



SIXTH GENERAL PROGRAMME OF WORK COVERING A SPECIFIC PERIOD (1980-1983)

GLOBAL MEDIUM-TERM PROGRAMME

FOR PROGRAMME DEVELOPMENT AND SUPPORT

SECTION I

HEALTH INFORMATION

CHAPTER IV

HEALTH INFORMATION OF THE PUBLIC



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This Medium-Term programme, the first developed for Health Information of the Public, describes the approaches being taken to support Member States and key WHO programmes in their progress towards Health for All by the Year 2000. While this has evolved from the objectives and targets of the Sixth General Programme of Work, it introduces a number of new directions, which recognize the rapid evolution of communication techniques and the paramount importance of public information support to primary health care.

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GLOBAL MEDIUM-TERM PROGRAMME FOR HEALTH INFORMATION OF THE PUBLIC

1. INTRODUCTION

Since its inception, the World Health Organization has maintained a strong programme of health information of the public. In the early years, this aimed at promoting knowledge and understanding of the reasons for the Organization's existence, its terms of reference, and its activities. Increasingly, over the years, the programme has been directed at widening public understanding of national and regional health problems, their economic and social significance, and possibilities for action, and at fostering positive health behaviour. The central importance of these activities to the coordination of international public health work has been recognized in the organizational link of the programme to the office of the Director-General, since 1948.

2. POLICY BASIS

The Preamble of the Constitution of WHO states that "informed opinion and active cooperation on the part of the public are of the utmost importance in the improvement of the health of the people". Furthermore, Article 2 states that a function of WHO is "to provide information, counsel and assistance in the field of health" and "to assist in developing an informed public opinion among all peoples on matters of health".

3. SITUATION ANALYSIS

3.1 Urgency of the problem

In a world in which 80 per cent of people lack regular access to health care and in which there is widespread dissatisfaction with existing health care services, there is clearly a need for a new approach to the provision of health. In recognition of this, the governing bodies of WHO have defined the concept of Health for All by the Year 2000, through primary health care.

Public understanding and support are a basic prerequisite for bringing about the social and economic changes that will permit a dramatic rise in the level of health for all. Such a process can be stimulated and sustained only by the population itself, through informed community participation. If an informed public opinion among all peoples on matters of health was thought desirable by WHO's founders, it is even more crucial in the 1980s. To show people the practical value of self-reliance in health care, and to encourage them in more positive attitudes towards the community's health and health behaviour, will be essential if we are to alleviate the world's burden of disease and ill health.

3.2 Constraints

Immense obstacles stand in the way of health reform. Individuals everywhere have yet to understand fully the role of personal behaviour in health. Within the developing countries, the burden of disease, poverty and malnutrition is such that few individuals can foresee a society in which they, through their actions, may create a better life for themselves and their families. In developed countries, the fact that health is not a valued asset until it is lost is the product of a deeply ingrained dependence syndrome fostered by the historic evolution of disease-centred health care. Vested interests have encouraged a system which emphasizes curative approaches rather than prevention or individual responsibility; health technology has escaped from social control.

The low value accorded by society to positive health behaviour creates resistance on the part of the public to health messages. Reacting to this attitude, the mass media give little prominence to positive health news, focusing instead on medical crises, epidemics, professional controversy and technological innovations. A further problem is the communication gap between the mass media and the scientific community, often characterized by misunderstanding and distrust.

Within developing countries, the lack of a communication infrastructure and trained communication personnel creates a formidable barrier to the flow of knowledge. The Third World, with more than 70 per cent of the world's people, has only 20 per cent of the world's radio receivers and transmitters, for instance. Also, the communication linkages developed in the colonial era still prevent developing countries from sharing among themselves their wealth of knowledge and experience.

### 3.3 Positive aspects

Against these constraints, health information of the public is working to create a growing concern for global health, an increased understanding of the interdependence of nations in health matters, an awareness of the contribution of health to socio-economic development, and the role of behaviour in personal well-being. Major positive trends include the growth of environmental and consumer-protection movements and the slowly developing realization of the importance of the quality of life. The growing interest in self-care presents a challenge for health information activities.

Prompted in part by past information campaigns, the detrimental influence of commercial advertising for such products as tobacco, alcohol, pharmaceuticals and infant foods is becoming widely recognized, and governments are beginning to take legislative and other action, with the support of WHO.

Additionally, the acceptance by Member States of the concept of Health for All, with its emphasis on individual responsibility and community participation, has created a climate in which public information and education are of paramount importance.

## 4. OBJECTIVES

4.1 Principal objective 10.7.3 of the Sixth General Programme of Work (Development of Comprehensive Health Services) is: "to promote health education and information of the public with particular emphasis on the responsibility of the individual and active community involvement". It suggests as a target "the systematic introduction in all WHO's programmes, at all relevant levels, of a health education and information component for the general public and the active involvement of the population".

### 4.2 Specific objectives

To support Member States in positively influencing and mobilizing public opinion in order to foster the attainment of their major social objective - Health for All by the Year 2000.

To develop for, and in cooperation with, Member States, intergovernmental and non-governmental organizations, health information programmes and materials designed to promote an awareness of the role of each person, and of the community, in maintaining good health.

To provide policy-makers in Member States and other opinion leaders with information showing the interdependence and interrelationships of health and socioeconomic development.

## 5. APPROACHES

The global objectives of the Programme of Health Information of the Public may be summed up as consciousness-raising as a means of fostering political support and action for Health for All, and creating greater awareness of what is health and how it may be attained or preserved. An example of the former is the publicizing of decisions of the World Health Assembly, through the mass media. An example of the latter would be a World Health Day promotion such as "Smoking or Health, the Choice is Yours", which provides a springboard for national health information and educational campaigns.

In practice, most information activities are mutually supporting and contribute in some way to each specific objective. World Health magazine is an example.

During the 1980-83 period, health information of the public will play its part in sustaining the political will essential for Member States to formulate and implement their strategies for Health for All. The approach will be to create a sense of the urgency of the challenge and a realization that considerable health improvement is possible in the foreseeable future. This will be achieved by providing to various information recipients (who themselves act as second-stage catalysts) material presented in a convincing and imaginative fashion. Information units within Ministries of Health will be supported and strengthened by being offered opportunities, through meetings or other exchanges, to transfer experience of successful techniques and, in close cooperation with health education specialists, to better define the role of information in the process of behavioural change.

In relation to objective 2, WHO will act mainly as a catalyst for triggering persuasive health information and education programmes prepared by Member States, non-governmental organizations, or the mass media. The approach will be to encourage these "carriers" of health information to develop innovative and appropriate approaches, and to deal with key themes of Health for All. WHO will also be a source of information and will continue, in selected cases, to package and disseminate appropriate materials itself.

Recognizing the commonality of interest and purpose between health education and health information activities, concerted efforts will continue to be made, both at the global and regional levels, to collaborate closely so as to multiply the end results.

Several Regions will place greater emphasis on promoting local language versions of public information materials, a need expressed by numerous Member States. In designing pamphlets and posters, care will be taken so that local language texts may be inserted, wherever possible.

Recognizing that the use of communication sciences is often overlooked when health improvement projects are devised, information staff will work closely with WHO programme divisions, and respond to national requests from Ministries of Health, to integrate communication elements in programme design.

## 6. PROGRAMME MANAGEMENT

Effective management of the programme is achieved through a continuing process of consultation. This enables the Programme Manager - in close coordination with the six regional PIOs, the information liaison officer in New York, and the global action group at headquarters - to maintain, with the agreement of the Regional Directors, the Deputy Director-General and the Director-General, the flexibility required to seize every opportunity for reaching programme targets. The consultation process is also extended to Member States, the UN system, intergovernmental organizations and nongovernmental organizations.

## 7. RESOURCES

The funds allocated to this programme under the regular budget are sufficient only to carry out the basic public information requirements, as outlined under "5. APPROACHES". In accordance with the Sixth General Programme of Work, which states in principal objective 10.7.3 that there would be "systematic introduction in all WHO's programmes, at all relevant levels, of a health education and information component", efforts will be made to promote such an integrated approach. This has been demonstrated successfully in several programme areas, in which public information specialists provide continuing advice and assistance to programme managers in developing and administering public information activities linked directly to programme objectives.

Extrabudgetary funds are constantly sought from Member States and NGOs to enable financing of new and innovative approaches.

8. OBJECTIVES, TARGETS AND ACTIVITIES

The Medium-Term Programme outlines the major thrusts of the programme for Health Information of the Public. Targets and activities listed below mainly comprise specific projects. Space does not permit a full description of the many ongoing services provided by the programme at both the global and regional levels as part of its basic support to the Organization. These core activities, which consume a considerable part of the resources available, include response to news media and public enquiries, handling press arrangements for all WHO meetings, provision of speakers to appropriate groups, briefing of visitors, preparation of displays for WHO programmes, collection and analysis of news coverage of WHO programmes, and distribution of public information materials. The central photographic library each year produces more than 50,000 black and white and colour photographs. This includes many thousands of colour slides used to illustrate programmes in the field of health manpower development and is continually being renewed with topical photographs. Photo libraries are also maintained at Regional Offices, so that an efficient service may be provided to users at the national level. A central library of 250 film titles is maintained, and annual film sales total some 650, representing US\$ 60,000.

Objective 1 To support Member States in positively influencing and mobilizing public opinion in order to foster the attainment of their major social objective -- Health for All by the Year 2000.

TARGETS	ACTIVITIES		LINKAGES
	1980-81	1982-83	
1. By 1983, develop mechanisms to assist Member States in elaborating country strategies for public information support for Health for All	<p>Identification of focal points for public information activities.</p> <p>Situation analysis of role of national information officers.</p> <p>Identification of external support required.</p> <p>Two regional or interregional workshops (1. EURO; 2. To be determined).</p> <p>Development of a network for information exchange.</p>	<p>Two regional or interregional workshops (locations to be determined).</p>	<p>HED, HBI</p> <p>HED/SHS</p> <p>HBI, SHS, HED</p>
	<p>World Health Day, 7 April 1981. Theme: Health for All by the Year 2000. Kit and mass media promotion including TV and radio spots.</p> <p>World Health magazine. Ten issues per year. Sharper focus on key issues of H/2000.</p> <p>Greater emphasis on reporting on progress toward H/2000.</p> <p>Availability to Member States of six films on aspects of PHC together with supporting documentation.</p> <p>Specialized films: malaria, tobacco, smallpox, Water Decade, EURO activities, TB, immunisation, rehabilitation.</p> <p>Workshop for Third World filmmakers.</p> <p>Health/2000 newsletter. 4 per year.</p> <p>Orientation of all major news media relations to promotion of H/2000 and PHC, including news releases, feature articles, stimulation of newspaper and magazine coverage of issues.</p> <p>Regional workshop for journalists and information officers. (Location to be determined.)</p> <p>Agreements with Third World news agencies to foster more positive coverage of H/2000 and primary health care.</p> <p>WHO/Earthscan seminar (September 1980) for journalists on Water Decade.</p> <p>WHO journalists' seminar on TDR (October 1980).</p> <p>Increased use of NCO channels of communication to elicit material support and foster community participation.</p> <p>Maximize cooperation on a continuing basis with UN NGO Liaison Service.</p>	<p>World Health Day, 7 April 1982. Theme: to be selected.</p> <p>Readership survey.</p> <p>Keynote cartoon film on essential issues of H/2000 and PHC.</p> <p>Specialized films: subjects to be determined.</p> <p>Two regional workshops for journalists and information officers. (Locations to be determined.)</p> <p>WHO/Earthscan seminar on PHC.</p>	<p>DGO/SHS</p> <p>HBI/HED</p> <p>SHS</p> <p>Various WHO programmes</p> <p>CMC, UNICEF</p> <p>DGO/SHS</p> <p>HED</p> <p>EHE</p> <p>UNICEF</p> <p>UNDP</p> <p>World Bank</p> <p>UNDP, CMC</p> <p>UNICEF</p> <p>UN, UNDP</p> <p>UNICEF</p>

Objectives 2 & 3 To develop for, and in cooperation with, Member States, intergovernmental and nongovernmental organizations, health information programmes and material designed to promote an awareness of the role of each person, and of the community, in maintaining good health;  
To provide policy-makers in Member States and other opinion leaders with information showing the interdependence and interrelationships of health and socioeconomic development.

TARGETS	ACTIVITIES		LINKAGES
	1980-81	1982-83	
1. Achieving an acceptance of the effective use of communication sciences in support of major health programmes.	Development of communication guidelines for programme and project support. Assessment with programme managers of how communication strategies may support their programmes. Development with programme managers of communication strategies as an integral part of programme and project design.		EHE, EPI, YHE, MNH, TDR, etc.
2. Provision of topical and timely health information materials, including publications and audio-visual support, to Member States, NGOs, mass media and the public.	World Health magazine. Ten issues per year. World Health Day multimedia promotion. Posters on H/2000 and breastfeeding. Wallsheet: Women in Development. Photo sets on key health issues. Provision of issue-oriented materials, including publications, films, and radio programmes. Support to International Year of Disabled Persons, 1981.	Support to U.N. Conference on the Aged, 1982	UNICEF  Various WHO programmes  UN
3. Collaboration with and support to health education programmes, including promotion of mass media actions.	Utilization of mass media to reinforce and replicate health education approaches. Participation in expert committee meeting "New Approaches to Health Education in PHC". Collaboration in research on methods of encouraging community participation. Collaboration in preparation of manuals and guidelines on health education.	Participation in implementing expert committee recommendations.  Design and dissemination of popularized health materials based upon HED manuals. Workshop on information, education and communication in health (Manila)	HED  SHS, TDR, EHF, MNH, etc.
4. Encouragement of mass media support to health promotion.	Provision of a continuing flow of pertinent information materials to major news media. Stimulation of specialized coverage of major health issues by authors, science writers, broadcasters, film-makers, etc. Commissioning of developing country writers, authors and photographers to provide health information materials for dissemination by WHO. Promotion of two-way flow of health development news in under-served areas. Promotion of local language versions of information material. Training of information interns at WHO HQ: - 2 per year Workshop for training of journalists in health reporting. (location to be determined)	- 2 per year Workshop for training of journalists in health reporting. (location to be determined)	Various WHO programmes
5. Increased health promotion activities by NGOs including mass membership organizations.	Extension of the range of cooperative relationships. Assistance to consumer organizations in promotion of breastfeeding. Provision of issue-oriented information materials, e.g. aged, road accidents, disability prevention, smoking and health, drug abuse. Participation in Regional North-South Dialogue Conference, Atlanta, Georgia, October 1980.		UN, UNICEF, UNDP, COR  MCH, HED  NCLS

## Objectives 2 &amp; 3 (continued)

TARGETS	ACTIVITIES		LINKAGES
	1980-81	1982-83	
6. Encouragement of individual organs of the UN system to recognize and support the link between health and development.	Participation in UN inter-agency collaborative activities, e.g. providing input to UN publications, films, radio programmes, exhibits, seminars, etc. Exhibit: Mid-Decade Women's Conference, Copenhagen, August 1980 Articles in Development Forum newspaper. Joint information activities on Water Decade, TDR, primary health care.		UN Agencies, COR  UNICEF, World Bank, UNDP, TDR
7. Increase awareness of parliamentarians and legislators concerning H/2000 concepts and WHO programmes.	Development with Regions of a global and regional strategy. Improve information flow by developing a directory of concerned legislators. Preparation and distribution of specific information materials.	Implementation of specific actions.	Global and national inter-parliamentary unions

ABBREVIATIONS

CMC	Christian Medical Commission
COR	Division of Coordination
DGO	Director-General's Office
EHE	Environmental Health
EPI	Expanded Programme on Immunization
EURO	European Regional Office
FHE	Family Health
HBI	Health and Biomedical Information Programme
HED	Health Education
H/2000	Health/2000 (Health for All by the Year 2000)
INF	Division of Public Information
MNH	Division of Mental Health
NGLS	Non-Governmental Liaison Service
NGO	Non-Governmental Organization
PHC	Primary Health Care
SHS	Strengthening of Health Services
TDR	Special Programme for Research and Training in Tropical Diseases
UN	United Nations
UNDP	United Nations Development Programme
UNICEF	United Nations Children's Fund
WHO	World Health Organization