



POPULATION MEDIA CENTER

Vision for the Future



Photo by Maciej Dackowitz

Mission of Population Media Center

Population Media Center (PMC) is a non-profit organization with a mission of working worldwide to enlist the broadcast and print media to show people the personal benefits of family planning, encourage the use of effective measures to prevent transmission of HIV and other sexually transmitted infections, promote general reproductive health, elevate women's status, promote gender equity, and protect children from exploitation.

PMC uses entertainment broadcasting to help various countries achieve their health and social development goals. The organization uses a communications strategy created by Miguel Sabido when he was Vice President of the Mexican network, Televisa, that has proven to be effective in numerous cultural settings worldwide in greatly improving social and health outcomes. It involves creating long-running serialized melodramas developed by the best qualified producers, writers and actors in participating countries in local languages, in order to create characters that gradually evolve into positive role models for the audience to bring about changes in social norms on the issues addressed in the programs. The programs attract huge audiences and are often the top-rated programs on the air.

PMC has adapted the Sabido methodology and applied it successfully around the world. The strategy is based on numerous social science theories, most notably the Social Learning Theory of Stanford University psychology professor Albert Bandura, which describes how role models influence behavior.

There is much evidence about the cost-effectiveness of long-running serialized dramas. The ultimate measure of cost-effectiveness is the cost per person who changed behavior in a positive direction. The serialized dramas PMC is using to improve people's lives are highly cost-effective because of the huge audiences they attract and the strong impact they have on the public. In Ethiopia, PMC's first long-running program cost just 4 U.S. cents to reach each listener. Cost per listener of a similar program in Tanzania was 3 cents per year. The annual cost per new adopter of family planning in Tanzania was 34 cents U.S., while the cost per person who reported that they changed behavior to avoid HIV infection as a result of hearing the serial drama was 8 cents.

While PMC focuses on the use of long-running serialized dramas for modeling positive behaviors, the organization works with partners in each country to design a whole society strategy, that combines traditional and new media and uses a variety of program formats to reach different segments of the population.

Examples of PMC's Work

Photo by Swiatek Wojtkowiak

Ethiopia



In the Ethiopian radio serial *Yeken Kignit* (“Looking Over One’s Daily Life”) broadcast in 257 episodes by PMC between 2002 and 2004, one of the main story lines addressed HIV/AIDS – specifically the need for early detection and prevention. The story is of Anguach and Demlew. Anguach and Demlew are a loving young couple with a bright future. Then, Demlew’s mother, who doesn’t like Anguach, begins to meddle and pushes a neighbor to seduce her son, Demlew. He succumbs, sleeps with the neighbor, and gets infected with HIV. Anguach is devastated, but forgives him, and cares for him until he dies. Although she is terrified that she might be HIV positive, Anguach gets tested and finds out that she is negative. Anguach eventually marries again (this time, a man without a meddling mother!) and lives happily ever after. Touching story, but did it motivate any behavior change in the audience? Yes!

The program was extremely popular. Listeners included 47% of all men in the country and 45% of women. Nationwide surveys conducted before and after the serial was broadcast showed a significant decrease in the percentage of listeners (as compared to non-listeners) who did not know there is a means of determining one’s HIV status. We also found significant increases in the percentage of listeners who got tested for HIV. In fact, male listeners got tested at four times the rate of non-listeners, and female listeners got tested at three times the rate of non-listeners. The post-broadcast survey revealed that listeners had “fallen in love” with Anguach and followed her example of getting tested for HIV. There was also a significant reduction in stigma against those living with HIV/AIDS among listeners, contrasted with non-listeners.

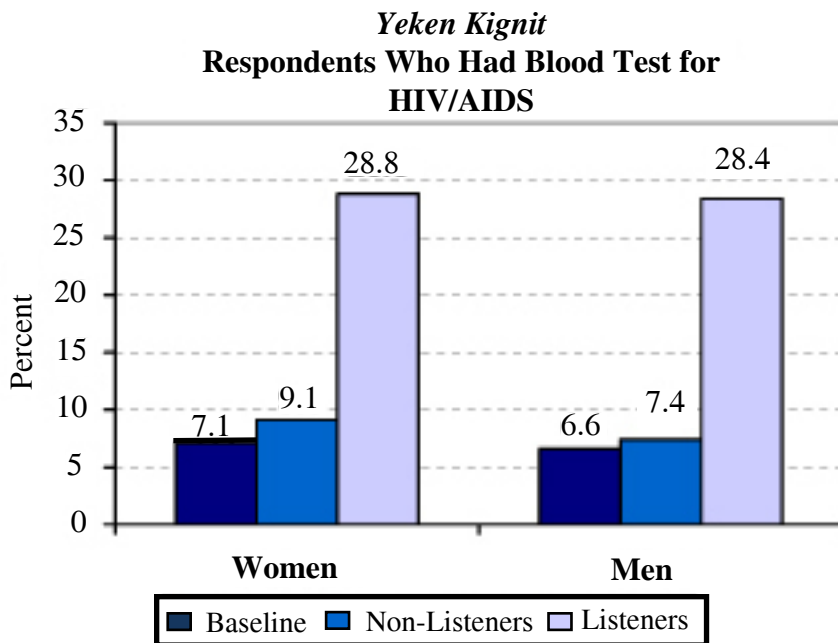
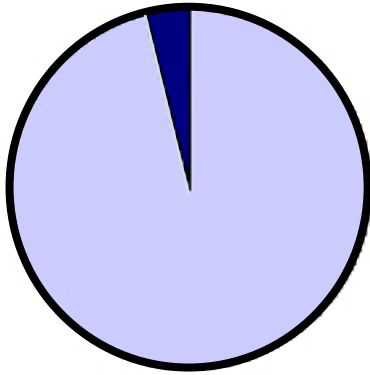


Photo by Daniel Barretto

At the same time PMC-Ethiopia broadcast *Yeken Kignit* in the national language of Amharic, we broadcast a second program called *Dhimbibba* (“Getting the Best Out of Life”), which addressed a wide range of issues and was produced in another widely spoken language. As of November 2004, 63% of new clients seeking reproductive health services at 48 clinics in Ethiopia reported that they were listening to one of PMC’s serial dramas. In fact, 26% of new clients named one of PMC’s programs as the primary motivating factor for seeking services. Of new clients who cited radio programs as the impetus for seeking services, 96% said that they were motivated by one of PMC’s programs.

Radio Programs Cited Among Clients Motivated to Seek Services by Radio



■ PMC's Dramas ■ Other Radio Programs



Photo by Frederic Lancerreau

The post-broadcast survey revealed the programs’ impact in terms of knowledge, attitude and behavior change – with particularly striking differences between listeners and non-listeners. A multiple regression analysis was done to eliminate any effects that such factors as income, educational level, age, marital status, ideal number of children, place of residence, ethnic group or language may have had on family planning use or HIV testing, and the results showed highly significant effects of the serial dramas.

- At the end of the serials, listeners were 5 times more likely than non-listeners to know 3 or more family planning methods.
- Among married women in the Amhara region who were listeners, there was a 55 percentage point increase in those who had ever used family planning methods, while among non-listeners, the change was only 24 percentage points. A similar increase occurred among male listeners in the Amhara region.
- Spousal communication about family planning issues among married women climbed from 33% to 68%.
- There was a 50% increase in communication between mothers and their children about sexuality issues.
- There was a 52 percentage point increase among men and a 21 percentage point increase among women in recognizing the importance of girls’ education.
- There was a 35 percentage point increase among men and a 13 percentage point increase among women in the belief that women are fit to hold public office.



The outpouring of emotion in Ethiopia, in response to PMC’s programs, was overwhelming. From all over the country – and even beyond the borders of Ethiopia – 15,000 letters poured in to PMC’s office in Addis Ababa. Ethiopia’s news media ran almost a hundred stories on the phenomenon PMC created with its programs.

Following *Yeken Kignit* and *Dhimbibba* (supported by the David and Lucile Packard Foundation and other donors), PMC developed a new program in Ethiopia, with support from the government’s HIV/AIDS Prevention and Control Office. A fourth serial drama was developed with support from UNICEF, and a fifth program is being supported by Save the Children-Norway, with funds provided by the Norwegian government.



Burkina Faso, Côte d'Ivoire and Mali

In Burkina Faso, Côte d'Ivoire and Mali, PMC produced a radio serial drama to address the issue of child slavery and its link to poverty-inducing factors, such as large family size and HIV/AIDS. The radio serial drama went on the air in November 2004 and was completed in October 2005. The program, *Cesiri Tono* ("Fruits of Perseverance") was done in partnership with First Voice International, which broadcast the program via WorldSpace satellite to 169 community radio stations throughout the three countries. In 2005, the Ashoka Foundation awarded PMC the Changemakers Innovation Award in their global competition for the most creative programs designed to prevent human trafficking. The PMC program was one of three awardees worldwide, chosen from 69 nominees from 22 countries.

A random-sample household evaluation survey was conducted in the three countries in December 2005 to determine the impact listening to *Cesiri Tono* had on awareness of and attitudes towards child trafficking and exploitation and their underlying causes. The survey data indicated that the program produced the following results:

- Listeners in Mali were half as likely as non-listeners to prioritize educating boys over girls (11% vs. 22%).
- In Mali, the belief that it is acceptable for women to work outside of the home was 53% higher among listeners than it had been at baseline.
- 32% of listeners in Ivory Coast knew at least three factors that can lead to child trafficking, compared to 14% of non-listeners.
- In Burkina Faso, 23% of listeners had taken action against exploitative child labor, compared to 9% of non-listeners.

Based on the results of *Cesiri Tono*, PMC received funding in March 2005 to implement a two-year radio serial drama project in Niger to address similar issues to those addressed in Mali, Burkina Faso and Côte d'Ivoire. The program, entitled *Gobe da Haske* ("Tomorrow Will be a Brighter Day") went on the air on February 12, 2006.



Nigeria

In Nigeria, PMC produced and broadcast *Gugar Goge* (“Tell it to me Straight”), a 70-episode radio serial drama addressing reproductive health, family planning, and obstetric fistula in northern Nigeria. Obstetric fistula is a condition commonly resulting from early childbirth that makes its victims incontinent.

Gugar Goge was broadcast over regional government-owned and private radio stations in Kaduna and Kano states. Clinic monitoring data determined that *Gugar Goge* served as the primary motivation to seek health care services for 33% of family planning/reproductive health clients and 54% of fistula clients.

The endline evaluation of the program showed that 91.9% of the population in Kano and Kaduna states had heard at least one episode of the program. This projects to approximately 9.3 million people in Kano state and 6.2 million people in Kaduna state, for a combined total of 15.5 million exposed to the program out of a population of 16.9 million. Even more impressive was the fact that 82.1% of those interviewed reported listening to the radio serial drama weekly (four or more episodes per month). The endline evaluation also found that:

- When asked their opinion as to whether “a woman with fistula should be part of the community like everyone else,” more male listeners (32.1%) “strongly agreed” with this statement than did non-listeners (17.6%).
- When asked if they or someone they knew had “ever sought treatment for fistula,” more female listeners (59.7%) said “yes” compared to non-listeners (48.5%).
- A significant difference was found between male listeners (92.8%) reporting knowing of a place to get a male condom compared to non-listeners (75.0%). A significantly larger percentage of female listeners (96%) also knew of a place to get condoms compared to female non-listeners (64.4%).
- When asked if a condom was used the last time they had sexual intercourse with a man, significantly more female listeners (79.5%) said “yes” compared to female non-listeners (35.6%).
- When asked if it is “acceptable or not for information on condoms to be provided,” significantly more female listeners (87.2%) compared to female non-listeners (49.1%) said it is “acceptable.”



Sudan

In Sudan, PMC has completed a program focused on elevation of the status of women and elimination of harmful traditional practices such as female genital mutilation and avoidance of HIV/AIDS. While the program was on the air, the percentage of the population who believe that female genital mutilation should be eradicated climbed from 28.6% to 65.4%, and spousal communication about HIV/AIDS issues more than doubled.

Other Countries

In addition to PMC's programs in Ethiopia, Sudan and francophone West Africa, PMC is using similar strategies to prevent HIV/AIDS in Vietnam, to prevent adolescent parenthood in Jamaica and Mexico, to address reproductive health issues in Senegal, and to promote family planning and conservation of natural resources in Rwanda. PMC has completed a program promoting family planning in the Philippines and is now planning its next program there.

PMC also has a very successful collaboration with Brazil's largest network, TV Globo, to help the writers of prime-time telenovelas incorporate various health and social issues into the programs. These programs are exported worldwide. In 2006, TV Globo incorporated 1,148 scenes addressing social and health issues suggested by PMC into their three prime-time telenovelas. An evaluation study conducted by PMC showed significant behavioral effects, including the fact that many family planning clients cited the programs as having been a factor in their decision to seek family planning services.

In the United States, PMC has an office in Los Angeles focused on helping the U.S. entertainment industry to address reproductive health and related issues in the context of entertainment programming. Among PMC's activities in the U.S. is the Entertainment - Public Health Summit, held in partnership with the Rollins School of Public Health at Emory University, in association with the Mailman School of Public Health at Columbia University, the Harvard School of Public Health, the Writers Guild of America West, and the Academy of Television Arts and Sciences Foundation. This all-day event brought together representatives of the entertainment industry and the public health community in order to promote closer cooperation to improve health outcomes in the U.S. and around the world, through the positive use of entertainment broadcasting.

The Serial Drama Strategy used by Population Media Center

Soap Operas for Social Change to Prevent HIV/AIDS:

A Training Guide for Journalists
and Media Personnel



Population
Media
Center



The United Nations Population Fund provided funding to PMC to create a Training Guide in the Sabido Methodology for Behavior Change. The Training Guide is distributed worldwide and available in English, Spanish, and French.

The strategy that PMC uses is unique in that it makes life-saving information accessible and entertaining to people who have access to mass media. Research on Sabido-style long-running serialized entertainment-education dramas in several countries has proven this methodology to be uniquely effective at bringing about population-wide changes in behavior with regard to health and social development goals.

PMC was founded in 1998 with the intention of using the extensive experience of its key personnel to spread the application of this methodology to address critical global sustainability issues in countries that had not benefited from it. PMC's training team includes people in various developing countries who have been trained by Sabido and have successfully applied the methodology in numerous cultural settings. In each country where we develop programs, PMC establishes a country office or creates a partnership with a local NGO. The work in each country is carried out by the team within this office, comprised of residents of that country.

Preliminary research helps to shape the content of PMC's programs by identifying priority issues and information needs among the people. Addressing these issues through the characters in an entertainment-education serial drama makes the program feel as if it is about life in a particular country rather than appearing to be a program focused on one set of issues. In addition, addressing issues of concern to the people helps to attract a larger audience. Often, programs using this methodology are the top-rated programs on the air.

PMC finds the best qualified producers and writers in each country and brings trainers from other developing countries who have used the methodology successfully to work with the in-country team in developing an entertainment-education serial drama for their society. This creates linkages among developing countries and builds capacity within each country for long-term research-based media interventions. Engaging a team of country nationals ensures that those involved with creating the program understand the necessary cultural and language nuances in that country.

Pre-broadcast and post-broadcast quantitative surveys are used to measure the effects of the programs, by comparing relative changes in attitudes and behavior among listeners and non-listeners. In addition, personnel working in clinics and other service delivery points are recruited to ask new clients what motivated their visit and to ascertain if clients are listening to the program.

PMC-Phillipines

*Actor recording for PMC's radio
serial drama, "Sa Pagsikat Ng Araw"
("The Hope After Dawn")*



The Need for PMC to Expand its Reach Worldwide

The world is facing unprecedented change, including the interrelated concerns of global warming, deforestation and species extinction, collapsing fisheries, fresh water shortages, rising energy costs, rising food costs and food shortages, poverty, poor health, political unrest and instability, and inability of many of the poorer countries of the world to keep up with growing demand for schools and government services. An overriding element of many of these problems is net growth of the world's population by 80 million per year. Unplanned and often unwanted childbearing is a major factor in the growth of the world's population by the equivalent of a new Los Angeles County every six weeks.

Changing social norms on issues as sensitive and personal as human reproduction is not easy. Human behaviors are often rooted in long traditions that may once have been adaptive, but no longer are. There is now, however, a great body of evidence, including the data given above, that change is possible.

PMC has received invitations to develop new projects in numerous countries, often where living standards are desperately low. PMC currently operates on an annual budget of \$3.1 million. The need for PMC's work to expand its reach and scope is evident from the magnitude of human suffering resulting from the low status of women and excessive childbearing worldwide. For example:

- **600,000 women and girls die worldwide every year from pregnancy and childbirth** – a figure equal to U.S. deaths in World War I, World War II, the Korean War and Vietnam combined. Most of these women are in their teens and early twenties, forced by their societies into bearing children at a young age and far too frequently.
- **140,000 women bleed to death each year during childbirth.** Tragically, many die within reach of medical facilities, prevented by their relatives from being treated by male doctors.
- **75,000 women die each year trying to end their pregnancies.** The U.N. estimates that worldwide, 50,000 women and girls try to induce abortions on themselves each day (18.3 million per year). Many of those who survive face life-long, disabling pain.
- **Approximately 100,000 women die each year from infection, and another 40,000 women die from the agony of prolonged labor.** And those are only the fatalities. UNICEF's statistics show that for every woman who dies, 30 survive with gruesome injuries and disabilities. That's more than 17 million women per year.

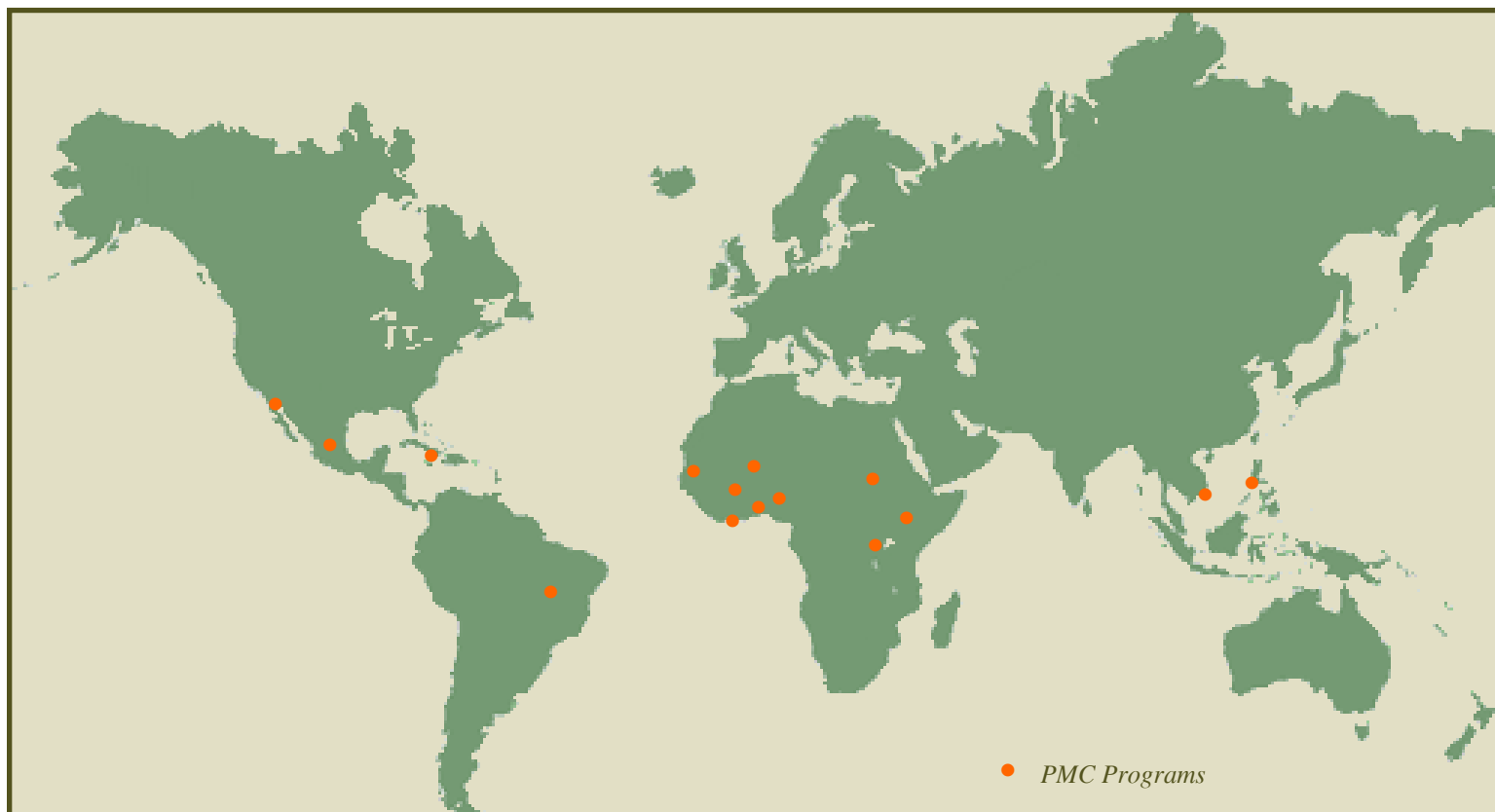
This human suffering is preventable. While many developed countries have been successful in reducing their fertility rates, there is a long way to go in the developing world to achieve replacement level fertility and equality for women.

Developing nations now require about \$1 trillion per year in new infrastructure development just to accommodate their population growth – a figure that is very far from being met and is effectively impossible for these countries to generate. This explains why developed-world humanitarian aid and loans to developing nations of \$56 billion per year have been ineffective in improving their infrastructure and why the infrastructure of the developing world is sagging under the demands of their growing populations.

The leading reasons people cite for not using family planning are the desire for more children, fear of side effects from contraceptives, perceived or actual male opposition, religious opposition, and the belief that one does not have the moral right to determine the number or spacing of children. The behavior-change communication strategies used by PMC have been demonstrated to be by far the most cost-effective means of preventing unplanned and unwanted births. At the same time, these strategies expand the options and rights of women and girls.

Population Media Center's Long Range Vision

In its first eight years, Population Media Center (PMC) has initiated projects in Brazil (in partnership with TV Globo), Burkina Faso, Côte d'Ivoire, Ethiopia, Jamaica, Mexico (in partnership with the Adolescent Guidance Center of Mexico), Mali (in partnership with First Voice International and the community radio stations of Mali), Niger, Nigeria (in partnership with the Rotarian Action Group on Population and Development), the Philippines (in partnership with the United Nations Population Fund), Rwanda (in partnership with the Dian Fossey Gorilla Fund), Senegal (in partnership with the Senegalese youth organization, ADEMAS), Sudan (in partnership with the Sudan Academy of Communication), the United States (in multiple partnerships), and Vietnam (in partnership with the Voice of Vietnam).



Since its founding in 1998, PMC's work has been recognized and supported by the United Nations Population Fund (UNFPA), the United Nations Development Program (UNDP), the United Nations Children's Fund (UNICEF), the United States Agency for International Development (USAID), HIV/AIDS Prevention and Control Office of the Government of Ethiopia, Norwegian Save the Children, the Danish Embassy in Vietnam via UNFPA-Hanoi, the David and Lucile Packard Foundation, the Rotarian Action Group on Population and Development (with funds from Rotary International Foundation, Aventis Foundation and the German Government), the Richard and Rhoda Goldman Fund, the Robert Wood Johnson Foundation, Pfizer Inc's Public Health Group, the Kaiser Family Foundation and many other foundations and individual donors.

PMC's vision for the next ten years is to expand to 50 countries. Among the highest priority countries for PMC are India, Pakistan, Bangladesh, Indonesia, and the Democratic Republic of the Congo. PMC has received invitations from governments and NGOs in each of these countries to undertake project development.

Other countries of interest, where we have already trained radio station personnel or made exploratory visits, include Afghanistan, Angola, Botswana, China, Egypt, Ghana, Guinea-Bissau, Honduras, Kenya, Madagascar, Malawi, Mozambique, Namibia, Nepal, Papua New Guinea, Swaziland, Tanzania, Uganda, and Zimbabwe. We also have interest in working in Algeria, Burundi, Cambodia, Cameroon, Chad, Eritrea, Guinea, Haiti, Laos, Malaysia, Myanmar, and Zambia. We have received inquiries from a number of these countries.

Reaching Our Goal

To fund projects in 50 countries would require an annual budget of about \$35 million, including strengthening the administrative capacity of our headquarters. It's a big goal, but achievable if we can identify donors with interests in each country and convince them that their objectives for those countries cannot be achieved without addressing the critical issues of women's reproductive health and status.

The process of developing a project in a new country involves staff time and travel to visit the country, assess needs and current activities related to reproductive health communications, develop a plan of action and budget based on costs in the country, discuss opportunities for funding with donor agencies operating in the country, explore commercial sponsorship possibilities, and carry out follow up with donors until project funding is received. The average cost to PMC of undertaking project development in a new country is approximately \$30,000. Unrestricted support is critical to allow for this work.

The cost of a three-year serial drama project, including formative and evaluative research, training and technical assistance, writing, acting, production and broadcasting, varies, depending on which medium is used. The typical cost of a radio project is about \$450,000 per year. In countries with a strong commercial marketplace, our programs have the potential to obtain support from commercial sponsors, once they demonstrate their ability to attract a large audience. We have two commercial sponsors for one country project (Jamaica), and we are in discussions with both local and international companies doing business in many of the countries where PMC has programs to explore opportunities for commercial sponsorship or revenue sharing.





Population Media Center

145 Pine Haven Shores Road, Suite 2011

Shelburne, Vermont 05482 U.S.A.

Tel: (802) 985-8156

Fax: (802) 985-8119

Email: pmc@populationmedia.org

www.populationmedia.org