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Subject Foreign Trip Report (AID/RSSA): Guatemala, July 26-30, 1983; Maternal-Child Health/Family Planning Survey (MCH/FP)

To William H. Foege, M.D.
Director, Centers for Disease Control
Through: Dennis D. Tolsma
Acting Director, CHPE DOT**SUMMARY**

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SUMMARY

At the request of USAID/Guatemala, Leo Morris and Mark Oberle of the Program Evaluation Branch, Division of Reproductive Health, provided assistance to APROFAM, the IPPF affiliate in Guatemala, in completing technical and administrative tasks necessary for the planning of the 1983 Maternal-Child Health/Family Planning Survey prior to the initiation of training and field work in September. These tasks included the second stage of sample selection in which household clusters were randomly selected on census sector maps provided by the Department of Census, a review of field work plans, a review of the final draft of the interviewer's manual, and local arrangements for data processing.

Once localities were selected during the second stage of the sampling process, an estimate could be made of how many questionnaires would be needed in each of the five Indian dialects in addition to Spanish language questionnaires. Spanish language interviewing is programed for 8 weeks immediately following training scheduled to begin on September 16, 1983. Separate bilingual interviewers will be trained for each Indian language group, and each group will require from 1 to 4 weeks of interviewing. Thus, Spanish language interviewing, with the exception of some revisits, should conclude between November 19 and 26, with Indian language interviewing concluding the first or second week of January, with a 2-week Christmas Holiday break. CDC will provide assistance to APROFAM during the interviewer training and first week of field work beginning September 16. CDC consultants will also be made available for the initiation of coding in November.

I. PLACES, DATES, AND PURPOSE OF TRAVEL

Guatemala, July 26-30, 1983, at the request of USAID/Guatemala, to provide assistance to the Asociacion Pro-Bienestar de la Familia de Guatemala (APROFAM), in completing technical and administrative tasks necessary for the planning of the 1983 MCH/FP survey prior to initiating training and field work in September. These tasks included the second stage of sample selection in which household clusters were randomly selected on the census sector maps provided by the Department of the Census, a review of field work plans, a review of the final draft of the interviewers manual, and local arrangements for data processing.

This consultation was provided by Leo Morris, Ph.D., M.P.H., and Mark W. Oberle, M.D., M.P.H., and the travel was in accordance with the Resource Support Services Agreement (RSSA) between the Office of Population, AID, and DRH/CHPE/CDC.

II. PRINCIPAL CONTACTS

A. USAID/Guatemala

1. Mr. Paul Cohen, Chief, Division of Health, Population, and Nutrition (DHPN)
2. Mr. Clifford Belcher, Health and Population Officer, DHPN

B. Asociacion Pro-Bienestar de la Familia (APROFAM)

1. Dr. Roberto Santiso, Executive Director
2. Lic. Antonieta Pineda, Chief, Department of Studies and Evaluation (DSE)
3. Ms. Sandra Guerra, DSE, and Field Coordinator, 1983 MCH/FP Survey

C. Other

1. Mr. Bruce Newman, Chief, Computer Center, Instituto de Nutricion de Centro America y Panama (INCAP)

III. MATERNAL-CHILD HEALTH/FAMILY PLANNING SURVEY

A. Field Work Plans

In previous discussions with Mr. Belcher, Dr. Santiso, and Lic. Pineda, it was decided that the survey will begin in mid-September 1983. Interviewer training will be conducted during the week of September 19, with field work beginning the following week (see Monteith Guatemala Trip Report dated June 21, 1983). It was also agreed that during the last week of July, Leo Morris and Mark Oberle would travel to Guatemala to review the draft interviewer's manual and to assist in the selection of the second stage sample.

Census sector maps were available for the 195 sectors selected in the first stage of the two-stage sampling procedure (75 in the Department of Guatemala and 120 in the Interior). Census sectors were selected with probability proportional to the number of households in each sector. Each sector selected had a range of 71-191 households, and clusters of 20 and 25 households were

randomly selected in the Department of Guatemala and the Interior, respectively. Two persons from the APROFAM Department of Evaluation were trained in the selection procedure.

Once households were selected, localities could be defined and an estimate made of how many questionnaires would be needed in each of five Indian dialects. It was also possible to determine which sectors could not be visited due to security considerations. It was previously thought that there were areas in these departments where interviews could not be conducted. With improvements in the security situation, this has been reduced to two departments (Huehuetenango and Quiche), and it appears that 14 of the 120 sectors in the Interior cannot be visited. However, by November when teams will be working in these two departments, the number of problem sectors may be reduced to 10. The fact that all 10-14 sectors are in Indian areas will be compensated somewhat by increasing the cluster size from 25 to 30 households in Indian areas. However, for comparison purposes between 1978 and 1983, the same areas will have to be deleted from the 1978 survey..

The number of sectors by language group is as follows:

<u>Language</u>	<u>No. of Sectors</u>
Spanish (Dept. of Guatemala)	75
Spanish (Interior)	67
Quiche	19-23*
Mam	11-15*
Keckchi	8
Cachiquel	7-9**
Pocomchi	0-2**

*Four sectors in San Marcos have to be checked out to see if they are Quiche or Mam areas.

**Two sectors in Baja Verapaz have to be checked out to see if they are Cachiquel or Pocomchi areas.

Spanish language questionnaires have been printed, and two of the five Indian dialect questionnaires have been completed (Quiche and Pocomchi). The translation of the other three Indian dialect questionnaires is currently in progress. Now that the second stage sampling has been completed and language of local areas in the sample ascertained, APROFAM knows how many questionnaires need to be printed in each language.

Spanish language interviewing is programmed for 8 weeks immediately following training. Separate bilingual interviewers will be trained for each language group, and each group will require from 1 to 4 weeks of interviewing. Thus, Spanish language interviewing, with the exception of some revisits, should conclude between November 19 and 26, with Indian language interviewing concluding during the first or second week of January, with a 2-week Christmas holiday break.

A final draft of the interviewer's manual was reviewed and will be completed by APROFAM by the end of August. Ms. Sandra Guerra, of the Department of Evaluation, has been named the field coordinator for the survey. Ms. Guerra was a supervisor in the 1978 MCH/FP survey and has since worked on several other surveys conducted by APROFAM. She also participated in the map work during the second stage selection of household clusters.

The revised budget worked out by Richard S. Monteith with APROFAM in June was retained (\$56,786). However, additional discussions were held at INCAP to determine costs for data processing (see next section).

B. Data Processing

Coding of questionnaires will be done at APROFAM and data processing to produce a clean tape at INCAP. We met with Bruce Newman of INCAP to discuss the following cost estimates for data processing:

Data entry and verification	\$ 4,500
Edit and data correction	2,000
Marginals	500
Variable costs	<u>1,000</u>
	\$ 8,000

These costs are reasonable, and USAID/Guatemala has funds available to cover this data processing phase. Our understanding is that the funds will be added to the APROFAM grant, and they will administer the payment to INCAP. Following the availability of a clean tape (unlabeled 9 track 1600 BPI tape in EBSDIC or ASCII), tabulations will be produced at CDC, and an APROFAM counterpart will travel to CDC to assist in the analysis of data and write the survey report.

INCAP has an HP 3000 computer (1024K), and their software library includes BMD, SPSS, and Mini-Tab but not SAS. We will send our SAS editing program so that they can adapt it to their editing software. We should send the file on tape containing SAS control statements along with the LRECL, BLKSIZE, and RECFM=FB. It should be a 9 track 1600 BPI tape.

Data processing will start before the end of field work. APROFAM should begin coding in November and deliver 1,500 coded forms to INCAP by December 1. Data entry and verification can be done by Christmas break, and data correction begins during the first week of January. Following the first group of 1,500 questionnaires, the coded questionnaires can be sent to INCAP in batches of 500, and all coding should be complete by February 15, 1984. A clean tape is expected between March 15 and April 1, 1984.

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IV. TECHNICAL ASSISTANCE FOLLOWUP

Dr. Mark Oberle and Mr. Richard Monteith will assist APROFAM during the interviewer training and the first week of field work. In November, a CDC consultant will be made available for the initiation of coding and a review of field work progress. In January, when data correction begins at INCAP, a CDC consultant will also be available to work with APROFAM and INCAP counterparts.



Leo Morris, Ph.D., M.P.H.



Mark W. Oberle, M.D., M.P.H.