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ON HEALTH EDUCATION FOR SCHOOL-AGE CHILDREN

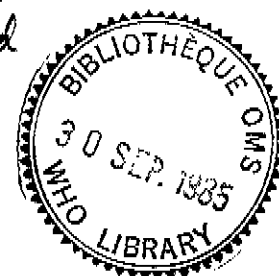
Geneva, 30 September - 4 October 1985

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THE ROLE OF MASS MEDIA IN HEALTH EDUCATION
OF THE SCHOOL-AGE CHILD

by

Dr Nelly de Camargo¹



A changing world

Global village - a worn-out expression - perhaps still is the one that better defines the planetary society of our days, in which communication technology can make all information available for everyone. But it is also a false analogy. In the tribal village, individuals and group are tied by the rules necessary to the preservation of the tribe, and the decision-making processes remained known. More, each individual is recognized and able to recognize all the other members.

Youngsters of bygone centuries could cross the threshold of adulthood - equipped once and for all with knowledge provided by schooling or tradition, which was sufficient to allow him to take his place in an unchanging family and social environment and lead him a calm life until his death. Modern youngsters must accept the fact that they will become men in a changing and evolving society: a flexible, active, everlearning subject of mankind's history.

In the planetary society of our days, much detailed information might be known about some individuals - through communication media - but frequently we ignore the afflictions of our peers; we know very little about our children's problems, the solitude of our parents and the needs of our spouse. Communication, at the affective and existential level, seems not to have an important place in this kind of system, determined by an economy inherent to the acceleration process of our cultural model.

However, the optimism which infuses the humanist attitude towards science is demonstrated in many ways: the trend towards a more effective interrelationship between people; the possibility for everyone to benefit from the advances of civilization, from its progress; the efforts of all nations in the world to find ways to fight socioeconomic and cultural imbalances, intimately related with the civilizatory process and its cultural and anthropological issues.

Organizations which formerly were responsible for the transmission of values and for the integral formation of the new generations lost their characteristics and discharged themselves of those functions, leaving them for other institutions. Such has been the case of the family: by expecting that the school could take better care of the functions that once have been a family's privilege and obligation, progressively the family has transferred its educational role, for reasons that start with the new standards of the social division of work, imperative of the process of industrialization, but also for reasons of lack of physical,

¹ Dr Nelly de Camargo is with the Department of Communication and Behavioural Science, University of Sao Paulo, Sao Paulo, Brazil.

emotional and intellectual preparation to perform its role, redefined for the new context. In such a context, where the competence and the task to educate are disseminated through many agencies and social institutions, within the conceptual frame of health education as a permanent, continuing process, how to focus the role of mass media?

The behaviour equation of changement: reality and the imaginary

Amidst this broad evolutionary panorama, the individual in his environment - in the urban or rural setting - can be seen with his particular problems, living in a developed or under-developed society, facing the permanent reciprocity of mutual influences which shape his future, both material and spiritual. Man's inner harmony or dissonance is in close relationship with the harmony or dissonance of the external world: this ecological system which became so clearly apparent since the last decade.

The behaviour of each individual, of each group of individuals is determined by motives which are rooted in the innermost part of the human being, even though they have evolved parallel with the evolution of man's relationship with his environment. Conduct is a result of the constant interaction between internal impulses and the external stimuli. A person's ego is constantly bombarded by these stimuli, which, in turn, contribute to his learning and mental development.

"Growing within the hallmark of reality, man has to face barriers, sometimes unsurmountable, of real event and of artefacts. Younger a person, the more likely s/he will mix reality and artefacts, into what is simply called 'facts'. With these 'facts' man lives, fails or succeeds within the very complex plot we call life."

"The human being moves towards goals which are coherent with his interests and his driving force. When such goals create an urge in the individual, stir old and new fears, shake his equilibrium, disorganize his life-pattern, present him with the dilemma of change, and result in anxiety and tension, then we say that the individual is motivated" ... "within the world of symbols in which he lives, some have acquired a cardinal importance to him: they have additional emotional meaning."

With this emotional addition, man perceives objects, people, facts, situations, which in turn stimulate his creativity and compel him to change ... (what poses the problem) ... to choose between (something) old, loved, accepted and controlled by him and something new, unknown, and, however good it may seem, still an adventure. Then, he resists change.

Health is one of the multiple symbols which surround the individual. Generally the healthy individual is not aware of health. Harmonious functioning of an organism seems just natural." Illness, as a negative value is the support of health, as a hope. "... it is not purely accidental that public health programmes show the levels of morbidity and mortality as indicators of health. Until today, no other form of measuring health has been so extensively used."

Man tends to deny the existence of an illness that he fears, by negating, believing himself healthy, not consulting a doctor. Illness is perceived as a defect, a blemish that exposes one to the judgement of others. So, health becomes a symbol, an artefact, not a reality."

Mass media functions

Communication media have been classically considered as exerting the "sensorial" functions of a given society: they scrutinize horizons, they maintain together the social structure, conferring the necessary status to preserve hierarchy in the social organization. But they also introduce information originated from other systems, stimulate the public debate, promoting the public opinion forming process; they word the consensus which orients the paths a given society defines as desirable and adequate to its own progress. Communication media are generally the informal transmitters of social heritage, are the critics of unnecessary or inadequate elements of that heritage, as well as the searchers of new needed

elements to be incorporated into it. So, at the same time that they promote the maintenance of social organizations, it is their role to simulate the changes towards better adjustments of the systems to its detected needs. The degree of accuracy, reliability, discrimination and speed with which such "sensorial" system works is a main key for the democratic society's decision-making process, towards effective and efficient answers to its problems.

This theoretical standpoint is the basic support for the necessity of freedom of information - and its flow - for any society. The work division in complex societies like the contemporary ones, makes almost impossible for the great majority of people the direct contact with many phenomena and aspects of reality. Almost all knowledge is mediated through the communication systems that progressively become information gatekeepers. According to the "treatment" given to this information, subjected to the many constraints that alter it, communication systems emerge as the strongest factor of the "possible consciousness" in modern society.

Reports of international seminars on the subject have often emphasized the role of mass media in the promotion of individuals, the progress and cohesiveness of countries, as well as the hope that they can be relevant instruments for peace and international understanding, if they succeed to show to each people a more authentic and entire image of their own lives and of the lives of other peoples. Or they can act as the "new opium of the masses", by provoking the degradation of values, the trivialization of complex issues, the reinforcement of stereotypes, and becoming instruments for cultural domination.

The mass media were transformed into profit enterprises and gave to the cultural products an industrial treatment. Consequently, the gatekeepers, which operate with profit objectives, are fewer and more powerful; their performance parameters are determined by the market rules, which are not always congruent with the major interests of the social group as a whole, and with the main expectations and needs of the individual, in particular. The consequence of the concentration of information power has elicited criticisms from all agencies dealing with education.

Approaching youngsters as developing beings

Developmental studies show that most adolescents (from 12 to 22 years) struggle with difficult needs which include: choosing an occupation and other future roles; learning how to interact with the opposite sex, developing a sex identity; achieving independence from the family; increasing activity of information gathering about the future (which enlarges the importance of media as information sources); reaching the final stage of cognitive development (while children's thought processes are still progressing). The adolescent behaviour, thus, seems to relate less with what they could do and more with what they are actually doing.

Adolescent crises - which are well known - appear in a crescendo, at the measure that s/he faces tasks such as the acceptance of body changes and development of a positive body image, development of a sex-role definition and learning about cross-sex relationships; progress in achieving intellectual, economic and emotional independence - freedom and authority; preparation for future occupational performances and family roles; development of civic competence.

However, media audiences are not similarly motivated to attend the same attributes of particular presentations. Audiences differ on a number of factors, but a critical parameter is their current set of life issues, which are linked to various stages of development. "To spot the salience of these tasks, at any point in time, will enable the prediction of which aspects of media presentation will be attended to and will affect subsequent levels of knowledge, values and behaviors of that individual."

Entertaining media may play an important role in helping adolescents to get "healthy" attitudes to work through their tasks: situation comedies, for instance, have proved to be an acceptable format to convey information and generate discussions about alternatives on problem-solving and decision-taking processes. The skilful use of characters and the flexibility of the narrative style provide sufficient elements for the design of messages that are informative and formative as well.

Youngsters differ in terms of prior relevant experiences, cognitive and social abilities and sociocultural norms. Prior experiences play a part in determining the extent to which an individual uses media to help resolve the various life-cycle tasks. Media are necessary as extensions for learning in modern society: they provide information about unobservable possibilities, sharing life-styles, different sets of values and knowledge.

Cognitive skills and social abilities limit what pieces of information youngsters can get from media exposure, and how they will operate such materials. Adolescents who have achieved a higher level of psychological formal operations will take - and mentally manipulate and integrate - parts of portrayals which will greatly differ from those who have not reached a more abstract ability.

Social skills or the ability to put oneself mentally in the place of the other change with age and constitute another element necessary to the interpretation of media content. While children tend to focus only on one aspect of a character, teenagers are able to observe good and bad aspects, and adolescents (near 16) are able to discuss behaviours and their motivation.

In spite of the little attention that youngsters seem to pay to news and public affairs programming, television is the source named by children when asked where they get information about government and public issues. Television comes even as more important than teachers or parents for information continuing events. How correct is such information is a point deserving society's concern.

Training in preventive medicine and paediatrics rarely includes comprehensive exploration of an equally useful educational model that emphasizes the planning and implementation of organized programmes of communication to guide socialization. Only lately efforts are systematically being made in order to educate the consumer, demystifying media "omniscience". But such efforts still reach few groups, while media messages are spread all over the world.

"Behaviors detrimental to health are embedded in a complex system of social forces that often overwhelms educated rationality. Increasing knowledge about the effects of life-style on health does not necessarily lead to changes in attitudes about the social significance of behaviors like smoking or drinking. Even if a young person develops a negative attitude toward unhealthy behaviors, s/he may not possess the skill to resist strong social pressures to conform with peers who do not share that attitude" (McAlister et al., 1979).

While young children usually have strong negative and moralistic attitude toward habits of smoking, drinking, etc., adolescents are more tolerant. The transition from the children absolutist morality to this relativistic and tolerant thinking is due to the progressive questioning to previous limits imposed on their behaviour, explained Erikson, as the process to reach autonomy during adolescence: rebelliousness, social confidence and tolerance, anxiety and arousal seeking, wish to be older, and delinquency and its correlates (Erikson, 1950).

Cultural and societal constraints also influence the extent and the aspects of media contents that will be found relevant: family patterns, the degree of peer-group integration, influence not only the pattern of media exposure but also the kind of effects on the individual. The importance of the peer group cannot be minimized, for it provides progressive emotional support for the youngster as s/he ages, increasing his/her security, prestige, as well as providing grounds for testing oneself, trying out things, and learning the politics of cooperation and coexistence.

The less integrated in the peer group, the more important the media become to the adolescent: "Youngsters have been reported to use media as a third standard of comparison when the values proposed by their parents and friends are in conflict."

Adolescents may also find in media a less threatening source for direct learning of information relevant to their tasks; a fantasy-stimulating trigger to deal (day-dreaming) with important aspects of their problems (romance, sex, achievement) and a stimulating display of alternatives for interpersonal discussion and options, relevant to the issues of their lives.

If the alternatives, the arguments, the patterns of reasoning and conduct are foreign to the culture, detrimental for societies' health - as is the case in some third world countries, then the consequences become much more dangerous (and much more visible). Correct and comprehensive policies have to be established, in order to prevent undesirable effects and to balance the delicate components of this issue (de Camargo, 1984).

Conduct and mass media: old controversies - A critical approach

The arguments - positive or negative - related to the effects of mass media on the audience, belong to today's common knowledge. One of the main issues ever studied, has been violence. Be it considered as having a cathartic effect or a behaviour modelling effect, it has effects on youngsters. The complexity of the problem is inescapable and, consequently, how fragile can predictions supported by research findings be, whether originated from research or other methodological approaches. Our "science" can only make suggestions in order to avoid the worst, but no final conclusions could be offered. That is a challenge to proceed with research, try different approaches, by building new theoretical frames, incorporating new methods, and trying to work in a transdisciplinary way.

Educational agencies claim that the viewers' minds are being distorted and a great percentage of these viewers are children and adolescents. It is also known that many assertions, incompatible with the cultural values of young audiences are being presented to the new generations in a more charming and persuasive format than the school, or other formal educational agencies, could ever do.

It has been pointed out that the American children receive a high degree of televised violence, where all men, good and bad as well, use violence to solve their problems. Rarely is the violence charged as illegal or socially unacceptable. On the contrary, it is considered a legitimate way to obtain the desired results, being the painful consequences of violence minimized and undervalued through the antiseptic format in which they are cast (Halloran, 1970). Death is clean and abstract. The horror that always accompanies it is washed out. By cleaning the product, we fake reality.

If research could not establish the precise correlation between the exposure to violent contents of media and their direct or indirect consequences on behaviour, there is even more reason for insisting on new ways to encompass the problem. We already know that television has effects on its audiences, mainly children: "... TV is a source of incidental learning through observation; such learning is related to the degree of identification between the children and the TV characters and, equally, to the degree of utility the child could perceive or anticipate as gratifying, through past experience with the medium; children between three and eight years are particularly more susceptible to learning through observation, specially the very young, who cannot yet discriminate fantasy from reality; children are likely to believe that the world presented through TV reflects the real world; even adolescents trust the model presented by TV, when confronted with real life situations; children learn from TV, since it is the most accessible gate to the adult world; the idea of 'catharsis' is difficult to be sustained: research shows evidence that televised violence stimulates aggressive behavior; children can learn and retain for a considerable period of time aggressive patterns taken from TV; the image of the adults' world received by the great majority of children through TV programs, is absolutely partial and incomplete; TV penetrates and pervades the childrens whole educational process and teaches them a set of moral and social values about violence that are incompatible with a civilized society ...". So wrote Halloran, in his appraisal of what is already known about the issue. Even though operational definitions could be called for each one of the concepts used in his statements, that would be only a matter of refining hypothetical terms. About its content, there is considerable agreement.

The preoccupations with the power of communication is as old as human society: from the sophists' teaching on rhetorics to Macchiavelli's advice to the "Prince", to the all-important statements on the "freedom of expression" of the American Revolution, to the well-known (and practised) postulates of Goebbels' work, just to mention a few of the relevant marks on the field of behaviour induction through persuasion. The steps on the march demonstrate

differences in the quality of the ethic-philosophic perspective in the focusing of the human being, but they also demonstrate a progressive efficiency and sophistication in reaching the objectives of control which are subjacent to the communication processes.

Liberal thinkers have always been worried by the fact that science and technology do not carry positive or negative signs: these are added by their users. In the contemporary world, disturbed by numerous and speedy changes (and mainly in the developing countries) the persons in charge of their analysis and formulation of their social and cultural policies, frequently report themselves in a state of "perplexity", well diagnosed by Toffler as the "future shock". A future that runs over us, through an acceleration that does not respect limits, be those of physical, psychological, emotional and intellectual performances of the human being, or of the societies, considered as organizations that normally change at a slow pace.

The speed of development of science and technology has made impossible even for the social group that produces them, their analysis and evaluation, in order to absorb or to discard, in a proper time its outputs. Society accumulates and uses them, frequently assuming risks of undesirable consequences.

International voices have denounced the threats of technology to the ecology and mental sanity of the "global village". The same occurs with communication technology: it is a world-wide debate. The questions to be analysed are urgent everywhere. The discussion on the media is a part of everyone's life. At the international level, WHO, UNICEF and UNESCO have systematically debated the subject, trying to identify variables, to assemble sets of compatible questions to propose new research methods, to develop viable multi-alternative types of analysis which could provide better instruments for systematic study of these complex problems. One of these alternatives is to consider communication as a process of national integration, of up-grading the educational and health standards of a society that faces innumerable difficulties and problems whose solution is a sine qua non condition for its own survival.

In countries where the task of developing the population's education and consciousness is absolutely important for the establishment of the national dialogue that democratically enhances the establishment of goals and policies related to individual and social welfare, the role that communication technology could play becomes relevant. The consciousness that such technology is very powerful and that it has taken over society, before it was prepared to integrally understand its effects and efficiently frame them, concerns all who are, or feel, responsible for the conduction of social affairs and decisions about concrete actions regarding the subjects.

For health education, the question about the best choice of channel for effective communication always has priority. Fortunately or not, the hope that some method or medium of communication might be found superior to the others, was dismissed, as the measure that increasing understanding of the learning processes, attitude change and behaviour modification made clear that the right question is a hard one. Instead of considering people as the object to be changed, the approaching perspective has evolved today to the position that Ortega & Gasset revindicated for the understanding of the human being, that is: "the man and his circumstance". Or, as western communication didactically put it: to whom, why, under what conditions, what subject, through what means, in what forms of execution will a method be elected as the best?

There are no previous answers. Each case requires attentive analysis, every intervening factor must be considered, so as to reach an overall situational diagnosis as a background for discussion, which can lead to alternative planning, usually called communication strategy.

"The argument that there is no conclusive scientific evidence on this and other broad causal relationships is not impressive. The wrong question is being asked." Long time observers and assiduous followers of research work in the area, have little doubt of its influence, for the enormous amount of qualitative data and critical research argumentation.

Results of Latin American as well as North American studies may differ on the relevance given to specific variables, but the overviews of the last decade agree that:

- (a) The amount of television sets and television use at home has increased steadily; even in the poorest areas television is a must, more relevant than any other domestic comfort. The same growing pattern is observed with radio.
- (b) Lower and higher socioeconomic television consumption audiences converge in the amount of viewing, even though the fact may not be conducive to greater homogeneity: other variables conceivably intervene.
- (c) In countries and audiences which lack traditional affinity with printed information, television and radio consumption is even greater. On the other hand, access to new technologies (cable, video-cassettes and home microcomputers) may introduce in the higher socioeconomic strata new patterns of consumption, in a new communication environment.
- (d) Age is another differentiating factor on media consumption: television exposure increases from early childhood throughout the first grade, decreasing during high school and college years. Adult consumption becomes higher but levelled, increasing after retirement age. Media consumption increases as leisure time availability increases.
- (e) Data also reveal that some segments of the general audience are heavier consumers than others: children, elderly, blacks and women.
- (f) Variables such as weather temperature, daytime, weekdays and weekends, etc., determine "peaks" in the typical consumption graphics.
- (g) Children and teenagers have different consuming patterns: (in the United States of America) young children (2-5) reach mid-morning, mid-afternoon and 8 p.m. peaks, with oscillation in between. As age climbs, the final peak gets higher, and the exposure to later programmes is heavier.
- (h) The teenagers' pattern is similar to adult males (little exposition during daytime, rising in early evening to one sole peak). Again, the girls' segment shows heavier exposure than the boys, except for the period 5.30-7.30 p.m., where a sharp dip is observed in both groups. Authors point out as probable causes, the existence of alternative activities, or distaste for news, or both.

Whichever the parameters of comparison, the important fact is the place that media occupies in the lives of the young. Data analyses are well known by the media industry, not only in terms of who gets what but also, why and how, two largely more important issues.

Motivational research, as well as exposure surveys and recall testing, provide the media with critical information for a better strategy related to programming, content and formats, as well as to the designing of mechanisms to preserve and possibly increase the media audience and credibility.

Being a "cold medium" television credibility is high; when compared to radio and printed media (newspapers and magazines), it comes first in the public's preference. Even though criticisms may arise about its commercial part, viewers seem to be apt to accept it.

Advertising in media is an entire chapter - and one of the most polemic - that should be considered when talking about health education: controversy goes from the very basic definition of what communication is, what it means to society, to the right and responsibility of imparting information, arousing emotions, setting patterns of behaviour detrimental to individual and community health and wellbeing, and other observable types of impact.

Most research on media effects is largely distributed among the effects of advertising, the socialization process, the antisocial effects and the prosocial effects. If it is true that young children seem not to understand the objectives and persuasive nature of television commercials, and that adolescents distrust the messages, it is also true that they get information from the commercials and inspirations for purchases. About major questions, however, such as media influences on health, and on basic values and attitudes, available data are inconclusive.

In spite of the problems examined, media may offer promising alternatives for large-scale delivery of counselling: experiments indicate that certain health changes (cessation of smoking, diet alteration) counselled through mass media, showed the need for immediate social environment support. Media counselling requires the legitimacy process for a new behaviour otherwise viewers might react only cognitively, but not apply to themselves the imparted information. If measurement of environmental support on changing behaviour through media counselling is difficult, the effect of lack of such support, or a contradictory environment, is usually conducive to failure of the proposed change.

The credibility of television (according to North-American and Latin-American studies) has increased in peoples evaluation, even though at least one-quarter of the interviewees find television news biased. In the Third World countries, where reading is a habit of a minority, television and radio credibility reaches even higher rates. Printed news is only higher in preference, when dealing with local subjects or sensational events.

Regardless of the fact that audience sophistication seems to be inversely related to media evaluation, data imply that "television so well performs its functions as an entertainer, that it largely overcomes scruples based on attitudes".

The important fact, emerging from field studies, is that media, mainly television, has set the agenda for most of the homes all over the world. Occupying the greatest part of people's leisure time, it has also reduced the time spent in sleeping, in social gatherings away from home, in reading books, in conversation, movie-going, religious and domestic activities. It has become the eccentric axis of the family and, with the help of satellites, of the nations: in a way, it has increased world awareness about events which otherwise would be overlooked; on the other hand, banalization of important events, presented in the fait-divers format of television news, has reduced the impact that such facts would require.

In this connection, everything can become an issue; media decide what is to receive the public's attention: from economics to politics, nutrition, sex, love, violence, drug addiction, incitation to war, sports, weather conditions, calamities, religion, gossip ... have their contents legitimated only by the fact of receiving media treatment.

As television took over leisure time, other media got reshaped, serving more specifically for definite purposes, subjects and situations. That is the case of radio, which has lately gained enormous popularity, as well as recognition of excellence for certain communication purposes. In the same line of reasoning, magazines, newspapers, records and the whole set of products of the cultural industry have redefined their roles, targeted their audiences and adjusted their contents and formats to fit the specificity of the market. The same is expected to happen with the new technologies, as they seek for their share in the market-place.

The major concern of educators about the possible negative effects of media on youngsters, comes from the very fact that when finishing high school, they will have been exposed to its contents influence for a considerable amount of time, throughout those years which are crucial for the internalization of values, attitude formation, habits acquisition and emotional development. In short, educators are concerned with the health of youngsters' personalities, formed under the influence of this omnipresent source of information, biased by the interests that run it, characterized by the difficulty of access to its production control, and by the fact that programming is designed with no regard to the consequences their messages will have upon children and adolescent audiences.

"Health is a state of complete physical, mental and social wellbeing"

(WHO)

Health as a central issue

In this progressive world, characterized by urgency and speed, growing unrest, dizziness and universal anguish, man must also be careful not only with the ancient threats to life, such as malnutrition, infections, lack of security, but against new and serious dangers - paradoxically called illnesses of civilization: traffic accidents or accidents at play and sports, at work, and specially at home with the child; occupational or accidental intoxications, air pollution, excessive noise that disrupts sleep and rest and disturbs man's privacy in his own home; drugs, self-medication, excessive intake of medicaments, deliberate or induced, etc.

All problems are educational problems: if sickness kills men and ignorance puts them in danger of death (at immediate, medium or long term), health education can give them proper information, either individually or collectively.

While we live in the golden age of medicine, which has beaten tuberculosis, cured meningitis, prevented poliomyelitis, given the power to walk to paraplegics, exterminated what used to be lifelong parasites and eradicated brain tumours, we still find world areas with the kind of health backwardness which was banished hundreds of years ago in developed regions.

Health has been defined as a state of complete physical, mental and social wellbeing (WHO). Health is not only an approach to the technical problems of eliminating diseases, it is a moral, social, global commitment. Health is not an end in itself but a means to achieve a fuller, more productive and happier existence, which enables everyone to better serve humanity.

Health education is the whole set of "actions conducive to the development of personal habits which help to preserve and to promote the health of the individual and the community; to awake the feeling of responsibility for one's own health, for the health of those around us, and for the people who depend on us".

Man can never be considered as an isolated entity: he is part of the family, the school, the university, the pre-professional community, the military or work environment. Health education cannot fully achieve its objectives if it does not take into account the social context in which individuals live and their relationship with the community. In short, health education must aim at the promotion of health and social education at one and the same time.

This holistic conception alters the ancient focus: while health can be considered, in a way, a personal matter, sociopsychology points up its influence on the desires and hopes of individuals and social groups as well, regarding their environment and their standards of living. Therefore, the maintenance of one's health is a social responsibility.

The process of health education is the slow elaboration of information and the assimilation of habits, of behaviour patterns which are conducive to health care and result in a prolonged life-span. In this process purely rational components play a much less important role than everyday experience. Therefore, it seems necessary to lean much more on out of school activities than just on school education.

Yet, for a long time and still today, the school has been overwhelmed as the main channel of health education (and, in some areas, the only one) without considering that "when the information and norms imparted at school openly contradict the patterns of the community, the child and the youngster come into serious difficulties if she/he wants to share and practise the new concepts. Most frequently the new information or concept is not authentically integrated in the personality and remains a phenomenon of rational knowledge which disappears without leaving any impact".

Health education must handle five different tasks: create favourable cognitive structures, analyse the motivation complex, put motives in control of behaviour, develop supportive group standards and establish behaviour so that it will not revert to old ways. What brings to consideration a whole set of personal, social and cultural factors.

Change health behaviour - at individual and/or community levels must also consider the traditional health folklore issue - i.e., the accumulation of popular knowledge which permeates the collective subconsciousness and may interfere in the communication process involved in health education.

The role played by the school cannot be under-rated. However, it should be reassessed taking into account this powerful new educational agency - the mass media - which can be used for specific purposes, in the global process of promoting health education.

School health education should be intensified in the higher grades of secondary school, so should the media approach. Children schooling on health education can be helped by the media, at the measure that programme producers consciously include patterns to be imitated, and health workers could minimize conflicts with family patterns and create community support for the desired behaviour.

Sharing responsibilities, according with their special parameters and processes, the school programmes could emphasize the clarification of concepts, the intellectual explanation of habits, norms, customs, and ways of life which promote health, while media could be used to motivate, to reinforce good ones and to propose desirable changes, through their highly persuasive processes of communication.

Community participatory research

Changing the concept of social communication

The contemporary Latin American philosophy of education and the critical researchers of communication in developing countries look up to the northern models of media use as ideologically convergent or congruent with the socioeconomic and political patterns of dominant societies. Such models, emphasizing the role of the communicator and the strategy to be developed in order to get from the receiver the adequate feedback, are criticized as a sort of "militar" scheme: to win the enemy's resistance and conquer positions through a communication blitzkrieg; a process that would initially involve mass media, to further use interpersonal means, manipulated by extension agents, opinion leaders and educators.

This method of approaching education has been considered by Paulo Freire very much alike the commercial advertising and marketing ones, which are found to be conducive to the reinforcement of the processes of incommunication and alienation, already recognized as characteristics of international dominant-dependent relationship, incompatible with the authentic efforts of democratic development, which conceive man as a resolute engineer of his own progress and not a passive object of alien decisions.

Looking to health education from this perspective, media education programmes in the communities should be designed to change, to be evolutionary in nature. Formative evaluation and feedback systems should be built-in, from the very beginning, to provide health education teamwork with useful information to direct subsequent actions.

First, the people

Community involvement with the project is a departing point. Community motivation and desire to do something about a problem is a must. So is participation more than just an ideal acceptance: local physicians, health professionals, medical and paramedical societies, hospital staffs, civic leaders, educators, key gate-keepers and all sources of legitimation and support are to be contacted personally, by phone or by letter, depending on the culture value attached to these practices, and be given full information about the aims, the plan characteristics and development steps.

The same care should be given to media people, due to their responsibility in the process: media must receive full information, from the better sources, well produced materials to fit in their existing formats, programme needs, and local professional standards.

Public recognition of media cooperation and relevant services performed for the community may be an excellent element to strengthen cooperation in the long process of health education.

Follow through research

Evolutionary approach to community health problems requires a constant flow of evaluative data. General surveys should be supplemented with systematic but informal small-scale information gathering efforts, which provide the teamwork with immediate feedback on the public awareness, acceptance and response to specified sets of media events, as well as estimate the progress to date. Evaluating/planning becomes, then, the permanent feature of health project management.

This feature becomes more relevant when cultural and/or ethnic differences are present in the community, for the implications on the kinds of changes needed, behaviour styles and specific barriers.

Media selection may greatly differ since different audiences seem to have special preferences or media availability. In bilingual areas the problem of sensitiveness or susceptibility must receive special consideration. It is always recommended that the teamwork includes scientists and specialists of the cultural groups involved. (This recommendation is the basis for the alternative methods of health education in many points of Latin America.) The same applies to media people who should join forces to the community effort.

Teaming

A delicate problem in health education is the composition of teamworks of highly trained and diversified talents which opinions may greatly differ. Main difficulties have been found in the relationships of social and biomedical scientists and the whole scientific team and the media team. The latter typically resents ". . . the intrusion of aesthetically and technically untrained behavioural researchers, who ignore the media 'language'". The same happens at the other side: scientists and researchers often feel frustrated with the media "translation" of scientific information.

Annoying problems in the development of instructional and persuasive materials, where content experts and media workers shall work closely together, may be avoided if a previous period of training is provided. Besides enabling proper introduction full information about contents, objectives, audience characteristics, evaluation techniques and other relevant issues can be shared and frankly appreciated, thus developing a common frame of reference for all people involved in the programme.

"Much of the success reported in health education efforts is due to the good luck in recruiting talented and dedicated people: recruiting becomes, therefore, a critical aspect of applied community research, that should not be overlooked or underrated" (Farquhar).

Interdisciplinarity

The trend in the use of mass and alternative media for health education purposes is to progressively develop better techniques of interdisciplinary work throughout the programme. This is not an easy task, due not only to the differences in academic training, basic information and formation of the participants, but also to the degree of experience in the field of health education and, particularly, in the specific subject and method. Consensus is slowly reached on many issues: from concepts to communication methodology, to evaluation techniques, and so forth. "One of the great attractions of this kind of methodology, beyond the stimulation of the multidisciplinary collegial working groups, is the opportunity to listen to and work with real people in the real world, with real problems; to advance knowledge, while seeing it effectively applied to social needs", says Maccoby, who, after

long years of dedication to the problem of communication in health education, concludes: "You can either work on the only most important problem that you can handle with precision, or you can work on the most important problems with the best of inadequate research methods".

Experimental educational programmes including old and new communication media have been carried out: interface communication, group discussion, lectures, films, radio, pamphlets, posters, exhibits, demonstrations, puppets, as well as new approaches: satellite conferences, telephone consultations, audio and video recordings, television, computer-aided education, among others, have proved their unique contribution.

Essential, indeed, in health programmes, is to use all the available means and professional competence, skill and support of those who can contribute to bridging, through education, the most tremendous gap which now exists between the findings of scientific research and their practical application in daily life.

A sort of summary

Writing a paper that deals with mass media effects and health education information for youngsters poses a series of difficult decisions since it deals with subjects organized in different systems, concepts and processes studied by different areas.

The requirement of healthful living must be made accessible to all through the full integration in everyday life, raising the levels of health of individuals and of communities, and promote a collective "social consciousness", focused in the protection of total health, considered in all aspects and specially in terms of health interdependence above and beyond any frontiers.

Taking the most important element of the proposition, the developing human being: from where - and how - to start analysing his or her health education process, wholistically conceived as a means of forming healthy men, ready to face what's new for them yet to come, in all aspects of individual and social wellbeing?

Knowledge and awareness are bound to lead to action and must no longer be the prerogative of a few specialists. Health belongs to the sphere of sciences concerned with the study of man in the broadest sense, for the impact that physical, biological, socioeconomic environments have upon mankind's wellbeing.

Segmentation of the problem in terms of age, physical fitness, emotional and mental development, and of schooling achievement can only be enlightening when understood in the complex interpretation of socioeconomic, cultural and political parameters.

On the other hand, along with the educational system, mass media constitute, in the modern society, one powerful subsystem responsible for the reproduction of the socioeconomic, cultural and political conditions which maintain the state organization. Therefore, mass media reflect, in their characteristics, the orientation and even the contradictions of the manifest forces within the state organization.

The influence of media cannot be denied, in spite of the inconclusiveness of scientific research, mainly about those questions which, for their complexity, involve numerous factors. Moreover, because these factors change as time goes by, express themselves differently and are perceived by people with different values in different societies.

The need of an adequate number of really inter- or trans-disciplinary teamworks, sufficiently abrangent to research questions - conceptually and operationally multifactorial - such as "the impact of media in youngsters health education development" is felt in every society. Critical works demonstrate the importance of integration among scientists, specialists, technicians, educators, social workers and media people if research information about health is to produce better living standards.

Frustrations caused by inadequacies in the use of mass media for health education, allied to the perception that generalizations can become a dangerous pitfall in the process of social change, have led progressively to the distrust in the mass media as an agency capable to promote community development in all sectors, mainly in the developing countries. Consequently, the small media, and what has been called "alternative communication" methods and techniques, are being extensively and intensively used in the Third World.

Comprehensive research work under this perspective is often unavailable except for a few case studies, but there is little doubt of its revenue. Even the concept of research has become quite different from the usual scholarly accepted. Called "participatory", research has brought in a group of new actors to seek and interpret data, actors who normally are absent from orthodox university design.

Finally, three "ifs"

As media play such an important role in people's lives a healthy society cannot survive without a healthy media system. It implies the responsibility of the mass media regarding their own processes, in terms of quality of information, credibility of sources, adequately trained personnel, philosophy and ethics of work, definition of healthy policies of interaction with the state and the other subsystems of society; above all, mass media should be committed with the democratization and the betterment of peoples's standards of information, education and social wellbeing. So, media system must be healthy, if their contribution to the progress of people is to be enriching and positive.

The agencies committed to health education and the study of the effects of media upon society, particularly on children and adolescents, have to refine and research in depth the concepts and findings that can offer support for social media workers, educators and social workers in the health area.

The questions are several: on the process of socialization, issues on socially desirable effects, role socialization, political socialization, anti-social behaviour, advertising effects, cognitive learning, interaction of media and other socializing agents, patterns of media-individual and media-group relationships, and so forth; on civics aspects, effects of political beliefs and behaviour due to news coverage and public affairs require serious study; psychological and behavioural effects of media exposure, the dynamics behind them, the uses and gratifications offered by different media; special segments of society, such as minorities, marginalized and underprivileged groups (the elderly, the illiterate), should receive special attention from research, which results must be shared with media people, educators, and social workers if the concept of health education has become fully operational.

Technology came to stay. Telecommunications have shrunk the dimensions of our world, enabling an increasing number of people to venture outside their clan into the discovery of other worlds and cultures. As a result, only if man advances in his heart and mind to achieve a better life, to master his fate more effectively, to cooperate more harmoniously, is there a reason to believe humanity's capacity to progress.

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