It tries to build on what the audience already thinks and wants most and to design the appeal around that existing motivation. That means research before starting to design materials. Above all, communication planners need to find out what is most important to their audiences. So if teenage girls want to be attractive to young men but still not "get in trouble," Lea shows them how to do better what they already want to do. If older mothers want to stay healthy to look after the families they have, family planning messages have to show that family planning will keep them healthy. If men want to be *macho* (masculine) and "in control," then condom ads have to make them feel that way. Or if men want to be better providers for their families, family planning programmes have to show why smaller families will save money and not weaken the male wage earner. But unless research is done before messages are developed, IEC managers will not be able to identify either what the audience wants or how the audience reacts to messages that have been prepared. Sensitive, psychologically oriented research will suggest areas to emphasize. Then the creative experts will be able to design messages that appeal to the intended audience.

Time spent in learning about specific audiences at the beginning is far more cost-effective than trying to correct a campaign that has gone away. The new campaign of the National Family Planning Co-ordinating Board of Indonesia (BKKBN) is a good example (see pp. 33-44 of this issue of the *Journal*.) Before launching a "privatization" campaign to encourage city people to buy their supplies and services for a fee from the private sector, BKKBN commissioned focus group research sessions in several cities. In each of the cities, the husbands were identified as crucial to the couple's decision to practise family planning.

These findings prompted IEC planners to consider a male-oriented promotion campaign. After reviewing a quantitative survey conducted by Survey Research Indonesia, however, BKKBN learned that 95 per cent of husbands were already in favour of family planning. Thus, the campaign needed not to persuade the husbands to support family planning, but rather to activate

couples to use private sector services – that is, to tell them where, how and why they could best use those facilities.

If a multi-media campaign had been launched based only on the initial findings in the qualitative focus group research, and if the message themes had centred only on persuading husbands to support family planning, the effort would have been wasted in trying to convert the converted.

### **3. Peer groups will be used more to reach peer groups.**

Everyone knows that doctors listen to doctors. Nurses listen to nurses. Men listen to men. Politicians listen to other politicians. Villagers listen to villagers. And young people listen to young people. So why is it still so difficult to build communication programmes around peer group communication?

Among adults, peer group communication is gaining ground. Mothers' clubs have been formed in rural areas. The women's clubs in the Republic of Korea have been a good example throughout the world. Vasectomy users have joined together to reinforce their own decision and persuade their friends to accept sterilization. Parliamentarians, decision-makers and journalists have joined in workshops and conferences to discuss and in the process become more convinced about the importance of population and family planning programmes. Volunteer in-plant worker motivators have been effectively used in many industry-based projects in Asia and elsewhere. Satisfied worker/acceptors talk with their peers in the workplace.

There is still lingering doubt about the propriety of young people openly talking to other young people about sex. We know children do talk about sex. But only a few programmes have built constructive communication around the pattern of young people counselling one another.

As the age of marriage increases in Asia, there will be greater need for effective peer group communication among young people. The use of Lea in the Philippines to visit schools and youth centres to promote the message of the "I Still Believe" song is one way of using a now famous celebrity peer to communicate to fellow teenagers, whether in-school or out-of-school. Not only does she attract thousands of students to listen to her, but also her status as a role model encourages school principals and superintendents to invite her to talk with students.

Despite opposition from some sources, effective communication programmes are going to find new ways to use peer groups to transmit and reinforce family planning messages.

**4. Entertainment will reach and teach wider audiences about family planning, AIDS and sexual responsibility. More good communicators will not just educate or just entertain, but “enter-educate” – a combination of the two.**

Everyone likes to be entertained. So family planning communication, which is competing against all the other messages out there, needs to be entertaining, too. There are more and more examples of this approach – in the Philippines, the songs of Lea and Menudo and Charlie; in Nepal, the use of folk media for cinema hall “spots”; in Indonesia, the long, on-going radio soap opera “Sands of the sea” (see page 38 of this *Journal*); and in India, the hugely popular television soap opera “Humlog.”

“Enter-educate, do not just educate or just entertain” is the slogan the Center for Communication Programs uses to describe programmes that seek to capture the audience’s attention by entertainment and then to capture the audience’s understanding through appropriate messages that educate them about family planning.

Family planning is also about sex. But why is it that advertisers all over the world can make the most boring products interesting by using sexual appeals whereas family planning programmes often manage to make such an exciting topic as family planning boring, clinical and devoid of enthusiasm or excitement? Is it not time for family planning programmes to promote family planning as a beauty product that can help preserve youth and beauty much more effectively than lotions and lipstick through healthier mothers and healthier babies?

Family planning is also an emotional issue. So it lends itself to real drama about real people, about real lives. Family planning materials can be developed and produced with high emotional content so that listeners and viewers will be moved emotionally as well as convinced intellectually.

**5. Audiences will participate more actively in different kinds of family planning communication. This participation will include community mobilization as well as individual involvement.**

Participation is the key to learning, and maximum participation means maximum learning. Whether teaching surgeons to perform minilaparotomy or urging teenagers to say “no,” personal practice is more useful, more instructive, and more persuasive than lectures by others. Yet how many mothers have given their daughters even a little practice in saying “no” gracefully? How many fathers today tell their sons what they really need to know to use condoms effectively?

Linking audience participation and mass media is a special challenge for family planning communication. Contests are one way of spurring an individual response to a mass message. During the Lea and Menuda project, young people were invited to write to radio stations and youth centres. Records were offered as prizes for those who could say best what the songs meant to them. Schools also participated with essay contests to interpret the message of the songs. Letters to radio shows or newspaper columnists are another way to enable the audience to participate. In East Java, Indonesia, a regular radio song-dedication programme was transformed to create new audience participation. The radio charged a small fee for each song dedicated to another person. Some songs were dedicated to family planning acceptors who have practised for five years and to outstanding field workers.

#### **6. Family planning messages will be much more personal, using human interest stories to capture and persuade the audience.**

Most people are interested in other people, not in statistics or lessons to be learned. In the United States, the most successful anti-smoking advertisement ever shown was Yul Brenner filmed just before his death from lung cancer. In the Lea and Menudo songs, is it the music and lyrics that come to mind first or the personal charm of Lea? In the aforementioned Indonesian radio soap opera, for example, key characters are remembered after specific episodes are forgotten.

Effective role models in the mass media can help the audience identify with specific personalities. In the case of the television soap opera "Humlog" in India, for example, a 1987 survey of 1,170 adults showed that 37 per cent of the respondents believed the grandfather character in "Humlog" was the best example to copy in real life. He was intended by the scriptwriters to be a positive role model in that he is a hardworking, highly moral and strict disciplinarian.<sup>5/</sup>

Most recently, in communication about AIDS, research suggests that the single most important factor in changing high-risk behaviour is knowing someone with AIDS, a real human being, not merely a statistic. The story of an individual airline steward who may have spread AIDS from California to New York has been repeated around the world while the other lessons to be learned from the California and New York experience are still untapped.<sup>6/</sup> One of the most moving and impressive AIDS films available comes from Ghana and tells very simply of a six-month period in the life of a real young woman who died of AIDS. Another unique twist to the idea of personalizing the message comes from Thailand.<sup>7/</sup> There condoms have come to be known as "mechai", a word coined from the name of Mechai Viravaidya, who has become famous for his desensitization campaigns.

The most successful communications are those which can best personalize their message. Public health is really personal health. That is the challenge to family planning communicators. With some of the old taboos lifted because of AIDS, there are new opportunities to make family planning more personal, less statistical.

**7. Multiple media, not just a single medium, will be used more and more to get the message across.**

The 1990s are going to see exciting new examples of multi-media communication. Why use more than one media ? Studies over the last two decades have shown that over a period of time, people tend to remember about a quarter of what they hear and about 50 per cent of what they see and hear.<sup>8/</sup> Of course, people and statistics vary; some people do not remember anything at all. But at all levels, almost everyone understands and remembers better what they hear *and* see than what they hear or see alone. That means video programmes should be used in communication programmes whenever possible, since television combines sight and sound from the start. It means more illustrated materials in the clinic, more visual materials to train health providers, and a lot of imagination to try to link sight and sound.

One effective way to use the mass media to reinforce personal communication was employed in the Philippines with popular radio shows. The community-based distributors (CBDs) in the population outreach programme were mentioned by name on local programmes. Their status in the community went up. Their morale went up. And more villagers knew that they could obtain contraceptive supplies or resupplies from the CBD workers.

**8. The best quality family planning entertainment materials will be able to compete with commercial products and produce revenue as well as provide entertainment.**

In many cases, high-quality materials with family planning messages will be able to compete with commercially produced material, to produce revenue and even, in some cases, to become self-sustaining.

The Lea and Menudo songs in the Philippines provide a recent example. The songs and their music videos attracted corporate sponsorships largely on the basis of the quality of the product. Major multinational and local corporations donated air time valued at about \$US100,000 or paid for promotional materials such as posters, cards and souvenirs.

In India, "Humlog" was sponsored by the manufacturers of a product, i.e. noodles, previously unknown in India. The successful promotion was a radical



*The Hong Kong Family Planning Association actively promotes family planning through a variety of communication media, including face-to-face channels. Here, the concept of male responsibility is dramatized.*

consumer innovation in India, which prompted other food manufacturers to advertise on television soap operas later. In this case, a good television product with a social message attracted sponsorship which in turn popularized the sponsor's product – an excellent “win-win” situation for both parties.

In Hong Kong, the Family Planning Association (FPA) turned a big problem into a successful cost-recovery mechanism. FPA had originally planned to launch a media campaign using the image of “Superman” to promote male responsibility. However, the company that owns the “Superman” concept objected. After negotiation, FPA agreed not to use the term and the company agreed to reimburse FPA for the funds they had used to date and to help support the alternative concept, using “The Kung Fu Master” as a role model for men practising family planning.<sup>9/</sup>

**9. Campaigns and other communications will be oriented towards large regional markets so that messages will reach as many people as possible for the lowest cost.**

Carefully planned and more expensive segmented campaigns will be used regionally, in more than one country. In Latin America wherever Spanish is spoken, and in Asia where English prevails, multinational markets can justify a more professional effort in order to be more effective. It is possible that

some new family planning songs being developed in the Philippines may also appeal in Latin America. In fact, the Philippine song "I Still Believe" will also be sung by Charlie Masso with Corina, a popular Venezuelan singer from Peru, in Latin America. In Nigeria, a song with a male sexual responsibility message sung by the Nigerian "king of ju-ju music" may have wide appeal in West Africa, Brazil and the Caribbean.

Entertainment, training materials and many other IEC resources will be widely shared because this sharing will mean better products at lower cost. There is no reason why "pattern advertising," which has been used by successful marketers, cannot be used and adapted for family planning promotion.

**10. More creative and more sympathetic communication in clinics and by health care providers will increase acceptance and continuation rates for many methods.**

The days of the typical health education type of counselling are gone. As people become more educated and more exposed to media, their information-seeking behaviour increases. Service providers will have to become increasingly skilled in the art and science of person-to-person or group communication .

Every client should be treated by every service provider as a potential motivation or referral agent for members of his/her family, neighbours and friends. The more happy and satisfied each client is, the more new acceptors will be recruited.

More innovative ways will be found to use dead "waiting time" in the clinics as planners and policy-makers realize that the best candidates for family planning may be those who are already using the clinics for non-family planning services.

**11. Communication among professionals in family planning will increasingly depend on effective national population information centres that can use computers, compact discs, videos and other appropriate modern technology. This will provide a new opportunity to keep programme managers and researchers abreast of rapid changes and new findings.**

Accurate, relevant information is crucial to successful family planning programmes and to persuasive communication. This means more attention to organized population information centres where people can turn to find out quickly what they need to know. These centres need to be responsive to information requirements from different key groups, for example, from parliamen-

tarians and politicians, who often want to know what laws and policies have been promulgated in neighbouring countries; from the medical doctors, who want to know the latest research findings on specific family planning methods; from family planning programme managers, who want samples of training manuals, client education materials, posters and brochures; from press and broadcast reporters, who want the latest figures on demographic trends; and from media producers, who are always looking for sample footage, clips of different people or activities, or good ideas for now productions.



*The family planning message is popularized through a wide variety of media in Indonesia. The preparation of films on family planning topics are in demand by media producers who incorporate footage in entertaining audio-visual productions. (UNICEF photograph)*

The countries of Asia, with assistance from the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) and the United Nations Population Fund (UNFPA), have led the way in setting up national population information centres. Under different names, these centres exist in Afghanistan, Bangladesh, China, India, Indonesia, Malaysia, Nepal, Pakistan, Philippines, Republic of Korea, Sri Lanka, Thailand and Viet Nam. ESCAP also initiated the Asia-Pacific Population Information Network (Asia-Pacific POPIN) as part of the global Population Information Network (POPIN).

Originally established as libraries, the national centres either act as or have the opportunity to expand as major information dissemination centres that are part of global POPIN. By adopting the same innovative outreach strategies to reach their audiences that successful family planning service programmes have adopted, these centres can play an active rather than a passive role in supporting population and family planning programmes.<sup>10/</sup>

Several new technologies open the way to a more active role. These include compact discs, personal computers, desktop publishing and increased public exposure to video.

“Compact Disc Read Only Memory” (CD-ROM) technology means that an entire print library can be contained on one compact disc. Data that once required 1,500 floppy disks can now be compressed onto a single, almost indestructible compact disc (see cover photograph.) Combining a CD-reader on an IBM-compatible personal computer with a CD-ROM disc creates an instant library. A “user-friendly” interface can make it accessible to a far wider audience than librarians and computer buffs.

POPLINE, the international population database that currently covers more than 160,000 items, indexed and abstracted, on all aspects of population and family planning, is now available on compact disc. POPLINE CD-ROM will give population information centres a new tool to answer questions, serve their users, and keep national leaders up to date on population issues. The Population Information Program at the Johns Hopkins University will be sending out a questionnaire shortly to population libraries and information centres to determine which are interested and equipped to take on this new technology.

Personal computers can link researchers, programme officials and databases more effectively than telephones in some areas. Not only by providing access to compact discs, but also by transmitting data, preparing graphs and managing databases, personal computers are making communication faster and more convenient than ever before.

Desktop publishing, although still complex and difficult, will eventually enable many more organizations to produce their own materials.

Video is already opening new horizons and reaching new audiences. More use of audio-visual, especially video, materials on population and family planning will change the character of population libraries. Even while modernizing and expanding access to scientific and print materials, population information centres will have to strengthen their ability to collect, catalogue, display and disseminate copies of field or user-oriented materials such as pamphlets, posters, slides and, above all, videos. They will have to become media and materials resource centres as well as computer-based libraries.

A model media/materials collection, such as the one at the Center for Communication Programs at Johns Hopkins, collects everything from films and videos to posters, pamphlets, T-shirts and key rings in order to illustrate all the different ways to disseminate family planning messages. This collection is part of the Population Information Resource Center, which provides POPLINE searches, copies of *Population Reports*, and copies of selected journal articles and other materials to developing countries on request. Altogether, about 700 requests are received each month at the Center for *Population Reports*, other publications, POPLINE searches, sample materials and various other forms of information. This is the type of multimedia function that information centres in very country will assume in the 1990s as they begin to use new technologies to increase their own capacity.

**12. Finally, we predict that more resources and more creative effort will be put into evaluation of all forms of information, education and communication and that this evaluation will show that well-planned and well-implemented IEC programmes can and do lead to behavioural change in family planning.**

Family planning communication needs careful and objective evaluation. It is not enough to produce and distribute a pamphlet, poster, or even a popular video. Programme managers need to ask: "What impact did it have on the knowledge, on the attitudes and on the behaviour of the intended audience"? If communication projects are properly designed – to meet specific and realistic objectives – then it should not be difficult to ascertain whether those objectives were met at the project's end. Of course, when objectives are unrealistic, evaluation is both difficult and embarrassing. A single pamphlet or poster, no matter how well done, is not likely to affect service statistics. But it may produce better-informed clients and providers who do a better job of counselling. A single television show, song or drama can have various impacts. Evaluation can measure how many people saw or heard it, understood the message, came to the clinic and mentioned that show as their source of referral. If the original objectives are clear and realistic, evaluation should be an important learning process, not an ordeal or embarrassment. The type of evaluation should, of course, be tailored to the size of the project. A few short recall surveys, exit

interviews from clinics, observation of clinic or community-based visits, focus group research and minor additions to clinic record forms are appropriate substitutes for large sample surveys in evaluating specific communication interventions.

In the 1990s, as new technologies spread and programme managers face many new choices as to how to spend their limited communication funds, imaginative, cost-effective evaluations will play a bigger role in guiding programmes. The conventional wisdom that mass media do not change behaviour will almost certainly be reversed as a result of far greater exposure to much more sophisticated media in a young audience that is open to innovation and change. Evaluation techniques will have to be adapted to measure the impact of mass media more precisely. For example, mass media alone may not persuade a man to use a condom, but a television “spot” may encourage him to call a “hotline” to ask questions; after that, he may go to a health centre with programmes for men; and eventually he may decide to try a brand of condom that is widely advertised. The mass media can influence each step of this decision process. Careful evaluation needs to sort out what mass media can do best, what personal communication does best, and how best to combine the two.

In the long run, it must not be forgotten that communication is a process, a long-term process, not a product.<sup>11</sup> A pamphlet may be beautiful, but by itself it is not communication. Communication involves seeing or hearing the message, understanding, remembering, being able to apply it, deciding to try it, doing it and continuing to do it. As any systems analyst knows, that is a process with many steps – some backwards; most, it is hoped, forward. Many communication projects will take weeks to research, months to plan and carry out, and in the field of family planning, possibly years to have an impact.

If you can remember how many times you have told your children to say “please” or “thank you” or not to slam the door, that should give you a rough idea how many times family planning messages will need to be repeated before they are finally accepted without question.

The 1990s offer exciting new directions for family planning IEC. Family planning programme managers have learned enough to know that there is more to be done and that organized communication efforts can make a difference. The fear of AIDS has opened the way to much franker communication than ever before. The mass media, especially television, reach millions more people than they did a decade ago. And young people are insisting on more information and greater frankness than ever before.

So we predict that the 1990s will be a decade in which increasing evidence and consistent research findings will show to policy makers and managers of

the public health sector that indeed well-designed communication campaigns, using proven methodologies and better research and evaluation techniques, can make a major difference in the success or failure of public health programmes.

As the revolution in communication technology continues to amaze the world and as the world becomes more and more of a "global village," the role of communications in shaping the lives of people will become even more pervasive.

The challenge is to master these new technologies so that they do not limit the choices available but rather so that they open new choices and new opportunities to alleviate human suffering and to improve the quality of life and health throughout the world.

### Footnotes

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