



# Impact Evaluation of Media Campaign of Population Welfare Programme



National Institute of Population Studies  
Government of Pakistan  
Islamabad

**IMPACT EVALUATION  
OF  
MEDIA CAMPAIGN  
OF  
POPULATION WELFARE PROGRAM**

By

**Aysha Sheraz**

**NATIONAL INSTITUTE OF POPULATION STUDIES**

Islamabad 2009

## List of Contents

Foreword .....	v
Acknowledgement .....	vii
Executive Summary .....	ix

### Chapter 1

<b>Introduction and Background .....</b>	<b>1</b>
1.1 Evaluation of Media Campaign .....	4
1.2 Justification of The Study .....	4

### Chapter 2

<b>Methodology and Research Design .....</b>	<b>7</b>
2.1 Objectives .....	7
2.2 Research Design.....	7
2.2.1. Quantitative Research .....	7
2.2.2. Qualitative Research: .....	8
2.3 Study Team .....	8
2.4 Study Team .....	8
2.5 Implementation of Focus Group Discussions (FGDs).....	10
2.6 In-Depth Interviews of Employees of Population Welfare Programme .....	11
2.7 Community Profile.....	11
2.8 Technical Advisory Committee .....	12
2.9 Training .....	12
2.10 Field Work .....	13

### Chapter 3

<b>Socio-Demographic Characteristics .....</b>	<b>15</b>
3.1 Sample of Participants of FGDs .....	15
3.2 Sample of Employees of Population Welfare Programme .....	16
for In-Depth Interviews.....	
3.3 Age Distribution of FGD Participants .....	17
3.4 Gender of Participants of FGDs.....	17
3.5 Educated and Uneducated Participants.....	17
3.6 Occupation of FGD Participants .....	18
3.7 Children of FGD Participants .....	19
3.8 Current Users of Contraceptive Methods .....	20
3.9 Some Socio-Demographic Characteristics of Respondents of In-Depth Interviews (IDIs) .....	20

<b>Chapter 4</b>	
<b>Review of Behavioural Change Communication Campaign .....</b>	<b>21</b>
<b>Chapter 5</b>	
<b>Exposure and Understanding of Media Messages .....</b>	<b>29</b>
5.1 Exposure of Community to Media Messages .....	29
5.2 Understanding of Media Messages .....	34
<b>Chapter 6</b>	
<b>Recall and Effectiveness of Media Messages .....</b>	<b>37</b>
6.1. Recall of Messages .....	37
6.2. Effectiveness of Media Messages .....	41
<b>Chapter 7</b>	
<b>Knowledge and Contraceptive Use.....</b>	<b>47</b>
7.1 Knowledge of Contraceptive Methods .....	47
7.2 Ever Use of Contraceptive Methods .....	53
7.3 Current Use of Contraceptive Methods .....	54
7.4 Gap between Knowledge and Ever Use Of Modern Contraceptive Methods .....	56
7.5 Impact of Exposure to Family Planning Media Messages on Current Use of Contraceptive Methods .....	57
7.6 Trends in Knowledge of Contraceptive .....	59
7.7 Trends in Ever Use, Current Use and Dropouts of Contraceptive Methods, SWRHFP 2003 and PDHS 2006-07 .....	60
7.8 Reasons for Non-Use of Contraceptive Methods .....	62
<b>Chapter 8</b>	
<b>General Information Of From In-Depth Interviews Of Employees Of Population Welfare Programme .....</b>	<b>69</b>
<b>Chapter 9</b>	
<b>Format and Contents of Media Messages.....</b>	<b>75</b>
9.1 Comments and views of FGD Participants .....	75
9.2 Views of Respondents of In-Depth Interviews on Format and Contents of Media Messages .....	81
<b>Chapter 10</b>	
<b>Conclusions and Recommendations .....</b>	<b>83</b>
10.1 Suggestion and Recommendations from the Participants of FGDs.....	85
10.2 Suggestions and Recommendations by Employees .....	86
10.3 Overall Conclusions/ Recommendations .....	89
<b>References .....</b>	<b>93</b>

## List of Tables

Table 3.1	Sample Distribution of FGD Participants By Provinces, Northern Areas and AJK According To Districts of Pakistan .....	15
Table 3.2	Sample Distribution of Employees of Population Welfare Programme for In-Depth Interviews .....	16
Table 3.3	Age Groups of FGD Participants- .....	17
Table 3.4	Gender of Fdg Participants – .....	17
Table 3.5	Educated and Uneducated FGD Participants.....	18
Table 3.6	Occupation of FGD Participants- .....	19
Table 3.7	Children of FGD Participants- .....	19
Table 3.8	Current Users of Contraceptive Methods .....	20
Table 3.9	Socio-Demographic Characteristics Of Employees for In-Depth Interview .....	20
Table 4.1	Dissemination of Family Planning Messages On Television and Radio .....	26
Table 4.2	Advertisements of Family Planning Messages through National And Regional Newspapers.....	26
Table 4.3	Ads Published In Daily News Papers during the Period From January 2004 to December 2006.....	27
Table 5.1	Exposure to Family Planning Messages -..... (Replica of PDHS Table 5.14 on Exposure To Family Planning Messages) Percentage Of Currently Married Women Age 15-49 Who Heard or Saw A Family Planning Message on the Radio or Television In The Month Preceding the Survey	30
Table 5.2	Understanding of Media Messages- .....	35
Table 6.2	Among Currently Married Women Aged 15-49 Who Had Exposure to Various Family Planning Messages on Radio and Television in the month preceding the PDHS Survey, Percentage of Women Who Understood The Specific Messages and cited The Messages	42
Table 7.1a	Effectiveness of Media Messages- .....	48
Table 7.1b	Among Currently Married Women Age 15-49 Who Were Exposed To Family Planning Messages on Radio or Television, Percentage of Women Who Cited the Messages and Percent Distribution of Women by Effectiveness of Media Messages	50
Table 7.1a	Knowledge of Contraceptive Methods - .....	48
Table 7.1b	Percentage of Ever-Married and Currently Married Women Age 15-49 Who Know any Contraceptive Method, by Specific Method Heard About Contraceptive Methods by Background Characteristics .....	50

	Percentage of Currently Married Women Age 15-49 Who Have Heard of At Least One Contraceptive Method and Who Have Heard Of At Least One Modern Method	
Table 7.2	Ever Use of Contraception- .....	53
	Percentage of Currently Married Women Age 15-49 who have ever used one or More Contraceptive Methods	
Table 7.3	Current Use of Contraceptive Methods by Age- .....	55
	Percent Distribution of Currently Married Women Age 15-49 by Contraceptive Method Currently Used, According To Age	
Table 7.4	Gap between Knowledge and Ever Use Of Modern Contraceptive Methods- .....	56
	Percent of Currently Married Women	
Table 7.5	Contraceptive Prevalence Rate (CPR) Among Currently Married Women by Exposure to Family Planning Media Messages-.....	58
Table 7.6	Trends of Ever Use, Current Use and Drop-Outs of Contraceptive Methods SWRHFPs 2003 and PDHS 2006-07.....	59
	Percentage of Currently Married Women by Status of Use of Contraceptive Methods	
Table 7.7	Trends of Ever Use, Current Use and Drop-Outs of Contraceptive Methods SWRHFPs 2003 and PDHS 2006-07	
	Percentage of Currently Married Women by Status of Use of Contraceptive Methods.....	60
Table 7.8	Percentage of Currently Married Women by Exposure to Media Messages According to Reasons for not Using Contraceptive Methods .....	63

## **FOREWORD**

*Media Campaign now known as Behavioural Change Communication (BCC) Campaign is extremely important component of Population Welfare Programme for motivating people for family planning, providing them information and education. The National Institute of Population Studies (NIPS) is responsible for undertaking applied and inter-disciplinary research in the field of population and development. NIPS undertook the study titled "Impact Evaluation of BCC Campaign of Population Welfare Programme"*

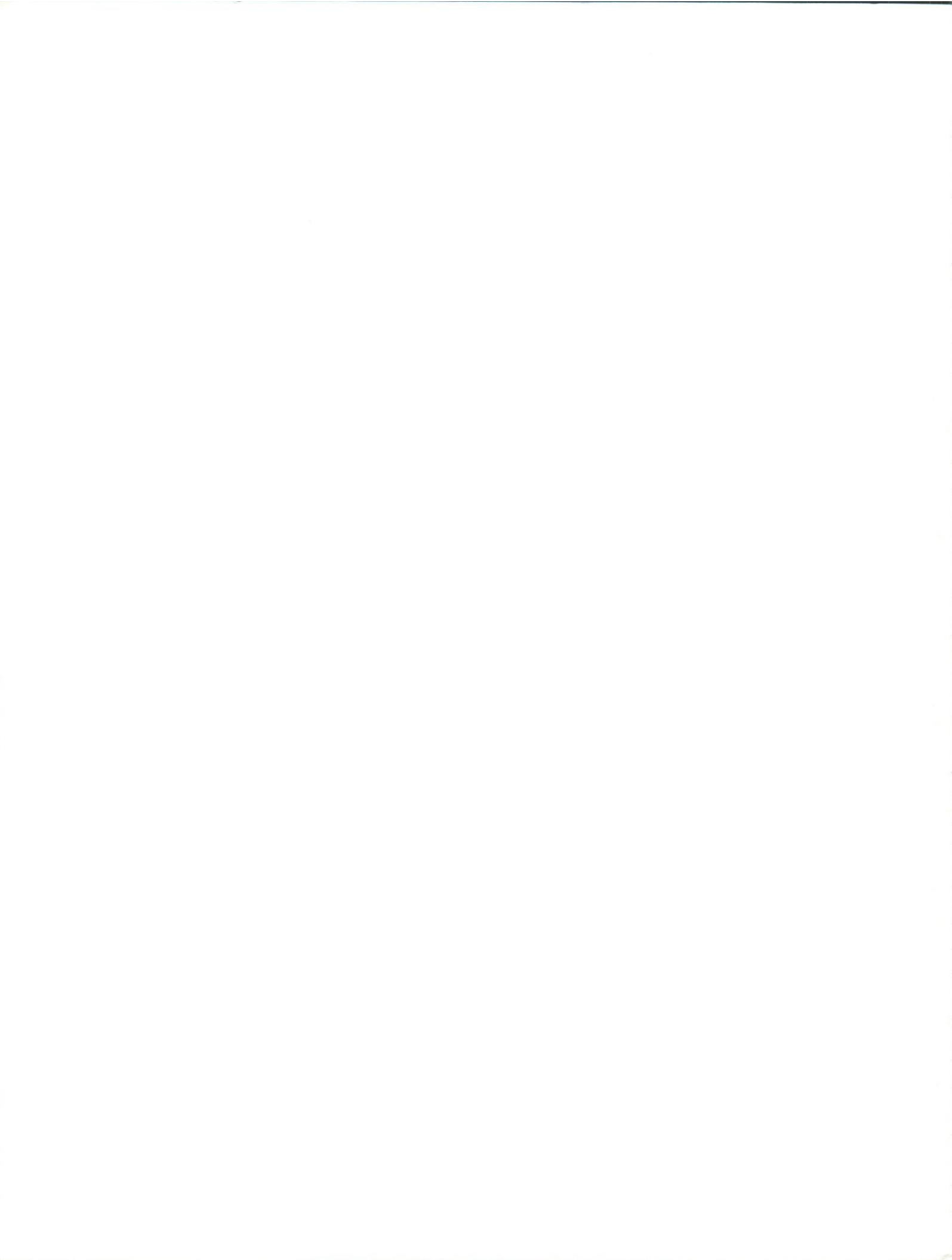
*This report presents in-depth and detailed findings of the study especially of qualitative nature. I hope the results will be useful to policy makers, planners and managers of Population Welfare Programme and those directly and indirectly involved with the programme and BCC campaign. .*

*The difficult task of data collection, in-depth interviews and focus group discussions was efficiently and successfully accomplished by the research team. Dedication and hard work of the interviewers and supervisors in carrying out their assignment in field deserve special mention and appreciation*

*Mr. Amanullah Bhatti, Project Director, Mr. Mehboob Sultan, former Project Director and Mrs. Aysha Sheraz, Principal Investigator of the study deserve special commendation for successfully managing and conducting the study. The contribution of Mr. Faateh ud din Ahmed, Programmer is highly appreciated for handling the data processing.*

*Financial and technical support for the project was provided by the UNFPA. The encouragement and assistance received from UNFPA, Islamabad during the course of implementation of the project is gratefully acknowledged.*

*Dr. Sajid Ahmad  
Executive Director*





## ACKNOWLEDGEMENT

*Media Campaign now known as Behavioural Change Communication (BCC) Campaign of Population Welfare Programme has been fully functional during the Five Year Plan period 2003-08. Ministry of Population Welfare advised National Institute of Population Studies to evaluate the Media BCC Campaign of the Population Welfare Programme towards the end of plan period during 2008. Accordingly the present study was conducted. The study was a quantitative and qualitative mix of research study based on:*

- 1. Pakistan Demographic and Health Survey data 2006-07*
- 2. In-depth Interviews of a sample of service providers;*
- 3. Focus Group Discussions of service receivers all across the country and also including AJK and Northern Areas.*

*Special mention should be made of the services performed by the field staff who really worked hard for the completion of the project in a substantive manner. Significant contribution is made by Mr. Anwar Iqbal who worked as a Coordinator. I am thankful to him for successfully handling the assignments. Ms. Rabia Zafar and Mr. Asif Amin's efforts are also acknowledged who worked laboriously at various stages including training and finalisation of the report. I am especially thankful to Mr. Faateh ud din Ahmed, Programmer NIPS for data processing and handling the work efficiently.*

*I am grateful to Mr. Amanullah Bhatti, Project Director of the study for providing guidance in finalising the report. Mr. Mehboob Sultan, former Project Director, deserve special appreciation for providing guidance during the execution of the project.*

*I am deeply indebted to Mr. Mohammad Ali Afridi, former Executive Director, NIPS who provided all kinds administrative support for the arrangements of finances and execution of the project successfully.*

*I am deeply indebted and highly obliged, and profoundly grateful to the Dr. Sajid Ahmad, Executive Director for his active involvement in the finalisation of the study and for providing administrative support for making the arrangements for disseminating the findings of the report*

*Aysha Sheraz  
Principal Investigator*



## EXECUTIVE SUMMARY

The study "Impact Evaluation of Media Campaign of Population Welfare Programme" was conducted by National Institute of Population Studies (NIPS). The major objectives of the study were to collect data on exposure of general public to family planning media messages, recall value and understanding of media messages. Also to observe effectiveness of media campaign through radio, television, interpersonal communication and print media and to suggest appropriate recommendations for further improvement/continuity of the BCC campaign.

The research design of the present study was mix of quantitative and qualitative research. Quantitative research included in-depth analysis of relevant data from most recent Pakistan Demographic and Health Survey (PDHS) 2006-07 whereas Qualitative Research included Focus Group Discussions (FGDs) and In-depth Interviews.

Qualitative Research was undertaken in 11 areas across the entire country including areas in AJK and Northern Areas. A total number of 44 FGDs were held in four provinces of Pakistan, AJK and Northern Areas. Total sample of participants of all FGDs was 307. Total respondents of sample of In-depth Interview (IDIs) were 20.

The Media communication and advocacy programme during Five Year Plan period 2003-08 was based on Behavioural Change Communication (BCC) strategy. The overall goal was to ensure delivery of correct cultural and easy to understand messages about family planning and reproductive health in order to encourage informed decision making about and adoption of positive family planning reproductive health behaviour. In this regard the messages in the media campaign were blended into educational and recreational programmes, such as: drama series, comedy shows, melodies, panel discussions and interviews on TV, radio and FM.

### **Exposure of General Public to Media Messages**

According to PDHS, overall, 41 percent of currently married women ages 15-49 have seen a family planning message on television and 11 percent have heard a family planning message on radio. According to Media survey participants of FGDs, TV is the most popular medium compared to radio and other media. According to them, their exposure to messages was mainly from TV, radio and LHW (interpersonal

communication). Some of the findings of FGDs regarding television and radio are similar to that of PDHS analysis. Participants considered that television is the best medium followed by radio. However, most of the findings of FGDs brought forward extremely important additional information in respect of media and messages.

### **Understanding of Media Messages**

Among currently married women ages 15-49 in PDHS 2006-7, who had exposure to various family planning messages on radio and television, have understood the specific family planning messages as follows: Limiting the size of family, Use of contraceptive methods, Spacing of Children, Welfare of family, Maternal and Child health, Fewer children means prosperous life.

Findings of FGDs are mostly similar to findings of PDHS analysis. However some are in addition to findings of PDHS analysis. The respondents understood the concept of ads and messages relating to: Small family benefits, Mother and child health; Education; Contraception and Spacing; and Breastfeeding.

The campaign had provided information about small family benefits, good health of mother and child, breastfeeding, spacing, range of contraceptive methods and sources of contraceptive methods.

### **Recall of Messages**

Data regarding recall of messages were obtained through FGDs and In-depth interviews of programme employees. The participants of FGDs stated that the media campaign had convinced and motivated the viewers, listeners and readers about benefits of having fewer children and the financial repercussions of rearing large family. The participants pointed out that ads and messages during and after drama were generally viewed more. The participants liked the style, presentation and the language of TV ads and messages. They suggested that the messages should be conveyed in the form of drama like 'Aahat', 'Jhanjalpura' and 'Be Zuban'. The respondents of In-depth Interviews reported that they were fully aware of the contents of the ads/messages which meant to sensitize the viewers, listeners and readers

### **Effectiveness of Media Messages**

In PDHS, among currently married women age 15-49 who were exposed to a family planning message, a high percentage agreed that the messages, as mentioned were effective and impressive.

According to FGDs, knowledge about one or the other contraceptive method was mainly through television which they perceived was most effective having visual and audio effect. Other important source of information was LHW and FP field staff with whom one could discuss personally in privacy.

The respondents of in-depth interviews, people generally had positive approach towards media campaign of the family planning programme. Messages, if conveyed in the form of a drama highlighting family issues, would be more popular and effective.

### **Contraception**

PDHS 2006-07 revealed, knowledge of currently married women about contraceptive methods is 96 percent, ever use is 49 percent and current use is 30 percent. It is observed that current use of family planning methods is quite low. .

As described by FGDS participants, the knowledge of contraceptive methods was recalled by nearly all the participants of the Focus Group Discussions. Many of the participants of FGDs mentioned that they ever used contraceptive methods but some of them discontinued contraception due to lack of follow up. According to FGDs, an important point to consider is lack of follow up of contraceptive users.

### **Gap Between Knowledge and Ever Use of Modern Contraceptive Methods**

Overall, knowledge of family planning methods is quite high as mentioned in the PDHS report, but ever use is 49 percent depicting a visible gap between the knowledge and practice of contraception.

As regards individual contraceptive methods, it is observed that among currently married women, 82 percent of women have no knowledge of emergency contraception, 68 percent have no knowledge of implants, 59 percent have no knowledge of male sterilisation, 32 percent have no knowledge of condom and 25 percent have no knowledge of IUD. This is high level of lack of knowledge of modern contraceptives and when a high percentage of women does not know a wide range of contraceptive methods, scope of overall ever use of contraception becomes limited. This is one of the obvious reasons of a large gap between overall knowledge and ever use of contraceptive methods. It is extremely important that when we say that knowledge of contraceptive methods is as high as 96 percent, it does not give the true picture regarding overall knowledge of contraceptive methods at national level. True picture is only valid if awareness of each individual contraceptive is also generally high close to that level (96 percent).

### **Impact of Exposure to Family Planning Media Messages on Current Use of Contraception.**

A comparison was made of two groups of currently married women, one having exposure to family planning media messages and other not having exposure to media messages. It is observed that current use among women having exposure to media messages was higher compared to current use among women not having exposure to media messages. It means that, over all, exposure to family planning media messages raised the contraceptive prevalence rate among currently married women in Pakistan. Thus exposure to family planning media messages was effective to a great extent in enhancing contraceptive prevalence rate. And there is strong positive relationship between exposure to family planning media messages and contraceptive prevalence rate.

### **Exposure to Family Planning Media Messages Decreases Non Users and Drop Outs**

A comparison of two groups of currently married women, one woman exposed to family planning media message but not currently using contraception and other not exposed to media messages and also not currently using contraception. It is observed that among women who are exposed to media messages, lower percentage of women are not currently using contraception for fertility related reasons compared to women who are not exposed to media messages. Similarly lower percentage of women are not currently using contraception for method related reasons when exposed to media messages compared to women when not exposed to media messages. It all shows that exposure to media messages has been effective in reducing the percentage of non-users of contraceptive methods.

### **Reasons for Non-Use of Contraceptive Methods and Drop outs**

Participants of FGDs revealed extremely useful information regarding the nature of reasons for non use as follows: Some real reasons like; health concerns, People thought their health will deteriorate with use of contraceptives side effects and opposition from family and some perceived.

Most of the above reasons are very important feedback to Media (BCC) Campaign managers and researchers for improvements in demand and supply sides. The FP ads and messages convinced and motivated the educated viewers and listeners, while the un-educated people were also convinced but some get ready to pass harsh words and quarrel if someone asks them to use contraception and stop producing children.

### **Current Media Campaign**

The majority of respondents of in-depth interviews appreciated the current media campaign launched through TV, radio and print media. The campaign had created awareness among clients about benefits of small family and consequences of rearing large number of children. The viewers/listeners/readers usually got awareness from the media and then paid visits to the service providers where they were fully sensitized and provided contraceptive method according to their own choice.

Most of the respondents liked the time and duration because, in their view, people mostly are free at night and watch/listen drama, shows and ads and messages at prime time. They did not want to change duration. Employees said that the ads/messages were very effective and the viewers/listeners/readers were aware about problems like food, health, education, transportation etc. Regarding actors /anchor persons appearing in TV/media campaign of PWP, all of the respondents approved them to continue.

The respondents of IDI's mostly liked the family planning ads and messages since their purpose is to sensitize the viewers/listeners about small family norm, awareness and use about contraceptive methods and education of children.

According to the participants of FGDs, electronic media campaign is effective and it should be continued. The format and contents of ads and messages are relevant and to the point. Ultimately, people would understand the messages and get convinced and motivated.

The participants mostly agreed with the current timings and duration of ads/messages. According to them, time was suitable to most of the people including males, females and children as they were free after days work and jointly watched television programmes, dramas and news at night. According to participants, people are in favour of 'dramas' and 'plays'.

### **SUGGESTIONS AND RECOMMENDATIONS BY COMMUNITY AND PWP EMPLOYEES:**

The suggestion given by community and employees were:

National/local / cable TV channels having larger viewer-ship in regional/local languages e.g. ARY, GEO, AAJ, Ali Baba, Star Plus, PTV-Home/National/Khyber should be involved; All advertisements to be designed in local regional languages and especially Seraiki, Punjabi, Potohari and Kashmiri besides Urdu.

Politicians, religious scholars, film/TV actors, singers, players as well as from local personalities and influential persons should be involved. FM radio stations including mobile phones to be accessed. Ads/messages should be in drama form and repeated. The role of mother-in-law, husband and wife should be highlighted in drama. They should be within cultural limits. Sign boards/ neon signs should be arranged at highways, major crossings, inter changes and within cities.

## **Conclusions**

Because of media campaign, that in spite of the opposition from the few uneducated people and religious hardliners, the majority of the masses are now aware of socio-economic problems of nourishing large number of children. They are now prepared to have less number of children so that they could provide them better education, health, food and clothing. There is need to reduce side effects, clear misconceptions and make positive attitude of people. People need professional help to know what is right.

The satisfied clients play an effective role in convincing and motivating others. Our society is male dominated and therefore males also need to be persuaded and convinced. Male involvement should be enhanced. Gynaecologists should be involved to sensitize the viewers. Information on side-effects, remedial measures along with a list of service outlets/providers with phone numbers should be displayed. Interviews/talk shows should be arranged with well known/famous/satisfied client. Comedy shows involving local community should be arranged. Open debates, questionnaire discussion and talk shows for Ulemas should be arranged on TV. Ads/messages should be telecasted during news, sports, talk shows, which they like more to watch/listen. Ads comprising of contents explaining that contraceptives do not effect male masculinity. For Women more ads/messages should be released in the morning and at noon when women are free from cooking. Besides range of contraceptive methods, the family issues like planned family, MCH, breastfeeding, spacing, complications of early marriage, child birth in old age and side effects of contraceptives and remedial measures should be included and discussed.



### INTRODUCTION AND BACKGROUND

Pakistan has an estimated population of 160 million in 2008 and that is increasing at the rate of 1.8 percent annually. Presently Pakistan is sixth largest country in the World after China, India, USA, Indonesia and Brazil.

Efforts to control rapid population growth were initiated in 1953 in private sector by voluntary organizations. However in 1960, during Second Five Year Plan period 1960-65, Government of Pakistan (GOP) also commenced Population Welfare Programme under the Ministry of Health. The programme was mainly a service delivery programme and it provided family planning services through health outlets.

During Third Five Year Plan period 1965-70, Population Welfare Programme was given special importance. As a result, in July 1965, an independent autonomous body was set up in public sector and large scale Family Planning Programme came into existence. That programme established large number of Family Welfare Centres all across the country.

During Fourth Five Year Plan period 1970-75, Population Welfare Programme was redesigned. A strategy of Continuous Motivation System (CMS) was implemented. Major stress was laid down on motivation for family planning and interpersonal communication at doorstep. Motivation was considered a continuous process.

The first three years 1970-73 of the plan period suffered from financial inadequacies and severe political disturbance in formerly East Pakistan. Subsequently India attacked East Pakistan and there was a war between India and Pakistan in 1971 that resulted in fall of East Pakistan. So during 1970-73, no development activities could be undertaken.

The activities were revived during 1973-74. Five year plan was rolled over from 1970-75 to 1973-78 and during the revised period CMS was fully implemented.

During 1977-83, publicity and motivational activities were suspended due to socio-political reasons.. However important changes continued throughout the 1980s. Non-Government Organisations (NGOs) were encouraged to participate in the programme, and an NGO Co-ordination Council (NGOCC) was established. Subsequently the NGOCC was renamed as the National Trust for Population Welfare (NATPOW) [7].

Sixth Five Year Plan period 1983-88 was implemented in 1983. Family Welfare Programme adopted a new strategy that aimed to shift from the uni-purpose family planning approach to a multi-sectoral and multi-dimensional approach. For better acceptance of family planning, participation of all relevant government departments, the private sector and NGOs were encouraged. IEC activities were revived [3]. During this plan period, apart from other developmental activities, a Social Marketing of Contraceptives (SMC) programme was launched by M/s Woodward Limited and under this programme 54,000 Contraceptive Distribution Points were established. National Institute of Population Studies was also established during sixth plan period 1983-88.

During the Seventh Five Year Plan period 1988-93, emphasis of the population welfare programme was to bring about a behavioural change in favour of small family norms through voluntary birth intervals, care of pregnancy and safe delivery. Information, Education and Communication (IEC) was included as an integral part of Population Welfare Programme. Mass media continued projecting six themes:

- Breastfeeding;
- Lactation and weaning;
- Late marriage;
- Responsible parenthood;
- Status of women;
- Health of mother and child; and nutritional needs.

During this plan period mobile service units (MSUs) were added to the programme to increase coverage. A total number of 130 MSUs were established by the end of plan period [2].

Efforts to increase coverage continued in the Eight Five Year Plan period (1993-98) with the establishment of Village Based Family Planning Worker (VBFPW) programme. About 12,000 VBFPWs were recruited during the plan period. [7]

The programme during the 9th Five Year Plan period 1998-2003 was based on positive elements of the strategies of the previous plans, ensuring continuity and consolidation of gains [21]. During this plan period, Ministry of Population Welfare also launched Male Village Based Family Planning Workers (MVBFPWs) Scheme and initially a total number of 787 Male Workers were recruited on pilot basis.

The current Population Welfare Programme during Five Year Plan period 2003-08, is a continuation of the on-going social development Endeavour, within the framework of nationally accepted population and development policies. The current programme focuses on strengthening outreach through enhanced and improved service delivery strategy with special attention to rural areas.

Currently service delivery infrastructure includes:

Family Welfare Centres	2739
Reproductive Health Services (RHSs) A Centres	176
Mobile Service Units	292
Male Mobilizers	4071

The communication and advocacy programme during the current plan period 2003-08 is based on Behavioural Change Communication (BCC) strategy. This strategy has been especially designed with the help of local influential, religious and opinion leaders, policy makers and the media. This BCC campaign aims to use mass media extensively for creating awareness with focus on increasing visibility of service delivery points [21].

## **1.1 EVALUATION OF MEDIA CAMPAIGN**

When IEC component had been functional for some period of time, need for evaluation of media campaign was also felt. National Institute of Population Studies (NIPS) that is a premier research and training institution of Pakistan in the field of population and development including reproductive health and family planning, previously initiated various impact evaluation studies on IEC component of Population Welfare Programme as for example:

- Evaluation of Communication Component of Population Welfare Programme of Pakistan, 1988;
- Effectiveness of Media Messages in Promoting Family Planning Programme in Pakistan;
- Evaluation of Interpersonal Communication at Family Welfare Centres of Population Welfare Programme.

Each study had its own strategic direction and provided a wealth of data about various media messages, exposure to media messages and impact of messages for creating awareness regarding family planning and reproductive health and enhancing contraceptive prevalence.

The family planning knowledge is now nearly universal but still there is gap between knowledge and practice. This study aims to explore the underlying reasons with special reference to media messages and their effectiveness.

## **1.2 JUSTIFICATION OF THE STUDY**

All the previous studies of evaluation of IEC component were quantitative research studies whereas present study is a quantitative and qualitative mix of research study. Quantitative research used data of most recent Pakistan Demographic and Health Survey (PDHS) 1996-07 conducted by NIPS whereas qualitative research was based on:

- 1) Findings of a number of Focus Group Discussions that were held at various districts all across the country and also at AJK and at Northern Areas;

- 2) Findings of in-depth interviews of sampled employees of Population Welfare Programme.

National Institute of Population Studies (NIPS) collected all the data in line with objectives of the study as mentioned in the following chapter and findings are presented. Also NIPS offers some suggestions and recommendations to the Ministry of Population Welfare and to decision makers for consideration towards further improvement of the BCC campaign of the programme.



### **METHODOLOGY AND RESEARCH DESIGN**

This chapter describes the methodology and research design of the study, in particular the objectives, research design, implementation of focus group discussions, carrying out of in-depth interviews, technical advisory committee, study team, training of field staff, field work and data analysis procedures.

#### **2.1 OBJECTIVES**

The principal objectives of the study were:

- i. To observe exposure of general public to media messages. (Source PDHS).
- ii. To study exposure to, clarity and understanding of the messages.
- iii. To study recall value and effectiveness of the media campaign (Radio/TV/Interpersonal).
- iv. To study the effectiveness of the channels used.
- v. To observe the underlying reasons of non-use of contraception.
- vi. To suggest appropriate recommendations for further improvement/continuity of the Media campaign.

#### **2.2 RESEARCH DESIGN**

The research design of the present study is mix of quantitative and qualitative research:

##### **2.2.1. Quantitative Research**

Quantitative research included in-depth analysis of relevant data from most recent Pakistan Demographic and Health Survey (PDHS) 2006-07 conducted by National Institute of Populations Studies (NIPS).

The survey report of PDHS 2006-07 disseminates a wealth of information on various topics of health, family planning, contraception, reproductive health, fertility, mortality and nutrition. The report also includes data on

exposure, understanding and effectiveness of media messages on family planning.

### **2.2.2 Qualitative Research:**

Qualitative Research included:

- a. Focus Group Discussions
- b. In-depth Interviews

Qualitative Research was undertaken in 11 areas across the entire country. The following areas were selected:

- Punjab: Rawalpindi (upper Punjab), Sialkot (central Punjab) and Muzaffargarh (lower Punjab);
- Sindh: Larkana and Mirpur Khas;
- NWFP - Abbotabad and Swabi;
- Balochistan - Jafarabad and Zhob;
- Azad Jammu and Kashmir (AJK): Rawalakot; and
- Northern Areas: - Sakardu.

The qualitative research was used to know the attitudinal and behavioural aspects of participants of FGDs regarding media messages.

Participants of qualitative study were married males and females age 15-44. Purposive sampling was drawn to cover representation of all areas.

Stratification was done by sex and by educated and not educated.

## **2.3 STUDY TEAM**

The study team comprised of a Project Director (PD), a Principal Investigator (PI), one Coordinator and one data entry operator (DEO). The field staff consisted of four teams, each having two male and two female researchers (Annexure 1).

## **2.4 IMPLEMENTATION OF FOCUS GROUP DISCUSSIONS (FGDs)**

Focus Group Discussion is a qualitative research technique utilized in social sciences research. A small group of informants (eight to ten people) meet at a certain



place to discuss and talk freely and spontaneously about issues considered important for investigation. Moderator guides this group of people, while the note taker records the minutes of discussions.

A total number of 44 FGDs were held in 11 selected areas. Four FGDs were arranged at each area; two for males and two for females.

FDGs were separately held for males and females and for educated and uneducated.

A guide was designed and used for conducting FGDs.

The guide included the following topics:

- Personnel characteristics;
- Place of residence;
- Knowledge about family planning;
- Understanding of the messages;
- Value of the campaign;
- Effectiveness of the channels used;
- Change in behavior and attitudes;
- Practice of family planning;
- Reasons for not practicing family planning; and
- Suggestions and recommendations.

Guide for FGDs was designed to know whether the participants of the FGDs, watched TV or listened radio, what type of programs they watched/listened, whether they had ever seen/heard any family planning related ads and messages, how much these ads and messages convinced/motivated the viewers/listeners, how did people/relatives behave with family planning users, and what did they suggest to improve the media campaign of the PWP.

FGDs were conducted with a view to supplement previous information/s, fill in the information gaps and to have in-depth insight on the subject.

## **2.5 IN-DEPTH INTERVIEWS OF EMPLOYEES OF POPULATION WELFARE PROGRAMME**

The purpose of conducting in-depth interviews was to observe individual behavior and practices of the programme workers and to understand community practices and their attitudes towards IEC messages.

In-depth interviews were conducted of the following staff of Population Welfare Programme:

- District Population Welfare officers (DPWOs);
- Doctors;
- Assistant District Population Welfare Officers (ADPWOs);
- Tehsil Population Welfare Officers (TPWOs);
- Family Welfare Workers (FWWs);
- Family Welfare Assistants (FWAs); and
- IEC Assistants

The main objective of conducting in-depth interviews of employees of Population Welfare Programme was to solicit their view point as they have direct contact with public and the family planning clients and thus they have awareness about the attitudes of public and the family planning clients towards the Population Welfare Programme and the media campaign launched by the programme and they can provide useful information regarding various aspects of media messages.

The employees were selected from each area to get inside view of the Population Welfare programme. Most of the DPWOs were well qualified and had masters degrees.

A questionnaire was designed for in-depth Interviews to collect data from selected staff. The questionnaire covered the following topics:

- Personnel characteristics such as age, education;

- Place of residence and socio economic status;
- Knowledge about family planning methods;
- Use of contraceptive methods;
- Knowledge about reproductive health;
- Knowledge about family planning messages on Radio and TV and discussion about family planning messages;
- Role in distribution and promotion of contraceptives through media messages;
- Accessibility of F.P services;
- Value of the campaign;
- Understanding of the messages;
- Effectiveness of the channels used;
- Change in behavior, attitudes and practice of family planning;
- Problems faced in life; and
- Suggestions and recommendations.

## **2.6 COMMUNITY PROFILE**

A Community Profile was developed at each sampled point wherein data pertaining to community was collected. Structured questionnaire was used to collect data regarding availability and accessibility of various health and reproductive health facilities such as:

- Number of hospitals;
- Number of Basic Health Units (BHUs), Reproductive Health Services Centres (RHSCs), Family Welfare Centres (FWCs), and Other Clinics;
- Number of NGOs;
- Existence of and accessibility to the centers; and
- Availability of health services and their accessibility.

## **2.7 TECHNICAL ADVISORY COMMITTEE**

A Technical Advisory Committee (TAC) was constituted that comprised of professionals from NIPS and various other organizations. The committee observed, discussed and finalized the proposal, questionnaire for in-depth interviews and guide for

FGDs. The Committee supported the study and recommended to launch the study as it would provide very useful information on continuity of contraceptive use especially the effectiveness of messages for using modern methods and reasons for non-use.

## **2.8 TRAINING**

Five days training programme was held for the field staff. The training focused on study objectives, qualitative research methods and techniques in general, sampling procedures, FGD guide and in-depth interview questionnaire. Training covered the following topics:

- Purpose, outline and objectives of the research;
- Quantitative and qualitative research methods and empirical examples of linking qualitative and quantitative data in projects;
- Importance of family planning, contraceptive methods and family planning programme in Pakistan;
- Explanation and discussion of terms used;
- Explanation of the focus group discussion and its guide;
- Structured questionnaire for in-depth interview;
- Demonstration of focus group discussion and in-depth interviews;
- Discussion on possible field problems and biases in the areas; and
- Practice of conducting FGD and in-depth interview.

## **2.9 FIELD WORK**

The fieldwork was conducted in 11 sampled areas. Four teams of field staff were constituted to collect data. Each team comprised of one male supervisor, one male researcher and two female researchers. Each team was assigned the sampled areas for data collection pertaining to In-depth interviews, FGDs and community profile at sampled areas. Principal Investigator undertook spot checks to observe the performance of field research staff. Coordinator of the study team visited the areas and made the arrangement for stay of the teams and facilitated the teams to commence work. He also validated the community profile. The fieldwork was completed in seven weeks.

## **2.10 DATA ANALYSIS PROCEDURES**

The 44 focus group discussions and 20 in-depth interviews were analyzed through complete transcripts, with an analysis framework. The IDIs and FGDs were conducted in the local languages. The verbatim quotes were translated into English and included in the report. The information gathered through the In-depth Interviews (IDIs) was also processed and analyzed. As the responses were free flowing, therefore, the flexibility of coding multiple responses for each aspect were maintained not to loose any information. Analysis was done keeping in view qualitative nature of data and importance was given to the nature of information emerging from the transcriptions.



**SOCIO-DEMOGRAPHIC CHARACTERISTICS OF PARTICIPANTS OF FOCUS GROUP DISCUSSIONS (FGDS) AND RESPONDENTS OF IN-DEPTH INTERVIEWS (IDIS)**

This chapter displays the qualitative samples of participants of FGDS and respondents of In-depth interviews (IDIs). Also this chapter presents the socio-demographic characteristics of qualitative sampled participants of FGDS and sampled employees of population welfare programme for in-depth interviews.

**3.1 SAMPLE OF PARTICIPANTS OF FGDS**

Table 3.1 shows qualitative sample of participants of Focus Group Discussions.

**TABLE 3.1  
SAMPLE DISTRIBUTION OF FGD PARTICIPANTS  
BY PROVINCES, NORTHERN AREAS AND AJK ACCORDING TO DISTRICTS OF  
PAKISTAN**

Sample Points		Number of Participants	Number of FGDs
Province	Sampled Districts		
1. Punjab	1. Rawalpindi	27	4
	2. Sialkot	29	4
	3. Muzaffargarh	26	4
2. Sindh	4. Larkana	27	4
	5. Mirpur Khas	25	4
3. NWFP	6. Abbotabad	30	4
	7. Swabi	28	4
4. Balochistan	8. Jafarabad	38	4
	9. Zhob	30	4
5. AJK	10. Rawalakot	19	4
6. Northern Areas	11. Sakardu	28	4
Total:	11 Districts	307	44

A total number of 44 FGDs were held in four provinces of Pakistan, AJK and Northern Areas. Total sample of participants of all FGDs was 307. Highest number of participants were from Punjab (82) followed by Balochistan (68), NWFP (58), Sindh (52), AJK (19) and Northern Areas (28). Total Number of participants were 307.

### 3.2 SAMPLE OF EMPLOYEES OF POPULATION WELFARE PROGRAMME FOR IN-DEPTH INTERVIEWS

Table 3.2 displays the qualitative sample of employees of Population Welfare Programme.

**TABLE 3.2**  
**SAMPLE DISTRIBUTION OF EMPLOYEES OF POPULATION WELFARE PROGRAMME FOR IN-DEPTH INTERVIEWS**

	Doctors	DPWOs	ADPWOs/TPWOs	FWWs/ FWAs	Total
Punjab	2	2	1	1	6
Sindh		1	1	2	4
NWFP		1	1		2
Balochistan		1		3	4
Northern Areas		1		1	2
AJK		1		1	2
Total	2	7	3	8	20

Note: 1. DPWO = District Population Welfare Officer;  
2. ADPWO = Assistant District Population Welfare Officer;  
3. TPWO = Tehsil Population Welfare Officer;  
4. FWW = Family Welfare Worker  
5. FWA = Family Welfare Assistant.

Total respondents of sample of In-depth Interview IDIs were 20. Six employees were from Punjab, 4 were from Sindh, 4 from Balochistan, 2 from NWFP, 2 from AJK and 2 from Northern Areas.



### 3.3 AGE DISTRIBUTION OF FGD PARTICIPANTS

Table 3.3 indicates that highest percentages of participants were in age groups 25-29 (40 percent) and 30-34 (31 percent) whereas participants in age groups 15-24 and 35-44 were 14 and 15 percent respectively.

**TABLE 3.3  
AGE GROUPS OF FGD PARTICIPANTS**

Code	Age Group	Number	Percent
1	15-24	42	13.7
2	25-29	123	40.1
3	30-34	95	30.9
4	35-44	47	15.3
Total		307	100.0

### 3.4 GENDER OF PARTICIPANTS OF FGDS

Table 3.4 indicates that 46 percent of participants were males and 54 percent were females.

**TABLE 3.4  
GENDER OF FDG PARTICIPANTS**

Code	Gender	Number	Percent
1	Male	141	45.9
2	Female	166	54.1
	Total	307	100.0

Separate FGDs were held for male and female FGD participants.

### 3.5 EDUCATED AND UNEDUCATED PARTICIPANTS

It was the policy of the research investigators to have the representation of educated and un-educated participants for FGDs. Separate FGDs were held for educated participants and un-educated participants.

Table 3.5 shows that slightly more than half of participants (53 percent) were educated and rest 47 percent were not educated. According to Pakistan Economic Survey 07-08, the overall literacy rate in Pakistan (age 10 years and above) is 55 percent. So sample figures are in conformity with overall national literacy levels.

**TABLE 3.5**  
**EDUCATED AND UNEDUCATED FGD PARTICIPANTS**

Code	Categories	Number	Percent
1	Educated	164	53.4
2	Not educated	143	46.6
	Total	307	100.0

### **3.6 OCCUPATION OF FGD PARTICIPANTS**

Data indicate that, among 166 female FDG participants, 128 (77 percent) were housewives. Rest 38 females were employed.

Among those participants who were employed (141 males and 38 females), prominent occupation were agriculture (17 percent), laborer (15 percent), shopkeeper (15 percent), teacher (11 percent), stitching work (11 percent) and health worker (7 percent). A very nominal percentage of participants had other miscellaneous occupations.

**TABLE 3.6  
OCCUPATION OF FGD PARTICIPANTS**

Code	Occupation	Number	Percent
1	Agriculture	31	17.3
2	Laborer	27	15.1
3	Shopkeeper	26	14.5
4	Stitching work	19	10.6
5	Teacher	20	11.2
6	Health worker	12	6.7
7	Assistant	11	6.1
8	Business	8	4.5
9	Govt. servant	6	3.4
10	Others	19	10.6
Total		179	100.0

### 3.7 CHILDREN OF FGD PARTICIPANTS

Table 3.7 elucidates data regarding children of FGD participants. It is observed that 14 percent participants had no children so far. One third participants (31 percent) had one or two children. Forty four percent had 3 or 4 children whereas 11 percent had children 5 ore more. It is observed that more than half (55 percent) participants were not practicing small family norm i.e. "Two children are the best" as they already had more than 2 children.

**TABLE 3.7  
CHILDREN OF FGD PARTICIPANTS**

Code	Children	Number	Percent
1	0	43	14.0
2	1-2	96	31.3
3	3-4	134	43.6
4	5+	34	11.1
	Total	307	100.0

### 3.8 CURRENT USERS OF CONTRACEPTIVE METHODS

Table 3.8 describes that more than half of participants (58 percent) are using contraception. It is cheering that this figure is higher compared to national figure of current users (34 percent).

**TABLE 3.8  
CURRENT USERS OF CONTRACEPTIVE METHODS**

Code	Current Users	Number	Percent
1	Yes	178	58.0
2	No	129	42.0
N	Total	307	100.0

A detailed table regarding FGD participants is added at Annexure 2.

### 3.9 SOME SOCIO-DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS OF IN-DEPTH INTERVIEWS (IDIs)

Table 3.9 reveals the selected socio-demographic characteristics of respondents of in-depth interviews.

**TABLE 3.9  
SOCIO-DEMOGRAPHIC CHARACTERISTICS OF  
EMPLOYEES FOR IN-DEPTH INTERVIEW**

	Doctor	DPWO	ADPWO/TPWO	FWW/ FWA	Total
<b>GENDER</b>					
Male	1	6	3	1	11
Female	1	1	0	7	9
<b>EDUCATION</b>					
Metric				2	2
FA				3	3
BA			1	2	3
MA	2	7	2	1	12
<b>CONTRACEPTION</b>					
Yes	2	4	2	4	12
No		3	1	4	8
N	2	7	3	8	20

A detailed table regarding respondents of IDIs is added at Annexure 3.

### REVIEW OF BEHAVIOUR CHANGE COMMUNICATION (BCC) CAMPAIGN

Role of IEC is most important in creating awareness for small family norm and spacing of children.

During 1965-70, the Family Welfare Programme was mainly a service delivery programme. However publicity component was also added in the programme at district level. District officers were designated as District Publicity cum Executive Officers (DPCEOs). Extensive use of Audio-Visual Vans was made to cover rural areas. Family Planning Officers moved from village to village, made publicity through these vans, arranged group meetings and distributed contraceptives.

During the period 1970-1983, there was a set back to publicity activities because of the following reasons:

- Programme suffered from financial inadequacies during 1970-74,
- Severe political disturbances;
- 1971 war with India;
- Fall of East Pakistan and after effects;
- Mass Media promotion of family planning was suspended during the period 1977-83.

After a long spell of suspension, IEC activities were revived in 1983 and during 1983-88 plan period a large variety of family planning ads and messages were initiated through multimedia [3].

Main sources of multimedia messages generally included:

- Television: Dramas, Plays, Jingles, Poems/Songs, Discussions/Forums, Ads and Telops;
- Radio: Dramas, Jingles, Poems/Songs, Discussions/Forums, and Advertisements;
- Interpersonal Communications;

- Newspapers/Magazines: Articles and Advertisements;
- Printed material: Posters, Charts, Calendars, Pamphlets, and Leaflets;
- Other printed material: Books, Novels and Short story books;
- Cinema: Jingles and Slides;
- Stage Shows;
- Audio Visual Vans: Documentary Films and public meetings;
- Fixed Publicity: Billboards, Bus panels and Neo-signs;
- Seminars and workshops;
- Public meetings and gatherings; and
- Traditional media: Exhibitions.

The jingles (in Urdu) relating to family planning conveyed the following messages on televisions and radio:

- Small family and girl's education;
- Healthy children;
- Spacing of children and mother's health;
- Two children, with health and education;
- Suitable age at marriage; and
- Emphasis on small family and MCH education. [3]

The programs from radio stations included 'Ik teh ik gyaran' [3].

Newspaper advertisements were carried through almost all the national dailies along with photographs which projected the following messages in Urdu:

- If one has planned and has two children, one can afford to provide health and education facilities as well as a house and a tractor to the family;
- The only way to come out of difficulties is to have up to two children;
- Basic needs are satisfied only by having small families;
- Small family ensures better facilities;
- Four years spacing ensures happiness;
- Small family is a happy family even with a smaller income;

- Small family makes the life easier; and
- Two children bring a thousand joys.

During Seventh Five Year Plan period 1988-93, IEC component of family planning programme was expanded and strengthened and made an integral part of the Population Welfare Programme. By that time a large quantity of IEC material had been produced over past more than two decades. National Institute of Population Studies made efforts to collect all the IEC material relating to family welfare and prepared an inventory with categorization, critical reviews and assessments of their current validity. The inventory was printed and published [5].

During early 1990, it was observed by the members of the Planning Committee that media messages of the programme did not take into consideration the socio-economic and cultural aspects of the target population and thus could not serve the purpose of motivating eligible couples to adopt contraception. The Ministry of Population Welfare paid due attention to this aspect and designed Eighth Five Year Plan 1993-98 accordingly [18].

During Eighth Five Year Plan period 1993-98, efforts were made to produce appropriate and effective media messages. The messages were disseminated through radio, television and print media. The plan also emphasized the importance of interpersonal communication as a means of generating demand.

During the plan period, three television plays on the theme of population welfare were telecast. These included:

- 1) 'Sidraan';
- 2) 'Baithak' ; and
- 3) 'Ghar Bhati' .

The plays 'Sidraan' and 'Bhithak' were telecast in Punjabi while 'Ghar Bhati' was telecast in Sindhi language.

The main messages perceived to have been conveyed through these plays were"

- Limiting the family;
- Higher age at marriage;
- Spacing;
- Health of mother and child; and
- Women need education. [18]

In addition to plays, a large number of ads relating to family planning were disseminated through television and radio [18].

The programme during the 9th Five Year Plan period 1998-2003 was based on positive elements of the strategies of the previous plans, ensuring continuity and consolidation of gains [20].

The communication and advocacy programme during Five Year Plan period 2003-08 is based on Behavioural Change Communication (BCC) strategy. The overall goal is to ensure delivery of correct cultural and easy to understand messages about family planning and reproductive health in order to encourage informed decision making about and adoption of positive family planning reproductive health behavior. In this regard the message in the media campaign is blended into educational and recreational programs, such as: drama series, comedy shows, melodies, panel discussions and interviews on TV, radio and FM. Also seminars and workshops, meet the press sessions, and orientation programs are arranged for policy makers and youth. In addition ground activities like musical concerts and street theatres have also been launched to have direct contact with the masses.

The communication strategy has been especially designed with the help of local influential, religious and opinion leaders, policy makers and the media. This campaign aims to use mass media extensively for creating awareness with focus on increasing visibility of service delivery points. Press is playing its part by providing coverage in various News Papers through advertisements, editorials and special articles to create



awareness in the community about family planning. Printed materials such as pamphlets, leaflets, brochures and reproductive health handbooks for doctors are being distributed to the subordinate units for onward distribution. Leaflets on family planning and Islam, Family Welfare Centre addresses and satellite camps schedule are also being produced and distributed. Audio-visual shows have been arranged in rural areas at all districts.

It is obvious that a well designed family planning communication campaign has positive impact on enhancing of contraceptive use. The Ministry of Population Welfare (MoPW) develops and releases the media campaign to promote the Population Welfare Program and to bring attitudinal and behavior change as part of its Advocacy and Communication Strategy,. The Media campaign of the MoPW was conducted by three private media production agencies working on the panel of MoPW for the contract period 2005 to 2007

Table 4.1 shows the jingles and telops that were telecasted on television and radio towards behavioral change through ideas for changing deep-rooted traditional attitudes. Radio spots of different duration were also broadcast daily.

**TABLE 4.1  
DISSEMINATION OF FAMILY PLANNING MESSAGES  
ON TELEVISION AND RADIO**

Serial	Person	Message
1	Khayal Muhammed	Small family easy life
2	Wasim Akram	Small family has access to everything and happy life
3	Usman Pirzada	Both husband and wife should talk about small family norm
4	Arif Lohar	To make life beautiful, have less number of children so that family has proper facilities of life
5	Begum Mahmud	Me and my husband together decided to have less number of children and give them happy and prosperous life
6	Anwer Maqsd	Due to large number of children we can't enjoy all facilities of life
7	Faryal Gohar	Parents in every home have their children's responsibility. So they should take care of them
8	Atta Ullah Isa Khailwi	Consider your responsibility and have happy family by adopting small family norm
9	Wasim Abbass	In any field it is necessary that women should be healthy so that they can give birth to healthy children to become healthy player

**TABLE 4.2  
ADVERTISEMENTS OF FAMILY PLANNING MESSAGES THROUGH NATIONAL  
AND REGIONAL NEWSPAPERS**

Serial	Title of Message	Message
1	Beti	Daughter is the light of parent's eyes, if she is wise she can help her husband as well as her parents.
2	Lori	Child should be born after the first child is school going. Appropriate spacing is necessary.
3	Salah mashwara	Think about tomorrow, it is wise to take responsibility
4	Ghar wali	With spacing, health of mother can improve.
5	Tarbiat	Have a family according to your resources (a girl asks: "Do you have books and medicine for me").
6	Population of Pakistan among World countries	Pakistan is sixth most populous country of the World according to World Population and Development Report
7	Ad	Family Welfare Centre gives you guidance about less children, more happiness and less responsibilities.

Table 4.3 shows various ads that were published in daily newspapers during 2004-2006.

**TABLE 4.3**  
**ADS PUBLISHED IN DAILY NEWS PAPERS DURING THE PERIOD**  
**FROM JANUARY 2004 TO DECEMBER 2006**

S. No.	NEWS PAPER NAME	ADVERTISEMENT	YEAR
1	Daily "Jang" Rawalpindi	Ham Gayin Aap Kay Geet	2004
2	Daily "Jinnah" Islamabad	Kal Ki Fikar Aaj Hi Kar	2004
3	Daily "Kahbrain" Islamabad	Bachy Ka Haq Maa Ka Farz	2004
4	Daily "Times" Islamabad	The Spirit is Within	2004
5	Daily "Dawn" Karachi	Taste Success	2004
6	Daily "Times" Sindh	Sensible Nation Progressing Country	2004
7	Daily "observer" Islamabad	All I need is Love and care	2005
8	Daily "Jang" Rawalpindi	Itafaq Say Roshan Mustaqbil	2005
9	Daily "Jang" Rawalpindi	Khushal Daur Ki Janib Rawan Dawan	2005
10	Daily "The News" Rawalpindi	Stronger State for a prosperous Nation	2005
11	Daily "Dawn" Karachi"	All I Need is Love and Care	2005
12	Daily "Pakistan Observer" Islamabad	Poverty: a Population problem	2005
13	Daily "Pakistan" Islamabad	Beti Jo Ho Parhi Likhi Toh Sara Ghar Hai Sukhi	2006
14	Daily "Nawa -e-Waqt" Islamabad	Hamesha Chardar Dakh Kar Paoun Philaou	2006
15	Daily "Times" Islamabad	Before its late	2006
16	Daily "Din" Islamabad	Kehain Dair Na Ho Jay	2006
17	Daily "Pakistan Observer"	Young People	2006
18	Daily "Times" Islamabad	Without Family Planning, Pakistan would have had 50 million more mouths to feed today	2006



### EXPOSURE AND UNDERSTANDING OF MEDIA MESSAGES

This chapter presents data regarding exposure of people to media messages of family planning programme and understanding of messages. The findings are based on:

- 1) Pakistan Demographic and Health Survey (PDHS) 2006-07 data;
- 2) Focus Group Discussions (FGDs); and
- 3) In-Depth Interviews (IDIs). of service providers.

#### 5.1 EXPOSURE OF COMMUNITY TO MEDIA MESSAGES

Exposure of community or of a specific group of population to media messages is "The percentage of specific population who have heard, seen or read a media message on the radio, television or in any print media during the last couple of months".

Information on the level of exposure to various types of media messages facilitates policy makers as well as strategy makers to improve media messages for various target populations.

Different tables from the PDHS 2006-07 relating to exposure of currently married women to media messages and understanding of messages are presented for quantitative information.

Findings of FGDs and In-depth Interviews are presented to observe relevant qualitative information.

#### PDHS 2006-07 DATA

Target population of PDHS relating to exposure to family planning media messages was "Currently Married Women aged 15-49".

Table 5.1 is drawn from PDHS 2006-07 report on exposure of currently married women to family planning messages on radio and television.

**TABLE 5.1**  
**EXPOSURE TO FAMILY PLANNING MESSAGES**

(Replica of PDHS table 5.14 on Exposure to Family Planning Messages)  
Percentage of Currently Married Women Age 15-49 Who Heard or Saw a Family Planning Message on the Radio or Television in the Month Preceding the Survey

Background characteristic	Radio	Television	Neither of these media sources	Number
<b>Age</b>				
15-19	8.3	30.1	66.9	559
20-24	12.5	43.6	53.6	1,463
25-29	11.8	44.6	52.7	1,965
30-34	9.7	41.1	56.7	1,729
35-39	10.1	40.5	57.1	1,565
40-44	11.3	43.0	55.4	1,208
45-49	10.5	37.2	60.2	1,067
<b>Residence</b>				
Urban	10.2	57.9	41.2	3,191
Rural	11.1	33.0	63.9	6,365
<b>Province</b>				
Punjab	12.1	48.5	49.2	5,495
Sindh	10.4	36.5	61.1	2,317
NWFP	8.5	29.7	67.4	1,301
Balochistan	4.0	11.1	87.4	443
<b>Education</b>				
No education	9.3	29.8	67.6	6,165
Primary	14.2	54.0	42.9	1,371
Middle	13.8	62.4	35.5	609
Secondary	11.0	67.4	31.2	785
Higher	15.3	73.2	26.2	626
<b>Wealth quintile</b>				
Lowest	5.9	7.3	88.9	1,847
Second	10.1	25.3	71.2	1,897
Middle	13.3	44.2	52.7	1,846
Fourth	12.4	55.8	42.9	1,957
Highest	12.3	70.8	28.7	2,009
Total 15-49	10.8	41.3	56.3	9,556

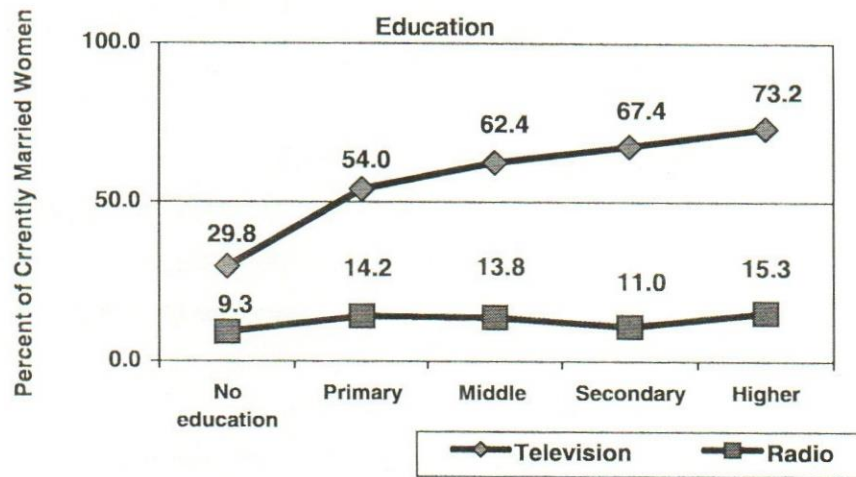
Source: PDHS 2006-07

PDHS data indicate that overall 41 of currently married women ages 15-49 have seen a family planning message on television and 11 percent have heard a family planning message on radio. However majority of respondents (56 percent) have not been exposed to any family planning message on radio or television. It is mentioned here that PDHS did not take into account other variety of media as for example print

media and interpersonal communication that are also extremely important sources of media messages. Also PDHS ignored 100 percent of male target population as far as family planning media messages are concerned. That was important to cover the exposure to family planning messages comprehensively.

PDHS indicates that education plays prominent role in having exposure to media messages and it can be seen that higher the education of a women higher is the exposure to media messages as shown in figure 5.1.

**FIGURE 5.1  
EXPOSURE TO MEDIA MESSAGES**



Wealth also have positive effect to have exposure to media messages.

There is a little differential by residence regarding exposure to messages on radio but there is large differential by residence regarding exposure to messages on television. More than half of urban women (58 percent) saw a family planning message on television compared with 33 percent of rural women. Exposure to family planning messages on radio and television combine is considerably higher (59 percent) in urban areas compared to rural areas (36 percent).

"A study was conducted, using 1996 data of Nepal, to examine the effects of exposure to family planning media messages in audio, visual, and audio-visual mass media on shaping individual contraceptive attitudes and behaviors. The results indicated that the exposure to audio media was important in shaping contraceptive attitudes and that the exposure to audio-visual media was important in shaping contraceptive practice [14]."

The Gallop Report (2005) suggested that television spots about family planning, child spacing, maternal and infant health and other related issues that were broadcast on PTV1, were viewed by 72 percent of PTV1 viewers. The majority of Gallop survey respondents indicated that they liked the celebrity -endorsed advertisements. However, at least 14 percent of intended audience of males and females 17 years and older were not exposed to any electronic medium (Gallop 2005).

#### **FINDINGS OF FOCUS GROUP DISCUSSIONS (FGDs)**

According to majority of participants of FGDs, TV is the most popular medium compared to radio and other media. The perceptions of participants were as follows:

- "TV is better as we can watch along with listening to the things".  
(Educated Male, Sakardu)
- "Heard from LHW, radio, T.V." (Female, Zhob)
- "I feel shy asking others so TV is very good it tells me everything."  
(Uneducated female, Sialkot)
- "In old times people only listened and acted but now they watch and then practice so T.V is better". (Educated Males, Swabi)
- "Everybody in the family watches TV, so we do not have to tell anybody".  
(Uneducated female, Abbotabad)
- "My husband's mother in law do not allow me to go out so TV tells while we are sitting at home".
- "Radio is best source." (Educated males Muzaffargarh)

Another perception of a participant was:



- "We do not see TV because there are lies on TV so there is no use. In watching.
- "Many participants felt that interpersonal communication is the an important source of a message:
- "Fifty percent people do not have TV, so they cannot watch it. LHW is a better person to give family planning message."  
(Educated male Abbotabad)
- "LHW visits and tells about methods." (Uneducated female Zhob)
- "Radio and TV can attract or draw attention but can not satisfy the person. Therefore LHW is necessary."  
(Educated male, Abbotabad)
- "I think LHW is better than other sources  
(Uneducated female Abbotabad)
- "My teacher told me about family planning methods"  
(Educated female Muzaffargarh)

The FGD participants told that their exposure to messages were mainly from TV, radio and LHW (interpersonal communication) as stated by them.

Some participants revealed:

- "We do not watch PTV, we have cable at our home  
(Uneducated Female Larkana)
- "Family planning ads should be shown on Sachal TV, FM, KTM  
(Educated Female Larkana)
- Another view was that emphasis should be given to channels other than PTV as one woman said.

Some of the findings of FGDs regarding television and radio are similar to that of PDHS analysis. Participants considered that television is the best medium followed by radio.

However, most of the findings of FGDs brought forward extremely important additional information in respect of media and messages. Participants suggested that interpersonal communication is also an important medium for dissemination of media messages.

Interpersonal communication has its own importance. This includes interpersonal communication at family planning centers and with family planning field staff. This is useful to develop confidence among clients and service providers.

Also participants of FGDs indicated that media have now considerably expanded coverage through variety of channels. Those channels should also be used, in addition to PTV, to disseminate family planning messages.

Participants of FGDs gave another very valuable and extremely useful suggestion as mentioned below:

- Ads and messages should focus to convey information about method usage, side effects, sources of supply of contraceptive method and treatment facilities.

Some of the participants suggested that:

- The content, language and presentation need to be improved;
- Local influential persons should be involved;
- Family Planning Services should be provided at the door steps.

## **5.2 UNDERSTANDING OF MEDIA MESSAGES**

This section examines the PDHS data and the data obtained in FGDs and presents information regarding understanding of media messages.

### **In-Depth Analysis of PDHS 2006-07 Data**

Table 5.2 has been derived from PDHS data regarding understanding of media messages.

Among currently married women ages 15-49, who had exposure to various family planning messages on radio and television, have understood the specific family planning messages as shown in table 5. 2.

**TABLE 5.2**  
**UNDERSTANDING OF MEDIA MESSAGES**

Among Currently Married Women Aged 15-49 Who had Exposure to Various Family Planning Messages on Radio and Television In the Month Preceding the PDHS Survey, Percentage of Women Who Understood the Specific Messages and Cited the Messages

Message	Percent of Women
Limiting the family	55.3
Higher age at marriage	6.7
Spacing of children	42.3
Use of contraceptives	48.0
Welfare of family	20.7
Maternal and child health	15.8
Fewer children means prosperous life	10.0
More children means poverty and starvation	5.1
Importance of breastfeeding	1.9
Total	100.0
Number	4,176

*Source PDHS 2006-07*

Among currently married women who had the exposure to family planning messages on radio or TV, more than half of respondents (55 percent) understood and conveyed the message as "Limiting the size of family". followed by "Use of contraceptive methods" (48 percent), "Spacing of Children" (42 percent), "Welfare of family" (21 percent), "Maternal and Child health" (16 percent), and "Fewer children means prosperous life" (10 percent).

#### **FINDINGS OF FOCUS GROUP DISCUSSIONS (FGDs)**

Findings of FGDs are mostly similar to findings of PDHS analysis. However some are in addition to findings of PDHS analysis. Findings are presented below as understood by participants of FGDs:

- "Less children prosperous life." (Uneducated Male, Zhob)

- "Less aged girls should not be married."  
(Educated Male, Sakardu)
- "The programme has benefited a lot of people and they are awakened"  
(Educated male, Rawalakot)
- "If every year a woman has a child after five years she will look like a grand mother"  
(Educated male, Sialkot)
- "This programme is very helpful and has enlightened people."  
(Uneducated male, Rawalakot).

The respondents understood the concept of ads and messages relating to:

- ▶ Small family benefits,
- ▶ Mother and child health;
- ▶ Education;
- ▶ Contraception and Spacing; and
- ▶ Breastfeeding.

Mostly educated people in the community and family members do not object to contraception usage, except those of some illiterates, village-folk or the older relatives due to their religious beliefs or the side-effects of some contraceptives.

The campaign had provided information about small family benefits, good health of mother and child, breastfeeding, spacing, range of contraceptive methods and sources of contraceptive methods.

### **RECALL AND EFFECTIVENESS OF MEDIA MESSAGES**

One of the objectives of this study is to examine recall and effectiveness of the media messages of family planning programme. This chapter presents data regarding recall and effectiveness of media messages from the following sources:

1. PDHS 2006-07;
2. Focus Group Discussions;
3. In-depth interviews of the employees of Population Welfare Programme.

#### **6.1. RECALL OF MESSAGES**

Data regarding recall of messages were obtained through FGDs and In-depth interviews of programme employees.

#### **FINDINGS OF FOCUS GROUP DISCUSSIONS (FGDs)**

The guide for conducting FGDs is divided into five parts. One part of the guide pertains to soliciting the information from the participants of FGDs to know:

- Their recall and knowledge about the theme/purpose;
- Their choice of mode of publicity for messages -- TV, radio, newspapers;
- Their liking or disliking for language;
- Presentation of ads/messages regarding content, purpose and the theme; and
- Effectiveness of the ads and messages.

The participants of FGDs in the province of Punjab stated that the media campaign had convinced and motivated the viewers, listeners and readers about benefits of having fewer children and the financial repercussions of rearing large family.

The participants pointed out that ads and messages during and after drama were generally viewed more. The participants liked the style, presentation and the language of

TV ads and messages. They suggested that the messages should be conveyed in the form of drama like 'Aahat', 'Jhanjalpura' and 'Be Zuban'.

Participants of FGDs remembered and recalled some of the ads and messages as under:

- "Less children happy life. (Educated female, Sialkot)
- "If a woman says something to her daughter-in-law, she (daughter in law) listens to her (mother in law)."  
(Female, Muzaffargarh)
- "Media messages are very useful. People adopt FP methods after listening to them." (Uneducated female, Larkana)
- "Mothers can give more time to fewer children but not to twelve kids and breastfeeding should be promoted."  
(Uneducated female, Kahuta)

According to Demographic and Health Survey Tanzania 1991-1992, more types of media that women are exposed to, the more likely they are to practice contraception. Women who recalled six media sources of family planning messages were 11 times as likely as women who recalled no media sources to be using modern contraceptives. Even women who recalled only one media source with a family planning message were twice as likely as women who recalled no media source to be using a modern method. [15].

## **FINDINGS OF IN-DEPTH INTERVIEWS OF PROGRAMME EMPLOYEES**

Data were collected from employees of PWP regarding their recall about family planning messages that were telecast through television, radio or published in a print media. Employees were asked:

- 1) What messages or ads, songs and other programs relating to family planning were watched, heard or read on television, radio or in print media?
- 2) What form of media campaign they liked most?
- 3) What and why they liked most: -- the language or style or the presentation of ads / messages; and
- 4) How much they were convinced / motivated?

The respondents reported that they were fully aware of the contents of the ads/messages which meant to sensitize the viewers, listeners and readers about small family norm, problems of big family, issues relating to health and education, awareness about range of contraceptive methods, affordable family size and small family means happy family. Employees could recall:

- "Happy family and prosperous country"

(Tehsil Officer Rawalpindi)

- "It is not necessary that a woman should have two or three children but the idea should be to have as much children as the mother can afford to bring up and maintain her health. The household has no problem. Also there should be spacing between children."

(Female Dr., Rawalpindi).

The respondent liked the language, style and presentation of current TV media campaign.

- "When people watch husband and wife both going to the family welfare centre, they copy them."

(FWW Muzafargarh)

The respondents liked the ads and messages through electronic media and preferred that it should be in drama form and should be transmitted through all TV channel, besides PTV.

- "The advertisement should be shown on all channels in addition to PTV so that people can watch adds on any channel"

(Male Dr., Rawalpindi)

According to respondents, the newspapers have a little readership and people usually read headlines and main news only.

- "People usually read the headings of the news papers or the advertisements of their interest."

(TPWO - Rawalpindi).

It is the message that matters. If it is effective, it appeals most of the people.

- "Whenever a message is given, what is more important is how effective it is."  
(Female Dr. - Rawalpindi).

A respondent suggested that people like to see new faces in the ads/messages.

- "There should be new faces and beautiful sceneries in the television advertisements. Bano Qudsia introduced new actors and actresses in her teleplay and people liked them. People get bored by watching the same old faces."
- (Tehsil Officer, Rawalpindi).

They also wanted to see and listen ads and messages in regional local languages like Punjabi, Sindhi, Balochi and Pushto.

The responses of the employees interviewed in Sindh, NWFP, FATA and Balochistan recalled the ads and messages that convinced and motivated the viewers and listeners about:

- Small family concept;
- Spacing of children;
- Mother and child health;
- Education of children;
- Appropriate age at marriage;
- Large family problems; and
- Importance of planning in every field of life and similarly importance of family planning.

That is why the people are now more convinced and motivated and there is generally less opposition against the programme.

- "In the beginning, family planning advertisement looked odd through radio and television drama but now it looks pleasant and impressive"  
(District Officer, Sakardu).



About the Behavior Change Communication (BCC) Campaign on electronic media through drama or stage shows, majority of the respondents liked the current media publicity and suggested that the ads and messages should continue to be released on TV and radio in the form of drama.

However a respondent, FWW Larkana, totally disagreed with the current means of media campaign. She explained that inter-personal communication and face to face talk and discussion had ninety percent share in convincing and motivating the clients while the rest ten percent share is that of media campaign.

Whereas another respondent, FWW Sakardu, was of the view that some persons do not watch TV, while the illiterate persons cannot read printed messages. Therefore radio is the most effective means of communication for disseminating ads and messages relating to family planning programme.

In any case all media including television, radio, print media and interpersonal communication have their own importance keeping in view the educational levels and living areas of the target groups.

Overall, the respondents were impressed by the language, presentation and style of the ads and messages. All of those qualities of media messages are equally important to convey the messages effectively and motivate the viewers and listeners. And that is the purpose of mass media.

## **6.2. EFFECTIVENESS OF MEDIA MESSAGES**

### **PDHS 2006-07 ANALYSIS**

Respondents of PDHS 2007-08 were asked if they had watched and heard some family planning media messages on television and radio respectively during the period one month preceding the period of field work of the survey between September 2006 and February 2007. Table 6.2, drawn from PDHS 2006-07 shows percentage of currently married women who watched or heard some family planning messages and

could cite the messages and percent distribution of respondents by effectiveness of the media messages.

**TABLE 6.2**  
**EFFECTIVENESS OF MEDIA MESSAGES**

Among Currently Married Women Age 15-49 Who Were Exposed to Family Planning Messages on Radio or Television, Percentage of Women Who Cited the Messages And Percent Distribution of Women By Effectiveness of Media Messages

<b>Messages / Effectiveness</b>	<b>Percentage</b>
<b>Citing of Messages</b>	
Limiting the family	55.3
Higher age at marriage	6.7
Spacing of children	42.3
Use of contraceptives	48.0
Welfare of family	20.7
Maternal and child health	15.8
Fewer children means prosperous life	10.0
More children means poverty and starvation	5.1
Importance of breastfeeding	1.9
<b>Effectiveness of message</b>	
Effective	84.1
Not effective	6.8
Don't know	9.0
Missing	0.1
Total	100.0
Number	4,176

*Source: PDHS 2006-07*

According to PDHS, among currently married women age 15-49 who were exposed to a family planning message, a high percentage (84 percent) agreed that the messages, as mentioned in the table, were effective and impressive. It is amazing to observe that only 7 percent of the respondents said that media messages were not effective.

#### **FINDINGS OF FOCUS GROUP DISCUSSIONS**

The findings of FGDs revealed that majority of the participants except for a very few illiterates, had knowledge about one or the other contraceptive method. Their major source of information was television which they perceived was most effective having

visual and audio effect. However they wanted that ads and messages should be conveyed in their local/regional language.

Other important source of information was LHW and FP field staff with whom one could discuss personally in privacy.

The FGD participants told that their exposure to media messages were mainly from TV, radio and LHW as stated by them:

- "Heard from LHW, radio, T.V." (Female, Zhob).
- "Radio TV can attract or draw attention but can not satisfy the person. Therefore LHW is necessary. "  
(Educated male, Abbotabad)
- "Fifty percent people do not have TV so they cannot watch it. LHW is a better person to give family planning message."  
(Educated male, Abbotabad)
- "LHW comes and tells about methods."  
(Uneducated Females, Zhob)
- "I think LHW is better than the other sources. "  
(Uneducated female, Abbotabad)

Some of the women participants opined that emphasis should be given to other channels in addition to PTV:

- "We do not watch PTV; we have cable at our home."  
(Uneducated female, Larkana)
- "Family planning add should be shown on Sachal TV, FM, KTN"  
(Educated female, Larkana).

They suggested that the ads and messages should also convey information about:

- Use of contraceptives method;
- Side effects of contraceptives;

- Source of supply; and
- Treatment facilities.

However a few of the participants wanted that the content, presentation and language of ads and messages should be improved. Also there should be Involvement of local influential persons and there should be provision of family planning services at clients' doorsteps.

An Impact evaluation of Media study was conducted to assess the effectiveness of the media campaign launched by the Ministry of Population Welfare Government of Pakistan. The results of the study indicate that the campaign was quite effective as the TV spots developed were effective in communicating the desired messages to the target audience. Most of the respondents reported that the spots were impressive meaningful, simple, easy to understand and free from medical and technical jargons.

A nation wide sample survey was undertaken in 1995. The results of this survey indicated that the major IEC element influencing contraceptive choice was interpersonal communication (because it is easy to talk with friends and relatives), followed by messages on radio and television [2].

### **FINDINGS OF IN-DEPTH INTERVIEWS OF EMPLOYEES**

According to respondents of in-depth interviews, people generally had positive approach towards media campaign of the family planning programme. Messages, if conveyed in the form of a drama highlighting family issues, would be more popular and effective.

However, the view of TPWO Rawalpindi was that, beside electronic media campaign, Inter-personal Communication has its own effectiveness to alleviate the fear and misconception about FP programme.

There is a need to increase the frequency of ads/messages through all means of communication.

In rest of the other provinces, TV and radio are considered most effective media to communicate the programme related messages. Women usually remain at home and watch/listen TV/radio. TV is widely watched while print media has limitation as illiterate persons cannot read printed material. People like to see the local artists/actors, hence arrangement of stage shows/ skits involving local artists and actors can also be an effective medium to convey the messages. This can also be arranged by cassette recording and transmission through local TV channels. In remote areas where there are no televisions, people keep and listen radio, while in urban areas both illiterate and literate people watch TV.

- "The illiterate person can watch television if they cannot read the newspaper"  
(Tehsil Officer - Swabi)

When asked whether they agreed/disagreed with the ads/messages, DPWO Larkana suggested to increase the frequency. Where there is no electricity/TV/Cable facility, the messages do not reach the target population. Hence the radio FM channels are the only means of programme messages to the community.

It was observed in all the studies that almost all the respondents strongly appreciated the campaign and requested that the Government should continue to develop TV and radio spots to educate the community members regarding the usefulness of the family planning. Television was termed as most effective medium in urban and rural areas. The impression that the parents desire to have more children is losing its significance. Another hypothesis that the married males (husbands) of the community compel the women (wives) to have more children is drastically diminishing. The married couples are ready to adopt the family planning practices, but the absence of male clinics and lack of facilities in the near vicinity is the main hurdle. The data indicate that the religion is no more a hurdle in adopting the family planning by the target audience.



### **KNOWLEDGE AND CONTRACEPTIVE USE**

This chapter describes knowledge and practice of contraceptive methods and examines association between exposure to family planning media messages and use of contraceptive methods. Also this chapter investigates reasons for non-use of contraceptive methods.

#### **7.1 KNOWLEDGE OF CONTRACEPTIVE METHODS**

##### **PDHS 1906-07 DATA**

The main aim of the family planning programme is to create awareness amongst the masses regarding contraceptive methods and secondly to persuade people to adopt the desired practices. Table 7.1a is reproduced from PDHS 1906-07 report. It interprets data regarding knowledge of contraceptive methods among ever married and currently married women age 15-49 by specific contraceptive methods.

**TABLE 7.1a**  
**KNOWLEDGE OF CONTRACEPTIVE METHODS**  
 Percentage of Ever-Married and Currently Married Women Age 15-49 Who Know Any  
 Contraceptive Method, by Specific Method

Method	Ever-married women	Currently married women
<b>Any method</b>	95.7	95.9
<b>Any modern method</b>	95.5	95.7
Female sterilization	86.6	86.7
Male sterilization	40.9	40.7
Pill	91.5	91.7
IUD	74.7	74.8
Injectables	89.3	89.5
Implants	31.9	32.1
Condom	67.7	68.1
Emergency contraception	17.8	18.0
<b>Any traditional method</b>	63.7	63.8
Rhythm	49.1	49.2
Withdrawal	48.7	48.9
Number of women	10,023	9,556

*Source PDHS 2006-07*

It is observed that knowledge of contraceptive methods is universal; 96 percent of ever married women and currently married women age 15-49 know of at least one method of contraception.

Among currently married women, most widely known modern method is pill (92 percent) followed by injectables (90 percent), female sterilization (87 percent), IUD (75 percent), condom (68 percent), male sterilization (41 percent), implant (32 percent), and emergency contraception (18 percent). As regards traditional methods, 49 percent of currently married women have knowledge of rhythm method and an equal percentage of women (49 percent) have knowledge of withdrawal method. [Figure 7.1]



FIGURE 7.1

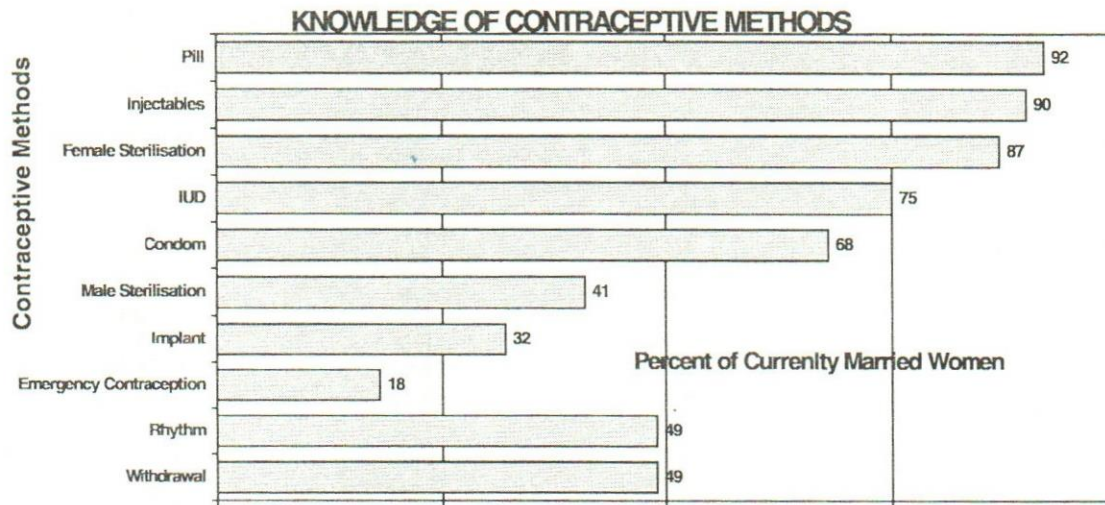


Table 7.1b drawn from PDHS 2006-07 report shows the percentage of currently married women age 15-49, who have heard of at least one contraceptive method and at least one modern method by background characteristics.

Among currently married women who have heard of at least one contraceptive method and one modern method, contraceptive knowledge within various 5 year age groups generally ranges between 96 and 97 percent whereas contraceptive knowledge of women age 15-19 is lower (87 percent) compared to other age groups. Urban rural differences are minimal. As regards provinces, contraceptive knowledge is highest in Punjab and Sindh (97 percent each) followed by NWFP (92 percent) and Balochistan (88 percent). It is observed that the knowledge of contraceptive methods increases as education level increases. Similarly higher the level of wealth, higher is the level of knowledge of contraception.

**TABLE 7.1b**  
**HEARD ABOUT CONTRACEPTIVE METHODS**  
**BY BACKGROUND CHARACTERISTICS**

Percentage of Currently Married Women Age 15-49 Who Have Heard of At Least One Contraceptive Method and Who Have Heard of At Least One Modern Method,

Background characteristic	Heard of any method	Heard of any modern method <sup>1</sup>	Number
<b>Age</b>			
	87.5	87.4	559
15-19	96.0	95.8	1,463
20-24	96.9	96.6	1,965
25-29	96.4	96.1	1,729
30-34	96.7	96.5	1,565
35-39	96.3	96.2	1,208
40-44	95.8	95.6	1,067
45-49			
<b>Residence</b>			
Total urban	98.5	98.2	3,191
Rural	94.6	94.4	6,365
<b>Province</b>			
Punjab	96.9	96.7	5,495
Sindh	97.3	97.0	2,317
NWFP	91.9	91.5	1,301
Balochistan	88.2	88.0	443
<b>Education</b>			
No education	94.6	94.4	6,165
Primary	97.8	97.6	1,371
Middle	97.8	97.7	609
Secondary	98.4	98.4	785
Higher	99.4	99.2	626
<b>Wealth quintile</b>			
Lowest	92.0	91.5	1,847
Second	93.4	93.3	1,897
Middle	97.0	96.8	1,846
Fourth	97.6	97.6	1,957
Highest	99.2	99.0	2,009
Total 15-49	95.9	95.7	9,556

<sup>1</sup> Female sterilization, male sterilization, pill, IUD, injectables, implants, condoms, emergency contraception, and other modern methods

Source: PDHS 2006-07

## FINDINGS OF FOCUS GROUP DISCUSSIONS

The knowledge of contraceptive methods was recalled by nearly all the participants of the Focus Group Discussions.

Findings of FGDs in Punjab and AJK regarding contraception were similar to that of PDHS' findings and supported PDHS data. Participants of FGDs, as informed by them, either watched TV or listened radio or the both. They watched variety of TV programs like sports, drama, news, talk shows and religious programs on different TV channels, as for example PTV, ARY, PTV-1 National and BBC. All the participants had seen/listened the PWP related ads and messages on TV/radio. For example participants from Sialkot and Muzafargarh told that they watched on televisions and heard on radio about family planning methods. According to them:

- "When all family planning methods are explained to us on televisions, we understand and get the knowledge"

(Women participant, Sialkot)

- "Yes I understand and heard about condom."

(Participant , Muzafargarh)

In Sindh the responses of FGD participants were not very different from Punjab. Participants reported that they watched television and listened radio. Besides PTV, they watched local cable TV channels like KTN, Sindh TV and Indian TV channels and these were their favorite TV programs. On radio they listened to local FM radio stations and listened drama, film songs and sport news etc. Most of the participants reported that they had seen/listened/read about FP ads and messages sensitizing about spacing of births of children, FP methods, MCH, and small family norm. They approved the ads and messages about family planning methods.

- "There are lot of methods we can use to space between the children"

(Educated women, Mirpur khas)

- "The LHW has told us about the pills and condoms now I know how to use them" (Uneducated female, Mirpurkhas).

Findings of FGDs in the province of NWFP and Northern areas are also in line with results of PDHS.

The most of the participants of FGDs in NWFP and Northern Areas reported they either watched TV, listened to radio or both. They mostly watched drama, sports, news and religious programs on PTV. A few participants watched other TV channels like GEO, ARY etc where available. They had knowledge about FP media campaign and had either watched or read/listened ads and messages about small family, spacing, breastfeeding, MCH, consequences of large population, contraceptive methods, education and health.

According to PDHS data, 92 percent women in the NWFP are aware of Family Planning Methods and according to FGD participants, they acquired the knowledge from radio, TV and LHW.

- "IUD is useful for spacing of children and elder child gets mother's milk for longer time." (Educated female, Sakardu)
- "Yes I understand that condom is used for family planning and for spacing." (Educated female, Swabi)

However FGD participants added further to information provided by PDHS data as mentioned below:

- "Radio TV can attract or draw attention but can not satisfy the person. Therefore male motivator is necessary. He told me about all the contraceptive methods." (Educated male, Abbotabad)

Participants of FGDs in the province of Balochistan also reported that they watched various TV channels like GEO, QTV, Sindh TV and KTN. They had watched/

heard about ads and understood messages relating to family planning, contraceptive methods and early age marriage.

However a few participants of FGDs were not aware of contraceptive methods. For example one of the participants mentioned:

➤ "I have not heard of any FP method."

(Uneducated female Jafarabad)

This is in conformity with PDHS results where a very low percentage of women have no knowledge of any contraceptive method.

## 7.2 EVER USE OF CONTRACEPTIVE METHODS

This section examines data regarding ever use of contraception as presented in PDHS 2006-07 report.

### PDHS DATA.

Table 7.2 is drawn from PDHS 2006-07 report. Table presents data on ever use of Contraceptive methods by 5 year age groups.

**TABLE 7.2**  
**EVER USE OF CONTRACEPTION**  
Percentage of Currently Married Women Age 15-49 Who Have Ever Used One or More Contraceptive Methods

Age	Modern method										Traditional method			Number of women
	Any method	Any modern method	Female sterilization	Male sterilization	Pill	IUD	Injectables	Implants	Condom	Emergency contraception	Any traditional method	Rhythm	Withdrawal	
15-19	15.7	9.7	0.0	0.2	3.8	0.6	2.0	0.0	5.4	0.3	9.2	5.8	5.4	559
20-24	30.3	20.8	0.9	0.1	5.1	3.0	5.7	0.3	11.8	0.6	18.0	12.0	11.9	1,463
25-29	45.8	36.8	1.9	0.0	12.7	7.0	12.4	0.5	21.0	1.1	25.6	16.6	17.9	1,965
30-34	56.3	46.3	7.2	0.1	15.0	10.5	14.4	0.4	21.7	1.3	28.1	17.9	17.9	1,729
35-39	59.3	49.4	12.5	0.1	16.9	12.2	13.5	1.0	20.2	0.9	29.1	20.2	19.7	1,565
40-44	60.8	50.9	19.1	0.4	15.0	10.5	13.9	0.9	18.0	0.6	30.0	19.4	20.2	1,208
45-49	54.8	41.3	16.7	0.2	12.9	8.8	11.2	0.7	11.3	0.9	29.6	19.9	20.3	1,067
<b>Total</b>	<b>48.7</b>	<b>38.8</b>	<b>8.2</b>	<b>0.1</b>	<b>12.4</b>	<b>8.1</b>	<b>11.4</b>	<b>0.6</b>	<b>17.2</b>	<b>0.9</b>	<b>25.5</b>	<b>16.8</b>	<b>17.1</b>	<b>9,556</b>

Source: PDHS 2006-07

Overall, among currently married women, almost half of the women (49 percent) have ever used a contraceptive method; 39 percent have ever used a modern method and 26 percent have ever used a traditional method. It is observed that most commonly used modern method is condom (17 percent) followed by pill (12 percent), injectables (11 percent), female sterilization (8 percent) and IUD (8 percent). Traditional methods have their own importance. Most commonly used traditional methods are rhythm method and withdrawal method (17 percent each)

Ever use of contraception increases as age increases.

### **FINDINGS OF FOCUS GROUP DISCUSSIONS**

Ever use of contraception came under discussion in FGDs also. Many of the participants of FGDs mentioned that they ever used contraceptive methods. Some of them discontinued contraception and told reason/s for discontinuation of the methods. For example, a women participant of FGDs informed that she had used injectables in the past but now have discontinued.

- "I used injections but subsequently I had bleeding problem. So left its use."  
(Uneducated woman Sialkot)

Here FGD indicated an important point to consider and that is lack of follow up to take care of bleeding problem due to use of IUD. This shows a weakness on the supply side of the programme.

### **7.3 CURRENT USE OF CONTRACEPTIVE METHODS**

#### **PDHS 1906-07 DATA**

It is observed from the table 7.3 that 30 percent of the currently married women are currently using some method to delay or prevent pregnancy; 22 percent of currently married women are currently using a modern method and 8 percent are using a traditional method. The most widely used current method is female sterilization (8 percent) followed by condom (7 percent), withdrawal method (4 percent) and rhythm method (4 percent). Current use of pill, IUD and injectables is very low (only 2 percent

each) whereas use of male sterilization and the more recently introduced implant is negligible. It all shows that current use of contraception is quite low.

**TABLE 7.3**  
**CURRENT USE OF CONTRACEPTIVE METHODS BY AGE-**  
 Percent Distribution of Currently Married Women Age 15-49 by Contraceptive Method Currently Used, According to Age

Age	Modern method									Any tradi- tional method	Traditional method			Total	Number of women
	Any method	Any modern method	Female sterili- zation	Male sterili- zation	Pill	IUD	Inject- ables	Im- plants	Con- dom		Rhythm	With- drawal	Not currently using		
15-19	6.7	4.2	0.0	0.0	0.8	0.5	0.3	0.0	2.6		1.3	93.3	100.0	559	
20-24	15.4	10.6	0.9	0.0	1.3	1.2	2.0	0.1	5.2		2.6	84.6	100.0	1,463	
25-29	24.8	17.2	1.9	0.0	2.0	2.1	2.7	0.3	8.1		4.0	75.2	100.0	1,965	
30-34	35.6	26.9	7.2	0.0	3.2	3.4	3.7	0.1	9.3		5.0	64.4	100.0	1,729	
35-39	39.9	29.8	12.5	0.1	2.7	3.8	2.0	0.1	8.6		5.4	60.1	100.0	1,565	
40-44	41.6	31.4	19.1	0.3	2.1	1.8	2.2	0.0	5.9		5.1	58.4	100.0	1,208	
45-49	31.5	23.6	16.7	0.2	1.2	1.2	1.5	0.3	2.6		3.4	68.5	100.0	1,067	
Total	29.6	21.7	8.2	0.1	2.1	2.3	2.3	0.1	6.8		4.1	70.4	100.0	9,556	

Source: PDHS 2006-07

### FINDINGS OF FOCUS GROUP DISCUSSIONS

Most of the FDG participants, both males and females, educated or un-educated had been currently using one or other modern or traditional contraceptive methods.

- "Yes I am using IUD and I am satisfied with the method."  
(Educated female, Sialkot)
- "My three years gap is achieved due to use of family planning."  
(Uneducated males, Muzaffargarh)
- "I realized the importance of media messages when it was too late and I already had six kids, now I am using FP method"  
(Uneducated males, Muzaffargarh)

Majority of the participants of FGDs in Sindh were neither current family planning users, nor reported any future desire for contraceptive use.

This information received through FGDs is a matter of concern for programme mangers.

Participants of FGDs suggested:

- The ads and messages should be made more focused and impressive with clarity;
- Doctors should be involved to provide more comprehensive information on health issues, side effects of contraceptives and other diseases;
- Ulemas, Nazims, Councilors, players (cricketers), scientists, writers, columnists should also be associated to convey the messages; and
- Prices of contraceptives should also be conveyed through ads and messages.

#### 7.4 GAP BETWEEN KNOWLEDGE AND EVER USE OF MODERN CONTRACEPTIVE METHODS

Table 7.4 has been compiled from PDHS data that shows a comparison of level of knowledge, level of ever use and level of never use of modern contraceptive methods among currently married women.

**TABLE 7.4**  
**GAP BETWEEN KNOWLEDGE AND EVER USE OF MODERN CONTRACEPTIVE METHODS**  
Percent of Currently Married Women

Method	Knowledge of method	Ever Used	Have No Knowledge and Thus Never Used	Have Knowledge but Never Used
	a	b	100-a	a-b
<b>Any method</b>	96	49	4	47
<b>Any modern method</b>	96	39	4	57
Female sterilization	87	8	13	79
Male sterilization	41	0	59	41
Pill	92	12	8	80
IUD	75	8	25	67
Injectables	90	11	10	79
Implants	32	1	68	31
Condom	68	17	32	51
Emergency contraception	18	1	82	17

*Source PDHS 2006-07*



Overall, knowledge of family planning methods is quite high (96 percent) as mentioned in the PDHS report, but ever use is 49 percent depicting a visible gap between the knowledge and practice of contraception. It means that among currently married women who have knowledge of at least one contraceptive method, 47 percent have never used any contraceptive method as shown in table 7.4.

As regards individual contraceptive methods, it is observed that among currently married women, 82 percent of women have no knowledge of emergency contraception, 68 percent have no knowledge of implants, 59 percent have no knowledge of male sterilization, 32 percent have no knowledge of condom and 25 percent have no knowledge of IUD. This is high level of lack of knowledge of modern contraceptives and when a high percentage of women does not know a wide range of contraceptive methods, scope of overall ever use of contraception becomes limited. This is one of the obvious reasons of a large gap between overall knowledge and ever use of contraceptive methods. It is extremely important that when we say that knowledge of contraceptive methods is as high as 96 percent, it does not give the true picture regarding overall knowledge of contraceptive methods at national level. True picture is only valid if awareness of each individual contraceptive is also generally high close to that level (96 percent). In urban areas more media messages are needed to create awareness about all the methods while in rural areas there is a need to attract women to family welfare centers for having mother and child health care and they should know about all contraceptive methods through inter-personal communication at family welfare centers.

## **7.5 IMPACT OF EXPOSURE TO FAMILY PLANNING MEDIA MESSAGES ON CURRENT USE OF CONTRACEPTIVE METHODS**

Table 7.5 has been extracted from PDHS data. Table elucidates the impact of exposure of currently married women to family planning media messages on current use of contraceptive methods.

**TABLE 7.5**  
**CONTRACEPTIVE PREVALENCE RATE (CPR) AMONG CURRENTLY MARRIED**  
**WOMEN BY EXPOSURE TO FAMILY PLANNING MEDIA MESSAGES**

Pakistan and Provinces	CPR Among Currently Married Women Who are Exposed to Media Messages	CPR Among Currently Married Women Who are Not Exposed to Media Messages	Increase in CPR due to Exposure to Family Planning Media Messages
	Percent	Percent	Percentage Points
Pakistan	37.8	23.3	15
Provinces			
Punjab	38.6	27.7	11
Sindh	36.3	20.5	15
NWFP	37.7	18.6	19
Balochistan	22.5	13.3	10
Number	4176	5380	

Table 7.5 presents a comparison of two groups of currently married women, one having exposure to family planning media messages and other not having exposure to media messages. It is observed that current use among women having exposure to media messages was higher by 15 percentage points compared to current use among women not having exposure to media messages. It means that, over all, exposure to family planning media messages raised the contraceptive prevalence rate among currently married women in Pakistan by 15 percentage points from 23 percent when not exposed to 38 percent when exposed to family planning messages.

As regards provinces, the scenario is also similar. It is observed that due to exposure to family planning messages, increase in CPR was by 19 percentage points in NWFP, by 15 percentage points in Sindh, by 11 percentage points in Punjab and by 10 percentage points in Balochistan.

It is therefore concluded that exposure to family planning media messages was effective to a great extent in enhancing contraceptive prevalence rate. And there is strong positive relationship between exposure to family planning media messages and contraceptive prevalence rate.

## 7.6 TRENDS IN KNOWLEDGE OF CONTRACEPTIVES

Table 7.6, derived from PDHS data, indicates trends regarding contraceptive knowledge over time.

**TABLE 7.6**  
**TRENDS IN KNOWLEDGE OF CONTRACEPTIVE METHODS**  
Percentage of Currently Married Women Age 15-49 Who Know Any Contraceptive Method, by Specific Method

Method	1984-85 PCPS	1990-91 PDHS	1994-95 PCPS	1996-97 PFFPS	2000-01 PRHFPS	2003 SWRHFPS	2006-07 PDHS
Any method	61.5	77.9	90.7	94.3	95.7	95.4	95.9
Any modern method	u	77.2	90.5	93.4	95.0	95.0	95.7
Female sterilization	50.5	69.7	86.2	88.5	88.8	85.9	86.7
Male sterilization	18.8	20.2	15.4	31.0	31.6	41.5	40.7
Pill	54.1	62.2	72.6	86.6	91.1	90.7	91.7
IUD	43.4	51.5	73.4	82.4	84.4	82.1	74.8
Injectables	46.7	62.2	79.4	86.0	90.2	88.2	89.5
Implants	u	U	u	14.9	19.9	26.9	32.1
Condom	28.9	35.3	46.0	61.2	69.9	65.2	68.1
Any traditional method	u	25.7	38.2	54.3	50.3	45.4	63.8
Rhythm	5.8	17.8	22.4	33.7	23.8	25.4	49.2
Withdrawal	9.0	14.3	28.4	40.7	42.4	35.7	48.9
Number of women	7,405	6,364	u	7,584	U	8,427	9,556

u = Unavailable, PCPS = Pakistan Contraceptive Prevalence Survey, PFFPS = Pakistan Fertility and Family Planning Survey, PRHFPS = Pakistan Reproductive Health and Family Planning Survey, SWRHFPS = Status of Women, Reproductive Health, and Family Planning Survey,

Sources: PCPS 1984-85: Population Welfare Division, Ministry of Planning and Development, 1986; PDHS 1990-91: NIPS and Macro, 1992; PFFPS 1996-97: Hakim et al., 1998; Census 1998: Government of Pakistan, 1998; PRHFPS 2000-01: NIPS 2001; SWRHFPS 2003: NIPS 2007a

Source: PDHS 2006-07

It is observed that knowledge of any contraceptive method increased from 62 percent in 1984-85 to 78 percent in 1990-91, to 91 percent in 1994-1995, to 94 percent in 1996-97 and ultimately increased to 96 percent by 2006-07. Knowledge of male sterilization and implants has gradually increased and now it is 41 percent and 32 percent respectively. Knowledge of IUD gradually increased from 43 percent in 1984-85 to 84 percent in 2000-01 but subsequently it appears to have declined. There is need to investigate the reasons. Knowledge of rhythm method and withdrawal method has increased substantially over the period.

By the end of 2008, Population Welfare Programme has been in progress for more than five decades and efforts of the programme have been able to increase contraceptive prevalence rate from 9 percent in 1984-85 (PCPS), to 18 percent in 1994-95 (PCPS), to 24 percent in 1996-97 (PFFPS) and ultimately reached to 30 percent in 2006-07 (PDHS). This resulted in reduction of Population Growth Rate from 3.0 percent in 1991 to 1.9 percent in 2005 and to 1.8 percent in 2008 [4]. However, Population Growth Rate of the country is still highest among SAARC and other neighbouring countries and higher among most of Muslim countries. Pakistan Population Welfare Programme still needs attention of planners, managers, strategy makers and professionals. Coordinated efforts are needed among public sector, NGOs and private sector to enhance contraceptive prevalence to more than 60 percent and to bring fertility to replacement level.

#### 7.7 TRENDS IN EVER USE, CURRENT USE AND DROPOUTS OF CONTRACEPTIVE METHODS, SWRHFP 2003 AND PDHS 2006-07

Table 7.7 compares data of SWRHFP 2003 and PDHS 2006-07 regarding ever use, current use and drop-outs of contraceptive methods among currently married women.

**TABLE 7.7**  
**TRENDS OF EVER USE, CURRENT USE AND DROP-OUTS OF CONTRACEPTIVE METHODS SWRHFP 2003 AND PDHS 2006-07**

Percentage of Currently Married Women by Status of Use of Contraceptive Methods

Method	SWRHFP 2003			PDHS 2006-07		
	Ever User	Current User	Drop-outs	Ever User	Current User	Drop-outs
Any method	42.8	32.1	10.7	48.7	29.6	19.1
Any modern method	36.8	25.2	11.6	38.8	21.7	17.1
Female sterilization	7.9	7.5	0.4	8.2	8.2	0.0
Male sterilization	0.2	0.2	0.0	0.1	0.1	0.0
Pill	10.4	3.1	7.3	12.4	2.1	10.3
IUD	9.6	4.4	5.2	8.1	2.3	5.8
Injectables	10.3	3.4	6.9	11.4	2.3	9.1
Implants	0.3	0.3	0.0	0.6	0.1	0.5
Condom	13.4	6.4	7.0	17.2	6.8	10.4
Emergency Contraception	u	u	u	0.9		
Any traditional method	13.2	6.8	6.4	25.5	7.9	17.6
Rhythm	5.5	1.7	3.8	16.8	3.6	13.2
Withdrawal	9.6	4.9	4.7	17.1	4.1	13.0
Number of women	8,427	8,427		9,556	9,556	
U=Unavailable						

Source: SWRHFP Report 2003 and PDHS Report 2006-07

Data indicate that overall drop-outs among currently married women are higher in PDHS 2006-07 (19 percent) compared to as reported in SWRHFPS 2003 (11 percent). Also dropouts in specific contraceptive as reported in PDHS are highest among currently married women users of condom and pill (10 percent each), followed by users of injectables (9 percent). It is amazing that drop-outs are at such a high rate. Apparently it appears it is the weakness of supply side of the family welfare programme. Once a woman adopts a contraceptive method, she should remain satisfied with the services and should not drop-out.

FGDs of this survey had indicated certain reasons for dropping out from current use. The same are quoted below:

#### Nature of "Health Concern" for not using contraception

- "I got fat due to Contraceptive use so I left it."  
(Uneducated female, Sialkot)

#### Nature of "Method-related reasons" for non-use"

- "I used injections but subsequently I had bleeding problem. So left its use."  
(Uneducated woman Sialkot)
- "I used injection. It pained me a lot, so I left it. I like Sathi, but my husband does not use it."  
(Educated female, Larkana).
- "If females have stomach ache they think it is due to IUD"  
(Uneducated female, Mirpurkhas)
- "My grand mother says: Do not use FP methods, you will get sick. These things are hot, your blood will burn."  
(Uneducated female, Muzaffargarh)
- "Pills increase bleeding as these are hot and poor people can not afford to buy fruits and milk to take after pills."
  - (Uneducated female, Muzaffargarh)

- "Elders say: A women died due to use of FP injection. Therefore the elders prohibit to use injection." (Educated female, Sakardu)
- "Females do hard work. So contraceptive effect is finished and females get pregnant". (Male, Sakardu)
- One male in our area used condoms, later he became infertile due to some chemical used on the condom.

Although above mentioned perceptions are because of ignorance and illiteracy, but unfortunately a high percentage of our population is not literate and their thinking is based on ignorance. They need professional help to know what is right. Also our society is male dominated and therefore males also need to be persuaded and convinced. Effective role of media is essential. It has already been discussed in this report that media is effective to a great extent in improving the contraceptive prevalence and decreasing the non-users and obviously it should be effective in decreasing drop-outs.

## 7.8 REASONS FOR NON-USE OF CONTRACEPTIVE METHODS

The table 7.8 has been computed from PDHS 2006-07 data. Table exhibits the reasons for non-use of contraception among currently married women who are not currently using any contraceptive method. The non-users included those women who had children, whose husbands were out of station, newly married, wanted more children or had fear of side effects.

**TABLE 7.8**  
**PERCENTAGE OF CURRENTLY MARRIED WOMEN BY EXPOSURE TO MEDIA MESSAGES ACCORDING TO REASONS FOR NOT USING CONTRACEPTIVE METHODS**

Reasons	Exposed		Never exposed	
	Percent	Number	Percent	Number
Fertility-related reasons	16.7	697	22.0	1184
Infrequent sex/no sex	3.1	129	2.9	156
Menopausal/Hysterectomy	2.1	87	1.9	100
Infertile/Can't get pregnant	.7	29	.9	48
No menstruation after birth	2.3	95	2.3	124
Breastfeeding	3.6	150	5.4	288
Up to God/can't control	6.8	284	11.6	623
Opposition to use	4.1	172	7.0	375
Respondent opposed	1.3	55	1.6	87

Reasons	Exposed		Never exposed	
	Percent	Number	Percent	Number
Husband opposed	2.0	84	4.4	236
Others opposed	.3	12	.3	14
Against religion	1.0	43	1.8	96
Lack of knowledge	.3	14	1.5	82
Knows no method	.2	7	.8	44
Knows no source	.2	7	1.0	54
Method-related reasons	6.9	289	8.5	455
Health concerns	3.3	137	2.1	112
Fear of side effects	3.5	146	3.5	186
Lack of access/too far	.2	7	.5	29
Costs too much	.3	13	2.1	112
Inconvenience to use	.2	8	.3	15
Interferes with body's normal process	.9	36	1.4	75
Others	4.5	189	4.0	213

Source PDHS 2006-07 Data

As shown in the table, main reasons for not using any contraceptive method were fertility related reasons and method related reasons. Table shows a comparison of two groups of currently married women, one, women exposed to family planning media message but not currently using contraception and other not exposed to media messages and also not currently using contraception. It is observed that among women who are exposed to media messages, lower percentage of women are not currently using contraception for fertility related reasons (17 percent) compared to women who are not exposed to media messages (22 percent). Similarly lower percentage of women are not currently using contraception for method related reasons when exposed to media messages (7 percent) compared to women when not exposed to media messages (9 percent). It all shows that exposure to media messages has been effective in reducing the percentage of non-users of contraceptive methods.

### **FINDINGS OF FOCUS GROUP DISCUSSIONS**

PDHS indicated the reasons according to pre-coded broad categories, for example "husband opposed" or "against religion" but one would like to know what could be the nature of opposition or what could be the nature of religious objection. Participants of FGD discussed in detail the reasons for not currently using contraception

and revealed extremely useful information regarding the nature of reasons as mentioned below:

Nature of reason "opposing to use contraception"

- "We listen about contraceptive methods but we do whatever we want to do."  
(Uneducated female, Larkana)
- "My mother-in-law says: There are problems due to contraceptive use."  
(Female, Sakardu)
- "My mother in law says: Do not adopt Family planning?."  
(Uneducated female, Muzaffargarh)

Nature of perception that contraception is "against religion"

- "God has given us children and God will also give us food for them."  
(uneducated female Larkana)
- "Allah is giving us children and Allah is giving food to our children."
- If family planning worker tries to make them understand they start quarrelling.  
(A Indian male- Mirpurkhas).

Nature of "Health Concern" for not using contraception

- "It is said in TV to use contraceptives but, we have to watch our health."  
(Married women. Muzafargarh).
- "I got fat due to Contraceptive use so I left it."  
(Uneducated female, Sialkot)

Nature of "Method-related reasons" for non-use"

- "Females think that IUD goes up and so we have to explain in detail."  
(Sialkot)
- "I used injection. It pained me a lot, so I left it. I like Sathi, but my husband does not use it."  
(Educated female, Larkana).
- "Pills are hot and we do not have milk to drink afterwards."  
(Uneducated female, Kahuta)



- "If females have stomach ache they think it is due to IUD"  
(Uneducated female, Mirpurkhas)
- "My grand mother says: Do not use FP methods, you will get sick. These things are hot, your blood will burn."  
(Uneducated female, Muzaffargarh)
- "Pills increase bleeding as these are hot and poor people can not afford to buy fruits and milk to take after pills."  
(Uneducated female, Muzaffargarh)
- "Elders say: A women died due to use of FP injection. Therefore the elders prohibit to use injection."  
(Educated female, Sakardu)
- "Females do hard work. So contraceptive effect is finished and females get pregnant".  
(Male, Sakardu)

Women had misinformation or in-adequate information about contraceptive methods.

Participants of FGDs reported that people were in need of family planning methods but hesitated to use contraceptives due to side effects and lack of follow up treatment.

New set of reasons for not using contraception

Participants of FGDs indicated some new reasons for non-use as compared to PDHS as follows:

- "Wives become corrupt due to contraceptive use."  
(Uneducated female, Larkana)

Males think that the contraceptive use can allow women to go to any man.

- "People in our area do not favour family planning. We have lot of enemies and so we like to have more kids to have support".

(Two uneducated males, Zhob)

- "If males use FP methods they will become impotent."

(Uneducated female, Muzaffargarh)

- One male in our area used condoms, later he became infertile due to some chemical used on the condom.

- "Males do not watch ads about FP, they change the channel."

(Uneducated female, Sialkot)

- "Mother and father-in-law say to the daughter in law: You have stopped our generation. Family planning has started some time ago. There was no such thing earlier. Family planning causes a woman to have six, seven children."

(A woman, Sakardu)

Some other miscellaneous views were as under:

- "Maulvis (religious leaders) do not allow us to space. I want to do spacing but nobody can teach them."

(Educated female, Larkana)

- "Old women says it is a sin to have a operation but I say it is a sin not to have an operation".

(Educated female, Larkana)

- "My mother in law says: Your four kids are enough, so use FP methods."

(Uneducated female, Muzaffargarh)

Most of the above reasons are very important feed back to BCC Campaign managers and researchers for improvements in demand and supply sides.

The FP ads and messages convinced and motivated the educated viewers and listeners, while the un-educated people were least convinced rather they get ready to pass harsh words and quarrel if someone asks them to use contraception and stop producing children.

The problem is illiteracy. If someone has even primary education, he can think what is right and wrong for him.

The participants of FGDs, males and females, educated and the illiterate desired that the ads and messages should be in the form of drama/stage show or discussion/talk show. More information should be provided on side effects and in local languages such as Sindhi and Balochi.



### **GENERAL INFORMATION FROM IN-DEPTH INTERVIEWS OF EMPLOYEES OF POPULATION WELFARE PROGRAMME**

A sample of employees of Population Welfare Programme (PWP) was selected for in-depth interviews (IDI) regarding family planning media messages. The following categories of employees were included in the sample:

#### **District Administrative Staff**

1. District Population Welfare Officers (DPWOs);
2. Doctors;
3. Tehsil Population Welfare Officers (TPWOs);
4. Assistant District Population Welfare officers (ADPWOs);

#### **Field Staff at Grass Root Level**

5. Family Welfare Assistants (FWAs) - male and female ;
6. Family Welfare Workers (FWWs);
7. Family Welfare Councilor (FWCs):.

The main objective of conducting the in-depth interviews of PWP employees was to solicit their view points and opinions about the attitudes of family planning clients and public regarding Population Welfare Programme and family planning media messages. The employees of PWP - officers and field staff have the experience of direct contact with the family planning clients and the public. As such they know the attitude of family planning clients and the public towards PWP and the media campaign launched by the programme to provide awareness about the concept and benefits of small family. So their opinions and view points were considered very important and pertinent.

A questionnaire was developed for data collection from sampled employees. The interviewees (respondents) were asked:

- What was their specific role in designing media campaign;

- How they conveyed the messages to the public;
- What was their personal viewpoint about family planning;
- What are the attitudes of the people towards FP clients/users; and
- Their recommendations to improve the media campaign of the programme.

In the province of Punjab and AJK, the sampled interviewees (DPWOs, ADPWOs and TPWOs) and field staff (FWAs, FWWs and FWCs) informed that they were not directly involved in designing and launching the media campaign of the programme on radio, television and print media.

The officials said that they provided information, awareness, counseling and motivation by direct contact, by arranging seminars, corner meetings, camps in remote areas, special events such as baby shows, speech contests and local level sports activities.

The field staff informed that they provided counseling and motivation through inter-personal communication (IPC) to the needy clients. Also they obtained general information from clients as mentioned below:

- Marital status of the client,
- Number of children;
- Financial background; and
- Personal media history.

The family planning clients were motivated to use contraception for having small family norm. A range of contraceptive methods were shown and offered to clients. Use of contraceptive methods was explained and possible side effects of various contraceptive methods were discussed with clients. The clients were advised to choose the contraceptive method of their own choice for which they were free to choose. The clients chose the methods accordingly.

The majority of respondents of in-depth interviews appreciated the current media campaign launched through TV, radio and print media. The campaign had created

awareness among clients about benefits of small family and consequences of raising large number of children. The viewers/listeners/readers usually got awareness from the media and then paid visits to the service providers where they were fully sensitized and provided contraceptive method according to their own choice.

However some of the interviewees felt that the ads/messages should be more comprehensive and clear.

- "The campaign can be improved and it should be better".  
(Doctor, Muzaffargarh)
- "There is immorality in some of the messages."  
(District officer Sialkot)

Some suggested that the ads/messages should match with the local environment, psychology of the masses and economic benefits of small family.

- "Attention should be given to economic condition of people. If a family has more resources and large number of children, there is no need to worry about."  
(District Officer - Rawalakot).

It is observed that media campaign was mostly appreciated and had enhanced contraceptive prevalence rate. However it is important that even a minor criticism on the basis of cultural values may be taken care of. There is always scope for improvement.

The respondents reported that the clients usually do not disclose about contraceptive use. It remains a secret between husband and wife. The people around them, including family members, close relatives and friends come to know about it only when a large gap/spacing between the children has already occurred.

According to respondents, the un-educated people hardly get convinced while the educated think FP is in their benefits. Usually the ads/messages target the female population and hence married women get more convinced and motivated and use contraception.

- "A few people in area say: The adds spread immorality and vulgarity."  
(District Officer - Sialkot)
- "Some illiterate people make fun of the campaign."
- "Some of the women use the contraceptives secretly because all the responsibilities rely on the women".

Some of the rural population in remote areas consider FP bad and un-Islamic.

- "They say: It is forbidden in Islam beyond any doubt. Do they know all about Islam or not. I think they do not know the teachings of Islam properly".  
(Doctor - Rawalpindi)

In some areas of Muzafargarh, people were against Contraceptive surgery and they totally opposed it. However, the objection related to contraceptive surgery only and not against the use of other contraceptive methods.

When they were asked how to promote and enhance contraceptive use, the views of employees were as under:

- The ads/messages should be simple;
- There should be one FWC and one Male Mobilizer at each Union Council;
- All health outlets must ensure FP services;
- Ads/messages should now stress, not on two child family, but on spacing of children for 3-5 years, breast feeding and MCH;.
- All TV cable channels should be used to convey the ads.

"When there are high utility bills and they have to buy large number of tickets for larger family, they will realize that there should be less number of children."

- Publicity through air tickets, railway tickets and utility bills should be arranged.
- Ads/messages should match with our religious, cultural and local values.
  - "The advertisements should be according to our culture. Our women are still embarrassed. They look here and there while going to the population welfare office and coming out of it and people go secretly".

(District Officer - Sialkot).



- "Ulemas" (religious scholars) should be involved.

"Religious leaders should be involved on payment so that they describe Islamic point of view of family planning and importance of mothers' milk. Spiritual healers should also be involved as well as the politicians."

- Ads/messages should be in the local languages.
- Message should be conveyed in the form of drama, stage show, discussion, and talk show.

In the province of Sindh also, the employees stated that they had no direct involvement in the designing and presentation of media campaign. The messages were conveyed by the field staff through seminars, group meetings lectures, baby shows, satellite camps, free medical camps arranged at village level and through direct contact with the family planning clients.

Employees said that the ads/messages were very effective and the viewers/listeners/readers were aware about problems like food, health, education, transportation etc. The Clients were convinced and motivated through inter-personal communication sensitizing them about consequences of big family, benefits of small family, choice of contraceptives and side effects. There was some opposition towards FP, but most of the people had positive approach/attitude towards family welfare programme and the FP clients.

- "People with less children are considered role models these days."

(ADPWO - Mirpur Khas)

Regarding promotion of contraceptive use, the interviewees suggested that:

- Ads/messages should provide information about side effects of certain contraceptives;
- The field staff must ensure follow-up treatment for side-effects of certain contraception;
- Continuous users should be awarded like license for gun; (DPWO Larkana)
- There should be reduction in agriculture tax;

- Field staff should be provided refresher training again and again especially about new methods like Norplant.

The respondents of IDIs in the provinces of NWFP, Northern Areas, and Balochistan also had no direct involvement in media campaign of PWP launched through TV, radio and print media. The messages were usually conveyed through interpersonal communication, counseling, workshops, meetings and through IEC material.

Public corner meetings, seminars and group meetings were arranged to convince and motivate "Ulemas" (religious scholars), councilors and local influential persons and to alleviate their misunderstanding about PWP and its media campaign. To sensitize the viewers/listeners about health, education, resources, contraceptive methods, side effects of certain contraceptives, examples of satisfied clients were quoted and doubts about FP were removed. Most of the people, particularly educated, supported the programme. Satisfied clients were especially helpful in promoting family planning programme.

The sampled interviewees from NWFP and Balochistan suggested that the contraceptive use rate could be improved by taking steps such as:

- The visual and the audio messages involving husband, wife and her mother-in-law would be more effective.
- The ads/messages should match with local environment.
- More services delivery points should be established in NWFP as it is mostly mountain areas.
- The scheme of Traditional Birth Attendants (TBAs), Dais and Village Based Family Planning Workers (VBFPWs) should be revived since people want that the information and services should be provided at their door-steps.

### FORMAT AND CONTENTS OF MEDIA MESSAGES

This chapter displays the comments, opinions and suggestions of FGD participants and respondents of in-depth interviews regarding format and contents of family planning media messages.

#### 9.1 COMMENTS AND VIEWS OF FGD PARTICIPANTS

FGD participants were asked to offer their comments and views regarding format and contents of family planning media messages especially:

- c. Liking and disliking about the content of media messages;
- d. Timings and duration of ads and messages;
- e. Musical tone, language and style;
- f. Actors and anchor persons who presented/conveyed the ads and messages; and
- g. Their suggestions to improve the media campaign.

According to the participants of FGDs, electronic media campaign is effective and it should be continued. The format and contents of ads and messages are relevant and to the point. Ultimately, people would understand the messages and get convinced and motivated.

- "We like the contents of ads. Those have been nicely presented."  
(Un educated female, Muzaffargarh)
- "Ads and messages provide information in a very appropriate way."  
(Female, Rawalpindi).
- > "The messages are for our own good. If we have less children, then everything will be alright."  
(Uneducated female - Rawalakot).
- Ad on lack of food: "Roti finished and a kid still looked hungry" is very effective.  
(Uneducated female, Sialkot).

The participants informed that ads and messages are good. Those should be continued and further improved. They opined:

- The contents of the messages should be more comprehensive in the form of dramas and discussion programs;
  - Ads and messages should provide more information about effects on health of mother and child, socio-financial repercussions, benefits of raring fewer children and role of husbands and mothers-in-law.
- "Ads should be clear and understandable, so that every body can adopt it." (Male, Sakardu).

Participants wanted that males should also be focused.

- "Males should be made to understand the messages and everything should not be left to the women only." (Female, Muzaffargarh)

Most of the females were of the view that male methods should also be given importance and males should be motivated.

- "Do something about males as they do not listen to us." (Uneducated female, Sialkot)
- "There should be some messages for males so that they use male methods." (Educated female, Muzaffargarh)
- "Males should be explained that nothing harmful will happen to them if they use male methods." (Uneducated female, Kahuta )

Ideas of participants relating to format were as under:

- "Detail should be shown in 'Khawateen Time'." (Uneducated female, Muzaffargarh)

Family members such as in-laws who oppose family planning should be shown in the ads and thus they are likely to be convinced for family planning.

- "Difference between bara khandan (big family) and chota khandan (small family) should be made clear to the people."  
(Educated male, Abbotabad).
- "The ads should be made in such a way that we can sit and watch with other family members "  
(Uneducated female Zhob).
- "There is already enough immorality and with FP messages people may become worse."  
(Uneducated male Swabi).
- > "Small kids are present when we watch television and they ask questions about family planning."  
(Uneducated female Zhob)

The participants mostly agreed with the current timings and duration of ads/messages. According to them, time was suitable to most of the people including males, females and children as they were free after days work and jointly watched television programs, dramas and news at night.

- "The time for ads is appropriate at 8 o'clock as all members of the family watch drama on the television."  
(Female , Sialkot)
- "Ads should be shown late at night when children had gone to sleep."  
(uneducated male Swabi).

A few of the participants gave contradictory statements. They wanted that family planning ads/messages should be shown/conveyed during day time when their children are at School.

Some respondents disagreed with the suggestion of showing and conveying ads/messages during day time because in that case the males/husbands would not be able to watch/listen television.

According to participants, people are in favour of 'dramas' and 'plays'. They say that ads and messages should be conveyed in drama form or talk shows showing comparison of benefits of small family compared with problems of large family having limited resources.

- "'Janjal Pura' is a very good drama." (Male, Sakardu).

- "Drama is a better way of learning." (Female, Zhob)
- "Plays are more effective than any other ad"  
(Educated male, Abbotabad)
- "I like 'Najat' drama. Its contents are good."  
(Uneducated female, Muzafargarh)
- "Stage shows are better."

Duration of the programs is also very important, whether it is very short or long, it effects.

- "Duration should be increased and ads should be in 'Pushto' language."  
(Male Zhob)
- "Duration of the programs should be increased."  
(Educated male, Abbotabad)
- "Don't show a particular advertisement so many times. The children learn it by heart and repeat it frequently."  
(Uneducated male Jafarabad).

Women pointed out that ads should be in accordance with cultural and religious values.

- "Local and regional languages should be used."  
(Male, Sakardu).
- "Ads should be in regional language. For example Punjabi. My mother in law only understands Punjabi. She will not allow me to use contraceptives."  
(Uneducated female, Sialkot).
- "Ads should be within cultural and regional limits."  
(Male, Sakardu).
- "I do not like ads with music. It is prohibited in Islam. Our 'Ulemas' (religious scholars) also do not like it. So ads should be without music."  
(Male, Sakardu).
- "Both merits and demerits should be told."  
(Uneducated female, Larkana).

- "Ulemas' should be involved in convincing people."  
(Male, Sakardu)
- "In Northern Areas, Ulemas have more hold. So they should be involved. Their point of view should be respected."  
(Male, Sakardu).
- "Maulana Fazal ur Rehman (a religious scholar) should be invited to come (to Balochistan) and tell us (about family planning)."  
(Male, Zhob)
- "There should be some better way to convince males. They do not listen to us."  
(Uneducated female, Kahuta).
- "There should be ads mentioning the addresses of family planning centers where contraceptive methods are available and can be purchased with a nominal price."  
(Uneducated female, Sialkot).

The family planning messages should not be displayed when a drama is shown on TV as kids are also present.

- "When drama is going on, there should be no advertisements regarding family planning. Children, married/ unmarried including girls, are sitting there. The ads should be shown after 10' o'clock at night when children are asleep."  
(Uneducated male- Rawalakot).
- "If ads are shown on sports and news channels, men will also take interest in the problem."  
(Educated female, Sialkot)

The participants mostly agreed with the current language, music, song/s and presentation of the ads and messages.

- "The manner of the speech is good." (Educated male, Muzafargarh)
- "Their language, style, costumes and way of presentation are good and such qualities of display create and develop interest."  
(Uneducated male, Rawalakot)

All of the participants liked all actors/anchor persons who conveyed and presented messages and ads.

- "We like actors. When they are explaining something to us, we like it."  
(Uneducated male, Rawalakot)
- "The people, who did not understand the messages earlier, have now understood those messages."  
(A female - Sialkot)
- "Their language and way of speaking is right."  
(Uneducated female, Rawalpindi)
- "When they talk about something, they explain it to us thoroughly."  
(Uneducated female - Muzaffargarh)

The participants suggested:

- Ads and messages should be made more simple and easy to understand.
  - "Information should be provided in a better way to get better results in future."  
(Uneducated female, Sialkot)
- The information should be conveyed about side effects of contraceptive methods.
- Male population should also be focused.
- There should be advertisements on the television that use of contraceptives is not bad for the males and they should be told that family planning has no harmful effect on the masculinity and health of the males.
- Ads should be in the form of drama and frequency of ads/messages should be increased
  - "Drama is liked most. We leave all other work to watch drama. We enjoy it. Advertisements are for a few minutes and people can watch them quickly."  
(Uneducated female , Sialkot)
- Ads and messages should relate family planning with family resources.
  - "Tell them to have a family as big as they can afford according to their resources. There is an old saying "Do not stretch your feet beyond the sheet you have."  
(Abdul Ghafoor Bhatti - Sialkot)
- Ads/messages should be shown/conveyed during women programs like "Khawateen Time and Meena Bazar". Local /regional languages should be



used. All local TV Channels and FM radio stations should be used. Programs like talk shows should be arranged. Ulemas and intellectuals should be involved and stage shows in schools, colleges and villages should be arranged.

## **9.2 VIEWS OF RESPONDENTS OF IN-DEPTH INTERVIEWS ON FORMAT AND CONTENTS OF MEDIA MESSAGES**

In this section views of respondents of the IDIs are described about:

- Duration and timings of the ads/messages;
- Their liking or disliking about the ads and messages;
- Their liking or disliking about actors/anchor persons; and finally
- Their suggestions to improve the programme related ads and messages.

In AJK and Punjab, the respondents had mixed reactions towards current duration and timings of ads/messages.

Most of the respondents liked the time and duration because, in their view, people mostly are free at night and watch/listen drama, shows and ads and messages at prime time. They did not want to change duration.

Respondents opined that If there is a need to increase duration of dramas, those should be made more interesting, so that people don't get bored.

- "The messages, programs and ads needed to match with ground realities. In one of the ads, a couple is shown visiting an FWC and entering the office, which is not the ground reality, as males are not allowed to enter / visit the FWW's office. The ads should to be changed showing the husband/male staying outside the centre."

(Dr., Rawalpindi).

- "There should be variety in various ads and messages and only one ad/message should not be repeated again and again."

(FWW, Sialkot).

However some of the participants wanted that the content, presentation and language of ads and messages should be improved. There should be the involvement of local influential persons and there should be the provision of family planning services at the client's door steps.

- "Drama is better. It should explain in detail about antenatal care, setup of FWCs and services provided at the centers."

(IDIs Sialkot).

Regarding actors /anchor persons appearing in TV/media campaign of PWP, all of the respondents approved them to continue.

However, some of the respondents suggested that the ads and messages should also be conveyed by satisfied family planning clients based on their personal experience.

In Sindh, NWFP and Balochistan, most of the respondents agreed with the current timings and duration. However a few wanted to increase the duration of the ads/messages so that ads and messages are well understood. Some others stated if the duration of ads and messages is increased, the viewers/listeners would get fed up and irritated. They will turn off the TV and commence doing some other work till the ad/message is over.

The respondents of IDI's mostly liked the family planning ads and messages since their purpose is to sensitize the viewers/listeners about small family norm, awareness and use about contraceptive methods and education of children.

About liking or disliking of those who present ads and messages, majority of the respondents liked all of them. A women from Abbotabad district stated that it does not matter much who presents ads/messages regarding family planning. It is the family issue and should be conveyed by family members like husband, wife and mother-in-law. Ads/messages by non-family members have little effect. DPWO, Sakardu disliked ad/message presented by Anwar Maqsood because it was too long.

### CONCLUSIONS AND RECOMMENDATIONS

Media (electronic, radio, print, etc) campaign is an essential component of the population welfare programme (PWP) of Pakistan. Its basic aim is:

- To provide awareness and sensitize the masses about consequence of rapid population increase that is mainly due to large family size; and
- To design a behavioral change communication strategy so that the masses adopt contraceptive use.

Since the inception of PWP in Pakistan in the mid 60s, the main focus of the planners and the policy makers had been on supply side of the programme whereas the demand side had remained either weak or un-met. The PWP gradually improved media campaign and subsequently it was considered an integral part of the PWP.

The Ministry of Population Welfare (MOPW) assigned National Institute of Population Studies (NIPS) to undertake the assessment of its media campaign and accordingly the NIPS undertook this study. This study was quantitative and qualitative mix of study based on:

- 1) Use of data from PDHS report;
- 2) Findings of FGDs
- 3) Findings of In-depth interviews (IDIs).

It is evident that majority of participants of FGDs and respondents of IDIs reported having televisions in urban localities. The possession of television is higher as compared to radio. The exposure of daily TV viewers is high and the daily viewers are largely more in urban areas than in rural areas. According to participants of FGDs, family planning messages conveyed in drama are the most effective compared to advertisement either on television or on radio or other media sources.

In Punjab, the majority of participants of FGDs reported viewing television more than listening radio. Majority of them watched different TV channels through cable. They also watched or listened family planning related adds and messages either on television or on radio. They also reported the theme of different FP ads and messages which included information and awareness regarding:

- Benefits of small family;
- Spacing of children;
- Economic problems of large family;
- Good health of mother and child;
- Breast feeding;
- Education;
- Health; and
- Knowledge and practice of various contraceptive methods.

They also reported that FP ads and messages do sensitize the viewers and listeners about benefits of small family and financial problem of raring large family. The majority of the participants do understand the messages and people in general now desire to use contraception. Opposition to use of contraception has diminishing tend. In many families, family planning remains a secret between husband and wife.

The satisfied clients play an effective role in convincing and motivating others.

People generally know that FP ads and messages provide information and sensitize them but using any contraceptive method is one's own choice.

It is because of this media campaign and awareness that in-spite opposition from the religious hardliners, the majority of the masses are now aware of socio-economic problems of nourishing large number of children. They are now prepared to have less children so that they could provide them better education, health, food and clothing.

Recently it emerged that there is some opposition to this media campaign especially by the un-educated participants. They reported that the messages were not clear and they did not understand what they wanted to sensitize about "Key" Social Marketing campaign. They doubt about the logo 'key'. They ask what the "Key" stands for. They wanted the ads and messages should be more clear and easy to understand.

Some participants preferred that the FP messages and services should be conveyed and provided at the door steps of eligible couples. The majority of respondents of IDIs stated that the messages conveyed through inter-personal communication (IPC) were more effective. Those were helpful to counter the misconception about contraceptive use.

#### **10.1 SUGGESTION AND RECOMMENDATIONS FROM THE PARTICIPANTS OF FGDS**

Participants of FGDS wanted that all available TV Cable channels should be used such as GEO, Star Plus, Ten Sports, Din, ARY, Punjab TV, Royal TV, Roshni, APNA, Roohi Bano, Punjnad, Waseh, Ali Baba, QTV, Voice of Kashmir TV, besides PTV Home/world. .

The choice of radio stations also included all local radio/FM stations such as FM-88, FM-99, FM-100, FM-101 etc, All ads/messages on TV and Radio were preferably designed in local regional language like Seraiki, Punjabi, Potohari and Kashmiri besides Urdu.

Some of the participants desired the ads/messages should be in the form of a drama, while some suggested the current media campaign should continue. Talk shows should involve religious scholars, politicians, social workers, TV/film stars etc. People listen/watch more attentively if messages and ads are conveyed by some famous personality during drama.

Regarding the choice of personality, the viewers/listeners preferred to watch/listen ads/messages from national level politicians, religious scholars, film/TV

actors, singers, players as well as from local personalities and influential persons. The heroes like Edhi or Bajia look like grand parents, so those should be involved.

A few participants suggested that door to door counseling and inter-personal communication would be more effective. We all need to work hard. One participant suggested that the insignia/monogram of the programme should be changed. There is same monogram and message of Population welfare program since 1965 and people dislike it.

The participants in the NWFP and Balochistan suggested that besides PTV and Radio Pakistan, the ads/messages should also be telecast / broadcast in local languages from all available TV-cable channels, such as KTN, Kashish, Peace TV, QTV, Geo, Star Plus, ARY, Apna, ATV, PTV-Home/National/Khyber and all FM radio stations. The ads/messages should be in the form of short drama and stage shows. National and local influential, Ulemas, personalities, actors, models, should be involved to convey the messages.

The responses of participants obtained through focus group discussions were almost identical to participants in the province of Punjab. They reported they had either heard or seen about FP ads and messages on TV or radio. A few stated they had read in newspaper or had seen posters in the centre, or hospitals. They also had some reservations about media campaign on religious grounds. It was very interesting and thought provoking to note when one respondent said, "People oppose to offer funeral prayers of a women who used contraception.

## **10.2. SUGGESTIONS AND RECOMMENDATIONS BY EMPLOYEES**

The IDI respondents were asked to give their suggestions and recommendation for improvement in various aspects of current electronic media campaign launched by the PWP, with the aim to enhance contraceptive prevalent rate. Their suggestions are as under:

- Besides PTV and radio Pakistan, the campaign/ads/messages should be transmitted/telecast from other national/local/cable TV channels having larger

viewer-ship in regional/local languages e.g. ARY, GEO, AAJ, Ali Baba, Star Plus, PTV-Home/National/Khyber;

- Ads and messages should be transmitted through all FM radio stations including mobile phones, because people listen audio/music/song on radio and mobile phones even when they are traveling;
- Ads/messages should be in drama form and should be repeated again and again;
  - "Dramas should be produced like Ahat & Janjal Pura and shown on all channels. Everybody would watch it and they listen to their favorite personalities." (Doctors, Muzafargarh)
- The ad/messages/drama should highlight the benefits of small family and financial, social, health problems and related issues of large family.
- Gynaecologists should be involved to sensitize the female viewers/listeners about pregnancy/health problems.
- Interviews/talk shows should be arranged with well known/famous/satisfied families/client/couples;
- Comedy shows/drama/skits involving local community should be arranged at local/village level.
  - "People like to see/listen famous national level presentations as well as local influential persons e.g. A lot people after listening to Dr. Qadeer Khan got sterilized Illiterate and village people like to watch actor and actresses." (Dr. Muzafargarh)

The people recommended the following celebrities and personalities such as:

- Dr. Qadeer Khan
- Film actors & actresses.
- Imran Khan, Wasim Akram, Miandad
- Maria Wasti, Sadia Imam, Humayun Saeed
- Tariq Aziz
- Edhi, Allama Tahir ul Qadri
- Ulema, Journalist. Lawyers
- Senior politicians

- Listeners/viewers should be informed about side effects of modern contraceptives, availability of follow-up services/medicines, prices of contraceptives and details of service delivering outlets including health outlets.
- Sensitize about literacy and linkage between FP and education.
- Relate FP media campaign with financial resources.

Educated people have less number of children (DPWO, Sialkot)

- District officer need to develop rapport and social contacts with local TV channels and FM radio transmission officials/ workers to arrange publicity at local level.
- Large/prominent/sign hoods/ neon signs should be arranged at highways, major crossings, inter changes and within cities.
- "National/regional level talk shows/discussion programs should be arranged highlighting development projects and trend in population size.
  - "New centers should be established. People cant afford to travel to a far away centre". (Doctor, Rawalpindi)
- More FWCs/MSUs/RHSC, should be established.
- Field staffs like FWAs, FWWs, FWCs, being back bone of the programme, need to be facilitated in terms of Carrier planning.
- Open debates, questionnaire discussion and talk shows for Ulemas should be arranged.
- Incentive programs like cash/prize/scholarship should be launched for promotion of small happy family.

The respondents of IDIs in the provinces of Sindh, NWFP/FATA and Balochistan gave the following suggestions and recommendations to make the media campaign through TV and radio more attractive, motivating and effective.

- Ads/messages should have local environment like village scene, green fields and be communicated by local doctors, artists, Ulemas, and influential.
- Ads/messages should be in the form of small drama, funny plays, question answers, talk shows, skits quiz programs and frequency should be increased.



- Male involvement should be enhanced. Ads/messages should be released during news, sports, talk shows, which they like more to watch/listen.
- More ads/messages should be released in the morning and at noon when women are free from cooking.
- Ads/messages should highlight, besides range of contraceptive methods, the family issues like planned family, MCH, breastfeeding, spacing, complications of early marriage, child birth in old age and side effects of contraceptives and remedial measures.

FP media campaign is opposed in some areas in NWFP and NAs due to one or two deaths occurring to female contraceptive users that gave birth to quadruplets and even more. Repetition of FP ads and messages was also opposed that young children had now learnt the tunes of ads and messages by heart.

Most of the respondents told that ads and messages on TV and radio were very informative and motivational to sensitize the views/listened about small family norm.

In old times people used to have ten kids. Now due to media campaign people have less number of children. Now every literate and illiterate person watched TV and if they do not have any electricity then they listen to radio. They watch and listen family planning messages also.

The responses of programme officials obtained through in-depth interviews (IDI) were also very informative. They had no direct involvement and participation in designing/preparation of media campaign launched through TV, radio and print media. The respondents also informed that, besides the media campaign, the sky-rising dearness has compelled the people to think that the fewer the children, the lesser the economic burden and one could provide better education, health and food to children.

### **10.3 OVERALL CONCLUSIONS/ RECOMMENDATIONS**

Based on the information gathered through FGDs and IDIs, as expected, television was found most important medium followed by radio and print media. General

opinions about preference of watching TV or listening radio were identical. Television provides both audio-visual effect while radio can be carried and listened even if one is working in the fields.

In this study there are indications of improvement in the knowledge and use of contraceptives due to media campaign. However there still exists a gap between knowledge and practice, since there is high level illiteracy in the country shyness, less knowledge about side effects of contraceptives, non-clarity of media messages and weakness of supply side.

The role of mass media is very important to sensitize the general people about consequences of rapid increase in population. No doubt exposure to radio is low, yet it is important for rural areas where there is no electricity to watch TV, and radio is the only source of entertainment and information. One can carry radio and listen while ploughing in the field.

All available TV Cable channels should be used such as GEO, Star Plus, Ten Sports, Din, ARY, Punjab TV, Royal TV, Roshni, APNA, Roohi Bano, Punjnad, Waseh, Ali Baba, QTV, Voice of Kashmir TV, besides PTV Home/world.

The choice of radio stations also included all local radio/FM stations such as FM-88, FM-99, FM-100, FM-101 etc, All ads/messages on TV and Radio were preferably designed in local regional language like Seraiki, Punjabi, Potohari and Kashmiri besides Urdu.

There is need to enhance FP ads and messages through slogans, musical programs, talk shows with Ulemas/doctors/satisfied clients and small dramas on all local FM radio channels. There should be involvement of local artists, Ulemas, doctors, paramedics, politicians, public representatives and teachers. All such programs/ads/messages should be in local/regional languages since the people in general and the un-educated rural population prefers to listen radio in their own language. Radio is portable and can be carried to work place, if there is no electricity.

The study revealed that where there is electricity TV is the most important medium both in urban and rural areas, since it has both audio and visual effects. The ads/messages/dramas/talk shows/skits on FP related issues had more viewer ship on television. The participants desired that:

- i) frequency of ads/messages be increased.
- ii) ads/messages should be in local/regional languages besides, Urdu.

Ads/messages should be in short drama form like "Jhanjalpura", talk shows like "Baithak" and tele films as cinema revival has started.

- iii) the role/participation of mother-in-law, husband and wife in decisions making should be highlighted in drama.
- iv) format / narration of current ads / messages should be changed, so that those could be seen with family members like kids, father-in-law, mother in law, sisters and brothers in law and with young girls.

It is embarrassing to watch ads with family members. It should be presented within cultural limits.

Television and radio programs should include:

- v) special talk shows, quiz programs or stage shows and discussion programs involving local Ulemas, scholars, doctors, students, and paramedics should be arranged.
- vi) few of the current ads/messages are ambiguous and need to be more clear so that the illiterate rural folk are able to understand.
- vii) information on side-effects, remedial measures along with a list of service outlets/providers with phone numbers should be displayed..
- viii) Since husbands play major role in decision making regarding whether or not the couple should use any FP method or the number of children the couple should have, male population needs more awareness about male methods specially vasectomy.

Males should be convinced because they do not listen and do whatever they want to do. There should be ads comprising of contents explaining that contraceptives do not effect male masculinity.

- ix) ads/messages should not be shown before/during/after drama and khabarnama when all family members are present at home.
- x) ads/messages should be preferably shown in women programs like 'Khawateen Time', 'Meena Bazar' or kitchen, make-up programs, and for males the ads messages should be shown in all sports programs and cricket matches.
- xi) all TV cable channels should be used, like GEO, ARY, Star Plus, PTV world & Home, Roohi Bano, Punjnad, Ali Baba, QTV, Ten sports, Ary-one world, Geo, AAJ, Din, KTN, Sindh TV, Roshni, APNA, ATV, and so on. Ads & messages should be conveyed in local/regional languages.
- xii) all local FM radio station like FM-100, FM-88, FM-105, FM-101 etc be used to convey the messages, since radio is the major source of information for the public where there is no TV/electricity. Also radio is listened while traveling in public transport and even in private car.
- xiii) he ads should be put on after 10 pm.
- xiv) here is vast choice regarding the personalities that urban viewers/listeners wanted to listen/see on TV or radio. The list includes the senior politicians, President, PM, artists, players, and cinema actors.

Majority of the respondent did remember and recall the messages/slogans conveyed through electronic media campaign, so much so, as they stated, their kids had remembered some of the slogans by heart.

The main themes of ads/messages on TV, radio or print material were small family norm, spacing between children. Adopt family planning methods, limit the number of children, socio-economics welfare of family, and good maternal and child health. (MCH).

## REFERENCES

1. Jose G. Rimon, The Media as a Partner for Contraceptive Security A Generic Perspective by II, Project Director, HCP
2. Government of Pakistan, Ministry of Planning and Development, Population Welfare Division, Islamabad Population Welfare Programme, Seventh Five Year Plan 1988-93.
3. Rukannuddin, A Razzaque, et al., 1988 Evaluation of Communication Component of Population Welfare Programme of Pakistan, National Institute of Population Studies Islamabad.
4. Planning Commission, Government of Pakistan, Seventh Five Year Plan, 1988-93 and Perspective Plan, 1988-2003.
5. Alauddin, et al., 1991 The Inventory of Information, Education and Communication (IEC) Material Related to Population Welfare, National Institute of Population Studies Islamabad.
6. Hakeem, Abdul, 1996 Information, Education and Communication, National Institute of Population Studies Islamabad.
7. Hakim Abdul, John Cleland and Mansoor ul Hassan Bhatti, 1996-97 Pakistan Fertility and Family Planning Survey, National Institute of Population Studies Islamabad.
8. Jennifer Bowman and Juan Carlos Negrette , Media Advocacy for Contraceptive Security Key Findings and Recommendations from an Asia Regional Workshop September 28 - October 1, 2003 Health Communication Partnership Hosted by the Health Communication Partnership in collaboration with JSI/DELIVER
9. The Futures Group/POLICY Population Action International Prepared by Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs with primary support from the United States Agency for International Development under the Health Communication Partnership project (GPH-A-02-00008-00) Impact Data - Family Planning Campaign - Bangladesh , 2001. Sultana Habibullah Media health campaign and its-impact on knowledge, attitude and-practices in the community( Pak J Med Sci.--- 2002,--- 18(3)-- 232-234 )
10. Women's Exposure to Mass Media Is Linked to Attitudes Toward Contraception in Pakistan, India and Bangladesh, Guttmacher Institute International Family Planning Perspectives. Volume 26, Number 1, March 2000.
11. Fikree, Fariyal F, Khan, Amanullah, Kadir, Muhammad Masood, Sajan, Fatima, Rahbar, Mohammad H Mohammad H. What influences contraceptive use among young women in urban squatter settlements of Karachi, Pakistan? International Family Planning Perspectives, -Sep 2001
12. SYED,SH, Communications channels and family planning in Pakistan. Studies in Family Planning. February 1979;10(2):53-60
13. Bankloe A, Rodriguez G, Westoff C. Mass media messages and reproductive behaviors in Nigeria. Chapel Hill The EVALUATION Project, 1995.

14. Prem Bhandari, Ph. D. Candidate Rural Sociology and Demography, Mass media, gender, and contraception in Nepal , , 307 Armsby Building, Department of agricultural Economics and Rural Sociology, and The Population Research Institute he Pennsylvania State University , University Park, Pennsylvania Sundar Shyam , hrestha , Environment, and Regional Economics and Demography , The Population Research Institute , The Pennsylvania State University , University Park, PA 16802,July 2005 , Working Paper 05-04.
15. Miriam N. Jato, Calista Simbakalia, Joan M. Tarasevich, David N. Awasum, Clement N.B. Kihinga and Edith Ngirwamun: The Impact of Multimedia Family Planning Promotion On the Contraceptive Behavior of Women in Tanzania International Family Planning Perspectives Volume 25, Number 2, June 1999
16. National Institute of Population Studies (2007). Status of Women, Reproductive Health and Family Planning Survey, Main Report, Islamabad.
17. National Institute of Population Studies/IRD/Macro International, Inc. (1991). Pakistan Demographic and Health Survey, Islamabad/USA.
18. Hakeem, Abdul and Badar ud Din Tanveer, 2000, Effectiveness of Media Messages in Promoting Family Planning Programme in Pakistan, National Institute of Population Studies Islamabad.
19. National Institute of Population Studies (2001). Pakistan Reproductive Health and Family Planning Survey, 2000-01, Islamabad.
20. Hakeem, Abdul and Amanullah Bhatti, 2000, Evaluation of Interpersonal Communication at Family Welfare Centres of Population Welfare Programme, National Institute of Population Studies Islamabad.
21. Ministry of Finance, Government of Pakistan, Pakistan Economic Survey 2007-08

**STUDY TEAM COMPOSITION**

**PROJECT STAFF**

Mr. Amanullah Bhatti  
Ms. Aysha Sheraz  
Ms. Rabia Zafar  
Mr. Anwar Iqbal

Project Director  
Principal Investigator (PI),  
Trainer  
Coordinator

**COMPUTER STAFF**

Mr. Faateh-ud-din Ahmad  
Mr. Asif Amin Khan  
Mr. Mohammed Ismail  
Mr. Dilnawaz

Programmer  
Stenographer  
DEO  
DEO

**RESEARCHERS:  
PUNJAB TEAM**

Mr. Badar ud Din Tanveer  
Mr. Muhammad Luqman  
Ms. Shazia Batool  
Ms. Shabana Shafat

**Rawalpindi, Muzaffargarh, Sialkot, Azad  
Jammu Kashmir and Rawala kot**

Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker

**SINDH**

Mr. Abdul Haque Baloch  
Mr. Anis ur Rehman  
Ms. Shazia Syed  
Ms. Fahim un Nisa

**Mirpurkhas and Larkana**

Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker

**NWFP AND NORTHERN AREAS**

Mr. Muhammad Niaz  
Mr. Muslim Khan Abbotabad  
Ms. Ayesha Israr  
Ms. Hina Waheed

**Swabi, Havailian and Sakardu**

Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker

**BALUCHISTAN**

Mr. Qari Moeenuddin  
Mr. Shahid Ali Zhob  
Ms. Shamim Bughti  
Ms. Saira Bano

**Jaffarabad and Zhob**

Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker  
Moderator/Note Taker





## NUMBER OF IDI RESPONDENTS

	Doctor	DPWO	ADPWO/ TPWO	FWW	FWA	Total	%
<b>SEX</b>							
Total	2	7	3	6	2	20	
Male	1	6	3	1	1	11	55
Female	1	1	0	5	1	9	45
<b>AREA</b>							
Punjab	2	1	1	1		6	
Sindh		1	1	2		4	
NWFP		1	1			2	
Balochistan		1		1	3	5	
Northern Area		1		1		2	
AJK		1		1		2	
<b>Education</b>							
Matric					2	2	10
FA				2	1	3	15
BA			1	2		3	15
MA	2	7	2	1		12	60
<b>Contraceptive Use</b>							
Yes	2	4	2	3	1	12	60
No		3	1	2	2	8	40

