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EVALUATION

OF

**INTERPERSONAL COMMUNICATION AT FAMILY WELFARE CENTRES OF
POPULATION WELFARE PROGRAMME**

BY

**ABDUL HAKIM
AMANULLAH BHATTI**

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**National Institute of Population Studies
Islamabad
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**NATIONAL INSTITUTE OF POPULATION STUDIES
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FOREWORD

Population Welfare Programme (PWP) has evolved and followed different approaches and strategies since 1960. Information, Education and communication (IEC) component is one of the important element of the programme which aims at providing knowledge to the target population regarding Family Planning and ultimately raise practice of Family Planning. As regards knowledge of contraception, it has reached to 94 percent among currently married women, but the practice of contraception is still below the desired level. According to Interpersonal Communication (IPC) Survey 1996-97, Contraceptive Prevalence Rate is 33 percent around the vicinity of FWCs.

National Institute of Population studies (NIPS) is continuously engaged in the evaluation of various components of the Population Welfare Programme. The IEC component has been evaluated twice earlier in 1988 and 1996. This study has specifically focused on IPC. The study was planned in January, 1996 and the field work started in March, 1996. The initial work was undertaken by the Principal Investigator Mr. Mansoor-ul-Hassan Bhatti, former Senior Research Fellow NIPS who later on went on retirement in April, 1997 and the responsibility was shifted to Mr. Amanullah Bhatti, Research Fellow (NIPS).

Efforts of several individuals who worked in the field for collection of data are commendable. The valuable work done by Mr. Mansoor-ul-Hassan Bhatti former Senior Fellow and Mr. Amanullah Bhatti, Fellow deserve appreciation for completing the study. Dr. Abdul Hakim, Director NIPS has been providing credible guidance to the project since its inception. His contribution is acknowledged and this study would have not been completed without his continuous efforts. The contribution of Mr. Faateh ud Din Ahmad, Programmer for handling the data processing is highly appreciated and other field and computer staff who helped in this study also deserves appreciation.

The study provides useful information like knowledge and contraceptive prevalence by various methods, motivation to the eligible couples, follow-up visits to clients, exposure to mass media, some demographic and background characteristics of women within the vicinity of FWCs. This information will updates the knowledge of planners, policy makers and programme Managers and will help in future policies regarding IEC component of the Programme. This study demonstrates that IPC is an important component to be followed to enhance the practice of family planning as such sensitive matters cannot be discussed openly on mass media channels

Ahmad Shamsul Huda
Executive Director

ACKNOWLEDGEMENT

The role of Information, Education and Communication (IEC) component of Population Welfare Programme in raising knowledge and practice of family planning is well documented and cannot be denied. The programme has been making efforts since long to reduce the high population growth rate which is adversely affecting our socio-economic sectors. The publicity of the concept of family planning has been an important activity of the programme since its inception. The programme gained high momentum during the Third Five Year Plan (1965-70) when the publicity was effectively used and the message of family planning was conveyed to the masses. The publicity campaign was used through mass media and Interpersonal channels. However, this was not sustained in subsequent years till 1985 when IEC component was included in the Population Welfare Programme formally. The first ever evaluation of IEC component was carried out in 1988 and then in 1996. Also realizing the importance of Interpersonal Communication (IPC), Ministry of Population Welfare desired to conduct the evaluation of IPC in 1996. The National Institute of Population Studies (NIPS) carried out the study in the vicinity of FWCs in the whole country.

This study has generated data regarding awareness of family planning, family planning practice, role of various important aspects of IPC like motivation in the catchment area of FWC, quality of IPC at FWC when a woman attends FWC and follow-up visits of acceptors by FWW/FWA. Also data were collected regarding background characteristics of women, some demographic indicators and exposure to mass media in the catchment areas of FWCs.

Mr. Mansoor ul Hassan Bhatti, Former Senior Fellow, NIPS at initial stages designed the study, helped in data collection and also revised this draft report for which we are highly grateful to him. We are also obliged to Mr. Ahmad Shamasul Huda, present Executive Director, for his encouragement and going through the report.

We are highly obliged to the Ministry of Population Welfare, Provincial Population Welfare Departments, District Population Welfare Officers and staff of the Family Welfare Centres for their cooperation and assistance in undertaking this field survey. Above all we are grateful to the field staff for their hard work which enabled to collect data for this survey and produce this report.

The herculean task demanded continuously and dedicated efforts. The authors are grateful to Mr. Mubashir Baqai and Javed Sikandar, Research Associates and Uzma Naqvi, office editor for their hard work on the report. Special thanks to Mr. Faateh ud din Ahmad, Programmer and his staff Mr. Muhammad Iqbal, Mr. Iftikhar Ahmed and Rana Muhammad Akbar for data entry, data cleaning, data processing and formatting of the report.

**Dr. Abdul Hakim
Amanullah Bhatti**

EXECUTIVE SUMMARY

The National Institute of Population Studies (NIPS) undertook a study to determine the role of interpersonal communication, which is basically an integral part of Information, Education and Communication (IEC) component of the Population Welfare Programme:

A nationally representative sample survey was drawn in two stages. At first stage stratified systematic random sample of 65 Family Welfare Centres (FWCs) was drawn out of 1290 FWCs. At second stage a systematic random sample of 30 households was drawn from the vicinity of each FWC. Thus there were 1950 households in the sample. All the 1950 sampled households within the vicinity of selected sample of 65 FWCs were located and covered. A total of 2195 eligible women, currently married women aged 15-49, were identified in the located households of whom 1943 in the vicinity of 65 FWCs were interviewed.

In Pakistan the family planning programme is in operation since 1960s. In spite of being one of the oldest programme, Pakistan has not been able to raise the contraception prevalence rate to the desired level and it is only 33 percent around the vicinity of FWCs. However according to this study knowledge of family planning methods is 90 percent. The gap between knowledge and practice is wide which is a matter of concern for policy makers and planners. This also shows that due to number of reasons the programme is not efficient enough to bring the change in the attitude of couples to practice family planning widely. Factors impeding among others also indicate weak interpersonal communication.

The study shows that the role of the staff of the FWC has been weak with respect to informing women of the existence of the FWCs. The highest percentage of currently married women (42 percent) were informed about the existence of FWCs by friends/relatives.

The performance of Family Welfare Worker and Family Welfare Assistant (FWW and FWA) are not satisfactory as regards motivation. Only 21 percent currently married women have been visited first by FWW and 20 percent currently married women have been visited by FWA; whereas 56 percent women have not been visited by anybody. This ultimately leads to low performance of FWCs. Motivation by FWW/FWA needs to be increased.

Sixty six percent currently married women received the message from FWW/FWA for contraception while discussing family planning with them. It means that during the discussion

FWW/FWA are successful to convey the message of family planning. This confirms the importance of the interpersonal communication.

Television appears to be the most popular media in delivering family planning messages. Daily watchers of Television are 66 percent. But it is evident that Television can not play an effective role in discussing specific family planning methods under the prevalent socio-cultural norms of the country and this need can be met only through efficient interpersonal communication. This further indicates the importance of interpersonal communication, which is the best way to discuss family planning methods in privacy.

The main reason for not attending FWC by women has been indicated that family planning services were never required by 41 percent. This shows that the vast majority of women have not been convinced by FWCs to use family planning services. The need is to make FWCs attractive for women to increase demand for family planning services.

The study has revealed that the most known method was female sterilization, as 84 percent women were aware of this method. Condom has been reported the most popular method among ever users. The current use of contraceptive in the vicinity of FWCs is 33 percent; while ever users are 47 percent. Female sterilization is the most popular method among current users. This shows that female sterilization is receiving more attention, compared to other methods. There is need to have more motivation of clients, follow up visits and enhanced monitoring and supervision.

Family Welfare Workers and Family Welfare Assistants are the two main workers for delivering the message of family planning. They are supposed to motivate and provide family planning services to enhance the practice of family planning. The efficiency of Family Welfare Centres may be seen through the performance of Family Welfare Workers and Family Welfare Assistants. Main findings of the study are presented in the summary table.

Summary Table of Findings

Indicators	Percent
------------	---------

Education Level of Currently Married Women:

- | | |
|-----------------------------------|------|
| • Having No Education | 37.0 |
| • Informal Education | 19.0 |
| • Formal Education | 46.0 |
| • Above Secondary Level Education | 6.0 |

Role of Mass Media:

- | | |
|--------------------------------|------|
| • Daily Watchers of Television | 66.0 |
| • Daily Listeners of Radio | 12.0 |
| • Daily Readers of Newspapers | 5.0 |

Role of Interpersonal Communication:

- | | |
|--|------|
| • Women Informed about the Existence of FWC by friends/ relatives | 42.0 |
| • CMW Visited by FWW/FWA | 41.0 |
| • CMW Not Visited by Anybody | 56.0 |
| • CMW Received the Message of Contraception by FWW/FWA | 66.0 |
| • Major Source for CMW to Visit First Time at FWC by friends/Relatives | 36.0 |
| • CMW Visit First Time at FWC by FWW/FWA | 31.0 |

CMW Not Attending FWC by Different Reasons:

- | | |
|---------------------------|------|
| • Services Never Required | 42.0 |
| • Religious Opposition | 4.0 |
| • Fear of Side Effects | 3.0 |

Contraception:

- | | |
|---------------------------------------|------|
| • Knowledge of CMW About Any Method | 90.0 |
| • Ever Use by CMW About Any Method | 47.0 |
| • Current Use by CMW About Any Method | 33.0 |
| • Drop-out of FP Methods | 14.0 |

Chapter 1

INTRODUCTION

1.1 BACKGROUND

Population Welfare Programme has been in operation in public sector since 1960. At the initial stages, the programme was basically a clinical programme and provided contraceptive methods through clinics. Gradually programme developed and current programme now provide comprehensive services for Reproductive Health and Family Planning. Information, Education and Communication (IEC) has played a pivotal role to raise the awareness of the people about family planning. Interpersonal Communication (IPC) is an important component of IEC and it was given attention in the Third Plan (1965-70) when Population Welfare Programme was made autonomous and a strong motivational component was added to the Programme. Subsequently Continuous Motivation System (CMS) was introduced during the fourth Plan (1970-75), with IPC being its major function. After abolition of the CMS system in late 1970s, IPC mainly remained limited among the functions of FWCs. Currently the Family Welfare Centres are major outlets for family planning services in Pakistan and IPC is one of the important task of FWCs.

There are three stages of IPC at Family Welfare Centres (FWCs):

1. Initial motivational stage when FWW of FWC pays visits to community for motivation;
2. Interpersonal Communication when women attend FWC for family planning or for Maternal and Child Health (MCH) services;
3. Interpersonal Communication during follow up visits;

IEC study conducted in 1988 [1] has shown that the main source of knowledge is Interpersonal Communication which included spouse (43 percent), Population Welfare Workers (35 percent) and Friends/Relatives/Neighbours (16 percent). This demonstrates the importance of Interpersonal Communication. It is most suitable to communicate messages regarding methods of family planning directly in a widely dominated uneducated society. Interpersonal Communication can provide information in privacy and all the details of family planning can be discussed.

Married couples can openly discuss methods for practicing family planning. Other mass media, however, are useful to bring awareness among people but are not yet suitable to talk about family planning methods openly under the specific socio-cultural scenario of Pakistan.

IPC is specially important at FWCs as quality IPC is a part of quality of care of FWC. As IEC is an important component of the Population Welfare Programme, substantial amount of funds is being allocated to IEC. It is, therefore, important that the usefulness of the component be identified from time to time. Already two evaluation studies of the IEC component have been conducted in 1988 and 1995. But no separate evaluation of IPC itself has been done so far. This is the first evaluation of IPC which has been conducted in 1996-97.

1.2 FUNCTIONS OF FAMILY WELFARE CENTRE

Theoretically six to eight thousands population is covered by a FWC. Each and every couple in the target area is expected to be contacted by FWC staff for the purpose of family planning. By the time of the survey, the Population Welfare Organization has established a network of 1290 Family Welfare Centres (FWCs) located in urban (690) and rural (600) areas of the country. These Centres are major outlets of service delivery of Population Welfare Programme specifically functioning for Family Planning, Maternal Care and Child Health Services (MCH).

1.3 OBJECTIVES OF THE SURVEY

The objectives of the study are as follows:

1. To find out the exposure of women to mass media regarding family planning;
2. To find out the awareness of women regarding FWCs in catchment areas of FWCs;
3. To find out the role of interpersonal communication at FWCs;
4. To find out the status and extent of interpersonal communication at FWCs for motivating women in catchment areas;
5. To find out the knowledge of women in catchment areas regarding contraception;
6. To find out the use of contraception by them;
7. To find out the status and extent of follow up visits by FWCs to keep current users in tact and reduce drop-outs.

Chapter 2

STUDY DESIGN

2.1 SAMPLE

The sample for the survey is two stage. At first stage a stratified systematic random sample of 65 Family Welfare Centres (FWCs) was drawn out of existing FWCs in Pakistan. At second stage a systematic random sample of 30 households was drawn from the vicinity of each FWC. Thus there were 1950 households in the sample. As suggested by the Technical Advisory Committee of NIPS vicinity of an urban FWC was considered 1 km around the centre; whereas the vicinity of a rural FWC was taken 5 KM around the centre.

Table 2.1 shows the distribution of existing and sampled FWCs by Province. Selected CMW age between 15-49 years residing in the vicinity of 1 kms of the urban FWCs and 5 kms in rural FWCs were interviewed. These locations of the wards/census blocks and Mohallahs in the urban areas and villages in rural areas were randomly selected for conducting the survey where FWC was located. The maps of the sampled FWCs were prepared to identify the localities/wards and villages within the vicinity.

Table 2.1

EXISTING AND SAMPLED FWCs BY PROVINCE, IPCS 1996-97

Province	Existing FWCs			Sampled FWCs			Total Households Covered
	Urban	Rural	Total	Urban	Rural	Total	
Punjab	369	420	789	19	21	40	1,200
Sindh	156	89	245	8	4	12	360
NWFP	51	152	203	2	8	10	300
Balochistan	21	32	53	2	1	3	90
Total	597	693	1,290	31	34	65	1,950

2.2 COVERAGE OF THE SAMPLE

The position with regard to coverage is presented in table 2.2.

All of the 1950 sampled households within the vicinity of selected sample of 65 FWCs were located and covered.

A total of 2195 eligible women (currently married women aged 15-49) were identified in the located households, of whom 1943 were successfully interviewed. The overall response rate of CMW was 88 percent. The response rate was highest in Sindh (96 percent), followed by Balochistan (95 percent), Punjab (87 percent) and NWFP (83 percent).

Table 2.2

PERCENT DISTRIBUTION OF RESPONDENTS BY INTERVIEWING STATUS, BY PROVINCE IPCS 1996-97

Province	No. of CMW Identified	CMW Interviewed	Absent	Refused	Total
Punjab	1315	87.4	12.0	0.6	100.0
Sindh	393	96.4	2.8	0.8	100.0
NWFP	387	82.7	15.2	2.1	100.0
Balochistan	100	95.0	4.0	1.0	100.0
Total	2195	88.5	10.6	0.9	100.0
N	2195	1943	233	20	

2.3 TECHNICAL ADVISORY COMMITTEE

A Technical Advisory Committee (TAC) was constituted to discuss & review the technical matters and progress of the survey. TAC comprised of NIPS senior staff, representatives from the Ministry of Population Welfare, Population Council and PIDE. A number of meetings were held by TAC.

2.4 QUESTIONNAIRE

A questionnaire was developed for data collection. The questionnaire consisted of the following sections:

1. Identification
2. Background Characteristics
3. Information, Education and Communication
4. Contraception
5. Quality of Care and Services

The questionnaire was discussed at length in the meeting of the Technical Advisory Committee (TAC) of the survey and approved. Pretesting of the questionnaire was also done and the questionnaire was revised as a result thereof.

2.5 RECRUITMENT AND TRAINING OF FIELD STAFF

Senior staff of the project consisted of Project Director, Principal Investigator and Deputy Principal Investigator. Four teams consisting a supervisor and two/three enumerators, each were constituted to conduct the field work in the country. Two teams worked in Punjab, one team conducted the survey in N.W.F.P and the fourth team carried out the data collection in Sindh and Balochistan.

The field staff was technical and qualified in different disciplines. All the interviewers were females and most of them were master degree holders and well experienced in data collection. Two weeks training for the field staff was conducted in NIPS, Islamabad. The major topics covered in the training programme were as follows:

- Introduction to Population Welfare Programme in Pakistan;
- Objectives of the survey;

Chapter 3

SOCIO-DEMOGRAPHIC CHARACTERISTICS OF RESPONDENTS

Socio-demographic characteristics of respondents are closely related to level of contraception and fertility. This chapter presents socio-demographic characteristics of respondents.

3.1 AGE DISTRIBUTION

It is very difficult to get accurate data regarding age of people in Pakistan due to a set of socio-cultural reasons. The prime obstacle is illiteracy and low educational level. In order to ascertain the exact age, special probing techniques were used. Extensive training programme was arranged for female interviewers which included special session on probing techniques to get accurate information as far as possible. Table 3.1 depicts the age distribution of respondents. Highest percentage of respondents fall in the age group of 25-29 (24 percent) followed by age group 30-34 (22 percent), 35-39 (19 percent) and 20-24 (15 percent). This is the usual pattern of age distribution of currently married women. In rural areas percentage of respondents in younger age group 15-24 is slightly higher compared with urban areas.

Table 3.1

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN BY AGE AND RESIDENCE, IPCS, 1996-97

Background Characteristics	Place of Residence		Pakistan
	Urban	Rural	
15 – 19	2.7	6.0	4.5
20 – 24	14.1	16.1	15.2
25 – 29	25.2	22.1	23.5
30 – 34	23.2	21.4	22.2
35 – 39	18.7	18.7	18.7
40 – 44	10.4	9.9	10.1
45 – 49	5.8	5.9	5.8
Total	100.0	100.0	100.0
N	866	1077	1943

3.2 COMPARISON OF AGE DISTRIBUTION OF VARIOUS SURVEYS

Table 3.2 shows comparison of age distribution of currently married women as observed in different studies. It is observed that percentage of younger age group has decreased and percentage of age group of 25-29 and 30-34 has increased with reference to period 1990 to 1997. This implies that younger age group of CMW tends to reduce gradually by passage of time because of rising age at marriage.

Table 3.2

PERCENTAGE DISTRIBUTION OF CURRENTLY MARRIED WOMEN BY AGE FWC VICINITY STUDY 1993 AND IPCS 1996-1997

Age	FWC Vicinity Study 1993	IPCS 1996-97
15-19	3.5	4.5
20-24	15.2	15.2
25-29	23.1	23.5
30-34	20.7	22.2
35-39	19.1	18.7
40-44	11.0	10.1
45-49	7.3	5.8
Total	100	100
Number of Women	4013	1943

3.3 EDUCATIONAL LEVEL

Table 3.3a presents the educational levels of currently married women by residence. Overall 37 percent currently married women have no education, 19 percent have only informal education and 44 percent have formal education. There are large differentials in educational levels between urban and rural areas. Women with formal education are 62 percent in urban areas, compared to 30 percent in rural areas. It means women with formal education are double in urban areas compared to rural areas. Women with above secondary education are 11 percent in urban areas compared to only 2 percent of rural residents.

Table 3.3a

**PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN BY EDUCATION
ACCORDING TO RESIDENCE, IPCS 1996-1997**

Background Characteristics	Place of Residence		Pakistan
	Urban	Rural	
No Education	21.9	48.8	36.9
Only Informal Education	16.5	21.2	19.1
Upto Primary	22.2	17.4	19.5
Upto Secondary	28.9	10.3	18.6
Above Secondary	10.5	2.3	6.0
Total	100.0	100.0	100.0
N	866	1077	1943

Table 3.3b provides information regarding educational levels of wives (respondents) and of their husbands. The education of a woman is one of the indicator of her status in the society. Educated Women are more inclined to use contraception and can also affect decision positively towards family planning. It is observed that there is a big gap between educational levels of wives and husbands. Husbands with no education are 24 percent, compared to 37 percent wives having no education. Husbands with formal education are 73 percent, compared to 44 percent wives. Women with informal education are 19 percent which is 6 times more than men with informal education. It means many families prefer informal education for girls which is mainly Quranic education. Wives with above secondary education are only 6 percent, while husbands are 23 percent.

Table 3.3b

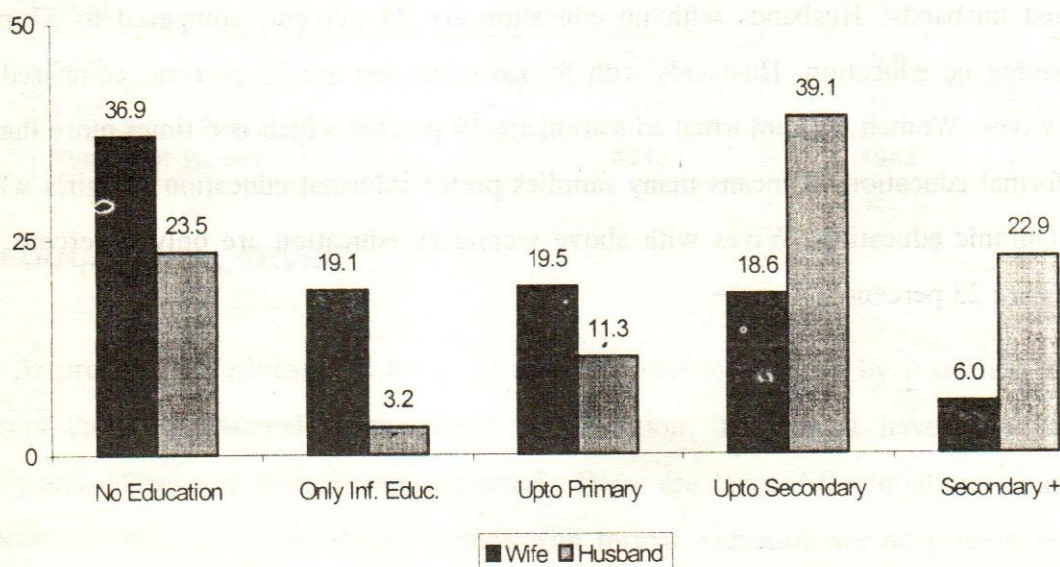
PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN AND THEIR HUSBANDS BY EDUCATIONAL LEVEL, IPCS 1996-97

Background Characteristics	Wife	Husband
No Education	36.9	23.5
Only Informal Education	19.1	3.2
Upto Primary	19.5	11.3
Upto Secondary	18.6	39.1
Above Secondary	6.0	22.9
N	1943	1943

Figure 3.1 shows that level of education of husbands is considerably higher, compared to level of education of wives.

Figure 3.1

Education Level of Wives and Their Husbands



Source: Table 3.3b

3.4 LITERACY

Table 3.4 shows literacy level of respondents by place of residence. It is noted that literacy level of husbands is 71 percent which is double compared to wives (35 percent). Also there are large differentials between urban and rural areas. Respondents in urban areas have 52 percent literacy level, compared to 22 percent in rural areas.

Table 3.4

PERCENTAGE DISTRIBUTION OF CURRENTLY MARRIED WOMEN
BY LITERACY AND PLACE OF RESIDENCE, IPCS 1996-97

Place of Residence	Respondent's Literate	Husband's Literate
Urban	51.6	79.3
Rural	21.9	65.0
Total	35.2	71.4

Chapter 4

FERTILITY

In this study women were asked to provide information on age at marriage, total number of children ever born (CEB) to them and number of surviving children. Some fertility indicators are presented in this chapter based on the data collected from women aged 15-49 years.

4.1 MEAN NUMBER OF CHILDREN EVER BORN

Table 4.1 shows percent distribution of currently married women aged 15-49 by number of children ever born according to age and mean number of children ever born. The Mean number of children ever born increases with age from 0.6 for age 15-19 to 7.4 for age 45-49. Overall mean number of children ever born is 4.3 while it was 4.4 in the previous study of I.E.C. 1996 (5). It shows a slight decrease in the mean number of children ever born.

Table 4.1

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS BY NUMBER OF CHILDREN EVER BORN AND AGE, IPCS 1996-97

Respondent Age	Children Ever Born							Mean	N
	0	1	2	3	4	5	6 +		
15 - 19	59.1	26.1	10.2	1.1	3.4			.64	88
20 - 24	21.7	25.4	23.7	13.9	8.8	4.7	1.7	1.84	295
25 - 29	8.6	11.6	17.5	22.6	18.2	9.0	12.5	3.16	456
30 - 34	4.2	4.6	7.0	13.5	18.1	19.0	33.6	4.67	431
35 - 39	1.4	2.5	1.7	5.5	15.2	15.4	58.4	6.10	363
40 - 44	2.6	2.0	2.0	5.1	8.2	12.8	67.3	6.55	196
45 - 49	1.8	1.8	.9	1.8	8.0	9.7	76.1	7.37	113
15 - 49	9.5	9.6	10.3	12.1	13.9	11.8	32.8	4.32	1942

4.2 COMPARISON OF CHILDREN EVER BORN WITH REFERENCE TO DIFFERENT STUDIES

Table 4.2 shows comparison of Mean number of children ever born as observed in different studies. Data show that the mean of CEB is gradually decreasing. Mean CEB was 4.7 in 1993 which decreased to 4.3 in 1996. This can be partly attributed due to the success of family planning, particularly in the catchment areas of FWCs.

Table 4.2
MEAN NUMBER OF CHILDREN EVER BORN BY AGE OF MOTHERS,
FWC VICINITY STUDY 1993 AND IPCS 1996-97

Age of Mother	Mean Number of Children Ever Born	
	FWC Vicinity Study 1993	IPCS 1996-97
15-19	0.86	0.64
20-24	2.02	1.84
25-29	3.46	3.16
30-34	4.99	4.67
35-39	6.28	6.10
40-44	7.18	6.55
45-49	7.41	7.37
All ages	4.71	4.32

4.3 MEAN NUMBER OF SURVIVING CHILDREN

Table 4.3 shows that overall mean number of surviving children is 3.8. This suggests a slight improvement towards declining trend in overall death rate of children. Mean number of surviving children for age group 15-19 is 0.6. It gradually increases with age and ultimately it reaches 6.2 for age group 45-49.

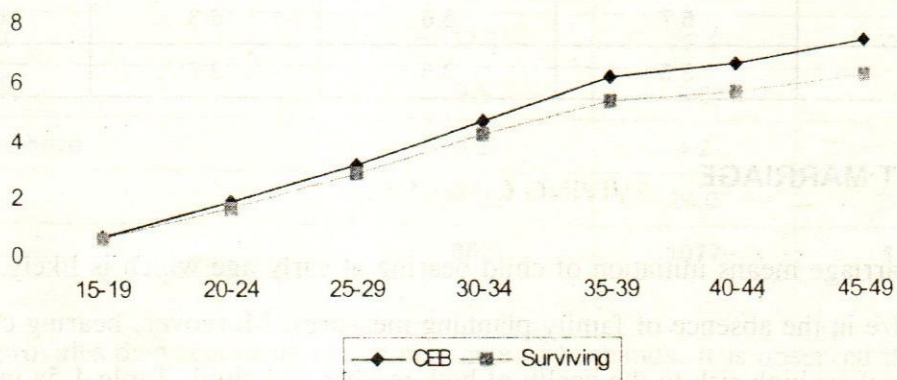
Table 4.3

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS BY NUMBER AND MEAN OF SURVIVING CHILDREN AND AGE, IPCS 1996-97

Respondent Age	Number of Surviving Children								N
	0	1	2	3	4	5	6 +	Mean	
15 - 19	62.5	25.0	8.0	2.3	2.3			.57	88
20 - 24	24.4	25.1	24.7	15.3	6.4	3.7	.3	1.67	295
25 - 29	9.0	13.8	20.8	21.9	18.9	8.3	7.2	2.84	456
30 - 34	4.9	5.1	9.7	16.0	22.0	16.9	25.3	4.15	431
35 - 39	1.7	3.0	3.3	8.0	19.3	18.5	46.3	5.32	363
40 - 44	3.6	2.0	2.6	7.1	12.2	17.3	55.1	5.64	196
45 - 49	2.7	2.7	.9	4.4	9.7	20.4	59.3	6.19	113
15 - 49	10.6	10.2	12.1	13.6	15.8	12.7	25.0	3.79	1942

Figure 4.1 shows trend in mean number of children ever born and surviving.

Figure 4.1
Trends in Mean Number of Children Ever born and Surviving children



Source: Table 4.1 and 4.3

4.4. COMPARISON OF SURVIVING CHILDREN WITH REFERENCE TO DIFFERENT SURVEYS

The mean number of living children for all women 15-49 was 3.5 in 1984-85 (PCPS). It increased to 3.7 in 1996-97 (PFFPS). IPC Study estimates mean number of living children as 3.8 which is very close to results of 1996-97 PFFPS. It shows that country's health facilities have improved and mortality of children has come down. Various national level surveys indicate that child mortality has declined. Child mortality 0-5 was 117 in 1990-91 (2) which has declined to 111 in 1996-97 (7).

Table 4.4

MEAN NUMBER OF SURVIVING CHILDREN BY AGE OF MOTHERS, PCPS 1984-85, PDHS 1990-91, PFFPS 1996-97, AND IPCS 1996-97

Age of Mother	Mean Number of Surviving Children			
	PCPS 1984-85	PDHS 1990-91	PFFPS 1996-97	IPCS 1996-97
15-19	0.6	0.6	0.5	0.6
20-24	1.5	1.4	1.5	1.7
25-29	2.8	2.7	2.8	2.8
30-34	4.2	4.6	4.3	4.2
35-39	5.1	5.0	5.0	5.3
40-44	5.5	5.6	5.8	5.6
45-49	5.7	5.6	6.3	6.2
All ages	3.5	3.5	3.7	3.8

4.5 AGE AT MARRIAGE

Early age at marriage means initiation of child bearing at early age which is likely to result in larger family size in the absence of family planning measures. Moreover, bearing children at a younger age involves high risk to the health of both mother and child. Table 4.5a indicates that mean age at marriage for wives, at national level, is 18.3 years. There is little variation by urban and rural areas with slightly higher age at marriage in urban areas. Findings from various past surveys show that age at marriage is gradually rising. This might be due to economic pressures and increase in education.

Table 4.5a

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN BY AGE AT MARRIAGE AND PLACE OF RESIDENCE, IPCS, 1996-97

Age at Marriage	Place of Residence		Total
	Urban	Rural	
15 – 19	60.4	69.5	65.5
20 – 24	33.3	26.0	29.2
25 – 29	6.2	3.7	4.8
30 and Above	0.1	0.7	0.5
Mean	18.65	17.96	18.27
N	866	1077	1943

Table 4.5b

PERCENT DISTRIBUTION OF HUSBANDS BY AGE AT MARRIAGE AND PLACE OF RESIDENCE, IPCS 1996-97

Husbands Age at Marriage	Place of Residence		Total
	Urban	Rural	
15 – 19	14.7	18.8	17.0
20 – 24	40.1	38.1	39.0
25 – 29	32.6	29.1	30.6
30 – 34	9.5	9.8	9.7
35 and Above	3.2	4.2	3.8
Mean	24.29	24.0	24.13
N	866	1077	1943

Table 4.5b provides data regarding age at marriage of husbands. It is observed that majority of the husbands (39 percent) got married at the age group 20-24 years. Only 17 percent got married in early ages i.e. 15-19 years, while 31 percent got married at the ages 25-29 years. It means around 87 percent husbands had married before reaching 30 years of age while only 13 percent got married at the age of 30-35 years and above. The mean age at marriage is found as 24.13 in Pakistan. There are little differential by urban and rural residence.

Chapter 5

ACCESS TO INTERPERSONAL COMMUNICATION AND MASS MEDIA AND ITS IMPACT

The role of mass media can not be denied for creation of awareness among people regarding family planning. Mass media includes electronic media like TV and Radio, print media like Newspaper and magazines etc.

5.1 EXPOSURE TO MASS MEDIA

Table 5.1 provides information regarding exposure of respondents to mass media. Sixty six percent of currently married women watch TV daily, 12 percent women listen to radio daily and only 5 percent women read newspaper daily while magazine readers are only 2.8 percent. Further 5 percent of currently married women watch television, 6 percent listen radio and 5 percent read newspaper at least once a week. There are 4 percent currently married women who read magazine at least once a week. A high percentage of women, more than 70 percent, do not read newspapers or magazines. This is mainly due to high level of illiteracy. Most of these women probably watch television. This infers that on the whole TV is the most popular media and thus likely to be most effective media for delivering the message of family planning.

There are visible urban-rural differentials. A High Proportion of urban women watch television daily (80 percent), compared to rural women (55 percent). Similarly percentage of women who read newspaper daily in urban areas is much higher, compared to women in rural areas. In any case television is the most popular media both in urban and rural areas.



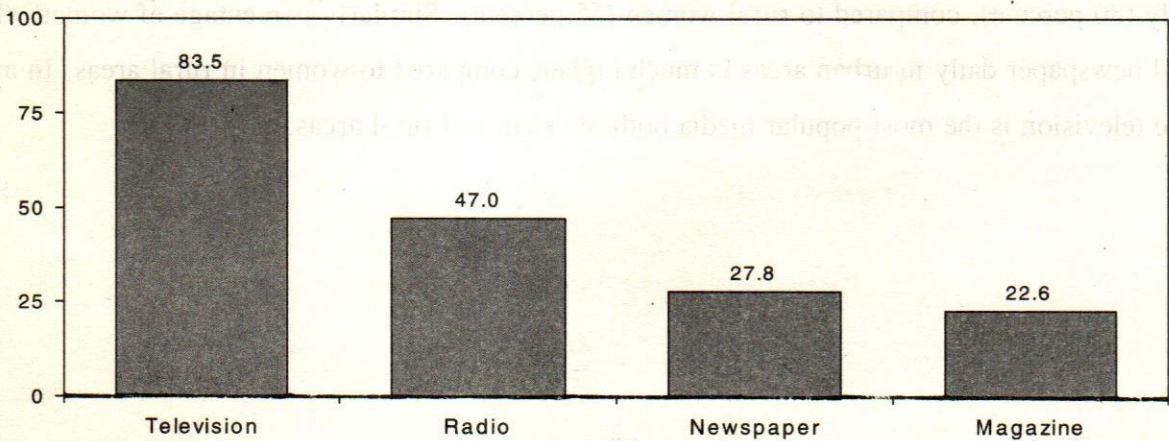
Table 5.1

PERCENTAGE OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS EXPOSED TO MASS MEDIA BY PLACE OF RESIDENCE, IPCS 1996-97

Media Exposure		Place of Residence		Total
		Urban	Rural	
Watch Television				
	Daily	80.4	54.8	66.2
	At least Once a week	3.8	5.1	4.5
	Once a while	10.9	14.3	12.8
	Never	5.0	25.8	16.5
Listen to Radio				
	Daily	11.2	11.7	11.5
	At least Once a week	4.7	7.3	6.2
	Once a while	32.3	27.0	29.4
	Never	51.7	53.9	53.0
Read a Newspaper				
	Daily	8.2	2.4	5.0
	At Least once a Week	7.4	3.0	4.9
	Once a While	26.2	11.2	17.9
	Never	58.2	83.4	72.2
Read a Magazine				
	Daily	3.8	2.0	2.8
	At Least once a Week	5.5	2.4	3.8
	Once a While	24.0	9.6	16.0
	Never	66.6	86.0	77.4
Total		866	1077	1943

Figure 5.1 shows percent of respondents who watch television, listen radio and/or read print media. Overall 84 percent women watch television, 47 percent listen to radio, 28 percent read newspapers and 23 percent read magazine.

Figure 5.1
Percent of Respondents by exposure to Mass Media, IPCS 1996-97



Source: Table 5.1

5.2 SOURCE OF INFORMATION ABOUT FWC

Table 5.2a and figure 5.2a show the percentage of currently married women in the catchment areas who are aware of the existence of FWC in the locality. Out of 1943 currently married women interviewed, only 989 (51 percent) know about the existence of FWC whereas 49 percent women are not aware of the existence of FWC. This shows that IEC component is very weak regarding FWCs which are major static outlets for family planning service delivery.

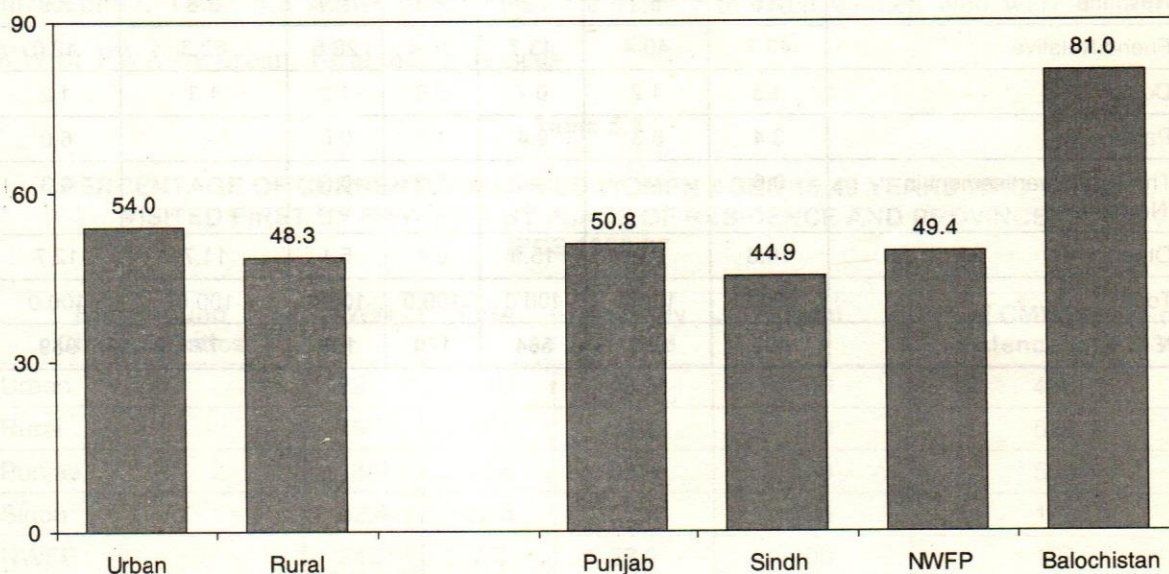
Table 5.2a

PERCENTAGE OF CURRENTLY MARRIED WOMEN WHO ARE AWARE OF THE EXISTENCE OF FWC IN THEIR LOCALITY BY PLACE OF RESIDENCE AND PROVINCE, IPCS 1996-97

Source		Place of Residence		Province				Pakistan
		Urban	Rural	Punjab	Sindh	NWFP	Balochistan	
CMW aware of the Existence of FWC	Number	469	520	584	170	158	77	989
	Percent	54.0	48.3	50.8	44.9	49.4	81.0	50.9
Total CMW Interviewed		866	1077	1149	379	320	95	1943

Figure 5.2a

Respondents Aware of Existence of FWC in Their Locality



Source: Table 5.2a

Table 5.2b and figure 5.2b show the source of information for those who are aware of the existence of FWC. It is interesting to note that the highest percentage (42 percent) of currently married women refer to the friend/relative as source of information about the existence of FWC. The second major source of information is staff of FWC (19 percent), followed by other acceptor (12 percent). This indicates the basic weakness of the programme. First, only half of the women aware of the existence of the FWCs and second only one fifth of them came to know about FWC through staff of the centre. Newspaper's role in this connection is also extremely poor i.e. 0.3 percent. It is imperative that there should be some change in the IEC programme. It should pay more attention to create awareness regarding FWCs. Also there is need to strengthen interpersonal communication by the staff of FWCs.

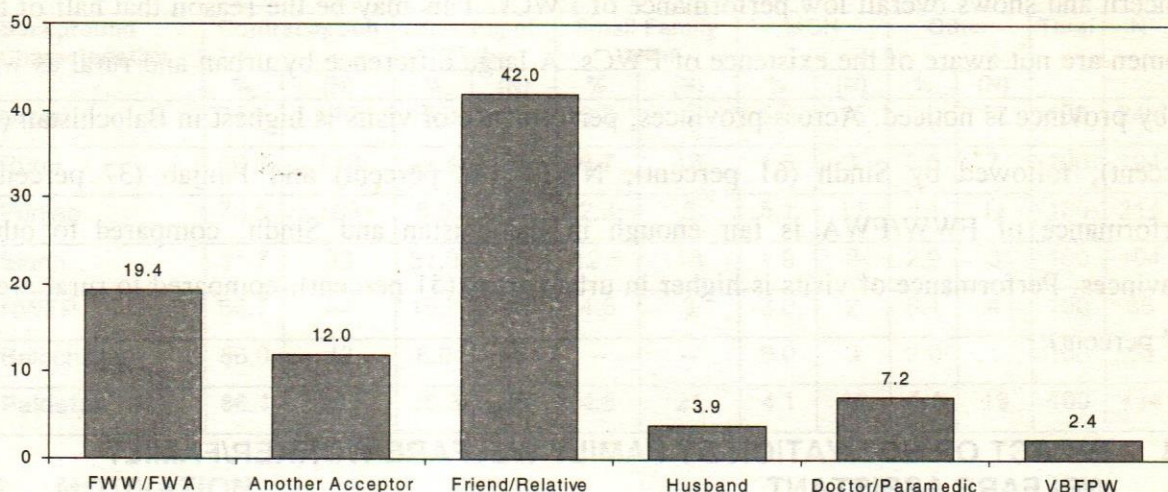
Table 5.2b

PERCENT OF CURRENTLY MARRIED WOMEN AND THEIR SOURCE OF INFORMATION ABOUT EXISTENCE OF FWC BY PLACE OF RESIDENCE AND PROVINCE, IPCS 1996-97

Source	Place of Residence		Province				Pakistan
	Urban	Rural	Punjab	Sindh	NWFP	Balochistan	
Family Welfare Worker	11.3	11.0	5.3	19.4	26.6	5.2	11.1
Family Welfare Assistant	9.8	6.9	7.7	15.3	4.4	5.2	8.3
VBFPW	0.4	4.2	0.9	0.6	6.3	10.4	2.4
Another acceptor	10.0	13.8	12.7	2.9	24.7	1.3	12.0
Husband	2.6	5.2	3.8	7.1	1.9	2.6	3.9
Friend/Relative	43.7	40.4	43.7	39.4	28.5	62.3	42.0
Doctor	1.3	1.2	0.7	2.9	1.3	1.3	1.2
Paramedic	3.4	8.3	9.4	1.8	0.6	--	6.0
Through advertisement in Newspaper	0.6	--	--	1.2	0.6	--	0.3
Other	16.8	9.0	15.9	9.4	5.1	11.7	12.7
Total	100.0	100.0	100.0	100.0	100.0	100.0	100.0
N	469	520	584	170	158	77	989

Figure 5.2b

Respondents by Source of Information about Existence of FWC



Source: Table 5.2b

5.3 VISITS OF FAMILY WELFARE WORKER/FAMILY WELFARE ASSISTANT

One of the main duties of the FWW/FWA is to disseminate family planning information and to motivate the people in the community in order to raise the awareness and practice of contraceptive. Table 5.3 shows percentage of currently married women who were visited by FWW or FWA by urban, rural and provinces.

Table 5.3

PERCENTAGE OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO WERE VISITED FIRST BY FWW/FWA BY PLACE OF RESIDENCE AND PROVINCE, IPCS 1996-97

Background Characteristics	FWW	FWA	No Body Visited	Total	No of CMW Aware of existence of FWC
Urban	22.2	29.0	48.8	100	469
Rural	19.2	18.1	62.7	100	520
Punjab	13.9	22.8	63.4	100	584
Sindh	32.4	28.8	38.8	100	170
NWFP	34.2	7.6	58.2	100	158
Balochistan	18.2	46.8	35.1	100	77
Pakistan	20.6	23.3	56.1	100	989

It is observed that 44 percent women were first visited by staff of FWCs (21 percent by FWW and 23 percent by FWA), while 56 percent were never visited by anybody. It is a matter of concern and shows overall low performance of FWCs. This may be the reason that half of the women are not aware of the existence of FWCs. A large difference by urban and rural as well as by province is noticed. Across provinces, performance of visits is highest in Balochistan (65 percent), followed by Sindh (61 percent), NWFP (42 percent) and Punjab (37 percent). Performance of FWW/FWA is fair enough in Balochistan and Sindh, compared to other provinces. Performance of visits is higher in urban areas (51 percent), compared to rural areas (37 percent).

5.4 IMPACT OF MOTIVATION BY FAMILY WELFARE WORKER/FAMILY WELFARE ASSISTANT

The key purpose of this survey was to measure the impact of the Interpersonal Communication which is an important component of the IEC. IEC component plays an important role in creating awareness and ultimately leading to raise the contraceptive practice. One of the aim of this study was to investigate the extent of respondents motivated by FWW/FWA for Family Planning.

Table 5.4 indicates that out of those women who were visited, FWW/FWA discussed contraception with 66 percent of them, followed by discussion for spacing (20 percent), for small family norm (5 percent) and for Maternal Child Health (MCH) services (4 percent). FWW/FWA discussed other related matters with 4 percent of women. The table also presents similar statistics for urban/ rural and provinces. It is observed that there are large differentials for urban, rural and for provinces. In Punjab, NWFP and Balochistan, major emphasis is on contraception while in Sindh major emphasis is on spacing of children.

Province	Urban	Rural	Total
Punjab	37	37	37
NWFP	42	42	42
Sindh	61	61	61
Balochistan	65	65	65

Table 5.4

PERCENTAGE OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS MOTIVATED BY FWW/FWA BY NATURE OF DISCUSSION RELATING TO FAMILY PLANNING, IPCS 1996-97

Background Characteristics	Contraception		Spacing of Births		Small Family norm		MCH		Other		Total	N
	%	(N)	%	(N)	%	(N)	%	(N)	%	(N)		
Urban	71.7	172	13.8	33	3.3	8	6.3	15	5.0	12	100	240
Rural	59.8	116	28.4	55	6.7	13	1.5	3	3.6	7	100	194
Punjab	78.5	168	8.9	19	2.3	5	5.1	11	5.1	11	100	214
Sindh	31.7	33	51.0	53	12.5	13	1.9	2	2.9	3	100	104
NWFP	66.7	44	19.7	13	4.5	3	3.0	2	6.1	4	100	66
Balochistan	86.0	43	6.0	3	--	--	6.0	3	2.0	1	100	50
Pakistan	66.4	288	20.3	88	4.8	21	4.1	18	4.4	19	100	434

5.5 MOTIVATION

It is found from table 5.5 and figure 5.3 that friends/relatives are most likely to give advice to CMW to attend a FWC. Highest percentage of women attended FWC first time on the advice of friends/relatives (36 percent), followed by FWW/FWA (31 percent); other acceptors (12 percent), husband (8 percent) and paramedics (7 percent). The remaining categories account for 6 percent. It is imperative that interpersonal communication by FWCs should be improved.

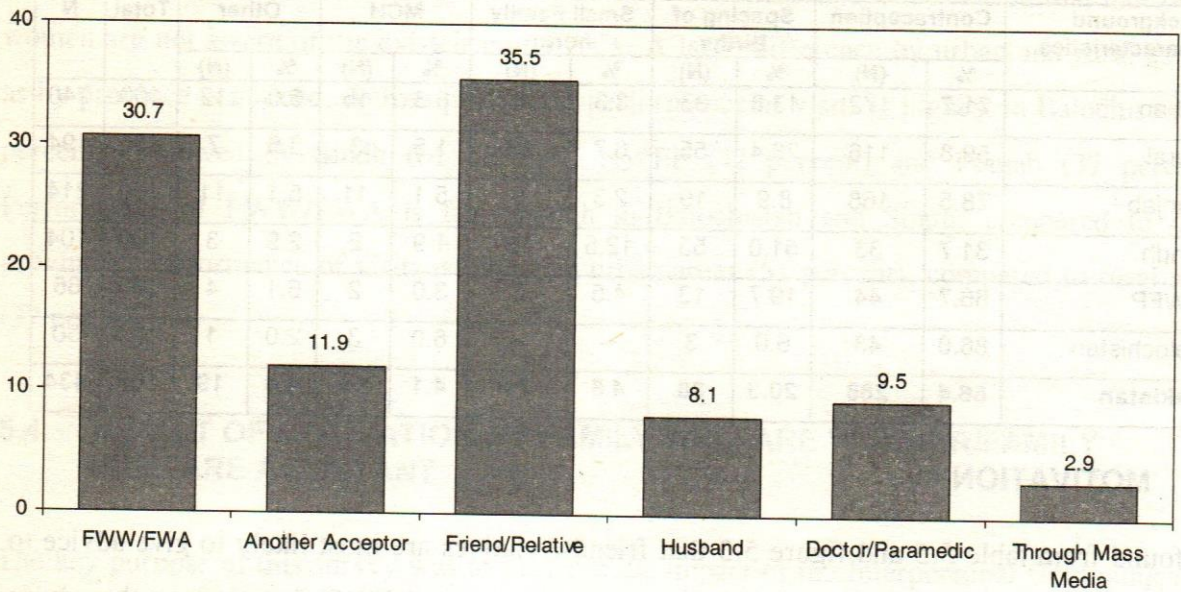
Table 5.5

PERCENTAGE OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO ATTENDED FWC, FIRST TIME BY SOURCE OF ADVICE, PLACE OF RESIDENCE AND PROVINCE, IPCS, 1996-97

Source	Urban	Rural	Punjab	Sindh	NWFP	Balochistan	Pakistan
Family Welfare Worker	16.4	19.9	10.1	34.0	31.3	8.5	18.0
Family Welfare Assistant	15.1	9.5	14.5	7.5	8.8	19.1	12.7
VBFPW	.3	3.0	.3		6.3	4.3	1.5
Another acceptor	9.7	14.7	11.5	1.9	31.3	4.3	11.9
Husband	6.4	10.4	8.4	12.3	6.3		8.1
Friend/Relative	41.3	28.1	41.2	26.4	13.8	57.4	35.5
Doctor	2.3	2.2	1.4	6.6	1.3		2.3
Paramedic	5.7	9.1	11.1	2.8	1.3	2.1	7.2
Motivated by advertisement in Newspaper	.3	.4	.3	.9			.4
Impressed by TV programme about FP	2.3	2.6	1.0	7.5		4.3	2.5
Total	100	100	100	100	100	100	100
Number of Women	298	231	296	106	80	47	529

Figure 5.3

Respondents Who Attended FWC First Time by Source of Motivation and Advice



Source: Table 5.5

5.6 REASONS FOR ATTENDING THE FWC

Family Welfare Centres also deliver services for mother care, childcare, treatment for minor ailments and health education in addition to family planning services.

Table 5.6 and figure 5.4 indicate that 48 percent women out of those who attended FWCs came to seek the services for family planning. Thirty percent mothers attended FWCs for mother care, followed by treatment of common ailment, child care, and health education. It is observed that over 44 percent women came to the Family Welfare Centres specifically for mother and child treatment. It is important to note that such women can ultimately be motivated for family planning.

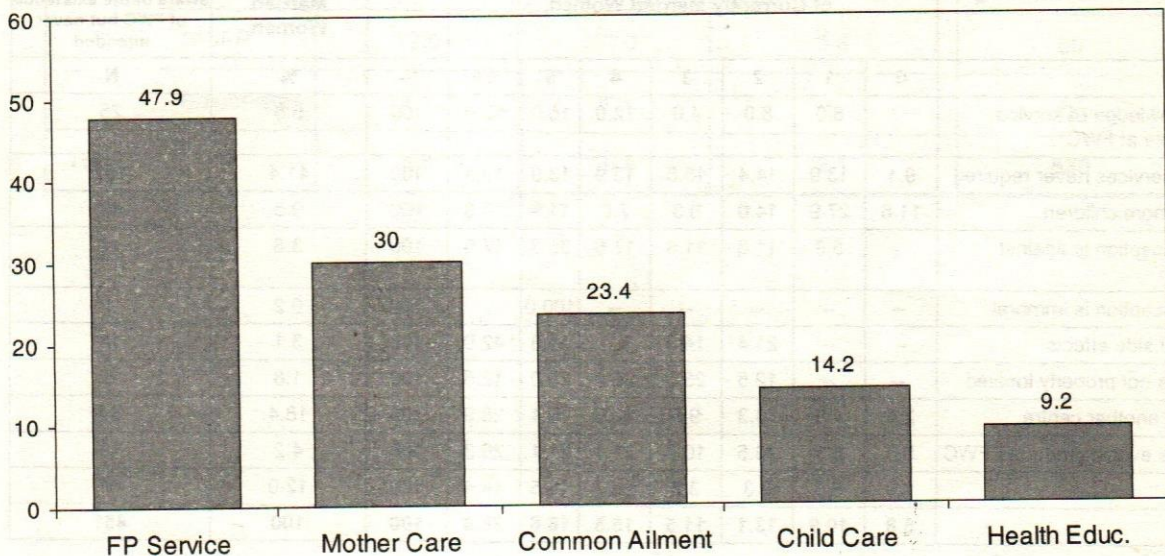
Table 5.6

PERCENTAGE OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO ATTENDED FWC BY REASONS, AND PLACE OF RESIDENCE, IPCS 1996-97

Purpose of Visit to FWC	Place of Residence		Total
	Urban	Rural	
Family Planning Service	49.5	45.9	47.9
Mother Care	26.4	34.6	30.0
Treatment of Common Ailment	27.1	18.6	23.4
Child Care	14.7	13.4	14.2
Health Education	9.4	9.1	9.2
Total	299	231	530

Figure 5.4

Respondents who Attended FWC by Purpose of Visit at Family Welfare Centre



Source: Table 5.6

5.7 REASONS FOR NOT ATTENDING FAMILY WELFARE CENTRE

Table 5.7 shows the reasons for not attending the Family Welfare Centres. It is observed that the major reason for not attending the Family Welfare Centre is that such services were never required (41 percent). It means that a large number of women did not want FWC services. This again shows weakness of interpersonal communication by staff of FWCs. They could not convince women to come over there. Six percent women knew about the existence of FWC but did not know the detail of services available at FWC. This is also a weakness on the part of

FWCs performance showing that motivation aspect needs great improvement. Ten percent women did not attend the FWC as they wanted more children. Only 4 percent of women did not attend centre because of religious reasons. Three percent of currently married women have not attended FWC due to fear of side effects which also needs attention. Women attending the other centres are 18 percent which shows that they were not satisfied with the services of FWCs. This point need also to be noted. Four percent women stated that no one ever visited them from FWCs which is again a matter of concern.

Table 5.7

**PERCENTAGE OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS
BY REASONS FOR NOT ATTENDING FWC, IPCS1996-97**

Reason for not Attending FWC	Number of Surviving Children with percentage of Currently Married Women							Total %	% of Currently Married Women	Total No. of CMW aware of the existence of FWC but never attended
	0	1	2	3	4	5	6+			
No knowledge of service available at FWC		8.0	8.0	4.0	12.0	16.0	52.0	100	5.5	N
FWC services never required	9.1	13.9	14.4	15.5	13.9	13.9	19.3	100	41.4	187
Want more children	11.6	27.9	14.0	9.3	7.0	11.6	18.6	100	9.5	43
Contraception is against religion	--	5.9	11.8	11.8	17.6	35.3	17.6	100	3.8	17
Contraception is immoral	--	--	--	--	--	100.0		100	0.2	1
Fear of side effects	--	--	21.4	14.3	7.1	14.3	42.9	100	3.1	14
FWC is not properly located	--	--	12.5	25.0	25.0	25.0	12.5	100	1.8	8
Attend another centre	2.4	4.8	13.3	9.6	22.9	18.1	28.9	100	18.4	83
No one ever visited from FWC	5.3	5.3	10.5	10.5	21.1	21.1	26.3	100	4.2	19
Other	1.9	5.6	9.3	3.7	16.7	18.5	44.4	100	12.0	54
Total	5.8	10.9	13.1	11.5	15.5	16.6	26.6	100	100	451

5.8 RESPONDENTS EVER ATTENDED VARIOUS PROGRAMMES AT FWCS

Table 5.8 shows the interest of currently married women in different activities organized by FWC. Majority of women like baby shows arranged at FWC (11 percent). Sukhi Ghar Mehfiles are attended by 7 percent, while other cultural shows are attended by only 2 percent. Eighty percent women did not show any interest in such type of activities. This calls for attention of the authorities to make these activities more interesting for attracting eligible population to attend FWCs.

Table 5.8

PERCENTAGE OF CURRENTLY MARRIED WOMEN WHO EVER ATTENDED DIFFERENT PROGRAMMES AT FWC, IPCS 1996-97

Background Characteristics	Ever attended a Sukhi Ghar Mahfil at FWC	Ever attended a Baby Show at FWC	Ever attended any Craft/Cultural Class at FWC	Total No. of CMW who ever attended the FWC
Place of Residence				
Urban	5.7	11.0	1.3	299
Rural	8.2	10.4	3.0	231
Province				
Punjab	3.4	11.1	2.4	297
Sindh	14.2	11.3	.9	106
NWFP	12.5	10.0	3.8	80
Balochistan	2.1	8.5	--	47
Total	6.8	10.8	2.1	530

Chapter 6

KNOWLEDGE AND PRACTICE OF CONTRACEPTIVE METHODS

This chapter presents the contraceptive knowledge of currently married women regarding family planning methods and use of contraception in catchment areas of FWCs. Information on knowledge of contraception was collected by asking the respondents to name methods by which a woman can delay or avoid pregnancy. If the respondent failed to mention a specific method spontaneously, then the interviewer described the methods and asked if the woman recognized it.

6.1 KNOWLEDGE OF VARIOUS CONTRACEPTIVE METHODS

Table 6.1 indicates the knowledge of currently married women regarding family planning methods. Data show that 90 percent women know at least one contraceptive method and same percentage of women have the knowledge of any modern method. Most popular methods are female sterilization and pill which are known to 84 percent women, followed by injections (83 percent), IUD (80 percent), condom (69 percent) and male sterilization (44 percent). The knowledge of any traditional method is 51 percent indicating that the knowledge of withdrawal is 46 percent which is reasonably high.

The urban-rural differentials have been noted to the expected direction. Overall 92 percent of women know at least one contraceptive method in urban areas compared to 88 percent in rural areas. In case of specific methods it is also noted that knowledge of each of the specific method is higher among urban women, compared to their rural counterparts.

Table 6.1

**PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS
WHO HAVE KNOWLEDGE OF FAMILY PLANNING METHODS ACCORDING TO
PLACE OF RESIDENCE, IPCS, 1996-97**

Contraceptive Method	Place of Residence		Total
	Urban	Rural	
Any Method	91.8	88.1	89.8
Any Modern Method	91.7	88.0	89.7
Pill	85.7	81.9	83.6
Condom	78.2	61.1	68.7
Vaginal Methods	26.0	18.6	21.9
Injection	84.9	82.3	83.4
IUD	84.5	76.8	80.2
Female Sterilization	87.3	81.0	83.8
Male Sterilization	50.6	37.8	43.5
Nor Plant	2.1	0.7	1.3
Any Traditional Method	59.2	44.0	50.8
Rhythm	31.2	22.0	26.1
Withdrawal	54.6	39.8	46.4
Other	9.1	5.4	7.1
Number of Women	866	1077	1943

6.2 COMPARISON OF KNOWLEDGE OF VARIOUS CONTRACEPTIVE METHODS

Table 6.2 shows that knowledge of currently married women for any method has sharply increased from 78 percent in 1990-91 PDHS to 90 percent in this survey. It also indicates high performance of IEC component of Population Welfare Programme in creating awareness regarding contraceptive methods. In PFFPS 1996-97, the knowledge of any method is 94 percent. The slight differences in data of PFFPS 1996-97 and IPCS 1996-97 is due to sampling difference.

Table 6.2

PERCENTAGE OF CURRENTLY MARRIED WOMEN BY KNOWLEDGE OF CONTRACEPTIVE METHODS, PDHS 1990-91, PCPS 1994-95 PFFPS 1996-97 AND IPCS 1996-97

Contraceptive Methods	PDHS 1990-91	PCPS 1994-95	PFFPS 1996-97	IPCS 1996-97
Any method	77.6	90.7	94.3	89.8
Any modern method	--	90.5	93.4	89.7
Pill	62.2	72.7	86.6	83.6
IUD	51.5	73.4	82.4	80.2
Injectable	62.2	80.5	86.0	83.4
Implant	--	--	14.9	1.3
Vaginal Method	12.7	9.0	13.8	21.9
Condom	35.3	46.0	61.2	68.7
Female Sterilization	69.7	86.2	88.5	83.8
Male Sterilization	20.2	15.4	31.0	43.5
Any Traditional Method	--	39.8	54.3	50.8
Periodic Abstinence	17.8	23.3	33.7	26.1
Withdrawal	14.3	28.5	40.7	46.4
Other methods	3.5	4.3	3.7	7.1
N	6364	7922	7582	1943

6.3 EVER USERS OF ANY FAMILY PLANNING METHOD

Table 6.3a indicates that 47 percent of currently married women ever used any method of family planning, with 40 percent ever using any modern method and 17 percent using any traditional methods. As expected the ever use is also found higher among urban women (57 percent), compared to rural women (38 percent). Similar differentials have been noted for individual methods. Condom has been found to be the most commonly ever used contraceptive method (15 percent), followed by IUD and pill (13 percent) and injection (12 percent). Among traditional method, withdrawal has been the popular method ever used by 14 percent women. It appears that condom which is most commonly used modern methods might be due to the reason that it is safe while other modern methods have probability of side effects, Since the users

belong to catchment area of FWC, it is imperative for FWCs to make efforts to equally popularize clinical methods and remove any doubts about side effects.

Table 6.3a

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO HAVE EVER USED ANY FAMILY PLANNING METHOD ACCORDING TO PLACE OF RESIDENCE, IPCS, 1996-97

Contraceptive Methods	Place of Residence		Total
	Urban	Rural	
Ever Used any Method	57.2	38.3	46.7
Ever Used any Modern Method	49.3	32.7	40.1
Pill	14.5	11.2	12.7
Condom	22.4	9.8	15.4
Vaginal Methods	1.3	0.5	0.8
Injection	13.5	10.4	11.8
IUD	18.2	9.5	13.4
Female Sterilization	9.0	7.1	7.9
Male Sterilization	0.1	0.1	0.1
Nor Plant	0.1	.0	0.1
Ever Used any Traditional Method	22.4	11.8	16.5
Rhythm	3.8	1.8	2.7
Withdrawal	19.5	9.8	14.2
Other	1.2	0.9	1.0
Number of Women	866	1077	1943

Table 6.3b reveals that the ever use rate of any contraceptive method has increased from 21 percent in 1990-91 to 47 percent in this survey. It is also noted that at the national level, ever use of any method as observed in PFFPS 1996-97 has been 36 percent, whereas in the catchment areas of FWCs, it is 47 percent as found in this survey. The results are encouraging and confirm the efforts of Population Welfare Programme.

Table 6.3b

PERCENTAGE OF CURRENTLY MARRIED WOMEN BY KNOWLEDGE AND EVER USE OF
CONTRACEPTIVE METHODS, PDHS 1990-91, PCPS 1994-95, PFFPS 1996-97
AND IPCS, 1996-97

Knowledge/Ever Use of Contraceptive Methods	Currently Married Women			
	PDHS 1990-91	PCPS 1994-95	PFFPS 1996-97	IPCS 1996-97
Knowledge	77.9	90.7	94.3	89.8
Ever Use	20.7	28.0	36.4	46.7
Number of women	6364	7922	7582	1943

6.4 CURRENT USE OF ANY CONTRACEPTIVE METHODS

Table 6.4, figure 6.1a and figure 6.1b indicate percent of currently married women who are currently practicing family planning. It is observed that 33 percent women are currently using any method, with 25 percent currently using any modern method and 7 percent currently using any traditional method. Current use of family planning methods in this specific sample survey is higher than the national figure of 24 percent which is understandable as the sampled women live around the vicinity of FWCs. It shows that acceptance of family planning is gradually increasing. Female sterilization is the most popular modern method currently used by 8 percent women, compared with other methods specially among high parity women. It appears that women prefer female sterilization for current use as it is the most effective method than other methods. Condom and IUD are the second most popular method used by 6 percent women. As expected in knowledge and ever use, current use is also higher among urban women (41 percent), compared to rural women (26 percent). In urban areas the pattern of contraceptive use indicate that the female sterilization and condom are the popular methods currently used by 9 and 8 percent women respectively, while in rural areas female sterilization and IUD are popular methods currently used by 7 and 4 percent women respectively.

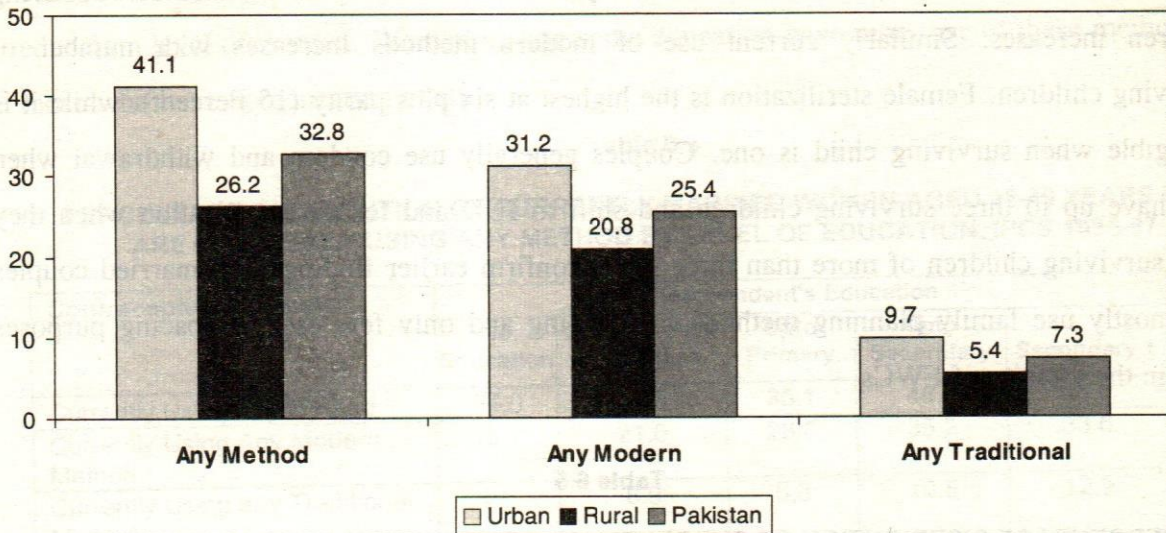
Table 6.4

PERCENT DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO ARE CURRENTLY USING A CONTRACEPTIVE METHOD BY PLACE OF RESIDENCE, IPCS, 1996-97

Contraceptive Methods	Urban	Rural	Pakistan
Currently Using any Method	41.1	26.2	32.8
Currently Using Any Modern Method	31.2	20.8	25.4
Currently Using any Traditional Method	9.7	5.4	7.3
Pills	2.7	2.0	2.3
Condoms	8.4	4.4	6.2
Vaginal Methods	--	0.1	0.1
Injection	3.5	2.6	3.0
IUD	7.5	4.5	5.9
Female Sterilization	9.0	7.1	7.9
Male Sterilization	0.1	0.1	0.1
Nor Plant	0.1	--	0.1
Rhythm	0.7	0.3	0.5
Withdrawal	8.7	5.0	6.6
Any other	0.3	0.1	0.2
Number of women	866	1077	1943

Figure 6.1a

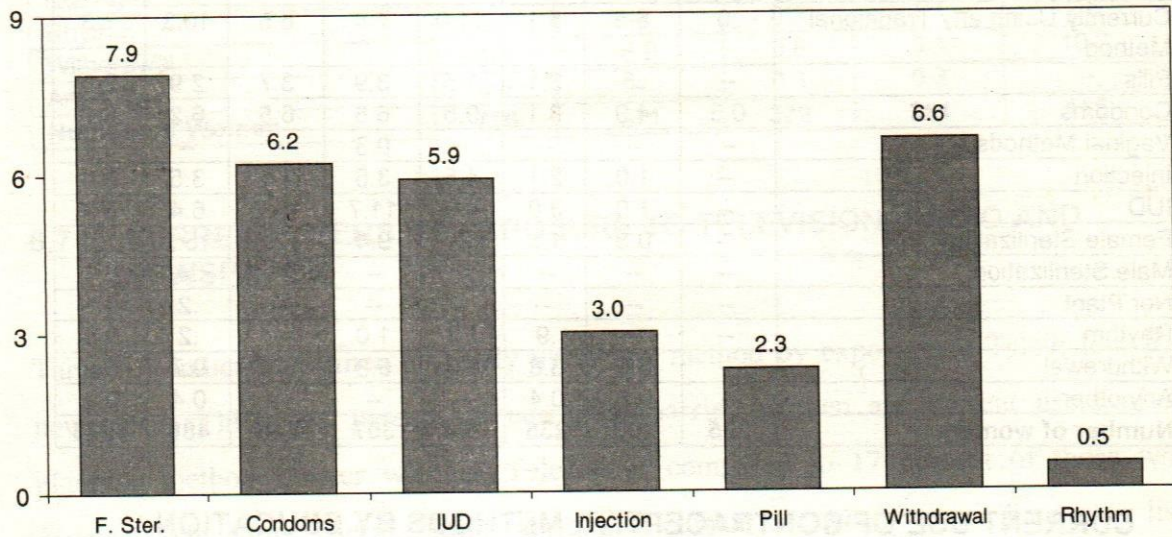
Use of Current Contraceptive Methods by Residence



Source: Table 6.4

Figure 6.1b

Current Use of Contraceptive Methods



Source: Table 6.4

6.5 CURRENT USE OF CONTRACEPTIVE METHODS BY PARITY

Table 6.5 indicates that the current use of any method increases as the number of living children increases. Similarly current use of modern methods increases with number of surviving children. Female sterilization is the highest at six plus parity (15 Percent), while it is negligible when surviving child is one. Couples generally use condom and withdrawal when they have up to three surviving children and shift to IUD and female sterilization when they have surviving children of more than three. This confirm earlier findings that married couples still mostly use family planning methods for limiting and only few use for spacing purposes even in the vicinity of FWCs.

Table 6.5

PERCENTAGE DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO ARE CURRENTLY USING ANY METHOD BY LIVING CHILDREN, IPCS, 1996-97

Contraceptive Methods	Number of Surviving Children							All
	0	1	2	3	4	5	6 +	
Currently Using any Method	0.5	12.5	21.7	37.5	43.6	43.9	45.3	32.8
Currently Using Any Modern Method	0.5	7.0	16.6	26.5	35.8	37.4	34.6	25.4
Currently Using any Traditional Method	.0	5.5	5.1	11.0	7.8	6.5	10.3	7.3
Pills	--	.5	2.1	1.5	3.9	3.7	2.9	2.3
Condoms	0.5	4.0	8.1	9.5	6.8	6.5	6.2	6.2
Vaginal Methods	--	--	--	--	0.3	--	--	0.1
Injection	--	1.0	2.1	4.5	3.6	4.5	3.5	3.0
IUD	--	1.0	3.0	4.9	11.7	10.2	6.4	5.9
Female Sterilization	--	0.5	1.3	6.1	9.4	12.6	15.2	7.9
Male Sterilization	--	--	--	--	--	--	.4	0.1
Nor Plant	--	--	--	--	--	--	.2	0.1
Rhythm	--	--	.9	1.1	1.0	--	.2	0.5
Withdrawal	--	5.0	3.8	9.8	6.8	6.5	9.7	6.6
Any other	--	0.5	0.4	--	--	--	0.4	0.2
Number of women	205	200	235	264	307	246	486	1943

6.6 CURRENT USE OF CONTRACEPTIVE METHODS BY EDUCATION

Education plays an important role in adopting family planning. Table 6.6 shows that in general as education increases, percentage of current users of family planning increases. It is 24 percent with no education, 31 percent with informal education, 35 percent upto primary, 46 percent

upto secondary and above. Female sterilization appears having no relation with education. Even uneducated women have almost similar level of female sterilization as of those have some education. However, Condom, IUD and Withdrawal are positively associated with the education level of women. Women having some education have more use of these methods than those who have no education at all.

Table 6.6

PERCENTAGE DISTRIBUTION OF CURRENTLY MARRIED WOMEN AGED 15-49 YEARS WHO ARE CURRENTLY USING ANY METHOD BY LEVEL OF EDUCATION, IPCS 1996-97

Contraceptive Methods	Respondent's Education					All
	No Education	Only Informal Education	Upto Primary	Upto Secondary	Secondary +	
Currently Using any Method	24.0	30.5	35.1	46.0	46.6	32.8
Currently Using Any Modern Method	19.7	21.0	28.8	35.2	33.6	25.4
Currently Using any Traditional Method	4.5	8.9	6.3	10.5	12.9	7.3
Pills	2.8	1.9	1.6	1.9	4.3	2.3
Condoms	3.6	4.0	5.3	10.8	17.2	6.2
Vaginal Methods	--	--	0.3	--	--	0.1
Injection	2.8	1.6	4.0	3.9	2.6	3.0
IUD	3.1	5.4	7.4	10.2	6.0	5.9
Female Sterilization	7.3	7.8	10.3	8.3	3.4	7.9
Male Sterilization	0.1	0.3	--	--	--	0.1
Nor Plant	--	0.3	--	--	--	0.1
Rhythm	0.1	--	0.3	1.1	2.6	0.5
Withdrawal	4.1	8.9	5.8	9.1	10.3	6.6
Any Other	0.3	--	0.3	0.3	--	0.2
Number of Women	716	371	379	361	116	1943

6.7 CURRENT USERS BY EXPOSURE TO TELEVISION, RADIO AND NEWSPAPER

Table 6.7 indicates women currently using any method by exposure to Television, Radio and newspaper. Thirty six percent of currently married women are current users of a family planning method if ever watched Television, compared to 17 percent of those who never watched Television. There is little variation in current use when women have ever listened to Radio or otherwise. Newspaper reading also enhances the current use of methods. It is 44 percent for those who have ever read newspaper, compared to 28 percent for those who have never read the newspaper.

Table 6.7

PERCENTAGE OF CURRENT USERS BY EXPOSURE TO TELEVISION, RADIO AND NEWSPAPER BY PLACE OF RESIDENCE, IPCS 1996-97

Exposure to Media		Urban	Rural	Pakistan	N
Television	Ever Watched	41.8	30.0	36.0	1622
	Never Watched	27.9	15.1	16.8	321
Radio	Ever Listened	39.5	30.2	34.5	914
	Never Listened	42.6	22.7	31.4	1029
Newspaper	Ever Read	47.2	38.5	44.4	541
	Never Read	36.7	23.7	28.4	1402
Total		41.1	26.2	32.8	1943

6.8 REASON FOR FIRST TIME CHOOSING A FAMILY PLANNING METHOD

Highest percentage of respondents accepted a contraceptive method on the advice of husband (36 percent), followed by acceptance on her own choice (20 percent), advice of someone else (17 percent), advice of FWW (11 percent) and advice of other relatives and friends (8 percent). Pill, Injection and IUD were mainly accepted first time at the advice of some one else. While condom, female sterilization Rhythm and Withdrawal were mainly used on husbands desire. Eleven percent women used contraception on the recommendation of FWW which is also appreciable.

Table 6.8

REASONS FOR FIRST TIME CHOOSING A FAMILY PLANNING METHOD, IPCS, 1996-97

Firstly Used Method	Specific reason to adopt that particular method							N
	On her/own		FWW	Other acceptor	Husband	Friend or Relative	Someone else	
	Method has less/no side effects	Method is effective						
Pills	17.8	6.7	15.0	12.2	15.0	10.0	23.3	180
Condom	14.8	2.7	6.0	0.5	67.0	1.6	7.1	182
Vaginal Methods	--	--	50.0	--	25.0	--	25.0	4
Injection	12.5	4.7	20.3	15.6	11.7	14.1	21.1	128
IUD	17.0	7.5	15.7	10.1	9.4	13.2	27.0	159
Female sterilization	16.5	21.2	14.1	4.7	25.9	4.7	12.9	85
Rhythm	--	--	--	7.1	50.0	21.4	21.4	14
Withdrawal	5.6	5.6	--	2.1	82.4	.7	3.5	142
Other	7.1	--	--	14.3	7.1	21.4	50.0	14
Total	13.8	6.7	11.3	7.6	36.0	7.8	16.7	908

6.9 REASON FOR CHOICE OF A PARTICULAR FAMILY PLANNING METHOD FOR CURRENT USE

Table 6.9 indicates reasons for choosing any particular family planning method for current use. Pill is mainly selected for current use by respondent herself as this method has less or no side effects. Major reason for selection of condom and female sterilization is that these are advised by husbands. In case of injection and IUD the highest percentage of the women, that is, 19 percent and 25 percent respectively have adopted these methods at the advice of FWW. Rhythm and withdrawal have been adopted by majority of the women at the recommendation of their husbands. Data show that husband's advice is important. It is observed that highest percentage chose a method for current use at husband's desire (39 percent), followed by on her own choice (27 percent), someone else (12 percent), FWW (11 percent), and other acceptors (4 percent).

Table 6.9

REASON FOR CHOOSING A PARTICULAR FAMILY PLANNING METHOD FOR CURRENT USE, IPCS 1996-97

Methods Currently Being Used	Reason for choice of particular method							N	
	Respondent Herself		FWW	Other acceptor	Husband	Friend or Relative	Someone else		Other
	Method has Less/no side effects	Method is Effective							
Pills	30.4	17.4	10.9	15.2	6.5	4.3	15.2	--	46
Condom	25.6	3.3	3.3	0.8	57.0	1.7	8.3	--	121
Vaginal Methods	--	--	100.0	--	--	--	--	--	1
Injection	15.3	10.2	18.6	8.5	16.9	13.6	15.3	1.7	59
IUD	19.2	7.5	25.0	4.2	10.8	13.3	18.3	1.7	120
F. sterilization	11.0	19.3	13.1	3.4	30.3	5.5	15.2	2.1	145
M. Sterilization	--	--	--	--	33.3	--	66.7	--	3
Rhythm	11.1	11.1	22.2	--	33.3	11.1	11.1	--	9
Withdrawal	8.5	6.2	0.8	--	82.9	0.8	0.8	--	129
Other	25.0	25.0	--	25.0	--	--	25.0	--	4
Nor Plant	100.0	--	--	--	--	--	--	--	1
Total	16.8	10.2	11.4	3.8	39.2	6.0	11.8	.9	638

Chapter 7

SUMMARY OF FINDINGS AND RECOMMENDATIONS

This study has been conducted to find the quality and role of IPC at FWCs and to identify the gap between knowledge and practice of family planning. A field survey was carried out to this effect and the study has come up with the following main findings:

1. Education level of currently married women is very low. Thirty seven percent women have no education, 19 percent have informal or Quranic education and 46 percent have formal schooling. Above secondary level education has been reported by only 6 percent of currently married women. Urban and rural disparities in education levels are high. In urban areas 11 percent women have education above secondary, compared to only 2 percent in rural areas. There is need to raise educational level of women.
2. Educational level of husbands is higher compared to wives. For example only 6 percent wives are above secondary compared to 23 percent husbands. Urban-rural and provincial differences are also high with regard to education level of wives and husbands. This discrimination with regard to urban-rural and provinces must be addressed. Equal opportunities to males and females for education may be provided.
3. The overall mean number of children ever born to currently married women is 4.3. This is slightly less than that of the previous report of IEC, 1996 wherein it was 4.4. The overall mean number of children ever born is still high. There is need to make services of family planning more effective.
4. The mean age at marriage for currently married women is 18 years. The age at marriage of husbands is 24 years. Although age at marriage in Pakistan is having upward trend which might be due to high economic pressure and improvements in education facilities, it is yet low for women. Early marriages need to be discouraged and this should seek importance in IEC component.

5. The role of mass media for family planning purpose can not be ignored or denied. Television is the most popular media. Daily watchers of Television are 66 percent with 84 percent in urban and 55 percent in rural areas. On the other hand, daily listeners of radio are only 12 percent with 11 percent in urban and 12 percent in rural areas. Daily readers of newspapers and magazines are negligible (5 percent and 3 percent respectively). Television, radio and newspapers have played important role for creating awareness about family planning which is 90 percent. However electronic media is not suitable to talk openly about family planning methods under the prevalent socio cultural norms of Pakistani society. There is therefore need to change the IEC strategy for raising family planning practice. Interpersonal Communication is the best media to discuss family planning issues face to face openly in privacy.
6. The study shows that the role of Interpersonal Communication at FWCs is very weak. Interpersonal Communication of the staff of the FWC is weak, particularly in informing women of the existence of the FWCs. The highest percentage of currently married women (42 percent) were informed by friends/relatives about the existence of FWCs. Newspapers role in this connection is also poor as only 3 percent currently married women report newspaper as source of information about the existence of FWCs in their locality. Performance of FWCs can best be improved by following a policy of quality IPC.
7. The performance of FWW/FWA is not satisfactory as regards motivation. Only 41 percent of currently married women have been visited first by FWW/FWA, whereas 56 percent women under reference have not been visited by anybody. This ultimately leads to low performance of FWCs. Motivation by FWW/FWA needs to be improved by some type of incentives.
8. It is encouraging that 66 percent currently married women received the message from FWW/FWA for contraception while discussing family planning with them. It means that during the discussion FWW/FWA are successful to convey the message regarding family planning and most of the women took contraception for family planning. This Confirms the importance of Interpersonal Communication. Talk on media like Television and radio is not possible regarding family planning methods keeping in view socio-cultural norms of the

- society. It requires that programme may shift its policy towards IPC by allocating more resources and to identify innovative ways and means of Interpersonal Communication.
9. The major source is friends/relatives to bring the currently married women first time to FWCs. Thirty six percent women were advised by friends/relatives to come over to FWC first time, followed by 31 percent by FWW and FWA. This shows that Interpersonal Communication at Family Welfare Centres needs improvement.
 10. Forty eight percent women came to FWC for seeking the service of family planning and others came for MCH, common ailments and health education services.
 11. The main reason mentioned by 41 percent of currently married women who did not attend FWCs was that such services were never required. Religious opposition has been noted insignificant, as only 4 percent women reported religious reason for not attending FWCs. Fear of side effects has been mentioned by 3% women.
 12. The majority of currently married women have not participated in the activities like Sukhi Ghar Mahfil, baby shows and craft cultural classes organized by family welfare centres. women should be brought to such type of activities by offering them some incentives.
 13. One of the objectives of the study was to measure the knowledge and use of family planning methods. The most known method was female sterilization. Eighty four percent of respondents were aware of this method. Ever use of any method is 47 percent. Condom has been recorded being the most popular method among ever users. The current use of contraception is low. Only 33 percent currently married women are practicing family planning. Evidently the drop-out are 14 percent. Which may be due to need for another child. Followup activities are important for continuation of family planning practice. Similarly, supervision must be made effective. Female sterilization is the most popular method among current users. However female sterilization is being adopted by high parity women who have already completed their family size. The high use of condoms indicates that people want safe methods without any difficulties and side effects.

14. For choice of methods, husband has been found dominant which reveals low status of women having less decision making power. This indicates that education for women must be accorded priority to provide them a better status. Also there should be more opportunities for women's employment.

REFERENCES:

Rukannuddin, A. Razzaque, 1988, Evaluation of Communication Components of Population Welfare Programme of Pakistan, NIPS, Islamabad.

National Institute of Population Studies, Pakistan Demographic and Health Survey, 1990-91, IRO/Macro International INC., Columbia, 1992.

Hashmi, S. Mazhar Hussain, (FWC) vicinity Study 1993, Government of Pakistan, Ministry of Population Welfare, Monitoring and Statistics Wing, Islamabad.

Pakistan Population Council, Pakistan Contraceptive Prevalence Survey 1994-95 Islamabad, 1998

Hakim, Abdul, 1996, Evaluation of Information Education & Communication (IEC) Components of Population Welfare Programme of Pakistan.

Population Welfare Division, Pakistan Contraceptive Prevalence Survey, 1984-85.
Ministry of Planning and Development, 1986

Hakim, Abdul, John Cleland and Mansoor-ul-Hasan Bhatti (1998). Pakistan Fertility and Family Planning Survey, 1996-97

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PUBLIC RELATIONS CENTRES
1985

Annexure Questionnaire

Processing Code

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**SURVEY OF
INTERPERSONAL COMMUNICATION
AT
FAMILY WELFARE CENTRES
1995**

QUESTIONNAIRE



**NATIONAL INSTITUTE OF POPULATION STUDIES
HOUSE NO.8, STREET NO.70, F-8/3
ISLAMABAD**

**Phone No. 850205, 850163
Telex No. 64139**

HOUSEHOLD COMPOSITION

First I would like to have some information about members of your household and currently staying visitors. [LIST HOUSEHOLD MEMBERS AND VISITORS AND CIRCLE LINE NUMBER OF EACH ELIGIBLE WOMAN.]

No	Name of Household Members And Visitors	Relationship to Head of Household*	Usual Member 1. Present 2. Temporarily Absent 3. Permanently Absent 3. Visitor	Age	Sex 1. Male 2. Female	Marital Status 1. Never Married 2. Married 3. Widowed 4. Divorced 5. Separated
1	2	3	4	5	6	7
01						
02						
03						
04						
05						
06						
07						
08						
09						
10						
11						
12						
13						
14						

- *CODES FOR RELATIONSHIP TO HEAD OF HOUSEHOLD
- | | | |
|------------------------|--------------------------|-------------------|
| 01 HEAD | 06 PARENT | 11 GRAND PARENT |
| 02 WIFE/HUSBAND | 07 PARENT IN LAW | 12 UNCLE/AUNT |
| 03 SON/DAUGHTER | 08 BROTHER/SISTER | 13 OTHER RELATIVE |
| 04 SON/DAUGHTER IN LAW | 09 BROTHER/SISTER IN LAW | 14 NOT RELATED |
| 05 GRAND SON/DAUGHTER | 10 NEPHEW/NIECE | |

Total household members and visitors

Number of eligible women

Total Male Female

S I C F W C

Date of Visit:

		9	5

		9	5

Time :

SECTION I
IDENTIFICATION

1. PROVINCE

- 1. NWFP
- 2. Punjab
- 3. Sindh
- 4. Balochistan

--

2. DISTRICT _____

--	--

3. Sampled Family Welfare Centre (FWC)

--	--

4. Sampled Cluster _____
(City Block / Mohallah or Village)

--	--

5. Distance of Cluster from FWC _____
(Meters)

--	--	--	--

6. AREA 1. Urban 2. Rural

--

7. TEHSIL / TALUKA _____

8. NAME OF HEAD OF HOUSEHOLD _____

--	--

9. NAME OF ELIGIBLE WOMAN _____

--

10. RESULT OF INTERVIEW

- 1. Completed
- 2. Dwelling Vacant
- 3. No Adult at Home
- 4. No Eligible Woman
- 5. Eligible Woman Absent
- 6. Refused

--

SECTION II

BACKGROUND CHARACTERISTICS

Identification Number

--	--	--	--	--	--

Q. 201

It is important in this study to know your exact age. How old are you in completed years?

اس سروسے میں آپکی صحیح عمر کا جاننا ضروری ہے۔ آپ کتنے سال کی ہو گئی ہیں؟

AGE

--	--

Years

Date of Birth

D

M

Y

--	--

--	--

--	--

PROBE IF NECESSARY. FOLLOW INSTRUCTIONS.

Q. 202

What is your education?

آپ کی تعلیم کیا ہے؟

CIRCLE 1 OR 2 OR CLASSES PASSED
AS THE CASE MAY BE.

1. No formal or informal education [SKIP TO 204]
2. Only informal education
3. Formal education
Number of classes passed
0 1 2 3 4 5
6 7 8 9 10 11 12 13 14 15 16+ [SKIP TO 204]

Q. 203

Can you read and write a simple letter with full understanding?

کیا آپ ایک سادہ خط پوری سمجھ بوجھ کے ساتھ پڑھ اور لکھ سکتی ہیں؟

1. Yes
2. No

Q. 204

What is the education of your husband?

آپ کے شوہر کی تعلیم کیا ہے؟

CIRCLE 1 OR 2 OR CLASSES PASSED
AS THE CASE MAY BE.

1. No formal or informal education [SKIP TO 206]
2. Only informal education
3. Formal education
Number of classes passed
0 1 2 3 4 5
6 7 8 9 10 11 12 13 14 15 16+ [SKIP TO 206]

--	--	--

Q. 205

Can your husband read and write a simple letter with full understanding?

کیا آپ کے شوہر ایک سادہ خط پوری سمجھ بوجھ کے ساتھ پڑھ اور لکھ سکتے ہیں؟

1. Yes
2. No

--

Q. 206

What kind of work do you mainly do?

آپ زیادہ تر کیا کام کرتی ہیں؟

--	--

Q. 207

What was your age when you (first) got married?

جب آپ کی (پہلی) شادی ہوئی۔ تو آپ کی عمر کیا تھی؟

Age

--	--

Years

--	--

PROBE IF NECESSARY.

Q. 208

What was the age of your husband when you (first) got married?

جب آپ کی (پہلی) شادی ہوئی تو آپ کے شوہر کی عمر کیا تھی؟

Age

--	--

Years

--	--

SECTION III

INFORMATION, EDUCATION AND COMMUNICATION

CHECK 202 AND 203. IF ILLITERATE,
SKIP TO 305.

Q. 301. How often do you read a newspaper?

آپ (ہفتہ) میں کتنے دن اخبار پڑھتی ہیں؟

1. Daily
2. At least once a week
3. Once a while
4. Never

Q. 302. How often do you read a magazine?

آپ کا رسالہ پڑھنے کا معمول کیا ہے؟

1. Daily
2. At least once a week
3. Once a while
4. Never

IF NEVER READ A NEWSPAPER OR MAGAZINE,
SKIP TO 305.

Q. 303. Have you ever seen any advertisement or read anything regarding family planning in any newspaper / magazine?

کیا آپ نے کسی اخبار میں یا کسی رسالہ میں خاندانی منصوبہ بندی کے متعلق کبھی کوئی دیکھا یا پڑھا۔

1. Yes
2. No

[SKIP TO 305]

Q. 304. According to you what was the message?

آپ کے خیال میں اُس میں کیا پیغام دیا گیا؟

1. Contraception
2. Spacing of births
3. Small family norm
4. MCH
5. Other

Q. 209

How many live births have you had?
Please be sure to include all the children
you have given birth to, even if some survived
only for a short time.

آپ کے کل کتنے زندہ بچے ہوئے؟ برائے مہربانی تمام زندہ پیدا ہونے والے بچوں کا
بتائیے خواہ ان میں سے کچھ تھوڑی دیر ہی زندہ رہے ہوں۔

Total

Boys

Girls

IF NO LIVE BIRTH, SKIP TO 212.

Q. 210

How long ago was your last live birth?

آپ کے آخری زندہ بچے کی پیدائش کو کتنا عرصہ ہوا؟

Years

Months

Q. 211

How many of your children are living now?

(ماشاء اللہ) اب آپ کے کتنے بچے حیات میں ہیں؟

Total

Boys

Girls

Q. 212

Are you pregnant now?

کیا اب آپ حاملہ ہیں؟

1. Yes

2. No

Q. 213

Do you want to have more children in future?
(in addition to the one you are expecting now)

کیا آپ کو (ہونے والے بچے کے علاوہ) مزید بچوں کی خواہش ہے؟

1. Yes

2. No

Q. 305

How often do you listen radio?

آپ (ہفتہ) میں ریڈیو کتنے دن سنتی ہیں؟

1. Daily
2. At least once a week
3. Once a while
4. Never

[SKIP TO 308]

Q. 306

Did you ever hear anything regarding family planning on radio?

کیا آپ نے ریڈیو پر خاندان منصوبہ بندی سے متعلق کبھی کچھ سنا؟

1. Yes
2. No

[SKIP TO 308]

Q. 307

What have you heard?

آپ نے کیا سنا؟

1. Contraception
2. Spacing of births
3. Small family norm
4. MCH
5. Other

Q. 308

How often do you watch television?

آپ (ہفتہ) میں ٹیلی ویژن کتنے دن دیکھتی ہیں؟

1. Daily
2. At least once a week
3. Once a while
4. Never

[SKIP TO 311]

Q. 309

Have you watched anything regarding family planning on television?

کیا آپ نے ٹیلی ویژن پر خاندان منصوبہ بندی سے متعلق کبھی کچھ دیکھا؟

1. Yes
2. No

[SKIP TO 311]

Q. 310

What was the message?

اِس میں کیا پیغام تھا؟

1. Contraception
2. Spacing of births
3. Small family norm
4. MCH
5. Other

Q. 311

In your opinion what is a small family? I mean, how many children make a small family?

آپ کے خیال میں چھوٹا کنبہ کیا ہے؟ میرا مطلب ہے کہ کتنے بچوں کو آپ ایک چھوٹا کنبہ کہیں گے؟

--	--

Q. 312

Do you know that there is a Family Welfare Centre (FWC) in your locality / mohalla / sector / village / near village?

PROMPT

کیا آپ کو معلوم ہے کہ آپ کے علاقہ / محلہ / سیکٹر / گاؤں / نزدیکی گاؤں میں ایک فلاحی مرکز ہے؟

1. Yes
2. No

[SKIP TO 401]

Q. 313

How did you come to know about the existence of FWC in the area?

آپ کو فلاحی مرکز کی موجودگی کا کس طرح پتہ چلا؟

1. Family Welfare Worker
2. Family Welfare Assistant
3. Village Base Family Welfare Worker
4. Another acceptor
5. Husband
6. Friend / Relative
7. Doctor
8. Paramedic
9. Through advertisement in newspaper
10. Other

Q. 314

Did Family Welfare Worker (FWW) or Family Welfare Assistant (FWA) of FWC ever visit you at your home?

کیا فلاحی مرکز کی FWW یا FWA نے کبھی آپ کے گھر پر آپ سے ملاقات کی؟

1. Yes
2. No

[SKIP TO 318]

Q. 315

Who visited you first?

آپ سے سب سے پہلے کس نے ملاقات کی؟

1. FWW
2. FWA

Q. 316

What did she discuss relating to family planning?

اُس نے خاندانی منصوبہ بندی سے متعلق کیا کیا بتایا؟

1. Contraception
2. Spacing of births
3. Small family norm
4. MCH
5. Other

Q. 317

How often FWW / FWA visit you at your home for motivation of family planning or for followup during last 6 months?

پچھلے 6 ماہ کے دوران (فلاحی مرکز کی) FWW یا FWA آپ کے گھر پر خاندانی منصوبہ بندی کی ترغیب کے لئے کتنی دفعہ آئیں ہیں؟

1. At least once in a month
2. Once in two months
3. Once in three months
4. Only once so far during last 6 months
5. Before last 6 months

Q. 318

Did you ever visit the FWC in your area?

کیا آپ کبھی اپنے علاقہ کے فلاحی مرکز گئیں؟

1. Yes
2. No

[SKIP TO Q 325]

Q. 319

Who advised you first to attend the FWC?

آپ کو فلاہی مرکز جانے کا مشورہ سب سے پہلے کس نے دیا؟

1. Family Welfare Worker
2. Family Welfare Assistant
3. Village Base Family Welfare Worker
4. Another acceptor
5. Husband
6. Friend / Relative
7. Doctor
8. Paramedic
9. Motivated by advertisement in newspaper
10. Impressed by radio programme
11. Impressed by TV programme regarding family planning

Q. 320

For what purpose did you / do you attend the FWC?

آپ فلاہی مرکز کس مقصد کے لئے گئیں؟

PROMPT

1. Family Planning Services
2. Mother Care
3. Child Care
4. Treatment of common ailment
5. Health Education

IF THE RESPONDENT IS ATTENDING FWC FOR FAMILY PLANNING SERVICES ALSO, SKIP TO 322

Q. 321

Did FWW / FWA motivate you for family planning and discuss the matters relating to family planning and use of contraceptive methods?

کیا (فلاہی مرکز کی) FWW یا FWA نے آپ کو خاندانی منصوبہ بندی اپنانے کے لیے کہا؟ اور کیا اُس نے خاندانی منصوبہ بندی سے متعلق اور مانع حمل طریقوں کے متعلق بتایا؟

1. Yes
2. No

Q. 322

Did you ever attend a Sukhi Ghar Mahfil at FWC?

کیا آپ نے کبھی سکھی گھر محفل میں شرکت کی؟

1. Yes
2. No

Q. 323

Did you ever attend a well baby show at FWC?

کیا آپ نے کبھی فلاحی مرکز میں بے بی شو میں شرکت کی؟

1. Yes
2. No

Q. 324

Did you ever attend any craft/cultural class at FWC?

کیا آپ نے کبھی فلاحی مرکز میں سلائی کڑھائی یا ثقافتی کلاس میں شرکت کی؟

1. Yes
2. No

SKIP TO 401.

Q. 325

Why did you not attend an FWC so far?

آپ ابھی تک فلاحی مرکز کیوں نہیں گئیں؟

1. No knowledge of services available at FWC
2. Any of the FWC services were never needed
3. Want more children
4. Contraception is against religion
5. Contraception is immoral
6. Contraception is unnatural
7. Fear of side effects
8. FWC is not suitably located
9. Attend another centre
10. Nobody from the FWC ever visited me
11. Other

SECTION IV
CONTRACEPTION

Q. 401

Now I would like to talk about various family planning methods that a couple can use to delay or avoid a pregnancy.

اب میں آپ سے خاندانی منصوبہ بندی کے مختلف طریقوں کے بارے میں بات کرنا چاہوں گی۔ جن سے میاں بیوی حمل میں تاخیر کر سکتے ہیں۔ یا حمل سے بچ سکتے ہیں۔

What family planning methods do you know?

آپ کو خاندانی منصوبہ بندی کے کن طریقوں کے بارے میں علم ہے؟

CIRCLE "YES" OR "NO" CODE IN COLUMN "A" OF THE TABLE FOR EACH METHOD. PROMPT AND DESCRIBE EACH METHOD.

TABLE

Methods	(A) KNOWLEDGE (Q. 401)	(B) EVER USE (Q. 403)
01 Pill	1. YES 2. NO	1. YES 2. NO
02 Condom	1. YES 2. NO	1. YES 2. NO
03 Vaginal Methods	1. YES 2. NO	1. YES 2. NO
04 Injection	1. YES 2. NO	1. YES 2. NO
05 I.U.D	1. YES 2. NO	1. YES 2. NO
06 Female Sterilisation	1. YES 2. NO	1. YES 2. NO
07 Male Sterilisation	1. YES 2. NO	1. YES 2. NO
08 Rhythm	1. YES 2. NO	1. YES 2. NO
09 Withdrawal	1. YES 2. NO	1. YES 2. NO
10 Other _____ (Specify)	1. YES 2. NO	1. YES 2. NO
TT Any Method	1. Yes 2. No	1, Yes 2. NO

<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
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<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

IF RESPONDENT DOESN'T KNOW ANY METHOD, SKIP TO 501; OTHERWISE ASK NEXT QUESTION.

Q. 402

Who told you about these methods?

آپ کو ان طریقوں کے بارے میں کس نے بتایا؟

1. Family Welfare Worker
2. Family Welfare Assistant
3. Village Base Family Welfare Worker
4. Another acceptor
5. Husband
6. Friend / Relative
7. Doctor
8. Paramedic
9. Advertisement in newspaper
10. Radio programme
11. TV programme regarding family planning

--	--

Q. 403

What methods have you ever used?

آپ نے کون کون سے طریقے استعمال کئے؟

CIRCLE RESPONSES IN COLUMN "B". IF NOT A SINGLE "YES" (NEVER USED), SKIP TO 421. OTHERWISE ASK NEXT QUESTION.

Q. 404

What was the main reason that you started practicing family planning?

وہ کون سی خاص وجہ تھی۔ جس کی وجہ سے آپ نے خاندانی منصوبہ بندی پر عمل شروع کیا؟

1. Wanted no more children
2. Wanted spacing between births
3. Health problems
4. Other reason

--

(Specify)

Q. 405

Who motivated you to practice contraception?

آپ کو کس نے خاندانی منصوبہ بندی پر عمل کرنے کی ترغیب دی؟

1. Family Welfare Worker
2. Family Welfare Assistant
3. Village Base Family Welfare Worker
4. Another acceptor
5. Husband
6. Friend / Relative
7. Doctor
8. Paramedic
9. Motivated by advertisement in newspaper
10. Impressed by radio programme
11. Impressed by TV programme regarding family planning

--	--

Q. 406

What contraceptive method did you choose first?

آپ نے خاندانی منصوبہ بندی کا کونسا طریقہ سب سے پہلے منتخب کیا؟

Method _____

Q. 407

From where did you get the first method?

آپ نے پہلا طریقہ کہاں سے حاصل کیا؟

1. Family Welfare Centre
2. NGO Centre

3. Drug store _____ (Specify)

4. Hospital

5. Other _____

(Specify)

[SKIP
TO
410]

Q. 408

Did FWW explain all types of contraceptives when you first visited the FWC?

جب آپ فلاحی مرکز پہلی دفعہ گئیں۔ تو کیا FWW نے تمام طریقوں کے بارے میں وضاحت کی؟

1. Yes
2. No

Q. 409

Did FWW explain the merits and side effects of all the contraceptive methods?

کیا FWW نے تمام طریقوں کی خوبیوں اور دوسرے اثرات کے متعلق وضاحت کی؟

1. Yes
2. No

Q. 410

Why did you make a choice of that particular method?

آپ نے اُس خاص طریقہ کا انتخاب کس بنا پر کیا؟

1. Method has less / no side effects
2. Method is effective

Method was recommended by:

3. FWW
4. Other acceptor
5. Husband
6. Friend or relative
7. Someone else _____

8. On information through media _____

(Specify)

Q. 411

Did FWW / FWA advise you about follow up care?

کیا FWW یا FWA نے آپ کو دوبارہ (فلاحی مرکز) آنے کا کہا تھا؟

1. Yes
2. No

IF STERILISATION IN EVER USE, SKIP TO 414, OTHERWISE ASK NEXT QUESTION.

Q. 412

Are you currently using any family planning method?

کیا آپ آجکل خاندانی منصوبہ بندی کا کوئی طریقہ استعمال کر رہی ہیں؟

1. Yes
2. No _____ [SKIP TO 419]

Q. 413

What is that method?

وہ طریقہ کون سا ہے؟

METHOD _____

Q. 414

Why did you make a choice of that particular method for current use?

آپ نے موجودہ طریقہ کو کس بنا پر منتخب کیا؟

1. Method has less / no side effects
2. Method is effective

Method was recommended by:

3. FWW
4. Other acceptor
5. Husband
6. Friend or relative
7. Someone else

(Specify)

8. Other

(Specify)

415

How long have you been using the present method without interruption?

آپ موجودہ طریقہ کتنے عرصہ سے لگاتار استعمال کر رہے ہیں؟

Years

Months

(Months)

IF STERILISATION IN EVER USE, SKIP TO 417

Q. 416

From where do you usually get supplies of contraceptives?

آپ عموماً نائج محل طریقے کہاں سے حاصل کرتے ہیں؟

1. Family Welfare Centre
2. NGO Centre

3. Drug store (Specify)
4. Hospital
5. Other

(Specify)

Q. 417

Have you experienced any side effects, problems or difficulties with your present method?

کیا آپ کو موجودہ طریقہ کے استعمال سے کوئی مضر اثرات مسائل یا پریشانی ہوئی؟

1. Yes
2. No [SKIP TO 501]

Q. 418

What major side effect or problem did you have?

آپ کو کون سا مضر اثر یا کونسی پریشانی ہوئی؟

Side effects:

1. Obesity
2. Headaches/Dizziness
3. Other health problems
4. Interference with sex
5. Psychological
6. Bleeding
7. Irregular menses
7. Other

(Specify)

[SKIP TO 501]

Q. 419

What is the main reason that you are not currently using any family planning method to avoid or postpone pregnancy?

وہ کون سی اہم وجہ ہے۔ کہ آج کل آپ خاندانی منصوبہ بندی کا کوئی طریقہ استعمال نہیں کر رہے ہیں؟

01. Want more sons
02. Want more daughters
03. Want more children
04. Currently pregnant
05. Side effects of contraceptives
06. Contraceptive method of choice is not available
07. Able to naturally space children
08. Methods are expensive
09. No method is suitable
10. Other _____
(specify)

Q. 420

Would you use a contraceptive method in future?

کیا آپ آئندہ خاندانی منصوبہ بندی کا کوئی طریقہ استعمال کریں گی؟

1. Yes
2. No

SKIP TO 423

Q. 421

What is the main reason of not using a method?

خاندانی منصوبہ بندی کا کوئی طریقہ استعمال نہ کرنے کی بڑی وجہ کیا ہے؟

1. It is against religion
2. It is immoral
3. It is unnatural
4. Fatalistic
5. Want more children
6. Methods are expensive
7. Fear of side effects
8. Hard to get methods
9. Methods are inconvenient
10. Health concern
11. Infrequent sex
12. Other _____

(Specify)

13. Husband
14. Mother-in-law opposes
15. Other people oppose

[SKIP TO 423]

Q. 422

In your opinion what is his / her / their objection regarding family planning?

آپ کے خیال میں انہیں خاندانی منصوبہ بندی پر کیا اعتراض ہے؟

1. It is against religion
2. It is immoral
3. It is unnatural
4. Other reason

(Specify)

Q. 423

Does FWW pay home visits to keep in touch with you for motivation or advising you to restart contraception in future when needed?

کیا (فلاحی مرکز کی) FWW خاندانی منصوبہ بندی کی ترغیب کے لیے آپ سے رابطہ رکھتی ہے۔
یا پھر ضرورت پڑنے پر مانع حمل طریقے دوبارہ شروع کرنے کا کہتی ہے؟

1. Yes
2. No

SECTION V

QUALITY OF CARE AND SERVICES

CHECK IF RESPONDENT EVER VISITED THE FWC,
ASK NEXT QUESTION OTHERWISE END INTERVIEW.

Q. 501

In your opinion, is the location of FWC is suitable?

آپ کے خیال میں فلاحی مرکز کا (موجودہ) محل وقوع مناسب ہے؟

1. Yes
2. No

Q. 502

Do you feel that staff of FWC is friendly?

کیا آپ محسوس کرتی ہیں کہ فلاحی مرکز کے عملہ کا رویہ دوستانہ ہے؟

1. Yes
2. No

Q. 503

Are you satisfied with the following services for family planning at FWC?

کیا آپ فلاحی مرکز کی مندرجہ ذیل خدمات سے مطمئن ہیں؟

1. Family Planning information and education

خاندانی منصوبہ بندی کے متعلق معلومات اور تعلیم

1. Yes 2. No

2. Provision of contraceptive supplies

خاندانی منصوبہ بندی کے طریقے ہتھیانا

1. Yes 2. No

3. Follow up care at the centre

1. Yes 2. No (فلاحی مرکز پر دوبارہ آنے پر دیکھ بھال)

4. Home visit 1. Yes 2. NO

(گھر پر ملاقات کرنا)

Q. 504

Are you satisfied with the following services regarding mother care and child care at FWC?

کیا آپ فلاحی مرکز میں ماں اور بچوں کی دیکھ بھال کے سلسلے میں خدمات سے مطمئن ہیں؟

1. Health Education 1. Yes 2. No

صحت کے متعلق تعلیم

2. Antenatal care 1. Yes 2. No

حمل کے دوران ماں کی دیکھ بھال

3. N.A.

3. Domiciliary delivery service 1. Yes 2. No

خاتون کے گھر جا کر کیس (زیچگی) کرنا

3. N.A.

4. Post natal care 1. Yes 2. No

بچے کی پیدائش کے بعد ماں کی دیکھ بھال

3. N.A.

5. Child Care 1. Yes 2. No

بچے کی دیکھ بھال

Q. 505

In your opinion, what are the shortcomings in the FWC?

آپ کے خیال میں فلاحی مرکز میں کیا خامیاں ہیں؟

Shortcomings

1. Yes 2. No

Q. 506

What would you suggest to improve the working of the centre?

آپ فلاحی مرکز کی کارکردگی بہتر بنانے کے لیے کیا مشورہ دیں گی؟

Suggestions

1. Yes 2. No

Time:

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INTERVIEWER'S OBSERVATIONS

1. Yes

2. No



Interviewer: _____
(Signature)

Supervisor: _____
(Signature)

