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Still image from the [Population Media Center campaign](#) video, [Find the Truth](#)

Population Media Center: Find the Truth

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The following essay was adapted from [PMC's annual campaign mini-site](#).

Every Population Media Center TV and radio show is based on extensive quantitative and qualitative research – after all, we can't responsibly role model solution-oriented behaviors to problems that we don't truly understand.

Take, for instance, the 214 million women in the developing world who want to avoid a pregnancy for at least the next two years, but who are not using modern contraception. Many sexual and reproductive health and rights advocates trace this dynamic (usually referred to as an unmet need for contraception) to a “lack of access” to contraception.

However, Population Media Center's analysis of multiple [USAID Demographic and Health Survey \(DHS\)](#) reports over the last two decades have consistently demonstrated something distinctly different: women with unmet need for contraception rarely cite cost, convenience, or a “lack of access” as the reason they are not using contraception. Rather, the major impediments to behavior change – contraceptive uptake – are rooted in apprehension, fear-

inducing rumors, or personal antagonism towards contraception, often grounded in religiosity, fatalism, or patriarchal social norms.

Increasingly, new analysis are pointing to similar conclusions. In June 2016, for example, Guttmacher Institute scrupulously analyzed a decade's worth of data related to [reasons for non-use in 52 developing countries](#). Guttmacher found non-users who actually "lack access" measure out to only around 5 percent. Meanwhile, fear of health effects and personal or spousal opposition to contraception account for 49 percent of non-use. In other words, non-use of contraception related to informational and socio-cultural barriers out-numbered non-use related to a lack of access by a factor of 10.

To be absolutely clear, PMC strongly believes that supply chains and market availability of contraceptives need continual improvement. But, these aspects of contraceptive prevalence are not currently the primary areas needing investments. As Guttmacher states, *"...family planning programs have existed for some time in most of the developing world, sources of supplies have expanded, and methods are offered at low cost or free of charge in public-sector health services. [Our] findings do not necessarily show that access-related problems have been resolved, but suggest that women perceive other reasons for nonuse to be more important."* Spousal opposition to family planning, for example, is one substantive social challenge facing women in many areas PMC works.

PMC believes that the most acute need in global family planning programs today are interventions that can challenge long-established and widely practiced social norms – while cost-effectively correcting misinformation, myths, and rumors around family planning. However, because social norms are, by definition, resistant to change – and because socially trafficked rumors and falsehoods wield enormous influence over individuals and families – standard service provision or direct messaging campaigns such as door-to-door counseling, billboards, or PSAs are unlikely to succeed, and may even further entrench the behavior in question.

Instead, PMC leverages social and behavior change science to engage people with theory-based entertainment programs. Our shows are always built upon a foundation of comprehensive formative research. That is the only way to "Find the Truth" and role-model realistic attitudinal and behavioral alternatives - such as male understanding and acceptance of the health benefits of family planning for their wives and their children.

[Video: Find The Truth](#)

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The MAHB Blog is a venture of the Millennium Alliance for Humanity and the Biosphere.
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MAHB Blog: <https://mahb.stanford.edu/blog/find-truth-pmc/>