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EVALUATION OF THE
VOLUNTARY
STERILIZATION
PROGRAM

*REPORT FOR THE QUARTER
APRIL-JUNE 1987*



M.A. QUASEM & CO.
7/16 LALMATA, BLOCK-B DHAKA-1207
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Evaluation of the Voluntary Sterilization Program
A Summary of findings from the second quarter of 1987,
(April - June) report.

1. Estimated proportion of clients actually sterilized:
TUB: 97.8 percent
VAS: 83.6 percent

2. Estimated average amount paid to clients actually sterilized:
TUB: mean Tk. 174.69
VAS: mean Tk. 173.75

3. Estimated proportion of actually sterilized clients having USAID-approved informed consent forms signed/thumb-impressed:
TUB: 99.8 percent
VAS: 100.0 percent

4. Proportion of clients sterilized two or more times:
TUB: 0.1 percent
VAS: 0.4 percent

5. Mean age of clients:
TUB: 29.3 years
VAS: 41.6 years

6. Proportion of clients under 20 years old:
TUB: 0.3 percent
VAS: NIL

7. Proportion of clients over 49 years old
TUB: 0.1 percent
VAS: 19.1 percent

8. Proportion of Vasectomy clients' wives who are over 49 years of age:
0.7 percent

Note: Adjusted Sample Size: TUB - 941 clients
VAS - 654 clients
Sample spots: 50 - Upazilas.

9. Mean number of living children:

TUB: 3.5

VAS: 3.7

10. Proportion of clients with no children at the time of the Survey

TUB: 0.1 percent

VAS: 0.5 percent

11. Whether clients were promised or actually given anything other than the approved VSC payment and surgical garment for undergoing sterilization:

Promised: NIL

Actually given: NIL

12. Percentage of actually sterilized clients who know before the sterilization operation that they could not have any more children as a result of the operation:

TUB: 100 percent

VAS: 100 percent

13. Percent of actually sterilized clients by the number of months they had seriously thought about having the sterilization operation before undergoing it:

<u>Period</u>	<u>TUB</u>	<u>VAS</u>	<u>Total</u>
1-7 days	5.2	7.0	5.9
8-15 days	2.4	4.8	3.4
16-29 days	1.2	0.7	1.0
1-2 months	19.4	13.4	17.1
2-4 months	9.4	11.8	10.3
4-6 months	11.4	25.0	16.7
6-12 months	28.8	22.6	26.3
12 months +	22.0	14.0	18.9

14. Percent of actually sterilized clients who had discussed sterilization with someone who had the operation prior to undergoing it themselves:

	<u>TUB</u>	<u>VAS</u>	<u>Total</u>
Discussed	84.1	74.3	80.1
Did not discuss	15.9	25.7	19.9

15. Percent of actually sterilized clients who suggested or would suggest sterilization to others:

	<u>TUB</u>	<u>VAS</u>	<u>Total</u>
Gave suggestion	75.3	53.7	66.9
Would suggest in future	21.3	40.0	28.6
Would not suggest in future	3.4	5.8	4.3

16. Percent of actual sterilized clients who satisfied with the procedure.

	<u>TUB</u>	<u>VAS</u>	<u>TOTAL</u>
Satisfied	98.2	96.0	97.3
Not satisfied	1.8	3.6	2.5
Not stated	-	0.4	0.2

17. Estimated of under reporting over reporting of total performance in the MIS monthly report:

TUB: Underreporting 4 cases
 VAS: Overreporting 1581 cases

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DHAKA-1207, BANGLADESH

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ABBREVIATIONS

BDG	:	Bangladesh Government
BAVS	:	Bangladesh Association for Voluntary Sterilization
CHCP	:	Community Health Care Project
DFPO	:	District Family Planning Office
FP	:	Family Planning
FWA	:	Family Welfare Assistant
FPO	:	Family Planning Officer
FPAB	:	Family Planning Association of Bangladesh
MIS	:	Management Information System
MMPR	:	MIS Monthly Performance Report
MMCP	:	MIS Monthly Computer Printout
MSC	:	Metropolitan Satellite Clinic
MFC	:	Mohammadpur Fertility Clinic
NGO	:	Non-Government Organisation
USAID	:	United States Agency for International Development
UFPO	:	Upazila Family Planning Office
VS	:	Voluntary Sterilization

Chapter 1

INTRODUCTION

1.1. Background information:

Under a grant agreement signed between the USAID and the Government of Bangladesh (BDG), the USAID provides assistance to BDG family planning program. As per provisions of a protocol under the said agreement, the USAID reimburses the Government of Bangladesh the selected costs of the Voluntary Sterilization (VS) Program. These costs include fees paid to the service providers (physicians and clinic staff) and fieldworkers and payments made to the clients for food and for transportation to and from the clinic, and wage-loss compensation. The USAID also reimburses the costs of sarees and lungis (surgical apparel) given to the clients before the sterilization operation.

The following table (Table 1) gives the USAID-approved reimbursement rates for female sterilization (tubectomy) and male sterilization (vasectomy).

Table 1: USAID-reimbursed sterilization costs by
type of operation

<u>Selected costs</u>	<u>Tubectomy (Taka)</u>	<u>Vasectomy (Taka)</u>
Physician fees	20.00	20.00
Clinic staff	15.00	12.00
Helper fees ¹	25.00	25.00
Food, transportation, wage-loss compensation	175.00	175.00
Surgical apparel	To be based on cost, not to exceed current retail market value	

¹"Helper" payment is Tk.45/- for both BDG and NGO programs; however, USAID reimburses the full amount (Tk.45/-) for NGOs, but only reimburses Tk.25/- for the BDG program.

It is the accepted principle for both the USAID and the Government of Bangladesh that the client undergoing sterilization operation does so voluntarily, being fully informed of the consequences and the risks of the operation. In order to ensure the voluntary nature of the sterilization operation, it has been made a condition that the sterilization client will record his/her consent in a consent form. A USAID-approved informed consent form has therefore to be filled in prior to the operation. The form will be signed/thumb impressed by the client, the physician, and the fieldworker/helper.

The approved costs of the VS program are reimbursed as per provisions of the protocol on the basis of sterilization performance statistics provided by the Management Information Systems (MIS) Unit of the Ministry of Health and Family Planning. These statistics are contained in the "MIS Monthly Performance Report" which is usually issued within four weeks after the end of the month. These statistics include the national monthly performance of both the Bangladesh Government (BDG) and the Non-Government Organizations (NGOs) engaged in sterilization activities.

1.2. Evaluation of the VS program:

The protocol also provides for an independent quarterly evaluation of the VS program. Accordingly, M/s. M.A. Quasem and Co., entered into an agreement with the USAID, Dhaka, to conduct eight quarterly evaluations of the VS program beginning from the January-March 1985 quarter. The contract period however has extended for another two quarters. The present report is the evaluation for the April-June 1987 quarter of the VS program of both BDG and NGO done through a nationally representative sample survey. Thus, in this report, the term 'reference quarter' means the April-June 1987 evaluation quarter.

The report has been compiled in five chapters including the present one. The remaining chapters are as follows:

Chapter	2	:	Methodology
Chapter	3	:	Results of field survey
Chapter	4	:	Reporting variations
Chapter	5	:	Findings of the evaluation

In addition, three sets of tables also prepared separately for submission to the USAID as per terms of the contract. The first set of tables comprises the findings of the evaluation of the VS program of all NGOs including the BAVS clinics functioning in the sample upazilas during the reference quarter, the second set of tables comprises the findings obtained from the BAVS clinics only, and the third set of tables comprises the findings obtained from the BDG clinics only.

1.3. Objectives of the evaluation:

The specific objectives of the evaluation were as follows:

- a. to estimate the number of clients actually sterilized in the reference quarter;
- b. to estimate the average rates paid to the actually sterilized clients for wage-loss compensation, food and transport costs; to assess whether there is any consistent and significant pattern of underpayments or overpayments for these client reimbursements;
- c. to estimate the proportion of clients who did not receive sarees and lungis;
- d. to estimate the average rates paid to the physicians, the clinic staff, and the fieldworkers/helpers as compensation for their services; to assess whether there is any consistent and significant pattern of underpayments or overpayments of these fees; and to estimate the proportion of service providers and fieldworkers/helpers who received the specified payment;

- e. to estimate the proportion of the sterilized clients who did not sign or put thumb impressions on the USAID-approved informed consent forms;
- f. to estimate the discrepancy between the BDG and the NGO performance as reported by the upazila (thana) level BDG officials and the NGOs and what is reported as BDG and NGO performances by the Deputy Director at the district level and by the MIS at the national level;
- g. to ensure that clients are not being promised or actually given anything other than the approved VSC payments and surgical apparel; and
- h. to collect information on client's knowledge of sterilization, the sterilization decision-making process, and the extent of client satisfaction with the sterilization procedure; and the socio-economic and demographic characteristics of the sterilized clients.

Chapter 2

METHODOLOGY

2.1. Sample for the evaluation:

The sample for the evaluation was drawn in two stages. The first stage sampling comprised selection of the upazila sample and the second stage the client sample. In addition, a sub-sample of service providers/helpers was drawn from the client sample. The selection procedures of service providers/helpers sub-sample are discussed in section 2.2.

2.1.1. Upazila sample:

The upazila sample in the first stage of sampling was drawn to cover 50 upazilas out of 477 reported family planning upazilas in the country. The MIS monthly computer printout for the January-March 1987 quarter was used as the sample frame for the selection of the upazila sample. On the basis of the MIS reports, all the upazilas were categorised either as upazilas having only BDG clinics or those having at least one NGO clinic. The former was called "BDG stratum" and the latter "NGO stratum". Upazilas with both BDG and NGO clinics were included in both the strata, and if selected in the "BDG stratum", the upazila was considered a BDG upazila while its selection in the "NGO stratum" would render it an NGO upazila. Accordingly 36 upazilas were selected from BDG stratum and 12 upazilas from NGO stratum. But 4 BDG selected upazilas could not be covered because of flood conditions prevailing there. The upazilas were: Naogaon Sadar, Shahghata upazila of Gaibandha district and Bhuapur and Shakhipur upazilas of Tangail district.

The upazilas were selected from each stratum using simple random sampling techniques. In this procedure, low performing or zero performing upazilas also had chances to be included in the sample. To overcome this problem, the sample selection and substitution procedure were followed for each stratum in the following manner: for the BDG stratum, a total sample of 38 upazilas were selected and a reserve list of upazilas was prepared from the MIS reported upazilas by a simple random sampling technique. The list of the selected upazilas was prepared according to the selection order. These 38 upazilas were selected for the field work. If during the field work, the performance of an upazila was found to be 39 clients or fewer, that upazila was given up and the next upazila, upazila number 39, was substituted for it. If a second low performing upazila was found to have been selected, it was replaced by yet another upazila drawn up from the reserve list, upazila number 40, and so forth. For the NGO stratum, a total of 12 upazilas were selected by simple random sampling techniques for the field work. A list of reserve upazilas were also prepared according to the selection order. If the performance of all the NGOs in the upazila was less than the required 40 clients, the upazila would be replaced by another from the reserve upazilas; a second low/zero performance upazila would thus be replaced by another upazila listed serially, and so forth.

2.1.2. Client sample:

At the second stage of the sample, the client sample was drawn from the selected upazilas. All clients reported sterilized during the quarter were listed by their recorded addresses. The clients were categorised into three groups -- within upazila cases, contiguous upazila cases and non-contiguous upazila cases. Contiguous upazila cases were those clients whose recorded address fell outside the selected upazila (i.e. in which the operation was performed) but within any of the

upazilas contiguous to the selected upazila. These clients might come from any of the neighbouring upazilas of the same district or of other district(s) as long as their upazila bordered that in which the operation was performed. The non-contiguous upazilas cases consisted of clients whose recorded addresses fell neither in the selected upazila nor in any of the contiguous upazilas. Clients falling in this category were not taken into consideration for sampling as they were considered too remote to be interviewed within the stipulated time frame. The remaining clients were divided into a number of equal-sized (40 clients) clusters of sterilization cases. Thus the number of clusters was not the same for all the upazilas, as it was dependent on the performance which varied by upazila. One cluster was randomly selected from among those constructed for each selected upazila. A cluster usually covered an area equivalent to two rural unions. This procedure was applied for both the strata.

All the analyses and tables were prepared from the aggregated BDG and NGO data to provide the national estimates. Prior to the analyses, the client sample was adjusted with the selected upazilas by giving appropriate weights to keep the sampling fraction uniform within the stratum. In addition, to provide the national estimates, proper weights were used between the strata on the basis of the actual BDG and NGO national performances in the reference quarter. The weighting was done in the following manner:

Intra-stratum weighting (BDG or NGO): The sampling weight for the clients was derived on the basis of the actual performance recorded in the selected upazila. The client sample was then adjusted on the basis of the sampling weight for the stratum. The adjusted factors are given below:

	<u>BDG stratum</u>	<u>NGO stratum</u>
a. Quarterly performance in sampled upazilas (obtained from selected upazilas on completion of the quarter)	$Y_{BDG(1-34)}$	$Y_{NGO(1-12)}$
b. Sample size (predetermined) ¹	1360	480
c. Weight for each sampled upazila	$\frac{40}{Y_{BDG}}$	$\frac{40}{Y_{NGO}}$
d. Stratum weight	$\frac{1360}{Y_{BDG(1-34)}}$	$\frac{480}{Y_{NGO(1-12)}}$
e. Adjusted factor for individual upazila sample	$\frac{1360}{Y_{BDG(1-34)}}$	$\frac{480}{Y_{NGO(1-12)}}$
	$\cdot \frac{40}{Y_{BDG}}$	$\cdot \frac{40}{Y_{NGO}}$

The names of the selected upazilas by stratum and the adjusted factors against each upazila for the reference quarter are shown in Table 2.

¹Cluster size for each selected upazilas was 40 clients.

Table 2: Names of the selected upazilas by stratum and adjusted factors

BDG stratum		NGO stratum	
District/upazila	Adjusted factor	District/upazila	Adjusted factor
<u>Dinajpur</u>		<u>Rangpur</u>	
Khansama	0.38458816	Sadar	1.361827544
Nawabgonj	1.15977367		
		<u>Dinajpur</u>	
<u>Thakurgaon</u>		Sadar	0.930729539
Pirgonj	0.54683629		
Baliadangi	0.78720389	<u>Rajshahi</u>	
Horipur	0.78720389	Sadar	1.450257904
Sadar	2.1032165		
		<u>Tangail</u>	
<u>Panchagarh</u>		Sadar	0.829034625
Boda	0.98550716		
Debigonj	1.37610451	<u>Kushtia</u>	
		Sadar	0.831245384
<u>Nilphamari</u>			
Domar	0.46871682	<u>Jessore</u>	
Jaldhaka	1.12972772	Sadar	1.129697849
Kishoregonj	1.79674781		
		<u>Mymensingh</u>	
<u>Rangpur</u>		Sadar	1.673544563
Pirgacha	0.82926822		
Pirgonj	0.6610109	<u>Barisal</u>	
Badargonj	0.73312118	Sadar	1.010316863
Mithapukur	0.69105685		
Sadar	1.03958987	<u>Faridpur</u>	
		Sadar	0.457627113
<u>Kurigram</u>		<u>Patuakhali</u>	
Ulipur	0.79922227	Sadar	0.758290337
Fulbari	0.82926822		
		<u>Sylhet</u>	
<u>Gaibandha</u>		Sadar	0.450994836
Gobindagonj	0.52279953		
		<u>Chittagong</u>	
<u>Bogra</u>		Sadar	1.116433295
Adamdighi	0.75715794		
Sonatola	0.28844112		
Dhunot	0.88335093		
Sherpur	1.18381043		
Shibgonj	0.31848707		

Table 2 contd.

BDG stratum		NGO stratum	
District/upazila	Adjusted factor	District/upazila	Adjusted factor
<u>Naogaon</u>			
Mohadebpur	0.55284548		
<u>Jhenaidah</u>			
Sailkupa	0.97348878		
<u>Khulna</u>			
Fultola	1.82078457		
<u>Barguna</u>			
Amtoli	2.36161167		
Sadar	3.05266852		
<u>Tangail</u>			
Gopalpur	0.89536931		
Modhupur	0.61293738		
<u>Mymensingh</u>			
Gouripur	1.24390233		
Iswargonj	0.61293738		
Haluaghat	0.81124065		
Stratum weight	0.006009190		0.002210759

Inter-strata weighting (BDG and NGO): To provide the national estimates, the weight was derived from the actual national BDG and NGO performances of the reference quarter, based on the MIS monthly report. The weight was applied to maintain the uniform sampling fraction between the strata at the national level. The weighting factors are given below:

	<u>BDG stratum</u>	<u>NGO stratum</u>
a. Total national performance in the reference quarter (from MIS monthly report)	X_{BDG}	X_{NGO}
b. Sample size (predetermined)	1360	480
c. Percentage of national performance sampled	$\frac{1360}{X_{BDG}}$	$\frac{480}{X_{NGO}}$
d. Stratum adjusted factor	-	$\frac{1360}{X_{BDG}} \cdot \frac{480}{X_{NGO}} = H$
e. Adjusted (weighted) sample size to estimate the national performance	$1360 + (H) \times (480)$	

The design weight for the NGO samples was 1.7340, while that for the BDG sample was unity. Thus, the size of the weighted national sample was 2192 clients (Table 3).

Table 3: Weighted sample size at the national level

Stratum	National performance in the reference quarter	Actual sample size	Weights	Weighted sample
BDG	31,087	1360	1.0000	1360
NGO	19,025	480	1.7340	832
Total	50,112	2000	-	2192

2.2. Service provider (physician and clinic staff)/ helper sample:

The service provider/helper sample was drawn in the following manner. A sub-sample of 25 percent of the clients was drawn randomly from the selected client sample for each of the selected upazilas. All the recorded service providers/helpers of the clients in the sub-sample were taken into service provider/helper sample. Since it is likely that the service providers and the helpers might be common for a number of clients, the size of the service provider/helper sample would be smaller than the size of actual sub-sample drawn for this purpose.

The weighted sample size of the service provider/helper by upazila for the evaluation quarter, April-June 1987 are shown in Table 4.

Table 4: Names of the selected upazilas by stratum and the number of physicians, clinic staff and helpers

District/ upazila	BDG stratum			District/ upazila	NGO stratum		
	Weighted sample				Weighted sample		
	Physician	Clinic staff	Helper		Physician	Clinic staff	Helper
<u>Dinajpur</u>				<u>Rangpur</u>			
Khansama	2	5	10	Sadar	2	2	8
Nawabgonj	5	2	6				
				<u>Dinajpur</u>			
<u>Thakurgaon</u>				Sadar	2	3	8
Pirgonj	3	4	7				
Baliadangi	3	2	9	<u>Rajshahi</u>			
Horipur	2	3	5	Sadar	3	4	7
Sadar	3	3	10				
				<u>Tangail</u>			
<u>Panchagarh</u>				Sadar	4	4	9
Boġa	4	3	6				
Debigonj	4	4	8	<u>Kushtia</u>			
				Sadar	3	3	10
<u>Nilphamari</u>							
Domar	3	3	6	<u>Jessore</u>			
Jaldhaka	1	2	7	Sadar	2	3	9
Kishoregonj	3	1	9				
				<u>Mymensingh</u>			
<u>Rangpur</u>				Sadar	4	3	9
Pirgacha	3	3	7				
Pirgonj	3	6	8	<u>Barisal</u>			
Badargonj	2	3	10	Sadar	3	6	10
Mithapukur	3	2	10				
Sadar	4	4	9	<u>Faridpur</u>			
				Sadar	2	4	9
<u>Kurigram</u>							
Ulipur	1	2	10	<u>Sylhet</u>			
Fulbari	2	1	5	Sadar	2	3	7
<u>Gaibandha</u>				<u>Patuakhali</u>			
Gobindagonj	3	5	10	Sadar	2	3	8
<u>Bogra</u>				<u>Chittagong</u>			
Adamdighi	3	3	3	Sadar	5	4	9
Sonatala	2	4	9				
Dhunot	4	1	6				
Sherpur	4	3	7				
Shibgonj	3	3	9				

Table 4 contd.

District/ upazila	BDG stratum			Helper	NGO stratum			
	Physician	Clinic staff	Weighted sample		District/ upazila	Physician	Clinic staff	Weighted sample
<u>Naogaon</u> Mohadebpur	3	3		8				
<u>Jhenaidah</u> Saikupa	3	3		6				
<u>Khulna</u> Fultala	3	2		8				
<u>Baryuna</u> Amtoli	4	2		10				
Sadar	1	2		10				
<u>Tangail</u> Gopalpur	2	5		9				
Modhupur	4	2		9				
<u>Mymensingh</u> Gouripur	4	2		7				
Iswargonj	5	4		8				
Haluaghat	3	5		8				
Total	102	102		269		34	42	100

2.3. Field activities:

To meet the contract objectives, personal interviews with the sterilized clients, service providers, and fieldworkers (helpers) were required, as were the review of office records in upazila level family planning offices and collection of performance reports. These activities could be categorised under five headings: (a) field survey of the clients, (b) field survey of the service providers, (c) field survey of the fieldworkers (helpers), (d) review of office records, and (e) collection of the sterilization performance reports.

The field survey of the clients was made to check by means of personal interviews with the recorded sterilized clients whether they were actually sterilized; whether they received money for food, transportation, and wage-loss compensation and if received, what were the amounts; and whether they received the surgical apparel.

The field survey of service providers was made to check by means of personal interviews with the recorded service providers whether they actually provided services to the selected clients and to determine whether they received the payments specified for their services. Interviews were also conducted with the recorded fieldworkers (helpers) to check whether they actually helped the clients for sterilization and to verify whether they received the specified helper fees.

The review of office records was done to find out whether the USAID-approved informed consent form was used for each sterilized client and whether the client recorded his/her consent by putting signature/thumb impression on the consent part of the consent form. The review of office records was also undertaken to find out the actual number of the recorded sterilized clients from the clinic register.

Certified copies of BDG and NGO performance reports filed by the upazila family planning office (UFPO) to the district, reports filed by the district level Deputy Director to the MIS Unit, MIS Monthly Computer Printout (MMCP) showing sterilization performance by districts and upazilas, and the MIS Monthly Performance Report (MMPR) were collected to ascertain whether there was any discrepancy among these data sources and also to ascertain whether there was any overreporting or underreporting in the MMPR.

2.4. Field work:

The field work for the April-June 1987 quarter was carried out during June and July 1987. Seven interviewing teams were deployed to collect the data from the field survey. Each interviewing team included 9 members -- one male supervisor, one female supervisor, three male interviewers, two female interviewers, one field assistant and one team leader. The members of the interviewing group were assigned the responsibility of interviewing the clients, the service providers and the helpers included in the sample, while the team leader was mainly responsible for (a) review of sterilization records and informed consent forms, (b) selection of client sample and service provider/helper sample in each upazila, and (c) collection of performance reports.

Two quality control teams were assigned to supervise the work of the interviewing teams. Each quality control team was composed of one male Quality Control Officer and one female Quality Control Officer. Senior professional staff of the firm also made a number of field visits to ensure the quality of data.

2.5. Data processing:

Data were processed manually in the following manner. First, the data from interviews were edited and verified by senior professional staff, then coded into code sheets. The code sheets on completion were verified by Quality Control Officers and senior professional staff. Tables were prepared manually by sorting of code sheets according to the tabulation plan.

Chapter 3

RESULTS OF FIELD SURVEY

The results of the field survey of the selected sterilized clients are presented in this chapter. The findings cover both the BDG and the NGO clients.

Each of the selected clients was interviewed with the help of structured interviewing schedules. The major purpose of the client interview was to determine whether the respondents who had been recorded as sterilized according to clinic records were actually operated upon for sterilization and if so whether other items of information shown in the clinic records were genuine. The items of information thus collected related to the clinic, date of operation, helpers payment, surgical apparel, and informed consent form. In addition, information was also collected on client's knowledge of sterilization, the sterilization decision making process, and the extent of client satisfaction with the sterilization procedure; and also collected information on some socio-economic and demographic characteristics of the sterilized clients.

To facilitate spontaneous responses, each of the client was asked some indirect questions. To begin with, s(he) was asked to name the clinic where s(he) had been sterilized, the date of sterilization, the name of the helpers, and other relevant facts. If her/his reported information did not correspond to the recorded information, s(he) was asked some leading questions to ascertain the correct position. For example, for clinic verification, questions were also asked for other items of information. If the respondent reported herself/himself as not sterilized, s(he) was told that her/his name had been recorded as a sterilized client in the clinic records on the recorded date. The client was considered to be not sterilized

if s(he) furnished facts to establish that the recorded information was not correct.

Information on informed consent forms was obtained from the clinic as well as from the interviewed clients. In view of the fact that (a) there must be USAID-approved informed consent forms in the clinics for each of the sterilized clients and (b) the clients might have mistaken signing or giving thumb impression on USAID-approved informed consent forms with signing some other forms or registers, the clinic records were considered to be the basis of analysis. In the relevant section on verification of informed consent forms two sets of findings have been presented; the first set comprising all the selected clients and the second comprising only the actually sterilized clients.

The results of verification of the surgical apparel, payments, receipts of unapproved items, verification of clients satisfaction/voluntarism and the helpers are presented on the basis of the actually sterilized clients.

3.1. Interviewing status:

The interviewers made resolute attempts to interview the cases included in the sample. If and when necessary several attempts were made by interviewers and also supervisors during their field work to interview individual cases. They first tried to locate the address of the cases by themselves or by asking the villagers. If the first attempt failed, assistance was sought from the local family planning field workers, ward members, and from helpers in locating the address of the cases. The interviewers noted down the reasons and documented evidence from the persons assisting for each of the unsuccessful attempts to locate the address and interview the selected cases. Among the

selected cases in the sample, 8.4 percent address could not be located in the field which included 2.5 percent of the tubectomy cases and 15.0 percent of the vasectomy cases (Table 5). The cases whose addresses could not be located consisted of three categories; 'address not found', 'incomplete address', and 'not attempted'. The 'address not found' group included both those cases who never lived at the address indicated and those whose listed address did not exist. The 'address not found' group comprised 1.7 percent of the tubectomy cases and 14.0 percent of the vasectomy cases.

Interviewers tried to conduct interview with all the address located cases under the direct supervision of the field supervisors. Table 5 shows that 80.6 percent of the sample tubectomy cases and 63.8 percent of the sample vasectomy cases could be successfully interviewed.

The cases under 'NOT INTERVIEWED' group are four categories; 'client has permanently left the address', 'client was only temporarily visiting the address', 'client not available at the time of interviewing', and 'client died after the quarter'. The 'client has permanently left the address' category had 4.3 percent of the tubectomy cases and 6.1 percent of the vasectomy cases; while the 'client was only temporarily visiting the address' category included 5.7 percent of the tubectomy cases and 2.0 percent of the vasectomy cases. Clients' undergone sterilization operation within the reference quarter but subsequently died constituted 0.3 percent of the vasectomy cases.

On the other hand, during the interview 80.6 percent of the sample tubectomy cases and 63.8 percent of the sample vasectomy cases reported that they had undergone sterilization operation in the recorded clinic and also within the reference quarter.

Table 5 : Percentage distribution of the selected clients
by results of clients' survey

Categories	Type of operation		
	Tubectomy	Vasectomy	All
A. INTERVIEWED	<u>81.1</u>	<u>66.2</u>	<u>74.1</u>
Sterilized within the reference quarter in the recorded clinic	80.6	63.8	72.8
Sterilized in the recorded clinic but before the reference quarter	0.3	1.4	0.8
Sterilized before the reference quarter in other than the recorded clinic	-	0.2	0.1
Never sterilized	0.1	0.4	0.2
Sterilized twice (1st operation before the quarter in other than the recorded clinic and 2nd operation within the quarter in the recorded clinic)	0.1	0.4	0.2
B. NOT INTERVIEWED	<u>16.4</u>	<u>18.8</u>	<u>17.5</u>
Clients not available	6.4	10.4	8.3
Client has permanently left the recorded address	4.3	6.1	5.1
Client was only temporarily visiting the recorded address	5.7	2.0	4.0
Client died after the refer- ence quarter	-	0.3	0.1
C. ADDRESS NOT LOCATED	<u>2.5</u>	<u>15.0</u>	<u>8.4</u>
Address does not exist/ not found	1.7	14.0	7.5
Incomplete address	-	0.2	0.1
Not attempted	0.8	0.8	0.8
Total	100.0	100.0	100.0
Weighted N	1167	1025	2192

3.2. Estimation of false cases:

The cases selected in the sample were found in twelve categories (Table 5). Among those the following categories of cases were considered false cases of sterilization as they were shown sterilized in the books and records of the selected clients for the reference quarter.

Categories	Type of operation ¹		
	Tubectomy	Vasectomy	All
Sterilized in the recorded clinic but before the reference quarter	0.3	1.4	0.8
Sterilized before the reference quarter in other than the recorded clinic	-	0.2	0.1
Never sterilized	0.1	0.4	0.2
Sterilized twice	0.1	0.4	0.2
Address does not exist/ not found	1.7	14.0	7.5
Total	2.2	16.4	8.8

¹ Figures in this table are percentages of the categories.

These categories of false cases constituted 2.2 percent for tubectomy and 16.4 percent for vasectomy. The name of the selected clinics where there were more than 10.0 percent false cases during the evaluation quarter (April-June 1987) are given below:

<u>Name of the selected clinic</u>	<u>Percentage of false cases</u>	
	<u>Tubectomy</u>	<u>Vasectomy</u>
Khansama headquarters clinic, Khansama, Dinajpur	15	20
Pirgonj Health Complex, Pirgonj, Thakurgaon	14	9
Kishoregonj Health Complex, Kishoregonj, Nilphamari	-	11
Pirgacha Health Complex, Pirgacha, Rangpur	11	13
Pirgonj Health Complex, Pirgonj, Rangpur	-	36
Badargonj Health Complex, Badargonj, Rangpur	17	18
Rangpur Headquarters Clinic, Rangpur	4	21
Gobindagonj Health Complex, Gobindagonj, Gaibandha	-	12
Dhunot Health Complex, Dhunot, Bogra	14	67
Fultala Health Complex, Fultala, Khulna	-	51
Modhupur Health Complex, Modhupur, Tangail	6	33
Iswargonj Health Complex, Iswargonj, Mymensingh	17	35
Haluaghat Health Complex, Haluaghat, Mymensingh	3	56
<u>Rangpur Sadar</u>		
Anjuman Ara Memorial Clinic	-	70
<u>Rajshahi Sadar</u>		
Mulsim Nari Kallyan Sangstha	-	82

<u>Name of the selected clinic</u>	<u>Percentage of false cases</u>	
	<u>Tubectomy</u>	<u>Vasectomy</u>
<u>Jessore Sadar</u>		
Family Planning Association of Bangladesh (FPAB)	9	10
<u>Barisal Sadar</u>		
FPAB	7	15
<u>Sylhet Sadar</u>		
FPAB	24	26

The subsequent sections deal only with those actually sterilized clients who were interviewed and found to have been sterilized in the recorded clinic and in the recorded time.

3.2.1. Verification of informed consent forms:

It is an accepted principle of both BDG and USAID that a USAID-approved informed consent form for each sterilization case must be properly filled in and maintained. Therefore, the field team checked whether a USAID-approved informed consent form had been filled in for each selected sterilized client. Secondly, the consent forms were examined to ensure that those were signed/thumb impressed by the clients. To verify the fact, information from each of the selected upazilas was collected.

Thus, the verification of informed consent forms was based on data collected by the Team Leaders from the office records of the selected upazilas. The information thus obtained is presented in two separate tables -- Table 6 and Table 7. In Table 6 all the selected clients are included but in Table 7 only the actually sterilized clients are covered. The first table gives an overall picture of the use of the USAID-approved informed consent forms. The purpose of the second table is to

see whether, for each of the actually sterilized clients, a USAID-approved informed consent form was properly maintained.

As can be seen from Table 6, the USAID-approved informed consent forms were maintained for all of the clients. The proportion of clients having the USAID-approved informed consent forms which were also signed/thumb impressed by the clients was 99.9 percent of all the selected clients and 99.9 percent of the actually sterilized clients. The USAID-approved informed consent forms not signed by clients constituted 0.2 percent of the tubectomy cases in both the category. The USAID does not reimburse the MOHFP for such cases.

3.2.2. Verification of surgical apparel:

Each interviewed actually sterilized client was asked questions to ascertain whether s(he) had received the surgical apparel for undergoing the sterilization operation. The surgical apparel for the tubectomy client is a saree and that for vasectomy client is a lungi.

Table 8 shows the percentage distribution of the actually sterilized clients by whether they were given the surgical apparel or not as well as the status of use of USAID-approved informed consent forms. It can be seen from the table that, overall, 100.0 percent of the tubectomy clients and 99.5 percent of the vasectomy clients reported receipt of the surgical apparel. When status of USAID-approved informed consent form was considered, 99.8 percent of the tubectomy clients and 99.5 percent of the vasectomy clients reported receipt of surgical apparel and had also signed the USAID-approved informed consent forms.

Table 6 : Percentage distribution of all the selected clients by type and status of informed consent forms

Status of informed consent form	Type of operation		All
	Tubectomy	Vasectomy	
<u>USAID-approved</u>			
Signed by clients	99.8	100.0	99.9
Not signed by clients	0.2	-	0.1
<u>Not USAID-approved</u>			
Signed by clients	-	-	-
Not signed by clients	-	-	-
Total	100.0	100.0	100.0
Weighted N	1167	1025	2192

Table 7 : Percentage distribution of the actually sterilized clients by type of informed consent forms and status of signing

Types of consent forms and status of signing	Categories of clients		
	Tubectomy	Vasectomy	All
<u>USAID-approved</u>			
Signed by clients	99.8	100.0	99.9
Not signed by clients	0.2	-	0.1
<u>Not USAID-approved</u>			
Signed by clients	-	-	-
Not signed by clients	-	-	-
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 8 : Percentage distribution of the actually sterilized clients by status of informed consent forms and status of receipt of surgical apparel

Status of informed consent form	Status of receipt of surgical apparel	Categories of clients		
		Tubectomy	Vasectomy	All
USAID-approved informed consent forms signed by client	Received	99.8	99.5	99.7
	Did not receive	-	0.5	0.2
Sub-total		99.8	100.0	99.2
Informed consent form not USAID-approved/ informed consent form USAID-approved but not signed by clients/no consent form	Received	0.2	-	0.1
	Did not receive	-	-	-
Sub-total		0.2	-	0.1
All	Received	100.0	99.5	99.8
	Did not receive	-	0.5	0.2
Total		100.0	100.0	100.0
Weighted N		941	654	1595

3.2.3. Verification of the helpers:

Relevant data were collected from two different sources: clients for "reported" information and clinic records for "recorded" information. An interviewed client reporting herself/himself as sterilized was asked whether (s)he knew the helper and if (s)he knew, (s)he was asked again to specify the category of the helper. This category means the official category of helpers according to the BDG¹.

The point of these questions is to help ensure that the person who renders services to sterilization clients is compensated for those services and that the person is part of a category who are officially entitled to the helper reimbursement payments. This is done by comparing the name of the "recorded" helpers with the name of the "reported" helpers. The name of the "helper of record" is collected and compared with information given by clients interviewed as to who helped them. Almost all clients who had a helper knew the helper's name. But some clients did not know (and should not be expected to know) which official category their helpers belonged to.

Table 9 and 10 show a comparison of recorded and reported helpers for tubectomy and vasectomy clients. For 86.4 percent of tubectomy clients the reported and recorded helper was the same and fell within the officially approved helper category. With the exception of the 0.4 percent who went to the clinic alone and the 0.5 percent who did not know their helpers, for the remainder of the cases, where there was a discrepancy between recorded and reported helper, it was over the helpers category/designation.

¹ Official BDG "helper" categories are shown in Appendix A.

Table 10: Percentage distribution of the actually sterilized vasectomy clients by recorded and reported helpers

Recorded helper	Reported helper									
	BDG fieldworker	BAVS salaried fieldworker	Other NGO fieldworker	BDG registered agent	BAVS registered agent	Other NGO registered agent	Registered Dai	Went alone	Does not know	All
BDG fieldworker	19.2	-	0.3	3.7	0.3	-	-	2.0	0.8	26.3
BAVS salaried fieldworker	-	3.7	-	0.7	-	-	-	-	1.3	5.7
Other NGO fieldworker	-	0.3	14.4	0.2	1.0	-	-	0.3	1.3	17.5
BDG registered agent	-	-	-	30.7	-	-	-	1.0	2.8	34.5
BAVS registered agent	-	-	-	0.2	-	-	-	-	-	0.2
Other NGO registered agent	-	-	-	-	6.6	-	-	2.2	1.8	10.6
Registered Dai	0.2	-	0.3	1.5	-	-	2.5	-	0.7	5.2
Total Weighted N = 654	19.4	4.0	15.0	37.0	7.9	-	2.5	5.5	8.7	100.0

Similarly, for 70.5 percent of the vasectomy clients the reported and recorded helper was the same and fell within the officially approved helper category. With the exception of the 5.5 percent who went to the clinic alone and the 8.7 percent who did not know their helpers, for the remainder of the cases where there was a discrepancy between recorded and reported helper, it was over the helpers' category/designation.

3.2.4. Payment verification:

The interviewed sterilized clients were asked questions about payments that they had received for undergoing sterilization operation. If the clients reported receiving less than the approved amount of Tk.175/- they were further asked questions to assess whether they were provided with any facility by the clinic. The term 'facility' includes provision of food to the client during his/her stay in the clinic or transport for travelling to and from the clinic or both.

Table 11 shows the percentage distribution of the actually sterilized tubectomy clients by amounts that they reported to have received. Of the tubectomy clients, 96.7 percent reported that they had received the approved amount of Tk.175/-. The remaining 3.3 percent clients reported receiving less than the approved amount. Since these clients reported receiving less than the approved amount they were asked further questions to ascertain whether they had received any facility or not. Of the 3.3 percent of the clients, 2.5 percentage points were accounted for by clients who reported receiving facility from the clinic while the remaining 0.8 percentage points were accounted

for by clients who reported that they were not provided with any facility, and therefore, those clients were found to have been paid less than the approved amount of Tk.175/-. No such clinic was found in which significantly less payment to clients was consistently made. We also did not find any clinic which paid or any client who received more than the approved amount of Tk.175/-.

The clients who reported receiving less than the approved amount but were provided with a facility by the clinic were considered to have received the full payment of the approved amount assuming that they were paid the balance amount after deducting the expenses. Under this assumption two estimates of the average client-payment have been calculated. The first estimate has been computed for all the actually sterilized clients irrespective of whether they had been provided with any facility or not. The second estimate of average amount has been calculated for all the actually sterilized clients, excluding those who had received less than the approved amount and who had reported receiving no facility from the clinic. Thus the average amount for the first category is Tk.173.95 and that for the second category is Tk.174.69.

Similarly, Table 12 shows the percentage distribution of the actually sterilized vasectomy clients by amounts that they reported to have received. Of the vasectomy clients, 95.7 percent reported that they had received the approved amount of Tk.175/-. The remaining 4.3 percent of the clients reported receiving less than the approved amount. Of the 4.3 percent of the clients, 1.6 percentage points were accounted for by clients who reported receiving a facility from the clinic

while the remaining 2.7 percentage points were accounted for by the clients who reported that they were not provided with any facility, and therefore, those clients were found to have been paid less than the approved amount of Tk.175/-. No such clinic was found in which significantly less payment to clients was consistently made. We also did not find any clinic which paid or any client who received more than the approved amount of Tk.175/-. Thus, the average amount received by all vasectomy clients were found to be Tk.172.75 and that for all clients excluding those who had reported receiving less than approved amount and also no facility, were found to be Tk.173.75.

3.2.5. Verification of unapproved items:

The interviewed sterilized clients were asked questions whether they had received any unapproved items apart from receiving saree/lungi and money for undergoing the sterilization operation. If the clients reported receiving any unapproved items, they were asked further questions about the person who gave away the mentioned items, where given and when given.

It can be seen from Table 13 that none of the actually sterilized clients were promised any "unapproved items" for undergoing the sterilization operation and no client reported receiving any "unapproved items" apart from saree/lungi or money.

Table 11: Percentage distribution of the actually sterilized tubectomy clients by amount reportedly received

Amount reportedly received in Taka	All clients	Status of facilities received	
		Received any facility	Received no facility
175.00	96.7	NA	NA
172.00	0.1	0.1	-
170.00	0.7	0.7	-
165.00	0.1	0.1	-
162.00	0.2	0.2	-
160.00	0.6	0.3	0.3
150.00	0.8	0.4	0.4
125.00	0.2	0.2	-
120.00	0.2	0.2	-
110.00	0.2	0.2	-
40.00	0.1	0.1	-
No payment	0.1	-	0.1
Total	100.0	2.5	0.8
Weighted N	941		

Reported average amount: Tk.173.95

Estimated average amount considering the 'received any facility' category received the approved amount: Tk.174.69

Note: NA in the table stands for not applicable cases.

Table 12 : Percentage distribution of the actually sterilized vasectomy clients by amount reportedly received

Amount reportedly received in Taka	All clients	Status of facilities received	
		Received any facility	Received no facility
175.00	95.7	NA	NA
170.00	0.7	-	0.7
160.00	0.5	0.3	0.2
155.00	0.2	-	0.2
150.00	0.5	0.3	0.2
130.00	0.3	0.2	0.1
125.00	0.3	-	0.3
124.00	0.2	0.2	-
120.00	0.2	0.2	-
100.00	0.7	-	0.7
75.00	0.2	0.2	-
70.00	0.2	-	0.2
50.00	0.1	-	0.1
40.00	0.2	0.2	-
Total	100.0	1.6	2.7
Weighted N	654		

Reported average amount: Tk.172.75

Estimated average amount considering the 'received any facility' category received the approved amount: Tk.173.75

Note: NA in the table stands for not applicable cases.

Table 13: Percentage distribution of the actually sterilized clients by status of promise for unapproved items

Status of promise for unapproved items	Number of cases promised for unapproved items		Number of cases received the promised items			
			Received		Did not receive	
	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.
Promised for unapproved items	-	-	-	-	-	-
Not promised for unapproved items	100.0	100.0	-	-	100.0	100.0
Total	100.0	100.0	-	-	100.0	100.0
Weighted N	941	654			941	654

3.2.6. Utilization of clients' compensation money:

Each of the sterilized clients were asked about how s(he) spent his/her compensation money for operation after receiving from the clinic. Number of questions were asked to each of the sterilized client. About 9.8 percent tubectomy and 17.1 percent vasectomy cases reported that they had no excess money after purchasing food at the clinic and transportation cost to and from the clinic. Rest of the cases reported that they had some unspent money after meeting food charge at the clinic and transportation cost to and from the clinic. The amount of unspent money were not collected. But a question was asked about how s(he) spent the unspent money. The responses were numerous as the question was open-ended. The possible responses were carefully categorised and are presented in Table 14. The majority of the clients (82.2 percent tubectomy and 76.0 percent vasectomy) reported that they had spent the excess money for purchasing food apart from what they spent in the clinic. The next majority of the sterilized clients reported that they had spent the excess money for purchasing the medicine. The other responses were varied and numerous, but in terms of percentage these categories were found to be negligible.

3.2.7. Impact of compensation payments on decision making:

To gain an idea whether the clients compensation payments had any direct impact on the sterilized clients at the time of their decision making, they were asked whether they would undergo sterilized operation if there were no compensation payments for sterilization. The possible responses to this question were categorised into three classes and were pre-coded. The categories were (i) "would have done it at that time", (ii) "would wait", and (iii) "never would have done". The findings are

shown in Table 15. It can be seen that 89.1 percent of the tubectomy clients and 78.3 percent of the vasectomy clients reported that they would have done the operation at that time, while 4.1 percent of the tubectomy clients and 11.6 percent of the vasectomy clients reported that they would wait. The remaining 6.8 percent of the tubectomy clients and 10.0 percent of the vasectomy clients reported that they would never have done the sterilization operation if there were no compensation payments.

3.2.8. Knowledge of family planning methods and sources
of supply, except sterilization:

Data were collected from each of the sterilized clients about their knowledge of other reversible family planning methods and the sources of supply. The purpose was to ascertain how far the sterilized clients were aware of reversible family planning methods, and their sources of supply. This information was necessary to ascertain, whether the sterilization client were fully aware that there were alternative methods available that they could use, if they did not want to undergo the sterilization operation. Knowledge of other family planning methods was measured by asking the question, "Besides sterilization, there are other ways by which a couple can avoid or delay pregnancy. Which method do you know of?" The interviewer prompted on each of the listed methods that the client failed to mention, asking questions in order to ascertain whether or not the client really had knowledge of any of these methods: pill, condom, injection, IUD, MR, and any other method. Knowledge specified with responses obtained from the first question was referred to as the unprompted (spontaneous) knowledge, while that specified with responses obtained with prompting was referred to as prompted knowledge.

Table 16 shows the percentage distribution of the sterilized clients according to their knowledge of other family planning methods. It is seen that among the sterilized tubectomy and vasectomy clients, knowledge about 'pill' is much higher than any other family planning method. The knowledge of pill was about 94 percent of tubectomy clients and about 92 percent of vasectomy clients. It is to be noted here that vasectomy clients' knowledge about 'pill' and 'condom' does not vary significantly. But there are significant variations in case of tubectomy clients' about knowledge on 'pill' and 'condom'.

Similarly, data about sources of supplies were also collected by asking a question to the client who knew the method, "Do you know any place or person where the method can be obtained?" The majority of the tubectomy and vasectomy clients reported that they knew at least one source of supply regarding the method of 'pill' or 'condom'.

3.2.9. Verification of sterilized clients' satisfaction:

In the evaluation of the VS program, the questions regarding client satisfaction and knowledge were first introduced from the January-March 1986 quarter. Accordingly, an attempt was made to collect information on clients' knowledge of sterilization, the sterilization decision-making process, and the extent of client satisfaction with the sterilization procedure. A short and simple questionnaire was administered to collect the information from the clients actually sterilized in the reference quarter. The obtained data for this quarter are tabulated in Table 17 through Table 25.

Table 17 shows that all the actually sterilized clients reported that they knew before sterilization that they could not have any child after sterilization. To assess the decision making process, several questions were asked to the sterilized tubectomy and vasectomy clients. Firstly, clients were asked questions regarding the single most important reason and second most important reason regarding why they underwent a tubectomy/vasectomy operation. The majority of the tubectomy clients (83.0 percent) and the vasectomy clients (69.0 percent) told that they "do not want any children" was their single most important reason. The second most important reason -- "to take care of children" was replied by 33.3 percent of the tubectomy clients and 40.0 percent of the vasectomy clients (Table 18). Secondly, clients were asked "how long had you seriously thought about having the sterilization method before you actually undertook it?" The responses are shown in Table 19. It can be seen from the table that 8.8 percent of the tubectomy clients and 12.5 percent of the vasectomy clients reported that they had thought about it at least one month before their operation. The remaining 91.2 percent tubectomy clients and 87.5 percent vasectomy clients told that they had thought about it before one month to more than one year. Thirdly, clients were asked whether they talked to anyone who had already had sterilization before their (sterilized clients') operation, 84.1 percent of the tubectomy clients and 74.3 percent of the vasectomy clients reported in the affirmative (Table 20).

To determine the satisfaction of clients, some direct and indirect questions were asked to the clients. A direct question was asked "Are you now satisfied or do you feel regret having been sterilized?" Most of the tubectomy clients (98.2 percent) and the vasectomy clients (96.0 percent) told that they are

satisfied with the operation (Table 22). Only 1.8 percent of the tubectomy clients and 3.6 percent of the vasectomy clients replied that they are not satisfied with the operation. The reasons for dissatisfaction, reported by the client, lost the children after operation and did not receive any post-operative treatment of side-effects. Indirect questions were also asked: "whether clients had suggested (or "recommended") or would suggest VS to others" to indirectly ascertain clients' satisfaction with their decision to get sterilized. Among the actually sterilized clients, 66.9 percent reported that they had already recommended and 28.6 percent said that they would do so in future. The remaining 4.3 percent of the clients reported that they would not recommend the method to others in future. Therefore, 95.5 percent (96.6 percent for tubectomy and 93.7 percent for vasectomy) of the actually sterilized clients had either recommended or would recommend VS to others. Information were also collected from the clients whether their post operative conjugal life had improved or not. The findings are presented in Table 24. Among the clients, 73.7 percent of the tubectomy clients and 59.4 percent of the vasectomy clients reported that their conjugal life has remained as before the operation. Only 22.8 percent of the tubectomy clients and 32.5 percent of the vasectomy clients told that their conjugal life has improved after the operation. The remaining 4.5 percent of the tubectomy clients and 6.0 percent of the vasectomy clients reported that their conjugal life has deteriorated after the operation.

"How many days after the operation was it before you were able to return to your normal workload?" questions were also asked to clients. Table 25 shows that among the vasectomy clients, 82.1 percent reported that they had resumed their normal work within 7 days of the operation and 10.4 percent of the clients reported that they had resumed their normal work within 8 days

to 15 days of the operation. Similarly, about 63 percent tubectomy clients reported that they had resumed their normal work within 15 days and rest of the clients reported that they had resumed their normal work after 15 days of the operation.

Table 14: Percentage distribution of the actually sterilized clients by how they spent the excess money

How excess was spent	Categories of clients		
	Tubectomy	Vasectomy	A 1 1
No excess money left	9.8	17.1	12.6
Spent on food	82.2	76.0	79.7
Purchased medicine	3.2	3.5	3.3
Purchased goat/chicken/goose	1.3	0.8	1.1
Purchased cloths	0.5	1.0	0.7
Purchased utensils	0.4	0.1	0.3
Purchased fishing net/yarn for making net	0.1	-	0.1
Repaired the house	0.1	0.2	0.1
Invested in business	0.1	0.2	0.1
Repaid the bank loan	-	0.3	0.1
Purchased fertilizer for land	0.1	-	0.1
Distributed to others	0.3	-	0.2
Purchased rice seedlings	0.1	-	0.1
Did not spend	1.8	0.7	1.4
Not stated	-	0.1	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 15: Percentage distribution of the actually sterilized clients according to whether they would undergo sterilization operation if there were no compensation fees

Whether they would undergo sterilization operation	Tubectomy	Vasectomy	All
Would have done it at that time	89.1	78.3	84.8
Would wait	4.1	11.6	7.1
Never would have done	6.8	10.0	8.0
Not stated	-	0.1	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 10: Percentage distribution of the actually sterilized clients according to their knowledge of family planning methods and knowledge of source of methods except sterilization

Methods	Tubectomy							Vasectomy						
	Unprompted knowledge	Prompted knowledge	No knowledge	Knowledge of source				Unprompted knowledge	Prompted knowledge	No knowledge	Knowledge of source			
				Knew at least one source	Did not know any source	Did not know the method	Not stated				Knew at least one source	Did not know any source	Did not know any method	Not stated
Pill	77.5	16.9	5.6	89.0	5.4	5.6	-	66.5	25.7	7.8	84.8	7.1	7.8	0.3
Condom	45.3	32.5	22.2	70.9	6.7	22.2	0.2	63.9	25.7	10.4	84.8	4.5	10.4	0.3
Injection	26.2	33.5	40.3	51.0	8.7	40.3	-	20.4	34.5	45.1	46.8	7.5	45.1	0.6
IUD	42.1	32.4	25.5	65.9	8.5	25.5	0.1	10.1	26.4	63.5	31.0	5.3	63.5	0.2
MR	10.6	24.9	64.5	31.2	4.2	64.5	0.1	1.3	14.6	84.1	10.5	5.0	84.1	0.4
Others	5.5	13.3	81.2	13.1	3.9	81.2	1.8	3.0	12.0	85.0	10.3	3.5	85.0	1.2
Weighted N = 941							Weighted N = 654							

Table 17 : Percentage distribution of the actually sterilized clients by whether they knew before sterilization that they could not have any child after accepting sterilization

Status of knowledge	Categories of clients		
	Tubectomy	Vasectomy	All
Knew	100.0	100.0	100.0
Did not know	-	-	-
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 18: Percentage distribution of the actually sterilized clients according to their view (reasons) for undergoing sterilization operation

Reasons for operation	Tubectomy		Vasectomy	
	Primary reason	Secondary reason	Primary reason	Secondary reason
To take care of children	10.5	33.3	23.4	40.0
To protect health/avoid pain of birth	3.5	18.0	0.1	1.5
To protect children's health	0.7	11.0	1.2	5.3
To receive cash/saree/lungi	1.4	9.3	4.6	20.2
Do not want children	83.0	11.6	69.0	21.6
Others	0.9	1.4	1.6	-
No reason	-	15.4	0.1	11.4
Total	100.0	100.0	100.0	100.0
Weighted N	941	941	654	654

Table 19 : Percentage distribution of the actually sterilized clients by the length of time they had seriously thought about having the sterilization method

Period	Categories of clients		
	Tubectomy	Vasectomy	All
1 day to 7 days	5.2	7.0	5.9
8 days to 15 days	2.4	4.8	3.4
16 " to 29 "	1.2	0.7	1.0
1 month to 2 months	19.4	13.4	17.1
More than 2 months to 4 months	9.4	11.8	10.3
More than 4 months to 6 months	11.4	25.0	16.7
More than 6 months to 12 months	28.8	22.6	26.3
More than 1 year	22.0	14.0	18.9
Not stated	0.2	0.7	0.4
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 20: Percentage distribution of the actually sterilized clients by categories whether they had talked to anyone who had already had a sterilization before their operation

Whether talked to anyone or not	Categories of clients		
	Tubectomy	Vasectomy	All
Talked	84.1	74.3	80.1
Did not talk	15.9	25.2	19.7
Not stated	-	0.5	0.2
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 21 : Percentage distribution of the actually sterilized clients by the length of time they had seriously thought about having the sterilization method and whether they had talked to anyone who had already had a sterilization before their operation

Period of thinking before sterilization	Type of operation						
	Tubectomy			Vasectomy			
	Talked	Did not talk	Total	Talked	Did not talk	Not stated	Total
Less than 30 days	6.8	2.0	8.8	3.8	8.6	-	12.4
1 month to 6 months	33.6	6.6	40.2	38.8	11.1	0.3	50.2
More than 6 months to 12 months	24.2	4.6	28.8	20.6	2.0	-	22.6
More than 1 year	19.3	2.7	22.0	10.9	3.2	-	14.1
Not stated	0.2	-	0.2	0.2	0.3	0.2	0.7
Total	84.1	15.9	100.0	74.3	25.2	0.5	100.0
Weighted N			941				654

Table 22: Percentage distribution of the actually sterilized clients by their satisfaction with the operation

Satisfaction with operation	Tubectomy	Vasectomy	All
Satisfied	98.2	96.0	97.3
Not satisfied	1.8	3.6	2.5
Others	-	0.2	0.1
Not stated	-	0.2	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 23 : Percentage distribution of the actually sterilized clients according to their recommendation to anyone for undergoing the sterilization operation

Recommendation	Tubectomy	Vasectomy	All
Already recommended	75.3	53.7	66.9
Would recommend in future	21.3	40.0	28.6
Neither recommended nor would recommend in future	3.4	5.8	4.3
Not stated	-	0.5	0.2
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 24: Percentage distribution of the actually sterilized clients by status of their post operation conjugal life

Status	Tubectomy	Vasectomy	All
As before operation	72.7	59.4	67.5
Improved	22.8	32.5	26.6
Deteriorated	4.5	8.0	5.8
Not stated	-	0.1	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 25 : Percentage distribution of the actually sterilized clients by period after the operation normal work resumed

Period	Tubectomy	Vasectomy	All
Within 7 days	17.7	82.1	44.0
8 - 15 days	45.5	10.4	31.1
16 days and above	35.5	7.0	23.9
Others	1.3	0.3	0.9
Not stated	-	0.2	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

3.2.10. Background characteristics of the clients:

3.2.10.1. Age:

Table 26 shows the percentage distribution of the actually sterilized tubectomy clients by the reported age of the clients and that of their husband. The largest number of tubectomy clients were found to be in the age group of 25-29 years while most of their husbands were in the age group of 25-29 years. The mean age of the clients and their husbands were 29.3 years and 38.3 years respectively. The percentage distribution of the actually sterilized vasectomy clients by their reported age and that of their wives is shown in Table 27.

3.2.10.2. Number of living children:

Table 28 shows the percentage distribution of the actually sterilized clients by the reported number of living children. The mean number of living children for tubectomy clients was 3.5 while for vasectomy clients it was 3.7. The proportion of tubectomy clients having less than two children was 3.1 percent and that for vasectomy clients it was 4.0 percent.

3.2.10.3. Other client characteristics:

Information on women's employment was collected from both the tubectomy and the vasectomy clients. In case of the tubectomy clients the information was collected from the woman herself but for the vasectomy clients it was about his wife. The findings are shown in Table 29. It can be seen from the table that 87.3 percent of the tubectomy clients and 92.4 percent wives of the vasectomy clients were reportedly not employed with any cash earning work apart from their regular household work. Table 30 shows the percentage distribution of the clients by their/their husbands' reported main occupation.

The sterilized clients came mostly from day labour class and agricultural worker class. Table 31 shows that 76.5 percent for all tubectomy clients and 59.6 percent of all vasectomy clients had no education. It can also be seen from the table that 1.0 percent of the tubectomy clients and 2.1 percent of the vasectomy clients had at least secondary school education. Among the sterilized clients 79.4 percent were Muslims and the remaining were non-Muslims. All but a few non-Muslims clients were Hindus (Table 32). Data on land ownership were also collected. The interviewed clients were asked whether his/her family owned any cultivable land. The clients owning any cultivable land constituted 36.4 percent of all sterilized clients (Table 33).

Table 26: Percentage distribution of the actually sterilized tubectomy clients by reported age of client and husband

Age group of clients (in years)	Age group of husbands (in years)											Not stated	Total	
	20-24	25-29	30-34	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74			
15 - 19	0.2	-	0.1	-	-	-	-	-	-	-	-	-	-	0.3
20 - 24	0.1	1.6	6.0	2.3	0.7	0.1	-	-	-	-	-	-	-	10.9
25 - 29	-	0.6	19.7	25.5	3.9	1.5	0.4	0.3	0.1	-	0.1	0.1	52.2	
30 - 34	-	-	1.1	10.7	12.5	2.0	0.8	0.2	0.3	-	-	-	27.6	
35 - 39	-	-	-	0.4	3.8	2.5	1.2	0.1	0.5	-	-	0.1	8.6	
40 - 44	-	-	-	-	-	0.2	-	-	-	0.1	-	-	0.3	
45 - 49	-	-	-	-	-	-	-	0.1	-	-	-	-	0.1	
50 - 54	-	-	-	-	-	-	-	-	0.1	-	-	-	0.1	
Total	0.3	2.2	26.9	38.9	20.9	6.3	2.4	0.7	1.0	0.1	0.1	0.2	100.0	
Weighted N = 941														

Mean age of clients :29.3 years

Mean age of husbands :38.3 years

Table 27: Percentage distribution of the actually sterilized vasectomy clients by reported age of client and wife

Age group of clients (in years)	Age group of wives (in years)								Total
	15-19	20-24	25-29	30-34	35-39	40-44	45-49	50+	
25 - 29	0.3	2.8	0.2	-	0.2	-	-	-	3.5
30 - 34	-	11.1	11.0	-	-	-	-	-	22.1
35 - 39	-	2.7	22.4	2.5	-	-	-	-	27.6
40 - 44	-	0.2	5.6	7.6	3.3	-	-	-	16.7
45 - 49	-	-	1.3	5.1	4.1	0.5	-	-	11.0
50 - 54	-	-	0.2	2.7	5.5	2.3	0.3	-	11.0
55 - 59	-	-	0.8	0.3	0.8	1.3	-	-	3.2
60 - 64	-	-	-	-	1.5	0.7	0.5	-	2.7
65 - 69	-	-	-	1.0	-	-	0.3	0.3	1.6
70 - 74	-	-	-	-	-	-	0.2	0.2	0.4
75 - 79	-	-	-	-	-	-	-	0.2	0.2
Total	0.3	16.8	41.5	19.2	15.4	4.8	1.3	0.7	100.0
Weighted N = 654									

Mean age of clients : 41.6 years

Mean age of the wife : 30.2 years

Table 28: Percentage distribution of the actually sterilized clients by reported number of living children

Reported number of living children	Categories of clients		
	Tubectomy	Vasectomy	All
0	0.1	0.5	0.3
1	3.0	3.5	3.2
2	22.2	23.9	22.7
3	33.6	27.4	31.2
4	21.0	16.6	19.3
5	10.5	12.1	11.1
6	4.8	6.3	5.4
7	3.7	6.1	4.7
8	0.4	1.2	0.7
9	0.5	1.8	1.0
10+	0.2	0.6	0.4
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 29 : Percentage distribution of the actually sterilized clients by employment status of women

Employment status of wife/client	Categories of clients		
	Tubectomy	Vasectomy	All
Employed with cash earning	11.2	7.1	9.6
Employed without cash earning	1.5	0.5	1.1
Not employed	87.3	92.4	89.3
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 30: Percentage distribution of the actually sterilized clients by occupation of husband/client

Occupation of husband/client	Categories of clients		
	Tubectomy	Vasectomy	All
Agriculture	23.6	28.5	25.5
Day labour	49.1	56.6	52.0
Business	16.1	9.3	13.4
Service	9.6	5.1	7.9
Not employed	0.7	0.3	0.6
Others	0.4	0.2	0.3
Not stated	0.5	-	0.3
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 31: Percentage distribution of the actually sterilized clients by their educational level

Education level	Categories of clients		
	Tubectomy	Vasectomy	All
No schooling	76.5	59.6	69.9
No class passed	3.5	0.5	2.3
Class I - <u>IV</u>	10.2	24.4	15.7
Class <u>V</u>	5.1	6.1	5.5
Class <u>VI</u> - <u>IX</u>	3.7	7.1	5.1
SSC and HSC	1.0	1.8	1.3
Degree and above	-	0.3	0.1
Not stated	-	0.2	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 32 : Percentage distribution of the actually sterilized clients by religion

Religion	Categories of clients		
	Tubectomy	Vasectomy	All
Muslim	74.3	87.4	79.4
Hindu	25.2	12.4	20.2
Christian	0.5	0.2	0.4
Total	100.0	100.0	100.0
Weighted N	941	654	1595

Table 33 : Percentage distribution of the actually sterilized clients by ownership of land

Status of land ownership	Categories of clients		
	Tubectomy	Vasectomy	All
Owned land	34.0	40.1	36.4
Did not own land	65.9	59.9	63.5
Not stated	0.1	-	0.1
Total	100.0	100.0	100.0
Weighted N	941	654	1595

3.3. Results of field survey of the service providers/ helpers:

3.3.1. Interviewing of the service providers/helpers:

The findings discussed in this section are on both service providers (physicians and clinic staff) and helpers included in the service providers/helpers sample. The findings were obtained through personal interviews. The sample selection procedure has already been discussed in section 2.2. However, the sample size for each of them, that is, for physician, for clinic staff, and for helpers is not the same. In all, weighted number of 136 physicians, 144 clinic staff, and 372 helpers were included in the sample.

The members of the interviewing team made a number of attempts to locate and interview the selected service providers and helpers. Each of the interviewed service providers/helpers was asked questions whether s(he) had received payments for his/her services rendered to the clients.

Table 34 shows the percentage distribution of the service providers/helpers by status of interview. Among the selected physicians, clinic staff, and helpers interviews were conducted with 68.4 percent of the physicians, 79.9 percent of the clinic staff, and 66.4 percent of the helpers. The remaining 31.6 percent physicians, 20.1 percent clinic staff, and 33.6 percent helpers could not be interviewed. The reasons for not interviewing the physicians and clinic staff included, absence, leave, and transfer; while for the helpers the reason for not interviewing was mainly due to their absence from the given address during the scheduled stay of the interviewing team in their locality.

3.3.2. Payment verification:

Payments to service providers: All the interviewed service providers (physicians and clinic staff) reported during the interview that they had received the approved amount for the services rendered to the sterilized clients.

Payments to helpers: Table 35 shows the percentage distribution of the number of clients whose helpers were interviewed, by status of receipt of helper fees. It can be seen from the table that the helpers reported receiving the approved amount of helper fees for 100.0 percent vasectomy clients and 100.0 percent tubectomy clients.

Table 34: Percentage distribution of the service providers/helpers by status of interview

Interview status	Categories of service providers/helpers		
	Physician	Other	Helpers
Interviewed	68.4	79	66.4
Not interviewed	31.6	20.1	33.6
Total	100.0	100.0	100.0
Weighted N	136	144	372

Table 35: Percentage distribution of the clients whose helper were interviewed by status of receipt of helper fee

Status of receipt of helper fee reported by helpers	Categories of clients whose helpers were interviewed		
	Tubectomy	Vasectomy	All
Received	100.0	100.0	100.0
Did not receive	-	-	-
Total	100.0	100.0	100.0
Weighted N	209	147	356

Chapter 4

REPORTING VARIATIONS

One of the most important tasks of the evaluation of the VS program is to ascertain whether the BDG and NGO performance data are correctly reflected in the MIS monthly performance report (MMPR). Because USAID reimburses the Bangladesh Government for selected costs of the VS program on the basis of the performance statistics contained in the MMPR. To accomplish this task, data were collected from the different reporting tiers. The reporting tiers are: clinics, upazilas, districts, NGOs, and the MIS Unit of the Directorate of Family Planning.

Clinic performance data: The clinic performance data refers to the performance figures recorded in the clinic registers. These data were collected from the BDG and the NGO clinics separately. The BDG clinic performance data were collected from those upazilas selected for the BDG stratum. Similarly, the NGO clinic performance data were collected from the upazilas selected for the NGO stratum. These performance data are hereinafter referred to as 'verified performance data'.

NGO performance data: The NGO clinic performance reported to upazila FP office and district FP office. These were collected directly from the NGO clinics.

Upazila performance data: A copy of the monthly sterilization performance report, broken down by BDG and NGO, sent by the Upazila Family Planning office to the district was collected from each of the selected upazila.

District performance data: A copy of the monthly sterilization performance report, broken down by BDG and NGO, filed by the district to the MIS was collected from the district headquarters. In the subsequent discussions these data are called districts reported performance.

All the filled-in copies of the performance reports were counter signed by the concerned officials at the reporting tiers.

MIS performance data: A copy of the MIS Monthly Performance Report (MMPR) and the MIS Monthly Computer Printout (MMCP) were collected from the MIS Unit. The 'MIS reported performance' from the MMCP was used for upazila-wise comparison of the performance data collected from different reporting tiers because the MMPR does not show the performance statistics by upazilas and does not separate BDG and NGO performance in the main body of the report. However, NGO performance data (for major NGOs only) by organisations are shown in an annex of the MMPR. But the NGO data in the annex are not given by upazilas and districts. On the other hand, the MMCP contains NGO performance by districts. Because of this, evaluation of the MIS data had to be done by using the MMCP.

Table 36 compares the total performances reported in the MMCP for the April-June 1987 quarter with those obtained from the MMPR for the same period. It can be seen from the table that there were a very negligible differences between these two data sources with respect to the total sterilization performance, although the ratio of the total sterilization performance of all types of sterilization in the MMPR to that shown in the MMCP was almost close to unity, being 1.01. The ratio remained at 1.01 even when it was computed separately for

tubectomy and vasectomy. Therefore, the use of the MMCP rather than the MMPR in the evaluation of MIS reported total national performance for the reporting quarter seems justified as the ratio of these two sources of data remained at 1.01.

Table 36 : Comparison of total national performance between the MMCP and the MMPR for the April-June 1987 quarter

MIS reports	Categories of clients		
	Tubectomy	Vasectomy	All
MMCP	22,351	27,761	50,112
MMPR	22,583	27,957	50,540
MMPR/MMCP	1.01	1.01	1.01

4.1. Reporting variations of BDG performance data:

4.1.1. Comparison among the verified BDG performance data, upazila data, district data, and MIS data:

The differences among the 'verified BDG performance data', upazila data, district data, and MIS data were examined in several ways. Table 37 (for tubectomy) and Table 38 (for vasectomy) highlight discrepancies among the data from the MMCP, data collected from the UFPO, data collected from the DFPO and those collected by the interviewing team in course of interviews with the clients. Column 2 of the tables contains the 'verified BDG performance data' collected from the BDG clinic registers of the selected upazilas. The upazila reported BDG performance data and the district reported BDG performance data are shown in column 3 and column 4 respectively. The MIS reported BDG performance in the MMCP is shown in column 5. The differences between the verified data and the upazila reported data, between the verified data and the district reported data, and between the verified data and the MIS reported data are shown in

column 6, column 7, and column 8 respectively. The findings of these tables are summarised in Table 39 which shows the levels of overall reporting discrepancy.

Table 39 clearly shows that there are differences among the verified BDG performance data, upazila reported data, district reported data, and MIS reported data in the MMCP. In the case of tubectomy, the MIS reported data in the MMCP were 3.3 percent overstated than the verified BDG performance data. In the case of vasectomy, the MIS reported data in the MMCP were 15.1 percent higher than the verified BDG performance data.

It is evident that the MIS monthly data in the MMCP do not give an accurate figure of the BDG performance for the reference quarter. According to Table 39 overall, BDG performance data in the MMCP were overreported for both tubectomy and vasectomy. The reason for the overreporting can be analysed with the help of Table 37 and Table 38. The tables show that for most of the upazilas there was no discrepancy among the different data sets. Only in the case of some upazilas, such as Pirgonj and Haripur upazilas of Thakurgaon district, Sherpur and Shibgonj upazilas of Bogra district, Fultala of Khulna district and Iswargonj of Mymensingh district, there were big differences. The differences were due to the inclusion of NGO performance data and/or inclusion of cases done in other upazilas in course of reporting. This had been done by some of the upazilas and also by some districts, namely, Pirgonj and Pirgacha of Rangpur district, Dhunot, Adamdighi and Sonatola of Bogra district and Sailkupa of Jhenaidah district. The reports collected from those districts lend evidence to this statement.

Therefore, this report makes an attempt below to derive an estimate of the ratio of the verified BDG performance data to the MIS data, and then apply it to calculate the actual BDG performance of the reference quarter (April-June 1987).

Table 37: Comparison among the actual BDG tubectomy performance collected from the clinic register, the upazila reported performance, the district reported performance, and MIS reported performance in the MMCP (MIS Monthly Computer Printout) by sample upazilas¹

Upazilas	Verified BDG performance data collected from the clinic register	Upazila reported BDG performance	District reported BDG performance	MIS reported BDG performance in the MMCP	Discrepancy between verified BDG performance and		
					upazila reported data	district reported data	MIS data
(1)	(2)	(3)	(4)	(5)	6=(3)-(2)	7=(4)-(2)	8=(5)-(2)
<u>Dinajpur</u>							
Khansama*	19	19	19	19	0	0	0
Nawabgonj	13	13	13	13	0	0	0
<u>Thakurgaon</u>							
Pirgonj	26	26	26	26	0	0	0
Horipur	51	51	51	51	0	0	0
Thakurgaon							
Sadar	97	97	97	97	0	0	0
Baliadangi	84	84	84	84	0	0	0
<u>Panchagarh</u>							
Boda*	41	41	41	41	0	0	0
Debigonj	51	51	51	51	0	0	0
<u>Nilphamari</u>							
Jaldhaka	169	169	169	169	0	0	0
Domar	74	74	74	74	0	0	0
Kishoregonj*	67	71	71	71	+4	+4	+4
<u>Rangpur</u>							
Pirgonj	48	48	50	50	0	+2	+2
Pirgacha	65	72	91	91	+7	+26	+26
Badargonj	57	57	57	57	0	0	0
Mithapukur	76	76	76	76	0	0	0
Rangpur Sadar	15	15	15	15	0	0	0

Table 37 contd.

Upazilas	Verified BDG performance data collected from the clinic register	Upazila reported BDG performance	District reported BDG performance	MIS reported BDG performance in the MMCP	Discrepancy between verified BDG performance and		
					upazila reported data	district reported data	MIS data
(1)	(2)	(3)	(4)	(5)	6=(3)-(2)	7=(4)-(2)	8=(5)-(2)
<u>Kurigram</u>							
Ulipur	84	84	84	84	0	0	0
Fulbari	135	135	134	134	0	-1	-1
<u>Gaibandha</u>							
Gobindagonj	45	45	45	45	0	0	0
<u>Bogra</u>							
Sherpur	32	32	31	31	0	-1	-1
Shibgonj	36	36	51	51	0	+15	+15
Dhunot	7	7	7	7	0	0	0
Adamdighi	5	5	5	5	0	0	0
Sonatala	45	46	53	53	+1	+8	+8
<u>Naogaon</u>							
Mohadebpur	77	77	77	77	0	0	0
<u>Jhenaidah</u>							
Sailkupa	160	160	181	181	0	+21	+21
<u>Khulna</u>							
Fultala	3	3	6	6	0	+3	+3
<u>Barguna</u>							
Amtali	136	136	136	136	0	0	0
Barguna Sadar	48	48	48	48	0	0	0
<u>Tangail</u>							
Madhupur	82	82	82	82	0	0	0
Gopalpur	133	134	134	134	+1	+1	+1

Table 37 contd.

Upazilas	Verified BDG performance data collected from the clinic register	Upazila reported BDG performance	District reported BDG performance	MIS reported BDG performance in the MMCP	Discrepancy between verified BDG performance and		
					upazila reported data	district reported data	MIS data
(1)	(2)	(3)	(4)	(5)	6=(3)-(2)	7=(4)-(2)	8=(5)-(2)
<u>Mymensingh</u>							
Gouripur	82	82	80	80	0	-2	-2
Iswargonj	52	52	52	52	0	0	0
Haluaghat	102	102	100	100	0	-2	-2
Total	2217	2230	2291	2291			
Total cases overreported					+13	+80	+80
Total cases underreported					- 0	- 6	- 6
Balance					+13	+74	+74

¹ Upazila marked by asterisk shows two months' performance and those without asterisk shows three months' performance.

Table 38: Comparison among the actual BDG vasectomy performance collected from the clinic register, the upazila reported performance, the district reported performance, and MIS reported performance in the MMCP (MIS Monthly Computer Printout) by sample upazilas¹

Upazilas	Verified BDG performance data collected from the clinic register	Upazila reported BDG performance	District reported BDG performance	MIS reported BDG performance in the MMCP	Discrepancy between verified BDG performance and		
					upazila reported data	district reported data	MIS data
(1)	(2)	(3)	(4)	(5)	6=(3)-(2)	7=(4)-(2)	8=(5)-(2)
<u>Dinajpur</u>							
Khansama*	42	42	42	42	0	0	0
Nawabgonj	180	180	180	180	0	0	0
<u>Thakurgaon</u>							
Pirgonj	65	134	134	134	+69	+69	+69
Horipur	80	80	180	180	0	+100	+100
Sadar	253	253	253	253	0	0	0
Baliadangi	47	47	47	47	0	0	0
<u>Panchagarh</u>							
Boda*	82	82	82	82	0	0	0
Debigonj	178	178	178	178	0	0	0
<u>Nilphamari</u>							
Jaldhaka	19	19	19	19	0	0	0
Domar	4	4	4	4	0	0	0
Kishoregonj	111	107	107	107	-4	-4	-4
<u>Rangpur</u>							
Pirgonj	62	62	86	86	0	+24	+24
Pirgacha	73	74	84	84	+1	+11	+11
Badargonj	65	65	65	65	0	0	0
Mithapukur	39	39	39	39	0	0	0
Sadar	158	157	157	157	-1	-1	-1

Table 38 contd.

Upazilas	Verified BDG performance data collected from the clinic register	Upazila reported BDG performance	District reported BDG performance	MIS reported BDG performance in the MMCF	Discrepancy between verified BDG performance and		
					upazila reported data	district reported data	MIS data
(1)	(2)	(3)	(4)	(5)	6=(3)-(2)	7=(4)-(2)	8=(5)-(2)
<u>Kurigram</u>							
Ulipur	49	49	49	49	0	0	0
Fulbari	3	3	4	4	0	+1	+1
<u>Gaibandha</u>							
Gobindagonj	42	42	42	42	0	0	0
<u>Bogra</u>							
Sherpur	165	165	197	197	0	+32	+32
Shibgonj	17	17	189	189	0	+172	+172
Dhunot	140	140	160	160	0	+20	+20
Adamdighi	121	121	141	141	0	+20	+20
Sonatala	3	3	13	13	0	+10	+10
<u>Naogaon</u>							
Mohadebpur	15	15	15	15	0	0	0
<u>Jhenaidah</u>							
Sailkupa	2	2	2	2	0	0	0
<u>Khulna</u>							
Fultala	300	300	334	334	0	+34	+34
<u>Barguna</u>							
Amtali	257	257	257	257	0	0	0
Barguna	460	460	446	446	0	-14	-14

Table 38 contd.

Upazilas	Verified BDG performance data collected from the clinic register	Upazila reported BDG performance	District reported BDG performance	MIS reported BDG performance in the MMCP	Discrepancy between verified BDG performance and		
					upazila reported data	district reported data	MIS data
(1)	(2)	(3)	(4)	(5)	6=(3)-(2)	7=(4)-(2)	8=(5)-(2)
<u>Tangail</u>							
Modhupur	20	20	20	20	0	0	0
Gopalpur	16	15	15	15	-1	-1	-1
<u>Mymensingh</u>							
Gouripur	125	125	118	118	0	-7	-7
Iswargonj	50	57	87	87	+7	+37	+37
Haluaghat	33	33	24	24	0	-9	-9
Total	3276	3347	3770	3770			
Total cases overreported					+77	+530	+530
Total cases underreported					-6	-36	-36
Balance					+71	+494	+494

¹ Upazila marked by asterisk shows two months' performance and those without asterisk shows three months' performance.

Table 39: Summary of the reporting differences of BDG performance among verified BDG performance data, upazila reported data, district reported data, and MIS reported data in the MMCP for the April-June 1987 quarter¹

Reporting differences	Categories of clients		
	Tubectomy	Vasectomy	All
Verified BDG performance data for the selected upazilas -- i.e., collected at the upazilas	2,217	3,276	5,493
Performance for the selected upazilas according to the MMCP	2,291	3,770	6,061
Difference between verified BDG performance data and upazila reported data (net of underreporting and overreporting) ²	+13 (+0.6)	+71 (+2.2)	+84 (+1.5)
Difference between verified BDG performance data and MIS reported data in the MMCP (net of underreporting and overreporting) ³	+74 (+3.3)	+494 (+15.1)	+568 (+10.3)
Difference between verified BDG performance data and MIS reported data in the MMCP (net of underreporting and overreporting) ⁴	+74 (+3.3)	+494 (+15.1)	+568 (+10.3)

¹ Figures in the brackets are the percentage of the verified BDG performance data.

² From balance, column 6 in Tables 37 and 38.

³ From balance, column 7 in Tables 37 and 38.

⁴ From balance, column 8 in Tables 37 and 38.

4.1.2. Estimates of BDG component ratios of verified BDG performance data and MIS data:

Estimates of BDG component ratio have been computed by using the formula described below:

$$p = \frac{\sum_{i=1}^n a_i}{\sum_{i=1}^n m_i} \dots\dots\dots (1)$$

Where, a_i = the verified BDG performance data in the i th sample upazilas

m_i = the MIS data from the MMCP for the i th sample upazilas

p = the estimates of the BDG component ratio of verified BDG performance data and MIS data

n = the number of sample upazilas = 34

The variance $V(P)$ of the estimate has been derived by using the equation:

$$V(P) = \frac{(N-n)}{Nn} \frac{1}{(n-1)} \frac{1}{\bar{M}^2} \left[\sum_{i=1}^n a_i^2 + p^2 \sum_{i=1}^n m_i^2 - 2p \sum_{i=1}^n a_i m_i \right] \dots\dots (2)$$

Where, N = total number of program upazilas¹ = 477

\bar{M} = the average performance per program upazila according to the MMCP

¹Program upazilas were those that were listed in the MMCP during the quarter April-June 1987.

The results of the computation are displayed in Table 40. As can be seen from the table, the ratio of the verified BDG performance data to MMCP data for the BDG component was 0.968 for tubectomy cases, while for vasectomy, it was 0.869. The standard errors of the estimates as found by using formula (2) are 0.025 and 0.131 respectively.

Table 40: Estimates of BDG component ratios of the verified BDG performance data and MIS data in the MMCP

Estimates	Categories of clients	
	Tubectomy	Vasectomy
Ratio ¹	0.968	0.869
Standard errors	0.025	0.131

4.2. Reporting variations of NGO performance data:

4.2.1. Comparison among the verified NGO performance data, upazila data, district data, and MIS data:

To get an insight into the sterilization performances of NGOs as reported by different reporting tiers, data were collected during the field survey from those sample upazilas which were selected for the 'NGO stratum'. Table 41 shows all those sample upazilas and their corresponding NGO performance figures as reported by different reporting levels. In this table, the term 'verified NGO performance' means the performances found to have been done according to NGO clinic records in the selected upazilas. It was observed that the NGO clinics reported their monthly performance either to upazila FP offices or the district FP offices or in some cases to both the offices.

¹ Verified BDG performance data/BDG data in the MMCP.

These reportings were in addition to the regular reporting to their respective NGO headquarters. However, for publication in the national MIS reports, district FP offices send NGO performance reports to the MIS. The MIS reports do not show NGO performances by upazilas. Instead, these are shown by districts only in the MMCP.

In order to find out the reporting variations of the NGO performances, a comparison has been attempted in Table 41. The summary of the comparison is shown at the bottom of the table. From the table it is clear that there was some differences between the verified NGO performance figures and the figures sent to NGO headquarters. On the other hand, some variations have also been observed when the verified figures were compared with the corresponding figures sent to MIS by district FP offices. It has been done on the assumption that MIS would report only those NGO performance figures which are transmitted by district FP offices. By this comparison it has been found that NGO performances were underreported by district FP offices. Those underreportings were 11.9 percent and 3.7 percent of the verified NGO performances for tubectomy and vasectomy respectively. Therefore, this report makes an attempt below to derive an estimate of the ratio of the verified NGO performance data to the district reported NGO performance data, and then apply it to calculate the actual NGO performance of the reference quarter.

Table 41: Comparison between actual NGO sterilization performance collected from the NGO clinic register and from the different reporting tiers by sample upazilas

Upazila	NGO/NGO clinic	Verified NGO performance		NGO performance sent to upazila		NGO performance sent to district FP office		NGO performance sent to NGO headquarters		NGO performance sent to MIS by district FP office		Difference between District FP office reported NGO performance and verified NGO performance	
		Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(11)-(3)	(14)=(12)-(4)
<u>Dinajpur</u>													
Sadar	FPAB	160	213	-	-	160	213	160	213	160	213	0	0
	Muslim Nari Kallyan Sangstha	19	29	-	-	19	29	20	29	20	29	+1	0
	Sub-total	179	242	-	-	179	242	180	242	180	242	+1	0
<u>Rangpur</u>													
Sadar	BAVS	60	19	60	19	60	19	60	19	33	28	-27	+9
	FPAB	214	95	214	95	214	95	217	100	140	100	-74	+5
	Anjuman Memorial Clinic	-	228	-	228	-	232	-	232	-	590	-	+362
	Sub-total	274	342	274	342	274	346	277	351	173	718	-101	+376
<u>Rajshahi</u>													
Sadar	BAVS	84	03	-	-	84	03	84	03	84	6	0	+3
	FPAB	180	36	-	-	180	36	180	36	180	36	0	0
	Muslim Nari Kallyan Sangstha	28	325	-	-	28	325	28	325	28	325	0	0
	Sub-total	292	364	-	-	292	364	292	364	292	367	0	+3
<u>Kushtia</u>													
Sadar	BAVS	110	21	-	-	110	21	110	21	110	21	0	0
	FPAB	204	41	-	-	204	41	204	41	204	41	0	0
	Sub-total	314	62	-	-	314	62	314	62	314	62	0	0

Table 41 contd.

Upazila	NGO/NGO clinic	Verified NGO performance		NGO performance sent to upazila		NGO performance sent to district FP office		NGO performance sent to NGO headquarters		NGO performance sent to MIS by district FP office		Difference between District FP office reported NGO performance and verified NGO performance	
		Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(11)-(3)	(14)=(12)-(4)
<u>Jessore Sadar</u>	BAVS	30	163	-	-	30	163	30	163	30	163	0	0
	FPAB	22	296	-	-	22	296	22	296	22	296	0	0
	Sub-total	52	459	-	-	52	459	52	459	52	459	0	0
<u>Patuakhali Sadar</u>	FPAB	56	287	56	287	56	287	56	287	56	287	0	0
	Sub-total	56	287	56	287	56	287	56	287	56	287	0	0
<u>Barisal Sadar</u>	BAVS	70	78	70	78	70	78	70	78	36	46	-34	-32
	FPAB	64	245	64	245	64	245	64	245	30	81	-34	-164
	Sub-total	134	323	134	323	134	323	134	323	66	127	-68	-196
<u>Faridpur Sadar</u>	BAVS	18	73	18	73	18	73	18	73	18	73	0	0
	FPAB	85	31	85	31	85	31	85	31	77	22	-8	-9
	Sub-total	103	104	103	104	103	104	103	104	95	95	-8	-9
<u>Tangail Sadar</u>	BAVS	27	171	-	-	27	171	27	171	27	171	0	0
	FPAB	49	128	49	128	49	128	49	128	49	128	0	0
	Sub-total	76	299	49	128	76	299	76	299	76	299	0	0
<u>Mymensingh Sadar</u>	FPAB	136	621	-	-	136	621	136	621	136	621	0	0
	Sub-total	136	621	-	-	136	621	136	621	136	621	0	0

Table 41 contd.

Upazila	NGO/NGO clinic	Verified NGO performance		NGO performance sent to upazila		NGO performance sent to district FP office		NGO performance sent to NGO headquarters		NGO performance sent to MIS by district FP office		Difference between District FP office reported NGO performance and verified NGO performance	
		Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.	Tub.	Vas.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)=(11)-(3)	(14)=(12)-(4)
<u>Sylhet</u>													
Sadar	BAVS	16	59	16	59	16	59	16	59	16	59	0	0
	FPAB	45	84	45	84	45	84	45	84	45	84	0	0
	Sub-total	61	143	61	143	61	143	61	143	61	143	0	0
<u>Chittagong</u>													
Sadar	BAVS	44	136	-	-	44	136	44	136	47	5	+3	-131
	FPAB	34	268	-	-	34	268	34	268	1	91	-33	-177
	Mamata	23	-	-	-	36	04	38	04	17	-	-6	-
	Sub-total	101	404	-	-	114	408	116	408	65	96	-36	-308
Total		1778	3650	677	1327	1791	3658	1797	3663	1566	3516		
Total cases overreported												+ 1	+379
Total cases underreported												-213	-513
Balance												-212	-134

4.2.2. Estimates of NGO component ratios of verified NGO performance data and district reported NGO performance data:

The estimates of the NGO component ratio have been computed by using the formula described below:

$$p = \frac{\sum_{i=1}^n a_i}{\sum_{i=1}^n m_i} \dots\dots\dots (1)$$

Where, a_i = the verified NGO performance data in the i th sample upazila

m_i = the district reported to MIS data for the i th sample upazila

p = the estimate of the NGO component ratio of verified NGO performance data and district reported to MIS data

n = the number of sample upazilas = 12

The variance $V(P)$ of the estimate has been derived by using the equation:

$$V(P) = \frac{(N-n)}{Nn(n-1)} \frac{1}{\bar{M}^2} \left[\sum_{i=1}^n a_i^2 + p^2 \sum_{i=1}^n m_i^2 - 2p \sum_{i=1}^n a_i m_i \right] \dots\dots (2)$$

Where, N = total number of program upazilas having at least one NGO clinic = 44

\bar{M} = the average NGO performance per program upazila according to the district reported to MIS data

The results of the computation are shown in Table 42. As can be seen from the table, the ratio of the verified NGO performance data to the district reported to MIS data for the NGO component was 0.881 for district reported tubectomy cases, while for vasectomy, it was 0.963. The standard errors of the estimate as found by using formula (2) are 0.101 and 0.292 respectively.

Table 42: Estimate of NGO component ratios of the verified NGO performance data and district reported NGO performance data

Estimates	Categories of clients	
	Tubectomy	Vasectomy
Ratio ¹	0.881	0.963
Standard errors	0.101	0.292

¹Verified NGO performance data/NGO data in the district reported NGO performance data

4.3. Reported and estimated national, BDG and NGO performances:

Table 43 shows, by tubectomy, vasectomy and total for the reference quarter the reported and estimated sterilization performances for the national, the BDG, and the NGO programs respectively, as derived from the MMCP, the MMPP, and the verified BDG and NGO performance data. The performance of the national program (or the national performance) includes both the BDG and NGO sterilization performances done by the Government clinics while the NGO performance is the sterilization performance done by all the non-government organisations engaged in family planning activities.

It can be seen from line 10 of Table 43 that the estimated actual BDG performance during the reporting quarter was 28,663 sterilization cases (16,119 cases of tubectomy and 12,544 cases of vasectomy).

The estimated actual BDG performance was computed by applying the estimated BDG component ratio of the verified BDG performance data and the MIS data to the total of BDG performance shown in the MMCP. The estimated actual performance indicates overreporting in the MMCP (line 5) of BDG performance for the reference quarter by 2,424 cases of sterilization -- tubectomy cases were overreported by 533 cases and vasectomy cases by 1,891 cases.

The estimated proportion of the actual BDG performance was calculated to find out the extent of overreporting or underreporting of the estimated BDG performance in the MMPR (line 3). The eleventh line of Table 43 shows that the total BDG performance in the MMPR was overreported by 28.4 percent for all cases -- for tubectomy 13.4 percent and for vasectomy 41.4 percent.

The NGO performance for the reporting quarter, as indicated in the MMCP, was 19,025 cases of sterilization (5,699 cases of tubectomy and 13,326 cases of vasectomy) (line 6, Table 43). The performance of major NGOs alone during the reference quarter as obtained from the annex of the MMPR was 10,523 cases of sterilization (3,968 cases of tubectomy and 6,555 cases of vasectomy) (line 2, Table 43). BAVS (Bangladesh Association for Voluntary Sterilization), FPAB (Family Planning Association of Bangladesh), CHCP (Community Health Care Project), MFC (Mohammadpur Fertility Clinic), and MSC (Metropolitan Satellite Clinic), are the major sterilization performing NGOs. As can be seen from Table 43 there were differences between the performance of all NGOs as shown in the MMCP and the performance of major NGOs (derived from the attachment of the MMPR). The difference was 8,502 cases of sterilization -- for tubectomy, the difference was 1,731 cases (5,699-3,968) and for vasectomy the difference was 6,771 cases (13,326-6,555). Therefore, the estimated actual NGO performance (line 15) was calculated to find out the extent of

overreporting or underreporting in the MMPR. The estimated actual performance was computed by applying the estimated NGO component ratio of the verified NGO clinic performance data and district reported to MIS data. The estimated actual performance indicates underreporting in the MMCP (line 6) of NGO performances for the reference quarter by 1,275 cases of sterilization (769 cases of tubectomy and 506 cases for vasectomy).

The sixteenth line of Table 43 shows the basis for adjustment of MMPR to obtain the actual NGO performance. Therefore, it was found that overall 92.9 percent of the NGO performances were not reflected in the MMPR. In case of tubectomy, the underreporting was 63.0 percent and in case of vasectomy, it was 111.0 percent.

On the other hand, the estimated national (BDG+NGO) performance (line 19) was also calculated to find out the extent of over-reporting or underreporting in the national level. The estimated national performance was derived by adding the estimated actual BDG performance (line 10) and the estimated actual NGO performance (line 15). Therefore, the estimated total sterilization performance for the national program would be 48,963 cases (22,587 cases of tubectomy and 26,376 cases of vasectomy).

Table 43: Reported, estimated national, BDG, NGO performances as derived from different sources for April-June 1987 quarter

Performances	Categories of clients		
	Tubectomy	Vasectomy	Total
<u>Estimate of BDG Performance</u>			
1. National performance as reported by MMPR = Z_1	22,583	27,957	50,540
2. Performance of major NGOs in the MMPR (from annex) = Z_2	3,968	6,555	10,523
3. Estimate of BDG performance in the MMPR = $Z_3 = Z_1 - Z_2$	18,615	21,402	40,017
4. National performance in the MMCP = Z_4	22,351	27,761	50,112
5. BDG performance in the MMCP = Z_5	16,652	14,435	31,087
6. Other programs (all NGOs) performance in the MMCP = Z_6	5,699	13,326	19,025
7. Verified BDG performance collected at the selected upazilas = Z_7	2,217	3,276	5,493
8. BDG performance for the selected upazilas according to MMCP = Z_8	2,291	3,770	6,061
9. Estimated BDG component ratio based on verified BDG clinic performance data and MIS data in the MMCP = $Z_9 = Z_7/Z_8$	0.968	0.869	0.906
10. Estimated actual BDG performance based on estimated BDG component ratio = $Z_{10} = Z_5 \times Z_9$	16,119	12,544	28,663
11. Overreporting (+) and underreporting (-) of BDG performance in the MMPR = $(1 - Z_{10}/Z_3)$	+0.134	+0.414	+0.284

Table 43 contd.

Performances	Categories of clients		
	Tubectomy	Vasectomy	Total
<u>Estimate of NGO Performance</u>			
12. Verified NGO performance collected at the selected upazilas = Z_{11}	1,778	3,650	5,428
13. NGO performance for the selected upazilas according to district reported data to MIS = Z_{12}	1,566	3,516	5,082
14. Estimated NGO component ratio based on verified NGO clinic performance data and district reported to MIS data = Z_{13} $= Z_{11}/Z_{12}$	1.135	1.038	1.068
15. Estimated actual NGO performance based on estimated NGO component ratio = Z_{14} $= Z_6 \times Z_{13}$	6,468	13,832	20,300
16. Underreporting (-) of NGO performance in the MMPR $(1-Z_{14}/Z_2)$	-0.630	-1.110	-0.929

17. Estimated BDG performance	16,119	12,544	28,663
18. Estimated NGO performance	6,468	13,832	20,300
19. Estimated national performance	22,587	26,376	48,963

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Chapter 5

FINDINGS OF THE EVALUATION

The current report is the tenth quarterly evaluation of the VS program of BDG and NGO under the contract with the USAID, Dhaka, done through a nationally representative sample survey. The findings of the current quarter evaluation along with those of the last quarters (January-March 1985 through January-March 1987 quarter) are shown in Table 44.

Earlier, seven (April-June 1983 to October-December 1984 quarter) quarterly audits/evaluations of the VS programs were also conducted by this firm. Among these, the October-December 1984 quarter was termed evaluation, while the others were audits. The findings of the earlier quarters are shown in Table 4 of Appendix A as reference.

Table 44 contd.

Findings	Jan-March '85 quarter	April-June '85 quarter	July-Sept. '85 quarter	Oct.-Dec. '85 quarter	Jan-March '86 quarter	April-June '86 quarter	July-Sept. '86 quarter	Oct.-Dec. '86 quarter	Jan-March '87 quarter	April-June '87 quarter
5. Estimated proportion of actual helpers ¹ :										
Tubectomy	86.1%	79.3%	82.8%	100.0%	100.0%	81.2%	84.5%	81.4%	79.3%	86.4%
Vasectomy	74.5%	66.4%	63.0%	100.0%	100.0%	74.8%	78.4%	72.5%	75.1%	70.5%
6. Estimated proportion of <u>actually sterilized</u> clients who had received surgical apparel and had also signed the USAID-approved informed consent forms:										
Tubectomy	93.5%	99.8%	97.3%	99.9%	98.4%	99.6%	99.3%	98.4%	99.2%	99.8%
Vasectomy	92.7%	94.6%	97.4%	97.4%	98.3%	97.5%	96.8%	98.2%	97.2%	99.5%
7. Estimated proportion of <u>actually sterilized</u> clients having USAID-approved informed consent forms signed/thumb impressed by clients:										
Tubectomy	93.5%	99.8%	97.3%	100.0%	98.4%	99.8%	99.3%	98.4%	99.6%	99.8%
Vasectomy	95.3%	97.3%	99.5%	100.0%	99.2%	99.5%	99.4%	98.9%	99.6%	100.0%
8. Estimated proportion of clients whose consent form was missing among <u>actually sterilized</u> clients:										
Tubectomy	Nil	Nil	Nil	Nil	0.8%	Nil	Nil	Nil	Nil	Nil
Vasectomy	0.1%	Nil	Nil	Nil	0.4%	Nil	Nil	0.1%	Nil	Nil

¹Actual helpers means that the reported and recorded helper was the same and fell within the officially approved helper category.

Table 44 contd.

Findings	Jan-March '85 quarter	April-June '85 quarter	July-Sept. '85 quarter	Oct.-Dec. '85 quarter	Jan-March '86 quarter	April-June '86 quarter	July-Sept. '86 quarter	Oct.-Dec. '86 quarter	Jan-March '87 quarter	April-June '87 quarter
14. Proportion of clients over 49 years old:										
Tubectomy	Nil	Nil	Nil	Nil	0.2%	Nil	Nil	Nil	Nil	0.1%
Vasectomy	28.4%	21.3%	17.7%	15.7%	22.1%	19.1%	14.0%	18.6%	15.7%	19.1%
15. Mean number of living children:										
Tubectomy	3.7	4.0	3.6	3.7	3.6	3.7	3.4	3.7	3.7	3.5
Vasectomy	3.9	3.8	4.0	3.7	4.2	3.9	3.6	3.8	3.7	3.7
16. Proportion of clients with 0-1-2 children:										
<u>Tubectomy</u>										
0	0.3%	0.8%	0.8%	0.2%	0.3%	0.3%	Nil	0.1%	0.5%	0.9%
1	2.2%	1.0%	1.3%	3.2%	1.4%	1.3%	3.4%	3.6%	2.6%	2.9%
2	19.8%	17.3%	18.6%	20.3%	20.2%	17.7%	26.9%	20.8%	20.1%	21.6%
<u>Vasectomy</u>										
0	0.6%	0.1%	0.9%	0.7%	0.3%	0.1%	0.3%	0.3%	Nil	0.5%
1	2.0%	3.0%	1.2%	3.2%	0.7%	1.7%	3.3%	4.2%	1.5%	3.5%
2	19.6%	15.4%	16.5%	18.7%	18.1%	22.4%	25.2%	22.5%	23.0%	23.9%
17. Proportion of clients helped by (clinic recorded data):										
<u>Tubectomy</u>										
BDG fieldworker	a	a	36.1%	51.1%	45.2%	35.5%	39.3%	51.5%	53.6%	35.9%
BAVS salaried fieldworker	a	a	13.6%	5.9%	10.6%	8.7%	6.4%	6.3%	13.8%	2.2%
Other NGO fieldworker	a	a	25.2%	28.9%	24.7%	35.0%	25.6%	20.1%	16.5%	33.9%
EDG registered agent	a	a	11.0%	7.5%	7.3%	7.4%	11.2%	9.4%	6.0%	15.4%
BAVS registered agent	a	a	4.4%	1.3%	2.2%	2.8%	3.4%	2.5%	3.6%	0.3%
Other NGO registered agent	a	a	2.8%	1.0%	2.7%	3.9%	6.7%	2.9%	1.6%	3.3%
Registered Dai	a	a	6.9%	4.3%	7.7%	6.7%	7.4%	7.3%	4.9%	9.0%

Table 44 contd.

Findings	Jan-March '85 quarter	April-June '85 quarter	July-Sept. '85 quarter	Oct.-Dec. '85 quarter	Jan-March '86 quarter	April-June '86 quarter	July-Sept. '86 quarter	Oct.-Dec. '86 quarter	Jan-March '87 quarter	April-June '87 quarter
17.										
<u>Vasectomy</u>										
BDG fieldworker	a	a	29.7%	58.7%	30.3%	29.8%	21.5%	25.1%	25.3%	26.3%
BAVS salaried fieldworker	a	a	7.6%	19.1%	18.3%	10.2%	11.7%	18.3%	14.3%	5.7%
Other NGO fieldworker	a	a	13.5%	11.5%	10.5%	17.9%	13.0%	9.9%	18.0%	17.5%
BDG registered agent	a	a	42.3%	6.3%	27.9%	28.2%	30.8%	29.0%	18.3%	34.5%
BAVS registered agent	a	a	0.7%	0.9%	2.9%	0.5%	5.2%	3.0%	1.6%	0.2%
Other NGO registered agent	a	a	1.0%	0.9%	8.5%	10.6%	16.4%	13.8%	21.9%	16.6%
Registered Dai	a	a	4.7%	2.6%	1.6%	2.8%	1.4%	0.9%	0.6%	5.2%
Not stated	a	a	0.5%	Nil	Nil	Nil	Nil	Nil	Nil	Nil
18. Proportion of clients helped by (survey data):										
<u>Tubectomy</u>										
BDG fieldworker	a	a	31.6%	40.5%	37.8%	28.4%	31.3%	40.6%	40.0%	28.3%
BAVS salaried fieldworker	a	a	11.2%	4.8%	9.3%	7.6%	5.8%	4.9%	11.4%	0.9%
Other NGO fieldworker	a	a	21.3%	25.3%	21.4%	29.4%	22.6%	16.8%	13.4%	31.6%
BDG registered agent	a	a	9.1%	9.6%	9.6%	8.1%	14.5%	18.3%	17.7%	21.3%
BAVS registered agent	a	a	6.0%	1.5%	2.5%	3.7%	4.0%	3.6%	5.7%	0.6%
Other NGO registered agent	a	a	3.7%	2.0%	3.0%	2.5%	7.3%	3.8%	1.6%	5.2%
Registered Dai	a	a	8.0%	6.8%	10.3%	8.9%	8.3%	10.2%	8.8%	11.2%
Unspecified category	a	a	7.2%	7.2%	4.6%	3.5%	4.1%	Nil	Nil	Nil
Went alone	a	a	0.5%	1.2%	1.0%	7.1%	1.6%	1.0%	0.9%	0.4%
Does not know	a	a	1.4%	0.6%	0.5%	0.8%	0.5%	0.8%	0.5%	0.5%
<u>Vasectomy</u>										
BDG fieldworker	a	a	19.6%	23.5%	27.6%	20.9%	14.6%	14.6%	14.6%	19.4%
BAVS salaried fieldworker	a	a	6.8%	15.7%	17.6%	6.6%	9.0%	11.5%	10.6%	4.0%
Other NGO fieldworker	a	a	12.0%	8.3%	9.2%	12.0%	8.7%	5.6%	14.9%	15.0%
BDG registered agent	a	a	22.8%	6.1%	21.6%	28.7%	29.2%	35.3%	21.1%	37.0%
BAVS registered agent	a	a	0.9%	1.3%	3.7%	0.4%	5.0%	6.0%	2.4%	7.9%
Other NGO registered agent	a	a	1.8%	0.9%	8.5%	11.0%	17.6%	14.0%	19.5%	Nil
Registered Dai	a	a	4.4%	2.6%	2.1%	3.4%	1.8%	1.8%	1.0%	2.5%
Unspecified category	a	a	22.3%	32.1%	3.5%	4.3%	4.5%	Nil	Nil	Nil
Went alone	a	a	8.3%	8.2%	5.0%	7.0%	4.2%	6.7%	6.2%	5.5%
Does not know	a	a	1.1%	1.3%	1.2%	5.7%	5.4%	4.3%	9.7%	8.7%

Findings	Jan-March	April-June	July-Sept.	Oct.-Dec.	Jan-March	April-June	July-Sept.	Oct.-Dec.	Jan-March	April-June
	'85 quarter	'85 quarter	'85 quarter	'85 quarter	'86 quarter	'86 quarter	'86 quarter	'86 quarter	'87 quarter	'87 quarter
19. Estimated proportion of clients who were promised any "unapproved items":										
Tubectomy	a	Nil	0.9%	Nil	0.4%	Nil	Nil	Nil	Nil	Nil
Vasectomy	a	Nil	1.1%	Nil						
20. Estimated proportion of clients who had reported receiving any "unapproved items":										
Tubectomy	a	Nil								
Vasectomy	a	Nil								
21. Estimated proportion of clients who had knowledge before sterilization that they could not have any child after accepting sterilization:										
Tubectomy	a	a	a	a	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Vasectomy	a	a	a	a	100.0%	100.0%	100.0%	99.7%	100.0%	100.0%
22. Estimated proportion of clients who had suggested (or "recommended") or would suggest VS to others:										
Tubectomy	a	a	a	a	95.6%	98.8%	92.5%	96.4%	99.5%	98.7%
Vasectomy	a	a	a	a	93.2%	97.0%	92.9%	95.9%	95.8%	93.7%

^aData were not collected for the quarters according to these categories.

APPENDIX - A

Table 1: Distribution of the sterilized clients in the selected upazilas
by evaluations and recorded residence¹

Recorded residence of clients	Evaluation Quarters										Overall
	Jan-March '85	April- June'85	July- Sept.'85	Oct.-Dec. '85	Jan-March '86	April- June'86	July-Sept. '86	Oct.-Dec. '86	Jan-March '87	April- June'87	
Within the upazila	9676 (53.1)	9190 (58.5)	6199 (56.5)	6385 (54.2)	6056 (58.8)	6890 (49.8)	12211 (51.8)	12123 (41.9)	6377 (48.1)	5686 (51.6)	80793 (51.3)
Outside the upazila	8546 (46.9)	6523 (41.5)	4771 (43.5)	5396 (45.8)	4241 (41.2)	6945 (50.2)	11377 (48.2)	16780 (58.1)	6893 (51.9)	5339 (48.4)	76811 (48.7)

¹ Figures without brackets are the absolute number, while those within brackets are the percentage of the column total

Table 2: Distribution of actual number of informed consent forms by categories and by selected upazilas

District/ upazila	Categories of informed consent form			All
	USAID-approved	Not approved by USAID		
	Not signed	Signed	Not signed	
<u>Nilphamari</u>				
Kishoregonj	1	-	-	1
Total	1	-	-	1

Table 3: Estimated proportions of clients actually sterilized by selected upazilas

District/ upazila	Selected sample size			Proportion of actually sterilized cases for the sample ^{1,2}		
	Tub.	Vas.	All	Tub.	Vas.	All
<u>BDG STRATUM</u>						
<u>Dinajpur</u>						
Khansama	20	20	40	0.85	0.80	0.83
Nawabgonj	4	36	40	1.00	1.00	1.00
<u>Thakurgaon</u>						
Pirgonj	7	33	40	0.86	0.91	0.90
Baliadanga	21	19	40	1.00	0.95	0.98
Horipur	22	18	40	1.00	1.00	1.00
Sadar	25	15	40	1.00	1.00	1.00
<u>Panchghar</u>						
Boda	19	21	40	1.00	0.95	0.98
Debigonj	8	32	40	1.00	0.94	0.95
<u>Nilphamari</u>						
Domar	39	1	40	1.00	1.00	1.00
Jaldhaka	36	4	40	1.00	1.00	1.00
Kishoregonj	31	9	40	1.00	0.89	0.98
<u>Rangpur</u>						
Pirgacha	9	31	40	0.89	0.87	0.88
Pirgonj	29	11	40	1.00	0.64	0.90
Badargonj	29	11	40	0.83	0.82	0.83
Mithapukur	33	7	40	1.00	1.00	1.00
Sadar	26	14	40	0.96	0.79	0.90
<u>Kurigram</u>						
Ulipur	37	3	40	0.97	1.00	0.98
Fulbari	40	-	40	1.00	-	1.00
<u>Gaibandha</u>						
Gobindagonj	23	17	40	1.00	0.82	0.93
<u>Bogra</u>						
Adamdighi	3	37	40	1.00	0.97	0.98
Sonatola	37	3	40	1.00	1.00	1.00
Dhunot	7	33	40	0.86	0.33	0.43
Sherpur	11	29	40	1.00	0.90	0.93
Shibgonj	28	12	40	1.00	1.00	1.00

Table 3 contd.

District/ upazila	Selected sample size			Proportion of actually steri- lized cases for the sample ^{1,2}		
	Tub.	Vas.	All	Tub.	Vas.	All
<u>Naogaon</u> Mohadebpur	37	3	40	1.00	1.00	1.00
<u>Jhenaidah</u> Sailkupa	39	1	40	1.00	1.00	1.00
<u>Khulna</u> Fultala	3	37	40	1.00	0.49	0.53
<u>Barguna</u> Amtoli	18	22	40	1.00	1.00	1.00
Sadar	13	27	40	1.00	0.96	0.98
<u>Tangail</u> Gopalpur	36	4	40	1.00	1.00	1.00
Modhupur	31	9	40	0.94	0.67	0.88
<u>Mymensingh</u> Gouripur	26	14	40	0.96	0.93	0.95
Iswargonj	23	17	40	0.83	0.65	0.75
Haluaghat	31	9	40	0.97	0.44	0.85
BDG Total	801	559	1360	0.91	0.84	0.92

Table 3 contd.

District/ upazila	Selected sample size			Proportion of actually steri- lized cases for the sample ^{1,2}		
	Tub.	Vas.	All	Tub.	Vas.	All
	<u>NGO STRATUM</u>					
<u>Rangpur</u> Sadar	20	20	40	1.00	0.30	0.65
<u>Dinajpur</u> Sadar	22	18	40	1.00	1.00	1.00
<u>Rajshahi</u> Sadar	29	11	40	1.00	0.18	0.78
<u>Tangail</u> Sadar	12	28	40	1.00	1.00	1.00
<u>Kushtia</u> Sadar	32	8	40	1.00	1.00	1.00
<u>Jessore</u> Sadar	11	29	40	0.91	0.90	0.90
<u>Mymensingh</u> Sadar	26	14	40	0.96	1.00	0.98
<u>Barisal</u> Sadar	14	26	40	0.93	0.85	0.88
<u>Patuakhali</u> Sadar	10	30	40	1.00	0.97	0.98
<u>Sylhet</u> Sadar	17	23	40	0.76	0.74	0.75
<u>Chittagong</u> Sadar	27	13	40	1.00	1.00	1.00
<u>Faridpur</u> Sadar	27	13	40	1.00	1.00	1.00
NGO Total	243	237	480	0.97	0.84	0.91
National Total	1044	796	1840	0.97	0.84	0.92

¹ After field survey of clients, the clients excluding those falling under the category, 'address not found', 'never sterilized clients', 'operations not done in the quarter', 'operation not done in recorded clinic', and 'sterilized twice', have been considered as actually sterilized.

² This proportional estimate will not be used to estimate upazila performance because of the small sample. Instead the aggregated samples will be used.

OFFICIAL HELPER CATEGORY

The Secretary, Ministry of Health and Population Control, in his circular No.PC/S-Coord-1/25/84/244 dated October 30, 1984 specified the "Helper" categories as follows:

"In order to ensure proper monitoring of referral of sterilization clients by the unsalaried Voluntary Referral Agents other than workers of the Ministry of Health and Population Control, other Ministries and NGOs, it has been decided that the following procedure will be followed in respect of them: -

- (i) Only the following categories of people, namely wives and husbands, brothers and sisters, mothers and mother-in-laws of clients, satisfied voluntary sterilization clients, Palli Chikitshak and Gram Doctor, listed members of registered cooperative societies and mothers' club, religious leaders, teachers and elected local officials (Members or Chairman of Union Parishad) will be eligible to refer clients and work as Referral Agents.
- (ii) There will be registration of the Referral Agents at the time of acceptance of the voluntary sterilization client they have referred, for which a separate register will be maintained in the centre.
- (iii) The separate register to be maintained in the centre should contain the name of the client, name and address of the Referral Agent, category of the agent, signature/thumb impression, date of sterilization etc.
- (iv) Such Referral Agent would be expected to provide adequate referral services namely, pre and post operative care and could be located after voluntary sterilization.

The above instructions will come into force with immediate effect and should be followed strictly".

Table 4: The key findings of the audits/evaluations of the previous quarters based only on the survey of BDG clinics

Findings	AUDIT/EVALUATION QUARTERS							
	April-June	July-Sept.	Oct.-Dec.	Janu.-March	April-June	July-Sept.	Oct.-Dec.	
	1983	1983	1983	1984	1984	1984	1984	
1. Estimated proportion of clients actually sterilized:								
Tubectomy	97.7%	97.2%	97.8%	97.0%	93.2%	97.7%	98.8%	
Vasectomy	87.6%	88.1%	91.2%	91.8%	82.3%	89.6%	91.2%	
2. Estimated overreporting(+)/underreporting(-) of the total BDG performance in the MIS data:								
Tubectomy	a	a	+3.9%	+3.2%	+2.6%	+4.5%	BDG +9.8%	NGO -5.2%
Vasectomy	a	a	+2.5%	-8.4%	-5.7%	+0.1%	BDG +8.7%	NGO -3.0%
3. Estimated average amount paid to clients actually sterilized:								
Tubectomy	Tk.107.75	Tk.104.48	Tk.107.34; & Tk.173.40 (enhanced rate)	Tk.174.25	Tk.174.05	Tk.174.09	Tk.174.37	
Vasectomy	Tk. 95.39	Tk. 94.25	Tk. 94.65; & Tk.174.56 (enhanced rate)	Tk.174.23	Tk.173.97	Tk.173.02	Tk.172.55	
4. Estimated average amount paid to service providers/referrers:								
Tubectomy	Tk. 38.00	Tk. 38.00	Tk. 38.00; & Tk. 50.00 (enhanced rate)	Tk. 50.00	Tk. 50.00	Tk. 50.00	Tk. 50.00	
Vasectomy	Tk. 36.00	Tk. 36.00	Tk. 36.00; & Tk. 47.00 (enhanced rate)	Tk. 47.00	Tk. 47.00	Tk. 47.00	Tk. 47.00	

^aData were not collected for the quarter.

AUDIT/EVALUATION QUARTERS

Findings	AUDIT/EVALUATION QUARTERS							
	April-June 1983	July-Sept. 1983	Oct.-Dec. 1983	Jan.-March 1984	April-June 1984	July-Sept. 1984	Oct.-Dec. 1984	

8.c) Estimated proportion of clients whose consent form was USAID-approved but not signed by client, among actually sterilized clients:

Tubectomy	-	-	-	-	-	-	1.2%
Vasectomy	-	-	-	-	-	-	2.6%

9. Estimated proportion of clients having USAID-approved informed consent forms signed/thumb impressed by clients among all the selected clients:

Tubectomy	91.2%	92.8%	91.6%	81.3%	94.2%	94.1%	96.4%
Vasectomy	88.9%	94.6%	89.1%	87.4%	87.3%	95.3%	89.1%

10. Proportion of clients sterilized two or more times:

Tubectomy	Nil	Nil	0.1%	Nil	Nil	Nil	Nil
Vasectomy	0.9%	3.9%	1.3%	Nil	0.9%	0.2%	0.6%

11. Mean age (in years) of clients (survey data):

Tubectomy	29.4	29.4	29.7	29.4	30.3	30.3	29.9
Vasectomy	39.1	39.7	40.0	40.3	42.3	43.1	43.7

12. Proportion of clients under 20 years old (survey data):

Tubectomy	0.8%	1.4%	0.4%	1.2%	Nil	0.5%	0.3%
Vasectomy	Nil	Nil	C.1%	Nil	Nil	0.2%	Nil

Findings	AUDIT/EVALUATION QUARTERS						
	April-June	July-Sept.	Oct.-Dec.	Janu.-March	April-June	July-Sept.	Oct.-Dec.
	1983	1983	1983	1984	1984	1984	1984
13. Proportion of clients over 49 years old (survey data):							
Tubectomy	Nil	Nil	0.2%	Nil	Nil	Nil	0.1%
Vasectomy	7.8%	12.6%	10.7%	12.3%	19.5%	22.2%	23.3%
14. Mean number of living children (survey data);							
Tubectomy	3.9	4.2	4.0	3.8	4.0	3.9	4.0
Vasectomy	3.8	3.9	3.9	3.9	4.1	3.8	4.1
15. Proportion of clients with 0-1-2 children (survey data):							
<u>Tubectomy</u>							
0	Nil	Nil	0.2%	0.5%	0.2%	0.1%	0.3%
1	3.0%	3.0%	1.8%	2.6%	1.8%	2.0%	2.7%
2	19.3%	16.2%	17.1%	18.4%	15.4%	17.8%	16.8%
<u>Vasectomy</u>							
0	Nil	0.9%	Nil	0.4%	Nil	1.7%	0.6%
1	3.5%	5.2%	3.9%	3.1%	3.0%	3.1%	3.5%
2	18.3%	14.3%	17.2%	22.7%	14.0%	17.2%	15.2%
16. Proportion of clients referred by (clinic record data) ¹ :							
<u>Tubectomy</u>							
Fieldworker		59.9%	38.6%	41.4%	45.7%	53.9%	51.0%
Dai	100.0%	21.4%	29.4%	30.8%	24.6%	25.8%	29.4%
General public		18.7%	31.8%	27.8%	29.4%	20.3%	19.6%
<u>Vasectomy</u>							
Fieldworker		59.7%	29.6%	15.2%	26.9%	22.0%	21.8%
Dai	100.0%	17.6%	27.0%	38.6%	30.4%	36.6%	36.4%
General public		22.6%	43.3%	46.2%	42.7%	41.4%	41.8%

¹ Dai payments were introduced in July 1983 and general public payments in mid August 1983.

Findings	AUDIT/EVALUATION QUARTERS							
	April-June	July-Sept.	Oct.-Dec.	Janu.-March	April-June	July-Sept.	Oct.-Dec.	
	1983	1983	1983	1984	1984	1984	1984	
17. Proportion of clients referred by (survey data) ² :								
<u>Tubectomy</u>								
Fieldworker	-	-	-	42.5%	47.4%	95.7%	42.4%	
Dai	-	-	-	31.0%	21.8%	21.7%	24.7%	
General public	-	-	-	25.9%	30.0%	21.4%	30.2%	
Went alone	-	-	-	0.3%	0.6%	0.4%	1.5%	
Does not know	-	-	-	0.2%	0.2%	0.8%	1.2%	
<u>Vasectomy</u>								
Fieldworker	-	-	-	14.6%	24.3%	26.5%	17.2%	
Dai	-	-	-	33.8%	31.0%	37.0%	21.8%	
General public	-	-	-	45.4%	39.8%	32.8%	48.4%	
Went alone	-	-	-	5.4%	3.4%	7.3%	11.1%	
Does not know	-	-	-	0.8%	1.5%	2.4%	1.5%	

¹ Tables were not prepared for first three quarters.

Table 5: Distribution of upazila-wise selected clients (unweighted) by address not found/not exist and persons providing evidences

District/ upazila	Number of address not found/non- existent clients	Helper, FPA, FWA	Helper, villagers, teacher, ward member	Helper, villagers	FWA, ward member, villagers	FPA, FWA, villagers	FPA, villagers	FPA, teacher, ward member, VDP villagers	FPA, teacher, villagers, VDP	FPA, teacher, villagers	FPA, ward member, teacher, villagers	HA, FWA, village police, teacher, chairman, villagers	HA, FWA, teacher, villagers	HA, FWA, teacher, chairman, villagers	FWA, villagers, NGO workers	FWA, chairman, villagers	Ward member, villagers	Ward member, villag peer, village doctor	Ward member, teacher villagers	Ward member, village doctor, villagers	MLSS, ward member, villagers	Dai, villagers, teacher	Villagers	
<u>Dinajpur</u>																								
Khansama	3																							
<u>Thakurgaon</u>																								
Pirgonj	1	1															2				1			
<u>Nilphamari</u>																								
Kishoregonj	1	1																						
<u>Rangpur</u>																								
Pirgacha	4																							
Pirgonj	4																							
Badargonj	2				3												2	1				1		
<u>Kurigram</u>																								
Ulipur	1																2							1
<u>Boqra</u>																								
Sherpur	1																							1
Adamdighi	1																							
Dhunot	17				2	1	1	1	2	1	5	1	1									1		
<u>Gaibandha</u>																								
Gobindagonj	2																							2
<u>Khulna</u>																								
Fultala	19	1																1						1
<u>Tangail</u>																								
Modhupur	4			1											5	9						1	3	
																						1	2	

Table 5 contd.

District/ upazila	Number of address not found/non- existed clients	Helper, FPA, FWA	Helper, villagers, teacher, ward member	Helper, villagers	FWA, ward member, villagers	FPA, FWA, villagers	FPA, villagers	FPA, teacher, ward member, VDP, villagers	FPA, teacher, villagers, VDP	FPA, teacher, villagers	FPA, ward member, teacher, villagers	HA, FWA, village police, teacher, chairman, villagers	HA, FWA, teacher, villagers	HA, FWA, teacher, chairman, villagers	FWA, villagers, NGO workers	FWA, chairman, villagers	Ward member, villagers	Ward member, village peer, village doctor	Ward member, teacher, villagers	Ward member, village doctor, villagers	MLSS, ward member, villagers	Dai, villagers, teacher	Villagers
<u>Mymensingh</u>																							
Gouripur	2				1																		1
Iswargonj	8		4		1		3																
Haluaghat	5		1				1								1	1	1						
<u>Barguna</u>																							
Sadar	1																						1
<u>Rangpur</u>																							
Sadar (NGO)	13																8						5
<u>Rajshahi</u>																							
Sadar (NGO)	9		3	6																			
<u>Jessore</u>																							
Sadar (NGO)	4		1																				3
<u>Barisal</u>																							
Sadar (NGO)	5														1								4
<u>Patuakhali</u>																							
Sadar (NGO)	1																						1
<u>Mymensingh</u>																							
Sadar (NGO)	1																						1
<u>Sylhet</u>																							
Sadar (NGO)	10						1										1					1	7
Total	119	2	5	11	6	2	7	1	1	2	1	5	1	1	2	6	25	1	1	1	1	4	33

APPENDIX - B

Interviewing schedule for the client

B. CLINIC IDENTIFICATION:

Name of the clinic : _____

Name of the NGO : _____

Address of the clinic : _____

Type of clinic: BDG clinic BAVS clinic Other NGO clinic

C. TIME:

Date of admission : _____

Date of operation : _____

Date of release : _____

D. HELPER:

Name of the helper : _____

Type of helper :

BDG FP fieldworker 1 Other NGO registered agent 6

BAVS salaried fieldworker 2

Other NGO fieldworker 3 FP fieldworker (not ascertained whether BDG or NGO) 7

BDG registered agent 4 Registered Dai 8

BAVS registered agent 5 Others _____ (specify) 9

Address of the helper : _____

E. INFORMED CONSENT FORM (ICF):

(i) Type of ICF:

USAID approved 1 BDG ICF without stamp 2

Others 3 No ICF 4 (SKIP TO F)

(ii) Signing/Thumb impression by:

Client Signed 1 Not signed 2

Physician : Signed 1 Not signed 2

Witness : Signed 1 Not signed 2

F. INFORMATION COLLECTED BY:

Name : _____

Date : _____

INTERVIEWING SCHEDULE FOR THE CLIENT

Information on Attempts

Attempt No.	1	2	3	4
Date				
Person Assisting*				
Result Codes**				
Interviewer Code				

*PERSON ASSISTING

None	1	Village Peers	5
Helper	2	Villagers	6
F.P. Worker (Govt.)	3	Ward Members	7
NGO Worker	4	Other _____ (specify)	8

**RESULT CODES

Client located	1
Address found, but no such person ever lived at that address	2
Address found, but client has permanently left that address	3
Address found, but client was only temporarily visiting there	4
Address does not exist/not found	5
Address given on forms was incomplete	6
No attempt made to locate client	7
_____ (specify reason)	
Other _____ (specify)	8

INTERVIEWER: If the result code is other than 1, write down below the reasons and collect evidences from local FWA, FPA, NGO workers, helpers, Ward Members.

Reasons: _____

Interview Information

Interview Call	1	2	3	4
Date				
Result Code*				
Interviewer Code				

*Result Codes

Completed 1

Respondent not available 2

Deferred 3

Refused 4

Others _____ 5
(specify)

Scrutinized Reinterviewed or spot checked Edited Coded

By By By By

Date _____ Date _____ Date _____ Date _____

General Information Section

101. Please tell me your name : _____

102. Do you have any other names?

Yes 1

No 2

(SKIP TO 104)

103. Please tell me all those names. (PROBE)

(Client's all other reported names)

104. What is your husband's/father's name?

(Husband's/father's name)

105. Does he have any other names?

Yes 1

No 2

(SKIP TO 107)

106. Please tell me his names.

(Husband's/father's all other names)

107. (Interviewer: Tick the appropriate box)

(a) Reported names of the respondent and those of the respondent's husband/father			
Same as recorded	<input type="checkbox"/> 1	Respondent's reported name is different from her/his recorded name	<input type="checkbox"/> 2
Respondent's husband's/father's reported name is different from that recorded	<input type="checkbox"/> 3	Others (specify)	<input type="checkbox"/> 4

108. How old are you? (Interviewer: Assist him/her in determining the exact age)

_____ years (in complete years)

109. Have you ever read in a school or a madrasha?

Yes 1 No 2

(SKIP TO 112)

110. Was the educational institute that you last attended a primary school or a secondary school or a college or a university or a madrasha or something else?

Primary school 1 Secondary school 2

College/university 3 Madrasha 4

Others _____ 5
(specify)

111. What was the highest class in that institute that you passed?

_____ Class.

112. What is your religion?

Islam 1 Hinduism 2

Christianity 3 Buddhism 4

Others _____ 5
(specify)

113. Aside from doing normal housework, do you do any other work (for cash or kind) on a regular basis such as agricultural work, making things (for sale), selling things in the market, or anything else?

Yes 1 No 2

(SKIP TO 115)

114. Did you/your wife earn any money last year by doing this work?

Yes 1 No 2

115. How old is your husband/wife? (Interviewer: Assist her/him in determining the exact age)

_____ years (in complete years)

116. Did your husband/wife ever read in a school?

Yes 1 No 2

(SKIP TO 119)

117. Was the educational institute that your husband/wife last attended a primary school or a secondary school or a college or a university or a madrasa or something else?

Primary school 1 Secondary school 2

College/university 3 Madrasa 4

Don't know 5 Others _____ 6
(specify)

(SKIP TO 119)

118. What was the highest class in that institute that your husband/wife passed?

_____ Class.

119. What is the main occupation of your husband/what is your main occupation?

Agriculture 1 Business 2

Day labour 3 Service 4

Without work 5 Others _____ 6
(specify)

120. Does your family own any agricultural land?

Yes 1 No 2

121. Now I want to ask you some other personal questions.
How many of your children are alive now?

Son _____ Daughter _____ Total _____

122. How long ago was your youngest child born? (PROBE)

_____ years _____ months.

123. Are you or is your husband/wife now using any family planning method?

Yes 1 No 2

(SKIP TO 126)

124. What is the method that you are or your husband/wife is using now?

(Name of the method)

125. (Interviewer: If the method mentioned is tubectomy/vasectomy, go to 127 and tick the box labelled sterilized)

126. a. (For female respondent ask this question): Some women have an operation called female sterilization (or tubectomy) in order not to have any more children. Have you ever heard of this method?
- b. (For male respondent ask this question): Some men have an operation called male sterilization (or vasectomy) so that their wives will not have any more children. Have you ever heard of this method?

Heard 1 Did not hear 2

(SKIP TO 204)

127. Have you yourself undergone such operation?

Sterilized 1 Not sterilized 2

(SKIP TO 204)

Clinic Verification Section

201. Do you know the name and address of the place/office/center/clinic where you were operated upon for sterilization?

Yes 1 No 2

(SKIP TO 204)

202. Please tell me the name and address of the center.

Name : _____

Address : _____

203. (Interviewer: Tick the appropriate box)

Sterilized in the recorded clinic 1 Sterilized in a different clinic 2

(SKIP TO 301)

204. Do you know or have you ever heard of the name of the following family planning office/hospital/clinic?

Name and address of the recorded clinic/hospital: _____

Yes 1 No 2

(SKIP TO 207)

205. Have you ever visited that office/hospital/clinic?

Yes 1 No 2

(SKIP TO 207)

206. Why did you visit that place? (PROBE)

207. (Interviewer: Tick the appropriate box)

Sterilized in the recorded clinic only 1 Sterilized in both recorded clinic and other clinic 2
(SKIP TO 301)

Sterilized in other than the recorded clinic 3 Not sterilized 4
(SKIP TO 301) (SKIP TO 1004)

208. It is evident that you have had two operations. Do you agree? (PROBE)

Yes 1 No 2
(SKIP TO 301)

209. Why did you go for double operation?

210. Which were those clinics where you got sterilized for the first and the second time? (PROBE)

Name of clinics:

First operation _____

Second operation _____

(SKIP TO 307)

Time Verification Section

301. How long ago were you sterilized? (PROBE)

Date _____

or _____ Days/Months/Years ago.

302. (Interviewer: Tick the appropriate box)

Within the quarter 1 Before the quarter 2

(SKIP TO 401)

303. Did you visit any clinic any time within the last
_____ month(s)?

Within the quarter (Yes) 1 Before the quarter (No) 2

(SKIP TO 401)

304. Why did you visit the center? (PROBE)

305. (Interviewer: Tick the appropriate box)

For sterilization 1 For other purposes 2

306. Did you undergo operations twice?

Yes 1 No 2

(SKIP TO 401)

307. It is evident that you have had two operations. How long ago did you have the first operation and how long ago the second? (PROBE)

First operation:

Within the quarter

Before the quarter

(Month/year ago)

Second operation:

Within the quarter

Before the quarter

(Month/year ago)

(SKIP TO 408)

Helper Verification Section

401. Did you go to the sterilization center alone or with somebody?

With somebody 1

Alone 2

(SKIP TO 404)

402. With whom did you go?

Name : _____

Type of helper: _____

Address : _____

403. (Interviewer: Tick the appropriate box)

Recorded helper 1

Other than the recorded helper 2

(SKIP TO 501)

Does not know/remember the helper 3

404. Do you know the following person?

Name and address of the recorded helper

Yes 1

No 2

Client himself/
herself 3

(SKIP TO 501)

(SKIP TO 501)

405. Did he take you to any clinic any time?

Yes 1

No 2

(SKIP TO 501)

406. Why did he take you to the clinic? (PROBE)

407. (Tick the appropriate box)

For sterilization 1 For other purposes 2
(SKIP TO 501) (SKIP TO 501)

408. a) Did _____ take you to clinic for the first
(Recorded helper)
operation? (PROBE)

Yes 1 No 2 Does not know 3

↓

With whom did you go?
Name _____
Type of helper _____
Address _____

b) Did you go with _____ (also) to clinic for
(Recorded helper)
the second operation? (PROBE)

Yes 1 No 2 Does not know 3

↓

With whom did you go?
Name _____
Type of helper _____
Address _____

Payment Verification Section

501. You have said that you underwent sterilization operation.
Did you receive any money for that?

Yes 1 No 2

(SKIP TO 506)

502. How much money did you receive? (PROBE)

_____ Amount

503. (Interviewer: Tick the appropriate box)

Received approved amount 1 Received more than the approved amount 2

(SKIP TO 519)

(SKIP TO 512)

Received less than the approved amount 3 Does not know/remember 4

504. Do you know for what items of expenses you were given the money?

Yes 1 No 2

(SKIP TO 506)

505. Please tell me what those items of expenses were.

Food charge 1 Wage loss compensation 2 Transportation cost 3

506. Were you served any food in the clinic?

Yes 1 No 2

(SKIP TO 509)

507. How many times? _____ times.
508. Was the food served free of cost or did you have to pay any money for that?
Free of cost 1 Paid for it 2
509. How did you go to the clinic?
On foot 1 Using some transport 2
(SKIP TO 512)
510. Was the fare for the transportation paid by yourself/ helper/office?
Paid by self 1 Paid by helper 2
(SKIP TO 512)
Paid by office 3 Paid by other person (Specify) _____
511. How much money was paid? _____ amount.
Does not know 1
512. For how many days/hours did you stay in the center?
_____ Days/hours.
513. Do you know the prescribed amount that is paid to each sterilization client as food charge, transport allowance and wage-loss?
Yes 1 No 2
(SKIP TO 515)

514. What is the prescribed amount? _____
(amount)

515. (Interviewer: Tick the appropriate box)

Same as reported
in Q. 502 1
(SKIP TO 517)

Different from
reported in 2
Q. 502

Did not receive 3
(SKIP TO 522)

516. Why were you paid less/more?

517. Did you receive the money Tk. _____
(reported amount)
directly from the office or through somebody?

From office 1
(SKIP TO 519)

Through somebody 2

518. Who was the person ? (PROBE)

519. After paying for the travel and food and any other costs for
sterilization, did you have any money left out of the payments
you received after the operation ?

Yes 1

No 2

(SKIP TO 522)

520. Did you spend the money on food for your family, or something else ?

For food 1

(SKIP TO 522)

For something else 2

Did not spend 3

(SKIP TO 522)

521. What did you spend it on ?

522. If the government would have given no money for sterilization, would you still have gone for sterilization at that time, or would you have waited until some later time, or would you never have been sterilized ?

Would have been sterilized at that time 1

Would have waited until some later time 2

Never 3

Surgical Apparel Verification Section

601. You have said that you underwent sterilization operation. Did you receive any saree (for tubectomy client) or lungi (for vasectomy client)?

Yes 1 No 2

(SKIP TO 701)

602. Did you receive any saree or lungi before the operation?

Yes 1 No 2

Receipt of unapproved items verification section

701. Apart from saree/lungi and money, were you given anything else for undergoing the sterilization operation?

Yes 1

No 2

(Skip to 704)

702. Would you please tell me what were those things that you were given? (PROBE)

703. Who gave you those _____ and where and when?
(mentioned items)

Items	Who	Where	When

704. Before the operation, did anybody promise you anything apart from saree/lungi and money for undergoing the sterilization operation?

Yes 1

No 2

(Skip to 710)

705. Who was the person that held out the promise?

Name : _____

Occupation : _____

Address : _____

706. What did he tell you?

707. Did you receive those items that were promised to you?

Yes 1

No 2



708. Could you please tell me the reasons why you were not given those _____ ?
 (mentioned items)

(Skip to 710)

709. Who gave you those _____ and where and when?
 (mentioned items)

Items	Who	Where	When

710. (Interviewer: Record below your opinion, if any, on the information given by the respondent)

Verification of clients satisfaction

801. Apart from sterilization a couple can use other methods to delay pregnancy. Do you know any one of those family planning methods ?

Interviewer: Do not read out any method to the respondent. Circle in column-1 all methods spontaneously mentioned by the respondent. Probe and be sure whether (s)he knows of any other method, tick column - 1 for any other method mentioned spontaneously.

802. There are methods of family planning other than those you have mentioned. I want to be sure whether you have heard of any of them ?

Interviewer: Please read out the methods the respondent did not spontaneously mention and circle response in column - 2.

803. Do you know any place or person where _____ can be obtained ?

Interviewer: Please ask about all the methods circled Yes in either column-1 or 2 and record response in column - 3

TABLE - 1							
Methods	Knowledge (Unprompted)		Knowledge (Prompted)		Knowledge of the source		
	(1)		(2)		(3)		
01 Pill	1	Yes	2	Yes 3 No	1	Yes 2 No	
02 Condom	1	Yes	2	Yes 3 No	1	Yes 2 No	
03 Injection	1	Yes	2	Yes 3 No	1	Yes 2 No	
04 IUD	1	Yes	2	Yes 3 No	1	Yes 2 No	
05 MR	1	Yes	2	Yes 3 No	1	Yes 2 No	
06 Other	1	Yes	2	Yes 3 No	1	Yes 2 No	
(Specify)							

804. What was the single most important reason why you underwent a vasectomy/tubectomy operation?
(What was the second most important reason?)

- i) It would help me be in a position to properly feed/clothe/educate care for the children I already have.
- ii) To protect my health/avoid pain of additional births.
- iii) To protect the health of my children.
- iv) To receive the cash payment and the saree/lungi.
- v) To prevent/stop additional births.
- vi) Other (record verbatim).

805. Before the operation did you know that you could not have any child after accepting sterilization?

Yes 1

No 2

806. Why did you then undertake sterilization?

807. How long had you seriously thought about having the sterilization method before you actually undertook it?

_____ Years _____ Months _____ Days

808. Did you talk to anyone who had already had a sterilization before your operation?

Yes 1

No 2

809. After you were sterilized did you suggest the sterilization method to anyone?

Yes 1

No 2

810. Would you suggest the method to anyone in the future?

811. Are you now satisfied or do you feel regret having been sterilized ?

Feel satisfied 1 Feel regret 2 Others 3

812. Why is that? _____

813. Has your marriage improved, gotten worse, or remained the same since your operation ?

Improved 1 Gotten worse 2 Remained the same 3

814. How many days after the operation was it before you were able to return to your normal work load?

_____ _____ Other: Record verbatim: _____
days

Informed Consent Form Verification Section

901. Did you give your consent before undergoing operation for sterilization?

Yes 1

No 2

(SKIP TO 903)

902. Did you sign or put thumb impression on any paper/form to indicate your consent before undergoing the operation?

Yes 1

No 2

(SKIP TO 1001)

903. (Interviewer: Please show the I.C. Form and ask)

Do you remember signing (putting your thumb impression) on a form like this before the operation?

Yes 1

No 2

Direct Verification Section

1001. (Interviewer: Check 107 and tick the appropriate box)

Reported names are the same as those recorded (SKIP TO 1008)	<input type="checkbox"/> 1	Client's reported name is different from the recorded name (SKIP TO 1002)	<input type="checkbox"/> 2
Husband's/father's name is different from the recorded name (SKIP TO 1003)	<input type="checkbox"/> 3	Others Specify _____ (SKIP TO 1002)	<input type="checkbox"/> 4

1002. Family planning office/clinic/hospital records show that you recorded your name as _____

Is that correct? Moreover, is that your name?

Yes 1 No 2
(SKIP TO 1008) (SKIP TO 1008)

1003. Family planning office/clinic/hospital records show that you recorded your husband's/father's name as _____

Is it correct?

Yes 1 No 2
(SKIP TO 1008) (SKIP TO 1008)

1004. Family planning records show that you were sterilized in _____ on _____. These records also (recorded clinic) (recorded date) show that you went to the clinic for sterilization with _____ (helper's name). Do you confirm that these records are correct?

Yes 1 No 2
(SKIP TO 1008)

1005. It means that you are sterilized. Why did you not tell this first? (PROBE)

1006. Perhaps you know that certain payments are made for food, transportation, wage-loss, etc. for undergoing sterilization operation. Have you received any such payment?

Yes 1 No 2

(SKIP TO 1008)

1007. Would you tell me how much money did you receive?

_____ Amount

1008. Interviewer: Check 804, if 'No' is ticked, tick the not sterilized box, otherwise tick the sterilized box.

Sterilized 1 Not sterilized 2

(SKIP TO 1111)

1009. (Interviewer: Request for physical verification)
Can I see the cut mark of the sterilization operation?

Yes 1 No 2

(Request again, if disagrees,
(SKIP TO 1011))

1010. (Interviewer: Make the physical verification and write the results below)

Sterilized 1 Not sterilized 2

1011. (Interviewer: If the respondent comes from the outside selected upazila then go to 1101, other wise go to 1111)

For Clients Coming From Outside the
Selected Upazila

1101. Now I would like to talk to you on a different subject. You belong to _____ upazila/thana whereas you have undergone sterilization in a clinic in _____ upazila/thana. May I know the reason? (PROBE)

1102. How can one generally go from your house to that clinic/hospital? (PROBE)

(Interviewer: List the means of transport reported by the respondent in the 'Transport' column of the table below in order) _____ how far

(For each reported means of transport) one has to travel and how much time does it take? (PROBE)

Transport	Distance (in mile)	Time (in hours)

1103. Do you know whether there is any clinic/hospital in your upazila/thana doing sterilization operations? (PROBE)

Yes 1

No 2

(SKIP TO 1108)

1104. Did you ever visit that clinic/hospital?

Yes 1

No 2

(SKIP TO 1106)

1105 Why did you visit that clinic/hospital? (PROBE)

1106 How can one generally go from your house to that clinic/hospital? (PROBE)

(Interviewer: List the means of transport reported by the respondent in the 'Transport' column of the table below in order)

_____ how far one has to
(For each reported means of transport)
travel and how much time does it take? (PROBE)

Transport	Distance (in mile)	Time (in hours)

1107. Would you please tell me the reasons why you did not go to that clinic for sterilization operation? (PROBE)

1108. In which clinic have most of the sterilization clients in your area undergone sterilization operation?

Name of the clinic _____

Address _____

1109. If anybody from your area would desire to undergo sterilization operation in future, which clinic would you recommend for him/her?

Name of the clinic _____

Address _____

1110. Why would you recommend this clinic for the sterilization operation?

1111. (Interviewer; Terminate the interview after giving thanks to the respondent and write down below if you have any comments about the respondent)

APPENDIX - B2

Interviewing Schedule for the Physician

EVALUATION OF VOLUNTARY STERILIZATION PROGRAM
INTERVIEWING SCHEDULE FOR THE PHYSICIAN

SAMPLE IDENTIFICATION											
Quarter	<input type="text"/>	<input type="text"/>	<input type="text"/>	Converted No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	Stratum	<input type="text"/>		
PSU No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	TS	<input type="text"/>	ISU No.	<input type="text"/>	Type of clinic	<input type="text"/>	Sample client No.	<input type="text"/>

PHYSICIAN IDENTIFICATION		
Name of the physician: _____		
Name of the clinic : _____		
Address : _____		
Type of clinic:	BDG <input type="checkbox"/>	BAVS <input type="checkbox"/> Other NGO <input type="checkbox"/>

CLIENT IDENTIFICATION	
Name of the client : _____	Type of operation _____
Name of the husband/father : _____	
Occupation of the husband/father : _____	
Address : _____	

INTERVIEW INFORMATION				
Interview Call	1	2	3	4
Date				
Result Codes*				
Interviewer's code <input type="text"/>				
<u>Result Codes*</u>	Completed - 1	Refused - 3	Transfer - 4	Others(specify) - 8
	not available - 2			

1. I would like to ask you some questions concerning your participation in the family planning program. I hope you will extend your cooperation in answering my questions. Please, tell me, what duties you are required to perform in relation to the family planning program.

2.

INTERVIEWER: TICK THE APPROPRIATE BOX

Include performing sterilization operation 1
(SKIP TO 4)

Do not include performing sterilization operation 2

3. Do you perform sterilization operation?

Yes 1

No 2

(SKIP TO 15)

4. Do you yourself conduct all the pre-operative tests pertaining to the client you operate?

Yes 1

No 2

(SKIP TO 6)

5. Who conducts the tests?

6. What are the pre-operative tests usually conducted pertaining to clients you operate? (PROBE)

7. Did you perform any sterilization operation during the period between _____ and _____ (or now)?
(beginning month) (ending month)

Yes 1

No 2

(SKIP TO 16)

8. Do you receive any money for performing sterilization operation?

Yes 1

No 2

(SKIP TO 15)

9. How much money do you receive for each client you operate?

(amount)

10.

INTERVIEWER: TICK THE APPROPRIATE BOX

same as the approved amount 1

Less than the approved amount 2

(SKIP TO 16)

More than the approved amount 3

11. Do you know the prescribed amount that is paid to the operating physician for a client he/she operates?

Yes 1

No 2

(SKIP TO 16)

12. What is the prescribed amount?

(amount)

13.

INTERVIEWER: TICK THE APPROPRIATE BOX

Same as the reported amount 1

Different from the reported amount 2

(SKIP TO 16)

14. Why were you paid less/more?

(SKIP TO 16)

15. Do you know that there is a fee for the operating physician for each client he/she operates?

Yes 1

No 2

16. (But) Family planning records show that you operated Mr./Mrs. _____ during the month of _____ and received Tk. _____. Would you say that the information is true?

Yes 1

No 2

(SKIP TO 18)

17. Why it is not true?

18. Thank you very much for cooperation and for giving me your valuable time.

APPENDIX - B3

Interviewing Schedule for the Clinic Assistant

EVALUATION OF VOLUNTARY STERILIZATION PROGRAM
INTERVIEWING SCHEDULE FOR THE CLINIC ASSISTANT

SAMPLE IDENTIFICATION					
Quarter	<input type="text"/>	<input type="text"/>	<input type="text"/>	Converted No.	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>
				Stratum	<input type="text"/>
PSU No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	TS	<input type="text"/>
				ISU No.	<input type="text"/>
				Type of clinic	<input type="text"/>
				Sample client No.	<input type="text"/>

CLINIC ASSISTANT IDENTIFICATION		
Name of the Clinic Assistant : _____		
Name of the clinic : _____		
Address : _____		
Type of clinic:	BDG <input type="checkbox"/>	BAVS <input type="checkbox"/>
		Other NGO <input type="checkbox"/>

CLIENT IDENTIFICATION	
Name of the client : _____	Type of operation _____
Name of the husband/father : _____	
Occupation of the husband/father : _____	
Address : _____	

INTERVIEW INFORMATION				
Interview Call	1	2	3	4
Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Result Codes*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Interviewer's code <input type="text"/>			
Result Codes*	Completed - 1	Refused - 3		
	Respondent not available - 2	Left the clinic - 4		
		Other (specify)..... 8		

1. I would like to ask you some questions concerning your duties pertaining to sterilization operation. Please tell me what duties you are required to perform for sterilization of clients?

2.

INTERVIEWER: TICK THE APPROPRIATE BOX

Assists in the performance of sterilization operation 1
(SKIP TO 5)

Does not assist in the performance of sterilization operation 2

3. Do you assist in the performance of sterilization operation?

Yes 1

No 2

(SKIP TO 13)

4. What assistance do you usually offer? (PROBE)

5. Did you offer any assistance for sterilization operation done during the period between _____ and _____ (or now)?
(beginning month) (ending month)

Yes 1

No 2

(SKIP TO 14)

6. Do you receive any money for offering assistance in the performance of sterilization operation?

Yes 1 No 2

(SKIP TO 13)

7. How much money do you receive for each client?

_____ (amount)

8.

INTERVIEWER: TICK THE APPROPRIATE BOX

Same as the approved amount 1 Less than the approved amount 2 More than the approved amount 3

(SKIP TO 14)

9. Do you know the prescribed amount that is paid to the person assisting in the performance of sterilization operation?

Yes 1 No 2

(SKIP TO 14)

10. What is the prescribed amount?

_____ (amount)

11.

INTERVIEWER: TICK THE APPROPRIATE BOX

Same as the reported amount 1 Different from the reported amount 2

(SKIP TO 14)

12. Why were you paid less/more?

(SKIP TO 14)

13. Do you know that there is a fee for the person assisting in the performance of sterilization for each client?

Yes 1

No 2

14. (But) Family planning records show that you assisted in the operation of the client Mr./Mrs. _____ on _____ and received Tk. _____.
Would you say that this record is true?

Yes 1

No 2

(SKIP TO 16)

15. Why it is not true?

16. Thank you very much for your cooperation and for giving me your valuable time.

APPENDIX - B4

Interviewing Schedule for the Helper

EVALUATION OF VOLUNTARY STERILIZATION PROGRAM

INTERVIEWING SCHEDULE FOR THE HELPER

SAMPLE IDENTIFICATION					
Quarter	<input type="text"/>	<input type="text"/>	<input type="text"/>	Converted No.	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>		<input type="text"/>
				Stratum	<input type="text"/>
PSU No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	TS	<input type="text"/>
				ISU No.	<input type="text"/>
				Type of clinic	<input type="text"/>
				Sample client No.	<input type="text"/>

HELPER IDENTIFICATION	
Name of the helper _____	Type of helper _____
Name of clinic : _____	
Address : _____	
Type of clinic: BDG <input type="checkbox"/>	BAVS <input type="checkbox"/> Other NGO <input type="checkbox"/>

CLIENT IDENTIFICATION	
Name of the client : _____	Type of operation _____
Name of the husband/father : _____	
Occupation of the husband/father : _____	
Address : _____	

INTERVIEW INFORMATION				
Interview Call	1	2	3	4
Date				
Result Codes*				
Interviewer's code <input type="text"/>				
Result Codes*	Completed	- 1	Address not found	- 4
	Respondent not available	- 2	Left the address	- 5
	Refused	- 3	Others(specify)....	8

1. Please tell me what is your main occupation. (PROBE)

(occupation)

2.

INTERVIEWER: TICK THE APPROPRIATE BOX

Govt. FP worker 1 NGO FP worker 2 Dai 3 Other occupation 4
(SKIP TO 4) (SKIP TO 4)

3. Are you a registered Dai/Agent in family planning program?

Yes No 2

(SKIP TO 6)

4. Please tell me your duties in the family planning program. (PROBE)

5.

INTERVIEWER: TICK THE APPROPRIATE BOX

Include helping of sterilization clients 1 Do not include helping of sterilization clients 2
(SKIP TO 8)

6. Do you help sterilization clients to the _____?
(recorded clinic)

Yes 1 No 2

(SKIP TO 18)

7. Why do you help sterilization clients to the clinic?

For earning an income 1 For other reasons 2
Specify

8. Have you helped any sterilization client during the period between _____ and _____ (or now)?
 (beginning month) (ending month)

Yes 1 No 2

(SKIP TO 19)

9. How many clients have you helped during that period?
 _____ Number Don't recall _____

10. Was _____ one of your clients
 (name of the recorded client)
 that you helped?

Yes 1 No 2

(SKIP TO 19)

11. Did you receive any money for helping _____ ?
 (name of the client)

Yes 1 No 2

(SKIP TO 18)

12. How much did you receive for helping the client?

_____ Don't know
 (amount)

(SKIP TO 19)

13.

INTERVIEWER: TICK THE APPROPRIATE BOX

The approved amount 1 Less than the approved amount 2 More than the approved amount 3

(SKIP TO 21)

14. Do you know the prescribed amount that is paid to the helper for a client he/she helps?

Yes 1 No 2

(SKIP TO 18)

15. What is the amount?

_____ (amount) Don't know

(SKIP TO 19)

16.

INTERVIEWER: TICK THE APPROPRIATE BOX

Same as the reported amount 1 Different from the approved amount 2

(SKIP TO 21)

17. Why were you paid more/less?

(SKIP TO 21)

18. Do you know that the helper of sterilization clients is paid a fee for each client he/she helps?

Yes 1 No 2

19. (But) Family planning records show that you helped the client Mr./Mrs. _____ during the month of _____, and received Tk. _____ for that reason. Would you say that the information is true?

Yes 1 No 2

(SKIP TO 21)

20. Why it is not true?

21. Thank you very much for your time.