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# Facts for Life

**With advice on:**

Safe Motherhood

Breastfeeding

Child Development

Nutrition and Growth

Immunization

Diarrhoea

Malaria

HIV/AIDS

and much more...



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# Facts for Life

Third Edition

# Facts FOR Life

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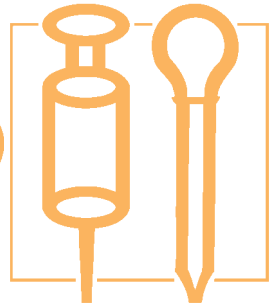
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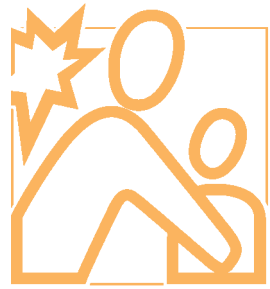
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# Foreword

Every year, nearly 11 million children die from preventable causes before reaching their fifth birthday, many of them during the first year of life. Millions more survive only to face diminished lives, unable to develop to their full potential.

This terrible toll in human suffering and forgone prosperity can be vastly reduced. Three fourths of all child visits to health facilities for medical care and 7 out of 10 childhood deaths result from just five causes: pneumonia, diarrhoea, measles, malaria and malnutrition. The knowledge and capacity to prevent and treat all five causes exist.

*Facts for Life* aims to make life-saving knowledge easily available to everyone. It presents the most important facts that people have a right to know to prevent child deaths and diseases, and to protect women during pregnancy and childbirth. Its messages are simple, and people in every corner of the world can act on them.

Published by UNICEF, WHO, UNESCO, UNFPA, UNDP, UNAIDS, WFP and the World Bank, *Facts for Life* can save many lives – if its messages reach their intended audience. We urge all communicators – health workers, the media, government officials, non-governmental organizations, teachers, religious leaders, employers, trade unions, women’s groups, community organizations and others – to join in a common cause to protect all children.



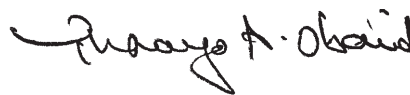
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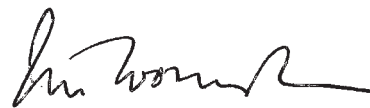
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# The purpose of *Facts for Life*

*Facts for Life* aims to provide parents and other caregivers with the information they need to save and improve children's lives. The challenge is to ensure that everyone **knows and understands** these facts and is motivated to **put them into practice**.

The messages contained in *Facts for Life* are based on the latest scientific findings, as established by medical experts around the world. These facts are presented in non-technical language so they can be understood and acted upon easily by people who do not have a scientific background. Doing so can save lives.

Everyone can help communicate the *Facts for Life* messages – health workers, teachers, students, government officials, radio broadcasters, journalists, community workers, religious leaders and people in all walks of life – young and old, family members, friends and neighbours, men, women and children.



# The structure of *Facts for Life*

*Facts for Life* consists of 13 chapters, each dealing with one major cause of childhood illness and death. Every chapter has three parts: an introduction, several key messages and supporting information.

**The introduction** is a brief and powerful ‘call to action’. It summarizes the extent of the problem and why taking action is so important. The introduction aims to inspire people to get involved and share the information widely. The introduction can be used to motivate political leaders and the mass media.

**The key messages**, addressed to parents and other caregivers, are the essence of *Facts for Life*. They contain the essential information that people need to protect their children. The key messages are clear, brief and practical, so people can easily understand them and take the recommended action. These messages are meant to be communicated often and in various ways.

**The supporting information** elaborates on the key messages, providing additional details and advice. This information is particularly useful for health workers or anyone who wants to know more. It can also be used to answer caregivers’ questions.

# Essential Facts

The following are the essential messages distilled from *Facts for Life*.

- 1** The health of both women and children can be significantly improved when births are spaced at least two years apart, when pregnancy is avoided before age 18 and after age 35, and when a woman has no more than four pregnancies in total.
- 2** All pregnant women should visit a health worker for prenatal care, and all births should be assisted by a skilled birth attendant. All pregnant women and their families need to know the warning signs of problems during pregnancy and have plans for obtaining immediate skilled help if problems arise.
- 3** Children learn from the moment of birth. They grow and learn fastest when they receive attention, affection and stimulation, in addition to good nutrition and proper health care. Encouraging children to observe and to express themselves, to play and explore, helps them learn and develop socially, physically and intellectually.
- 4** Breastmilk *alone* is the only food and drink an infant needs for the first six months. After six months, infants need other foods in addition to breastmilk.
- 5** Poor nutrition during the mother's pregnancy or during the child's first two years can slow a child's mental and physical development for life. From birth to age two, children should be weighed every month. If a young child does not gain weight over a two-month period, something is wrong.
- 6** Every child needs a series of immunizations during the first year of life to protect against diseases that can cause poor growth, disability or death. Every woman of childbearing age needs to be protected against tetanus. Even if the woman was immunized earlier, she needs to check with a health worker.
- 7** A child with diarrhoea needs to drink plenty of the right liquids – breastmilk, fruit juice or oral rehydration salts (ORS). If the diarrhoea is bloody or

# for *Life* messages

frequent and watery, the child is in danger and should be taken to a health centre for immediate treatment.

- 8 Most children with coughs or colds will get better on their own. But if a child with a cough is breathing rapidly or with difficulty, the child is in danger and needs to be taken to a health centre for immediate treatment.
- 9 Many illnesses can be prevented by good hygiene practices – using clean toilets or latrines, washing hands with soap and water or ash and water after defecating and before handling food, using water from a safe source, and keeping food and water clean.
- 10 Malaria, which is transmitted through mosquito bites, can be fatal. Wherever malaria is common, mosquito nets treated with a recommended insecticide should be used, any child with a fever should be examined by a trained health worker, and pregnant women should take antimalarial tablets recommended by a health worker.
- 11 AIDS is a fatal but preventable disease. HIV, the virus that causes AIDS, spreads through unprotected sex (intercourse without a condom), transfusions of unscreened blood, contaminated needles and syringes (most often those used for injecting drugs), and from an infected woman to her child during pregnancy, childbirth or breastfeeding. It is essential for everyone to know about HIV/AIDS and how to prevent it. The risk of infection through the primary sexual route can be reduced by practicing safer sex. Women who are or could be infected with HIV should consult a qualified health worker for information, counselling and testing to protect their health and reduce the risk of infecting their infants.
- 12 Many serious accidents can be prevented if parents or caretakers watch young children carefully and keep their environment safe.
- 13 In disaster or emergency situations, children should receive essential health care, including measles vaccination and micronutrient supplementation. In stressful situations, it is always preferable for children to be cared for by their parents or other familiar adults. Breastfeeding is particularly important at this time.

# A guide for communicating *Facts for Life*

*Communication goes far beyond providing people with information. It involves listening to people, sharing information in interesting and accessible ways and helping them understand its relevance to their lives. Communicating Facts for Life calls for an interactive, two-way process of sharing ideas, knowledge and opinions. This guide aims to help that process.*

## **Reaching the caregivers**

Parents and caregivers, including older siblings and other family members, are the primary audience for *Facts for Life* information. They can be reached through a combination of interpersonal and mass media channels. Those who have an influence on people's health practices are the most effective communicators. They may be health workers, teachers, government extension workers, religious and community leaders, members of youth and women's groups and non-governmental organizations, employers and business people, members of trade unions, social workers, artists and entertainers.

## **Factors that influence communication**

People's reactions to new information are influenced by how, where and from whom they receive it. These factors can mean the difference in whether or not people act on the information. People are more likely to trust information and act on it if:

- they hear it repeatedly from many different sources
- the person delivering it is well known and trusted
- they understand how it can help their families

- it is communicated in familiar language
- they are encouraged to discuss it and to ask questions to clarify their understanding of what needs to be done, when and why.

## **Translating and adapting the messages**

The messages presented in the international version of *Facts for Life* need to be translated and, in many cases, adapted to local situations and customs. In doing so, it is crucial to check the adapted text with local health authorities before printing and disseminating to ensure that the messages remain technically valid.

## **Effective communication**

There are many different ways of communicating, but whether you are working person-to-person within a community, advocating with political leaders or developing messages to be publicized in the mass media, the basic principles are the same:

- Know who needs the *Facts for Life* information and find out about their living conditions, language, customs and level of knowledge. This will help to identify the messages that are more relevant, more easily understood and more likely to be accepted and acted upon.
- When adapting or translating the messages, be sure to use simple language that people understand. Do not overload the messages with too many actions or technical details. *Keep to the verified information in Facts for Life*. If the messages are adapted, their accuracy should be verified.
- Make sure the audience understands the information and knows how to put it into practice. This can be done by sharing the draft messages and visual materials with parents and other caregivers in the community, asking them open-ended questions and encouraging discussion to determine whether the intended message is both clearly understood and feasible. Utilize their feedback to adjust the messages and visual aids.
- Make the message relevant to people's lives. Find ways to make *Facts for Life* messages interesting and meaningful to each community, such as by illustrating them with local examples.

- Select the communication channels and media that are most effective at reaching the target audience. Pay particular attention to existing media and use these media as much as possible. Do not rely on a single means of communication but instead use a mix of channels and media so that the audience receives the message repeatedly and in many variations. The mix may include:
  - **mass media**, such as radio, television, newspapers and comic books;

## Communication breakdowns

Efforts to communicate health messages may not always achieve the intended results. Problems can usually be avoided if communicators first strive to understand the attitudes, beliefs and social factors that determine people's behaviour and the problems that may arise as people begin to change their behaviour.

- **The message may reach only some of the intended target audience because the communication channels were not effective.**

**Example:** Using only printed materials – such as newspaper articles and leaflets – will not reach those who cannot read, and the use of radio and television will reach only those who have access to these media.

**Solution:** If possible, use a combination of mass media to inform the audience and person-to-person communication to reinforce the message. Conduct participatory research to find out what communication channels are most likely to reach and have credibility with the audience.

- **People may receive the message but not understand it.**

**Example:** The message may use technical terminology or be expressed in the wrong language or dialect.

**Solution:** When translating or adapting the messages, use simple, non-technical language. Pre-test the messages to check if the intended audience understands them.

- **People may receive the message but misinterpret it and apply it incorrectly.**

- **small media**, such as posters, audio cassettes, leaflets, brochures, videos, slide sets, flip charts, T-shirts, badges and loudspeaker announcements;
- **interpersonal channels**, such as health workers, religious or community leaders, women's and youth organizations, school teachers, development workers and government officials.
- Repeat the information to reinforce it.

**Example:** Mothers who have been taught to use oral rehydration solution (ORS) may still use too much water, which makes the solution ineffective, or too little, making the solution potentially dangerous.

**Solution:** If any new skills are required, provide adequate training and follow up periodically to identify and correct any problems by offering additional support or revising the message.

- **People may receive and understand the information but not act on it because it conflicts with existing attitudes and beliefs.**

**Example:** Mothers who are instructed to continue feeding a child suffering from diarrhoea may not act on this information because it conflicts with a common, traditional belief that the stomach needs to 'rest' during diarrhoea.

**Solution:** Prepare messages that dispel harmful myths in a culturally sensitive way.

- **People may receive and understand the new information but be unable to act on it because of various reasons, such as poverty, or because basic services are not available.**

**Example:** Mass media campaigns can increase community demand for packets of ORS. But if the packets are too expensive or unavailable locally, the money spent on such mass campaigns is wasted.

**Solution:** Liaise with local health authorities before undertaking media campaigns to ensure that the recommended services or products are available and affordable.

## **Communicating through the mass media**

Radio, newspapers and television are excellent tools for reaching large numbers of people to introduce and reinforce new information. Repetition strengthens memory, so publicizing the same message in various media helps people retain the message and encourages them to act on it. The information can be presented through interviews, news articles, discussions, radio or television drama, puppet shows, comics, jingles or songs, quizzes, contests and call-in shows.

- Newspaper and magazine articles are more effective where literacy rates are high. In areas where literacy is low, other means of reaching the target audience should be utilized. In some situations, comics and illustrations can be used to communicate with adults as well as children.
- If the messages are aired on radio or television, try to ensure that they are broadcast at a time when the target audience is listening or watching. Do not rely only on free public service announcements (PSAs) that are aired during off-peak hours. Broadcast the messages during popular programmes so that they reach a wide audience. Work with producers of radio or television programmes to integrate messages into the scripts of popular television shows or radio dramas, or contact popular disc jockeys who will agree to discuss the messages on radio call-in programmes.
- Use respected, credible media and public personalities to communicate and reinforce messages in the media programmes.

## **Communicating person-to-person**

Most people are not comfortable using new information that they have learned through the media unless they have an opportunity to discuss it with someone they trust. For that reason, it is most effective to use both mass media and person-to-person communication to encourage people to adopt and sustain new health-related behaviour.

Person-to-person communication can take place almost anywhere – informally at the water-pump, among members of sports teams, during conversations with family and friends, or through presentations and discussions in classrooms, health clinics, community meetings, women’s group meetings, adult literacy classes or work groups. Person-to-person communication provides opportunities to ask questions and resolve doubts, to discuss inhibiting factors and obstacles, and to develop solutions.



Effective learning involves a cycle of information, action and reflection. People learn best when they participate actively in identifying a problem, in developing and carrying out a solution, and in reviewing the results. The process of communicating *Facts for Life* messages should therefore allow the participants to play an active role.

- Begin a discussion of one of the problems that is important to the person or group. Start with what is already known and focus on major concerns. Avoid technical or scientific language.
- Encourage people to ask questions and air concerns. Guide the discussion to explore the causes of the problem and possible solutions.
- Remember to listen, which is just as important to communication as speaking. Listening helps to clarify why people are – or are not – taking the recommended action. Intermediate steps may be needed to address unforeseen problems that prevent people from acting on the health message.
- Show respect for other’s opinions, knowledge and ability to change. People learn best in situations that build their confidence, and they take action when they feel understood and respected.
- Support the person or group in taking action to solve the problem.
- Provide assistance to monitor progress, assess the results of actions and consider any necessary changes or further action.

## **From information to action**

The goal of *Facts for Life* is to reduce childhood illness and death. The publication recommends actions that may require fundamental changes in how people do certain things.

Behaviour is based on deeply held beliefs and cultural values, and changing behaviour requires confidence and courage. People may resist change because they lack understanding, motivation or the means to resolve the problem. The following chart shows how change takes place, evolving from lack of awareness of a problem to understanding the situation and taking action.

Obstacle	How to resolve it
<b>Lack of awareness of the problem</b>	<ul style="list-style-type: none"> <li>▶ Use the mass media and/or person-to-person communication and advocacy to raise awareness of the problem.</li> </ul>
<b>Lack of understanding about the extent of the problem, its causes and its solution</b>	<ul style="list-style-type: none"> <li>▶ Provide information in an interesting way, using local examples.</li> </ul>
<b>Lack of understanding about how to resolve the problem</b>	<ul style="list-style-type: none"> <li>▶ Provide information, help people identify solutions and support development of new skills, if necessary. Facilitate discussion about what to do and how to do it.</li> <li>▶ Discuss the strengths and weaknesses of the new behaviour and how it relates to, and builds on, existing knowledge and practices.</li> <li>▶ Discuss what changes are possible now and what changes can be developed later in the process.</li> </ul>
<b>Need for support and encouragement</b>	<ul style="list-style-type: none"> <li>▶ Discuss the barriers and benefits of taking action at the individual, family and community level. Enlist influential local groups or individuals as partners in the process.</li> </ul>
<b>Need for motivation</b>	<ul style="list-style-type: none"> <li>▶ Facilitate changes and provide support. Encourage discussion of the changes.</li> </ul>
<b>Need to sustain the new behaviour</b>	<ul style="list-style-type: none"> <li>▶ Discuss what has resulted from taking action. If there have been unexpected or negative results, explore the causes and develop solutions.</li> <li>▶ Follow up to monitor developments and maintain actions or consider new problems.</li> </ul>

Thank you for your support in communicating the *Facts for Life* messages.

*Facts for Life Lessons from Experience* is a very useful publication that reviews numerous field experiences in using the two previous editions of *Facts for Life*. Complimentary copies are available in English, French and Spanish. Contact the nearest UNICEF office or UNICEF headquarters in New York to order. Use the order form on page 153.