

AT MICROFICHE
REFERENCE
LIBRARY

A project of Volunteers in Asia

The Use of Family Radio in Community Planning

by: Harry L. Levin and Robert W. Gillespie

Published by:

World Neighbors
5116 North Portland Avenue
Oklahoma City, OK 73112 USA

Paper copies are \$ 2.00

Available from:

World Neighbors
5116 North Portland Avenue
Oklahoma City, OK 73112 USA

Reproduced by permission of World Neighbors.

Reproduction of this microfiche document in any form is subject to the same restrictions as those of the original document.

THE USE OF RADIO IN FAMILY PLANNING

**BY HARRY L. LEVIN
ROBERT W. GILLESPIE**

A WORLD NEIGHBORS PUBLICATION

The Use of Radio in Family Planning

by

Harry L. Levin

and

Robert W. Gillespie

A World Neighbors Publication
5116 North Portland Avenue
Oklahoma City, Oklahoma 73112 U.S.A.

ACKNOWLEDGMENTS

World Neighbors wishes to express appreciation to Robert W. Gillespie and Harry L. Levin, authors of this book, for giving us permission to publish it. Mr. Gillespie and Mr. Levin collaborated on the book while staff members of the Population Council, New York City.

In addition, thanks go to William O. Sweeney of the Ford Foundation for calling the manuscript to our attention and asking us to consider its publication. Mr. Sweeney secured a draft of the book — while coordinating the communications side of the Summer Family Planning Workshop at the University of Chicago's Community and Family Studies Center — and felt that it should be published.

We're also grateful to Sarala Sahney, Press Information Bureau, Ministry of Information and Broadcasting, India, who edited portions of the book while a participant in the University of Chicago Workshop.

World Neighbors also thanks the International Planned Parenthood Federation and the numerous other family planning associations around the world who have so willingly sent family planning radio materials for consideration.

First printing, November 1971

Second printing, June 1974

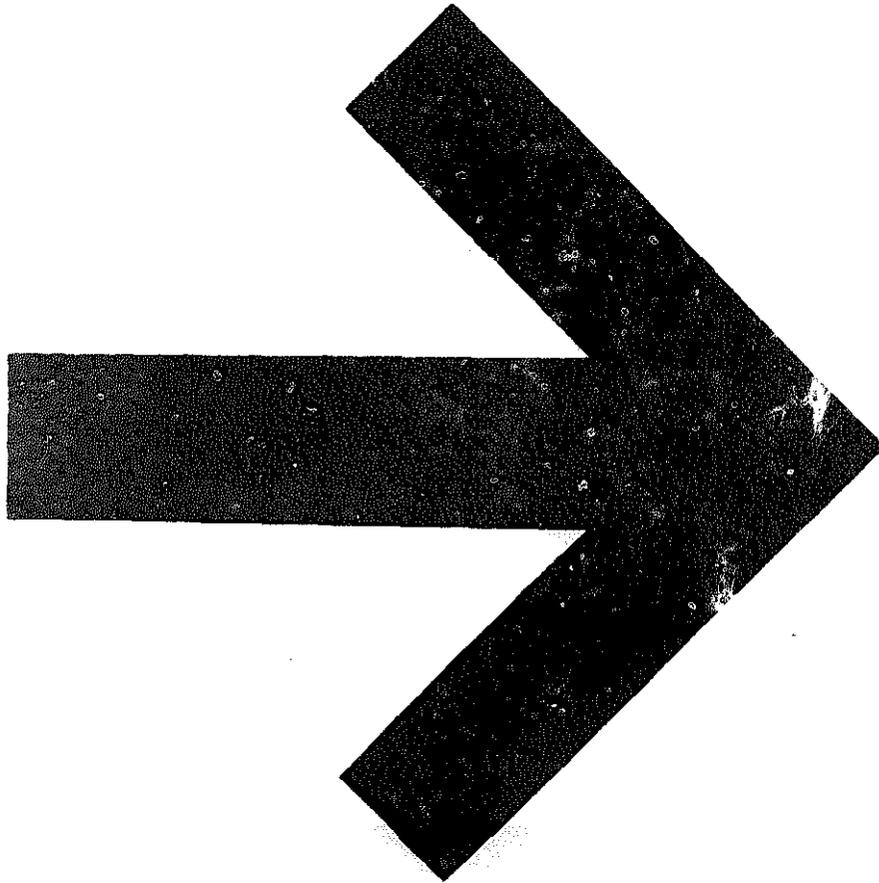


TABLE OF CONTENTS

I. WHY RADIO?	1
II. USING RADIO EFFECTIVELY	5
Radio As Part of Multi-Media Mix	5
Do's And Don'ts	6
Audience Research	8
Media Evaluation	10
Program Evaluation	11
III. PLANNING THE RADIO CAMPAIGN	13
Steps in a Radio Campaign	14
Target Audiences	16
Message Content	18
Program Types for Family Planning Messages	18
IV. PRODUCTION OF RADIO MESSAGES	21
Spot Announcements	21
Radio Drama	23
Soap Opera	28
Women's Programs	32
Interview Programs	33
Discussion Programs	38
Listener Participation Programs	42
News Broadcasts	43
Magazine Style Programs	44
Documentary Programs	44
Music Programs	45
V. GENERAL PRODUCTION SUGGESTIONS	46
VI. GENERAL WRITING SUGGESTIONS	49

VII. RADIO USE WORLD WIDE	52
Korea	52
India	53
Pakistan	55
Honduras	57
Taiwan	58
Singapore	58
Costa Rica	58
Tunisia	59
Guatemala	59
El Salvador	60
Appendix I — Supplementary Use of Television	61
Appendix II — Using Soap Opera To Convey Family Planning	64
Appendix III — Examples of Family Planning Radio Scripts	68
Botswana	69
Costa Rica	70
Ethiopia	90
Gambia	91
Ghana	92
Guatemala	98
Hong Kong	99
Indonesia	108
Iran	116
Jamaica	121
Kenya	124
Korea	125
Lebanon	130
Liberia	131
Nigeria	132
Philippines	133
Taiwan	138
Tanzania	142
Appendix IV — Tables Indicating Number of Radios in Countries of the World	143
Appendix V — Evaluation of Radio Use in a KAP (Knowledge, Attitude, Practice) Survey	157
References	160

Chapter I

WHY RADIO?

In developing countries where large numbers of people are living in villages and where rural areas are not easily accessible, it is difficult to transmit new ideas on a wide scale.

Exhaustive studies have shown that difficulties in developing nations are not always the same. The low-income countries contain an astounding variety of life styles, spiritual attitudes and levels of development. However, some generalizations can be made about the peoples of developing countries.

Most of the people live in a rural setting and work the land for their livelihood. Many of them do not have access to adequate transportation facilities. Few have educational opportunities beyond a few years in elementary school. They are insulated in their communities, frequently unaware of the world beyond. They rarely see a doctor. They are often untouched by governmental services. They are poor. And most of them are illiterate.

There is, of course, another side to this picture. The isolation and provincialisms of the developing world are the source of its fascinating variety. The "world community" that will hopefully provide a richer material life for everyone may also turn out to be grindingly monotonous for the very people it is trying to help.

At any rate, the need to bring new ideas — specifically contraception and family planning — to the developing world

has been established. Efforts are now underway in many countries to expose these new ideas.

These efforts inevitably have involved questions of communications. How can these vast and varied audiences be informed about family planning? How can they be motivated to practice it in their own lives? And how should concepts and activities — that to many are strange and innovative — be introduced?

One of the most profound and dramatic methods of disseminating such information is the inexpensive, battery-powered, transistor radio.

The spread of these pocket communicators into the most remote areas of the world appears to be inevitable. Through transistor radios, hundreds of millions of once-isolated villagers and farmers are catching glimpses of the wide world that only moments ago was beyond their horizons. They are hearing ideas and concepts they have never heard before.

One of the main reasons for radio's phenomenal spread in low-income countries is because it ignores levels of literacy. For the people of these countries, living like all of mankind in verbal cultures, nothing could be more natural than attention to a medium that simply talks. Radio requires little effort on the listener's part and no special training. As a result, radio broadcasting is emerging in the developing world as a more powerful and effective communications medium than anything else except perhaps direct personal confrontation. It may prove to be more effective than all the other technological media combined — newspapers, magazines, mailings, brochures, television and cinema.

This assessment may appear exaggerated. It is supported, however, by data on the increasing number of radio receivers in the two decades from 1950 to 1970. (See Tables 1-10 in the Appendix). The figures probably represent an understatement, since it is generally agreed that a radio census does not count all radios. In many places taxes are collected and duties are levied on radio receivers. Consequently, they are often concealed as contraband. At any rate, the figures show the tremendous number of radio sets that exist in almost every country of the developing world. Many of these countries have as many

radio receivers per capita as do the nations of the industrialized world.

Among media, radio is becoming an effective mechanism for transmitting family planning messages to audiences in developing countries. Inexpensive, battery-powered radios are owned by people from all social and economic classes. Consequently, radio broadcasting has been extended into areas where a lack of electricity has prevented the spread of old-style, plug-in radios.

Radio reaches those who cannot read or write. In fact, illiteracy may indeed enhance its effectiveness, since people who cannot read or write are denied some media alternatives. Some of the many advantages of radio include the following:

1. Reaches people quickly; provides almost instant outreach.
2. Reaches the people who have been hardest to reach because of difficult terrain, lack of roads and reliable means of transportation.
3. Delivers message directly to the listener across barriers and requires little effort on the part of a listener.
4. Reaches people at low unit cost.
5. Provides entertainment.
6. Provides information which carries conviction.
7. Provides a portable medium.
8. Creates a feeling of participation, of personal involvement in the listener.
9. Helps create a climate of opinion in which talk about contraception is not considered embarrassing; helps in legitimation.
10. Helps in reinforcement of new knowledge **and attitudes** and gives reassurance about changed behavior.

And yet for all its power, radio should not be viewed as a total approach by itself. **It is one medium among many.** And a comprehensive program of communications in family planning should seek to transmit messages in as many ways as possible.

Although radio is **one** of the most effective communication tools — especially for reaching large audiences who have limited

literacy — for disseminating information about family planning, it has inherent drawbacks.

1. It is difficult to transmit a complicated idea by radio successfully. The human ear assimilates at a slower rate than the eye.
2. The listener has no control over the transmission rate; he can't ask for something to be repeated.
3. The broadcaster has to assume the composition of his audience. He lacks complete knowledge of the audience and bases his message on assumptions.
4. Radio in itself is ineffective in bringing about a change of attitude or beliefs.
5. In some cultures, messages coming from a distance lack credibility.

Chapter II

USING RADIO EFFECTIVELY

Radio As Part of Multi-Media Mix

The use of radio must be considered within a broader communications framework, one that is supported by comprehensive planning, organization and administration. For maximum impact a radio message must be presented as part of a coordinated communications program involving other media and coordinated as well with actions and processes going on in the overall family planning program. Information should go hand in hand with the availability of supplies and services.

The organization and execution of a comprehensive communications program in family planning should be carried out in accordance with tested communications principles. These principles as well as some of the theoretical considerations underlying communications programs can be summarized in the following statements:

1. A family planning program should contain a central communications unit authorized to initiate communications policies and to design and carry out a comprehensive, long-range communications program.
2. A national program must be supported by regional units corresponding closely to local ethnic, cultural, social and economic needs and attitudes.

3. A mass communications program should direct its messages to all its audiences, and it also should offer distinctive programming to distinct audiences. In the developing world, three audiences should be distinguished — the literate, the semi-literate, and the illiterate.
4. Communications programs should have at least these objectives: to inform and motivate; to legitimize innovations; to promote discussion; to neutralize false rumor and, in general, to correct misinformation.
5. Communications programs should be sustained, varied and coordinated.
6. The communications organization should contain a research section capable of analyzing and evaluating audience response and of conducting studies directed toward heightening program impact.
7. A communications effort should be based on tested principles of persuasion and the psychology of motivation.

These goals, principles and organizational proposals apply to a comprehensive communications program. But they also apply specifically to radio. When using this intimate medium, programming which incorporates variety, audience feedback and attention to the local scene is of crucial importance. The goals of an overall communications program are similar to those of radio programming. None of the goals are outside the capabilities of radio.

Do's And Don'ts

Radio has already caught the attention of some family planning administrators. In the Philippines, Kenya, Ghana, India and Iran, radio is being used to create an awareness of family planning concepts and to validate their importance. Nowhere, however, is radio's full potential being utilized to educate and motivate people, to legitimize contraception and to eliminate social and emotional barriers to family planning.

In preparing radio programming for family planning, the communicator must always remember that his fundamental purpose is to persuade. To effectively persuade people, he must

be aware that he is selling a set of ideas that may be new to his audience and advancing a system of values that may oppose ancient traditions.

He must think in terms of sustained programming. The radio campaign must contain elements that are similar enough to reinforce their separate impact. He must be aware of saturation levels — intensifying his efforts in productive directions — without going beyond them. He must function in accordance with the principles and techniques of persuasion.

An informational message must capture attention, especially when the message is new and cannot ride on previously aroused interest. It must be presented in stimulating and interesting ways. Frequently, this will require that the message be packaged and broadcast inside an envelope of entertainment. However, entertainment must not be overlooked as the vehicle of persuasion merely because the cause is vital.

Listeners must not be preached to or treated as if they were in a classroom. Approaches of this kind should not be excused on the grounds that the message is "good" for people.

Consideration should be given to the use of humor, both as entertainment and as a genial setting in which to transmit messages. Because messages about family planning concern a range of man's most intimate activities, humor must be used in a tasteful manner. Consideration should be given to what a given audience considers to be funny, an understanding that can be provided by the regional, locally-oriented communications units already proposed.

Other tested techniques include the use of incentives — prizes, lotteries or contests — to help attract attention to the message and to the campaign.

Many messages, perhaps even most of them, should conclude by urging members of the listening audience to take action. In the market parlance of the salesman, they should "ask for the order." The communicator must present this course of action in a favorable light — as beneficial to those who will carry it out, as approved by society and the local community and as easy to do. The communicator must know that the action can be done and that supplies and services are ready and waiting before he urges people to make use of them.

Some messages or some parts of the campaign may be directed to a nation's entire population or to members of a group that speak a particular language. The advantages that come with messages addressed to large numbers must not distract a communicator from the importance of regional and local programming.

As inclined as he may be to fire his shotguns, he must also make use of the rifle.

He must not lose sight of some segments of the population, often small and sometimes remote, which can be reached best by programming designed specifically for them. He must also consider other audiences — linguistic islands, religious communities, professional groups, trades and crafts, members of distinct cultures — that should be reached.

In determining the content of special programming, a communicator must ask himself a number of the following questions:

1. Who is the audience?
2. What message is to be sent to this special group?
3. Does this audience want to know this message? Will its members be receptive or resistant to it?
4. What styles of information are they accustomed to? How complex can the message be?
5. How can this message be framed to attract their attention and interest?
6. Which of the family planning benefits will be more appealing to them?
7. In what ways can these benefits be brought to their attention and made clear to them?

These questions are not completely independent of one another. The answer to one question may lead naturally to another answer. These questions should serve to stimulate research on listening habits and on the various audiences that a radio campaign in family planning is attempting to reach. Audience research is an essential preliminary to any communications effort, and especially to radio.

Audience Research

Finding out the characteristics of the radio audience or audiences will involve extensive research. It will require assem-

bling all available data on audience reactions and listening habits.

Ethnic and cultural characteristics of a population and its social and economic situation will likely have been analyzed during the establishment of base-line statistics for the overall family planning effort. Previous studies should be examined when a broadcast communications program is under consideration to see if information is available in the following areas:

1. Characteristics of the basic cultures.
2. Languages used and where used.
3. Religions in the broadcast area, their distribution and attitudes.
4. Levels of education among listeners and the structure of the educational system.
5. Demographic characteristics of listeners, t h e i r distribution and densities.
6. Social and economic characteristics of listeners, including occupations, trades and average income levels.

In many cases broadcasters themselves will have specific information on the potential and actual size of audiences and their characteristics and habits.

Some available data — depending on the country and the sophistication of its broadcasting organizations — will help the programmer to evaluate program objectives against potential audiences. Statistics in the following areas will probably have been collected:

1. Estimated number of radios and their distribution by geographical areas.
2. Estimated distribution of radio receivers by income levels and other social and economic criteria.
3. Areas covered by broadcast stations.
4. Audience listening habits — derived from surveys or informed opinion in the absence of precise data. Such information should indicate the following:
 - Total audience availability by times of day;
 - Audience availability by sex, age and occupational groups; and
 - Audience preference for types of programs, broken down into groups according to sex, age and occupation.

Basic data of this kind is available in countries where commercial radio broadcasting has evolved as a prime advertising medium. Where there is a fair volume of commercial broadcasting — and some commercial use of radio occurs almost everywhere — sources such as advertisers and advertising agencies will have information on audience availability and listening habits.

Where much of the volume of advertising concerns imported goods, it may be useful to contact advertisers or agencies in the countries exporting goods.

When all available statistics are assembled and analyzed, it will be possible to weigh the objectives of a radio campaign — directed toward both general audiences and special audiences — against a number of factors. These include program styles . times and frequency of broadcasts . . . stations to be used . . . languages required . coordination with other media efforts and with other family planning action programs.

Media Evaluation

Evaluation of media can be made using the following questions as guidelines :

Facilities and Coverage

1. How many transmitters are in operation?
2. What is each transmitter's power and how far do its signals reach?
3. How many receivers are there?
4. How many are privately owned?
5. How many are public receivers?
6. What proportion of public receivers is working?
7. What languages and dialects are used in broadcast areas?
8. What is their distribution?
9. Do tariff barriers hinder the import of radios and transmitting equipment?
10. If they do, are efforts under way to lower the tariffs?
11. How big is the estimated audience or audiences?

Timing

1. What are the most popular programs?
2. What size are the audiences at different times.
3. What is the best time to transmit messages to men?
To women?
4. What season is best?
5. When a message urges a visit to the clinic, has it been coordinated with the availability of clinic services? With the timing of a major campaign?

Program Evaluation

The following questions will help the communications unit in deciding on program approaches they will use:

Programming

1. How much centrally-produced materials are used by regional transmitters?
2. In what way is it necessary to modify centrally-produced materials to suit regional needs?
3. How should programming vary for the men who listen outside and the women who listen inside homes?
4. What kinds of prototype materials developed in industrialized nations would be helpful in less developed nations?
5. Would broadcasts of international sporting events, for example, be attractive to audiences in India, the Philippines or Uganda?
6. How can information on contraceptive methods and the advantages of family planning be inserted into news broadcasts, question and answer programs, religious programs, educational programs, or programs of folk songs, music and drama?
7. Are satisfied users, both men and women, asked to provide testimonials? How often?
8. How are special events programmed?
9. Do women's listening clubs exist? Where are they and how many?

10. How is a new contraceptive method introduced if programming is coordinated around such events as a Family Planning Week or an intensive drive month?
11. Is there any conversation radio?
12. Is radio used in schools?
13. Is sex education or population information ever heard on radio?
14. Does radio offer adult education?
15. What subjects are covered?
16. Is family planning inserted into agriculture extension education programs? If so, how is it done?

Content

1. If most radio listeners are men, should emphasis be placed on male methods, such as sterilization or the condom?
2. Should the male be asked to encourage his wife to respond?
3. Who are the gate keepers, the important leaders of opinion?
4. How do opinion leaders transmit information and to whom?
5. Should radio programs explain contraceptive methods or tell where services may be obtained?
6. Or should programs emphasize the benefits of family planning?
7. How often must program content be changed?
8. Are skits and gossip sessions more influential than talks by government officials or other important individuals?
9. Is one type of programming better at one time, the other at another?
10. How is content on contraception de-personalized so that listeners are not embarrassed?

Research

1. Is media content evaluated?
2. What is the people's attitude toward radio?
3. Do they generally trust government recommendations?

Chapter III

PLANNING THE RADIO CAMPAIGN

In addition to its use as a medium of entertainment, radio has become an important means of reaching large audiences, at relatively low costs, with information concerning the public welfare. In fact, radio provides entertainment that builds an audience to whom substantive information can then be transmitted. Consequently, radio has gained almost universal acceptance by broadcasters as a medium which can and should serve the public interest.

Acceptance of this responsibility on the part of both government and private broadcasters opens the door for using the medium to convey information on family planning.

The communications unit staff should decide whether to use radio in the family planning communications program. This decision may be easier to make by keeping some of the following points in mind.

By using a variety of program and announcement techniques, radio producers and script writers can meet the needs of most people to know more about family planning. Radio spots can also be used to encourage people to participate in family planning. Radio messages can create curiosity and inquisitiveness in listeners. Constant repetition of family planning messages, with subtle variations, can greatly reinforce interest and increase the effectiveness of persuasion.

The use of radio in family planning communication programs should be examined at five different times during the adoption process — or the process whereby innovative behavior is adopted. Radio should be considered at the stages of awareness, interest, evaluation, trial and, finally, adoption.

In the campaign's opening rounds, radio concentrates on answering questions and removing doubts. Radio has a great capacity for countering hostile opinions. It is effective at controlling rumors that would otherwise keep people from acting upon a message that they are soon to receive.

Once a listener's interest is aroused, he will seek to compare notes with his close friends, neighbors and relatives. He will wonder what the leaders of his community think. These are responses to an essential psychological need for social approval of innovative behavior.

"Legitimizing" broadcasts serve a useful purpose in family planning by helping to change group **attitudes** and by helping groups to arrive at collective decisions.

An audience will listen with respect to influential leaders and technical persons, particularly doctors, nurses and health workers — as well as messages from satisfied users. However, care should be taken not to confuse respect with interest.

When presenting the advantages and disadvantages of controversial questions, **voices of authority** and those of respected persons can be very effective.

If a respected authority comes out positively in favor of a particular family planning method, the credibility of that method can be enhanced through radio publicity. Research has shown that people tend to **believe** what they hear on radio.

When the listener reaches the fifth stage, and is ready to adopt the practice of family planning, radio should sustain his interest by publicizing success stories. Experience verifies that success tales will have more impact if they include the names of local satisfied users. Specific examples also help to convince those who have not been able to reach a decision.

Steps in a Radio Campaign

Once a decision has been made to use radio, several ques-

tions need to be answered. What stations will be used? What will be the proposed schedule of programs and announcements? What kind will they be? How can the communications unit establish liaison and working relationships with the broadcasting organizations and their staffs?

The family planning communications staff will need to consider the following steps in starting a radio campaign:

1. Analyzing basic research data on radio stations and the listening habits of their audiences in order to select the stations that will be used to reach the target audience.
2. Establishing liaison with radio stations to determine the extent of their cooperation in furnishing time for programs and spot announcements and in extending professional production assistance.
3. Establishing contact with other organizations to establish the extent of cooperative help available — such as guest appearances of family planning experts and others and insertion of family planning material into programs on related subjects.
4. Determining the types of programs to be produced.
5. Formulating a tentative broadcast schedule — times and frequency of programs and announcement of broadcasts.
6. Estimating costs of production and time for radio stations when it is necessary to buy time.
7. Establishing the communications budget.
8. Planning, writing and developing the programs that are to be broadcast.
9. Devising, planning and arranging for guest appearances on other programs and the writing of material for insertion in related programs.

The writing process will be continuous. First, there will be writing scripts for spot announcements. Then casting — selection of actors, announcers and participants. Preparing final program scripts. Preparing final broadcast schedule. Rehearsing. Actual broadcasting or pre-recording on tape for later playback.

For any program or announcement series, material in final form must be prepared sufficient for several weeks broadcasting in order to avoid last minute crises. It is a rule of thumb in

the broadcasting business to have on hand a 13-week backlog of programs. However, this may not be desirable in all cases.

In most cases, non-commercial government radio stations have been set up specifically to provide information, education, entertainment, and, in general, to serve the public interest. If the government is involved in family planning and the broadcasting authorities are supporting family planning, good time periods for programs and announcements should be readily obtainable. Non-commercial station personnel may also provide advice and assistance in production.

If the broadcasting system is commercial, whether it is operated by the government, a quasi-public entity or by private interests, the management — in recognition of its public service responsibilities — should still provide a measure of cooperation.

Communications unit staff members should not rely on free time alone. It may be necessary to buy time for a desired schedule of programs and announcements. Commercial radio stations will naturally have less time available in what is considered "prime" time.

Where there are both government and commercial broadcasting systems in operation, the purchase of some radio time may still be desirable in order to reach a particular target audience or to get the highest general listenership available. An example of this would be purchasing spot announcements in a popular women's interest program. Basic research data on listening habits will provide a guide as to whether such purchases are recommended.

Professional advice and help can be sought from radio stations and other assistance will be available from persons outside the family planning program. However, the professional staff within the program will have to determine the target audience, the message content and type.

Target Audiences

Those who will hear family planning messages will include many more listeners than the users or potential users of the program's services. Among the categories of persons to whom communications might be addressed are:

Decision Leaders Of All Types

- National
- Local
- Political
- Religious
- Industrial
- Traditional
- Other secular leaders

The General Public

Special Groups

- Military
- Industrial or labor organizations
- Recently married couples
- School children
- Women's organizations
- Recent parents
- Civil servants

Staff Personnel Of Special Interest Agencies

- The family planning program
- Other family planning agencies
- Personnel of other community development agencies

Members Of Professions Central to the Program

- Doctors
- Nurses
- Midwives
- Paramedical personnel
- Sub-professionals who are especially concerned

Educators

- Trainers and educators of professional and sub-professional people in health, medicine, welfare, education and community development
- Primary and secondary school teachers and administrators

Message Content

Family planning messages will be as varied as the program objectives and the audiences to be reached.

The general public will require specific information about the what, why, when, where and how of family planning. Material about family life and sex education broadcast to schools will naturally have a different slant than that intended for the general public.

Those who are professionally oriented will want more technical information on such subjects as the implications of population growth for economic development . . . trends in other countries . . . benefits of family planning both for families and the economy. Messages about demography, health and welfare implications of family planning, contraceptive technology, and the role and responsibilities of particular professions can also be directed to professional people.

It will be important to use the vocabulary of a particular group when its involvement is sought. Careful thought must be given to the language directed at any audience. Each audience must be addressed in its own language or dialect. In addition, the speaker must choose his words carefully to express the concepts. Unless close attention is paid to words, concepts involving the IUD, condoms, pills, pregnancy, conception and sterilization will not be understood. Controlled field testing of the words selected will ensure comprehension and acceptability.

Program Types for Family Planning Messages

Most program types and formats have become universal and tend to attract the same audiences wherever they are broadcast.

Family planning messages can be "built in" to traditional broadcasting formats that are now in use. Numerous opportunities will arise to give materials a "family planning bias" and to insert family planning messages.

Regardless of the format used, the audience characteristics must be assessed. This applies when programs are produced specifically for the purpose of carrying family planning information when a working agreement to participate in an existing series is arranged . . . or when family planning announcements are placed in or adjacent to an existing series. The communicator must know the audience that listens to particular radio stations, to particular programs and to programs in adjacent time slots.

Types of programs that are broadcast almost everywhere include the following:

- Agricultural
- Child care
- Health and hygiene
- Beauty and household aids
- Sports events
- Special events
- Women's and children's features
- Comedy hours
- Dramas
- Music
- News
- Documentaries
- Magazine programs
- Interviews
- Panel discussions
- Quiz shows
- Audience participation shows
- "Opinion Please" types of shows
- Trading post and swap shop
- Your school teacher speaks (your priest speaks, etc).
- Storybook hour
- Holiday programs
- Unusual facts or "Believe-it-or-not" programs
- Careers programs
- Job Mart
- "Doctor know-it-all" (health and family planning questions answered)
- Mobile movie schedule announcements
- Fair and bazaar programs

Titles and terminology may vary around the world and program material of one type may be included or combined in an unexpected category. However, most of these program types already exist in nearly all countries.

In addition to the various types of programs which can carry family planning content or family planning themes, the spot announcement offers a flexible and efficient means of reaching target audiences.

By definition, a spot announcement can be "spotted" anywhere in a radio station's schedule. Its characteristics are:

- Short self-contained messages that are independent of the content of the program in which they are placed or to which they are adjacent.
- Generally broadcast during "station breaks" — the intervals between programs — or in programs that have been developed especially as vehicles to carry spot announcements.
- Concise "selling messages" that generally run 10, 15, 20, 30 or 60 seconds in length.
- "Spotted" in and around programs with known appeal and a wide audience, often during prime broadcasting time.
- Relatively inexpensive to produce.
- Broadcast frequently and repetitively to reach a wide audience on a saturation basis; or with varied content and selective scheduling, they can be broadcast to reach specific target audiences.

When spots are purchased on a commercial basis, the rates are, of course, lower than for program segments.

The broadcasting of spot announcements is used widely by radio stations to discharge their public service responsibilities. Such messages cover national, regional and community affairs; information for the public welfare; and announcements of events, goals and campaigns of government, quasi-public organizations and private foundations. Spots thus constitute a ready place for family planning messages.

Some specific suggestions for the writing, production and use of spot announcements in the family planning communications program are set forth in a following section.

Chapter IV

PRODUCTION OF RADIO MESSAGES

The family planning communications staff will have to conceive, develop and prepare the materials for radio programs and spot announcements in coordination with other media and activities in the family planning action program. Because radio uses the human voice, it is endowed with a special kind of intimacy and has a good deal of power to influence and sway its audiences. This personalized nature makes it imperative that the communications staff understands the audience and the other elements of the family planning program.

Spot Announcements

Spot announcements are a logical starting point in the radio campaign because of their flexibility and relatively low production cost. Another advantage is the few materials needed to produce a spot.

Among the effective uses of spot announcements are:

1. To sell things and ideas. People dealing with public service broadcasting have learned a great deal from commercial broadcasting which uses spot announcements quite successfully for advertising.

2. To inform listeners of upcoming events or programs.
3. To tell them where they can find information they may need.
4. To promote programs that will be heard at another time on the **radio station**.
5. To try to convince people of the truth of a viewpoint or policy.
6. To reach people who are not usually interested in the subject and adults and young people with limited education.
7. To urge action. However, it must be remembered that spot announcements over a short time span are unable to touch deeply a listener's imagination, his emotions, or his intelligence.

In preparing and writing spot announcements, the following should be considered:

- Talk about something that is easy to talk about.
- Talk about something specific.
- Talk about something the listener will find interesting and useful.
- Offer to help the listener in some way; offer to provide something free which the listener will find valuable; offer information to the listener upon which he **can act to** further his own self-interest.
- **P r e s e n t** only one subject, one single idea in each spot.
- Present information clearly and simply.
- Use an attention-getter. It is important to catch the listener's undivided attention in the first few sentences.
- Attempt to motivate the listener by providing reasons or ideas that cause him to want to take a certain action. Ask for specific action — "ask for the order."
- Prepare spots with the listener's point of view in mind.
- Keep the listener's attention span in mind while preparing spots.
- Be concise, precise and move quickly from one point to another.

Points to Remember

- Spots are effective because they do not require a long

attention span. The message is over before the listener has a chance to become bored.

- Spot announcements can be repeated many times and so may be remembered more easily.
- A short item has a lot of power if it speaks of only one subject.
- Radio stations can often find a space for a spot announcement when they cannot find time for a whole program or longer announcements.
- Spot announcements usually cost less to make than other forms of radio communications.
- Spot announcements can be read by announcers who have no opinion or feeling about their content or subject matter.

Generally speaking, spot announcements will last 10, 15, 20, 30 or 60 seconds in accordance with time availabilities set up in commercial practice. Another category of spot announcements which can be utilized effectively is the 60 to 120-second spot. In this type of spot a respected authority can present specific information. These miniature programs or vignettes can present material of vital concern to a particular, specific listening audience. For example, a nationally known physician might make a series of short talks on contraceptive technology, reproductive physiology, general female hygiene or sex education.

Time availability and positioning in the broadcaster's schedule should be checked before these longer spot announcements are produced.

Samples of radio spots appear in Appendix III.

Radio Drama

Radio dramas have been aired in a wide variety of forms from simple, "once-upon-a-time" tales appealing mainly to children to complex, contemporary plays appealing mainly to sophisticated urban audiences. In most radio dramas, a story is told, conflicts are generated and resolved.

Narrative drama must involve a story that is told skillfully if the listener is to identify and empathize with it. If a drama presents family planning concepts to a target audience, and if

the drama is good enough to excite intense audience involvement, then the listeners are getting information in the most potent possible way. If the listener can experience the feelings of the people in the drama, he can come to understand his own feelings and change his behavior in ways suggested by the radio program.

Some questions that should be asked about all radio programs — but specifically about drama — are these:

1. Why should the listener know what we think he should know?
2. Why should the listener act in the way we are suggesting?
3. Will the listener really benefit from behaving as is suggested?
4. Is the presentation of the drama honest?

The writer of the radio play must adapt the principles of dramatic writing to the special characteristics of the radio medium. Radio rightly has been called the "theater of the imagination." This is because the mind of the listener provides the radio drama with its physical setting. The radio playwright has no restrictions on place, number of characters, kinds of actions or movement of time. A radio scriptwriter can take the audience anywhere and make his characters do anything. He can create mental images of infinite variety, as long as these images are within the imaginative capabilities of his listeners.

Some of the basic principles of writing radio dramas that the writer should keep in mind are described below.

Unity:

Unities of time and place need not be respected in radio. Radio may present a character in his living room and a split second later place him in his office in another part of town. The writer must remember not to restrict his own imagination by what he can "see." Radio has no physical space limitations. And yet no matter how loose the unities of time and place, the radio play must observe unity of action. It must have a consistency and wholeness of purpose and development within the script. Each sequence must be integrated thoroughly with every other sequence, all contributing to the total effect the writer wishes to create.

Plot:

The plot structure is based on complications arising out of relationships of the individual or group to other forces. This is conflict, when two or more forces come into opposition. The nature of the conflict must be defined quickly, for the dramatic structure follows from and is built upon this element.

A second principle of plotting calls for the introduction of a series of complications or crises. Each one should create further difficulty in relation to the major conflict, each building in relation to the major conflict, and each building to a crescendo so that each episode moves closer toward a final crisis. The climax occurs at the instant the conflicting forces meet head on and a change occurs to or in at least one of them. One force wins and the other loses. The drama may end at this moment. Sometimes, however, a final clarification is presented if some elements of character and plotting remain mysterious after the climax. This remaining plot element is called the "resolution."

The plot structure of a radio play can be much like that of a stage play. Exposition, conflict, complications, a climax and, if necessary, a resolution must be set forth clearly. The radio play should create the suspense that holds the interest of the audience. However, time limitations usually make it necessary for the writer to concentrate on only one plot line and to avoid all sub-plots.

Character:

In modern drama, character is the prime mover of the action and determines plot and dialogue. And yet character must be revealed through action. What the characters do and what they say determines who they are. Character is delineated most effectively by what the individual does at moments of crisis. This does not imply physical action alone, but includes the concept of inner or psychological action.

Characters must be consistent throughout the play, and they must be plausible in terms of life and reality. However, this does not mean that characters must be replicas of real persons. A slight exaggeration is suggested for dramatic effect and to intensify character definition.

Characters on radio must be as valid as those in a stage play. Rules for their creation and development apply just as fully to radio as to the theater. The time limitations of radio make it impossible, however, to deal with character in depth even of the most important roles.

It might be expected that since you cannot see what a character does on radio, you can determine his character only from what he says. What he does might not be considered as important in describing the character. Experts say this is not so. Character is revealed on radio, also through what the actor does. The difference between radio and the stage and television is that although in radio what a character does is not shown visually, his actions are presented through sound effects and dialogue. Therefore, the writer should limit the number of characters in the play and in each scene for the sake of clarity. Too many voices may confuse a listening audience.

Dialogue:

Whether dialogue should be realistic or poetic is debatable. Either way, however, dialogue must be "dramatic." A play does not duplicate the exact action of real life but heightens and condenses such action. Likewise, dialogue also has to be heightened and condensed rather than duplicated. Dialogue must consistently conform to the personality of each character. It must also move the action along as well as describe characters and changes in the plot.

Most importantly, dialogue in radio should not be artificial. Everything on radio is conveyed through speech, sound effects, music or silence. These four elements are "all there is" to radio and radio drama.

Exposition:

The background of the characters, their situation and the clarification of present circumstances will come out as the action carries the play forward. Such revelation must not be intrusive; it should form a natural part of the action. Such information should not be engineered through obviously artificial devices

such as a telephone conversation, instructions to a servant or the gossip of a next-door neighbor.

Because the audience can't see the characters or settings, a good writer will clarify these elements of the radio play very early before any important action takes place. To do this, radio often uses a narrator to set the scene. A narrator can be independent of the play or can be an integral part of it.

Setting:

Radio presents the writer both with limitations and potentialities in the matter of setting. The writer cannot present a visual setting which provides at a glance an environment and atmosphere for his characters. This must be done by means of sound. Conversely, the radio writer is limited only by the imaginative potential of his audience. He can place his listeners in any setting he wishes. However, the mental picture he creates for his audience must be the right one for the play. Locale and environment must be believable for the characters and situation and must serve the psychological and esthetic purposes of the author.

Movement from setting to setting may be accomplished through silence, fading, narration, a music bridge or sound effects. Again, too much movement may prove confusing. Caution is recommended.

The radio audience cannot select the elements of the play by which it is to be stimulated. These are orchestrated by the author. The radio writer can deal with circumstances that strike close to the emotional needs and desires of his audience. He can use emotional stimuli to activate the intellectual concerns of his audience as well as to manipulate their feelings.

In writing for radio, several special technical considerations should be kept in mind. Sound effects or music combined with speech clarify movement, setting and action. The writer must be certain that he uses sound effectively and sufficiently for the purposes of his play. Entrances and exits should be made clear through sound.

Music and sound effects should be integrated with the action of the play, and each of these effects should be indicated clearly on the script at the precise moment the effect is needed.

The play must fit into a time period and individual scenes must be tailored accordingly. As a rule, single speeches should not be long.

Radio plays to promote family planning are being used in many countries such as Pakistan, India, Guatemala, Tunisia, Korea, Taiwan, Singapore and El Salvador.

The Soap Opera

A soap opera is a serialized drama usually consisting of many episodes and ordinarily broadcast once each day over a long period of time. The name comes from the many dramatic serials that have been used successfully by manufacturers of soaps and laundry detergents as vehicles for advertising. Some of these have run for years, keeping a loyal audience of housewives and providing a highly effective vehicle for commercial announcements.

Dramatic serials have also been designed and used, generally on a once-per-week basis, to capture a general audience.

Soap operas are generally aimed at the woman at home in competition with her heavy household schedule. The drama provides situations with which she can identify and in which she can find a vicarious excitement. The settings are familiar to her: the household, the doctor's office, the school, the small village, the large city. The characters are people like those she knows, or like those she thinks her friends know.

The writer can achieve a sense of familiarity by developing his characters with simple and direct motivations. The housewife, for example, will have to protect her handsome husband from the woman next door . . . the owner of the farm must guard his crop from the poorer farmer next to him . . . the kind old woman who somehow gets the money for her operation.

Characters should be distinct persons, allowing for no confusion. One way to avoid confusion is to limit the number of characters. A typical soap opera will be constructed around a cast containing a heroine, the "other man" or "other woman," the young man or young woman (or teenagers or children), a villain or villainess, interested and well-meaning relatives or friends, including the kind old judge and the maiden aunt.

Except for the villains, the major characters must always be sympathetic. The "good" people must always vanquish the "bad" people. Even age is a factor. The hero is usually middle-aged, the heroine a bit younger.

In the development of plot structure, it is important that characters be provided with opportunities to get into a variety of trouble. They will face problems that the listener conceivably could face. The issues must be melodramatic, basically real and valid, but exaggerated slightly beyond the probable real-life situations of most of the listeners. This gives the housewife-listener the opportunity to sympathize with people who are worse off than she. The soap opera viewer usually considers herself to have a similarly large number of troubles. The listener should be able to feel that she is not the only person with problems. That somewhere she has "friends" and "compatriots" who come and visit with her for a little time. They are people who make her troubles seem lighter because they are worse off than she is.

The characters in a soap opera must be played emotionally, and this emotion must be conveyed to the listener. They must face almost insurmountable obstacles. Especially when protagonists are young people, they must face seemingly hopeless odds.

At the same time, the characters must have some experiences that are different in some degree from those of the audience. They must meet situations and find themselves in environments that to the listener are exciting or exotic. The characters' experiences should serve, in some way, as a means of escape for the listener who, through empathy, transports herself to the scene of the action. The characters should do some things that the housewife would like to do, but can't.

The plot, unlike that of conventional drama, should contain a number of sub-plots, all bearing on the major conflict. They should complicate matters almost beyond endurance for the protagonist. The only limitation to complex plotting is that it should stop short of confusion for the listener.

Because the housewife may not be able to give full attention to each episode each day — because of distractions or duties at home, the plot line cannot always be brisk and sharp, and it should not contain elements that always demand the full atten-

tion of the listener. The housewife should be able to miss several episodes and still be able to get back to the story. The plot should move at a "snail's pace" — as slowly as possible.

The soap opera never reaches a final climax. Conflict is clear and ever-present and unfolds imperceptibly. It develops through one minor event at a time. An unexpected knock at the door can be built into a minor complication lasting for weeks, even months. In each episode only a minute segment of action takes place. Consequently, there is little change. Time in the drama sometimes moves as slowly as the time of day. Rather than being a heightened and condensed interpretation of life, the soap opera is a slow, drawn-out, detailed report of life, stressing the sentimental and human elements. Over a period of days or even weeks, the action in the drama may cover only an hour's time.

The listener wants to believe that the characters are real, and that the events are happening as she hears them. Events should happen as they do in the lives of the audience: slowly, unemphatically, sometimes even undramatically. But to the listener each event should be of critical and extreme importance. This implies that the dialogue must be like that of real life: slow, melodramatic and non-dramatic, and barely moving the action along.

The writer should start each episode with a crisis or what seems to be a complication. This particular complication should be solved or should take another turn in the episode that it inaugurates, and the drama should level off. Before the program is ended, however, a new element of the complication should be introduced. Such complications may be insignificant happenings. A new crisis should be reached just as each episode ends. Each soap opera episode should wind up as a "cliff-hanger," forcing the audience to tune in to the next episode.

The writer should make good use of simultaneous action. Instead of concentrating on continuous action which would move the story along too fast to permit the slow development of sub-plots, the writer should switch frequently to different scenes involving different characters. These sub-plots all have bearing on the main conflict. And all of these actions occur at the same time.

In the continuous, complex unfolding of a soap opera, each episode needs a "lead-in." This is a summary of where the characters were in the previous episode.

Each episode also needs a "lead-out" attached to the "cliff-hanger" finish, in which the narrator heightens the suspense by asking what will happen in the next episode to the characters in their precarious situation. The most intense "cliff-hanger" should be that at the end of an episode preceding some interval in the broadcast schedule. An interval over a weekend would be such an example.

Checklist For Drama Productions

1. Do each of the sound effects serve a purpose?
2. Will the listener be able to easily identify each sound effect?
3. Does the music fit in with the mood of the drama?
4. Is music used only when it helps the mood and purpose of the drama?
5. Does the opening quickly catch the attention of the listener?
6. Are scene changes easy for the listener to understand?
7. Does the voice of each actor fit in with the kind of character he is playing?
8. Are the actors using the language of the target audience?
9. Is there true drama content to the production?
10. Does it tell a story?
11. Does it contain conflict, drama, movement and action?
12. Does the drama relate to the day-to-day life of the target audience so that listeners can identify with it?
13. Are the characters in the drama sufficiently real so that the target audience can empathize with them?
14. Is the life style of the drama related to the life style of the target audience?
15. Does the radio drama give "eyes to the listeners"?
16. Are there few enough characters so that the target audience is not confused?
17. Do the characters have personality so that each stands out as an individual?
18. In each episode — if the drama is written in episodes —

- is there an opening, a series of events, a climax and an ending with a "cliff-hanger" which causes the listeners to want to "tune in" to the next episode?
19. If the drama is a vehicle for a family planning message, does it actually contain such a message?
 20. Is it the message that the family planning communicators wish to impart?
 21. Has this message been incorporated into the drama in a subtle way so as not to interfere with the flow of the action?
 22. Can the message be understood by the audience?

Women's Programs

Aside from special or one-time broadcasts directed to women, the most common type of women's program is modeled after a magazine format. Individual segments divide the radio program similar to the way written articles divide a magazine. Each segment is devoted to housewives and women generally.

Such segments might include cooking, dressmaking, fashion hints, general housekeeping, child care, hygiene, beauty aids or women in the news. Such programs may be broadcast five or six times per week and would generally occupy about an hour at a fixed time during the day when women are most available.

However, instead of using the magazine format, some stations may schedule programs devoted to a single topic of interest to women. They may schedule them at various times and lengths. Other stations may use a combination of both approaches.

Writing and production of women's programs are generally done by women. Whether the program uses the magazine or the single subject format, on-the-air presentation is usually conducted by a female announcer who knits together the program segments and introduces and interviews guests who are either personalities or experts.

General experience indicates that women's programs develop a loyal audience of housewives over a period of time. In commercial broadcasting such programs have proven to be highly effective in promoting products that appeal to women.

Research data that has been accumulated indicates that women's programs have substantial listenership. Such data on local women's programs will offer some analysis of the audience being reached.

The media group in the family planning program probably should not produce a regular series of women's interest programs. Instead, media people will want to use these programs as vehicles for delivering family planning messages.

The following are hints for making the most effective use of women's programs:

- Schedule family planning spot announcements in and adjacent to women's programs.
- If a program in magazine format is available, arrange with the broadcasting organization, the producer and the on-the-air announcer to produce family planning segments to be broadcast at regular intervals.
- Work with broadcasters to schedule appearances of experts in the family planning field. These could include doctors, workers in the family planning program, nurses, midwives, experts, governmental authorities and satisfied users of contraceptive methods.

This "hitchhiking" activity will be a continuous effort and, of course, will apply to other kinds of programs as well.

One important point to remember is that women's programs in magazine format contain material on local news, local personalities and social and civic events and activities with an appeal that reaches many social levels. Therefore, these programs can reach audiences other than housewives. Many such programs endorse civic campaigns of interest to women and, therefore, provide an excellent way of promoting family planning services.

Interview Programs

A number of different kinds of interview programs might be considered for public service broadcasting. Each of them serves a different purpose. Radio interviews can be produced as a series in one style or in various styles, depending on who is interviewing and who is being interviewed. They are sometimes scheduled as one-time or special programs dictated by

events. At other times, interviews will be inserted into women's programs, "people in the news" programs or straight news programs.

Celebrity Interview

The celebrity interview — with a Prime Minister, a well-known physician, a popular singer or another outstanding personality — can also be used to carry a family planning message. The important thing, of course, is to utilize the celebrity's public image to command attention and eliminate boredom from the essentially instructive message that the famous person has agreed to deliver.

Personality Interview

This is different from the celebrity interview in that the personality may not be a well-known public figure. He or she is usually a person with an interesting occupation, or someone who has done something intriguing or unusual. This kind of interview can be used effectively for family planning messages. An entertainer might be interviewed because he has spaced his children as a matter of principle. A snake charmer, a fortune teller or anyone with an unusual background who has something to say about birth control can be interviewed.

Informational Interview

Every interview can bring information to the target audience. Some interviews, for example, one with family planning workers, would simply offer information, without the assistance of a personality or celebrity.

The information interview is usually broadcast in public service time. The information may be delivered by a relatively unknown person. In order to enhance and enliven the information to be presented, a complete script is sometimes prepared. The person interviewed may provide straight factual material . . . may deliver information oriented toward a cause or purpose . . . or may combine information with an expression of his personal beliefs. If a script is prepared, the writer must not violate the personality of the speaker. If the person interviewed is not

likely to be a performer, that is a good "reader," then it is better to prepare a script outline and rehearse the program as if it were to be an extemporaneous presentation.

Serial Interview

A series of interviews might be scheduled with people who are interested in the family planning program or who are officially connected with it. An interview series is usually a regularly scheduled program so that people will expect it. It need not involve only important people. Series of this kind have been popular, especially "man-on-the-street" interviews. When imagination and a little daring are used, there is no limit to the flexibility of interview programming.

Spot Interview

Interviews that take no more than three minutes can be used in the same way as spot announcements. In a sense, these snappy and often hard-hitting miniature interviews can function like longer spot announcements that are usually presented as a public service.

News Interview

Intended for use on news programs, news interviews consist of a series of questions asked by an interviewer and the responses, from which excerpts are selected for actual broadcast. Nothing will be used on a news program that does not have immediate news value.

Special Event Interview

A sporting event, conference, convocation, ceremony, religious festival or public holiday can become the occasion of a special event interview. Such interviews can be even more effective when the sounds of the event can be heard in the background. These are familiar to sports fans in the person of the "color" announcer who comes on during halftime or other intermissions to interview people related to the contest — stars,

owners and coaches. During an opera intermission, opera and music personalities are interviewed at the opera house with the hubbub of the crowd in the background or sounds of musicians tuning their instruments.

The Opinion Interview

The opinion interview is best exemplified by "man-on-the-street" programs. Any interview which concentrates on an individual's beliefs, whether produced in or out of the studio, may be called an opinion interview. Many studio interviews of this nature are with prominent people, usually experts in their fields. Such interviews might also be classed as information or even personality interviews.

Even when the "man-on-the-street" interview is conducted on an ad lib or non-rehearsed basis, the interviewer must have an introduction . . . questions he plans to start with . . . and follow-up questions he will ask, depending on the answers he gets to his lead questions. If the interview is to be taped, the person to be interviewed may be briefed before the recording starts. In the live "man-on-the-street" interview, prospective respondents may be gathered together and briefed before the program goes on the air.

The interview on radio may be prepared completely, with a finished script for interviewer and interviewee. Or it may be oriented around an outline, which lays down general line of questioning and answering but not the exact words. Or it may be completely unprepared or ad lib.

Rarely are interviews completely unprepared or completely scripted. The unprepared interview is too risky. On the other hand, a complete script usually results in a stilted, monotonous presentation except when both interviewer and respondent are skilled performers who can make a written line sound extemporaneous.

Most interviews are set up in outline. The interviewer and his staff prepare a sketch of the purpose of the interview and its form. They determine what questions will be asked on the basis of their knowledge or research concerning the respondent.

Before going on the air, the interviewer should know whether the respondent will be talkative, mike-shy or just plain dull. If the interviewer knows nothing of his interview subject, he may well be faced with an almost impossible task of organizing the flow of talk while trying to think up appropriate questions.

In order to ask his questions in a logical order, the interviewer must have an idea of the answers he might get to major questions he has developed. For this purpose, a preliminary conference or pre-interview is usually held, in which the respondent is briefed on the questions to be asked. In this conference, the respondent will indicate the general line of his answers. This gives the interviewer a better sense of what his answers will be, thus enabling him to arrange the general line of questioning in its most effective order, and to introduce his most probing questions at the dramatically correct moment.

Written material for the extemporaneous type of interview — and, for that matter, discussion program — usually consists of a routine sheet with a detailed step-by-step outline of the program — its opening and closing continuity, introductory material for each segment of the program and a list of questions and their answers as determined in the pre-interview session.

Occasionally, the interview subject will not be available for a conference before the interview. Then the interviewer and staff must guess at what the answers to their questions will be.

On other occasions, the subject is available for a conference and also appears at the studio for a rehearsal before the program goes on the air, thus solidifying the show while retaining its extemporaneous quality.

In all interviews — prepared, outlined or ad lib — the writer must establish at least the opening and closing continuity including introductory material about the person to be interviewed. The closing continuity should be prepared in varying lengths, in case the program runs shorter or longer than expected. The writer must make sure that in all interviews the proper introductions are made and the background of the guest is clearly presented. Except when the person being interviewed is well known, it is wise — in outlining the order of questions — to begin with questions of a human interest nature so that the audience has an opportunity to become acquainted with the guest.

Discussion Programs

The discussion program is oriented toward the exchanging of opinions and information and, to some degree, the arriving at solutions, actual or implied, of the problems under discussion.

Sometimes complete scripts are written by a writer in collaboration with the participants. To achieve spontaneity, however, it is usually better to work with no more than an outline that indicates the general form and organization of the discussion. The outline should be given to all participants so that they may plan their own contributions in accordance with the general format.

The writer should indicate in the format the issues to be discussed, the order in which the discussion will take place and the time allotted on each point or for each participant. If possible, each participant, in consultation with the writer, should prepare a statement of his views. This provides for a pre-performance exchange of ideas and a coordination of all participants' contributions toward a smooth, well-integrated conversation.

Just as too much preparation can result in a dull program, too little preparation may result in the participants being unable to cope with the split-second needs of a spontaneous program. Without planning among participants, there may also be unnecessary duplication of responses.

In the early stages of planning, a decision must be made whether to use a controversial topic and whether to promote disagreement among the participants. Both methods are good ways of achieving vitality and excitement in a program.

In any case, topics should be presented as questions, thus provoking investigation and thought. In addition, topics should be broadly oriented, preferably in terms of general policy. And they should not be so confined that they can be answered with a yes or no response or with obvious statements of fact.

The same principles apply to extemporaneous discussion programs as to extemporaneous interviews. Opening and closing remarks and introductions should be written out. General summaries should be prepared for the moderator. In some instances, a brief outline or routine sheet consisting of a summary of the

program and a listing of the topics to be covered may be sufficient.

Several major types of discussion programming have been widely used on radio. They include the symposium, the panel discussion, the group discussion and the debate.

The Symposium

The symposium gathers together several persons who have individual and distinct attitudes about a given problem. Each participant is allowed a set period of time to present his ideas, usually in the form of a prepared statement. After all participants have presented their views, members of the audience are urged to put questions to any or all members of the symposium. During the question period, the participants may also question each other and exchange ideas. After a specified time, audience participation is terminated. Then each participant is permitted a second time period to sum up his viewpoint.

The "routine sheet" or outline should contain the moderator's opening remarks, introduction of the participants, and time limits for the prepared statements, questions from the audience, participants' summaries and the closing for the program.

Panel Discussion

A panel discussion, sometimes called a round table or radio forum, is one in which three to six people talk and exchange views around a microphone.

A good panel discussion can: 1) Answer important questions in an interesting way; 2) lead listeners to think about different viewpoints; and 3) present several people working together to try to find solutions to a problem.

The subject matter of a panel discussion must be meaningful to the target audience. Therefore, the characteristics and tastes of the target audience must be kept in mind. When the target audience is concerned with the problem or subject matter under discussion, they may identify with panel members. And perhaps even adopt one of the points of view presented in the discussion.

A general axiom states that a panel discussion is only as good as its moderator. The moderator is the person who:

- Directs the discussion.
- Makes decisions **a b o u t** how much time is allocated to each subject.
- Keeps the discussion moving and keeps order and balance so that no one panelist takes too much time.
- Helps to draw **o u t** panel members when he feels a subject is not being discussed properly.
- Brings the panel to a close.

The moderator hopefully can elicit unexpected statements or reactions so that the discussion sounds natural and unrehearsed. He must be alert to capitalize on unexpected events.

Panel participants should be chosen with the needs, viewpoints and ideas of the listeners in mind. The following questions might be asked in selecting proper panel members:

1. Does he know the subject? (He does not necessarily have to be an expert.)
2. Does he know enough to ask good questions and bring ideas and information into the program?
3. Does he express himself well? Can he be understood by the target audience?
4. Is he concerned about the issues under discussion?
5. Does he identify with the audience, and would that come through in the broadcast?
6. Are his views balanced by those of other prospective panelists? Will his presence bring another point of view to the discussion? Care must be taken to see that the panelists present all important sides of complex questions. The discussions must not develop into a mere set of agreements or become expressive of the same point of view.

The following points should be considered when preparing for a panel discussion program:

1. Make a list of informative points that panel members can present to the audience.
2. Arrange these points so that the discussion follows a logical and sequential format.

It is important to consult in advance with panel members

so that they can help to plan the program in light of its objectives. The participants should be given an idea of the questions that will be asked. At this time, they should tell the moderator what comments they intend to make. Out of this exchange, an outline will be developed to serve as a guide for both panel members and moderator.

In preparing panel members for the broadcast:

- Indicate which subjects each panelist will cover.
- Try to arrange for some practice discussion before broadcast time. Keep practice sessions short to prevent the discussion from becoming stylized and losing informality and spontaneity.
- Suggest that panel members make notes about what they might discuss. The moderator should structure his notes so that he will be able to keep conversation moving.
- Suggest that panel members use names when addressing each other so that the listener will know who is talking. When the moderator questions an individual, he should address him by name.

The panel's conversation should be marked by quick transitions from one person to another so that the discussion is lively and no one person monopolizes it.

The tone of the discussion must be kept normal and natural. Opportunities for jokes, for laughter and for even sharp disagreement should be welcomed.

The moderator should direct specific questions to particular individuals. It is helpful if the moderator phrases a given question in such a way that his respondent has a few seconds in which to frame his answer.

Panel discussions sometimes are organized so each panelist is allowed to make brief statements that lead directly into the discussion. At other times, a short drama, a taped message or a statement by the moderator can be used as mechanisms for launching the discussion.

Group Discussion

A group discussion attempts to solve problems by means of the cooperative thought of all participants. Rather than attempting to impose viewpoints and taking opposing positions,

participants in a group discussion try to examine all materials relevant to the problem at hand. They then reach a solution acceptable to the entire group.

The moderator, who does not participate, guides the group discussion and sees that it remains objective. He also sees that all members participate, that none dominates and that the discussion does not move away from the subject. Each participant is provided with an outline containing the facts pertinent to the problem under discussion. This problem should be a broad one, and certainly too complex to be answered by a simple "yes" or "no." Prepared materials should include an outline of the opening, the introduction of the participants, some basic factual information and the closing.

Debate

A discussion involving two opposed sides of a question, one group taking the affirmative side, the other the negative, is called a debate. This form of discussion is, therefore, quite distinct from a panel and symposium, in which participants may take opposite stands but are not required to. In a debate, the participants devote all of their energies to building up their own arguments and destroying those of their opponents. A debate may be between individuals or teams of two or more.

A debate occurs in several distinct forms. Each side should be given a specified time for presentation of its initial argument and for rebuttal of his opponent's argument.

A prepared outline should cover the opening, introduction of participants, time limits for each phase of the debate, explanations and interviews, if desired, and closing.

Listener Participation Programs

There are many ways in which listeners can be involved in radio programs. Involvement is a useful technique for keeping the target audience interested in the subject matter of programs. When properly done, listener participation programs help the target audience to identify closely with the subject matter and individuals presented on the programs.

Question-answer programs are one example of audience participation shows. The name of each questioner is mentioned on the air. However, many such programs draw questions from audience letters. When this is the case, literate audiences are required.

However, illiteracy is not a hindrance when questions are recorded by a tape recorder. Such a program then becomes a "man-on-the-street" broadcast.

Audience participation may also be obtained by soliciting requests for music. A program of announcements, greetings or messages — on birthdays, for example — can be considered in this category.

It is now technically possible to use short wave radio for live broadcasts from outside the studio. This greatly expands the range of audience participation.

A series of broadcasts can be developed from off-studio locations such as village squares where ordinary people talk about life in their village. The target audience will continue to listen to such series so as not to miss the program about their own village. Broadcasts of this kind also create interest by inviting the audience to identify with other villages or towns and the people in them. Listener ratings for such programs are usually high.

News Broadcasts

When trying to incorporate family planning information into news broadcasts, the communicator must offer material which is timely, different, important and, of course, newsworthy. Stories should deal with **human interest** — including the bizarre; problems (such as food, health or sex) that contain conflict or suspense; or facts such as part of a speech.

In most countries, news programs have the highest listenership ratings. Family planning communicators should capitalize on this high listenership by generating family planning news stories and timely news spots. They should put their effort and money where the market is. If people listen to news programs, then planners must try to incorporate family planning messages into those programs. At the same time, they must remember

that exposure of family planning material on news programs is subject to the editorial judgment of the news editors and producers. Events and personalities in the family planning effort must be made newsworthy. Program communicators must develop a keen sense of which events are newsworthy, which ones can be made into a news story.

Magazine Style Programs

Programs based on a magazine style are similar to news programs because they deal with timely subjects. Magazine style radio, however, adds commentary and opinion to the facts surrounding a particular person or event. News broadcasts tell things as they happen; they are as objective as possible.

Magazine style programs deal with any subject matter — not necessarily at the time of the event — which has news value. Their impact does not depend upon the timeliness of the subject matter.

This type of program should be distinguished from others employing a magazine format such as women's and variety programs. Magazine style programs generally consist of news reviews and news features. Family planning materials might be more appropriately placed in magazine programs rather than in news programs since the magazine style allows more time for production.

Documentary Programs

Documentary programs deal with events in greater depth than either news broadcasts or magazine style programs. Subject matter can involve anything — historic events, cultural activities, biography or science. They can re-create events and duplicate history.

Documentaries can be used effectively for transmitting family planning messages. Communicators can insert messages into documentaries dealing with various aspects of population . . . food production . . . related themes such as unemployment or maternal health. Family planning communicators should know

what documentaries are in preparation in their area, so that the opportunity to use an appropriate vehicle will not be missed.

The media production group definitely should plan and prepare a documentary on the local family planning program. Such a documentary can include taped sessions on family planning progress in other countries with live commentary relating to the local family planning effort.

Music Programs

Music programs are more popular than many other types of programs. There are a number of reasons for this:

- Music is a part of every culture.
- Music attracts all audiences.
- Music is peculiarly appropriate to radio.
- Music programming takes little time and is usually inexpensive.

When utilizing music programs to carry family planning messages, it is important to pick out music programs which have high listenership ratings among adults. An effort should be made to incorporate family planning messages into such programs and thereby take advantage of the popularity of the music.

This can usually be done by broadcasting spot announcements between musical selections. Occasionally, however, media personnel may wish to identify a musical selection through its title or sponsorship by the family planning effort.

Music is frequently used as a signature theme for particular programs. Most soap operas utilize such musical themes. The audience quickly associates the program with the music.

Chapter V

GENERAL PRODUCTION SUGGESTIONS

In planning and producing family planning programs and announcements or in working with existing programs, a number of suggestions should be considered.

1. Reporting monthly family planning achievements provides a useful opportunity for a brief, innocuous mention of major family planning methods. This is one way to give publicity to the IUD or traditional methods **t h a t** have been ignored because of the publicity about the pills, as well as to indicate the popularity of family planning in the local setting.
2. News about important events in region, such as training programs, conferences, fairs and baby shows, can be broadcast regularly.
3. Prestige organizations and agencies might be persuaded to lend their names to testimony in behalf of family planning. Short "spot announcements" are suitable for this purpose.
4. Production of interviews should be undertaken as a major effort. Prominent citizens should be asked to talk about the advantages of family planning, the need for child spacing and the desirability of limiting family size. The interview technique can convey the importance

of family planning both to the individual and to the nation.

5. Special news broadcasts consisting of a combination of interviews and commentary should be prepared and aired. Emphasis should be on the **human** aspects of family planning. Field interviews with satisfied clients in all walks of life can be extremely effective while maintaining whatever anonymity the respondent may desire.
6. Sponsored programs on a commercial station can employ a variety of vehicles for family planning messages, including entertainment, education or a combination of the two. Family planning information might be presented within programs dealing with topics such as improving maternal and child health care.
7. Announcements should be made giving time and place of family planning clinics to be held in the coming days in the region.
8. Songs and poems may be broadcast provided that considerable care is taken to ensure that the content is in good taste and in the appropriate language.
9. **Care** must be taken to **avoid** identifying family planning messages with "**amateur**" productions.
10. Live interviews with family planning physicians, social scientists, child psychologists and field workers can be effectively employed.
11. Occasional dramatic plays and skits can be employed but quality productions are essential.
12. Answering letters from listeners can be a very effective educational device. This requires good judgment in the selection of questions to be answered and in the answers themselves, and also provides useful "feedback" to the audience.
13. Carefully selected slogans relating to specific field needs might be broadcast.
14. Experimentation with the use of **radio forums** should be encouraged. Organized groups in the community can listen to carefully planned family planning broadcasts

designed to stimulate creative discussion and decision making.

Audience reactions can be tested in advance of actual broadcast by playing pilot programs for selected audiences in special studios or meeting rooms. This program analyzer method is used to study and analyze radio programs during scheduled runs as well as on a pre-production basis.

During a test session, groups of listeners press "like" or "dislike" buttons to indicate their reactions to various parts of the program. Their responses are then recorded. After the broadcast, each listener fills out a questionnaire to determine comprehension, like, belief, recall, change in attitude, attention span and interest.

Not every program developer does these things, but those that do find the technique to be of great value in improving their programs. Once a formula or pattern for a program is established by this method, continuous broadcasting may be done in the format suggested by the testing.

Chapter VI

GENERAL WRITING SUGGESTIONS

The copywriter must become knowledgeable about the contraceptives to be promoted. He must find precise information, if available, about the men and women in the target population. A communicator must keep the message content simple, stressing one major advantage of a contraceptive. For the IUD, this may be its simplicity, reversibility, or low cost. For the vasectomy, the advantage may be permanence or the ease of obtaining the operation.

Too much information may be confusing. Each message should have built-in repetition. Key points should be repeated. These might include the name of the contraceptive, its primary appeal or where it can be obtained.

When preparing and scheduling radio material, remember that timing is crucial. Most commercial radio stations have different price structures for different times of the day. The rates usually reflect listenership. Don't buy price, buy listenership. The men usually listen to the radio in the evenings, while women listen during the day. Simple research will provide information as to the types of audiences at various times. Messages which have an immediacy and which are broadcast close to the time when services are available will have better impact.

A communicator's message will be more effective if the audience is stimulated to talk about the message when it is completed. And even more effective if the message concludes by asking for action. Direct the listeners to available contraceptive sources.

Use such action words as, "be there," "go," "use," "see," "come early," "try," "today," "while the offer lasts."

Refer to a well-known doctor or medical organization which has given his approval to the contraceptives being offered.

Simple slogans might be repeated, such as those used in India, "two or three . that's enough" or "next child not now — after three never." However, a slogan should be researched before its adoption, and the basis for selection should be what will appeal to the desired audience.

A regular musical theme or sound symbol might also be employed. This is sometimes called an audio instant identification device (audio IID). An example of this is the "boom-boom-boom-b-o-o-m" of the first four notes of Beethoven's Fifth Symphony that came to mean "victory" during the Second World War. This audio IID was recognized almost universally by the Allies during the war years.

An audio IID can become for radio listeners what the red triangle has become for visual media in India, Ceylon, Thailand, Tunisia, Morocco and other countries of the world where this symbol is used as the trademark of family planning.

Broadcasting this sound before and after the message will notify the listener that the message concerns family planning. Once a specific sound has been identified with family planning, it can be tied in with both the contraceptive service and promotion campaigns.

Constant repetition of a slogan and sound symbol will create awareness of the family planning effort and will provide a constancy and cohesion to the radio broadcasts built around it.

Elements of entertainment from the general culture might be usefully adapted to radio. For example, a group of people might have an extensive folklore about mythical or traditional characters such as Ali Baba, Punch and Judy or Hoja. Such folklore characters can be used in creating a whole series of radio programs to present family planning messages. Since the

characters are familiar and popular, the novelty of family planning ideas will be softened to some extent.

In a country such as India, where the red triangle symbol has been posted everywhere, it might be possible to convert the symbol into a personality and to use a triangle character in radio skits. Such a character might also be used in movie shorts and in other items.

Family planning communicators should not overlook the fact that private companies have large budgets for media research.

Manufacturers of soft drinks, razor blades, hand soap and margarine also have widespread experience in the use of radio in many countries and will probably have useful suggestions about how radio might best be utilized. Their research data on audiences reached, as well as audience composition and reactions, can provide valuable guidelines for the selection of program types and times and frequency for both programs and spot announcements.

It must be emphasized that every item in the total campaign — and especially in the radio campaign — must be planned, tested and used for a specific audience and objective.

Chapter VII

RADIO USE WORLD WIDE

Some countries are already using radio and television for achieving the objectives of family planning programs. Programs used range from those for general enlightenment to those containing specific information about methods and location of services.

Korea

In the Republic of Korea, radio has helped in creating awareness of the population problem and a desirable social climate for adoption of family planning. Radio has been used in three ways: to broadcast speeches of influential persons, to reinforce the motivation of contraceptive users and to make spot announcements in the "housewife hour."

Speeches were particularly useful in the awareness stage. Later on, spot announcements told people where to go for services and what kind of services they could obtain. Radio spot announcements were found to be very effective and inexpensive as a method of motivating women to visit the clinics.

An action research project was undertaken in 1960 by the Seoul National University School of Public Health to measure the effectiveness of different educational techniques. This study revealed that of the 12,838 women who came to clinics in re-

sponse to the different media, 38.3 per cent were influenced by mass media, of which 15.8 per cent mentioned radio. Those influenced by relatives, friends and neighbors amounted to 51.6 per cent. However, most people do not admit that they heard a message over the radio or another mass medium. They think all their information or knowledge comes from friends and relatives. Therefore, the effectiveness of communication media cannot be measured accurately by asking; it has to be inferred.

India

In India, the reported use and effectiveness of radio varies from place to place. One sample of 365 villages indicated 38 per cent of the male respondents had heard some information on family planning. Out of a total of 7,224 persons interviewed in this survey, 58 per cent listened to the radio.¹

In four villages, two near metropolitan centers and two in remote areas, 80 per cent of the respondents had been exposed to the radio.²

In a study of the Hooghli district of West Bengal, 37.3 per cent of the couples claimed to have radios in their houses, with 52.3 per cent of the wives and 72.4 per cent of the husbands listening to the radio. More than two-thirds of the women listeners remembered hearing something about the loop.³

Dr. Asok Mitra, director of India's Ministry of Information and Broadcasting, claims that "radio is a disembodied voice and in India is associated with the authority of the Government." A twelve-point program for India has been outlined by Mitra:

1. The most important requirement is selecting the language which approximates the dialect, vocabulary and turn of the target population. This is imperative if women listeners are to be reached and converted. The language should be the language of common speech. Any courtly or literary language will fail.
2. Acknowledged national leaders should stress that family planning must occupy its rightful place among national goals of growth and prosperity. Such broadcasts will

- help identification between a national goal and a private ideal.
3. These speeches by national leaders should be infrequent and reserved for important national occasions. More impact will be gained by finding a wide range of local leaders whose prestige transcends power and who will reiterate what national leaders say. These local leaders can be scholars, academicians, teachers, professionals, scientists, technicians, persons preeminent in production, particularly in farming and industry.
 4. Recording case studies on the spot can be most effective. These case studies should include failures as well as successes. In every case, the technical reason for the failure or success must also be recorded.
 5. Explanations of contraceptive methods should also be aired over the radio, first by technical and professional persons, then by persons using these methods. But these programs should form only part of a larger program of health education, extension, motivation and cultural orientation.
 6. Difficulties and complications that individuals are experiencing should be broadcast. These should be accompanied with expert technical opinion, in order to remove doubts and fears in the listener's mind.
 7. Round table discussions should be used frequently between technically-qualified persons and prospective users or persons likely to be motivated.
 8. At infrequent intervals a detailed explanation on contraceptives available and their effectiveness may be programmed on All India Radio at hours favored by women. Plan to broadcast when younger children are not expected to be about.
 9. Radio plays should be used because they are tremendously effective in generating awareness and motivating people.
 10. Technical persons, particularly doctors, nurses, midwives and health workers, should speak frequently on subjects of health extension and welfare.
 11. Present national problems in relation to private goals.

12. For rural programs, it is important to present favorably as many as possible of the new progressive cultural mores of the big or small city. Such presentations can have direct bearing on family planning methods.¹

Pakistan

The first attempt to study the potential of radio for the support of family planning in Pakistan was reported by Amin and Haider in October of 1966.⁵ This study, conducted in rural areas within 20 miles of Dacca City, was followed by a more extensive study in the Kushtia District of East Pakistan designed to secure information about the different characteristics of rural radio listeners and listening habits.⁶ Results of the Kushtia Study were most promising, revealing that only three out of 209 randomly selected respondents reported not listening to the radio at any time. The study found an average of 9.2 radios in each of 71 villages where interviews were held.

When Pakistan was created in August 1947, there were only three regional broadcasting stations with a total of 20 kw output. By the end of 1960, there were 10 broadcasting stations with 19 transmitters having a total power of 204 kw. At end of the Second Five Year Plan, in 1965, the number of transmitters had increased to 29 with a total of 665 kw power. By the end of the Third Plan (1970), it was anticipated that all of East Pakistan and 85 per cent of the people of West Pakistan would be covered.⁷

The study of family planning radio announcements made by Pakistan's National Research Institute of Family Planning attempted to learn about the listening habits of the people of Hyderabad District in the Sind Desert area of West Pakistan. The Institute also wanted to determine the effect of broadcasting a variety of short spot announcements about family planning services.

The announcements consisted of a brief musical passage; a conversation among various adults using colloquial language; an admonition to seek family planning services and announcements of where services would be available on the following

day. These announcements were broadcast five times a day throughout November 1967. The preliminary report of findings was derived from 300 random field interviews of rural and urban males and females and 941 interviews of patients coming to family planning clinics for IUDs during November and December of 1967.

Following are the major initial findings of the random interviews:

1. Sixty-seven per cent of all respondents reported that they listened to the radio.
2. About 25 per cent of all respondents did not listen. Lack of a radio was the major reason that males and females did not listen. However, lack of time was also an important factor for males only.
3. About 33 per cent of rural people listen in their homes while over 60 per cent of urban females listen at home. Urban males listen both at home and elsewhere.
4. Special rural programs and music were quite popular in the rural areas. Music was by far the most popular type of program for urban people. News, speeches and religious programs were preferred only infrequently.
5. Rural people tended to listen in considerable numbers throughout the day with a small preference for evening and night time hours. Urban men much preferred listening after 3 p.m. and urban women listened throughout the day, except between 3 and 6 p.m. when very few listened.
6. The median number of listening hours a day for rural males, rural females and urban females was three hours per day. The median number of listening hours per day for urban males was two hours.
7. As defined by the study, 58.8 per cent of rural males and 14.6 per cent of rural females were literate. Also literate were 67.8 per cent of urban males and 43.6 per cent of urban females.
8. Between 30 and 44 per cent of all respondents reported hearing the family planning messages. The average was 36.1 per cent of all respondents.
9. About one-third of rural listeners recalled hearing

dialogues and another one-third remembered hearing slogans. Almost half of the urban residents who heard messages remembered the dialogues and another 15 per cent remembered suggestions to visit clinics. It was evident that the November messages had been heard.

10. A total of 35.2 per cent of the people who heard the messages stated that they had talked to others about what they had heard. Rural females did the most talking in this respect.
11. Out of the entire sample, 15 per cent reported being told about the radio messages by others, of whom 3.7 per cent were not radio listeners. This means that the effective radio audience was extended from the 36.1 per cent direct listeners to 39.8 per cent of the entire sample who either heard the messages directly or indirectly.
12. A total of 14.8 per cent of those that heard the messages reported taking some kind of action as a result of what they heard. The most common action taken by women was accepting an IUD; by husbands, encouraging their wives to accept an IUD. Considerably more action was reported by rural respondents than by the urban. The total number of those who took action (20 out of 300 respondents) is equal to 6.7 per cent of the entire sample.
13. Of the 26 people who stated that they had acted as a result of a radio message, 14 claimed accepting IUDs, five said they tried conventional contraceptives and one did not specify the action taken.⁸

Honduras

A radio survey was conducted in Las Crucitas, a barrio in Honduras, during June, July and August 1968. Radio stations in nearby Tegucigalpa carried messages on family planning. Following the radio campaign, about 79 per cent of the women interviewed in the area reported they had heard over the radio about the health center in Las Crucitas as well as the San Felipe Hospital Family Planning Clinic.

Many of these women did not have radios, and they listened to the radio outside their homes. About three-quarters of the women interviewed mentioned that they had heard the family planning message over the radio on sound trucks in the area.

Taiwan

A special study was conducted in Taiwan to find the medium which could best reinforce face-to-face communication. The report indicated that radio is by far the most likely medium to reach women, especially the uneducated.

By the end of 1968, 23 of Taiwan's radio stations were carrying spot announcements and brief family planning skits. About 80 spots and 60 skits were being broadcast daily.

The following year a critical review of both radio content and timing was carried out. As a result of the review, emphasis was shifted towards lengthening the programs. Also, prime time was purchased at eight local radio stations during the daily "Taiwanese Opera" presentations, because the survey showed that this was the most popular program among housewives.

Singapore

Radio and television have been used extensively for family planning since the beginning of the national family planning program. Radio was initially used for spot announcements and later extended to talks, discussion groups and other programs.

Costa Rica

Radio is considered to be the most penetrating mass medium with the highest credibility rates, according to studies in Costa Rica. There is one radio receiver for each 6.5 inhabitants.

Costa Rica's radio programs are designed to inform and motivate. Programs highlight the welfare aspect of the family and the community.

Radio spots are scheduled to saturate particular audiences. In addition, there is a weekly talk series by experts and a radio novel, "La Cuna Del Dolor," with 65 chapters each 15 minutes in length. These programs are being broadcast over the metropolitan and rural stations.

Tunisia

Radio is being extensively used in Tunisia for family planning information. The type of programs include newscasts, women's programs, both in Arabic and French, and dramas. In January 1970 during a special family planning week, six hours of radio programs and three hours of television were specially produced. During this period, there were special campaign broadcasts, news and spot announcements, two theatrical plays and folk lore broadcasts.

In a survey conducted on the channels of communication, 36.9 per cent of women questioned said radio was their best source of information. Next was television with 21.79 per cent. Thus television and radio constituted 58.79 per cent of the coverage. A primary reason was that more than 90 per cent of women in Tunisia stay at home, only 7 per cent work. Eighty per cent had heard the family planning programs on radio and 50 per cent had heard them on television.

Guatemala

A national family planning program was developed in Guatemala in August 1969. Radio is being used primarily for general education and motivation. Twenty-five radio stations in rural areas and six in the capitol city are being used to broadcast 30-second messages, 12 times a day. Two different messages have been used: one for general motivation for family planning and the other for regionalized information giving clinic hours, clinic location and availability of services. In addition, eight self-contained radio novels of 30 minutes each are planned. All broadcasts are in Spanish. However, radio spots in several regional languages will be on the air shortly.

El Salvador

In El Salvador, three organizations — the Ministry of Public Health, the Demographic Association and the Social Security Institute — are involved in family planning. The work of these organizations is coordinated by a working committee. The Demographic Association in a special report prepared in October 1966 defined the principal educational objectives as:

1. Sensitizing all social sectors, with emphasis on community leaders, to the problems of development which result from over-population.
2. Creating a favorable climate for family planning acceptance.
3. Orientating and educating families and individuals as to the reasons which justify adoption of family planning.

The Demographic Association launched a multi-media public information campaign, PATER, in September 1969. The campaign is imaginative and there is heavy emphasis on radio. In 1969 from September to November, 37,901 radio spots and five radio novels were broadcast. The PATER campaign has been extended now to a weekly program, using 36 radio stations simultaneously to cover the country.

Appendix I

Supplementary Use of Television

Supplementary Use of Television

The use of radio in broadcasting family planning programs has been emphasized in this book because radio receivers exist at all socio-economic levels in most countries of the world.

Television goes one step further than radio by adding sight to sound. Consequently, it can deliver a message with much greater impact and audience penetration. However, the number and distribution of television receivers restricts the use of this medium.

An important item to consider here is the "multiplier effect." When television transmission is introduced in an area, the viewing audiences are substantially larger than the number of television sets. Group, neighborhood and community viewing is quite common. Industry figures estimate that the "multiplier effect" means approximately 100,000 viewers for every 5,000 sets.

During the early days of television in the United States, the ratio of viewers to sets was even higher. Television receivers in bars, cafes and other public gathering places accounted for the American multiplier effect.

While the main effort of the media group in the family planning program should be directed to radio, television should not be ignored in countries where it exists. The decision on when and how to use television for family planning communications will vary from country to country. It will depend on the system in use, the number of television receivers and attitudes of the broadcasting organizations.

It probably will not be profitable for the media group to write and produce television programs to supplement the main effort by radio. Nonetheless, television exposure can be obtained economically by the following means:

- * Negotiate and arrange for guest appearances of authorities competent to communicate family planning policies, objectives and specific information.
- * Set up interview and discussion programs. They are not any more complicated or expensive to produce than their radio counterparts. Media personnel should therefore try to generate this type of exposure in coordination with broadcasting authorities. Have the television station assume the prime production responsibility and expense.

* Arrange for short spot announcements to be carried as a public service. If stations agree to carry family planning messages, a television counterpart -- with sight as well as sound -- of the instant identification device must be developed. Locations and pictures of clinics can also be effectively communicated in short spot announcements.

Media experts must realize that most television sets are owned by the more affluent. Therefore, the target audience includes decision makers, professional groups and the top personnel of special interest agencies that may work in coordination with the family planning program.

In addition, exposure comes from group and community viewing and from the powerful word-of-mouth diffusion that is generated by this medium.

Appendix II
Using Soap Opera
To Convey Family Planning

Using Soap Opera To Convey Family Planning
Example – Every Man's Family

No soap opera has yet been created that includes all the elements of family planning and contraceptive behavior. However, such information can be readily inserted into the standard soap opera.

in the hypothetical soap opera, Every Man's Family, elements of family planning as well as a general health theme are woven into its daily episodes. As the drama of the members of every man's family is presented, every occasion is utilized to develop the message of contraception and family planning.

When the baby is sick, the parents talk about the number of babies that die and the fact that today many more babies survive. And how important it is to have fewer children so that parents can give them better care.

When the mother is sick, the other members of every man's family are concerned about who will take care of the family. Her illness reminds them that she is precious to them. What if she should die? they ask each other. Has she become too tired because she has had so many children? How much healthier would she have been if she had had no more than two or three children?

As marital difficulties develop between the mother and father, characters talk about the number of children they should have had . . . about the pressures on the father to earn more and more money because of the large number of children in the family . . . and about the fact that the mother pays little attention to the needs of the father because of the children's constant pressures on her.

When there is a money crisis, the parents compare their difficult situation with that of their neighbors who had two children and no more.

When one of the children has problems in school, the adults bring up the fact that the school is too crowded. Because so many children are being born, so many more than ever before, it seems that every man's town is unable to provide a decent education for its children.

Marriage between characters can set the stage for discussion on family size, marital love, child spacing and the advantages of late marriage.

A death in the family gives rise to a major discussion about who will inherit the land. It is apparent that there will not be enough land for all the children of the deceased. Therefore, how should the land be divided? What will happen to the children who inherit nothing? The action might follow one of these disinherited children through his tearful departure for a distant city and a succession of misfortunes that he meets there.

During the course of the soap opera, a divorce begins. Family and friends discuss how a couple copes with family and child pressures in order to have a compatible marriage.

One of the children decides to move to the big city. He returns home after finding out that city life means unemployment. Too many people are being pushed off the land with nowhere to go but to the cities. There, they make the tragic discovery that they have no skills appropriate to urban life.

A maiden aunt mourns her lack of offspring. Episodes in which she appears illustrate problems of sterility and how the facts of biology affect one's life.

The mother becomes pregnant again. For at least nine months, both talk and action are concerned with problems of pregnancy and maternal health.

A neighbor's unmarried daughter is pregnant. The action takes up problems of illegitimacy and concepts of responsible parenthood.

A neighbor woman dies as the result of an illegal abortion. Every man's wife organizes a campaign to legalize abortion.

Another neighbor woman becomes pregnant while she is still nursing her last child. The point is made that the period of sterility caused by lactation is temporary, rarely lasting longer than eight months.

Action can be developed which explores the concept of children as a social security system for parents. This can be related to other life circumstances such as land shortages, inheritance and infant mortality.

Some characters might take a pro-natalist point of view and say the country needs population or contains a good deal of unused land. In a family planning context, these allegations can be refuted.

Action and discussion can involve such topics as early pregnancy, early marriage and women's rights.

Because any one of these themes can take as long as three months to develop on a daily episode basis, topics suggested here would obviously provide enough material for years of daily broadcasting. Clever dramatists could utilize these situations and change characters and incidents over a period of many years without repeating themselves. A real test of the communicator's cleverness is how he delivers the message of family planning in subtle and dramatic ways without ever seeming to preach or instruct.

Appendix III

Examples of Family Planning Radio Scripts

BOTSWANA
Family Planning Radio Scripts
(Provided by the International
Planned Parenthood Federation)

SPOT ANNOUNCEMENTS

1. Sound effects: Soft laughter from a group of people.
Male voice: What a beautiful house, lovely surroundings.
How do you manage to get this ?
Female voice: Family planning is the answer. Whatever you
do, you have to plan for it, so why don't you
start planning your family?

2. Sound effects: Soft music.
Male voice: Mother, can you tell me why your baby looks
so healthy? What are you feeding her with?
Female voice: Good nutritious food, good care.
Male voice: How do you manage all this ?
Female voice: We have been to the Family Planning Clinic
where we were advised that we can get our
next baby when we like. Why can't you go to
this clinic and take your wife there ?
Male voice: I will do so tomorrow. Thank you.

COSTA RICA
Family Planning Radio Scripts

SPOT ANNOUNCEMENTS

1. Children should not be the result of chance. A pregnancy must never be a surprise, but an event desired and awaited for by the parents. Mothers should know that before increasing the family, each child needs a minimum of physical and spiritual care. Couples interested in receiving written information on family planning, nutrition and mother-child health may request it at the Health Center in their community. Following are the places where family planning consultation will be offered **tomorrow**: (AD LIB) Sanjose Province Health Unit, -- (hour); Alajuela Province Health Unit, -- (hour).

2. All teachers, professors, parents and even adolescents should read the pamphlet "What is Family Planning?" This publication contains useful information on living a more responsible and happy married life. This pamphlet may be requested in person at health units. Following is a list of places where family planning services will be offered on Wednesday: _____

3. To the women in the audience who, for some reason, do not **take** advantage of health unit or hospital family planning services, we remind them that Elimca Biblica (which is a private institution) can serve them through its external consultation unit. No need for an appointment. Elimca Biblica's consultation hours are from 7 to 11 a.m. and from 1:30 to 6:00 p.m., Monday through Friday. Saturdays only from 7 to 11 a.m. Elimca Biblica, for the rich and poor. Poor patients pay from two to five colones, and those that are extremely poor pay nothing. Clinica Biblica is in Sanjose, 100 yards east and 100 yards south of the Dolorosa Catholic Church. Following are the places where family planning services will take place tomorrow: _____

4. Pregnancies which take place one right after the other do not allow the mother time to take **good** care of the last child born. Nor does she have time to recuperate from giving birth. Her health is therefore endangered. Since the welfare of all the family members depends partly on the mother's health, the number of children and the economic means, it is advisable that couples obtain and study information on family planning. When both husband and wife agree, they should look for the help offered by the health units in all the provinces. And following are the health units: _____

5. Young people who know about family planning are often more responsible when they get married. We invite engaged couples and adults in general to ask for the free booklet entitled "What is Family Planning?" You may request it personally at the health unit of your community.
6. The Department of Human Sciences and the Institute for Psychological Research of the University of Costa Rica, reports that in 1955 the average number of inhabitants per square kilometer in the metropolitan area was 1,211. By 1968 that average had increased to 2,291. We have almost doubled the population in 13 years. The population has increased to one million, seven hundred thousand. Within 20 years we will reach almost three and a half million population. There will be more people without work, home, food and schooling than today. Family planning is one answer to these problems. Another following are the places where family planning services will be offered tomorrow: _____

ROTATING SPOTS FOR RADIO NEWS BROADCASTS

7. Rii couples should know what family planning is and how to do it. For information write to CRDA, etc.
8. If you want to know what family planning is, write to CRDA, etc.
9. Your sons will be grateful to you for planning your family. For information, etc.
10. Protect your children before getting them, plan your family. Write to, etc.
11. It is easy to have children. To become responsible for them is something else. For information, etc.
12. Each home should have the children it can raise and educate with human dignity. Find out for yourself. Write, etc.
13. Children should be the product of love and the conscious desire of having them. Information at CRDA . . . etc.
14. Family planning means to love your children, those born and those to come. Write, etc.
15. Children should not be the results of ignorance or carelessness. Be informed, write, etc. . . .

16. How many children to have or when to have them is the concern of the home alone. For information, etc.
17. If you want to know what family planning is, visit the health unit in your community.
18. Clinic Biblica offers family planning consultation. Call telephone number . . . etc.
19. Protect your children before getting them by planning your family. Find out on time. Your health unit will help you plan your family.
20. Begetting children is easy. To become responsible for them is a different story. Information, etc.
21. Each home should have the number of children that it can raise and educate with human dignity. Be informed, etc.
22. Twenty years ago, the problems that the world confronted were different from those that pre-occupy the leaders of today. At that time, for example, the accelerated population growth, was not a great problem. Today it is. World population is increasing at such speed that it is hard to think of the number of human beings who will be living in the coming years.

It took the world 1800 years to reach a total population of 1,000 million inhabitants. But in only 130 years (1930), this population had doubled to 2,000 million people. The speed of population growth is increasing daily and now it is expected that the earth will have 7,000 million individuals by the year 2,000. Such an exaggerated population growth has created many problems which have a direct effect on man. And for this reason it is necessary to make provisions to face these new problems.

If the Universal Declaration of Human Rights were to be written today, it would have a new accent. It would preserve, of course, its principal enunciation, freedom in all forms which even today is denied to millions of men in many parts of the world. But today, only 20 years after its completion, other essential factors are at play. The right to eat; to dress; to be educated. The right to have a stable job to insure family welfare. And finally, the right to have access to the basic facilities offered by a civilized and technically advanced world.

Without a doubt, all these human rights are being threatened

by the accelerated population growth. The threat is growing and we have it here in Costa Rica, manifested in the form of malnutrition, unemployment, lack of water, housing, etc.

23. Family planning is the agreement between husband and wife with respect to the number of children they want to have and when. Family planning serves to accomplish nobly and pleasantly the natural mission of reproduction. In this manner, the parents enjoy better their childrens' company. At the same time that they are able to raise them better and prepare them well to face life.

Family planning allows the mother long periods of rest between births and the opportunity to better care for the last born. Neither does she grow weak nor prematurely old as happens to women with many children.

In order to plan the family, it is indispensable for the couple to be convinced that to procreate costs no money, but to raise a child like a human being deserves does cost money. For this reason, whoever loves a son with responsibility makes sure that the child does not come to a world of misery.

But the son needs more than food, clothing, housing and studies. He needs parents who understand each other and treat each other with affection, and who offer him love and understanding.

More information will be offered to those who desire it. At the same time, tell us on what station you heard this information. Send your letters to: CRDA, etc.

24. In an article published by "Plan Familia" last September, the Catholic Priest _____ said that it is shocking to observe how, not just ordinary people, but also those who are called to enlighten the conscience of others, have reduced the last papal encyclica to this simple expression: "It is a grave sin to avoid children." (Pause.)

With respect to responsible parenthood, Father _____ also said that if man proceeds responsibly in all undertakings and if he is conscious that he must render an account of his actions to God, then he must use reason when he collaborates with God in procreating human lives. For those children a man helps to procreate must be raised and educated to live according to their human dignity and to achieve their suprahuman destiny. (Pause.)

Father _____ states further that responsible parenthood signifies that it is a mission and a duty of parents to transmit human life, but not indiscriminately as if they were producing little animals. (Pause .) He said indiscriminant procreation is simply a crime against the most sacred biblical principle: respect for human beings. It is a crime to bring a child into the world knowing that he may be born deformed, that he will suffer hunger, that he will live in conditions below human standards, that he will be inadequately educated, according to Father _____ . (Pause.)

Dear friends: if you want more written information, send your requests to: CRDA, etc.

25. The final part of an article by Dr. _____, director of *the* Dominican Republic Family Welfare Association, published two weeks ago in "La Nacion," states that family planning campaigns attempt to place the knowledge and the means necessary for all couples to enjoy the right to decide how many children to have and when. People with the capacity to plan their families, do so not just because they are educated or have the money, but because they feel responsible. And among the poor, this same sense of responsibility toward the children can exist. If people have not planned their families, it is because they do not know it is possible or because they lack the economic means.

In Costa Rica, we have good publications distributed free of charge which teach in a simple manner what family planning is. There are also many medical centers with specialized personnel where services are offered at no cost to the patient. The first thing to do if interested in family planning is to ask for information.

COSTA RICA
Family Planning Radio Scripts
(Written by Centro de Orientacion Familiar)

LISTENER PARTICIPATION PROGRAMS

PROGRAM: DIALOGUE

Announcer: We should not be ashamed etc. (recorded)

Announcer: These are the titles for today's Dialogue:

- *A Letter for Dialogue (Father Carlo)
- *The musical File (Comedy from Midnight)
- *Social Motivation for Family Planning
- *Miss Gladys Bolanos Rcj as Grecia
- *Coitus Interruptus
- *A Special Invitation
- *Inscription Formula
- *For the Adolescents
- *Dialogue Listeners

Music: Harps

Announcer: Ladies and gentlemen, we would like to welcome and to thank you for your interest in our program Dialogue. We ask that you write to Box 288. Your ideas and opinions are very welcome in helping the Costa Rican families. We hope to hear from you tomorrow.

Announcer: Our program starts with "Music and Opinions." Every day we will have a subject that will be of interest to you and also a musical piece.

Music: Theme rises and lowers.

Announcer: Our commentary for today is titled "A Letter for Dialogue, " with Father Carlo.

Announcer: Guanacaste is a province that has a very active correspondence with our program. The "Letter for Dialogue" today, comes from a lady who lives in Nicoya. She asks the following questions:

I am 15 years old and my boyfriend is 21. What do you think? Will he make a good husband for me? Also, I would like for you to explain to me some things about sex as my parents never talk to me about that. They try to hide it from me.

Priest: Dear listener: The period of courtship ought to last an adequate amount of time for the two of you to get to know one another pretty well: so that you can talk together with frankness; so that you can understand one another; so that you can have the opportunity to show your respect one for the other; and then you can come to the decision if you want to share your entire lives together

within the bonds of matrimony. Sometimes this might take six months to a year and other times it may take two to three years.

I don't recommend a very short courtship but neither do I recommend a very long one either; that is to say not snorter than six months and not longer than three years. Concerning your particular situation, I notice that you are only 15 years old and that is pretty young. It's possible that this boy is your first boyfriend and that means it's your first love. Furthermore, I couldn't possibly tell you if your boyfriend would make you a good husband or not. But it seems to me that with your question you yourself are not at all sure and considering your age it would be a great price to be sure. I recommend that you wait for some time before you begin to consider marriage.

Concerning the subject of sex, I couldn't be able to tell you any more than it is such an extensive subject that I couldn't *begin* to touch it in such a short time. The purpose of these "Dialogue" programs is to give you a good sex education.

Aiso, you can write to Family Orientation Center and you will be able to take a correspondence course of orientation for people who are engaged. Well, our time is gone and I must close for now.

Announcer: You have listened to a special letter for "Dialogue, " Box 6808, San Jose.

Announcer: After our comments, let's see what Dialogue has for us in the way of music.

Music: A record and some short opinions about it.

Music: Musical theme and commentary.

Announcer: You have listened to the first part of "Dialogue" -- music and opinions. Each program will bring to you a subject of interest and some pieces.

Music: Closing of theme.

Announcer: Before coming to the lecture, we would like to remind you that this program is for everyone. Any consultation you would like to have concerning integral sexual education or other lectures pertaining to the family, we would like you to write: Dialogue, Box 288, San Jose. We are here to serve you. And now, here is the Professional Yolanda Mendoza. Our guest speaker for today has as her text: Social Motivation for Family Planning. Her name again, Professional Yolanda Mendoza.

Yolanda Mendoza: What does family planning mean? Family planning means simply to make plans, to think of the future, to organize your own life. We as human beings have that opportunity, that capacity of deciding for ourselves what we want to do.

In much the same way, a young man when he reaches a certain age must decide if he's going to study for a university career or if he's going to be a laborer and to learn a vocation.

A young woman will decide at a certain time in her life if she wants to marry a certain man that proposes to her or if she wants to postpone the marriage.

A farmer will decide if he wants to plant sugar cane or coffee.

All of these situations require decisions, meaning that we ourselves decide what we want to do, looking for the best in life, for ourselves as well as for those who surround us -- wife, children and family.

One of the most important things for a man and woman is the children. A good father and a good mother are willing to make great sacrifices for them.

We always agree in how much the children mean to us. However, sometimes children come into the world with the parents not knowing how they came . . . without the parents having decided to have them . . . that is, to say, without any plan.

So, family planning is simply this: to plan ahead for the children that you are going to have.

What importance do children hold in our lives and why have children at all? Let's see some of the answers that people have given and let's discuss them.

- a) Children are a security for the parents in old age. If you have many children you will have someone to look after you in your old age. All well educated children who love their parents

and who in return have received love from them will be a help to them, but the parents ought not to raise their children with this egotistical zeal of receiving a profit, of having support.

b) Children are needed in order to help with the work of supporting the family. This is another egotistical reason. Many parents want their children to work as soon as possible in order to help them. In these cases, they don't send the children to school so that they can work. It's good that the children can help in the home but parents shouldn't have children for that reason alone.

c) Large families are happy families, the older children can help take care of the younger ones. It's just a happier situation. All of this is a beautiful theory, but families achieve happiness basically because of love and harmony of the parents, and an environment based on love and respect in the home. This has nothing to do with the fact that the family is large or small. There are many large families as well as small families that are happy. There can be problems in large and small families. Also, there are people who think that marriages are better when there are lots of children. This is no; true.

d) There are fathers who want to have children to prove their virility. They think that the more children they have the more they demonstrate their manliness and they brag about it. Other men don't have much faith in their wives and think that by keeping them pregnant their wives will remain faithful.

e) Other parents feel that all children are the will of God and that it is necessary to have "all that He sends." However, they forget that God also gave us the capacity and a will to make decisions.

f) Other parents, and we'll treat this group the most positively, have children simply because they want them because they know what they want for them and for their future.

These parents first consider the good of the children. They plan their birth: that is to say, they decide on the birth of a child taking into consideration the following things:

1. Health: What is the health of the mother? Is she in a condition to have a healthy child? It is very important that the expectant mother have special care and good nutrition in order to have a child.

2. Economic conditions: One ought to think of what you want to give the child. Every child needs a certain amount of food, a place to live and the opportunity for education.

The parents say: "Every child brings his own loaf of bread under his arm, " but in reality that loaf of bread has to be bought. If you want to give a child what he needs you'd better think of the cost. If you can't afford another child, the father ought to think about looking for a better paying job or for an additional job or to economize the expenditures. Whatever the situation is, it is necessary to plan for the future of your child.

3. Emotional conditions: A child ought to be born because he is wanted. But many times the mother says with great sadness, "I'm pregnant again! What a problem." The poor child isn't at fault for not being well accepted.

4. Conditions of the country: There's another thing that all Costa Ricans ought to consider: We ought to be more responsible for the children that we have already. We need to consider the conditions of the country.

Just as a family with a limited income and many children suffer from poverty, the country should not grow in a rapid manner. It's necessary, of course, for a country to grow, but at a much slower pace so as to satisfy the needs and wants of the population that already exists: Living quarters, schools, economic development and in general an avoidance of the miseries of poverty.

Announcer:

Now let me ask our guest several questions sent in by our listeners. Does family planning necessarily mean having few children?

Professional:

No, you shouldn't confuse this term with birth control. Family planning means having all of the children that you want to have in accordance with the possibilities of each home. It means being responsible and thinking before having the children and above all doing everything to give them the best. I mention again the words doing everything. Many parents can have few children because of their particular situation. But the important thing is knowing how to be responsible for the children that you already have, to give them a good education, love and the possibilities for a happy future.

Announcer:

How do you plan for the family?

Professional:

Well, you know what it is to make a plan, don't you? Now these plans which are so important in respect to the children ought to be made **by both** parents.

it isn't for one of them to decide but for both of them. There ought to exist an open line of communication in a marriage. Husband and wife ought to talk about all of the issues of the family, of each other, of the children, of the future and they should come to an agreement.

In that children are very important, both parents ought to come to an agreement concerning the number of children they ought to have, how much time should pass between the birth of each child, what they want for them and other such important matters.

Announcer:

Let us say that a couple has discussed this matter and has come to the conclusion that they should avoid having another child for some period of time. In these days, what could they do in order to find an adequate method of avoiding another pregnancy.

Professional:

At this time, they should consult a professional. Each couple is different, and they ought not to make a final decision without consulting a doctor. Sometimes a method would not be advisable for a particular woman because it bothers her, or her **body** won't tolerate a certain contraceptive or **because** it interferes with her sexual relations in

some way. For that reason, it is always best to consult a doctor.

Announcer:

What services are there for family planning in this country?

Professional:

a) Public Health Centers: In the majority of our villages and cities, the Health Centers exist where the mistress may go to find these services.

b) Social Security: In San Jose, through the peripheral Clinics.

c) Bible Clinic: Serves many ladies from San Jose as well as from other cities. Working hours from Monday through Friday at 8:00 a.m. to 4:00 p.m. There is no need to make an appointment. Moderate prices are charged according to the financial possibilities of each family.

Announcer:

Now for my final question, Why is it that poor families so often have more children?

Professional:

There are several reasons for this. One most assuredly is the lack of knowledge; that is to say, they don't know how to plan their family.

Other married couples perhaps know, but -- here again because of faulty knowledge -- are afraid to use the different contraceptive methods. They have the misconception that they can harm you, make you sick or cause deformed children to be born.

Another cause is the scarcity of economical methods of obtaining contraceptives. This particular problem has been overcome with the services of Public Health Centers.

Announcer:

You have just heard in our program for Family Planning, Professional Yolanda Mendoza. Her lecture was titled Social Motivation for Family Planning. Tune in tomorrow to hear Yolanda Mendoza again. Your questions about integral sexual education concerning the home and children could be mailed to Dialogue, Box 288, San Jose. We will answer your questions through the program.

Music:

Theme for the News

Announcer:

This is the news for today

Miss Gladys Bolanes Rojas de Gracia: We want to tell this young lady that we have received her letter. We can't answer her because her address

is incomplete. We are asking her to write us another letter.

Coitus Interruptus: The program "Frigidity or Impotency" will tell you how inconvenient "Coitus Interruptus" is. Be ready to listen.

Special Invitation: We would like to invite the parents to attend the special classes on Sex Education that will start on the 21st of September. You can call 21-47-76 for more information.

Inscription Method: We would like to tell those interested in our special correspondence courses that we have all the *material* available about the courses in pamphlets. Send for it by writing us: Box 6808.

For your teenage children: We have a special pamphlet called: Teenage Challenge. Send for it by writing Box 6808 plus \$1.00 for postage.

Dialogue Listeners:

Niclosa Collado Ruiz
Roxana Jimenez Acuna
Pulperia Juan Jimenez, La hermosa de Perez Zeledon
Gonzalo Benedicto
Guiselle Arce de Soto
Otilia Mora Fonseca
Aida Solorzano H.
Liverpool de Rio Blanco
San Nicolas de Cartago
Santa Rosa de Zarcero
Tibas
Guadalupe
San Pablo de Heredia

Music: Theme for the News
Music: Final lecture theme and a closing.

PROGRAM: DIALOGUE
Announcer: We should not be ashamed . . . etc. (recorded)
Announcer: These are the titles for today's Dialogue.
*"I Can't Take My Eyes Off of You" Matt Monro Music
*A Dialogue Letter
*Contraceptive Methods
*A Special Lecture for your Children
*Miss Flor MaGamboa R.
*Incentive for Sexual Education
*The Nervous System and Sexual Relations

*Wrong Addresses
*Dialogue Listeners

Music:

Harps

Announcer:

Ladies and gentlemen, we would like to welcome and to thank you for your interest in our program Dialogue. We ask that you write to Box 288. Your ideas and opinions are very welcome in helping the Costa Rican families. We hope to hear from you tomorrow.

Dr. Carlos Ponchner will be with us today. His lecture theme is Contraceptive Methods.

Announcer:

Our program starts with music and opinions. Every day we will bring a subject of interest to you and also a musical piece.

Music:

Theme rises and lowers:

Announcer:

Today's program is entitled "Letter for Dialogue," with Ana Jimenez.

Announcer:

The letter today is about a young girl from Guanacaste who tells us in her letter that she is very timid and pessimistic in her outlook on life, and in general has many personality complexes. She says that she doesn't find pleasure in any of the "worldly experiences." She has also informed us that she had many serious problems in her childhood and in her home and some unhappy experiences in love -- all of which have contributed to her poor psychological condition at the moment. Let's listen to what Professional Ana Jimenez can recommend for this girl with such a long series of problems facing her.

Professional Ana Jimenez:

Well, it seems that you are suffering from a nervous condition, the type which can progress in severity if not treated immediately. It is necessary that you consult a medical doctor and a psychologist or a psychiatrist as soon as possible.

If you have Social Security benefits you can have complete confidence in the General Medicine Center located at the Social Security building. You can receive medical treatment or they will refer you to a medical specialist. If you do not have Social Security, you can go to United Health of your particular town, to the San Juan of God Hospital or to the Family Orientation Center which has several professional people who can help you with your problem. But in addition to consulting with a medical doctor and a psychologist, you must realize that a nervous condition is a sickness which requires the cooperation of the person who has the condition. Does that person really want a cure of his condition?

In analyzing his own particular problems, the person must put all of his problems into perspective so that his nervous condition doesn't dominate his every minute of the day. You told us that you don't enjoy "worldly experiences" but that doesn't mean that you have to run away from your friends and lock yourself in your house. You ought to get out, take walks, have talks with other people. Have a good time. Also, it's a good idea for you to read and study something that you would enjoy. All of this will make you feel differently about yourself and give you a different outlook on life which with the help of the doctors will give you the chance to resolve your emotional problems.

Announcer: Tie Professional Ana Cecilia Jimenez, social worker for the Family Orientation Center, has answered a "Letter for Dialogue." Please write us with your problem to Box 6808.

Announcer: After our comments, let's see what Dialogue has for us in the way of music.

Music*: A record and some short opinions about it.

Music: Musical theme and commentary.

Announcer: You have listened to the first part of "Dialogue" -- music and opinions. Each program will bring to you a subject of interest and some musical pieces.

Music: Closing of lecture.

Announcer: Before the closing of the lecture, we would like to remind you that this program is for everyone. Any consultation you would like to have concerning integral sexual education or other lectures pertaining to the family, we would like you to write: Dialogue, Box 288, San Jose. We are here to serve you. And now, here is Dr. Ponchner Our guest speaker for today has as his text: Contraceptive Methods. His name again, Dr. Ponchner.

Dr. Ponchner: Pills: The contraceptive pills are made of a hormonal substance which impedes ovulation. It seems that the pill in some way does not permit the production of the hormones responsible for the stimulation of the ovary to produce the female eggs. It also seems to modify the endometrium and the mouth of the uterus.

Special boxes contain 20 pills which should be taken daily starting the fifth day of the menstrual cycle (counting the first day of the period as the first day of the cycle). Three or four days after the last pill is taken the menstrual period begins and a woman begins taking a new cycle of pills. Pills are the most effective method of contraception if the instructions are

followed correctly. In case a pill is forgotten, it should be taken the moment that it is remembered even if it means that two pills are taken in one day.

The pills do seem to have some had effects for some women but they soon disappear. They should not last past two or three boxes of pills. These effects include nausea, headaches, chest aches, dizziness, increase of normal vaginal flow, small amount of swelling of the legs and a slight weight gain. Sometimes they produce a slight amount of spotting in the middle of the cycle. They don't influence the period in any important way and the menstrual cycles last for 26 to 27 days. Women who have constantly been bothered with irregular periods find that taking these pills has a regulating effect on their periods. Some types of pills seem to minimize the amount of milk that the breasts produce when one wants to breast feed the child. The pills in no way affect an unborn child if a woman accidentally takes one and is at the same time pregnant. It has been observed that when a woman who has been taking the pills stops she is much more susceptible to pregnancy. The pills can be used indefinitely up to four years.

it appears that when a woman starts taking the pills her sexual desire is heightened, probably because she no longer needs to worry about an unwanted pregnancy. Because of studies that have been made, we know that the chance of cancer in the mouth of the uterus or of the breasts is not heightened. It has not been proven that the pills definitely do not produce varicose veins, blood clots or embolism.

Any normally healthy woman can take the pills but, of course, she is always under the care of a doctor. They shouldn't be taken by young girls who haven't reached puberty and who haven't developed sexually. Some doctors recommend that women who've had blood clots, embolism, a tumor or a disease of the liver or diabetes not take the pills. There are several types of pills on the market and the doctor will tell each woman which one is the best one. Occasionally the doctor will recommend a change in the type of pill. The pill is very well accepted and its effectiveness is as previously stated excellent. The price fluctuates between ₡10 and ₡14 but the Demographic Association of Costa Rica distributes them for ₡3 when the woman

is a patient of one of the specialists who is accepted by the Association.

The Mini Pill: There are other pills that also contain hormones but in very small quantity and one has to take them continuously without counting the days in the cycle. They are as effective as the other type of pill. It is also less expensive than the other. It is not known how they perform.

Injections: There are injections that are also used as a contraceptive and they are formed by a mixture of hormones in much the same way as the pill. The injection IM is given and it is effective as a contraceptive for some one, three or six months according to the particular product. The injections which are effective for one and three months are the only ones available in Costa Rica. Injections cost more than the pill.

if has the obvious advantage that it is not necessary to remember to take a pill every day for it to be effective.

Sterilization: This method entails the elimination of the capacity of the woman to become pregnant or of the man to produce sperm. This method has no turning back: that is to say, once the operation is performed you can't then decide that you want to mother or father another child. It is especially used with older couples who are having problems with health and with those couples whose health would be endangered by having another child.

The operation for the man is called a vasectomy and is performed with a local anesthetic and takes only 15-30 minutes. There is no need for the patient to remain in bed. The operation consists of cutting and the tying off of the sperm-producing tubes. Although the man still has the same desires and sexual potency and he still ejaculates, his semen doesn't contain sperm. Therefore he can't father a child.

The operation for the woman usually involves the tying off of her tubes which makes an operation necessary in the womb. General anesthesia is used and it's best that she be hospitalized. It is preferably done during a cesarean or immediately after a normal birth. As in

a vasectomy, the natural sexual desires and pleasure are not modified in any way. Also, the woman continues having normal menstrual periods.

Announcer: Now let me ask Dr. Ponchner questions sent in by our listeners. Doctor, the problem for me with the pills is that they make me very nervous and furthermore I gained five pounds the first year that I used them.

Dr. Ponchner: It is true that some women seem to become more nervous and to gain weight when taking the contraceptive pills but in most cases it is found that the problem is due to past emotional upsets rather than the fault of the pill itself. There have been many articles written in unauthorized magazines which have caused a wave of fear concerning the pills. In reference to the weight gain, it is possible that one could gain one or two pounds when taking the pills but when the weight gain is more than that it is probably due to other causes; for example, a greater intake of food.

Announcer: I have read in a magazine that the contraceptive pills cause cancer. Because of this article some of my friends have stopped taking them. I would like your opinion of this.

Dr. Ponchner: It is known for a fact that the pills do not cause cancer. What is known is that tumors which were previously established in the body before the pills were started seem to have a tendency to develop more rapidly. But the person who has no tumors does not run any risk that the contraceptive pills that she is taking will cause a tumor or cancer.

Announcer: Doctor, don't you think that it is unfair to the poor people that a doctor's prescription is necessary for the purchase of contraceptive pills? What are people who are too poor to consult a doctor or pay for the pills going to do?

Dr. Ponchner: There is a very good reason for this practice. We want to make sure that the women understand that they should take the pills only under medical control and only after they've had a careful medical check-up. This is the logical thing to do even though it means that some women in special circumstances will not be able to take them. In respect to the poor people that you speak about, most doctors belong to the Costa Rican Demographic Association. This means that when the woman has been given medical approval for taking the pills and when she comes to purchase them she is given a coupon book which allows her to purchase the pills which normally cost ¢10 to ¢14 in most pharmacies for ¢3. It is hoped that most of the poor people

will find it possible to get them at this price,
Announcer: Doctor, if the operation for the women, the tying of her tubes, is so complicated and dangerous why isn't the operation for the men, vasectomy, performed more often?

Dr. Ponchner: One of the possible reasons is that not enough propaganda has been made about the advantages of this type of operation and not many people know that the operation on a man is more preferred than that performed on a woman. Furthermore, in our society there is this idea of being manly or virile, and that the person who is responsible for contraception is not the man but the woman and the man's place is to protect his male image at all costs. The idea that this operation affects the manliness of any man is, of course, completely absurd.

Announcer: You have just heard Dr. Ponchner on our program for family planning. His lecture was titled Contraceptive Methods. Tune in tomorrow to hear Dr. Ponchner again. Your questions about integral sexual education concerning the home and children can be mailed to Dialogue, Box 288, San Jose. We will answer your questions through the program.

Music: Theme for the News.

Announcer: This is the news for today

Special Lecture for your Children: The Family Orientation Center would like to remind you about the special correspondence class in sexual education for the teenagers in your family. Please write to us at Box 6808 and we will send you the free application blank for the course.

Miss Flor De MaGamboa R.: We would like to inform this young lady that the mail has returned her correspondence course to U.S. It seems that 150 vs. Nr. Almacen, Villanueva de Cartage is not her correct address. Please inform us of the change of address.

Incentive for Sex Education: The C.O.F. has been observing the heightened interest in sex education in Costa Rica in the last few months. It has been proven that the decisive age in forming one's basic attitudes toward moral behavioral patterns is between the ages of 13 and 19. There are too many Latin Americans who reach puberty and even get married with a distorted and insufficient knowledge about sex. The most logical place for the learning of the basics of the sexual functions of the body is in the classroom. Please get in

contact with 21-47-76 about the new course in sex education for adults in C.O.F.

The Nervous System and Its Relationship With Sexual Intercourse: Is it possible that a very nervous person misses out on some sexual desire? "Dialogue" will be able to present the interesting topic "Frigidity and Impotence" very soon.

Wrong Addresses: Three new persons have written us but have forgotten to include their address and we can't possibly answer their questions. We ask that they write to us again making sure to include the addresses. These three persons are: Consuelo Nunez, Alicia Ma. Guzman, and the listener who signed her letter Maria.

Dialogue Listeners: The Mrs. who signs her letter "Friend from Guanacaste, " and who is worried about her heavy menstruation periods needs to write to us again and give us her address.

Other Listeners:

Gilberth Montero Alpizar
Bernadita Rodriguez Alvarado
Jeanetta Cartes
Maria Benilda Coto Coto
Victor Murillo Chacon
San Juan de San Ramon
Rincon de Zaragoza, Palmares
Lotes Liobet - Alajuela
Sam Nicholas de Cartago
Concepcion - Naranjo

Music:

Theme for the NEWS.

Music:

Final lecture theme and a closing.

ETHIOPIA
Family Planning Radio Script
(Provided by the International
Planned Parenthood Federation)

INTERVIEW

Sound effects: Landing of an aircraft.
Interviewer: Where are you coming from?
Participant: I am coming from Accra after attending a Workshop on Family Planning Education and Information in Africa.

Interviewer: Who organized the Workshop?
Participant: It was organized by the International Planned Parenthood Federation in co-operation with the Ghana National Family Planning Programme.

Interviewer: How long was the Workshop?
Participant: It was for a fortnight.

Interviewer: How many countries participated?
Participant: Eleven independent African countries south of the Sahara were present, namely, Kenya, Tanzania, Mauritius, Uganda, Nigeria, Gambia, Sierra Leone, Botswana, Ghana, Liberia, Senegal.

Interviewer: Do you think family planning is necessary for Ethiopia ?
Participant: To make the young generation healthy, happy and useful citizens, as well as to make the mothers happy, healthy and strong, which will enable them to bring up their children, modern means of spacing are necessary, and this can only be possible by having a family planning programme.

GAMBIA
Family Planning Radio Scripts
(Provided by the International
Planned Parenthood Federation)

SPOT ANNOUNCEMENTS

1. One voice: You are living in a changing world in which life is becoming more and more expensive. You need to change your life by adopting family planning so that you can fit with dignity into this new situation.

The Family Planning Association at 7 Buckle Street, Bathurst, The Gambia, is at your service all day **and every** day.

2. One voice: Abortion is becoming frequent in The Gambia. Many women, most of whom are married, run the risk of losing their lives by employing unsuitable methods of abortion.

THE ANSWER TO ABORTION IS FAMILY PLANNING

3. One voice: TOO MANY CHILDREN TOO SOON make mothers unhealthy, as they get old too soon. The many children of such mothers cannot be well cared for in basic matters like FOOD, HOUSING, MEDICAL CARE, EDUCATION, and even JOBS.

Family planning ensures in full the health of mothers, the care of children and above all - happy families.

GHANA
Family Planning Radio Scripts
(Prepared by the Ford Foundation and the
National Family Planning Programme of Ghana)

SOAP OPERA

Note: The following materials from Ghana are not scripts, but instead the story outline for a family planning radio drama.

Series 1, No. 1 -- "Live and Let Live"

Ama pleads with Kofi to see her parents and ask for her hand in marriage as soon as possible, before her parents realise that Kofi has pit her in the family way.

Kofi is well aware of what tradition would ask for if he does not do it, but Kofi has promised to marry another girl whom his aunt has recommended. Kofi's aunt has even gone so far as seeing the girl's parents.

Kofi does not know what to do. Though he loves Ama, his aunt is the one who has brought him up and to whom he thinks he owes so much. Kofi does **not** want to let his aunt down, but on the other hand Kofi is afraid of Ama's uncle who is a very tough man, and the linguist of the chief.

Kofi pleads with Ama to have the pregnancy dissolved **because** he has been working for only two years and has not got any capital, most of his money goes to the aunt to help look after Kofi's little sisters who are orphans, and his aunt's own children. Kofi also wants to pursue his studies further. Kofi assures Ama that after his studies, then they could get married, but Ama is adamant.

Series 1, No. 2 -- "Live and Let Live"

Ama is adamant to Kofi's pleas. Ama insists that she will not have the pregnancy dissolved because a young girl has died recently as a result of an abortion.

Kofi has no other alternative, but discusses the issue with his aunt who is very disappointed. Nevertheless, she gives in, but she insists that after Kofi and Ama are married, Kofi should take the girl she has recommended as a second wife, which Kofi reluctantly agrees to do.

The marriage of Kofi and Ama was very simple and everything went well.

Ama has her first baby by a midwife. After the birth Ama asks the midwife what she should do to prevent having another child for awhile, until she and Kofi are better off. The midwife tells Ama that she doesn't rightly know, but she has heard that there are clinics where the people there are doing something about it. Just what, she doesn't know.

Kofi must still go on supporting his aunt, his little sisters, his aunt's children and other relatives, both from his side and Ama's side. The economic aspects of their marriage are becoming unbearable, Ama takes to trading, but that does not solve the problem.

The girl proposed by the aunt has been sent to stay with her, and the girl's relatives have started demanding money from Kofi. To please his aunt, Kofi sees the girl every day and takes her out occasionally. The girl soon becomes pregnant.

Kofi is disgusted with himself. At a bar one day, he tells some friends of his situation and they in turn regale Kofi about what a fool he is. A discussion ensues in which Kofi's friends explain to him all about family planning -- how a fellow should make sure his girl takes care of herself.

Series 1, No. 3 -- "Live and Let Live"

Kofi's aunt finds out that the girl is pregnant and forces Kofi to perform the traditional rites to the girl's parents. The girl's parents do not know that Kofi is legitimately married.

Ama and Kofi discuss the high cost of living today. Ama suggests that Kofi cut down the remittance to his aunt and also to make the aunt realize that they will soon have two children and must start saving for their education. They also discuss about not having any more children until their financial position improves. This is a prolonged discussion in which Kofi explains to Ama all the factors of why they should not have more children for a while -- a better life for themselves, education for their children. Ama is somewhat apprehensive, but agrees.

Ama then goes to the nearest family planning clinic and upon her return she is of quite a different mind. She tells Kofi all that she has learned at the clinic, the people there are so helpful and kind, they explained the various methods of family planning to her -- the loop, the pill, foam -- and everything is painless and not harmful.

Kofi goes to his aunt and talks to her about cutting off the remittance. The aunt becomes very angry and tells Kofi that she knows it is Ama who is behind such a plot and that she will let Ama know that she

has made Kofi what he is today. She is entitled to the regular remittance .

The aunt goes to Ama and starts to quarrel with her, telling her about Kofi's background and insulting Ama's relatives. The aunt then tells Ama that she has news for her that will make Ama faint.

Series 1, No. 4 -- "Live and Let Live"

Kofi's aunt reveals to Ama that if she does not know, Kofi has a second wife and she has delivered a baby boy for Kofi only last week.

Ama becomes furious on hearing such news. It is too much for her and she goes to her uncle, the linguist, and narrates the whole story to him .

Ama's uncle becomes very infuriated, especially when he learns that Kofi's aunt extended her insults to him and his family.

Ama's uncle then accuses her of having been made sterile at the clinic she went to. Ama is very careful in explaining to her uncle that such a thing is not so -- she has only fixed it so that there will be more time between children. Ama explains that she can have more children any time in the future when she and Kofi want them, how she and Kofi now can have sex without fear of having children immediately. Both Ama and Kofi have a happier and more enjoyable sex life than ever.

Nevertheless, Ama's uncle orders her to quit Kofi's house to go live with him until he has had a chance to look into the matter. The uncle then sends for Kofi and discusses the issue with him.

Kofi is very apologetic and asks the uncle for pardon. The uncle tells Kofi that what his aunt has done is not a little thing and that he will summon Kofi's aunt before the chief.

Kofi goes straight to report this to his aunt. She is unperturbed.

Kofi's second wife, who has been staying with the aunt, has just returned from her parents after having the baby. The second wife gets to know all that is happening and decides to return the following day to her village to tell her parents what is happening.

Series 1, No. 5 -- "Live and Let Live"

A messenger is sent to the aunt's house summoning her to appear before the chief and the elders. She is asked to bring Kofi with two eiders from her family.

On the appointed day, the chief, his elders and his linguist sit in state. Ama, her mother and grandfather arrive. They introduce themselves to the people assembled there through the linguist.

The chief tells Ama's mother that he wishes to take up a very serious matter with her. He has been told that her daughter has gone to a clinic for an operation of some kind to make her sterile and have no more children. Ama's mother tells the chief that someone has been spreading lies about Ama because that is not so. The chief has been misinformed. Ama's mother then goes on to tell the chief just what Ama has done, and explains the reasons why Ama and Kofi have wanted to plan their family sensibly. The chief replies that such a thing makes sense but he is not sure about it. At least, he now understands the meaning and purpose of planning one's family.

Eventually, Kofi and his aunt turn up but without any elders. The linguist introduces them to the people and the chief asks the linguist to narrate why they have met, the issue at stake and to ask the aunt why they have turned up without any relative. To this, the aunt impertinently replies that no relative of hers had committed any crime to be taken to assizes, except herself. Everyone is furious.

Ama is called upon to narrate her part of the story, and the aunt her part. The aunt is found guilty and is told to cleanse Ama's family with two goats, two fowls, eight tubes of yams, two dozen eggs and N.C. 20. Furthermore, for being insolent to the chief, she must give the chief and his elders two bottles of schnapps.

But where is she going to get the money to pay for all these things? Kofi borrows from a money lender, the rate of interest 100 per cent.

Ama returns to Kofi's house. Kofi tells his aunt that because of the huge amount of money that he has to pay on her behalf, she should not expect a penny more from him. The aunt tells Kofi that they will live and see.

Series 1, No. 6 -- "Live and Let Live"

Because Kofi has stopped giving money to his aunt, she schemes with the family of Kofi's second wife to make trouble for Kofi and Ama.

Kofi is called to appear before the family for questioning, and when he gets there is surprised to see that his aunt is also there. The charges against Kofi are that when he came to the family to ask for the hand of their daughter with his aunt, he never made it clear to them that he was legitimately married, and that he has stopped remitting to the wife and child for the past two months.

To that, Kofi replies that since it was the aunt who negotiated the marriage, Kofi took it for granted that the family knew that he was legitimately married. The family turns to Kofi's aunt and asks her if that is true. The aunt tries to defend herself, but to no avail.

As to remittance, Kofi tells the family that he is not to blame but the aunt. He has become penniless but will remit to their daughter and his child when he becomes alright again. Kofi explains that things are going to be better economically because they have realized that they cannot have more children until they can afford them. He and Ama are working hard, practicing family planning now and things are looking brighter. The father questions Kofi about this as he does not know anything about family planning, to which Kofi explains about how one can stop having children for a time until one can afford more and care for them as they deserve.

The family agrees to all the proposals Kofi has made but the aunt insists that Kofi should borrow more money and remit to the wife and child. The father of the family tells the aunt that if Kofi were their son and in trouble, they would not add more troubles to his woes.

The family suggests that Kofi take the child and add him to the first wife's children so that the child's mother will be free to learn some trade to support herself. Lastly they tell Kofi they are giving him up to six months to dissolve the marriage with their daughter and that Kofi would see her off.

The father turns to the aunt and tells her that from henceforth they will have nothing to do with her. They are happy that their child is still young and can start all over again.

Kofi thanks the family and leaves asking that he should be given a week to make arrangements for the child to come to their home.

Series 1, No. 7 -- "Live and Let Live"

Kofi and Ama discuss bringing in the child and Kofi seeing the mother off. Ama is willing and happy about it for that will mean the money that would go to Kofi's other woman would now be used for their own family. Ama tells her uncle, the linguist, about it and he also is in favour of the idea.

Kofi goes to bring the child to their home. The child is now just a few months old. When Kofi goes for the child he cannot resist making love once more to his second wife and he does so without any contraceptive.

Kofi and Ama again discuss the importance of not having more children as they now have three to take care of. The cost of living is unbearable and if the family is to grow into a happy, healthy one they must give the children the best food obtainable, a comfortable home and save for the children's education.

Ama decides that it is time for her to go back to the clinic for her check up. At the clinic the nurse tells Ama that her loop is fine, Ama seems to be in wonderful health and certainly a happier person than when she came in the first time. The nurse tells Ama that if any of her friends are interested in family planning that there are also other methods available to them and they should not hesitate to come in for instruction and help. The nurse then tells Ama that when she is ready to have a child, she should return to the clinic and have them remove the loop. She can then have as many more children as she can cope with.

Kofi learns from the second wife that she is pregnant. He is furious with her and tells her she should know better. Hasn't she learned about family planning? Does she want to breed children like rats and make life miserable for unwanted children?

Series i, No. 8 -- "Live and Let Live"

Kofi tries to persuade the second wife to have an abortion, but she makes it clear to him that she will not do such a thing. There is nothing Kofi can do.

Kofi lectures her on the various ways of preventing pregnancy and strongly urges her to attend lectures that are given by the family planning nurse after she has the baby. Kofi makes it clear to her that by following the methods of family planning she will still enjoy her sex but without bringing forth unwanted children. Kofi keeps the pregnancy a secret.

Though she is pregnant, the **second** wife starts attending lectures on family planning at the clinic.

Meanwhile, Kofi has been working very hard at his job and has been promoted as an assistant manager in his firm. He organises a party to celebrate the occasion and it is a success.

GUATEMALA
ideas for Family Planning Radio Scripts

1. A man asks for a raise in salary. He insists he must have the money, for his wife is expecting her sixth child. A voice cuts in to suggest family planning.
2. Two women discussing children. One has two and the other six.
3. At a wedding, grandmother says "now is the time to start family planning."
4. Three children talk about what they want to be when they grow up. Voice asks if parents can afford it.
5. To the question "how can I plan my family as I have seven children," the answer is "it is never too late."
6. Family planning is for the children you already have.

HONG KONG
Family Planning Radio Scripts
(Prepared by The Family Planning Association of Hong Kong)

SPO'T ANNOUNCEMENTS

1. In order to avoid squeezing too many children into one bed, practice family planning.
2. More children, more worries.
3. Practicing family planning lightens the burden and strengthens one's health.
4. Cut your coat according to your cloth. Plan the size of your family according to your income.
5. Consult the marriage counselling advisor of the Family Planning Association to ensure a happy married life.
6. Contraception is not the sole responsibility of the wife; so consult the Male Clinics of the Family Planning Association for advice.
7. Attention young couples ! Practice family planning before it's too late.
8. With family planning you help your children to achieve a prosperous future.
9. In order to have a happy family life, consult the Family Planning Association for advice.
10. Practicing family planning improves *our financial situation and enables you to provide adequate care for your children.
11. Plan your family to benefit your children.

DRAMA

- 1 . Note: An introduction to the theme of the recording is presented in the form of Chinese folk songs. It advocates that people should practice family planning as soon as possible and reminds parents of their responsibilities towards their children in the field of education, care, food and housing.

This story is about Ah Bun and his wife who had seven children. Ah Bun had the old Chinese traditional idea of wanting

to have sons instead of daughters. Although they already had one son, Ah Bun still wanted to have another for security. Thus, his wife who had to look after one son and six daughters was exhausted with the house work, cooking, washing clothes, bathing the children. Ah Bun also had the worry of making enough money to support his children. The house was always noisy and dirty. They could only send the eldest son and daughter to school. His wife's health deteriorated. She **wanted** to teach her husband a lesson. She lied to him saying that she was pregnant again. He was shocked and worried **because** they could not afford to have the eighth child.

The landlady came along and wanted to collect rents for the last two months, but they did not have the money to pay her. Two of the children had been **sick** and a large sum of money had been spent on them. Ah Bun asked the landlady if she knew anybody who would perform an abortion, but she refused to give any names. Ah Bun needed money desperately, he would be **willing** to pay a high interest for a loan.

Then his wife told him the truth -- she was not expecting a baby. Bun was very happy and relieved. Before that he had refused to let his wife seek advice from the Family Planning Association, but now he was prepared to undergo a vasectomy.

(A mandarin song: "I Have a Happy Family" ends this story.)

2. Note: The recording opens with a folk song. Slogans are interspersed between sections of the story.

The story is about the **Wong** family. The children did not have enough to eat and they stole food from the landlord. The grandmother was very old-fashioned and liked to have a big family. Therefore, she was against her daughter-in-law going to seek advice from the Family Planning Association as she wanted to have as many grandchildren as possible. The grandmother had no regard for the health of her daughter-in-law nor the heavy financial burden on her son.

The wife was pregnant again and the husband was depressed **and** exhausted because he was unable to find a job. The son had to leave school.

SLOGAN: Mother unhealthy, father depressed, children suffering? Why not practice birth control?

One day, the son was away from home all day. It was probable that he had got into mischief as he was not able to go to

school. Mr. Wong was out looking for a job and his wife was about to give birth to a baby. The grandmother was at her wit's end for they had no money. The house-holder helped them.

SLOGAN: The future of a child is decided by the parents!

The son was brought back by a policeman. He had tried to steal money in order to pay his school fees. Mr. Wong blamed himself, being unable to fulfill his duty as a father. The policeman allowed the child to go free. The news came -- Mrs. Wong had given birth to twins. The parents were worried about how they were going to bring the children up. The house-holder advised them to practice birth control. The grandmother was now convinced that this was the right thing to do.

SLOGAN: Planned family is a happy family. Please come to the Family Planning Association. We'll solve your problem.

(Mandarin song: "Every Family Has Its Own Problems" ended.)

3. Note: This story is about a couple with four children, one born every year. Slogans are interspersed between sections of the story

SLOGAN: Don't place responsibility on your wife. The Family Planning Association has clinics for men.

The wife recalled that her first experience as a mother was so sweet and satisfying. But now, being a mother of four children, she can only feel sick and tired of her noisy, dirty home. Although she has a headache, she cannot even take a nap. The children need her attention and care.

SLOGAN: A child should be a wanted child.

Her husband comes back and tries to make supper for the family since she is sick. He also is tired after office work, but he has to do his best to look after the family. Plates are broken, and the supper is a mess.

SLOGAN: Spacing your children is the answer to your problem.

in the middle of the night, the husband is awakened by the crying of the baby girl. The baby has fever due to the neglect of the tired mother.

SLOGAN: Attention young mothers: Do not have more children than you can afford.

The wife takes the baby to the Maternal and Child Health Centre. When she returns, she finds that her husband has returned from work. He had caught cold when he woke up the night before and he is now too ill to work. The wife decides she will practice birth control like her neighbor who has only two children.

A loud noise is heard. The children, trying to get some biscuits from the top of the cupboard, have fallen to the ground. They are hungry.

The couple both agree to seek help from the Family Planning Association .

SI OGAN: Don't hesitate. Think of your responsibilities towards your children. Practice family planning.

4. Characters:

On Hong Keung - a clerk earning approximately \$300 per month. A careful and serious young man who is 28 years old.

Yu Fong Feng - shop assistant, monthly salary about \$200. She is 23 and very domesticated.

Mr. Yu - a 67 year old merchant, kind, open-minded and optimistic.

Mrs. Yu - a woman of 60 years old.

Narrator: On Hong Keung and Yu Fong Feng are sensible young people very much in love with each other. There is no difficulty about their getting married. Both of them are working; Hong is a clerk and Fong a shop assistant. Their combined income will amount to approximately \$500 per month. Besides, they have some savings too. But Hong is very serious and far too cautious. He never discusses marriage with other people and worries that once they get married they will have one baby after another, thus impairing their health and happiness in married life. They may have so many children that they will be unable to bring them up properly. These considerations make him put off the thought of getting married. Three years lapse, and Fong is becoming impatient and rather frustrated. She looks for an opportunity to bring the matter up. One Sunday morning when they were taking a walk in the park

(Background music and twittering of birds)

Fong: Hong, look at the couple by the fountain side. See how happy they are! Taking a walk in the park with their children. I really envy them.

Hong: Hm-m, the little girl with a pony tail is very cute and healthy looking, with rosy cheeks and big black eyes . . .

Fong: Look! She is laughing. Those little dimples and tiny snowy teeth, how lovable !

Hong: The boy is looking up at his mother talking to her. He is so innocent that both his parents can't help laughing. They look so alike!

Fong: The girl is the elder child. She is seven and is now in Primary Two. But her brother is not yet three.

Hong: How do you know?

Fong: They live near my place and are relatives of Mrs. Li, the one living opposite to our flat. They are the Ng family. Hong, it will be wonderful if we get married and have a happy family like theirs.

Hong: Maybe ours will be happier still. (Sighing) But what if we have too many children. We'll be overburdened, and it will be terrible then.

Fong: You really worry too much. How can you say things like that!

Hong: Why, it's possible.

Fong: Mrs. Li and Mrs. Ng always ask me about the date of my wedding. I put them off by saying that I haven't got a boyfriend yet, and ask them to introduce one to me.

Hong: (Jealous) If they really introduce one to you, will you drop me then?

Fong: They are very sharp and won't do so, knowing well that you are my fiance. Mrs. Ng is walking towards us.

Hong: Well, since you know each other, why not go and say 'hello' to her.

Fong: (Shyly) I won't. Let's turn that way then.

Hong: You go and greet her. Maybe she'll introduce a boyfriend to you and you won't have to wait for another three years.

Fong: (Offended and getting **angry**) Just what do you mean by that. If I want to have boyfriends I don't need anybody to introduce them to me.

Hong: I don't want to waste your time, that's all.

Fong: Three years ago, you said you would save up some money so that we can get married this year. And now, you ask me to wait for another three years, **three** years, and then another three years and another three years . . . (sobbing)

Hong: Fong, (calling out loudly) Fong! (Sound of quick footsteps)

(Music)

Fong: (Weeping)

Mrs. Yu: Fong, what are you crying for?

Fong: (Sobbing) I hate him, I hate him. I wish I'd never met him.

Mrs. Yu: What has Hong done to you?

Fong: I waited for him for three years and should be getting married by now. But he asked me to wait for three more years. Three years and another three years, I'm getting old! (sobbing)

Mr. Yu: Oh? Our young lady is getting impatient. Ha! Ha!

Mrs. Yu: How can you poke fun at your daughter like that.

Mr. Yu: Fong, you have to be more optimistic and face reality. Discuss your problems frankly with us and we'll work out a solution. Crying won't take you anywhere.

Mrs. Yu: Right, you'd better tell your father all about it, Fong.

Fong: This morning Hong and I went for a walk in the park. I showed my admiration of the Ng family and said I hoped we would be like them when we got married.

Mr. Yu: Good, this would have made him think of getting married.

Fong: But he is still worrying about having too many children and wants to save more money and get married three years later.

Mr. Yu: He's really unreasonable !

Fong: He always thinks I'll be like Mum having nine children and we won't be able to support them even with several hundred dollars increase in our salary.

Mr. Yu: Illness and diseases can be passed down from parent to child, but not the number of children. I've never heard of anything like that!

Mrs. Yu: Sheer nonsense !

Fong: He also told me of a friend who had three children after having been married for four years. The wife couldn't take proper care of the children, and their place was in a mess. It just wasn't like a home at all. He couldn't get a good rest everyday after work and always complained that marriage was the end of love.

Mr. Yu: This is the result of not having family planning. If he had planned beforehand his wedding would have been the beginning of a happy married life.

Mrs. Yu: Then you must help Fong so that she'll have a happy married life.

Mr. Yu: Certainly. I'll talk to Hong and I'm sure he will promise to marry Fong this year.

Mrs. Yu: Can you really do that?
(Sound of door bell)

Fong: Tell me how you're going to do it, Dad.

Mr. Yu: Someone is at the door.

Fong: Oh, what a time to drop in! It's so annoying being interrupted.

Mrs. Yu: Who is it? (door opened)

Hong: (Calling from the doorway) Fong, I've come to apologize and I have some good news for you.

Mr. Yu: Hong, come in and sit down. (door closed)

Fong: What's the good news?

Hong: I've decided to have our wedding at Christmas this year. What do you think, Sir?

Mr. Yu: Excellent!

Fong: What made you change your mind?

Hong: Take a look at this newspaper article.

Fong: 'Family Planning Advice will help you to attain health and happiness'.

Mr. Yu: Right! Go to the Family Planning Association and they'll help you out.

Mrs. Yu: What does this Family Planning Association do?

Mr. Yu: They give advice to people on birth control and how to plan for a happy family.

Mrs. Yu: To discuss these problems with them? Aren't you afraid they'll tell other people about it?

Mr. Yu: Surely they 'won't. Have confidence in them and they will do their best to help you. They'll recommend to you suitable and effective methods.

Hong: I like their 'Space for happiness'. 'To space' is really the best way to improve one's standard of living.

Mrs. Yu: If we had had this Family Planning Association in our days, Fong and Len would not have had to help me to look after the younger ones when they were still little kids.

Mr. Yu: People of the older generation always think that more sons mean greater happiness in life. They have one child after another till they are overburdened. 'Nature brings them into the world and she'll look after them', they say, and never think of educating them.

Young people now are more thoughtful, they know it's important to educate their children. This is a good sign. And they are lucky in that they can get help from the Family Planning Association. They

need only to pay \$1 .00 registration fee and will get advice from an experienced doctor who will recommend to them the simplest, most economical and effective method of birth control. How fortunate they are ! The Family Planning Association is indeed the key to a happy family.

Fong: But it would be very embarrassing if I had to see a male doctor.

Mr. Yu: Oh, there's nothing embarrassing about this sort of thing. But you can rest assured, the Family Planning Association has male doctors for male patients and female doctors for female patients.

Hong: You are quite right, Sir. Their clinic sessions and address are in the newspaper.

Fong: Still it's embarrassing. I won't go.

Mr. Yu: Marriage is building up a new family. It's something natural and you shouldn't be ashamed to talk about it. Your aunt refused to go to the Family Planning Association for advice on birth control. She was so shy and reluctant to go through any trouble. Now, look at her, she has four children already, one baby a year.

Mrs. Yu: Four children and their ages so close to one another. I pity her.

Mr. Yu: She is now practicing birth control through the help of the Family Planning Association.

Mrs. Yu: Does it mean that she is not going to have another baby from now on.

Mr. Yu: No, birth control is different from sterilization. Birth control prevents pregnancy for a period of time. She can have another baby when her health and their financial condition have improved. The Family Planning Association will give them advice and help when the time comes.

Hong: World population has been increasing very rapidly in recent years. Here in Hong Kong we have nearly four million people. If we don't check this rapid growth in population, there won't be enough food and houses for all.

Mr. Yu: Social economy, security and everything concerning our daily lives will also be affected.

Fong: Will it affect the family too?

Mr. Yu: Of course it will. You just can't afford the time and money to look after so many children. If they aren't properly brought up, they may cause trouble to society, and this in turn, will affect the family. Without planning your family beforehand you will bring trouble to yourself and society as a whole.

Hong: I want to be a responsible parent and so have to consider all these problems before plunging into marriage.

Mr. Yu: Now, do you still believe 'marriage is the end of love' ?

Hong: Well, to those who get married without thinking and planning beforehand 'marriage is the end of love'; but to those who adopt family planning sensibly and faithfully marriage should be the beginning of happiness.

Mr. Yu: You can say that again, Hong. I suppose two years after your wedding you'll have your first baby called 'Calm' and several years later, another called 'Comfort' .

Fong: (Shyly) Stop teasing me, Dad.

Mrs. Yu: You are nearly 70 and a grandpa already, but sometimes you are still like a child.

Mr. Yu: I'm so happy, my dear, and I'm sure you are happy too, though you don't say it out right.

Mrs. Yu: Alright. Hong and Fong have a lot to do planning their family. We'd better leave them alone.

Mr. Yu: OK, I won't disturb you two any longer.
(Romantic background music)

Hong: (Lowering his voice) Fong, I want to have a baby every four years. We'll have four children at the most, two sons and two daughters. What do you think?

Fong: (Very shy) I don't want to talk to you.

Hong: Alright, talk to the Family Planning people then.

Announcer: The Family Planning Association help those intending to get married on how to attain health and happiness in married life, and helps them on matters of birth control so that they can be responsible parents. At the same time, they also advise those who have too many children or those mothers who are in poor health by providing free family planning service *in* their clinics in Hong Kong, Kowloon and the New Territories. A large number of people attend their clinics every day. Go to the Family Planning Association clinics.. . they will do the best they can to help you.

INDONESIA
Family Planning Radio Scripts
Written by Commission on Responsible Parenthood of the
Indonesian Council of Churches and Church World Service)

SPOT ANNOUNCEMENTS

1. (The crying of a baby . . .)
Voice 1: Congratulations on your new baby. First born? Hm . . . a nice baby. How long would you like to wait for the next birth? Are you still too busy with the present one?
Voice 2: Jah. Now you can make a plan for your family; how many children and when you want to have them. Go and see your doctor or your nearest family planning clinics.

2. Announcer: Rice planted too densely will not yield a **good crop**. Improper spacing between births will affect the health of the mother as well as the child.

Ask for advice from your doctor or the nearest family planning clinic.

3. Announce& All family planning methods are good and will not disturb your health if you do them under the control of an authorized doctor.

See your doctor or the nearest family planning clinic.

4. (Background: The noise of babies and children. the mother's grumble . . .)
Announcer: Mother . . . , are you too tired and worn-out to have a child every year? Why don't you ask your husband to see your doctor or the **nearest** family planning clinic ? They know the way out.

5. First Child: "I want to be a doctor."
Second Child: "I want to be an engineer, constructing build-ings. "
Third Child: "I'd like to be a pilot."
Fourth Child: "I'm going to be a teacher . . ."
Male Voice: "Every child has his ideal. How fine it is if his dream can come true. Are you helping to realize his dream, if you continue to have more and more children?"

DIALOGUES

1. Note: This conversation is between a mother and a doctor.

Mother: Good afternoon, doctor. This time I would like to ask a question which, I think, all housewives would like to ask. This is about family planning, of course. The problem is like this. Many of my friends and acquaintances are willing to practice family planning. But when they hear that family planning might bring them bad effects, they begin to doubt. Is it true that there are bad effects, doctor?

Doctor: I am very pleased to hear that question. Yes, there are rumors. And we cannot be indifferent to them. We should give clear and honest information to women about family planning so that they won't worry. I said honest information; what I mean is we should not hide anything from them. Only through honest and frank information can we promote proper understanding. Mothers have the right to know the real thing.

Mother: Thank you, doctor, That is what we mothers want, frank information. Now my first question. I have heard several ways of practicing family planning. Which method is the best?

Doctor: I have a very brief answer to your question. All methods recommended by family planning officers are good. The methods were medically checked before they were put into practice. The question is not which is the best, but which is the best for you. Is it clear, mother?

Mother: What do you mean, doctor? Do you mean that a certain method is suitable to a certain couple?

Doctor: Exactly. A certain method may be good to one couple, but may not be to other couples.

Mother: How, then, do we mothers know to choose what is good for us.

Doctor: The only thing to do is to come to the doctor or a family planning clinic. Mothers play an important role in this case. Mothers can help doctors to decide the best method, the most suitable for a certain mother. The medical check up made by the doctor and frank answers from mothers will help much to make the choice.

Mother: What do you mean by frank answers, doctor?

Doctor: It means that you want everything to be very clear. That is how it should be. As you know, family planning is a personal matter. Therefore, mothers often

do not want to be frank. It is understandable but it doesn't do any good. You see, mothers are very often reluctant or shy to ask about sexual matters.

Mother: You mean . . .

Doctor: Quite often, a method which meets medical requirements is not very suitable to a certain couple. Let's say it disturbs them. In this case, for instance, if they don't report it frankly to the doctor, it may make them give up the method. But if they tell it to the doctor frankly, another method can be suggested. Usually there is a suitable method.

Mother: I quite see now, doctor. The only way to find out the best method which is also the safest method in spacing out pregnancies and not interfering with sexual intercourse between husband and wife is by going to the doctor or a family planning clinic.

Doctor: Exactly.

Mother: But what about the rumors? Can I put them to you for explanation?

Doctor: Certainly.

(Then follows questions and answers about negative results of family planning methods)

I.U.D. : bleeding?
 cancer?

Pill: cancer?

Announcer: As the case with all medicine in general, family planning methods may make people complain. This needs regular checking. With regular checking all methods are safe.

2. Note: The expecting mother is sent to the Social Worker because she has had nine children. This is her 13th pregnancy - the 10th child. Her youngest child is just one year.

Social Worker: Oh mother, I think this is the first time we meet each other.

Mother Tati: Yes Mam, the doctor asked me to come here. Here is letter.

Social Worker: Thank you. May I read it, please. (rustling, sound of the paper, letter being read.)

So, your name is Tati and your husband is Manan. You live at Bakitduri. Rather far, isn't it? Why do you come here for an examination? Isn't there a clinic at Bukitduri?

Mother Tati: Yes, there is, but I am usually examined here. I was formerly examined here for three earlier

births.

Social Worker: It seems you're going to give birth soon.

Mother Tati: Yes, I'm expecting this month. I seem to have one every year. Actually I am very tired from having children. My youngest is just one year.

Social Worker: How many children do you have now?

Mother Tati: Quite a few. It would have been 12 if all of them had lived. I actually have nine; this will be the tenth.

Social Worker: Dear me, you do have quite a few. The three missing children, are they dead or miscarried?

Mother Tati: 'They died when they were small. One of them died when he was one year old and one at the age of two years and the third at the age of six months.

Social Worker: Did they die from illness?

Mother Tati: Yes, one suffered from diarrhea for three days, and one had a fever for a while and died. I was too busy to look after them. I had to take care of the other children, too. It's really hard.

Social Worker: Why don't you ask your husband to help you to take care of the other children?

Mother Tati: He has to work hard looking for money to buy food. How can he save time to take care of the other children. In the morning he works till 2 o'clock. He works as an office boy. His salary is very small; it is a government office, you know. In the afternoon till evening, he has to work for some more money. He gets a commission by selling small dry goods and some times he drives a redicab. He doesn't get so much from these but it's still something, you know. The children have so many needs, especially those who have to go to school.

Social Worker: How many of them go to school? You must manage it quite well to send nine children to school.

Mother Tati: Well, actually, the eldest stopped school after the sixth grade. We intended to send him on to secondary school but it was too expensive, and so he had to stop. His younger brothers and sisters, the fourth, the fifth and the seventh, are still in the elementary school. The ninth is six years old. We'd rather not send him to school. We can't

handle the expenses.

Social Worker: So how many of them are still small?

Mother iati: Let me think. Ah, yes. Number 9, 10, 11 and the youngest.

Social Worker: It would be good if you could send all of your children to school.

Mother Tati: Indeed, I would like that if my husband can pay for it, the children will be sent to school; if he can't, the children must wait.

Social Worker: You shouldn't take it just like that. If you wish, of course, your children could be well-educated.

Mother Tati: Of course, I do. But what can I do, I have so many children. We can hardly provide even our daily food. If only we could get enough to keep us for a day we would be grateful.

Social Worker: Do you also work to earn extra money?

Mother Tati: Ah, it's difficult. Even to take care of the children it's rather difficult for me. I must do the cooking, washing. How can I do anything else?

Social Worker: Let the children help you and your husband arrange the household.

Mother Tati: What when the children are growing bigger it is so hard to control them. They spend the whole day playing with their friends. Moreover, our house is too small. When they come back from school, they have their lunch and soon disappear, only to come back home in the evening.

Social Worker: Do you know where and with whom they play?

Mother Tati: Sometimes they tell me where they go. They play with the neighbors and friends from school.

Social Worker: I see that you are busy. If it is so, you'd better not have any more. Have you ever heard about family planning ?

Mother Tati: I think I have. I heard it from friends and the doctor has also told me about it. But . . .

Social Worker: What it means is to space your pregnancies. Not have a child every year. Didn't you say that you are worn out and tired?

Mother Tati: Yes. I must admit that the children are not well looked after. The bigger ones look after themselves. They are so stubborn.

Social Worker: No, you shouldn't take it that way. The bigger children also need your attention, they must be guided. You must teach them what

is right and what is wrong. Imagine, you don't know yourself where and with whom they are playing at the moment. If children don't get guidance from their parents, they seek it from other people. How do you know that these people will teach good things to your children? If things go worse, who will get the trouble? You and your husband.

Mother Tati:

Yes, I quite see now. But I have no time.

Social Worker:

That is it. You are too busy with the baby and the smaller ones. You must do the cooking and the washing. I believe that if you have time to talk to the children they will gladly assist you at home. And you will immediately see if a child is doing something wrong. This can be avoided before it goes worse.

Mother Tati:

Yes, that's true, Mam. The boys are usually naughty. A+ times, the neighbors report to me that Agus is fighting with somebody else. Nasir is throwing stones at a roof. In fact, I feel ashamed to hear it. My husband can't take care of the children either, since he is working hard for money. I don't have the heart to report to him about the naughtiness of the children when I see him so tired.

Social Worker:

That is the point. You can't be too much occupied with the baby and the smaller ones. The others must be looked after, too. I would advise you to practice family planning.

Mother Tati:

I am afraid. They say it is so painful. If you take medicine, they say, it might bring cancer.

Social Worker:

Well, you haven't tried it. It is pure nonsense. If you see the doctor regularly, you don't have to worry. He can help you to avoid pregnancy. And your health will not be disturbed. That is what you need. You then will have more time to look after the children, your husband and yourself. You all will have time to go to "Project Senen," for example, for the children to have amusement.

Mother Tati:

It seems you have convinced me. I will practice family planning after this one is born. If only I had been well informed about this before, I would have practiced family planning.

Are you a nurse or a doctor?

Social Worker:

No, I'm a social worker. I cooperate with doctors and nurses and midwives. We help

to provide good information on family planning to people like yourself.

Mother Tati: Oh, I see. I will tell others to come here so that they will understand what family planning is.

3. Note: This is a discussion about family planning between Mrs. Karsono and the Reverend Supadmo.

Mrs. Karsono: Rev. Supadmo . . . I think it will be profitable for the mothers and fathers if you give them information on "Responsible Parenthood." Is it the same as the so-called "Family Planning" ? And what is the real purpose of the family planning ?

Rev. Supadmo: Oh, yes, Mrs. Karsono. It is indeed a pleasure to give information about "Responsible Parenthood" or "Family Planning." Actually, responsible parenthood and family planning are the same in that both have the same aim, that is to control birth, so that the spacing between births would not be too close together. There is consideration for the mother's health and that of the baby also. The church does not use the term "Family Planning," but rather "Responsible Parenthood" because we believe that whatever we plan will be disposed by God. The church believes that only God is the creator of the whole of the universe. That is why the Protestant denomination prefer to use the term "Responsible Parenthood."

Mrs. Karsono: Do all the Protestant Churches agree with this?
Rev. Supadmo: Ily, it is rather difficult for me to answer this since there is no center which is authorized to decide this. Yet, I can mention the feeling of two big church organizations, that is the World Council of Churches and East Asia Christian Conference. In 1956, there were reports on responsible parenthood, but not all churches could accept it at that time. However, now the World Council of Churches reports that a number of churches have accepted it at the conferences held in Bangkok and Japan in 1962. And because of the growing acceptance of the term "Responsible Parenthood," the Council of Churches formed in 1965 a sub-commission for responsible parenthood, and have so far held consultations and conferences with doc-

tors. The most important thing realized is that husbands and wives must have a sense of responsibility to the family and children, since they are a gift of God. This, Mrs. Karsono, is one of the aims of responsible parenthood.

Mrs. Karsono: I would like to ask you as to whether or not medicine and devices used for responsible parenthood are dangerous to the health of the user.

Rev. Supadmo: Not that we know of. Of course, the church cannot approve of abortion, unless it is recommended by a doctor. No religious faith approves of abortion. There are also certain requirements for the use of the medicine and devices, of which a doctor will know. Among other aspects, both husband and wife must agree to the use of the devices or medicine and they should not be too expensive.

Mrs. Karsono: Thank you, Rev. Supadmo. Where can mothers get information and clarification on responsible parenthood?

Rev. Supadmo: They can get it at the clinics for responsible parenthood. There is usually a nameboard with "Family Planning Clinics." Hospitals and children's clinics also serve those who want to have information and to practice family planning. Christian hospitals have been serving people wishing to practice family planning.

Mrs. Karsono: Do you still have any other things to say to the listeners ?

Rev. Supadmo: This is another thing I wish to add. The church is of the opinion that a child is a gift of God. Many people forget this. One must know that he has to be responsible to God for this gift. Now then, have Christians carried out this responsibility? Think it over. That is my message. If you still have questions, you can put them to the "Sub-Commission on Responsible Parenthood," 3 Djalan Dempo, Djakarta.

Mrs. Karsono: Thank you very much for your answers. We hope that now the listeners have some idea of responsible parenthood.

Announcer: Dear listeners, this has been a dialogue between Mrs. Karsono and Rev Supadmo. Until the next program, we wish to thank you for listening.

IRAN
Family Planning Radio Scripts
(Prepared by The Population Council)

SPOT ANNOUNCEMENTS

1. Sound Symbol

"Two or three children is better,
The loop and pill are safe. "

Many people are talking about the banners, posters, film at cinema, exhibits and radio programs on family planning. Thousands of women are going to the local health stations for oral pills and IUD. Methods are safe, reliable and easy to use. Some women have side effects but they usually go away. We would like your views on the program. How should the program be improved? To express your opinion or to get further information, write Box 135, or telephone 6146 and 6147.

Sound Symbol

"Two or three children is better,
The loop and pill are safe. "

2. Sound Symbol

"Two or three children is better,
The loop and pill are safe. "

We all want to have security in old age.

We want modern conveniences such as heat in the winter, a refrigerator and a stove. We want to have good health and education. Fortunately, these goals are becoming possible. But they are difficult to achieve when parents have large families and there is rapid population growth. Two or three well educated children can provide more support in old age than many poor ones. Modern conveniences are difficult to get when there are five or six children to feed and clothe. The health and education opportunities are better for the family and government when parents have only two or three children.

If you want to have only two or three children, get the loop or pill at the nearest health station or Health Corps Clinic.

The loop is easy to use, safe and free. The oral pill is 100 per cent effective and harmless. Some women cannot use these methods because of side effects, but there is never any real danger.

For further information call 6146 or 6147 or write Box 135. We would like to know your opinions on family planning.

Sound symbols

"Two or three children is better,
The loop and pill are safe. "

3. Do you want to know the various ways of planning the size of your family? Please go to the nearest health station and ask for information from the family planning worker there.
4. Some parents like to have children right away when they are young. Others like to work and want to space the children out over more years. Do you want to know how to plan your family size? Please go to your local health station and ask the family planning worker there to help you.
3. Remember that a mother has to go through nine months of pregnancy. Then after giving birth, she has to breast feed her baby. To keep strong and have a healthy baby she ideally should have two years between children. See your local health station for information on how to do it.
6. Now, there are over 50,000 women in Iran using the loop to plan the number of children in their families; there are other methods also. Go to your nearest health station and they will tell you about the loop and other methods.
7. A wise housewife can prevent unwanted things happening. If you want to wait two or three years before you have a baby again, please use the loop. For more information on where to get it, go to your local health station.
8. Raising children and educating them are the duties of parents. if you have children, you should have only the number you can raise.
3. The loop is a small "S" shaped plastic device to prevent pregnancy. A doctor can insert it painlessly in a woman in a few minutes. When you want a child again it can be easily removed. Go to your local health station to find out more.

10. How many children do you want. . . how often do you want them?
Now you can be sure. . . if you wear a "loop," the new semi-permanent type intrauterine contraceptive device that eliminates all problems in practicing family planning. It's harmless, safe, economical, effective, and recommended by leading doctors all over the world.

See your doctor. . . or visit a health center family planning worker for further information about the "loop."

11. Practice family planning. Join the thousands of married couples who have found that regulating the spacing of their children is simple and has resulted in happier homes . . . healthier mothers. . . and more savings to improve living standards and to assure an equal opportunity for every child.
12. Every married couple is talking about the "loop"-- the new modern semi-permanent type method of preventing conception that is safe, convenient, and has eliminated all the problems in practicing family planning. This small plastic device is simple to insert, is harmless and has been proven effective by women all over the world. It can be removed easily and quickly whenever you want to have another baby.
13. How about you? Can you afford to have more than two or three children? And, still give them all the things they deserve: Care, clothing, food, education, a comfortable home? In short, an equal chance for a bright future. If you can't, practice family planning.
14. It costs money to raise a large family. Would you like to have your children four years apart instead of every year? Go to the nearest health station. They can tell you how to have babies only when you want and can afford them.
15. Medical science has helped us to overcome smallpox, yellow fever, cholera and other diseases. Many children alive today would be dead if it were not for the new knowledge of our doctors. Now, the wise doctors also know how you can have children only when you want and can afford them. See your family specialist at the _____ or at your nearest health station.
16. Safe and harmless . . . family planning methods can help you. Go to your nearest health station for free information on how to have babies only when you want them.

17. We know that you love your children and want to educate them. It is easier to educate your children if they are four years apart. The family planning specialist will tell you what to do. Visit your nearest health station or the _____ . It will cost you nothing.
18. Mothers . . . are you tired and weak from having a new baby each year? Why don't you and your husband visit the family planning specialist at the nearest health station? It is now possible for you to have babies only when you want them.
19. First Child: "I want to go to school and be a doctor. "
Second Child: "I'm going to be a farmer, with my own big farm and animals. "
Third Child: "I'm going to be an engineer and build big buildings and big bridges. "
Fourth Child: "I'm going to be a wise teacher . . . "
Man's Voice: "All children have dreams and, if these dreams were to come true, it would be a better world. Can you make your children's dreams come true? Will you be able to . . . if you have many more children?"
20. "My name is Mr. Moti. I am a katkhoda in Najafabad. Many of our families have adopted family planning methods. We are happy at having been given this opportunity to keep our families small enough to insure a better life for all."
21. "I am a resident of Shahreza. Here, many of us have attended meetings on family planning, and many of us are now using the methods we were taught to control the size of our families. Why don't you learn about these methods, too? Visit your nearest health station or the _____ "

INTERVIEW

Sound Symbol

"Two or three children is better,
The loop and pill are safe."

Doctor: Hello, I am Doctor _____. I am now working at Motamed Maternity Hospital on Azar Street, between Shiekhbahaie and Shah Streets. Every morning I am helping women who want advice on spacing or stopping children.

Patient: What contraceptives do you most often recommend?

Doctor: I recommend the loop and pills because they are safe,

reliable, easy to use and inexpensive. In most countries women use the loop because they do not have to remember to take the pill, and the cost is much less. Both are effective and safe methods.

Patient: But women have side effects like bleeding or back pains.

Doctor: Some women have these problems but they are not serious and they usually go away.

Patient: Can I continue doing my work and will married life be normal ?

Doctor: Yes, you will be able to do your work and married life is often happier when there is no fear of an unwanted pregnancy.

Patient: How big is the loop?

Doctor: I can put the loop in your womb in a few minutes; there is not very much discomfort because the loop is a soft flexible plastic smaller than your thumb.

Patient: When can I get the loop?

Doctor: The best time is toward the end of a period or four or five days after but you can get the loop at any time.

Patient: How long can I wear the loop?

Doctor: You can have the loop as long as you want. Most women coming to the clinic have two or three children and have decided to stop but the loop can be removed in a few seconds if you want another child.

Patient: Is the loop effective in preventing pregnancies?

Doctor: Yes, the loop is one of the most effective methods.

Patient: I have decided to have the loop because the loop is safe, free, reliable, and easy to use.

Doctor: We will give you the loop free without any cost. Female doctors providing the loop are also available at:

<u>Location and Address</u>		<u>Time</u>
Dispensary #5, Ave. Hakim Nezami	Dr. Rohani	3-5 pm
Dispensary Ghoraishi, Ave. Natef	Dr. Homa Irajpour	3-5 pm
Health Center, Maidan Pahlavi	Dr. Modir Tamadon	8-12
Masud Clinic, Saremieh	Dr. Rohani	8-12

Write Box 135 or call 6146, 6147 for further information.

Patient: Two or three children is enough.

Sound Symbol

"Two or three children is better,
The loop and pill are safe. "

JAMAICA
Family Planning Radio Scripts
(Prepared by McCann-Erickson)

SPOT ANNOUNCEMENTS

1. Girl: Thank you, nurse.

(Footsteps under)

Girl: Oh Lord, six weeks pregnant . . . what ah going to do? I have to control myself, yu know last nic't when I tell John I think I was pregnant, all him ask me was what I was going to do, him never even say we . . . ah going to lose mi **job** . . . Lord what ah going to tell me mother? . . . And yu can imagine how the girls at work going to talk about me . . . oh Lord what ah going to do? . . .

Announcer: This did not have to happen. Visit your family planning clinic or your doctor today. You don't have to get pregnant. Plan your family -- better your life .

2. 1st Woman: (singing) "Brown skin gal stay home and mine baby. "

2nd Woman: Hey Cherry, what happening **chile**, how the baby?

1st Woman: De baby well!, but yu see mi here, I worrying already how I going to bring it up. Times so hard and is only me one.

2nd Woman: Mi dear, don't bother make any more worries for yuself, don't have any more baby now, go down to de **Family Planning Clinic** no. Is easy, de doctor give yu a complete check up and most of the birth control yu get is for free.

1st Woman: Yu know yu right, I really can't afford to have any more baby now, I not putting this **thing** off again. I going down there now. Stay the baby for me no?

3rd Voice: Plan your family -- better your life.

3. (Woman sobbing uncontrollably -- held under)

Woman: (Sotto Voice) Poor Mary! She's going to have another baby she ~~doesn't~~ want to have. She won't be able to care for it properly. The child's father is not the kind of man who will help her. She alone will have to bear the burden of this unwanted child. Wouldn't you feel like crying if

this had happened to you? Don't let this happen to you. Visit your nearest family planning clinic or your doctor for help and advice on how to plan your family and better your life.

(Sobs - to end)

4. (Sound of raucous laughter from men)

1st Man: Hey Master, a little boy outside say you is him father and that him mother send him to you.
2nd Man: What him look like?
1st Man: Yu mean yu don't know? By the way, how many pickney you have?
2nd Man: I don't really know yu know, must be about twelve . . .
1st Man: Den yu support all a dem?
2nd Man: Support what? Whey I mus get money from?
1st Man: Yu conscience bother you?
2nd Man: Yes, sometime, but what I mus do about that?
1st Man: Plan your family -- to better your life. Go to the family planning clinic or yu doctor man, and encourage yu girls friends to go. Man have some responsibility too, yu know . . . I personally don't see anything to be proud about in having children yu can't support. It don't make yu more of a man. Plan your family -- better your life.

5. Youth: Ah in a worries. Ah in a deep worries, Mass Ron!
Man: Is what happen to you, Tom?
Youth: You know that gal you always see me with? Miss Rebecca youngest daughter?
Man: Eehee !
Youth: Well, she going have a pickney for me. Ah is in a worries, ah tell you! Her mumma say if'n I don't come up with some money to buy baby things, she going to ketch me and fix mi business! Ah going have to protect meself!
Man: You shoulda protect yourself before ! You don't hear about family planning, man.
Announcer: If you can't afford to make her pregnant -- and who can nowadays -- take her to the nearest family planning clinic or your doctor. Learn how to prevent unwanted pregnancies. Plan your family -- better your life.

6. 1st Man: Hey John, how it going, ah just see yu girl friend, a while ago, she pregnant again eh?

2nd Man:

Yes sah, is the third gal, I make that thing happen to this year, I just have bad luck.

1st Man:

It look so, then where yu going now, work?

2nd Man:

Work wha, mi no cuss off the boss last week, him come tell me how I irresponsible.

1st Man:

Well bredda I glad I don't stay like you yu hear, me tell my girlfriend to go to the family planning clinic and make them tell her about birth control, we can't afford any children right now and I not making me and her life any harder. Anyway I gone a work, see the bus coming here.

2nd Man:

Hey, beg yu a twenty cents no, just free mi . . . free mi . . .

3rd Voice:

There is nothing good about fathering children carelessly. Plan your family and better your life.

KENYA
Family Planning Radio Script
(Prepared by the Kenya Family Planning Association)

MUSICAL SPOT

Note: In Kenya, East Africa, the Kenya Family Planning Association, in cooperation with the International Planned Parenthood Federation, has developed a **radio program** known as the "Happy Family Club." This is an extension and enlargement of a family planning program. The purpose of this new program is to help families solve their major problems. The emphasis is: **plan** your children, plan your food, plan your home, plan your money and plan your leisure. The "total" approach to the home has brought a new emphasis and effectiveness into the program as a whole and to family planning in particular. More than 20,000 families became **members** of the club during the first seven months. These are theme songs used on the radio by the Happy Family Club. They were written and sung especially for this program by a group of young people, the Equator Sound Band. This one, "Maisha Mema," is sung in Swahili.

"MAISHA MEMA" (THE GOOD LIFE)

First Man: Life is good to me
I have three wonderful children
I have a beautiful wife
We have money in the bank
My children go to good schools
My wife is clever
When we were married she spoke to a nurse at the
clinic
The nurse said I will tell you how to have
Just as many children as you want.

Second Man: Life is not good to me
I have ten young children
My wife looks old and weary
We have no money in the bank and I cannot pay my
bills
I am not clever
When we were married I did not send my wife to the
clinic
So we had ten children
When we only wanted five.

Both Men: All you young married men
Please take our advice
Decide how many children you want
1, 2, 3, 4 or what you want
Send your wife to the clinic
The nurse will tell you to have just as many as you
want
And to have them when you want them.

KOREA
Family Planning Radio and Television Scripts

SPOT ANNOUNCEMENTS

1. Now you can simplify the practice of family planning if you wear the loop, the new semi-permanent intrauterine contraceptive device that eliminates all preliminary procedures required when other methods are **used**. It's so simple, requires only one short visit to a trained physician which provides you permanent protection against conception until the time you and your husband decide to have another child. Then the "loop" can be removed in a few seconds.

Visit your doctor (name) or a health center family planning worker for further information about the loop.

2. How many children do you want. . . how often do you want them? Now you can be sure. . . if you wear a "loop," the new semi-permanent type intrauterine contraceptive device that eliminates all problems in practicing family planning. It's harmless, safe, economical, effective, and recommended by leading doctors all over the world.

See your doctor. . . or visit a health center family planning worker for further information about the "loop."

3. Now you can be sure in planning the size of your family if you wear a "loop," the new semi-permanent internal contraceptive device that eliminates all problems in practicing family planning. There is no need to calculate "days" or "minutes," or to purchase any drugs or supplies if you wear a loop. In short, all of your worries and expenses are over. And most important, the loop can be removed in a matter of **seconds** if you want to have another child.

See your doctor. . . or visit a health center family planning worker for further information about the loop.

4. Practice family planning. Join the thousands of married couples who have found that regulating the spacing of their children is simple and has resulted in happier homes, healthier mothers and more savings to improve living standards and to assure an equal opportunity for every child.

See your doctor. . . or visit a health center for further information. Free contraceptive supplies are available at all health centers.

5. Every married couple is talking about the "loop," the new modern semi-permanent type method of preventing conception. It's safe, convenient, and has eliminated all the problems in practicing family planning. This small plastic device, simple to insert, is harmless and has been proven effective by women all over the world. It can be removed easily and quickly whenever you want to have another baby.

See your doctor. . or visit a health center family planning worker for further information about the "loop."

6. Don't delay... find out today. Get the facts and practice family planning. We must start now to reduce our problem of excessive population growth if our children are to enjoy better health and an improved standard of living. Give them a chance. Get the facts, practice family planning.

See your doctor. . or visit a health center family planning worker for further information. Free contraceptive supplies are available at all health centers.

7. Practice family planning. Help reduce the birth rate and prevent the growth of our population to twice its present size by 1980. This is the only way we can improve our standard of living and attack the problem of food, housing, classroom and job shortage. Make sure your children will have a bright future. Practice family planning.

See your doctor... or visit a health center family planning worker for further information. Free contraceptives are available at all health centers.

8. Practice family planning. We must adopt modern contraceptive ideas and practices to reduce the birth rate the same as we adopted modern medicine and public health practices to reduce the death rate, if progress is to be made in improving our Standard of living. At the present rate of growth, our population increases by about _____ persons each year. Practice family planning.

See your doctor.. . or visit a health center family planning worker for further information. Free contraceptive supplies are available at all health centers.

9. How many children do you want? How do you want them spaced? This is a decision you can make and keep, if **you** practice family planning. Successful practice will result in:

- A happier, healthier wife
- Equal care and education for your children
- More savings for investment
- Better living. . . security

Practice family planning. See your doctor.. or visit a health center family planning worker for further information. Free contraceptives are available at all health centers.

10. How about you? Can you afford to have more than two or three children? And still give them all the things they deserve: Care, clothing, food, education, a comfortable home? In short, an equal chance for a bright future? If you can't, practice family planning.

Visit your doctor.. or a health center family planning worker. Free contraceptives are **available** at all health centers.

11. Do you know how to have children only when you want them? If not, visit the _____ or the health stations in _____
12. Do you want to wait a few years before having another baby? Go to your nearest health station or to the _____ The family planning specialist will tell you what to do.
13. It costs money to raise a large family. Would you like to have your children four years apart instead of every year? Go to the _____ or to your nearest health station. They can tell you how to have babies only when you want and can afford them.
14. Millions of people throughout the world and in _____ know the benefits of family planning. Do you? Go to the _____ or to your nearest health station. **Learn** how to have babies only when you want them. **Learn** about the benefits of family planning.
15. Medical science has helped us to overcome smallpox, yellow fever, cholera and other diseases. Many children alive today would be dead if it were not for the **new** knowledge of **our** doctors . **Now**, the wise doctors also know how you can have children **only** when you want and can afford them. See your family specialist at the _____ or at your nearest health station.
16. **Family** planning methods are safe and harmless. They do not harm your manhood or your enjoyment. Why worry because you

do not want another baby? Go to the _____
or to your nearest health station. It will cost you nothing.

17. Safe and harmless . . . family planning methods can help you. Go to your nearest health station for free information on how to have babies only when you want them.
18. You are responsible for the future of your children. Will you be able to give your next child a good life and an education? If you would prefer to wait a few years before having another baby, visit your nearest health station or the _____. They can help you.
19. We know that you love your children and want to educate them. It is easier to educate your children if they are four years apart. The family planning specialist will tell you what to do. Visit your nearest health station or the _____. It will cost you nothing.
20. Mothers . . . are you tired and weak from having a new baby each year? Why don't you and your husband visit the family planning specialist at the nearest health station or the _____? It is now possible for you to have babies only when you want them.
21. First Child: "I want to go to school and be a doctor. "
Second Child: "I'm going to be a farmer, with my own big farm and animals. "
Third Child: "I'm going to be an engineer and build big buildings and big bridges. "
Fourth Child: "I'm going to be a wise teacher . . . "
Man's Voice: "All children have dreams and, if these dreams were to come true, it would be a better world. Can you make your children's dreams come true? Will you be able to . . . if you have many more children?"
22. "My name is _____. I am the multor for _____. Many of our families have adopted family planning methods. We are happy at having been given this opportunity to keep our families small enough to insure a better life for all. "
23. "I am the head of the Farmer's Organization in _____. A good farmer knows that if he uses too much seed, his crop will be too crowded and will yield a poor harvest. It is the same if a family has too many children. A wise farmer plans his crop. A wise father plans the number of his children."

24. "I am a resident of _____ . Here, many of us have attended meetings on family planning, and many of us are now using the methods we were taught to control the size of our families. Why don't you learn about these methods, too? Visit your nearest health station or the _____
25. "My husband and I live in _____. When we were married two years ago, we visited the health station at _____ to learn about family planning. The family planning specialist told us that, now, people can have babies only when they want them. My husband and I decided that we would not have a baby until we could properly care for it. Now my husband has a good job and we have a comfortable home. Our first child is on its way. Why don't you learn about family planning too? Visit your nearest health station or the _____

LEBANON
Family Planning Radio Script
(Prepared by The Near East Council of Churches)

RADIO LETTER

Dear listener,

Here is a quotation from the UNICEF year-book for your information:

The children are the only victims who suffer badly in underdeveloped countries because 40 per cent of them are below 15 and one-third of them under-nourished and live in dirty slums.

Over nine million children in the world today live in desperate need of food and medical care.

In 1980 the total number of children in the world below 15 will be over 1,300,000,000. All of them will be in great need of relief.

Housing has always been one of the major problems to be faced in the future. Crowds of children swarm in the streets of big cities like junk.

Well, it is a scary report to you parents, isn't it? We hope your children aren't among the wretched and unhappy.

Please, think on this bit of information and try to do something about it.

Do you have any family plans?

LIBERIA
Family Planning Radio Scripts
(Provided by the International
Planned Parenthood Federation)

SPOT ANNOUNCEMENT

Sound effects: Crying baby - children yelling
Johnny: Mama, I'm home!
Mother: Oh dear, is it twelve already? Here, feed the
baby while I get lunch ready. And keep an eye
on baby sister.

Sin in voice: Are you over-burdened with a load of care
Are your chores too many for you to bear
Space your many blessings
Care for them one by one
And it will surprise you how much you'll get done
Space your blessings
Care for them one by one
Space your many blessings
See how much you'll get done

NIGERIA
Family Planning Radio Scripts
(Provided by the International
Planned Parenthood Federation)

SPOT ANNOUNCEMENTS

1. Friend: Hello, Mrs. Ojo, have you heard about the latest news?
Mrs. Ojo: Oh no, what is it about?
Friend: About how to plan your family.
Mrs. Ojo: How to plan your family?
Friend: Yes, how to plan your family.
Mrs. Ojo: How do you do this, is it by not going near your husband?
Friend: Oh no.
Mrs. Ojo: By not sleeping in the same house with your husband?
Friend: Of course you can sleep in the same house or **bed** and not become pregnant.
Mrs. Ojo: My dear, you are joking. How do you do this ?
Friend: Visit the newly formed organization. Call family planning to help you out.
Mrs. Ojo: Where can I go?
Friend: Go to the nearest hospital near your area.
Mrs. Ojo: I must thank you for this useful and valuable information. As soon as Mr. Ojo comes back, we will both visit the clinic.
Friend: 'Bye 'bye Mrs. Ojo. All the best.
2. Satisfied Client: Mrs. Kola, you look so sad, what is wrong with you?
Mrs. Kola: I am so unhappy because I am expecting my sixth baby, and my two youngest children have got measles. I just cannot cope.
Satisfied Client: I can understand how you feel, but haven't you heard about the family planning service? I found out about this and it has helped me to plan my family. After your delivery, you can go along to a family planning clinic, then you wed not have a baby until you want one.
Mrs. Kola: Thank you very much. I will bear this in mind.

PHILIPPINES
Family Planning Radio Scripts
(Prepared by World Neighbors)

EARLY MORNING FARMER'S PROGRAM

(Play theme song.)

Announcer: Good morning. Welcome once again to your early morning farmers' show. The program designed for you who live by the countryside and particularly those who work in the farm.

This program brings you the latest information about farming and also features personalities who can give us ideas and information that may help solve problems in our daily activities.

(Play favorite rondalla piece or folk songs.)

Announcer: Before you start your today's activity, let us talk about a very important subject. This is something that involves and concerns us all. I wonder if we all realize the importance of this subject?

What is this subject? . . . Have you ever heard of population explosion? What about family planning?

This morning we have a very special guest . . . a doctor. He is a well **known** medical practitioner presently involved in the promotion of family planning. Our guest is Dr. Juan **Hernandez**.

But before we begin asking questions, doctor, can we have a few words of greeting to our radio listeners?

Doctor: I wish you a pleasant good morning. While it is rather too early for me to wake up for this program, I am indeed happy to join you in this show. Certainly, I don't want to miss this opportunity to discuss with you a very important subject that affects us all. The population explosion not only affects the man in the slums of the city, the fisherman, the merchant, the professionals but also the farmers who live by the countryside. This is now a growing problem of our nation and will affect the future of our country, our children and our **children's** children.

Now, if you have anything to ask, I am ready.

Announcer: Doctor, what has population explosion and family

planning to do with the farmers ?

Doctor: The farmers produce food for our people. They also produce the raw materials needed for factories to manufacture our basic needs.

Announcer: But how does population explosion affect production of food and raw materials ?

Doctor: You see, our population is increasing so rapidly while our production increases very slowly. Our land acreage does not expand any more, but we need more lands to produce food for our growing population.

A time will come when there will be more people than we can afford to support. As a matter of fact, our present production is no longer sufficient for our present population. We are now importing rice and corn from other countries. Yet many people go to bed hungry every night. Many people are dying of ailments and diseases because our medical facilities are inadequate. We need transport facilities. What about the education of these children?

Do you want this problem to continue?

Announcer: But how can family planning then solve the problem?

Doctor: A farmer plans when to plant his crop. He plans when to harvest. He plans how much he will spend and how much he will profit from the crop after harvest.

In family planning, a couple plans the size of their family by deciding the number of children they can support and when to have them. The children must be wanted. The farmer must consider the health of his wife and not burden her with too frequent pregnancy. They must have only the children they can adequately provide with food, clothing, shelter, medical attention and education.

Announcer: But is this really possible, doctor? Is it morally acceptable to practice family planning?

Doctor: Yes, this is now possible. There are many methods that a couple could adopt if they so decide. There is nothing wrong in practicing family planning. By having only the children you want and can support, you are contributing to the moral upbringing of responsible citizens. Family planning helps improve the quality of human life.

(Play the theme song and fade it out slowly.)

Announcer: Well, our time is up. Our guest was Dr. Juan Hernan-

dez, and we want to thank him for participating in our program. If there is anything more you want to know about the subject he discussed or any other information you wish to have, don't hesitate to visit or write us.

(Theme song fading out.)

WOMEN'S PROGRAM

(Play theme song .)

Announcer: Good afternoon. Welcome once again to your favorite program, "Let's Rock The Cradle." A program specially for mothers in the home. This program brings you up-to-date news on homemaking, tips on foods and information on family life.

(Play favorite song about mothers.)

Announcer: That was dedicated to the mothers. The mothers that keep the home a good place to live in.

But have you ever realized the important role of the mother in our society? The mother not **only** manages the home, but she shoulders the greater part of responsibility of rearing a child to adulthood. The mother builds the leader that builds the nation.

By the way, this afternoon we have a special guest in our afternoon show. She is Dr. **Gigi Peron**. Dr. **Peron** is **well-known** as a medical practitioner. But lately she has been very active in **another** program . . . "family planning. "

Before we ask you a question, doctor, can you say a few words of greeting to our radio listeners?

Doctor: Good afternoon friends. **It** is a pleasure to have been invited to your program this afternoon. I hope **I** can contribute something meaningful in your favorite program.

Announcer: Doctor, I mentioned a while ago that you are working on family planning. **Can** you say something about this program ?

Doctor: Oh, yes, I am glad you asked me. I am helping promote family planning. In fact, I am neglecting my medical practice already. But I don't regret it because I feel that something must be done now about our increasing **population**. We have to stop or slow the growth of our

population.

Announcer: What is the problem with an increasing population, Doctor? Is this not what it meant that we shall increase and multiply?

Doctor: Of course. there is nothing wrong in increasing our population if we can afford it. But we are producing more babies than we can support. Our population is growing faster than we realized. Children need more than food, clothing and shelter. We need more and better medical services. And better schools.

Besides, mothers are getting pregnant more often than they should. Too frequent pregnancy may be detrimental both to the mother and the child and to the family as a whole.

Announcer: You mean to say, Doctor, that it is not advisable for a mother to give birth every year like many mothers do?

Doctor: No, it is not advisable for a mother to have babies every year. It takes about two or more years after delivery for a mother to recover her physical health before she is ready for another baby. The mother needs this much time to replenish the nutrients needed for the nourishment of an infant. The mother also needs time to rest and to care for the first child.

Announcer: Why is it not advisable to have babies every year? What is the effect on the mother and on the baby?

Doctor: You have heard about "kwashiorkor." It is a severe case of malnutrition prevalent among children -- second, third, etc. children. In some cases this acute protein deficiency begins while the child is still in the mother's womb. This happens because the mother has not recovered her physical health before another pregnancy occurred.

The child is physically emaciated. In addition, he may be the victim of mental retardation. And this may be impossible to correct.

Announcer: How could this happen in the child, Doctor?

Doctor: Well, it has been established by medical science that the growth of our brain cells occurs during the first year of life or during the period of gestation. It is generally agreed that if a pregnant mother does not eat nutritious foods this will have an effect on the development of the child's mental capabilities. It has been observed that about 90 per cent of the brain is developed during the first six years of life, 60 per cent of which is developed during the period of gestation. Therefore, the mother must be vary, very healthy

during this critical year. But how can she be healthy when every year she is pregnant?

Announcer: Doctor, what advice can you give to our listeners?

Doctor. Well, I think there is a great need to practice family planning. We must plan the size of our family. We must plan the number of children we can adequately provide with food, clothing, shelter and education. Every child must be given the fullest opportunity to develop its capabilities for a better life. We must plan our family now. Tomorrow will be too late.

(Play the theme song fading out .)

Announcer: That was Dr. Gigi Peron and we are thankful for her kind advice to our mothers. Until next time we bid you goodbye and invite you to join us in our next program.

KAOHSIUNG CITY, TAIWAN
Family Planning Radio Scripts

SPOT ANNOUNCEMENTS

1. Announcer: Mrs. Lin lives in the North district of Kaohsiung City. She says the loop is an excellent way to plan the size of a family. She ought to know -- she has had one for two years and had no unwanted baby. Interested? Go to your local health station for information.

2. Three different voices: Loop! Loop! Loop!
Announcer: Women everywhere in Kaohsiung are saying it is the best way to stop having children. Some women smile when they say so -- they are among Taiwan's nearly one-quarter of a million loop users! Interested? Go to your local health station for information.

3. Voice 1: Did you say several million users throughout the world? And, one of the best ways to limit children?
Voice 2: Yes, the loop -- safe, low-priced (you pay only once), effective. Interested?
Voice 1: Yes, I am on the way to my local health station to find out more.

4. Voice 1 - Female: Doctor, I have two children and am 25 years old. I have a job. I want to stop having children for about three years and then begin my family again. What method can I use?
Voice 2 - Male: The loop is inexpensive, tried by a quarter of a million Taiwan women and very effective. Once put inside so easily, you have no worry about it. And it can be taken out anytime when you wish more children.
Voice 3: Go to your local health station now to find out more.

5. Announcer: Mrs. Lee from Kaohsiung City's West district wanted a loop, the safe, effective, low-priced way of limiting children. She went to her doctor and in a few minutes she had one. It has worked for two years now. Interested? Go to your local health station to find out more.

6. Announcer: Remember that one of the safest, convenient and effective ways of limiting family size is also one of the lowest priced. For NT\$30 you can have one yourself. Get a special coupon at your nearest local health station.

7. Announcer: Not only is the loop one of the best ways to plan your family size, you only have to pay once -- NT\$30 with a

special coupon from your nearest local health station. Go now!

8. Announcer: Mrs. Chen of the North district Kaohsiung City has tried the loop. Unfortunately, she was one of a very few who were unable to continue use of the loop. But because she tried to use it, as a special reward she is now able to 1) get another loop inserted free, or 2) try the oral pill at a special low cost of NT\$10 per cycle. If you were a loop user and want to know more about this special offer for you alone, go to your local health station now.

9. Voice 1 - Female: A special family planning offer for some women in Kaohsiung City only?
Voice 2 - Female: Yes, a special offer for those few women who tried the loop but were unable to continue to **use** it!
Voice 1: Where do I find out more?
Voice 2: Go to your local health station now!

10. Voice 1: Mrs. Chen, did you hear about the special family planning offer?
Voice 2: Yes, a free loop or a special low price of only NT\$10 per cycle for oral pills -- for women who tried the loop between 1963 and 1967 and for some reason could not continue using it.
Voice 1: I am going to find out more at the local health station.
Voice 2: Wait for me!

11. Voice 2: Oh, Mrs. Tsin, how unlucky I am that I could not continue wearing the loop. It is such a good method.
Voice 1: Oh, Mrs. Chen, haven't you heard about the special offer for women who were unable to use the loop the first time they tried? -- a free reinsertion if you like or a supply of the oral pill at the low price of only NT\$10 per cycle. Let me take you to the health station for details.

12. Voice 1: A free loop or the oral pill at only NT\$10 per cycle ! How wonderful !
Voice 2: Yes ! For each woman in Kaohsiung City who tried the loop the first time and for some reason could not continue using it.
voices 1 and 2: Let's go to the health station for more information. Won't you people join us?

13. Voice 1 - Male (sung aloud): Lucky, lucky Kaohsiung City!
voice 2 - Female: Why?
Voice 1 - Male: Because any woman here who tried the loop and could not continue using it now can try it again for free or can even try the oral pill at the low price of NT\$10 per cycle.

Go to your local health station to learn more.

Voice 2 - Female (sung aloud): I see. Goodbye. Lucky, lucky, Kaohsiung City.

14. Voice 1 - (obviously a radio commentator): And the news today is "They **could** have picked anywhere but they picked Kaohsiung City." For any woman here who has tried the loop but was unable to continue use, there is a special offer -- 1) a free loop reinsertion if she tries again or 2) the oral pill at the unbelievably low price of NT\$10 per cycle.
15. Rice (wheat) should not be planted too close in order that the grain will grow well; so too, having children not too close together, helps the mother and child to be healthy.
16. Concentrate your efforts and energy on raising the children you have now. Let them have a better education for a better future.
17. What is the most low-priced, convenient, safe, and reliable birth control method? Loop is the most effective, low priced, safe and convenient one now.
18. Do you want to know the various ways of planning the size of your family? Please go to the nearest health station and ask for information from the family planning worker there.
19. Some parents like to have children right away when they are young. Others like to work and want to space the children out over more years. Do you want to know how to plan your family size? Please go to your local health station and ask the family planning worker there to help you.
20. Remember that a mother has to go through nine months of pregnancy. Then after giving birth, she has to breast feed her baby. To keep strong and have a healthy baby she ideally should have two years between children. See your local health station for information on how to do it.
21. Have a baby when you want one. Plan your family size now and make your family a happy and successful one. Go to your local health station for more information.
22. Now, there are over _____ women in _____ using the loop to plan the number of children in their families. There are other methods **also**. Go to your nearest health station and they will **tell** you about the loop and other methods.

23. A wise housewife can prevent unwanted things from happening. If you want to wait two or three years before you have a baby again, please use the loop. For more information on where to get it, go to your local health station.
24. The loop is very convenient. When you do not want a baby, the loop can prevent one. When you want a child, a doctor can easily take the loop out.
25. There are 500 obstetricians in Taiwan doing loop insertion, and they only charge NT\$30. Go to your local health station and get a special coupon so that you can try the loop.
26. Raising children and educating them are the duties of parents. If you have children, you should have only the number you can raise.
27. The loop is a small "S" shaped plastic device to prevent pregnancy. A doctor can insert it painlessly in a woman in a few minutes. When you want a child again it can be easily removed. Go to your local health station to find out more.
28. There are many countries in the world, such as America, Thailand, Korea, and Hongkong using the loop for birth control. Why? Because it is convenient, low-priced, effective and safe.
29. Of every seven women in Taiwan, one has used the loop to prevent unwanted children. She could be one of your neighbors. Interested? Please go to your local health station and ask about it.

TANZANIA
Family Planning Radio Script
(Provided by the International
Planned Parenthood Federation)

SPOT ANNOUNCEMENT

Sound effects: A knock at the door.
Voice from the house: Come in.
Visitor: Good morning, is your husband at home?
Housewife: I'm sorry. He has already left for the shamba. May I take a message for him?
Visitor: Well, I have really come to ask if I could borrow 240/-. I must pay school fees for six of my children and I am short of money at the moment.
Housewife: I am sorry. I know my husband cannot give you money because we have a similar problem. Perhaps if we had spaced our children we would have enough money.
Announce-: Spacing children means spacing fees. Practice family planning.

Appendix IV

Tables Indicating Number of Radios in Countries of the World

TABLE 112

CENTRAL AMERICA AND CARIBBEAN--SPANISH SPEAKING: TOTAL NUMBER OF RADIOS

COUNTRY	1950	1955	1960	1965	1970	People Per Radio 1970
Costa Rica	23,000	50,000	102,000	138,000	217,500	6.5
Cuba	575,000	1,000,000	1,200,000	1,244,000	1,375,500	5.4
Dominican Republic	50,000	60,000	132,000	216,000	407,500	8.6
El Salvador		30,000	149,000	384,000	473,500	5.9
Guatemala	27,000	60,000	123,000	191,000	261,500	16.5
Honduras	25,000	50,000	85,000	180,000	199,000	10.6
Mexico	1,892,000	2,000,000	3,150,000	4,275,000	5,712,500	6.9
Nicaragua	16,000	30,000	67,500	122,500	217,500	7.4
Panama	81,000	110,000	160,500	370,000	376,500	3.2
Puerto Rico		300,000	400,000	440,000	1,212,500	2.0
TOTALS	2,689,000	3,690,000	5,569,000	7,560,500	10,453,500	6.3

SOUTH AMERICA--SPANISH SPEAKING: TOTAL NUMBER OF RADIOS

Argentina	2,198,000	3,000,000	5,250,000	5,433,000	6,575,000	3.3
Bolivia	150,000	300,000	350,000	452,000	557,500	6.6
Chile	550,000	650,000	843,000	1,439,000	1,787,500	4.8
Colombia	500,000	2,000,000	2,580,000	3,000,000	3,030,000	5.8
Ecuador	50,000	150,000	310,000	445,000	460,000	10.6
Paraguay	70,000	100,000	127,500	138,000	274,500	7.3
Peru	500,000	1,000,000	1,100,000	1,434,000	2,007,500	5.6

TABLE 1 (Contd.)						
COUNTRY	1950	1955	1960	1965	1970	People Per Radio 1970
Uruguay	362,000	600,000	650,000	853,000	1,032,500	2.6
Venezuela	218,000	1,000,000	1,250,000	1,790,000	1,940,000	4.5
TOTALS	4,598,000	8,800,000	12,460,500	14,984,000	17,664,500	7.6
SOUTH AMERICA--PORTUGUESE SPEAKING: TOTAL NUMBER OF RADIOS						
Brazil			5,743,000	6,100,000	8,275,000	9.5
CENTRAL AMERICA, SOUTH AMERICA AND CARIBBEAN--ENGLISH SPEAKING: TOTAL NUMBER OF RADIOS						
Bahamas	2,100	5,000	20,000	26,500	45,500	3.0
Barbados	7,900	13,000	20,000	37,000	38,500	6.4
Bermuda	11,000	17,000	17,100	21,500	24,500	2.0
British Honduras	1,200	1,380	2,201	6,500	20,500	5.1
Guyana		35,000	35,000	as.000	114,000	5.5
Jamaica	23,000	40,000	150,000	200,000	363,000	4.8
Leeward Island		1,200	2,000	4,000	6,000	25.0
Trinidad & Tobago			60,000	115,000	153,000	62
Windward Island				13,000	38,000	3.2
TOTALS	45,200	112,580	306,301	508,500	803,000	5.4

TABLE 1(Contd.)						People Per Radio
COUNTRY	1950	1955	1960	1965	1970	1970
<u>CARIBBEAN, CENTRAL AND SOUTH AMERICA--FRENCH AND DUTCH SPEAKING: TOTAL NUMBER OF RADIOS</u>						
French Guiana	100		1,000	1,500	3,000	12.0
Guadeloupe	1,000	2,000	6,000	8,000	22,500	13.9
Martinisue	2,300		11,000	18,000	31,000	10.0
Haiti	4,000		35,500	60,000	122,500	37.3
Netherland Antilles	34,000		41,000	64,500	110,000	1.9
Surinam	5,000	15,000	40,000	40,000	71,500	4.6
TOTALS	46,400	17,000	134,500	192,000	360,500	15.9
TABLE2						
<u>AFRICA--ENGLISH SPEAKING: TOTAL NUMBER OF RADIOS</u>						
Botswana	300				4,500	135.0
Gambia	400	600	2,500	6,000	30,000	11.0
Ghana	14,000		85,000	361,000	630,000	12.0
Kenya	13,000	17,873	125,000	252,500	497,500	18.3
Lesotho	400				5,500	17.6
Liberia	1,300		50,000	116,500	147,000	7.1
Malawi	30,000				63,500	6.2
Mauritius	9,800	16,852	37,000	60,500	84,500	8.9
Nigeria	15,000	38,000	225,000	668,000	1,042,500	54.1
Rhodesia		51,000	125,000	145,000	150,000	27.6

TABLE 2 (Contd.)

COUNTRY	1950	1955	1960	1965	1970	People Per Radio 1970
Seychelles	100	113	800	2,000	7,000	7.1
Sierra Leone	2,500		14,000	26,500	42,500	52.4
South African Republic	555,000	700,000	1,027,000	2,068,000	2,388,000	7.3
Swaziland	500				8,000	3.6
Tanzania	1,400				122,500	84.7
Uganda	1,000		83,500	121,500	197,500	37.4
Zambia						
TOTALS	645,200	824,438	1,774,800	3,827,500	5,420,500	23.2

TABLE 3

AFRICA--FRENCH SPEAKING COUNTRIES: TOTAL NUMBER OF RADIOS

Algeria	176,000	275,000	540,000	891,000	1,185,000	9.3
Burundi				20,000	44,000	56.8
Cameroon		5,000	100,000	110,000	160,000	31.9
Central African Republic			4,500	21,000	37,000	36.7
Chad				14,500	36,000	83.9
Comores Island	100			1,500	7,000	30.0
Congo (D.R.)	6,000			136,500	192,500	79.7
Congo (Brazz.)				47,000	50,000	16.6
Dahomey			12,500	22,000	44,000	52.3
Gabon				30,000	45,000	10.2
Guinea		1,764	25,000	57,500	70,000	48.8

CO UNTRY	TABLE 3 (Contd.)					People
	1950	1955	1960	1965	1970	Per Radio 1970
Ivory Coast		1,534	50,000	60,000	69,000	54.3
Malagasy Republic				250,000	297,000	20.9
Mali			8,000	31,500	47,000	95.5
Mauritania				15,000	36,000	25.0
Morocco	134,000	263,984	536,000	666,000	784,000	16.5
Niger	300		10,000	19,000	59,500	55.1
Reunion	1,900	5,000	13,000	27,500	58,000	5.3
Rwanda					18,500	167.8
Senegal		25,000	125,000	175,000	242,500	14.0
Somaliland (French)	200		3,000	5,500	7,500	11.4
Togo			4,000	17,500	28,500	57.1
Tunisia	65,000	100,000	140,500	317,000	385,000	11.9
Upper Volta			15,000	32,500	62,000	76.6
TOTALS	383,500 I	677.282	1,586,500 I	2,967,500	3,965,000	23.9
AFRICA--ARABIC, SPANISH AND PORTUGUESE SPEAKING ICOUNTRIES: TOTAL NUMBER OF RADIOS						
Ethiopia	12,000	12,000	200,000	208,000	242,000	91.7
Libya		5,000	53,500	102,000	106,500	14.7
Somalia	3,300			36,000	45,000	52.2
Sudan	3,000	5,000	72,500	145,000	174,000	75.7
Spanish Guinea and Sahara		1,000	1,500	2,500	4,400	120.0
Angola	11,000	50,000	80,500	84,000	94,500	54.0
Portuguese Guinea	500	764	1,500	3,000	4,000	132.5

TABLE 3 (Contd.)

COUNTRY	1950	1955	1960	1965	1970	People Per Radio 1970
Mozambique	9,200		50,500	80,000	97,500	70.8
Sao Tome	200				400	15.0
TOTALS	39,200	73,764	500,000	660,500	771,900	67.8

TABLE 4

NEAR EAST AND SOUTH ASIA: TOTAL NUMBER OF RADIOS

Aden		1,097	26,000	67,500	165,000	6.7
Afghanistan	8,000	20,000	25,000	46,000	78,500	195.3
Bahrain (including Qatar and Trucial States)			12,000	29,000	76,000	5.0
Ceylon	34,000	77,386	316,000	393,000	446,000	24.6
India	576,000		2,126,500	3,515,000	5,857,500	80.5
Iran	184,000	300,000	1,087,000	1,716,000	1,955,000	11.7
Iraq	30,000	60,000	350,000	526,000	532,000	13.2
Israel	153,000	247,175	450,000	476,000	666,000	3.7
Jordan	2,800	26,888	144,800	151,000	205,000	9.3
Kuwait			30,000	100,000	133,000	3.2
Lebanon	38,000	60,000	97,500	233,000	453,500	5.0
Nepal			13,000	27,000	52,500	152.3
Pakistan	62,000	100,000	365,000	588,000	1,125,000	89.6
Saudi Arabia	10,000	15,000	21,000	136,000	149,000	44.5
Syria	50,000	85,000	300,000	323,000	552,500	9.4

TABLE 4 (Contd.)

COUNTRY	1950	1955	1960	1965	1970	People Per Radio 1970
United Arab Republic	264,000	543,000	1,050,000	2,568,000	4,062,500	7.1
Yemen (South)					671,500	7.4
TOTALS	1,411,800	1,533,658	6,393,000	10,894,500	17,180,500	40.3

TABLE 5

FAR EAST (INCLUDING CHINA) --TOTAL NUMBER OF RADIOS

Brunei	500			7,200	11,000	88.2
Burma	11,000	14,391	105,000	189,000	350,000	69.2
Cambodia	3,100		11,500	244,000	270,000	23.1
China (Mainland)	1,000,000		4,250,000	7,166,000	7,300,000	94.5
China (Formosa)	14,000	100,000	556,000	1,028,000	1,400,000	8.6
Hong Kong		42,705	134,500	322,500	715,000	5.2
Indonesia	213,000	350,000	1,200,000	1,378,000	2,700,000	38.1
Japan	9,193,000	11,495,409	15,149,000	23,429,000	27,500,000	3.5
Korea (North)	88,000		355,000	381,000	400,000	29.5
Korea (South)		150,000	575,500	1,304,000	1,650,000	16.7
Laos	100		43,000	45,000	61,000	32.1
Macao	4,600	6,035	10,000	10,000	14,500	12.9
Malaysia	55,000	165,303			411,000	19.0
Mongolia				62,500	100,000	10.5
Philippines	79,000	189,936	900,000	1,143,000	1,577,500	19.8
Ryukyu			25,000	175,000	232,500	40.1

TABLE 5 (Contd.)

<u>COUNTRY</u>	<u>1950</u>	<u>1955</u>	<u>1960</u>	<u>1965</u>	<u>1970</u>	People Per Radio <u>1970</u>
Singapore	41,000		101,000	118,500	314,000	5.8
Thailand		150,000	625,000	1,291,000	2,758,000	10.8
Timor				1,000	1,500	360.0
Vietnam (North)	12,000	45,000	210,000		442,500	41.6
<u>Vietnam (South)</u>				316,000	640,000	24.6
TOTALS	10,714,300	12,708,779	24,250,500	38,610,700	48,848,500	22.2

TABLE 6

WESTERN EUROPE (EXCEPT SCANDINAVIA): TOTAL NUMBER OF RADIOS

Austria	1,319,000	1,661,006	2,055,500	2,137,000	2,253,000	3.2
Belgium	1,548,000	1,862,844	2,518,500	3,175,500	3,647,000	2.6
Cyprus	13,000	33,000	107,500	111,000	145,500	4.1
France (including Andorra and Monaco)	6,893,000	8,750,890	11,238,000	11,908,000	12,468,000	3.9
West Germany (includ- ing West Berlin)	9,018,000	12,457,818	16,020,500	17,920,500	19,848,500	2.9
Great Britain (includ- ing Channel Is. and Gibraltar)	12,359,400	12,500,000	15,452,000	19,774,000	22,500,000	2.4
Greece	167,000	315,000	833,500	997,000	1,100,000	4.77
Ireland	298,000	417,000	493,500	600,000	608,000	3.8
Italy	3,184,000	5,077,834	8,247,000	9,675,000	11,893,000	4.3

TABLE 6 (Contd.)

COUNTRY	1950	1955	1960	1965	1970	People Per Radio 1970
Luxembourg	60,000	75,120	96,500	104,000	136,500	2.2
Malta	36,000		49,000	52,000	52,000	5.8
Netherlands	1,950,000	1,750,000	3,100,000	3,107,000	3,457,000	3.5
Portugal (including Azores)	228,000	377,950	940,000	1,101,500	1,466,500	6.2
Spain (including Canary Islands)	867,000	1,000,000	4,000,000	5,130,500	6,140,000	5.1
Switzerland	1,037,000	1,182,417	1,249,500	1,760,500	1,970,000	3.0
Turkey	362,000	828,042	1,237,500	1,947,500	2,721,000	11.3
TOTALS	39,359,400	48,488,921	67,638,500	79,501,000	90,406,000	3.6

TABLE 7

SCANDINAVIAN COUNTRIES--TOTAL NUMBER OF RADIOS

Denmark (including Greenland)	1,217,000	1,345,535	1,639,000	1,654,000	1,662,500	2.9
Finland	720,000	941,000	1,261,000	1,395,500	1,728,000	2.7
Iceland	35,000	37,288	50,000	58,500	74,500	2.7
Norway	786,000	909,000	1,150,000	1,299,000	1,300,000	2.8
Sweden	2,153,000	2,353,542	2,723,500	2,963,000	3,117,000	2.5
TOTALS	4,911,000	5,586,365	6,823,500	7,370,000	7,882,000	2.7

TABLE 8							People Per Radio
<u>COUNTRY</u>	<u>1950</u>	<u>1955</u>	<u>1960</u>	<u>1965</u>	<u>1970</u>	<u>1970</u>	
<u>EASTERN EUROPE AND USSR--TOTAL NUMBER OF RADIOS</u>							
Albania	9,000	15,000	32,500	73,000	119,000	15.2	
Bulgaria	227,000	400,000	1,097,000	1,442,000	2,165,000	3.8	
Czechoslovakia	2,422,000	2,800,000	3,355,000	3,582,000	3,850,000	3.6	
East Germany (including East Berlin)	3,489,000	3,800,000	5,809,000	5,880,500	6,192,500	2.8	
Hungary	620,000	1,200,000	2,075,000	2,432,000	2,625,500	3.8	
Poland	1,464,000	1,900,000	4,568,000	5,271,000	5,700,500	5.5	
Rumania	313,000	350,000	1,675,000	2,231,000	2,900,000	6.5	
USSR	11,452,000	18,000,000	21,550,000	46,900,000	70,750,000	3.2	
Yugoslavia	336,000	450,000	1,389,000	2,274,000	3,053,500	6.3	
TOTALS	20,332,000	28,915,000	41,550,500	70,085,500	97,356,000	3.6	
TABLES							
<u>OCEANIA--TOTAL NUMBER OF RADIOS</u>							
Australia	1,859,000	2,030,920	2,311,500	4,003,000	4,029,000	2.8	
Fiji Islands	3,100	15,000	20,000	34,000	39,000	11.5	
French Polynesia					24,000	34.2	
Guam					53,500	13.6	
Mariana, Caroline and Marshall Islands							

TABLE 9 (Contd.)						People Per Radio
COUNTRY	<u>1950</u>	<u>1955</u>	<u>1960</u>	<u>1965</u>	<u>1970</u>	<u>1970</u>
New Hebrides	200	200			9,500	172.2
New Guinea, Papua and Cook Islands				5,000	39,000	54.4
New Zealand	454,000	504,000	580,000	926,000	950,000	2.7
Samoa (West & US)	700	1,116	4,500	11,500	17,000	8.8
Solomon Island	100		2,500	2,500	4,000	35.0
Tonga	100			2,000	5,000	142.0
TOTALS	2,317,200	2,551,236	2,918,500	4,984,000	5,170,000	4.1

TABLE 10						
<u>USA and CANADA--TOTAL NUMBER OF RADIOS</u>						
Canada	1 5,070,000	6,000,000	7,720,000	9,000,000	14,000,000	1.4
United States	85,200,000	118,000,000	161,000,000	173,000,000	263,775,000	0.7
TOTALS	90,270,000	124,000,000	168,720,000	182,000,000	277,775,000	0.8

COUNTRY	SUMMARY					People
	<u>1950</u>	<u>1955</u>	<u>1960</u>	<u>1965</u>	<u>1970</u>	Per Radic <u>1970</u>
<u>GEOGRAPHICAL GROUPINGS</u>						
Central and South America and Caribbean:						
Spanish speaking	7,287,000	12,490,000	18,029,500	22,544,500	28,118,000	2
Portuguese			5,743,000	6,100,000	8,275,000	9.5
English	45,200	112,580	306,301	508,500	803,000	5.4
French and Dutch	46,400	17,000	134,500	192,000	360,500	15.9
Africa:						
English speaking	645,200	824,438	1,774,800	3,827,500	5,420,500	23.2
Africa:						
French speaking	383,500	677,282	1,586,500	2,967,500	3,965,000	23.9
Africa:						
Arabic, Spanish and Portuguese	39,200	73,764	500,000	660,500	771,900	67.8
Near East and South Asia	1,411,800	1,533,658	6,393,000	10,894,500	17,180,500	40.3
Far East (including China)	10,714,300	12,708,779	24,250,500	38,610,700	48,848,500	22.2

COUNTRY	SUMMARY (Contd.)					People
	1950	1955	1960	1965	1970	Per Radio 1970
Western Europe	39,359,400	48,488,921	67,638,500	79,501,000	90,406,000	3 . 6
Scandinavian Countries	4,911,000	5,586,365	6,823,500	7,370,000	7,882,000	2 . 7
Eastern Europe and USSR	20,332,000	28,915,000	41,550,500	70,085,500	97,356,000	3 . 6
Oceania	2,317,200	2,551,236	2,918,500	4,984,000	5,170,000	4.1
USA and Canada	90,270,000	124,000,000	168,720,000	182,000,000	277,775,000	0 . 8
GRAND TOTAL: WORLDWIDE	177,753,200	237,979,023	346,369,101	430,246,200	592,331,900	5 . 4

Appendix V

Evaluation of Radio Use in a KAP (Knowledge, Attitude, Practice) Survey

**Evaluation of Radio Use In a
KAP (Knowledge, Attitude, Practice) Survey**

1. Do you have a radio?
2. Is it working?
3. Where do you get your radio repaired?
4. Is it electric or transistor?
5. Where do you get batteries?
6. Do you know of anyone who has a radio?
7. Is there a radio in the community to which everyone can listen?
8. Is it working?
9. Is it in a convenient spot?
10. Do you listen to the radio?
11. Do any of your friends or neighbors come over to listen to the radio with you?
12. How many different places can you go to listen to the radio?
13. About how many people were listening to the radio the last time you heard it?
14. About how much time each **day** or week do you listen to it?
15. What station do you listen to most often?
16. Which programs do you listen to?
17. What is your favorite program?
18. Who is your favorite radio personality?
19. Do you listen to the radio for educational purposes?
20. Do you ever listen to speeches by the Prime Minister or other prominent people ?
21. Have you ever heard that India has a population problem?
22. Describe why this is so?
23. How does it affect you?
24. Have you ever heard about contraception?
25. Describe what you have heard about the loop. Sterilization. Condom. Oral pill .Abortion.
26. Have you ever heard about the red triangle?
27. Have you ever heard the slogan, "Have two or three children and then stop" ?
28. About how many times have you heard this slogan?
29. Where did you hear this slogan?
30. Have you ever heard about family planning and contraceptives on the radio?
31. Check which ways you heard about family planning on the radio:
 - Dramas
 - Interview
 - Political address
 - Spot announcement
 - Personal testimony
 - Adult education program

Song

Advertisement

32. Which was your favorite method?
33. What advantages of family planning were explained on the program?
34. Has anyone ever told you about something they heard on the radio?
35. What was it?
36. When was the last time?
37. Has anyone ever told you he heard something on family planning on the radio?
38. **What did he hear?**
39. Are you embarrassed to listen to a family planning program?

References

1. Latin K. Sen and Prodipto Roy, *Awareness of Community Development in Village India*, National Institute of Community Development, Ayderbad-30, India, 1966.
2. Y. V. Lakshmana Rao, *The Impact of Communications Media in Four Indian Villages*, mimeo.
3. T. R. Balakrishnan and R. J. Matthais, *Evaluation of a Family Planning Publicity Program in India*, mimeo.
4. Asok Mitra, *The Use of Radio in a Coordinated Media Approach for Family Planning Programmes*, ESCAFE Working Group on Communication Aspects of Family Planning Programmes, Singapore, September 5-15, 1967, pp. 14-16.
5. Ruhai Amin and S. J. Haider, *Radio and Family Planning: A Survey Report*, Proceedings of the Second Biannual Seminar on Research in Family Planning, National Research Institute of Family Planning, October 6-8, 1966, Karachi, pp. 162-163.
6. *Annual Report: 1966-67* East Pakistan Research and Evaluation Centre, Box 177, Dacca, pp. 15-17.
7. *Twenty Years of Pakistan: 1947-67*, Pakistan Publications, August, 1967, pp. 553-560.
8. Ralph Milton, *Radio Programming, a Basic Training Manual*, Geoffrey Bles, publisher, London.
9. D. K. Tyagi, *Role of Mass Communication in Family Planning in India*.
10. Wilbur Schramm, *Mass Media and National Development*, Stanford University Press, UNESCO, 1964.
11. *Morning News*, Karachi, Pakistan, December 17, 1967, Associated Press of Pakistan release.
12. The figures in Tables 1-9 were collected from a variety of sources, including *World Radio-TV Handbook*, UNESCO - *World Radio and Television* and the United States Information Agency.

An additional resource published after the first printing of this manual is a background paper entitled *Pretesting and Evaluation of Educational Materials Used in the Family Planning Programme in Iran with Special Emphasis on Radio*. Written by Robert W. Gillespie of the Population Council for an ECAFE meeting in January 1974, the paper is available at the following address: The Population Council, 245 Park Ave., New York, New York 10017.