DISCUSSION

The paper presents an attempt carried out in another culture to develop a methodology for recording number of births in a family. The investigators are to be commended for the innovative approaches and diligence of the effort as covered in the paper. The long-range goal of developing valid measures of the effectiveness of family planning programs is an obvious priority in today's world.

There are several observations to make about the effort as reported in the paper.

First, it is nearly amazing to find this number of interviews completed on the average per interviewer per day. Like the man who lost his watch someplace else but continues to look for it under the street light, we should seriously consider moving our expensive field surveys to Pakistan -regardless of the problem.

The investigators present their approach and instrument as a success in general. It should be noted that they have not tried other approaches (or do not report them) to lend support to the comparative efficiency and effectiveness of this approach and instrument. We really know nothing of its validity except in a "face" sense, though this seems good.

There is probably more to be done in this approach to recall of past events along lines of the focussed interview.¹ The investigators do employ memory tripping events important in the local culture and this seems desirable. If the culture were intimately understood, more could be done along these lines. This leads me to a final point.

It is high time that the potential contributions of social scientists to cross-cultural research and programs were taken seriously. It is surprizing that this important endeavor apparently did not engage these talents in an integral, continuing fashion. A quotation from Foster seems appropriate to conclude this point and these remarks:

"At the risk of appearing to end on a negative note, I feel compelled to point out that almost all the problems stated in this paper and the conclusions drawn result from ex post facto accounts of what went wrong. In most cases the best we can do as social scientists is to suggest reasons for these failures; to argue that if different approaches had been taken, the outcome might have been different; and to hope that someday we can cooperate in the planning of programs from the beginning and follow them through to completion. The critical need in intercultural health programs is for social scientists to work in the field, to observe, experiment, compare, and test. The precise form of their work is secondary in importance to their active participation in programs. Failures to date would appear to be about equally attributable to the unwillingness of administrators of health programs to entrust social scientists with significant responsibilities, and the unwillingness of social scientists to commit themselves for long periods of study, often under conditions of personal hardship (especially for their families). in types of work that have less status for them and their colleagues than traditional research. Yet, until these interdisciplinary barriers are greatly lowered, we shall make only halting progress in evolving working relationships between medicine and social science."2

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¹R.K. Merton and P. Kendall, "The Focused Interviewer", Amer. Jrl. of Sociol., 51, 541-42.

²George M. Foster, <u>Problems in Intercultural Health</u> <u>Programs</u>, N.Y.: Social Science Research Council, Pamphlet 12, April 1958, P. 45.

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