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Amid a flurry of high-tech approaches, programs find merit in low-tech techniques

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Street theater provides family planning information.

By David J. Olson, special to Humanosphere

The meteoric rise of the Internet and cell phones have prompted increasing global health programs to embrace high tech as a cost-efficient way of reaching large numbers of people with information on such issues as family planning, HIV prevention, and maternal and child health.

This is happening in countries like India, Tanzania, South Africa and Ethiopia, where technologies like the Internet, mobile phones, social media and geographic positioning systems are bringing health delivery into the 21st century.

But other programs are eschewing high tech and sticking with low tech as the best way to bring vital health information to their low-income consumers, at least for now. And they have good reasons for doing so.

The seven states in northeastern India are a good case in point. They have some of the lowest literacy rates in India. Bihar has the lowest rate of all the states in India – 64 percent in 2011, and neighboring Jharkhand, at 68 percent, is not much higher.

Access to media is also limited in these states. Bihar and Jharkhand have the highest rates of people not regular exposed to any kind of media - 60 percent of women in Jharkand and 58 percent in Bihar, the two most media adverse states in India, according to the 2005-06 National Family Health Survey.

This illiteracy and lack of access to media prompt some organizations to take a low-tech approach in reaching out to low-income, less-educated people.

For example, DKT International - which touts its use of social media, the internet and television in higher-income countries like Brazil, China and Turkey - takes a decidedly low-tech approach in its Janani family planning program, which is headquartered in Bihar and has worked in northeastern India for 20 years.

Instead of radio and TV, Janani uses wall paintings, billboards and face-to-face communication like:

- Street theater, to educate and animate the important points of family planning.
- Community health days, in which Janani promoters conduct health education, check-ups and, if warranted, referrals to clinical services.

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- Door-to-door client motivation conducted by Janani promoters.
- "Injectable Days," where outreach teams bring injectable contraception closer to rural areas.
- State and regional fairs to disseminate family planning information and provide referrals.

In Ethiopia, the Beza anti-AIDS youth group uses music and dance to engage other youth groups on issues of sexual and reproductive health and give them the tools they need to protect themselves from HIV. The club offers a regular debate session in which they hotly debate such questions as "What is the right age to start having sex?" The Beza youth group is one of hundreds across Ethiopia supported by the International HIV/AIDS Alliance and its Ethiopian linking organization, the Organization for Social Services for AIDS.

In Madagascar, IntraHealth works with community members in defining quality community health services, identifying problems and then coming up with solutions. For example, prior to the program, there was no systematic emergency referral system from fokontany (a collection of villages) to the health center. Through the program, 6,388 fokontany set up systems to evacuate sick children and pregnant and/or laboring women. These weren't high tech solutions such as ambulances or helicopters. Rather, they involved stretchers carried by community members, canoes or carts pulled by zebu.

In trying to exploit the most appropriate media for reaching these hard-to-reach audiences, the programs decided that the low-tech option made the most sense. In designing communication approaches for health programs, the most important thing is to understand your target audiences, and how they receive information. Sometimes television and social media are terrific at reaching large numbers of people but, in many places around the world, low tech is still best.



David J. Olson, a global development communications and social marketing consultant since 2011, has more than 25 years of experience working in global development as a manager, communicator and advocate. His current clients include DKT International, Palladium and Global Health TV. He has done social marketing and/or communications

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