A SYNTHESIS OF POPULATION COMMUNICATION EXPERIENCE

PAPER 2

TRAINING IN COMMUNICATION FOR FAMILY PLANNING: RETROSPECT AND PROSPECTS

G. R. Amritmahal

East-West Center
East-West Communication Institute
THE EAST-WEST CENTER—officially known as the Center for Cultural and Technical Interchange Between East and West—is a national educational institution established in Hawaii by the U.S. Congress in 1960 to promote better relations and understanding between the United States and the nations of Asia and the Pacific through cooperative study, training, and research. The Center is administered by a public, nonprofit corporation whose international Board of Governors consists of distinguished scholars, business leaders, and public servants.

Each year more than 1,500 men and women from many nations and cultures participate in Center programs that seek cooperative solutions to problems of mutual consequence to East and West. Working with the Center’s multidisciplinary and multicultural staff, participants include visiting scholars and researchers; leaders and professionals from the academic, government, and business communities; and graduate degree students, most of whom are enrolled at the University of Hawaii. For each Center participant from the United States, two participants are sought from the Asian and Pacific area.

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THE EAST-WEST COMMUNICATION INSTITUTE concentrates on the role of communication in economic and social development and in the sharing of knowledge across cultural barriers. The Institute awards scholarships for graduate study in communication and related disciplines, primarily at the University of Hawaii; conducts a variety of professional development projects for communication workers in specialized fields of economic and social development; invites Fellows and visiting scholars to the Center for study and research in communication and to help design projects; offers Jefferson Fellowships for Asian, Pacific, and U.S. journalists for a semester at the Center and the University of Hawaii; conducts and assists in designing and carrying out research; arranges conferences and seminars relating to significant topics in communication; assembles relevant communication materials with emphasis on Asian and Pacific material and makes these available for students, scholars, and practitioners at the Center and elsewhere; and publishes papers, reports, newsletters, and other materials emanating from the above activities.
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ABSTRACT

This paper reviews the aims and purposes of communication training, tracing the evolution of training in family planning communications from the early stages of national program developments to the present. The author discusses training needs and the clientele of training programs including those involved in face-to-face communications, personnel responsible for integrating interpersonal and mass communications, mass media personnel, and specialists in the production of communications materials. Other topics covered include training for integrated family planning and development programs, national and regional training centers, university based/academic programs, the training of trainers, and training facilities. Examples of successful as well as nonsuccessful training programs are used to illustrate the many different aspects of population/family planning communications training. The author concludes with an assessment of recent developments and future prospects in the field.
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SERIES PREFACE

In 1970, the East-West Communication Institute undertook to develop and carry out a special program, involving numerous activities in the area of population and family planning communication under a major institution building grant from the United States Agency for International Development (USAID). Its activities for the past six years have included research; the development of innovative professional development activities for family planning communication specialists; international conferences and workshops; a variety of information sharing activities and services; and a large publications program that has produced: a population/family planning communication newsletter, research case studies, conference reports, an inventory of family planning communication activities and needs in 20 countries, a series of reports on donor and technical assistance agencies in the field, reference tools on sources of population information and materials, and 12 modules for family planning communication training.

As a final activity in its six-year program in population communication, the Institute has undertaken to publish a series of 11 papers which summarize developments in population communication over the last several years. The Synthesis Papers, as they have come to be called, cover the various public-oriented components of population/family planning communication programs--formal, in-school population education; education for adults and out-of-school youth; public information activities; use of mass media; and field extension programs--as well as the organizational and administrative concerns of national family planning programs including training for family planning communication personnel; the operation and strategies of family planning programs; the conduct and utilization of program-related research; professional and technical information services in support of population activities; and the integration of family planning with other development sectors. In addition, two of the papers survey the international and regional activities that have
had a significant impact on the overall development of national family planning programs and activities: technical and economic assistance, and meetings and conferences.

The papers are written by experts in the field—people who have had close personal involvement with the development and evolution of national and international programs over the years. In these papers, the authors have attempted to address several major questions: How have population communication programs developed? What has been accomplished? What has been learned? What do past experiences suggest for future efforts?

The Synthesis of Population Communication Experience Project was planned and initiated by Dr. Robert P. Worrall, who directed the East-West Communication Institute’s activities in population communication from the beginning of the program in 1970 until he left in July 1976 to become Vice President of the Population Reference Bureau. Under his leadership, the Institute established contact with people in 133 countries and territories and involved in its programs more than 500 middle- and upper-level specialists in information, education, and communication.

Mr. Lyle Saunders, former Ford Foundation Program Officer in Population was a Visiting Researcher at the Institute from November 1975 to November 1976. During that year he was closely involved in the planning and implementation of the project. He has continued to serve as special advisor and consultant to the project, and has been one of the two substantive editors of the Synthesis Papers.

Dr. James R. Echols, former President of the Population Reference Bureau and now Population Communication Consultant to several organizations, has also served as Project consultant and as the other substantive editor for the papers.

Barbara Yount, Writer/Editor of the Institute’s IEC Newsletter, which under her editorship grew from a 4-page to a 28-page quarterly newsletter reaching 8,000 people, has been general editor of the series.

Millicent Sanchez assisted the general editor with the copy-editing and the seemingly never-ending bibliographic work such a project requires.
Kay Garrett, EWCI Publications Officer, has been responsible for the design, production, and distribution of the series.

Alison Miura, Karen Katayama, and Roberta Morgan typeset the papers; JIll McEdward and Louise Good cheerfully helped with the volume of proofreading.

Shana Hurst has served as Secretary to the Project since 1975 and has taken care of a million necessary details.

To all of these people, including the writers themselves, I owe an immense debt of gratitude for their time, effort, and dedication to the Synthesis Project.

Elizabeth Buck
Assistant Director for AID Activities
Govind Raj Amritmahal is the Advisor on Training to the National Family Planning Coordinating Board, Indonesia assigned by the World Bank. Prior to this he was the Coordinator of Training in the Population Division of the United Nations Economic Commission for Asia and the Far East. In his home country he worked with the Central Family Planning Institute, New Delhi and the All India Institute of Hygiene and Public Health, Calcutta.
PREFACE

This publication attempts to bring together some of the published material on training in communications for family planning. It gives a brief account of the development of support communications for family planning, examines training needs, provides some examples of the wide-ranging experience that has accrued over the last few years, and takes a look into the future.

It concentrates on job-oriented training almost to the exclusion of academic programs. While some university-based programs are described and inclusion of family planning in public health and social work is discussed, no attempt is made to develop these further in the thoughts on the future. Similarly, by and large, it limits itself to programs under government auspices and the discussion on the needs of and projections into the future follows that orientation. It hardly touches the voluntary sector.

A word of apology to the purist would be in order. Face-to-face communications is used to include both the educational programs carried out by health educators, extension workers, fieldworkers and paramedical personnel as well as public information activities of functionaries at the field level (villages and the next higher administrative level) who have hardly any equipment worth the name and use the individual and group approach in their work. Mass communication includes mass media as it should, but, sometimes, because of the needs of the family planning program, special treatment is given to the latter area.

If some articles have not been included in the publication it is only because these have not come the author's way. Apologies are tendered for such omissions.

A number of friends have responded to a request for materials. Their kindness is deeply appreciated.
Opinions expressed in the publication are those of the author and not necessarily those of the World Bank, the National Family Planning Coordinating Board, Indonesia or the East-West Communication Institute.
CHAPTER 1

Growth and Development of Communications for Family Planning

The early family planning programs were conceived of as an addition to the existing health services, directed mainly at improving the health of mothers and children and based on the established health organizations. Subsequent programs, at least in the initial stages, also conformed to the same orientation. Given the sensitivities associated with the subject and the dependence on the health services to administer the then known methods of conception control, even when programs were developed mainly for demographic and economic reasons, this approach was probably the most politic one for that phase, and the health care delivery channel the most logical one to carry family planning services and advice. Family planning clinics were set up either as a part of or in association with maternal and child health (MCH) clinics, and domiciliary care personnel were asked to include family planning advice in their health education activities during home visits. The latter procedure largely represented interpersonal communications between health workers inadequately trained for the educational task and limited sections of the population (and that to only women) which the workers could reach. In the clinics, in addition to their person-to-person contacts, para-medical personnel were asked to organize group meetings and to conduct group discussions.

This total dependence upon interpersonal communications to popularize family planning in the community was the result of lessons learned in developing and extending rural health services. Popular governments, in those countries which had attained political independence and which were [being] strongly committed to the welfare of the people, set for themselves as one of the priorities, the improvement of health conditions of the people, especially of those living in the rural areas. Past experience had shown that, in spite of high morbidity and mortality in rural communities, health facilities that had been set up by the governments were not adequately
utilized by the people and their response to preventive and promotional programs was disappointing.

An examination of the state of affairs led to the recognition that rural people did not give enough importance to health (as different from illness or disease) and that health was not a felt need of the community. It was postulated that if people's health had to improve, it was essential that they should play a more active role in the health program, and not be considered as passive recipients of a service which they did not always appreciate or understand, or apparently, in their perception, they did not need. To be able to stimulate and sustain that participation, people had to be educated to recognize: that there were health problems facing the community—some overt, others not so obvious—which had to be overcome; that health did not mean the absence of disease at any given time and positive health was something worth striving for; and that responsibility for maintaining themselves in a state of optimum health lay primarily in their own hands. Thus came about the inclusion of health education as an important element in health programs of developing countries. Health administrators saw health education as a very useful tool to achieve national objectives.

Some pioneering educational work in relation to environmental sanitation had been carried out in Indonesia (then, the Netherlands India) in the late thirties (Hydrick, 1937). Even so, health education as a major component in health programs came to be recognized only in the post-World War II period. Health education units were set up in health departments but there was a paucity of trained manpower. Fellowship programs of the World Health Organization (WHO) and of the government of the United States of America played a very important role in meeting this need by training a large number of people in health education mostly in American schools of public health and by stimulating in-country training in health education through the provision of technical assistance. Conceptually, health education got a further fillip in the prevailing climate of community development through extension education, which laid emphasis on community organization, joint planning, and transference of responsibility.

With the fervor of the neophyte, health educators swore by the educational process almost to the virtual exclusion of the limited health publicity or information activities that were in vogue until then. They were taught that health was a personal matter,
that the most effective method to help people to recognize their health needs and to persuade them to work toward meeting those needs was through small discussion groups, and that mere publicity or providing information through mass media was inadequate to bring about the very personal attitudinal and behavioral changes that were required. It is also pertinent to recall that at that time mass media in most of the developing countries were at a nascent stage of development and largely used for political and entertainment purposes. Support communications for development was either non-existent or minimal. Moreover, because of meager financial resources, health could not compete (even if it wanted to) with other subjects for either radio time or newspaper space or newsreel length. Because of these reasons, health educators depended practically entirely on individual and group methods of communications, using what little audio-visual aids they could lay their hands on. Health departments used exactly the same approach, first to initiate and later to expand the new service of family planning.

It was in this context of extending family planning through interpersonal communications that India in the mid-fifties launched probably the first action-oriented study in Asia in Singur, the rural practice field of the All India Institute of Hygiene and Public Health, Calcutta. By organizing village meetings--initially of all villagers as an entree into the community followed by small group educational sessions and individual contacts, using very simple audio-visual aids such as flip charts and flash cards, wall calendars, and a pamphlet (for which there was a spontaneous demand from the people in order to reinforce what they had learned in the group meetings)--the Singur study attempted to find out to what extent a program of community education would promote acceptance of family planning and to obtain guidelines for methodological and operational details for launching a large-scale community education program (Rao and Mathen, 1970, pp. 29-39). Findings of this study as well as those of a number of knowledge and attitude studies carried out in diverse sectors of the Indian population led to the formulation of the nationwide extended family planning program. Emphasis was placed on taking the program out of the confines of the clinic and into the community, through an expanded community education program carried out by a large number of community-based workers. That effort was supported by an increasing use of pamphlets and posters, involving the hitherto untouched male section of the population and by creating supply points right in the villages. The major thrust of the program
was to create group acceptance of the idea which, in turn, was expected to promote practice (Raina, 1964).

Around the same time, J. Mayone Stycos and associates had been carrying out a series of studies in the Caribbean islands of Puerto Rico, Jamaica, and Haiti which provided valuable information on the role of communications in family planning. After collecting base-line information on knowledge, attitudes, and practice, the subjects were treated to limited educational exposures using group meetings, home visits, and pamphlets. The study brought out the fact that there was a small section of the population that was interested in and ready to practice family planning and that what these people needed was information regarding methods and facilities. There was a second larger group which would require a more intensive type of program. It also focused attention on the gap between professed attitudes and knowledge on the one hand and practice of contraception on the other. For effective practice of family planning, Stycos suggested the need for three necessary conditions—ends or values, awareness, and acceptability—and three facilitating conditions—easy availability, social organization, and salience—most of which are functions of communications (Stycos in Kiser, 1962, pp. 305-314). Implicit in the discussion on the relative advantages of group meetings and pamphlets in Puerto Rico is a recognition of the need for an information program to supplement educational activities.

At this stage, it would be interesting to recall the strategy adopted by Japan where, strictly, there was no official program. Recognizing that post-war Japan was extremely overpopulated and that it would hinder economic reconstruction and the betterment of living standards of the people, as well as the emancipation of women, the House of Representatives of the Japanese Diet established in 1949 a Population Problem Council in the Cabinet. Two sub-committees of the Council were formed: one was to discuss and decide upon economic measures to support the population; and the second, charged with the responsibility of "adjustment of population," was to discuss methods of reducing the birth rate. A plan was formulated which was circulated by the Ministry of Health and Welfare to the prefectures in 1952. Noting that there had been a marked increase of induced abortions which could endanger the life and health of mothers, the plan called for the promotion of conception control to improve the welfare and the quality of the nation from the point of view of public health. Emphasizing that practice of conception control should be
voluntary and that people should be "guided" so that "they will fully understand," the plan laid emphasis on an education and information program. It comprised "individual guidance" (case work), mass education (group work), and information activity (including the use of radio, newspaper, and lecture meetings). Guidelines were provided for each of the three activities and personnel were designated to carry them out. With a view to preserving public morals, some cautions were prescribed with regard to the information component (Muramatsu, 1967, pp. 85-90).

Field studies carried out in several countries brought out the imperative need for public information in an explicit manner and provided leads on sources of information and influence for behavioral change and the diffusion process. These studies include the Bombay studies in India in the early sixties (Chandrasekaran and Kuder, 1965, pp. 168-172 and Chandrasekaran and Bebarta, 1963, pp. 5-14), the 1963 Taichung study of Taiwan (Cernada, 1968, pp. 86-89), and the 1964 Sungdong Gu study in the Republic of Korea (Park, 1968, pp. 79-80). The Bombay and Sungdong Gu studies emphasized the importance of "friends, relatives and neighbours" as a primary source of information on matters related to family planning. In an earlier paper, Donald J. Bogue drawing conclusions from available literature, had emphasized the need for more dissemination of information and strongly recommended greater use of these informal, private channels of communications by increasing the volume and accuracy of information that flows through them (Bogue in Kiser, 1962, pp. 503-506). Lulliani and Comilla studies in Pakistan (Comilla is now in Bangladesh) also drew attention to the vital importance of the informal network of communications that exists in any community and the need to feed correct information into these channels (Choldin, 1966). The Korean study cited the radio as an equally important source of information (Park, op. cit.). The Kaohsiung study in Taiwan (Cernada and Lu, 1970, pp. 102-103) and the Isfahan study in Iran (Gillespie and Loghmani, 1972, p. 13) also emphasized the importance of radio as an important and reliable source of information.

In spite of such encouraging information from the field, national programs that started in the early and mid-sixties emulated the strategy of the older ones and maintained a low profile with regard to communications, relying largely on face-to-face approaches by existing health workers or newly appointed fieldworkers and on using printed material and occasionally films and filmstrips.
to strengthen their efforts. The pre-pregnancy health workers of Taiwan, the fieldworkers of Korea, and the health assistants (family planning) of India were all variations on the same theme. Perhaps, Korea was the only exception to the general pattern; this program brought in significant mass media support at quite an early stage.

Gradually, governments came to recognize that if the national objective of moderating fertility had to be achieved, a comprehensive information program was not only essential but inescapable. Therefore, after convincing themselves that the ground had been prepared reasonably well—first, by the assiduous efforts of the voluntary family planning organizations which had been working practically in every country prior to the launching of national programs, and later, by the low-profile governmental education program—and that there would be no serious social or religious objections, several countries, during the latter half of the decade of the sixties, launched massive information programs using all available mass media. The report of the survey conducted by the United Nations Economic Commission for Asia and the Far East (ECAFE) in 1967 in 13 Asian countries gives quite an impressive picture of the nature and extent of the use of mass media for family planning programs (United Nations, 1968, pp. 147-164). There is no doubt that this was greatly facilitated by a remarkable expansion of mass communications facilities in developing countries.

This guarded approach toward large-scale utilization of mass media was commended by the Working Group on Communications for Family Planning convened by the Economic and Social Commission for Asia and the Pacific (ESCAP, formerly ECAFE) in 1967. The Working Group observed that, "It would pay dividends to build up pockets of favorable public opinion in the initial stages by the well-established methods of interpersonal communications and carefully develop the mass communications component, so that, the opinion leaders in the community will be ready to endorse the messages of the mass media" (United Nations, 1968, p. 27). Mass media, especially radio, in this strategy, were meant not only to disseminate relevant and correct information to as wide an audience as possible but also to confer legitimacy and respectability on a comparatively new idea and on a new program of and by the government for the people. The inclusion of family planning in radio broadcasts was expected to make the subject a public issue worthy of public discussion and thus increase its salience; and by virtue of radio being an authoritative source of information, it could support and strengthen.
the efforts of fieldworkers and help in containing rumors and hostile propaganda.

However, it was also recognized that exposure to mass media does not always result in action. The Sungdong Gu study showed that while 46.5 percent of the respondents mentioned the radio as a source of information, only 15.8 percent of those who visited the clinic identified it as the source of direct influence for the visit. In the Singur study, mentioned above, it was observed that the birthrate, which had declined from 42 in 1958 to about 37 in 1961, increased to 42 by 1963 after the frequency of person-to-person contacts was reduced, thereby emphasizing the need in communities with limited education for constant personal follow-up to ensure sustained practice (Murty, 1968, p. 106).

The next stage in this strategy, therefore, devolves, once again, upon interpersonal communications and the stimulation of community involvement and participation through local leaders. At this stage there is a planned coexistence of mass communications and interpersonal communications; they are meant to be mutually supportive, interdependent and complementary. Face-to-face workers reinforce and sustain the impact of mass media, personalize the messages put out by them, and relate their content to the needs, interests, and values of the community and the people so that family planning as a concept becomes ingrained in the value system of the community. This in turn, should encourage and motivate the individuals into practicing contraception as a matter of course. This strategy seems to represent a truly integrated approach to communications using both the interpersonal educational methods and the more impersonal mass media, each to contribute what it is best suited, to the progress of the program.

Most of the countries have adopted this strategy and are implementing it in the light of their own capabilities and limitations. Radio, television, newspapers, magazines, mass mailings, advertisements, feature films, documentaries, trailers, filmstrips, slides, wall paintings, signs and symbols, and a host of other things have become a part of family planning communications programs and are being used extensively. These can be heard or seen even in remote parts of the countries. Hundreds of people—professional and para-professional—have been involved in the preparation, production, dissemination, and distribution of information and educational material; thousands of people are engaged in organizing
communities to promote common collective efforts to tackle community population problems, to inform and educate people with regard to family planning, and in so doing, to relate mass media messages to educational activities; and tens of thousands of community leaders, labor leaders, teachers, and leaders of women's and youth organizations, and others have been brought in into the fold of the program to provide local and community support for program activities. All this has entailed a colossal training program in the art and skill of communications and education at local, national, regional, and international levels.

The next step, that of incorporating population and family planning into the daily life of the community, has been taken by some countries which are relative newcomers to the arena. Indonesia, Iran, Kenya, the Philippines, and Thailand come to mind. Profiting from research findings and experience of program strategies in other countries, adapting these to their own conditions, and capitalizing upon the groundwork of voluntary organizations in thawing any misgivings or objections that might have existed in the community, these countries moved rapidly toward the mass media phase. In fact, in the Philippines, radio stations provided yeoman service to family planning even before the government program was launched, so that the official communication activities started with an initial impetus. These countries are now in the process of integrating family planning activities with those of their national development programs. They have now set for themselves the objective of institutionalizing the concept of family planning and the small family norm into the value system of the community, so that the responsibility for solving the population problem will be "handed over to those who can best solve it—the people." This step will call for an expanded and intensified (perhaps revamped) communications program and a consequent, vastly augmented training program.
CHAPTER 2

Training Needs

The several stages of development in the use of communications for family planning programs have generated specific training (including orientation) needs in order to meet the requirements of the program at the stage in question. These needs have been met by the respective countries to the extent possible within the limits of their physical and personnel resources and within the parameters of their appreciation of the communication process, as well as the social, cultural, and political milieu of the country. One cannot but be impressed by the enormous investments made by countries—both by the voluntary and the public sectors—in developing the manpower required by the program at any given stage; also impressive are the efforts of regional and international organizations and bilateral assistance agencies in helping countries to identify the changing training needs, prepare the manpower (trainers) needed to meet those needs, and sometimes to train the rank and file of communications workers required to man the country programs.

Perhaps, the first major international effort in helping to focus the attention of national governments on the variegated human resources required to man a comprehensive communications program for family planning was the Working Group on Communications for Family Planning organized by ESCAP in 1967. Reviewing past experience of the participating countries, the Working Group emphasized the imperative need for an integrated communications program (integration between mass communications and face-to-face approaches) and identified the categories of persons needed to implement such a program. These included trainers, technical administrators, medical and paramedical staff in hospitals and clinics, operating personnel, peripheral workers, personnel of communications units, mass media specialists, legislators and administrators, staff or related (government) departments, personnel of voluntary organizations, and special groups (United Nations, 1968, pp. 45-48).
In a subsequent working group organized by ESCAP in 1970--Working Group on Training of Personnel in Family Planning Programmes--the Group "acknowledged the importance of informing and motivating the sectors that were concerned with policymaking and generating public opinion in support of family planning programmes, as well as the target couples." In keeping with this line of thinking, the Working Group identified three main groups of personnel--"workers who dealt directly or indirectly with the target audiences (e.g. couples)." These groups were designated as program designers and planners at different levels, as supervisory teams, and as direct service workers. Communications personnel or those involved in using communications a great deal were included in all three groups: those responsible for the development of programs such as executive officials at different levels; those "who enabled the direct service workers to perform their tasks and deal with the sectors that generated public opinion at the community level, for example, labor leaders, teachers, religious leaders"; and those who identified target groups and delivered family planning service such as physicians, nurses, midwives, social workers, fieldworkers, etc. (United Nations, 1972, pp. 14-15).

At the Experts Meeting on Training of Family Planning Communicators organized by the United Nations Educational, Scientific and Cultural Organization (UNESCO) in 1972, the author of this paper suggested three broad categories that need to be trained. In the first category were included those working directly in the program; in dividing them into two sub-divisions, a distinction was made between those who have communications as a direct and primary responsibility--"personnel manning the communications units at different administrative levels and the direct service workers such as fieldworkers, their supervisors and the like"--and those who have direct responsibility for one or the other functions in the programs and can utilize communications to improve their performance such as administrators at different levels, clinic staff and others. In the second broad category were those who were not within the family planning agency but who carried a major responsibility for family planning communications; these were mass media practitioners such as programmers, scriptwriters, reporters, and the like in radio and television stations; as well as different levels of press, film, printed material, and indigenous media personnel. The third category covered personnel in related government departments, labor leaders and key personnel in large industrial undertakings and plantations, educational personnel in the armed forces,
private medical practitioners, the political and (where necessary) the religious infrastructure in the country, and others (Amritmahal, 1972, pp. 2-3). By and large, the meeting accepted this classification (UNESCO, 1973, pp. 3-4).

The first Regional Training Workshop of the Intergovernmental Coordinating Committee South East Asia Regional Cooperation in Family and Population Planning (IGCC) which, once again, addressed itself to the entire range of family planning workers considered a background document entitled "Planning of a national training programme for family planning." Dividing the workers into three main groups, the document included in the first group communications personnel (extension and health educators, mass media practitioners), family planning fieldworkers, and part-time workers such as motivators, canvassers, and traditional birth attendants among "direct service workers." In a second group called "supportive workers/agencies" were mass communications personnel from radio, television, press, film, etc., and face-to-face workers (perhaps from other agencies since family planning fieldworkers were already included in the first group), officials of other government departments, private medical practitioners, and leadership of labor and trade unions, professional organizations and specialty groups, and other voluntary organizations. Village headmen and "other opinion leaders" formed part of the third group (IGCC, 1972, pp. 102-103). In its final report, the Workshop stated that the stage of the program would determine the priorities in training. It felt that at the initial stages of the program, priority should be given to opinion leaders, policymakers, and the like, and that when the program had gathered "more form and shape" an appropriate order would be: training of trainers; training of workers directly involved in providing services and educating the people, such as medical, paramedical and auxiliaries, information, education, and communications personnel, fieldworkers, administrators, and others as required in any particular country; and training of personnel from supportive agencies and other supportive workers (community development workers, personnel from related ministries, voluntary and social workers, private [medical] practitioners, traditional birth attendants, and the like) (ibid., p. 8).

In the voluntary sector, the International Planned Parenthood Federation (IPPF) has been stimulating and assisting national family planning associations to organize and conduct training programs mainly, but not entirely, for their own personnel. With a view to highlighting the magnitude of the task and also to having an inventory of the training needs, IPPF has conducted at least three
surveys—the study of volunteer and employed staff relationships (1973), the survey of training activities in selected family planning associations (1973), and the survey of world needs in family planning (1974). In 1975 IPPF convened a consultative meeting to explore in depth the training needs by identifying the needs, problems, and constraints as well as effective means of meeting those needs and overcoming the problems and constraints. The consultative meeting "attempted to categorize requirements in relation to training within the Federation both in quantitative and qualitative terms" and identified categories of workers to be trained, specific functions for which training is required, and types of training (IPPF, 1976, p. 2, pp. 7-10).

On the basis of guidelines evolved by such international and regional meetings, or, out of their own genius, most countries with national family planning programs have worked out the training load generated by the program. An all-India workshop on training of family planning personnel organized by the National Institute of Family Planning (the erstwhile Central Family Planning Institute) in 1966 set out in categories and in numbers, the persons who had to be trained and retrained to man the extended family planning program. In terms of personnel whose role was exclusively in communications and education or who practiced it as a part of their job and who were to receive special training for the job the numbers were: 670 district extension educators, 5,200 block extension educators, 15,700 health assistants (family planning) and 36,000 auxiliary nurse-midwives (Central Family Planning Institute, 1966, pp. 72-76).

The Philippines national workshop for communications in family planning (a sequel to the 1967 Singapore meeting), sponsored by the United Nations Fund for Population Activities (UNFPA) and ESCAP and organized by the Commission on Population and the National Media Production Center in January 1972, did a thorough analysis of the program and personnel needs of the communications aspects of the national family planning program and recommended the various categories that needed to be trained (National Media Production Center, 1972). Following this, the Commission on Population set up a small committee to quantify the training load and crystallize the recommendations into a work plan.

Insofar as face-to-face communications workers are concerned, these estimates of the training load are reasonably realistic. This is particularly so in those countries where the national
family planning organization itself recruits, appoints, pays, and maintains fieldworkers as in Indonesia and Taiwan, or information workers as in Iran and Malaysia, and thus is aware of the precise numbers that need to be trained. It is also valid in those countries where the family planning program depends upon the existing health infrastructure for face-to-face communications, with whatever augmentation of staff to handle the additional workload, as in India or Korea. But, when it comes to mass media practitioners, especially in those countries where there is a free press and therefore numerous newspapers and magazines or in those countries where private radio stations coexist with the government-controlled radio, the estimates may not always be complete. And, when one has to reckon with the newer trends in the program in several countries, the problem of conducting a systematic inventory is compounded further, but is inescapable.

Two pronounced trends that are emerging in program operations—the community-based family planning programs and the integration with rural development programs—will expand the scope of communications for family planning, endow it with a different dimension, and consequently increase the numbers and variety of persons to be trained. In Korea, the Planned Parenthood Federation of Korea (PPFK) revitalized the traditional mothers' clubs, helping to establish 22,533 such village clubs between 1968 and 1973 in order to create a local voluntary movement to encourage family planning practice, aid fieldworkers, serve as agents for family planning information and contraceptive supplies, and encourage community development activities. With a view to improving performance, PPFK in 1970 started an intensive training program for club leaders, assistant leaders, and secretaries; by mid-1973, 1,900 leaders had received a one-week training program. There are 45,000 natural villages in the country (Kincaid, et al., 1975, pp. 5-10).

In Indonesia, in keeping with the new strategy of transferring to the community the responsibility for recruiting acceptors and sustaining their practice of contraception, field studies have been carried out on a community-based distribution program (CBD). It consists of establishing a village contraceptive distribution center (VCDC), manned by a voluntary village-level worker (PPKBD) and of forming a village family welfare club that works closely with the PPKBD. The PPKBD, working with a population of about a thousand, is responsible for educating the community, recruiting new acceptors, sustaining their motivation, and
ensuring an unbroken supply of contraceptives; club members share some of these functions. This scheme has now been extended to all the provinces in Java. There are 10,800 VCDC and/or family welfare clubs in West Java and 6,785 of them in Central Java; in East Java the scheme has been extended to 13 out of the 37 administrative division. In Bali, where life revolves around the banjar or sub-village with an average population of 600, there are (as of 1977) 3,600 such banjar family planning institutions performing the same functions as the VCDC and the club. Extension of the CBD to the provinces in the second phase of the program has just started (Haryono, et al., 1976, pp. 13-15). All this will involve the training of about 100,000 PPKBDs.

In the context of the Total Integrated Development Approach (TIDA) program in the Philippines, which was launched in seven provinces in 1975 and which seeks to involve the community, rural or urban, "not only as acceptors but also as implementors of the population programme," there is one program unit at the barangay (the smallest political unit) level "to serve such functions as motivation, service delivery points, follow-up and maintenance points, and data sources for the programme." There will be at least one such unit in each barangay and each unit will be manned by a barangay level worker, with each worker ultimately to serve about 50 families. Their work will be coordinated and supervised by a municipal population officer (Esmundo, 1976). As the program is extended to other provinces it will pose a substantial training load.

The Community-Based Family Planning Services of Thailand (CBFPS) is a private, non-profit organization set up to explore the possibilities of expanding information and availability of contraceptives in rural areas, through alternative systems, to supplement the government program. It works closely with the government program and uses the health infrastructure when required. Initially funded by IPPF, each unit has to become self-supporting within a short period of time. The CBFPS has three main programs—the village program, the public institutions program, and the private sector program—all of which involve the training of large numbers in communications and for other specific jobs they will have to perform. Considering the village program only, in about two years’ time, 3,800 persons had been trained to become motivators and distributors, each serving a population of between 500 to 1,000. Fifty districts had been covered which represent only ten percent of all districts in the country. In 1976 the government asked the CBFPS to extend this program nationwide with government financing (Mechai, 1976, pp. 1-8).
The World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) commissioned a study of innovative programs that had been in operation in some countries to meet basic health needs of rural communities and which showed promise. Meeting basic health needs included (in addition to providing needed health care) advice on family planning where government policies permit it, and health and nutrition education. Among the recommendations made to WHO and UNICEF of significance to this publication was one urging, where local conditions permit, the use in local communities of a primary health care worker who has received simple training and who, insofar as possible, has been selected by the community. This, the authors of the study say, is an important determinant of success of the new approach to primary health care. They also recommended the modification of curricula for the doctors, nurses, and midwives in order to adapt themselves to the reoriented approach. Training of other categories of personnel should provide a strong community orientation so that they can coordinate the mobilization of community resources (Djukanovic and Mach, 1975, p. 8, pp. 105-106). Naturally this approach, especially in those countries where family planning is based on the health organization or has close ties with it, will increase the number of community-level workers to be trained and will call for retraining of health workers to emphasize community education and community organization.

In fact, when India decided to move in this direction, the Committee on Multipurpose Workers under the Health and Family Planning Programme, which the government appointed in 1972, recommended dividing the population covered by a primary health center into 16 subcenters each having 3,000 to 3,500 people and stationing two multipurpose health workers—one male and one female—in each subcenter. Education and information for family planning and health education are integral parts of the recommended job responsibilities of both male and female workers. The committee observed that whereas the female worker had the benefit of two years' pre-service training, her male counterpart who was a uni-purpose worker and so had training "in only one field of activity and that too for a comparatively short duration" needs thorough training before he can be put on the job. The committee's estimates were that there were 76,738 uni-purpose male workers who could be converted to multipurpose workers after 12 weeks of training; the number of female workers was estimated at 40,225 and they were to receive ten weeks' training. These numbers fall short of the worker-population ratio.
recommended by the committee. Family planning, health education, and working with the community, form part of both classroom instruction and practical training recommended by the committee (Government of India, 1973, pp. 39-41, 17-19).

The Group on Medical Education and Support Manpower went beyond these recommendations and said that immediate action will have to be initiated on four programs, the first of which was "organization of the basic health services (including nutrition, health education and family planning) within the community itself and training the personnel needed for the purposes." The Group recommended that there should be "trained local, semiprofessional, part-time workers" of five categories, one of which was "a large number of family planning workers from among adults, young men, housewives and public functionaries." While the Group did not explicitly recommend a worker-population ratio, it stated that such a program would "create an agency which is close to the people, has their confidence and is economical to operate for providing the immediate, simple and day-to-day medical and health services needed by the community" (Government of India, 1975, pp. 10-12). Implicit in the statement is that these self-appointed, part-time workers will work in small neighborhoods among relatives, friends, and acquaintances at a low worker-population ratio. The implication for the program is that a staggering number of community workers will have to be trained in simple methods of information, persuasion, and motivation.

Given such trends in program development, the number of persons to be trained in communications skills—either in a pure family planning context or in association with other programs—will increase enormously over the years to come. In spite of the hundreds and thousands of people who have been trained in the different countries, either in face-to-face communications or in mass media usage or in integrated communications, the training load for initial training, refresher training, or retraining still looms large for most of the countries with national family planning programs. Therefore, there is still a pressing need to have a systematic, up-to-date (that is, in keeping with the current program strategy), precise estimate of the various categories and numbers of persons engaged solely, partially, or even marginally in communications for family planning and who need to be trained over a given span of time. This is the base on which to prepare a long-term comprehensive plan for the training program and to assess the proportion of the training load that has already been trained and that which needs initial,
additional, or reinforcement training. It needs to be emphasized that there may be changes in the training load when major shifts occur in program strategy or operations, or even when there is a revised perception of communications, or when promising new channels are discovered. Therefore, it is necessary to keep this estimate under periodic review.

Perhaps, the classification suggested in the 1972 UNESCO Experts Meeting on Training of Family Planning Communicators (which was described earlier in this chapter) with some amplification of the fourth category would serve the purpose (UNESCO, 1973, op. cit.). A fifth category to include community workers, voluntary workers from within the community itself, as different from those belonging to an official hierarchy and working in rural communities, traditional birth attendants, and traditional healers could focus attention on the large numbers requiring to be trained in very simple techniques of communications and persuasion.

Once the estimate of the training load is prepared, job expectations (what the family planning agency expects these persons to perform, as different from job descriptions which the agency prescribes for its own personnel) for each category have to be agreed upon and priorities determined. To complete the assessment of training needs will then require: prescribing instructional objectives; developing the content; selecting methods of instruction and teaching material; determining the duration; prescribing criteria for evaluation; identifying the faculty and institutions or facilities; and preparing a time schedule. Many times, the duration of training thus arrived at in a systematic manner is sacrificed for want of adequate financing or because of the anxiety of the agency to finish the task as speedily as possible. This will have a chain reaction affecting the content, the methods, and the quality of the job performed.

As a conclusion to the discussions on estimating the training needs, the Indonesian case might serve as a useful example. The current objective of the program—institutionalizing the concepts of family planning and the small family norm into the value system of the community—calls for a vastly expanded communications effort as one of the two major thrusts of the program. The National Family Planning Coordinating Board (BKKBN) prepared a plan to train and/or orientate several thousands of "direct" workers and "supporting personnel" during the next seven years. Divided into ten groups and 65 categories within the groups, they include:
1. Community education personnel—to include the fieldworker and the supervisory hierarchy and the PPKBD;

2. Information personnel—to include personnel of the Department of Information and information personnel of other government departments at different levels of administration; mass media practitioners including those from radio (government and private), television, press, film, outdoor publicity, indigenous media, etc.; members of the Family Planning Writers' Association; and others;

3. Officials of the BKKBN and of the implementing units (government departments of health, information, education, defense, religion, social affairs, voluntary organizations, viz. the Indonesian Family Planning Association, the Indonesian Council of Churches, and the Mohammadiyah) at the central, provincial, and regency levels;

4. Medical and paramedical personnel and traditional birth attendants;

5. Trainers of family planning training centers and those associated with training of personnel;

6. Ministry of the Interior officials holding executive positions including the village headman;

7. Key officials of other government departments at different administrative levels; in staff college courses—central and provincial;

8. Industrialists, entrepreneurs, and industrial management;

9. Leaders of voluntary organizations at different administrative levels to include labor, women's, youth, farmers', and fishermen's associations; religious leaders; heads of kinship groups in village communities; other village (voluntary) workers;

Groups 1, 2, 4, and 5 comprise persons who have major or incidental communications responsibility or use communications skills a great deal in the course of their work.

The main purposes of training persons in groups 6 to 10 are: to provide them with information on the interrelationship between population growth and development, the concept of family planning and the national program, and the special communications needs of the program; to help these key persons to discover the role for themselves and their organizations in furthering the concept underlying the program; and to stimulate them to talk about the program within their reference groups, to influence behavior of people associated with them, and to transmit these ideas through their respective training programs and their contacts with the people. Thus, each one who will be trained is expected to contribute his mite to the total communications effort. For each group, and in some cases for each category, the following have been specified: job expectations, instructional objectives, content, methods and material, duration, and location of training. Evaluation procedures have been prescribed.

Training will be imparted in the 27 national, provincial, and sub-provincial institutions of the national family planning training system and through itinerant, local training courses with some support from the established training centers. The concept and the program will also permeate into the course offerings of all other training institutions and, in this process, training of personnel in groups 6 to 9 will be crucial (BKKBN, 1976, annexure pp. 1-74).
CHAPTER 3

Training Experience

EVOLUTION OF TRAINING
IN COMMUNICATIONS

In an international agency document on the training of family planning communicators it was observed that while training developed with lopsided concentration on the medical and health components . . . the training of communicators was less developed because the communications aspect of the program was an enigma; thus there existed ambiguity or perhaps even ambivalence in respect of the communicators' role and there was a dearth of well-thought-out plans and strategies for their training. While lopsided may not be the mot juste, because of historical reasons and the prevalent perspectives, it was considered important in the early training programs to impart to the trainees—of whatever category—basic information on methods of intervention in human reproduction and the effects of family planning on the health of the mother and child. This was the approach of many family planning associations whose training activities were the precursor to government training programs in most countries. When government training started, a second emphasis was added: that on demographic and socioeconomic factors. The assumption was that those who came for training—doctors, nurses, midwives, social workers—had the basic knowledge and skills pertaining to their job and all that they needed was additional knowledge and some clinical skills to enable them to provide the limited family planning services which were in vogue then.

As the scope of the family planning program expanded and as it became evident that the program was more than contraceptives, demography, and a wee bit of social work, training programs started including other subjects such as education, information, social and behavioral sciences, and evaluation, until today when the emphasis is on management. This is as it should be, if training is accepted as an integral part of program planning and operations that should
further program performance by providing to the trainees the kind of knowledge and skills required of the workers at any particular stage of the program. Therefore, as the role of communications—interpersonal and mass—for family planning went through its own process of evolution, training programs have developed first to provide or strengthen educational skills of existing workers then to endow new entrants with the ability to educate and/or to inform, and later to train specialists in community education, public information, and mass media for or in family planning communications.

The Indian experience typifies this process of growth and development. Perhaps the first governmental institution that was set up for training family planning workers was the Family Planning Training and Research Centre (FPTRC) established in Bombay, India in 1956. Initially, it was intended to train middle- to senior-level health administrators at the Centre and in the states to administer the family planning program through the existing health services. Thus, along with other subjects, health education was taught or reinforced. This was supplemented by establishing, between 1956 and 1961, central family planning field units and central family planning touring teams in each state to carry the message of family planning to the people and to train local leaders. During this period ad hoc training courses were also offered to health professionals both in the official and private sectors in which health education was included. These were largely theoretical presentations with some field observations since both the kind of persons who were trained and the lack of a large-scale field program did not permit any organized field training.

When the extended family planning program was launched in 1963, taking into consideration the very large numbers who had to be trained, the government approved the establishment of 44 regional family planning training centres (RFPTC) each with a rural practice field. The 1966 national workshop made a comprehensive review of the entire family planning training program. It recommended that district extension educators (a district has a population of between two and three million) who were required to organize district-wide community education programs and to supervise subordinate extension education personnel (and thus were considered key persons in the extended family planning program) should be trained at the three national institutions: the Central Health Education Bureau (CHEB), New Delhi; the FPTRC, Bombay; and the Institute of Rural Health and Family Planning, Gandhigram. These institutions had good
faculties in health/extension education and the social sciences, considerable field research experience, access to mass media specialists, and attached urban and/or rural practice fields. Block extension educators (a block has a population of about 100,000 and there are, on an average, 15 to 20 blocks in a district) and health assistants family planning (each for a population of 20,000), who were direct workers in communications, and other block personnel who had incidental responsibilities in communications were to be trained at the RFPTCs. All these three categories of workers were face-to-face communications functionaries and so the communications content emphasized areas such as community organization, group meetings, social organization, social control, leadership and power structure, audio-visual aids, films, and exhibits. Field training in program development was an integral part of the course (Central Family Planning Institute, 1966, pp. 56-57).

The extended program also included the appointment of local leaders to become the parivar kalyan sahayak/sahayika (male/female family welfare helpers) who would help in organizing educational meetings, talk about family planning in their reference groups, disseminate knowledge of human reproduction and contraception, distribute printed material and simple contraceptives, answer questions and dispel doubts, and thus serve as agents of the program in the village. They were identified and recruited by the health assistant family planning and their training was to be at the local level. The health assistant with the help of other local health personnel trained these local functionaries on the lines of a set curriculum. He or she was also required to support and supervise their work (ibid., pp. 86-87).

Later when the mass education and media officers were appointed at the district level, the CHEB in collaboration with the Indian Institute of Mass Communication developed a prototype of a training program for these functionaries which emphasized mass communications approaches such as involving the local press and radio, mass mailing, outdoor publicity, distribution of printed material, indigenous media, and the like. In 1967, a workshop was conducted by the Central Government Department of Family Planning in collaboration with the Central Family Planning Institute (CFPI) for personnel of the All India Radio (AIR) including program executives, program assistants, reporters, and the like with a view to helping them to produce programs on family planning and to incorporating it into their normal productions. Subsequently, the
staff training programs of AIR and the in-service training programs of the Indian Institute of Mass Communication started including family planning as a subject for training information personnel in the country.

TRAINING OF PERSONNEL INVOLVED IN FACE-TO-FACE COMMUNICATIONS

Taiwan

Taiwan probably has the distinction of being the first country to use a non-health fieldworker exclusively for family planning. The first few pre-pregnancy health workers (a euphemism in the absence of an official program) were appointed in 1960 to visit homes and recruit acceptors for conventional contraceptives. By 1964 their numbers had increased and they were assigned to health stations on an island-wide basis. Their main function was to educate and inform women on the need for and methods of family planning by visiting them in their homes in townships with a population of about 40,000, 5,000 of which are women in the child-bearing age (Cernada, 1970, p. 24).

After a careful selection procedure they were given 12 working days of training of which 60 percent was content-oriented and 40 percent practice. The former, comprising five major areas, devoted 12 hours or 21 percent of the time to the health education approach. Classroom instruction not only conveyed the content to be included in educational sessions for the people, but laid much stress on the methods of presentation; the latter emphasized avoiding abstractions, eliminating unnecessary lectures, using two-way methods of communications, role playing, using audio-visual aids, etc. Practical work in the field (which followed the classroom presentations and lasted four days and two evenings) included, under assignment to an experienced worker, a day for role playing for home visiting, two days doing actual home visiting (five visits with the regular fieldworker and fifteen independently) two evenings for organizing and conducting neighborhood group meetings, and one day for a group presentation to her peers on a given topic when she was evaluated before the group. Two final days were used for discussing problems that arose during the practice session and for a final examination.
Post-training reinforcement, which provided guidance and encouragement in the field, was in the form of a local supervisor or neighboring fieldworker spending the first five days in the field with the new worker, a day at the end of the month, another two days during the next month, and one day a month for the ensuing six months or so. This was instituted as a result of feedback information from the field which indicated that reinforcement of the initial training was necessary, especially during the first four or more months. The number of supervisors was increased and a special two weeks' training session was designed for them (Cernada and Huang, 1968, pp. 1-6).

In spite of the usual human resistance to change, the Taiwan curriculum has been a relatively dynamic one, reflecting new inputs into the program or its new directions. In 1968, when there was a significant increase in mass media (especially radio) support for the program, taped interviews with women in the community were collected with a view to using them for the training of fieldworkers, as well as for playing during home visits and for radio broadcasts (Keeny and Cernada, 1969, p. 8). Thus, the role of mass communications in the program, the support mass media could give to the fieldworkers and their contribution to making the messages more in consonance with peoples' ideas were introduced into the curriculum. There was also provision for integrating into the curriculum research findings which could influence the work of the fieldworker. When the program decided to concentrate on the newlyweds, the training program had to reflect this by bringing into the classrooms the special communications efforts designed for this purpose and by providing guidelines to the trainees for approaching this target group. However, it was only in 1974 that it was possible to organize one-week in-service retraining for existing fieldworkers. Training included communications aspects as well as clinical information concerning the new methods (Watson and Lapham, 1975, p. 240).

Pakistan

The Pakistan program which started with a low profile communications component in the initial stages moved into an aggressive integrated mass media and face-to-face communications approach in the Third Five-Year Plan (1965-70). A new hierarchy was developed to include: one part-time family planning organizer (the dai or indigenous midwife) in each village to visit every home to promote family planning using flash cards, flannelgraphs, and other simple
communications material; three family planning assistants in each thana in East Pakistan (now Bangladesh) (a thana has a population of about 100,000) to help and supervise the organizers; one family planning officer for each thana in East Pakistan and one per 50,000 people in West Pakistan to plan motivational campaigns suited to their area, organize group meetings, develop contacts, and distribute communications material; and a publicity-cum-executive officer in each district to plan, coordinate, and execute the program, particularly the communications aspect, by designing and producing communications material of local value and by organizing exhibitions, dramas, large gatherings of poets and writers, and other motivational campaigns for the district (Zaidi, 1968, p. 143).

Training programs were designed specifically for each level of workers. District personnel were trained by the provincial family planning boards with the assistance of the research and evaluation centers. Personnel at lower levels were trained by provincial mobile training teams (Hardee and Satterthwaite, 1970, p. 5). Field research carried out by the Sweden-Pakistan Family Welfare Project and the California Public Health Education Project in cooperation with local institutions influenced the communications program and, by inference, the training of communications personnel.

After a critical examination of the dais' performance and various factors affecting it and thus their contribution to the program, it was decided to restructure the field organization from one of "a massive corps of illiterate, poorly trained, low-paid female carriers of the family planning message, staying with the programme for short intervals, directing their efforts toward exposing women to family planning techniques rather than altering patterns of reproductive behaviour, operating un-systematically and without yardsticks for measuring what they achieve" to "a smaller but adequately sized organization of field workers, full-time and paid as such . . . and oriented towards providing family planning care as a regular and continuous service rather than as a single exposure." The new structure involved assigning to every 10,000 population a team consisting of a male and a female worker with certain predetermined attributes. They received simple but thorough practical training to educate fertile couples to accept family planning and to provide reassurance and encouragement for continuing practice through periodic follow-up visits. Observing that in training for motivational techniques "existing content . . . is not very meaningful,
consisting largely of vague generalities and sociological jargon" and that "hubs and clues furnished by good motivators can serve a pragmatic purpose better than presenting schematic models of the adoption process or abstractly discussing 'leadership-patterns,' 'motives,' 'needs,' 'roles,' 'innovations,' etc..." Wajihuddin Ahmad called for an eminently practical approach to training (stressing how the worker should talk to the client) and prescribed a number of "motivational prototypes" with flexibility to adapt them to specific situations. For every group of 36 man-woman teams, there was to be a permanent training officer to provide continuous training and guidance (Ahmad, 1971, pp. 10-12).

The new field structure went into operation in the Sialkot district in 1969 and was later extended to two other districts. Now called the Continuous Motivation System, it comprises the two-member male-female team for a population of between 12,000 and 15,000 persons to make regular contacts to provide motivation, supplies, services, and follow-up; six such teams are supervised by a population planning officer and three of these receive guidance from a senior population planning officer. Over 7,000 fieldworkers have been trained at the district level whereas the supervisors are trained at the Training Research and Evaluation Centre, Lahore (Zaidi, et al., 1975, pp. 255-257).

Iran

The Iranian situation is of a different order in terms of manpower for family planning communications activities. In his efforts to improve the quality of life of the Iranian people, the Shahanshah instituted the White Revolution. This included the creation of four corps--health, development, literacy, and women--in which membership would be in lieu of compulsory military service. When family planning became a national program, the Women's Corps was placed under the charge of the Under Secretary of State for Health and Family Planning and its members became important communications workers for the program. The other three corps were also involved in educational and informational activities for family planning. The Health Corps also provided services (Sardari, 1970). It was reported that by mid-1971, 4,500 male doctors and aides and 1,800 women of the Health Corps had been trained in family planning in relevant courses lasting up to three weeks. Over 40,000 male recruits of the Literacy Corps received nine hours of family planning
training. Regular training of more than 5,000 male and female members of the Development Corps included nine hours of family planning (Friesen and Moore, 1972, pp. 11-12).

In addition to these para-military personnel, the program also utilizes purely civilian officials of other government departments and private organizations primarily for disseminating information and in some cases for services. The same report (Friesen and Moore) stated that over 500 volunteer workers of the Women's Association had been trained in a three-day training course; 500 married women home economics agents had received twelve hours of training, and about 1,000 cooperative society supervisors had six hours. The program had trained and posted 455 mature (25-40 years of age) married women with at least six years' education as a special category of fieldworkers. The authors also referred to the expanded public information activities including radio and television, outdoor publicity, production and display of films and filmstrips, printed material, and mobile education and information units.

A later review reported a considerable strengthening of the communications and training components of the program (Zatuchni, 1975, p. 303). At the national headquarters, a new general directorate of training and communications was created and placed in the direct charge of the Under Secretary. In the provinces, new communications and education personnel were added to include a communication and training officer and a communication and motivation officer. Two training workshops were held in Teheran to train these personnel and some were sent abroad for short-term training. After this training the communication and motivation officers were required to organize training courses in the provinces for training and re-training the field officers who supervise the fieldworkers. It was estimated that in the preceding two years over 150,000 persons drawn from various social agencies were trained in training courses held at different urban and rural localities of the country. An innovation during this period was to add training in midwifery for the members of the Women's Corps, changing them from non-professional workers in the field and clinics to para-professionals to provide MCH and family planning advice and services.

Health Education

An important and sustained contribution to face-to-face communications in family planning has been from the field of health
education. In several countries, nursing and auxiliary personnel were among the earliest communicators for the program—in the hospital, clinic, and domiciliary care. Since some of these persons were the front-line workers for the MCH program who visited mothers and children in the home and talked to them in the clinics as part fulfillment of their service—education role, their training did include acquiring some skills to interview people and to conduct group meetings. When health education per se and the other social and behavioral sciences were incorporated into the curriculum, their training in communications became more scientific. In-service training programs were organized in several countries for MCH workers who had not been exposed to health education in their basic training so as to introduce them to the modern concepts and practices of health education. With regard to family planning content, by and large, the same procedure—in-service training for personnel already working, with progressive attempts at integration of the subject into the curriculum—has been adopted to develop the required knowledge and skills to participate in family planning education and service.

WHO has played a very important role in assisting member countries to strengthen the competence of these functionaries in health education, initially only for mother and child care in the community and later to educate women in family planning as a part of family health programs. The headquarters office of WHO and several of its regional offices around the world have organized expert groups, advisory panels, and other consultative bodies to examine the question of how best, both conceptually and in service programs, family planning education and services can be provided by MCH (and other health) personnel to the community as a part of the established health service delivery system. Recommendations of these groups represent the quintessence of thinking and experience among health specialists around the world and have become guidelines for further action by member governments. The Scientific Group on Health Aspects of Family Planning, for example, discussed the scope and feasibility of combining the provision of family planning advice and services with maternal and gynecological care (both at hospitals as well as in domiciliary care); child health services; nutrition activities; specific disease control programs (for example, tuberculosis); and other areas including community development. The Group mentioned the importance of training MCH (and other health) workers in family planning to enable them to undertake this responsibility (World Health Organization, 1970, pp. 23-26).
WHO has also assisted its member countries in this field by organizing interregional and regional training courses for teachers, administrators, and supervisors of the nursing profession (used in a generic sense to include nurses, midwives, and auxiliaries). The Organization has provided fellowships for overseas training and stimulated in-country training. Direct assistance from WHO to member countries, upon request, has included providing advisory services both at teaching institutions and in field programs.

Lately, the Organization has started an innovative training program for senior teachers, administrators, and trainers of medical and nursing personnel with a view to strengthening the capacity of countries for training various categories of health personnel in total fertility management and MCH care. The first of a series of interregional courses was organized in November-December 1976 by the Department of Gynecology and Obstetrics of the University of Singapore at the Kandang Kerbau Hospital for Women. Participation which was multidisciplinary in character, included gynecologists, pediatricians, nursing personnel, and others associated with training. Using an interdisciplinary approach, the syllabus included, among other medical and non-medical subjects, media planning and organization, community health education, training—the learning process, planning, objectives, methods of instruction, group work, training aids, evaluation—involvement of the community, and field visits to observe and study action programs. Those who taught these units were specialists in the subject areas and had experience in applying their specialty to family planning and/or health programs.

The International Confederation of Midwives in collaboration with the International Federation of Gynecology and Obstetrics (ICM/FIGO) set up a joint study group "to continue the improvements of Maternal and Child care and the quality of Maternal and Child Life through the inclusion of Family Planning in the services provided by midwives of all categories in their expanding role." In furtherance of this aim, ten working parties have been organized around the world in which obstetricians and midwives have participated. One objective of the West Asia working party was to identify "Unmet needs in Maternal and Child care such as family planning, health education and nutrition particularly in the rural communities." The agenda included: family planning information, education, and communication; the expanding role of all categories of midwives and traditional birth attendants in the field of family planning; integration
of family planning, pediatrics and nutrition with the midwifery training program of all categories of midwives; and planning of family planning training programs. Group discussions considered "the priorities and problems in family health services and in family planning information, education and communication," and "the incorporation of family planning, pediatrics and nutrition in the basic midwifery curriculum," and stated that "family planning education and service is the responsibility of all midwives" (ICM/FIGO, 1975, pp. 4-15).

In many countries, family planning (family health) and health education are included in the curricula of practically all categories of health workers. The idea is that when health workers educate the community on one or the other of the health problems facing the community or on the promotion of positive health, they will be able to include family planning and serve as sources of information and referral. Health educators help to coordinate the educational efforts of other health workers. They help the latter by planning, organizing, and evaluating educational programs for family planning as well as for other health programs, and by providing supervision. The health educators' role in training of staff in the educational aspects of their work, in developing cooperative working relationships with related agencies, and in preparing and evaluating educational materials has been particularly useful (WHO, op. cit., p. 27).

While health education is being taught to all health personnel, there has been steady progress in training professional health educators in most of the countries where population growth is also recognized as a major problem. In some of these countries, while health education in relation to different public health problems was being taught, considerable emphasis was (and is being) placed on health education for family planning and maternal and child health. In India, for example, at the All India Institute of Hygiene and Public Health, even in the special course in health education in the early sixties which was the precursor to the university diploma program, population and family planning formed an appreciable part of the content, and students were encouraged to choose family planning as the subject area for supervised field training. Health education faculties in some of the Asian institutions such as the Seoul National University School of Public Health in Korea and the Gandhigram Institute of Rural Health and Family Planning in India have been deeply involved in field research on the educational aspects of family planning for quite some time. It stands to reason that the training of
their students in health education was enriched by such involvement. On the American scene, some of the schools of public health, strengthened by their field research in this area in developing countries, developed special programs for the master's degree in public health with major concentration in maternal and child health, population and family planning, and health education.

Further to assist such developments in member countries, WHO convened in 1970 a study group on Health Education in Health Aspects of Family Planning. Members of the group, drawn from eight countries in four continents, included medical and paramedical persons involved in health education, family planning administrators, health education administrators and teachers, and social scientists. The group made a comprehensive review of the subject, identified some important requirements and difficulties, stated the objectives of education in health aspects of family planning, and recommended a systematic step-by-step approach to using education in the health aspects of family planning. Education of community leaders utilizing all approaches to communications (individual, group, community organization, and mass information), and evaluation of effectiveness, efficiency, and the process formed important parts of the recommendations. Discussing the management aspects of the problem, the group observed that while all health workers have an important role in the program, if health education in family planning is to succeed, there is a need for properly trained professionals to be able to plan and organize a community-wide program. Subject areas considered to be of special importance in the training of staff for such work have been listed (World Health Organization, 1971, pp. 13-40).

Traditional birth attendants, known by different names in different countries, mostly female, form a very large group connected with maternal and child health and family planning. For quite some time, in most developing countries, attempts have been made by health organizations to train the traditional birth attendant to practice some simple principles of asepsis, in order to reduce the risk to the health of the mother and child. By virtue of her belonging to the community in which she practices and readily providing a service that is required in the community, she is an important and credible source of information and influence in matters concerning maternity. This has prompted several countries to utilize the traditional birth attendant in the family planning program to recruit acceptors from her clientele. Different countries
have tried different ways of involving her; these have included training her in family planning, providing her with contraceptives for distribution, and offering financial and other incentives.

It has already been stated that utilizing the dai for family planning in Pakistan was given up in favor of a more organized field structure (Ahmad, op. cit.). The Indian experience has not been an unqualified success either. In spite of a massive training program to train 75,000 dais in 250 centers reported by Govind Narain in 1968 (p. 8), five years later, in the context of providing primary health care within every community, there was fresh thinking on how to utilize them in the health and family planning program and how to train them for the job (Government of India, 1973, p. 32). Since conducting deliveries and providing associated services are a means of earning a livelihood for the dai, it stands to reason that there would be a conflict of interests between her traditional avocation and motivating women to accept family planning. Therefore, unless the financial compensation for participating in the family planning program is attractive enough to offset the reduction in income which she would have ordinarily derived from her practice, it would be difficult to involve her in the program.

However, there do appear to be cultural variations in this matter. In Indonesia, quoting statements made by dukuns to other investigators, Everett M. Rogers and Douglas S. Solomon have suggested that delivering women is not perceived as a source of occupational income by the dukuns but as an "altruistic desire" to provide assistance at a time of need. One dukun stated that the prestige that she has is without price, equalling that of the village spiritual leader or even the headman. The authors have expressed the view that in Indonesia the dukuns can be involved in the family planning program through a "well-designed and conducted training, supervision, and reward system" (Rogers and Solomon, 1975, pp. 101-103).

Rosalind M. Galang has reported that a three-year study in the rural Philippines by the Institute of Maternal and Child Health (IMCH) showed that the hilot's traditional role as a birth attendant was not necessarily a deterrent to her working in the family planning program and that she could very well be used for motivational work. A second study mentioned by Galang was a follow-up on the effects of IMCH training on a group of hilots conducted by the Philippine Institute of Culture. This study revealed that, compared to her
untrained peer, the trained hilot was more favorably disposed toward family planning, wished to be a family planning worker, and was willing to motivate women in her community. The conclusion drawn was "given the right training, incentives, encouragement and favourable means of implementation, hilots can become effective motivators" (Galang, 1975, pp. 7-8).

J. Y. Peng and Elizabeth Preble have reported the use of kampong bidans in Malaysia to recruit oral contraceptive acceptors and to provide them with subsequent supplies of pills. These women received a three-week training in maternal and child health, midwifery, and family planning and an additional three-day course on program procedures and family planning methods. They recruited on an average two acceptors every month and the continuation rate at the end of 12 months among their clients was 72 percent. Encouraged by this performance, the National Family Planning Board decided to make their participation in program operations a regular feature (Peng and Preble, 1975, p. 7).

Training of the traditional birth attendants in family planning appears to be the crux of the problem in involving them in the program in some countries. Abundant experience is available in most countries on the appropriate content and methods of such training. Rogers and Solomon have drawn a few generalizations from this accumulated experience. These are: short training sessions interspersed with tea breaks, field trips and demonstrations; periodical and sustained refresher training integrated with supervision; maximum opportunities for trainee participation such as role playing; and highly visualized training (op. cit., pp. 87-91).

However, in some other countries, the problem of involving these traditional birth attendants in family planning programs--for communications and/or service--appears to be rooted more in economic and administrative considerations rather than in the want of expertise in training them. Therefore, other ways have to be found to involve them in the program. In view of their being important points in the community grapevine, their passive endorsement of the program, if not their active participation in it as communicators, would be essential for rural women to accept and practice family planning. Referring again to Rogers and Solomon, these authors, after reviewing observations in Pakistan, Indonesia, and Malaysia, have concluded that the traditional birth attendants would be particularly useful in reaching women from rural, lower income,
illiterate groups who generally are the least receptive but who are those that most need advice and service (op. cit., pp. 83-84).

Social Work

Social workers--both voluntary and professional--have been associated with family planning program activities, the former mainly during the voluntary organization days and the latter in official programs. Because of their proficiency in social case work, social group work, and community organization and because of the wide range of programs they engage themselves in--family and child welfare, youth, welfare of the handicapped, labor welfare, medical and psychiatric social work, and others--they have both the competence and the opportunities to educate people in family planning in relation to individual, family, and community well being. Armaity Desai, in presenting a philosophical framework on the interrelationship between family planning and social welfare, affirmed that "... social welfare has much to contribute to national development programmes, to reinforce and strengthen the rights of individuals to attain a better quality of life, and hence, to policies and programmes of population and family planning" (1975, p. 13).

Perhaps, it was because of such a perception of social work and a recognition of its potentials that the Government of India, as early as in the middle fifties, provided for a social worker on the staff of family planning clinics. Subsequently, when the program was expanded to include extension educators, persons with a master's degree in social work were among those who were eligible for recruitment to the position of district extension educators. In 1966, this author had occasion to point out that, "in fact, many of the health educators in the field of family planning (in India) are basically social workers with training in health education ..." (Amritmahal, 1966, p. 50). In subsequent years Pakistan, Iran, and the Philippines, among other countries, have involved the social worker in the family planning program, both in the voluntary and official sectors.

Social workers, time and again, have averred that there is absolutely no conflict between the goals of social work and family planning. Florence Haselkorn, discussing some of the value issues that did (or did not) emerge during the Institute sponsored by the Adelphi University of Social Work in 1968, remarked that the compatibility in the value base of family planning with that of social work was practically a refrain in the papers that were presented
More recently Esther Viloria and Angelina Almanzor summarized the basic tenets that have guided the social workers' approach toward family planning and population as: family planning is a significant component of social development; developmental social welfare provides an appropriate theoretical and structural framework for family planning; family planning is positive family welfare to help fulfill individual and group potentials; and prevention of certain social problems through education for responsible parenthood involves the total family and consequently the community (1975, p. 22).

In spite of such positive attitudes of the profession toward family planning and a recognition of the close interrelationship between the two subject areas, there has been a great deal of variation in the teaching of family planning in the schools of social work. Lydia Rapoport complained of the lack of "high visibility" of family planning in the schools and suggested that this was because "it is not studied as an important part of relevant content." In her own school, she pointed out that during the second year there was just one course on programs and policies in child and family welfare that dealt briefly with the topic with only about ten percent of the students taking that course; what was offered in the first year was recognized as outdated and subsequently discontinued (Rapoport in Haselkorn, 1968, p. 155). Soledad Florendo, referring to the Philippines, stated that "family planning has been mentioned in the (social work) curriculum only as a service to help the poor solve their problems or to counsel unwed mothers." She went on to say that this "remedial and rehabilitative approach reflects the concern of social work with problems of social breakdown rather than with the preventive aspects of social welfare" (1970, p. 13). Referring to the teaching program in another country, Florendo observed that no attempt was made to integrate family planning into the different content areas of the curriculum, but that the subject was presented in one or two lectures as an area of concern (ibid., p. 10).

A faculty member of the School of Social Work of the University of Delhi remarked that, on the Indian scene, to start with, family planning information had been included (not integrated) in the training of medical social workers. This was so, because they were the only persons recruited by the government for positions in the family planning clinics on account of the prevailing medical bias of the program. He went on to say that the reorganized family planning program of 1963, which stressed the community approach more than
the individual approach through clinics, encouraged and facilitated consideration of the subject as a part of the course on community development in the existing curriculum. This allowed instruction on the theoretical and informational aspects of family planning to be strengthened by practical work in the field (Pathak, 1966, p. 54).

In 1970, Florendo suggested that "family planning should be integrated into the various relevant subjects already in the curriculum" and "at the end of the degree course, it should be taught as a specific subject in order to synthesize all the knowledge, attitudes and skills gained by the student from the different subjects" (op. cit., p. 13). Such integration would appear to be the current trend in social work education.

After reviewing some of the needs and problems facing social development programs in Asia, including those of increasing demands for trained manpower in the social welfare field, Almanzor argued for a more versatile worker trained with a curriculum "broad enough and flexible enough" to enable graduates to take in their stride any new role that might devolve on them. She felt that the answer to that lay in the integrated curriculum in Asian schools of social work. She further stated that "in most schools of social work, courses on family and child welfare, family planning, family life education, family responsibilities, responsible parenthood, etc. are, by choice, integrated in the total curriculum and deal more thoroughly with the core areas rather than being offered as special courses" (1975, pp. 13-14). An examination of the 1976-77 syllabi of the College of Social Work of the Institute of Social Service, Nirmala Niketan, Bombay for the bachelor's and master's degrees illustrates the above statement. Different aspects of the composite of "family planning" appear in conjunction with the most appropriate subject areas in the curriculum. A significant feature of the master's degree syllabus from the point of view of this publication is the inclusion of a course on communications per se as an elective paper. Of course interpersonal communications pervades all of the "core" areas of the syllabus.

An important development in social work education has been the pilot program initiated in 1971 by the International Association of Schools of Social Work (IASSW) in 20 schools in developing countries around the world (out of which ten are in Asia), "to give special attention over a five-year period for preparation of social workers for population and family planning responsibilities." A major purpose
of the project was to stimulate curriculum change in order to bring social work education closer to national conditions and problems and relate it to achieving national development goals. This involved a critical review of the course content, fieldwork placements, materials of instruction, methods of teaching, and special programs for continuing education or in-service training, with a view to introducing or strengthening population and family planning content. All this has resulted in a trend toward "indigenous curriculum development with family planning as an important emphasis" in the Asian schools. It has been claimed that "within the broad context of social development, human rights, and family welfare, family planning has found its place in social work education . . . " (Viloria and Almanzor, op. cit., p. 22).

Describing the progress of the project, the same authors have reported a redefinition of educational objectives in several schools and the introduction of "integrating seminars or elective papers" to give special emphasis to population and family planning content. A number of highly innovative field training programs, and rural demonstration projects have been mentioned. Unstructured field placement in slums and deprived communities gave students an opportunity to work closely with people and to inform and educate them as a part of a "multifaceted approach" to social development. Faculty training seminars were organized in five countries to stimulate interdisciplinary communications and cooperation with the hope of achieving a multidisciplinary approach to tackling family planning problems. Research has been an important element in the project and students at the postgraduate level are encouraged to work in family planning for preparing the thesis (ibid., p. 22). The project was scheduled for evaluation in 1976.

TRAINING OF PERSONNEL FOR INTEGRATED FACE-TO-FACE AND MASS COMMUNICATIONS

Within limits of information available to the author, the foregoing has attempted to provide some examples of the development of training approaches and activities in countries which started programs at different points in time during the last quarter of a century. The examples try to illustrate how the countries moved from one stage to another in organization and operations of the communications component and therefore how training changed in terms of jobs to be
performed, the knowledge to be conveyed, and the skills to be
developed for the performance of those jobs. Organization for
training activities has been mentioned as well. These examples
also tend to reflect lessons learned by the countries first from their
own successes and failures and subsequently from the experience of
relatively successful programs elsewhere, by advancements in the
fields of communications and education and by efforts of training
programs of international agencies and institutions. However, the
review largely represents training experience in face-to-face
approaches and, in some cases, the close connection with health
education and its methods, since documentation on this aspect is
relatively more abundant and easily available. But when one has to
deal with training in integrated communications, or with training for
mass media practitioners, or training in communications for inte-
grated development which represent the current needs of family
planning communications, one can only be guided by the limited pub-
lished material available.

The Carolina Population
Center International Workshops

There are a few examples--national and international--of
training for an integrated communications program blending face-
to-face approaches and mass communications. One of the earliest
international efforts was the international workshop on the commu-
ication aspects of family planning programs organized in Bangkok,
Thailand in 1968 by the Carolina Population Center (CPC) of the
University of North Carolina and the Center for Population and Social
Research of the University of Medical Sciences, Bangkok and sup-
ported by the United States Agency for International Development
(USAID) and the Population Council. With the exception of Ghana,
all the other countries represented were from Asia (Blake, 1969).
The CPC followed this workshop up with another international work-
shop in Teheran, Iran in 1970 catering mainly to countries of the
Middle East and North Africa, the Philippines being the exception.
This was organized by the Family Planning Division of the Ministry
of Health of His Imperial Majesty's Government and financed by the
Ford Foundation (Blake, 1971).

The main purpose of both workshops was to assist each
participating country team to prepare a work plan for information
and education activities related to population programs. Participants
were government personnel or representatives of national family
planning associations and included doctors, paramedical personnel, health educators, publicity or information officers, administrators, and others. Up to a point, the organization of the two workshops was similar, consisting of presentations on the different aspects of the population problem and the communications support needed for family planning programs, followed by working sessions to prepare work plans for a communications program. Profiting from the experience of the Bangkok workshop, the organizers provided much more time for work sessions in the Teheran meeting and included two simulation exercises. Detached from the constraints of any national inhibitions and limitations, participants in multinational groups and with the assistance of a resource person were able to develop imaginative work plans for two very different hypothetical countries, Arcadia and Valhalla. In various ways Arcadia and Valhalla reflected conditions prevailing in one country or another of the region, and so the experience gained in these simulation exercises was not entirely in the abstract (Blake, 1971, pp. 7-9, pp. 56-103).

Fortified by these exercises, participants were able to apply themselves more objectively to their own specific country situations (data being available in a questionnaire that they had completed prior to their arrival in Teheran) and develop well thought out, systematic, step-by-step plans for an information and education program for family planning. These plans included: objectives, strategy, priority audience, messages, media, personnel, training, and monthly work plans. One of the countries identified six different stages of the program and developed annual and monthly work plans for each stage. The plans were comprehensive and included utilization of interpersonal communications and a variety of media (ibid., 1971, pp. 104-157).

The two reports do not indicate that any traditional evaluation was carried out. But a review of two of the four work plans included in the report cannot but convey the impression of an exceedingly meticulous and practical exercise. Since this was the purpose of the workshop, it would appear that it really achieved the objective and was thus a success.
Institute of Mass Communication Workshops,  
University of the Philippines

The University of the Philippines Institute of Mass Communication (UP/IMC) as its contribution to the national family planning program has offered a series of training courses in the form of seminars and workshops. Among the four workshops planned for 1973, one was for information and training personnel of family planning agencies. The three objectives of the workshop were to develop a common understanding of the family planning communications process for adults, further to develop skills in planning adult training and information programs in the field, and to improve skills in preparing and using communications material. Among the 25 participants who attended the five-day seminar were 12 officials of the Philippines Commission on Population (POPCOM) who were under training prior to being assigned to the newly created regional offices of POPCOM for doing information, training, and administrative work; and 13 others were from private and public agencies that were concerned with training for information work.

Planned in two phases, the first phase was devoted to presenting principles of interpersonal and mass communications and research findings on communications strategies which could be used in the field. The practical phase was for group and individual projects to develop information material for print media, radio and television, and audiovisuals. Theoretical presentations included: the communication process—social and cultural determinants of communication effectiveness; perception and communication; utilization of research findings in communication and adoption of family planning; essential elements in planning and implementing family planning information campaigns; an overview of family planning communications material—print, radio and television; and the role of audio-visual methods and material in learning. These were presented in the form of lecture-discussions and a simulation game during the first two days; this was followed by practical work for the next two days and a half. Teaching staff was drawn from UP/IMC faculty, including two international consultants (UP/IMC, 1973, pp. 28-36).
Evaluation of the workshop indicated that while it was successful in helping the participants to understand the different elements of the communications process, it did not measure up to the same degree in impressing upon all of them that communications is a two-way process. This is borne out by some of the responses of the participants: provide more time on communications and not on A-V alone; deal with topics on human relations/integrated approach; and have more role playing on the communications process. Evaluation findings also revealed that it was really effective in improving the skills of the participants in preparing material for print and electronic media and in preparing and using audio-visual aids (ibid., 1973, p. 58). Based on the experience gained in this workshop and in the three seminars that the UP/IMC had conducted (two of these will be discussed later in this tract), some useful and practical suggestions have been made. These include: a list of step-by-step, preparatory activities (ibid., pp. 60-70); guidelines and recommendations for training in family planning communications including teaching methods, documentation, and evaluation; and recommendations for action to ensure the effectiveness of training programs (ibid., pp. 70-76). Although some of these generalizations are related to the Philippine situation, there is enough material in them to be of much wider use.

The Modular Program of the East-West Communication Institute

A very significant contribution to training in integrated communications for family planning at the international level is the modular training program of the East-West Communication Institute (EWCI). In accordance with the United States Congressional mandate to the East-West Center to engage in cooperative study, training, and research, EWCI started (in 1972) two kinds of professional studies for mid-career professionals engaged in population communications. The first one, called participant training, was designed to provide training in the latest family planning communications techniques to middle- and upper-level practitioners; and the second, designated as specialist training, aimed at training communications specialists to serve as advisors to family planning programs. Thirty persons participated in the first program and fifteen in the second.

Experience with these training courses had shown that there was considerable diversity among the participants—their prior education, the jobs that they had to perform, their understanding of
population problems, and that all this was compounded by their differing national, ethnic, and linguistic backgrounds. It had also indicated that there were some common needs: to familiarize themselves with the latest research findings and program results elsewhere; to learn the way compeers in other countries were solving their problems; to assess the validity of some of their innovative ideas with people in similar positions; and, to have material to transfer what had been learned at EWCI to others in their program. Therefore, with a view to relating the course-offering more closely to the needs of the participants, allowing them freedom to decide what they want to learn, making the learning self-instructional, and emphasizing more the problem-solving approach, EWCI decided to alter the pattern of training. This revised program was called the Modular Program of Professional Development in Population and Family Planning Information, Education, and Communication (IEC); and EWCI offered it for the first time in 1974. Three such programs were conducted in 1974 and 1975 with about a hundred participants from over twenty countries (Middleton, 1976, pp. 3-4, pp. 13-14).

A module is described as a self-contained set of inductive learning activities to enable the learner to achieve specific learning objectives. Each module is made up of: specific learner objectives; a self-administered pre-test; a case, example, or a product from an actual IEC program; individual and group activities to draw out IEC principles from the real life product; individual and group exercises to apply these principles; a mechanism for consultation and feedback; and a self-administered post-test. Each module prescribes a set of activities for the participants to perform, which is conducive to self-instruction.

Twelve modules on as many aspects of family planning communications--selected on the basis of a survey of IEC tasks, roles, and problems in 26 countries--were prepared by EWCI staff in collaboration with Asian and American professional development associates of the Institute and other IEC experts and consultants. With a view to increasing the relevance of the modular material to a practicing communicator, the content was evolved by a synthesis of ideas and skills from a variety of sources, with examples and applications from action programs. Alternative ideas and techniques are included in each module to stimulate thinking and an analytical approach, as well as to underline the fact that there is no universal answer to a problem. Since each of the modules is a relatively
independent entity, no sequencing of topics is required and participants were allowed to choose those which they thought would be of most benefit to them. Activities stipulated by the module include reading, thinking, completing exercises, individual and group assignments, participating in group discussions, and experiential learning methods—all learner-centered exercises are designed to promote exchange of ideas and critical evaluation. The staff assumes the role of a learning manager rather than that of the traditional teacher. A module manager's guide was prepared for each module. Field study in Asia, following the program in Honolulu, was an optional activity (Middleton, 1974, appendix I, and 1976, pp. 16-20).

The first modular program was carefully evaluated (Qureshi, 1974). An overall evaluation was carried out of each of the 12 modules based on a five-point scale with five as "outstanding," four as "above average" and 3 as "average." Participants' rating gave a mean of between 4.00 and 4.13 for four modules—Clinic Education, Low-cost Communication Technology, People and Population, and Planning Communication for Family Planning—and a range from 3.22 to 3.97 for the others. The lowest rating (3.22) was for the module on the Role of Communication in Economic and Social Development and the highest (4.13) for People and Population. An interesting module was the one on Helping People Learn: A Module for Trainers; while it earned a mean rating of 3.24, the standard deviation was as high as 1.30. Indicators used in evaluating the modules included: a general evaluation, language, time required; exercise, workbook, using the module, module manager, resource persons, resource person involvement, and extent to which the objectives were achieved.

One year later follow-up interviews were conducted with 18 of the 36 participants (in four countries) of the first modular program (Snyder, 1975, pp. 1-8). A significant remark from a Philippine participant was that "... adequate out-of-country training is unrealistic" and that "a number of varied applications of the modular and other programs could be tested and adapted here because the capacity of the personnel is adequate." Referring to the difficulties with the English language while on field study in Taiwan, she observed that "... therefore out-of-country training sessions—or even bringing in outsiders to train—is slow moving. It would seem, however, that the cadre of trained personnel could be assisted in putting together units and modules to further the
effectiveness of communication programs." In the report, Snyder describes the salient points of each interview and concludes by presenting a consolidated account of the participants' comments on each module. By and large, they are positive with some suggestions for further improvement (ibid., parts II & III).

Evaluation information has primarily been used to revise and improve the various modules. As of 1977, modules were being published in second and third revised versions.

In keeping with the original plan and encouraged by evaluation findings and suggestions during the follow-up interviews, EWCI has moved to what is called the "collaborative" phase. Collaborative projects have been established in Korea, Malaysia, the Philippines, Taiwan, Indonesia, Thailand, Nepal, and Turkey for the adaptation, translation, and utilization of the EWCI modules; in the Philippines new modules are being developed to meet local needs for population education teacher training (Ulgado, 1975, p. 1).

TRAINING OF MASS MEDIA PERSONNEL

The Thai Seminar

Lyle Saunders' comments upon the participation in the Teheran workshop in 1971 stated that while the great majority of the participants were professors, doctors, health educators, administrators and social scientists, there was only one "full-time, professionally trained communications man who is working in family planning." He went on to say: "On the mass media side, experienced professionals are exceedingly rare in family planning" (Saunders in Blake, 1971, p. 26). It is true that documented experience on the training of mass media specialists or practitioners has been few and far between, and much of it has been in the last few years.

Subsequent to the 1967 Simla (India) workshop for personnel of the AIR, documentation on which was not available, a major event in this field appears to be the three-day Chiengmai (Thailand) population seminar for representatives of the press, radio, and television in 1969. This has been well documented, including its genesis, planning, organization, conduct, and post-seminar results (Rosenfield and Dephanom, 1970, pp. 15-19). The objectives were to inform the participants about various aspects of the population
problem in Thailand and its effects on the Thai people, and about family planning program activities, such as they were, in the pre-government policy days, and to develop a better understanding on the part of the press of the methods of contraception in use. It was hoped that with this exposure, the communications media personnel would have a better understanding of the issues when writing or speaking about population and a national population policy and would present factual reports.

In all, 70 representatives of the press, radio, and television participated in the seminar—a number which was much greater than what the organizers had planned for and a little too unwieldy for the methods used. But, because of the organizers' desire to stimulate maximum participation among the members, they decided to continue with the original plan of four keynote addresses, five panel forums of 90 minutes each, workshop and discussion sessions, and one field visit. Since keynote speakers and panel members were distinguished, important, highly respected, and knowledgeable persons, they endowed the seminar with much prestige; they included the Minister for Education, the Deputy Minister for Health, the Governor of the Bank of Thailand, the publisher of an important Thai daily, university deans and professors, and senior government officials. Subjects covered in the addresses and discussions included: an overview of the population problem; social and educational implications; health implications; economic, agricultural, and land implications; methods of contraception; and population research and activities in Thailand.

The objectives of the seminar appear to have been achieved. Immediately after the seminar there was an increase in the number of articles based on the subjects discussed at the seminar; addresses of some of the prominent speakers were reproduced in detail. Comparing the coverage of population-related matters in two periods—three months immediately before and after the seminar—Allan Rosenfield and M. Dephanom report an 80 percent increase in the second phase. Also a majority of those who had attended the seminar wrote generally favorable articles. However, they were not always able to convince their peers who had not had that experience. The organizers felt that the seminar met a felt need.
Institute of Mass Communication Seminars,
University of the Philippines

The University of the Philippines Institute of Mass Communication organized in 1973 two one-day orientation seminars for print and broadcast media personnel. Objectives of these seminars were: to increase participants' knowledge of the population problem and the concept and the need for family planning; to develop a better understanding of their role in the family planning program; to strengthen their commitment to support the national family planning program; and to help in the dissemination of family planning information through their respective areas of influence. Both seminars were originally planned on a similar pattern; however, the one for broadcast media personnel was improved upon by the incorporation into the program of a work group session which had been suggested by earlier seminars and which gave the participants an opportunity to discuss specific problems in disseminating family planning information through the broadcast medium and to make recommendations (UP/IMC, 1973, pp. 1-5, p. 21, p. 24).

The print media seminar attracted 25 participants of whom eight were from the provincial press; four were editor/publishers, five held editorial positions, and the rest were editorial writers, researchers, staff writers, and section editors. Some of them occupied important decision-making positions in their agencies and so could exert great influence upon their readers. Of the 28 who participated in the broadcast media seminar, 16 were involved in policy making and comprised program directors, news editors, producers, and station managers; the rest were script writers, television news writers, and newscasters who influence the content and style of radio and television programs. The impact of population growth on the individual, the family and the nation; and the national family planning program, and the contraceptive methods in use, were presented as background information to both groups through lecture discussions. The agenda for the first group concluded with a presentation and discussion on the role of print media in family planning. In the case of the broadcast media group, separate presentations were made on the roles of radio and television in family planning programs; this was followed by the work group
session. All the speakers were experts in the field, exceedingly knowledgeable, held important positions in the country, and, except in the case of one person, were Philippine nationals (UP/IMC, 1973, pp. 4-24).

Evaluation of these two seminars and another one for religious leaders have been presented together in the report cited above. Although their impact on increasing the knowledge of the participants with regard to government and private family planning agencies or about family planning methods was not marked, the seminars were more successful in changing their attitudes toward family planning. Among the suggestions made by the participants to improve the seminars were: increase the length; allot more time for group discussion; distribute seminar material in advance; include field trips; use more informal approaches; and, do a follow-up (UP/IMC, 1973, pp. 25-27).

UNESCO Seminars

Between 1974 and 1975, the UNESCO Regional office for Education in Asia to begin with, and later the UNESCO Regional Communication Unit (Family Planning), with financial support from the UNFPA and in cooperation with the concerned country governments and local institutions, conducted seminars for representatives of mass media in six countries: Thailand, Sri Lanka, the Philippines, Malaysia, Korea, and Bangladesh. Seminars in Bangladesh and Sri Lanka were organized by the Ministry of Information and Broadcasting, the one in Thailand by the Institute for Population and Social Research of the Mahidol University, that in Malaysia by the Southeast Asian Press Seminar and the National Family Planning Board, and the one in the Philippines by the Press Foundation of Asia. Except for the one in Korea, reports are available on the other five seminars (UNESCO, 1974, a, b, c, d; and 1975). There was a considerable degree of similarity among the five reported seminars with respect to objectives, organization, participation, methods, and areas covered.

The central objective of all the seminars was to brief the country's press and media practitioners on population matters and issues so that media coverage would become more accurate and sophisticated. With a few exceptions, all resource persons/discussion leaders were national experts drawn from government departments, universities and specialized institutions, and private
organizations. They included specialists pertinent to the agenda of the seminar, such as family planning administrators, physicians, demographers, economists, educationists, social scientists, and communications specialists.

The distribution of media practitioners who participated in the seminars, according to media represented or affiliation to communications organizations is given in Table 1.

Table 1 shows that a variety of media practitioners were involved in the seminars, with the press accounting for over 55 percent and radio and television—both government and private—only about 16 percent. Participants were drawn from both the private and the government sectors; in Sri Lanka, representatives of professional associations also participated.

A review of the population situation in the country, the effects of population growth on economic development and upon the quality of life, the national family planning program, and the role of mass media were common topics in most of the seminars. Human reproduction and contraception were discussed in Bangladesh, Malaysia, and Thailand. Population policy considerations were included in Malaysia, the Philippines, and Thailand. The Philippine group examined family planning from the Catholic point of view and the Bangladesh people from the Islamic point of view. Besides the common areas, the Sri Lanka seminar discussed the role of the press in national development, sociological factors affecting family planning publicity, family planning for labor, role of voluntary organizations, and family planning research. Similarly, the Bangladesh participants discussed legislation on population planning, local leadership, and conflicting strategies for population control.

In the Philippines and Sri Lanka, the discussion leader gave a 30-minute informal talk which was followed by a question-and-answer session; in both cases it was observed that time for discussion was not adequate. In Malaysia and Thailand, however, one-half day was allotted to each topic, the time for the presentation was slightly less, and, after a question-and-answer session, participants and resource persons divided into groups to discuss at length the role of media in presenting population matters to the public, to prepare a brief report, and to make recommendations for presentation at the next plenary session.
<table>
<thead>
<tr>
<th>Media</th>
<th>Thailand</th>
<th>Philippines</th>
<th>Malaysia</th>
<th>Sri Lanka</th>
<th>Bangladesh</th>
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<tr>
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<td>12</td>
<td>10</td>
<td>33</td>
<td>12</td>
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<td>Journalists other than press</td>
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<td>4</td>
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<tr>
<td>(Government)</td>
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<td>4</td>
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<tr>
<td>Television</td>
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<td></td>
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<td>1 (G)</td>
<td>3</td>
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<td></td>
<td>8</td>
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<tr>
<td>Films (Government)</td>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Films (Private)</td>
<td></td>
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<td></td>
<td>4</td>
<td></td>
<td>4</td>
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<tr>
<td>Government ministry/department</td>
<td>2</td>
<td>2</td>
<td></td>
<td></td>
<td>5*</td>
<td>9</td>
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<tr>
<td>Writers and Poets' Association</td>
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<tr>
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<tr>
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<td></td>
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<td>5</td>
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<td>19</td>
<td>27</td>
<td>18</td>
<td>55</td>
<td>20</td>
<td>139</td>
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</tbody>
</table>

Note: G: represents government department or corporation
*: includes one each from press information, publications, and research and reference and two from mass communication
Of the five seminars for which documentation is available, four of them, the exception being the one in Bangladesh, have been evaluated. An identical format has been used in all cases and the same person has been responsible for all four exercises. Two different questionnaires were administered before and after the seminar which each participant was required to complete. Both forms contained three sections: a cognitive one dealing with the level of knowledge or degree and extent of knowledge gain; an affective one concerning attitudes and values or the degree and extent of attitudinal change; and a role perception action oriented one measuring the extent to which concepts of media role and function in the area of population/family planning education were enlarged, re-focused, or changed (Johnston, 1974, pp. 36-45).

From an analysis of the pre- and post-questionnaires it would appear in the cognitive area, that knowledge gain was not significant in the Malaysia and Thailand seminars, affected one-fourth of the participants (predominantly male and 90 percent associated with the print media) in Sri Lanka, and was most pronounced in the Philippines. However, in the Thai seminar a change was reported in perspectives which contributed to a better appreciation of the impact of population growth upon socioeconomic indicators. The pre-test brought out some interesting information: in Sri Lanka younger participants displayed better knowledge on a wide range of population matters; female participants in Malaysia and Sri Lanka appeared to have a better knowledge of family type data; press personnel in Malaysia had more accurate knowledge of population matters than those from other media and in Sri Lanka they had a better grasp on census-type data than others; and in Malaysia persons from independent agencies scored better than those from governmental and quasi-governmental agencies.

In the affective area, there was a decided change toward more favorable attitudes in the Philippines, Sri Lanka, and Thailand, whereas in Malaysia a hardening of existing attitudes was observed. It is interesting to note that, in general, participants from all the four seminars displayed an initial favorable consensus on the assets of a small family, but except in the case of Malaysia, appreciation of the repercussions of population growth on socioeconomic development and other national issues was limited and showed variation even within a country. At the conclusion of the seminars, apart from the reinforcement of the initial attitudes toward the advantages of a small family, there was significant change in attitudes toward population
and national issues in Sri Lanka; the shift in Malaysia was not as marked. In assessing the value of the seminar, 64 percent of the participants in the Philippines and a "clear majority" in Sri Lanka mentioned that the seminars had modified their opinions and values.

In the role perception area, there appears to have been a marked shift in all four countries. In the Philippines, starting with the perceived media role as that of creating population awareness, providing information on family planning matters, and persuading people to limit family size, it crystallized into creating awareness of population problems and providing information on family planning services. In Thailand, besides reinforcing the initial perception of the role and function as that of creating awareness, the seminar strengthened the attitudes toward the role of media in family planning programs. In Sri Lanka, with about equal percentages agreeing and disagreeing with the function of media as "persuaders" and "dispensers of information" on family planning methods in the pre-test, participants' perception in general shifted to one of "climate setters" with an exceptionally few persisting in a role going beyond the providing of information on the advantages of the small family. In Malaysia, starting with a surprising 80 percent of respondents agreeing on a three-fold role of the media--"to inform, to create awareness of, and to persuade a people about the way in which population growth affects the national quality of life"--some 95 percent settled on the creation of awareness and provision of information as their sole and basic roles.

At the conclusion of the seminars, by and large, participants in all countries shifted to the need of paying attention to the specific needs of specific target groups, from a position where such a perception did not exist or was not marked. While all the four seminars identified youth as a very important target group to be informed and involved, the Thais mentioned the importance of educating societal leaders; the Filipinos, the media and political decision makers; and the Malaysians, the special needs of rural dwellers. Filipinos and Malaysians in particular stressed the importance of the role of media in helping the people to develop an understanding of the relationship between population growth and national development.

In overall terms, participants in all four seminars found them useful in developing an increased understanding of population issues and problems and of the relevance of population growth to individual and national development and made several recommendations.
to improve the seminars’ usefulness. Among the latter were: a more functional approach by incorporating into the content, field family planning programs with a media component (Malaysia, the Philippines, and Thailand); inclusion of government officials at the national level and media decision makers (Malaysia, the Philippines, and Sri Lanka); opportunities for more frequent meetings among media personnel (Thailand) and for in-depth discussion by extending the duration of the seminar (Malaysia); wider representation of participants (Malaysia and the Philippines) and in the case of Malaysia inclusion of the vernacular press; more opportunities for discussing topics in small groups rather than in plenary sessions, perhaps reflecting the very large number of participants (Sri Lanka); using the local language or offering translation facilities so as to involve better those with limited English language capability (Sri Lanka); and providing specific guidelines for future action (the Philippines) (Johnston in UNESCO, 1974: a. pp. 31-35; b. pp. 37-40; c. pp. 43-46; d. pp. 47-50).

With regard to the seminar (part of the UNESCO series) held in Korea in 1974, a personal communication provides the following information. Organized by Planned Parenthood Federation of Korea (PPFK), it was conducted in Cheju Island—a beautiful resort—and drew about 40 very busy, top-level newspaper editors and radio and television programmers. Participants included editors-in-chief, editors, editorial writers, and radio and television producers and commentators. According to the communication, the seminar "brought about a strong and far-reaching effect towards the better utilization of mass media for the family planning program" (Lee, 1977).

The PPFK Program

According to the same source, PPFK, since its establishment in 1961, has been conducting a series of one-day seminars and meetings for newspapermen, editors of magazines and college newspapers, producers of radio and television programs, film producers, authors, and others; these activities have been stepped up since 1973 when UNFPA started to fund an expanded IEC program. The seminars are designed to provide an opportunity for participants to learn about family planning and to discuss how they can support the national program. Influential media practitioners are invited to the meetings to renew their professional contact with family planning specialists, receive information on and discuss the new developments in the program, and evolve a joint approach for presentation to the public;
meetings are organized separately to cater to the needs of each media or special interest group.

PPFK also involves a few media practitioners in its annual IEC evaluation seminars. Besides providing them with a sense of participation in the program, PPFK feels that this serves as a training experience for the communications specialists along with other professionals and administrators, in reviewing and assessing the performance of their component in furthering the program. Both these approaches have paid handsome dividends by continuously improving the climate for the program and by increasing peoples' knowledge of newer contraceptive methods.

The Japanese Experience

The sustained interest of the Japanese press in population matters has been spectacular. Faced by the tremendous lowering of living standards as the result of a devastating war and recognizing the importance of population problems in the post-war period, the Mainichi Newspapers set up the Population Problems Research Council in 1949. An important activity of this council has been the series of national opinion surveys on family planning that it has conducted at two-year intervals since 1950. An analysis of the first ten surveys was published in a book in 1972 (Yamamoto, 1972). Women's magazines have carried out an incessant information campaign for family planning by publishing articles of a highly technical nature on contraceptive methods (Muramatsu, 1968, pp. 133-134). All this has not been the result of any formal or informal training, but rather the spontaneous efforts of an enlightened press to focus public attention on a national problem and to meet the information needs of the people.

Since 1974, the Family Planning Federation of Japan (FPFJ) has been holding an annual population conference in Tokyo in which mass media practitioners have been involved. As part of the 1974 conference, FPFJ invited editors, editorial writers, and science editors to meet and discuss ways of augmenting mass media support for family planning activities. A Japan Press Population Council was formed which helps to increase the salience of population and family planning in the country by influencing policy-makers, promoting public opinion, and providing contraceptive information (Lee, 1977).
Press Tours

Recently the Association of Southeast Asian Nations (ASEAN) Secretariat in collaboration with the Food and Agricultural Organization of the United Nations (FAO) arranged tours for media personnel of member countries to study family planning program activities in some of the other countries of the Association. Other countries have also organized such tours within the country for their media personnel as a part of their mass media utilization programs. These are considered as informal training activities. By exposure to action programs in the field, by providing them with an opportunity to talk with acceptors and others associated with the program, it is expected that media practitioners will develop better insights into the program and understand peoples' reactions to, attitudes toward, and anxieties and apprehensions concerning the population problem and the way it affects them and their communities. Experience with such tours has shown that they result in better media coverage of the subject. Real life, human interest stories which they were able to collect firsthand from the people became useful material when they wrote or spoke on social themes.

TRAINING OF PERSONNEL IN PRODUCTION OF COMMUNICATIONS MATERIAL

The UNESCO Training Course

The UNESCO regional training course in 1970 in Seoul, Korea was perhaps the first major attempt to involve a group of basically non-media personnel, primarily health educators and the like, in planning, production, and use of mass media for family planning. Comprising 28 participants from 12 Asian countries they were, by their own identification, equally divided between family planners (including medical personnel and administrators) and mass communicators. Among them, there were three administrators of family planning information divisions (government and voluntary organization), three audio-visual specialists, one information officer, one public relations officer, and one each from radio, television, and films.

Although the overall theme was developing an integrated campaign, there was considerable emphasis on production of media material and the preparation of a draft for a manual on the "production
and use of mass media for family planning programs." The family planners set the theme for the integrated campaign and provided a hypothetical country profile. After an outline prepared by the mass communicators was discussed by the entire group and agreed upon, detailed planning and production were carried out by eight joint teams. The strategy of the campaign envisaged providing audio-visual van support to fieldworkers, utilizing all available media, integrating the family planning theme into special interest programs on radio and television, and ensuring coordination. Material produced during the four-week workshop included: a television panel discussion; a radio feature program; a feature article and two editorials; a mimeographed pamphlet; a poster; a campaign symbol; a film script; a pantomime play, and other events to involve people (UNESCO, 1971, pp. 5-7).

The WHO Workshop

The World Health Organization Regional Office for Southeast Asia (WHO-SEARO) organized in 1971 an inter-country workshop on development of health education media with particular reference to family health. Its purpose was to assist member countries in the region to review the development of health education media for family health in their countries and to prepare a tentative plan for production and utilization of media material. The 26 participants from six member countries included health administrators, health educators, extension educators, family planning and general information personnel, mass media specialists, and others.

Prior to the workshop, each country was asked to establish an inter-departmental group to review, on the basis of an outline provided, the utilization of media in family health programs and to prepare a report on present problems and future needs of the country. These reports were discussed in plenary sessions, as well as the use of media in family health and planning a strategy for family health education. There were two sets of groups for the group work sessions—inter-country and own-country. In the former, each group developed guidelines for media usage in family health. The several group reports, after discussion in plenary sessions, were incorporated into a comprehensive document, "Guidelines for the Development of Co-ordinated Use of Media in a Programme of Family Health Education." This document prescribed: the need for a policy
on media usage for family health; establishment of a nucleus organization; collection of information on population characteristics; examination of communication barriers and support factors; setting objectives for the different stages of the program; preparation of a detailed plan of operations; implementation of the plan; training; and evaluation and research. The guidelines were considered useful for preparing tentative country plans to meet media utilization needs in own-country groups. Due to shortage of time, the country plans were in outline form to be amplified subsequently into a more detailed and specific plan (Sehgal, 1971, pp. 1-9, addendum 1).

The Asian Institute for Broadcasting Development Training Course

At the request of the East, South East Asia and Oceania regional office of the IPPF (IPPF-ESEAOR), the Asian Institute for Broadcasting Development (AIBD) organized in 1976 a one-month training course for 16 information, education, or medical officers of national family planning associations from nine member countries. Not intended to turn out radio producers, its objective was "to teach a group of strangers to radio broadcast, certain basic skills, strictly limited in range, which would enable them to collect family planning material both technically acceptable and interesting enough for the professional staff of local broadcasting stations to produce and incorporate into established radio programmes." A second objective was to show the participants how to transmit these skills to other family planning personnel who work with people.

The training course was designed in an eminently practical manner. After preliminary background instruction at AIBD, trainees were divided into four groups of four each for fieldwork. Moving into the community, each group, under the guidance of an instructor, visited homes, talked with people, taped and then edited the interviews, and produced programs for use as broadcast material. These were analyzed and discussed by the entire class. In addition, trainees were required to write short talks and news items and participate in round table discussions. Evaluation of the course indicated that the participants "were now fully capable of preparing and conducting radio field interviews and of operating the associated recording equipment, to a standard sufficiently high for their local stations to accept" (Keating, 1976, p. 5).
The Thai Training Program

The Thai training program described by Lertlak (1973) was designed to develop professional competence in the information and training section of the national family planning program in order to enable the section to provide the needed support for the program. In specific terms, this meant production of instructional material for the training of health personnel in family planning and of motivation-information material for dissemination through mobile units and mass media. Accordingly, the program of work was heavily media-oriented. Of the 15 family planning communicators in a class of 20, five had a bachelor's degree in health education, eight in mass communications, and two had an art background. About half of them had experience in mass media, script writing, or communications research. Again, half of the participants had field experience. Three of them had worked in experimental mobile units and two in planning and production of training software. Faculty was drawn mainly from the national family planning program organization and the Development Support Communication Service (DSCS); guest lecturers from universities and other government offices also participated.

Out of about 18 working days, only three were spent on presenting background information on family planning and communications. The rest of the time was devoted to media workshops: general graphics and exhibition (12 hours); printed matter and newspaper (4 hours); overhead projector and transparencies (16 hours); photography (12 hours); slide and filmstrip (12 hours); tape recorder/synchronizer (12 hours); videotape recorder (12 hours); film (12 hours); and mobile units (12 hours). Practical work also included planning a small family planning campaign and preparing outlines for two television programs (Lertlak, 1973, appendix III).

Evaluation included observation of the trainees' performance in the class and workshops, mutual assessment by the trainees of the software prepared, and written and oral tests. On the final day of the course, evaluation forms were completed by the trainees which sought to elicit their opinion on the course as a whole and on each unit of the course. With regard to the "value of this training in relation to my job," seven rated it as excellent on a five-point qualitative scale and eight as good. Similarly, with regard to each unit of the course when assessed in terms of "content" and "teaching," the ranking by an overwhelming majority was in the areas of "excellent"
and "good." Exceptions were "research and evaluation" and "family planning campaigns" where only about 50 percent rated these units as "good" or "excellent." Some participants felt that the time allotted to some of the different units was "too short." It was most marked with regard to radio and television (nearly 60 percent), videotape (50 percent), and photography (about 40 percent). Three out of 14 respondents felt that the time devoted to research and evaluation was too much (ibid., appendix IX).

TRAINING FOR COMMUNICATIONS
IN INTEGRATED FAMILY PLANNING
AND DEVELOPMENT PROGRAMS

Integration with Rural Development (Kenya)

An example of training for integrated rural development comes from Kenya in the form of a communication workshop organized in 1972 by the Ministry of Cooperatives and Social Services of the Government and the Programmes for Better Family Living (PBFL) of the FAO and supported by UNFPA. It was designed to meet three needs which the government felt were important in order to accelerate rural development: 1) greater integration of rural development services; 2) improvement of the overall communication skills of the fieldworkers; and 3) through informal educational efforts, helping people to appreciate the effects of high population growth upon programs designed to improve their quality of life. There were eight clearly stated objectives to meet these needs. Participants were practicing rural development workers and were drawn from the ministries of cooperatives and social affairs, agriculture, and health, and from the Family Planning Association, the National Christian Council, the Catholic Secretariat, the Freedom from Hunger Organization, and the Flying Doctor Service. Faculty was drawn from the Institute of Adult Studies of the University of Nairobi, the Adult Studies Centre at Kikuyu, the Institute of Africa Studies, the Institute for Development Studies, and the PBFL team (FAO, 1972, pp. 1-3).

With a view to stimulating the participants to contribute from the wealth of their experience of working with people in order to make the workshop more field-based, presentations were kept to a minimum and even these were integrated into discussion sessions. The main emphasis in the workshop was learning through sharing.
experience and knowledge, and through evaluation, rather than by the traditional methods of memorizing. A third of the time was devoted to assignments and reports which fell broadly into three categories: problems of rural families in Kenya; relationship between problems of rural development and population growth and family size; and problems and solutions of rural development services. Although the analyses of rural problems were approached from the sectoral points of view, the exercise gave the participants an opportunity, perhaps for the first time in their careers, to look at the totality of rural development and the interrelationship among the different components of the development program including family planning and the imperative need for and preponderant advantages of an integrated rural extension approach (FAO, 1972, pp. 4-5, pp. 58-62).

These came out clearly in the suggestions made at the end of the workshop: "Population education and family planning information should be regarded as an integral part of the total effort to educate rural families and to provide them with necessary services." With the usual down-to-earth wisdom of fieldworkers, the participants observing that, "the true assessment of the value of the workshop will be found in the effectiveness of the participants' work in the field," stated that the support of the headquarters offices of fieldwork agencies was essential for the concept of integrated training and coordinated planning at the field level. They underlined the point when they said: "The practical evidence of this support will be shown in the degree of flexibility which headquarters allow their field staff in planning and implementing joint approaches to rural development between a variety of agencies" (FAO, 1972, pp. 7-10). Such administrative anomalies in respect of integrated development are not unique of Kenya!

Two other points regarding the workshop need to be mentioned. In their desire to make the workshop a live experience for the participants, the organizers provided them with the draft of a communications handbook "Reaching Rural Families in East Africa" for detailed examination, test, and evaluation. Participants, in the light of their field experience, did carefully review the concepts and methods presented in the book and made suggestions to strengthen it. Later, in 1973, FAO published it as PBFL series No. 1 (Barghouti, 1973). The workshop, expressing the need for greater post-training support to fieldworkers in the form of educational materials which are locally produced and designed to meet specific
local needs, mentioned this handbook as being of "great assistance to field workers" and recommended that it be made available widely in the country and also that efforts be made to ensure that it is used (FAO, 1972, p. 7). If family planning is to become a truly integral part of rural development, such handbooks—which can at once serve as a textbook during the training period and later as a reinforcement to what was learned during training—should be available in every country and, in large countries, in every distinctive region and in every language.

The second point is the discussion by the participants of an integrated educational program using mass media and the interpersonal methods of communications, especially group listening of radio programs. In this process of appreciating the interdependence of the two main facets of communications, the draft of the handbook should have been of much value. In the final version of the book, Shawki Barghouti (1973, pp. 74-79, pp. 107-112) discussed education through mass media, how it can be implemented in the field, and how fieldworkers can help to make centrally produced radio programs more attuned to local needs and conditions.

Workshop on Family Planning and Adult Education

An "essay" in exploring possibilities of integrating family planning with adult education was the Regional Workshop on Adult Education and Family Planning organized by IGCC in collaboration with ESCAP and World Education at Singapore in 1972. Participation comprised one senior operating officer each from the IEC division of the national family planning organization and the major delivery system of adult education from each of IGCC's nine member countries; and six persons from the alternative delivery systems from among four member countries. The workshop set out to learn to what extent family planning learning had been provided in the various channels used in the major adult education programs and alternative delivery systems, to explore their impact, to learn how to incorporate family planning content into the adult education system, and to identify "new" alternative delivery systems for carrying the family planning message.

The workshop, agreeing with a suggestion that both soft-sell and hard-sell (perhaps mass media?) approaches were necessary, observed that the latter could be effective only for a limited duration. Thus, to sustain motivation and practice and to make family planning
a way of life with the people, a soft-shell approach would be essential. Since adult education programs exemplify the person-to-person approach which is necessary for influencing attitudes and arousing and sustaining motivation, they constitute an important channel to bring about behavioral change in the community and help to create the social environment necessary for reinforcing motivation and sustaining behavioral change. These are the basic needs of any long-range family planning program and so they are compelling reasons for a more positive relationship between family planning and adult education and, for that matter, with any agency that seeks to bring about behavioral change among people (IGCC, 1973, pp. 16-17).

After hearing of some of the field activities in the countries represented—the Federal Land Development Authority (FELDA) experience in Malaysia, the inter-barrio and intra-barrio training in the Philippines, the role of the Buddhist monks in the Khmer Republic, the involvement of the wives of armed forces personnel in Indonesia and others—the workshop observed that training is an important element to support program organization, is a continuing process, and has to be reinforced by effective supervision. It recommended integration of family planning content into existing adult education programs, and suggested study tours to countries with demonstrable integrated programs for personnel of those countries where such programs are just beginning.

A very important purpose that this workshop served was that of being a training exercise for the participants. The family planning people were impressed by the potentialities of the adult education program to carry the family planning message, and the adult education people became aware of the imperative need for expanding family planning program efforts and how they could assist in that process. These are borne out in the 21 recommendations that the participants made ranging from sharing the workshop experience with all appropriate persons, through examining the infrastructure of the two programs in their respective countries, to setting up pilot projects integrating family planning content into adult education programs.

The FELDA Program

An example of integrating family planning education and service into an ongoing total development program comes from Malaysia. FELDA was set up by the government for land development and settlement. As of 1973, there were 133 land schemes involving 28,000
settler families or about 200,000 people; by 1975, the end of the second plan period, it was hoped to settle another 22,000 families. Each land scheme is a compact unit with about 400 families in an area of 4,500-5,000 acres and provided with the usual facilities required for community life. Conceived of as an integrated economic and social development program, FELDA's activities, in addition to developing physical resources, stress human development and cover a broad range of community needs such as education, training, health education, home management, nutrition, cultural and recreational activities, and community living. With a view to preserving the economic viability of these communities and preventing settler areas from becoming "rural slums," FELDA, in collaboration with the National Family Planning Board and the Ministry of Health, developed a comprehensive program called the Integrated Family Planning Service (IFPS) and incorporated it into FELDA's established human development program.

Each scheme has a development council which is the highest elected body and which provides for the settlers' involvement and participation. There is a scheme women's institute which brings together the women leaders and concentrates on programs relating to women. These persons are trained for the community duties they have to perform and include areas such as leadership, information, education, basic knowledge on the substantive programs in the community, and family planning. For training men and women at the grass roots level in family planning, FELDA extended the "block system approach" which it has used in other social development programs. This approach consists of grouping settlers into blocks of 20 to form settler discussion groups with an elected settler discussion leader who gets special training to conduct group discussions; the onus for training the people is thus placed on the people themselves. Based on a KAP survey, self-instructional training packages were prepared by several task forces, each unit to serve as content for one discussion session of about one hour and utilizing different methods for adult learning. These training packages cover a wide range of subjects pertinent to improving the quality of family life, including family planning and the relationship between family size and their own resources.

Officials of the scheme play an equally important role in this process of development--both with regard to educating the people and organizing and providing services. While everyone involved in program implementation, starting from the scheme manager, has a
role in the family planning component of the program, the prime responsibility for information and education is carried by social development officers, regional home economics officers, scheme midwives, and settler development assistants; religious leaders provide institutional support. The scheme midwife, in addition to dispensing oral contraceptives, educates and motivates women during clinic sessions and home visiting. Regional home economics officers and settler development assistants use home visits and small group activities for their educational activities. Since these persons already have a background and experience in rural extension, their training in family planning includes: reasons for family planning, implications of population growth, basic anatomy and physiology, contraceptive methods, and religious and cultural attitudes toward family planning (Hashim, 1973, pp. 163-173).

The Philippine Rural Reconstruction Movement—World Education Project on Family Planning and Functional Literacy

The Philippine Rural Reconstruction Movement (PRRM) which was started in 1952 with the goal of helping the people to improve their quality of life offered an integrated program of agriculture, animal husbandry, cooperatives, rural home industries, health, family planning, education, and self-government. The focus of activities was on broadening the vision of the barrio people, so that, by self-help and proper utilization of government facilities they could make their lives more meaningful (Flavier, 1970).

In 1970, PRRM in collaboration with World Education started a project to introduce family planning/population content into the ongoing functional literacy program in order to broaden the scope of both programs and to make them more applicable to the needs of the rural people. With a view to promoting family and community life education programs in relation to problems of livelihood, social and political problems, health and nutrition within the barrio, and to making barrio people aware of the fact that competence to organize and supervise family life education classes is available within the community, the project set up a population education board (PEB) in each barrio. The PEB membership included the barrio council and heads of different associations in the barrio.

Responsibility for the organization of functional literacy classes was vested in the PEB. The community resource developer
(CORD)--a young person, resident of the barrio and selected by the PEB as an employee--was the mobilizer, organizer, and educator of the classes; and the functional education volunteers (FEV)--out-of-school youth from within the barrio, selected by the PEB--were in charge of the working committees of the PEB to coordinate classes for farmers, mothers, and out-of-school youth. Municipal and provincial community resource development committees (CORDCOM), consisting of public and private organizations within the municipality and the province respectively, were organized to support and promote the program and to provide a linkage between the PEB and institutions at higher levels. Municipal CORDCOM members served as trainers, but only at the request of the PEB on the basis of a prepared program.

Each one of these was trained for specific jobs by the project staff, PRRM Training Institute personnel (mainly for assistance in the technical fields), and a group of trainers from private and governmental agencies with special technical knowledge, if and when the latter were requested. By 1973, three leaders from each of 33 barrios were trained in a three days' inter-barrio conference at the PRRM training center which covered the identification of barrio needs and problems, family life education as a means of solving them, program planning, administration and supervision of educational programs, and linkage of institutions and services. This was followed by barrio-level training for other leaders of the barrio who, ultimately, formed the PEB, with the three trained leaders initiating the training and drawing upon project staff, PRRM trainers, and other resources. One year after the initial leaders were trained, 15 of the 33 barrios had carried out this "echo" training.

The CORDs received 12 to 22 days of pre-service training at the PRRM center with field training in barrios where functional literacy classes were being held. The curriculum included: the need for planned functional education for family planning, psychology of adult learning, social approaches and techniques in starting a functional educational class, basic teaching procedures, preparation and use of instructional material, practice teaching, the need for family planning, simple demographic facts, reproduction, and contraception. With a view to improving his or her performance, provision was made for sustained contact, and a two-day refresher training session arranged every year at the PRRM center. The functional education volunteers were trained by the project staff at the PRRM center in a three-day program; the content included social foundations of education, family life education, the challenge of the times, program planning, and the community council.
Literate farmers, mothers, and out-of-school youth were trained within the barrio, the content being determined by the participants themselves in consultation with the PEB and the CORD, but with family planning concepts being integrated into the course with some minor variations to suit the group in question. Illiterate farmers, mothers, and out-of-school youth were also trained in the barrios with a primer, the contents of which included agricultural topics, health and sanitation, community participation, family planning concepts and services, and basic needs of life. The CORD was in charge of these classes, but when required, the PEB requested the services of resource persons identified by the group.

The organizers claim that Filipinos are more interested in acquiring new scientific knowledge related to their activities which will contribute to their socioeconomic development. Therefore, in functional literacy classes more stress was laid on the acquisition of new information or technology, and the development of reading and writing skills assumed a second place. Through a general discussion at the very beginning of a course, the teacher was able to arouse the interest of the group in wanting to know more about the subject; this also helped the group to identify areas of special interest and sometimes resulted in calling upon the services of relevant resource persons. The "lead sentence approach" which stimulates interest and participation of adult learners and which helps to develop reading and writing skills was also used.

Evaluation of the functional literacy classes included a prior survey of the participant's social characteristics and attitudes toward family life planning and an assessment after each session by the CORD of the trainees' difficulties and their reactions to the lesson. The training of the barrio leaders, the CORD, and the FEVs were evaluated by reaction sheets. Meetings with barrio leaders, observation of functional literacy classes, and interviews with leaders, teachers, and students further provided the project staff with information on the progress of the project. Since it has not been possible to obtain an evaluation report of the project, a comment that appeared in the World Education Annual Report of 1971-72 provides an appraisal of the work done. The comment reads: "A PRRM contribution that we believe to be unique is a village literacy council in each barrio. Those men and women, village leaders, secure the space for the class to be held, in many cases recruit the teachers (who are usually young college graduates who have not been able to find jobs), encourage attendance, and in general lend their
support to the entire program. It is an approach that might well be adapted elsewhere" (Nadayag, 1973, pp. 191-211).

Integration with Home Economics

The American Home Economics Association Program. The total well being of the family is a goal of the home economics program. When home economists realized that overpopulation could disrupt and threaten the quality of family and community life, they felt that they should make an effective contribution to educating people for family planning and that their program activities offered a viable channel to carry the family planning message. In November 1971, a group of 50 home economists from 13 developing countries and the United States of America met in Chapel Hill, North Carolina to consider the role of home economists in family planning and stated the following as a preamble to the recommendations of the conference:

"... Home Economists throughout the world are in an incomparable position to play a role in population programs (1) because of the places and ways in which home economists work with people, and (2) because our preparation as home economists uniquely qualifies us to approach family planning in its most comprehensive sense; that is, family planning as a decision-making process ... ."

As a result of this conference and financial support provided by USAID, the American Home Economics Association (AHEA) evolved an international family planning project in 1972. Thus began, from a point at which there was little awareness of the potentials for such integration, a close relationship between family planning and home economics in educational and motivational activities (American Home Economics Association, 1975, p. 1).

The first obvious task of this project was to create awareness among national family planning leaders of the potentials of the home economics channel for family planning education and then to work toward a closer relationship between the two agencies. Therefore country surveys were conducted in and consultation services offered to those countries which agreed to participate in the program. The surveys helped to identify home economics and family planning/population education resources, sought to find out the extent of home economists' awareness and involvement in family planning, and
assessed their interest in incorporating family planning education into their work program. The next stage was to provide training for the teachers who would then prepare the practitioners to undertake the additional responsibility. In depth training lasting four to six weeks, regional or international in character, were organized to prepare leadership personnel who would help in the integration of family planning/population education into the regular work program of home economists. In-country workshops and seminars, initially for trainers and subsequently for others, were conducted by nationals with some assistance from AHEA staff to incorporate family planning/population education content into existing home economics programs in schools, colleges, and extension and community development programs.

There was a dearth of teaching materials, both for training practitioners as well as for use in the community. Production of educational materials within participating countries was encouraged. To facilitate this, a continuing program was initiated to develop, test, and distribute teaching aids and other educational materials. Some of these were prepared by students from developing countries undergoing training. The evaluation and research component of the project involved developing a systematic method of follow-up to determine the extent and effectiveness of family planning information reaching the grass roots level through the home economics channel, and to test and evaluate teaching materials and methods through pilot projects. Activities also included cataloging and evaluating educational materials, textbooks, and curriculum guides in developing countries in order to provide a baseline against which the progress of the project could be measured, and internal project evaluation to serve as guidelines for the future (ibid., pp. 5-30).

Between September 1973 and December 1974 country surveys or consultations involved Afghanistan, Ghana, Jamaica, Nepal, Sierra Leone, and Venezuela. Twenty in-country workshops were conducted either for teachers, or for developing curricula, or for extension; nine of these took place in Thailand—all in extension, four in Korea, three in Sierra Leone, two each in the Philippines and Turkey, and one each in Ghana, Jamaica, Malaysia and Nepal. An in depth training program lasting between five and six weeks was organized for 27 home economists from 16 developing countries studying in the United States through summer workshops at three universities in that country. Prototype materials and resource
publications produced during the period included a packet of teaching materials (a second set), a multimedia kit, and a book of resource papers for curriculum development. A draft teaching kit containing 54 sample lesson plans, and a handbook of teaching strategies for incorporating family planning concepts into home economics were prepared with the assistance of home economists from Jamaica, Sierra Leone, and Thailand (ibid., i-ii).

Prior to this reporting period, consultations or surveys had been conducted in Costa Rica, India, Liberia, Pakistan, and Panama. Planned for surveying or consultations during 1975 and 1976 were Bangladesh, Colombia, Costa Rica, Gambia, Indonesia, Nigeria, El Salvador, and Sri Lanka. In-country training had been conducted in India, Panama, Thailand, and Turkey before September 1973. Afghanistan, Liberia, Nigeria, Pakistan, and Venezuela were the new countries where workshops were to be held in 1975 and 1976. Also scheduled for this period were two regional workshops—one in West Africa for the Francophile countries and the other in Central America. Three summer institutions in 1972 and five in 1973, each of six weeks' duration, had been conducted for home economics students studying in the United States as a part of the in depth training programs. Two workshops for home economists, each of a month's duration, had been organized in February and March of 1973 at the Chinese Center for International Training in Family Planning, Taichung, Taiwan. A total of 48 participants from Chile, Jamaica, the Republic of Korea, Liberia, Malaysia, Panama, Sierra Leone, Thailand, and Turkey attended. The first regional in depth workshop to be organized by a developing country was scheduled for May 1975 and to be conducted by the Philippine Home Economics Association for participants from Afghanistan, Indonesia, Nepal, and Sri Lanka. A workshop in population education and another in the preparation and production of audio-visual teaching materials were also planned (ibid., pp. 5-32).

The AHEA-EWCI Project. The AHEA International Family Planning Project collaborated with the East-West Communication Institute (EWCI) to develop and test a teaching package for use in integrated family planning-home economics educational programs in rural areas. Field tests of materials were carried out in Thailand with the assistance of the Division of Community Development of the Ministry of the Interior. The Project has been described by John Middleton and Antonio Ulgado (1977).
The teaching package was developed by an international group representing home economics, family planning, training, adult education, and extension education around curriculum and content evolved by AHEA and Iowa State University. It is self-contained and designed to stimulate participatory learning; it is simple, based on village problems, and uses low-cost visuals. The materials are directed toward three levels of learning—trainers of extension workers, the fieldworkers, and the villagers. The materials were developed by three working teams: the content team developed the prototype lessons; the training team developed the training package; and the review team provided internal checks and critical analysis of the draft material. The materials were then sent to experts in home economics, family planning, and extension education in several countries and to some international agencies; the materials were revised on the basis of the comments received. The materials were then translated and the whole package tested in rural Thailand over a period of five weeks with the assistance of five Thai community development supervisors functioning as trainers and 18 home economics extension agents as fieldworkers, with eight individuals from the materials development team serving as an expert group.

The package consisted of prototype lessons and a training module. The prototype lessons for use in villages by fieldworkers are central features of the package. These are based on village problems and have integrated family planning-home economics content. They incorporate specific participatory teaching methods and use visual aids. Lessons are standardized in their organization, each containing problems, relevant content, clear objectives, activities to stimulate interest, participatory activities to share information, activities to review and sum up, simple post-lesson evaluation, and a statement of follow-up strategies. Illustrations are provided to help the fieldworker identify activities at the different stages of the lesson and suggestions are included for the appropriate use of the simple audio-visual aids (stick-figure sketches). Although intended as training material for fieldworkers, use of the lessons (after making necessary adaptations) for educating villagers is not precluded.

The training module is directed toward fieldworkers and trainers and has two elements in it. The first one, which is intended to develop skills among fieldworkers for the preparation of lessons, is based on the organization of the prototype lessons. The second element is meant to help the fieldworkers learn how to integrate
the planning and preparation of low cost visual aids with the lesson content. A recipe book with instructions on how to make simple visual aids from locally available material and a clip art book to help fieldworkers with simple art work are provided as handouts. The package was prepared with much attention to simplicity and detail so that it could serve both as material for training fieldworkers and for self-learning by the trainers.

There were two major but interrelated elements in the field tests and these have been analyzed separately. The first one was to assess the training module; and the second, the prototype lessons. With regard to the first, answers were sought to how well the fieldworkers learned to prepare lessons similar to those in the package, their ability to use a relatively new method of teaching, and to the trainers' proficiency in handling the material. Information from questionnaires completed by trainers and trainees and responses to structured and unstructured interviews to gain insight into the group process were pooled to examine the training process and results.

The tests showed that fieldworkers could prepare and teach lessons on the pattern of those contained in the package. With regard to preparing lessons, assessments were carried out independently by two panels (each consisting of one Thai trainer and one from the expert group) using a structured rating form. Each of the 18 participant-developed lessons was rated on a five-point scale for each of 13 criteria, yielding a range of average total scores from 2.69 to 4.50 with only one lesson below the mid-point of 3.0. An impressionistic assessment was that the lesson plans reflected considerable mastery of content with particular emphasis on the integration of family planning and home economics contents, and also that learning activities chosen were participatory in nature, being adapted from those contained in the prototype lessons.

In terms of teaching with the help of the new materials—both the prototype lessons and those prepared by the trainees—the fieldworkers' performance was considered positive. Using a 5-point scale for 13 criteria, the average score for prototype lessons was 3.85 and that for trainee-developed ones was 4.12. They were able to stimulate considerable discussion among the villagers on family planning and felt comfortable in using visuals and games which were new to some of them. Due to certain constraints, the fieldworkers were not able to conduct post-training evaluation; therefore, it was not possible to obtain an assessment of the ability of an unsupervised
fieldworker to use simple evaluation procedures. Some of the fieldworkers had difficulties in answering questions on family planning. This indicated that the family planning content of the training package had to be strengthened or that the fieldworker should obtain the assistance of a family planning or health worker (ibid., pp. 10-20).

The second aspect of the evaluation of the training module concerned the proficiency of the Thai trainers in handling the training material; this too showed encouraging results. That the trainees performed well was perhaps the best evidence of the trainers' ability to utilize the materials effectively. In terms of the findings, it appeared that some revisions in the sequencing of training activities were required. Some restructuring and more clarification on training units dealing with problem identification, content specification, and setting objectives were needed. Practice in developing skills in areas such as informal approaches to teaching, identifying and solving problems through the group process, and decision making needed to be strengthened and related to the cultural setting. A simpler and more accurate translation of the materials enriched by using the nuances of the language was recommended (ibid., pp. 19-20).

The prototype lessons were tested at the village level to evaluate the instructional procedures recommended for them, to improve the lessons so that they could be used as prototypes on a wider scene, and to assess the teaching performance of fieldworkers to provide additional information for improving the training package. Of the total of seventeen prototype lessons, time permitted village testing of eight. These eight were selected so as to provide an assessment of the major kinds of teaching strategies that were advocated: use of visuals under different patterns, use of simple games, and use of various group processes. Each selected lesson was tested twice in different villages and in addition, each teacher taught one lesson developed by him or her; there were four control villages (ibid., pp. 21-26).

The tests revealed that there were learning gains, though in differing degrees, in all but one of the lessons. The poor results for this lesson may have occurred because the nature of the subject was affected by cultural constraints. In spite of indications of need for some changes in structuring and content of the lessons, the investigators concluded that the lessons were received well by the villagers, that the teaching strategies were acceptable to the teachers and villagers alike, that the lessons stimulated significant discussions,
and that most of the learning objectives were achieved. The results of the tests led to the revision and strengthening of the materials and to developing a new prototype lesson to meet a need that had surfaced (ibid., pp. 26-32).

Before using the materials on a wide scale in different cultures, the investigators recommend that the same sequence of training and testing should be carried out with these materials so as to develop a band of persons trained in handling them, to obtain an assessment of their applicability, and to evolve new lessons suitable for that setting (ibid., pp. 32-33).

The Institute of Mass Communication Seminar-Workshop for Rural Development Agencies

The University of the Philippines Institute of Mass Communication (UP/IMC) in September 1973 organized a seminar-workshop on family planning for personnel involved in training in the rural development agencies of the country. Those that participated included the departments of education and culture, health, local government and community development, and social welfare; the bureaus of agricultural extension training (extension home economists), animal industry, and fisheries; and the Agrarian Reform Education Service, the Asian Labour Education Center, and the National Media Production Center. As a part of the seminar, representatives of some of these agencies prepared what were called a "proposed training design" for personnel of that agency.

Generally, these were comprehensive and intensive and the family planning content was interwoven into appropriate subject areas of their specialty. In most cases the design included: rationale, general and specific objectives, participation, duration, course content, evaluation, and faculty. In some cases, the course content was spelled out in detail to include job functions, specific tasks, objectives, content, methods and material, and time. Naturally, these varied with the agency, the content being related to the functions of the agency with a consequent variation in duration and setting (UP/IMC-UNESCO-UNFPA, 1973 (a), pp. 127-166).

Integration with Workers' Education

A major endeavor of the International Labour Organization (ILO) has been to achieve better working and living conditions for
workers in all its member countries. An important element in this effort is the program of workers' education. The headquarters and regional offices of the ILO have done much to stimulate interest of member countries in this program and to assist them to organize and conduct a planned program of educating the worker in the different facets of his or her life. Actual educational sessions are carried out by trade union education officials who are trained for this purpose by workers education institutions, generally, within the country.

The Sixth Asian Regional Conference of the ILO (1968) declared that, "there can be no lasting solution of employment problems in most Asian countries unless the current high rate of population growth is reduced." Thereupon, the ILO Regional Office for Asia developed the Asian Labour and Population Programme for providing assistance to member countries to educate and motivate workers. Since the workers' education program encompasses all aspects of a worker's life, it was decided that education for family planning should be integrated into the ongoing program. To enable implementation of the new program, the Asian Labour and Population Team was formed with UNFPA assistance. As of March 1975 the program had organized eight regional and sub-regional seminars, 30 national seminars, and 35 workshops and courses, and initiated 12 population projects in five countries related to different aspects of population education of the workers (International Labour Office, 1975 [December], pp. 12-28).

It has been the endeavor of the ILO and its national affiliates to make a reality of this conceptual integration. At the Asian Regional Workshop in Population Education for Trade Union Education Officers and Teaching Staff of Workers Education Institutions in Asia (1974), after reviewing the Aurangabad and Poona experiments of the Asian Trade Union College which were cited as "examples of a trade union grass-root level operation," participants concluded that, "family planning should be taught as a part of the total family planning welfare and cannot be taken in isolation." Noting that family planning education had been integrated into the workers' education program in some countries of the region, especially in Bangladesh and the Philippines, the workshop affirmed that, "the new way of communicating family planning is not to introduce the concept per se, but through other aspects of development such as agriculture, land reform, out-of-school programme and others" (International Labour Office, 1975, pp. 9-14). The Workshop also prepared curricula in population education for members,
trade union officials, and rural workers wherein population matters formed an integral part of related aspects of the worker's life (ibid., annexes A 1-3, B 1-3). The several national workshops have carried this concept further and have provided guidelines in respect of translating them into practical programs. An example is the national workshop in the Philippines that was organized in 1975 (Asian Labour Education Center, 1975).

Drawing upon the collective experience of the several workshops and seminars it has organized, the ILO Regional Office for Asia issued in 1974 a manual to assist in the promotion of family planning and its practice among workers and their families. Roles of employers, trade unions, and government agencies have been identified in the manual. Among other things which are included as the specific contributions that employers can make is, "integration of family planning education with other educational activities arranged by them for their employees and employees' families." Discussing the role of the trade unions, the manual states that these should "integrate population and family planning into workers' education and other educational activities undertaken by them" (International Labour Office, 1974, pp. 7, 14). The second volume of the publication describes 12 action studies from seven countries of the region wherein the concept and practice of integration have been illustrated.

REGIONAL CENTERS

The IPPF Regional Training Centre, Singapore

In 1964, the International Planned Parenthood Federation Southeast Asia and Oceania Regional Office (IPPF-SEAOR) established a regional training center in Singapore to train persons from various disciplines at high echelons to administer, train, and promote family planning. Six courses used to be offered a year, each of four weeks' duration (UN/ECAFE, 1972, p. 80). Several of the persons now working in official programs in Southeast Asia and some other countries received their first introduction to family planning through this training center. Although the training courses were not meant solely for communications personnel nor did they deal only with communications, there was considerable emphasis placed on face-to-face communications--both theory and practical work, with appropriate consideration given to mass media. Guest teachers in different aspects of communications used to augment the expertise.
available at the training center. The Regional Training Centre was closed in 1971. Subsequently, IPPF-SEAOR (now IPPF-ESEAOR) has been organizing regional training courses in different member countries on different aspects of family planning.

The Chinese Center for International Training in Family Planning

When the Taiwan program started acquiring the reputation of being a reasonably successful one, officials from other countries which were just launching programs went to Taiwan to observe and study the different program activities. In order to help the Taiwanese authorities to handle this large load of international visitors and students, the Population Council assisted in establishing the Chinese Center for International Training in Family Planning at Taichung, Taiwan in October 1968. It was staffed by a director, an associate director, and three full-time staff; these staff members arranged and coordinated the training of visitors, relying upon senior staff of the Institute of Family Planning (later, the Committee on Family Planning), and others engaged in program activities to do the actual teaching. In the first 15 months, 583 visitors from 30 countries went to Taiwan to study how the program in its several aspects was organized and administered, especially how the fieldworkers were trained and how they worked in the field (Kecny and Cernada, 1970, p. 14).

Gradually, as programs in other countries developed, this general interest in the Taiwan program shifted to specific program areas with special emphasis on the action component; there was also a move from ad hoc orientations to more organized courses. These led to the preparation of more resource materials including programmed instruction manuals, videotapes, eight millimeter films on the fieldworker's activities, and mimeographed descriptions of the fieldworker evaluation scheme (Lee, 1972, p. 148). By 1972, the Center had started offering one- or two-week courses on specific subject areas which included communications, and fieldworker training and supervision. More teaching materials were produced and staff in-service training focused on working situations in other Asian countries and identifying useful aspects of Taiwanese field experience for adaptation to other situations. Increased emphasis was placed on field experience and demonstration of family planning training for military personnel, community organization, population education, and others (Yen, 1973, p. 123).

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In 1972, the Chinese Center played host to the communications workshop of the East-West Communication Institute. Communications material on the local program contributed much to the learning process. In the following year, in cooperation with the East-West Communication Institute, the American Home Economics Association, and the Japanese Organization for International Cooperation in Family Planning, the Center organized three workshops on information, education, and communications and two workshops to help teachers of home economics to incorporate family planning into their curricula (Yen et al., 1974, p. 169). In 1974 there were fewer visitors, but they were specialists and came for specific training with an organized and systematic curriculum. Some of the groups trained included: information and education officers to learn through comparing and exchanging information on operations and evaluation; public health instructors to study the ways of incorporating family planning into their teaching; and provincial-level program administrators to see how education, service, operations and evaluation fitted together in one setting (Watson and Lapham, 1975, p. 241).

Centro Interamericano de Adiestramiento en Communicaciones para Población (CIACOP)

Perhaps the only regional training center for providing training in communications exclusively for family planning is the Centro Interamericano de Adiestramiento en Communicaciones para Población (CIACOP) in San José, Costa Rica. Carlos Cordero, in a proposal for such a regional training center, stated that there was a dearth of communicators for all developmental activities in Latin America, especially so for family planning. Services had grown at a rapid pace in this area, its communications needs were unique, and such a program would need massive inputs to "penetrate into all of the population layers." He recommended establishing a regional training center in Latin America, "for the purpose of preparing, on a practical level, qualified communicators who will take on the task of designing and implementing information programs in support of national family planning programs" (Cordero, 1971, pp. 4, 9). To meet this need the International Planned Parenthood Federation and the Ford Foundation helped to establish CIACOP in 1972. The Centre caters to the needs of all Latin American countries.

The Centre provides month-long training courses in communications for family planning, and in communications for population and development. Originally, these were of a longer duration, but
experience had shown that the longer a course the lower the quality of participants. The training stresses planning and strategy, and provides experience in production. Initially, the candidates for training were mostly from the private sector, but subsequently official program personnel have made up more than fifty percent of all participants in any given course. These are middle to senior-level officials such as administrators, directors of IEC programs, supervisors, and the like. During the five years or so of its existence, CIACOP has trained about 210 persons from 19 countries. The intake of students will be increased in the next few years. CIACOP has also provided training for Latin American population librarians and documentalists (Blanch, 1977).

Follow-up in-country seminars are organized for former graduates. The second such course was given in Asuncion, Paraguay and was attended by participants from Chile, Ecuador, Honduras, Paraguay, Puerto Rico, El Salvador, Uruguay, and Venezuela. The six-day seminar was meant to reinforce what had been learned at CIACOP with regard to dialogical communication, to identify the difficulties encountered in the application of that kind of communication in the field of health and family planning with a view to finding solutions, and to explore the application of dialogical communications to mass media (CIACOP, 1976, p. 29).

Training is carried out exclusively by Latin American personnel. The core staff consists of the director and three associates; each of these represents a specialty and one of them is designated as the director of training. The Centre maintains a list of resource persons, all Latin Americans, who are invited as guest teachers for specific subject areas. Training courses are planned in San Jose and finalized after discussions or correspondence with the guest teachers. Guest teachers arrive a day prior to their session for consultations. Coordination of the presentations of the different specialists is the responsibility of the core staff. Content areas included are: family planning and population concepts; principles of communication; communications as part of the social system; group and interpersonal communications; program planning and strategies; and evaluation (Blanch, op. cit.).

In 1977 UNESCO sponsored a seminar for public opinion leaders such as editors, radio commentators, and journalists in order to discuss their possible roles in support of population and family planning. If found useful, CIACOP will continue it as a regular feature.
The Community and Family Study Center (CFSC) of the University of Chicago, with financial support from USAID, has organized summer workshops annually since 1963. The workshops are designed for professional persons, primarily from developing countries, who are engaged in family planning or population activities and who desire intensive short-term advanced training relevant to their work. The workshops are now organized in four distinct tracks—population education; population communication; family planning/population research and evaluation; and administration and planning of family planning programs. Since inception, these workshops have trained a total of 1,100 persons from 80 countries of Asia, Africa, North America, and Europe.

While the communications aspects were steadily receiving more and more emphasis in the workshops, the establishment of the Communication Laboratory in 1971 enabled CFSC to offer the specialized track in population communications. Between 1971 and 1976 it attracted 157 participants. It is an intensive nine-week experience in the use of media. The two objectives are: to teach principles and give practical experience in the effective use of all media; and to provide practice in the use of both personal contact (counseling and group work) and mass media to deal with specific problems that are of great importance in the participant's own country. Faculty includes the full-time staff of CFSC and specialists in different media from the Chicago area. The 1974 course content included group dynamics, script writing, radio and television, photography and graphics, and film, with communication research and evaluation as an optional additional subject.

An evaluation team appointed by the American Public Health Association and USAID to review the accomplishments of CFSC between 1971 and 1976 brought out three positive aspects of the communication track of the summer workshops. The team noted with satisfaction that the workshop had brought about an apparent change in attitude among the students in respect to the pivotal role played by communications in family planning programs. Students had been impressed by the need for providing adequate information to the public using a variety of media so as to stimulate the people to seek
more information. The importance of using a variety of appeals--economic, social, cultural--to help people decide to practice family planning had been brought home to them. The team recommended that the workshop be continued for at least three more years and be strengthened (Feliciano et al., 1976, pp. 13, 38).

A few suggestions were offered by the team to make the workshop more useful and to overcome some of its weaknesses. One of these stemmed from the observation of some of the students that, while the workshop certainly provided them with technical skills, they would appreciate a little "more solid grounding in theory." The team recommended that more attention be paid to the theoretical aspects of the different media so that a balance may be achieved between principles and the practical aspects. As the duration of the workshop was considered not adequate to cover the large number of media and related subjects for study and to learn how to use media effectively, the team suggested that either the period should be extended to 12 weeks or the number of media considered should be reduced. It called for more stringent conditions of admission to the workshop because the disparity in the background of the students was too wide to facilitate effective learning (ibid., pp. 13-14).

CFSC appears to have accepted these suggestions. In future workshops there will be more selective recruitment of participants to reduce heterogeneity, greater concentration on communications planning and management with less time spent on acquiring media skills, a broadening of scope by including population and family planning content, and more emphasis on group work and counseling. More time will be provided for independent study and individual work so as to facilitate work on problems of concern to the participant in his or her home situation (ibid., p. 67).

University of Chicago Academic Programs

One of the purposes in setting up the Communication Laboratory within CFSC was to conduct academic and scientific work in this field by an intensive study of basic theory, ongoing research, and experimental applications in real-life situations. Such an approach would help to fulfill the mission of CFSC to "work for raising both the professional calibre of those employed as communicators and the educational effectiveness and cultural level of the communications which they plan and produce" (University of Chicago, 1976, p. 1).
Keeping in line with this thinking, CFSC designed and offered in 1971 a study program leading to a master's degree in communication and social development at the University of Chicago. Almost by definition, this was meant for managers and directors of communication programs who would be able to: plan programs; lead a technical team to implement the plan; develop communications campaigns based on the plan; plan and participate in evaluation research; interpret the impact of the communications program upon the audience; and utilize research findings to continuously improve the communications component of the family planning program (Feliciano et al., op. cit., p. 5). Between 1972 and 1976, 29 students from developing countries and six from the United States had obtained the master's degree; during the academic year 1976-77 twelve students were enrolled—eight from developing countries and four from the United States.

Of fifteen months' duration, the program provides a good foundation in the social sciences with a strong emphasis on social psychology and learning theory, and communications research and evaluation; it emphasizes in equal measure person-to-person communications and mass media; and it gives sustained practical experience throughout the period of training both in production and research. The curriculum provides maximum flexibility to meet the needs of individual students; they may select courses offered by different schools on the campus. During the last two quarters, students undergo more advanced and specialized training during which they prepare a thesis and acquire professional experience in communications research and production (University of Chicago, op. cit., pp. 2-4). Faculty includes teachers of the University, staff members of CFSC, and media specialists some of whom hold part-time appointments with CFSC, and others who serve as guest teachers.

The evaluation team referred to in the section on the summer workshop also reviewed the master's degree program. It observed that at least 24 of the graduates are managers or directors of the IEC component of national family planning programs; this means that one of the purposes in setting up the program has been achieved. Among the several strengths of the program that were mentioned by the team, the following are of much import: encouraging the student to take such courses as will be of direct benefit to him upon returning home; methods and techniques used in teaching the basic communication course so as to ensure a firm theoretical base; research-based lectures followed by practical exercises in utilizing research findings.
for solving problems; and the availability of facilities to acquire skills in media production and direction of an IEC unit (Feliciano et al., op. cit., pp. 5-7).

The team expressed concern over the lack of a communications department in the University and the consequent difficulty in attracting outstanding persons with an advanced degree in communications for full-time appointment. Even though media specialists participate in the teaching, it still creates problems of organization and integration of course offerings. In its recommendations, the team gave the pride of place to the constitution forthwith of a communications committee under the divisional M.A. program composed of interested faculty presently teaching communications and allied social sciences and humanities (ibid., p. 38).

The team questioned--with particular reference to Africa and even Asia--an assumption that the demand for IEC managers is declining and therefore CFSC would be moving in the direction of emphasizing the Ph.D. program to strengthen or build up the teaching capability in the developing countries. While agreeing with the view that there is a need for well-trained teachers and reiterating that a secondary objective of CFSC was to assist in their preparation, the team affirmed that "the original objective (of training managers) will continue to guide the program for at least a few more years." It categorically stated that the pursuance of the other objective (that of expanding the Ph.D. program) should not be at the expense of the master's degree program (ibid., pp. 5, 8).

Among other suggestions made by the team to strengthen the program were: inclusion, as an elective, of a course or two on traditional media which, currently, several countries are turning to for support; examining the possibility of allowing students to choose a project related to problems in their home country as the thesis topic. If this is not feasible, at a minimum, each student should include one chapter in his or her thesis indicating how the research project relates to conditions at home and how it can be replicated there. As this latter might pose a problem in advising students, the team called for the immediate implementation of the existing provision for appointing a visiting teacher from a developing country (ibid., p. 8). Implicit in these suggestions is the strengthening of the program by encouraging links between the program in Chicago and the home country of the individual student.
so that the training becomes more attuned to conditions and problems in developing countries.

The Ph.D. program was instituted at the same time as the master’s. The degree is awarded in sociology with specialization in communication research. As of July 1976, three persons from developing countries and two from the United States had obtained the degree. Six Americans and four nationals of developing countries were enrolled as of that date.

The master's degree program in population education and family planning was established in 1974. One student from Ghana qualified in 1976 and one each from Egypt, Ethiopia, Thailand and the United States was enrolled during the academic year 1976-77. Designed to prepare persons for planning, implementation and evaluation of population education programs for underprivileged groups, including those of limited literacy, both within and outside of the formal educational system, the program caters to the needs of three primary groups: individuals seeking employment in population education or family planning training programs; persons already employed in these programs who wish to improve their professional competence; and those who have, or will assume, responsibility for training teachers and other staff members in the population education program as well as in family planning training. Those desirous of engaging themselves in research in population education are advised to enroll in the doctoral program.

Offered jointly by the Department of Education and CFSC, the program extends over five academic quarters or fifteen months. Each student is encouraged, within the framework of the university requirements, to choose such courses available on the campus as would help him in his or her current or anticipated professional responsibilities. The Committee on Population Education, which is an interdisciplinary advisory team, however, views a curriculum as consisting of courses or seminars in: the design and implementation of informal adult education including staff development; demography, family study and family planning; educational measurement, curriculum development and program evaluation; psychology and sociology of human learning; current practices in, and the analysis and synthesis of population education programs; and, special areas in which the student desires to increase his or her knowledge and skills. A thesis based on original research is required of each student (University of Chicago, 1976[a], pp. 1-4).
The evaluation team expressed the view that population education would afford the University of Chicago a more acceptable point of entry into countries without either a population policy or a national or private family planning program. The team, therefore, advised that 'family planning' be deleted from the current title of the graduate program to read just 'graduate training for population education'; also, it wanted it to be made explicit, that, although the program is being offered by the Center of Adult Education "it provides training in both in-school and out-of-school programs for all age groups." Proceeding along the same lines, the team suggested that eligibility for admission into the program should be expanded to include education planners, curriculum planners, teacher trainers, staff of research centers, and selected teachers in high schools, universities and institutions of social work, health education, agricultural extension and others, with a view to stressing the educational aspects of the program (Feliciano, 1976, pp. 8-9).

The evaluation team commended the team approach of the international graduate training program of the Education Department of the University of Chicago in which a country is encouraged to send a small group to study together, each member of the group seeking to specialize in a different area of education. This facilitates frequent discussion within the group of concepts and experience gained by each member and examination of the relationship and application of these to the situation in the home country as well as to the work they will be engaged in upon returning home. The team suggested that a similar approach would be beneficial in and should be extended to the area of population education, especially because of the extremely short supply of academically trained persons in that area in the developing countries. They recommended that more than one person from each country should be trained at any given time so that they could reinforce each other both during training and upon returning home.

The team noted the emphasis placed on student research and the rigorous training in research methods and skills that they receive. It agreed with the director that, for the time being, the program should continue with this and start its own research only after the staff is augmented. Considering further the staff situation, the team suggested that a maximum of seven or eight international students should be allowed to enroll until such time as additional staff is appointed so that they (the international students) may receive the necessary attention and assistance from the director of the program.
The team felt that three courses in population—introduction to population, population and development, and foundations of population communication and education—should be required of all students enrolling in the program. These, accompanied by a recommended course in demography, would be the minimum amount of knowledge required to help the students develop an understanding of the relationship between population and education. Educational planning and/or development should be given special consideration in the seminar on population education until such time as it can be offered as a separate course. Similarly, environmental education should form the subject of a series of talks by guest teachers until a regular faculty member can take over that responsibility (ibid., pp. 9-10).

In its overall recommendations, the team reiterated that there is an extreme shortage of professionally trained persons in population education in most countries. As it was expected that this graduate program would have to train large numbers in the future, the team recommended that "the program should be strengthened in all aspects particularly in staffing and funding" (ibid., p. 38).

The Cornell University Program

Cornell University established an International Population Program (IPP) in 1962 within the graduate field of sociology to provide academic training in social demography and to conduct research nationally and internationally. Students were enrolled for a master's degree, generally, with sociology as a major subject and demography-ecology as a minor, or for a Ph.D., with demography-ecology as the major subject and two minors from an array of subjects. These had to conform to the usual requirements of the University. However, as there was a need in the developing countries for a shortened period of study with more applied training, the University instituted, in 1973, a new degree program called the Master of Professional Studies (International Development). IPP joined with several other applied programs at Cornell in developing this. The program is designed for experienced mid-career practitioners concerned with problems of development. Most of the students enrolled in this program are from developing countries.

Thirty credit hours, out of which six should be devoted to an applied research project, are required to qualify for the degree. Half of the work has to be in the area of concentration--population, regional planning, science and technology policy, or nutrition—and
the other half in one or more areas of analysis—development administration and planning, development economics, development politics, development sociology, or international communications. The unit on international communications includes five courses: intercultural communication, communication in developing nations, comparative mass media, designing extension and continuing education programs, and educational communication. Faculty participating in the teaching includes two associate professors of communication arts assigned to the population area of concentration.

Robert H. Crawford reported in 1972 that the Department of Communication Arts was developing a special program called the Communication Specialists for Population Affairs (COSPA). This specialization was to be within the established professional master's degree program, based on the existing curriculum and faculty and strengthened by the addition of special seminars and fieldwork as needed for population communications. Its purpose was to train specialists with a proper appreciation of the application of communications analysis, methodology, and skills to family planning programs. Field experience for COSPA participants was to be provided in some of the counties of New York state where the Department was working with the state extension system to develop communications for family planning as a part of cooperative extension (Crawford, 1972, p. 6).

The University of the Philippines, Institute of Mass Communication

The University of the Philippines Institute of Mass Communication (UP/IMC) offers both undergraduate and postgraduate degrees in communications. There is much stress on development communications in both programs. Since the inception of the UNESCO-UNFPA family planning project, faculty members have become deeply involved in communications research for family planning. This in turn has led them to encourage postgraduate students to select a problem in family planning for investigation for the required thesis. The Institute has also developed a doctoral program. Recently, it initiated a diploma program in the production and use of communications materials. Although meant primarily for the five ASEAN countries (Indonesia, Malaysia, the Philippines, Singapore, and Thailand), students of other nationalities are admitted. Judged by the limited information available, the program appears to be a well-balanced one, providing the required theoretical background.
to understand the process and the skills needed to prepare, pretest, and produce materials for the media.

A very strong point in the Institute's programs is the close interrelationship among research, development of materials, and training. Research was the basic element in the UNESCO-UNFPA project at the Institute. Its findings led to the preparation of information and motivational materials, and to the development of syllabi. Both the materials and the curricula were subjected to rigorous evaluation, and, this, in turn, led to further investigation. Training was thus a truly dynamic process with the curriculum being constantly improved upon through lessons learned from experience. "Training became a tool for determining research areas for continually improving it (the future) as well as improving training materials used in the process of learning new concepts and skills in communication" (UP/IMC-UNESCO-UNFPA, 1974, pp. 4-5).

Schools of Public Health

In an earlier section reference was made to the special programs organized by some of the American schools of public health to help developing countries strengthen the manpower required for the new service of family planning in the health organization. These programs, although varied, concentrated on family planning/population, health education, and maternal and child health. Schools offering the programs were also those with strong health education and social science faculties and considerable involvement in field research in developing countries which had family planning programs. There have been other programs but the author's information is limited to the undermentioned three schools.

University of California at Berkeley. The School of Public Health at Berkeley was among the first institutions to develop a special program to train persons to work in family planning programs. The public health education component includes theory and research in learning and education, human behavioral change, group dynamics, communications, and community organization and development. Family planning and population problems, maternal and child health, public health social work, and public health administration are other areas of concentration in the special program. Students are awarded either the master of public health degree or the master of science degree.
University of North Carolina at Chapel Hill. The University of North Carolina was another early leader in the field. It established in the middle sixties the Carolina Population Center (CPC), a multi-disciplinary organization. CPC has helped to stimulate, support, and coordinate studies on population dynamics and family planning throughout the University. With a training officer and an educational materials unit within its structure, CPC, in 1970, assisted in developing a master's degree program with specialization in family planning communications through the School of Public Health's Department of Health Education. Communications units were taught by the specialized departments of the university. Although this program is being phased out, courses on administration of information programs, communication research, and media production continue to be offered. CPC has also organized seminars and workshops to strengthen the competence of public health and family planning personnel in different aspects of family planning.

University of Michigan at Ann Arbor. The University of Michigan, in 1965, established the Center for Population Planning as a unit of the School of Public Health, elevating it to a department in 1971. Multidisciplinary in composition, it works with other centers and departments of the university. It participates in program development, research, and teaching. A joint program with the departments of Maternal and Child Health and Health Education leading to the degree of master of public health was organized to meet the special needs of some candidates. Participants are required to take the core curriculum in public health and three other basic courses—foundation of population planning, human reproduction biology, and population problems. A major and a minor are selected from one of three sub-fields of specialization—administrative factors in population planning programs, communications in population planning, and methods of evaluation and research in population planning. Further courses in the sub-field of specialization, to meet the requirement for the degree, are available from a wide offering of university courses. A doctoral program provides opportunities for obtaining further specialization in one of the three sub-fields mentioned in the master's degree program.

TRAINING OF TRAINERS

Training of trainers in family planning has attracted attention for quite some time. Most of the early trainers in the developing
countries were medical persons, many of them with training in public health. Ordinarily, they had received their basic training within the country and some of them had been sent for advanced training in health education in overseas institutions. As the complexity of family planning programs unfolded, other specialists gradually came to be involved in the training of family planning personnel. These persons had much expertise in their fields but not all of them had sufficient association with the family planning program. The situation changed for the better as these disciplines became more and more involved in family planning program operations and research. The specialists then were better able to teach these subjects as applied to the needs of the family planning program rather than as abstract sciences. Overseas training still held a premium for identifying suitable trainers. Although some of them were those who had been nominated by governments or voluntary organizations to participate in special family planning training programs that have been described earlier, there were others who had received advanced degrees in a specialized subject with little or no emphasis on its applied aspects. A further step was taken when some countries started to develop a corps of trainers to staff family planning training centers. These trainers, who were qualified subject specialists, received special training related to the needs of the program.

According to the report of the Indian workshop on training of personnel mentioned earlier, responsibility for training the trainers for the 44 Regional Family Planning Training Centres (RFPTC) was vested in the Central Family Planning Institute (CFPI, 1966, pp. 54-55). A month-long workshop was held in 1964 to develop curricula for different categories of personnel of the extended family planning program. The workshop was attended by health educators, social scientists, medical and nursing personnel, administrators and others already involved in family planning training. At first, CFPI experimented with an 80-working day training course for trainers of the RFPTC. Upon realizing that this would take too long, even to provide the first round of training for the two hundred odd trainers of the 44 training centers, CFPI decided to modify the strategy. It then developed a three-stage program: an orientation program lasting a week mainly to introduce the newly appointed trainers to the family planning program; a thirty working-day training session which would provide some experience in training methods, knowledge of the different aspects of family planning, and field experience; and the original 80 working-day program for in depth training. This step-by-step procedure was adopted to ensure that there would be no
uninitiated persons in the training centers and because the progression in the training sequence would help to reinforce concepts and practices acquired in an earlier stage. In addition, a special training course was offered for the directors of the RFPTCs which concentrated upon administration of training centers.

The 80 working-day course had three very strong points. The first one was that the trainer-trainees were required to develop a curriculum for one category of family planning workers, actually conduct the training course, and evaluate it. Performance was evaluated both by their peers and by the faculty of CFPI. The second point of strength was team training. The staff of a training center consisted of two medical persons (one of whom was the director), a health educator, a social scientist, a statistician, and a public health nurse. All were required to take the course as a team with a view to promoting interdisciplinary interaction and understanding. The third point related to supervised field training. Trainer-trainees were assigned small rural neighborhoods of about fifty families in which, with the guidance of the faculty and field instructors of CFPI, they had to plan, conduct and evaluate a total family planning program; the major component of the field project was community education. The field training brought home the realities of a field situation. This, coupled with their future involvement in the field program of the rural and/or urban practice field attached to their respective training centers, was expected to endow their teaching activities with a rich practical flavor. The importance of such field experience in job-oriented training cannot be sufficiently emphasized. CFPI (now NIFP) has had a multidisciplinary faculty. In addition, it draws upon the vast resources available in the Delhi area for highly specialized expertise not available within its own resources.

For the last few years, the Institute of Public Service of the University of Connecticut has been offering a 13-week course for training trainers for family planning programs as an element of its development administration training program. It provides training in planning, in conducting and evaluating a training course, and in the management of training centers. The program comprises four basic learning modules: a general management core; a family planning unit; a training of trainers unit (where participants learn to adapt, develop and deliver teaching modules); and work experience in clinic and hospital-training programs for family planning personnel. Some of the subject areas included are: PERT, team building, training
techniques, development sociology, communications, and audio-visual methods. Teaching methods include seminars and workshops, case studies, simulation exercises, practice teaching, and field visits. The institution has arrangements with governmental and private agencies and universities within the United States for providing on-the-job training to the participants which lasts about two to three weeks. Faculty members are specialists in their fields, and some of them have had practical experience in family planning programs in Africa, Latin America or Asia. Trainer-trainees who have participated in the program have included specialists from the different disciplines that are involved in family planning programs including communications.

The Indonesian Planned Parenthood Association (IPPA) set up the National Training and Research Centre (NTRC) in 1968 with training of trainers for its provincial training centers as a major responsibility. Subsequently, when, with the assistance of the joint World Bank-UNFPA project, the government vastly expanded its training program and augmented its facilities, NTRC continued to play a very important role by training new trainers and arranging periodic workshops on different aspects of family planning training which served as a refresher experience for trainers. With a view to further strengthening the capability of trainers, and thus the quality of the entire training program, the government instituted a staff development program. This program consisted of sending about ten trainers to the University of Connecticut program and about fifteen to the National Institute of Family Planning in India for an adapted and extended version of its 80 working-day training course. These two groups, along with some staff members trained under the EWCI modular program and those who have studied training programs in other countries, will meet in a workshop and revise the present curriculum for trainers to make it more job- and field-oriented. The government's expectation is that this will facilitate developing a curriculum which is truly Indonesian in personality, strengthened by adaptation to local conditions of successful experiences of other country programs.

Plans for the immediate future envisage the setting up of a National Family Planning Training Centre (NFPTC) which will provide leadership to the 26 provincial and sub-provincial training centers. One of the functions of the NFPTC will be to help the trainers of the peripheral training centers maintain their expertise and efficiency at a high level through initial training and periodic
seminars or workshops and through supervision and a documentation service. The training section of the NFPTC will be headed by a community education specialist and include a mass communications expert and other professionals. Other sections will be those for field service, research, curriculum and instructional development, supervision, documentation services, and for the development of prototypes for teaching aids and communications material.

A wide-ranging training program in family planning in the Philippines, which started in mid-1967 and has been conducted by several institutions in the country, is described by Hernando Abaya (1974, pp. 47-63). Although communications, in greater or lesser measure, was included in the curricula of the different training courses, the author mentioned "the lack of an adequate communication component" as a common weakness of these training programs. This deficiency was expected to be corrected since the Commission on Population, in its efforts to coordinate and strengthen training programs, has evolved standard curricula for different categories of workers into which an appreciable communications component has been incorporated (ibid., pp. 64-65). With a view to facilitating this training, the University of the Philippines Institute of Mass Communication conducted two workshops during 1973—one for information and training personnel of family planning agencies and the other for training officers of nine family planning agencies. The Institute also prepared a simplified guide for lecturers in family planning. In addition to these efforts to strengthen the expertise of trainers of other agencies, the Institute faculty—reference to its involvement in family planning communications research has already been made—participated directly in the teaching program of these institutions thus providing them with technical support of a high order (UP/IMC, 1974, p. 13).

The Asian Institute of Broadcasting Development (AIBD) was established to organize advanced training in broadcasting at the regional level and encourage and assist (even conduct) basic training within each country to meet the growing needs of professional broadcasters to provide support communications for national development. AIBD also produces training materials, is a source of professional advice, and a center for exchange of information. Based on the National Broadcasting Training Centre of Malaysia in Kuala Lumpur, it covers the wide ESCAP region (Balakrishnan, 1976, p. 2). In effect, AIBD trains trainers in broadcasting development for countries of the region needing such assistance. An example is the training
programs which the Institute has conducted for persons involved in the planning and production of rural broadcasting programs in Indonesia. It was hoped that these persons who had received advanced training at AIBD, upon returning home, would be appointed as trainers at the National Training Centre of the Radio Republik Indonesia (RRI) which was established to provide basic training for Indonesian nationals. This is the pattern that AIBD foresees for the future: basic training within the country and training of trainers at AIBD (Lohman, 1976, p. 2).

Some countries have not yet developed their own training programs for trainers. These have been meeting their need of trainers in the communications field through the special programs mentioned earlier; they have also been availing themselves of opportunities offered by regional and international organizations to conduct in-country training programs for middle-level personnel. Usually, the latter programs are organized in collaboration with local institutions. At the same time, these countries have also been strengthening the potential of their teaching and research institutions by encouraging and assisting suitably qualified personnel to participate in specially designed doctoral and master's degree programs of overseas universities or those offered by home universities, eventually to serve as trainers of trainers.
CHAPTER 4

Prospects

The different kinds of experience that have accumulated over the past few years point to four distinct directions in which training for communications in family planning would have to be channeled in the future. These are: consolidation and further refinement of the types of training that have shown promise; greater emphasis on integrated face-to-face and mass communications during training; a vastly augmented training program for mass media practitioners; and, research on in-service and pre-service training of personnel involved in different kinds of integrated programs. One message is clear, and that is: training for communications is going to be a continuing activity in family planning programs. It is now generally recognized that it (training) is an integral part of program development, is not to be treated as a single isolated episode, and needs planned and constant reinforcement.

What are the types of training that will be needed in the future? There is no question but that face-to-face communications has been the bulwark of integrated communications programs. There is adequate evidence from the field to warrant such a statement. The recent debacle at the polls of a political party in a country which laid much stress on population control for many years and which, according to press reports, resorted of late to drastic approaches to obtain the compliance of the people, perhaps, may tend to imbue political leaders and program administrators elsewhere with more caution. This may even go so far as to affect the present level of mass media usage, placing greater reliance on the low profile methods inherent in face-to-face communications. Against this will have to be considered the fact that family planning fieldworkers, because of the numbers in which they have to be deployed to be effective, will cost a great deal of money and will increase the demand for funds for the program. These funds may not always be available in the desired quantum. The Indonesian program, for example, in spite of the fact that fieldworkers played an important role in the success story
on the islands of Java and Bali, did not include this category of personnel in the program organization when it was extended to the other islands. It is reported that this decision is being reconsidered. The answer to this dilemma (if it is one) may be found in integrating family planning with other community programs, using multipurpose workers for a cluster of interrelated programs. While this is likely to increase the acceptability of the workers to the community, it might well dilute the communications effort for family planning!

In spite of some questions on the future directions of programs, one thing is certain; that is, for a long time to come, face-to-face communications—either solely for family planning or in conjunction with one or more development programs—will continue to play an important role in carrying the message of family planning to the people and persuading them to practice it. Mass media will support the efforts of fieldworkers by providing information and leading public discussion on the subject. This will entail pre-service training for new entrants to the cadre of family planning fieldworkers (the attrition rate being quite high in many countries), refresher (in-service) training for existing workers to keep them abreast of developments and changes in program strategy and operations as well as in the area of communications, and retraining—both in communications skills and substantive subject areas—when integration is sought. Experience has shown that when new responsibilities are given to existing workers, resistance on the part of such workers can be expected. Therefore retraining has to be designed with a great deal of dexterity to avoid unfavorable reactions.

For field personnel employed by programs with which integration is to be effected, retraining will involve providing them with information on population and family planning matters, and helping them to see the interrelationship between population growth and the attainment of goals of development programs. The anticipated goal of such training is that these workers will be able to present family planning as an integral component of programs designed to solve community problems. A program for initial training of new multipurpose fieldworkers, when they come into being, will have to be developed on the basis of findings of past studies and of studies yet to be carried out. In those countries which are using or going to use voluntary community health workers for primary health care, training will be needed that will give these persons simple face-to-face
communications skills and also information on population and family planning matters appropriate to their level of comprehension.

So far, training of mass media practitioners has only scratched the surface. But the limited experience gained up to now brings out effectively the imperative need for such training (UNESCO, 1974 and 1975, op. cit.) and its usefulness for the program (Rosenfield and Dephanom, op. cit.). A massive but well-organized training program is absolutely essential. Guidelines for the organization and conduct of training courses for this group of communicators, the orientations that will guide such training, and the content areas that need to be covered have come out of the UNESCO seminars and those of the University of the Philippines Institute of Mass Communication (UP/IMC, 1973, op. cit.).

From a study of the evaluation of these seminars, it would appear that the emphasis should be on helping journalists appreciate the effects of a high population growth rate on national development and on providing them with information on population in relation to socioeconomic indicators. In some cases it may be necessary to wean them from a sense of omnipotence and to underline the role of media as that of creating awareness and conveying information, so that they may concentrate on areas where they can be most effective. Journalists from provincial and small-town newspapers and local broadcasting stations (both governmental and private) should receive as much attention as national agencies and institutions. An important point that has emerged from the available experience is that a single training exposure is not adequate to maintain the interest of mass media practitioners in population matters over a period of time. A continuing effort has to be made to sustain their involvement by providing them periodically with up-to-date information on developments in the program, and by bringing them back for short seminars as frequently as possible.

While training of mass media practitioners would hopefully arouse and sustain an interest among them in population and family planning matters, it cannot be expected that all of them will become such ardent exponents of population issues that they will spend much of their time collecting material from a diversity of sources. They are very busy people and there are a number of areas competing for their attention. Therefore, it would serve a useful purpose if communications personnel working in family planning program were
taught how to prepare materials for use in the press and/or the radio. The media professionals could then adapt and modify these materials either for incorporation into regular programs or for developing special ones. Such training should, in the first place, develop among the trainees an ability to recognize human interest stories in the field--stories that will appeal to the general run of people; secondly, it should provide them with skills in preparing press releases that will attract and hold public attention (not the usual monotonous or terse ones put out by most government departments), in creating well-rounded programs based on taped interviews with people in the community, and in preparing illustrated feature stories related to actual-life happenings.

It is said that not all professional journalists will use material prepared by amateurs or semi-professionals. But in view of the fact that mass media practitioners are pressed for time and may not seek out population materials on their own, and that it is in the interest of the program to get as much media coverage as possible, it would be well worth the effort even if only part of the materials produced by family planning communicators is used by the professionals. Utilization of such material and, for that matter, the extent of media coverage will, of course, depend upon the relationship between the family planning agency and the media. This relationship, as has been stated time and again, can stand improvement in some countries.

The whole area of integration of family planning with other development programs is practically an uncharted ocean. Conceptually, it is laudable and, in the near future, a proposition that has to be faced squarely. Perhaps, it is an inescapable eventuality. However, there are as many interpretations of the word "integration," the process, and its practical aspects as there are proponents of the idea. What is integration? What is its scope? Which programs is family planning to be integrated with? Is it easier and more feasible to integrate family planning with certain development programs than with others? Is it merely grafting family planning onto other ongoing programs to get more acceptors or is population and family planning to be interwoven with all other programs that concern people and communities so that population matters are presented to the people in the context of overall development? If it is the former, how can family planning workers contribute to those programs which will serve as vehicles for conveying their messages? If it is the latter, what is to be the infrastructure?
Who are the "integrated workers"? What population do they operate in? What are their functions? What and how much training should they receive? What is the supervisory hierarchy? These and a score of other questions (some in the realm of policy) will have to be answered before large-scale pilot programs can be launched which, in turn, can provide leads and answers as to the nature and extent of integration and, maybe, even pronounce a decision on its practicability.

Maternal and child health is one of the few major programs with which varying degrees of organizational and functional integration has been attempted with different levels of success. This has been a feature of the Indian program almost from its inception (it has to be admitted that it was more of an adjunct in the very early days and did not receive the high priority that it needed) and also of the Korean program (MCH services had to be strengthened in that country). For some time, it was denigrated by the advocates of a more aggressive approach, who branded it as inadequate and much too slow to produce the desired results; but now it seems to be regaining respectability. The Bangladesh program has been referred to by its chief executive as, "the present MCH-based, community involved, multi-sectorial approach" and has drawn heavily upon the experience of the Comilla project of the early sixties for adopting this strategy (Sattar, 1976, p. 18). The chief of the Indonesian BKKBN has stated, "Today we are less concerned with espousing the cause of integration of MCH and family planning because the goal is already widely accepted. Instead we are striving to improve the capability of the two systems to act in a concerted manner, each reinforcing the efforts of the other. Thus, we feel it is logical that where we offer family planning services, we should also offer maternal and child health care at the same time and through the same facilities and vice versa so that the two systems become one" (Suwardjono, 1976, p. 8).

Time and again it has been averred that the antenatal period is one of education and discussion, and the postpartum period that of decision. Howard Taylor and Bernard Berelson (1971, p. 22) have summarized the advantages of a delivery-based family planning program in the following words: it "deals with a population of proved fertility that is clearly identifiable at a time of high motivation (perhaps the highest), hence accessible to information and education, particularly the women of low parity through a trusted and knowledgeable institutionalized system of care with broad health concerns, with a built-in indirect sphere of influence through word-of-mouth
communication out into the community, with optimal chances of follow-up care and continuing services from the same professional personnel, with healthful consequences for both mother and child..."

(underlining provided by the authors).

The international postpartum program has amply borne out this statement. Gerald Zatuchni (1970, p. 53) reported that in the first two years of the program, 11 percent of the total community target population of the member hospitals had been recruited as acceptors. According to a later report of the Population Council (1974, p. 65) 33 percent of the obstetrical patients in these hospitals had accepted a family planning method. These encouraging results prompted several countries to organize or expand hospital postpartum family planning services as a regular feature of the program after the international study came to an end.

Such institutionalized obstetrical care with varying degrees of sophistication, by and large, is a feature of urban and semi-urban areas in most developing countries. But there has been an assiduous effort in several countries to provide minimal midwifery services in an improvised maternity home, by a trained birth attendant using sterilized equipment and material. Therefore, with a view to extending the advantages of a maternity-centered family planning program into the rural areas, Taylor and Berelson (op. cit., pp. 22-24, 46) formulated a set of proposals to use existing (or strengthened) MCH services to develop a rural field postpartum program. They prescribed six essential conditions which had to be fulfilled for MCH to form a base for family planning education and service: two antepartum contacts; a trained attendant at delivery; at least three postpartum contacts; accessible facilities for hospitalization of referrals; a system of records; and, organized assistance from the village. Three of these have a strong educational component and one requires community involvement. They recommended that pilot studies be carried out to test the validity of the hypothesis, work out details of implementation, and measure cost-effectiveness. Four such studies were started during 1974 and 1975 in Indonesia, Nigeria, the Philippines and Turkey. Coordinated by the Population Council, the Indonesian study was financed by the World Bank-UNFPA project and the other three by UNFPA.

Late in 1975, the Indonesian study was modified to broaden its scope and bring its service objectives into consonance with the health and family planning needs of the people. This would permit
testing newer approaches to recruiting family planning acceptors and to delivering contraceptive services and primary health care by a more efficient utilization of already available fieldworkers (Population Council, 1975, p. 93). According to Suwardjono (op. cit.), "the Mojokerto (Indonesia) project has emerged as the testing ground for experimenting with innovative approaches to the provision of integrated health care and family planning services. Its success will be tried elsewhere in the country, and it is envisioned that the day will come in the not too distant future when the complete integration of health care and family planning service will be achieved." This would appear to be one of the promising trends for the future, especially as the health structure itself is in the process of undergoing dynamic development, accompanied by a wider perspective among health workers, so as to ensure the availability and functioning of primary health care within every rural community.

The Government of Indonesia is contemplating the utilization of existing family planning village and neighborhood networks to extend, at the village level, a simplified version of a more elaborate nutrition program that is in operation at the kecamatan (sub-district with a population of about 45,000) level. Planned as a seven-year package aimed at improving the nutritional status of pregnant and lactating women, infants, and preschool age children, and using that as a channel for furthering the adoption of the small family norm and continued practice of family planning. Specific operational objectives for the first two years include: organization of community education, information and services on family planning nutrition and immunization; production of training, education and communications materials; skill-training, with the help of specially designed training materials, of ten national and forty provincial trainers, 200 field supervisors, 1,200 group leaders, 6,000 field workers, and 60,000 volunteers; incorporation of knowledge and skills pertaining to a nutrition-family planning program into routine governmental and nongovernmental training programs to cover about 31,000 government officials and community leaders; and carrying out applied research relevant to the project and its evaluation (Government of Indonesia, 1977, pp. 1-5).

Documentation on the integration of family planning with other development programs in large-scale action programs has not been available to the author. Perhaps, very few exist. Examples of operational integration that have been reviewed earlier in this publication
are limited either to specially designed studies such as the PRRM-
WE project of incorporating family planning content into functional
literacy classes, or of routine projects in which family planning is
integrated with the overall development of a newly formed community,
with small populations, and in circumstances which may not neces-
sarily be representative of the country as a whole. An example of the
latter is the FELDA program in Malaysia. It has been reported that
rural extension workers are used for family planning communications
in Tunisia. When this program is evaluated, it should yield very use-
ful leads on the question of functional integration of family planning
with rural extension.

Eight years ago a health administrator stressed the impor-
tance of integrating family planning education with community devel-
opment programs because it would permit educational activities to
be carried out in the wider context of social and economic develop-
ment, as well as ensure a more active approach and team-work
(Noordin, 1969, pp. 164-165). Perhaps this kind of thinking prompt-
ed the integration of family planning with the total development of
resettled communities (the FELDA program) in the home country
of that author. But, community development itself, as understood
in the fifties and sixties, has been in the doldrums and so other
approaches have to be tried to institutionalize the concepts of the
small family norm and family planning into the value system of the
community. Already mentioned in this document are the trends in
Indonesia (institutionalization) and the Philippines (the TIDA pro-
gram). Experience of these countries should provide useful infor-
mation on the future directions that family planning might take.

In the light of experience accruing from action programs
and field studies, it can be said with a certain amount of confidence
that family planning can be usefully and effectively integrated--
organizationally and/or functionally--with some of the ongoing pro-
grams. Maternal and child health takes the pride of place among
these; others would be nutrition and home economics, public health,
workers' education, functional literacy, and perhaps rural exten-
sion. The Japanese Organization for International Cooperation in
Family Planning has been promoting the idea of integration with
parasite control. It is supporting field trials in some countries
and recently helped to convene a meeting on the subject. The pos-
sibility of integration with other development programs is still an
open question, requiring more field studies.
In 1972, UNESCO convened an experts meeting on an "Integrated approach to the use of broadcasting and other communication media in family planning and development" in Kuala Lumpur, Malaysia. Emphasizing that family planning is not an isolated activity, it suggested that media approaches to family planning should be seen in the context of development communications as a whole and should bring out family planning's interrelationship with other components of development. The group stated, "Rather than simply urging modern contraceptive methods, family planning communications can be more forceful and persuasive . . . when they reinforce a range of development goals." In terms of strategy, the meeting recommended coordination with programs already in operation, maximum utilization of existing communications infrastructures, and in large countries, the development of localized programs with decentralized media planning. Inclusion of traditional and folk media was suggested.

Two-way communication between development workers and media producers would be mutually beneficial and strengthen the communications program as a whole. With regard to training, the group called for well-defined training programs for media personnel and for family planning and other developmental workers. The training should reflect the wide range of functions carried out by these groups. Seminars, training courses, and practical exercises would help to develop a mutual awareness of approaches and problems and strengthen coordination channels. The group recommended field orientation for media personnel so as to enable them to develop a better frame of reference for the production of materials. Extensive research in the area of family planning and development communications, with particular reference to types of programming which would promote attitudinal and behavioral changes, and the interpretation of research findings in simple language were called for (UNESCO, 1972, pp. 25-28).

The World Population Conference of 1974 brought to the fore the subject of integration of family planning with development. Because of its composition, the Conference pronouncement was almost in the nature of an official endorsement. With a view to examining more closely the issues involved in integration, the ESCAP organized two meetings on the subject—one on organization and the other on training.
The Expert Group on the Organizational Aspects of Integrating Family Planning with Development Programmes, convened by ESCAP, examined the subject largely from the management point of view and made recommendations in conformity with that orientation. The Group described the process of integration as "one in which different specialized activities are linked together in actual interaction." An understanding of the process, in the first place, would help to assess the range of possibilities and then determine the organizational arrangements needed to achieve the desired extent and quality of interaction. Development programs are directed toward meeting basic human needs. At the community level these (needs) cannot become discrete units to suit the structure that has been evolved to meet them. The Group, therefore, felt that a "sensitive identification of human needs and the tailoring of programme(s) to meet those needs" would be necessary. Affirming that human needs are inter-dependent, and in the most general sense all human needs are related to fertility, effective linkages to other specialized services will have to be developed if fertility reduction is desired (UN/ESCAP, 1976, pp. 6-7, 11-12). 9

An organized effort would be required to develop effective linkages among the specialized services provided by official and private agencies. Since these services are organized vertically and agency boundaries are guarded zealously at all levels, developing horizontal linkages at the operational level would require clear and comprehensive directives in respect to responsibility and accountability. These would be possible only when there is strong political commitment at the national level in which case the civil administrative network, which has a great deal of horizontal authority, can be involved. In some ESCAP countries, this network, equipped with the new authority, has already created new linkages between family planning and other specialized activities (ibid., pp. 21-23).

With regard to training people to implement integrated programs, the Expert Group observed that training should be a continuous process; that there is reasonable preference for in-country training; that training should include human relations, group dynamics and attempts to induce commitment on the part of trainees; and that it should aim at providing job satisfaction for trainees. The Group also stated that since linkages are desired, there should be a substantial cross-agency element in the training of personnel, and in the preparation of needed training materials. Very realistically, the Group observed that the training of new entrants would not pose any
problems, whereas the training of existing personnel in the different programs could present certain difficulties (ibid., p. 36).

A subsequent Advisory Group on Training in Relationships between Population and Development stressed that collaboration should be sought among workers at the community level and at the next higher "middle" level, and that this collaboration could be achieved by focusing on short-term training of the latter group. Suggesting that a trial course should be organized in each country by the end of 1977, the Advisory Group recommended that trainees should be drawn from among government supervisors in the fields of agricultural extension, cooperatives, rural credit, livestock and fisheries, health, education, social welfare and maybe from local political and opinion leaders. The Group felt that administrators at the local, county, block or district levels should also be trained to develop in them an understanding of the interrelationship between population and development (ESCAP, 1976a, pp. 1-4).

Topics suggested for emphasis in the course include broad areas covering population problems and policies, fertility, family planning, relationships between population and development and between family planning and development programs, social welfare and development, administrative considerations in service delivery, community organization, IEC, and microplanning (ibid., pp. 5-6). On paper, it seems to be a formidable array of subject matter and sub-units such as "global considerations" or "fertility projections" might be too sophisticated for the supervisor-trainees. It is hoped that during the actual training courses, the level of treatment of the subject matter will be adjusted to the needs and comprehension of the trainees. Perhaps, because these people are already involved in communications work, there is very little emphasis on that area. Hopefully the two units concerned with IEC and community organization will serve to reinforce communications concepts and skills and relate them specifically to the needs of an integrated development program.

While recognizing that there would be variations among the countries in respect to assigning responsibilities for the conduct of such training, the Group emphasized that the training program should be multidisciplinary in character. Universities or other institutions having access to multidisciplinary resources may well be entrusted with the training; demographic centers and rural/community development training institutions, where they exist, were mentioned in
particular. Collaboration between "multi-resource" institutions and operating governmental departments was expected to be conducive to avoiding any departmental resistance. The Group recommended a teacher-training program and encouraged the use of visiting lecturers from the ranks of specialists and program administrators. Evaluation by "neutral agencies acquainted with institutional set-up of rural development and population programmes" was recommended "to obtain an objective assessment of the impact of training on changing attitudes and establishing a new linkage among the concerned agencies." Indicators used should be in line with the needs and organizational structure of each country (ibid., pp. 8-11).

The approach to and organization of these training courses have some similarities to the FAO workshop in Kenya (described in an earlier chapter), but differ in emphasis and evaluation. Whereas the Kenyan workshop concentrated on communications for rural development so as to integrate family planning content with the educational program of the workers, the training courses recommended by the ESCAP Group would, as it were, lay more stress upon the substantive areas of population and development in order to establish horizontal linkages at the working level. Assessment of the value of the training courses would be based upon an evaluation of the performance of the supervisors in the field, and on their capacity to develop horizontal linkages. It would be worth comparing the results of the two. Since these training courses may be the first of their kind in Asia, their evaluation and then that of the field performance of the supervisor-trainees, should yield much valuable information for the future of family planning programs in different countries.

In summary, it should be noted that, although more research is necessary, there exist examples of training for integrated programs, although most represent integration of family planning education with a single development program. Some of them have been described in this publication. Generally, these have been well-designed and carefully evaluated, and lend themselves to replication. They need not be considered as prototypes, but, if any country is interested in developing training programs for integrating family planning with other development programs, these examples can serve as starting points for adaptation, experimentation, refinement and use.
TRAINING FACILITIES

In-Country Training

In order to be able to accomplish the enormous and wide-ranging training tasks that still lie ahead for the communications and other components of family planning program--whatever direction the program may take in the future--a well-organized training system is required. The importance of in-country training has been stressed in many forums. For example, the UNESCO seminar on mass media and family planning stated that, "for the best results, most of this training should be carried out within the trainees' country, or in a country where conditions are similar to those in the trainees' own country" (UNESCO, 1969, p. 9). Many of the countries with active family planning programs have by now developed the potential for training the rank and file of family planning communications personnel within the country, depending upon regional and international training courses and institutions for training trainers and upper-middle and senior level operating personnel.

There has been quite some debate on establishing a training system exclusively for family planning vis-à-vis the utilization of existing training centers of other programs especially those of health. The ESCAP Working Group on Training of Personnel, after discussing reasons for and against separate training centers for family planning, felt that setting up new training centers would be an expensive proposition, existing training centers could "possibly" integrate family planning in existing programs, and noted that in fact some countries were already doing it and were being supported by governmental and nongovernmental agencies (UN/ECAFE, 1972, pp. 11-13). It is rather significant that between then and now, many of the countries represented in that meeting have developed new systems to handle family planning training.

The IPPF Southeast Asia and Oceania Regional Conference in 1971 recommended that, "A National Training Centre, with regional and provincial branches, be established in each country to ensure a uniform standard of training as well as allow decentralised training for various categories of trainees. The first regional
training workshop organized by the Inter-Governmental Coordinating Committee (IGCC) stated, "Training needs in a country could best be met by a National Family Planning Training Centre with a network of regional and local centres" (IGCC, 1973, p. 12).

The present author, in an earlier paper, adduced several reasons for separate training facilities for the family planning program. He felt that if training in family planning was separate from and in addition to the training program of existing institutions, it could well jeopardize the interests of the program for which the training center was originally established. On the other hand, if family planning was just to be added to existing curricula, it ran the risk of getting submerged under other subject matters because of the predilection of the teachers. Because of the existing workload of these institutions, field training in family planning would not get the attention that is required. Such a training program would be able to provide some knowledge on the subject, but would lack field training in program planning and development that is essential for strengthening field performance. He concluded by saying,"With a view to providing systematic training that is directly related to programme operations, to achieving uniformity of content and methods, and constantly to enriching the curricula through lessons learned from field operations and field research, it is considered essential to establish one national and several regional or provincial training centres. Even when the family planning programme is being implemented by several agencies there is adequate justification for specialized family planning training institutions. These will facilitate uniformity of training of personnel with different backgrounds, and will help to eliminate professional biases of the participating agencies" (Amritmahal, 1971, p. 58).

The Government of India, recognizing the enormity of the training load generated by the extended family planning program and the urgency with which personnel had to be trained, decided in 1963 to set up a chain of family planning training centers in the ratio of one to ten million population. These were housed in specially constructed buildings, and had an attached hostel. A minimum staffing pattern was prescribed which included one health educator and four field extension educators. This was in spite of the fact that the country had reasonably well-developed training centers for different categories of health personnel.
The Government of Singapore had been utilizing the facilities offered by the IPPF regional training center in Singapore for training personnel for its national program. When that institution was closed, the government experimented with part-time training without an institutional facility using a series of specialists as guest lecturers and, apparently, without much coordination of presentations. Finding out that this was not conducive to effective training, the government, in 1973, established a new family planning training center properly housed, well equipped and adequately staffed—all for a population of a little over two million.

The Indonesian Planned Parenthood Association set up one national and six provincial family planning training centers between 1968 and 1969; the national program has increased that number fourfold. New buildings have been constructed for fifteen of these and it is expected that the others will have their own buildings in about two years' time. The staff of each center includes a trainer with an information background.

The IPPF has done much to stimulate in-country training in the early days of the program by training key national personnel through regional training courses and sometimes by financing in-country training centers or training activities. Subsequently the UNFPA and the World Bank have assisted governments in developing training facilities within the country, the latter agency going to the extent of providing funds for the construction of buildings to house training centers.

The number of such training centers needed in any country will vary with the population, ethnic and linguistic considerations, and communications. Assuming that there are several training centers, one of them will be a national institution which will provide leadership for training in the country; train trainers for peripheral training centers; train and/or orientate senior program personnel and others whose endorsement of or involvement in the program is considered necessary; organize periodic seminars and workshops for trainers; supervise the peripheral training centers; develop and constantly review curricula; prepare, collect and disseminate training materials; conduct research to improve the quality and content of training; and evaluate training activities. The national institution as well as the peripheral training centers should be staffed by a
multidisciplinary faculty, each faculty member well qualified in his or her field, with some field experience, and trained to be a trainer. (Training of trainers will be dealt with in greater detail later in this chapter.)

These training centers should be housed in modern functional buildings designed to facilitate the efficient conduct of training activities. Essential components of such a building would be one or two classrooms, two to four rooms for group work, an audio-visual workshop, space for a library and for storage of equipment, administrative offices, and a hostel. Equipment for the communications component should include portable tape/cassette recorders, videotape camera and monitor, slide and filmstrip projectors, cine projectors, tools for constructing exhibits, silk screen printing equipment, a still camera and perhaps a movie camera, both with the necessary accessories, and dark room equipment. Attached to the training center should be a field practice area where trainees will undergo field training in program development and where the trainers will work to keep themselves in close touch with the community. Even as training centers utilize hospital or clinic facilities to provide skill training for medical and nursing personnel, so also should they develop special relations with radio and television stations and newspaper offices for communications trainees to acquire or sharpen their skills in mass media usage by actually working in those agencies.

There is no doubt that future developments in programs will call for greater decentralization of training and for more training activities to be carried out right in the community. In terms of logistics it would be well-nigh impossible to train in the training centers the large number of village level workers, community leaders, volunteer workers, and leaders of the various civic groups and others who will be required to participate in the institutionalization process. It would also be unrealistic to train these persons in surroundings and circumstances different from those with which they are familiar and in which they will utilize what they learn during training. Recourse will have to be taken to developing training cells at the lowest administrative level possible or to organizing itinerant training teams. Whatever method may be adopted to take training out into the community, it is essential that those involved in training should have an institutional base near at hand for professional support and consultation. The staff of such training centers would provide initial training to the community-level trainers,
organize periodic refresher courses for them, supervise their work, assist them in planning and conducting training courses, occasionally participate in a training course, and help them to evaluate their work. They would also constantly review the curricula being used and improve these with the findings from their own independent evaluation of the training courses being offered. Without such institutional backing these community-level trainers might become professional waifs, sometimes perpetuating faulty methods of work and outdated knowledge.

One intangible reason for a well-housed, adequately equipped training center needs to be mentioned. This is the question of "image." In the new training strategy in several countries a wide variety of people in different walks of life, government and private, will have to be trained in simple communications skills and in acquiring information on population and family planning. Human frailty being what it is, these persons will be duly impressed by a well-appointed facility; this impression will project the parent program in better perspective and thus increase its salience.

Overseas Training

International agencies--both within the United Nations system and outside--and bilateral agreements between governments have done much to promote international and regional training by providing financial support for organizing regional training courses, establishing special programs in universities and other institutions, offering fellowships for overseas studies both academic and short-term, and developing new specialized institutions. It is the feeling of this author that this immense investment in human development has not always given the expected returns to the programs availing themselves of these facilities. There are several reasons why in some cases, such opportunities to learn or refine specific skills have resulted largely in acquiring jargon.

The principal reason for this would appear to be the trainees' lack of proficiency in the English language, which for most of these courses is the language of instruction. With the resurgent pride in the national language which is a typical feature of several Asian countries, English language capability is very much on the wane in this part of the world. It is so even in those countries which used English almost as the first language for a number of years; in the case of those whose exposure to English is of more recent origin,
the situation, if anything, is confounding. Even the TOEFL (Test of English as a Foreign Language) which is required by American universities for admission to masters and doctoral programs is not always a requirement for participation in special short courses. The evaluation team which reviewed the University of Chicago CFSC program drew attention to the language problem (Feliciano, et. al., op. cit., p. 10). The net result is that these persons go through the motions of the two or three months' program, are not able to interact effectively with the faculty and fellow students, and benefit little in real terms from the experience. A few develop some skills but the majority learn a great deal of jargon, without understanding the totality of the concepts or appreciating the significance of the words. It is a situation similar to knowing the words and lacking the music.

A second point is that sometimes these facilities are utilized for the initial training to develop basic knowledge and skills rather than for advanced training to enlarge and refine them. In such cases the lack of a good theoretical background, which should have been acquired in the home country, will prevent the trainees from understanding or appreciating new concepts which are based on what they should have already known. This constitutes a waste of scarce resources available to the country and of the valuable time of the training institutions. Now that many countries have developed in-country training programs, only those persons who have taken the highest possible training available in the country should be considered for overseas training; the objective should be to improve their knowledge and skills so that they can become trainers or assume more responsible positions.

It is also not uncommon to select persons for overseas training on grounds other than professional competence. In the interest of the program this should be discouraged and only those persons should be nominated for overseas training who are decidedly of a superior caliber and who can make an effective contribution to the program as a result of the advanced training.

Finally, the proper utilization of persons trained overseas is important. It is not unusual in the family planning program (as well as in others) that persons trained overseas are not necessarily posted to a position for which their new training specially qualifies them. It is also not infrequent that some of them are completely lost to the program. These anomalies are generally due to civil
service procedures. Sometimes persons seconded to the family planning organization from an established service have to revert to the cadre to retain their seniority; if, during the tenure with the family planning agency, they have had the benefit of overseas training, that investment is lost to the family planning program. A second reason for this attrition is the question of promotion; when a person is due to move a step higher in terms of salary and status he or she will be given the first available position at that level, irrespective of the fact that the overseas training has qualified the person as a specialist in some other area. In such cases, although this person remains in the program, his or her specialized training may be wasted because it cannot be utilized in the new position. The extreme occurs when a person leaves the service altogether. One solution would appear to lie in a more discriminating selection of candidates by the family planning organization, and an insistence by the agency providing the fellowship that the government give an assurance that these people will be utilized for three to five years in the area in which they have had the specialized overseas training.

In saying what he has with regard to overseas training the author does not at all mean to deprecate it or to underestimate its value. On the contrary, it has served a very useful purpose in developing trained manpower at a time when countries did not have the capacity to train managerial and other senior-level personnel. What is advocated is greater care in the selection of personnel for overseas training in terms of competence, language capability, and continued availability to the program after training.

A Regional Training Center

A regional training center for family planning communications in Asia, under international auspices, has been talked about for the last few years. Such an institution would appear to be necessary to provide a facility where experienced practitioners can further strengthen their competence by interaction with their comperees from other countries and with a versatile faculty. It could serve this very useful purpose if planned properly to meet the needs of Asian family planning programs and if it develops and maintains a strong applied orientation. It should stress the preeminent role of communications in the context of the total family planning program and not in isolation of it. It should be located in an Asian country which has a good family planning program, a virile free press, and
an imaginative radio and television network. Existence of a research-oriented university department of communications or a communications research and training institute will be a positive factor in selecting the country. The director should be an Asian, whose nationality would be politically acceptable to most Asian countries, who has been a communications practitioner with experience in training and applied research, and with some association with family planning programs. It should have a rotating multidisciplinary faculty, largely drawn from Asian countries, with a three years tour of duty; experience of the staff should reflect management, operations, training and research.

Its functions should include providing opportunities for professional development, conducting field research, and advising programs upon request. Training should be directed at mid-career personnel in training, managerial, operational, and research positions; it should be designed to refresh knowledge, sharpen skills and enlarge perspectives. Being experienced people, the participants, through an interchange of information followed by critical discussion and evaluation, should be able to pick up new ideas from other countries for adaptation, trial and use in their own programs. Away from the inhibitions of their job situation, the participants would be able to learn by having the faculty and other participants evaluate their hunches, guesses and ideas which they have not tried out for want of professional endorsement or support. Intercountry research designed, guided and coordinated by the faculty would provide rich field material for them to share with the participants. Such research, and the experience gained by training multi-national groups, would make the regional center an exceedingly competent source for countries to draw upon for advice on training and program strategy and operations.

ENDS AND MEANS

A few years ago, a United Nations evaluation mission described the training of one category of personnel in a country in the following words: "The objectives were so nonoperational, the content so discursive, the teaching methods so didactic that it is difficult to understand what is expected of . . . when they go on the job" (quotation from Amritmahal, 1971, p. 64). While the statement may not be wholly applicable to current-day training programs, in parts, some of these weaknesses still prevail. Thanks to the several
regional and international meetings and training courses that have been conducted, one lesson that seems to have been reasonably well learned is that the curriculum for job-oriented training should be based on a job description and should be guided by measurable instructional objectives. But when job descriptions lack precision, curriculum planners do not have a proper comprehension of what the trainees are being trained for; therefore, the objectives tend to become vague with the result that they (the curriculum planners) find security in including every conceivable knowledge area ever remotely connected with the jobs that trainees might be called upon to perform. The curriculum gets overloaded with theory, the treatment of the subjects becomes superficial, more time is spent on lectures in the classroom, and the practical aspects (including field training) are sacrificed. The trainee is as uninitiated to the job as he was before he commenced training and his administrator brands the training program as unproductive and inefficient.

This is not meant to imply that all blame for poor training should be laid at the door of inadequate job descriptions. But, if training is considered as an element of program development which helps to strengthen program performance, a precise statement of the tasks that each category of workers has to carry out is essential for evolving appropriate curricula. Only then can training direct itself to focus sharply on developing job-required skills—the essence of job-oriented training—and on providing a theoretical background adequate enough to understand the need for and the significance of utilizing those skills. Therefore, a thorough analysis of the tasks that a worker is expected to perform has to be carried out, and then each job function stated as a distinct unit of activity. One probable reason for the lack of precision in job descriptions may be due to ignoring this systematic approach and depending upon assumptions of officials who may not have a proper appreciation of the work of different categories of personnel. It has to be admitted that this might be the only way of preparing job descriptions in the initial stages of the program. However, after a period of trial in a work situation, job descriptions should be subjected to a critical examination with regard to relevance and feasibility, and modifications made if so indicated.

An interesting method of evaluating initial job descriptions and evolving more specific ones has been reported by Betty Mathews. Senior staff members of the Gandhigram Institute of Rural Health and Family Planning in India, starting with somewhat vague job
descriptions that were prevalent in India at that time, actually performed the jobs of different categories of family planning workers over a period of time and maintained a careful account of their entire experience. After a careful examination and review of their observations, they developed a set of jobs which were more specific and which the workers could perform effectively and efficiently. Revised curricula were prepared on the basis of the refined job descriptions (Mathews, 1970[b], p. 8). Another way of making job descriptions more precise would be to work from the bottom up by involving in the process persons who actually perform those jobs. As an example, if the field worker's job description has to be reviewed, a few of the experienced ones, known to be capable and conscientious, could be brought together to help in the process. They could examine the existing job descriptions against what, how much and how well they actually perform jobs and how much more they can do efficiently, and then add, subtract or alter to effect qualitative and quantitative improvements in it. If there is anxiety that such a process might suffer from a lack of innovation, that would be more than compensated for by pragmatism. If new ideas and or additional work are to be introduced, this should be done only after careful field studies have proved them feasible.

Whatever be the method adopted to refine job descriptions, it is essential that it should be done. Furthermore, this evaluation should be a continuous process. It should become a regular feature of program review to ascertain the validity of job descriptions in the light of changing strategy, and to provide a base for developing curricula to meet contemporary program needs. After all, helping people perform the jobs specified for them is the "end" goal of training.

Once the purpose of training is clearly stated, the means to achieve that goal have to receive serious consideration. There are two aspects to this; one is what the student learns and the other is how he or she learns it. Mathews has summarized some of the principles that govern the "means goals" as: learning takes place only when the learner perceives a relevance of what is taught to what he knows and what he needs; experiential learning is of real significance; learning is facilitated in an atmosphere of mutual respect and acceptance, and of freedom to make mistakes; and self-evaluation promotes learning (Mathews, op. cit., pp. 17-22). If these are used as yardsticks to assess current training programs in different countries, only a few will pass muster in terms of both
content and methods. Therefore, the means adopted in training should promote learner activity, conforming to the concept of teaching that advocates developing the potentialities of the learner rather than merely imparting knowledge.

It is not the purpose of this paper to describe the various stages of curriculum development. There is adequate documentation on this subject. What this paper seeks to do is to point out the strengths and weaknesses that still exist. The most important strength is the understanding that has developed among trainers that in job-oriented training, content should be minimal and specifically related to the tasks that the trainees have to perform, and that the emphasis should be on experiential learning. The greatest weakness would appear to be that this understanding is not always translated into practice.

Many of the training courses are content-oriented rather than directed toward developing skills. In spite of the rigor required in developing curricula for job-oriented training which most trainers profess to practice, the tendency to impart much too much, knowledge at the cost of developing skills is still noticeable. That it is a result of imprecise job descriptions has already been mentioned, but that is only one reason. Another one is that curriculum planners, because of their own orientations, might feel that the best way to train is to deliver lectures. As a result much more content has to be included to keep the trainees occupied, even though the duration of the course may not be adequate if training were designed in the correct manner. Perhaps curriculum planners and teachers may perceive the needs of trainees as being to obtain enough knowledge to pass the inevitable final examination, and that, therefore, trainees are satisfied with straight lectures from which they can take copious notes. It is also possible that they cannot separate the grain from the chaff with the result that curriculum planners, anxious to err on the safe side, include as much content as possible, requiring teachers, laboriously, to cover as much territory as they can. Finally, administrative pressures to train large numbers as speedily as possible, may result in the approach which gathers big groups together for a series of lectures on a wide-ranging array of subjects; this would impress the administrators for the time being.

Following up on this lecture-content complex is the inability or reluctance to practice the precept that learning takes place through learner activity. It was not uncommon to hear a teacher give an
hour's lecture on the preparation and use of audio-visual aids without using or even showing a single one. Similarly, a few years ago, a national training program for community educators which lasted three weeks devoted only one week to field training. Out of the six days for the field training portion, trainees spent two days listening to lectures on the importance of fieldwork and on its procedures and only one half-day each on visiting the field practice area to get acquainted with the field, planning a field program, implementing the program, and preparing a report. The fifth day was devoted to presentation of "fieldwork" reports. This was, indeed, a travesty of fieldwork. The past tense has been used deliberately in this paragraph to indicate that the situation has since changed; but, one cannot escape a strong feeling that the change is largely cosmetic.

There is a growing and recognized need in Asia and Africa for learning-by-doing which was brought out earlier in several of the examples presented in the chapter on Training Experience. Participants in the Teheran workshop of the Carolina Population Center appeared to profit greatly by actually having to prepare plans for a national information and education program. Information and training personnel of family planning agencies attending the UP/IMC workshop asked for more role playing in order to improve their understanding of the communications process. They also felt that their skills had been increased considerably from the practical sessions devoted to the preparation of materials for print and electronic media. Most of the modules of the first EWCI modular program were rated quite highly by the participants, perhaps, because of built-in learner activities. Media specialists attending the UP/IMC seminars suggested a greater time allotment for group discussion and the inclusion of field trips. Health educators and mass communications graduates in the Thai training course complained of inadequate time for acquiring skills in developing materials for radio and television. Participants in three out of the four UNESCO seminars for mass media personnel asked for a more functional approach in organizing future seminars. Such examples could be repeated ad nauseum, but the tragedy is that, in spite of such changes and demands, trainers in some countries still cling to traditional concepts and methods of teaching, paying only lip service to the need for using participatory methods.

If trainers really looked at their work as helping trainees to acquire new skills to perform prescribed jobs, there would be no alternative to increasing the use of participatory methods of teaching.
Lectures have a place but they should be kept to a bare minimum and used only where it is difficult to use other methods. Case studies can be used to draw out principles which, otherwise, would have been presented through a lecture and to illustrate relationships between theory and actual life situations. Much more time should be provided for laboratory exercises to prepare audio-visual aids, construct exhibits, and develop materials for media use. The emphasis should be on using a variety of teaching methods which will make the trainee learn through thinking, analyzing, evaluating, and integrating. Use of such methods, in addition to being superior learning methods, will partly alleviate difficulties arising from instruction in a foreign language.

With regard to field training the situation may be a little better. But there is a need for more organization and better coordination with classroom instruction. The Taiwan program has demonstrated that by a judicious combination of classwork, field training, apprenticeship, and supervision, it is possible to develop a group of efficient and self-reliant fieldworkers who operate on their own within a short time of field placement. The tendency in some countries is to look at classroom instruction and field training as two separate episodes in terms of organization and time, related only to the extent that the latter follows the former. This could affect the trainees' understanding of the relevance of theory to solving practical problems and thus the totality of training may be lost. Concurrent field training attempts to establish this relevance by providing students with the opportunity to evaluate continuously, in a practical situation, the concepts and theory acquired in the classroom. Terminal field training requires a great deal of recall on the part of the trainee, and, according to T.S. Natarajan, might take on the form of a campaign, missing the nuances of a step-by-step approach to understanding community work (1973, p. 4). The two, however, are not irreconcilable. Through meticulous planning and organization it would be quite possible to lead from the step-by-step approach of concurrent field training to the more intensive phase of terminal field training.

It has to be understood very clearly that trainers have as much responsibility for field training as they have for classroom instruction. This is especially so in respect to concurrent field training. It is imperative that trainers involve themselves in all field activities, that they and the field instructors (if any) jointly assist the trainees in program planning, and that trainers be
Field experience training for integrated communications should provide opportunities to the trainees, whatever the level, to plan, organize, conduct and evaluate a community education-information program using the community organization approach with mass media support. It should include, as in the AIBD training for IPPF personnel, experience in interviewing people and producing human interest materials for use in print and electronic media. Mass media practitioners at the level of reporters and the like should also have experience in community organization to enable them to understand community attitudes and responses towards family planning; their field training should include production and pretesting of media materials based on the local situation and in association with field workers. For more senior media people, who cannot spare much time for training, actual field training may not be possible. Instead they could visit two communities, each with different kinds of responses to the program, and talk to opinion leaders and other village men and women so that they can form an idea of what people think and what they need.

Teaching materials are an important aspect of training. A wide variety of them have been prepared and distributed; in turn, these have been translated, usually after adaptation to the local situation. As examples, the following may be mentioned: modules prepared by the East West Communication Institute or the UNESCO Regional Communications Unit (Family Planning) in Kuala Lumpur, Malaysia; manuals and guidelines issued by the FAO in East Africa or the UP Institute of Mass Communication in the Philippines; books and booklets put out by the Central Health Education Bureau of India or the Gandhigram Institute of Rural Health and Family Planning or the Community and Family Study Center of Chicago; prototype lessons and teaching kits developed by the American Home Economics Association and EWCI; programmed instruction books published by the Chinese Center for International Training in Family Planning; films from Taiwan and India on the work of the fieldworker and the health assistant (family planning) respectively; and a variety of other kinds of material.

During the last few years several agencies--ESCAP, IAVRS (International Audio-Visual Resource Service), IGCC, EWCI and
others—have established facilities which collect these materials and supply them to interested agencies. The materials can only serve as prototypes for national programs to use in developing similar materials which use local examples and problems and meet local needs. Even the best of materials in one setting may not be suitable for another unless they are adapted to suit local conditions. This was brought out in the AHEA-EWCI project in Thailand; evaluation showed that some of the prototype lessons had to be modified for the culture of the Thai people. The project had also provided for the preparation of new lessons by Thai participants; it may be recalled that these lessons got higher ratings than the prototypes although the latter were produced by a battery of outside experts.

One element that applies to all aspects of training and needs more attention is the utilization of research findings in family planning communications training. Curricula based on research are generally the exceptions and not the rule. Reference has already been made to the training which proceeded from "curricula and syllabi developed also on the basis of research and experimentation" at the University of the Philippines, Institute of Mass Communication. The Institute spent one whole year in collecting available research reports relevant to family planning communications before embarking on training (UP/IMC, 1974, pp. 1, 5). Reference has also been made to the use of research results to develop the training modules at the East-West Communication Institute. Research findings have also been used in the Chicago academic program as well as in the training course for trainers at the National Institute of Family Planning in New Delhi. Nevertheless, as in other aspects of family planning program, there is a gap between the completion of a study and the utilization of its findings.

One would agree completely with the observation of the University of the Philippines, Institute of Mass Communication to the effect that "a strong research basis shows that integration of research and evaluation in the training programme is required if success is desired" (UP/IMC, 1973a, part III, p. 3). Involvement of training staff in research, and evaluation of training are discussed later in this chapter. At this point the emphasis is on the difficulties in making the results of research available. It is only lately that clearinghouses and regional and national population information networks are being established. Otherwise many study reports would be buried in the archives of the research institution and the funding agency. In the past, when reports did appear in print it was long
after the event and in some cases the findings were no longer relevant. Finally, trainers, like administrators, generally need short and simple summary reports which will stimulate their curiosity and lead them to the main study where they might find materials that could be used for training.

Perhaps, one reason for greater utilization of research findings at the Honolulu, Manila and New Delhi institutions is the existence of what one might call "compendia" of studies carried out in family planning. Gloria Feliciano and Bridget Rulite of the Institute of Mass Communication in the Philippines have summarized available KAP survey findings from nine Asian countries and Israel and Turkey and drawn attention to their implications for training and the production of communication materials (1972, pp. 56-60). Feliciano follows the same pattern in another publication but limits her review to the Philippines (1974, pp. 49-51). Kamala Rao, of the erstwhile Central Family Planning Institute, in 1968 summarized reports of all available Indian studies; the pattern was to describe the objectives of each study, its design, its main findings, and its implication for the program. Originally issued in a mimeographed version, it was later published in printed form (1968). The East-West Communication Institute has published an index of materials on communication and non-formal education in population/family planning. It is a global compilation of nearly 3,000 items in English, French, and Spanish. Each study is identified by country and subject area covered, some of them are annotated briefly, and in all cases, the source of availability is indicated (Radel and Konoshima, 1976).

The preceding discussion on the ends and means of training leads to a really imperious conclusion. That is, more and better training of the trainers. It would appear that this is the key to improving the quality of training. Whether it is in the area of developing curriculum, conducting training courses, preparing instructional materials, organizing field training, or utilizing research findings, the trainers' role is crucial. Because, unless the trainers are at least one step ahead of the needs of trainees, no training program can be successful.

TRAINING OF TRAINERS

The brief review of training of trainers that was presented
earlier showed that while some countries have achieved reasonable progress in developing a corps of well-trained persons to train the rank and file of family planning workers in face-to-face communications, the achievements in preparing trainers for mass communications with a specific family planning orientation is still limited. Until a few years ago most of the people in this field were those who had either demonstrated a flair for public information activities and had joined the government information service in managerial positions, or those who had entered government service at the lowest rung of the ladder and gained proficiency on the job. After long experience, some of these were assigned to train new entrants or junior personnel. Of late, this situation has changed quite considerably.

In recent years, departments of communications in universities or trade-school type institutions have been established in several countries of the developing world. These departments or institutions impart knowledge of the communications process and develop skills in production and use of materials, but do not necessarily provide students with the expertise required to teach others. Therefore, graduates of such institutions cannot ordinarily be recruited straightaway as teachers. Nor will outstanding media practitioners (like any other highly trained professionals) necessarily make good teachers. This observation is implicit in the remarks of the evaluation report on the Chicago CFSC programs that have been referred to in an earlier section. This has also been the author's experience in a few Asian countries. Therefore, it is imperative that mass communications specialists with university degrees, like their compeers in any other aspect of family planning training, undergo training in the science and art of teaching before they undertake the onerous responsibility of teaching others. Because of the constraints of time that are imposed upon most family planning training programs, it becomes very important that these teachers be highly skilled in order to prepare well-trained workers within the short periods available for training.

It may be useful to discuss some attributes that such teachers should possess and/or acquire. That they should be qualified in the field of communications goes without saying. They should also have acquired practical experience in planning, organizing and evaluating a communications program related to development. This experience should extend to those aspects of communications work which would enhance the relevance and effectiveness of messages, such as
audience research, pre-testing, evaluation of feedback and others. If they are media specialists, they should have experience in production. However, it may be better policy to recruit general communicators who will be able to provide students with an overview of the subject, calling upon media specialists to share their special experience and skills in actual production work as needed.

Such persons are not always available. Therefore, if there are candidates with the prerequisites of university training and practical experience, it becomes the responsibility of the national family planning agency to provide them with opportunities and facilities to acquire the necessary expertise to become trainers. Their training in educational concepts and skills should include the planning of training courses, the learning-teaching process, curriculum development, instructional methods and media, and evaluation. During training they should be provided with adequate knowledge of the family planning program and its various components, and, if it is an integrated program, the required knowledge of the other components as well.

This means that countries have to develop a sound teacher training program; this is not only true of the communications component of family planning programs but holds good for other components as well. Whether such an effort will be purely a national one or will be in association with culturally and linguistically related countries will depend upon the size of the country and several other factors, an important one being the personnel resources for training trainers. However, in view of the size of the programs in most countries, the need to view training as a continuing process, and the language problems in foreign training (as brought out by Mary-jane Snyder's follow-up evaluation of the EWCI modular program), it would be highly desirable for each country to develop its own capacity for the basic training of trainers. If that is impossible, the CIACOP pattern of initial training in Costa Rica followed by refresher seminars within a country for its nationals (graduates of CIACOP and others) may be a strategy worthwhile adapting or even emulating.

Trainers in communications form only one element in the total training team. Therefore, for basic training, it would be essential for trainers in the different subject areas to be trained as a team. This facilitates interaction among subject specialist trainers and enables them to understand and appreciate the
interrelationships among the different specialities in the action pro-
gram. Such an approach involves a core curriculum common to all
trainers which includes subject areas such as family planning, prin-
ciples and methods of training and teaching, and management, and
specialized experience which helps them refine skills in the special-
ity and understand the application of that speciality to program op-
erations. It may be useful at this stage to recall what this author
said on an earlier occasion: "It must be emphasized that (for basic
training) there is no substitute to trainers being trained in a team
in their own countries on the basis of a curriculum related to their
specific needs and plan of operations" (Amritmahal, 1971, p. 71).

There should be full-time trainers in a training center who
should be fully responsible for planning, organizing, conducting
and evaluating training courses in their specialities. They must
do all the basic teaching in the speciality themselves. Guest teach-
ers--in this case the mass media specialists--should be used spar-
ingly and only when their expertise can be of real benefit to a par-
ticular group of students. An indiscriminate use of top-notch experts
to teach the basics is tantamount to using a sledgehammer to swat a
fly. Coordination of these special sessions and integration of the
concepts and skills conveyed in each of them into the total curricu-


um are absolutely essential if full benefit is to be derived from the
efforts of the guest experts; these activities form an inescapable
obligation on the part of the regular communications trainer. It is
also his or her duty to appraise the expert of the composition and
calibre of the group, the jobs that they will have to perform after
training, the total curriculum, and the way the guest teacher's of-
fering is expected to enhance it, so as to enable the expert to make
his or her presentation meet the needs of the students. In addition
to these responsibilities, trainers should participate in fieldwork
and field research so as to enhance their competence as trainers.
This should be recognized at all levels of administration and ade-
quate time should be available for these field activities.

Research and fieldwork are two essential features of a train-
ing institution. Without involvement in these activities teachers
tend to become too theoretical, depending upon whatever field ex-
perience they had prior to joining the institution and professional
journals and reports. A static situation such as this should be
avoided at all costs for a community-based and dynamic program
such as family planning.
Research undertaken by training centers should be program-oriented and its findings utilized to strengthen training programs, and, ultimately, to improve program operations. Pure research does not fall within the purview of a program-based institution and may be left to universities and other academic institutions. The accent should be on interdisciplinary research without precluding research in an individual discipline whenever a need for that arises.

It is essential that the communications faculty should at all times be familiar with the pulse of the community, understanding its changing needs, problems, doubts, fears, preferences and responses to family planning approaches and messages. Faculty members should cultivate a spirit of enquiry which will urge them to seek answers to apparently insoluble problems. They should be sensitive to departures from normal anticipated responses of the community, find out the reasons for such phenomena, and try to rectify them. Live experience thus gained in the field enriches the content and quality of teaching, keeping it in step with the needs and problems of the community. The faculty should also be able to arouse the trainees' spirits of curiosity and enquiry so they will be motivated to find better methods of working. All this will be possible only if all faculty members, irrespective of the level of the institution—national or local—engage themselves in research and fieldwork.

There appears to be some reluctance in certain quarters to allow training centers to engage in research. The main fear seems to be that such involvement would make inroads into the time available for training. Such an attitude seems to be rather myopic and does not reflect a correct appreciation of the role of a trainer and of his or her contribution to the program. A trainer is not an automaton, neither is the training program an assembly line operation. This attitude also tends to ignore the existence of an immense potential for carrying out research because, generally, in most countries, level for level, training centers are staffed by the more competent persons available in the country. If an innovative, practical and field-oriented training program is the goal of the family planning agency, trainers should spend an appreciable part of their time in fieldwork and field studies, carrying the dust of that field experience into the classroom. After all, even a cursory examination will reveal that the more effective training programs have been developed in those institutions which have deep roots in field research.
EVALUATION

Although much attention has been devoted to evaluation of training, it still remains a gray area. In the early days of family planning training, a written examination used to be given to the trainees at the end of the training course. When it was realized that the objective of training was more to develop skills rather than to impart knowledge, an evaluation of the skills acquired was introduced into the assessment of the trainees. Sometimes a viva voce test was also administered. Gradually, the written examination, with essay type questions, was supplemented by objective tests. Today one finds a variety of methods being used to assess the trainees: a final examination (either the essay type, the objective type, or a combination of the two); pre- and post-training evaluation; continuous observation of the trainees in the classroom and in the field; field project evaluation; assignments; and, in some cases, term papers. By and large, these measure what was taught, learned, or acquired during the training course.

Bernard Pasquariella and Samuel Wishik have prepared a manual on evaluating training effectiveness and training achievement based on their work in El Salvador evaluating a series of training programs in population and family planning and maternal and child health for professional and paraprofessional personnel. The assessment essentially consists of administering a pre- and post-test with objective items and treating the scores statistically to judge the changes in cognitive competence. They emphasize that in an evaluation hierarchy, the test of acquiring mastery over subject matter is only the first step, the ultimate one being that of developing or improving on-the-job capabilities with several intervening criteria of ascending measurement complexity. Among these are: "Is the training content relevant to duties subsumed under the trainees work role," and "what significant contributions can be attributed to training in terms of increased capacity to meet job demands or to attain goals established by the work role?" (Pasquerella and Wishik, 1975, pp. 4-5).

The Central Health Education Bureau of India organized a workshop on the evaluation of family planning training in early 1970. Its objectives included: to identify areas and to explore the scope in each area to strengthen evaluation; to develop a methodology and suggest appropriate instruments for evaluation of a specific training
program and on-the-job follow-up; and, to suggest a mechanism for feedback of the findings to improve training. Many of the recommendations were directed towards administrative arrangements to carry out the evaluation, while some called for standardization of tools and others suggested further research. However, the group stressed more than once that follow-up of trainees is important, it should merit serious consideration, it should measure both quality and quantity of work, and that it should form an important, regular distinct activity of the regional family planning training centers (Central Health Education Bureau, 1970, pp. 4, 7-10).

S.R. Mehta and A.K. Jain, noting that field training is a method of developing effective skills for performing tasks required of individuals, have affirmed that its evaluation as a distinct component of training is of crucial importance. They have presented a format for the evaluation of the field training of health extension educators working in the field of health and family planning, based on their experience gained in the in-service training of that category of personnel. The authors have divided the actual educational component of field training into three phases: community diagnosis, training of leaders, and an intensive educational program. In evaluating the latter two, some of the indicators mentioned were: interest of the participants (questions asked and doubts clarified); increase in knowledge and practice status; involvement of leaders in the intensive educational program; and use of effective teaching methods and aids. They have emphasized the importance of evaluating 1) the process involved in the whole field training episode, 2) the achievement of the trainees in the field practice area as judged by the resultant effect of their work through follow-up by field staff of the institution, and 3) the application of knowledge and skills acquired during training in their actual job situations. The latter can be determined by personal assessment by the training faculty or by a questionnaire. They have affirmed that the real efficiency of the trainees can be assessed only in an on-the-job situation. The authors have also expressed a concern that individual variations among the supervisors who assess performance may lead to a subjective assessment of the trainees and so vitiate the evaluation especially in short field programs (Mehta and Jain, 1970, pp. 2-8).

Middleton and Ulgado (op. cit.) have also used "supervisors" to assess the performance of "fieldworkers" in evaluating the experimental lessons for the integrated home economics-family planning educational program. They corrected for individual, subjective
variations by pooling observations and treating them statistically.

A workshop convened by the Southeast Asia Regional Office of the World Health Organization in 1974 prepared a guide to field training in health education. It stated that at the planning stage, provision must be made for "evaluating the work of the trainees in terms of behaviour, performance and benefits which will accrue to the community from this training." This should include: establishing a baseline of knowledge, attitudes and skills of the trainee; establishing a baseline for the community/area; reviewing training objectives to ensure that they are capable of being measured; selecting and arranging methods of measuring terminal behavior; implementation; and, concurrent and terminal measurement of the objectives using pre-determined methods (World Health Organization, 1974, pp. 13-14).

It should be noted that all references to evaluation mentioned in this section as well as those in an earlier chapter--Johnston, Nadayag, Middleton and Ulgado and others--relate to the training episode only. Some of them are more field-centered than others but they are still assessments of the effectiveness of the training course in achieving the objectives set for it. Thomas L. Hall and others, who did an extensive review of the literature on family planning manpower five years ago, drew attention to this weakness. They stated, "training is more often judged by what the trainees thought of the course or the instructor than by how well those trained perform on the job" (Hall, et al., 1974, p. 71).

An unmet need of program administrators and one that professional persons have not addressed in adequate measure is assessment of training on job performance. Much money is invested in training, but with what results? Does training really prepare more efficient workers and thus lead to better program performance? Is a trained person really more effective than an untrained one? If not, should the training program be abandoned or is there scope for improving it? Are the training programs sufficiently skill-specific? Are the skills acquired by the trainees relevant to program needs? Does the training equip him or her with confidence and competence needed to use those skills independently? Can these skills be used in the cultural context of the country or are they adopted from a different situation? The last four questions are particularly important in the training of communications personnel and need to be answered.
However, there appear to be some difficulties in objectively assessing communications work. Some of the skills required in family planning programs, such as inserting IUDs, can be measured with enough exactitude to assess the degree of proficiency attained because of training. Since communications work is influenced by community responses and other subjective sociopsychological factors, it is difficult to measure the impact of training upon job performance. Probably, if proper indicators of the process are evolved and judgment is not based solely on the number of acceptors recruited, statistical methods should be able to help make a proper assessment of the ability of the workers and then relate that to training.

ESCAP convened an Expert Group in 1973 with a view to examining the problems associated with measuring the impact of training upon job performance of field workers. Participants included communicators, trainers, administrators, and social scientists from five countries and four international organizations. The single objective was "to develop indices to measure the impact of training on job performance of fieldworkers in family planning programmes." The Expert Group reviewed the job descriptions of "fieldworkers" from nine countries of Asia and Africa; these "fieldworkers" included those who worked exclusively for family planning, those who provided domiciliary maternal and child health services, and those from other development agencies, all three groups being involved in educational and communications activities for family planning. Job functions directly concerned with education and communications for family planning were selected and a job description stated in behavioral terms was developed (UN/ECAFE, 1973, pp. 7-13). On the basis of these descriptions the Group developed criteria and methods for quantitative and qualitative measurement of the performance of job tasks (ibid., pp. 14-31).

The Group distinguished between the "results" and "effects" of training. Assessment of the former "connoted the measurement(s) for determining how participants in a training course had been affected in terms of skills, knowledge and attitudes where training-related criteria were employed"; whereas, that of the latter "implied the measurement(s) for determining how the participants had been affected in terms of changes in the performance of job tasks as implied by the training." If adequacy of training had to be evaluated, assessment of both "result" and "effects" would be necessary. Taking the view that the actual jobs performed by the workers often times differed from the stated job description, the Expert Group felt
that factors influencing the "effects" of training should be identified and allowance made for them before the "effects" could be assessed. It suggested that longitudinal studies would be of much use in understanding the "effects" of training \textit{vis-à-vis} the extraneous factors. A cohort of trainees from one or more training centers should be observed starting with pre-training preparation, through the training period, and in the field, at regular intervals, over a period of time after the training episode. The assumption was that the influence of these extraneous factors--both positive and negative--upon the "effects" of training, would increase with longer intervals between training and assessment (\textit{ibid.}, pp. 32-33). Apparently, such a study has not been reported yet.

Whether indicators for measuring the impact of training upon job performance will come from such longitudinal studies or through other means, developing them is essential and urgent. Professionals are convinced that training plays an important part in program operations; administrators believe in it; but, if training is to have sustained support--financial and otherwise--there is no better way of getting it than through demonstration of cause and effect relationship with almost mathematical precision.
NOTES

1. In February 1974, President Salvador P. Lopez of the University of the Philippines system, inaugurating the first training program in mass communication for ASEAN (Association of Southeast Asian Nations) nationals said, "... two decades ago, at a time when mass media, particularly in the Philippines, were regarded mainly, if not solely as business enterprises, levers to be manipulated for political advantage and economic gain, and as vehicles of entertainment, but seldom if ever as tools of information, education and enlightenment." From Roque, Francisco H. (ed.). 1974. First Training Program in Mass Communication for ASEAN Nationals. Manila: ASEAN National Secretariat of the Philippines.

2. Even as late as 1972, the Experts Meeting on Integrated Approach to the Use of Broadcasting and other Communication Media in Family Planning and Development held in Kuala Lumpur, Malaysia from 14-18 August 1972 stated (p. 13 para 3.7.7.10 of the report): "Mass media have a limited amount of time at their disposal for social and educational productions, even when the political climate is favourable towards such an orientation, and an overall media strategy has to take account in a balanced and rational way, of the claims of all sectors."

3. The UNESCO seminar on Mass Media and National Family Planning Programmes held in Paris in June 1969 reiterated the importance of the radio as a pre-eminent source of information. The final report of the seminar stated (page 7, para 32): "While recognizing the special advantages of television, films and other media, the meeting felt that radio supersedes other mass media in its ability to reach large numbers of people in vast areas of the world. Indeed, for many people in remote parts of developing countries, radio is the only means of communication with the outside world. It is therefore desirable to exploit radio communication, both nationally and locally, in promoting family planning."
4. The United Nations Economic Commission of Asia and the Far East (ECAFE) was redesignated as the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) in 1974. In subsequent references in the text to this organization, either prior to or after 1974, the initials ESCAP will be used.

5. In addressing the International Workshop on Communication Aspects of Family Planning Programs at Bangkok in December 1968, Professor Wilbur Schramm observed:

"A few years ago, I could walk through a city of South Asia and see newspapers for sale in the streets, books in the stores, radios in the homes and the shops; and then drive twenty-five miles into the country, and all this would disappear as though a great magician had waved his hand and commanded it to vanish. I would find myself surrounded by oral communication and symbols [of] traditional culture.

"Now you still see the same sights in the cities, but, as you well know, it is different in the country. The mass media are surging over the agricultural plains and into the village of Asia. It is fascinating in Africa to see transistor radios beginning to appear in thatched huts, and Masai tribesmen who have been posing with their spears for a shilling, retire inside to hear the news from Nairobi or Dar . . . . Less than a decade ago, Samoa was a lush, sleepy island, and the picture I remember is these lithe boys in class being taught by television, and in the evening the world news coming into the village on the picture tube."

6. The UNESCO 1969 seminar stated: "It is important that the family planning devices offered should be adopted and used continuously after adoption. This result can only be achieved through personal communication which establishes trust and confidence in the minds of the users of contraceptive devices. The efforts of the mass media should therefore be followed up as rapidly as possible by the personal presence and services of field workers in family planning. The mass media can also continue to guide and support the efforts of such field workers." (page 6, para 28 of final report).

7. President Ferdinand Marcos of the Philippines is reported to have said in his 1970 State of the Nation message: "I am aware of the important role of private initiative in spreading knowledge about family planning. In particular, the mass media have been extremely helpful in pointing out the dangers of the population explosion. I urge them to continue to do so." Quoted from: United
8. Although Dr. John Middleton says that the modular program does not provide an integrated course covering all aspects of population and family planning IEC, yet, by a judicious selection of the modules, it is possible to obtain experience in integrated communications. It is because of this attribute, that this program is included in this sub-section.

9. Some examples over a period of nearly ten years are: Lynton and Pareekh (1967), Mathews (1970), Amritmahal (1975) and Guilbert (1976). These have been included in the list of references. All these provide information in some detail on evolving a curriculum from a given job description. The last one, though developed in the context of medical education, is much more detailed, unusual in presentation and so attracts and holds attention and contains instructions on evaluation exercises.
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