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**Population and Family  
Planning Research  
Bangladesh**

**An**

**Annotated Bibliography**

**Second Edition**

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**National Institute of Population  
Research and Training, Dhaka  
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## FOREWORD

The National Institute of Population Research and Training (NIPORT) has come out with the second and enlarged edition of the "Population And Family Planning Research, Bangladesh : An Annotated Bibliography". The contents of the volume show that the nation has a vast wealth of researched information in the field of population, most of which were hitherto remained beyond the reach of most of the users and even researchers. It is gratifying to note that this compendium has filled the gap between available research findings and those who are searching for facts.

This publication is not the end but it is the beginning of a new venture to be undertaken at regular intervals for meeting the ever-increasing need. Thus, this will serve the purpose of disseminating what are known so far, about our population, our efforts in dealing with the population problem and prospects of our population programme.

The intention of NIPORT in publishing this material for use within the ongoing programme are various. The first being the improvement in its operation as it goes along. The second use is by the programme executives enabling them to monitor, modify and restructure of the programme. The third is the outside setting comprised sanctioning authorities and policymaking bodies in the Government. Such groups make decisions of wider scope, which can affect the direction of the programmes at all levels. A glance at the topics of research presented here shows that materials of wide scope are available for each of the different users. All concerned can fruitfully utilise the findings in their work.

The authors of this valuable compendium, Dr. S. Waliullah and his associate deserve our appreciation for undertaking this arduous exercise of collecting research papers, summarising them and finally bringing out each of them in the form as it is presented here.

**A. Salam**

Additional Secretary in-Charge,  
Population Control Division,  
Government of Bangladesh, Dhaka.

## PREFACE

The National Institute of Population Research and Training (NIPORT) has embarked upon a programme of dissemination of research findings among population related to policymakers, planners, programme managers and researchers in the country. This activity is again performed in two ways, through holding bi-annual research seminars and publication of annotated bibliographies at regular intervals. The first volume of the annotated bibliography was published in 1981. To meet everincreasing demand for it the National Institute of Population Research and Training (NIPORT) decided to prepare the second volume of the same with the inclusion of all available research and evaluation reports using Bangladeshi data in the field of family planning, population, and maternal and child mortality and morbidity, published up to the end of December 1982 from early sixties. In spite of our best efforts, many known reports could not be included in the volume for reasons of their non-availability. We, however, hope what at the beginning of 1984, the third volume will be published with the missing reports of the past and the new ones of 1983.

We do, however, feel that a number of short papers can be prepared on various aspects of contraceptive use pattern over the decades, methodological issues related to materials included in the volume, factors affecting contraceptive practice and fertility and future research needs.

It is gratifying to note that the USAID recognising the immense value of annotated bibliography provided support to the project. Other international agencies such as the World Bank, UNFPA, the Ministries of Planning, and Health and Population Control, Universities and non-Government organisations were evincing keen interest in the project. One of their recommendations is that sufficient number of the bibliography are necessary for circulation among Thana, District and national level programme managers in addition to policymakers, programme-planners, researchers, funding agencies including international bodies.

Dr. S. Waliullah, Director, Social Science and Demographic Research, Mrs. Farida Mabud, Senior Research Associate, NIPORT and the members of Soc. Sc. Rc. Unit staff deserve thanks for undertaking this stupendous but very useful task.

NIPORT will welcome any suggestion for improvement of this dissemination exercise from all concerned.

**Jalaluddin Ahmed**  
Joint Secretary/Director General  
NIPORT

## ACKNOWLEDGEMENT

The successful completion of the 'Annotated Bibliography, 1982 on Population and Family Planning Research in Bangladesh' is the result of the cooperation and support of a number of individuals and organisations.

On conceiving the project idea a proposal was submitted to the Government. Mr. A. Salam, Addl. Secretary-in-Charge of the Population Control Division and Mr. Jalaluddin Ahmed, the Director-General, NIPORT and the Joint Secretary, Population Control Division gave their wholehearted support to the authors and evinced keen interest throughout the project period.

The project came into being with the support of USAID, Bangladesh from where the needed fund came. This was possible due to the interest of, support and guidance received from Ms. Suzanne Olds and Dr. Carol Carpenter-Yaman of the AID. Without these continuous assistance, encouragement and support the project could not be taken in hand.

We acknowledge with thanks the job of technical editing done by Dr. Richard Reynolds. The ungrudging help, through valuable comments and suggestions, received from Mr. Jack Nelson and Dr. Moslehuddin are greatly acknowledged.

The hard work of Mrs. Sohela Sabur, Reserach Associate (Soc. Sc.), NIPORT and Mr. Azharul Islam, Research Assistant of this project is highly appreciated. They collected reports from various research institutions and organisations in Dhaka and outside Dhaka.

The authors express their appreciation of the excellent review made on the first edition of the bibliography (1980) by Dr. Andrew Fisher from which the last chapter of this edition was prepared. Similarly, the contribution of Mr. Nowab Ali, who prepared the first edition, is recognised.

We appreciate the cooperation of individual researchers and head of the various organisations/institutions from whom materials were collected. Without their assistance the coverage and size of this publication would have remained very limited.

Mr. A. Razzaque served the project with great alacrity. He maintained liaison with various persons involved in the project. Without his sincere and hard work it would have been a difficult task for us to manage the project.

Messrs M. A. Salam, M.A. Sattar, Anwar Hossain Khan and Joyнал Abedin deserve full appreciation for their secretarial help.

In spite of all our efforts we failed to check the commissions in the final print of the material and the delay in the publication, we regret it.

**NIPORT**  
Dhaka, June 1983.

**Syed Waliullah**  
**Farida Mabud**

# TABLE OF CONTENTS

(In each chapter papers are arranged chronologically from the earliest to the latest).

.....  
Introduction

1

## 1

### CONTRACEPTIVE METHODS (EFFECTIVENESS, SIDE-EFFECTS, CHARACTERISTICS OF ACCEPTORS)

Sl. No.	Authors' name	Title	Page
1.	Begum, A.I.	An IUD Study	7
2.	Croley, H.T. and others	East Pakistan IUD Retention Study (preliminary)	8
3.	Miller, R.A. and others	IUD Rejected Cases—an Example of Clinic and Client Experiences in East Pakistan	10
4.	Begum, J.A. and others	The Practice of IUD for Family Planning in East Pakistan	12
5.	East Pakistan Research and Evaluation Centre	National IUD Retention Study: East and West Pakistan	13
6.	Begum, J.A. and others	Flash-card Study (Dai-effectiveness in flash card use)	15
7.	Islam, K.	Self-removal of IUD investigation on 32 clients in Comilla, Kotwali thana	16
8.	Ahmed, G.U. and others	Second Follow-up of East Pakistan vasectomy clients	17
9.	Begum, J.A.	Some characteristics of the respondents of the slogan competition held by the East Pakistan Family Planning Board	19
10.	Huda, N. and others	A study of Vasectomy Physicians in East Pakistan	21
11.	Mannan, M.A.	A follow-up study on 100 vasectomy clients in Comilla, Kotwali thana	22

Sl. No.	Authors' name	Title	Page
12.	and others	Menstrual Regulation (MR) service (a preliminary report)	24
13.	Mannan, M.A.	The profile of an IUD clinic (A case study of Abhoy-Asram IUD clinic in Comilla, Kotwali thana	25
14.	Ali, M.H.	A study on Family Planning drop-out (conventional) Comilla, Kotwali Thana	27
15.	The Bangladesh Rural Advancement Committee	Oral pill follow-up survey : Family planning in the context of integrated rural development	28
16.	Begum, G.A. and others	A brief evaluative study on tubectomy camps (preliminary report)	30
17.	Malaker, M.	A retrospective study of the Depo-provera acceptors amongst women served by the Christian Hospitals and Clinics associated with the Christian Health Care Project	32
18.	Khan, A.R.	Some Comparisons of Injectable Contraceptives in Urban and Rural Bangladesh	33
19.	Rahman, S.	Experiences with sterilization programme in Bangladesh : What we learnt ?	34
20.	Begum, S.	Preliminary report of 200 minilaps using fallope-ring	36
21.	Khan, A.R. and others	Menstrual regulation service in Bangladesh model clinic experiences	37
22.	Begum, S.F.	Experience with abortion related admissions in Dhaka Medical College Hospital	38
23.	Begum, S.	Evaluation of female sterilization technique in Bangladesh	39
24.	Begum, S.F.	Female sterilization by minilaparotomy with Fallope-ring and modified Pomeroy's method	40
25.	Ali, M.N. and others	Observations on the effect of long-acting injectable steroid contraceptive on body functions	41
26.	Akhter, H.H.	Preliminary experience with use of Fallope-ring along with culdoscopic tube ligation procedure	42

Sl. No.	Authors' name	Title	Page
27.	Malakar, M. and Nokrek M.	Depo-provera injectable contraceptive fertility control technique through hospitals and dispensaries affiliated to the Christian Health Care Project	43
28.	Khan, A.R. and H.A. Ali	Pregnancy termination by vacuum aspiration and D.C. for 344 patients at model clinic, Mohammadpur, Dhaka	45
29.	Khan, A.R.	Tubal ligation by fallope-ring application	46
30.	Huber, D.H. and others	Injectable contraceptives in six villages of Matlab Thana, Bangladesh : Initial experiences	47
31.	Khan, A.R.	The long-term effects of pill use	49
32.	Rahman, A. and others	A study on 518 male sterilization cases at BAVS, Dhaka	50
33.	Chowdhury, M. I. and others	Use pattern of oral contraceptive in rural Bangladesh, a case study of Sulla	52
34.	Osteria, T. and others	The demographic impact of sterilization in Matlab village based on MCH-FP Programme	53
35.	Rahman, M. and others	A follow-up survey of sterilization acceptors in Matlab, Bangladesh	54
36.	Huber, D.H.	The condom in rural Bangladesh : Problems and Prospects	55
37.	Bhatia, S. and others	A follow-up survey of sterilization acceptors in the modified contraceptive distribution project	57
38.	Measham, A. and others	A comparative study of regular and low dose oral contraceptive in Dhaka	58
39.	Khan, A.R. and Ahmed, G.	Client characteristics of Pomeroy and tubalring, The two types of tubectomy in Kalihati Thana Health Centre, Tangail	59
40.	Huber, D.H.	Effects of hormonal contraceptive on breast milk and child growth	60
41.	Begum, S. and others	Preliminary result of trial of collatex sponge in Muhammadpur Model Clinic, Dhaka	61

Sl. No. Authors' name	Title	Page
42. Malaker, M. Nokrek, M.	Popularity of Injectable method among Bangladeshi women	63
43. Khan, A.R. and others	A comparative study of Copper 'T' 220c and Lippes Loop-C	64
44. Bhuiyan, N. and others	Characteristics of abortion cases admitted in Chittagong Medical College Hospital in 1978	65
45. Huber, D.H. and others	Vitamin and placebo treatment of oral contraceptives side-effects	66
46. Begum, S.	Early experiences with the use of post-partum lippes loop in Dhaka Medical College Hospital	68
47. Jabeen, S. and others	Effect of injectable 'Noristerat' on the liver test of Bangladeshi Women (Preliminary report)	69
48. Ishaq, M.	Effect of Noristerat on Serum and electrolytes : A Study on a group of Bangalee women	70
49. Khan, A.R. and others	Experience with Norethisterone Enathate injectable contraceptives	71
50. Becker, S. and others	Pilot study of the Calendar Rhythm method in the Matlab area of Bangladesh	72
51. Obaidullah, M.	Contraceptive retention behaviour in Rural Bangladesh	74
52. Khanam, Z.	Early experience with Noristerat	75
53. Begum, S. and others	Female sterilization at BAVs clinic, Dhaka	76
54. Khatun, S. and others	Injectable contraceptives in Rural Bangladesh	77
55. Bairagi, R. and others	Oral contraceptives in Rural Bangladesh : a comparative study of two types of pills	78
56. Chowdhury, T.A.	Preliminary report on the use of the Noristerat as a contraceptive in 100 consecutive self-motivated users in a private clinic	80
57. Islam, S.	Indigenous abortion practitioners (IAP) in rural Bangladesh	81

Sl. No.	Authors' name	Title	Page
58.	Rahman, A.	Development of safe anaesthesia in voluntary surgical contraception	83
59.	Barua, B.B.	Evaluation of M.R. services in Bangladesh	84
60.	Ali, N. and others	Follow-up study of the drop-outs of injectable contraceptive, Noristerat	86
61.	Begum, S.F. and others	A clinical trial of Neo-sampon vaginal contraceptive tablets	87
62.	Ahmed, G.U. and others	Characteristics of female sterilization acceptors of some selected clinics of Bangladesh	88
63.	Rahman, S.	Use of herbal medicines as contraceptives	89
64.	Waliullah, S.	Abortion patterns of the medical college hospitals and a clinic in Bangladesh	91
65.	Akhter, H.H.	Subsequent birth control activities of the women undergoing abortion and of other family planning clients	92
66.	Measham A.	The demographic impact of tubectomy in Bangladesh	94

## 2

### CORRELATES OF FERTILITY BEHAVIOUR : DEMOGRAPHIC, SOCIO-ECONOMIC

Sl. No.	Authors' name	Title	Page
67.	Roberts, B.J. and others	A post-operative study of ligatees in Dhaka, East Pakistan	96
68.	Stoeckel, J. and others	The impact of the 'Organizer approach' to family planning on fertility in Comilla	97
69.	Ali, M. H.	Factors related to the effectiveness of field function in family planning programme	99
70.	Chowdhury, R.H.	Labour force status and fertility	100

Sl. No.	Authors' name	Title	Page
71.	Langsten, R.	The demographic situation in Companygonj findings 1975 and implications	101
72.	Duza, M.B. and others	Dynamics of family and fertility : A comparative study of low and high fertility couples in Chittagong	102
73.	Population Control and FP Division	Bangladesh fertility survey	103
74.	Waliullah, S.	Family size preferences among graduate and post-graduate students of Bangladesh	105
75.	Ali, R.	Personality factors related to early, late and non-adoption of family planning services	106
76.	Karim, K.B.	Socio-economic study of three villages under Zero Population Growth Programme in Bogra district	108
77.	Khatun, S. and Begum, K.	Population change : Education and housing requirements in village Jirabo	110
78.	Mosley, W.H.	The effects of nutrition on natural fertility	112
79.	Hussain, M.K.	Pattern of population growth and its characteristics, their impact on rural development with special reference to role of women in some selected areas of Bangladesh	113
80.	Chowdhury, R.H.	Education and fertility in Bangladesh	115
81.	Haque, N.	Population growth and its impact on agricultural pattern : A case study in Doshpara, Bangladesh	116
82.	Elahi, K.M.	Some geographic characteristics of Savar villages : A micro-scale study	117
83.	Akbar, M. Ali and Halim M.A.	Socio-economic factors affecting family size norms and fertility pattern in Bangladesh	119
84.	Bangladesh Rural Advancement Committee	Manikganj baseline demographic and socio-economic survey, 1977	121

Sl. No.	Authors' name	Title	Page
85.	Ahmed, S.	Fertility, infant-mortality and socio-economic status of rural women: A case study of the districts of Chittagong	122
86.	Ahmed, B.U.	Differential fertility in Bangladesh	123
87.	Abedin, S.	Differential fertility and birth expectations: A case study of married women in rural Bangladesh	124
88.	Lewis, L.H. and others	A review of changes in prevalence and pattern of contraceptive use in Bangladesh since 1976	126
89.	Alauddin, M.	Rural development and family planning behaviour in Bangladesh village	127
90.	External Evaluation Unit, Planning Commission	First follow-up study of four concentrated thana project	130
91.	Rahman, M. and others	Household distribution of contraceptives and its impact on fertility	131
92.	Akbar, M.A.	A study of the constraints of service delivery system in Bangladesh	133
93.	Ahmed, S.	Fertility levels and differentials in Bangladesh: A macro-level analysis	135
94.	Mabud, M.A. and others	Retrospective study of fertility and contraceptive behaviour in Mymensingh district	137
95.	International Centre for Diarrhoeal Disease Research, Bangladesh	Determinants of natural fertility study methods and descriptive tables for the prospective study	139
96.	Ahmed, G.U. and Muhuri, P.K.	Contraceptive use differentials of the currently married fecund women of rural Bangladesh, 1980-81	141
97.	Waliullah, S. and others	Bangladesh contraceptive prevalence survey, 1979	142
98.	Management Information System Unit, Population Control Division	Bangladesh contraceptive prevalence survey, 1981	144

Sl. No. Authors' name	Title	Page
99. Mia, A. and others	Psychological and cultural elements of family planning behaviour : A study of individual modernity and family planning (preliminary report)	146
100. Phillips, J.F. and others	The demographic impact of the two contraceptive service projects in Matlab thana : A synopsis of Key findings	148
101. Stoeckel, J. and others	Fertility trends in Comilla, Kotwali thana	149
102. Khan, M.R.	Some population characteristics and fertility differential in four micro-regions of Bangladesh : Some results from the study of the reproductive behaviour and poverty in Bangladesh	151
103. Waliullah, S. and others	The slogan for two child family : The ideal and the actual	154
104. Muniruzzaman, A.N.M. and others	Demographic survey in East Pakistan, 1961-62	156
105. Maloney, C. and others	Beliefs and fertility in Bangladesh	157
106. Family Planning Social Marketing Project	Consumer study of condom users	159
107. Bhatia, S. and others	Peer pressure and the use of contraceptive sterilization in rural Bangladesh	160
108. Ahmed, N.R.	Family size and sex preferences among women in rural Bangladesh	162
109. Sabir, A.A.	Factors related to family planning acceptance in rural Bangladesh	163
110. Rahim, M.A.	Determinants of contraceptive use in Bangladesh (a multivariate analysis)	164

### 3

#### SERVICE DELIVERY PROGRAMMES (METHOD, PROCEDURES, EVALUATION)

Sl. No.	Authors' name	Title	Page
111.	Khan, A.H. and others	An experimentation in commercial distribution of contraceptives in Pakistan villages (family planning)	167
112.	Miller, R.A. and others	Survey of the sales of contraceptives by pharmacies of Dhaka, East Pakistan	168
113.	Zeidenstein, S.	IRDP pilot project on population planning and rural women's co-operatives : First and second report	170
114.	Evaluation Unit, Population Section, Planning Commission	A brief evaluation report on rural mothers club and rural women's cooperative programme, Dhaka	172
115.	Khan, A.R. and others	Household contraceptive distribution in rural Bangladesh (six months' experience at Cholera Research Laboratory)	173
116.	McCord, C.	What's the use of a demonstration project?	174
117.	Waliullah, S.	Report of the task force II on research inventory and analysis of family planning communication research in Bangladesh	176
118.	Khan, A.R. and others	Household distribution of Contraceptives in Bangladesh—the rural experience	179
119.	Mia, A.	An assessment of family planning services in Dhaka city	181
120.	McCarthy, E.F.	IRDP pilot project in population planning and rural women's co-operatives. Third report, May 1976-June 1977	183
121.	Souza, Stan D. and others	Socio-economic differentials in Mortality in a rural area of Bangladesh	184

Sl. No.	Authors' name	Title	Page
122.	Population Services International, Dhaka, Bangladesh	Report on price study of contraceptive	185
123.	Osteria, T. and others	Assessment of the contraceptive distribution project : Implications for programme strategy	187
124.	Population Control and F.P. Division	Location analysis and evaluation of service delivery system for union family welfare centres in Bangladesh	188
125.	Khanam, S.	Evaluation of the project 'Happy Family' and population control monitored by Radio Bangladesh in its national programme	189
126.	Islam, R.	Evaluation of the Comilla Unit of Demonstrating Project (an Analysis of Records)	190
127.	Family Planning Social Marketing Project	Grass-root level marketing of SMP products : A case study of Kishoreganj thana	191
128.	Bhatia, S. and others	The Matlab Family Planning Health Services Project	192
129.	Begum, S. and others	Study of delivery services and obstetric case related admissions in Azimpur Maternity and Child Welfare Training Institute, Dhaka	193
130.	Obaidullah M.	Assessment of the Bangladesh Contraceptive social marketing project : Methodology and Basic Data	194
131.	Obaidullah M.	Household contraceptive distribution evaluation study	195
132.	Huber, H.D. and others	Contraceptive distribution in Bangladesh villages : The initial impact	196
133.	Begum, S.F.	Experience with reproductive care and services in Dhaka Medical College Hospital	199
134.	Rahman, M. and others	Contraceptive distribution in Bangladesh : Some lessons to be learned	200

Sl. No.	Authors' name	Title	Page
135.	Khan, A.R. and others	Indigenous birth practices and the role of traditional birth attendance in rural Bangladesh	201

#### 4

### POPULATION COMMUNICATION EDUCATION, INFORMATION ACTIVITIES

Sl. No.	Authors' name	Title	Page
136.	Croley, H.T.	Rural action study on family planning	203
137.	Roberts, B.J. and others	Family planning survey in Dhaka, East Pakistan	204
138.	Yaukey, D. and others	Couple concurrence and empathy on birth control motivation in Dhaka	206
139.	Waliullah, S. and others	Use and effectiveness of printed family planning communication materials	207
140.	Waliullah, S.	Modernity characteristics of local leaders and the family planning programme in Bangladesh	209
141.	Institute of Education and Research, Dhaka University	Population Education in Bangladesh	211
142.	Mannan, M.A.	Intensive family planning information and service delivery campaign	212
143.	Sorker, N.R.	Meaning of selected concepts used in family planning communication	213
144.	Howie, I. and others	Population education through Rural cooperatives: A pilot project in Comilla	214
145.	Mia, A.	Innovative social welfare community development approaches to family planning: A micro-study in Bangladesh	215
146.	Population Planning Cell, Radio Bangladesh Ministry of Information and Broadcasting	Evaluation of 'Sukhi Sangsar': A family planning motivational programme of Radio Bangladesh	216

Sl. No.	Authors' name	Title	Page
147.	Haq, M.N.	The pattern of reaction within the school-going children as an effect of mass media family planning publicity	219
148.	National Foundation for Research on Human Resource Development, Dhaka	Towards establishing planned family planning as a way of life in Bangladesh	220
149.	Haq, M.N. and others	Guidelines for development of IEM materials	222

## 5

### ATTITUDES, AWARENESS AND INTEREST IN FAMILY PLANNING PROGRAMME

Sl. No.	Authors' name	Title	Page
150.	Zaidi, W.H.	A survey of the attitude of the rural population	224
151.	Yaukey, D.	Husbands vs wives responses to a fertility survey	226
152.	Green, L.W. and others	Family Planning Knowledge and attitude surveys in Pakistan	227
153.	Chen, L.C. and others	A prospective study of birth interval dynamics in rural Bangladesh	228
154.	Amin, R. and others	Radio and family planning—A survey report	230
155.	Ratcliffe, J.W. and others	Factors related to vasectomy in East Pakistan	231
156.	Quddus, A.H.G. and others	Follow-up study of the vasectomy clients in East Pakistan	233
157.	Radelfinger, S.F. and others	Personal influence and IUD status in East Pakistan	235
158.	Ahmed G.U. and others	A study of wives of East Pakistan vasectomy clients, 1969	236
159.	Pakistan Family Planning Council	Pakistan National Impact Survey, 1968-69	238

Sl. No.	Authors' name	Title	Page
160.	Ahmed, M.U.	Attitudes of the teachers, guardians and students towards population and family life education	241
161.	Population Service International, Dhaka	Study report on knowledge, attitude and practice of family planning	243
162.	Waliullah, S. and others	A family planning study in Basteo areas of Dhaka city	245
163.	Chowdhury, R.H.	Attitudes of some elites towards introduction of abortion as a method of family planning in Bangladesh	246
164.	Keith, F.S. and others	Impact of family planning through village leadership (an experimental project)	247
165.	Waliullah, S.	Coitus and its frequency	249
166.	Islam, M. N.	Diffusion of innovations in birth control Devices : A study in rural urban contact	250
167.	Hossain, M. Z. and others	Guidelines for activating opinion leaders in population communication (report of Task force IV)	251
168.	Sarkar, N.R. and others	Stereo-types about vasectomised men among the University students	253
169.	Huffman, S.L. and others	Nutrition and post-partum amenorrhoea in rural Bangladesh	254
170.	Population services International	Report on price study of contraceptives in Dhaka	255
171.	Hasan, M.S.	Family planning of youth : Concern about population and intention to limit family size (a rural-urban comparative study)	256
172.	Haq, M.N. and others	Attitudes of industrial and plantation workers towards family planning	257
173.	Sorcar, N.R.	An enquiry into the knowledge of attitudes toward practice gap in family planning	259

Sl. No.	Authors' name	Title	Page
174.	Mia, A.	Ligation and abortion as methods of birth control : A survey of the experience and opinion of the people of two selected areas	260
175.	Population section Evaluation Unit, Planning Commission	Family planning habits among the officers and staff of the Ministry of Planning	261
176.	Mahmud, M.M.	Attitude of village leaders towards family planning (a case study of Hathazari thana in Chittagong)	264
177.	Haq, M.N.	Attitude of the school going adolescents towards parental birth control	265
178.	Langsten, R. and others	Constraints on use and impact of contraceptive in rural Bangladesh	266
179.	Bangladesh Family Planning Association	Population communication, Education information, activities : A report on Film show campaign	267
180.	Mia, A. and others	Family planning aspects of vocational training for women : Baseline survey report	268
181.	RESP unit, Directorate of Population Control and Family Planning	A baseline KAP survey on family planning in labour welfare centre	270
182.	RESP, unit, Directorate of Population Control and Family Planning	Women's functional literacy programme use of model farmers and cooperative managers	272
183.	RESP unit, Directorate of Population Control and Family Planning	A baseline evaluation of contraceptive use patterns in three population pilot schemes in rural Bangladesh	273
184.	Langsten, R. and others	Constraints on use and impact of contraceptives in rural Bangladesh : Some preliminary speculations	274

Sl. No. Authors' name	Title	Page
185. Osteria, T. and others	An areal analysis of family planning programme performance in rural Bangladesh	275
186. Ali, N.	A study on rural sex habits and birth control in Bangladesh	276
187. Rahman, A.S.M.M.	Social and attitudinal correlates of cotraceptive non-adoption among Bangladeshi women	278
188. Population Education Programme, Ministry of Education	A study of knowledge in and attitudes towards population education and practice of family planning of teachers	279
189. Chowdhury, R.H.	Socio-cultural factors affecting practice of contraception in a metropolitan urban area of Bangladesh	281
190. Zapport, Bangladesh Ltd.	Report on cinema—Audiences acceptability of SMP/PSI films on Raja and Maya	283
191. Banu, K.	Opinions of women about family planning publicity through radio : An exploratory study in Dhaka, Bangladesh	284
192. Zaman, S.S. and others <sup>1</sup>	Psychological and Socio-cultural factors related to attitudes towards family planning	286
193. Ghaffar, S.	Studies on attitude towards breast-feeding among the women of urban areas in Bangladesh (Dhaka cit.)	287
194. Satter, E.	The attitude of Bangladeshi villagers towards family planning	289
195. External Evaluation Unit Planning Commission	First follow-up survey and the use of audio-visual vans in Population activities	290
196. Population Education Programme, Ministry of Education	A study of knowledge in and attitude towards population issues and population education of different levels of students	292
197. Obaidullah, M. and others	Social dynamics of abortion service in rural Bangladesh	294
198. Islam, A.N.M.A.	Factors affecting adoption of family planning methods in a selected rural area of Bangladesh	295

Sl. No.	Authors' name	Title	Page
199.	Rahman, M. and others	An evaluation of the industrial family planning projects	297
200.	Khuda, B.E.	Family planning in rural Bangladesh	299
201.	Ali, M.H. and others	Baseline survey on current fertility level and the contraceptive practice status of the personnel of NIPORT	300
202.	Rosenberg, M.J. and others	Attitudes of rural Bangladesh physicians towards abortion	301

## 6

### TRAINING PROGRAMMES (EVALUATION, FOLLOW-UP COMPARATIVE) AND FIELD WORKERS' PERFORMANCE

Sl. No.	Authors' name	Title	Page
203.	Croley, H.T. and others	Characteristics and utilization of midwives in a selected rural area on family planning	303
204.	Nelson, J.H. and others	Characteristics and job practice associated with successful female village organisers in Joydebpur	305
205.	Quddus, A.H.G. and others	The unofficial vasectomy agents of East Pakistan	306
206.	Rahman, M. and others	Evaluation of Kashimpur project	308
207.	National institute of population Research and Training (NIPORT)	Attitude and practice of contraceptive among married working and non-working women in a selected area of metropolitan city of Dhaka	309
208.	Mabud, M.A.	Performance of family planning assistants and family welfare assistance under family planning scheme (1975-78)	310
209.	Bangladesh Family Planning Association	Evaluation of sterilization campaign	312
210.	Rahman, M. and others	A study of the field worker performance in the Matlab contraceptive distribution project	313

<b>Sl. No.</b>	<b>Authors' name</b>	<b>Title</b>	<b>Page</b>
211.	RESP Unit, Directorate of Population Control, 1978	A study on the performance and training of field workers (FPAs and FWAs)	314
212.	Evaluation Unit, Population Section, Planning Commission	An evaluative study on family welfare visitor training programme	316
213.	Waliullah, S. and others	Dual Record approach to evaluation of FWA performance in service statistics areas	318
214.	Evaluation Unit, Population Section, Planning Commission	A brief evaluation report on rural women's cooperative programme	319
215.	Bangladesh Family Planning Association, Dhaka, 1978	An assessment of a training course	320
216.	Islam, R.	Evaluation of the Comilla Unit of Demonstrating project (an analysis of records)	321
217.	Bangladesh Fertility Research Programme, Dhaka, 1979	Evaluation of a minilap sterilization programme in Bangladesh (July 1976—January 1978)	322
218.	Begum, K. and others	Influence of working women's occupation on their family life	323
219.	Akhter, F.	Women's functional literacy programme and use of model farmers and cooperative managers	325
220.	Population Education Programme, Ministry of Education, Dhaka	Evaluation of population training workshop of different level of teachers	327
221.	Satter, M.A.	Evaluating family planning programme effectiveness and efficiency—A case study of operation research project	328
222.	Chowdhury, A.H.	Dynamics of population control : A motivation study in rural Bangladesh	330
223.	Mia, A. and others	Evaluation of population education project in agriculture sector	332

Sl. No.	Authors' name	Title	Page
224.	Rahman, A.S.M.M.	Family planning management : A study on managerial aspects relating to performance of family planning field workers	335
225.	Quddus, A.H.G.	Performance of family welfare assistants, Bangladesh	336
226.	RESP Unit, Directorate of Population Control, Dhaka	Role of agricultural extension agents in population activities : Baseline survey	338
227.	Rahman, M.	A study of the field worker performance in the Matlab contraceptive distribution project	339
228.	Waliullah, S. and others	Family welfare visitors (FWVs) household visit pattern	341
229.	Population Education Programme, Ministry of Education, Dhaka	Evaluation of different aspects of population education curriculum for teachers' training colleges in Bangladesh	343
230.	Karim, R. and others	Family planning programme (a study on the recorded clients of rural Bangladesh)	345
231.	Hossain, M.K.	An economic evaluation of the operational working of the union family welfare centres of Ghatail thana under Tangail district and those in some other selected thanas of Bangladesh	346
232.	National Foundation for Research on Human Resource Development	The Ulashi villages : A summary report of three villages studied	348
233.	Osteria, T.	Assessment of the Matlab contraceptive distribution project : Implication for programme strategy	349
234.	Mosleh Uddin, M. and others	Programme implementation of selected pilot projects in family planning	350

Sl. No.	Authors' name	Title	Page
235.	Ahmed, G.U. and others	An evaluation of the pathfinder fund sponsored menstrual regulation training in Bangladesh	352
236.	Rahman, S.	Determinants of the utilization of maternal child health services	355
237.	Ahmed, G. U. and others	Supervisory roles of Thana Family Planning Officers, Family Planning Assistants and local formal leaders	357
238.	Mannan, M. and others	First follow-up study on use of women's vocational training programme for population activities	359
239.	Siddiqui, A.N. S.K. and others	Population Planning in the organized Sector	361
240.	Siddiqui A.N. S.K. and others	Use of rural mothers' clubs in population activities	363
241.	Siddiqui A.N., S.K. and others	Use of the Audio-visual Vans in population activities	364
242.	Muhuri, P.K. and others	An evaluation of IRDP Pilot project in population planning and rural women's cooperative	366
243.	Rahman, B. and others	An evaluation on Mobile Population Education team	369
244.	Waliullah, S. and others	Evaluation of Multi-sectoral Training programme of the trainees and its subsequent impact on acceptance of family planning by them and their performance in the field	371

## 7

MORTALITY : INFANT AND MATERNAL  
MORTALITY IN RELATION TO FERTILITY

Sl. No.	Authors' name	Title	Page
245.	Gescho, C. and others	Maternal mortality in rural East Pakistan	374
246.	Stoeckel, J. and others	Fertility, infant mortality and family planning in rural Bangladesh	375
247.	Chowdhury, A.K.M.A.	The effects of child mortality experience on subsequent fertility : An empirical analysis of Pakistan and Bangladesh data	377
248.	Swenson, I.	Early childhood survivorship relating to the subsequent inter-pregnancy interval and outcome of the subsequent pregnancy	379
249.	Ahmed, S.	Fertility infant mortality and socio-economic status of rural women : A case study of the district of Chittagong	381
250.	Chowdhury, A.K.M.A.	The recent trends in fertility and mortality in rural Bangladesh, 1966-1975	382
251.	Sattar, A.	Infant and child mortality experience and family planning acceptance rates in Bangladesh—A case study of the retrospective survey data	384
252.	Rahman, S.	The Neo-natal mortality pattern in rural Bangladesh	385
253.	Islam, M.S.S.	Fertility and child mortality estimates for Bangladesh, based on pregnancy history data	387

Sl. No.	Authors' name	Title	Page
254.	Islam, M.S.S and others	Infant mortality in rural Bangladesh : An analysis of causes during neo-natal and post-neo-natal period	389
255.	Rahman, S.	The effect of traditional birth attendant and tetanus toxoid in the Production of neo-natal mortality	391
256.	Chowdhury, A.K.M.A.	Infant deaths, determinants and dilemmas : A cohort analysis for rural Bangladesh	393
257.	Begum, S.F.	Abortion and maternal mortality	394
258.	Rahman, M.	Reduction of neo-natal mortality by immunization of non-pregnant women and pregnant women in rural Bangladesh	396

## 8

### OTHERS (MIGRATION, MCH, ETC.)

Sl. No.	Authors' name	Title	Page
259.	Chen Lincoln, C. and others	Demographic change and trends of food production and availabilities in Bangladesh (1960-74)	398
260.	Curlin, G.T.	Demographic crisis : The impact of the Bangladesh War of Liberation (1971) on births and deaths in a rural area of Bangladesh	400
261.	Sirageldin, I.	Family planning in Bangladesh : An empirical investigation	402
262.	Ruzicka, L.T.	Demographic surveillance system : Matlab, Volume five vital events, migration and marriage	403
263.	Chowdhury, A.K.M.A.	Double round survey on pregnancy and estimates of traditional fertility rates	404

Sl. No.	Authors' name	Title	Page
264.	Khan, A.M.	Migration status and urban fertility in Bangladesh (a sample study in Chittagong City)	405
265.	Ruzicka L.T. and others	Demographic surveillance system Matlab Vol. 4 : Vital events and migration	407
266.	Cholera Research Laboratory	Demographic surveillance system Matlab methods and procedure	408
267.	Ruzicka, L.T. and others	Demographic surveillance system—Matlab	409
268.	Ruzicka, L.T. and others	Demographic surveillance system—Matlab : Vital events and migration, 1974	410
269.	Population Control and Family Planning Division	Survey of health, MCH and Family Planning infrastructure in Bangladesh	412
270.	Bhatia, S. and others	Indigenous birth practice in rural Bangladesh and their implications for a maternal and child health programme	414
271.	Abedin, S.	Child-spacing and birth control practice in rural Bangladesh : A case study	415
272.	Khuda, B.E.	Nuptiality in rural Bangladesh	417
273.	Kabir, M. and others	Population growth and food production in Bangladesh	418
274.	Khuda, B.F	Economic value of children in rural Bangladesh	420
275.	Chowdhury, R.H. and others	Female status in Bangladesh	422

## 9

### REVIEW OF THE RESEARCH AND THEIR POLICY IMPLICATIONS

424

# 10

A REVIEW OF BIBLIOGRAPHY—1981 433

CORRIGENDUM 439

AUTHORS' INDEX

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## INTRODUCTION

Bangladesh has a plethora of studies in the population field. These studies contain valuable information for all concerned. It is also felt that planners, policymakers and others do not have the time required to go through all available research reports, unless the key findings and recommendations are synopsized and offered in a compendious form. In order to overcome this problem arising out of lack of facility for easy access to research findings on the one hand, and the voluminous reports on the other; the National Institute of Population Research and Training (NIPORT) has taken up the responsibility of publishing an annotated bibliography summarising the key findings of many of the earlier studies. It was, in fact, a maiden venture of a large magnitude and was, therefore, not free from lapses. Inconsistencies particularly in format, objectives, methodology, findings, and recommendations were not presented in a standardized form.

The formulation and assimilation of bibliographic references and research evaluations have come a long way since liberation. The first such attempt was made in 1972 when the proceedings of national seminar on family planning was published. The first annotated bibliography was published in March 1979 by a Task Force but in a short form and with limited objectives, under the auspices of UNESCO/UNFPA/Bangladesh Ministry of Information and Broadcasting. This bibliography was published by Research, Evaluation, Statistics and Planning Unit (RESP) of the PCFP Division, Government of Bangladesh.

The next volume was a larger one, published in 1981, consisting of all available research reports published since 1963. It should also be taken into consideration that many of the old research reports are not available now for inclusion in this volume. Copies of the 1981 volume had quickly exhausted but requests were made for copies of research

bibliographies by national and international agencies. Apprehending this need the National Institute of Population Research and Training (NIPORT) approached the United States Agency for International Development (USAID) for funds to meet the cost of publishing the present volume. Under an agreement signed between the Government of the People's Republic of Bangladesh (GOB) and the USAID fund has been provided for the cost of preparation and publication of a new volume out of the Operation Research Fund. USAID readily agreed to support the project as they did for the volume of 1981. The findings, opinions, and policy recommendations presented in the report do not necessarily represent the views or policies of the United States Agency for International Development or that of the Population Control Division of the Government of Bangladesh.

**The Second volume covers the following objectives :**

- (a) to review the existing studies published in the previous bibliography and arrange them to the extent possible; according to the standard format;
- (b) to enlist new population and family planning related studies conducted during 1980-81, collect and summarise them in an abstract form and to arrange them in one standardized format for publication;
- (c) to disseminate widely the major findings and implications of the research studies, which provide direct suggestions for service delivery programme of the population control programme managers, and researchers, and;
- (d) to prepare an updated bibliography and to widely disseminate this publication to all concerned.

Activities related to the first objective of this volume necessitated the development of a format in which each of the research reports would be produced (as the first volume was lacking consistency and had omissions). The format followed in this volume is as follows: (a) objectives of the reported study, (b) methodology, (c) major findings, (d) programme implication and recommendations, if available. Title of the report, name of author(s), institutional affiliation of the author(s), and time period of the reports are

also recorded in each report published here. Consequently each of the published research reports in the first volume were reviewed and rewritten in the standardized format which constituted the major time-consuming activity of the project. In the process of reviewing reports it was found that as many as 24 materials published in 1981, were on subject matters unrelated to researched data. These are, therefore, excluded from this volume.

In an effort to enlist and collect copies of the new population and family planning related studies conducted during 1981-82, and to summarise them in standardized format all relevant institutions, organisations, agencies including universities, involved in population/family planning research throughout the country were visited by a project staff. In cases where a research report could not be collected because publishers were unable to spare a copy one project official summarised them in the given format whenever it was available. It was a difficult task of contacting persons concerned from whom reports were to be collected. In all cases more than one visit was necessary and in over fifty per cent of the cases several visits were to be made. In this process 54 new study reports were collected. Subsequently, all of them were prepared in the newly developed format. The highlight of this volume lies in the inclusion of two major studies i.e. the Bangladesh Contraceptive Prevalence Survey (BCPS-1979), and the National Contraceptive Prevalence Survey (NCPS-1981).

Having completed all the abovenoted exercises, this volume includes a total of 275 annotated reports, 221 from the first volume and 54 from the new ones. The new entries also include some publications of 1981 and some of the missing ones of the 1963-1980 period.

The population related studies and reports collected for this bibliography are arranged in eight chapters according to the subject area, and each chapter contains materials in a chronological order for the benefit of readers. Hopefully, this kind of arrangement will enable the reader to become familiar with the historical process of various population and family planning programme development related research of Bangladesh.

In the review section of 1981 volume it was noted that "very few of the studies ever reported findings from a second follow-up study". Since the publication of 1981 volume of the bibliography, six follow-up studies were completed and are at the final stage of publication. All these studies are included in this volume.

There has been a number of research reports prepared out of the Bangladesh Fertility Survey-1975, but few of these are available in Bangladesh for an abstract as these could not be traced.

Chapter-I consists of research studies on contraceptives from the early sixties to the present time. These research studies were conducted by individual researchers, various research institutes/organisations including Population Control Division, Planning Commission, Universities, ICDDR, BFRP, BARD, and various Government and voluntary organisations. Two broad divisions were made in this chapter according to the content of the research studies, viz. (i) Contraceptive Technology (including effectiveness of various methods, side-effects, socio-economic and demographic characteristics of acceptors of conventional/traditional and clinical procedures), (ii) follow-up and evaluative research studies on contraceptive methods and acceptors. This chapter will show relative use of the methods, prevalence rate and characteristics of the acceptors. It includes 66 studies.

Chapter-II contains studies on correlates of fertility. In these studies, an attempt was made to investigate demographic, cultural, socio-economic variable which affect fertility behaviour. This chapter includes 44 studies.

Chapter-III deals with service delivery programme—their nature and scope. Included in this category of studies are contraceptive methods, procedures, and action-oriented research. In all, this chapter includes 25 studies.

Chapter-IV deals with research studies concerning population related information, education and communication. It contains 14 studies.

Chapter-V deals with 52 studies related to attitudes, awareness and interest of people in family planning. Some of the studies were conducted at macro-level and some at micro-level.

Chapter-VI is concerned with the family planning programme related evaluative research on training, supervision, and field worker's performance. This chapter contains 43 studies.

Chapter-VII contains studies on mortality. In this category only infant and maternal mortality related studies were abstracted as they have some direct bearing upon the fertility, and general mortality related studies were excluded as they have no direct bearing on fertility. This chapter is composed of 14 studies.

**Chapter-VIII includes 17 studies which do not fit in previous chapters. It includes MCH and family planning related studies.**

**Chapter-IX deals with review of research methodology adopted by researchers, changes in contraceptive method use and availability of birth prevention measures, and finally, the policy implications.**

**Chapter-X contains the review written on the previous bibliography (1981 volume). This is included again as it has general applicability for this volume also.**

**The periodic abstracting of research studies is a sempiternal process. Continuous effort is made to improve the standard of abstraction. Preparation of such bibliographies is considered to be a continuous monitoring activity of NIPORT at regular intervals. This will ease the task of reviewing of literature to a great extent for the researchers, policymakers, planners and programme managers in the future.**



# 1

## Contraceptive Methods (Effectiveness, Side-effects, Characteristics of Acceptors)

AN I. U. D. STUDY

Akhtar Iqbal Begum\*

### Objectives :

- i) To identify some of the important characteristics of the acceptors.
- ii) To follow-up the IUD acceptors and to estimate retention rate.

### Methodology :

The East Pakistan Research and Evaluation Centre started the IUD study in its four urban family planning clinics, and a clinic in the rural area. All five clinics were attached to pre-existing medical centres and arrangements had been made for supply of medicines such as iron tablets, vitamins, calcium, etc. A total number of 608 cases were given IUD in one year.

Each clinic was staffed by a lady doctor to do the insertions and follow-up, a female high school graduate worker to provide information or education on family planning with special reference to IUD and to fill up the case cards, and an ayah to help the doctor in insertions and the sterilization of the instruments.

### Findings :

The majority of the women who came for the IUD were in the age group 25-29. The age of the majority of the husbands lay between 35 and 39 years. The number of living children in majority of cases were 4.

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\*East Pakistan Research and Evaluation Centre, Dhaka, March 1966.

In the urban clinics, 56.3 per cent of the IUD clients were previous users of contraceptives whereas 21.4 per cent of the IUD clients in the rural clinic were previous users. The follow-up of the 608 clients showed that 30 per cent of the cases were lost and not traceable, and 70 per cent were carrying the device and were at different stages of the follow-up. There were three cases of pregnancy with the coil.

**Programme implication and Recommendations :**

The study was done on 278 cases who had been inserted with IUD one year before 101 of them had still retained the coil. There were 61 drop-outs during this one year period.

Total known cases were 162. In 116 unknown cases, the ratio of drop-outs had been estimated in relation to the known cases and from these the retention rate had been calculated. Thus, estimated retention rate was 62% over one year period.



**EAST PAKISTAN IUD RETENTION STUDY  
(PRELIMINARY REPORT)**

**H.T. Croley and others\***

**Objective :**

To evaluate the effectiveness of the IUD programme in East Pakistan.

**Methodology :**

Ten districts that had been in the family planning programme throughout the 18 months period were chosen to be studied. The primary sampling unit (PSU) was a thana which was selected with a probability proportional to the number of insertions reported during each six-month time period. It was also decided to select equal sub-samples from three-time periods (1, July 1965 to 31, December 1965, 1 January 1966 to 30 June 1966; and 1,

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\*East Pakistan Research and Evaluation Centre, Dhaka, 1967-68.

July 1966 to 31 December, 1966) in order to obtain a reflection of the success of the programme at different stages. Twenty PSU were selected from the thanas reporting insertions during the first six months and 25 from each thana reporting insertions during the subsequent two periods. However, a total of only 50 different thanas (PSU's) were selected finally. The study sample comprised 1,195 women and was drawn from 50 thanas in the ten districts.

### **Findings :**

Rural residents formed 91.49 per cent of the sample. The mean age for women was 30.40 and the mean number of living children was 4.92 (for boys 2.64, and for girls, 2.28); 80.7 per cent of the respondents had a specific family planning reason, e.g. spacing and for a time period they did not want more children after having obtained the IUD. Only 7.51 per cent of the total sample reported being informed about the possibility of side-effects at the time of insertion. The percentage of expulsions (46.5%) was slightly greater than the percentage of removals (40.5%) among terminations. Ninety-six per cent of the respondents had only one insertion.

### **Programme implication and Recommendations :**

The IUD retention study had made a significant contribution to family planning programme in Pakistan. It indicated that it was time to shift the emphasis from current acceptors to continuous users if the programme should have the desired effect of reducing the population growth rate.

✽

**"IUD REJECTED CASES"**  
**AN EXAMPLE OF CLINIC AND CLIENT EXPERIENCES IN E.P.**

**R.A. Miller and others\***

**Objectives :**

- i) To examine the knowledge of an IUD clinic, rejection rate and factors affecting that rate.
- ii) To know the reason for rejection, as well as the reactions and information communicated by the rejected cases.

**Methodology :**

Out of 484 new cases registered at the IUD clinic from June 1965 to December 1966, 85 were rejected. It was originally expected that the follow-up interview would include about 50 cases, but because of insufficient or incorrect information regarding addresses or due to shifting of residences the attained sample size came down to 29 only.

**Findings :**

During the first eight months of operation, the clinic's mean monthly rejection rate was 30% (66 rejections out of 217); during the next eleven months, the mean monthly rejection rate was reduced to only 7% (19 out of 267).

There were several reasons for IUD rejections such as local pathology, patient's refusal, suspected pregnancy, technical difficulty, general-medical pelvic pathology, haemorrhage, incomplete abortion, tumour and others. Regarding the reactions of clients to their clinic experience, sadness and fear were most often reported. Sadness reported by majority respondents was most often due to the fact that they were not able to or could not receive the IUD, and fear reported by eight clients and sometimes accompanied a feeling of joy resulting from not receiving the IUD.

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\*East Pakistan Research and Evaluation Centre, Dhaka, January 1968.

Twelve out of 29 respondents reported that they were advised to seek medical treatment or medication by the clinic personnel.

Lack of treatment, cure or deterioration of condition were also the reasons reported by the largest number of respondents for not returning to the clinic to obtain the IUD.

Generally, the clinic experience was discussed with no one except the husband, or with only one or two intimate persons. Majority of respondents reported not discussing the experience with others.

Majority of respondents reported that they do not give advice to others on whether they should or should not go for the IUD.

#### **Programme implication and Recommendations :**

The rate of IUD rejections and proportion of clients rejected on different grounds may be a function of the supervision provided, for consultation available, programme pressure experienced, training, motivation and incentives of the clinic personnel, as well as the physical condition of the clients. Therefore, an attempt should be made to establish relatively standard criteria for insertion and acceptable range for rejection rates. These may be useful in both guiding and evaluating clinic personnel. As the cost and availability of treatment and medicines are the major barriers preventing these women from obtaining the IUD, consideration should be given to providing simple medication—a treatment to the client free of cost at the time of her initial clinic visit.

Majority of rejected cases reported that they did not use any other contraceptives after the IUD rejection; every effort should be made to provide the client with the necessary information and education to practise other methods of contraception.

Considering the client's negative emotional state at the time of rejection, it would be advisable to supply the client at least her first month's contraceptives free of cost to reduce her disappointment and any negative communications about the experience.

✱

## THE PRACTICE OF IUD FOR FAMILY PLANNING IN EAST PAKISTAN

Jahan Ara Begum  
S. F. Radelfinger\*

### Objective :

To ascertain the preference of insertion and practice of IUD for family planning.

### Methodology :

Ten districts that had been under the family planning programme throughout the 18-month period were chosen for the study. The primary sampling unit (PSU) was a thana which was selected with a probability proportional to the number of insertions reported during each six-month time period. It was decided to select equal sub-samples from three-time periods: 1, July 1965 to 31, December 1965; 1, January 1966 to 30 June 1966; and 1 July to 31 December 1966, in order to obtain a reflection of the success of the programme at different stages. Twenty PSUs were selected from those thanas reporting insertions during the first six months and 25 each from thanas reporting insertions during the subsequent two periods. The study sample comprised 1,193 women.

### Findings :

The mean age for women was 30.40 and the mean number of living children was 4.92. Eighty-one per cent of the respondents mentioned that they want to have IUD for reasons like spacing children and don't want more children. The percentage of expulsions (46.5%) was found slightly greater than the percentage of retention (40.5%). Among terminations, 96 per cent of the respondents had only one insertion. The retention rate for all-time periods combined was found to be 82.2 per cent for six months. The retention rate for first six months, second six months, and third six months were found respectively to be 84.8 per cent 83.1 per cent and

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\*East Pakistan Research and Evaluation Centre, Dhaka, April 1968.

78.6 per cent. The retention for one year was found to be 73.7 per cent and that for one and a half year was 60.8 per cent. It was also found that retention rates were decreasing for women entering at a later period of the programme. About 60 per cent of the respondents experienced some side-effects from IUD. It should be noted that even with the 60 per cent reporting of side-effects, 88 per cent of the respondents said that they desired to keep their IUD's in place.

#### **Programme implication and Recommendations :**

Desire to maintain the IUD in spite of side-effects is encouraging. Side-effects should be minimized so that more eligible couples could be made interested to accept IUD.



### **NATIONAL IUD RETENTION STUDY : EAST AND WEST PAKISTAN\***

#### **Objectives :**

To obtain some estimate of the effect of the IUD programme on the growth of population in Pakistan.

#### **Methodology :**

A total of 2,848 women in West Pakistan and 1,847 in East Pakistan had reportedly received IUD's between July 1, 1965 and December 31, 1966 were selected as a sample through a procedure using a two-stage, self-weighting time stratified, random sample.

#### **Findings :**

The urban-rural ratio of the sample reflects the urban-rural ratio of the universe of insertions. The ratio in East Pakistan represented the general population of the province but the West Pakistan sample was more heavily weighted on the urban side than was the province as a whole because urban clinics were doing a disproportionately larger number of insertions. The west

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\*East Pakistan Research and Evaluation Centre, Dhaka, 1967

Pakistan clients tended to live closer to the clinics than the clients in East Pakistan. The average age for the East Pakistan sample is about five years less than for the West Pakistan. The mean age for women in East Pakistan was 30.4 years.

The sample in the two wings was quite similar except that the East had a higher percentage of women with four children and West had a higher percentage of women with eight. Compared with the East, the clients in the West tended to report a larger number of boys. Ninety-one per cent of the clients with an IUD in place at the time of interview expressed a desire to keep the IUD. It was also found that neither wing had many clients who had two or more insertions, but the West had more than the East. The retention rate is much higher for the East Pakistan sample.

#### **Programme implication and Recommendation :**

The IUD retention study had made a significant contribution to family planning programme in Pakistan. It indicated that it was time to shift the emphasis from acceptors to continuous users if the programme have the desired effect of reducing the population growth rate.



## **"FLASH CARD STUDY" (DAI EFFECTIVENESS IN FLASH CARD USE)**

**Jahanara Begum  
S.F. Radelfinger.\***

### **Objective :**

To evaluate effectiveness in using family planning flashcards provided to dais as standard educational equipment.

### **Methodology :**

The study was conducted in Dhaka district. The sample consisted of 56 dais, 18 from Dhaka urban areas and 38 from rural areas. Each dai was asked to give a flashcard demonstration and then a short interview was administered. The dais were rated as either good, fair, or poor on the basis of their demonstration performance.

### **Findings :**

Out of the 56 dais, 15 were rated as good, 12 fair, and 29 were rated poor. The findings of the study indicated that neither the basic training that the dais had received in the use of the flashcards, having the set in one's possession, nor number of years in family planning work differentiated between the good, fair, and poor groups. The majority of the good performers had received intensive training and practice in the use of flashcards in a previous educational programme carried on by EPREC.

### **Programme implication and Recommendations :**

Since literacy, intensive training, and skill practice seem to be the most important factors in performance, it may be unrealistic to accept the majority of dais, who are illiterate, to make effective use of flashcards.

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\*East Pakistan Research and Evaluation Centre, Dhaka, 1968.

without such training. Therefore, it was recommended that dais be supplied with flashcards only if they are intensively trained in their use. The results of the study were to be used by the East Pakistan Family Planning Board in deciding whether or not to support the dais in the three programme districts namely Jessore, Pabna, and Sylhet with flashcards.

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## SELF-REMOVAL OF IUD INVESTIGATION ON 32 CLIENTS IN COMILLA KOTWALI THANA

Khairunnessa Islam\*

### Objective :

To find out the reasons for removal of coil by clients themselves.

### Methodology :

In order to collect preliminary data, 35 dais who could give information about the clients who removed coils by themselves were interviewed. These 35 dais reported about 92 clients who had removed coils themselves. From the 92 self-removal cases, 32 clients were randomly selected and interviewed with a questionnaire designed for achieving the objective of the study. All the interviews were conducted by the author herself. An attempt was made to throw some light on the characteristics of the clients, reasons for removal, attitude of the clients and their family members towards IUD, and the period of retention.

### Findings :

All the clients reported that they had to remove the coils because of having various physical problems such as bleeding, pain, white discharge, menstrual difficulty, temperature and weakness.

Twenty-five per cent of the respondents sought help of the Lady Health Visitor for removal of IUD's but they were refused. Other reasons mentioned for not taking the help of the Lady Health Visitor or the clinic were want of transport facilities and cost involved in transportation. Most of the clients, before taking coil, were very optimistic about this method.

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\*Bangladesh Academy for Rural Development, Kotbari, Comilla, June 1969.

But after experiencing complications and absence of follow-up, they were dissatisfied with the method.

**Programme implication and recommendations :**

Lack of follow-up and poor client service caused client-dissatisfaction when side-effects were experienced.



**SECOND FOLLOW-UP OF EAST PAKISTAN VASECTOMY  
CLIENTS (1969)**

**Ghyasuddin Ahmed and others\***

**Objectives :**

- i) To see retrospectively as to what was going on in the field since the first follow-up was done prospectively.
- ii) Some of the complications and side-effects observed during the first follow-up needed rechecking.

**Methodology :**

A multi-stage sample design was followed. Ten thanas of Dhaka and Noakhali districts were randomly selected. A total of 164 clients could be successfully interviewed from a very large number (over 1,000) of randomly selected vasectomy cases.

**Findings :**

Vast differences between clinic recorded age and age at interview were observed. The clients had, on an average, 4.6 living children--2.4 sons and 2.2 daughters. This was an indication that people with relatively more male children accepted this permanent method of birth control than with female children. While two-thirds of the clients stated that they accepted

vasectomy to stop childbirth, one-fourth took the method for monetary incentive. Though this last proportion of clients stated that they accepted male sterilization for incentives, one-half of the total clients in fact favoured the system (incentive). Only 13 per cent opposed the incentive system. However, a large proportion of clients did not give their opinion about the incentive system.

Majority (52 per cent) of clients stated receiving pre or post-counselling. Thirty-nine per cent clients reported to have suffered from some complications like swelling, physical weakness, or infection. It is noteworthy to mention that 52 per cent clients reported having some changes in sexual feelings, most common being decreased sex desire.

Marital relations following operation was found to vary significantly with post-operative complications and counselling. Thus, those who received counselling were less likely to experience change in sex life following the vasectomy.

Those who reported physical complications were significantly (P .001) less satisfied than those who did not, those who experienced changes in sex life were significantly (P.00) less satisfied than those who did not receive counselling were significantly (P 0.5) less satisfied than those who did, and those who adopted vasectomy primarily "to stop childbirth" were significantly (P .001) and more likely to report satisfaction than those who adopted primarily for the incentive fee.

#### **Programme implications :**

1. The increasing average age of the vasectomy client and the increasing age of his youngest child 13 per cent of the clients were found to be (70 years of age or more) suggest that the pressure of targets, combined with the traditionally more difficult recruitment of later adopters, is resulting in a rather large (and increasing) proportion of vasectomy clients who would be normally rejected due to age and or natural sterility.
2. The concept of incentives appears to be both effective and acceptable to those who are affected by it (although we must remember the large "no opinion" group).

Of primary programme importance are the study findings which detail the interrelationship between post-operative side-effects, counselling and changes in client sex-life. It is apparent that psychological side-effects associated with vasectomy are on the increase, and that those are due in large measure to post-operative side-effects and lack of counselling. The programme would do well to attend these findings carefully, before they reach the serious proportions that they have among IUD adopters. The principles suggested here are: medical follow-up to minimise post-operative side-effects (or counsel to the patient to report back to the clinic for treatment in the event of any side-effect), and perhaps even more important, through counselling of every client. We suggest at the very least, a well-controlled study of the counselling concept (in which counselling is central to the client's personal satisfaction and, thus, to continued programme acceptance and effectiveness.



## **SOME CHARACTERISTICS OF THE RESPONDENTS OF THE SLOGAN COMPETITION HELD BY THE EAST PAKISTAN FAMILY PLANNING BOARD**

**Jahanara Begum\***

### **Objectives :**

- (i) To analyse the bio-data furnished by the respondents who took part in slogan competition held by the East Pakistan Family Planning Board.
- (ii) To find out which segment of the population was exposed to competition messages.

### **Methodology :**

A slogan competition on family planning was published in local dailies for a few consecutive days in February, 1968. It drew responses from five

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\*East Pakistan Research and Evaluation Centre, Dhaka, 1969.

hundred fifteen people from different walks of life. These responses were analysed.

### **Findings :**

Dhaka district had the maximum number of respondents (38.4%) followed by Sylhet, Chittagong, Comilla and Rajshahi. Dhaka district has not only topped the list but it has the largest share (58.4%) of respondents against the total of the rest. It may very well be explained by the following reasons.

Dhaka, being the capital and the seat of central family planning activities, has been exposed to an intensive publicity programme. Moreover, the number of educated persons (students etc.) residing in the city are larger and the city has various educational institutions. The newspaper circulation is highest in the city of Dhaka and as such they got the greatest exposure. It was also found that students are the highest (40.5%) among the respondents, with servicemen (28.0%) and teachers (10.0%) following them. The housewives also constitute a substantial percentage (7.1%) next to the teachers.

It was found that males formed 80 per cent of the respondents and females 20 per cent. Almost 70 per cent of the respondents are in the age group of 15-29 years. It was also found that 56 per cent of the respondents are unmarried.

### **Programme implication and recommendations :**

The circulation of newspapers are very irregular; so is the distribution of educated persons, and as such the newspaper may not be a suitable medium to propagate family planning in general except for some segment of the population. Still it has its utility as it reaches the young adults and students, majority of whom have not yet entered into family planning life and this exposure make them favourably disposed towards family planning.

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## A STUDY OF VASECTOMY PHYSICIANS IN EAST PAKISTAN

Nurul Huda and others\*

### Objectives :

- (i) To enquire into the pre and post-operative instructions given to vasectomy clients as reported by the physicians.
- (ii) To determine the criteria used by the physicians to reject potential vasectomy clients.
- (iii) To discover the nature and extent of post-operative difficulties, if any.

### Methodology :

Thirteen programme districts were divided into three groups. From each group, one district was selected randomly. Twenty-four thanas of these three districts were randomly selected. A total of 24 clinics were also randomly selected. Physicians of these selected clinics of each thana were taken as a sample unit of the study. In some clinics, more than one physician worked in different shifts. Thus, instead of 24 physicians, total sample for the physicians came to 30.

### Findings :

Seventy per cent of physicians were L M F and 30 per cent MBBS. The majority of physicians (76 per cent) reported that clients most often wanted to know about possible loss of sexual potency. Eighty per cent of the clients reported that they received post-operative instructions from the physicians. A sizeable majority of the physicians (about 60 per cent) reported that they told their clients to abstain from heavy work for a period; 53 per cent reported that they instructed their clients to abstain from sexual intercourse for some period of time, and 36 per cent reported that they told their clients to use contraceptives for a period of time. Fifty

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\*East Pakistan Research and Evaluation Centre, Dhaka, April, 1969

per cent of the physicians reported that they told their clients to report back if difficulty arose. About 71% of the clients did not experience any post-operative difficulty, while others who had to report back to the clinic for post-operative difficulties suffered mainly from infection, pain and swelling which were of immediate and temporary nature. Eighty-seven per cent of the physicians stated that they rejected clients for vasectomy because of old age. There were other reasons for rejection, such as the clients had no living children, or only one child, or were under age.

**Programme implication and recommendations :**

Post-operative instructions should be standardised and universally applied so as to assure quality services by the physician up to client's satisfaction.



**A FOLLOW-UP STUDY ON 100 VASECTOMY  
CLIENTS IN COMILLA, KOTWALI THANA**

**M.A. Mannan\***

**Objectives :**

- (i) To know the socio-economic background of the vasectomy clients in Kotwali Police station, Comilla.
- (ii) To assess the knowledge, attitudes and sources of information of the vasectomy clients.
- (iii) To know the amount of fees paid for operation.

**Methodology :**

Of the total 369 cases performed in Kotwali P.S. before July, 1969 and December, 1967 this study was based on 100 randomly selected vasectomy clients. Data for the study were collected by two M.S. final year students. They completed 70 interviews, the rest 30 being carried out by a male assistant of the Thana family planning office.

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\*Pakistan Academy for Rural Development of, April, 1969

## Findings :

The majority of these clients had their operations 7-8 months before the interview. Most of the clients were in the age group of 36-50 years with a mean age of 46 years. Although the investigators were of the opinion that the age of a good many clients had been under-estimated, most of the clients were labourers with an average income of Tk. 60.00 per month, and did not possess any cultivable land. About 75% of them were illiterate. In general, the ages of the wives were between 26 and 40 years and they had 4 or more number of children.

Four of the clients experienced no post-operative difficulties but majority of them complained of physical weakness or swelling. (Forty seven) clients were obliged to give commission to referees out of the payment received as incentive.

Regarding sources of information on vasectomy, 37 said that they had heard from friends and neighbours; and half of the clients were taken to the clinics by their relatives.

Eighty of the clients knew of no contraceptive methods but vasectomy, while the condom, foam tablet and plastic coil were known to some; only 4 had used condoms. Reasons for choosing vasectomy were largely ignorance of other methods (43), and a liking for the permanency offered by this particular method (35) and financial motivation also influenced 30 clients. Some of them believed that vasectomy would cure diseases from which they were suffering.

Four clients did not notice any change in marital or sexual life due to sterilization, while some noticed an increase, and a few a decrease in desire for sexual intercourse.

Of the 100 clients only 25 advised others to come for vasectomy 20 of them referring up to 5 clients after the operation. Shyness to discuss sexual matters was listed high and various personal, psychological, and social reasons were referred to for not referring others for sterilization. A majority of these clients thought that permanent contraception was most acceptable after having 3 or 4 children.

Most (86) of the clients considered themselves incompetent to offer suggestions for popularising vasectomy.

## **Programme Implication and recommendations :**

The need for more intensive education on the use of contraceptives was clear. It appeared that satisfied users would not be a source of referral generally at that time.



## **MENSTRUAL REGULATION (M.R.) SERVICE**

**(A Preliminary Report)**

**Atiqur Rahman Khan and others\***

### **Objective :**

To describe the M.R. acceptors' background and their attitude towards menstrual regulation and the side-effect of menstrual regulation and its practicability.

### **Methodology :**

The sample population for this study was one hundred and twenty-three women who utilized the M.R. service at the out-patient Model Clinic at Mohammadpur and at a private-owned clinic, up to the end of January, 1975.

Married women who have missed their menstruation up to 3 weeks were accepted in the clinic.

### **Findings :**

The mean age of the M.R. acceptors was 25.5 years. An important characteristic of the M.R. acceptors was their educational background. The mean completed years of schooling in the present study was 8.9 years for the M.R. clients against 1.7 years for oral pill acceptors found from the Mitford Hospital.

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\*National-Post, Partum Family Planning Programme, Dhaka, FRP Report NO. 2, 1975, Dhaka, Bangladesh.

An enquiry about the use of contraceptive during the month preceding the request for M.R. service revealed that 64% of the clients were using some form of contraception. The use of condom was 29.2% and oral pill was 21.9%. More than 89% of the M.R. acceptors chosen one or the other method of modern contraception for future use. The follow-up record of 63 M.R. acceptors out of 123 shows that 84% were using IUD, 12.5% were using some other form of contraceptives; and only 3% were not using any contraceptive.

**Programme implication and recommendations :**

The important aspect of M.R. method from the programme-point-of-view is that the application of such method is likely to have considerable impact on the fertility level when widely applied.



**THE PROFILE OF AN IUD CLINIC  
(A CASE STUDY OF ABHOI ASRAM IUD CLINIC IN COMILLA  
KOTWALI THANA)**

**M. A. Mannan\***

**Objective :**

The objective of the study was to analyse the information available from 4,229 clinic records and to prepare a report to see the status of IUD programme and the study covered the following aspects.

- (1) General performance of the clinic,
- (2) Rate of adoption of IUD,
- (3) Coverage of eligible couples,
- (4) Socio-economic characteristics of the clients and the referers,
- (5) Type of coil served and referers,
- (6) Reasons for refusals,
- (7) Follow-up services, and
- (8) Nature of post-insertion complain.

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\*Bangladesh Academy for Rural Development, Comilla, August 1970.

### **Methodology :**

Four thousand two hundred and twenty-nine women who reported to Abhoi Asram Clinic for IUD insertion and cases of revisit from November 1964 to June 1969 were used for the study. Most of the informations were recorded on the verbal reports of the clients who were mostly illiterate and half-literate.

### **Findings :**

The findings showed that sixtyfive per cent of the women who accepted IUD had been found to be in between 26 and 35 years of age and the mean age was 39.50 years. The highest number (72%) of the women received coil; and had 3 to 6 children, and the mean number of children was 4.54. Most of the clients (72%) belonged to the monthly income group of Rs. 51.00 to 100.00 and 13% between Rs. 101.00 and 150.00. Wives of occupational groups represent the IUD clients but there are more representations (42%) from labour class of whom 33% are of dais. More nonagricultural types. 18% were referred to by the Family Planning Dais : More side-effects had been observed among those women given 31m.m. loop. In 62% cases irregular bleeding and white discharge have been associated with 31 m.m. loop. There were more cases of expulsion in 27.5 m.m. loop. Eighty per cent of the follow-up clients had been found to be free from any side-effect and 20%, having some side-effects which were not of very complicated ; showed a downward trend in the subsequent years. In most cases (66%) irregular bleeding and white discharge had been observed within the first year of insertion. No correlation had been observed between side-effects and the age of the client.

### **Programme implication and recommendations :**

Most often it is heard that IUD is causing serious complications which result in gradual decline of its acceptance. The findings of the present study do not support this view. The follow-up record shows a low percentage of side-effect cases, and none of these of complicated nature.

Keeping in view all these limitations the study presents a general picture of the IUD programme and being a first study of this nature, this may have some value to the future researchers and the programme planners.



## **A STUDY ON FAMILY PLANNING DROPOUT (CONVENTIONAL) OF COMILLA KOTWALI THANA**

**M. Hazrat Aii\***

### **Objectives :**

- 1) Principal reasons of dropout.
- 2) Characteristics of different adopters who discontinued and reasons for discontinuation.

### **Methodology :**

The sample population of this study was selected from 22 villages of Comilla Kotwali Thana. The data had been collected from the clients register maintained in the office which were originally supplied to the female organisers working in the field. The records contain such informations as the adopter's age, length of practice, number of living children, occupation of the husband and his education. The present study covers only those adopters who dropped out from the programme during July 1968 to June 1969. A dropout was defined as an adopter who took contraceptive supplies for at least three months and then discontinued. For each dropout case, one small card was used where necessary informations regarding the respective client were transferred from the original record and then necessary tables were prepared.

### **Findings :**

Out of 438 participants, 129 (29%) dropped out from the programme during the year 1968-69. The highest dropout (31%) falls in the age group of 25-34 years and the total adopters of the group had 3-4 living children. It was found that dropout was the highest among service holders' wives (41%) and the lowest (26%) in farming groups. Termination was higher (33%) among those women whose husbands were literate. Percentage of dropout was slightly higher (30%) among the Muslims than among the Hindus (27%).

Pregnancy was the prominent reason (31%) for discontinuation which was followed by "planning another baby" (15%). Highest dropout due to accidental pregnancy fell in the age group of 25-34 years (40%) while dropout for having another baby was the highest (36%) in the age group of 15-34 years. It was found that maximum women (43.4%) dropped out from the programme after a consistent practice of 25-36 months. Unwanted pregnancy occurred due to irregular use, ineffective tablets, failure of the methods etc.

**Programme implication and recommendations :**

It is expected that the present study may provide some useful information about the dropout clients, and thereby may help conduct more investigation in this field.



**ORAL PILL FOLLOW-UP SURVEY : FAMILY PLANNING IN THE  
CONTEXT OF INTEGRATED RURAL DEVELOPMENT\***

**Objectives :**

- i) To describe the process and outcome of the experiences with oral contraceptives within the context of integrated rural development activities.
- ii) To obtain routine census information including socio-economic and demographic variables.
- iii) To assess continuation of side-effects and complications of post-acceptance of family planning methods by oral pill contraception.

**Methodology :**

- i) Field workers were recruited at the Sulla Project area and were sent for a week-long training period.
- ii) After the training the field workers were supplied with questionnaire for collection of data through direct interview.

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\*Bangladesh Rural Advancement Committee (BRAC) 1975-1976

## **Major Findings :**

The survey was conducted two years after acceptance. It showed that 21.10 per cent of eligible married women had accepted oral pill contraception. Acceptors were older, had more education, and owned more land than non-acceptors. The purpose of contraception was equally divided between pregnancy, spacing and termination. The continuation rate among acceptors after 12 cycles was 62.00 per cent and after 18 cycles it was 54 per cent. The major reason for discontinuation was dizziness and excessive menstrual bleeding.

It was concluded that a programme staffed by briefly trained, illiterate village residents working part-time could be highly successful. Careful supervision including health, para-professional back-up for side-effects, and regular inservice training was essential elements. Most acceptors were acquainted with the field worker prior to acceptance. Judicious regulation in distribution and modest cost provide feasibility. Although the evidence was inconclusive, it was felt that the integration of family planning into an overall rural development programme might have promoted acceptance, continuation and welfare.

## **Programme implication and recommendations :**

The question remained open as to whether the integration of BRAC's family planning programme in its rural development activities provided any additional stimulus to the acceptance and continuation in comparison to a vertical, independently operated family planning programme.

Of major interest was the association between acceptance with BRAC's health programme (60.4 per cent), co-operative programme (43.4 per cent) and agricultural extension services (54.0 per cent). It was difficult to conclude from such data whether other rural development programme had promoted either acceptance or continuation since health services, for example might have been promoted by side-effects.

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**A BRIEF EVALUATIVE STUDY ON TUBECTOMY CAMPS  
(PRELIMINARY REPORT)**

**Gole Afroz Begum  
Shahidul Islam\***

**Objectives :**

- i) To measure the knowledge of clients regarding tubectomy before they went through the operation.
- ii) To find out the sources through which the women got information about tubectomy camps.
- iii) To assess the clients' knowledge of contraceptive methods, and to know the methods, if any, they had practised before sterilization.
- iv) To determine the extent of motivation of the client to undergo tubectomy operation and ;
- v) To identify the camp management problems before and after the operation so that suggestions could be made for standard services in future.

**Methodology :**

This evaluative study on tubectomy camps was conducted on the 13th, 14th and 15th August, 1976 in Chandina, Gouripur and Chandpur thanas of Comilla district. The questionnaire consisted of 18 questions. The survey team consisted of one male and one female interviewer and the research and evaluation officer who interviewed the pre-operative clients in various tubectomy camps at Comilla. Only eighty-nine clients were interviewed for this study.

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\*Research, Evaluation, Statistics & Planning Unit, Directorate of Population Control & Family Planning, December, 1976

## **Findings :**

Findings show an increasing demand for tubectomy among the rural population. About 84% of the women attending the camp were fully informed. Within the age group of 26-35 years, the women seeking tubectomy operation had normally 3-4 living children, the mean number being 4.5 children. Their educational attainments were also low, 83.15% having no formal education and the rest having education at the primary level. About 88% of the clients heard of the sterilization programme of whom 67.42% were informed by family planning workers. Of these informed 41.57% were practising some kind of family planning contraceptives. The most popular methods were oral-pill, coil and oral-pill and condom combined. Only 11.24% expressed satisfaction with the methods used. Even in spite of satisfaction with the other methods, it was found that they were seeking the permanent method of tubectomy.

## **Programme implication and recommendations :**

With the availability of doctors and medicines, the operation arrangement of the camp should be made in such a manner as to be able to meet the set targets. The sufficiently motivated clients who were found to be medically unfit for the operation must be convinced and given alternative methods of birth control such as IUD or oral pill. Hence it was suggested that facilities for other methods of contraception should be made available in the camp area.

It is necessary that the husbands are also properly motivated to this important decision-making process. Post-operative medical care has to be ensured. The clients have to stay in the camp sometimes generally for 2 to 3 days after the operation. During this period good medical facilities must be provided to them. Sympathetic dealings have to be extended by the doctors and other local staff of the camp towards the pre or post-operative clients. This provides a psychological support to the client to a large extent.



**A RETROSPECTIVE STUDY OF THE DEPO-PROVERA  
ACCEPTORS AMONGST WOMEN SERVED BY THE  
CHRISTIAN HOSPITAL AND CLINICS ASSOCIATED  
WITH THE CHRISTIAN HEALTH CARE PROJECT**

**M. Malakar\***

**Objectives :**

The objectives of the study were to estimate the continuation rates and the incidence of side-effects from Depo-Provera.

**Methodology :**

Up to December 1976 Depo-Provera was made available through 7 hospitals and 11 clinics associated with Christian Health Care Project and a total of 6,208 acceptors were enrolled. This evaluation study was based on 5,922 case cards, being the total number of clients from the various centres. Of this number, 2,550 (41%) were six monthly and the rest were three monthly clients.

**Findings :**

It was found that 46.8% of the women under study were under 30 years of age. This meant that nearly 50% of the total acceptors were from the high fertility age group which was encouraging for the programmatic point of view. The mean number of living children for all centres was 4.3. About 71% of the acceptors had no formal education and only 0.61% had college education. About 19% of women discontinued during the first 3 months and an equal percentage of women discontinued within 6 months. At some of the centres, the follow-up system was either not adequate or was difficult. About 23% of the discontinued clients were not available for follow-up. Next in the order came menstrual disturbance (20.5%). This included break through bleeding, spotting, scanty bleeding, inter-menstrual bleeding and heavy bleeding. In the study, 22 reported no menstruation following the adoption of Depo-Provera.

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\*Christian Health Care Project, National Council of Churches, Dhaka-1977.

### **Programme implication and recommendations :**

The study indicates the importance of follow-up in the light of drop-out rates (38% after 6 months) loss of discontinued client to follow-up and the women's experience with undesirable side-effects.



## **SOME COMPARISONS OF INJECTABLE CONTRACEPTIVES IN URBAN AND RURAL BANGLADESH**

**Atiqur Rahman Khan\***

### **Objective :**

To assess some of the differences in demographic characteristics and reported side-effects between urban and rural injectable clients in Bangladesh.

### **Methodology :**

The 203-urban clients, residing in Dhaka city, came from the Model Clinic in Dhaka; the 244 rural clients came from about 50 villages in Matlab thana, Comilla district.

### **Findings :**

Both the urban and rural clients received depo-provera injections on a 3-month basis. About 15 per cent of the clients in Matlab received at least one 6-month injection during the course of follow-up. One major difference is the number of clients who had menstrual regulations prior to injection. In the model clinic almost half of the clients were recruited immediately following an M.R. The age and parity difference between the urban and rural women was striking.

The median age was only 26.9 for urban clients as compared to 34.6 for rural clients. About 70 per cent of the model clinic clients are less than 30 years' old, while only 29 per cent of the Matlab clients are less than 30. The mean number of live-births for the urban clients was only 3.6 compared to 5% for the rural clients. It was also found that only 16 per cent of the model clinic clients had 6 or more live-births, while 58 per cent of the

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\*Bangladesh Fertility Research Programme, Dhaka 1977

Matlab clients had 6 or more live-births. The number of women previously using contraception in the 2 groups was quite similar, 61 per cent for urban and 68 per cent for the rural women were using a method. The majority women who had previously used any contraception had been the pill-users.

Overall, the majority of urban and rural women using injectables seemed willing to terminate child-bearing. The major medical reason for discontinuation among both urban and rural women was menstrual irregularity. Among non-medical reason for dropout husbands' objection seems most common both for urban and rural women.

**Programme implication and recommendations :**

The reasons for discontinuation need to be assessed more carefully in this population before any definite conclusion can be drawn.

The knowledge of some of the basic characteristics will be useful in determining the demographic characteristic of injectable clients in Bangladesh, anticipating their potential effectiveness in preventing births and anticipating possible reasons for discontinuation.



**EXPERIENCES WITH STERILIZATION PROGRAMME  
IN BANGLADESH: WHAT WE LEARNT**

**Shafiqur Rahman\***

**Objective :**

To know how the sterilization programme in Bangladesh had reacted to different situations.

**Methodology :**

Descriptive type.

**Findings :**

The programme provided some benefits to the surgeons, clients and reference of clients. Initially, the doctor was paid Tk. 20/- for each opera-

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

tion, but later on, it was reduced to Tk. 10/-. Initially, each client was paid Tk. 25/- after operation. but later this was reduced to Tk. 15/- Tk. 5/- was paid to referrer for each successful vasectomy operation.

Weak points : (i) Distrust in programme personnel and (ii) plan to replace the existing field-level workers by educated and trained motivators and this did not materialize for many years, (iii) frequent changes of persons holding the post of chief of the programme and top programme managers, (iv) negligence of doctors in the matters of pre-operative counselling and proper selection of cases, lack of back-up services, follow-up and absence of treatment facilities, (v) lack of pre-operative counselling, (vi) the programme was not given a fair trial; (vii) inadequacy of knowledge among field-level workers for IEM work, (viii) almost all surgeons are from outside the programme and are paid on case basis.

#### **Programme implication and recommendations :**

1) Without financial benefit to some groups of personnel, it is difficult to make a satisfactory progress in the achievement of target of sterilization, at least in the initial stage of the programme. However, a system should be developed for payment to this group.

2) Sterilization programme must be institutionalised and an accepted system be worked out.

3) Crash programme, mass sterilization, camp situation etc. must be avoided.

4) Back-up services for follow-up, treatment of complications and psychological support is a must for a successful programme.

5) Doctors in the programme must realize the importance of counselling and proper client selection.

6) Continuous technical supervision by experts at different levels is a must for proper implementation of a programme.

**PRELIMINARY REPORT OF 200 MINILAPS  
USING FALLOPE-RING**

Sultana Begum\*

**Objective :**

To assess the socio-demographic characteristics of the clients using Fallope-Ring.

**Methodology :**

The study sample consisted of 200 females who were sterilized using Fallope-Ring.

**Findings :**

The median age was 33.3 years. Majority of women (39.5 per cent) were between 30 and 34 years, only 1.5 per cent women were 40 years' above. The median parity was 5.81 live-births but 24 per cent of the women had parity of four. Ninet-eight per cent of the acceptors lived in rural areas; 88 per cent of acceptors are illiterate; 2.5 per cent had four years or less of schooling; 5 per cent women had 5-9 years' formal education and only 1 per cent had 10-14 years of education. Majority (95%) were housewives. Majority of the women (62%) never used any contraceptive, oral pillusers were 24 per cent; 1.5 per cent women had IUD; and 1 per cent women reported their husbands using condom.

**Programme implication and recommendations :**

The high proportion (62%) of women who had used any contraception coupled with a median parity of 5.81 suggest a considerable effort need to be made to educate younger couples.

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\*Bangladesh Fertility Research Programme, Dhaka, 1977

## MENSTRUAL REGULATION SERVICES IN BANGLADESH MODEL CLINIC EXPERIENCES

Atiqur Rahman Khan and others\*

### Objective :

The main objective of the study was to measure the socio-economic and demographic factors of M.R. clients and identify the types of complication.

### Methodology :

The data as collected from 1,068 cases of menstrual regulation performed at the family planning, model clinic and research centre in Mohammadpur, Dhaka between July 1974 and May 1976. The data for 1,068 women undergoing menstrual regulation procedure were recorded in the standard M.R. form of FRP by the Model Clinic staff. All women were asked to return for a follow-up information which was recorded. The data were analysed by a computer.

### Major Findings :

The mean age of the clients was about 25 years, the mean parity being 2.9 and the mean number of living children was 2.6 while the mean number of previous abortions was 0.19. More than half of the women did not want any more children. The average number of years of schooling for the clients was 8.8 years and that of their husbands was 12.8 years. Only 6.6% clients and 2.2% of their husbands had no education.

About 97.8 per cent of the clients came from the urban area of Dhaka and only 0.5 per cent from outside Dhaka. Only 12% of the clients were gainfully employed and the remaining 88% were housewives. About 68% clients were using contraceptives prior to M.R. which was considered a bit higher than the reported level of contraceptive practice in urban areas at 19.4% as found in recent BFS survey.

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\*Bangladesh Fertility Research Programme, Dhaka, 1977

The outcome of the previous pregnancy shows a wastage rate of 71.1 per 1,000 live-births, of which 60.7 were due to abortion and 10.4 were still births. These rates were considerably lower than observed in the tubectomy acceptors of the same clients.

**Programme implication and recommendations :**

M.R. clients represent urban population in almost all the cases. The level of education of MR clients and that of their husbands indicate that they come from middle or lower middle class and one-half of the clients favoured M.R. as a back-up service. This study does not show any indication as to what would be the size of M.R. cases, if M.R. services were made available to rural populations. Rural based M.R. studies need to be seriously considered.



**EXPERIENCE WITH ABORTION RELATED ADMISSIONS  
IN DHAKA MEDICAL COLLEGE HOSPITAL**

**S. Firoza Begum\***

**Objective :**

To know the socio-demographic characteristics of the abortion clients.

**Methodology :**

The sample consisting of 479 cases of which 131 cases were induced abortion and 348 cases were spontaneous abortions.

**Findings :**

The mean age of induced abortion was found to be 32.5 with majority of the clients being between the age of 25 and 29 years. The mean age of spontaneous abortion was 26.8 years with 91 per cent being in the age between 20 and 24 years. The mean parity for induced and spontaneous abortion was 5.5 and 2.3 respectively. About 32 per cent of the clients of induced abortion were illiterate and that of spontaneous abortion was 68.2 per cent.

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\*Bangladesh Fertility Research Programme, Dhaka, 1977

The mean of the clients' education for induced and spontaneous abortion was found to be 1.37 and 2.75 grades respectively. The total rate of previous abortion for induced and spontaneous abortion was 1.79 and 0.63 per cent respectively. Of the induced clients, 46.6 per cent used oral contraceptive, 20.6 used condom while among the spontaneous ones, 6.3 per cent used oral pill and 7.2 per cent used condom previously.

The mean number of days from onset of bleeding to admission in the hospital for induced and spontaneous abortion was 8.8 days and 4.4 days respectively. Suspected uterine perforation, and pelvic infection were complications reported by the clients. Oral abortion technique was the common method used by the clients of induced abortion.

#### **Programme implication and recommendations :**

This study is consistent with other findings that those who seek MR or induced abortion are determined to limit births.



## **EVALUATION OF FEMALE STERILIZATION TECHNIQUE IN BANGLADESH**

**Sultana Begum\***

#### **Objective :**

To find out early (old) sterilization techniques used in Bangladesh.

#### **Methodology :**

Descriptive type.

#### **Findings :**

In the past, methods other than female sterilization were practised for family planning with the exception of few post-partum sterilization in medical college. These few female sterilizations were performed in hospital setting using conventional laparotomy technique with general anaesthesia and long hospitalisation. In late 60's a programme of post-partum sterilization was undertaken by the National Post-partum Family Planning Programme

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

under the then Pakistan Family Planning Council. Few hospitals and clinics did perform a good number of female sterilizations again using the conventional techniques of laparotomy and general anaesthesia. In Mohammadpur Model Clinic in May, 1974 first two hundred female sterilizations were performed using the Minilap technique with local anaesthesia. Ganoshastha Kendra had also performed some cases of female sterilizations by paramedics using uterine elevator and tubal hooks.

Mohammadpur clinic had introduced culdoscopy and doctors in the Model Clinic were performing culdoscopy. BAVS started taking Minilap out of the clinic to camps and the first camp was held in March, 1976 at Kaliakoir, where about 300 tubectomies were performed in 3 days using out-patient Minilap Technique under local anaesthesia. Later Fallope-Ring was introduced. Minilap became standard practice all over the Medical Colleges using modified pomeroys technique and Fallope-Ring for tubeligation.

**Programme implication and recommendations :**

Of interest for historical and documentation purpose.



**FEMALE STERILIZATION BY MINILAPAROTOMY WITH  
FALLOPE-RING AND MODIFIED POMEROY'S METHOD.**

**Syeda Firoza Begum\***

**Objective :**

To find out the effects of the female sterilization experiences using techniques of the two types; minilaparotomy with fallope-ring and modified pomeroys methods.

**Methodology :**

Cases collected between September, 1976 and January 1977. All patients came by self-motivation and without any incentive. The study sample consisted of 95 clients.

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

**Findings :**

Most of the clients came from lower socio-economic class. About 15 of them were from higher income group. The age of the clients ranged from 22 years to 40 years. The modal age group of the clients was of 25-30 years. All these cases were done by 0.5 to 1 per cent xylocain local anases thesia. Total time taken for each case was about 10-15 minutes. Length of the incision was about 2.5 cm. in the suprapubic region, some were longitudinal and some were transverse. Fallope Ring and modified pomerry were administered on 40 and 55 clients respectively. Most of the patients left hospital on the 3rd day. No complication was reported by 82 clients. Post-operative temperature was recorded by clients and serious discharge from wound by 10 clients.

**Programme implication and recommendations :**

MCH-FP service would be highly effective if these two methods could be administered efficiently and the side-effects are followed up and treated in time.

**OBSERVATIONS ON THE EFFECT OF LONG  
ACTING INJECTABLE STEROID CONTRACEPTIVE  
ON BODY FUNCTIONS**

M. Nayeb Ali and others\*

**Objective :**

The objective of the study was to assess the effects of injectable contraceptives on acceptability and on its biological aspects.

**Methodology :**

The study was conducted on the healthy adult women who attended the family planning clinics in Dhaka Medical College Hospital. A total of 61 women who were at the risk of pregnancy had been registered since November, 1979. From the total number, 41 were selected for the present study. The parameters studied were acceptable menstrual history, body

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\*Bangladesh Fertility Research Programme March, 1977.

weight, blood pressure, lactation, level of Haemoglobin, blood cell-count, fasting blood sugar level and serum cholesterol level.

**Findings :**

The age of the clients had ranged from 18 to 40 years. Majority of the clients had reported that they have 0-3 number of living children. Majority of the clients had reported that they had previous experience of using family planning methods. Out of 41 clients, 8 had complained of amenorrhea, 8 developed irregular bleeding and the rest of the clients had no complaint. Four clients had developed amenorrhea following first injection, three of them returned to normal cycle after two months. 54 percent of the clients were lactating mothers. The quantity of milk provision seemed to be normal as the babies were maintaining good health while they were breast fed. Body weight, blood pressure, haemoglobin, blood cell count, fasting blood sugar etc., remained the same before and after the treatment.

**Programme implication :**

Further study is required to evaluate the effect of long-term use of injections of different body functions. If it is found that long-term use of this drug does not effect the body functions adversely, it may be considered to be a suitable method of large-scale family planning in Bangladesh. But the acceptability of this contraceptive depends on the mode of approach, explanation and personal evaluation of those who will take care of the illiterate women of our country.



**PRELIMINARY EXPERIENCE WITH USE OF FALLOPE-RING  
ALONG WITH CULDSOCOPIC TUBE LIGATION PROCEDURE**

**Halida Hanum Akhter\***

**Objective :**

To present the preliminary experience with the use of tubal ring.

**Methodolgy :**

Two hundred and eighty three female sterilizations were performed in the Model clinic with the Fallope-Ring Technique.

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

**Findings :**

Out of 283 20 cases—Yoon's ring was applied in one tube and modified technique was adopted in the others because of short, thick and enlarged tube. In one case, during culdoscopy, ring was applied in lateral third due to very short tube. In approximately 10% cases second dose of intravenous injection of diazepam 10mg and phenergon 50 mg was given for relaxation as the patients were not co-operative during the procedure. Post-operatively patients complained of lower abdominal pain for one to three days.

**Programme Implication :**

In sterilization by coldostomy, fallope-ring is a very convenient technique. Fallope-ring can easily replace the most hazardous stage of cullescopic sterilization and at the same time quickens the whole procedure. It takes 6-8 minutes to complete a culdoscope, yoon's ring ligation from puncture to closure. Only one surgeon can perform the procedure and there is no need of an expert and trained assistant like minilaparotomy.



**DEPO-PROVERA INJECTABLE CONTRACEPTIVE  
AS FERTILITY CONTROL TECHNIQUE THROUGH  
HOSPITALS AND DISPENSARIES AFFILIATED  
TO CHRISTIAN HEALTH CARE PROJECT**

**M. Malakar,  
M. Nokrek\***

**Objectives :**

- i) To assess the clinic and community based service delivery system.
- ii) To know the socio-economic and demographic characteristics of the acceptors.
- iii) To estimate the continuation rates and the incidence of side-effects from Depo-Provera.

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\*Christian Health Care Project, 1977.

**Methodology :**

Over a two-year programme up to September 30, 1977 a total of 10,032 acceptors of both 3 monthly injections were controlled in the programme. The rates were calculated by follow-up injectable technique separately for 3 monthly and 6 monthly injectable clients.

**Findings :**

The mean age of acceptors had declined from 31.0 to 28.4 over a period of 2 years. Less than 3 per cent rose from 25% to 35.3% over a period of 2 years. The mean parity of acceptors had declined from 5.2 to 4.5 over a period of 2 years. About 74.6% of the total acceptors were illiterate for 65.9% of the total Depo-Provera clients adopted this family planning method for the first time. Among those who had used other methods of contraception, the majority had used the pill (23.4%). Continuation rate of 6 monthly injections was higher than 3 monthly injections for both hospitals and clinics. Medical reasons for discontinuation included side-effects and adverse reactions and non medical reason for discontinuation included desire for further pregnancy, no further use of contraception, adverse publicity, accidental pregnancy or other personal reasons.

**Programme implication and recommendations :**

The supervision of the workers with regular refreshers course and get together to discuss problems and achievements are needed for success of the family planning programme.

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**PREGNANCY TERMINATION BY VACUUM ASPIRATION  
AND D.C. FOR 344 PATIENTS AT MODEL CLINIC  
MOHAMMADPUR, DHAKA**

**Atiqur Rahman Khan and  
Hosne Ara Ali\***

**Objective :**

To know the socio-demographic characteristics of the patients who had undergone abortion at family planning model (out-patient) clinic in Dhaka.

**Methodology :**

The sample population of this study was 344 patients who had undergone abortion procedures in a family planning model out-patient clinic in Dhaka from August 1974 to July 1975.

The data were recorded on Model clinic on standard forms and were processed by computer at the International Fertility Research Programme (IFRP), U S A. Of the 294 patients who came back for follow-up within 90 days, 225. were followed up between 14 and 28 days and 65 were followed after 28 days of their abortion.

**Findings :**

Most of the patients admitted for pregnancy termination procedures had no pre-existing medical condition (91.9%), and received induced abortions. Nineteen women (5.5%) were admitted with incomplete/inevitable abortions, three (0.9%) with pelvic conditions, two (0.6%) with pre-existing systemic conditions and two (0.6%) with threatened abortions. One woman (0.3%) was admitted with a pre-existing systemic condition with abortion in progress. The pre-existing medical condition for one patient was unknown. Approximately 85% of those who had one child wanted additional children. About 60% women in the sample were using some method of contraception before seeking the procedure of which the largest fraction was either using oral pills (29.7%) or condoms (22.1%). Of 294 patients followed

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\*Technical Report No. 3, Bangladesh Fertility Research Programme, Dhaka June, 1977.

up 59.8 per cent were using oral pills and 27.9 per cent were using IUDs. Complication rates for the 344 abortion procedures were low. In all, 33 women (10.1%) treated by vacuum aspiration had complications. Most complications were minor. None of the patients were hospitalised for the treatment of complications. The study also indicated that vacuum aspiration and D-C. used for terminating first trimester pregnancies are associated with low rates of complications.

The results of the study showed that the women seeking a pregnancy termination had higher education for them and their husbands compared to Bangladesh standard.

#### **Programme implication and recommendations :**

A very high post-termination contraceptive practice indicated that a wider availability of pregnancy termination service might potentially raise the level of contraceptive practice in our society.

Recent clinic attendance for pregnancy termination services and the volume of abortion-related admission in the hospitals indicated an increasing demand for pregnancy termination.



### **TUBAL LIGATION BY FALLOPE-RING APPLICATION**

1 Atiqur Rahman Khan\* \*

#### **Objective :**

To assess the side-effects of using Fallope-Ring.

#### **Methodology :**

The study sample consisted of 85 of females who were sterilized with fallope-ring application.

#### **Findings :**

The age limit of the clients ranged from 30 to 36 years. No pregnancy was reported after fallope-ring application. Slight lower abdominal pain was reported from few clients during follow-up. About 89% clients reported

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

no complaint, 2.33% clients reported **nuemerqlex** (2 months), 4.7% clients reported irregular bleeding (3 months), 1.18% clients reported scanty menstruation and 1.18% clients reported pain in the back and burning feelings.

**Programme implication and recommendations :**

Tubal ligation with fallope-ring application is a simple, effective and time-saving procedure with minimum complication. The technique should be widely popularised in our country, and as such proper facilities must need be ascertained and the clients should be motivated about the ring.



**INJECTABLE CONTRACEPTIVES IN SIX VILLAGES OF  
MATLAB THANA, BANGLADESH : INITIAL EXPERIENCES**

**Doughlas H. Huber and others\***

**Objectives :**

To assess the demographic characteristics, continuation rate, and side-effects of injectable contraceptives.

**Methodology :**

The study sample consisted of 1,973 women who were the acceptors of three and six monthly injections.

**Findings :**

The median age of the 3 months' injectable clients was 34 years and that of the 6 months' injectable clients was 35 years. The mean parity for 3 months' injectable clients was 6 and that for 6 months' injectable clients was 6.5. Sixty per cent of the clients chose the 6 months' injection and 40 percent chose the 3 month does continuation for the 3 month acceptors was 87 per cent through six months and remained at 87 per cent through 9 months. The six months acceptors naturally had 100 per cent continuation through six months and 30 per cent continued through 9 months.

The side-effects reported by the client receiving three months' injectable were dizziness (6%) followed by weakness (14%), cessation of menstruation and (7%) heavy or prolonged bleeding (7%).

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

The most common side-effect reported by the clients receiving six months' injection was dizziness (25%) followed by weakness (16%), cessation of menstruation (16%), burning sensation in hands and legs (6%) and heavy or prolonged bleeding (3%).

An important finding was that no woman reported pregnancy after taking the injection. About 46% of the injectable clients were active users of pill at the time of receiving first injection: 23 per cent were ever users of pill, 1 per cent was active users of condom, and 30 per cent never used any birth control method.

#### **Programme implication and recommendations :**

The injection method of contraception for every 3 months or every six months among rural women of Matlab seemed to be effective and acceptable. It could be used as a primary and secondary method, with a minimum expenditure of time and professional personnel. It is especially useful as a 'back-up' method for dissatisfied pill or condom users or for women who do not trust themselves to correctly use the pill. Like wise it would be good in intermediate method before sterilization can be done for the family planning programme.



## THE LONG-TERM EFFECTS OF PILL USE

Atiqur Rahman Khan,  
Hazera Mahtab.\*

### Objective :

To investigate the effects of long-term use of oral contraceptives on blood-levels of micro-nutrients, lipids and other constituents, and to assess the clinical manifestation caused by long-term use of oral pill.

### Methodology :

The sample population for this study constituted 285 oral pill-users who had been using pill for about 1-3 years, 68 control cases were considered in this study, based on age, parity and body weight. Samples were selected from among women who had just accepted oral pills in the current visit, in any one of the study clinics but they were yet to start taking pills. The study was thus based on a total of 353 women recruited mostly from 5 major clinics of Dhaka city.

### Findings :

The mean ages were 26.2 years for control, 25.5 years for 1-year users, 28.3 years for 2-year users, and 31.4 years for 3-year users. Women with some education were likely to continue with pill use. Overall, the pill-users did not report any major side-effects even during the initial period of pill use except nausea and vomiting. Pill-users were less anaemic but showed greater incidence of cervical erosion. Pill use seemed to raise the systolic blood pressure by an average of 11 to 13 mm of mercury and the diastolic blood pressure by an average of 4.5 to 7.5 mm of mercury. Pill-users demonstrated a higher level of haemoglobin in blood indicating protective function of pill use against anaemia. The serum cholesterol and triglyceride level among pill-users as expected increased, considerably over control. The serum total protein showed a slight rise with pill use but the albumin content did not change. The vitamin A level rose considerably. But the level of vitamin C did not show any change.

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\*Bangladesh Fertility Research Programme, 1978.

### **Programme implication and recommendations :**

In Bangladesh, pill has been accepted as a contraceptive on the basis of the experiences of the western women who are different from Bangladeshi women in their nutritional status, body weight, and socio-cultural practice. As a result this may have new produced complications for Bangladeshi women. The findings of the investigation of the effects of long-term use of oral contraceptives will be useful for programme planning.



## **A STUDY ON 518 MALE STERILIZATION CASES AT BAVS, DHAKA**

**Azizur Rahman**

**M.H. Hazari\***

### **Objective :**

To examine the various aspects of socio-demographic and medical characteristics of the sterilization acceptors.

### **Methodology :**

This study had two phases, the first phase included the socio-economic, religious and educational background along with the demographic and other-related aspects like contraceptive used prior to sterilization-primary reason for choosing sterilization, referral sources and marital status. The second phase included the post-operative follow-up of the patients. The sample population of this study was 518 cases who had accepted sterilization between February 17, 1975 and January, 1976 at BAVS clinic, Dhaka.

### **Findings :**

The mean age of the acceptors was 43.05 years and the highest number of acceptors (140) belonged to the age group of 40-44 years; this age group was followed by the age group of 45-49 years (83). About 93% of the clients had no formal education and only 3.3% had had 1-3 years of schooling. Regarding occupational background, 44.6 were labour

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\*Bangladeshi Fertility Research Programme, Dhaka, November, 1978.

workers, 3.7% had been engaged in some other jobs, 0.6% were professionals. All acceptors were from rural areas and none of them had any urban background. About 12.4 per cent clients referred to self-wife as their referral sources whereas other agencies were in fact the referral source. Ninety-nine clients had not practised any family planning method before sterilization. 0.6% clients mentioned that their wives had been using IUD. When the clients were asked about their primary reasons for choosing sterilization, 70 clients had complained of non-availability of other methods, 1.7% side-effects of other methods, 194(37.5%) had reported inconveniences of other methods and 222 (42.9%) had reported other difficulties or reasons for sterilization. Out of 518 clients, 515 patients had faced mild pain and 2 had faced moderate pain after operation. Follow-up study showed that out of 514 patients 4 had developed septic, (0.8%) had excessive swelling; 4 (0.8%) had abscess of scrotum, 16 (3.1%) had faced other complications, 22 (23.2%) patients had felt mild pain, 61 (1.2%) had felt moderate pain, 9 (1.8%) had reported complaints and 128 patients (24.9%) had reported one or more intermediate complaints.

#### **Programme implication and recommendations :**

This study demonstrated that the safest and cheapest method for family planning is male sterilization. Post-operative complications were minimum, as were the number of hospitalisations required. It was safe, inexpensive, medically sound and also reliable when performed properly. Bangladesh, due to its limited resources, should, therefore, pursue voluntary male sterilization as the most effective method of population control. It should be noted here that almost all clients reported to previous contraception practice and knowledge.



## USE PATTERN OF ORAL CONTRACEPTIVE IN RURAL BANGLADESH. A CASE STUDY OF SULLA

M.I. Chowdhury and others\*

### Objectives :

- i) To examine the factors related to the practice of oral contraceptives.
- ii) To examine the pattern of termination and the nature of side-effects.

### Methodology :

The data used in this study refers to a project area, viz. Sulla in Sylhet district. Where multi-sectoral rural development programme, family planning programme being one of the component, had been developed by the Bangladesh Rural Advancement Committee (BRAC). BRAC had conducted 'Oral Pill' follow-up survey from mid-February to mid-March '76.

### Major Findings :

The analysis of the pattern of terminations revealed that the discontinuation is higher for the Hindus than for the Muslims. The younger acceptors, particularly those with fewer number of living children, had lower continuation rate of the method. The discontinuation due to medical and health reasons was the highest for the women with lower parity among both younger and older acceptors. Nearly one-fifth of the total acceptors had complained of adverse reactions during the first three cycles of use; and their experience of such reactions had gradually receded during the length of exposure.

Most important side-effects reported were dizziness, headache, vomiting, irregular menses, and break-through bleeding.

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\*Bangladesh Development Studies, 6 No. 3, 1978.

### **Programme implication and recommendations :**

The findings have an important implication for programme officials and policymakers. Firstly, younger women and women with lower parity may be encouraged to accept and continue with a temporary method like oral contraception which will help them in spacing pregnancies. Secondly, the relatively older women and women with higher parity may be encouraged to adopt a suitable terminal method like tube-ligation or vasectomy for their husbands, which will help them stop child-bearing.



## **THE DEMOGRAPHIC IMPACT OF STERILIZATION IN THE MATLAB VILLAGE-BASED MCH-FP PROGRAMME**

**T. Osteria, and others\***

### **Objective :**

To measure the demographic impact of sterilization programme in Matlab Thana, Comilla.

### **Methodology :**

The demographic impact of sterilization was assessed through the utilisation of two indices : the couple years of protection and the number of births averted. The couple years of protection utilised was derived from the approach of Wishik who considers the age at menopause and the couple's joint probability of surviving until the wife's menopause. The number of births averted was obtained from the proportion surviving and the marital age specific fertility rates. There were 484 sterilization acceptors registered by the programme in its first 6 months of operation.

### **Findings :**

The average age of the acceptors was 33.2 years and that of the husbands was 43.6 years. The couple years of protection increased with earlier age at acceptance. Women belonging to the age group of 20-24 years when sterilized, 19.7 years of protection, those belonging to the group

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\*International Centre for Diarrhoeal Disease Research, Bangladesh.

of 25-29 years when sterilized had 15.5 years, and women who submitted to the operation from 40-44 years of age were accorded 2.4 years. Based on this, 4,927 years of protection was realised by 484 acceptors. The number of births averted was 6 for the women who accepted between the ages of 20 and 24 years, 4 for those who accepted between 25 and 29 years of age and 2 for those who accepted between 30 and 39 years of age. Thus 981 births were averted by the programme.

**Programme implication and recommendations :**

The study findings are consistent with similar studies.



**A FOLLOW-UP SURVEY OF STERILIZATION  
ACCEPTORS IN MATLAB, BANGLADESH.**

**Mukblesur Rahman and others\***

**Objectives :**

To know the socio-demographic characteristics of the sterilization acceptors and their receptivity to the procedures.

**Methodology :**

A total of 131 out of 185 vasectomy acceptors and 131 out of 136 tubectomy acceptors from the Cholera Research Laboratory Field Surveillance Area were interviewed with the help of a questionnaire schedule. Two members from the same "bari" (a group of usually 5-6 partilineally related households sharing a common courtyard) and two from the adjacent 'bari' of each client were also interviewed to know their reactions toward acceptance of sterilization by their neighbours.

**Findings :**

It was found that the eight-week nation-wide sterilization campaign held in March and April, 1977, attracted clients mostly from lower socio-economic stratum. The mean age of vasectomy clients was 49.3 years and the mean number of their living children was 5.2 and the corresponding figures for tubectomy acceptors were 34 and 5 respectively. The clients

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\*Cholera Research Laboratory, Dhaka, 1978.

were, in general, satisfied with the results of tubectomy and vasectomy procedures and wide community support for tubectomy indicated future prospect of these methods.

**Programme implication and recommendations :**

The clients were generally satisfied and there was wide community support for the sterilization programme.



**THE CONDOM IN RURAL BANGLADESH :  
PROBLEMS AND PROSPECTS**

**Douglas Huber\***

**Objective :**

The purpose of this project was to determine the acceptability and effectiveness of a simple house-to-house delivery system of contraceptives.

**Methodology :**

For the purpose of the study, the area (in Matlab, Comilla district) was divided into two parts, contraceptive distribution area and non-distribution area. Within the distribution area, a new effort of condom distribution was made which included educational materials with explicit pictorial instruction. The instruction was given to every husband or in his absence to his wife. To assess the use of condom and other methods a prevalence survey at three months' interval was conducted. The prevalence survey included 20% villages in each of the distribution and non-distribution areas. Eligible males were defined as husbands of non-menopausal women aged 15-44 years; 510 bars (house) in each area with an eligible male at home were selected for interviews. The data were collected through interviews and these were analysed in terms of numerical and percentage distribution. In all, interviews were completed in 58.6 per cent of the contraceptive distribution area (bars) and in 56.5 per cent for non-distribution area.

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\*Scientific Report No. 31. International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, August, 1979.

### **Findings :**

Colour of a condom did not have any effect on its use. The survey results indicated that more than half of respondents in the contraceptive area and 82 per cent in the non-distribution areas identified it first as a balloon toy or did not know what it was. The situation was improved in the contraceptive distribution area although even here almost half initially identified it as a toy. In the non-distribution area a minority of people (37%) were able to describe the use of condom as a family planning method.

Although two-thirds of men knew where to obtain supplies, 86% knew how much does the condom cost and 45% could describe the proper use of condom. One-third men in the contraceptive distribution area and two-thirds in the non-distribution area could not explain how the condom could be used as a family planning method.

### **Programme implication and recommendations :**

One should be cautious so as not to jump to hasty conclusion about the knowledge of the larger population regarding the use of condom based upon the data acquired from an experiment on such a limited area.

Improved educational and promotional programmes should be undertaken to increase and facilitate the use of condom. More intensive and scrupulous study was recommended in this area to investigate people's attitudes.

The condom has been a versatile contraceptive for centuries and is now being promoted and distributed by a variety of techniques in many countries. This study was an attempt to examine some of the factors related to the low-level condom use. The findings will be helpful for programme planners.



# **A FOLLOW-UP SURVEY OF STERILIZATION ACCEPTORS IN THE MODIFIED CONTRACEPTIVE DISTRIBUTION PROJECT**

**Shushum Bhatia and others\***

## **Objective :**

The study was intended to conduct a follow-up survey of women who opted for sterilization in the family planning programme of ICDDR, B in Matlab. The purpose of the survey was to obtain information on circumstances leading to the acceptance of sterilization and on the post-operation situation.

## **Methodology :**

About 275 recipients, who accepted tubectomy at Matlab clinic, were interviewed during the months of January to May 1978. The interview was conducted in two separate times by using a two blocked interview schedule. The first part of the questionnaire dealt with the pre-operative information about the recipient and attitude of his peers and relatives; the second part dealt with the information related to post-operative situation. Data were analysed by computing averages and percentages.

## **Findings :**

The mean age of the acceptors was found to be 33.2 years. Clients decided to accept the method within two years after the last birth. The decision-making procedure fell within a uniform pattern, such as after receiving the information about sterilization, they discussed the matter with relatives and then sought permission from their husbands.

The result revealed that the clients knew about the implications of the operation for their health.

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\*International Centre for Diarrhoeal Disease and Research, Bangladesh.  
(Former C. R. L.) Dhaka, Bangladesh-Scientific Report No.19 1979.

### **Programme implication and recommendations :**

The authors recommend that to persuade the client to accept sterilization, the Female Village Worker (FVW) should be thoroughly trained and a good follow-up scheme should be undertaken to provide proper guidance and health care after the operation is performed. The government may facilitate this sterilization programme by providing such training to the village level workers.



## **A COMPARATIVE STUDY OF REGULAR AND LOW DOSE ORAL CONTRACEPTIVE IN DHAKA**

**Anthony Measham and others\***

### **Objective :**

This report presented the findings of the urban comparative study of regular and low-dose OCS conducted in Dhaka. The objective of this study is to compare the continuation rates of regular and low-dose OCS and also to find the reasons for discontinuation.

### **Methodology :**

The study was conducted at the Mohammadpur Model Family Planning Clinic in Dhaka. The usual Model Clinic criteria were used in selecting women for participation in the study. To facilitate the follow-up, an effort was made to exclude women from the study, and those women were excluded who lived more than four miles from the clinic. Acceptors were given, free of charge, a pre-packaged three-month supply of OC and were instructed to return to the clinic at 3, 9 and 12 months after acceptance. Regular clinic admission forms were used to record the socio-economic, demographic and health data, and the women were weighed and measured. The data were edited, coded and processed on IBM cards to produce the cross-tabulations and multiple the decrement life-table continuation rates.

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\*Programme for the Introduction and Adoption of Contraceptive Technology (PIACT), Seattle, Washington, 1978-79

**Finding :**

After the comparative assessment, the study seemingly stated that the low-dose OC might be better tolerated and, therefore, it would be more suitable for some women than the regular dose. Post-MR acceptors have lower continuation rate than other acceptors. The regular dose group had slightly higher average age and parity but the difference was not significant.

**Programme implication and recommendations :**

Since low-dose combination OC were as effective as regular dose and might be safer for prolonged use, the results of this study provided support for introducing low-dose OC more widely in Bangladesh.

It seemed plausible to expect that the low dose OC may better be tolerated and, therefore, more suitable for some women than the regular dose. Hence, it appeared desirable that both dosages be made available in the national family planning programme.

**CLIENT CHARACTERISTICS OF POMEROY AND TUBAL RING, THE TWO TYPES OF TUBECTOMY IN KALIHATI THANA HEALTH CENTRE, TANGAJIL**

Abdur Rahman Khan  
G. Ahmed\*

**Objective :**

To find out the characteristics of the client undergoing either of the two types of tubectomy and also to make an evaluation of relative safety of performing minilaparotomy sterilization of the two types.

**Methodology :**

The two types of tubectomy were alternatively assigned to 310 women. The socio-demographic and medical data were recorded on standard forms. They examined many other variables like (i) procedures, (ii) technical failures, (iii) surgical difficulties and complications, (iv) time need, (v) post-operative complaints.

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

**Findings :**

Findings show that no confirmed pregnancies, gynaecologic surgeries or gynaecologic abnormalities were reported for the pomerooy group of tubal ring group.

**Programme implication and recommendations :**

Results indicate suitability of both methods for Bangladesh.

**EFFECTS OF HORMONAL CONTRACEPTIVE  
ON BREAST MILK AND CHILD GROWTH**

Douglas Huber\*

**Objectives :**

As the effect of hormonal contraceptives on women and their breast feeding children in Bangladesh cannot be adequately predicated from studies in other countries, this study was intended to find out the same.

**Methodology :**

In order to make the study vulnerable to any change that might be attributable to the contraceptives the researcher sought a group of mothers with children approximately 1-18 months of age. Before choosing the study-population, they assessed the mothers' nutritional status from clinic records. The purpose was to ensure that they were not better nourished than average rural Bangladeshi women. The principal method of analysis utilized was the mean of height and weight and age expressed as a per cent of standard.

**Findings :**

The study observed the assessment of breast milk quantity and composition and supported the assumption that IMPA did not decrease milk-volume. It further added that the growth of breast-feeding children

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

in this country did not seem to be adversely affected by Noriday 1+50 nor by IMPA injectable contraceptives.

**Programme implication and recommendations :**

There appears to be continuing concern among medical personnel and clients that hormonal contraceptives reduce mother's milk. This study, along with others, provides data remove to these fears.



**PRELIMINARY RESULTS OF TRIAL OF COLLATEX SPONGE  
IN MOHAMMADPUR MODEL CLINIC-DHAKA**

**S. Begum and others\***

**Objective :**

To test the safety, use-effectiveness, and acceptability of collatex in a variety of cultural settings.

**Methodology :**

This study presented the early experiences of 32 collatex sponge acceptors in Mohammadpur Model Clinic between the time period of May, 1978 and November 1978. All records were kept in standard female barrier form and computer analysis was done at International Fertility Research Programme (FRP) in U.S.A.

**Findings :**

The mean age of the acceptors was 26.8 years. All clients were urban residents. The mean years of schooling was 8.8. The mean parity was 2.4. More than half of the clients had no desire for additional children. The outcome of last pregnancy was a live birth for about 81% acceptors. Only 12.5% were breast-feeding their babies. About 15.6% had not used any contraceptive previously. Of those who had practised, the majority used either oral pills or condoms. None had any previous experience with a

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

female barrier method. Most clients (90.6%) did not mention any special reason for selecting the sponge, they selected this method only because of failure of the other methods and 6.3% had contra-indications for using other methods.

Out of 32 acceptors, 24 returned for the first follow-up after 1 month. About 71% had used the sponge at every intercourse; 20.8% clients reported occasional non-use; 4.2% frequent non-use; and 4.2% had not used at all. Only 14 clients returned for the second follow-up after 3 months. Of these 78.6% had used the sponge at every intercourse and 21.4% reported occasional non-use. Only 5 clients returned for the third follow-up after 6 months. Out of them one had reported to have used sponge at every intercourse and 4 reported occasional non-use. None of the acceptors complained of any insertion problem. Only 4.2% had removal problems. Out of 24 clients only 4.2% became pregnant due to improper usage. Only 12.5% acceptors continued the use of sponge at the time of third follow-up and 6.2% acceptors discontinued because of the desire for another child.

#### **Programme implication and recommendations :**

As an efficient or ideal method is yet unavailable research should be continued for relatively new and better techniques of contraception. Study on the sponge contraceptives is still going on abroad as well as in Bangladesh. But the final conclusion about this type (sponge) of contraceptives is yet to be reached.



## POPULARITY OF INJECTABLE METHOD AMONG BANGLADESHI WOMEN

M. Malakar

M. Nokrek\*

### Objective :

To find out the reasons responsible for comparatively great popularity of injectable method in fertility control and to see the various advantage of (Depo medroxy progesterone acetate) DMPA method over the other methods.

### Methodology :

DMPA (Depo medroxy progesterone acetate) as an injectable contraceptive was first used in July 1975, through two centres of Christian Health Care Project (one in Urban area—the Rajshahi Mission Hospital and another in a rural area—the Bollobpur Mission Hospital, Kushtia). Later, it was offered to all urban and rural centres (total number of centres being 24). Between July, 1975 to September, 1979, a total of 30,364 women were given DMPA with a total of 81,359 injections and a total usage of 23,431 women years.

### Findings :

Findings indicated an increase in the total number of DMPA clients since the start of the programme (July, 1975) to the cut off date of this study (September 30, 1979). It also showed a fall in the number of acceptors in the rural areas during the third project year. This was due to an acute shortage of supply of DMPA in the programme as well as in the whole country. During the fourth project year the number of acceptors was more than double of the previous year. During the fifth year there was another 7% increase indicating the increasing popularity of this method. During the first six months of use 25.7% experienced normal menstrual patterns while the rest of the women reported of amenorrhoea, irregular bleeding and heavy bleeding.

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\*Christians Health Care Project, Dhaka, 1979.

### **Programme implication and recommendations :**

As no perfect method of contraception had so far been developed, Depo-provera, in spite of its shortcomings, is certainly a valuable addition to the list of contraceptives, providing good protection against unwanted pregnancy. It has high acceptability in the rural population, it is safe and easy to administer and has low failure rate. Injectable contraceptive programme is attracting women with fewer living children.

But it is, perhaps, too early to reach a final conclusion about the matter. The long-term effects of the method are to be examined carefully and extensively by all who are concerned.

It is hoped that programmes of family planning, including those of the government, will look at Depo-provera as one of the best methods for Bangladesh.



## **A COMPARATIVE STUDY OF COPPER 'T' 220C AND LIPPES LOOP C.**

**Atiqur Rahman Khan and others\***

### **Objective :**

To assess the rates of and reasons for continuation, termination, pregnancy, expulsion and removal of Lippes Loop size C and Copper 'T' 220C on a comparative basis.

### **Methodology :**

The study was conducted in Mohammadpur Model Clinic as a comparative blind study among 2 acceptors categories, interval acceptors and post-MR acceptors. In both groups only women who had one or more live-births in the past, were admitted in the study.

### **Findings :**

Findings showed that overall continuation rate, the most important consideration from programme point of view, was significantly greater for

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

Copper 'T' than Lippes loop in post-MR group but was about the same in the interval group. So Copper 'T' has a decidedly greater degree of advantage as a post-MR method. Expulsion rates were generally lower for the Copper 'T' users than lippes loop users.

**Programme implication and recommendations :**

The Copper 'T' appears to have more advantage in terms of the lower rates of expulsion and higher rates on continuation than lippes loop.



**CHARACTERISTICS OF ABORTION CASES ADMITTED IN  
CHITTAGONG MEDICAL COLLEGE HOSPITAL IN 1978**

**N. Bhuyan and others\***

**Objectives :**

- (i) To identify the types of abortion cases admitted in the Chittagong Medical College Hospital.
- ii) To assess the degree of acceptance of the induced abortions as recognised in the society.

**Methodology :**

This study was conducted with the abortion cases (640) admitted in the Chittagong Medical College Hospital during the calendar year 1978. Analysis was done by different cross-classification e.g. induced and spontaneous abortion, urban and rural distribution of the clients of both types of abortions, age distribution of the abortion cases, manner, marital status, average parity of the women of both urban and rural areas infant deaths or previous abortions, if any.

**Findings :**

Exactly one-half of the induced abortion cases fell in the age range of 31-33 years. The data suggested that 75% of the cases had at least 10-15

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\* Bangladesh Fertility Res. arch Programme, Dhaka, 1979.

years reproductive life, considering 45 years as the terminal age for reproductivity. Among the currently married status, 90% were stated to be married while five per cent were unmarried and the remaining were either widowed or divorced or separated. About 65% of the induced abortions were done within 12 or less weeks of the beginning of pregnancy. Among the complications developed due to the crude procedure, the women had had infections, while a 10% reported to have had suffered from some kind of shock and four-fifths of the patterns had suffered from anaemia. However, the deathrate among these women was 2%. In 63% of the cases the patient was cured relatively early while for 35% it took quite some time to recover from the complications due to the procedure.

**Programme implication and recommendations :**

This type of study was considered helpful in judging the general sentiment and also revealing the changing people's attitude specially toward abortions. The data may help in popularising MR as a part of the organised family planning programme so long as this is provided with appropriate facilities and it shall also serve as an alternative to methods now used.



**VITAMIN AND PLACEBO TREATMENT OF  
ORAL CONTRACEPTIVES SIDE-EFFECTS.**

**Douglas H. Huber and others\***

**Objective :**

The objective of this study was to focus on dizziness, burning sensations and eye problems related to pill use.

**Methodology :**

The study-population was selected from the women residents of Mirpur. The basic sampling frame was the family planning record cards (couple registration card) of MFPA. From this, 750 pillusers were identified systematically. It took 4 days to complete the initial survey of these 750 forms which had been distributed; 639 forms were returned after proper completion.

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

To create a double blind study, identical capsules were filled with either vitamin B<sub>6</sub> or a placebo. Field work was conducted in August and September, 1978.

Vitamin B<sub>6</sub> was given for twelve days since most symptoms of B<sub>6</sub> deficiency are promptly reversed by small amounts. Study size was predetermined in such a way that 25% increase in the beneficial effect above the expected placebo effect of 30-60%, improvements could be detected at the P/.02 level.

Each client was questioned about dizziness, weakness, burning sensation in the extremities, eye irritation, impaired night vision and if there were other problems.

#### **Findings :**

Two hundred and forty-four women out of the total of 270 complained about dizziness and 77 women out of 90 complained about burning sensation in the initial survey after having received Vitamin B<sub>6</sub> or placebo packet.

Out of 639 women on OCS, initially questioned about problems, almost 69% had at least one complaint of which 50.1% complained about weakness, 42.4% about dizziness, and 32.2% of burning sensation.

It was found that the placebo effect brought about significantly greater degree of dizziness. The effect of P.A. was also similar to placebo in causing burning sensation and as great as B<sub>6</sub>.

Placebo effect was found important in relation to the response of clients, field workers and staff of family planning; providing vitamins may improve the field workers' image by adding to the service performed by them.

#### **Programme implication and recommendations :**

The tremendous strength of vitamins in improving pill use related problems for this short-term period has very important programme implication. It is recommended that a long-term double blind study be conducted to assess the effect on the commonly reported problems.

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## **EARLY EXPERIENCES WITH THE USE OF POST-PARTUM LIPPES LOOP IN DHAKA MEDICAL COLLEGE HOSPITAL**

**Sultana Begum\***

### **Objective :**

The objective of this study was to examine the possible way of broadening the scope of IUD by the application of recently modified lippes loop.

### **Methodology :**

This report presents the early experience of the use of post-partum lippes loop D among 97 acceptors in the obstetrics unit of the Dhaka Medical College Hospital. The acceptors were admitted between November 1977, and March 1978. All records were kept in standard IUD form, which was monitored by Bangladesh Fertility Research Programme (BFRP) and analysed by computer at International Fertility Research Programme (IFRP) in Chapel Hill, U.S.A.

### **Findings :**

The mean age of the acceptors was 28.5 years. The majority did not want any more children. More than 88% acceptors did not have any formal education. The mean of education was 1.8 year. The mean parity was 3.6. This indicated that, generally, less educated and high parity women delivering in the hospital are more likely to accept post-partum IUD.

The expulsion rate was 2.1% as compared to 11.% for interval lippes loop C users and 10.6% for post-MR Lippes loop C acceptors as found in a comparative study in Mohammadpur Model Clinic. The rate of removals for bleeding and pain was 7.2%. Consequently the life table rate under the same circumstances was 2.4%. This was also considerably lower than the Model Clinic experience using standard Lippes loop C. Life table continuation rate as 96.9% at the end of 6 months and 81.2% at the end of 12 months. This is a very high rate of continuation by any standard. Dysmenorrhea was the most frequent side-effect (14.4%). The rate of intermenstrual bleeding or spotting was 4.1% and that of pelvic pain was

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

6.2%. The overall rate of one or more complications or complaints was 19.6%. All the abovementioned rates are substantially lower than the expected rate among women using standard Lippes loop as found in Model Clinic.

**Programme implication and recommendations :**

The early experience of using Lippes loop with cut-gut suture extension as a post-partum method inserted immediately after expulsion of placenta has been found to be effective, safe, and acceptable with a very low rate of expulsion and complications. Thus, this method may further be adopted more effectively and may gain popularity.



**EFFECT OF INJECTABLE 'NORISTERAT' ON THE LIVER  
TEST OF BANGLADESHI WOMEN FUNCTION  
(PRELIMINARY REPORT)**

**Suraiya Jabeen  
S. Abdul Khalique\***

**Objective :**

The objective of this study was to ascertain the susceptibility of Bangladeshi women to progesterone before any contraceptive containing progesterone was widely introduced.

**Methodology :**

Twenty women were selected from among those who attended the Sir Salimullah Medical College Hospital Family Planning Model Clinic to receive Noristerat as a contraceptive measure.

Each woman was clinically examined with special attention to detect any liver ailment. Besides with a view to detecting any recent liver function disorders, liver function tests like serum bilirubin tests were performed at different stages of the course of injections, total protein with A/C ratio, S.G.P.T., S.G.O.T., Serum Alkaline Phosphate, Cholesterol Thymol and Zinc Sulphate turbidity test.

The determined values of these tests were then statistically evaluated and the status of the liver functions of the recipients of Noristerat injections was determined.

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

**Findings :**

The findings did not indicate any significant change in liver function. The study showed that although there were great variations in the determined values at different times of evaluation, the reading in case of all items never exceeded the normal upper limit except in one sample where serum bilirubin was highly elevated. In this particular case too, elevation of serum bilirubin was found in the initial sample before the injection was received and the level came down to the normal range in the subsequent samples. This indicated that variations in liver functions were unrelated to the injection of Noristerat.

**Programme implication and recommendations :**

Clinical trials with Noristerat indicated that there was no significant change in liver function. Considering the safety, effectiveness and acceptability of Noristerat, it is recommended that this injectable contraceptive is made more widely available where trained doctors are available.

**EFFECT OF NORITSTERAT ON SERUM AND ELECTROLYTES  
A STUDY ON A GROUP OF BANGALEE WOMEN**

Mohammad Ishaq\*

**Objective :**

To study the effects of continued use of a long-acting contraceptive Noristerat on protein and electrolyte metabolism.

**Methodology :**

For this study 168 respondents were taken from different family planning centres. Preliminary selection was made on the basis of (a) general health (b) hypertension (c) urinary tract infections (d) severe anaemia (e) history of prolonged and heavy bleeding. Injections were administered only on the fifth day of the cycle.

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

**Findings :**

One hundred and sixtyeight women of ages between 20 and 45 received the long-acting contraceptive Noristerat. Seventy-eight of them dropped out including one who became pregnant. The failure rate is 0.5%. The results of this study showed that the functions of the liver remained unaffected. Anabolic action of steroids, particularly on protein synthesis, was not changed. Findings of serum protein corroborated with the observations that there was no change of body weight. The apprehension of weight gain with long continued use of contraceptives is, therefore, disproved at least with Noristerat. Experience with the use of this long acting contraceptive showed the same complications which include amenorrhoea (48.97%), irregular bleeding (12.13%) and excessive bleeding (4.21%). No loss of weight or development of anaemia was reported.

**Programme implication and recommendations :**

The number of cases studied, however, was too small to make a general conclusion. Noristerat can be recommended as an effective and economical contraceptive device. There is no evidence that it leads to obesity and produces any irreversible damage in metabolism. The causes of amenorrhoea should be further investigated to exclude irreversible damage to endometrium leading to permanent sterility.

**EXPERIENCE WITH NORETHISTERONE ENATHATE  
INJECTABLE CONTRACEPTIVES**

Atiqur Rahma Khan and others\*

**Objective :**

By carefully observing the experience with Noresthisterone Enathate as injectable contraceptive, this report endeavoured to widen the acceptability of birth control method among the female.

**Methodology :**

During the period, January to August 1975, 151 women accepted NE in the form of deep intramuscular injection. The acceptors were selected

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

after complete physical and pelvic examinations. After the first injection the women were advised to return for further injections every 12 weeks. In 1975 a few cases of pregnancy were reported with NE use which raised concern. As a result follow-up of women who did not return to the clinic was organised to identify all cases of pregnancies. This report essentially presents the results of the follow-up along with other clinical experience.

**Findings :**

The average age of the women in this sample was 28.9 years and a large majority of them (about 83%) belonged to ages between 20 and 35 years. The average number of living children was 4.1 and the average age of the youngest living child was 1.9 years. Of 151 NE acceptors, only 15 expressed their desire for additional children, 130 women (86%) did not want any more. This indicated that most of the women could have been potential acceptors for permanent methods. The most frequent causes of discontinuation was menstrual irregularity. Pregnancy rate for NE had reportedly been somewhat higher than DMPA. In the present series of 151 women only 6 had pregnancy.

**Programme implication and recommendations :**

This study suggests that the programme approach for injectable contraceptives should incorporate effective education and counselling to inform prospective acceptors about the possibility of menstrual irregularity.



**PILOT STUDY OF THE CALENDAR RHYTHM METHOD  
IN THE MATLAB AREA OF BANGLADESH**

**Stan Becker  
Rashida Akhter\***

**Objectives :**

The objective of the study was to determine to what extent the calendar rhythm method could be taught, accepted and used among women in rural Bangladesh.

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\*International Centre for Diarrhoeal Disease Research, Dhaka, Bangladesh,  
November 1980.

**Methodology :**

One village with 350 families was selected for a pretest of the method. The literature on the method was studied and ideas collected on the most appropriate form for the calendar. Thirty-six women were finally selected and given education on reproductive knowledge. Among them 25 were motivated to use the method, 15 had husbands who were motivated as well. Out of these 15 motivated couples, 5 menstruation women received the calendars. Five could not use the method due to irregular menstruation and 5 women had post-partum amenorrhoea.

**Major Findings :**

The knowledge of the reproductive process among these rural village women was very meagre. Knowledge of approximate timing of ovulation and conception within the menstrual cycle was virtually absent.

Motivated women were relatively young having older husbands, a higher educational level, fewer children, and were better off than the non-motivated women.

Motivated couples were both older and had more living children, more educated and have considerably more-dwelling space than non-motivated couples.

**Programme implication :**

The calendar rhythm method could be augmented in the programme provided the women are given proper education in this aspect.



## CONTRACEPTIVE RETENTION BEHAVIOUR IN RURAL BANGLADESH

M. Obaidullah\*

### Objective :

The main objective of the study was to know about the effectiveness of contraceptive usage in the following manner :

- i) how current users continue their practice with the passage of time,
- ii) how many new entrants include themselves in the list of users, and,
- iii) how the continuation rate changes by socio-economic and demographic characteristics with the passage of time.

### Methodology :

The study was comprised the following areas :

- i) 4 unions of Shibalaya thana of Dhaka district.
- ii) 3 remaining unions of Shibalaya thana of Dhaka district (a continuous control area with less family planning activities) and,
- iii) 3 unions of Ishwarganj thana of Mymensingh district (a distant control area with some such family planning activities.)

### Major Findings :

The findings from a sample of 1,305 couples revealed that socio-economic and demographic characteristics such as education, occupation, religion, age of the head of households, age of wives and number of living children have significant association. It had also been observed in the data collected from 457 couples comprising 237 old and current users and 220 non-users of contraceptives. But unlike the 1,305 couples, 457 couples did not show any significant sign of having been affected by the occupation of the husbands. With the increase in the level of education increase of contraceptive use was observed.

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\*Institute of Statistical Research and Training, University of Dhaka, June 1980.

Failure rates were found to be higher in the early months, and later they were lower when the only women left the selected group of successful users.

From the study of continuation rates of users of contraceptives had shown that continuation rates were higher for these acceptors who did not desire any additional child.

**Programme implication and recommendations :**

It is most important to investigate into the effectiveness of different contraceptive methods and also the effectiveness of extended use of all methods in rural Bangladesh on the basis of follow-up studies of contraceptive acceptors.



## **EARLY EXPERIENCE WITH NORISTERAT**

**Zohra Khanum\***

**Objective :**

The main objective of this report was to assess the advantage and side-effects of Noristerat, a brand of injectable contraceptive, which is being used in different family planning clinics of Bangladesh.

**Methodology :**

Noristerat was given in doses of 200 mg of intramuscular injections in the gluteal region and was administered at 8 weeks interval for the first four doses. Later it was administered every 12 weeks. So far Noristerat had been given to 123 patients, out of which 73 were followed up and informations related to side-effects were collected. To compare this experience with the side-effects of Depo-provera, records of an equal number of Depo-provera users (most recent recruits) were also examined.

**Findings :**

Amenorrhoea was a very frequent complaint and it was somewhat higher in Depo-provera users than in Noristerat users. The incidence of

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

spotting, amenorrhoea and breakthrough bleeding was really equal in both groups. Nausea, vomiting, burning sensation, weakness and white-discharge had slightly higher frequency among depo-provera users than Noristerat users. Other symptoms were nearly equal in both groups. Overall, the side-effects with the use of Noristerat were about the same as depo-provera or rather somewhat lower than depo-provera.

#### **Programme implication and recommendations :**

It is necessary to evaluate the method among our population and within our social, cultural, and biological context, because we cannot use foreign study results unless the method proves itself suitable for our population. The overall view regarding the two injections is that it is too early to comment because of the short time and limited experience. Only after their longer use among larger number of women we can have thorough information about these method and, therefore, draw definite conclusion about their suitability.



### **FEMALE STERILIZATION AT BAVS CLINIC, DHAKA**

**Sultana Begum**

**Dr. Azizur Rahman\***

#### **Objectives :**

To find out the factors that may help or hinder its popularity.

#### **Methodology :**

A total of 506 cases of female patients reporting to the Bangladesh Association for Voluntary Sterilization (BAVS) Clinic in Dhaka and undergoing sterilization were analysed to show various social, demographic and medical conditions affecting those accepting female sterilization.

#### **Findings :**

Some of the findings of the study are stated below :

The overwhelming proportions of patients in both Pomeroy and Tubal Ring categories were not profitably employed; most of the patients

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

undergoing sterilization by either Pomeroy or Tubal Ring techniques had recommended sterilization to others. Tubal Ring acceptors appeared to have been little more educated than Pomeroy acceptors.

**Programme implication and recommendations :**

The factors described above may be considered in designing and evaluating future programmes.



**INJECTABLE CONTRACEPTIVES IN RURAL BANGLADESH**

Saleha Khatun  
W. Henry Mosley\*

**Objective :**

To examine the demographic characteristics and side-effects of the acceptors of Depo-provera, an injectable contraceptive.

**Methodology :**

Thirty-four women acceptors of injectable contraceptives in Matlab thana for 6 months were included in the study sample.

**Findings :**

The age of the women studied ranged from 18 to over 40 years. Minority of them were found in the 30 to 40 years age group. Eighty-two of the women had 4 or more living children. Only 15 per cent were interested in having additional children. Only 9 per cent respondents had reported of previous use of any other contraceptives, 53 per cent of the women came within 1 year of the termination of their last pregnancy, 82 per cent came within two years. Seventy-four per cent of the women were still in a state of lactational amenorrhoea when injections were started. This means, of course, that as long as contraceptive use overlaps with the expected period of lactational amenorrhoea the contraception does not have any effect in birthrates since the women would not be getting pregnant at any event.

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\*Bangladesh Fertility Research Programme, Dhaka, 1977.

Among women receiving the first injection, 79 per cent came for a second injection and 35 per cent for the third injection. The reasons for dropout were almost equally divided between medical and social reasons. The most common social reason was objections from husbands. The most common medical problem causing dropout was irregular and/or heavy menstrual bleeding. Most women complained of general weakness and dizziness.

#### **Programme implication and recommendations :**

Preliminary experience with three-month injections of Depo-provera in rural family planning clinic indicated that this method could have some applicability in a well supervised family planning programme. Further experience with injectable contraceptives covering a larger sample of women over a longer period of time is necessary to draw more valid conclusions.

The use of injectable contraceptives in family planning programmes and projects in Bangladesh should be closely monitored, perhaps limited to distribution through well-equipped clinic outlets by well trained personnel.



## **ORAL CONTRACEPTIVES IN RURAL BANGLADESH A COMPARATIVE STUDY OF TWO TYPES OF PILLS**

**Radbesham Bairagi,  
and others\***

#### **Objective :**

To compare the continuation rates of a regular dose (Norinyl) and a low dose (Brevicon) oral pills, to study the reasons for their discontinuation and to investigate side-effects of pill use and their trends over time.

#### **Methodology :**

The data were collected from a rural area, namely, Shibalaya thana, in Manikgonj Sub-division in Dhaka district longitudinally for fourteen

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\*Published by I.S.R.T., University of Dhaka, 1980.

months. The study area was divided into two sub-areas, one mile apart from each other. In each sub-area only one type of pill was given to avoid combination of the two types among the acceptors. Six female workers were recruited for distribution of pills into two sub-areas and to follow up the acceptors. In all 286 acceptors of Norinyl and 366 acceptors of Brevicon were initially identified. The baseline information of the acceptors was recorded earlier and in the follow-up visits of the investigators the reaction and discontinuation rates of women were recorded.

After interview, data were collected and thoroughly analysed in terms of numerical and percentage measures. The continuation rates were calculated using life-table technique. In order to determine the difference between two pills, inferential statistics such as Chi-square test  $\chi^2$  was used. Side-effects and other problems of oral pill as a contraceptive method were investigated using time services data. The results were tested statistically.

#### **Findings :**

Findings indicated that the acceptors of Norinyl were younger and more highly educated and the cumulative continuation rate was significantly higher for Norinyl. The continuation rate was significantly higher (0.01) for Brevicon. The main reason of discontinuation was identified as pregnancy and menorrhoea. The effect of age and education was not found significant on the rate of continuation of both the pills. Inter-worker variation in the continuation rate was significant. About 20% of the acceptors reported some side-effects. Dizziness was the main side-effect for both types of pills and next most frequent was bleeding irregularity. The percentage without any side-effects was slightly higher for Brevicon than for Norinyl.

#### **Programme implication and recommendations :**

The inter-worker variation in the findings preclude generalization. Therefore new similar study may be undertaken with some sort of control in the inter-worker performance. The authors recommended that similar comparative study be conducted in an area not served by voluntary agency or family planning programmes. Such comparative study may be undertaken with the pills now prevailing in the country.



**PRELIMINARY REPORT ON THE USE OF THE NORISTERAT  
AS A CONTRACEPTIVE IN 100 CONSECUTIVE SELF-  
MOTIVATED USERS IN A PRIVATE CLINIC.**

**T.A. Chowdhury\***

**Objectives :**

To ascertain the reactions and side-effects, if any, of Noristerat, an injectable contraceptive.

**Methodology :**

The study was conducted on one hundred consecutive self-motivated women who registered themselves for this service in a private obstetrical and gynaecological clinic in Dhaka. The study was initiated in October 1978, and included cases registered up to April, 1980, a period of 18 months.

Initial injection was given within the first 10 days of menstrual cycle after a thorough clinical examination by the same doctor. First two injections were given at an interval of two months and subsequently the injections were repeated every three months.

**Findings :**

It was found that 15 patients discontinued after the first injection; 11 after the second injection, 8 after the third injection, and missing after fourth, while more discontinued after the fifth, sixth or seventh injections. It was found that more than 30% of the pill-users switched to the injectable. Menstrual irregularity is the most notable side-effect. No client in the present series experienced pregnancy during the course of injection therapy with Noristerat. There had been some weight gain in almost all the patients who came up for repeated injections, and in most cases the weight gain varied between 2 and 10 pounds. There had not been any significant tendency towards the development of hypertension or clinical oedema.

### **Programme implication and recommendations :**

From the users point of view injectables offered an attractive choice from amongst available contraceptives because of effectiveness, convenience, freedom from fear forgetting to take the pills, the mode of administration and the duration of effect. Moreover, these compounds have not been shown to suppress lactation as is the case of oral pills and this is a very important consideration in countries like Bangladesh. From the point of family planning programme, they offer the advantages of quick, easy, infrequent administration, and can be served by training up paramedics.

But further studies especially as regards their effect on body metabolism, on factor tissue where accidental pregnancy has occurred, and the return of fertility after prolonged use must be settled before they can be utilized on a far widespread basis.



## **INDIGENOUS ABORTION PRACTITIONERS (IAP) IN RURAL BANGLADESH**

**Shamima Islam\***

### **Objectives :**

- i) To explore the possibility of identification and interviewing of the indigenous abortion practitioners in rural Bangladesh.
- ii) To identify the rural indigenous abortion practitioners by their socio-economic background and mode of practice.

### **Methodology :**

This study was based on case studies of women in Dhaka district. Dhaka district was chosen for its accessibility to the researcher. Every effort was made to select at least one sample from each of the five sub-divisions. An attempt was also made to identify more than one case from one thana within a given sub-division in order to see the variations, if any, that exist even within one particular thana of the district. In total 8 (eight) cases had been covered in this study.

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\*Women for women, A research and study group, Road No. 4, House No. 67, Dharmoadi R.A., Dhaka, 1981.

The interview was done with an open ended questionnaire. Each of these interviews took hours and a series of follow-up interviews were made. The detailed recording of each case was done immediately after the interview had been taken.

### **Major Findings :**

The study revealed that indigenous abortion practitioners (IAP) could be identified and interviewed. It was found that there were different types of persons, who had been identified as abortion practitioners in indigenous ways in the district of Dhaka since clinic facilities for carrying out abortion in the city were minimal. As such rural women went to indigenous abortion practitioners.

The indigenous abortion practitioners came from both Muslim and Hindu communities. A significant number of them were active dais in the family planning programme. They were married and had some education. The educated abortion practitioners had a tendency to mix both modern and indigenous methods in their practice in varied degrees. The majority of the illiterate IAPs were middle-aged, both widowed and married and living with their husbands.

Abortion was uniformly mentioned as a sin rather than illegal act by the practitioners and varied responses were observed towards rationalising their own behaviour.

The usual area of operation of the practitioners were within small villages. The practitioners area of operation varied 25-50 households in the entire thana. The practice depended on the goodwill of the family's traditional names, healers, and on the mobility of women themselves.

There was significant involvement of the local influentials like Chairman and local kabiraj or grocery store-keepers regarding the supply of complementary preparation to accompany the main method to be dispensed by the practitioners. The practitioner played not only the role of dispenser of the method but also served as a procurer of the method.

### **Implications :**

From this study it is felt that an inventory should be made about the actual number of abortion practitioners, their locations, mode of practice and their expertise which will be very useful for training purposes related to abortion in rural areas. The findings of the study will be helpful to the policymakers who want to relax abortion laws to aid population control.

## DEVELOPMENT OF SAFE ANAESTHESIA IN VOLUNTARY SURGICAL CONTRACEPTION

Azizur Rahman\*

### Objectives

The main objective of this study was to determine a safer regimen of anaesthesia which will eliminate the risk of overdose and its sequel and the operation can be performed with complete satisfaction of patient and medical team.

### Methodology :

One hundred and fifty clients (who were the regular acceptors and visited BAVS Dhaka clinic) were selected randomly for this study. Total patients were divided into two anaesthesia regimen—old (code 044) and new (code 117). Ninety cases were done using code No. 117 and 60 cases were done with old regimen. The clients were between 21 and 30 years of age with average weight variation between 70 and 110 lbs. All came from rural Bangladesh and were mostly from poor socio-economic class. Pulse rates of the clients and the sensations drowsiness produced were recorded. Blood pressure, rate of respiration and temperature were also recorded in each step in both the groups.

### Major Findings :

Findings indicate that responses to the question of the sensory stimuli and drowsiness were same in both the regimen. So were the pulse, blood pressure, respiratory rate and temperature. Drowsiness was less marked in new regimen than the old one, and in old regimen clients could not respond to questions. All clients of new regimen were able to walk to post-operative recovery room with little assistance. On the other hand, the clients of the old regimen had to be carried to the recovery room on trolley. Eighty-six per cent of the patients of the new regimen complained of pain between 2 and 3 hours after operation. But the cases belonging to old regimen were all fast asleep after the operation. Twenty-two per cent passed urine and soiled the bed. In the night following opera-

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\*President, BAVS, presented in the 3rd Bi-annual Seminar of NIPORT, Sept. 1981.

tion clients belonging to the old regimen could take light milk with great difficulty and in the following morning they were found drowsy and unsteady to walk. Patients who had operation with the new regimen could walk steadily and with much comfort.

**Programme implication and recommendations :**

If the BAVS regimen is implemented in the national programme, it will be able to eliminate the anaesthesia complication and it will also put the whole operation procedure in complete drill, thereby it will also improve the quality of operation.



**EVALUATION OF M.R. SERVICES IN BANGLADESH**

**E.B. Barua\***

**Objectives :**

- i) To evaluate the existing experience of M.R. practitioner in order to provide insight into the health problems associated with termination of pregnancy.
- ii) To investigate available facilities in the centres for doing M.R.

**Methodology :**

To offer M.R. services 40 doctors and 40 auxiliaries were selected randomly from a list of 60 doctors. For the same purpose 145 trained auxiliaries were provided by the Pathfinder. Out of 180 selected M.R. providers only 137 were available for interview. 10 per cent of the sub-sample of the interviewed practitioners were reinterviewed by a physician to assess the safety of the techniques being used.

**Major Findings :**

It was found that 85.41% of the M.R. centres were urban based. 65% of the practitioners were female and more than-50% were MBBS. Of them 78% were serving in the Government organisations.

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\*Bangladesh Fertility Research Programme, Dhaka, December, 1981.

Out of the total sample of practitioners, 45.5% had formal training for two weeks, 36% had training for at least 3 weeks, 26% had training for a week or less and 27% had no training on M.R. 59.1% named Medical College Hospital from which they had received training. Next came Mohamadpur Fertility Services & Training Centre (FSTC).

Eighty-one per cent of the MR centres were established within buildings, 12.4% centres were found in tin-sheds. 3 houses were made of tin, and 2 were thatched houses, 32.8% of the M.R. centres did not have any separate room for performing M.R. It was also found that 13.1% M.R. centres did not have any operation table or bed for M.R. patients 28% and 4.3% had at least one table and one bed respectively. Only 53.3% centres had tap water with basin while 5.8% did not have any basin and 19% used tube-well water and 19.7% used stored water.

It was also found that majority of the centres did not have adequate number of necessary equipments. The majority of the centres did not have sterilization facilities either.

75.2% practitioners said that they took only 6.15 minutes for each M.R., that 67.9% of women came for M.R. within 6.10 weeks since their last menstrual period, 89.1% reported that they did not experience any medical complications in doing M.R.

#### **Programme implication and recommendations :**

As M.R. procedure is safe and less time consuming, it could be popularised and could help accelerate the family planning programme provided the renovation of the centres and proper equipments are supplied.



## **FOLLOW-UP STUDY ON THE DROPOUTS OF INJECTABLE CONTRACEPTIVE, NORISTERAT**

**Nayeb Ali and others\***

### **Objectives :**

The study was aimed at determining (a) the actual cause of discontinuing the injection and (b) "return of fertility" after stopping the injection.

### **Methodology :**

Seventy-nine cases of dropouts of Noresterat were followed in Mymensingh and Dhaka. The data for the study were collected from the replies to the questionnaire that had been circulated.

### **Major Findings :**

About 50% of the dropouts had complained of menstrual disturbances and the rest had not undergone any menstrual disorder. 36.7 per cent of the clients had expressed that menstrual disorder compelled them to dropout.

Out of 79 dropouts, only 13 clients had 4 to 8 injections over a period of one to two years. All the dropouts had stated that they had had regular menstruation for a period of one to six months after the discontinuation of injections.

### **Programme implication and recommendations :**

The 'follow-up' study of the M.R. services would strengthen the service delivery.

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\*Bangladesh Fertility Research Programme, Dhaka, December, 1981.

## **A CLINICAL TRIAL OF NEO-SAMPOON VAGINAL CONTRACEPTIVE TABLETS**

**Syeda Firoza Begum and others\***

### **Objective :**

This study was conducted to find out the reliability of the Neo-Shapoon vaginal tablets through clinical trial.

### **Methodology :**

One hundred and fifty women were enrolled for the study. They were provided with tablets and were given instructions about their usage until the first follow-up. Follow-ups were scheduled at 1,3,6 and 12 months after admission to the study.

### **Major Findings :**

The mean age of the respondents was 27.0 years, their mean parity was 2.8 live-births and mean educational level was 6.0. Non-contraceptors' rate was 48.0% and the percentage of previous oral contraceptive users was 41.3%. About 53.3% had reported that they had never used any barrier method.

Female discomfort was reported as primary reason for irregular use. Some of them had also complained about the method being too "troublesome". Majority of the respondents had complained about "burning sensation". An insignificant percentage had also complained of gynaecological disorder.

The study provided the information that continuation rates at six and twelve months were 87.2% and 70.4% respectively. For 12 months life table pregnancy rate was 6.5 per 100 women, discontinuation rate for 100 women was 24.8.

### **Programme implication and recommendations :**

The neo-shapoon tablets could bring a significant change in the field of contraception provided the complaints could be taken care of after clinical experiments. Despite reported complaints, use-rate had remained relatively high throughout the period of 12 months.

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\*Bangladesh Fertility Research Programme, Dhaka, December, 1981.

## CHARACTERISTICS OF FEMALE STERILIZATION ACCEPTORS OF SOME SELECTED CLINICS OF BANGLADESH

Gyasuddin Ahmed and others\*

### Objective :

To analyse the various socio-demographic and other characteristics of female who had undergone tubectomy in five selected clinics and hospitals of the country.

### Methodology :

One thousand four hundred and sixty-eight sterilizations had been performed between August, 1979 and November, 1980. Those clients who had undergone the operations were taken as the sample. Clinics and hospitals were selected on the basis of information collected previously and one clinic or hospital was selected from each division except Dhaka, which encompasses two centres. The age of the 146 sterilized women from five clinics were divided into groups starting from 20 years. The ages ranged from 20 to 40 years.

### Major Findings :

The percentage distribution of tubectomy clients in the five-year age groups was 9.7% within the age group of 20-24 years, 40.2% within 25-29 years of age, 36.3% within 30-34 years of age, 13.3% within 35-39 years of age, 0.5% within 40-44 years age group; the mean age was 29 years.

The average parity of sterilized women was reduced to be around five. However, centre-wise distribution varied from 4.6 for sterilized women of Tongi to 5.51 for women of Chittagong.

The average sterilized women had 4.4 children. In this study it was also found that the women of Tongi clinic had lowest parity but the Khulna clinic women had lowest number of living children.

It was found that couples with relatively more male children accepted sterilization. On average the number of male children the couples had was 2.44 against 1.92 female children.

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\*Bangladesh Fertility Research Programme, Dhaka, December, 1981.

It was found that 85% of the tubectomised clients had not practised any method prior to their sterilization.

It was also reported that there was no difficulty in performing the sterilizations. Only 0.8 per cent cases, on the average, reported difficulty.

#### **Programme implication and recommendations :**

The study-population showed a low average age--the mean being 29, about 50% were less than 29 years of age. A shift to younger and lower parity women is imperative, 85% of tubectomy clients had reported no prior use of any contraceptive method. This suggests a need for more intensive education about spacing, which is the most important strategy of the Second Five Year Plan.



## **USE OF HERBAL MEDICINES AS CONTRACEPTIVES**

**Shafiqur Rahman\***

### **Objectives :**

The main objectives of the study were :

- (i) To identify the extent of use of the herbal medicines as contraceptives;
- (ii) To identify its effectiveness;
- (iii) To identify its side-effects;
- (iv) To identify methods of use; and
- (v) To know the opinions of the users.

### **Methodology :**

In response to the newspaper advertisement on "Herbal Medicines as Contraceptives," notices were given in the daily newspapers requesting the herbal medicine prescribers to contact NIPORT. Only one person contacted NIPORT. Next attempt was made by NIPORT on a personal basis to contact the prescribers of the herbal medicines who were widely

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\*Director (Bio-Medical), Research, NIPORT, January 1981.

known in their areas. One of the prescribers of the drug was Mr. Santosh Kumar Das, an ayurved of Shahrasti in Comilla. He had been practising Ayurved for 30 years. He was contacted by the project Director and Supervisor, and after several contacts his medicine Masik Janmo Nirodh Bori was taken up for study as a contraceptive.

The Kabiraj did not maintain any reliable records of users and never followed up his clients. He provided the names and addresses of only 17 clients from memory. As it was a case study, attempts were made to contact the available clients. Names and addresses of two more clients were received from some users. But out of 19 clients only 13 were available for direct interview on a structured questionnaire.

#### **Findings :**

Three tablets of Masik Janmo Nirodh Bori was the full course for a month. These tablets were used during menstrual period. First tablet had to be taken on the first day of menstruation early in the morning. The remaining two tablets had to be taken on the following mornings of 2nd and 3rd days. These tablets were taken with some sugar and juice of Moscenia leaf. Mean age of the users was 30 years. None of the users were less than 20 years of age. The users on the average had 3.7 living children. Two of them had 7 or more children.

Almost all the users were aware of other family planning methods before using this method.

Of the 13 users 3 had used some contraceptives before using the present drug. One had used oral pill, another injection, and the other had used both pill and injection. All the users reported that they had not faced any severe problem during the use of the drug which required consultation with a doctor. Some of the effects of the drug reported by the users were the following :

The majority of the users experienced some changes in their menstruation. Out of 9 users, 6 reported having regularity in their cycles that were irregular before the use of the drug. Among 9 users 6 reported that their health improved after using the drug. Of them two became fat. Among the remaining 3 users, 2 became very weak and one had developed chronic ill health.

### **Programme implication and recommendations :**

It is difficult to say that the medicine has any effect on prevention of pregnancies. The majority of the women were using this medicine for about one year and most of them were breast-feeding their babies at the time of use of the medicine. It should be noticed that in Bangladesh lactating women on the average became pregnant at about 17 months after the birth of the previous child. Moreover, the sample size of the study was too small to make any statistical inference. Hence without further study, such as, clinical tests and opinions of users on large scale, it is not easy to say that Mashik Janmo Nirodh Bori may be used as a contraceptive. However, in the study it was observed that the side-effects were similar to those of oral pills and that no severe side-effects were found.



## **ABORTION PATTERNS OF THE MEDICAL COLLEGE HOSPITALS AND A CLINIC IN BANGLADESH**

**S. Walilullah \***

### **Objectives :**

To study the characteristics of abortion patients in some hospitals and clinics.

### **Methodology :**

Two thousand nine hundred and thirty-five abortion patients admitted in Sylhet, DCH, SSMCH and a private clinic of Dhaka were interviewed for the purpose.

### **Major Findings :**

It was found that 65% of cases represented the age group of 20 years. The mean age of patients of the hospitals and the clinic was different. In DMCH, SSMCH and in the clinic at Dhaka the mean age was 25.05 years while patients of Sylhet MCH had a mean age of 27.30 years. The mean parity of abortion patients was 3.31 and the mean number of living children was 2.14; 40% of the patients had reported that they had no desire for any additional children; 49.71% wanted 1-2 additional.

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\*Bangladesh Fertility Research Programme, Dhaka, December 1981.

Nearly 90% of the abortion cases portrayed the incomplete stages of abortion. Among them 50% of patients suffered from excessive blood-loss, 39.78% of the patients had an unspecific procedure of evacuation of uterus; for 34.7% and another 23.2% evacuations were performed by sharp curatage and suction curatage procedures respectively. In 60% of the cases no anaesthetic measures were administered. 18.8% had received analgesics and 11.7% used general anaesthesia. Nearly 72% of the patients were not given any blood transfusion. Ninety-three% of the patients did not need to undergo any additional surgical procedure; while only 10.5% had ligation.

It was found that 60.2% of patients did not have any complication after abortion; 38.7% had complained about excessive blood loss. After abortion 84.7% were reported to have been followed up. Eighty-five% patients were prescribed one or the other family planning methods. Most commonly prescribed methods were oral pill (42.8%) and sterilization (26.7%), followed by condom (9%) and IUD (5.7%).



## SUBSEQUENT BIRTH CONTROL ACTIVITIES OF THE WOMEN UNDERGOING ABORTION AND OF OTHER FAMILY PLANNING CLIENTS

Halida Khanum Akhter \*

### Objectives :

The objectives of the study was to compare the birth control practices of the group of women who had undergone abortion and the group of women who came to the clinic to accept contraceptives only.

### Methodology :

A total of 4,350 clients both induced abortees and contraceptive users selected through a six-month cohort of clinic attendance from the record. Follow-up was performed on sub-sampled records. Among 1,971, sampled for follow-up 791 had completed three years and 191 had less than three years follow-up.

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Bangladesh Fertility Research Programme, Dhaka, December 1981.

The study had three stages of analysis. The first stage was the comparison of abortion and non-abortion groups. The second stage was analysis of the extent and direction of method switching; and the third stage dealt with the compilation of contraceptive continuation rates by life-table technique.

**Major Findings :**

It was found that the mean age of abortees was 25.6 years which was 2.1 years less than the non-abortion group. They had more education, lower parity, higher contraceptive continuation rate of 89% compared to 68% of the non-abortion group.

It was analysed through the life-table technique that the contraceptive continuation rate in the abortion group was 64% and was higher than the 62% in the non-abortion group. The tendency of changing with time to a more effective method was observed to be almost the same for both groups.

In order to examine the relative importance of some of the factors which might affect contraceptive continuation rates a multiple classification analysis (MCA) was performed. In which factors such as age, parity, education of the client, first method accepted from the clinic, desire for additional kids and distance travelled to attend the clinic were studied. Altogether the factors explained a significant proportion of variance in the dependent variable of the abortion group. The proportion of variance was found non-significant at 0.95 level.

**Programme implication and recommendations :**

The information that younger and better educated women turn to abortion is consistent with other recent studies.



## THE DEMOGRAPHIC IMPACT OF TUBECTOMY IN BANGLADESH

Anthony Measham\*

### Objectives :

To examine the demographic characteristics of women undergoing tubectomy and to estimate the impact of sterilization on fertility.

### Methodology :

An eclectically selected sample was drawn to assure maximum geographic coverage while allowing the field teams to complete monthly circuit of a number of centres and interview patients within three weeks of tubectomy. Of the 240 centres performing sterilizations, we selected 41 in six of the 20 districts, including at least one district each of the four national divisions. The centres were stratified in each of the six districts to ensure inclusion of large and small, private and government facilities. The principal limitation of the sample was an under-representation of remote centres, which perform approximately 10 per cent of the sterilization in Bangladesh.

### Findings :

The women had a mean age of 29.1 years and had an average of 4.4 living children; 83 per cent of them had a child under the age of three. In comparison with the results of earlier surveys, the mean age at tubectomy had declined but parity at the time of sterilization had remained constant.

Only 16 per cent of the sterilized women had been using contraceptives prior to sterilization, a relatively low level of contraceptive use, which was likely to increase the impact of sterilization of fertility. In comparison with women in the Bangladesh Fertility Survey who were of similar age and parity and did not desire children for a period of time the tubectomy patients were expected to have 1.7% fewer births per woman during their reproductive life times.

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\*International Family Planning Perspectives, Volume 8, Numbr 1, March 1982.

### **Programme implication and Recommendations :**

Using these estimates of the impact of tubectomy in a society in which contraceptive prevalence is quite low, the potential effect on fertility of the Government's Second Five Year Plan was analysed. The plan calls for almost 3.4 million sterilizations between 1980 and 1985. If the target is realized some 5,63,000 births will be averted as a result of sterilization, and the crude birthrate (unadjusted for sterilization) of 43.25 may be expected to decrease by more than 15 points by 1985.



## 2

# Correlates of Fertility Behaviour (Demographic, Social Enocomic)



### A POST-OPERATIVE STUDY OF LIGATEES IN DHAKA, EAST PAKISTAN

Beryl J. Roberts and others.\*

#### Objectives :

To know the socio-economic and demographic characteristics of ligatees in Dhaka.

#### Methodology :

The study was conducted at Azimpur Maternity Centre, Dhaka. The centre was selected because most of the uncomplicated ligation in Dhaka were being done there. Data were collected by means of personal interviews with women ligated between mid-October 1961, and the first of April 1962. The study population consisted of a total of 204 women.

#### Major Findings :

The mean age of the respondents was about 29 years. All had given birth to at least three including the recent one prior to ligation, but the average for women was 6.6 births. All but one had at least three living children at the time of ligation and the average number of living children was 5.7. Ligattees with smaller families tended to have more male children, while those with larger families tended to have no option. Ligattees were of a higher educational and income level than the average people in Pakistan. Generally, women whose husbands had had some formal

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\*East Pakistan Research and Evaluation Centre, January 1964.

schooling, were somewhat inclined to have smaller families at the time of ligation than did those whose husbands had no schooling. About one-third of the women had never heard about vasectomy prior to hospitalization, about a half had never heard of ligation before they had their fifth child, and about one-third knew only at the time of their ligation, of sterilization as a family planning method. Condom and foam tablets were the most frequently known contraceptive methods. But while 64 to 80 per cent had knowledge about one or both of these methods only 38 to 40 per cent reported being users. Family planning clinics were known to somewhat more than half the ligatees.

#### **Programme implication and recommendations :**

Education should be directed towards families of lower income group and lower level of education. Lower class families tend to be larger and this may well be the case. Such groups are specially important target groups for family planning education and acceptance.



### **THE IMPACT OF THE "ORGANIZER APPROACH" TO FAMILY PLANNING ON FERTILITY IN COMILLA**

**John E. Stoeckel and  
Moqbul A. Chowdhury\***

#### **Objectives :**

- i) To evaluate the family planning pilot project conducted by the Pakistan Academy for Rural Development, Comilla, E.P.
- ii) To assess the extent to which the adoption of conventional contraceptives (condom and foam tablets) had had an effect in reducing fertility.

#### **Methodology :**

The data for the study were taken from the records kept by the village organizers and checked by the research assistants of the action programme. The number of villages in the programme rose from 8 in 1962 to 20 in 1963 and to 22 in 1964 through 1966.

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\*Pakistan Academy for Rural Development, Comilla, 1967.

To facilitate a rapid and comprehensive analysis, the data were coded and transferred to I.B.M. punch cards for machine processing. The items extracted in processing were as follows; (i) the number of adopters of conventional contraceptives, (ii) the number of adopters terminating contraceptive use, and (iii) the number of adopters becoming pregnant since their entrance into the programme.

### **Major Findings :**

Evaluation of impact of adoption of conventional contraceptives on fertility had been done by comparing adopter and non-adopter rates of pregnancy and analysing trends in pregnancy reduction due to adoption from 1962 through 1966 in selected villages of Comilla Kotwali thana. The findings indicated that although the pregnancy rates of the adopters had increased steadily throughout the period, in 1966 the rates were still less than half of what was expected. Contraceptive-use-effectiveness decreased with length of time of the use and pregnancy reduction (due to the increasing rate of pregnancy combined with increasing termination rates and decreasing rates of recruitment) had been declining since 1964.

### **Programme implication and Recommendations :**

The crude birthrate of the villages would have been reduced by approximately eleven points in 1964-65 (allowing for gestation). However, this reduction would drop to approximately eight and six points in 1965-66 and 1966-67 respectively. If the rate of 1964-65 could have been maintained, then the national goal of a ten-point reduction in the crude birthrate would have been attained.

Although the reduction in the birthrate is still relatively high, a continued trend of decrease in the rate of reduction would obviously reduce the overall effectiveness of the family planning programme. Furthermore, since use-effectiveness would decrease with time, it is necessary that the termination maintains a consistent trend in pregnancy reduction.

In general, the effectiveness or impact of the programme resembled a bell-shaped curve i.e. in the initial phases, pregnancy reduction increased to reach a plateau and then declined in the remaining phases. However, it should be pointed out that this may represent a cyclical occurrence and that pregnancy reduction may again increase and continual follow-up reach is necessary for an extended time period to analyse any additional trends in fertility reduction.

## **FACTORS RELATED TO THE EFFECTIVENESS OF FIELD FUNCTIONARIES IN FAMILY PLANNING PROGRAMME**

**Md. Hazrat Ali\***

### **Objectives :**

To identify some socio-economic factors related to the effectiveness of field functionaries (dais and agents) with respect to the supply of contraceptives and procurement of IUD cases.

### **Methodology :**

The sample population was selected from 22 villages of Comilla Kotwali thana. The data on socio-economic characteristics of the respondents were collected by interviewing them through two different sets of enquiry schedules, one for the dais and another for the agents. The dais were interviewed by the female assistants and the agents by male investigators. A 20% sample from the dais and a 10% sample from the agents were taken. The total sample was only 22 dais and 32 agents. The data on performance of the respondents were collected from official records (agents supply cards-registers). In all cases, only one year of performance was taken into account (July '69 to June '70). The chi-square test was used in determining the significances of the relationship between performance and the other individual factors.

### **Major Findings :**

Most of the dais were elderly women. All the dais were married, the husbands of 59% of them were alive. Agents were below 45 years of age. Most of the dais (81%) attended delivery cases and 62% had mid-wifery training. Regarding agents' occupation it was found that 50% of them were businessmen and 91% married. Findings showed that the middle aged, married and experienced dais were better family planning workers. As regards agents, the younger, unmarried and higher income group seemed to work better than the married agents. Length of services in the programme was positively related to performance in both cases of dais and agents.

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\*Bangladesh Academy for Rural Development, Comilla, September 1971.

### **Programme implication and recommendations :**

The small size of the samples studied limits any generalisation or deeper analysis of the factors associated with performance of the family planning workers. However, the study indicates that performance is associated with some personal characteristics and that further study in this line with larger sample size is desirable.



## **LABOUR FORCE STATUS AND FERTILITY**

**Rafiqul Huda Choudhury\***

### **Objectives :**

i) To examine the relationship between female labour force participation and fertility, (ii) To examine the relationship between female participation in household work (economically inactive) and fertility.

### **Methodology :**

The study was limited to the conterminous areas in Bangladesh and the data provided by the 1961 national census was employed. In this study 59 Sub-divisions in Bangladesh were considered as the unit for analysis. In the manipulation of data certain variables were considered such as, fertility as dependent variable, percentage of labour force engagement as independent variable, education, residence and marital conditions were brought under the statistical control of the third variable. Calculations were made on the basis of intercorrelation matrix among the variables and zero-order correlations between the independent variables and fertility measures.

### **Major Findings :**

For the country as a whole, the data showed an inverse relationship between female labour force participation in agricultural activities and fertility. The data suggested that female labour force participation in traditional sector of the economy, i.e. agricultural work may also tend to

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\*The Bangladesh Development Studies Vol. II No. 4, Dhaka, 1974.

lower fertility. Female participation in domestic work only was found to be positively related to fertility.

**Programme implication and recommendations :**

For further confirmation of this finding, study with microanalysis should be undertaken. To avoid any methodological bias, fertility control needs to be adopted in future works and more information data should be collected to ensure the reliability of labour force and fertility relationship.

The findings of this study have far-reaching policy implications. It suggests that the Government wishing to reduce the rate of population growth in Bangladesh should find means to provide alternative occupational roles or opportunities for women other than those related to domestic works.



**THE DEMOGRAPHIC SITUATION IN COMPANIGANJ  
FINDINGS 1975 AND IMPLICATIONS**

**Ray Langster \***

**Objectives :**

To assess the demographic characteristics of Companiganj.

**Methodology :**

The study sample consisted of 10 per cent representative sample of the population of Companiganj thana. The data on vital statistics were mainly collected.

**Major Findings :**

Crude birthrate (CBR) was found to be 38 per thousand and a crude deathrate (CDR) was found to be 24 per thousand. Thus, the rate of natural increase was 14 per thousand. This combined with the migration of 32 per thousand (in-migration=010 and out-migration=042) indicated that the population of Companiganj thana decreased substantially during

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Johns Hopkins University Fertility Research Programme, 1975.

1975. The sex ratio at birth was high but when additional female births were added to adjust the sex ratio to more normal level of 1.06, the CBR remained unchanged. The age specific birth and death rates found were reasonable. Contraceptive prevalence was only 12 per cent in January, 1975, but the percentage of users was found to rise just 2.4 per cent by November, 1975. The median length of post-partum amenorrhoea was found to be about 18 months. Prolonged amenorrhoea caused the birth intervals to be lengthened and tended to significantly reduce the total fertility in a non-contracepting society like the rural Bangladesh. In one month it was found, 16% of men were absent from their native homes. Most of the men were employed outside Comapaniganj and they only returned occasionally for visits. Their absence also reduced the coital frequency.

#### **Programme implications and recommendations :**

It is possible that with the full implementation of more aggressive family planning programme, high fertility can be substantially reduced. The fear of side-effects can be overcome by a carefully planned, well executed clinical system and follow-up services.

### **DYNAMICS OF FAMILY AND FERTILITY : A COMPARATIVE STUDY OF LOW AND HIGH FERTILITY COUPLES IN CHITTAGONG**

**M. Badrud Duja and others\***

#### **Objective :**

The study intended to examine the pertinent issues related to family and fertility prevailing in Chittagong. Focus was given to a comparative study of high and low parity couples. The study also examined the regional variations between Chittagong and other places of the country.

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Department of Sociology, University of Chittagong, 1975.

### **Methodology :**

The study was conducted among 383 male married persons randomly selected from two areas in Chittagong. A sample survey was conducted through personal interviews. The data collected were coded and analysed by computer. In terms of statistical applications only percentages and absolute numbers were used.

### **Major Findings :**

An overwhelming majority (95%) of the respondents lived in the city for the last ten years but almost all of them (90%) retained close relationship with their village homes. Serviceholders were found to be more modern compared to businessmen in terms of actual family type, attitude towards female education, equal rights for men and women, and female employment.

The mean ages of the respondents and their wives were approximately 46 and 30 years respectively. On the average, 3.7 children were born to them. A vast majority of the respondents (70%) were aware of population problems and viewed that Bangladesh needed less population than she had. Knowledge was found to be directly related with education, that is, the more the education the more the knowledge.

### **Programme implication and recommendations :**

The dynamics of family and fertility will help understand the magnitude of population growth. The government may replicate the study throughout the nation in order to determine the family dynamics of the country. The knowledge and attitude about family planning of the study population may be utilized as an indication of success achieved by the family planning motivation programme.

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## **Bangladesh Fertility Survey \***

### **Objectives :**

- i) To provide basic measures of the level and trend of fertility;
- ii) to study fertility differentials;

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\*Population Control and Family Planning Division, 1975.

- iii) to collect data on knowledge and use of contraception;
- iv) to develop national capabilities for conducting demographic survey.

#### **Methodology :**

The survey was based on a three-stage sample designed with over-sampling of the urban sector. One hundred and sixty rural and 80 urban Primary Sampling Units (PSU's) were selected on PPS basis. Within each selected PSU, one Intermediate Sampling Unit (ISU), a census block of approximately 50 households, was selected with probability proportional to size. After complete listing in each selected IUS, households were selected with probability inversely proportional to the overall ISU selection probability used up to this point, yielding a sample of 15 to 45 households in rural IUS's and 5 to 29 households in urban ISU's. Within urban and rural domains, the sample was self-weighted. All ever-married women aged less than 50 years who slept in the household the night preceding the interview were eligible for interview. Of the 6,155 households selected, 5,855 were successfully enumerated, with a non-response rate of 4.7 per cent. Of the 6,648 eligible respondents identified in the enumerated households, 6,513 were successfully interviewed, with a non-response rate of 2.4 per cent.

#### **Major Findings :**

Considered as a whole, the survey findings suggested that fertility in Bangladesh continued at a high level although a fall in the early 1970's might have been precipitated by the ravages of war and natural disaster. Certainly contraceptive practice, though increasing, was too uncommon to influence fertility in a substantial manner. However, two important preconditions for a fertility decline existed: knowledge of contraception was widespread and family size preferences of many women appeared to be lower than their actual fertility, even after allowing for the losses due to child mortality. One further encouraging sign existed; age at marriage was increasing, albeit from an exceptionally low base; and in many other Asian countries, this phenomenon has been the precursor of a major fall in marital fertility.

#### **Programme implication and recommendations :**

The study indicates a possible positive transition in attitudes, values and behaviours which are precursors to wide adoption.

## **FAMILY SIZE PREFERENCES AMONG GRADUATE AND POST-GRADUATE STUDENTS OF BANGLADESH**

**Syed Waliullah \***

### **Objectives :**

- i) to find out the socio-economic backgrounds of the students;
- ii) to determine the present opinions of 1st and 3rd year students on family size;
- iii) to find out differences in opinions, if any, between 1st and 3rd year students as to their desired family size ;
- iv) to conduct further study on the present 1st year students after 2 years when they will be in the 3rd year, and the present 3rd year students who will be entering family life.
- v) the findings will help to formulate the communication and motivation strategies for present and future community leadership.

### **Methodology :**

This study was a longitudinal type of study on family size preferences. The sample population for this study was drawn from the graduate and post-graduate students of Bangladesh University of Engineering and Technology, University of Dhaka, and the Agriculture College of Dhaka.

### **Major Findings :**

The male and female ratio among students was 3:2. Four per cent were unmarried, the father's occupation of 42.29% of the respondents was service and of 25% agriculture; 96.67% of the mothers were housewives. According to 74.17% of the respondents, the preferred marriage age for girls was 20-24 years and according to 81.68%, the preferred age for marriage for boys was 25-29 years; 56.26% supported the idea of restriction of age at marriage.

According to the opinion of 84.38% respondents, sex education is essential; 33.96% said that the ideal number of children was 3 and 43.55%

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\*Directorate of Population Control and Family Planning, Dhaka, 1976.

were in favour of two children; 46.88% were in favour of compulsory sterilization. The most important findings of this study were that differentiation exists in the desired number of children among students when related to their parents' education. Students whose fathers had graduated indicated 2.50 as the desired mean number of children while a mean of 2.28 children was desired by those whose fathers had post-graduate level of education. Similarly, students whose mothers had SSC (Secondary School Certificate) desired a greater mean family size. It may also be inferred from this data that a favourable environment is created for the adoption of small family norm when a family gets educated; specially when the mother gets education.

#### **Programme implication and recommendations :**

This study tended to support the view that social development is essential over the larger term for population control effort to succeed, particularly, education of women. The data acquired were consistent with the theoretically oriented and general data showing the existence of inter-relationship between education and fertility. If actual behaviour equals the preferences expressed then at least for this educated group there may be a noticeable decline in fertility.



### **PERSONALITY FACTORS RELATED TO EARLY, LATE AND NON-ADOPTION OF FAMILY PLANNING SERVICES**

**Raushan Ali\***

#### **Objectives :**

- i) to investigate the relationships between certain psychological variables and fertility behaviour.
- ii) to investigate whether or not achievement motives, affiliation motive extroversion, introversion and values were related to early, late and non-adoption of family planning services.

#### **Methodology :**

The sample consisted of 626 persons, 331 males and 295 females. Of the total subjects: 274 were from urban, 29 from semi-urban and 323 from

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\*Development of Psychology, Dhaka University, Dhaka, 1976.

rural areas. All were married and between the ages of 16 and 50 years. The sample was stratified into urban and rural and different zones of Bangladesh (Dhaka, Chittagong, Rajshahi and Khulna divisions).

**Major Findings :**

Individuals with high achievement motive were early adopters of family planning services and those with low achievement motive were late or non-adopters. Individuals with high achievement motive desired fewer number of children than those with low achievement motive. Individuals with high affiliation motives were early adopters and those with low affiliation motives did not differ significantly in their desire for ideal number of children and attitude towards family planning. Extroverts were found to be early adopters of family planning and desired fewer number of children while introverts were late or non-adopters of family planning and desired far greater number of children.

Individuals with high theoretical and aesthetic values were early adopters and desired fewer number of children. Individuals with strict religious values were non-adopters and expressed their desires for larger number of children. Economic, social and political values were not significantly related to all aspects of family planning.

**Programme implication and recommendations :**

This study provides insight into individual, psychological and personality factors related to adopters. The data suggest that educational efforts need to be better founded on potential communication leaders and community role models.

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**SOCIO-ECONOMIC STUDY OF THREE VILLAGES UNDER  
ZERO POPULATION GROWTH PROGRAMME IN BOGRA  
DISTRICT**

**Kazi. Bazlul Karim\***

**Objectives :**

- i) to investigate the existing socio-economic conditions of the study villagers;
- ii) the demographic pattern of the villagers; and
- iii) the attitudes of the villagers toward family planning.

**Methodology :**

In Bogra district, three unions of Sherpur thana, namely, Bhawanipur, Khanpur and Shimansit were selected during the month of March, 1976, for inclusion in the Zero Population Growth Programme Village in Bhawanipur Union, Choga in Khanpur Union, Mhimjani, and Sen Banonia in Shenpur Union were selected for conducting the survey. Complete enumeration was made and heads of the households were interviewed. In some cases group discussions were held. Instead of using structured questionnaire simple guidelines were used, that is non-formal interview protocol.

**Major Findings :**

Choga village was inhabited by 505 people and all of them were Muslims. Of the total families, 58.33% or majority had 4 to 6 family members. Only 18.75% families were small having 1 to 3 members. The average landholdings per family was 1.79 acres.

Out of 96 families, 33 or 34.39% families had no cultivable land. The level of education showed that 77.5% of the literate persons had only gone through the primary level.

The total number of couples in the village was 112, of which 96 couples were fertile (15 to 45 years of age). 78% to 87.64% of the heads of house-

holds showed favourable attitudes toward family planning. Out of 271 heads of families, who were adopters of family planning devices, 56.67% had used oral pill; 4 persons had had vasectomy.

The total population of the Bhimjani village was 574 and only 29.79% of the villagers were literate. There were only one graduate and eleven matriculates in the village. Out of the families 32 (31.50%) did not have any cultivable land of their own and out of the respondents 84 (83.3%) were in favour of having 2 children and 17 (16.50%) families preferred 3 children.

Out of 138 couples in the village 104 were found fertile. Out of them only 40 (33.33%) couples were found practising family planning; three women had been ligated. There was neither any family planning worker in the village nor was there any easy source of contraceptive supplies.

The total population of Sen-Bamonía village was 324, belonging to 50 families. Fifteen of the population were male and 49% were female; 42.22% of the total families were landless and small farm families.

Out of the total population, 19.75% were literate. There was only about 660.25 maunds of surplus rice in the village in a year. There was 85.94% fertile women in the village. About 99% of the total respondents of Sen-Bamonía village reported that they were really interested in adopting measures for birth control. Most of them were using contraceptives.

#### **Programme implication and recommendations :**

As in other studies since the '70's it appears that more favourable attitude toward family planners are developing at the village level which have yet to be reflected fully in practice.

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## **POPULATION CHANGE : EDUCATION AND HOUSING REQUIREMENTS IN VILLAGE JIRABO**

**Sharifa Khatun**

**Khairunnessa Begum\***

### **Objectives :**

- i) to determine the impact of growth of population under current and alternate rates upon educational and housing needs of the people of Jirabo in 1985, 1995 and 2005;
- ii) to determine the demographic trend of the village; and
- iii) to assess the impact of the size of population upon enrolment need of children in school and quantitative dimension of housing for a period of 30 years.

### **Methodology :**

The study was conducted in Jirabo, a village in Yarpur union at Savar thana in the district of Dhaka. The village was purposefully chosen as a sample area. A total of 121 households of the village were the population under study. After preliminary survey, a list of households was prepared and the data were collected through interviewing people by circulating questionnaire. Through census survey, demographic information on age, sex, migration, births, deaths, marital status, pregnancy, history etc. were collected.

### **Major Findings :**

The total population of the village was 704 persons living in 97 homesteads formed into 121 households. The average households' size was found to be made up of 5.82 persons and the family sizes ranged from 1 to 13 members. The community was a typical agricultural one. A family on average had 3.73 acres of land; but nearly 70% of the families had land below the average size. Only about 24% families had above 5 acres of land. The literacy rate was found to be 23.49%. About 62% children of the age group ranging from 6-11 years were enrolled in primary schools and about 28% of the age group of 12-16 years were enrolled in high schools.

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University Grants Commission, Dhaka, 1977.

With the existing 2.50% growth rate, the total population of the village would be increased by 25.19% in 1985, 58.24% in 1995, and about 100% in 2005 from 1876. In projection 2, there would be rapid growth of population at 3% growth rate and the population would increase by about 33.38% in 1985, 82.67% in 1995 and 146.02 per cent in 2005.

On the other hand if the population is reduced to 15% by 2005 the population would increase from the base year 1976 by about 25.71%, 49.58% at the end of first, second and third decade respectively.

In comparison the increase of population under the 3 abovementioned projections, the population would increase at a declining rate. At the end of the first decade in projection 4, the population would increase by 22.73% from the base year 1976. The corresponding figures for the 2nd and 3rd decade would be 43.61% and 61.05% respectively.

If universal education is introduced in 1985, the need for enrolling all age groups would be enormous in projections and at least 50% extension of the present physical facilities and teaching staff would be required to accommodate children of the age group 6 to 13 years under all projections.

The study indicated that annual income and amount of land owned by families were highly and positively related to enrolment of children in education. The level of education was found to be positively and significantly related to the proportion of children enrolled.

Regarding the need for house at the end of 30 years in projections 1 and 2, about 322 and 396 houses respectively would be required to accommodate the future families. According to projections 3 and 4, the requirement would be 282 and 260 houses respectively.

#### **Programme implication and recommendations :**

The projections-based on recent village data reinforce the necessity of achieving population control and stable population at the earliest date possible. Bangladesh has some 68,600 villages.



## **THE EFFECTS OF NUTRITION ON NATURAL FERTILITY**

**W. Henry Mosley\***

### **Objective :**

To analyse the effect of malnutrition on those biological mechanisms directly related to fertility performance.

### **Methodology :**

This paper focused on an analysis of malnutrition as it is likely to affect the biological mechanisms that are directly related to fertility performance, i.e., the reproductive life span, post-partum amenorrhoea, fecundability and pregnancy outcome. Furthermore, only general protein caloric malnutrition had been considered rather than the possible effect of isolated nutritional deficiencies primarily because the focus had been on fertility effects which are likely to have significant demographic impact.

### **Major Findings :**

From the evidence it seemed clear that malnutrition retarded menarche and through this mechanism it could indirectly affect the age of marriage in some societies. Malnutrition may have resulted in earlier menopause although data were limited. Acute famine conditions, with starvation, led to depressed fertility through both biological and behaviour mechanisms.

Studies specifically designed to establish the relationship of chronic malnutrition to depressed fecundability or prolonged lactational amenorrhoea had found essentially no relationship. Fecundability seemed to be primarily a function of coital frequency while lactational amenorrhoea was a function of breast-feeding practices and was mediated through neurohormonal mechanisms related frequency, intensity and duration of suckling.

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Scientific Report No. 3, Cholera Research Laboratory (Now ICDDR), Dhaka  
in August 1977.

Data on malnutrition and foetal wastage were conflicting. If there was an effect it had not been great. Maternal malnutrition was clearly associated to low-birth weight and thus, poor infant survival. This, however, could result in a rise in fertility in a breast-feeding population. Overall, the data that were available indicated that the biological effects of malnutrition did not account for the major variations in natural fertility between different non-contraceptive population groups.

**Programme implication and recommendations :**

Status of nutrition of different level of fecund women may be determined to establish the proper magnitude of population projection in the country. By identifying how health and social factors may interfere with the reproductive process, the findings of such reports will contribute to the decision-making of the planners, administrators and policymakers.



**PATTERN OF POPULATION GROWTH AND ITS CHARACTERISTICS AND THEIR IMPACT ON RURAL DEVELOPMENT WITH SPECIAL REFERENCE TO ROLE OF WOMEN IN SOME SELECTED AREAS OF BANGLADESH**

**Md. Kaysar Hossain\***

**Objectives :**

- i) To identify the factors responsible for rapid population growth and its impact on rural economy.
- ii) To identify the characteristics of the rural population, its social, economic, cultural and religious beliefs and values governing attitude towards change, innovations and the process of development.

**Methodology :**

In total 4 rural sample areas (villages) were selected from Kishoreganj town. Out of four sample rural areas 2 from Tangail and Mymensingh were selected. With the intention of comparing the characteristics

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\*Jahangir Nagar University, Savar, Dhaka, 1977.

of the rural population with those of the urban population an adjacent urban area of Kishoreganj town was selected purposefully.

From each selected area 50 sample families were selected by adopting stratified random sampling method for direct interview. In total 250 families were selected for interview from the 5 (five) survey areas.

#### **Major Findings :**

The average size of families for four selected areas varied from 3.06 to 6.10. The average size of families in the four areas was 5.57. The literacy rate in 4 areas was found to be 34.26%. Among the literates in four areas, 66.09% were male and 33.91% female. Among causes for illiteracy, economic condition seemed to play the most prominent role.

The average size of land-holding in the survey areas was 1.99 acres which was smaller than the average throughout Bangladesh. The rapid deterioration of land-holding was due to the impact of population growth.

The solvency of a family was measured by direct question. When asked whether the family income was enough to meet the basic necessities of life, it was found that on the average 33.5% families were solvent in survey areas.

The age at marriage of the female in survey areas was found to be between 12 and 18 years.

The 65.2% of farmers replied negatively when they were asked whether larger families were responsible for their financial insolvency. The farmers said that they wanted at least 3-4 children because children helped in farming. The population growth rate was very high and varied between 2.8 and 3.2% in different areas.

Nevertheless, positive attitudes were expressed in four areas toward birth control. All families in survey areas had heard of birth control.

#### **Programme implication and recommendations :**

Though the study was not a representative one but the observed finding will be useful for the programme in the sense that it has revealed some facts which are very important for rural development.

## **EDUCATION AND FERTILITY IN BANGLADESH**

**Rafiqul Huda Chowdhury\***

### **Objective :**

To explore the extent to which the level of education influenced the family size and the practice of contraception in the socio-cultural development of Bangladesh.

### **Methodology :**

Data were collected by a socio-economic survey of working versus nonworking women of Dhaka city. To establish the effect of female education on the use of contraceptives, the following were brought under statistical control: (i) age; (ii) parity; (iii) labour force status; (iv) husband's income; and (v) exposure to media/communication.

The effect of husband's education on fertility was determined with the following variables: (i) husband's monthly income; (ii) duration of marriage; (iii) wife's age at marriage; (iv) wife's labour force status.

### **Major Findings :**

The report extricated that an attempt to increase the level of education at least up to secondary level along with the availability of family planning services could go a long way in depressing the level of fertility. The paper also made valuable discoveries about how the female education and employment opportunity could limit the family size in Bangladesh.

### **Programme implication and recommendations :**

Increasing the level of education at least up to Secondary level along with convenient availability of the family planning services could lead to brighter possibilities of decreasing the level of fertility and also widen the practice of contraception.

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\*Bangladesh Institute of Development Studies Dhaka, Vol. V, No. 1, 1977.

## **POPULATION GROWTH AND ITS IMPACT ON AGRICULTURAL PATTERN : A CASE STUDY IN DOSHPARA, BANGLADESH**

**Najma Haque\***

### **Objective :**

To find out the relationship between the population dynamics of the village and the adjustments and changes in agricultural pattern.

### **Methodology :**

For the selection of the study, local model of settlement cycle with population change was prepared. Complete enumeration of the village was done. A total of 126 households had been taken into count. A questionnaire were prepared keeping objectives in mind for data collection.

### **Findings :**

Total population of the village was 713 and the total number of households was 126. Average number of persons per household was 5.7 and the density of population was 29 10 persons per square mile. The sex ratio stood at 114 : 100 compared to population in 1974, an increase of 45 persons per thousand was found. The increase rate of population in a year was estimated to be 2.9 per cent. About 48.2 per cent of the population were below 35 years of age. The infant mortality rate was relatively low due to improved medical facilities.

Out of a total of 126 eligibles only 15 had adopted family planning devices. Out of the 106 who had not adopted, 45 approved, 57 did not express any opinion, 4 disapproved and had not adopted family planning method. The average land-holding size for household was 126 acres and the average land-holding size per member was 0.22 acres There were 12 families who owned over 7 acres of land. There were 112 families who owned from zero to 2 acres of land. These people were landless labourers and small farmers who were in danger of becoming landless peasants. There were 5 families who had more land

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\*Dhaka College, Deptt. of Geography, Dhaka, 1977.

than they could cultivate and so they had rented it to others for share-cropping. It was found that population growth had affected the landholding size, and consequently the occupation and income pattern as well. There were 26 serviceholders, 4 businessmen, 4 rickshaw-pullers, 2 boatmen, and 22 did odd jobs to make a living.

#### **Programme implication and recommendations :**

This study is consistent with other studies showing the impact of population growth on land-holding, size, portraying an explicit picture of the reduction in land-holding sizes due to rapid population growth.



### **SOME GEOGRAPHIC CHARACTERISTICS OF SAVAR VILLAGES : A MICRO-SCALE STUDY**

**K. Maudood Elahi\***

#### **Objectives :**

- i) To examine the nature of various population characteristics, and
- ii) To indicate their possible bearing on the agrarian structure of the population.

#### **Methodology :**

Study area was Savar union. Ten mouzas out of a total 51 are selected for the study. The selection was made by area sampling procedure. The particular method used was the stratified systematic sampling devised by Berry. This sampling format generated slightly more than 20 per cent of the mouzas. These mouzas covered about 43.66 per cent of the total population and 32.22 per cent of the total number of households of Savar union.

#### **Findings :**

In the study area, the CBR and CDR were found to be about 39.4 and 6.3 respectively. These were significantly lower than the national

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\*Jahangirnagar University, Savar, Dhaka, 1978.

average and the exact causes for it was difficult to ascertain. The family sizes in Savar villages were fairly large, the average size being 8.11. The joint-families and single families formed 30.7% and 69.24% respectively. The large family size was an indication of the impact of and lack of significant impact of family limitations efforts on the population. The land-holding per household was quite low in Savar village ranging from 0.013 to 0.08 acres. The proportion of landless population was 2.33 per cent. In the study, it was found that in Savar villages about 69 per cent of land was owner-cultivated and only 18 per cent tenant-cultivated. There were only 7.69% non-farming families. Most of the households in the union had annual average income of below Tk. 2,500, and from Tk. 2,501 to 5,000.

#### **Programme implication and recommendations :**

It is suggested that in the absence of rural transformation and socio-economic development, decline in high fertility with its added consequences cannot be anticipated.

In Savar union, because of their location, peculiarities, the services of the family planning centres did not cover an extensive area and population. Although there were some family planning sub-centres in the union most of them only served their immediate vicinity to cover merely a small proportion of the total population as well as geographic area of the mouzas. Thus, there is a need for more family planning centres covering the total population of the Savar thana, or for location of centres to be based on population densities and centres where population growth rates are higher.



## **SOCIO-ECONOMIC FACTORS AFFECTING FAMILY SIZE NORMS AND FERTILITY PATTERN IN BANGLADESH**

**Md. Ali Akbar**

**Md. Abdul Halim\***

### **Objectives :**

- i) To describe the fertility patterns in urban and rural areas;
- ii) To identify and analyse factors that influence family size norms in urban and rural areas, and
- iii) To identify the barriers to the practice of birth control.

### **Methodology :**

Singra union of Rajshahi district and a portion of Rajshahi town were selected for the study. Twenty per cent of the rural and 15 per cent of the urban households were included in the study. The primary data for the study were obtained by including 180 urban and 245 rural eligible couples selected on the basis of a systematic random sampling. Separate interview schedule was used for each spouse.

### **Findings :**

The study revealed a high level of fertility both in urban and rural areas. The average size of a completed family was 5.9 living children in urban areas and 6.4 in rural areas. The mean marriage age of women was only 4.2 years in urban and 14 years in rural area. The mean age of motherhood was 16.2 in urban and 17.1 in rural areas.

Ten per cent of the respondents said that they did not know or had no preference for number of children. The study revealed that the mean number of children preferred by male respondents was 3.4 in urban

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\*Rajshahi University, Rajshahi, 1978.

areas and 3.1 in rural areas, while their wives preferred 3.5 in urban areas and 3.4 in rural areas. The women from the poor economic class seemed to prefer larger number of children than the women in higher economic class.

The study also revealed very low inter spouse communication and understanding regarding family size, especially in the early years of married life. The idea of an ideal family size developed late when they had already had 3.4 children. The respondents said that their sons were considered not only as old age security but that they were also expected to contribute to family income and to share parental responsibilities in maintaining family and bringing up younger siblings. Some of the parents considered daughters as burdens.

Almost all respondents had heard about family planning and had known about one or more methods. Only 17 per cent of the urban and 18 per cent of the rural couples were users of contraceptives. Another 15 per cent of the urban and 12 per cent of the rural couples after accepting contraception had discontinued it mainly because of side-effects and accidental pregnancies.

#### **Programme implication and recommendations :**

The idea about ideal family size is not considered generally until after the third or fourth child. This indicates importance of educating younger couples if NRR-1 is to be achieved.



## MANIKGANJ BASELINE DEMOGRAPHIC AND SOCIO-ECONOMIC SURVEY, 1977\*

### **Objective :**

To generate bench-mark demographic and socio-economic information for programme purposes.

### **Methodology :**

A stratified sampling procedure was drawn up in collaboration with Bangladesh Institute of Development Studies. The survey was conducted in April-May 1977, and covered 15 per cent of the Manikganj thana population. A total of 20,880 men and women in 3,675 households in 20 villages were surveyed.

### **Findings :**

The average household size was found to be 5.7 members. The population was youthful : 44 per cent were under 15 years. The female median age at marriage was 14.3 years. Seventy-six per cent of the population over the age of five had no schooling. The crude birthrate was 40.4 per 1,000 and crude deathrate was approximately 14.6 per 1,000. The Hindu population showed a higher infant mortality. The total fertility rate was 6.2 for all couples. The average landholding size was 0.35 acres per household. The percentage of landless people was 30. Landlessness was higher among Hindus. The average household size was larger in landholding families; the landless families had on average 4.8 members compared to 8.9 for families with more than 10 acres. Only a small number of households had members in cooperatives; those involved in agriculture formed 3.2 per cent and in fishing 0.5 per cent; the youth formed 5.3 per cent; women 0.4 per cent, and other types 4.1 per cent. Cooperative members were educated and owned more land.

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\*Bangladesh Rural Advancement Committee, 1978.

**Programme Implication and recommendations :**

The findings about family size, landownership, landless peasants etc. were consistent with other studies of the late 1970's.



**FERTILITY, INFANT-MORTALITY AND SOCIO-ECONOMIC  
STATUS OF RURAL WOMEN. A CASE STUDY OF  
THE DISTRICTS OF CHITTAGONG**

**Sultan Ahmed\***

**Objectives :**

- i) To estimate fertility rates, infant mortality and other vital statistics
- ii) To know the problems of married women and their opinion about family planning programme.

**Methodology :**

Four villages were selected from 19 rural thanas of the district of Chittagong using three-stage sampling method with equal probability in each stage. The thanas were considered as first stage units, the unions second stage units, and the villages as third stage units. Information from the married women of each of the selected villages were collected by direct interview method using questionnaire.

**Findings :**

The study indicated that the mean age at marriage increased from 15.7 years to 16.34 years and the demographic rates showed gradual decreasing tendencies. Births were heavily concentrated to earlier age (15-29) of the mothers but decreased in the older ages (45-49). Fertility rates were the highest among women whose husbands' occupations were agriculture and labour followed by business.

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\*Department of Statistics, University of Chittagong, 1978.

More than 90% of the rural married women had knowledge of family planning but the percentage of the women who supported the programme was about 65%. Only 24% women had accepted the programme.

Eighty per cent of the rural married women demanded training facilities in sewing, knitting and handicrafts in order to work for increasing their family income.

#### **Programme implication and recommendations :**

The study was unusual in three respects : it showed an increase in the age of marriage, it showed very high interest on the part of women in taking up income generating activities, the level of acceptance of 24% was considered the national average.



## **DIFFERENTIAL FERTILITY IN BANGLADESH**

**Bashir Uddin Ahmed\***

#### **Objectives :**

To fill in the gaps of differential fertility analysis of Bangladesh women. The differentials selected were placed on residence, childhood, type of residence, religion, work status, economic status, education of the women and the education and occupation of the husbands.

#### **Methodology :**

The study used data from the 1975 Bangladesh Fertility Survey (BFS). The survey adopted three-stage probability proportional to size design in order to select the ultimate samples. In all 5,024 rural and 1,489 urban evermarried women of age ranging to 49 years were successfully interviewed. The details of the survey design are mentioned elsewhere (1975 BFS report). The index of fertility used was the mean number of children everborn to evermarried women of the age of 10-49 years.

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\*Deptt. of Demography, The Australian National University, May 1979.

### **Major Findings :**

The rural-urban differential in fertility was negligible. The urban childhood background of the women and their husbands had a potentiality to increase fertility. The fertility of Muslims was higher than that of non-Muslims when either age or duration of marriage was controlled in both rural and urban areas of Bangladesh. The educated wife, whose education level extended beyond the primary school level, had a tendency to decrease fertility. The education of husband, on the other hand, had a weak propensity to increase fertility. The working women, whether in the rural or urban area, whether uneducated or highly educated, whether poor or rich, had lower fertility than their counterparts who were non-working. The relationship of occupation of husbands and the average fertility of their wives in Bangladesh did not conform to a pattern of class position. Rich women tended to have borne more children than poor women in both rural and urban areas when either age or duration of marriage was controlled. The differentials also persisted at different levels of education of the wife. The pattern of the relationship between age, marriage and fertility indicates that as age at marriage increased from 12 years, the mean parity of the urban evermarried women decreased by a small amount, but the mean parity of the rural evermarried women remained the same.



### **DIFFERENTIAL FERTILITY AND BIRTH EXPECTATIONS, A CASE STUDY OF MARRIED WOMEN IN RURAL BANGLADESH**

**Samad Abedin\***

#### **Objectives :**

- i) To determine the cumulative and current pattern of fertility segments of population;
- ii) To assess the expectations of births and the size of completed family expected; and
- iii) To investigate the nature and extent of relationships among fertility, birth expectation and socio-demographic variables.

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\*Deptt. of Statistics, University of Rajshahi, Bangladesh, 1979.

### **Methodology :**

The field survey was carried out in four different but adjacent villages of the district of Rajshahi, Bangladesh. In order to obtain correct and actual data the survey was conducted in two different steps. First, a complete household census was done in all four villages to record the number of houses including the number of persons living in every household with their marital status. Second, enumeration of each and every married woman (the respondents of the study) was made to collect data on household and family statistics, marriage, reproductive and pregnancy histories, expected or desired number of children. The enumerators collected information from the respondents through conversations.

### **Findings :**

The population consisted of three religious groups, viz. Muslim, Hindu and Santhal. The mean age of married women was 28.6 years and the median age 27.5 years. The mean ages of the Muslims, the Hindus and the Santhal were 28.8, 25.7, 26.9 years respectively.

The mean parity distribution of the study population showed consistently an increasing tendency with the increase of age and also with the increase of marriage duration but did not show such consistent pattern in relation to the age at marriage. The mean parity of the study population was calculated to be 3.096 children per married women and 4.027 children per mother. The mean parities per Muslim and Hindu married women were respectively 3.197 and 2.059. Mean parity per married woman whose husband was illiterate was 3.221 and it was 1.87 per married woman whose husband was literate. The study population included 26.4% childless women.

Average number of children produced by married women of their rural community since 1972 was 1.258. The mean recent fertility per Muslim married woman was 1.301, per Hindu 0.782 and per Santhal 0.882. The IER, TFR and GRR calculated the data of births having occurred in twelve months preceding the survey were respectively 1.35, 15, 7.1225, and 2.9855 children per married woman of reproductive ages. The CBR was estimated to be 17.1 children per 1,000 persons, Thus, fertility in this rural community was found to be high:

Average number of additional children expected by married women of reproductive ages was 1.496. It was 1.445 for the Muslims and 2.039

for the non-Muslims. Age and birth expectation were found to be inversely related to each other while marriage age and birth expectation were directly related to each other. The data showed a significant association between CER and the stage of life cycle. A correlation coefficient of 0.8,420 between the CER and the age gave evidence of very high and direct relationship between the two.

#### **Programme implication and recommendations:**

The husband-wife communication and understanding regarding family size norm and practice was very low; often entirely absent. People need formal and non-formal education on various aspects of fertility planning. Social incentives and disincentives may also reduce the fertility level particularly in rural areas of Bangladesh.



### **A REVIEW OF CHANGES IN PREVALENCE AND PATTERNS OF CONTRACEPTIVE USE IN BANGLADESH SINCE 1976.**

L.H. Lewis  
S. Waliullah\*

#### **Objectives :**

- i) To provide reliable indicators from which changes in contraceptive prevalence can be measured;
- ii) To provide information related to both fertility and contraceptive behaviour.

#### **Methodology :**

The study mainly analysed the data (with respect to family planning and its various aspects) obtained from different sources, and thereby tried to make some observations regarding changes in contraceptive use patterns and on their influences over fertility in Bangladesh.

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\* Management Information Service Unit, Population Control and Family Planning Division, 1979.

**Findings :**

The paper, in its conclusion, reportedly said that given the more limited scope of evaluating the acceptance of family planning and assuming that high acceptance will lead eventually to marked decline in fertility, the signs in recent years have been promising. It also reported that prevalence had been increasing steadily both from the evidence of quantities of contraceptives distributed and from surveys that had been conducted.

**Programme implication and recommendations :**

It concluded that although there was an increase in prevalence rate it was far less than satisfactory. As such the formulation of projections may yet be questionable.

**RURAL DEVELOPMENT AND FAMILY PLANNING  
BEHAVIOUR IN BANGLADESH VILLAGE**

Mohammad Alauddin\*

**Objectives :**

- i) To examine the relative roles of development programme and family service efforts in influencing fertility related phenomena at the village level;
- ii) To identify the correlates of fertility behaviour at the individual level; and
- iii) To discern whether village-level development and family planning programmes made any independent contribution to the explanation of fertility behaviours of the rural women after controlling their individual characteristics.

**Methodology:**

The basic data were from the rural sample of the 1975-76 Bangladesh Fertility Survey, a World Fertility Survey project. Four thousand nine hundred and sixty-two evermarried women, aged 10-49 years, were

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\*Institute of Social Welfare and Research, Dhaka University, 1979.

drawn from 160 villages. Village level data were from a community survey, supplemented with data from the 1975 census. Some individual level data were also aggregated from each village.

Five dependent variables were examined at both the village individual levels. They were : (a) knowledge of clinical contraceptive methods, (b) knowledge of non-clinical contraceptive methods, (c) ever-practice of contraception, (d) fertility norms/desired family size, and (e) intention to use contraception in the future.

At the village level, 18 independent variables were selected by factor analysis. These were grouped into three sets : (a) development, (b) family planning and (c) environmental and socio-economic conditions of the village.

#### **Findings :**

Development and family planning programme independently had almost equal explanatory power. Their combined effects, however, were greater than the effects of either separately or of either paired with given conditions. The village-level predictors together explained the 10 to 44 per cent ever-practices of contraception.

Village-level contraception was related to village transportation facilities, family planning worker visits and village-level knowledge of non-clinical contraceptive methods. The later was, in turn, dependent upon the level of farm employment and modern agricultural practices. Education aspired for children had the most bearing on village knowledge of clinical contraceptive methods. Knowledge of both clinical and non-clinical methods was related to the intention of using contraception. Fertility norms youth were associated with availability of radios, presence of organization and the access to educational institutions.

At the individual level, 12 predictors were selected by the application of AID on the basis of theoretical and policy considerations. Both AID and MCA were used to identify the important correlates of individual behaviour. Individual level predictors explained from 9 to 15 per cent for ever-practice of contraception.

Education desired versus actual family size correlated strongly with knowledge of both types of contraceptive methods, clinical and non-

clinical. Knowledge of non-clinical contraceptive methods and parity were the most important correlates of contraceptive use. Most ever-users knew both types of methods and most non-users clinical methods only. But the ever-users were more likely to have used non-clinical methods.

Desired family size was chiefly associated with parity. Similarly the intention to use contraception in the future was associated with the desired versus actual family size. The intention was strongest among women with more children than they desired and the least among those who gave non-numeric response on desired family size. Cross-level analysis, utilising AID and MCA, revealed that village factors were generally less influential than individual's own characteristics. There was evidence of village-level, contextual effects, however, women's contraceptive knowledge was strongly associated with village-level knowledge. Their contraception was facilitated by village access to roads and exposure to family planning workers. The desired family size was lower where the village sent many children to school or had high level of contraceptive knowledge. On the whole, the village and the individual level predictors jointly explained the 11 to 19 per cent of variance 11 per cent for desired family size and 19 per cent for knowledge of clinical contraceptive methods of the rural women.

This was the first study that examined the relative influence of development and family planning programme efforts on family planning behaviour in Bangladesh villages.

#### **Programme implication and recommendations :**

The findings implied that development activities and family planning information and services should be provided to the villages to maximize the impact on fertility regulation. Each of them separately is not likely to produce as much contraceptive use as would both of them jointly. It further implied that population planning is best regarded as an internal aspect of development planning and as a part of a series of concerted development endeavours that would affect society in such a way as to reinforce the motivation for fertility regulation. The most important of development programmes was the promotion of education, because it impinges upon every aspect of development. There is no doubt that education should be promoted but efforts should be concentrated

on promoting primary education, as diffusion of primary education specially among the girls is not only desirable for the pure virtues of development but also for the attainment of demographic impact on fertility.

The relationship of contraception with the access to the transportation system suggested that development of the rural transportation infrastructure is likely to have demographic implications. The extent of family planning workers visits to the villages was also found to be an important predictor of contraception at the individual level.



## **FIRST FOLLOW-UP STUDY OF FOUR CONCENTRATED THANA PROJECT\***

### **Objectives :**

- i) To obtain basic socio-economic and demographic information on the population under study; and
- ii) to relate this to fertility related knowledge, attitudes and contraceptive practice.

### **Methodology :**

The study was based on selected BFS villages. The design involved three stages within the four project thanas. First, within each thana, four unions were randomly selected and within each union three villages, were selected. Thus, the sample included 48 villages in four thanas. Finally, selection of households within the village was done with probability based on the size of the thana, so that this gave a self-weighting PPS sample of 2,250 households. Respondents were currently married males and females.

### **Findings :**

The male respondents had a median age of 37.6 years, which was about nine years older than the median age (28.5 years) for females. These

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\*External Evaluation Unit of the Population Planning Section, Planning Commission, 1980.

women had a mean of just over 4 live-births and those aged over 40 years, who were thus collectively close to completed fertility, had a little over 7 births on an average. Median annual household income was just under 5,000 taka and almost 30% of the households had under 2,500 taka per year. About 2.3% of the male respondents at the time had more than one wife. About half of males were literate, compared with only about one quarter of female respondents. Overall, about 20% of the respondents had claimed to be recent contraceptive users and 14% previous users who were no longer practising the use of contraceptives.

#### **Programme implication and recommendations :**

The study was similar to certain others in which a higher level of contraceptive prevalence had been reported. The shift had begun to grow in the late 1970's.



## **HOUSEHOLD DISTRIBUTION OF CONTRACEPTIVES AND ITS IMPACT ON FERTILITY**

**Muklesur Rahman and others\***

#### **Objectives :**

- i) to assess the level of contraceptive practice;
- ii) to measure the demographic impact, and
- iii) to identify factors determining acceptance and use.

#### **Methodology :**

Matlab was the study area. A longitudinal vital registration programme had been in operation since 1966 and from 1968 onwards it had covered a population of 2,60,000 in 233 villages. The contraceptive distribution programme covered about half the population including villages

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\*International Centre for Diarrhoeal Disease Research, Bangladesh, 1980.

located in remote areas far from the Government and CRL health facilities. A baseline KAP survey was conducted among a sample of 1,011 eligible women (married women aged 15-44 years) and was repeated 18 months later on the same respondents. The level of contraceptive use was measured by eight quarterly prevalence surveys. The first, second and fifth survey included all eligible women within the distribution and control areas. The other five surveys were confined to a 20 per cent sample of eligible women in both areas. Demographic indicators of the fertility impact were obtained from the CRL vital registration programme covering the area at the time.

### **Findings :**

In 62 days (9 October—10 December 1975) eight FPAs had contacted 81.3 per cent of the eligible women of whom 68.8 per cent used to receive supplies usually six cycles of oral contraceptives. The prevalence surveys confirmed the dramatic impact of the programme. In the villages instructed to begin contraceptive use at six months post-partum, 25 per cent of the women had started a method and the use rate rose from a baseline of 1 per cent to 17.8 per cent in three months. The most common side-effect of using pill was weakness and dizziness and a number of women had had bleeding problems due to faulty pill use. The survey also revealed that many FWVs had been insufficiently trained and had poor understanding about correct use of oral contraceptives. About 30 per cent had discontinued contraception within three months and over 60 per cent had discontinued by 17 months. As the two years mark approached only a little over 25 per cent were practising contraception. Only 34.9 per cent of the eligible women were menstruating in the month prior to the distribution campaign. Another 41.3 per cent were in a state of post-partum amenorrhoea 11.4 per cent were pregnant, 7.0 per cent were menopausal and 4.7 per cent were found amenorrhic as the open birth interval increased. This was consistent with the studies estimated average duration of 18 months for lactational amenorrhoea. An interaction of age and parity with contraceptive use was found. At low parities, younger women had a substantially higher level of practice than older women. The educated wives had a substantially higher level of practice than the older women. The level of wife's education had a significant effect on the prevalence of contraceptive use. The occupation of the household head appeared to make a difference in contraceptive practice. Use of contraception was highest among those working in Government, and other services, business, mills and factories.

### **Programme implication and recommendations :**

The study indicated that post-partum programme could be successful but that it was important for FWV's to be well-trained about proper use of orals and treatment of side-effects. The studies' findings on the level of wife's education are consistent with other studies since 1975.



## **A STUDY OF THE CONSTRAINTS OF SERVICE DELIVERY SYSTEM IN BANGLADESH**

**MD. Ali Akbar\***

### **Objective :**

To identify and examine the socio-economic and administrative constraints of the service delivery system of the population control programme of Bangladesh at the field level.

### **Methodology :**

The study was conducted in 6 out of 30 thanas of Rajshahi district. The thanas were selected on the basis of performance. Two thanas that were selected had higher than average district level performance, two other thanas had average district level performance and another two thanas selected had lower than average performance during 1977 and 1978.

The study was completed in three stages. In the first stage the job description of the field personnel and allied information were collected. In the second stage two unions of each thana were selected; one that had the best performance and the other that had the worst performance. In the third stage, all service personnel, thana co-ordinators, a sample of local leaders and a sample of 150 women from among the registered couple each of the selected 12 unions were interviewed.

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\*Deptt. of Social Work, Rajshahi University, December 1980.

## **Major Findings :**

It was found that the people living below poverty line were least bothered about having an additional child; as an additional child did not cost them much. On the other hand, they doubted whether accepting family planning methods did any good. The women gave various reasons for not adopting the fertility control measures other than those previously mentioned. About 43% thought that the method was not acceptable; 35% had less than the desired number of sex composition of their children. 14% did not attach much importance to it and 2% thought it was against religion.

It was found that out of the never-users 42% would never use any method in future; 31% didn't know and were not able to decide; 18% would only use the injectables; and 9% indicated they might use any method.

It was found that the thana family planning office was headed by 1 TFPO, 1 female paramedic, 1 part-time medical officer, 3 thana family planning assistants, several dais and male organisers. The median age of the FPA was 26.6 years and that of the FWAs was 23 years. 5% of FWAs had only primary level of education. It was found that the work load on individual FWA was heavy. The size of target population and the geographical area they had to cover was too much for one person.

The supervisory system was found very weak. The FWAs were supposed to be supervised by FPAs and the FPAs by TFAO. But FPAs were very inactive and TFPOs were found to be "too much involved in other activities."

It was found that the horizontal relationship in any programme was operative. The multi-sectoral approach also did not work as each agency was found to be jealous of the other.

The horizontal relationship of the field organisations was also found ineffective as the system or support and feedback mechanism were found weak along with inactive supervision.

## **Programme implication and recommendations :**

The study indicated that the major policy and strategy approaches were ineffective at field level due to weak supervision, poor coordinated efforts

(health and family planning, multi-sectoral agencies) and because other administrative deficiencies existed as well. This suggested a need for management analysis of the extent of control, time allocation supervisory systems and the means to improve coordination. Some deficiencies could be corrected by management training.



## FERTILITY LEVELS AND DIFFERENTIALS IN BANGLADESH A MACRO-LEVEL ANALYSIS

Sultan Ahmed\*

### Objectives :

- i) To estimate the levels and pattern of fertility in Bangladesh;
- ii) to examine the fertility differentials in relation to education, place of residence, duration of marriage and also differentials related to religions; and
- iii) to identify the socio-economic variables affecting fertility through an examination of the extent to which each of them could explain fertility differentials among the religions.

### Methodology :

Data were taken from the 1974 census of Bangladesh in order to throw light on the levels and differentials of fertility in Bangladesh.

### Major Findings :

The study revealed that the rate of growth of population was very high (2.7-3.0 per cent per annum) which indicated a doubling time of 23-26 years. When the age structure was studied most of the population was found to be very young with 47.5% of males and 47.7% of females being under the age of 15. In some districts, the proportion of females under the age 15 was even more than 50%. The level of education was obser-

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\*A thesis submitted in partial fulfilment of the requirement for the degree of master of philosophy in Demography, Cairo, June 1980.

ved. to be very low in Bangladesh. Only 32.1 per cent of the males and 13.3 per cent of the females were found to have had some formal education.

Completed fertility was reported to be high with 5.8 live-births on the average for women in the 45-49 years age group. On the other hand, more than 6.8 births were reported on the average for women less than 50 years in the marriage duration of 35 years. Thus, it can be inferred that completed fertility derived from duration of marriage gives a picture which is probably nearer to reality than that provided by age of women. The total fertility rate had been estimated to be (6.7—7.3) which indicated a crude birthrate of 44.0-48.1 per thousand. Age at marriage was found to have depressing effect on completed fertility. An increase in age at marriage from 10-14 years to 20-24 years reduced completed fertility by about 18%.

Differentials in fertility in relation to the level of education of women did not support the inverse relationship between education and fertility which showed that the women with 1-5 years of education had the highest level of fertility, the difference between the illiterates and those with education of 6 or more years had also been insignificant.

Urban fertility was found to be lower than the rural one as expected. Illiterate women in the urban areas showed lower level of fertility than their rural counterparts.

Variations in fertility among the regions were also revealed by the data. Relatively high level of completed fertility was noticed in the districts of Kushtia (6.8), Pabna (6.5), Tangail (6.1) and Faridpur (6.1) compared to low levels in Chittagong (5.3), and Chittagong Hill Tracts (5.4). Differentials in marriage pattern and childlessness were among the socio-economic and demographic correlates of fertility in explaining fertility differentials among the regions. It was found to be statistically significant at 5% level while differentials in economic development and female labour force participation were observed to be statistically significant at 10% level.

#### **Programme implication and recommendations :**

The area of policy intervention was a programme for raising age at marriage for reducing fertility since the population was almost a non-contracepting one. But legislative measures alone may not be enough in raising age at marriage. Increase in the level of female education above secondary level along with other socio-economic facilities for females, such as, employment opportunities must be provided to raise the age at marriage.

To have an effect on the overall birthrate in Bangladesh it will be necessary and of paramount importance to find ways that will reduce the fertility of the rural and illiterate women. Although family planning scheme was introduced in Bangladesh in the early part of 1970's, its impact on the rate of growth of population has not been felt yet. Thus, more efforts in this direction are necessary to motivate people to have smaller families and to extend more family planning facilities in order to abate the high rate of population growth in the country.

Redistribution of socio-economic facilities such as medical facilities, employment opportunities and educational facilities, especially for females will eventually lead to regional variations in the level of fertility and, hence may reduce the overall level of fertility in the country.



## **RETROSPECTIVE STUDY OF FERTILITY AND CONTRACEPTIVE BEHAVIOUR IN MYMENSINGH DISTRICT**

**M.A. Mabud and others\***

### **Objectives :**

- i) To examine the fertility behaviour of the currently married women at the child-bearing age of 15-44 years;
- ii) To observe the level of contraceptive knowledge, attitude, and practice among currently married couples; and
- iii) To observe the fertility level.

### **Methodology :**

A sample of 641 currently married women of child bearing age from 4 villages of Mymensingh district (Gafargaon, Melanda, Haluaghat, Nikli) were selected for the study. For the purpose of obtaining accurate socio-economic information the spouses of the respondents were inter-

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\*External Evaluation Unit (EEU), Planning Commission, March 1981.

viewed through a structured interview schedule. Data were collected in 1977-78.

### **Findings :**

The study was mainly devoted to three aspects, i.e., (i) making a profile of respondents, (ii) collection of information on their fertility and (iii) gathering information on their contraceptive knowledge, attitudes and practice.

Respondent's profile section presented some socio-economic characteristics of the people of four villages studies. In analysing fertility data, socio-economic factors were of great importance. Ninety-four per cent of the respondents were Muslims. Others belonged to the Garo tribe. Both medium and mean household size of the respondents was 6. More than one-fourth (27.46%) of the households were landless (no arable land), while 44.15% households possessed up to 2 acres of arable land. Only 6.40% households had more than 8 acres of arable land.

Almost all the respondents did not have any occupation other than household chores. In respect of the occupations of their husbands, most of them (64%) were engaged in agriculture.

The total fertility rate (TFR) was calculated to be 7.85 as against a marital fertility rate (MFR) of 7.71. The general fertility rate (GFR) was 185 per 1,000. The relationship between mother's education and parity was tested and found not to be significant at 5% level of significance. The impact of husband's occupation on fertility was not clear from the study. The fertility differentials from one group to another due to husband's occupation was found to be insignificant. In this connection it was mentioned that most of the husband's occupations were agriculture and day-labour which might account for insignificant differentials in fertility in terms of husband's occupations.

No positive relationship between parity and use of contraceptive was found in the study. The study revealed that the mean number of children everborn of the every of users of contraceptive was 4.59 as against 3.41 of the never-users. The study also revealed that the ever-users were older than the non-users. The most commonly known method was the oral pill, 88% of the respondents had heard about it. The next commonly known method was condom, 61% of the respondents had heard of it. It appeared that the knowledge of the respondents about the use of family planning methods increased with the level of education.

The rate of contraceptive users (ever-users) among the respondents was 14%, while the rates of current users and past-users were 7% and 6% respectively. Of the current users, 60% had adopted the permanent method i.e. sterilization. Education did not appear to play an important role in the contraceptive behaviour, neither did husband's occupation. The rate of contraceptive use among the serviceholder husbands was much higher than that of those engaged in agriculture or other occupations.

**Programme implication and recommendations :**

This findings of the study provided an insight to the policymakers into the impact of education, occupation and income upon fertility in rural area. It appeared that the stage at which the variables would influence fertility in a rural setting of Bangladesh had not yet been achieved. A great modernisation effort to provide alternative roles other than child bearing seemed necessary.



**DETERMINANTS OF NATURAL FERTILITY STUDY METHODS  
AND DESCRIPTIVE TABLES FOR THE PROSPECTIVE  
STUDY 1975-78\***

**Objective :**

To measure accurately the parameters of the reproductive process in the natural fertility population. It was also aimed at determining the relationship between fertility and biological and anthropometric characteristics.

**Methodology :**

The prospective sample for the study was taken from the ICDDR,B field station at Matlab Bazar. For the purpose 2,000 recently married

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\*Scientific Report No. 48.

International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, May 1981.

women below the age 50 were followed for three years to analyse the birth interval dynamics. Five female field workers were selected and trained for data collection and to interview. The field workers collected the socio-metric and anthropometric information and also the specimens of blood for biomedical analysis. After collection of all the informations records were brought to Dhaka for computer treatment and analysis.

#### **Findings :**

The high fertility level of the population was revealed both by the age-parity distribution and by the rates of births in the prospective period. The result also indicated that about 66% of women were breast-feeding at all times during the period of study. The mean period of delay from the time of the resumption of menstruation to the time of conception was found to be 5 months. With regard to nutritional and morbidity status of the women, illness among them was reported to be quite low, the anthropometric measures revealed very few differences between women according to their reproductive status. Out of the total sample a mere three per cent of the women reported to have practised contraception.

#### **Programme implication and recommendations :**

The size of the population of the study was not large and it was confined within a demographic surveillance area of research based organisations. Evidently the nature of the population was biased. Therefore, the findings of the study may not hold true for the whole nation. Further study with a larger representative sample is necessary.



## CONTRACEPTIVE USE DIFFERENTIALS OF THE CURRENTLY MARRIED FECUND WOMEN OF RURAL BANGLADESH, 1980-81

Ghyasuddin Ahmed  
Pradip Kumar Muhuri\*

### Objective :

To analyse the contraceptive use differentials of the fecund women.

### Methodology :

The sample size of the fecund women was 3,427 drawn from the randomly selected households of 100 unions of the 100 randomly selected thanas of the four geographic divisions of Bangladesh.

### Major Findings :

The current contraceptive practice rate was observed during the course of study to be 16.4%. There were 28.5% ever-users and never-users formed 71.5%.

It was found that 35.3% current users were practising permanent method followed by oral pill (30.3%). However, among the past-users oral pill was the most popular method (78.9%).

The highest proportion (30%) of the past-users had been practising the use of contraceptives for less than 3 months followed by a 12.8% which had been practising for three to less than 6 months. In case of current use the highest proportion of current users (28.3%) reported to have had used contraceptive for 3 years followed by another 18.3%, which had been using contraceptives for 12 to less than 18 months.

The mean age of the current users was found to be slightly higher than the past-users. The current-users were 4 years older than the past-users and the past-users were almost 3.5 years older than the never-users. It was

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\*Bangladesh Fertility Research Programme, 1981.

also found that the proportion of current users increased with every increase in age up to 39 years, and then declined to about 1% between 40 and 44 years of age, then sharply increased to 27% at the age of 45-49 years.

It was found that the mean number of children for the current and past-users was 4. It was also found that the more was the number of male children the higher was the proportion of current use of contraceptive.

It was also found that the educational level of the husbands and the wives had a positive relation with contraception.

It was found that the proportion of current users was higher (21%) among the couples whose husbands were engaged in salaried occupations.

**Programme implication and recommendations :**

The Population Education Programme of the Ministry of Education should endeavour to create deeper awareness of the need for female education.



**BANGLADESH CONTRACEPTIVE PREVALENCE SURVEY, 1979**

Syed Waliullah  
N.K. Nair, Gary Lewis\*

**Objectives :**

Bangladesh Contraceptive Prevalence Survey was undertaken with a view to determining changes in the knowledge and practice of contraception, fertility behaviour of eligible couples and the availability and the source of contraceptives. The main aspects of the study were :

- 1) To collect from Bangladesh a body of data so as to apprehend the knowledge and use of contraceptives and the availability of supplies;

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\*National Institute of Population Research and Training (NIPORT), Dhaka, June 1981.

ii) To obtain informations on the relationship between selected population characteristics and their contraceptive practice.

#### **Methodology :**

The survey universe for BCPS was comprised the ever-married women under 50 years of age in the country. Households were considered as the ultimate sampling units. Ever-married women under 50 years of age who had been sleeping in the households till the previous night were considered eligible for interview in the BCPS. The BCPS adopted a three-stage sample design in both the rural and the urban strata. The first stage was the selection of census circles or primary sampling units (PSU). The second stage was the selection of one village or block, called intermediate sampling unit (ISU) and the third stage was the selection of households from the selected ISUs. Out of 200 sample units 80 were from urban areas and 120 from rural areas.

A probability sample of 15,481 ever-married women under 50 years of age was drawn.

#### **Findings :**

Nearly 95 per cent of the BCPS women knew at least one method of family planning. The finding represented an appreciable increase in the knowledge level compared to the information obtained by the WFSB for the years 1975-76.

Women over 35 years of age were less knowledgeable with regard to family planning methods than those below that age. Higher levels of contraceptive knowledge were generally found among those with higher levels of education (both wife's and husband's). Urban residents were only slightly more knowledgeable about family planning methods than the rural residents,

According to the BCPS findings there were 12.7% (13%) current users. When compared to the findings of BFS (9.6%) 1975-76, there had been an increment about 3.1% in the years 1979-80.

Among the methods considered in BCPS, pill was the most widely known (93%). Female sterilization (84%) and male sterilization (71%) were the next most widely known methods, followed by condom (57%), injection (41%), IUD (32%), and abortion (22%). The other methods were

less widely known (each less than 12%) among the women interviewed. Condom, IUD, abortion, injection and vaginal methods were substantially less widely known in rural areas but pill and sterilization were known almost equally in both urban and rural areas.

**Programme implication and recommendations :**

The Population Control and Family Planning Division of the Ministry of Health and Population Control has been concerned about the impact of the family planning programme in the country in order to evaluate the progress of the programme and to formulate service delivery plans, policymakers and programme administrators need country-wide data on fertility pattern and contraceptive practices. The findings of the country-wide study will be helpful and important for the programme planners. Findings showed that female methods will continue to be more acceptable to the people of Bangladesh and that the programme should take this factor into account when doing both long and short-term planning. It is this group of women who must alter their fertility practices (through the use of contraception) for there to be any change in the dangerous population growth being experienced by Bangladesh. All efforts to support contraceptive use by this group should be made.



**BANGLADESH CONTRACEPTIVE PREVALENCE SURVEY, 1981\***

**Objective :**

To obtain data on current levels of contraceptive use among the population and its sub-groups classified by selected characteristics.

**Methodology :**

The sample design adopted for the survey was a three-stage stratified cluster sampling technique. Following this design, a national representative sample of ever-married women under 50 years of age was selected and in-

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\*Management Information System (MIS) Unit, Population Control Division, December 1981.

interviewed by using a structured questionnaire to gather relevant data for the survey. The sample was drawn classifying the population into two strata, rural and urban. The sample comprised 120 rural and 80 urban sample areas selected independently from their respective strata. Fifty households were selected from each rural sample area and 25 households from each urban sample area to yield a sample of 8,000 households.

### **Findings :**

In the households interviewed in the survey about 46.8 per cent of female members enumerated were under 15 years of age. It was revealed through the survey that the percentage of never-married females under 15 years of age was 97.8 per cent.

The knowledge of oral pill and tubectomy were almost universal in the country. Nearly 95 per cent of the ever-married women knew or had heard of oral pill and 92.4 per cent had heard of tubectomy. The levels of knowledge about condom and vasectomy, the two male methods, were comparatively low, about 59.2% and 71.5% respectively.

The percentage of ever-married women who knew about traditional and vaginal methods varied from 16.7 per cent for vaginal method to 36.4 per cent for safe period. The knowledge level for the IUD was also as 41.7 per cent; and 59.9 per cent of the ever-married women knew or had heard of menstrual regulation or induced abortion; 53.2 per cent had heard of injectable. The percentage of ever-married women reportedly having ever used at least one family planning method was 35.7 per cent. Overall 18.6 per cent of the currently married women were using a family planning method at the time of interview, and 10.9 per cent had been using a modern method. The rest of 7.7 per cent (the overall rate minus the rate for modern methods) were those who said that they were relying upon traditional means of contraception such as, safe-period, withdrawal etc. to plan their family. Methods which had the highest use rates in the 1981 CPS were tubectomy, safe period and oral pill. Tubectomy was accepted by 4.0 per cent of the currently married women followed by safe-period (3.9 per cent) and oral pill (3.5 per cent). The next widely used methods were withdrawal (1.8 per cent), condom (1.6 per cent) and abstinence (1.2 per cent) although none of them had a prevalence rate which exceeded 2 per cent. All other methods had low levels of usage, varying from 0.8 per cent for vaginal method to 0.8 per cent for vasectomy.

### **Programme Implication and recommendations :**

The high rate of knowledge about tubectomy and oral pills should be encouraging for programme implementation, particularly, the knowledge about sterilization. Knowledge levels tend to affect the use-level but the use rates are as yet quite low (tubectomy 40%; pill 3.5%). In 1979, 84% of women were sterilized. The contraceptive use rate shows a sharp rise since 1979 (from 12.7% to 18.6%).

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### **PSYCHOLOGICAL AND CULTURAL ELEMENTS OF FAMILY PLANNING BEHAVIOUR : A STUDY OF INDIVIDUAL MODERNITY AND FAMILY PLANNING (PRELIMINARY REPORT)**

**Ahmedullah Mia and others\***

#### **Objectives :**

- i) To identify the varying levels of motivation related to family planning behaviour;
- ii) To examine the conditions that lead to the overcoming of the socio-cultural barriers for family planning practices;
- iii) To examine the relationship between knowledge of the reproductive process and family planning behaviour; and
- iv) To understand the fertility implications of breast feeding, menstruation and cultural components.

#### **Methodology :**

Multi-stage sampling procedure was adopted. At first, one thana from each division was selected randomly. Secondly, a stratified list was made of classified couples, namely, permanent methods adopters, regular users of conventional methods, irregular users and never-users.

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\*Bangladesh Fertility Research Programme, Dhaka, December 1981.

A total of 800 sample couples, 200 from each thana were targeted and 752 couples were interviewed.

### **Major Findings :**

It was found that the motivation scale had the capacity to differentiate among couples with different contraceptive behaviour pattern. It was found that permanent method acceptors had the highest score in the motivation for overcoming the socio-cultural obstacles, followed by the regular users, conventional method users and irregular users.

It was found that education had a facilitating effect on higher motivation while income had a curvilinear relationship with motivation and contraceptive use. Motivation was found to be higher in the middle income range. The businessmen and serviceholders were more frequently found to have higher motivation compared to the cultivators and day-labourers. The lower motivated people held traditional cultural values.

It was also found that the breast-feeding habit and perception about menstruation were also related to fertility behaviour; 41% of the respondents were unaware of the conception period and most of the rural mothers practised breast-feeding.

It was found that motivation depended on the socio-cultural influences on the individuals. A modern man prefers family planning much more than a traditional man.

### **Programme implication and recommendations :**

The policy and programme efforts should be aimed at bringing about a change in the socio-cultural milieu so that a traditional man is transformed into a modern man.

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**THE DEMOGRAPHIC IMPACT OF THE TWO CONTRACEPTIVE  
SERVICE PROJECT IN MATLAB THANA : A SYNOPSIS OF  
KEY FINDINGS**

**James F. Phillips, Wayne Stinsen, & others\***

**Objective :**

To assess the demographic effects of the two contraceptive service projects conducted by the International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B) in its field research at Matlab, Comilla district.

**Methodology :**

Data were collected from two project areas of Matlab thana of Comilla district. Throughout the period of these two projects the ICDDR,B continued to maintain an independent longitudinal vital registration system in the study area. Demographic indicators of the fertility impact of the two projects were obtained from the vital registration system.

**Findings :**

The monograph documented the causal role of contraceptive service and their demographic effects of two studies conducted in Matlab thana. The first study was conducted between October 1975 and October 1977, and the second study had been started from October 1981. The first project known as Contraceptive Distribution Project showed low use of contraceptives owing to low continuation rates and diminishing acceptance rates. The second study on Family Planning Health Service Project showed that the contraceptive prevalence rate rose to 34% among the eligible women within one year period, and out of those women about 50% had adopted 'Depo-Provera', 9% had received tubectomy and the rest

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\*Paper presented at the second bi-annual seminar on Family Planning Research, NIPORT, Dhaka, January 1981.

adopted Copper-T, pills or condom. The project had continued to maintain the 34 per cent prevalence rate from 1978 to the till date.

**Programme implication and recommendations :**

Several policy implications were suggested by the authors :

- i) Availability of the contraceptives need to be ensured.
- ii) Services like method orientation, counselling, follow-up and health service usually increase the use effectiveness. So these are to be ensured properly.
- iii) Seasonality of fertility calls are required for further investigation for policy-planning.



**FERTILITY TRENDS IN COMILLA KOTWALI THANA**

John Stoeckel  
Moqbul Ahmed Chowdhury\*

**Objective :**

To investigate the variation in fertility trend in Comilla Kotwali thana.

**Methodology :**

The data were collected by interview (administered by 10 female interviewers) of 1,600 currently married women in Comilla Kotwali thana. A simple two stage sample design was used. In the first stage, 20 villages were selected from a total of 247 on the basis of probability proportionate to size. The second stage consisted of listing all currently married female

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\*Bangladesh Academy for Rural Development, Comilla.

in each village and then randomly selecting 80 women from each village. In order to measure fertility, the Bogue's pregnancy history technique was adopted. By means of an elaborate computer programme age specific birthrates were computed on the basis of actual years of exposure of each woman to each age group she has passed through in her entire reproductive history.

### **Findings :**

An analysis of fertility trends in Comilla Kotwali thana utilising the Bogue's pregnancy history technique indicated that fertility had declined by approximately 27% in the thana between the years 1958 and 1967. Excluding the age group of 12-14 years the percentage decline in age specific birthrates showed a direct relationship with age and a maximum reduction of almost 70% was reached at ages of 40-44 years.

Even though there had been an overall reduction in total fertility between the years 1958 and 1967. The decline did not occur at a consistent pace. The major reduction occurred between the years 1958-59 and 1963-64. This decline was most probably due to the combination of factors. One of the most important was that the Comilla Academy implemented the 'Organiser Approach' to family planning in 1961 and later a woman's education and home development programme was also emphasised and included in family planning. The impact of the 'Organiser approach' followed the course of other development programme. A high impact initially through increasing adoption reached the peak in the year 1964 and then a decline followed. Between the years 1963-64 and 1964-65 there was only a slight variation in fertility with an overall increase of 2%. The impact of this programme was related to the fertility decline of 13% occurring between the years 1964-65 and 1966-67. The major portion of the reduction in this period as in the previous programme period occurred among the age groups 35-39 years and 40-44 years.

### **Programme implication and recommendations :**

The results reflected the impact of the 'Organiser Approach' to family planning as well as the commercial distribution programme. If the trend continues, it could be expected that the more fertile age groups of 15-19 years and 20-24 years would make a greater contribution to the reduction in the total fertility while the reduction by the older groups may contribute relatively less.

**SOME POPULATION CHARACTERISTICS AND FERTILITY DIFFERENTIALS IN FOUR MICRO-REGIONS OF BANGLADESH: SOME RESULTS FROM THE STUDY OF THE REPRODUCTIVE BEHAVIOUR AND POVERTY IN BANGLADESH**

**M.R. Khan\***

**Objectives :**

- 1) To investigate the determinants of reproductive behaviour in Bangladesh; and
- ii) To understand and interpret the process that generates and perpetuates poverty and high fertility in Bangladesh.

**Methodology :**

The methodology involved generating information through the use of structured question and through the observations of the research investigators living in the study area.

Three phases of investigation in each micro-region were completed. The first phase of the study consisted of conducting a comprehensive census of each household in each study area. Besides the usual socio-economic and demographic information data were collected on land use and tenural pattern; acquisition and disposition of property. Researchers collected community data from each of the four thanas of Khetlal, Narail, Manikganj and Companyganj in order to select appropriate cluster of villages a micro-region consisting of around 1,000 households in each area.

In the second phase, intensive investigations were carried out on one-third of the census households stratified by land ownership class and relative change in the economic status of the household heads within each land ownership class. Among others information was collected on marital and pregnancy history, knowledge, attitude and practice of family planning and related variables patron-client relations, water use, sanitation and

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\*Paper presented at the second bi-annual seminar on family planning research, NIPORT, Dhaka, January 1981.

health, yearly income, consumption, savings and borrowings together with the genealogy of the households.

In the third phase, samples drawn in the second phase were further stratified by land ownership class and occupation in order to draw one-third of the sampled households (i.e. about 10% of the census households).

### **Major Findings :**

Of the four micro-regions Khetlal and Narail were endowed with higher landman ratio than Companyganj and Manikganj and were basically agricultural. Due to low land-man ratio and also non-agricultural resources base, Manikganj was the poorest of all the regions. Concentration of landless farmers was also the highest in Manikganj. Literacy rate was the highest in Companyganj (29.9%), followed by Narail (22.4%), Manikganj (20.0%) and Khetlal (17.8%). The average age at first marriage of evermarried women, as obtained in response to a direct question for all areas together, was 13.8 years compared to 12.3 years as obtained in the World/Bangladesh Fertility Survey, 1975. Marriage was universal, and in all areas together, almost all females got married by the age of 25-29 years. The average number of children everborn alive to evermarried women, at the end of their reproductive period, was considered to be a minimum of 7.2 for all areas together, 7.7 for Narail, 7.6 for Manikganj and 7.0 for Khetlal and Companyganj.

According to the data on children everborn alive to evermarried women, the poor and the labouring class had lower fertility, while subsistent, middle and rich farmers and the land-rich non-labour and non-agricultural class had higher fertility than the average level. Within the farming population, fertility made a bellshaped relationship with agricultural land ownership class of the household heads. Fertility appeared to bear inverse relationship with the level of education of the evermarried women. Muslims had higher fertility than the non-Muslims.

A comparison of the recent fertility performance with that of the completed fertility indicated that there had been some decline in fertility in recent years in all areas. The decline had been substantial in Companyganj and moderate in other areas.

In all areas together, 86% of the evermarried women had heard of any method of family planning. 18% of the EMW had ever used any one

method of FP and 93% of the EMW had recently started using any one method. Proportion of the ever-married women who ever used any family planning method or had recently started using any method was higher in Khetlal, Manikganj and Companyganj as compared to that in Narail.

In case of ever-married women who accepted tubectomy, the proportion of acceptance was lower for women with primary and higher education than it was for women with education just up to primary level. Ever-use of any other method and recent-use of any family planning method, in general, increased with educational attainment of women.

#### **Programme implication and recommendations :**

According to the data on children ever-born alive to ever-married women, the poor and labouring class had lower fertility, while subsistent, middle and rich farmers, and land-rich non-labouring non-agricultural class had higher fertility than the average level. In all the areas together, 86% of the ever-married women had heard of any one method of family planning, 18% of the ever-married women had ever used any one method of family planning and 9.3% of the ever-married women had recently started using any one method. In terms of specified method, the most widely known method for all areas together was the pill (83.7%) followed by tubectomy (58.8%), vasectomy (54.9 %) IUD (44.1%) and condom (33.2%) which in the perspective evidently speaks of the higher concentrated work by the trainees of BIDS. It may, therefore, be concluded that with a view to regulating fertility much importance should be given to oral pill which is widely known.



## THE SLOGAN FOR TWO-CHILD FAMILY THE IDEAL AND THE ACTUAL

Syed Waliullah  
Tajnahar Chowdhury\*

### Objective :

To find out the degree of relevance the propagation of 'Two children are enough irrespective sexes' has on the actual behaviour among potential couples.

### Methodology :

Investigation was conducted in a housing estate of the Government in Dhaka. The estate is situated in the new town, within minutes walk from any shop or pharmacy that sells varieties of contraceptives and within 15 minutes rickshaw journey from the family planning clinic of the Dhaka Medical College Hospital (DMCH) or Bangladesh Association for Voluntary Sterilization (BAVS) and also the Model Family Planning Clinic.

Samples were drawn on randomly. Various statistical tests were used in order to determine the strength of association between variables.

### Findings :

Over 55 per cent respondents had recently started using contraceptives. Mean 'ideal number of children' from this community under study was 3 while the mean number of live-births the couples had had was 4.05. Infant mortality rate was found to be 60 per thousand against the national rate of 150 per thousand (BFS). The actual living number of children was found to be 3.58. The difference between the ideal and the actual was normally contributed by a number of variables, such as couple's desire for a boy or a girl when only children of one sex were born to them. In other words couples gave more value to have at least one child each of either sex more than their ideal number. Additional children were also born due to contraceptive failure, suspension of contraception for reasons such as husbands dislike of a method, and side-effect of the method used etc.

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\*Directorate of Population Control and Family Planning Research Evaluation, Statistics and Planning (RESP Unit).

The contraceptive prevalence among the controlled areas (four thanas) was found to be 16 per cent. There was a difference between official 'two-child' family and the 'ideal mean number of children' per family as indicated by the respondents, and, again, there was a difference between the ideal and the actual mean number of living children under conditions of low IMR. Before one can expect a reduction in the difference that exists between the 'two-child' and ideal "3-child" family, an all-out effort has to be made for achieving a reduction in the gap between the mean 'ideal of 3 children' and the actual of 4.05 number of live-birth. The difference between the ideal and the actual number of live-births is likely to be much wider when the respondents reach the end of their reproductive period, and under the conditions not limiting the number of their children at the present level. A higher rate of fertility was expected of the community due to the lower mean age (29 years) of the respondents.

#### **Programme implication and recommendations :**

Recognising the fact that in the near future one cannot expect elimination of emotional and felt need for at least one male child in greater degree and at least a female child in lesser degree, the family planning programme manager should now at least try to help couples with regular contraceptive supplies and services, and also help in reducing side-effects and other problems arising out of contraceptive use, so that contraceptive methods could continuously be used and comfortably leading to successful achievement of their own goal of 3 or whatever number of children they prefer.

Simultaneously, however, the rural female education programme of the Government is expected to be accelerated along with increasing opportunity for female participation in gainful employments. These will create a congenial atmosphere for women to play a greater and an important role in their respective households. In the long run these programmes will produce a favourable atmosphere for larger rate of contraceptive use.

The findings of these relationships will be of interest to family planning programme managers particularly the IEM and training sections of population programmes.

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**DEMOGRAPHIC SURVEY IN EAST PAKISTAN 1961-62  
(COMPLETE IN PARTS)**

**A.N.M. Muniruzzaman  
M. Obaidullah\***

**Objectives :**

- i) To collect demographic information by survey methods both of cross-sectional and of a continuing type;
- ii) To get a clear idea of the more important problem and factor involved in collection and analysis of demographic data.

**Methodology :**

This demographic survey was conducted on a sample basis and covered a geographical area of about 9,000 square miles, approximately one-sixth of the entire area of Bangladesh. The entire civilian population of the survey region, thus defined, constituted the universe under survey.

**Findings :**

The report (divided into parts) provided data for estimation of birth and death rates, rates of population growth, fertility and mortality differentials, morbidity rates and for studying their inter-relationship and the factors influencing them.

**Programme implication and recommendations :**

The study might be considered a useful document in learning and understanding the depth of the country's demographic problem or in formulating its population control policy.

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\*Institute of Statistical Research and Training (ISRT), University of Dhaka.

## BELIEFS AND FERTILITY IN BANGLADESH

Clarence Maloney and others\*

### Objective :

To find the fundamental relationship between the whole bundle of beliefs people hold, and contraception and fertility behaviour in Bangladesh. It was also intended to find out what the people say and do in daily life in the context of contraception and fertility.

### Methodology :

The study was based on three sets of data in depth of life history interviews with 38 people, interviews with 152 village professionals or local specialists or leaders (such as mollahs, midwives, healers, teachers and family planning workers) and quantitative data derived from a sample of 2,825 individuals in 17 geographical multi-ethnic communities scattered over Bangladesh.

### Findings :

Religiosity was more important than religious affiliation for preferring traditional as against modern contraceptive methods. Bangladesh peasants are conservative as regards family planning because their view has a pro-fertility bias which has been adaptive to their culture and subsistence. There were correlations between religiosity and religious affiliation and features of the culture such as pardah and fertility. People of Bangladesh hold a large body of beliefs about the human body, sex and behaviour, child birth and food, which affect their fertility behaviour.

About 86 per cent of the men and 78 per cent of the women in the sample said that they depended on God for the number of their children. Dependency on God for the number of children was statistically correlated

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\*International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, December 1981.

with higher fertility early marriage, strict observance of purdah, more fasting, more prayers, less abortion, negative advice on population control, negative opinions of religious leaders on family planning and less use of modern contraceptives. Of respondents aged 35-44 years, 75 per cent women and 52 per cent men said that they wanted no more children. Among socio-economic variables, education was most important. A little education does not help, but educated women of class 6-8 and men of class 9-10 may cause fertility decline. Dependency on God for number of children and purdah were found declining with education. The more prosperous rural class was the most fertile, those having 5-10 acres of land and those having annual income above Tk. 6,000.00 were the most fertile, those holding to ½ acre of land had the lowest fertility. Rural professionals and religious leaders had less coitus but higher fertility. Persons in urban and modern occupations had the most frequent coitus, but observed less purdah, less dependency on God, power fertility and more contraceptive use. People in modern occupations had 3.4 times of coitus a week and cultivators 2.4 times. Conceptions were twice as frequent in winter and spring months as in summer. The reasons were more frequent coitus in winter, earlier resumption in the fall of menstruation after childbirth, men were involved in less field works in winter, psychological effect of cold weather, and perhaps better nutrition. Of modern contraceptives, sterilization, pills and condoms were almost universally known in Bangladesh. Those who had more frequent coitus used the pill more. People were more or less aware of problems with the modern methods.

#### **Programme implication and recommendations :**

This report can form a model for similar studies of other religious groups inhabiting different ecological condition.



## CONSUMER STUDY OF CONDOM-USERS\*

### Objectives :

- i) To determine some trends in retail sales;
- ii) To find the socio-economic profile of the buyers of Raja condom; and
- iii) To determine the primary use of condoms.

### Methodology :

The study was conducted by administering a questionnaire. Standardized questionnaire were filled in by 120 retail outlets located in various districts, sub-divisions and thanas of Bangladesh. Through the retail outlets 600 buyers of condoms were also interviewed.

### Findings :

About 94.5% of the buyers were male. Fifty-two per cent of the buyers ranged from 25 to 34 years of age. The number of buyers tended to decline with the increase in age. Educational characteristics showed that 37.8% of the buyers were illiterate and the remaining were literate with various levels of education. The buyers were classified into 11 occupational groups. About 42% of the buyers were either from labour or non-farm labour. About 40% of the buyers had a monthly income between Taka 208 and 417.

Fifty-four per cent of the buyers had 2 to 3 children and 40.8% of the buyers had been married between 1 and 4 years. The results indicated that the use of condom was more frequent during the early years of marriage. The tendency in the retail sale showed a preference for the sale of packets each of which contained three condoms. It was also indicated that the retailers significantly replenished stock of condoms on a monthly basis. It was observed that out of a total of 120 retail outlets 29.17% of the salesmen stated that children (under 14) were buyers. Evaluation of spon-

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\*Family Planning Social Marketing Project, February 1982.

sor's advertisement of Raja was also undertaken. The buyers gathered messages most frequently from posters in shops followed by jarigans, radio, roadside hoardings, cinema, newspapers and TV. The results indicated that 78.99% of the respondents were buying 9 to 15 condoms each month. This appeared to be a higher than the estimate of the sponsor. The study indicated that 97.65% of the respondents were using the product for birth prevention.

#### **Programme implication and recommendations :**

An important obstacle in the way of successful implementation of a programme is the attitude, awareness and motivation of the clients. There is a need to know if people are utilising the method for the specified purpose.

This study was an attempt to analyse the general attitude and awareness of the buyers and the use of condoms.



### **PEER PRESSURE AND THE USE OF CONTRACEPTIVE STERILIZATION IN RURAL BANGLADESH**

**Shushum Bhatia and others\***

#### **Objectives :**

- i) To identify the socio-economic factors of sterilized clients; and
- ii) To identify the factors which influence individual's decisions.

#### **Methodology :**

The study was conducted in Matlab clinics of ICDDR,B. Sterilized clients of the period of January and May 1978 were included in the study. Out of a total of 294 sterilized clients 275 clients were interviewed.

#### **Findings :**

Eighty-one per cent of the sterilized clients had discussed the procedure with female relatives within the same bari (house) and had sought

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\*International Family Planning Perspectives, Vo. 6, 1980.

their support and reassurance. The attitude of the persons the women consulted were overwhelmingly positive (87%) and 95% of the women had the permission of both their husbands and their mothers-in-law.

There was no difference in the age distribution of the women who failed to report for sterilization and the women who underwent the procedures. The older age group of above 40 years was found higher in the non-sterilized group (16%) than the sterilized group (9%). Fifty per cent of the husbands of the non-sterilized group were 40-49 years old, and 18% were of the age 50 years or older. The mean age of both the husbands (43.1) and the wives (33.1) was the same for the sterilized women and also the women who changed their minds about the operation.

The proportion of husbands who had no education was larger among the sterilized women than non-sterilized women. Fifty-five per cent of the women of the non-sterilized group were using contraceptives. Similarly about half of the sterilized women had used contraceptive before their operation. Fifty-two per cent of women said that they eventually decided against sterilization because of the objections raised by their husbands.

#### **Programme implication and recommendations :**

The findings strongly support the education, not only of the client but of other household members who are likely to be consulted.

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## **FAMILY SIZE AND SEX PREFERENCES AMONG WOMEN IN RURAL BANGLADESH**

**Nilufar R. Ahmed\***

### **Objective :**

To examine fertility preferences in detail and to investigate the correlates of such preferences.

### **Methodology :**

The data reported here came from a cross-sectional two-state sample of households located in Matlab thana, Comilla, a rural area in Bangladesh. In the first stage of the sample design, a systematic sample of villages was chosen with probability proportional to size. In the second stage, four to five clusters of households were systematically chosen from each of the sampled villages. This resulted in a total of 1,050 households. The study included two measures of family size preferences; a single valued statement of desired family size and the in-scale measure. Similarly, two measures of sex composition are included; a single valued statement of desired sex composition and the scale measure.

### **Findings :**

Using IM and IS scales that measure underlying family size and sex preferences respectively, it was found that a majority of the married women in a Bangladesh survey had preferences for every large families and for both the sexes. While differences in family size preferences were related to age at first cohabitation, education, knowledge of attitude towards, and use of contraception, and perceived cost and benefit variables, the underlying sex preferences remained high all variables considered here.

### **Programme implication and recommendations :**

The potential fertility decline in the future would depend, in part, on the creation of conditions favouring smaller families and reduced preference for male children.

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\*Studies in Family Planning, Volume 12, Number 3, March '81.

## FACTORS RELATED TO FAMILY PLANNING ACCEPTANCE IN RURAL BANGLADESH

Ahmed-Al-Sabir\*

### Objective :

To investigate the relationships of some socio-economic and demographic factors with the acceptance of family planning in rural Bangladesh.

### Methodology :

Data used in the study were collected by the Institute of Statistical Research and Training (ISRT), University of Dhaka, in a survey conducted in four unions-Utali, Ulail, Shimullia and Arua under Shibalaya police station in the district of Dhaka. A random sample size of 1,305 heads of the family was drawn from 17 different villages and the data were collected from them by interviewing.

In order to test if there was a relationship between the selected factors and use-status of family planning a chi-square test of independence was applied. The null hypothesis was that the use-status and factors of interest were independent. Effects of confounding variables were selected and investigated by cross-tabulation technique and chi-square test.

### Findings :

Husband's education, occupation and religion were found to be significantly associated with contraceptive use status ( $P < 0.001$ ). There was an upward trend in the use of contraception with education and the relationship was significant. In terms of landholding of the family, the user-percentage was higher among the more land-owning group. However, the relationship between landholding and use-status of contraception was not statistically significant ( $0.1 < P < 0.2$ ). Each of the variables, namely, age of head, age of wives, type of family and number of living children had a significant ( $P < 0.001$ ) relationship with the family planning use-status. Occupation of

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\*Institute of Statistical Research and Training (ISRT), University of Dhaka, 1981.

Muslim respondents showed significant ( $P < 0.001$ ) relationship with contraceptive use-status while no significant ( $0.5 < P < 0.95$ ) relationship was found between occupation of Hindu respondents and use of contraception. For both the communities, Muslim and Hindu, education level was related to the use-status of contraception and this relationship was a little bit stronger in case of Muslim (for Muslim  $P < 0.001$ ) than for Hindu ( $P < 0.05$ ). Hindus had a less-favourable attitude toward family planning than the Muslims. But with the increase of education level, percentage of contraceptive users among Hindu and Muslim respondents were more or less the same. The difference in the proportions of users between single and joint families also declined with education level. Education level of single families had a significant ( $P < 0.001$ ) relationship with the use of contraceptives while it was insignificant for joint family ( $0.3 < P < 0.5$ ).

#### **Programme implication and recommendations :**

Landholding, literacy level and occupation were positively related to each other. Due to small sample size the separation of the effects of the variables was not possible. Overall impression about the results is that education plays a significant role on the use pattern of contraception and clearly points to the need to improve the educational status of the family.



## **DETERMINANTS OF CONTRACEPTIVE USE IN BANGLADESH**

(A Multivariate Analysis)

M.A. Rahim\*

#### **Objectives :**

- i) To establish the magnitude of the effect of residence and educational background on contraceptive use, and the extent to which this effect might be explained by difference in the demographic composition;
- ii) To determine the relative importance of desired and achieved fertility as a determinant of contraceptive use, and the extent to which this

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\*External Evaluation Unit, Population Section, Planning Commission, 1982.

effect can be explained by the demographic and background characteristics of women who had achieved or exceeded their desired fertility, as compared with women who had not yet reached their desired fertility.

#### **Methodology :**

The principal method used was the hierarchical analysis of covariance (ANCOVA) with multiple classification analysis (MCA). Current use of contraception was the dependent variable with selected demographic and background characteristics of current users as covariates and factors.

Three demographic controls which were closely associated with current use of contraception, namely, number of living children, age and age at marriage had been used. These controls had been introduced as covariates in the analysis using linear terms for all except age which is represented by a linear and a quadratic terms in order to take into account the curvilinear nature of the relationship between age and use of contraception.

Among the background characteristics selected for this detailed analysis four variables, namely, place of residence, education of wife and husband, desired versus achieved family size and whether the respondent wanted to have a birth soon.

This analysis was based on the secondary data for Bangladesh Fertility Survey (BFS), 1975-76.

#### **Findings :**

The key findings are summarized as follows :

- 1) Use of contraception increased rapidly with number of living children.
- 2) Use increased with age up to 35-39 years and then declined controlling it was observed that controlling family size, age itself had no significant effect on contraceptive use, except at higher ages when it tended to reduce the use of contraception.
- 3) Late marrying women were likely to use more contraception than those marrying early, especially after controlling family size and age.

- 4) Place of residence and wife's education were the most important determinants of current use of contraception, even after adjusting to demographic composition.
- 5) Women who had achieved or exceeded their desired family size were much more bent or upon using contraception than those who had not, even after adjusting to demographic and background characteristics.
- 6) All the factors considered had a significant effect on contraceptive use and together explained 9.7 per cent of the variance.

**Programme implication and recommendations :**

- 1) Looking at the urban-rural differentials in the use of contraception it was evident that contraceptive acceptance was lower in the rural areas. This suggested that greater emphasis should be given to the rural areas in the family planning programme.
- 2) The use of contraception may increase with the availability of adequate services and supplies.
- 3) A considerable demand for contraception existed in rural areas and that the use would increase in response to further spread of family planning facilities.

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### 3

## Service Delivery Programmes (Method, Procedures, Evaluation)

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### AN EXPERIMENT IN COMMERCIAL DISTRIBUTION OF CONTRACEPTIVES IN PAKISTAN VILLAGES (FAMILY PLANNING)

Akhter Hameed Khan  
M. Coldin\*

#### Objectives :

- i) To find out the effectiveness of commercial distribution system; and
- ii) To develop a programme in which male as well as female agents could be employed.

#### Methodology :

This study covered 200 male and female agent depot-holders (for contraceptives) who were interviewed and their records were examined as well.

#### Findings :

The degree of interest of the shopkeepers in selling family planning goods had been very low as a result of meagre margin of profit. They had reported that their level of profit could be increased by selling in large quantities.

On an average, 43% of the agents took resupply, Approximately the same proportion of female and male agents took resupply although

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\*Pakistan Academy for Rural Development, 1965.

females took smaller allotments. Nevertheless, the probabilities of finding an active and interested agent had been higher among the females than among males in the setting.

The overall growth in the distribution of supplies had been higher among the female agents than among the male agents. The preference level of the male agents to sell male methods was higher than the female agents to sell female method. Condoms sold by males and by females was in the ratio of 2:1 the ratio of tablets sold by females and males was 3:2. The programme had moved into the town area somewhat inadvertently. The urban agents had started performing more rapidly than rural agents, but at that point a rural agent was just as likely to be a good agent as the urban one.

#### **Programme implication and recommendations :**

In July 1965, a new national family planning scheme for the Third Five Year Plan was launched. Within that scheme, it was hoped that the model of the Pilot Project might be expanded in Comilla district. The Pilot Project was intended to continue to test new field methods during the plan period and to pursue field research in family planning. In addition, the Pilot Project could have worked closely with the district staff and could also have provided a training centre for the district personnel.



### **SURVEY OF THE SALES OF CONTRACEPTIVES BY PHARMACIES OF DHAKA, EAST PAKISTAN**

R. A. Miller

S. J. Haider\*

#### **Objectives :**

- i) To examine the availability, price and popularity of different contraceptives; and
- ii) To know the numbers, characteristics and behaviour of customers; and the extent to which changes in commercial activity had taken place.

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\*East Pakistan Research and Evaluation Centre, Dhaka, 1968.

### **Methodology :**

A preliminary survey was conducted in 16 areas of the Dhaka city where pharmacies were clustered. An interview schedule had been developed which had included precoded responses to situations, due to which categorization was possible, in addition to questions in areas in which numerical estimates and qualitative information were sought. The instrument had been pretested and necessary revisions were made. Standardized interview schedules were then administered in June and July 1966. The report relied, to a large extent, on estimates obtained from 114 shopkeepers.

### **Findings :**

The findings of the study indicated that oral pills and condoms were the most widely available contraceptives and together accounted for more than 90 per cent of all sales.

Of the estimated monthly total of more than 6,000 customers, majority were men in the middle and upper socio-economic groups. Shopkeepers had estimated that the sales had increased by nearly 150 per cent between the years 1965 and 1966 and had reported that customers behaved in a less shy, embarrassed, secretive manner than in the past.

A few shops had reported selling Government subsidized condoms at the suggested price of 10 paise. Those shops that did sell condoms at that price had reported a large number of customers and an estimated sales increase of more than 270 per cent between the years 1965 and 1966. Foam tablets were not popular and accounted for only 1 per cent of all sales. The demand for foam tablets had not appeared to have increased even though the price had decreased.

### **Programme implication and recommendations :**

As public awareness of the availability of contraceptives would seem to be a precondition for their use, specific publicity and signs indicating where the inexpensive contraceptives are available should be considered; shopkeepers had opined that many customers thought of price as a definite indicator of the quality of condoms; therefore, publicity regarding the high quality and reason for the low price of Government subsidized condoms may result in increased demand.

Oral pill was found to be increasingly popular in urban areas exploration into the feasibility of oral contraceptives for other segments of the society should continue.

Because of continued support for the changing of norms related to contraceptive practice, rapid and widespread adoption of contraceptives can be expected. The growing rate of acceptance of family planning reflected in the research findings should be communicated to the public.



**IRDP PILOT PROJECT ON POPULATION PLANNING AND  
RURAL WOMEN'S CO-OPERATIVES. FIRST AND  
SECOND REPORT**

**S. Zeidenstein\***

**Objectives :**

- i) To free women from the fear of repeated pregnancies and hopelessness in the face of disease;
- ii) To educate women about the use of contraceptives and other family planning measures as parts of population planning as a whole;
- iii) To train women in skills and activities that are economically productive and to create an atmosphere in which they could be productive;
- iv) To make women literate so that they could learn about modern development process in areas of concern to them; and
- iv) To collect and evaluate data that would focus on the problems of rural women.

**Methodology :**

Methodology of this pilot project was confined within the hierarchical system of the programme. there were both male and female staff of the IRDP assigned in the project area; they trained the male and female

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\*Integrated Rural Development Programme, IRDP, Dhaka, October 1975.

co-operators about health care, family planning measures and whereabouts of the contraceptive supplies. Training to the participants were given mostly by using flip charts, film strips, graphs, charts and other visual aids. All materials were presented in Bengali version.

#### **Findings :**

It was found that 80 per cent of the members were illiterate and semi-literate. 89% of the members were married and living with their husbands. 5% were widows and 2% were divorced women.

Without continuing high quality staff training, the project could not be effective. It was important that women organisers should develop the same kind of job responsibility as the staff had.

Loan procedures were observed carefully to see how far they would work. Family planning training should be made available to as many IRDP staff as possible so that they can supplement the work of the family planning officials through their range of contacts with rural people. Lack of clear information about how contraceptive works and lack of accessible services available in the villages are obstacles to women who might want to regulate family size.

#### **Programme implication and recommendations :**

The report indicated some variations among the different thana projects. Efforts should be made to rear up all the programmes equally. The projects with little achievements may be identified and the programme activities there may be strengthened to keep the projects at par.

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## **A BRIEF EVALUATION REPORT ON RURAL MOTHERS' CLUBS AND RURAL WOMEN'S CO-OPERATIVE PROGRAMME, DHAKA\***

### **Objectives :**

- i) To make preliminary assessment of the impact of the project in terms of family planning education and acceptance; and
- ii) To measure efficacy of vocational and non-trade training imparted and to find out the problems of implementation of the programme.

### **Methodology :**

For the study, 40 (forty) members of mothers' clubs were selected randomly from each mothers' club where the number of the members was more than 40. They were interviewed with questionnaire.

### **Findings :**

About 51 per cent of the club members were married. Mothers' club members were more educated than average village women. Only 3.8 per cent of the village population claimed to be associated with mothers' club; 48.9 per cent of villagers claimed that they had derive knowledge of family planning either from a mothers' club or from one of its members. The study revealed that even in mothers' club villages, the most frequent source of information about family planning was the Government field workers. During the period of the study the percentage of current users was 19.4% while it was only 9% in the baseline survey.

Mothers' clubs attracted both married and unmarried members. However, even among the recently married women, club members tended to be younger. Mothers' club attracted women who were better educated than average. There were some evidences which pointed out that club members had fewer children than other village women, particularly, those who were below 30 years of age. Club members did not have markedly greater knowledge of contraceptive methods than the other village women.

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\*Evaluation Unit, Population Section, Planning Commission, 1976.

**Programme implication and recommendations :**

The study showed that although mothers' clubs might enroll a relatively higher educated younger group diffusion from opinion leaders extends far beyond the actual membership.



**'HOUSEHOLD CONTRACEPTIVE DISTRIBUTION IN RURAL  
BANGLADESH' (SIX MONTHS' EXPERIENCE.  
CHOLERA RESEARCH LABORATORY)**

**Atiqur Rahman Khan  
Douglas Huber\***

**Objective :**

The study intended to present the level of oral contraceptive practice in rural Bangladesh when the contraceptive was made available free of cost at the doorstep and also the demographic impact of household contraceptive distribution system not supported by any motivational programme.

**Methodology :**

Baseline data on the impact of free distribution of contraceptives among the rural households were collected using a KAP survey.

**Major Findings :**

A baseline KAP survey indicated that 34% of the eligible women would soon consider using contraception and 25% indicated pill as the method they would choose to use.

After three months following the distribution, a 20% sample survey of the villages indicated that 22% of the eligible women had been using

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\*John Hopkins University Fertility Research Project, Dhaka, 1976.

some contraceptives for the past three months and 16% were then continuing the use of contraceptives. Side-effects were common and 62% of the total number of women had one or more complaints against the pills.

**Programme implication and recommendations :**

The study indicated that oral pills could be an effective and acceptable method for use in Bangladesh. However, the high percentage of side-effect suggested the need for a strong follow-up system.



**WHAT'S THE USE OF A DEMONSTRATION PROJECT ?**

**Colin McCord\***

**Objectives :**

- i) The identification of programme failure and the force contributing to failure;
- ii) The isolation and analyses of areas of apparent cost effectiveness as well as modifications which should lead to greater cost effectiveness; and
- iii) The ways in which any such project could be used to develop appropriate professional personnel.

**Methodology :**

Nurses and lady health visitors, new field personnel both men and women, were recruited from the union in which they live and work. They had no previous medical experience but were trained by the project in the thana. Five sub-centres of rural health and two general clinics were opened for each union. A small hospital with 16 beds was opened on the top floor of the existing rural health centre.

The five sub-centres and two general clinics provided both clinic and field activities in MCH and family planning. The activities of the study

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\*The Ford Foundation, Dhaka, 1976.

began in January 1975. Thirty-seven women and 11 men were recruited locally and trained to work in field programmes at the clinics and hospitals. The aim was to integrate all of the existing vertical health and family planning programmes plus the curative medical programmes in rural health centres in a single administration.

**Findings :**

The most cost-effective programme within the area included the family planning and nutrition programmes. The monthly cost of operation of sub-centre staffed with a lady health visitor and four women clinic assistants, who carried out about 1,400 clinic visits and 420 home visits in a month, was Tk. 228/-. Service records indicated that more than 15 per cent of the women in the fertile age group were practising family planning. It was found that female workers could not manage more than two or three home visits per house per year.

Scabies was a major cause of death. Deaths also resulted from overwhelming infection and from nephritis subsequent to serious infection with streptococcal organisms. The crude birthrate was found to be 38.2% per 100 and crude deathrate was 26.3 per 100. The infant mortality rate and child mortality rate between the ages of 1 and 4 years were found 142/1000 and 55/1000 respectively.

**Programme implication and recommendations :**

The mechanism for providing medical support and guidance for peripheral workers had not been worked out. The second administrative problem was more fundamental. A significant portion of the Government civil service system was controlled by officers who were university graduates and had an urban orientation. This applied to areas of the civil service, not just to health and family planning but it was a particular problem in the areas of health and family planning which require community participation if they are to achieve success. Furthermore, institutions for community organisation were extremely weak.



**REPORT OF THE TASK FORCE II  
ON  
RESEARCH INVENTORY AND ANALYSIS OF FAMILY PLANNING  
COMMUNICATION RESEARCH IN BANGLADESH**

**S. Waliullah\***

**Objectives :**

- i) Preparation of inventory of existing research on population by communication undertaken so far by agencies like Bangladesh Academy for Rural Development (BARD), Research Section of Radio Bangladesh, Evaluation Unit of Family Planning Association, Training, Research, Evaluation and Communication (TREC), Directorate of Family Planning and Bangladesh Institute of Development Studies;
- ii) Analysis of the research materials for drawing up programme options for the future;
- iii) Classification of collected family planning communication research materials in terms of various communication perspectives and problems;
- iv) To review each study and to prepare its summary;
- v) Analysis of the finding of all studies to prepare a consolidated report.

**Methodology :**

Data were collected from the following sources : Central Family Planning Evaluation Unit (CFPEU), Community Development Foundation (CDF); East Pakistan Research and Evaluation Centre; Training, Research, Evaluation and Communication Centre (TRESP); Inspection Directorate (ID); Oxford University Press (Bangladesh); Bangladesh Family Planning Council (BFPC); Bangladesh Academy for Rural Development (BARD); Population Services International (PSI); Behas-thapana Sangsad Limited; Radio Bangladesh; Sweden-Bangladesh Family

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\*The Ministry of Information and Broadcasting, 1976.

Welfare Project (SBFWP); UNESCO Regional Communication Unit; University of California, Public Health Education Research Project, Dhaka; University of Chittagong; University of Dhaka; and the Institute of Social Welfare and Research (ISWR). No report was available from BIDS and Family Planning Association on family planning communication research.

The report also contained an annexure comprising summaries of 25 study reports on family planning communication and other research materials containing data on family planning communication.

**Findings :**

Among various possible forms of inter-personal relationship and communications inter-spouse communication assumes an important place in the family planning programme. Couple's concurrence is an essential precondition of family planning practice, and it is a function of conjugal life. Communication between husband and wife varies with the given social system. Role differentiation in culture providing for large degree of interdependence between husband and wife involves extensive communication between spouses. The very unique status of husband and wife in the authority structure of Bangladesh family is not conducive to useful communication between them on matters of family planning. In the traditional families of Bangladesh the interdependence between the spouses is limited to fewer roles. In the authority structure of a Bangladeshi family the wife is placed at the receiving end.

A study of couple concurrence and empathy on family planning motivation was undertaken by taking an urban group of families of class III and class IV Government employees in Dhaka city. Fifty-seven per cent of the couples showed concurrence with respect to their desire for another child; 60% of the husbands and 63% of the wives could guess correctly what the other spouse thought about having another child. The study indicated, however, that the couple concurrence, whatever degree it might have been, was not necessarily the result of a higher degree of communication between the spouses. The concurrence could mostly be attributed to chance alone. The findings indicated that there was virtually no empathy between spouses.

The dynamics of inter-personal communication and influence were possibly related to overall bridging link of the community in terms of

social, political, economic and religious factors. If a potential adopter found some favourable opinion in his/her immediate social environment in favour of family planning, he/she was likely to regard it as socially legitimate. If he/she could have been influenced by a particular person or persons in practising family planning, his/her inclination to accept family planning would have increased. Dais formed a functionally important group, but they lacked proper training. They were good agents for making personal contacts with village married women. Unofficial village agents were making notable contribution to recruit clients for vasectomy operation. The gaps in knowledge and in practice may be filled in considerably through radio broadcasting system.

It was found that the use of audiovisual aid was generally construed as an essential element in educating people on certain issues or motivating people to develop favourable opinion toward some actions or a plan of action. Group meetings were found to be useful. Use of slogan, particularly in semi-literate or illiterate society, might quickly draw attention of many people to a particular information. It was also found that attention and active participation could be drawn to family planning education through slogans.

#### **Programme implication and Recommendations :**

Inter-spouse communication seemed to be important and facilitated couple's decision-making process in family planning. This should be attended to by future communication programme. Satisfied users should be systematically utilize as communication agents in order to reinforce the positive aspects of family planning practice. Appropriate communication and relevant channels may be used to realise this objective. Sporadic negative feelings of dissatisfied users or rumour about method use should be dealt with by proper personnel such as a qualified medical personnel. It had been found that the level of acceptance of family planning in terms of contraceptive use is lower among the males than the females. Communications need to pay particular attention to increase the level of acceptance among the males.

Communication strategy should also give due attention to raising women's role and status in the society so as to enable them to take a more decision-making role in the family. The local level family planning worker has to be ready with answers to questions raised by family planning clients or intending clients. A national population communication

policy and strategy need to be drawn up to meet the need of the population programme. These should be based on the overall programme objective of population control and family planning. The communication need calls for consistency in order to cope with subsequent developments and changes in the society in general.



## HOUSEHOLD DISTRIBUTION OF CONTRACEPTIVES IN BANGLADESH—THE RURAL EXPERIENCE

A.R. Khan and others\*

### Objectives :

- i) To assess the level of contraceptive practice when contraceptives were made available at the doorstep;
- ii) To evolve an efficient delivery system; and
- iii) To identify the factors determining acceptance and continuous use.

### Methodology :

In October 1975, the Cholera Research Laboratory had started a house-to-house distribution of contraceptives in the Matlab Field Surveillance Area which was divided into two areas, namely, the contraceptive distribution area and the control area. The distribution area had consisted of 150 villages with a population of about 1.25 lakh. All the marriage women aged 15-44 years in the distribution area were supplied with contraceptives and an extensive KAP (knowledge, attitude and practice) survey was conducted before the distribution. The size of the sample of the survey was 1,077 women who represented both the distribution and the control areas.

### Findings :

The findings showed that 2.4 per cent of the women had used modern methods; 4.9 per cent had used traditional methods and 23 per cent had

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\*Cholera Research Laboratory, Dhaka, 1977.

known where to obtain contraceptives. Of the women who had been contacted 33.7 per cent had expressed willingness to use contraceptive and 24.9 per cent had named the pill as the method they would use. The injectable contraceptive was found to be the second most popular method.

The baseline rate of contraceptive practice for the women who had been contacted and who were married and fecund was 1.1 per cent for the distribution area, and 2.9 per cent for the control area. Oral contraceptive use had risen appreciably in the first few months following distribution. The overall contraceptive use rate had increased to 15 per cent at the 12-month survey. At 12 months after the distribution the Hindus had shown 2.5 per cent higher rate of use than did the Muslims. The proportion of respondents who had reported pregnancy was 15.3 per cent in the distribution area and 17.8 per cent in the control area.

A survey of 1,500 contraceptive recipients was conducted to investigate the problem of side-effects. Bleeding was found to be a common problem but dizziness was more significant as a factor in discontinuation of pill use. Dizziness was more common among women discontinuing use (53%) than those continuing use (39%).

#### **Programme implication and Recommendations :**

The important factors related to the characteristics of the dai for high practice of contraceptive were her image, experience, frequency of visits, nature of information given during counselling and the reassurance provided concerning side-effects.



## AN ASSESSMENT OF FAMILY PLANNING SERVICES IN DHAKA CITY

Ahmadullah Mia\*

### Objective :

The main objective of the evaluative study was to assess the performance of family planning information, media and service delivery arrangement in metropolitan Dhaka and its neighbouring industrial towns of Tejgaon, Narayanganj and Tongi.

### Methodology :

The study was based on field investigation with a standardized schedule administered over 505 sample clients who presented themselves at the various family planning service centres in Dhaka, Tongi and Narayanganj. Ten per cent of the visitors who visited the clinic during the two months preceding the interview were included in the target sample. Altogether 148 male respondents and 101 female respondents were interviewed in 7 clinics run by the Government, while 86 male and 82 female respondents were interviewed in 16 non-clinical Government supply centres.

From among the voluntary agencies, 35 male and 24 female respondents were interviewed in 3 clinical family planning agencies, while 19 males and 10 females were interviewed in 5 non-clinical supply centres. Data were collected by a field survey during May-July, 1971. The collected data were analysed in terms of numerical and percentage measures and in some cases computation of the mean was also adopted.

### Findings :

Sex is an important differential in the exposure to sources of information. There are some informal media such as friends and relatives which act as important sources of information for the females in particular. The husbands are more important sources of information for the wives

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\*Institute of Social Welfare & Research, Dhaka University, December 1977.

than the wives are for the husbands. The ratio seems to be the most important media through which people in general are getting educated in respect of family planning. Next to the ratio in importance are the media of friends, family planning centres and family planning workers.

Oral pill and condom were the most popularly known contraceptives, followed by ligation and IUD. The metropolitan urban population were informed of, and had access to, more sources of supplies. The sources were family planning workers, drug stores, and stationery shops. The people in the new Dhaka were more familiar with the methods than the people in the older parts of the city; and the people in the industrial areas were less knowledgeable about the methods than those in the metropolis. The hospital-based family planning centres had 9 per cent users whereas the proportion of users in the information and contraceptive distributing agencies was 93 per cent. Two contraceptives, oral pill and condom, were the ones which had the highest proportions of users. Looking at the advantages or difficulties associated with the two most popularly used method (i.e. pill and condom) as evaluated by the users, the findings showed that the oral pill kept sufferance from various side-effects such as headache, nausea, menstrual difficulties and weakness.

#### **Programme implication and Recommendations :**

Geographic distance of the family planning centres from the place of the clients, cost of contraceptives and inadequate physical facilities at the centres were some of the most notable matters of discouragement to the clients. It can be conceived that measures for the improvements with regard to these conditions will promote wider practice of family planning.

With regard to certain types of cases such as permanent sterilization, health assurance provisions covering the couple and their children should be considered important as necessary and compensatory measures. This matter should be taken up as a public policy issue for the promotion of birth-limiting practices.



**IRDP PILOT PROJECT IN POPULATION PLANNING AND  
RURAL WOMEN'S COOPERATIVES. THIRD REPORT**

**MAY 1976, JUNE 1977**

**Florence E. McCarthy\***

**Objective :**

The goal of the programme in rural women's cooperative was the development of a model programme where village women could (a) acquire the training and services necessary to support increasingly productive activity ; (b) learn about contraceptives and other family planning measures to free them from unwanted pregnancies ; (c) become literate so that they could learn about techniques, information and general areas of knowledge and interest ; (d) develop and practise leadership skills as an avenue for bringing new knowledge to their villages and representing village interests to Government representatives at the thana level.

**Methodology :**

The programme was implemented in 19 selected thanas in 19 districts of Bangladesh. The programme dealt with two major training courses such as rural women's cooperatives and population planning. Both aspects were supervised and co-oriented at IRDP headquarters by a Joint Director. In each thana a female staff of one Deputy Project Officer (DPO) and two female inspectors organised, supervised and promoted the development of the women's cooperatives and population planning in their thana.

**Findings :**

Attendance at the training programme and in the village cooperative meetings was extremely encouraging. In both situations village women were quite regular in their attendance. Rural women came to join the programme spontaneously and their motivation was no longer a problem. A constant and evergrowing demand to expand the programme was evident among the project areas. Request for programme operation from outside the programme area were gradually increasing.

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\*Integrated Rural Development Programme, Dhaka, June, 1978.

### **Programme Implications and Recommendations :**

Both preventive and curative health facilities should be provided near the programme area. Training materials need to be developed both by content and language. In-depth evaluation should be stressed in order to increase the programme effectiveness.



## **SOCIO-ECONOMIC DIFFERENTIALS IN MORTALITY IN A RURAL AREA OF BANGLADESH**

Stee D'Souza and others\*

### **Objective :**

To examine the age specific mortality differentials of Matlab Demographic Surveillance area for 1974-1977 by socio-economic variables of the household.

### **Methodology :**

The data were acquired from the regular cross-sectional censuses and longitudinal registration of vital socio-economic characteristics of the surveillance area of Matlab.

### **Major Findings :**

A clear inverse relationship was observed between various levels of mortality and socio-economic status in the Matlab area. Further, sex differentials in mortality have been shown to be quite substantial. Male preferences could be a possible determinants of mortality differential. Among the various criteria "Education of mother" shows the greatest statistical significance.

### **Recommendations :**

While it is true that mortality levels are related to a wide variety of factors including nutritional status and cultural development. Government planning will have to ensure widespread and egalitarian distribution of health benefits.

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\*International Centre for Diarrhoeal Disease Research, Bangladesh.

## REPORT ON PRICE STUDY OF CONTRACEPTIVE

### Objectives :

- i) To provide baseline data on the users perception about existing price of Population Service International (PSI) contraceptive and on the possible effects which might be followed upon as change in existing price of the products;
- ii) To ascertain the possible effects in sale values both trade and users level if the pill is changed;
- iii) To assess the viability of incentive to trade to gear sales; and
- iv) To collect data on the demographic characteristics of the users.

### Methodology :

A total of 310 users and 102 traders at different levels and types were selected and interviewed in two Police stations of Faridpur and Comilla districts. A questionnaire were designed to collect data on the opinions of the respondents.

### Findings :

The major findings of the study showed that the most significant factors which hindered the use of MAYA (oral pill) were doctor's opinion and high prices, while in the case of RAJA (condom) the factors were high prices and inclination towards other brands. The most significant factors for using a particular brand of pill were doctor's opinion and low prices. A particular brand of condom was preferred and used by the users, because of its low price and also because it was an imported product. Most of the users had suggested a price equal to or less than Tk. 1.00 for a packet containing MAYA that would serve for two months (two cycles). Likewise, most of the traders also suggested a similar price range for two cycles

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\*Population Services International, Dhaka, Bangladesh, 1977.

of MAYA. More than 50% of the users and traders suggested a price equal to or less than Tk. 0.20 for a packet of three pieces of RAJA.

In both the cases of users and traders, it was found that they did not form any impression about the quality by associating it with the pricetag of a contraceptive. In the urban segment, there was a preponderance suggesting higher prices for both MAYA and RAJA than what it was in the semi-urban and rural segments and this phenomenon was observed in the case of both users and traders. The change in the sales volume of MAYA and RAJA might be followed upon by change in the present Price. With a view to increasing the sale of Maya and Raja, a larger proportion of the traders suggested that before giving the sales materials to the traders a heavy advertisement and publicity programme should be launched. Oral contraceptive is a drug item and as such many users had the tendency to seek doctor's advice.

From the opinions of the rural and urban population under survey it was understood that the PSI Bangladesh programme had through a wide-spread publicity campaign made the public aware and knowledgeable about PSI products. The major media of publicity were (i) newspaper; (ii) radio; (iii) television; (iv) cinema; (v) friends and neighbours and; (vi) Family Planning workers and doctors.

Radio was found to be the main source of knowledge about Raja condoms and Maya pills. In rural areas 47.45% and in urban areas 66.01% of husbands and wives had come to know about Maya pills and Raja condoms through the radio.

As regards general knowledge and awareness about contraceptive methods, it had been found that 79.11% of the respondents in rural areas and 92.35% in urban areas had general knowledge of contraceptives of different types.

Survey on the situation in the prevalence of contraceptive usage showed that a great majority of the respondents approved family planning measures. In rural areas, the approval ranged from 94.59% to 97.54%. In urban areas approval ranged from 96.47% to 100%. Fifty per cent of the total respondents had been found to use PSI products and the rest used Lyndiol and Ovostat. Though the extent of net increase in prevalence of contraceptive usage cannot be properly estimated, it may safely be concluded that the proportion of users of contraceptives had considerably increased.

About 98% of retailers in both urban and rural study areas regarded family planning as a necessity to check explosion and for the country's overall development. In urban areas about 80.68% of the retailers were aware of contraceptive pills and condom, in rural areas the figure was 83.15%. In urban areas about 83% retailers were visited at least once by PSI sales personnel since PSI had launched their programme in Bangladesh. Similarly, 79% of the retailers in rural areas were visited by the PSI sales personnel. Sixty per cent and 77% of the retailers in urban and rural areas respectively sold PSI products exclusively. Some of the retailers both in urban and rural areas sold other contraceptives in addition to PSI products. The percentage of such retailers were about 32% in urban areas and 23% in rural areas.

About 73% and 64% of the retailers in urban and rural areas respectively got the supplies from PSI salesmen. The retailers got supplies from other retailers and voluntary organisations.

#### **Programme implication and recommendations :**

The study suggested that the use of commercial marketing approaches for contraceptive sale could be effective in Bangladesh. As with other consumer products pricing and brand advertising are important considerations.



## **ASSESSMENT OF THE CONTRACEPTIVE DISTRIBUTION PROJECT IMPLICATIONS FOR PROGRAMME STRATEGY**

**T. Osteria and others\***

#### **Objective :**

To assess household delivery system of oral contraceptives and condoms in rural Bangladesh in terms of (a) feasibility of organising and implementing such a delivery system; (b) total demand for these contraceptives; and (c) demographic impact.

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\*Cholera Research Laboratory, Dhaka, 1978.

**Methodology :**

The Matlab Cholera Research Laboratory Surveillance programme covered 234 villages in which approximately 2,60,000 rural people resided in 1975. In October 1975, the Cholera Research Laboratory in collaboration with the Ministry of Health and Population Control initiated an extensive house-to-house distribution programme of non-clinical methods of contraception (oral pills and condoms) in 150 villages with a total number of 23,000 eligible women of the Matlab Surveillance area. The remaining 84 villages with 21,000 eligible women served as the control area where existing family planning services were nominal.

**Findings :**

The baseline KAP survey suggested that there existed a significant demand for contraception in this rural area. Three months after contraceptive distribution was operationalised, 17.1% of the eligible women claimed to be using oral pills. After 18 months of programme effort, the prevalence of oral pill use declined to 8.7%. The declining prevalence rates were due to both declining rates of new acceptors and briefer rates of method-continuation over time. Eighteen months later the rate of pill acceptance declined from 24% to 2%. Oral pill continuation rates similarly declined with each successive cohort of acceptors.



**LOCATION ANALYSIS AND EVALUATION OF SERVICE  
DELIVERY SYSTEM FOR UNION FAMILY WELFARE  
CENTRES IN BANGLADESH\***

**Objectives :**

- i) To carry out studies in selected unions so as to derive optimal location criteria relevant for the purpose of maximising the welfare of communities; and
- ii) To determine where to locate services.

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\*Population Control and Family Planning Division, 1978.

### **Methodology :**

Three types of questionnaire were designed for the purpose of collecting data and fulfilling the objectives of the project. These were (a) a household questionnaire, (b) a village questionnaire and (c) a Welfare Centre questionnaire.

### **Findings :**

Some of the important findings of the study were: (a) all respondents had heard about family planning but the overall percentage of respondents who reported to have practice any method of family limitation were 28.81, 44.71% of the respondents who were not using any method of family limitation were willing to use it in future and 55.29% were not willing to do so. 37.68% of the respondents who had adopted family planning did not receive any follow-up service. Most of the union family welfare centres surveyed did not have necessary instruments; contraceptive supply was inadequate, as was the case with medicines and vitamins.



## **EVALUATION OF THE PROJECT 'HAPPY FAMILY' AND POPULATION CONTROL MONITORED BY RADIO BANGLADESH IN ITS NATIONAL PROGRAMME**

**Sufia Kharam\***

### **Objectives :**

- i) To evaluate the knowledge of the people about the programme monitored by the population control cell of Radio Bangladesh; and
- ii) To collect information about the opinion of the listeners of the special programme 'Happy Family' (Sukhi Sangsar).

### **Methodology :**

One rural area and one urban area of Dhaka district where radio programme of Dhaka station can be received were selected according to

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\*Radio Bangladesh, 1978.

two-stage random sampling. In all, 100 male respondents and 100 female respondents were selected for the study.

**Findings :**

Fifty-one per cent of the female respondents were in the age group of 20-29 years; and 49% of the male respondents were in the age group of 30-39 years. Fifty-one per cent of the respondents were illiterate. Only 60% of the respondents listened to the radio regularly. Out of them 61.3% of the respondents listened to the programme 'Happy Family'; 27.5% of the listeners listened about the programme concerning population control. More than 55.5% of the listeners had never heard of the programme 'Happy Family'. Of those who listened to the 'Happy Family' programme, 69.6% of the listeners liked the programme. 91.3% of the listeners considered the time schedule for 'Happy Family' appropriate. 76.5% of the respondents thought that broadcasting of family planning was useful to the general public.

**Programme implication and recommendations :**

The study suggested a general social acceptability for mass communications about family planning.



**EVALUATION OF THE COMILLA UNIT OF DEMONSTRATING  
PROJECT (AN ANALYSIS OF RECORDS)**

**Rezaul Islam\***

**Objective :**

To assess the achievement of Demonstrating Project in relation to overall activities, such as, coverage of fertile couples by making them acceptors of conventional contraceptives and permanent methods, and their nature of continuity with the programme and the underlying problems.

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\*Bangladesh Family Planning Association, Evaluation Division, 1978.

**Methodology :**

The study was mostly based on analysing the available data both from national office and project office. Usual observation and discussion with field staff and project-in-charge were also considered in preparing the report.

**Findings :**

Total population of the project area was 12,000. Out of this, 1,839 fertile couples were present in the area; in-migration, out-migration, etc. had brought about the change in number. The number of acceptors had reached 448 in the year 1975. There were only 35 sterilization cases (vasectomy-8, tubectomy-27). The clients of 1975 had 42.5% per cent continuity, clients of the year 1976 had 42.3 per cent continuity and clients of the year 1977 had 58 per cent continuity.

**Programme implication and recommendations :**

Record keeping system was not proper and suggested the need for a better record keeping system so that births, deaths the number of new acceptors, etc. could be properly recorded.

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**GRASS-ROOT LEVEL MARKETING OF SMP PRODUCTS :  
A CASE STUDY OF KISHOREGANJ THANA****Objectives :**

- i) To identify the marketing efforts at grass-root level; and
- ii) To have a clear profile of the service delivery system of SMP products, supply outlet in the distribution channel and to provide adequate support of manpower and other resources.

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\*Family Planning Social Marketing Project, Dhaka, 1979.

**Methodology :**

Kishoreganj thana of Mymensingh district was selected as the sample area for the study. Eleven unions with 117 villages were surveyed. Stores selling Raja and Maya was taken into considerations and a total of 90 shops were interviewed.

**Findings :**

Findings showed that opinion leaders, village doctors, school teachers and madrasah teachers with some incentives could be employed to promote the sale of SMP products in rural areas. Besides this, the report threw new light on many questions concerning sales promotion of contraceptives in rural areas of Bangladesh.

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**THE MATLAB FAMILY PLANNING HEALTH SERVICES  
PROJECT**

Shushum Bhatia and others\*

**Objectives :**

- i) To permit an independent evaluation of the effect of the augmented effort superimposed upon the original CDP (Contraceptive Distribution Programme) delivery scheme as well as the Project's effect on a previously unserved population; and
- ii) To determine the long-term trends of the simplified delivery system.

**Methodology :**

Clinics records were kept both at the Matlab centre and at the sub-centres. Each FWV (Female Village Worker) maintained a register in which

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\*Bangladesh Academy for Rural Development, Comilla.

necessary information was recorded about her area : the listing of mothers who had dispensed oral rehydration solutions and the supplies they received. The FWVs helped to estimate the extent of diarrhoeal illness in their area.

**Findings :**

The study observed that experiences in Bangladesh had repeatedly shown that attempts at economically efficient approach, generally pushing one method and minimising or ignoring follow-up, had ultimately resulted in incalculable "costs" in terms of discredited programme or methods. Such was the case in Bangladesh with IUDs in the 1960's, a situation that could be repeated with oral contraception of DMPA in a poorly managed distribution programme.

**Programme implication and Recommendations :**

The study indicated that an effective distribution system required careful record keeping and should be equipped with an effective system of client follow-up.



**STUDY OF DELIVERY SERVICES AND OBSTETRIC CASE  
RELATED ADMISSIONS IN AZIMPUR MATERNITY AND  
CHILD WELFARE TRAINING INSTITUTE, DHAKA**

**S. Begum and others\***

**Objective :**

To present one of the scientifically analysed reproductive experience of the obstetric care services in Azimpur Maternity and Child Health Training Institute.

**Methodology :**

The data on deliveries were recorded on standard Maternity Record form designed to collect information on obstetric history, antenatal

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\*Bangladesh Fertility Research Programme, 1979.

care, management and outcome of the delivery, the post-partum status of the mother and infant, and the patients' future plan of contraception.

**Findings, programme implication and Recommendations :**

The paper observed that our knowledge about the reproductive problems and coverage of obstetric service was very poor through the events like pregnancy, births, abortions; and still births were related to the status of health, welfare and population growth potential in different societies.



**ASSESSMENT OF THE BANGLADESH CONTRACEPTIVE  
SOCIAL MARKETING PROJECT : METHODOLOGY  
AND BASIC DATA**

**M. Obaidullah\***

**Objectives :**

The main objectives of the project were to make an assessment of the following :-

- i) Whether the PSI Bangladesh programme had made contraceptive widely and easily available to the population at prices the population could afford;
- ii) Whether the PSI Bangladesh programme communications and advertising had made the people aware and knowledgeable about Maya and Raja in particular; and pills and condom in general; and
- iii) Whether the PSI Bangladesh programme had contributed to a net increase in the prevalence of contraceptive usage.

**Methodology :**

A sample survey was conducted to collect information from peoples of different walks of life about use of contraceptives both in rural and

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\*Director, Institute of Statistical Research and Training, University of Dhaka,  
January 1979.

urban areas. Field workers were supplied with questionnaire for collection of data through direct interview.

### **Major Findings :**

The study was mainly devoted to the four aspects, i.e., availability and price, product awareness and knowledge, prevalence and retail marketing, and distribution system of the PSI products in Bangladesh.

The percentage of the total number of shops selling PSI products ranged from 24.5% to 58.3% in 4 rural localities and from 35.0% to 67.0% in four urban localities under the survey. It was found that 94.30% people in rural areas and 94.55% in urban areas did their shopping in the areas they resided. It was, therefore, evident that PSI products were widely available to both rural and urban population. Opinions on the prices of PSI products showed that 65.22% in rural areas and 77.66% in urban areas thought of the price of PSI product to be reasonable.

### **Programme implication and Recommendations :**

The PSI programme appeared to be achieving its objectives.



## **HOUSEHOLD CONTRACEPTIVE DISTRIBUTION EVALUATION STUDY**

**M. Obaidullah\***

### **Objectives :**

- i) To assess the effectiveness of household contraceptive distribution;
- ii) To determine whether its continuation was warranted; and
- iii) To make an experiment on a system of contraceptive distribution with the ultimate objective of finding out a suitable system of contraceptive distribution in this country so that the practice of contraceptive usage can be enhanced.

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\*Institute of Statistical Research and Training, University of Dhaka, 1980.

### **Methodology :**

The evaluation study had the following two directions : collection of necessary information through interviews from samples of contraceptive acceptors drawn from the records supplied by Bitopi educators and collection of sales information from the retail outlets.

### **Findings :**

One of the important findings of the study was that many of the acceptors had stopped contracepting after they had used up the products given to them by the Bitopi educators. Although they were keen to continue the use, they did not procure it from the retailers. Thus, its effectiveness might be fulfilled only when the consumers are made to procure the products from the retailers.

### **Programme implication and Recommendations :**

A single household distribution is not enough to secure the objectives. Hence, many such measures should be undertaken and implemented. Local retail sales, despite reported satisfaction, have to be augmented.



## **CONTRACEPTIVE DISTRIBUTION IN BANGLADESH VILLAGES : THE INITIAL IMPACT**

**Douglas H. Huber and others\***

### **Objectives :**

- i) To assess the demand of contraceptive practice in rural Bangladesh when these contraceptives were made available to each household;
- ii) To evolve an efficient contraceptive delivery system for use elsewhere in Bangladesh; and

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

iii) To assess the demographic impact of a household contraceptive distribution system and to identify factors determining acceptance and continued use.

#### **Methodology :**

Matlab thana was selected for the study because CRL had conducted active vital events registration system for a major part of its population since the year 1966.

The Field surveillance Area (FSA) of the vital registration system comprised 234 villages and a total population of about 2,60,000. Villages had an average population of 1,100 divided in 'baris' (houses).

The field surveillance system areas was divided into two parts. The population of one part was to receive contraceptives and the other part was to receive no special services. The villages from the two parts could not be randomly assigned for several reasons. First, villages adjacent to the field stations at Matlab Bazar were provided F.P. services by the John Hopkins University Fertility Research Project Clinic. Second, because of the unknown potential contamination effect on control villages.

The villages closer to Matlab and those located near large population centres were chosen for the controls.

The remaining villages were in two major outlying areas with less exposure to cities, contraceptive facilities and educational institution were selected as the study area.

#### **Findings :**

The initial round of distribution brought contraceptive information and supplies to 18% of all eligible women. In the second round the proportion reached 89%.

The predistribution contraceptive practice rate for married and fecund women, as determined by the baseline prevalence survey, was 1.1% for the contraceptive distribution area and 2.9% for the control area.

The baseline condom use rate was almost nil and rose to only 1.2% in the 9 months survey. After three months the practice rate was 3.5% with the coloured condom and 4.2% with the plain condom. In this context, coloured condoms had no advantage.

In order to gain some small-scale household distribution experience with injectable contraceptives, the sample of 6 contiguous representative villages was in the distribution area.

Introduction of injectables led to an overall increase in use of all methods from 14% in August to 21% in November 1976, in these six villages, with majority of pill users switching to injectables. Injectable continuation rates were considerably higher than that of the pill.

Birthrates in both the distribution and control area rose considerably during 1976, as Bangladesh emerged from a period of famine. By August and September 1976, birthrates in both areas were returning to their normal seasonal levels.

Fertility rates were consistently higher in the distribution area than in the control area for the 16 months before a demographic effect was expected. In August 1976, and for the the next four months, the rates in the distribution area were consistently below those in the control area.

The correlation between changes in fertility rate and prevalence of contraceptive use by age group was very strong, giving supportive evidence that the relative decline in fertility was related to contraceptive use.

The baseline survey had shown the proportion of women supporting pregnancy in the contraceptive distribution area to be 12 per cent higher than in the control area, but the four surveys showed that the distribution area remained below the control area up to November 1976.

#### **Programme implication and Recommendation :**

The findings of this study indicated that efficient distribution system might increase the contraceptive prevalence rate, which might help programme manager to evolve efficient contraceptive delivery system.



## EXPERIENCE WITH REPRODUCTIVE CARE AND SERVICES IN DHAKA MEDICAL COLLEGE HOSPITAL

S. Firoja Begum\*

### Objective :

To present one of the first scientifically analysed reproductive experiences of the obstetric care services in the Dhaka Medical College Hospital.

### Methodology :

The report covered 921 deliveries conducted between July 1977 and August 1978, and 1,003 incomplete abortions treated between May 1977 and April, 1978. The data on deliveries were recorded on standard Maternity Record Form, designed to collect information on obstetrics history, antenatal care, management and outcome of the delivery, post-partum status of the mother and infant, and the patients' future plan of contraception.

### Findings :

Findings showed that the post-abortion contraceptive practice was significantly higher than the pre-abortion rates, particularly among the induced group, indicating that after having experienced an unwanted pregnancy the women are likely to be more careful in their reproductive behaviour. Ninety per cent of induced patients as compared to only 38.6 per cent of spontaneous patients were found to have accepted contraceptives during follow-up.

### Programme implication and Recommendations :

Persons seeking induced abortion or MR should receive intensive education about contraception which they are like to adopt.

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\*Bangladesh Fertility Research Programme, Dhaka, 1980.

## **CONTRACEPTIVE DISTRIBUTION IN BANGLADESH : SOME LESSONS LEARNED**

**Mukhlesur Rahman and others\***

### **Objectives :**

- i) To assess the level of contraceptive practice with household distribution system and to measure the demographic characteristics; and
- ii) To identify factors determining acceptance and use, with the ultimate goal of evolving an efficient contraceptive delivery system for use elsewhere in Bangladesh.

### **Methodology :**

In the year 1975 the Cholera Research Laboratory began a contraceptive distribution programme in 150 rural villages in Matlab thana to confirm that an unmet demand existed and to assess to what degree it could be met by making orals and condoms available to every family.

### **Findings :**

In Bangladesh, particularly in the rural areas, evidence had been accumulating of large gap between the desire of couples to control their fertility and their knowledge of effective methods and sources of alternative methods. A mass distribution programme tended to adopt a method-oriented rather than a client-oriented strategy. This was well exemplified by the CRL project. In each stage the provision of pills, condoms and finally injections as well as the training of workers and the plan of operation were oriented towards techniques and procedures for making the method available rather than relating the method to the needs of individual women. An examination of the acceptance and use rates by socio-demographic characteristics showed some minor increase in practice with higher education and a participation in the modern sector of the economy, but there were no striking differentials with respect to age and parity. These data suggested that such factors as illiteracy were not major barriers to acceptance and use. It pointed out that younger women showed more interest in fertility control.

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\*International Centre for Diarrhoeal Disease and Research, Bangladesh, Dhaka.

### **Programme implication and Recommendations :**

Effective distribution system may improve situations for essentiality of services but needs to be inclined towards a client-centered educational approach.



## **INDIGENOUS BIRTH PRACTICES AND THE ROLE OF TRADITIONAL BIRTH ATTENDANTS IN RURAL BANGLADESH**

**Atiqur Rahman Khan and others\***

### **Objectives :**

- (i) To identify the pattern of services provided by TBA's; and
- (ii) To know the TBA's level of knowledge and skill and other social factors related to their indigenous practice.

### **Methodology :**

In this study 831 elderly mothers and 687 TBA's were interviewed from among 160 villages, randomly selected from twenty thanas of four divisions. The data were collected through two interview-schedules by a group of trained female interviewers. The obtained data were analysed in numerical and percentage distribution.

### **Findings :**

The findings included the response status in the rural setting. Mothers were found merely seeking medical advice even in case of serious complications of pregnancy and childbirth like eclamsia, jaundice, retained placenta etc. An insignificantly small fraction (1.1%) of deliveries took place in hospitals or clinics.

Most of the mothers (96%) reported to have had the deliveries with the assistance of TBAs. About a third of the mothers reported the use of split

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\*National Institute of Population Research and Training, 1981.

bamboo for cutting the umbilical cord. In most cases, the cutting instrument was not properly sterilized. Nearly 95% mothers were found to keep fire in the room where childbirth took place. Customarily the mothers were forbidden to take protein (mainly fish) and sour food after childbirth at a time when they needed better nutrition. Most of the mothers (70%) were found satisfied with the services of their TBAs. There were on average 2.2 TBAs per village and they performed an average of 12.7 deliveries per year. The average age of the TBAs was 57.7 years and about half of them were widows. They had, on average, 4 living children and were generally illiterate, (87.5%) did not have any formal schooling.

There did not seem to exist any social tradition of the transfer of a TBAs' skill down through generation in a family or through formal apprenticeship system. Nearly half of the TBAs claimed that they provided the service not for any material gain and the remaining half did so for either saree or money. The TBAs generally considered their professional art as a respectable one in the community

Deliveries were generally conducted on the floor over a bamboo mat (chatai). Nearly one-third of TBAs cut the umbilical cord with split bamboo and the remaining two-thirds used razor blade for the purpose. Only 11.1 per cent sterilized the cutting equipment by boiling and only about 16.5 per cent used an antiseptic (sulphanilamide powder, dettol or antibiotic) for dressing the cord. The TBAs generally recommended initiation of breast feeding within about 1-2 days after the birth of a baby. Only 17.2 per cent recommended giving colostrum to the baby. A great majority of TBAs (76.8%) did not provide any contraceptive advice.

#### **Programme implication and Recommendations :**

In conclusion, the study findings indicated that the level of knowledge and skill of TBAs were inadequate for revision of an optimally safe birth care and maternal and child health services in rural Bangladesh. Some of the prevailing birth care practices in rural areas unfavourably influenced the nutritional status of the mothers and children. There were other practices which contributed towards infection and sickness. It is urgently necessary to train the TBAs. Considering the general lack of TBAs, the training curriculum should be prepared by incorporating carefully selected topics. The study findings provided useful guidance for formulation of an effective training programme.

# 4

## Population Communication Education, Information Activities



### RURAL ACTION STUDY ON FAMILY PLANNING

H.T. Creley\*

#### Objective :

To educate the villagers about family planning and to develop an efficient method of supply of family contraceptives to the villagers.

#### Methodology :

An initial screening of 1,975 villages in Tejgaon thana had begun in April 1963, using the selected areas as field laboratories. After field visits were made, five villages were finally chosen on the basis of easy accessibility and similarities in size and resources, each could be reached within an hour from the office even during monsoon season. Three unions of Joydebpur thana, which were 22 miles away from Dhaka by train, were also selected. Records of contraceptive usage were maintained regularly. Figures were compiled each fortnight to show the number of initial and continuing-users. Continuing-users were defined as those users who had taken contraceptives for the second or more times during the two months.

From August 1964, through February 1975, the number of continuing users in all the villages increased at the same rate as that of the initial users by about 10 per cent of those who took initial supply. However, there were wide variations found between the villages. As of February,

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\*East Pakistan Research and Evaluation Centre, Dhaka, June 1965.

1965, fifteen per cent of the couples in Baunia continued to use contraceptives, in Azampur the percentage of continuing users was six per cent in Jahurabad, it was ten per cent in Bisil, five per cent and thirteen per cent in Sholpur.

**Programme implication and Recommendations :**

The experience in the experimental villages indicated increase in the level of usage of contraceptives in the rest of the country.



**FAMILY PLANNING SURVEY IN DHAKA, EAST PAKISTAN**

**Beryl J. Roberts and others\***

**Objective :**

To measure the relative effectiveness of education and family planning for three groups of respondents men, women and both men and women.

**Methodology :**

The survey data were collected for 547, each for husbands and wives, a total of 1,094 respondents living in three Government housing colonies in Dhaka. The housing colonies selected for study were those principally for Government class III and class IV workers. These workers population represented a group which would have been preferably given high priority in any educational programme in family planning.

**Findings :**

About 99 per cent of the respondents were found to be Muslims. Thirty-eight per cent of the husbands and 66 per cent of the wives reported to have had spent a greater part of the first year of their recent marriage in a community which had a population of less than 1,00,000. About 83 per cent of the husbands were class III Government employees, rest were of class IV. Class III employees earned from Tk. 125-350

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\*East Pakistan Research and Evaluation Centre, Dhaka, June 1965.

month and class IV employees earned below Tk. 125 per month. Men were better educated than women. Few women had education beyond grade VI, about 47 per cent had completed up to grade three or less of school and about 36 per cent had completed grades four to six. Among men and women about five per cent and 11 per cent respectively had completed the same level of education. The median educational level for men was 10.5 school years and for women it was 4.3 and the rest had no schooling. The duration of recent marriages for the couples had been two years. Eleven per cent of the husbands and 4 per cent of the wives had been married more than once. The mean age of men at the time of marriage was 24.8 years, the modal age of women at the time of marriage was 14 years. Twenty of the remaining 543 couples had never had a live-birth and other five couples had five births but had no living children. The mean total number of living children was 3.8 per couple. Three quarters of the people with school education had smaller families of four or less while a little more than half of those with more education had even smaller families. When couples with higher education were compared with couples who had lower education, no different pattern was observed in the numbers of children. The association between smaller families and lower education was strong. Among the contraceptives, condom was known to most followed by the knowledge of foam tablets and oral pills. For both the sexes, sterilization was the most frequently known of all the family planning methods. One hundred and ninety-five males and one hundred and thirteen females were reported users of methods at some times.

#### **Programme implication and Recommendations :**

Educational programmes needed further extension for the use of the family planning methods. An educational programme must include identification of target groups for education of the family planning methods. Further study was required to explore the accuracy of reporting on knowledge and the use of family planning methods.

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## **COUPLE CONCURRENCE AND EMPATHY ON BIRTH CONTROL MOTIVATION IN DHAKA**

**David Yankey and others\***

### **Objective :**

To measure the degree of communication between husbands and wives with respect to family size goals.

### **Methodology :**

The survey data contained a number of 1,094 respondents—both husbands and their wives. The husbands were class III or IV Government employees and were residents of three Government housing colonies in Dhaka.

### **Findings :**

Twenty-eight per cent of husbands and seventeen per cent of wives did not wish to have more child. Twenty-seven per cent of the husbands responded that they had the desire for another child. About 45 per cent of husbands expected that their wives would have another child. The relative reluctant tendency of husbands to have more children was an unusual finding of this survey. Husbands and wives found themselves in the same situations with regard to the number of living children, the ages of spouses, and financial circumstances. Out of 127 husbands who could have guessed the motives of their wives to be more anti-natal than they were before, 12.6 per cent did so, and out of 220 husbands who would have guessed wives' motives to be more pro-natal than they were before, 10.7 per cent did so. It was also found that there was little communication among partners on birth control. About 57% of the couples showed concurrence in their desire for another child.

### **Programme implication and Recommendations :**

A high level of concurrence between husbands and wives in their desire for another child and a high level of accuracy by husband and wife about

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\*East Pakistan Research and Evaluation Centre, Dhaka, October 1967.

the other's wishes did not necessarily demonstrate a high degree of communication between partners. Most of the agreements between spouses in their views could have been attributed to change alone. Most of the accuracy in guessing partner's goals was attributable not to empathy with partner, but to projection where the partner happened to have the same view. A conclusion was that the firm estimates of the degree of communication could not have been obtained by the methods used here. Lacking better data and analytical procedures, the author found tentative evidence of little communication between husbands and wives with respect to their family size goals.



## **USE AND EFFECTIVENESS OF PRINTED FAMILY PLANNING COMMUNICATION MATERIALS**

**S. Waliullah and others\***

### **Objective :**

To examine the use and effectiveness of listed family planning printed materials and the extent of the use of these materials by the field staff.

### **Methodology :**

The study was undertaken in 18 thanas of the districts of Faridpur, Dhaka, Bogra and Barisal. All of the thana Assistants (54) and all available female organisers were interviewed with 50 households in each thana.

### **Findings :**

Sixty-one per cent of the male and 18% of the female respondents had seen just some posters on family planning. Fifteen per cent of male and 6 per cent of females had seen or received booklets on family planning. Flash cards were seen by 2.6% of male and 4.8% female respondents.

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\*Central Family Planning Evaluation Unit and Sweden-Pakistan Family Welfare Project, Dhaka,

The prominent place of seeing posters was the 'market' in case of male respondents and 'neighbours' or 'relatives' house' in case of female respondents. The principal source of seeing or receiving booklets was the 'FP workers' in case of male respondents, while for female respondents it was their 'neighbours' or 'relatives'. The principal source of 'seen flash cards', as expected, was 'FP workers' for both males and females. A significant positive relation was found between exposure to posters booklets, and respondents level of education and exposure to town or city.

A positive relationship was observed between exposure to printed publicity materials and respondents' attitude towards family planning. Among the male who approved family planning 3.3% were at that time using some family planning methods and 59% had expressed their willingness to use in the future. The corresponding figures for female respondents were 4.9% and 21.7% respectively. The percentage of users was higher among females than males. None among the males who disapproved family planning were using or had expressed willingness to use any family planning method in future. Only one female who disapproved family planning was due to the trouble she suffered from severe side-effect of the method. All the Thana Family Planning Assistants and most of the chief male organisers and female village organisers had received one or another kind of posters, booklets and flash cards. Almost all Thana Family Planning Assistants could describe the text of one or the other kinds of posters and booklets that they had received, while only one-third of female village organisers could describe the text of one or the other kind of posters and booklets.

#### **Programme implication and Recommendations :**

Printed material appeared to have been effective means for educating both men and women; and exposure to those materials seemed to have been associated with favourable attitudes towards family planning. A training deficiency was noted that only one-third of female workers could describe the contents of printed materials.



**MODERNITY CHARACTERISTICS OF LOCAL LEADERS  
AND THE FAMILY PLANNING PROGRAMME  
IN BANGLADESH**

**S. Waliullah\***

**Objectives :**

- i) To find out local leaders modernity characteristics, namely, school years completed, exposure to the mass media, visit to urban centres by rural leaders, demographic characteristics (age and number of living sons and daughters of leaders); and
- ii) To apprehend the family planning programme leaders' knowledge of local family planning services and opinion that they had about couples using some methods and also how these were related to the modernity and demographic characteristics.

**Methodology :**

The data used in the study were a part of the data collected for the National Impact Survey in the years 1968-69.

Within the national sample, the sub-samples were drawn from which statistically reliable estimates could be made for (a) rural versus urban areas, major regions within the country and (c) districts where the family planning programme had been operating before July 1966, versus districts where the programme had operated since July 1966.

A two-stage stratified random sample for each of the sub-universe was chosen as the sample design. The rural universes were divided into equalized primary sampling units (PSU, about 30,000 households each) and for the urban universes, the town committees and the ward committees were defined as village of 250-350 households in the rural areas and as electoral units in the urban stage.

The sample is internally self-weighted within urban and rural strata in the country in order to minimise complex weighing problems during the stage of analysis.

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\*Ph.D. Thesis, Utah State University, Logan, Utah, U.S.A., 1974.

### **Findings :**

Leaders' opinions of couples using some methods were strongly related to their radio-listening behaviour. It was also found that with the increase of radio listening habit there was a concomitant increase in the opinions of leaders as to the use of several methods by couples.

Leaders who read newspapers also listened to the radio in high proportion, and these two media were significantly correlated. However, leaders listened to radio more often than they read the newspaper.

Leaders' opinion of couples using some method of family planning was associated with the number of family planning methods mentioned by them.

### **Programme implication and Recommendations :**

The data showed that leaders had heard about family planning programme both from the mass-media and from other inter-personal sources. This implied that the family planning message should be disseminated through as many media as possible.

The significance of this study lay in two factors. First of all, it contributed to the empirical knowledge of local leaders' modernity characteristics in the country, which had never been attempted in earlier studies. The present study enhances the knowledge of grass-root leaders of Bangladesh, their level of education, mass-media, use, family planning and finally, their opinion regarding couples using some methods of family planning.

A second significant contribution of this study, though in a limited way, lay in the use of the cognitive consistency theory in the analysis of two important correlated family planning variables, i.e., the number of family planning methods mentioned, and the opinions leaders have about couples using some methods of family planning.



## POPULATION EDUCATION IN BANGLADESH\*

### Objectives :

- i) To develop population education materials for both students and teachers;
- ii) To give orientation and training to the subject-teachers;
- iii) To test the population education materials in actual class-room situation; and
- iv) To evaluate the materials and other aspects related to the implementation of the programme.

### Methodology :

The scope of the project activities was restricted to selected thanas of the country, viz., Mirzapur in the district of Tangail, and Ishurdi in the district of Pabna. All Secondary and Junior Secondary schools within the limits of these two thanas, the total number being fifty-five, were under the purview of the project.

The activities of the project were undertaken in four phases, namely, development work, experimentation and evaluation research, and report writing.

### Findings :

The pilot project on population education in Bangladesh was a large-scale experimental study for the introduction of population education in the school curricula of the country. The large number of steps and activities which were incorporated in the project for its implementation might have been put under broad headings, viz., (a) development of procedures, techniques, materials etc., and (b) evaluation of the outcomes of introducing each of those inputs as experimental variables either separately or in various combinations.

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\*Institute of Education and Research, University of Dhaka, 1976.

## INTENSIVE FAMILY PLANNING INFORMATION AND SERVICE DELIVERY CAMPAIGN

M.A. Mannan\*

### Objectives :

- i) To make a quick evaluation of the intensive family planning information and service delivery campaign from 26th January to 31st January 1976 in Comilla;
- ii) To see how far the desired objectives of the campaign were attained;
- iii) To determine what percentage of target couples heard about family planning; and whether any supply channel or family planning worker existed in the village under study; and
- iv) To determine whether there was any problem of getting contraceptives for those who wanted to practise.

### Methodology :

All the couples were undergone the Intensive family planning information and service delivery campaign interviewed with a structured questionnaire.

### Findings :

The age of the respondents varied from 20 to above 70 years, but the majority were within 21-50 years. Fifty per cent of the respondents were illiterate and others had education from class II to above Matriculation level.

It was found that all the respondents had heard about family planning long before the campaign week from 1 to more than 10 years back. Only 15% heard from family planning personnel. No respondent was found who had heard from the Thana Family Planning Officer or even had an opportunity to meet him ever.

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\*Bangladesh Academy for Rural Development, Comilla, 1976.

During the campaign only 26% of the respondents were visited by campaign worker and of these respondents, 80% were from Kotwali th. For 15% cases only, family cards were signed. About 63% had favourable opinion about family planning. Only 7% of the respondents were found practising family planning. The reasons mentioned for not practising it were the desire to have more children (16%), needed for old age and other causes (15%), religious beliefs (17%) non-availability of contraceptives (5%), lack of knowledge (16%), etc. A good number of people did not know much about different methods of family planning.

#### **Programme implication and Recommendations :**

The study showed that even an intensive campaign would reach only a proportion (26%) of villages.



### **MEANING OF SELECTED CONCEPTS USED IN FAMILY PLANNING COMMUNICATION**

**N.R. Sorcar\***

#### **Objective :**

To measure the connotative meanings of certain important and commonly used concepts in family planning motivation communication. In addition to the above, the differences in conceptual meaning among the acceptors and non-acceptors of family planning were also investigated.

#### **Methodology :**

The study was conducted on 20 subjects (respondents), 10 male and 10 female, of the age ranging from 28 to 35 years, having graduate level of education and two children each. The study employed the 'Semantic Differential' technique developed by Osgood and others. The study employed six scales having three dimensions of meaning with a continuum of seven-point range.

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\*The Dhaka University Journal of Psychology, Vol. 6, 1976.

Subjects rated each concept by using the continuum. The data were analysed and interpreted by means of graphic representation.

**Findings :**

The results showed a significant difference in the perception of the meaning of family planning concepts by the acceptors and non-acceptors. The perceptual difference in the meaning of the concepts and their reference explains the differences in the behaviour patterns of the acceptors and non-acceptors.

**Programme implication and Recommendations :**

The study in determining concepts used in family planning communication needed further investigation. Technique like "Semantic Differential" was as effective tool, but how far it was applicable in this case was a matter that demanded a more thorough discussion. Study might have been replicated with a bigger and more representative sample.



**POPULATION EDUCATION THROUGH RURAL CO-OPERATIVES; A PILOT PROJECT IN COMILLA**

Ina Howie

Mogbul Ahmed Chowdhury\*

**Objectives :**

- i) To integrate population education and family planning motivation with schemes of general improvement in the social and economic conditions of the rural masses;
- ii) To involve and train co-operative officers and other development officers in population education and motivational techniques at BARD Bangladesh Cooperative College; and
- iii) To create an awareness of the population problem amongst rural cooperative and other village leaders.

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\*Bangladesh Academy for Rural Development, Comilla, 1978.

**Methodology :**

Information for the project was collected in different phases. A series of regular contacts with cooperative officials were made to estimate the general support of different thana level institutions. The third phase was training and motivation.

**Findings :**

The report was prepared on the basis of activities of only one year. Village people had a clear concept about their current problems and given their meagre resources, how they can best cope with them. Villagers have an awareness of the emphasis placed upon controlling the population growth by the Government. The researchers also found villagers' keen interest in discussion, preparedness to argue and oppose, responding to reason and willing to support population control and family planning.



**INNOVATIVE SOCIAL WELFARE COMMUNITY DEVELOPMENT  
APPROACHES TO FAMILY PLANNING : A MICRO-  
STUDY IN BANGLADESH**

Ahmedullah Miah\*

**Objective :**

To develop insights from the current innovation programme to be able to indicate the directions of change in the national policies and programmes affecting population and family planning activities.

**Methodology :**

The study had been based primarily on close observation of the two rural communities which were being affected by two development programmes including family planning education and contraceptive delivery as one of their components. In the process of observation, informal in-depth

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\*Social Development Branch, United Nations, 1978.

discussion had been held with several groups of the community people and programme staff. The study tool had been on discussion guide.

**Findings, Programme implication and Recommendations :**

The study observed more than two decades of family planning efforts in the form of communication motivation and contraceptive service delivery had been able to attain only a limited success in fertility reduction in Bangladesh. The contraceptive adoption was nearly 10 per cent of the total fertile couples. This was a concrete finding upon which the future policy and programme could possibly be formed.



**EVALUATION OF 'SUKHI SANGSAR' A FAMILY PLANNING  
MOTIVATIONAL PROGRAMME OF RADIO BANGLADESH\***

**Objectives :**

- i) To know whether the eligible couples who listened to radio also listened to the family planning programme 'Sukhi Sangsar;'
- ii) To know whether the programme helped them solve their family planning problems;
- iii) To know whether the listeners practised family planning;
- iv) To determine to what extent they had been helped by the programme to adopt family planning; and
- v) To know their suggestions for the improvement of the programme.

**Methodology :**

The study was based on a sample survey. The informations sought were collected from the interviewers by a structured questionnaire through direct interview. The interviews were taken from eligible couples (both husband and wife were interviewed), who either owned radio or listened to

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\*Ministry of Information & Broadcasting Government of People's Republic of Bangladesh, 1979.

radio programme. The sample size was 300 couples. This number was equally divided into two groups of radio-owner listeners and radio-listeners only. The entire sample size was again divided into four groups of 75 couples each for four sample areas of the country.

Four districts were selected in the four administrative divisions of Dhaka, Chittagong, Rajshahi and Khulna. Districts selected were Mymensingh, Comilla, Pabna and Jessore. From the four districts four thanas, again one union in each of these thanas, were selected and finally four villages were selected in the four sample unions. The selections were made on purposive basis.

A preliminary survey was conducted in the selected unions to identify the radio-owners.

#### **Findings :**

The study results revealed that relatively young people, both males and females mostly between age 21 and 40 years, in the rural areas listened to radio. The average age of the couples, who listened to radio, whether they owned it or not, was 34 for the husbands and 24 for the wives. There was little or no difference of age between couples who owned radio and those who did not. About 45 per cent of the couples who listened to radio were low parity couples with 0-2 living children. On parity also there was little difference between couples with or without radio and they have on an average 3 living children.

The income status of the couples having radio was better than those who did not own a radio. In the rural areas over 20 per cent of the husbands and wives who were young and did not own a radio (relatively poor) listened to radio very often and regularly. About 42 per cent of the wives and 60 per cent of the husbands, who owned radios, listened to it from evening up to late night. The wives, who owned radio, listened to it throughout the day equally, excepting afternoons and evenings. The wives who did not own radio, reported morning, noon and afternoon as the most frequent listening times. Quite a few husbands and wives, who did not own radio, 55 per cent and 31 per cent respectively, reported listening to radio after 8 P.M. till late night. News was the most favourite programme for the males, and the females preferred songs, or specially modern songs. Over 75 per cent of the respondents reported that they knew about the broadcast of "Sukhi Sangsar", a special programme on family planning.

About 79 per cent of the respondents reported that they listened to "Discussions on family planning" in the 'Sukhi Sangsar' programme followed by folk songs (38%), health aspects (36%), replies to listeners' letters (36%) and drama (20%). About 75 per cent of the husbands having radio reported that the programmes broadcast in the 'Sukhi Sangsar' were difficult to understand. The rest of the respondents deemed the programme to be of average quality. The overwhelming majority of the respondents referred to family planning as a concept representing "Small Family" and "Stop childbirth". Radio was then identified as the first source of knowledge of family planning by the majority of the respondents followed by the field workers of family planning. There were marked differences in the use of family planning method by the respondents as 16 per cent of the owners reported practising a method. While only 7 per cent of the non-owners reported the same, most of them used oral pills and condoms.

#### **Programme Implication and Recommendations :**

The findings of this study were encouraging as it provided radio to be a significant and most effective medium for mass communication in the rural areas. The participation of the rural females in radio-listening even beyond evening and till late night had also been reported in the study. As a follow-up action, it was proposed that further intensive studies with large sample size might be conducted in order to identify the socio-economic and cultural characteristics of the radio-listeners vis-a-vis their levels of acceptance of family planning; specially those who did not own radio but listened to it regularly. The recommendation of the respondents suggested that the programme needed further adjustments and improvement, so that the problems and the objective conditions of the rural listeners to their motivation for family planning and for achieving the goals of family welfare. The evaluation of the "Sukhi Sangsar" programme offered significant implications for the programme-producers and planners. The finding showed that this programme was well known by this time and had retained some impact on the listeners.

## **THE PATTERN OF REACTION WITHIN THE SCHOOL-GOING CHILDREN AS AN EFFECT OF MASS MEDIA FAMILY PLANNING PUBLICITY**

**Muhammad Nazmul Haq\***

### **Objective :**

To determine the structural pattern of reaction that occurred among the school-going children as an effect of mass media family planning publicity.

### **Methodology :**

The investigation was carried out by adopting a new technique of 'peer-group interview' where the interviewer was sociometrically selected person of the peer-group. In total, 150 subjects were taken from students of three different grades : class seven, class eight and class nine from four secondary schools of Dhaka city. Three reactions, such as cognitive, affective and connative were identified as the dependent variable for measuring the consequence of the family planning publicity. A structured questionnaire were used for collecting the relevant information. The data were processed and analysed by using different percentile and inferential statistics.

### **Findings :**

Children's reaction to the cognitive domain indicated that majority of them preferred gaining knowledge in family planning and according to them the ideal family size of our country should have been around two. The overwhelming majority of them had the idea about limiting family size by using contraceptives. The results of affective reaction showed that their expected family size would be around two and for that matter they took interest in family planning publicity. The connative reaction of the children indicated that a good number of children took interest in discussing the matter and some of them also advised others to adopt it in life. A positive correlation was found among the reaction variables.

### **Programme implication and Recommendations :**

The reactions to family planning publicity among children might indicate the magnitude of its presentation through the mass media. Gradually the

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\*The Bangladesh Journal of Psychology, Vol. 6, Dhaka, 1980.

nation is becoming conscious of family planning, and along with this achievement, the children were also getting aware of the matter. This was important from the stand-point of population education. However, further investigation might be undertaken with a view to confirming the findings studied here.



### **TOWARDS ESTABLISHING PLANNED FAMILY AS A WAY OF LIFE IN BANGLADESH\***

#### **Objective :**

To measure how far the knowledge, attitude and practice of family planning had taken root in the Bangladesh society in the framework of the existing family planning services system.

#### **Methodology :**

A multi-stage sampling procedure was adopted to arrive at a national sample representative of rural households including all evermarried persons and unmarried boys and girls of 15 years age and above. In case of rural areas, initially a sample of 57 unions was considered, out of which 8 unions, two in each division on the basis of high, medium and low literacy rates were selected. Out of these 8 unions, 23 villages comprising 5,084 households (families) were selected. For in depth enquiry 710 households with 814 recently married couples ultimately formed the sample, stratified by education and income. For urban areas 250 households were sampled from Dhaka metropolitan city and also from the towns of Bogra, Jessore and Comilla. The field data collection took place between December 1978 and January 1979.

#### **Major Findings :**

For rural areas, 17.7 per cent of recently married couples (16.6 per cent Muslim and 20.7 per cent Hindu) were using family planning method

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\*National Foundation for Research on Human Resource Development, Dhaka, May 1979.

(including 12 per cent adopters using non-clinical method—safe period and Kabiraji); the ever-adopters were 23.6 per cent (21.9 per cent Muslim and 28.9 per cent Hindu). Among currently eligible couples, 19.8 per cent were current adopters of family planning methods. The family planning adoption was positively associated with husbands' and wives' education as well as with the number of their living children. Adoption rate was maximum for women belonging to age bracket 20-39 and minimum in early and later part of child-bearing age. Fertility rate, measured by children ever born to evermarried women, was 4.2 and 3.8 in rural and urban areas respectively. In case of living children it was 3.0 for rural areas and 3.2 for urban areas.

The rate of adoption (approx. 32 per cent) was the highest in the upper-middle socio-economic category comprising some 5.10 per cent rural households. The uppermost 5 per cent households had a lesser rate, yet the study of population maintained a relatively high level of adoption (approx. 25 per cent). The lowest rate (13 per cent) corresponds to the poor lower middle economic category comprising some 30 per cent of rural households. The extremely poor lowest economic category comprising some 30 per cent households, however, showed a bit higher adoption rate (19 per cent).

In urban areas the rate of current family planning adoption among currently married couples and eligible couples were 38 per cent and 41 per cent respectively. Among everadopters (43 per cent), 42 per cent were currently dropouts. Unfavourable attitude towards the practice of family planning mostly emanated from religious beliefs and side-effects of contraception for which hardly any follow-up service was available.

#### **Programme implication and Recommendations :**

A neat service delivery system extending down to the village might improve family planning adoption rate. But, as the analysis of this research showed, the adoption of an innovation like family planning, largely depended on the raising of the social status of the family towards equalization.



## GUIDELINES FOR DEVELOPMENT OF IEM MATERIALS

M. Nazmul Huq and others\*

### Objectives :

- i) To assess the requirements and type of IEM materials for the field workers at grass-root level population control and family planning;
- ii) To identify the local family planning communication media and resources at grass-root level for developing information, education and motivation materials for field workers; and
- iii) To assess the knowledge and extent of training of the field workers in using the available communication media and resources at grass-root level.

### Methodology :

A schedule containing structured as well as open-ended questions was administered in the sample areas.

Purposeful random sampling techniques was used in the selection of sample areas. The respondents were selected through simple random sampling from among the family planning personnel as well as non-family planning workers of different nation-building departments. The sample areas included 16 villages, 8 unions and 4 thanas located in 4 divisions of Bangladesh.

### Findings :

Out of the total of 109 respondents, 32 were selected from the thana, 34 from the union level and the rest of 43 from the selected villages. The study revealed that the majority of the respondents had acquaintance with, and knowledge about, the IEM materials : 9 out of every ten respondents know about posters; about four-fifths of the total sample were familiar with leaflets, 71 and 64 per cent of both categories of the respondents knew about leaflets and films respectively. More than two-fifths of the total samples were familiar with hill boards, folders and flash cards. Such high rate of

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\*Ministry of Information and Broadcasting, Dhaka, 1977.

familiarity and knowledge about IEM materials, however, could not bring about any marked change in the desired direction. Possible explanation might be that more than two-fifths of the respondents did not present; have any IEM materials with them at all.

**Programme Implication and Recommendations :**

The study indicated that family planning IEM materials reached the public thus affecting their awareness and knowledge, but behaviour change was yet to be influenced significantly.



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## Attitudes, Awareness and Interest in Family Planning Programme

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### A SURVEY OF ATTITUDE OF RURAL POPULATION TOWARDS FAMILY PLANNING

Waqar Hussain Zaidi\*

#### Objectives :

- i) To find out the effectiveness of the local agents as a source of dissemination of knowledge and as an agent in respect of family planning ; and
- ii) To know the attitude and opinion of people in respect of family planning.

#### Methodology :

A village adjacent to the Comilla Academy was selected to conduct the study. The village was inhabited by 308 males and 254 females in 130 families. All the married couples were interviewed by administering a detailed questionnaire. A sample of 113 females and 122 males was included.

The questionnaire consisted of 4 sections (i) bio-data ; (ii) history of marriage and fertility ; (iii) attitude towards family planning ; and (iv) influence of religion on attitude.

#### Findings :

The sample was not larger enough to give a clear validation of various hypotheses, but it was found that age, occupational status, composition of

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\*Academy for Rural Development, Comilla, 1961.

the family, total married life and the number of children or the desire for no additional children were related to attitudes about family planning. The differences were not significant in respect of education, landholdings and yearly income or stated by the respondents.

A majority of the persons did not want to enlarge their family-size any more. Most of them mentioned that they knew nothing about the methods of family planning; a majority was prepared to learn such a method; the ideal number of children desired by them was between 3 and 4 and very few wanted to have permanent sterilization.

There was a general belief that the contraceptive practices were not permissible in religion but most of the respondents attributed their opinion to no authentic sources. When they were asked whether they would practise contraceptive methods for limiting the family, if somebody conceived of its permissibility in religion, a large majority said they would have no objections.

#### **Programme implication and Recommendations :**

The responses made by the individuals gave an idea of how such programme as this would gain ground but of how people expressed their opinion. Later on, when an attempt was made to introduce the family planning programme by providing initial training on the methods of controlling births, the responses were not the same as stated at the time of interview. However, in the absence of information about this aspects, it was useful to plan the programme in accordance with the stated opinion. It seemed quite reasonable to dispel some apprehension and to take measures to convince the people that these practices were not in contravention of the religious injunctions.

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## HUSBANDS VS WIVES RESPONSES TO A FERTILITY SURVEY

David Yaukey\*

### Objective :

To know the history of fertility birth control behaviour, knowledge and attitudes toward birth control.

### Methodology :

The survey data consisted of 1,094 respondents ( both husbands and their wives). The husbands were class III or IV Government employees and were residents in three Government housing colonies in Dhaka.

### Findings :

Twenty-one per cent of the couples did not agree on whether they had ever used any method. Fifty-four per cent of the couples admitted ever using any method. Thirty-one per cent couples did not agree on whether they had used any method during the last year. Thirty-eight per cent of the husbands and 66 per cent of their wives reported that they had lived most of the first year of their present marriage in a community of less than 100.00 population. There was more disagreement in reporting unsuccessful pregnancies ending in the last year than in reporting successful pregnancies. The main sources of this difference were cases where the wife reported a spontaneous abortion and the husband reported no unsuccessful pregnancy. There was considerable disagreement in reporting whether or not the wife was pregnant at the time of interview.

### Programme implication and Recommendations :

The unreliability of responses was the major problem in fertility surveys. One method for limiting response error might be to interview the spouse most likely to have precise responses on a given factual topic in the survey.

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\*East Pakistan Research and Evaluation Centre, July 1965.

## **FAMILY PLANNING KNOWLEDGE AND ATTITUDE SURVEY IN THE PAKISTAN**

**Lawrence W. Green and others\***

### **Objectives :**

To find out the summaries of surveys on knowledge and attitude towards family planning of villagers were a rural area of East Pakistan (now Bangladesh) every married males and females in an urban centre of West Pakistan; and sample of union councillors in West Pakistan.

### **Methodology :**

Descriptive type.

### **Findings :**

All the respondents were entirely unaware of the contraceptive methods found in the rural villages in the then East Pakistan. In the study, it was also found that the respondents, desiring more children and those desiring no more children, were unwilling to learn contraceptive methods. Sixty-four per cent of the respondents expressed their complete ignorance of any contraceptive methods. In the study of knowledge and attitude towards family planning in an urban residential area of West Pakistan conducted by the Social Science Centre, University of Punjab, only 18.9 per cent attributed their non-practice to religious prohibition. The desire to have children was found to be a reason for the non-practising of family planning. It was also found that the respondents (4 per cent), who practised family planning, gave their reasons for doing so for proper bringing up of their children.

Every child brings blessings with him was the response of most of the respondents found in the study of the attitude of union councillors towards adoption of family planning in West Pakistan. A positive relation of age, family-size, income, education and occupation to acceptance of family planning in principle or in practice was found in two studies in West

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\*East Pakistan Research and Evaluation Centre, Dhaka 1964.

Pakistan. The East Pakistan study found an identical relationship. Both the Comilla study and the SSRC Urban study claimed to establish evidence for the conclusion that females would be more difficult to educate because of their lack of knowledge and their greater religious conservatism. Religion was the major obstacle found in all the three studies.

**Programme implication and Recommendations :**

Objections on religious grounds to accept family planning should be eliminated. Knowledge of females regarding family planning could not be determined on the basis of simple interview techniques.

Spacing of pregnancies was needed to check the present population growth.



**A PROSPECTIVE STUDY OF BIRTH INTERVAL DYNAMICS  
IN RURAL BANGLADESH**

Lincoln C. Chen\*

**Objectives :**

- i) To examine the fertility differentials by religion;
- ii) To examine the seasonal effects on the various components of the birth intervals; and
- iii) To assess the role of biological or sociological factors in the timing of birth interval events.

**Methodology :**

The study was conducted in two villages of Matlab P.S. in Comilla district. The villages were chosen on the basis of their accessibility and religious characteristics. The study villages were inhabited by 209 married women, between the ages of 13 and 44 years.

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\*The Ford Foundation, 1974.

An initial interview provided basic demographic information including age, sex, religion, occupation of the husband, previous lactational practices, marital, medical and pregnancy histories. Prospective follow-up was carried out by trained female field workers who visited each woman bi-monthly to enquire about pregnancy, type of pregnancy termination, menstruation status, lactational practices, infant mortality and her husband's presence or absence over night during the preceding two weeks. A monthly urine specimen was obtained for pregnancy confirmation and tests were discontinued only when three consecutive tests confirmed pregnancy and monthly urine collections were resumed two months after pregnancy termination.

### Findings :

The age structure of the study population was found reasonably similar to the women of the registration areas. The study group contained fewer women aged 15 to 19 years and a relatively larger proportion in the 35 to 39 years age group. During the six months of this study one author made an effort to obtain an in-depth interview from each woman regarding contraceptive practice. Of 175 women interviewed, 17 women (9.7 per cent) admitted the use of methods for family spacing or limitation. Out of the 17 users, 11 cases were coitus interruptus, three had IUD's insertion, one was using oral pill, one foam, and in one case the husband had a vasectomy.

During the total period of observation, 193 women had 248 live-births, giving an average annual fertility rate of 266 per 1,000. This study suggested that the seasonal pattern of birth might be a combination of seasonal effect on the termination of lactational amenorrhoea so that a greater proportion of highly fecundable women was at risk during the cool months of the year coupled with the reports that coital frequency was increased during the cool season. The significant observation was that fecundability varied from month to month, apparently because of interaction of biological and sociological variables. Husband's absences for seasonal occupational activities also contributed to the variations in fecundability. Analysis of the data suggested that the menstrual interval might be increased by as much as 30 per cent by occupational absences of the husband. Considering that, the menstrual interval accounted for approximately absences of the husband could account for a 10 per cent increase in the birth interval or correspondingly a 10 per cent increase in the birth rate from what it might otherwise be if the husband remained home. For all age groups, the

median length of the menstruating interval from onset of the first post-partum means was 8 months.

**Programme implication and Recommendations :**

The study suggested further refinements in analytical models of human reproduction, for example, to allow for seasonal variations in fecundability of Bangladeshi women. To examine the effects of that variation in fecundability, age at marriage, total wastage, infant mortality etc. were needed for further study.



**RADIO AND FAMILY PLANNING—A SURVEY REPORT**

**Ruhul Amin and others\***

**Objectives :**

- i) To gather some estimation of the radio programme people listen to and preference to programmes and timings;
- ii) Some characteristics of the radio listeners; and
- iii) The number of radio-listeners and radio-owners per village.

**Methodology :**

Interviews were conducted in Maultia, Gacha and Pubali unions of Tejgaon P.S. Dhaka. Persons with a high degree of social contact in a village were interviewed. Out of 67 interviews, 54 respondents were F.P. village volunteers who were previously selected on the basis of some criteria. The respondents were under the age group of 25-45. Only the males were interviewed. A number of 67 persons living in 43 villages out of a total of 90 villages in the 3 unions were interviewed. The total population of these 43 villages was above 26,000.

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\*East Pakistan Research and Evaluation Centre, Dhaka, 2nd Biennial Seminar on family planning, Karachi, October 1966.

### **Findings:**

The average number of radios mentioned per village was 6.8; the range of number of radios mentioned as 0 to 30; most frequent number of radios mentioned were 1 or 2, the ratio of radio to population was 1:1000. People generally listened to radio in the evening. Six P.M. was the next frequent time mentioned. Basic Democracy programme (4.30-6 P.M.) in the radio was a popular one; news and songs were reported to be the next most frequently listened programme; 60 out of 67 respondents reported that they listened to radio in a group; 76 per cent of the respondents reported that the people listened to radio in a house. The rest listened to it in shops or market places.

### **Programme Implication and Recommendations:**

A large number of males in the reproductive age groups listened to radio in groups between the hours of 4-30 and 6 P.M. in rural areas adjacent to Dhaka. If the Basic Democracy Programme broadcast during that time had included information on family planning, and especially, if that broadcast had been designed to stimulate group discussion, it would have been possible to make a significant contribution to the family planning programme.

## **FACTORS RELATED TO VASECTOMY IN EAST PAKISTAN**

**Ratcliffe, J. W. and others\***

### **Objective**

To identify the factors responsible for the recent widespread interest in vasectomy and the increasing acceptance of male sterilization.

### **Methodology:**

Three districts of the East Pakistan (now namely, Dhaka, Mymensingh and Noakhali), were chosen on a rational rather than on a random basis

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\*East Pakistan Research and Evaluation Centre, Dhaka, November 1968.

at the time of selection. Each district exemplified one of the three identifiable and historical trends in district vasectomy rates.

The research data were derived from clients' responses through interviews performed by the male field workers from EPREC. Each interviewer serially collected data from four vasectomy clients; the interviewing was performed simultaneously in all districts. This resulted in a total sample of twenty-four clinics, four in Noakhali, 8 in Mymensingh and 12 in Dhaka district.

A total of 613 clients was interviewed at the time of operation. Approximately, half of them were interviewed before as well as after the operation and the rest half were interviewed after the operation only.

#### **Findings:**

The majority of the respondents indicated that protection from unwanted child-birth was a way to achieve economic stability within the family unit.

The study also showed that vasectomy was attracting clients from the lower socio-economic stratum of East Pakistan (now Bangladesh). In terms of education, income, and in all probability, occupation, the more disadvantageous groups were over-represented among vasectomy clients. The clients were further disadvantaged in that they lacked alternatives to sterilization. For 93 per cent of the clients, vasectomy was the only method of contraception of which they were aware.

The fact was that out of 613 vasectomy adopters, only 2 per cent learned vasectomy from village organisers, 2 per cent from physicians and only 1 per cent from posters. The main source of information for the majority of adopters had been unofficial vasectomy agents.

#### **Programme implication and Recommendations:**

It was obvious that the key to the average agent's success, his unofficial, private status, was also a form of projection from official discipline for the agent. Official registration of all vasectomy agents might have some positive effect upon recruiting tactics; however, the field experiences gained in connection with this study indicated that truly effective agent control would result only in the control of the vasectomy physicians. It seemed clear that the regulation of the official physician would be a relatively simple and most effective way to regulate the actions of the unofficial agent.

Another common criticism of the vasectomy programme was that the incentive fee was all important to the client and he gave consideration to no other factor. The data derived from this study indicated that this criticism was unjustified in the great majority of the cases. The data in fact suggested that the incentive fee was a necessary reason, but in most cases not a sufficient one for the continued high vasectomy rate in the East Pakistan. The incentive fee of Rs. 20 was undoubtedly attractive enough to precipitate action among those who wished to stop further childbirth, but it did not appear to attract a praiseworthy number of those who desired more children.



## **FOLLOW-UP STUDY OF VASECTOMY CLIENTS IN THE EAST PAKISTAN**

**Quddus, Ah. G. and others\***

### **Objectives :**

- i) To know the nature of physical difficulties experienced by the clients owing to operation;
- ii) To know the nature of changes experienced by the clients in their marital life;
- iii) To know the extent of social approval or disapproval encountered by the vasectomy adopters; and
- iv) To know whether or not the adopters actively support the vasectomy operation.

### **Methodology :**

It was decided to sample only a portion of the original population of 613 vasectomy clients who were vasectomised in twenty-four clinics in three of East Pakistan. They were interviewed at the time of operation in order to collect data regarding the motivational factors underlying

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\*East Pakistan Research and Evaluation Centre, Dhaka, April 1969.

the decision to adopt vasectomy. The sampling method used was as follows:

“From the thorough addresses collected at the time of initial interview 50% of the clients were excluded from follow-up on the basis that their addresses would be too difficult to find and were too remote for contact”.

#### **Findings :**

A sizeable majority of the clients did not face any post-operative complications. The clients mostly reported back to the doctor for simple pain, minor swelling and physical weakness.

The majority of the clients reported to have experienced no change in marital life following the operation. Three-fourths of the clients who experienced some change due to the operation noticed decreased sexual desire.

The majority of the clients reported that their wives were happy about the operation and they recommended others to have the operation while only one recommended otherwise. The rest did not discuss with others. Almost all who discussed with others recommended for vasectomy.

#### **Programme Implication and Recommendations :**

There were various kinds of rumours, confusions and doubts about the after-effect of the vasectomy operation. Post-operative counselling by doctors and follow-up service by well trained chief male organisers from time to time might help to minimize such apprehensions and effects.

Post-operative advice with regard to the use of recommended conventional contraceptives for a specific time period should be considered very important, because it might also create a grave social problem, if the wife gets pregnant after the husband's operation. A short training course on counselling technique and items of instruction for the doctors from physiological and social point of view was recommended for improving this service. Every vasectomy physician should be advised to take care of one's clients sympathetically so that reputation of the programme could not suffer.

## PERSONAL INFLUENCE AND IUD STATUS IN THE EAST PAKISTAN

S. F. Redelfinger and others\*

### Objectives:

- i) To know how personal influence might be associated with a woman's decision to obtain, retain or discontinue the use of an IUD and the people who exert this influence,
- ii) To explore what kind of influence was exerted upon her by her family, friends and neighbours concerned with her decision to retain her IUD or to have it removed, and
- iii) What type of influence, if there was any, did she exert upon other women in regard to the continuation or the discontinuation of the use of an IUD.

### Methodology :

The sample was composed of rural women who were inserted with an IUD during the period from March 1967 through February 1968. The thanas were selected from Dhaka, Mymensingh, Noakhali and Khulna districts. Each of the acceptable thanas was self-weighted by the number of IUDs inserted during the period. Fifteen sampling units of 60 recipients each were randomly selected in 8 thanas from the list of 27 suitable thanas. Thus, the sample size was 900.60 clients in each sampling units were selected randomly from the thana IUD clinic records. Clients who lived three miles beyond the end of the least access road were excluded from the sample.

### Findings :

Ninety-seven per cent interviews were attempted. Of the 97 per cent, 37 per cent were successfully completed and of those, 56 per cent still had their IUDs inserted. Seventeen per cent had their IUDs removed and 25 per cent had expelled IUDs. The average age for clients was 31.3 years. The families, friends and neighbours of women who retained their IUDs

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\*East Pakistan Research and Evaluation Centre, June 1969.

gave them more favourable and less unfavourable advice about the IUD than the families, friends and neighbours of women who have had their IUDs removed. Half of the respondents reported that their families, friends and neighbours did not say anything about IUD. It was stated that 53 per cent of the adopters and 54 per cent in the removed group received no advice from their families, friends and neighbours. Seventy-one per cent of the adopters and 72 per cent of the removed group and 77 per cent of the expelled group did not discuss about IUD with other women. Women who retained their IUDs expressed more positive feelings about both the IUD and family planning than those who had their IUD removed. Side-effects were the main reasons for IUD removals.

#### **Programme implication and Recommendations :**

It could be recommended that additional follow-up and education be initiated so that more women with IUDs can be turned into leaders of positive opinion and those who had lost their IUD could be directed to another form of contraceptives and support the programme.



### **A STUDY OF WIVES OF EAST PAKISTAN VASECTOMY CLIENTS, 1969**

**Ghyasuddin Ahmed and others\***

#### **Objectives:**

- i) To investigate the socio-demographic characteristics of the wives;
- ii) To inquire into their awareness of husbands' reasons for adopting vasectomy, their involvement in the decision and their knowledge, attitudes and practice of other family planning methods prior to their husbands' operation;
- iii) To know whether they had noticed any side-effects associated with their husbands' vasectomy operations; and

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\*East Pakistan Research and Evaluation Centre, September 1970.

- iv) Finally, to inquire whether they were personally satisfied with their husbands' operation, and their (wives) opinion of husbands' satisfaction with vasectomy.

#### **Methodology :**

The study was conducted as part of a larger survey in which 164 vasectomy clients were located from clinic records and were given follow-up interviews. The study data were collected through face-to-face interviews in the residence of the respondents by female interviewers. The interviews used a standardized interview schedule which had been thoroughly pretested in a non-sample thana. The respondents were divided roughly into two-time period grouping. Half the sample were wives of clients who had been sterilized some 6-11 months before the interview, the other half were wives of clients who had been sterilized some 12-17 months prior to interview. In order to provide a reliability check, 10 per cent of the original sample were interviewed.

#### **Findings :**

The median age of the respondents was 35 years and the mean age was 35.6 years. On the average, a vasectomy client had 4.3 children, the sex ratio being 2.2 sons per 2 daughters. About 95 per cent of the respondents were illiterate and only 3 per cent had received primary education. About 33 per cent of respondents reported that their husbands were approached by family planning workers, 16 per cent reported that they themselves had influenced their husbands, and 6 per cent reported that their husbands had made the decision entirely of their own. About 33 per cent reported that they had no knowledge as to how the subject was initiated. In reply to a question regarding the wives' awareness of their husbands' receipt of some monetary incentives for undergoing the operation, 97 per cent of the wives replied in the affirmative. Nearly 80 per cent of the respondents were aware of the "Family Planning" and could say that it meant "stop child birth". Forty per cent of the respondents were familiar with the IUD, 10 per cent with condom, 7 per cent with foam tablets, 6 per cent with oral pills and 4 per cent other methods.

#### **Programme implication and Recommendations :**

Many, perhaps, most vasectomy adopters had only an imperfect understanding of what male sterilization entailed and thus it was possible for them to equate, consciously or sub-consciously, vasectomy with castration. Such an equation should be prevented at all costs; administrators should recog-

nise clearly the need for the client to understand that vasectomy in no way affects sexual desire (libido). Thus continuous attention to, and emphasis on, the counselling function of vasectomy physicians should be of first priority in programme supervision. For the ultimate success of the programme the counselling aspect of the programme must first be brought up to the mark. The study findings related to persons responsible for initiating the decision to adopt vasectomy and the knowledge of methods other than sterilization indicated that official programme personnel were having a greater impact than previously. The earlier studies showed that the success of vasectomy programme was largely due to unofficial recruiters and that very few adopters were aware of alternative methods of contraception. These latest findings indicated that the action programme personnel were having a discernible impact. It was felt that this recent impact was a result of the response of programme administrators to the earlier research reports on the vasectomy programme. These administrators should be congratulated on their quick response to programme research findings and be cheered by the results of their actions.



## PAKISTAN NATIONAL IMPACT SURVEY 1968-69\*

### Objectives :

- i) To measure the changes in the fertility of the population;
- ii) To determine the levels of knowledge, attitude and practice of family planning among families throughout Pakistan;
- iii) To assess the impact of the Government's family planning programme on the use of contraceptive methods and services; and
- iv) To provide the baseline data on important demographic socio-economic and family planning variables against which to measure subsequent changes through future surveys.

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\*Family Planning Council, Pakistan, March 1971.

### **Methodology :**

The universe of the sample selected consisted of cross-section of about 2,800 households in each part of the Pakistan by means of interviewing ever-married women in sample households aged 55 years or less. Formal in each sample locality were also interviewed.

Within the national sample, sub-samples were drawn from which statistically reliable estimates were made for (a) East Pakistan and West Pakistan (b) rural vs. urban areas (c) major regions within each province and (d) districts where the family planning programme had been operating before 1966 vs. districts where the programme had operated since July 1966. In constructing the sample the 1961 census and the Election Commission records were used as sources for the sample frame. In the East Pakistan the Malaria Eradication Household listings were used. In all, 1,355 women were interviewed.

Questionnaire were administered by four interview teams in each wing. Interviewing began in October 1968 in West Pakistan and November 1968 in the East Pakistan. The completion of interviewing in West Pakistan was in August 1969 and in the East Pakistan in October 1969. The data were punched in Lahore by the data processing unit of West Pakistan Research and Evaluation Centre and were sent to the Water and Power Development Authority computer centre. The data on IBM cards were put on computer tape for analysis with a 360-30 IEM computer system in WAPDA.

### **Findings:**

Average household size was 6.8. Only 11 per cent reported some reading ability and 7 per cent said that they could write a simple letter. Ninety per cent of the women's husbands were in the labour force as compared to 16 per cent of the women. The average age of the wives was 30.4 (median age 29.7). The average age at marriage was 16.1 (median age 14.9).

Nine per cent of the wives were never pregnant; 70 per cent reported pregnancies ending in live-births and 12 per cent said that they were pregnant at the time of interview. The median ideal family size was reported as 4.7. Only 55 per cent of the women had never heard of family planning. Regarding the knowledge of specific methods at least four methods were known to 70 per cent of the women 64 per cent of the wives did not know of any one in their locality who gave advice and helped

in family planning. About 22 per cent had met at least one such person. The places providing information about and extending help to family planning were known to 28 per cent of the women but only 6 per cent had gone to such places. The sources of first information about family planning were friends, relatives, neighbours (47%) and medical personnel (15%). The general exposure to mass communication sources was low among women. Slightly less than half ever listened to radio and 81 per cent did not get information through newspapers or magazines (either reading themselves or someone reading to them). About 13 per cent reported to have had ever used any method of family planning and 5 per cent reported the current use of some method. There seemed to be some evidence of an interest in oral pills (37%). The side-effects were reported as the main reason for rejecting the IUD (43%) and female sterilization (20%). The major reasons for rejecting male sterilization were the dislike for the method (17%). About 9 per cent of the respondents said that they would not use a method because they were against family planning.

#### **Programme implication and Recommendations :**

The findings from the Impact Survey would provide valuable guidelines to future planning in family planning programme and also prove useful in other areas of national planning through important data on various socio-economic and demographic characteristics.

It would also provide the administration with useful information about the target population and some of the more important relationships between input and output results of the programme.



# ATTITUDE OF TEACHERS, GUARDIANS AND STUDENTS TOWARDS POPULATION AND FAMILY LIFE EDUCATION

Mahbub-uddin Ahmed\*

## Objectives:

- i) To know the attitude and opinion of teachers, guardians and students towards population and family life education; and
- ii) Introduction of topics on population education (in rural areas) in the curriculum.

## Methodology:

A sample survey was conducted to collect information from teachers, guardians and students of the three areas, namely, Dhaka city, Industrial areas in and around Dhaka city and rural areas of Dhaka Sadar (North) Sub-division.

From each of the abovementioned areas, 10 high schools were selected at random with the help of sampling frame obtained from the Directorate of Education. A list of secondary students (class IX and X) was prepared for each selected school and this was used as the sampling frame for selecting students. The sample of students was drawn at random with the help of Fisher and Yates Random number table. From the abovementioned areas 600 students were selected and interviewed. All the teachers, who were teaching the secondary students of the selected schools, were interviewed.

Only the guardians of the selected students of Dhaka city were interviewed. For the students and guardians samples, the sampling designs were two-stage designs, and for the teachers it was a single stage design. Three different questionnaire were used for the three types of respondents.

## Findings :

The preferences of the three groups of respondents, i.e. teachers, guardians and students, indicated that the minimum age of marriage for men

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\*Institute of statistical Research and Training, University of Dhaka, 1972.

was raised from 18 to 26 years and that for women from 16 to 18 years, there would be little or no resistance from the teachers, guardians and secondary school students of the areas which were under survey.

The ideal family size preferred by the teachers of Dhaka city was 3.6 children; those of industrial area 3.7, and rural areas 3.9 children. The guardians preferred 3.9., and the students preferred 4.6 children. Most of the respondents (94%) desired more sons than daughters. A portion of teachers, guardians and students were aware of the population problems of the country. About 80 to 90 per cent of the respondents supported the ideas of giving students knowledge about population, family planning and family life.

#### **Programme implication and Recommendations :**

The findings of the study, if found applicable (after a bigger survey in the whole of the province) to all areas of the province, might prove helpful in the formulation of a general policy on population, family planning and family life education. It appeared that the teachers, guardians and students would welcome the introduction of courses on population in the syllabus of secondary students as a part of the existing subject. Direct reference to family planning and family life education, although acceptable to the students themselves, might not be favoured by the majority of the teachers and guardians. The question of the introduction of these topics may, however, be reviewed again after a study undertaken 5 years later as proposed in the introduction of this report.

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## STUDY REPORT OF KNOWLEDGE, ATTITUDE AND PRACTICE OF FAMILY PLANNING\*

### Objectives :

To provide a base for the measurement of change in people's knowledge, attitude and practice in family planning as a result of contraceptives marketing campaign in some selected rural and urban areas of Bangladesh.

### Methodology :

The population considered for the study consisted of three groups: rural, urban and industrial. The rural sample of 400 individuals was taken from the districts of Rangpur and Jessore, the urban sample of 200 individuals from around the city and the industrial sample of 200 individuals from around two industrial locations of Tongi and Joydebpur. A standardized schedule was used to interview the individual samples.

### Findings :

It was found that 90 per cent people had heard of family planning. Male awareness of family planning was, in general, higher than female awareness. At least 17 per cent of the people under study had never known any contraceptive method, modern or traditional. Of the modern methods, those which appeared to be well-known, were oral pill, IUD and condom. The level of awareness of the methods was found to increase when the names of the methods were promoted to the respondents. In general, urban people were more aware of the methods as compared to rural and industrial people. Oral pill, in particular, was the most known method to all groups. Condom was also more known to urban people.

Of the people who had heard of family planning, at least 85 per cent approved of it. Men were more in favour of it than women. Those who approved family planning had more education and more non-farm occupation. The most important reason stated in support of family

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\*Byabasthapanas Sangsad Limited, Population Service International, Dhaka, 1975.

planning was that it would improve the economic condition of the family. Three was the model number of children desired by all groups except the rural women who preferred a model number of 4.

Nearly 24 per cent of the people under study reported that they used at least once some modern contraceptives. Including those who reported to have used traditional methods like withdrawal, safe period etc. the percentage of users was 32 per cent. Users among urban people were much more than those among rural or industrial people. Except in urban group, fewer women than men reported that they had ever used some method.

The study also revealed that most of the rural users collected contraceptives from their nearest village market, while most of the users in industrial population collected contraceptives from the nearest welfare centres and medical hospitals. Urban users collected contraceptives from various sources available in the city. A high proportion of respondents reported that they read newspapers. Radio listeners formed at least 62 per cent in any population group. Higher proportion of men than women listened to the radio. One-third members of the sample owned radio. Among frequent visitors to cinema, men were more than women. Jatra show was attended sometimes by only one-third of the sample population under study.

#### **Programme implication and Recommendations :**

The findings of a high level of knowledge was consistent with other studies of the period. The use of commercial outlets as source of supply should be of interest.



## A FAMILY PLANNING STUDY IN BASTEE AREAS OF DHAKA CITY

Syed Waliullah and others\*

### Objective :

The principal objective of the study was to explore the ways of increasing the level of acceptance of family planning among the bastees. In order to fulfil the objective a few other steps were taken to collect data on their demographic characteristics, knowledge about FP and the level of practice of the same.

### Methodology :

The methodology of the study included selection of two bastees in Dhaka city, one was experimental and the other the control. Baseline Survey was conducted in both the selected areas. Two motivators were engaged in the experimental area to visit the selected families at different times in order to educate, motivate and offer family planning services to them. At the third month of the study the bastees were evacuated by the Government and, hence, the study had to be stopped at that point. Till that period the data were collected through interview, questionnaire and personal visits. The data were analysed in terms of percentages and absolute numbers.

### Findings :

The findings of the baseline indicated that about two-thirds of the bastees maintained a nuclear family and on an average they had 5 family members. About 46 per cent of the population in the selected bastees were below 15 years of age, 53 per cent of the experimental and 37 per cent of the control area people were found employed and their monthly income was Tk. 251 and Tk. 268 respectively. One-third of the males and 3 per cent of the females were found to be literate. The average number of living children per couple was found to be 2.5 and about 80 per cent of their respondents were aware of family planning and about 21 per cent

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\*Directorate of Population Control and Family Planning, Dhaka, 1975.

had some form of contraceptive knowledge. A little higher than 5 per cent of the married couple ever used some methods of family planning.

**Programme implication and Recommendations :**

Study of bastees population had important implication in urban development. In order to check the population growth in the country as well as in the bastees such type of study would be of help to understand the mode of communication with the people and to educate them in respect of population control strategy.



**ATTITUDE OF SOME ELITES TOWARDS INTRODUCTION OF  
ABORTION AS A METHOD OF FAMILY PLANNING IN  
BANGLADESH**

**Rafiqul Huda Chowdhury\***

**Objective :**

To identify the attitudes of a section of Bengalee elites towards introduction of abortion as a method of family planning in Bangladesh.

Existing Government policies regarding abortion were not usually considered as a direct part of the overall population policy, though abortion is a very effective method of fertility regulation and it deserved positive attention. The legalisation of abortion in Bangladesh depended on many factors, e.g., community support, consumers' attitudes, etc. To find out the support of the community of Bangladesh elites towards abortion, the author prepared the study.

**Methodology :**

Elites were selected from (a) professors and associate professors of different faculties of the universities, (b) senior Government officials based on Dhaka city (c) senior research scholars and (d) owners of private firms of

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\*Bangladesh Development Studies in 1975.

Dhaka city. Data were collected through mail and the yield of response rate was 70.54 Per cent,

**Findings :**

Of all the respondents 55.67 per cent of the elites showed positive towards introduction of abortion. Elites with higher education were more eager to accept abortion. Support for abortion did not show any consistent relationship with age. Support for abortion was positively connected with income. Support for abortion was influenced by the residential background.

**Programme implication and Recommendations :**

The attitudes of the elites toward the introduction of abortion as a method of family planning depended on, and varied with, age, education, education of wife, education of father, social mobility status, income, residential background and occupation. Attitudes toward abortion by these variables were made with the assumption that the variables were likely to affect the attitude of an individual.



**IMPACT OF FAMILY PLANNING THROUGH VILLAGE  
LEADERSHIP (AN EXPERIMENTAL PROJECT)**

**F. Saunders Keith and others\***

**Objectives :**

To assess (a) the change, if there was any, (b) mode of knowledge and (c) attitude and practice of family planning through community leadership sponsored by the Community Development Foundation.

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\*Community Development Foundation, Dhaka, 1976.

**Methodology :**

Baseline informations on crucial variables (i.e., knowledge, attitude and practice), which were likely to be influenced by the project, were collected by interviewing fertile couples before the project started in four villages selected for the experiment and another village was selected as the control village. In the experimental villages, Government family planning programme remained absent during the experiment. The control village, on the other hand, continued to receive services from the Government programme. At the end of 18 months of project operation, another study (after survey) was conducted on the seven villages to measure the change, if any, with respect to people's family planning knowledge and behaviour. Comparison between before and after surveys provided the measurement of the outcome of the experiment.

**Findings :**

A large majority of the people in both control and experimental villages were found, during both the before and the after surveys, to have knowledge on the population increase. Knowledge about family planning did not increase among male population while it increased spectacularly among females. This increase however was not attributed to experiment as the gain in knowledge of family planning was equally found in both the areas. In experimental areas, pill, condom, IUD and sterilization were better known.

Ever-use and current-use status in experimental areas were reportedly higher than non-project areas. There was a drop in the pregnancy rate in project areas during the period of experiment. During and before the survey it was found to be 19-20 per cent and during after survey it was 13-14 per cent. An important result of the project had perhaps been that it had promoted willingness among non-users to use a method in future. Examination of data revealed that the respondents in the after survey were on average younger than those in the before survey. Education had always been found an important factor contributing to people's modern attitude and behaviour.

**Programme implication and Recommendations :**

The use of village leader in family planning education appeared worthy of further study.

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## COITUS AND ITS FREQUENCY

S. Waliullah. \*

### Objective :

To find out coitus frequency among residents of a lower and lower middle class Government staff quarters, Dhaka.

### Methodology :

The investigation was conducted in a housing estate of the Government in Dhaka. All of the 325 households (flats) were included and the wife in each household was interviewed. Excepting five all were successfully interviewed.

### Findings :

The findings of this study showed that frequency of weekly coitus among poor nations was not higher than that of a developed nation. The comparative data from Bangladesh, India and USA showed that in Bangladesh and India the weekly coital frequency was less fewer than that in the USA. One should, however, keep in mind that the Bangladesh and Indian data were not representative of the country concerned.

Within the sub-continent there was a difference between Hindu and Muslim population. In average weekly coitus frequency of all age groups was 2.07, 1.41 and 2.37 respectively for Bangladesh, Uttar Pradesh (India) and the USA.

### Programme implication and Recommendations :

The difference between the USA and the sub-continent could be apprehended by the studies conducted in India and Bangladesh which proved the age-old belief that poor population had higher frequency of weekly coitus than the population of developed nations to be a misconception.



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\*The data used here are from a larger study conducted by the author on 'Two-Child Family' in 1976.

## **DIFFUSION OF INNOVATIONS IN BIRTH CONTROL DEVICES : A STUDY IN RURAL-URBAN CONTACT**

**Md. Nazrul Islam. \***

### **Objectives :**

- i) To find out the extent of awareness, interest, evaluation and adoption of birth control innovations among the people of rural and urban areas; and
- ii) To unveil the role of existing communication media in creating awareness and interest about birth control innovations which might ultimately increase the rate of family planning acceptors.

### **Methodology :**

For the purpose of the study, Azimpur Colony in Dhaka city as an urban area and village Charpara under Arahazar P.S. of Dhaka district as a rural area were selected. The samples were selected on random basis and only the male heads of families were interviewed. In all, 130 persons were interviewed in the urban area and 100 persons in the rural area. The data were collected by administering a structured questionnaire.

### **Findings, Programme implication and Recommendations :**

The percentage of radio listeners was higher than the percentage of newspaper readers in the rural areas. About 47% per cent of the rural respondents listened to the radio programme. The percentage of radio listeners and T.V viewers in the urban area were 96 per cent and 79.6 per cent respectively. T.V. was not available in the rural area.

The respondents from urban areas were found to be fully exposed to the mass media with almost 100% per cent reading news papers and they were more likely to have received some information regarding birth control through these media.

The finding of the study showed that the mass media justified itself in the urban area in the initial stage of diffusion process, while in all other

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\*University of Daka, Dhaka, 1976.

successive stages, the role that it played was much below the level of expectations.

It was found that inter-personal communication was the most effective channel for communicating ideas of birth control to the population at large.



## **GUIDELINES FOR ACTIVATING OPINION LEADERS IN POPULATION COMMUNICATION (REPORT OF TASK FORCE-IV)**

**M. Zakir Hussain and others\***

### **Objectives :**

- i) To realise and identify the opinion leaders; and
- ii) To ascertain their attitudes toward population planning.

### **Methodology :**

In drawing the sample, the three-stage stratified procedure was followed. In our divisional headquarter districts, four unions were randomly selected and two villages in each union were similarly selected. Thus, a total of 8 randomly selected villages constituted the ultimate sampling unit. In this process, from 8 villages 148 couples (148 husbands and 148 wives) were interviewed. These couples identified a total of 120 formal and 200 informal leaders. Village-wise lists of formal and informal leaders as identified by the couples were prepared and from these lists, only those opinion leaders who were mentioned by more than one respondent were selected for interview.

### **Findings:**

In total, 54 formal leaders and 81 informal leaders were interviewed. The mean age of the couples was 29 years. The husbands' mean age was

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\*Ministry of Information and Broadcasting, Dhaka, 1977.

35 years, while that of wives was 26 years. It was interesting to note that the average difference of age between husbands and wives was 9 years. More than half of the husbands and one-quarter of the wives were able to read and write. As for the current practice of family planning, 29% per cent of the couples were using one or other methods of contraception.

As for the informal leaders, 9 out of 10 husbands and 2 out of 4 wives were identified as 'Matbars' (village elders), the most prominent informal leaders in the locality. Ninety-eight per cent of the opinion leaders responded positively to questions suggesting female employment, while 87 per cent supported film exhibitions. Majority of them also responded favourably for fixation of higher age for marriage. Regarding the knowledge of the opinion leaders about various family planning methods it appeared that the oral pill was the most widely known (73%) followed by condom (56%) and then ligation (57%)

Regarding the problems arising out of family planning practice, the leaders stated that they were aware of some side-effects. More than three-fourths of the opinion leaders did not consider family planning practice against their religious belief. Ninety-three per cent of the opinion leaders agreed that some incentives in the form of cash should be provided to the acceptors of permanent family planning methods. Regarding the provision for disincentives for those who did not accept family planning, more than 85 per cent of the formal and informal leaders stated that they would support it, while the rest of them considered it uncalled for, considering financial and humanitarian grounds.

#### **Programme implication and Recommendations:**

It is of great significance for policy formulation that the overwhelming majority of village leaders support the use of both incentives and disincentives to encourage adoption of family planning.



## **STEREOTYPES ABOUT VASECTOMISED MEN AMONG THE UNIVERSITY STUDENTS**

**Nihar Ranjan Sorcar and others\***

### **Objective :**

The purpose of the study was to determine the attitudes of the educated youth in Bangladesh toward vasectomy and to investigate if certain factors associated with this attitude could be identified.

### **Methodology:**

The study was conducted on a sample of 85 students of the University of Dhaka. The sample was randomly drawn from the honours and master degree classes of the University. There were 48 male and 37 female students of ages ranging from 18 to 26 years. The students were provided with a list of 24 adjectives that could describe a vasectomised person. They were asked to choose any 8 of the adjectives that, according to them, could best describe a vasectomised person.

### **Findings :**

About 62 per cent of the respondents were found to have positive attitudes toward vasectomy and the rest had negative attitudes. The most frequently ascribed positive attitudes to a vasectomised man were happiness, intelligence and farsightedness. The commonly negative attributes of vasectomy were pointed to be impotency, abnormality, depression and rigidity. Some demographic and socio-economic variables were examined in relation to respondents' attitudes. Sex, knowledge and residential status were found to be significantly associated with the attitudes. Relationship between parents' education, occupation and income was not, however, demonstrably significant.

### **Programme implication and Recommendations:**

Attitudes toward vasectomy was an important factor in the determination of its goal. Nationwide adult students' attitudes as well as illiterate adults attitudes toward the issue may be investigated for better understanding of the strategy of publicity.



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\*The Bangladesh Journal of Psychology, Vol. 5, Dhaka, 1977.

# NUTRITION AND POST-PARTUM AMENORRHOEA IN RURAL BANGLADESH

Sandra L. Huffman and others\*

## Objectives:

- i) To examine some of the factors associated with lactational amenorrhoea among breast-feeding mothers;
- ii) To determine the significance of maternal nutritional status in post-partum amenorrhoea; and
- iii) To examine the relationship between nutrition and amenorrhoea.

## Methodology:

A total of 2,018 lactating women were selected from 86 villages in Matlab, a rural area in Bangladesh, for the study. These women had children aged between 13 and 21 months, born between February and September 1974, and were non-contracepting and non-pregnant. The women were interviewed in their homes by female field assistants between November 1975 and January 1976.

## Findings:

The median length of amenorrhoea was observed to be over 18 months. There was a higher probability of being amenorrhoeic for older women and those of lower socio-economic status. Maternal malnutrition extended the duration of amenorrhoea slightly. Women, feeding their infants with higher quality supplements, were less likely to be amenorrhoeic than those supplying their infants with less adequate supplements.

## Programme implication and Recommendations :

The figures suggested that the pattern of breastfeeding played the primary role in determining lengths of lactational amenorrhoea for this rural population.



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\*International Centre for Diarrhoeal Disease & Research, Bangladesh, 1977.

## **REPORT ON PRICE STUDY OF CONTRACEPTIVES IN DHAKA**

### **Objectives:**

- i) To assess the traders and users' opinion about present price of Maya (oral pill) and Raja (condom);
- ii) To ascertain the possible effects in sales at both trade and user's level, when the price was changed;
- iii) To assess the viability of incentive of the traders to gear up sales; and
- iv) To collect data on demographic characteristics of the users.

### **Methodology:**

A total of 310 users and 102 traders at different levels and types were selected and interviewed in police stations of Faridpur and Comilla districts.

### **Findings:**

The doctors' opinion and high price were factors which worked against the use of Maya pill, and high price and loyalty to other brands were the factors against Raja condom.

Most of the users suggested a price equal to or less than Tk. 1.00 for packet of Maya containing two cycles of pills. More than 50 per cent of the users and traders suggested a price equal to or less than Tk. 0.20 for one packet of 3 pieces of Raja.

None had heard of M.R. diaphragm and rhythm. Among the men, over half expressed a preference for condom. Among the women there was general agreement that men preferred women to practise a female contraceptive method. One half of the women thought that pills were best, and 18 out of 20 in one group stated that men did not like condom. Both men and women had expressed unequivocally about the side-effects of the various methods. All the participants expressed opinions against abortion.

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\*Population Services International, Dhaka, 1977.

### **Programme Implication and Recommendations:**

To stress the positive economic and health aspects of family planning, all media especially posters and signboards, should be more educative and simple to understand, and also to inform and educate more and more about the actual side-effects of the methods of contraception.



## **FAMILY PLANNING OF YOUTH : CONCERN ABOUT POPULATION AND INTENTION TO LIMIT FAMILY SIZE (A RURAL-URBAN COMPARATIVE STUDY)**

**M. S. Hasan \***

### **Objectives:**

To evaluate the awareness of the problem of overpopulation and the knowledge of family planning amongst the younger generation, specifically, the unmarried males aged within 19-30 years.

### **Methodology:**

The study was based on a sample survey conducted in both rural and urban areas of Dhaka, Tangail, Chittagong and Khulna districts. The data were collected by interviewing 300 respondents. Initially, a list of 1,800 young men within 19-30 years of age was prepared and out of them 300 were selected with the help of random number table by using three-digit numbers.

### **Findings:**

It was found that 67 per cent of the respondents were within 19 to 24 years of age and 33 per cent within 25 to 30 years of age. Eighteen of the respondents illiterate, 9 per cent had studied up to class I-IV, 21 per cent up to class VI-X, 16 per cent were Matriculates, 10 per cent had education up to the H.S.C. level, 5 per cent were Graduates,

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\*Department of Sociology, University of Dhaka, 1977.

9 per cent had Masters degree and 5 per cent had degrees in Law, Engineering and Medical Science. The occupation of 13 per cent was agriculture, 40 per cent were in service ; 24 per cent in business, etc. of the total respondents, 99 per cent had ever heard family planning, but 77 per cent did not support sterilization. Sixty three per cent supported the ages of 25 years and 25 years to be the proper ages for boys and girls respectively, to marry.

#### **Programme implication and Recommendations:**

The report was encouraging for future programme success because of the strong and favourable attitudes toward family planning and, particularly, toward higher age of marriage.



## **ATTITUDE OF INDUSTRIAL AND PLANTATION WORKERS TOWARDS FAMILY PLANNING**

**M. Nazmul Huq and other\***

#### **Objectives:**

To collect demographic characteristics, to know about the extent of knowledge, the attitudes and the family planning practices of the workers, and also to ascertain the workers' opinion regarding having family planning programme specifically meant for them.

#### **Methodology:**

The population of the survey sample included the workers of the following organisations from the three areas:

- i) Adamjee Jute Mills from Adamjee Nagar;
- ii) Olympia Textile Mills from Tongi Area ; and
- iii) Three tea-gardens at Sylhet.

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\*Population Planning Unit, Directorate of Labour, Dhaka, 1977.

Three independent samples were drawn from the three areas specifying each of them as a stratum in the sample design. The workers of the three tea gardens were further classified as male and female labourers and independent samples for each group were drawn following the random sampling technique. The combined sample size for the survey was made up of 698 people (married 558 unmarried 140).

#### **Findings:**

The mean age of the workers in Adamjee Olympia, and the tea-gardens was 31, 29 and 33 years respectively, and the mean age of the married workers of those organisations was 33, 30 and 34 years respectively. The average numbers of living children of the labourers in Adamjee, Olympia and the tea-gardens were 2, 3 and 4 respectively, and till then the average lengths of duration of the married lives of those workers were 10, 9 and 17 years. Fifty-eight per cent of the workers of Adamjee, 72 per cent of Olympia and 42 per cent of the tea-gardens had expressed their desire for more children. The average expected family size was 5 for the workers of Adamjee, 4 for Olympia and 5 for the workers of tea-gardens. Ninety-four per cent workers of Adamjee, 66 per cent of Olympia and 32 per cent of the tea-gardens had mentioned that they had heard about family planning.

Sixty-nine, 59, and 86 per cent of the workers of Adamjee, Olympia and the tea-gardens respectively had mentioned that they supported the family planning programme. Only three per cent workers of Adamjee, 5 per cent of Olympia and 8 per cent of the tea-gardens had reported to have used family planning methods.

#### **Programme implication and Recommendations :**

The data suggested a need for more intensive educational and motivational efforts among industrial and plantation workers.

## AN ENQUIRY INTO KNOWLEDGE OF, ATTITUDES TOWARD AND PRACTICE GAP IN FAMILY PLANNING

Nihar Ranjan Sarkar\*

### Objective:

To examine the relationship between the fertility regulating behaviour and the social, cultural, demographic, psychological and situational variables including knowledge, attitude, intensity and complexity.

### Methodology :

The study was conducted on a sample of 615 individuals of the reproductive age group. They were categorised into acceptors and non-acceptors of the family planning.

Initially two urban areas, namely, Dhaka city and Mymensingh town, were purposefully selected as urban sub-samples. Four family planning clinics from Dhaka city and two from Mymensingh town were randomly selected for interviewing; urban family planning acceptors and urban non-acceptors from the adjacent areas of the selected clinics.

The rural counterparts of the urban respondents were randomly selected from Narsingdi (as a counterpart of Dhaka city) and Gouripur (as counterpart of Mymensingh town). The rural respondents were randomly selected from the villages within five miles radius.

### Findings:

The findings of the study indicated that family planning was significantly related to major socio-economic variables. The income level was found to be positively correlated with adoption of family planning. More acceptors than non-acceptors came from higher income groups. The acceptors tended to be more frequent among service-holders and traders, and non-acceptors were found among farmers and daily wageearners. The acceptors had higher level of education than the non-acceptors. More acceptors were found in the upper social classes than in the lower classes.

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\*University Grants Commission, Dhaka, 1977.

There was no significant relationship between acceptance and sex preference of children. The ideal family size norm for the acceptors was three children and for the non-acceptors it was four.

**Programme implication and Recommendations :**

The study indicated that acceptors had a wide knowledge about the various methods of contraception. More acceptors than non-acceptors reported to have knowledge about the disadvantages of family planning methods. The acceptors tended to have higher scores in attitude scale than the non-acceptors. The acceptors were more modern in their outlook and also optimistic about the children's future than the non-acceptors. The acceptors had more media habits and were more exposed to mass media than the non-acceptors.



**LIGATION AND ABORTION AS METHODS OF BIRTH CONTROL :  
A SURVEY OF THE EXPERIENCE AND OPINION  
OF THE PEOPLE OF TWO SELECTED AREAS**

**Ahmedullah Miah\***

**Objectives :**

- i) To have some preliminary ideas about the experiences and opinions of the sterilized persons;
- ii) To study the attitudes of the people toward abortion; and
- iii) To have a comparative picture of the sterilized and the non-sterilized.

**Methodology :**

Information was collected by asking males and females of different households in two areas of Dhaka, namely, Shalna and Savar. Males and

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\*Institute of Social Welfare and Research, University of Dhaka, 1977.

Females were selected from different households. Questions were put to both sterilized and non-sterilized persons.

#### **Findings:**

Different attitudes about ligation and abortion existed between males and females. Males usually got sterilized around the age of 40 years and females at 30 years of age. Females wanted to be sterilized for birth control. Females came for sterilization because of problems with other methods of contraception. Males got themselves sterilized mainly to receive money. Relatively, more Hindu women went for sterilization compared to Muslim women. Women had a notion about abortion. Sterilized males and females usually came from the poor families. Most of them had more than three children. About 50 per cent males and 65 per cent females reported some problems due to sterilization. Males usually suffered from psychological problems. Females usually complained about irregularity of menstruation, pain in the abdomen and excessive bleeding following sterilization.

#### **Programme implication and Recommendations:**

The findings that males accepted vasectomy only to receive incentive money should be thoroughly probed and emphasised in making future policies.



### **FAMILY PLANNING HABITS AMONG THE OFFICERS AND STAFF OF THE MINISTRY OF PLANNING\***

#### **Objectives:**

- i) To know the number of officers and staff of the Ministry of Planning currently using any methods of contraceptives and also the number of non-acceptors and the reasons of their non-acceptance; and
- ii) To know exactly the number of children the acceptors and also the non-acceptors of FP methods.

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\*Population Section (Evaluation Unit), Planning Commission, Government of the People's Republic of Bangladesh, 1977.

### **Methodology:**

The whole Ministry of Planning was divided into four stratum as per ministerial set-up comprising four divisions such as: (1) Planning Division, (2) Statistics Division, (3) External Resources Division, and (4) Project Implementation Division.

Four independent samples were drawn from the four divisions defining each of them as a stratum in the sampling design. Samples were drawn from each stratum using the purposeful sampling technique. The total size of sample was 525. The interviewers by groups visited each division and more down to section and interviewed the study population (the married persons). The interview was conducted through a questionnaire containing questions exclusively relevant to the objectives of the study.

Out of the total of 1,551 employees 350 were officers and 1,201 were staff of the Ministry. A total of 525 in which 122 were officers and 403 staff were interviewed. 33.85 per cent of the total employees (officers and staff) had been covered by the sample.

### **Findings:**

The average age of the respondents was found to be 33 years and the range was 17 years to about 52 years. The length of married life was between 2 and 4 years for about 25 per cent of the respondents, whereas for 11.62 per cent and 2.1 per cent respondents the durations of married life were found to have been equal to or between 8 and 10 years and 23-25 years respectively. About one-fourth of the respondents, either FP acceptors or non-acceptors had two children on an average. Only two respondents were found to have 10 children. One hundred and six respondents had no child; 30 officers out of 122 and 93 staff out of 403 had two children respectively.

Average family size of the officers and staff was estimated to be 6.1 and 6.2 respectively. Total average family size of the respondents had, however, been estimated to be 6.3. It revealed that on an average about 50 per cent respondents were found to be practising FP methods; 77.7 per cent officers and 42.3 per cent staff of the four divisions practised FP methods. An overwhelming majority of the respondents from all divisions had, in fact, been observed to be included to use oral pills and condom, out of which 50.38 per cent were users of oral pills and 32.95 were condom users. Rest were using Emko/Foam, IUD, Ligation and Vasectomy, etc.

Out of 264 acceptors 124 respondents had reported about certain complications experienced after using FP methods. And the other 139 acceptors had reported that they developed no complications. Majority of the acceptors had categorised complaints on practising FP methods as dizziness/headache, physical illness and irregular menstruation of which physical illness was the mode. Tendency to consult the "doctor in the clinic" had been observed among the majority of the acceptors when they incurred untoward effects of contraceptive methods in order to take proper measures against the same. Change of methods due to complaints by the acceptor was insignificantly low. Methods dropped out by the acceptors was 17.50 per cent.

As many as 90 per cent acceptors were of the opinion that they would continue using FP methods after the removal of complications experienced. There were 488 respondents out of 525 who believed that the available methods of contraception were the effective means of fertility control. A great majority of the respondents (92.83 per cent) were found to be in favour of the "Multi-sectoral programme" on population control and family planning implemented by the Government.

#### **Programme implication and Recommendations:**

The officers and staff were not only strong supporters of family planning but also put their positive opinions about it into practice. Other ministries should also be studied.

**ATTITUDE OF VILLAGE LEADERS TOWARDS FAMILY  
PLANNING (A CASE STUDY OF HATHAZARI  
THANA IN CHITTAGONG)**

**Monjur Morshed Mahmud.\***

**Objective:**

To examine the attitude of village leaders towards family planning programme of the Government of Bang'adesh.

**Methodology:**

The study covered 15 unions of the thana and was comprised 5 groups of leaders, viz, union parishad members, primary school teachers, village matbars, village doctors and religious leaders. A total of 300 leaders were interviewed, taking 60 from each gorup.

**Findings:**

The modal age of the respondents was 37,18 years. None of them were illiterate. The occupations of the respondents were agriculture, business, medical practice, teaching, etc. The family size of the respondents varied from 3 to 12 and the model size was 7.6. The duration of the married lives of the respondents varied from 1-22 years and their number of living children varied from 1-7 and the modal number was 4.

All the respondents had knowledge about family planning and 80.66 per cent favoured family planning, of which 49.4 per cent adopted the same. A positive correlation was observed between economic condition and attitude toward family planning and its practice. The better was the economic condition the higher was the number of favourable attitudes and also higher the practice of family planning.

About 40 per cent considered 24-25 years of age as the ideal marriage age for males and 18-21 years for females. Majority of the village leaders did not favour sterilization. About 51 per cent of the village leaders

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\*Department of Accounting, Chittagong University, 1978.

reported that village people sought advice regarding family planning but the family planning staff did not approach to them to motivate them toward accepting family planning.

Majority of respondents, complained about various methods of family planning.

**Programme implication and Recommendations :**

The leaders showed strong support for family planning not only in their attitudes but also through a very high level of practice. They endorsed a much higher age of marriage than is common in villages. It appeared that they should be involved more in village education motivation efforts by the family planning workers.



**ATTITUDE OF THE SCHOOL-GOING ADOLESCENTS  
TOWARD PARENTAL BIRTH CONTROL**

**Muhammad Nazmul Huq\***

**Objective :**

The purpose of the study were to investigate the attitudes of the school-going adolescents toward parental birth control. It was also envisaged to elicit the opinion of the adolescents about their parental family.

**Methodology :**

A questionnaire were administered to a sample of 261 ninth grade students drawn from four selected secondary schools of Dhaka city. The filled in questionnaire were collected and analysed in terms of percentages and some inferential statistics.

**Findings :**

The major findings of the study revealed that the adolescents, with mean age of 13.70 years, did not prefer their parents to have any more

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\*Population Education Programme, Ministry of Education, Dhaka, December 1978.

children at their present family size. This finding, according to the hypothesis, gave significant result. The second and the third hypothesis that the desire for the new baby and its sex depended upon the number of siblings and sex respectively could not be established to the stated level of significance. It was found that adolescents did not prefer any more sibling because of large family size, more expenditure and child-rearing problems. The results indicated that the adolescents valued the sexes equally.

#### **Programme implication and Recommendations :**

Adolescence is the critical period in one's lifetime. At this stage they need more attention and proper care for their development. Therefore, any addition to the family size would create problem in rearing them up properly. Their attitudes toward parental birth control possess sufficient indication for their parents to think about family planning. Further investigation for validating of such findings may be recommended.



## **CONSTRAINTS ON USE AND IMPACT OF CONTRACEPTIVE IN RURAL BANGLADESH**

**Ray Langster and others\***

#### **Objectives :**

- i) To look at some findings of the baseline KAP and subsequent prevalence surveys of the Matlab contraceptive distribution programme; and
- ii) To examine the impact of the programme on contraceptive use and the expected demographic impact from such use.

#### **Methodology :**

In 1971, contraceptives were distributed in Matlab, a field research area, which consisted of 236 villages with a population of about 1,36,000. The data were collected on contraceptive use after 3 and 12 months of distribution. The sample size for the study was 1058.

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\*Cholera Research Laboratory, Dhaka, 1978.

**Findings :**

The findings showed that contraceptive use rate had increased from 1.7 to 19.7 per cent after 3 months and then declined to 15.6 per cent after 12 months of the start of the programme. This level of use rate could have probably ensured a drop of 6 or 7 points per thousand to a birthrate of 37 to 38, assuming a normal CBR of 44 in Matlab before the start of the contraceptive distribution programme.

The findings of KAP survey was that those who desired family size was less than or equal to their number of living children stated that they had planned not to use contraceptives in the future. The estimation of current demand indicated a maximum likely use prevalence rate of 15 to 20 per cent of eligible couples who at best contribute to a drop of 9 points per thousand in the CBR.

**Programme implication and Recommendations :**

The demand for contraceptive appeared to remain low until significant changes could be made in the desire for children and particularly in the strong preference for sons.

**POPULATION COMMUNICATION EDUCATION INFORMATION  
ACTIVITIES : A REPORT ON FILM SHOW CAMPAIGN\*****Objective :**

In 1977 a film show campaign was launched in six districts for a period of one month. This report stated the impact of the film shows as a media of family planning among the people at large.

**Methodology :**

A questionnaire were administered for data collection during and after the film show by the workers. There were 324 responses from 324 members of the audience, which were recorded from five districts.

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\*Bangladesh Family Planning Association, Dhaka, 1978.

### **Findings:**

Three-fourths of the audience found the film quite enjoyable and 50 per cent of the audience had seen such film shows for the first time; 44.41 per cent had already accepted family planning methods and 90 per cent of the others expressed willingness to accept the same in due course.

### **Programme implication and Recommendations :**

Since audience were interested to enjoy the film shows, some new family planning motivational film could be produced. Such film shows should be arranged very frequently for changing the old attitude and it would be suitable to motivate them.



## **FAMILY PLANNING ASPECTS OF VOCATIONAL TRAINING FOR WOMEN : BASELINE SURVEY REPORT**

**Ahmedullah Mia and others\***

### **Objectives :**

To assess and determine :

- i) Level or rate of acceptance of small family size norm by the participant trainees in the pre-training period.
- ii) Knowledge and practice level of the trainees regarding small family size goal;
- iii) Occupational status of the women participants in the pre-training period.
- iv) Leadership potential of the participant trainees in the areas of population planning and economic activity; and
- v) Social participation habits of the participants.

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\*Directorate of Population Control, Dhaka, 1978.

### **Methodology :**

The pre-study information regarding the respondents were obtained by interviewing the respondents with the help of standardized questionnaire. The sample of respondents consisted of 160 women who participated in the vocational training programme.

### **Findings :**

The annual income of heads of the families of the respondents was found to vary extremely. It ranged from less than Taka 500 to more than Taka 15,000. The findings of the study showed that about 38 per cent of the heads of families had some debts. The extent of indebtedness varied from Taka 100 to Taka 4,000.

The average family size was 7.4 which was larger than the national average. Out of 158 trainees, 86(54.4%) were married, 21 (13.3%) unmarried, 17 (10.6%) widowed, and 34 (21.5%) were separated or divorced. Enquiry of the pregnancy status of the currently married trainees at the time of interview revealed that 16.2 per cent of them were pregnant. Of those who were pregnant (14 cases) at the time of interview, nine wished to have a few more children in future while four did not want any more and one did not give respond. Of the total of 72 currently married women who were not pregnant at the time of interview, 11 (i.e., 15.3%) wanted a baby very soon. Out of 11 respondents who were not pregnant at that time wanted a baby soon, either (i.e., 71.7) preferred a boy for the next time, two preferred a girl and one did not give any preference. The major proportion (48.7%) wished to have three children; 36.7 per cent desired to have two children and none wished to have one child. About 13.2 per cent had the desire to have more than three children

The respondents were asked about the specific methods of contraception. When unprompted, majority (88.6%) of the respondents mentioned oral pill followed by plastic coil (67.7%), condom (67.1%), ligation (57.5%), vasectomy (52.5%) and jelly/foam (50.0%). In the study it was found that at least 19 per cent of the trainees had positive attitudes toward abortion. They supported abortion for the simple reason of controlling births.

### **Programme implication and Recommendations :**

The data supported the expectation that the small family norm would be supported by the education and employment of women.

## **A BASELINE KAP SURVEY ON FAMILY PLANNING IN LABOUR WELFARE CENTRE\***

### **Objective :**

To collect bench mark data which would help develop guidelines for action programme designed to attend knowledge about and attitude toward and practice of family planning among the labour population in the industrial areas of Bangladesh.

### **Methodology :**

The population of the study did not cover the entire labour force in the survey areas but was confined to Khulna and Chittagong towns and Bogra district headquarters which were covered by the World Bank supported projects. Criteria of selection of mills involved those mills in Khulna and Chittagong which had thousand or more labourers in the employment roll.

### **Findings :**

All the labour respondents were observed to be below forty years of age. Comparatively, more labourers at Chittagong were illiterate. The lowest illiteracy level was prevalent among the respondents at Bogra (2.80%). The mean monthly salary of those respondents was below Tk. 300.

The mean number of living children of the respondents was 3 in the three labour welfare centres.

The highest percentage of familiarity with the labour welfare centres was reported by the respondents at Khulna (63%). Reasons for visiting the centres were mostly for medical treatment. Most of those respondents had heard about family planning (almost 100%). A great number of respondents had knowledge about family planning methods particularly those at Bogra and Khulna (over 90%), but this was almost half among the respondents at Chittagong (44.40%). Oral pill and condom were the best known methods. As for family size most of the respondents preferred 3-4 children.

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\*Research Evaluation Statistics & Planning Unit (RESP), Directorate of Population Control, 1978.

Overwhelming majority of the respondents at both Bogra and Khulna and about 70 per cent at Chittagong were found to be aware of the high rate of population growth.

Most of the female respondents under study around the three labour welfare centres at Bogra, Khulna and Chittagong were low age parity groups (mean age 24 years) and almost all of them were married (in their teens) at the time of interview.

The highest percentage of illiteracy was found among the respondents at Chittagong (46%) and the lowest was at Khulna (20%). The mean number of children born alive to these respondents was 3, and on an average 50 per cent had young children aged around 1.2 years.

The number of respondents who had knowledge about family planning was the highest among the respondents at Khulna (96%) and lowest at Chittagong (76%). Most of the female respondents in the three areas desired 3-4 children and majority of them preferred 3-4 years' interval between successive births. Oral pills were used more than any other contraceptive methods. While the female respondents at Bogra suggested more than 30 years to be the age at which men should marry, much lower age was suggested by their counterparts at Khulna and Chittagong. But for girls all the respondents unanimously suggested marriage at teenage.

#### **Programme Implication and Recommendations :**

It is stated in the findings that the opinion about the use of family planning methods was more favourable at Bogra and Khulna than at Chittagong. The highest number of respondents gave reason for adopting family planning method as 'difficult to maintain family with too many children.' But the regular and current use rate of different contraceptive methods did not commensurate with the percentage of support recorded. The finding necessitates further study or investigation to bring the support for and use of contraceptive at par.

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## **WOMEN FUNCTIONAL LITERACY PROGRAMME, USE OF MODEL FARMERS AND COOPERATIVE MANAGERS\***

### **Objectives :**

- i) To assess the present level of knowledge, attitude and practice relating to family planning among the study population.
- ii) To investigate the knowledge and attitude towards the functioning of IRDP projects; and
- iii) To develop performance indices of the IRDP.

### **Methodology :**

A multi-stage stratified sampling procedure had been followed. Fifteen pre-selected thanas where the programme on women's functional literacy and use of model farmers and cooperative managers were under operation or were to be operated in the near future were considered for this survey.

### **Findings, Programme implication and Recommendations :**

In its long list of findings, the study revealed that women in rural areas in respect of socio-economic condition remained far behind their male counterparts. High rate of multiple marriage among the male respondents was still persisting in the rural areas. Education rate was lower among the women, it was less than half of men. The study also states that it may give some light on the trend of acceptance rate of family planning and a few related factors. The findings of the survey indicated that the rate of acceptance had been increased from four per cent to 11 per cent.

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\*Research Evaluation Statistics and Planning (RESP), Directorate of Population Control, 1978.

## **A BASELINE EVALUATION OF CONTRACEPTIVE USE PATTERNS IN THREE POPULATION PILOT SCHEMES IN RURAL BANGLADESH\***

### **Objectives :**

- i) To assess the present level of knowledge, attitude and practice related to family planning among the study population;
- ii) To determine the present level of fertility, mortality and other demographic characteristics of the study population; and
- iii) To develop methodologies for constructing performance indices of the schemes.

### **Methodology :**

Each thana selected in the BFS was linked to a geographically contiguous thana in which no pilot project was planned. Once this linkage had been made, a sample of a villages was selected from the RLS, one from each of the 4 thanas, a matching set of villages was selected from the geographically linked non-project thanas stratified on the basis of similarity of religion and educational structure, and on accessibility to main roads and good transport system.

### **Findings, Programme implication and Recommendations :**

About 30 per cent of males were above the age of 45 years and there was about 10 years difference between the mean age of married women and their husbands. Ninety per cent of the respondents were Muslims. Income disparities were wide with approximately 20 per cent earning more than twice the average. More than 90 per cent respondents had heard about family planning. About 25 per cent males were current users of contraceptives, 11.2 per cent males were past users and 64.0 per cent were never users. For the females, the rates were 12.0 per cent, 11.6 per cent and 76.4 per cent respectively.



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\*Research, Evaluation, Statistics and Planning, Directorate of Population Control, 1978.

## **CONSTRAINTS ON USE AND IMPACT OF CONTRACEPTIVES IN RURAL BANGLADESH—SOME PRELIMINARY SPECULATIONS**

**Ray Langster and others\***

### **Objectives :**

The paper attempted to look at some of the findings of the baseline KAP and subsequent prevalence among the Matlab Contraceptive Distribution Programme and to examine the impact of the programme on contraceptive use and the expected demographic impact from such use.

### **Methodology :**

The area selected for the study was the Matlab field research area consisting of 236 villages with a population of about 23,600. Distribution of contraceptives began in October 1975. And for the purposes of the contraceptive distribution programme the Matlab area was divided into two parts of roughly equal size. One was a treatment area and the other a control area.

The report examined data from the baseline survey conducted before the distribution of contraceptives and information on contraceptive use of 3 months and 12 months after the start of distribution. A total of 1,058 eligible respondents were interviewed.

### **Major Findings :**

The findings showed that the contraceptive use rate had increased from 1.7 to 18.7 per cent after 3 months and then declined to 15.6 per cent in 12 months after the start of the programme. This level of use rate could probably have ensured drop of 6 or 7 points per thousand to a birthrate of 37 to 38 assuming CBR of 44 in Matlab before the start of the programme.

The most striking findings of the KAP survey was that 40 per cent of those in need, i.e., those, whose desired family size was less than, or equal to their number of living children stated that they would not use contraceptive in the future. The estimation of current demand indicated a maximum

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\*International Centre for Diarrhoeal Disease Research, Bangladesh (ICDDR,B)  
August 1978,

likely use prevalence rate of 15 to 20 per cent of eligible couples which might best contribute to a drop of 9 points per thousand in the CBR. The demand for contraceptives appeared to remain low and would continue to be so until significant changes could be made in the desire for children and particularly in the strong preference for sons.

**Programme implication and Recommendations :**

The IEM Programme could gear up motivational activities for balancing preference about children. The women's participation in income generating activities would be a step forward towards this goal.



**AN AREAL ANALYSIS OF FAMILY PLANNING PROGRAMME  
PERFORMANCE IN RURAL BANGLADESH**

**T. Osteria and others\***

**Objectives :**

The main objectives of the report were (i) to dissect the different factors responsible for the diversity in prevalence rates among the villages in the project area and (ii) to determine the extent to which these differences could be attributed to the field workers and to the areal characteristics.

**Methodology :**

The prevalence rate was computed from the record-keeping system using the eligible population as base. The field workers characteristics were collected from the field workers' files of October 1974. Five days after the training the field workers were examined. In November 1974 another examination was taken. The training content included anatomy and physiology of reproduction mechanism and the action of contraception; side-effects management and backup services. The areal characteristics of these villages were drawn from the survey undertaken in December 1974 to assess the level of contraceptive knowledge, use or demand.

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\*International Centre for Diarrhoeal Disease Research, Bangladesh, May 1979.

**Findings :**

The prevalence rate in the study areas rose to 26 per cent within six months after the programme inception and continued to rise to 30 per cent in 12 months. The regression analysis revealed that 33.7 per cent of the variability in prevalence rate could be explained by the field Workers' characteristics. The areal characteristics explained 30.5 per cent of the inter village variations.

**Programme implication and Recommendations :**

The findings of the study suggested that in the initial stage of the programme operation, the demand for contraception was the single determining factor for eventual contraceptive use. It is possible that with the progress of time the level of knowledge of the field workers would become an important consideration in sustaining use of the method.

**A STUDY ON RURAL SEX-HABIT AND BIRTH CONTROL  
IN BANGLADESH**

Nayeema Ali\*

**Objective :**

- i) To ascertain the sex behaviour of both men and women;
- ii) To know the percentage of population having sexual pleasures 'always,' and 'at times';
- iii) To know the degree of awareness and the knowledge of the people about family planning.

**Methodology :**

Barura Thana of Comilla district was selected for the study. Four hundred women and 50 men were identified for sample study. Females interviewed the women respondents and male supervisors interviewed the male respondents with structured questionnaire.

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\*Bangladesh Family Planning Social Marketing Project, Dhaka, 1979.

**Findings :**

Of these 400 women, 51 per cent had a married life ranging from 4-10 years. About 83 per cent got married before 20 years of age and 87 per cent of the respondents were Muslims. Twelve per cent were Hindus and the rest Christians. The rate of intercourse per week was 3.45 times and 3.24 times respectively for the female and the male respondents. As the average age or span of married life increased the average rate of intercourse decreased. Thus the adoption of family planning methods should be more emphasized at lower age groups and for newly married young couples.

Women were shy about sex and a majority of them did not express themselves. One in every 4 women had sexual pleasure 'always' whereas for males one in every four had sexual pleasure 'at times.'

Women in majority were less anxious about conception than their counterparts. This indicated that women were either still less aware of family planning or that they wanted to avoid family problems like divorce and second marriage by husbands especially at the early ages of marriage by having early conception.

**Programme implication and Recommendations :**

Sex habit was closely associated with family planning. The knowledge of sex habit and the opinion of the rural population regarding sex habit, conception and birth control, enabled the family planning workers to work more consistently. Since males were the initiators in sex, family planning workers should make the males more aware about the conception cycle. In the light of the findings the adoption of family planning should be emphasized more at lower age groups and for newly married couples.



## **SOCIAL AND ATTITUDINAL CORRELATES OF CONTRACEPTIVE NON-ADOPTION AMONG BANGLADESHI WOMEN**

**A.S.N. Moshahidur Rahman\***

### **Objectives :**

- i) To know the patterns of non-adoption rates according to social characteristics of women;
- ii) To know the patterns of non-adoption rates according to attitudinal characteristics; and
- iii) To differentiate these sub-groups of women in terms of their adoption and non-adoption behaviour according to their social, demographic and attitudinal characteristics.

### **Methodology :**

The Bangladesh Fertility Survey data were used for the analysis. The Bangladesh Fertility Survey, as a part of the World Fertility Survey (WFS), was conducted to collect demographic as well as family planning data to estimate and evaluate various aspects of fertility and contraception behaviour among Bangladeshi women. The study was based on a national sample of urban and rural female population.

### **Findings :**

The weighted national nonadoption rate was 7.28 per cent as against about 14 per cent of ever-users. This implied that family planning practice in Bangladesh was till then not a widely accepted practice. There were only 7 per cent current users of family planning in comparison to 93 per cent non-users, either non-adopters or never-users among ever-married women, which resulted in particularly high fertility among Bangladeshi women. The rate of nonadoption among ever-user urban women was about 40.5 per cent of the rural women who had ever-used contraception, about 49.9 per cent were not, at that time, using any contraceptive method. It was found that the adoption and non-adoption of contraception did not differ significantly

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\*Department of Management, University of Chittagong, Chittagong, Bangladesh, 1979.

among sub-groups according to basic demographic characteristics, such as, age and parity. But the nonadoption showed meaningful patterns for both age and parity. The distribution of nonadoption rates, according to educational attainment of women, showed an inverse relationship between the two. The difference in adoption status, according to educational characteristics, was not statistically significant. The tendency to nonadopt was among those women who were not oriented toward small family size. The women who preferred a male child were more oriented toward nonadoption. The tendency to non-adopt was higher among those women having a low level of knowledge of contraceptive methods.

#### **Programme implication and Recommendations :**

Nonadoption rate to be more effective at the empirical level, should be contraceptive specific, such as nonadoption for pill, IUD, condom, Emko etc. and how they differ among themselves due to their social and other characteristics. If we could consider social psychological forces influencing adoption and resistance to family planning we might be able to identify variables that can also explain adoption of family planning among Bangladeshi women.



### **A STUDY OF KNOWLEDGE IN AND ATTITUDE TOWARDS POPULATION EDUCATION AND PRACTICE OF FAMILY PLANNING OF TEACHERS\***

#### **Objectives :**

The objective of this KAP survey was to assess the baseline knowledge and attitude of the teachers about the population problems and population education prior to their exposure to the subject. It was also aimed at eliciting the opinions of the teachers regarding the family size and the extent of family planning adoption.

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\*Population Education Programme, Ministry of Education, Dhaka, 1979.

**Methodology :**

The study was designed to draw a random sample of four primary schools, two secondary schools and one college from each of the 19 districts of Bangladesh. Four teachers from each primary school and 10 teachers from each secondary school and college were randomly selected from among the teaching staff of these institutions. A total of 261 primary teachers, 344 secondary school teachers and 184 college teachers were selected. For the purpose of data collection, three questionnaires were administered one for knowledge test, second to test the attitudes and the third questionnaire were related to family and family planning practices of the teachers. The questionnaires were administered among the teachers by the District Population Education Programme Officers.

**Findings :**

The knowledge base of all level of teachers in the area of population and population education was not found to be satisfactory. However, their attitudes toward population and population education was quite favourable and encouraging. The average family size of teachers was found to be decreasing with the level of institutional involvement. The opinions about the ideal and desired family size also varied with the status of the teachers. The rate of contraceptive users was highest among the college teachers.

**Programme implication and Recommendations:**

The findings of the study indicated that the teaching community, as a whole, need more knowledge about population problems. They may be educated through population education programme. More motivation programme on family planning may be launched for the teachers. An increase in the teachers' knowledge of contraceptives would help to raise the level of adoption of birth control measures. Teachers, as it were, possessed favourable attitudes toward family planning.



## **SOCIO-CULTURAL FACTORS AFFECTING PRACTICE OF CONTRACEPTION IN A METROPOLITAN URBAN AREA OF BANGLADESH**

**Rafiqul Huda Chowdhury\***

### **Objective :**

The objective of the study was to identify the factors affecting practice of contraceptive when supplies of contraceptives were abundant.

### **Methodology :**

Data employed in the study were those collected by a socio-economic survey of working versus non-working women of Dhaka city. The survey was conducted in the year 1974 by the BIDS. Two paired samples were drawn for the study—one containing the working women and the other the non-working women.

A list of women engaged in gainful employment in Dhaka city was compiled. In the list, 2,100 (64%) were found to be married. Married women were stratified into 11 strata and from each stratum a proportionate (50%) random sample was drawn and finally 58 working women were interviewed. The procedures for selection of non-working women were : Each selected working woman was asked to provide as many names as she could of currently married women living within her household with the same general level of education as herself, but who had never worked outside their homes to earn money. Finally, 548 non-working women were interviewed. Hence, the total study sample was comprised 1,130 women.

### **Findings :**

Education had a very strong positive relationship with the use of contraception. The use of contraception increased with each successive increase in educational level. It was found that use of contraception was at least 26 per cent higher among couples who decided the number and spacing

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\*Bangladesh Institute of Development Studies (BIDS), 1979.

their children jointly compared to those whose decisions were made by one spouse alone. Work experience showed a very irregular and unexpected relationship with the use of contraception measured either by current-use or ever-use. Proportionately, fewer working women irrespective of their duration of work, practised contraception than non-working women. The use of contraception was 20 per cent higher among those women who had achieved their desired number of sons than those who had not till then achieved their desired number of sons.

This indicated that achievement of desired number of sons had a direct bearing on the use of contraception. Regarding religion and the use of contraception, it was found that the use of contraception was the lowest among those who offered prayer five times a day and it rose as the frequency of saying prayer decreased. It was also found that use of contraception varied directly with the degree of one's exposure to mass media communication. These six variables, e.g., work experience, education, husband-wife role relationship, son preference, religion and exposure to mass media communication, were examined in the study.

#### **Programme implication and Recommendations :**

From the findings, it appeared that the use of contraception was not likely to make strong headway, even though the supplies (contraceptives) were made available unless the status of women (particularly those related to her education, employment and participation in family decision making) could be sufficiently improved, strong preference for sons could be dissipated and religious fervour minimised. The scope of the study should be broadened to include a national representative sample and should be analysed more in depth.

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## **REPORT ON CINEMA AUDIENCES' ACCEPTABILITY OF SMP/ PSI FILMS ON RAJA AND MAYA\***

### **Objective :**

The study was undertaken to assess the acceptability of two contraceptive films among the cinema audience. The main objective was to measure the reaction of the cinema audiences to the theme and specific features of the films and also to evaluate the acceptance of the contraceptive by the target population.

### **Methodology :**

In order to identify the cinema halls where the films were being shown, three categories of towns, such as, small, medium and large were selected. In all 25 cinema halls were selected from the three categories of towns. Fifty per cent of the halls so selected had been showing films on Raja and 50 per cent on Maya. Among the cinema-viewers of the selected halls a total of 388 viewers were interviewed. The data were collected by administering structured questionnaire.

### **Findings :**

The majority of the respondents were between 20 and 35 years of age. Twenty per cent of the group of cinema-viewers were service-holders, Twenty per cent were businessmen, 18 per cent house-women, 15 per cent student and another 12 per cent were agriculturists. Most of the members of the cinema audience were married and constituted about 74 per cent of the total sample. The unmarried people constituted about 26 per cent. Of all the viewers 33.25 per cent did not have any children, about 12 per cent had one child, 14 per cent two children and about the same proportion had three children. About 39 per cent of cinema viewers had more than three children. It was observed that 8.36 per cent of the respondents were regular visitors to the cinema. Investigation of the audience's reactions immediately after the show revealed that the films advertising the use of Raja and Maya contraceptives were able to attract attention of most of the film viewers. It was found that the film were able to create a

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\*Rapport Bangladesh Limited, Dhaka, 1979.

relatively stable impression in the minds of about a half of the members of the audience. Ten per cent of the respondents had admitted that the use of Raja and Maya was the key to happiness. The suggestion to control birth was perceived by 45 per cent.

#### **Programme implication and Recommendations :**

Determining the acceptability of publicity films on contraceptives was an important step towards its evaluation. The concerned authority or the publishers of the films should undertake such evaluation programme to find its overall effectiveness.



### **OPINION OF WOMEN ABOUT FAMILY PLANNING PUBLICITY THROUGH RADIO: AN EXPLORATORY STUDY IN DHAKA, BANGLADESH**

**Mrs. Khurshid Banu\***

#### **Objectives :**

- i) To study how far the radio, as a medium of communication, had reached currently married women in the reproductive age group selected for the study; and
- ii) To study the opinions of those women to specific family planning publicity programme broadcast through the radio.

#### **Methodology :**

This study was conducted in 6 thanas of the Dhaka district. The basis for selection of those thanas was the residence of the research investigator engaged for the study. In each area, every fifth house was covered, the basis being the number given by the Malaria Programme personnel. One currently married woman in the reproductive age living in each house was interviewed. A total of 500 such women were interviewed.

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\*International Institute for Population Studies, Bombay, India.

### **Findings :**

It was found that about 80 per cent of the women were radio-listeners. Radio-listeners did not differ from non-listeners when age, number of living children and income were considered. But the listeners were comprised women with higher educational status compared to the non-listeners. The proportion of users of family planning methods was higher among the non-listeners than among the listeners.

About 80 per cent of the women favoured family planning publicity through radio. The main objection to such publicity was the issue of 'moral character' of the younger generations. The second most important objection was that such publicity was 'indecent'. The main suggestion of these women for popularizing family planning through the radio was that more of such publicity was required.

### **Programme implication and Recommendations :**

The most popular family planning broadcasts were 'Chithipatrer Jobab' (Reply to Letters) and 'Sukhi Paribar' (Happy Family). However, those programmes were broadcast between 7.00 and 8.30 at the time, when most of the house-wives remained busy in preparing dinner or in teaching children. It was recommended that the timing of those programmes should be changed.



## PSYCHOLOGICAL AND SOCIO-CULTURAL FACTORS RELATED TO ATTITUDES TOWARDS FAMILY PLANNING

Sultana Sarwatara Zaman and others\*

### Objective :

To investigate the psychological, socio-economic and cultural variables which determine the attitudes of women toward family planning.

### Methodology :

In all 240 females of reproductive age from 9 districts of Bangladesh were selected as respondents for the study. Half of the respondents were selected from urban areas and the other half from different rural areas of Bangladesh. Out of the total of 240 women 120 were selected from rich families and 120 from poor families. Women who came from families having monthly income above Tk. 2,000 were considered as rich and those who came from families having monthly income of Tk. 600 were considered poor. Respondents represented the rural-urban residents, high-low educated and rich-poor families equally. Four semi-standardized questionnaire were administered among the sample group for necessary accumulation of data. The conclusion was derived on the basis of the analysis of the collected data.

### Findings :

The results of the study supported the hypothesis that the women were active participants in life who had liberal sexrole perception and those who had experiences of higher independence training would express more favourable attitudes toward family planning as compared to their opposites.

In respect of socio-cultural variables, the women who had higher educational background, who belonged to rich family and resided in the urban areas had more favourable attitudes toward family planning. Educational level was found to be the most significant determining factor for accepting family planning, while economic aspect was found to be the least significant. Among psychological variables, decision-making behaviour, that is, active participation in social life was found to be the most significant determinant of attitudes toward family planning.

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\*The Quarterly Journal of the Bangladesh Institute of Development Studies.

### **Programme Implication and Recommendations :**

In order to develop favourable attitudes toward family planning programme, a vigorous educational programme may be launched. Along with this programme necessary steps should be taken to develop liberal sexrole perception among women.

The study gave clues about the influence of education upon workers' motivation toward family planning. The crucial policy issue is, therefore, to pursue right educational programme for women.



## **STUDIES ON ATTITUDE TOWARDS BREAST-FEEDING AMONG THE WOMEN OF URBAN AREAS IN BANGLADESH (DHAKA CITY)**

**Syeda Ghaffar\***

### **Objectives :**

- i) To determine the socio-economic and demographic characteristics of the population under study ; and
- ii) To assess the knowledge, attitudes toward, and practice of breast-feeding among the mothers living in Dhaka city.

### **Methodology :**

Ten areas from Dhaka city were randomly selected. Then from each area 20 households were selected at random. Total sample size was 200 mothers in the Dhaka city. The mothers of those households were interviewed.

### **Findings :**

Fifty per cent of the population under study were between 25 and 50 years of age, and about 25 per cent of them belonged to the age-bracket of 20-25 years. Majority of the population were house-wives. As regards the level of education of the mothers under study, it was found that 22 of them were illiterate. The percentage of highly educated women was

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\*Institute Nutrition and Food Science, University of Dhaka.

very low. The husbands of the respondents were, however, more or less educated. The monthly family income of nearly half of the respondents was between taka 250 and 990/- and the monthly income of more than 29 per cent of the families was Taka 2,000 and above.

Ninety per cent of the mothers under study had given birth to 1-6 babies and 2 per cent of them had given birth to 10 or more children. The majority of the mothers had a rural background, but had been living in the urban areas for a considerable period.

About 90 per cent of the mothers knew that breast milk was a nutritious food for the baby. It had been assumed that there was a belief among urban mothers that breast-feeding spoils the physical beauty, but the study revealed that more than 50 per cent of the respondents were of the opinion that breast-feeding did not spoil figure.

As regards the attitudes of the urban mothers, the findings showed that majority of the mothers had a favourable attitude towards breast-feeding. They gave their opinion in favour of prolonged breast-feeding. Therefore, it can be concluded that urbanization had not drastically changed the attitude of the traditional Bengali mothers on breast-feeding. We could justify that the practice of breast-feeding was liked by the vast majority of the Bangladeshi mothers irrespective of their period of urban living or level of education, age, income or occupation.

It was clear from the observation of the study that there was significant relationship between urban living and changes in attitude of the urban mothers toward breast-feeding. Of course, it cannot be ignored that urbanization has at least some effect on the attitudes of at least some women, whatever their proportion maybe.

#### **Programme implication and Recommendations :**

It should be remembered that this was a small study based on a relatively small sample size of 200 mothers only and, therefore, it was not possible to draw a general conclusion from it. In order to find out whether there is any relationship or not between urban living and attitude and also between the other variables, further studies need to be carried out on the subject.



## ATTITUDE OF BANGLADESHI VILLAGERS TOWARDS FAMILY PLANNING

Dr. Ellen Satter\*

### Objective :

To assess the attitude of villagers towards family planning.

### Methodology :

The methodology employed in the study was the group approach. By several days of intensive discussions held in a relaxed and friendly atmosphere, the investigators believed they could understand the real feelings of the villagers about various aspects of family planning. Participants in the study groups were village men and women who were chosen from four different socio-economic groups: rich farmers, middle farmers, marginal farmers and landless. Rich farmers in the study were those who owned 10 or more acres of land. Middle farmers owned between 3 and 10 acres, marginal farmers owned 1-3 acres, and the landless owned only their homesteads.

### Findings :

There was agreement among the participants that two or three children were the best size for a family. Most participants were of the opinion that nowadays a large family was not only unnecessary but also a liability. A small family meant better education, better clothings and better food for all. All had heard about family planning, the initial sources for information were pointed out was radio, cinema, neighbours, family planning workers and swanirwar workers. In the male group, men said that the decision to accept or not to accept family planning was theirs. Among the women, some supported the idea of the supremacy of the husband's decision. Despite the generally acceptable atmosphere towards family planning, some fears were also expressed. All the participants had heard of pills, condom, foam (Emko), operation, injection, IUD, traditional, etc.

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\*Social Marketing Project, Dhaka, 1980.

## **FIRST FOLLOW-UP SURVEY AND THE USE OF AUDIO-VISUAL VANS IN POPULATION ACTIVITIES\***

### **Objectives :**

- i) To determine effectiveness of programme components in terms of their impact on attitudes toward practice and knowledge of FP and also on the level of contraceptive practice;
- ii) To evaluate the performance of the audio-visual van-programmes in terms of decline in age specific and total fertility rates; and
- iii) To make an assessment of the performance of the participating ministry in the discharging of its duties to the population under study.

### **Methodology :**

Two methodological approaches were used:

- i) Sample survey of the community.
- ii) An observational study on the processes through which the programme was being implemented.

This survey covered 32 villages in 8 thanas of four districts of Bangladesh, i.e., covering 8 villages in each district. Six of those villages were from programme and two from non-programme thanas. In each district 3 types of questionnaire were used.

### **Major Findings :**

The findings presented in the report were based on 1,236 male and 1,375 female respondents of 32 villages. Male respondents in the study were recently married having wives within the fecund age, and female respondents were currently married and were between the age of 10 and 49 years.

The total fertility rate was 6.23 but the programme areas had considerably lower fertility (5.29) than the non-programme areas (7.33). In the programme areas, the general fertility rate was 176 per thousand and in the non-programme area it was 250 per thousand.

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\*External Evaluation Unit, Population Planning Section, Planning Commission, 1980.

Mean number of living children was 3.2 for those women whose median age was about 28 years. For women aged forty years or more, it was about 5.5.

Attitudes were very favourable to family planning though actual practice was distressingly low.

A positive relationship existed between ever-users and films already seen by the respondents and held true for the programme.

#### **Programme implication and Recommendations :**

The major recommendation was that the family planning workers should be present when a film is being shown so that discussion may be held and difficult things explained. This would act as a strong motivation and feed-back.

Though Audio-visual van Project had been reasonably well received and had the potential of one component change-agent among the multi-sectoral population schemes, it had not yet achieved its full potential. The film-shows were considered as a form of entertainment rather than education. The messages of the films were not understood by the village audience. The different dialects of various districts created impediments in understanding the contents of the films. Moreover, the messages on family planning were also rather limited. It discussed only the demerits of larger families and merits of smaller families. However, the general opinion of the audience was that the discussion should cover the aspects of population and family planning. In order to avoid monotony, more new films together with recreational films should also be shown through these vans.



**A STUDY OF KNOWLEDGE IN AND ATTITUDE TOWARDS  
POPULATION ISSUES AND POPULATION EDUCATION  
OF DIFFERENT LEVELS OF STUDENTS\***

**Objectives :**

- i) To assess the level of knowledge of the students of classes IV to XIV about the facts of population and the related problems prior to their exposure to classroom teaching in population education; and
- ii) To assess the attitudes of the same students toward population education prior to their exposure to classroom teaching.

**Methodology :**

In order to obtain a sufficiently representative sample of the students of different levels of the target population stratified sampling technique was adopted for the study. A total of 19 thanas, one from each district of the country were randomly selected. Four primary schools, two high schools and one college from each thana were randomly selected. It was decided that the nearest degree college from the thana headquarters would be selected for the purpose of administering the test. While the required sample size of the study according to the sample design was 1,254, the sample achieved was 1,196, because of non-availability of the requisite number of students in a few educational institutions. The instruments used for collection of data comprised (i) a test of knowledge on population facts and related problems and (ii) a test of attitudes toward population problems, issues and population education. Simple percentage, mean and standard deviation were adopted for necessary interpretations.

**Findings :**

The results of the study indicated that the knowledge base of the students on population facts and issues was generally poor. It was found that the students of higher classes had relatively higher level of knowledge base than those of the lower classes. It was also found that the class or the group

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\*Population Education Programme, Ministry of Education, Dhaka, January 1980.

with a higher knowledge base tended to be more favourable toward the population education than that with a lower knowledge base. In the initial class of secondary level (class six), the male students had higher knowledge base than the female students but their attitudes were less favourable than that of the female students. The difference of knowledge base due to the difference of sex and higher level of education (class XI to XIV) was indicative of higher knowledge base of the male students. But in each class in this level, the female students were found to have more favourable attitude towards the population problem issues and population education. This occurred possibly because of the fact that certain socio-psychological factors connected with population dynamics play a more direct role in the personal lives of the female students as a group.

#### **Programme implication and Recommendations:**

The knowledge and attitude survey among the students was of a new kind. It needs further investigation to confirm the present findings. The survey instruments to be handled by the students call for thorough analysis.

The students need more awareness towards population problem and substantially through an introduction of relevant population education courses suitable for each class.



## **SOCIAL DYNAMICS OF ABORTION SERVICE IN RURAL BANGLADESH**

**M. Obaidullah and others\***

### **Objectives :**

- i) To identify social, cultural, economic and other factors determining acceptance of indigenous abortion services;
- ii) To identify the sources of knowledge about the availability of indigenous abortion services and the socio-cultural mechanism of transmission of such information;
- iii) To identify the factors determining the decision-making process involved in the indigenous abortion services; and
- iv) To identify the implication of availability of modern MR services on the indigenous abortion services.

### **Methodology :**

The study was conducted in 14 thanas of Bangladesh selected purposefully. Two lists of women, who had induced abortion and obtained MR services, were prepared along with their names, addresses, dates of abortion and nature of complications (if any) and the types of treatment given.

The first part of the questionnaire sought information on socio-demographic characteristics, attitude towards family size, contraceptive practice, pregnancy termination, contraceptive histories etc. The second part sought information on the induced abortion or MR services that the respondents obtained in the past, and the third part interviewed the husbands of the respondents.

### **Findings :**

It was found that the acceptors of induced abortion were comparatively less educated, poor and unmarried in the case of MR acceptors.

Age and number of living children did not seem to play any role in this matter.

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\*Bangladesh Fertility Research Programme, Dhaka, 1981.

Despite universal knowledge about family planning and contraceptive method, the rate of past contraceptive was low, 35.2 per cent of MR acceptors had used safe period and withdrawal methods followed by a 27.2 per cent of MR acceptors who had used oral pills, and 10.4 per cent of MR acceptors and 11 per cent of abortion acceptors had used condoms.

Only 12 per cent abortees knew about MR compared to 100 per cent of MR acceptors.

Majority of the abortees and their husbands knew about the dais and the providers of abortion. The husbands played a key role in decision-making process. In 92.6 per cent cases, abortion took place at abortees' residence.

Majority of the abortees did not know about MR while 56.9 per cent MR acceptors did not know it previously. Out of them 9.4 per cent came to know it from FPHW and 19.6 per cent learnt from friends.

#### **Programme Implication and Recommendations :**

HEM Unit should accelerate the programme of giving proper knowledge about MR to the rural women, and the trained FWVs or main providers should take personal initiative to deliver those services.



## **FACTORS AFFECTING ADOPTION OF FAMILY PLANNING METHODS IN A SELECTED RURAL AREA OF BANGLADESH**

**Abu Noman Md. Aminul Islam\***

#### **Objective :**

To identify the socio-economic factors and personal characteristics suggest affected the adoption of family planning in rural Bangladesh and to which remedial measures.

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\*A thesis submitted to the American University of Beirut for the degree of Master of Science, October 1981.

**Methodology:**

The sample for the study was drawn from two villages of the Dhaka district. Both the district and thana were selected purposively whereas the union and the villages were selected by using random sample. Out of the total of 194 registered eligible couples of two villages, 75 respondents were proportionately selected.

**Findings :**

Findings showed that the selected personal characteristics of the respondents such as the number of children, knowledge and attitude toward family planning programme as well as education, income and occupation of the respondents' husbands were significantly related to adoption of family planning methods by the respondents.

In general, it was observed that oral pill, condom, IUD and sterilization as permanent methods were popular among the respondents. Of the modern methods, pill was found to be most preferred followed by condom as terminal methods.

**Programme implication and Recommendations :**

Effective supplementary programme of extensive education, communication and motivation should be launched for stimulating attitudinal changes, which in turn would promote active use of contraceptive devices. Special educational drive may be geared up to provide the low parity couples with wider choice of contraceptive methods.

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## AN EVALUATION OF THE INDUSTRIAL FAMILY PLANNING PROJECTS

Mrs. Mahnur Rahman and others\*

### Objectives :

- i) To assess the level of contraceptive knowledge and practice among industrial population;
- ii) To identify the sources from which the workers acquired the knowledge and supplies or services of contraceptives; and
- iii) To identify the extent to which the FPAB projects were effective in promoting the level of knowledge and practice among the industrial population.

### Methodology :

The study was carried out in 9 industrial project areas of the Association comprising a total population of about 22,000. An overall sample of about 8 per cent representing about 1,800 respondents was proposed to be drawn for the study. Sample sizes of different areas varied from 5 per cent to 12 per cent depending on the size of the population and availability of proper records of the industrial workers as maintained by different mill authorities. Attempt was also made to interview wives of about 35 per cent of the total respondents. Ultimately a total of 1,130 males and 604 females (total 1,734) were successfully interviewed. Data were collected by means of personal interviews by applying a pre-coded questionnaire. The collection of data took more than 3 months.

### Findings :

The average ages of the male and female respondents were 38.4 and 23.1 years respectively with 95.7 per cent Muslim and 25.7 per cent who had not any formal education. On the average, the respondents had 3.1

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\*Evaluation unit : Bangladesh Family Planning Association, Dhaka, December 1981.

living children but the average desired size was 2.8 which was lower than the existing number. All the respondents in the sample knew about family planning. Knowledge about specific methods was very high. Over 90 per cent knew about pill and condom and over 70 per cent knew about sterilization.

The rate of contraceptive practice was also very high, 42.5 per cent for male and 32.1 per cent for female with overall rate being 38.9 per cent. The most accepted methods were oral pill (40%), condom (28.8%) and sterilization (14.7%). Two-thirds (66%) of the respondents practising contraception obtained their supplies from FPAB workers and another 2.3 per cent from FPAB office/clinic, indicating the important role FPAB played in promotion of contraceptive practice among industrial population.

#### **Programme Implication and Recommendations :**

The industrial project among the workers of 9 industrial establishments during several years of its operation was able to increase the level of knowledge and awareness to a hundred per cent and also succeeded in promoting contraceptive practice substantially (38.9%). The findings of the evaluation were expected to help in formulating FPAB (Family Planning Association of Bangladesh) future policy and strategy regarding its industrial projects as well as to inspire other innovative programme undertakings.

25

## **FAMILY PLANNING IN RURAL BANGLADESH**

**Barkat-e-Khuda\***

### **Objectives :**

The study was a part of a larger project (i) to examine the effect of technological interactions in agriculture on various aspects of socio-economic and demographic life in rural Bangladesh and (ii) to examine the knowledge and attitudes toward and the practice of family planning in rural Bangladesh based on data gathered from a Bangladesh village.

### **Methodology :**

This study was primarily based on data gathered from a Bangladesh village, Sreeballovpur. The village was mechanically irrigated and high-yielding varieties of rice were being extensively cultivated. The village was situated about four miles from Comilla town. All households in the village were divided into four landholding groups according to the net cultivable area of these households. A total of 167 households were selected for the purpose of the study, proportionately allocated according to the size of the stratum (landless 0.1-1.0 acres 1.01-2.0 acres greater than 2 acres). All ever married persons in their reproductive life span belonging to these households were selected for the study. A total of 194 males and 207 females were interviewed.

The male respondents were interviewed by male investigators and the female respondents by female investigators. The following types of information were obtained.

- a) Knowledge of family planning;
- b) Attitude towards family planning; and
- c) Use (ever and current) of birth control measures (modern and traditional).

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\*Department of Economics, University of Dhaka, August 1981.

### **Findings, Programme implication and Recommendations :**

About 98 per cent of the respondents had knowledge of contraception. There were no differentials by sex and age. Differential by other socio-economic variables such as landholding number of children born, education level and occupational background were also quite insignificant. The study indicated that the knowledge of family planning was quite widespread among all groups of people.



## **BASELINE SURVEY ON CURRENT FERTILITY LEVEL AND CONTRACEPTIVE PRACTICE STATUS OF THE PERSONNEL OF NIPORT**

**Col. M. Hashmat Ali and others\***

### **Objective :**

i) To find out current fertility status and current contraceptive behaviour status of the personnel of NIPORT and their sources of supply of contraceptives.

### **Methodology :**

The sample size of the study was comprised married personnel of the National Institute of Population Research and Training, Dhaka. The information collected through a structured questionnaire contained eight questions only.

### **Findings :**

Out of the total sample 92 per cent were male and 8 per cent female. Among the 52 personnel 46 were within the age of 40 years and 6 between 40-50 years. Average age of the husbands of the female personnel

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\*Bangladesh Fertility Research Programme, December 1981.

was 33.44 years and average age of the wives of the male personnel was 25.23 years.

Out of 52 couples 12 couples had no child, 12 had 1 child, 12 had 2 children, 9 had 3 children, 4 had 4 children, 3 had 5 children and 1 had 6 children. No one had more than 6 children.

It was found that 67 per cent of the respondents had adopted FP methods and 17 per cent were non-users. Among the acceptors 19 used oral pill, 6 used condom.

Among the total respondents 60.6 per cent acquired contraceptives from Government sources and 39.4 per cent acquired from non-Government sources.

#### **Programme implication and Recommendations :**

Service delivery points for supply of contraceptives should be started in the institutions for a relatively greater success of the family planning programme.



## **ATTITUDES OF RURAL BANGLADESH PHYSICIANS TOWARDS ABORTION**

**Michael J. Rosenberg and others\***

#### **Objective :**

To determine the attitudes of the physicians toward abortion in rural thana health complexes, sub-division and district hospitals.

#### **Methodology :**

This study involved 375 physicians in 173 thana health complexes, 44 hospitals and 26 non-hospital centres including family planning centres. Each physician was shown a list of eight situations in which abortion was permitted by the then existing law and were asked whether he or she

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\*Studies in Family Planning, Volume 12, Number 8/9 August/September 1981.

approved of abortion under each of those laws. There was no option for "unsure" responses. The questionnaire had been tested earlier among 46 hospital-based physicians.

**Findings, Programme implication and Recommendations :**

The law in Bangladesh forbade abortion except to save a woman's life. To determine the degree to which rural physicians in Bangladesh supported the law, the study surveyed the attitudes toward abortion of 376 physicians in rural health care centres. Virtually all of those who were interviewed (98.9 per cent) indicated that they approved of the law.

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# 6

## Training Programmes and Field Worker Performance (Evaluation, Follow-up, Comparative)



### CHARACTERISTICS AND UTILIZATION OF MIDWIVES IN A SELECTED RURAL AREA ON F.P. H.T. Croley and others\*

#### Objective :

To study the characteristics of dais in the East Pakistan and the nature of their practice.

#### Methodology :

Two adjoining villages, ten miles north of Dhaka (Azampur and Shoipur), were selected for interviewing women. At least 95 per cent of the married women in the two villages were interviewed, 303 in Azampur and 329 in Shoipur. Interviews were conducted with twenty-one of the twenty-six women who had been referred to as dais.

#### Findings :

The findings indicated that most of the dais were widows and elderly women of the community that their knowledge was based on their own experiences or on the experiences of women who had learnt not from medical theories but from practical experiences. They worked among friends, neighbours and relatives for no fixed fee and that they were dependent upon the

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\*East Pakistan Research and Evaluation Centre, Dhaka, Demography,  
Vol. 3, No. 2, 1966.

generosity of the clients for non-monetary compensations. They could not handle complicated deliveries. They helped in the delivery of an average of 3-4 children per year. Sterile procedure is dependent upon folk belief, soap and water. About one-half of them had a general conception about the anatomy and physiology of reproduction. Almost half of the respondents knew of sterilization, most of them did not know the ways to prevent conception. Although most of the dais said that their patients did not want to know about contraception, two-thirds said that their patients did not want more children. Most think midwifery is a worth while service and this job is supported by relatives. About half thought that it would be a good idea for dais to actively participate in a family planning programme and almost all felt that villagers would not object to family planning education by dais.

#### **Programme implication and Recommendations :**

The rationale for engaging dais in a family planning programme is that they have contact with a large number of women. The results of this study suggest that there are dais communities who could be utilized by the Government in the family planning programme.

The question of whether dais would be acceptable to villagers as family planning workers, reports received subsequent to this study indicate that they have low status and may not be acceptable as family planning workers despite their own feeling that they would be accepted.

In employing dais, not only their public contacts through deliveries be recognised but also their need for education about contraception can be taken care of so as to enable them to work for family planning programme. Their attitudes towards family planning must be considered as about half of them expressed no desire to learn about contraception; most said that their patients, though in many cases, not desiring more children, did not want to learn of contraception; and about half were not interested in participation in family planning programme.



## CHARACTERISTICS AND JOB PRACTICES ASSOCIATED WITH SUCCESSFUL FEMALE VILLAGE ORGANISERS IN JOYDEBPUR

J.H. Nelson and others\*

### Objective :

To examine differences in characteristics and practices between the successful and the relatively less successful village organisers.

### Methodology :

Ninety female village organisers were appointed and posted in Joydebpur thana, Dhaka district from October 1965 through March 31, 1967. Those 90 organisers were chosen as the study sample. From the sample 70 were successfully interviewed.

### Findings :

Organisers having the 18 highest indices were designated as the high performance group, i.e., the actual number of clients referred to by the organisers was considered to account for the differences in the number of months the organisers were employed to produce an index of job, success. Those with the 18 lowest indices were designated the low performance group. Those with the 18 indices closest to the median index number became the average performance group. The median age for the organisers was 32 years. Almost half (40%) of the organisers were illiterate having no formal education, 44 per cent had attained education up to class I-IV level and 9 per cent had class V-IX level of education. Significantly great number of the organisers in the low performance group had been discharged from their positions than from either of the other two groups. Significant differences between the groups were found in their reports regarding attitudes of relatives and neighbours toward family planning, utilization of others in recruiting IUD clients and general job practices. All of the organisers from the high and average performance groups and 88 per cent from

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\*East Pakistan Research and Evaluation Centre, Dhaka, 1968.

the low performance group reported that they had received training for family planning work. The majority of the organisers from the high performance group reported that they had received training more than once whereas only 23 per cent of the average group and 33 per cent of the low group had received the same.

The successful organisers tended to rely upon themselves rather than others in recruiting clients, they also tended to talk to both husbands and wives together on family planning matters and they accompanied the clients to the clinics. The unsuccessful organisers were not inclined to do any one of those things.

#### **Programme implication and Recommendations :**

In-service training was needed for the family planning workers to improve their performance. This training should emphasize the development of specific attitudes, work habits, values and communication strategies. It appeared that the more successful workers had greater access to refresher training than the less successful groups.



### **THE UNOFFICIAL VASECTOMY AGENTS OF THE EAST PAKISTAN**

**A.H.G. Quddus and others\***

#### **Objectives :**

The major objectives of the study were :

- i) To inquire, in a general manner, into the background of the agents;
- ii) To assess the monetary benefits of the agents from this occupation;
- iii) To gather knowledge about the kind of information disseminated by the agents to the clients; and
- iv) To determine the problems, if any, faced by the agents in their work.

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\*East Pakistan Research and Evaluation Centre, Dhaka, January 1969.

### **Methodology :**

The number of sample clinics was selected on the basis of these ratios 4, 8 and 12 thanas were selected randomly from Noakhali, Mymensingh and Dhaka respectively. Inaccessible thanas due to bad communication were rejected.

After selection of the thanas, a list of clinics from each thana was prepared and the clinics were numbered serially. One clinic from each list was selected using a table of random numbers. The thanas with only one vasectomy clinic needed no further sampling.

A total of 155 vasectomy agents were interviewed from the 24 sample clinics of the three districts, namely, Dhaka, Mymensingh and Noakhali.

### **Findings :**

Median age of the agents was found to be 37.3 years. About 59 per cent were full time and 41 per cent part-time agents. It was a popular belief that the women of this country, particularly, the rural women were too conservative even to talk to their husbands about family planning. But the findings refuted that belief by revealing the fact that females would and did talk to males even about a delicate issue like male sterilization.

The opinion of the large majority of the vasectomy agents did not coincide with the rumour that the vasectomy operation was popular only because of vasectomy's popularity; it was, rather, efficiency of the method in prevention of further child-birth.

The great majority of the agents (87%) had reported that they had told their clients that further child-birth ceased due to operation. More than half of the agents had reported to have told their clients about the monetary incentive associated with the operation. It was noted that most of the agents (88%) had been asked by their clients about the possible difficulties after the operation. The study found that vasectomy agents had not gone unopposed in their work. Direct opposition from the village leaders and the general public, as well as negative rumours about the method had impeded the agents' progress.

### **Programme implication and Recommendations :**

Since the unofficial agents had been, undoubtedly, the most important communicating medium for spreading vasectomy information among the

people, it would be possible to increase the vasectomy rates if the number of agents could be increased. Direct monetary incentives would tend to attract more people into this occupation.



## EVALUATION OF KASHIMPUR PROJECT

Mahnur Rahman and others\*

### Objective :

To see the trend of activities of the project organised by BFPA in the Cooperative Agricultural Estate in Kashimpur, Bangladesh.

### Methodology :

Secondary data had been used from the records available in the project office and head office. No field investigation had been made for this purpose.

### Findings :

It was found that the present staff position in comparison to the area of the project was not at all adequate. Fertile couples of 22 villages, 192 cooperative societies, the whole staff of A.D.E. and all the others constituted the project areas. But actually only eleven villages, a few cooperatives, 209 staff of Kashimpur A.D.E. could be reached due to inaccessibility of the scattered unions and staff shortage. It was found that out of 1,420 couples of the eleven villages 1,194 were registered and 403 couples were acceptors of the F.P. methods. From the 424 registered couples of member of cooperatives 229 were acceptors; 478 persons from outside the project area were acceptors. So it was found that 632 couples from inside and 478 couples from outside the project area were acceptors.

Within the whole project area there were only 632 couples, who were acceptors and 301 cases were recorded drop-outs. However, in relation to

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\*Evaluation Division, Bangladesh Family Planning Association, June 1976.

the 478 couples outside the project area no record of drop-out cases was found. But it was reported that the drop-out rate was very high. With the same strength of workers the trend of couple registration and rate of acceptors were found to be decreasing. The project was started in the year 1972 and at the beginning weekly activity reports used to be maintained. In 1974 individual monthly activity reporting system was activated. The individual reports revealed wide differences of couple registration and acceptors. It seemed that the individual monthly reports were not correctly maintained. No record of the motivational literatures, group discussions, meetings and film shows had been found.

**Programme implication and Recommendations :**

The recording system of the project should be strengthened so that there cannot be any scope of misreporting.



**ATTITUDE AND PRACTICE OF CONTRACEPTIVE  
AMONG MARRIED WORKING AND NON-  
WORKING WOMEN IN A SELECTED AREA  
OF METROPOLITAN CITY OF DHAKA\***

**Objective :**

To assess the family planning knowledge, attitude and practice of working and non-working women in a selected area of Dhaka city and to find-out the difference in their acceptance of contraceptives.

**Methodology :**

Malibagh area of Dhaka city was purposively selected for its heterogeneous population as the residents were found to be representing all socio-economic groups. 200 married working and non-working women were selected from the houselist prepared in advance. Direct interview technique was used to collect data through structured questionnaire.

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\*National Institute of Population Research & Training.

### **Major Findings :**

It was observed that 51.6 per cent working women were in the group of 20-24 years, while 43.2 per cent non-working women were in the age group of 15-19 years. The average number of children ever born to working women was 2.5 while it was 3.17 for non-working women. The mean number of living children was 2.10 and 2.73 respectively for working and non-working women.

Majority of the respondents mentioned Radio and Television as their first source of knowledge about family planning. Pill was most commonly used by both working and non-working women followed by condom.

It was observed that 90 per cent working and 98 per cent non-working women took decision on accepting the Family planning methods after discussion with their husbands. Eighty-one per cent of the respondents reported that there was no religious prohibition in using family planning methods.

### **Recommendation :**

It is difficult to generalise the findings of this report as this was carried out in a small selected area. It needs further investigation with larger representative sample.



## **PERFORMANCE OF FAMILY PLANNING ASSISTANTS AND FAMILY WELFARE ASSISTANTS UNDER FAMILY PLANNING SCHEME (1975-78)**

**M. A. Mabud\***

### **Objectives :**

- i) To examine the quality of training ;
- ii) To examine the extent of supervisory support ;
- iii) To evaluate performance.

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\*External Evaluation Unit, Planning Commission, 1976.

### **Methodology :**

The sample of the TFPOs, FWVs, FPAs and a cross-section of population in nine thanas were drawn purposefully. Out of a total of 287 TFPOs, FPAs and FWAs, 202 were interviewed which resulted in a response rate of 70 per cent. The interviews were done through structured questionnaire. Members of the public were included to elicit their perception about these field workers from the point of view of consumers.

### **Major Findings :**

- a) **Training:** The FPAs and FWAs were not exposed to the community information, had little knowledge on MCH elements, developed the least skill in IEM activities, had poor knowledge on side-effects of FP methods. Overall training, including supervisory role of FPAs, insufficient to carry out their field activities. Training materials of FPAs insufficient to carry out their field activities. Training materials were inadequate.
- b) **Supervision:** There were no effective supervisory supports available to different tiers of field workers.
- c) **Performance:** Married FPAs were more acceptable than the unmarried ones. The performance targets were vague and somewhat unrealistic. The follow-up service was negligible. Dais were till the better performers in FP service delivery.

### **Programme implication and Recommendations :**

- a) **Training:** A comprehensive training programme, with special inclusion of contraceptive education in IEM, MCH, documentation provision for relevant training aids etc. needed to be developed for better programme implementation.
- b) **Supervision :** The then supervisory system, which was found very poor, needs to be geared up and should be given training on the supervisory role. Local supervision by local leaders (Gram Sarker) would enhance quality of field work.



## EVALUATION OF STERILIZATION CAMPAIGN\*

### Objectives :

- i) To examine the success of the nine-week long sterilization campaign in 22 police stations in 6 districts launched by the Population Control and Family Planning (both vasectomy and tubectomy) Department;
- ii) To examine the extent of follow-up services rendered to the sterilized persons and the complications developed; and
- iii) To find out the popularity of the sterilization programme, in other words to know how far it would be acceptable to the people when the method could be made easily available with proper care.

### Methodology :

The study population was comprised the acceptors of sterilization (both vasectomy and tubectomy) in 22 police stations in six districts, viz, Dhaka, Comilla, Chittagong, Khulna, Rajshahi and Rangpur.

### Findings, Programme implication and Recommendations :

The study found a total of 12,318 cases of sterilization, of which 7,269 (59%) were vasectomy cases and 5,049 (41%) of tubectomy. Follow-up cases were 10,460, (84.9%). Minor complaints were detected only in 290 cases (23%).

The analysis pointed out that sterilization (both vasectomy and tubectomy) was very effective because the persons who had undergone sterilization fell within highly fertile age group, having 3 to 4 number of children.



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\*Bangladesh Family Planning Association, Dhaka, June 1977.

## A STUDY OF THE FIELD WORKER PERFORMANCE IN THE MATLAB CONTRACEPTIVE DISTRIBUTION PROJECT

Mukhlesur Rahman and others\*

### Objectives :

- i) To examine the characteristics and level of knowledge of the female village workers;
- (ii) To know how they relate to success in the distribution of contraceptives as reflected in the acceptance; and
- (iii) To estimate the use-prevalence rates in their areas.

### Methodology :

The contraceptive distribution project in Matlab (Comilla) was initiated in October 1975. One hundred and fifty-three female village workers (FWVs) of ICDDR,B were trained as suppliers and depot-holders of oral pills and condoms, each one being responsible for a population of approximately 1,000 living near her residents on adjacent village.

In March 1977 about 17 months after programme initiation, the level of knowledge of the FWVs acquired through training, was assessed through an interview schedule that dealt with, among other things, usage of oral pills and condoms and treatment of side-effects. The composite scores were then related to six selected characteristics of the FWVs, their age, marital status, number of living children, age of youngest child, religion and education. In order to determine the correlates of FWVs performance a multivariate analysis was performed taking all the six characteristics and the scores as independent variables and cumulative rate of contraceptive acceptance and use-prevalence rates in the areas of each FWV as dependent variables.

### Findings :

The FWVs were usually older women (median age was 40 years), mostly widowed (about 60%) and illiterate (over 74%) and no formal schooling.

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\*International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, Bangladesh, July 1978.

The mean number of living children was 3.5. About 87 per cent of the FWVs were Muslims and the rest Hindu. About 45 per cent of the FWVs did not know when pill-taking should be initiated in relation to the last menstrual period. Likewise, about 82 per cent did not know what to advise the woman if she forgot to take the pills five consecutive days. Nearly half could not explain the anticipated side-effects of the pills. A similar proportion did not know how to manage bleeding problems associated with pills use.

As regards intra-worker variation in performance, as measured by contraceptive acceptance and prevalence rates in the areas of each FWV, it was observed that 20 per cent of the variation could be explained by workers' knowledge alone (significant at the 5 per cent level) and only 5 per cent by the six socio-demographic characteristics.

#### **Programme implication and Recommendations :**

The findings of the study clearly indicated that knowledge about use of contraceptives and treatment of their side-effects was an important determinant of field workers' performance. They should be given regular training on the usage of contraceptives and the treatment of side-effects.



### **A STUDY ON THE PERFORMANCE AND TRAINING OF FIELD WORKERS (FPA's AND FWA's)\***

#### **Objectives :**

- i) To collect pertinent information on socio-economic and demographic characteristics of the field workers (FWAs and FPAs);
- ii) To obtain information on the adequacy and applicability of training contents;
- iii) To assess the performance of FWAs/FPAs and to identify problems encountered by them in their work; and
- iv) To find out the extent of supervisory support as the extent of linkage with local leaders, other departmental workers and contraceptive acceptors.

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\*Research Evaluation Statistics and Planning, Directorate of Population Control, 1978.

### **Methodology:**

The study was confined to 4 districts of 4 divisions. The field workers and other personnel were selected at random in a simple stratified manner by thana (4 in each district) and union (3 in each thana). The study was designed to provide full enumeration of FWAs/FPAs and Thana Family Planning officers located in each of the selected sample points.

### **Findings:**

The mean age of FWAs and FPAs were 24 years and 28 years respectively. Most of them were married. The mean number of living children of field workers was a little over 2.

The performance of married FPAs seemed to have been better than that of the unmarried ones. The findings of the study indicated that FWAs with higher education level tended to recruit higher number of acceptors in comparison to FWAs having lower level of education.

A significant proportion (25% FWAs and 10% FPAs) had reported that they had not been maintaining any contact with the workers of other organisations in their areas

Around 39.21 per cent of the respondents had not been fully satisfied with the services of the Family Planning workers. Spontaneous responses in recalling the contents of training had been extremely inadequate. Only 13 per cent FWAs and 21 per cent FPAs had mentioned an important topic like filling of forms, which was considered as a major improvement in field work. The findings showed that 40 per cent of FWAs had not filled up any form or card and had not prepared any report on stock and clients.

The findings of the study positively indicated that the majority of the field workers lacked adequate understanding of MCH-based family planning programme which was considered to be an effective medium for programme implementation.

A significant percentage of field workers had advised their clients to take coconut water, glucose, or just plain cold water when the latter had complained about the side-effects of oral pill. They seldom referred clients to appropriate places or institutions.

### **Programme implication and Recommendations :**

An examination of the possible relationship between the education level of FWAs and recruitment of clients indicated that there was a definite

association between the education level and the level of recruitment of clients. A carefully designed re-orientation training course was required to be organised as early as possible to improve the understanding of the field staff in all aspects of their field work.

The findings of the study would be helpful to the programme planners in understanding about the need and appraisal of field workers training and performance.



### **AN EVALUATIVE STUDY ON FAMILY WELFARE, VISITORS' TRAINING PROGRAMME\***

#### **Objectives:**

- i) To examine the relevance of course contents and curriculum to the knowledge and skill of Family Welfare Visitors and to find out how adequately and effectively the training was imparted; and
- ii) To assess the quality of training and to recommend ways and means of improving it.

#### **Methodology:**

Five out of nine Family Welfare Visitors' Training Institutes were selected for the purpose of the study. The total sample consisted of 200 trainees, 45 trainers and 100 Family Welfare Visitors. Data were collected by interviewing and administering structured questionnaire to selected respondents. The members of the Evaluation Committee also visited the Family Welfare Visitors' Training Institutes under study to closely observe the various aspects of the training programme.

#### **Findings :**

The median age of trainees was 21 years and 98 per cent were unmarried. Though the minimum education required for the job was secondary school

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\*Evaluation Unit, Population Section, Planning Commission, Dhaka, 1978.

level, the working Family Welfare Visitors were better educated on the average than their trainee counterparts.

Twenty-seven out of 100 working Family Welfare Visitors reported that their training was inadequate particularly in maternal and child care. The need for refresher courses was mentioned by 72 per cent of the respondents.

Lack of transport facilities was often mentioned by Family Welfare Visitors as hindrance on the way of discharging their responsibilities. It was found that more than half of the trainers (55.56) were not satisfied with their jobs and the main reasons mentioned were irregular payment of salary, low pay-scale, lack of opportunities for promotion and lack of transport facilities. There was lack of uniform and adequate understanding of the scope of subject contents of the Family Welfare Visitors' syllabus and course curriculum. It was observed that there was general shortage of teaching staff and reading room facilities were found inadequate.

#### **Programme implication and Recommendations:**

The Evaluation Committee recommended that a national training course for trainers should be instituted to bring about greater degree of understanding of the course materials. The Maternal and Child Welfare Centres should be refurnished and supplied with adequate stores and equipments. Short refresher courses should be organized as early as possible.



## DUAL RECORD APPROACH TO EVALUATION OF FWA PERFORMANCE IN SERVICE STATISTICS AREAS

S. Waliullah and others\*

### **Objective:**

To evaluate the recently established service statistics reporting system.

### **Methodology:**

A total of 8 rural villages were selected: 4 from the on-service statistics system areas and 4 from outside the service statistics system areas. The selection procedures were designed for villages within an estimated size of 150 households. Much of the evaluation of the in-service statistics system depended on a comparison between records maintained by field workers with survey data obtained through direct interview.

### **Findings:**

Of currently married women, 83.9 per cent interviewed, could produce a couple registration card; 98.6 per cent couple registration cards showed that the last visit was made in the past 3 months, 15.4 per cent of the respondents claimed that they had not been visited by any FWA in the past year. It was found that the couples in the service statistics areas would possibly be visited regularly by an FWA. The current users of contraception in the service statistics areas was found to be 17.4 per cent. Compared with a national rate of 9.6 per cent found in early 1976 in the BFS, the figure strongly suggested an increased prevalence. An interesting feature of the analysis of fertility was the high degree of childlessness. In all 125 respondents had never had a live-birth. Of them 23 were over 25 years of age.

### **Programme implication and Recommendations:**

The findings showed that service statistics areas' field workers regularly supervised by RESP personnel stationed in Dhaka were better in carrying out their duties than others. As such, close supervision with regularity should be ensured.

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\*Directorate of Population Control and Family Planning (RESP Unit), 1978.

## **A BRIEF EVALUATION REPORT ON RURAL WOMEN'S CO-OPERATIVE PROGRAMME\***

### **Objective :**

To assess the extent to which the objectives of the Integrated Rural Development Programme, especially its women's programme, were achieved.

### **Methodology :**

The information for this study was collected in two ways:

- i) Discussion with the Project Officers and Deputy Project Officers, Women's Cooperative Programme, Cooperative managers and organisers.
- ii) Collection of data by field interviewers from cooperative members and other village women. In all, cooperatives were selected for the study, 2 from the stratum of relatively long operating duration and high membership and 2 from the stratum of relatively short operating duration and low membership.

In the study, representative members of selected co-operatives were interviewed. In addition, half of the general members were included and selected alternatively from the general members' list. Every 4th household in which there was no member was systematically included in the interview sample in each of those households, wherever it was possible, a currently married woman in reproductive age was selected for interview.

### **Findings, Programme implication and Recommendations:**

It was found that 100 per cent members and 96 per cent non-members had heard about family planning. For respondents, the pill was the most commonly known method followed by tubeligation, vasectomy and condom.

Out of four villages under study, functional literacy programme was introduced in three villages. It was observed that in these three villages, 87.3 per cent of the members had heard about the functional literacy programme of which 30.3 per cent (26.3% of all members) stated that they

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\*Evaluation Unit, Population Section, Planning Commission, Dhaka, 1978.

had received some training on functional literacy. In reply to a question whether the cooperative members received any vocational training through the cooperative programme, 49.1 per cent of the respondents claimed that they had received training. Although, nearly all women knew that functional literacy was available to them, a small number (30%) took advantage of the programme.



### **AN ASSESSMENT OF A TRAINING COURSE\***

#### **Objectives:**

- i) To assess the effectiveness of a training programme; and
- ii) To know how far the training was fruitful to the participants and how far the techniques learnt were being used by them in their own professional fields.

#### **Methodology :**

Short and self-explanatory questionnaires were prepared and mailed to 38 participants. The report had been prepared on the basis of the information collected from the questionnaire. Out of a total of 38 mailed questionnaires, only 12 questionnaires were returned.

#### **Findings :**

Majority of the respondents had learnt the techniques from the course but most of them did not utilize them because of specific instrument methods at their disposal.

It had been found that during their job practice, most of them had done sterilization. After attending the course, 9 out of 12 respondents had also undergone sterilization.

Majority of the participants preferred only male sterilization because in their opinion it was easier, less expensive, less risky, and less complicated.

When asked whether the participants had trained any doctor in this regard, only 4 replied positively and 7 negatively. Most of them were in favour of attending the refresher's training course so that they would be benefited from it.

According to the opinions of the participants (a) the course was simple, interesting, informative and very helpful for the mid-level doctors, (b) the training was mostly based on class-room situation and should have more practical orientation, (c) it had provided theoretical knowledge on various new techniques of sterilization but that it was not possible to implement them because of lack of practical applicability, lack of proper supply of or arrangement for equipments.

#### **Programme implication and Recommendations :**

Although the response rate was low those who responded emphasized the need for practical training; and also that the training could not be useful unless supply systems and equipment were made available.



### **EVALUATION OF THE COMILLA UNIT OF DEMONSTRATING PROJECT (AN ANALYSIS OF RECORDS)**

**Rezaul Islam.\***

#### **Objective :**

To assess the achievement of demonstration project in relation to overall activities such as coverage of fertile couples by making them acceptors of conventional contraceptives and permanent methods and their continuity with the programme and the underlying problems.

#### **Methodology:**

The study analysed the available data both from the national office and the project office. Usual observation and discussion with field staff and project incharges were so considered in preparing the report.

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\*Bangladesh Family Planning Association, Evaluation Division, 1978.

**Findings :**

Total population of the project area was 2,000. Out of this 1,839 fertile couples were present in the area; the difference may be due to in-migration, out-migration etc. The number of acceptors reached 448 in the year 1975. There were only 3 sterilization cases (vasectomy 8, tubectomy 27). Out of the clients of the year 1975, 42.5 per cent continued to accept the method. In 1976 the continuation rate was 42.3 per cent and for the year 1977 it was 58 per cent.

**Programme implication and Recommendations :**

Continuation rate varied from year to year. It was essential for the programme to ensure higher rate of continuity and keep the discontinuity rate to minimum.



**EVALUATION OF A MINILAP STERILIZATION PROGRAMME  
IN BANGLADESH  
(JULY 1976—JANUARY 1978)\***

**Objective:**

To evaluate the procedure and the use of the Minilap set provided by the US-AID.

**Methodology:**

The study included 1,954 women who underwent "minilap" sterilization at 17 centres in Bangladesh from July 1976, through January 1978. Patients' characteristics and medical data were recorded on standard forms by the staff of the centres. The data were computer analysed to assist the Government in evaluating the minilap sterilization programme.

**Findings :**

The overall rate of surgical complications reported in the series was low for post-partum and interval patients; no surgical complications were reported. No deaths were reported at the centres.

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\*Bangladesh Fertility Research Programme, Dhaka, 1979.

### **Programme Implication and Recommendations:**

The minitap technique was useful within the Bangladesh context; the kits were appropriately designed for use in Bangladesh.



## **INFLUENCE OF WORKING WOMEN'S OCCUPATION ON THEIR FAMILY LIFE**

**Khodeza Begum and others.\***

### **Objectives:**

The broad objectives of the study were to determine:

- i) the influence of working women's occupation on their family life and their motivation and acceptance of family planning;
- ii) the size of the family, educational level and economic condition of the gainfully employed women.
- iii) the reasons for accepting job;
- iv) the role of employed women in the decision-making process in family matters; and
- v) the attitudes of the working women towards family planning.

### **Methodology:**

Married women in different organizations situated in the Dhaka city only were included in the study and some specific and very limited facts about their lives and living were surveyed.

### **Findings :**

One of the important findings was that almost all of the employed women were in favour of accepting family planning and 74 per cent of them actually had recourse to any sort of family planning measures.

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\*RESP Unit, Directorate of Population Control.

The data of the study showed that the education level of the respondents as overleaf the secondary level and some of them were graduates (12%), some even had post-graduate degrees (34%). Their average family size was 4.85, average number of children 2.85 and average family income was TK. 1,888.89. Most of them (51%) had taken up jobs outside their homes mainly with a view to adding to the family income and to make best use of their education (32%). More than one or half of the respondents had reported that they were facing problems in looking after their family affairs and particularly their children. Respondents felt the same problem differently because of their different socio-economic and educational background.

Their husbands had different opinions on their occupations. Husbands approved of their wives' employment for economic reasons and for the proper utilization of their education.

In case of decision-making in family affairs, 79 per cent couples took their decisions jointly. Most of the working women, i.e., 74 per cent were found to practise family planning and 99 per cent had positive attitudes toward family planning. Each of them had indicated that the family planning method they were using was the best and easy method, and that it was good for health. They were practising family planning mainly with a view to limiting the number of children. Other reasons for accepting family planning were to become more economically solvent, to have a bright future for the children and for their own health.

#### **Programme implication and Recommendations :**

The use rate of contraceptive was usually high 74 per cent and at or above the level of achieving NRR=1

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## WOMEN'S FUNCTIONAL LITERACY PROGRAMME AND USE OF MODEL FARMERS AND COOPERATIVE MANAGERS

Farkhunda Akhter\*

### Objectives :

- i) To provide bench-mark information for use in future evaluation of the programme achievement ; and
- ii) To measure the pattern of fertility behaviour, knowledge, attitude, practice of contraception among the cooperative members and non-members of the pilot IRDP project areas.

### Methodology :

In the first phase of the survey eligible couples were selected at random from the pilot project thanas of different districts of Bangladesh, and in the second phase, data were collected from the extension agents and members of IRDP cooperative societies. Total number of general couples interviewed was 777 and total numbers of male and female cooperative members 588 and 486 respectively.

### Findings :

Cooperative members and non-members had similar rural background in marriage pattern and had strong preference for male child. Acceptance rate and duration of practice of contraceptives was reported to have been relatively high among the members than among the non-members (male member user 42.50 per cent, non-member user 15 per cent and female member user 39.40 per cent and female non-member user 10.81 per cent). The desire to have not more than three children and readiness to undergo abortion to prevent the birth of unwanted child and preference for small family of 2-3 children (male member 57.78 per cent and non-member 12.87 per cent and female member 21.5 per cent and non-member 2.88 per cent) was proportionately high among the members in comparison with the non-members. Pregnancy prevalence (in the year of

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\*MIS. Unit, Directorate of Population Control.

the study) among the members was about one-third of the non-members i.e., 6.62 per cent. Age of the last child of the member-users was higher than the non-member users. Rate of users among the literate was higher than among the illiterates. But acceptance rate was proportionately higher among the literate members than among the literate non-members. Contraceptive use rate had little relationship with the income level.

#### **Programme implication and Recommendations :**

The abovementioned observations did not confirm the idea that the better position and effort of the IRDP alone had made the higher acceptance rate possible but that it would probably be associated with the new approach which created the favourable condition for the couples to accept family planning.

Population and family education were parts of the functional literacy programme. The study indicated that training on family planning generated interest among the trainees even when they were receiving training on agriculture, animal husbandry and fishery.

Integrated programme approach created interest among the members and it encouraged couples to accept family planning. The members of a group discussed family planning freely as a normal behaviour of life which was not evident among the non-members.



## **EVALUATION OF POPULATION TRAINING WORKSHOP OF DIFFERENT LEVEL OF TEACHERS\***

### **Objectives :**

- i) To assess the gain in knowledge of the teachers of all levels on different aspects of population problems and issues ; and
- ii) To measure the changes in attitudes toward the issues at the end of successful participation of the training.

### **Methodology :**

Four levels of teachers key personnel (Principal, Vice-Principal, Education Officer, etc.), College teachers, secondary school teachers and primary school teachers were trained in workshops. In order to assess the change in their knowledge and attitudes tests of knowledge and attitudes were administered at the beginning and at the end of the workshops. Difference between the two test scores were treated statistically for ascertaining the gain.

### **Findings :**

The participants of all levels of workshops were able to gain a substantial and positive gain in knowledge and attitude. However, the knowledge gain was found substantial among the participants but in the cases of attitude score, the gain was not as substantial as expected.

### **Policy implication and Recommendations :**

Evaluation of any training programme was an integral part of the total programme. Evaluation of knowledge and attitude was a part of the workshop output. The other inputs, such as, contents and other physical facilities also need some kind of evaluation.

Again, knowledge does not necessarily mean a commitment in attitude.

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\*Population Education Programme, Ministry of Education, Dhaka, August 1979.

**RE-EVALUATING FAMILY PLANNING PROGRAMME  
EFFECTIVENESS AND EFFICIENCY—A CASE  
STUDY OF OPERATION RESEARCH PROJECT**

**M. A. Sattar\***

**Objectives :**

- i) To promote diffusion of knowledge about, and change in attitudes toward, family planning ;
- ii) To undertake comprehensive motivational activities to increase the rate of practice of modern contraception ; and
- iii) To persuade the enlisted eligible couples to adopt more effective modern techniques of family planning.

**Methodology :**

Two villages in Hariari Union of Rajshahi district were selected as study areas. The time period for the study was 12 months. The field work was conducted during June through December 1978. This study was undertaken to follow-up about 3,000 eligible couples. The chairman and members of Hariari Union Council assisted the field staff in the work of data collection. The field staff consisted of two categories of workers, four field workers and one supervisor

**Major Findings :**

The motivational activities were found to be very successful. Knowledge about modern methods of family planning and changes in attitudes towards family planning programme were significantly improved. During the six-month period under study, field workers reported 58 users of pill, 32 users of condom and a tubectomy operation. It was found that both for pill and condom, current users increased gradually but the rate of increase for pill was faster.

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\*Department of Statistics, University of Rajshahi in May 1979.

Change in attitudes regarding approval of family planning during the six-month period had also been highly significant.

In the short term project the number of births averted had been estimated by recording the number of pregnant women in each month after September. The number of pregnant women had gradually declined. This result might be accepted as a fair indication of significant impact of the short-term family planning project in favour of averting births and declining fertility.

**Programme implication :**

The supply constraints and failure to generate sufficient demand for services had been considered to be the major bottleneck in the act of recruiting family planning acceptors from among the eligible couples of the country. For evaluating the progress of the national family planning programmes there is the immediate requirement of a carefully planned record-keeping system so that the programmes could be systematically evaluated in order to develop the programme to attain its specific objectives.

A systematic plan of record-keeping and motivational activities with close supervision could have an effect on family planning practices.

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## **DYNAMICS OF POPULATION CONTROL : A MOTIVATION STUDY IN RURAL BANGLADESH**

**Amjad Hossain Chowdhury\***

### **Objectives :**

The survey was intended to study the following aspects :

- i) education, motivation and mass media communication ;
- ii) inter-spouse communication and motivation ;
- iii) birth control and motivation ; and
- iv) behaviour of the couples in respect of differentiating the knowledge of population planning and others; and also to find out (a) the factors for population growth and (b) the motivational activities and attitudes of the couples acting for or against family planning.

### **Methodology :**

The study area was selected purposefully. Of the areas selected mouza Bara Chandrail was quite at a distance from any family planning service centre and muza Kumrail was located near a family planning clinic and health complex.

All married women aged up to 44 constituted the study population. Considering the advantage of a sample survey, a sampling frame for fertile couples was prepared for which a complete household survey was conducted. There were 144 households with 166 fertile couples in Bara Chandrail and 212 households with 195 fertile couples in Kumrail. Twenty per cent of the eligible couples from a total of 173 which included 33 fertile couples from Bara Chandrail and 40 couples from Kumrail were selected randomly.

### **Findings :**

It was found that there was not any significant difference in the demographic characteristics between the two study areas. The growth rate was

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\*Department of Geography, Jahangir Nagar University, 1979.

2.88 and 2.36 respectively. The mean age at marriage in these areas was 13.12 years. Average family size was found to be 5.37. The number of living children per couples in a joint family was 3.91 and in a nuclear family it was 3.84.

Inter-spouse communication, which was most essential for creating an attitude of mutual understanding and motivation for family planning activities, was found to be not much encouraging in the study area and only 41 per cent of the couples had agreement on family planning as against 30.73 per cent differing and 14.18 per cent not discussing at all.

Of the mass media, radio acted as the principal medium; 67 per cent of rural husbands and 4 per cent of the wives listened to the family planning programme regularly. Besides radio, 47 per cent of the husbands and a very significant percentage of wives who witnessed cinema or movie shows received inspiration from films on family planning.

FPW as well as the couples who had adopted birth control measures were the most suitable agents to motivate the fertile couples. About 45.1 per cent of the husbands and 50.69 per cent of the wives discussed about family planning and 23.29 per cent of the husbands and 8.22 per cent of the wives had reported to have been able to motivate people of which the ratio was 1.31 for husbands and 1.10 for wives.

There were 59 per cent husbands and 42 per cent wives who reported 3 to be ideal number of children. About 97 per cent of the rural couples showed very strong desire for at least one son in the average family in Bangladesh.

Although the people in general were aware of the family planning workers and 83.56 per cent approved of family planning; only 52 per cent ever-users and 37 per cent current users were found. It was also found that the wives knew more about family planning than their husbands. It was found that 38.35 husbands and 43.84 per cent wives knew more than two methods, while 80.30 per cent of husbands knew one or two methods due to their wider contact.

It was found that out of the current users, 15 per cent had been practising safe period, 7 per cent using condom and 4 per cent taking oral pills. Among the non-user wives 51.44 per cent were not sure about future use, 5.71 per cent would not use any method and only 42.86 per cent expressed the willingness to use any method in future.

It was found that 57 per cent educated women were practising contraceptive. Thus, it revealed that the educated women practised contraceptive more than the less educated women.

**Programme implication and Recommendations :**

The accelerated service delivery would gear up the programme by encouraging inter-spouse communication and maintaining continuous persuasion and also by keeping the family planning clinics and available facilities within close proximity.



**EVALUATION OF POPULATION EDUCATION  
PROJECT IN AGRICULTURE SECTOR**

**Ahmadullah Mia and others\***

**Objectives :**

- i) To analyse the performance of agriculture extension workers (known as Union Agriculture Assistants) vis-a-vis their role in population education along with agriculture promotion and the problems in popularising family planning through these workers;
- ii) To identify both qualitative and quantitative training needs, appropriate methodology and materials of training in order to prepare the extension workers and their trainers to motivate the farmers on family planning ; and
- iii) To assess the level of population education services received by the farmers from the agriculture workers.

**Methodology :**

The study took into account four groups of people who could provide necessary information. They were : agriculture workers engaged

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\*Institute of Social Welfare and Research, October 1979.

**in delivering extension services to the farmers, the trainers of the workers, the population education project managers and the recipients of the service (farmers).** In all 160 farmers from 8 villages, 16 Union Agriculture Assistants, 8 Thana Agriculture Officers, 3 Regional Project Officers and one Project Director were intentionally selected. The workers and the farmers were sampled and interviewed. The trainers and project managers were very small in number and all of them were visited by supervisory research staff to have in-depth semi-formal discussion with the help of a flexible structured interview guide.

Data gathered from the workers and the farmers were statistically analysed; on the other hand, information received through discussions with trainers and project managers were used for content analysis.

### **Findings :**

The agriculture workers were not known to all the villagers because their frequency of contact with the villagers was much lower than expected. Only a small proportion of farmers acknowledged that agriculture workers discussed family planning matters with them while discussing agriculture.

However, the farmers got most of the family planning information from the family planning workers who were reportedly the more frequent visitors. The agriculture workers did not seem to play proper advisory role with respect to family planning nor did they provide any referral services to promote family planning.

It was noted that the agriculture workers were not adequately prepared to carry out their population education responsibilities. Young in age and having no natural identity with family planning service delivery agency, the workers had a low level of commitment to the promotion of family planning. Training given to them was not appropriate to prepare their personality structure or to develop their skills in disseminating population education among the rural farmers. Training methodology and materials were not properly geared to the field activities of the workers and were not consistent with the needs of the farmers. Consequently, the agriculture workers did not confidently take up the role of family planning promotion.

The trainers and managers considered that the training curriculum was inadequate, while they themselves were not adequately prepared to train the workers. They attached high value to connecting family planning

promotion activities with agricultural improvement, but lacked initiative in building up the needed strength in the population education project in the agriculture sector.

**Programme implication and Recommendations :**

Personnel from any department other than family planning department would require a special commitment and skills in performing family planning motivation role. The desired qualities of such personnel need to be built through adequate pre-service and in-service training. The training should be given to both field level personnel and their supervisors at different levels. Some basic factors, for instance, attitude age, willingness to accept non-conventional issues have to be considered while recruiting the field level personnel in family planning and other extension service programme. Monitoring and supervisory systems in such a programme have to be built in so that the workers responsible for delivering the services to the people develop their capacities and have the necessary back-up facilities to be able to carry out their responsibilities. This presupposes increasing the skills of programme personnel through a process of continuing education and inquiring managerial abilities of higher level programme personnel through a process of continuing education and management skills training.



**FAMILY PLANNING MANAGEMENT : A STUDY ON  
MANAGERIAL ASPECTS RELATING TO PERFOR-  
MANCE OF FAMILY PLANNING FIELD WORKERS**

**A. S. M. Moshahidur Rahman\***

**Objectives :**

- i) To evaluate IEC and service delivery system pattern at thana level ;
- ii) To examine adequacy of training of FPAs and FWAs ;
- iii) To evaluate supervisory pattern of work at field levels ; and
- iv) To conduct an evaluation of overall work performance of field workers.

**Methodology :**

The study was designed to cover Family Planning Assistants and Family Welfare Assistants of three thanas of Chittagong. All the three thanas were selected purposefully considering their predominantly rural characteristics. The study was designed to provide full enumeration of FPA and FWA who were available for reporting at Thana Family planning office.

**Findings :**

Training of the field workers was not adequate; most of them did not know what they were talking about. Reading materials in Bengali were not readily available. Supervisory supports from thana to union and from union to ward level did not seem to be functioning properly. Field supervisors did not seem to conduct group meetings and joint field work as frequently as they had mentioned in their reports. Many female workers, who, were supposed to pay regular home visits, considered their jobs to be very difficult. Performance of unmarried female field workers was constrained by their lack of experience, specially in pill use and MCH.

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\*Department of Management, University of Chittagong, 1979.

### **Programme implication and Recommendations :**

Field workers' (i.e. FPAs and FWAs) training programme should incorporate social, psychological and community variables to give them proper understanding of their role in informing, educating and communicating with the rural eligible couples. A training manual outlining objectives, contents and methods of training at thana level might be prepared to that problems of local type and strategies to solve those problems are incorporated therein. There should be proper check and balance by a separate body located at national and district levels to evaluate and possibly help to supervise field performance.



## **PERFORMANCE OF FAMILY WELFARE ASSISTANTS BANGLADESH**

**A.H.G. Quddus\***

### **Objective :**

The primary objective of the study was to measure the performance according to the job description mentioned in the training manual.

### **Methodology :**

Data were collected from Chittagong district. A total of 845 respondents were interviewed from 68 villages of 14 thanas. Respondents were selected at random from the couple registration books maintained by the FWAs.

The study was divided into two parts: the evaluation of actual performance of the FWAs as field workers, and the evaluation of reliability of official records maintained by them. The Thurstone scale as used for measuring the attitudes of the respondents towards family planning.

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\*Department of Sociology, Chittagong University, 1979.

### **Major Findings :**

The study indicated that most babies were born at the early period of marital life of the couples. The average number of children of each couple was 3.9.

The average years of schooling was found to be 1.9 and 4.2 years for the respondents and their husbands respectively.

The study found 10.41 per cent users among the total respondents. Only about 43.4 per cent of the total respondents were visited by workers at least once. Despite the inactiveness of a large number of FWAs, 88 per cent of the present users were recruited by them.

Despite many criticisms, the FWAs were found to be the single most important and the major source of knowledge of the widely used contraceptives. The characteristics of the users and the non-users differed significantly. The users were richer and better educated than the non-users. No difference, however, was observed between the users and the non-users with regard to the number of children and other socio-economic status. It appeared from the findings that the vast majority of the FWAs relatively neglected the MCH services compared to family planning.

The collection and maintenance of records, in general were found to have been very poor. The reasons might be that workers lacked understanding about the importance of collection of information and also that the supervising authority lacked interest in the collected information.

### **Programme Implication and Recommendations :**

The study had indicated that FWAs were a major source of strength of the programme as most users were recruited directly by them while a major problem of the programme had been the inactiveness of a large number of FWAs. This also indirectly indicated the inactiveness of the supervising staff. Had FWAs been active the programme would have possibly achieved much greater success in Bangladesh.

The study found that FWAs who collected community information accurately recruited more clients than those who failed to do so. The reasons behind the failure to collect the assigned information and the failure of the purpose to be served by such information required investigation.

The study had confirmed that it does not support a layman's view that people accept sterilization for monetary incentive. On the contrary, the age and number of children had been the major influence on the acceptance of the permanent method of sterilization.

The study further indicated that most of the babies were born at the early period of marital life of the couples. Therefore, programme efforts should be directed more towards the younger couples for a meaningful population control programme.



## **ROLE OF AGRICULTURAL EXTENSION AGENTS IN POPULATION ACTIVITIES : BASELINE SURVEY\***

### **Objectives :**

The objectives of the study on agricultural extension agent were to assess their :

- i) social-economic background ;
- ii) knowledge, attitude and practice of family planning ; and
- iii) ideas regarding their participating in family planning programme and other development activities.

### **Methodology :**

The present study was carried out in 28 unions of 14 pilot thanas of 14 districts in Bangladesh. The agricultural extension agents of the selected unions and also their neighbouring unions were included in the study.

### **Findings :**

The study findings showed that most of the respondents were married, majority of them were below 40 years of age, over 50 per cent had never

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\*Directorate of Population Control and Family Planning, Research Evaluation, Statistics and Planning (RESP Unit), Dhaka.

practised contraception. The number of children were fairly large among the elderly respondents who had wives with longer child-bearing age. Only slightly less than 30 per cent had some exposure to family planning training and this training was in almost all cases very brief.

#### **Programme implication and Recommendations :**

For agricultural extension workers to be effective communicators about family planning they must be trained ; more than 70 per cent were till then untrained. Given training resources the implementation of the multi-sectoral programme may not be problematic.



## **A STUDY OF THE FIELD WORKER PERFORMANCE IN THE MATLAB CONTRACEPTIVE DISTRIBUTION PROJECT**

**Mukhlesur Rahman\***

#### **Objective :**

The aim of this monograph was to focus on the characteristics and level of knowledge of the dais with respect to their success in the household distribution as reflected in the acceptance and prevalence rates in their respective areas.

#### **Methodology :**

One hundred and fifty-three female village workers were recruited from the ICDDR,B Surveillance Area. They were commonly known as dais and had been given some orientation about the family planning methods and its side-effects. Dais were made responsible for collecting vital registration data and distribution of contraceptives. The prevalence rate of the contraceptives were recorded. Knowledge level of the dais

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\*International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, February 1981.

were assessed through questionnaire. The collected data were analysed through multiple regression and correlation analysis.

**Findings :**

Among the important findings the dais were found to be elderly, illiterate widows with about 4 living children. The number of living children and the age of the dais seemed to be strongly correlated with their level of contraceptive knowledge, which, in turn, was found to be positively related to both prevalence and acceptance rate. Younger dais with more living children were able to better assimilate the instructions concerning contraceptive use. Education was found negatively associated with both acceptance and prevalence indicating that the level of knowledge was not dependent on education but on the motivation to learn.

**Programme implication and Recommendations :**

The findings of the study had great potential for the governmental agencies involved in family planning activities. The success of the field workers working under those agencies need to be evaluated. Thus, similar study might be undertaken to evaluate the field workers performance throughout the country.



## **FAMILY WELFARE VISITORS (FWVs) HOUSEHOLD VISIT PATTERN**

**S. Waliullah and others\***

### **Objectives :**

The Bangladesh Contraceptive Prevalence Survey obtained for Bangladesh needed data on contraceptive behaviour for the purpose of evaluating the performance of the country's family planning programme. Among other operationalised objectives of this large study one was to find out the FWAs household visit pattern.

### **Methodology :**

The survey was conducted in 200 sample points (comprising 14,198 women), of which 80 were in urban areas and 120 in rural areas. Out of the 120 rural points (villages) household from 80 rural points were selected by the simple random sampling technique while in the remaining 40 rural points there was a complete count. A total of 9,245 persons were interviewed in the 40 full enumerated spots, where individuals were asked to respond to questions on FWAs household visit pattern.

While the complete data were being processed and analysed through the computer, data from one-third of the interview schedules were presented here through hand tabulation. Systematically one from every three schedules of the 40 spots were selected making the sample size 3,091.

### **Findings :**

About 70 per cent (N=1575) of the people interviewed mentioned that the FWAs had explained to them the utility of contraceptive use whereas about 61 per cent mentioned that workers explained to them the usage of the contraceptives. Only 12 per cent (N=192) had reported to have ever received contraceptives from sources of FWAs. Of those who received

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\*Paper presented at the second bi-annual seminar on family planning research, NIPORT, Dhaka, January 1981.

(N=192) contraceptives from the FWAs, 82 per cent received oral pill, 14 per cent received condom and the remaining clients received other types of contraceptives.

About 93 per cent of the recipients of contraceptives mentioned that they had received their desired method from the FWAs ; 4 per cent did not receive the desired method and 3 per cent did not answer. Of the 192 contraceptive recipients 71.35 per cent were current users.

Among current users 55 per cent mentioned that they did not face any problem in using the contraceptives and the remaining users mentioned some problems such as side-effects, discomfort, etc.

Of the 3,091 respondents 20.83 per cent (644) respondents were issued family planning record cards. Again, interviewers observed that 69 per cent of the cards did not have any entry on contraceptive distribution. This meant that the cards had not been distributed throughout the country and wherever it had been distributed, those had not been filled up.

#### **Programme implication and Recommendations :**

Bangladesh contraceptive Prevalence Survey 1979 had provided the prevalence figure of nearly 13 per cent. This figure became meaningful when it was observed along with the pattern of household visits made by FWAs. From the above data it appeared that there was a relationship between the dependent variables, i.e., (a) reported visits made by FWA to households (58%) in a year ; (b) number of respondents ever received contraceptives (12%) and contraceptive use. It should not, however, be construed that contraceptives received by a couple were used. This was evident from another set of data which showed that couples also used traditional methods other than the abovenoted methods distributed by FWAs.

Thus it appeared that there was an immediate need for augmenting home visits of FWAs together with distribution of contraceptives for raising the present level of contraceptive prevalence. Simply, home visits would not be enough for the improvement of programme under implementation. It should also include increased motivation of couples so that the latter can ask for supplies of contraceptives for use.

Similarly, there was a great need for distribution of contraceptives households by FWAs, as for many they are the only major source of contraceptive distribution among the rural population.

Generally, a common "complaint" was heard about the side-effect on oral pill users. On the other hand BCPS findings (66%) did not have any complaint of side-effect caused by oral pill. Considering the size of drop-out a thorough investigation, if carried out by clinics, as to the reasons of drop-out in relation to the most popular method (pill), programme could be greatly augmented.

With the poor distribution of family planning cards in rural households it would be almost impossible for one to evolve a viable monitoring system for the programme.



## **EVALUATION OF DIFFERENT ASPECTS OF POPULATION EDUCATION CURRICULUM FOR TEACHERS' TRAINING COLLEGES IN BANGLADESH\***

### **Objectives :**

- (i) To assess the change of knowledge and attitude towards population education as an impact of the curriculum ; and
- (ii) To elicit the teachers' and students' opinion on different aspects of population education curriculum introduced in the different teachers' training colleges of Bangladesh.

### **Methodology :**

The study was conducted in five teachers' training colleges of the four divisions of the country. A total of 885 students of B.Ed. and 9 teachers were interviewed in the study.

In order to assess the knowledge and attitudes of the students, two-tests (one knowledge test and other attitude test) were administered at the beginning and at the end of the academic session. Two separate questionnaire were also administered among the students and population

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\*Population Education Programme, Ministry of Education, Dhaka, June 1980.

education teachers at the end of the session. Data were collected by administering the questionnaire in the class-room. In terms of statistical application measures of central tendency and percentage distribution were used.

### **Findings :**

As an impact of population education curriculum, the knowledge gained on the subject was to some extent, poorer at the beginning and the attitudes toward the issue, though it was highly favourable at the beginning, changed a little more forwards. The opinion of both the teachers and students revealed that the colleges did not possess sufficient reading materials on the subject and the syllabus was inadequate to achieve sufficient knowledge. The time allotted for teaching the subject was also not sufficient. The poor achievement of knowledge in population education was due to the fact that both the teachers and the students did not give proper emphasis on the subject as it was not included in the final examination.

### **Programme Implication and Recommendations :**

The findings of the study pinpointed the necessity of modification of the existing population education curriculum and would help in establishing the inclusion of the teaching of population education in the teachers training colleges as a sound academic course.

It was recommended that time allotment for teaching population education should be raised and libraries should be well equipped with sufficient reading materials on the population related aspects. The motivation of the students towards the subject may be raised by the inclusion of the subject in the final examination. In order to find out the long-term effect of the population education curriculum further follow-up investigation may be undertaken.



## **FAMILY PLANNING PROGRAMME ( A STUDY ON THE RECORDED CLIENTS OF RURAL BANGLADESH )**

**Rezaul Karim and others\***

### **Objectives :**

- i) To study the trend in age of adopting birth control methods ;
- ii) To find the average number of children of the adopters when they adopted for the first time ;
- iii) To find the impact of the prevailing low level of literacy of the clients on the adoption of birth control methods ;
- iv) To find whether the village cooperative society has any impact on the adoption of birth control methods ; and
- v) To study the trend in age of marriage in our rural society.

### **Methodology :**

The information required for the study were collected from two sources : (i) directly from the respondents, and (2) through consulting the official records. Information was furnished by the clients when they adopted birth control methods. For the study, records of 5 out of the 8 villages starting from the year 1961 to June 1978, were consulted ; 342 out of 459 clients were included in the study for some practical reason. The villages covered in the study were Kamlapur, Banasua, Monshasan, Anandapur and Araiora.

### **Findings :**

In the study villages the average age of adopting birth control methods during the last two decades was 27.58 years. The averages for 1960's and 1970's were 28.94 and 26.66 years respectively. The average number of children of the adopters at the time of adoption, and in December 1979, were 3.75 and 5.00 respectively. More than 80 per cent of the adopters

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\*Bangladesh Academy for Rural Development, Kotbari, Comilla, November 1980.

were illiterate. The average age of marriage of the adopters of birth control methods during the 1960 and 1970 decades were 13.47 and 14.16 years respectively. The average number of living children of those, who adopted birth control methods was 5. The average age of those who adopted birth control methods during the 1960 decade as 28.94 years, and this average age was decreased by 2.28 years for those who adopted during the 1970 decade. The number of children of the adopters at the time of first adoption as 3.93 during the 1960 decade, and this average number was 3.56 during the 1970 decade.

#### **Programme implication and Recommendations :**

The performance of the clients in those villages would be better as compared to the overall situation of the country. However, the study would give some idea about family planning programme principally aiming at the reduction of birthrate of those who had knowledge about the birth control methods and had adopted the methods at least for once during 1961 to 1978.



### **AN ECONOMIC EVALUATION OF THE OPERATIONAL WORKING OF THE UNION FAMILY WELFARE CENTRES OF GHATAIL THANA UNDER TANGAIL DISTRICT AND THOSE IN SOME OTHER SELECTED THANAS OF BANGLADESH**

**Mohammad Kayser Hossain\***

#### **Objectives :**

- i) To determine the cost effectiveness, i.e., economy in the construction of Family Welfare Centres by the local project committee in relation to those constructed by the C & B Department through tender, and to determine which system is more suitable and acceptable for extension to remaining thanas ;
- ii) To evaluate the personnel engaged in the Family Welfare Centres, the administrative procedures adopted, types of jobs performed and the degree of local participation ; and

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\*Jahangir Nagar University, Savar, Dhaka, November 1980.

- iii) To ascertain the main acceptors, to determine the most welcome, suitable and accepted measures or devices of birth control for rural people, and the main problem of service delivery system and also to determine any effective pattern of supervisory system.

#### **Methodology :**

For the study four categories of centres were selected, which were constructed by the local project committees and 4 others were selected from those constructed by C & B Directorate.

The list of fertile couples falling under the two categories of institutions, as mentioned above, were prepared and stratified through the random sampling technique which was adopted to ensure a manageable size of samples.

#### **Findings :**

From economic, efficient and effective implementation point of view the centres constructed by the local project committee appeared to be more desirable than the C & B constructed centres in respect of cost of construction and effective and useful utilization of the space.

There existed two parallel and dual administration at the UFWC from the Health Division and the Population Control Division resulting in inefficiency, lack of effective control and supervision. The personnel in UFWC were inadequate, there were only 3 staff, 1 FWV, 1 MLSS and 1 Aya, who were also inadequately trained. In spite of the shortage of personnel the local project committee had relatively greater efficiency as this was represented by the local leaders.

It was found that oral pill and condom were the most popular devices among the rural people. About 18 per cent males and 30.37 per cent females were found to have been acceptors. It had seemed that the male acceptors did not use any method before 25 years of age, while the females started using contraception between 15 and 20 years of age. Among non-acceptors 4.70 per cent male and 19.20 per cent female complained about non-availability of services. The service delivery appeared to be inadequate.

#### **Programme implication and Recommendations :**

The use of local project committees to construct union FWCs ought to be maintained. The inefficiencies of the dual health and population control administrative responsibility for FWCs must be resolved.

## **THE ULASHI VILLAGES : A SUMMARY REPORT OF THREE VILLAGES STUDIES\***

### **Objective :**

To undertake an in-depth study of the Development Programme in the Ulashi-Jadunathpur area with a view to identifying the wide ranging social, economic and political factors which have bearing on the fruitful implementation of the programme objectives and providing additional training for developing skill in certain areas like data collection.

### **Methodology :**

The three villages from Jessore district of Bangladesh were selected on the basis of the facts that (1) the villages provide a good sample of forward and backward villages, (2) they were not too far from each other, (3) adequate support for the survey was available from the villages and (4) the selected villages included both direct and indirect participants and beneficiaries of the Ulashi-Jadunathpur project.

### **Findings, Programme implication and Recommendations :**

Village Projapati was one of the Swanirvar villages in Jessore district. The average family size was 5.95. For the year 1977, the crude birthrate was recorded to have been about 23 per thousand. The village had among its population 57.79 per cent unmarried, 36.61 per cent married, 4.81 per cent widowed and 0.75 per cent divorced. Mean age at first marriage was 13.44 years. In all, 26 families immigrated into the village. In the field of education, village Projapati had really marched ahead of the other villages of the locality from 27.27 per cent in 1961 to 58.25 per cent in 1978. Occupationally, 44.14 per cent households relied on one single occupation, 35.13 per cent of the households depended on agriculture and 4.50 per cent on business. Annual per capita income in the village was found to be Tk. 1,908.75 which was higher than that of national income of Tk. 1,503. The village had a leader.

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\*National Foundation for Research on Human Resource Development, Dhaka, 1980.

Ulashi was a fairly large village under Sharsha police station of Jessore district. The village had a population of 1,648 in its 253 households. The population growth was found to be 1.6 per cent. There were, in all, 295 married males. The rate of literacy in the village was 21 per cent, 63 per cent of the households depended on agriculture. Employment situation in Ulashi provided an idea about the seasonality in rural employment.

The village had a population of 618 in its 104 families. The average family size (5.94) and the sex ratio were found quite close to the corresponding national figures. But the dependency ratio for the village was higher than the national average. Nearly 42 per cent of the total population reported to have had received some schooling. The Union Parishad leaders of the village had an ambitious target about the reduction of population growth in the village.



## ASSESSMENT OF THE CONTRACEPTIVE DISTRIBUTION PROJECT IMPLICATIONS FOR PROGRAMME STRATEGY

T. Osteria\*

### Objective :

To assess a household delivery system of oral contraceptives and condoms in rural Bangladesh in terms of (a) feasibility of organizing and implementing such a delivery system ; (b) total demand for these contraceptives, and (c) demographic impact.

### Methodology :

The Matlab Cholera Research Laboratory Surveillance Programme covered 234 villages in which approximately 2,60,000 rural people resided in the year 1975. In October 1975 the Cholera Research Laboratory in

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\*Cholera Research Laboratory, Dhaka, 1978.

collaboration with the Ministry of Health and Population Control initiated an extensive house-to-house distribution programme of non-clinical methods of contraception (oral pills and condoms) in 150 villages with a total number of 23,000 eligible women of the Matlab Surveillance Area. The remaining 84 villages with 21,000 eligible women served as the control area where existing family planning services were nominal.

#### **Findings, Programme implication and Recommendations :**

The baseline KAP survey suggested that there existed a significant demand for contraceptive in the rural area. Three months after contraceptive distribution was operationalised, 17.1 per cent of the eligible women claimed to be using oral pills. After 18 months of programme efforts, the prevalence of oral pill use declined to 8.7 per cent. The declining prevalence rates were due to both declining rates of new acceptors and briefer rates of method continuation over time. Eighteen months later, the rate of pill acceptance declined from 24 per cent to 2 per cent. Similarly, oral pill continuation rates declined with each successive cohort of acceptors.



### **PROGRAMME IMPLEMENTATION OF SELECTED PILOT PROJECTS IN FAMILY PLANNING**

**M. Moslehuddin and others\***

#### **Objectives :**

- i) To evaluate the overall achievement of the selected pilot projects;
- ii) to evaluate the impact of the programme on the eligible couples in the selected area ; and
- iii) to study the comparative effectiveness of Government and non-Government pilot projects.

#### **Methodology :**

Three pilot projects, one Government and two non-Government, were purposefully selected. The Government pilot project was the

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\*Centre for Population Management and Research (CPMR), Institute of Business Administration, University of Dhaka, 1981.

Community Based Intensive Family Planning Programme in Sherpur thana of Bogra district and the two non-Government projects were Ghashful MCH and FP Association in Chittagong and the Christian Health Care Project (CHCP) in Dhaka. The study units were the three selected pilot projects and the eligible couples served by the projects. One hundred eligible women (currently married aged less than 50 years) were randomly selected from each project area and thus there were 300 eligible women for the study.

### **Findings :**

Regarding the target achievement of the Government and non-Government family planning programme it was reported that the Government programme achievement was 45 per cent of their target, the Ghashful Association had achieved 50 per cent and the Christian Health Care Project achieved between 50 and 60 per cent and Ghashful reported a drop-out of 36 per cent, CHCP reported about 31 per cent drop-out and the Government programme could not supply any record of drop-out.

The rate of ever-users were found to be 45 per cent, 50 per cent and 57 per cent respectively in the CHCP, Ghashful and Government area, and the mean ages of the ever-users were 27 years, 27.30 years and 27.79 years respectively and in the same order. The rate of current users in the CHCP, Ghashful and Government areas were respectively 25 per cent, 38 per cent and 46 per cent and their mean ages were respectively 28.60 years, 27.13 years and 29.17 years.

To evaluate the performance of the field workers of the various agencies questions were asked about the frequency of home visits of the workers. In the CHCP area 46 per cent of the women reported that there were no field visits during the three months preceding the interview and 38 per cent reported that they were visited within about four weeks' time preceding the time of data collection. In Ghashful area 93 per cent mentioned that the field workers visited the households within about 4 weeks preceding the date of the data collection and a similar report was given by the women of Government project area.

### **Programme implication and Recommendations :**

It was very difficult to generalise from the findings of the pilot projects as because each of the pilot projects had its own typical characteristics and also because the work was done on relatively small areas.

**AN EVALUATION OF THE PATHFINDER FUND  
SPONSORED MENSTRUAL REGULATION  
TRAINING IN BANGLADESH**

**Ghyasuddin Ahmed and others\***

**Objectives :**

- i) To characterise socio-demographic and reproductive health patterns of women who request MRs and women who receive MRs from providers trained with Pathfinder funds ;
- ii) To examine the adequacy of training and clinic facilities ;
- iii) To get a scenario of how the provider handles MR cases ;
- iv) To estimate the number of MRs performed in a two-month reference period by physicians and FWVs trained at Pathfinder Funded training centres ;
- v) To find out the rate of complications and refusals of MR requests made in the said reference period and to find out the nature of complications ; and
- vi) To determine those factors associated with both clients and providers' satisfaction and dissatisfaction.

**Methodology :**

Four clusters of clinics were selected purposefully from five districts, namely, Dhaka, Chittagong, Noakhali, Rangpur and Barisal representing four administrative divisions of the country. The selection was made in such a way that these clinics could provide enough MR cases for the study. MR clients were of two types, retrospective and prospective. Retrospective clients were those who received MR from the study clinic some time during the period between the second and fourth week preceding the date

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\*Sponsorship of the Pathfinder Fund, Dhaka and funded by the Ford Foundation, Dhaka, July 1972.

interviewers' visit to the selected clinics. A woman who requested an MR from any of the study clinics, during the period specified by the interviewing team, was termed as a prospective client.

In addition to the provider of the selected clinics, the study also administered mail back questionnaire to other providers working elsewhere in Bangladesh. A total of 116 physicians, 176 FWVs and 492 MR clients (retrospective and prospective) were the respondents of the study. Face-to-face interviews, mail questionnaire and observations were the three methods of data collection. The data collection period was from December 1, 1981 to April 10, 1982. Data were collected in three phases. Data processing was done through commercial computer facilities.

#### Findings :

Most MR clients (80.7%) were literate. The mean age of the clients was estimated at 27.4 years and most of them (80.9%) were Muslims. Only 13.3 per cent of them were reported to have been involved in economic activities. Except for a few of the MR clients who had been divorced and separated (0.8%) all others were reported currently married. The clients had a mean number of 3.5 living children. Their mean age at first marriage was found higher than the average age at which a Bangladeshi female gets married. About three-fourths of the MR client had no desire for another child. A large number of MR client (58.2%) had tried at least one method of contraception earlier. In most cases the MR clients were either self-motivated or motivated by their husbands in receiving MR (76.8%). A significant proportion of the MR clients had also mentioned the family planning personnel as a source of advice for receiving MR. About one out of every ten MR clients was reported to have received MR once earlier.

Most of the providers were employed in Government or in a semi-Government organization. The proportion of unmarried persons was higher (48.7%) among physicians than among FWVs (17.2%). While giving an opinion on training centres, most of the providers had considered the topics as newly learnt. At least one-fourth of the providers had reported that they were not given training on the application of anaesthesia.

A large majority of physicians (67.8%) and of FWVs (59.8%) had committed that the number of lecture sessions was all right. Most of the physicians and FWVs had stated that there were sufficient number of demonstrations. A sizeable proportion of physicians (22.4%) and FWVs

(31.8%) had suggested the need for an increase in the number of sessions of practice in performing MR. The duration of MR training was stated to have been adequate by most of the providers. However, the suggestion to extend the duration of the training programme to three weeks or more was given by 19 per cent of the physicians and 39.1 per cent of the FWVs.

A shortage of MR clients, lack of supply of MR syringes and lack of adequate space in the clinic were the main problems faced by the MR providers in rendering services. Among the few complications reported by providers, excessive bleeding and vomiting were the two prominent post-MR complications. The complication rate was three times higher (1.2 per physician) if MR was performed in the office clinic rather than in the private clinic. The data on complications from two different sources indicated that there was an under-reporting of complications by providers and there might have been some over-reporting of the same by the client. The rate of refusal was lower when the service was provided in private arrangements. The overall refusal rate was found to be lower for FWVs.

#### **Programme implication and Recommendations :**

In view of some weakness of the training programme, additional training programme, additional training sessions for FWVs accommodating more lecture sessions, and more demonstrations and practice sessions were suggested for the future.

The legal aspects of MR need to be straightened out. There was confusion in the field as to whether MR should be performed or not. It had been found that many supervisors did not cooperate with the providers. Uniform directives shall be needed for the providers and their supervisors in this regard.

There was no doubt that with the availability of the service in many of the THCs and FWCs some of the women, who had received the services through these centres, were saved from the possible disaster of seeking induced abortions through indigenous methods. With training of more providers the whole country should be brought under the purview of MR services.

## DETERMINANTS OF THE UTILIZATION OF MATERNAL CHILD HEALTH SERVICES

Shafiqur Rahman\*

### Objectives :

- i) To identify the knowledge and the attitudes of the consumers toward the MCH programme ;
- ii) To identify the perceived hindrance/constraints in the utilization of MCH services ;
- iii) To identify the factors, as perceived by the consumers, in popularizing MCH services in the community ; and
- iv) To identify the knowledge and the attitudes of the field workers towards MCH and how they perceive the relationship of MCH services and the family planning programme.

### Methodology :

The study was conducted in the districts of Jessore and Tangail where MCH services were provided at different levels for more than one and a half (1½) year before the study. The sample consisted of 1,800 consumers (women who had given birth to at least one child) and 37 entrepreneurs (field workers of the Population Control and Family Planning Division) from the area of two Maternal and Child Welfare Centres located at the district headquarters, 2 MCH units located at the Thana Health complex and 2 Family Welfare Centres located at the unions.

### Findings :

The major obstacles in the utilization of MCH services as perceived by the consumers were :

1. MCH centres were places where one could only visit at the time of problems.

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\*National Institute of Population Research & Training (NIPORT) Dhaka, October, 1981.

2. One's home was the best place for delivery.
3. Delivery at the MCH centres was a matter of shame and the clinic environment was not congenial.
4. Healthy pregnant women and healthy babies did not need to be taken to the centres/doctors etc. for health check-up.
5. Lack of knowledge and the inadequacy concept of services provided in the centres.
6. Long distance had to be travelled and there was lack of company for visit to the clinic.
7. Long waiting time for services.
8. Inadequate supply of medicines.
9. Supply of inferior quality medicines.
10. Unconcerned attitude and misbehaviour of clinic personnel.
11. Demand for money for services.
12. Unfavourable attitudes of the husbands/relatives toward delivery at the MCH centres.

Improvement in the utilization of MCH services, as perceived by the respondents, could be accomplished by :

1. The supply of adequate quantity of quality medicine.
2. Amendments in the attitudes of clinic personnel.
3. Availability of services within close proximity of the residences.
4. Stipulation of quick service.

The field workers except for the family welfare visitors, had vague concept of MCH services provided through different MCH centres. They performed few duties related to MCH services and the majority were ignorant about different aspects of MCH care.

#### **Programme implication and Recommendations :**

Non-utilization of MCH services led to lack of knowledge on availability of services, indifferent attitudes of self and family members on delivery of babies at centres and values on positive health. Inadequate supply of medicine and its poor quality, ill-behaviour of the clinic personnel,

distances that had to be travelled, long waiting time and lack of trained doctors were also some of the important factors for the non-utilization of MCH services.

Continuous training of field workers with effective supervision would probably help to bring about required changes in the attitudes of the field workers, and thus would lead to improvement of motivational work and efficient implementation of programme. A well designed programme embodied with family health education, community participation, home visits, regular opening and closing of centres and adequate quantity of good medicine should be of help to bring about an increase in the utilization of the MCH services. Introduction of the services of trained birth attendants and inclusion of tetanus toxoid in the programme could be expected to reduce maternal and infant morbidity and mortality which might bridge over the credibility gap between the entrepreneurs and consumers which would lead to better utilization of MCH services and improved acceptance of contraceptives.



**SUPERVISORY ROLES OF THANA FAMILY PLANNING  
OFFICERS, FAMILY PLANNING ASSISTANTS  
AND LOCAL FORMAL LEADERS  
Gyasuddin Ahmed and others\***

**Objectives :**

- i) To investigate the mode and extent of supervisory roles performed by the TFPOs and the FPAs ;
- ii) To find out the degree of job satisfaction of field personnel; and
- iii) To assess the extent of contact of the field personnel with the local influentials.

**Methodology :**

A total of 100 thanas were selected randomly from among the four administrative divisions of Bangladesh. The study aimed at interviewing

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\*February, 1982.

100 TFPOs and an equal number of chairmen ; 200 FPAs and an equal number of Union Parishad female members ; 600 FWAs and 3,600 currently married fecund women. Data were collected on a standardized interview schedule by the trained field workers. The data were collected between mid-October 1980, and mid-February 1981. Collected informations were analysed and processed at the Bangladesh University of Engineering and Technology Computer Centre, Dhaka.

### **Findings :**

The study revealed that about two-thirds of the TFPOs had low mode of supervision and that they could not maintain 21 days a month scheduled visit to the fields. Eighty six per cent of the respondents believed that such a long visit schedules could not be maintained for various reasons. However, 94 per cent unions were reported to have been visited by TFPOs during a period of six months. Within the same six-month period 35 per cent FWAs reported about the TFPOs visit and their activities. The mean number of TFPOs visit was 2.1 in one month as reported by the FPAs and 12.3 in three months as reported by the FWAs. Supervisory activities of the FPAs were found to have been mainly involved in checking cards. Most of the FPAs reported to have had made joint visits. On the other hand 50 per cent of the fecund women remained attended by the family planning workers. Job satisfaction was found to have been positively related with the positions.

### **Programme implication and Recommendations :**

The study has some indication of unsatisfactory supervisory roles. The due reason may be in the lack of understanding of the concept of supervision among the family planning workers. So further steps need to be taken to enhance the understanding and activities of the FP workers. The supervisory activities of the TFPOs and FPAs need further attention of the authorities.



**FIRST FOLLOW-UP STUDY ON USE OF WOMEN'S  
VOCATIONAL TRAINING PROGRAMME FOR  
POPULATION ACTIVITIES**

**Mamta Mannan and others\***

**Objectives :**

- i) To measure the impact of the programme of the use of women's vocational training for population education and control ;
- ii) To measure the change in fertility behaviour resulting from exposure to vocational training programme ;
- iii) To determine the level of knowledge, attitude and practice (KAP) of family planning of the population under study ; and
- iv) To evaluate the performance of the programme in terms of the income-generating activities of the participants.

**Methodology :**

In the first follow-up survey three types of women were interviewed, namely, (i) trained women, who were trained in various income-generating activities and family planning through the women's vocational training programme and they were directly exposed to the programme, (ii) programme village women, who were residing in the programme village, did not receive training but were indirectly exposed to the programme (programme village group) and (iii) non-programme village women, who were residing in a village not under the coverage of the women's vocational training programme and who were not at all exposed to the programme (control group.)

A multi-stage sampling procedure was followed to select the sites and random sampling procedure was used for choosing the respondents. Successfully interviewed respondents were 521 ever-married trained women out of which 257 were currently married, 655 currently married

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\*External Evaluation Unit, Planning Commission, September 1982.

programme village women and 312 currently married non-programme (control group) village women. A quasi-experimental pretest was used to the extent that pretest (Baseline) data were available. When pretest data were not available the 1979 Bangladesh Contraceptive Prevalence Survey (BCPS) data were used.

The evaluation covered a period of almost three years after the programme had been implemented, from June 1976 to October 1979. Data were collected for the study from September to October 1979.

### **Findings :**

The mean age for programme village women and non-programme women was 29.3 years and 30.3 years respectively. Trained women were found to have been more educated than programme village women and non-programme village women. Ninety-nine per cent of the trained women knew at least one method of family planning. Level of ever-use of any method as well as of more effective methods was higher among the trained women than among the others who had been using any family planning methods, the medium duration of current use of the trained women was about 12 months. Knowledge of female methods (particularly the pill and female sterilization of the trained women) was higher than the male methods (particularly the condom and male sterilization). Total fertility rate for trained women was strikingly lower than the untrained women and non-programme village women. Their current contraceptive rate was also higher (31.1%) among trained women.

There was a positive strong association between duration of training and knowledge of MCH (Yule's  $a=50$ ). The longer was the duration of training received the higher was the knowledge of MCH. A higher proportion (72.4%) of those directly exposed to the programme were involved in income-generating activities than the others. So, the higher was the degree of exposure to the programme, the higher was the involvement in income-generating activities.

The major source of motivation to accept family planning for ever-users in both programme and non-programme village was friends and relatives (17.5%) followed by family planning workers, such as, FPAs and FWAs. The proportion of village women motivated by trained women was very low (9.3%).

### **Programme implication and Recommendations :**

The programme should put more effort into convincing the women to continue to use methods for longer span of time. To achieve this regular family planning supplies and services including follow-up should be ensured. From the findings it had been assumed that female methods would continue to be more acceptable to the village women in the years to come. Programme manager should take into account this factor in future planning. Female methods, particularly the pill and female sterilization, should be given more emphasis over others when setting the contraceptive mix target. As the marital status of the trained woman had no effect on income-generating activities, the programme manager should not bother about whether the woman is married or not when deciding whether to accept her for the programme. The duration of training should be raised from three months to six months.

## **POPULATION PLANNING IN THE ORGANIZED SECTOR**

**Abu Naser S.K. Siddiqui and others\***

### **Objectives :**

- i) To assess the levels of knowledge, attitudes and practices of family planning and the impact of project activities on these levels ;
- ii) To find out the fertility level in relation to socio-demographic characteristics ; and
- iii) To study the programme constraints and find out ways and means to overcome them.

### **Methodology :**

In order to achieve the objectives of the study two methodological approaches were used, these were :

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\*External Evaluation Unit, Population Section, Planning Commission, 1982.

- i) A sample survey of the community from the programme area; and
- ii) An observational study on the processes through which the programme was being implemented.

The study included three industrial areas, namely, Shoioshahar in Chittagong, Khalishpur in Khulna and the district headquarters of Bogra. The sample design that was chosen in this case was a stratified on-stage random sampling design. The total labour size under the study was 33,015, out of which 1,800 currently married male labourers were selected from 116 mills at random.

#### **Findings :**

The median age of the labourers was found to be 37 years while the median annual household income was Tk. 4,268.

The mean number of surviving children was estimated to be 3.1, and the current contraceptive practice rate was found to be 17 per cent and the total fertility rate was estimated to be 4.91.

#### **Programme Implication and Recommendations :**

Lack of clinical facilities and supply of inferior quality of contraceptives were the main constraints of the programme. The motivators were not provided with transport facilities due to which motivational work of the programme suffered to a great extent. The problem was acute in case of female motivators.



## USE OF RURAL MOTHERS' CLUBS IN POPULATION ACTIVITIES

Abu Naser S. K. Siddiqui\*

### Objectives :

- (i) To measure the degree to which the programme, as designed, had been implemented in order to assure accountability ;
- (ii) To provide a lasting description of the programme ; and
- (iii) To provide a list of the possible causes of the programme effects to any future evaluation of impact.

### Methodology :

The basic methodology that was employed to determine the impact of the programme was the sample survey and as done by administering structured questionnaire. The survey adopted a combination of multi-stage and stratified random sampling.

Out of 19 programme thanas, 8 thanas from 4 districts were chosen and from there 8 mothers' clubs were selected at random. There were experimental groups and control groups. The total number of respondents were 914 out of which 471 respondents were from the control area.

Besides the formal sample survey, observation study was conducted to measure the success of the programme implementation.

### Findings :

The median age of the members of the mothers' clubs was 26 years while the median household income was Tk. 6,565. The mean number of surviving children was 3.42, the rate of current user was 37 per cent and TFR (marital) was estimated to be 4.679 in respect of members of the mothers' clubs. The median income earned through participation in the trade activities was Tk. 50 only.

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\*External Evaluation Unit, Population Section, Planning Commission, 1982.

### **Programme implication and Recommendations :**

There was a lack of own building facilities of the mothers' clubs and inadequate inputs. There was no revolving fund in the mothers' clubs to provide loan to the members of the clubs so that they could materialise their training in income-generating activities. The trade instructors were ill-paid and not properly trained themselves.



## **USE OF AUDIO-VISUAL VANS IN POPULATION ACTIVITIES**

**Abu Naser S.K. Siddiqui and others\***

### **Objectives :**

The main objectives of the study were to evaluate the effectiveness of programme components in terms of their impact on knowledge about, attitudes toward, and practice of, family planning; total programme performance in terms of decline in age-specific fertility.

### **Methodology :**

In order to achieve the objectives of the evaluation two methodological approaches were used. They were :

1. a sample survey of the community from the programme and control areas ; and
2. an observational study on the processes through which the programme was being implemented.

A quasi-experimental design for the study was developed to assess programme impact. The design included a pre-test and post-test in an experimental and comparison area. In order to test causal relationship multi-variate analysis using statistical controls was also employed.

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\*External Evaluation Unit, Population Section, Planning Commission, 1982.

To conduct the study a total of 1,520 households were surveyed which were selected randomly from 32 villages in eight thanas of four districts, i.e., eight villages in each district. The total number of respondents was 1,236 males and 1,375 females.

**Findings :**

In the programme area median age for males was 38 years and for female it was 28 years while the median annual household income was Tk. 5,669.

The total fertility rate (marital) was estimated to be 5.29 and the gross fertility rate was calculated to be 176 per thousand. The current user rate was found to be 19 per cent in the programme area while in the non-programme area the rate was found to be 14 per cent. The programme managed to project 4,660 film shows.

**Programme implication and Recommendations :**

Day-light-vans were found to be very expensive to operate and were unable to get to all destinations. Many respondents found the films boring, especially upon repetition. Coordination between the Mass Communication Department and the PC Division was found to be poor.

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## AN EVALUATION OF IRDP PILOT PROJECT IN POPULATION PLANNING AND RURAL WOMEN'S COOPERATIVE

Pradip Kumar Muhari and others\*

### Objectives :

- i) To measure the change in the levels of KAP and fertility :
- ii) To find out the patterns of women's participation in economic activities ; and
- iii) To make an assessment of the family planning activities of women's and men's cooperatives.

### Methodology :

The study was, primarily, an impact evaluation with little emphasis on implementation aspects of the project. The design included pre-test and post-test measures in experimental and comparison area. The study coverage was eight IRDP pilot thanas which were selected from 15 IDA assisted pilot thanas. A total of 31 villages—14 baseline survey villages and 17 new-representing women's cooperative villages and non-implemented villages were included in the sample. In the selection of villages, different groups of females and males were made following the stratified random sampling technique.

Data were collected from 1,278 currently married women (out of which 240 were women cooperative members) and 963 males. The data collection period was April 1980, and the processing was done by computer. The unit of analysis was either female or male. Female data set were analysed by village type and group type as well.

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\*External Evaluation Unit, Population Section, Planning Commission, 1982.

## **Findings :**

### **1. KAP :**

The women's cooperative members, on average, could name three methods in an unprompted situation and five methods on being prompted. Furthermore, they know the correct use of methods.

The proportion of women having positive attitudes toward family planning was the highest (91.2%) among women's cooperative members. The prevalence rate of the women's cooperative members was 34.2 per cent. A "before and after" measurement revealed that the prevalence rate of women's cooperative members had fallen by 7.5 per cent (41.7% to 34.2%). The rate was still higher than the national prevalence rate calculated for 1979 (15.6%) and 1981 (18.6%).

### **2. Fertility :**

Marital total fertility rate was higher (5.8) as compared to some other groups of women. Data on mean number of children ever born (4.6) and living children (3.8) further substantiated the trend in a pronounced manner. These unpredicted findings of women's cooperative members may be the functions of age (mean age being 31.2 years).

### **3. Participation in Income-generating Activities :**

Statistical measures of association opposed to our data indicated, without question, that there was a clear-cut positive relationship ( $\gamma = .46$ ,  $P < .05$ ) between women's exposure to the programme and participation in income-generating activities. Most of the women's cooperative members (81%) had received loans through the cooperatives at least once.

### **4. Family Planning Activities of Women's and Men's Cooperatives :**

The study had got very few ever-users who were reportedly motivated by women's cooperative members. Men's cooperative members played an insignificant role as motivators.

Slightly over one-fifth (22%) of the men's cooperative members and two-fifth (43%) of the women's cooperative members had said that they

were given family planning lessons through their respective cooperatives. About two out of five ever-users were reported to have got supplies from women's cooperatives.

### **Programme implication and Recommendations :**

#### **1. Training Alternatives :**

Family planning lessons through women's cooperative training sessions were being given, but not enough. The programme had a moderate impact in providing in depth knowledge of more methods of contraception. For a more considerable amount of impact, the training sessions in village cooperatives regarding this subject need to be more heavily emphasized. The concerned thana level officers should make surprise visits to enquire about the daily happenings of the weekly sessions. Organizing weekly sessions should be considered as one of the performance criteria in distributing input and resources to the cooperatives. The role of women's cooperative organisers as depot-holders in distributing contraceptives was commendable, but still they could not earn reputations as counsellors for providing services to those who experienced side-effects and complications following contraceptive use. Efforts should be made to equip the family planning organizers of the women's cooperatives with appropriate training on measures to be taken to prevent side-effects and complications.

#### **2. Income-generating Activities :**

The programme had not, till then, been able to involve most of the women in income-generating activities which yielded an immediate return resulting in identifying the lack of economically profitable projects and lack of capital. Instead of suggesting to the women's cooperative members about uniform economic activities irrespective of region, the thana level programme managers should identify feasible and viable economic projects which the women's cooperative members could take up for cash income.

Women of higher income groups got higher amount of loan. Instead, the policy should be that the relatively poor section be given priority over higher income groups for the larger amount of loans so far as the short and medium term loans are concerned, depending upon the effective utilization of loan.

### 3. Selection of Target Group :

The relatively better-off rural women had joined the women's co-operatives. We maintain that some mechanism must be evolved to encourage more and more "less privileged and distressed women" for joining the cooperatives.



## AN EVALUATION ON 'MOBILE POPULATION EDUCATION TEAM'

Bazlur Rahman and others\*

### Objectives :

- i) To train about 2,000 teachers from 19 thanas about population and the national family planning programme. These teachers would not only teach about population but also give leadership in their communities to influence "folks" towards the National Family Planning Programme ; and
- ii) Each of the teachers was to get at least six "folks" to take up family planning.

The goals of the evaluation of the "Mobile Population Education Team" was to see how they changed knowledge about, attitudes towards, and practices of family planning; how they changed fertility ; and how many teachers were involved in the programme.

### Methodology :

#### 1. Evaluation Design :

The evaluation design used in the study may be referred to as the true control group post-test design. Nineteen thanas were selected randomly

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\*External Evaluation Unit, Population Section, Planning Commission, 1982.

from 19 districts. These thanas were scattered throughout the country. So this group of 19 thanas was treated as the experimental group. Those thanas randomly selected out of the remaining ones, where no programme had been operating, were considered as the control group.

## **2. Sampling Design :**

Multi-stage random sampling was followed. Four districts, one from each of the four divisions, were selected randomly at the first stage. Then two villages from each of the four programme thanas of the four selected districts were randomly chosen. The total number of selected programme villages was, therefore, eight. At the third stage, 75 households were selected from each of the eight selected programme villages. The total number of households of the programme area was thus  $75 \times 8 = 600$ .

From the control thanas belonging to each of the four selected districts, one village was randomly selected. The selected number of control villages was thus four. From each of the four selected villages 75 households were selected on a random basis. The total number of control households were, therefore,  $75 \times 4 = 300$ .

## **Findings, Programme Implication and Recommendations :**

Fifty per cent of the programme women knew five or more family planning methods, while only 43 per cent of the non-programme women knew them. Ninety-six per cent of the programme women knew about the oral pill, while of the non-programme women only 90 per cent did. More programme women (23%) knew the proper use of five or more methods than did the non-programme women (13%).

The programme was not strong enough to bring about a positive change in attitudes toward family planning except in case of ideal family size. A greater percentage of the programme women (13%) were in favour of three or less number of children as their ideal family size than did the non-programme women (9%).

Current contraceptive use was higher (16%) among programme women than among non-programme women (13%). In the programme area 32 per cent of the women were ever-users, as against 20 per cent in the non-programme area.

Fertility ( TFR=7.6) in the programme area had been found to be greater than fertility in the non-programme area ( TFR=5.9 ). Completed family size was found to be 4.4 in the programme area as against 3.9 in the non-programme area.

Each teacher on an average recruited 28 clients, much higher than the required number of six.



**EVALUATION OF MULTI-SECTORAL TRAINING PROGRAMME  
OF THE TRAINEES AND ITS SUBSEQUENT IMPACT ON  
ACCEPTANCE OF FAMILY PLANNING BY THEM  
AND PERFORMANCE IN THE FIELD**

**S. Waliullah and others\***

**Objectives :**

- i) To evaluate the training programme of the multi-sectoral trainees ;
- ii) to evaluate the field performance of the workers ; and
- iii) to evaluate the impact of training on their subsequent acceptance of family planning.

**Methodology :**

To obtain the sample of workers of the Ministries of LGRD ( IRDP ). Social Welfare and Agriculture, four districts, one from each division, each for each of the three programmes, were selected on judgement basis. The selected districts were Dhaka, Kushtia, Bogra and Noakhali. Within each district one or two thanas having all the three programmes were again purposefully selected, Four districts and the selected thanas were Kaliakair and Arai hazar in Dhaka, Meherpur and Alamdanga in Kushtia, Sherpur in Bogra, Raipur and Chhaganaiya in

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\*National Institute of Population Research and Training (NIPORT), Dhaka, 1982

Noakhali. For the sample of labour and Industrial Welfare Workers some factories in Chittagong were selected. The sample of workers in the remaining Ministries were covered by mailed questionnaire. A sample of 183 workers was targetted but the attained sample size was 129 due to a majority non-responses from among the mailed questionnaire respondents. A sample of 1,200 currently married women from the seven thanas mentioned above and a 100 from among the wives of the factory workers in Chittagong were also interviewed. Hence, the sample of currently married women came to 1,300.

### Major Findings :

Except the population projects of the Ministry of Labour, and the Ministry of Education no other Ministries under multi-sectoral programme had organised regular and comprehensive training programmes with appropriate training content using modern methodology of training.

All Ministries had training units with varying capacity to meet the need of the population field. Training of workers of the Agriculture Ministry in family Planning was the most inadequate. Regular transfer of officers-in-charge of population programme was not matched with training of the new officers.

It was found that the knowledge of family planning methods varied to a great extent among the workers of various Ministries. The workers of the Ministry of Information, on the average, had the knowledge of only four methods whereas the Labour Welfare workers, on the average, knew nine methods. The rate of ever-users was very high among workers of almost all the organisations. The rate of current use of family planning methods was the highest ( 100 per cent ) among the workers of the Ministries of Information and Labour Welfare and the lowest ( 33.33 per cent ) among the workers, of IRDP.

The proportion of workers having specific training on family planning was very high in almost all the organisations except in case of the workers of Agriculture where only about 30 per cent of the workers had specific training on family planning studies. Most of the workers stated that their training of family planning was very much useful and again, most of them felt the need for further training.

Workers of almost all the organisations mentioned, in varying proportion one or the other types of family planning programme

related assignments, while 21 per cent of the Agricultural workers reported that they did not have any assigned family planning responsibility.

Nearly 50 per cent of the currently married women indicated that they had ever used a method. The highest number of ever-users were found to be in the Social Welfare Project area (68.50 per cent) and the lowest was found to be in the Agriculture Project area (32.25 per cent).

About one-third of the currently married women in the studied project areas were using a family planning method at the time of data collection. The proportion of current users was relatively higher among women of Social Welfare Project area (47.75 per cent), and lowest among women in the Agricultural Project area (17.75 per cent). Among methods currently used ligation was found to take the lead (35.20 per cent) followed by oral pill (32.81 per cent) and condom (16.32 per cent).

The pattern of home visits, carried out by family planning workers was very discouraging. Between 52.75 per cent and 72 per cent women of different project areas reported not to have had any visits from family planning workers three months prior to the date of interview.

#### **Programme Implication :**

The purpose for which multi-sectoral programme was initiated had achieved much too little, with two honourable exceptions. The time had come to review the multi-sectoral approach of population control programme with a view to reducing the number of ministries to be involved in the programme, and to develop a centrally organised training programme with content and method from which individual training modules could be developed. The multi-sectoral departments concerned need must be impressed upon to integrate the family planning programme in its main programme and its complete management process.

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# 7

## Mortality : Infant and Maternal Mortality In Relation to Fertility

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### MATERNAL MORTALITY IN RURAL EAST PAKISTAN

C. Gescho and others\*

#### Objective :

To know the maternal mortality rate and amount of pregnancy wastage.

#### Methodology :

The vaccine trial area in Matlab, Comilla district, was chosen as the place for study, for the SEATO Cholera Research Laboratory maintains an upto-date census by their staff. The field surveillance teams, consisting of sanitary inspector, health assistants and village dais, reported all deaths to the office at Matlab, within about 2-6 weeks of death. The teams visited the households of the deceased women. An attempt was made to contact the closest relatives of the deceased for questioning. The information was recorded and a probable diagnosis of the cause of death was made on the spot. The period of study covered the year beginning December 1, 1967 and ending November 30, 1968. The number of live-births was also recorded.

#### Findings :

Within the time of 10 months (writing this report), a total of 89 cases had been visited or investigated. There were 26 maternal deaths, 10 in primiparous and 17 in multiparous women. The total number

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\*East Pakistan Research and Evaluation Centre, Dhaka, November 1968.

of live-births in the ten-month study period has 3,594 and the census revealed 34,043 women in the reproductive age group of 10-50 years. The maternal mortality rate was found to be 72.3 per 10,000 live-births or 7.2 per 1,000 live-births. At the time of interview, each dead multiparous woman had an average of 6.4 pregnancies and there were 3.5 children alive. The reproductive wastage was somewhere around 46 per cent and abortions were obviously under-reported. Religion had seemed to have no influence on the number of deaths. It was concluded that maternal mortality was high and pregnancy wastage was enormous.

**Programme implication and Recommendations :**

Services to young children must be better utilized. Family planning services should be offered and their benefits stressed particularly when they have attained the desired number of servicing children.



**FERTILITY, INFANT MORTALITY AND FAMILY  
PLANNING IN RURAL BANGLADESH**

**John Stoeckel and others\***

**Objectives :**

- i) To evaluate the impact of family planning programme upon pregnancy and fertility ;
- ii) To construct rates of pregnancy, fertility and infant mortality; and
- iii) To assess the relationship between religion, socio-economic status and norms of family size and knowledge, attitudes, and practice of family planning.

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\*Oxford University Press, Bangladesh, 1973.

### **Methodology :**

Data were collected through interviews of 1,600 currently married women in Comilla Kotwali thana. A two-stage sample design was used. In the first stage 20 villages were selected from a total of 247 on the basis of probability proportional to size. The second stage consisted of listing of currently married females in each village and then randomly selecting 80 married females from each of these villages.

### **Findings :**

The rate of pregnancy and fertility declined by 27 per cent between the years 1958 and 1967 ; infant mortality declined by 21 per cent between 1958 and 1967 but was still high at 139 infant deaths per 1,000 births ; differentials in family planning knowledge, attitudes and practice (KAP) were found between various segments of the population which might signal the beginning of a transitional phase in family planning practices and an ultimate reduction in family size. However, the overall level of practice (4%) of family planning was far too low to warrant optimistic speculation about an immediate reduction in fertility ; norms governing desired family size were found to be the most significant factors affecting the practice of family planning. Since the norm was still 4 children per couple, desired family size was, still then, too high even if mass practice of family planning was going on to result in a growth rate below 2 per cent per year.

### **Programme implication and Recommendations :**

The importance of conducting family planning programmes in a developmental context which was aimed at altering the social structure (i.e inclusion of women in the labour force, social security raising the age at marriage, creation of additional occupations through technological innovations, raising the level of education, etc.) could, in turn, affect these norms by reducing the importance of children as an economic asset in the form of labour as well as the old age security. The structural changes proceeded rather slowly but after evaluating the present findings with regard to the proportion practising family planning, the current level of fertility and norms of "desired family size", the family planning programmes had also been rather slow in producing an impact.

**THE EFFECTS OF CHILD MORTALITY EXPERIENCE ON  
SUBSEQUENT FERTILITY : AN EMPIRICAL ANALYSIS  
OF PAKISTAN AND BANGLADESH DATA**

**A.K.M. Alauddin Chowdhury\***

**Objective :**

To assess the importance of the child-replacement motivational response to child death experience, when biological effects were controlled adequately in Pakistan and Bangladesh.

**Methodology :**

The Pakistan data came from the National Impact Survey conducted in the years 1968-69. The survey was an extended KAP type, containing detailed information regarding retrospective pregnancy histories, demographic and socio-economic characteristics and family planning knowledge, attitude and practice of female respondents. The sampling frame of the survey consisted of households in Pakistan excluding tribal areas. A national probability sample was obtained by two-stage procedure stratifying for urban and rural residence. Altogether, about 2,500 households were selected. The study examined the reproductive pattern of 2,910 currently married women (under ages of 55 years) who were interviewed in the selected households. Bangladesh data came from the vital registration system maintained by the Cholera Research Laboratory in the rural population of about 12,000 persons residing in Matlab thana, Comilla district.

A census of that population was completed in early 1966, beginning on May 1, 1966, the registration of births, deaths, and migrations was instituted by trained ORL field staff. The data employed in the investigation came from longitudinal observation of 5,263 women who had delivered live-births during the year 1966-67. Subsequent birth and child death reports which had occurred to those women and

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\*The Ford Foundation, 1975.

their children during a four-year period of observation from May 1, 1966 to April 1970 were matched by computer. However 27 cases were excluded from the study. The analysis was, therefore, confined to 5,263 women with reasonably complete information.

### **Findings :**

These two Islamic nations had moderately high level of fertility. The crude birthrates were 49 and 46 per 1,000 for Pakistan and Bangladesh respectively, The total fertility rates were nearly identical, slightly over 6 live-births per woman. This population also had moderately high levels of mortality. Both crude death rates were about 15 per 1000 and the infant mortality rates were above 120 per 1000 live-births.

Childhood (1-4 years) death rate in Bangladesh was about 25 per 1,000. The fertility and mortality indices of these two populations were, therefore, very similar. An average woman experienced about 6 live-births over reproductive life. Of these births, about 12 per cent died in infancy and the current contraceptive use in Pakistan was only 11.2 and 5.2 per cent respectively. The corresponding figures for Bangladesh were 6.4 and 3.7 per cent. In all groups, the number of ever-born children was higher in Bangladesh than in Pakistan. In Pakistan and Bangladesh, a consistently positive relationship was demonstrated between the number of ever-born children and child deaths. A common approach was employed previously to examine the cumulative fertility according to child death experience. The method, however, does not exclude the inverse relationship, the influence of fertility on mortality nor does it detach the behavioural effects from the biological effects. Since the risk of infant death, which abbreviates birth intervals, was associated with the reproductive history of a mother, women with child mortality experience were more likely to experience more brief intervals due to the biological effects of subsequent infant death. With these limitations controlled, very little, if any, behavioural influences were observed in the Pakistan and Bangladesh data.

Median birth intervals in Pakistan varied from 35.3 to 41.2 months, increasing with parity, no consistent difference was observed between women with or without previous childlessness. In Bangladesh, the median birth interval for women with a surviving infant was 37.2 months. This was shortened to 24.1 months by an infant death. When intervals with infant death were excluded little or no

behavioural influence was detected among women at the same parity but with varying levels of previous childlessness. The analysis projected that the elimination of infant mortality in Bangladesh would exert a biological effect on fertility through prolonging the average period of post-partum sterility. The magnitude of the depression effect, however, was only 1.6 per cent. This modest effect, moreover, was counterbalanced by an increase of net reproduction due to better survivorship of infants.

#### **Programme implication and Recommendations :**

Future studies dissecting out the actual components of birth intervals (post-partum amenorrhoea, the waiting-time to conception, gestation and the time required for foetal wastage) would permit more precise quantification of mortality effects on fertility.



### **EARLY CHILDHOOD SURVIVORSHIP RELATED TO THE SUBSEQUENT INTER-PREGNANCY INTERVAL AND OUTCOME OF THE SUBSEQUENT PREGNANCY**

Ingrid Swenson\*

#### **Objective :**

To determine the relationship between the length of the inter-pregnancy interval and the early childhood survivorship of the first child of the interval.

#### **Methodology :**

The data were collected from 132 villages of Matlab thana under the old trial area of DSS. The Field Assistants and midwives were assigned for collecting information from mother or from an individual attending the birth of living and non-living.

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\*Scientific Report No. 5, Cholera Research Laboratory (now ICDDR,B), Dhaka, August 1977.

**Findings :**

Childhood mortality was significantly higher among children whose birth was followed by next pregnancy of mothers in less than 12 months compared to children whose birth was followed by the pregnancy of mothers after 12 months. This observation was true when the second pregnancy of the interval results in a live or a still birth. Among children followed by interval less than 12 months, there is no significant difference between those followed by another live-birth or a still birth. These results suggest that the shorter intervals were associated with a lower survivorship of the older child.

However, the period of competition from the second closely spaced pregnancy did not appear to have a significant effect on the survivorship of the older child.

**Programme implication and Recommendations :**

Childsurvivorship is an important factor in the population control strategy. Therefore, information on the matter and its associated reasons would help the parents understand their children's health and their survival. Childhood survivorship information might constitute a major component in the MCH training.

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**FERTILITY INFANT-MORTALITY AND SOCIO-ECONOMIC  
STATUS OF RURAL WOMEN. A CASE STUDY OF THE  
DISTRICT OF CHITTAGONG**

**Sultan Ahmed\***

**Objectives :**

- i) To estimate the important fertility rates, such as different rates of fertility and infant mortality ; and
- ii) To know the problems of married women and their opinion about family planning programme.

**Methodology :**

Four villages were selected from 19 rural thanas of the district of Chittagong using the three-stage sampling method with equal probability in each stage. The thanas had been considered as first stage units, the unions as second stage and the villages as third stage units. Informations from the married women of each selected village were collected by direct interview method using a questionnaire.

**Findings :**

The study indicated that the mean age at marriage increased from 15.7 years to 16.34 years and the demographic rates showed a gradual decreasing tendencies. Births were heavily concentrated in earlier ages (15-29) of mothers but decreasing in the older ages (45-49). Fertility rates were highest among women whose husbands' occupations were agriculture and labour followed by business.

More than 90 per cent of the rural married women had knowledge of family planning but the percentage of the women who supported the programme was about 65 per cent. Only 24 per cent women accepted the programme.

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\*Department of Statistics, University of Chittagong, Chittagong, 1978.

Eighty per cent of the sampled rural married women demanded training facilities in sewing, knitting and handicrafts in order to work to increase their family income.

**Programme implication and Recommendations :**

The small rise in age of marriage and the interest of rural married women on being trained for income-generating activities suggested positive changes with respect to interviewing variables affecting fertility.



**RECENT TRENDS IN FERTILITY AND MORTALITY  
IN RURAL BANGLADESH 1966—1975**

**A. K. M. Alauddin Chowdhury\***

**Objective :**

To find out the trends in fertility and mortality rates of last 10 years of old and new or trial areas under the CRC Programme separately.

**Methodology :**

A complete census was taken in March 1966 in the old trial area and in April 1968 in the new trial area of Matlab. The copies of these censuses were given to the field workers who used them to issue the individual census card to every family. This card included the name of the family, the head of the family by name, age and sex.

A female field worker visited these households and enquired about birth and death daily. A male field assistant supervised from 10 to 15 of these lady field workers and invited each household once in a

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\*ICDDR,B, January 1978.

month. The register of births and deaths and migrations on a standard form was submitted to the senior field assistant who visited the household tri-monthly.

**Findings :**

1. In 1974-76 the mortality rates and fertility declined sharply in association with the increased costs of foodgrains.

2. A reduction of 20 births for thousand population from 1973 to 1975 was observed in both the old and new trial areas. Crude death rates and infant mortality increased sharply in 1974 and remained high in 1975.

3. The rate of annual increase declined to 0.9 per cent in 1975 compared to 3.0 per cent for the 5 years preceding 1970. It was found that age groups of women had lower fertility rates in 1974 and 1975. This observation, together with the reported contraceptive use rate of 2.4 per cent for married women aged 15-44 in October 1975, suggested that modern contraceptives did not play a major role in the fertility decline.

4. Still birth ratio had remained fairly constant over 6 years. The foetal wastage ratio were higher in 1975.

5. The fertility reduction and mortality increase in Matlab area appeared to be strongly related to the increased price of foodgrains.

**Programme Implication and Recommendations :**

Matlab was not very different from other rural areas of the country. Thus, if same factors could be applied to other rural areas a significant data which reflected changes in mortality increase and decline in fertility could be found out.

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# **INFANT AND CHILD MORTALITY EXPERIENCE AND FAMILY PLANNING ACCEPTANCE RATES IN BANGLADESH—A CASE STUDY OF RETROSPECTIVE SURVEY DATA**

**Abdus Satter\***

## **Objective :**

To provide an estimate of replacement and insurance effects of children, and to examine the validity of child survival hypothesis vis-a-vis family planning practice.

## **Methodology :**

The survey was a retrospective survey. Two unions—Karian and Pabna in Rajshahi district were chosen for the purpose of field works of the study. Complete enumeration of the 10 villages was done. The questionnaire were divided into two parts. The first part consisted of numbering of households and finding out the marital status, the education level and the income from occupation. The second part was meant only for ever-married men and women living in each household for the collection of data on the history of ever-born children, infant and child mortality, spontaneous abortion, still births and current pregnancy as well as to extract information about their attitudes toward knowledge and practice of family planning. In order to derive the conclusion out of the collected data parity progression ratio, percentage and numerical measures were adopted.

## **Finding, Programme implication and Recommendations :**

The level of infant and child mortality was estimated from the retrospective infant and child mortality histories of ever-married persons. Findings showed that 44 per cent of the couples had not experienced child death, 22 per cent had experienced death of at least three children. The sample was found to have knowledge about some methods of family planning and the practice rate among the respondents was found to be 28 per cent.

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\*University of Rajshahi, Bangladesh, 1978.

## NEO-NATAL MORTALITY PATTERN IN RURAL BANGLADESH

Shafiqur Rahman\*

### Objective :

To identify different causes of neo-natal deaths in rural Bangladesh.

### Methodology :

Ghatail, a police station of Tangail district, was selected for the study. Three out of 11 unions were selected on simple random sampling basis. The study expected to follow about 1,200 pregnancies to get a representative sample of neo-natal deaths. A list of pregnant women of the year 1970 starting from January to December 31 was included in the study for follow-up. Only those women who had had live-birth were visited at the end of 28 days in their respective homes by trained interviewers to study the status of the child. In all, 1,130 women were followed at home and out of them 984 were interviewed. The rest, 146 women could not be interviewed because many of them had foetal wastage, they delivered child with the help of trained TBAs or could not be found even after several visits.

An ordinal scale was developed to determine the maturity status of the new born and was categorised as poor, fair and good. Every interviewer was given a check list mentioning signs/symptoms of common diseases which could be the causes associated with or result in death. The following were considered as the causes of neo-natal deaths :

- i) Birth injury and congenital abnormalities ;
- ii) Respiratory infection ;

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\*Presented at the Bi-annual Seminar on Family Planning Operations Research, held on 16th and 17th September 1981 at National Institute of Population Research and Training (NIPORT), Dhaka.

- iii) Respiratory Distress Syndrome (Atelectatic lungs, hyaline, membrane and cause of neo-natal asphyxia) ;
- iv) Tetanus neo-natorun ; and
- v) Others (diarrhoea, fever etc.).

**Findings :**

Mean number of living children of the respondents was 2.96. Mean number of pregnancies was 3.96 where median age of the last child per woman at the time fo IMP was 3.4 years.

Among the neo-natal deaths 17.4 per cent were due to birth injury, 13.0 per cent from respiratory distress syndromes, 17.4 per cent from the injections of the respiratory system, 39.1 per cent from tetanus neo-natorum and 13.1 per cent due to other causes diarrhoea, fever, etc. The neo-natal death rate was found to be 70.1 per cent per thousand live-births.

Among the neo-natal deaths 13 per cent occurred within 24 hours, 17.4 per cent within 1-3 days, 34.78 per cent from 4-6 days and 34.78 per cent from 7-28 days after birth.

The percentage of deaths among the babies was 4.0 per cent in general, while amongst the pre-mature babies it was 22.22 per cent. This showed that neo-natal deaths in the pre-mature group was very high.

Neo-natal tetanus was the principal cause of death in all the groups. Neo-natal death rate was 27.4/1,000 live-births. The rate for pre-mature infants was 80.2/1,000 compared with 17.1/1,000 for mature infants. It was noted that the rates of death, due to any of the causes, were higher for the pre-mature infants. It was noted that 77 per cent of the premature infants died within 6 days of birth compared to 45 per cent of the mature infants during the same period.

The deaths of neo-natals at different ages of mothers showed a definite trend. The higher was the age of mothers the higher was the number of neo-natal deaths. The death rates of neo-natals when the mothers' age was 35 years and above was 13.33 per cent whereas when the ages of the mothers were within the groups of 15-19 and 20-24 years, the death rates were 2.86 per cent and 3.7 per cent respectively. The percentage of deaths of neo-natals in the age group of 15-19

years was somewhat lower while in the age group of 25-29 years it was much higher than expected.

#### **Programme implication and Recommendations :**

Neo-natal tetanus could be eliminated by a two-pronged attack giving tetanus toxoid immunizations to pregnant women and training the TBAs in safe birth practices.

Proper attention to ante-natal care and nutrition education should also have a positive impact on reducing pre-maturity. Provision of better domiciliary post-natal care through the improved functioning of the out-reach services of the FWC would gradually improve health education for mothers and treatment of respiratory and other infections in the neo-natals. Since neo-natal deaths were directly related to parity, the promotion of family planning practice would also have a beneficial effect.



## **FERTILITY AND CHILDHOOD MORTALITY ESTIMATES FOR BANGLADESH BASED ON PREGNANCY HISTORY DATA**

**S.M. Shafiqul Islam\***

#### **Objectives :**

- i) To estimate the levels and trends in fertility and infant and child mortality for Bangladesh based on the direct method of pregnancy history analysis ; and
- ii) To explore the applicability of the pregnancy history method in the context of Bangladesh.

#### **Methodology :**

The study was based on the data collected in the Bangladesh Fertility Survey (BFS) in the years 1975-76. The survey was based on a

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\*A thesis submitted in partial fulfilment of the requirements for the degree of Master of Arts in demography at the Australian University, Canberra, March 1981.

three-stage sample design of non-institutional households for both the rural and urban strata. A sample was drawn independently in all the three stages. The total number of households selected in the sample was 6,145 out of which 4,626 were rural and 1,519 were urban. However, 4,437 households were successfully contacted in the rural areas and 1,418 in the urban areas.

#### **Findings, Programme implication and Recommendations :**

Fertility in Bangladesh was found to have declined substantially due to the liberation war in the year 1971 and the widespread famine of 1974

A consistent rural urban fertility differential was found in Bangladesh. Fertility was lower in the urban areas than in the rural areas. Apart from sampling variations due to a relatively small number of the respondents in the urban areas, urban fertility appeared to be better reported. Fertility schedules from different studies in Bangladesh were generally characterized by a peak level in the age group of 20-24 years. This was mainly due to early age of marriage. On the whole, fertility rate derived in the study might have been affected by the procedure of imputing the dates of birth of about 99 per cent of the respondents and 88 per cent of their children that were not reported in calendar years and months.



**INFANT MORTALITY IN RURAL BANGLADESH AN  
ANALYSIS OF CAUSES DURING NEO-NATAL  
AND POST-NEO-NATAL PERIOD**

**M. Shafiqul Islam and others\***

**Objective :**

To examine the causes and some of the factors of neo-natal post-neo-natal mortality and to identify the population at the highest risk of death.

**Methodology :**

A cohort of 1,351 infants born between July 1976, and June 1977 was taken from the Teknaf Field Surveillance Area of ICDDR,B for the study.

The data were collected by the male field assistants who visited every household once in a week or so. The field workers usually interviewed the female or the senior member of the house to collect the relevant information. The data were analysed in order to determine the variations in neo-natal and post-neo-natal mortality according to causes of death, delivery complications, age of the mother and the size of the family.

**Findings :**

Among the major findings tetanus (31%), prematurity (22%) and congenital illness (12%) were found as the common causes of neo-natal deaths. Pneumonia (33%), malnutrition (18%), diarrhoeal illness (10%) and fever (9%) were the most important causes during the post-neo-natal period. Delivery complications among mothers and the now born were found to be significant determinants of neo-natal mortality. Infant mortality was the highest for mothers below the age of 20 years

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\*Report No. 44, International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, 1981.

and the lowest for those between 25 and 29 years of age. The size of the family was directly related to the mortality rates.

Brass and Rashed (1980) had applied the P/F ratio method and the Gempert relational model for adjusting the observed fertility rates derived by using the pregnancy history data from the Bangladesh fertility survey of the years 1975-76. They had found that the adjusted total fertility rates for the period 1971-75 had been about 7.5 and 7.4 using the P/F ratio method and the Gempert's relational model respectively. The national estimate of total fertility of 5.9 which was derived in the study during the period 1971-75 and which had closely agreed with the corresponding estimate obtained by Redrigues and Cleland (1980:23) was about 25-27 per cent lower than the adjusted estimate during the same period.

Infant mortality rates had shown, in general, a downward trend during the period of 1955-69. A temporary halt in the declining trend in infant mortality was observed during the period 1970-73. The devastating cyclone in the year 1970 and the liberation war in 1971 might have been the reasons for the temporary rise in infant mortality. Infant mortality rates from the pregnancy history data were suspected to have been under-reported by at least 10 per cent in the 5-year period preceding the survey (Boguc 1980, 154). The levels of infant mortality per thousand live-births in the early 1970's as found in different studies using the Brass technique ranged from 152 to 156. The national estimate of infant mortality of 139 during the period of 1970-73, derived from the study, was about 9-14 per cent lower compared to the Brass mates. Nevertheless, the estimates found in the study closely agreed with the corresponding estimates derived by Arriaga (1980) from the pregnancy history data. The national estimate of childhood mortality of 0.208 between birth and exact age of 5 during the period 1965-69 was also about 6 to 13 per cent lower than the corresponding estimates obtained in other studies using the different methods of estimation.

#### **Programme implication and Recommendations :**

Infant and childhood mortality was generally found to be lower in urban areas than in rural areas. Those informations, presumably, had reflected the better health and medical facilities in the urban

areas. Infant mortality was found to be generally higher for males than for females. This had demonstrated the universally higher biological risks of male-death in infancy. On the other hand, mortality of children aged 1-4 years was found to be generally higher for females than males. Higher female than male mortality of children between ages 1 and 4 was found in a number of South-asian countries.



## **THE EFFECT OF TRADITIONAL BIRTH ATTENDANT AND TETANUS TOXOID IN PRODUCTION OF NEO-NATAL MORTALITY**

**Shafiqur Rahmar\***

### **Objective :**

To study the effect of trained TBAs compared to the use of tetanus toxoid in pregnant women on the incidence of Tetanus neonatorum.

### **Methodology :**

A study to evaluate the effect of trained TBAs and tetanus toxoid in reduction of neo-natal mortality was conducted in 9 unions of Ghatail thana. A group of 3 unions in each category was used for experimenting with tetanus toxoid and TBAs, while the remaining 3 unions were used for control. The study sample consisted of 713 women who had given birth to live children and had delivered with the assistance of trained TBAs, 771 pregnant women who were fully immunized against tetanus and had delivered a live-birth child, and another 998 women who had delivered live-birth child and were attended by untrained TBAs or relatives and did not have tetanus toxoid.

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\*National Institute of Population Research and Training (NIPORT), August 1981,

**Findings :**

Neo-natal mortality rates in the control, TBA and toxoid areas were observed to be 85.17, 23.84 and 38.91 respectively. Neo-natal death rates at two different periods, under 4 days after birth and between 4-28 days after birth were 28.24 and 71.76 for control area, 7.01 and 16.83 for TBAs area and 23.35 and 15.56 for toxoid area.

Neo-natal death rates due to tetanus in the control, TBA and toxoid areas were observed to be 24.05, 5.61 and 1.29 respectively. While death rates due to birth injury and respiratory distress syndrome were 13.03 and 12.02 in the control area, 4.21 and 2.81 in the TBA area and 11.67 in both cases in the toxoid area.

**Programme implication and Recommendations :**

It was evident that while tetanus toxoid immunization during pregnancy would reduce tetanus neo-natorum, training of the TBA was more important to reduce overall neo-natal mortality due to birth injury and respiratory distress syndrome. Furthermore, respiratory infections and gastro-enteritis could also be reduced through careful post-natal follow-up by the trained TBA.

Even though many deliveries were being attended by family members, it would be worth while, through health education to encourage patients to seek ante-natal care and to promote the training of female village health workers as TBAs.

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## **INFANT DEATHS, DETERMINANTS AND DILEMMAS A COHORT ANALYSIS FOR RURAL BANGLADESH**

**A. K. M. Alauddin Chowdhury\***

### **Objectives :**

The purpose of the study was to assess the influence of demographic and social factors in neo-natal and post-neo-natal mortality. It was also intended to translate the socio-economic status into the differentials of diet, amenities and health behaviour which usually affect mortality.

### **Methodology :**

The data for the study was compiled from the vital registration system of the ICDDR,B at Matlab, a rural thana of Bangladesh. A total of 19,534 births occurred between May 1966 and April 1970, in the rural area under study. Out of these infants, 1,427 died within the 28th day of life. The IMR was, therefore, 119 per 1,000. Investigators of the surveillance area collected the information about these deaths through special surveillance cards. The death rates were measured and analytically compared with different socio-economic status of the parents. For the purpose of determining infant mortality and its differentials it was classified into three stages such as early neo-natal, late reason and post-neo-natal.

### **Findings :**

Results indicated that among the infant deaths, the rate of neo-natal deaths was higher and it maintained a 'U' shape pattern for early neo-natal and post-neo-natal mortality with the order of births. It was also indicated that female children had lower mortality in the early neo-natal stage and that the male children had lower mortality in the post-neo-natal stage. Infant mortality at any stage maintained a direct

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\*Scientific Report No. 46, International Centre for Diarrhoeal Disease Research.

relationship with the mother's previous experience of child mortality. Variation in infant mortality with socio-economic status was not observed.

**Programme Implications and Recommendations :**

Identification of high risk group among the infants in rural Bangladesh had an important consequence. Such information was relevant for the Bangladesh primary health care development policy in rural areas. The information should be vital for the formulation of health policies to curb infant mortality. Further study based on a bigger representative sample from the whole country might help to determine the true picture of infant mortality.

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**ABORTION AND MATERNAL MORTALITY**

**S. Firoza Begum\***

**Objectives :**

The study was conducted in order to evaluate the magnitude of the health care problem arising out of incomplete abortion admissions in hospital, which could be useful in formulating appropriate health and medical policies for management and prevention of threatened and incomplete abortion.

**Methodology :**

The sample of 1,003 cases of complicated abortions, during the period of May 1977 to August 1978, was interviewed through structured questionnaire. Out of the 1,003 patients, 243 (24.2%) had reported to have deliberately induced the abortion process and 760 (75.8%) were reported to have had spontaneous abortions.

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\*Bangladesh Fertility Research Programme, December 1981.

### **Findings :**

1) A higher proportion of spontaneous abortees, 68.8 per cent lived in urban areas compared to the induced abortees 56.8 per cent. 55.3 per cent patients were in the age group of 20 to 29 years, 48.9 per cent were married and 75.6 per cent patient illiterate.

2) It was found that the induced abortees had on average 5.4 live-births while the spontaneous patients had 2.2. Induced abortees wanted an average of 0.2 additional children in comparison to an average of 2.9 desired by spontaneous abortees. About 69.9 per cent did not have an abortion before, 89.4 per cent patients were categorised as incomplete abortions. About 83.3 per cent of the spontaneous abortees and 28.4 per cent of the induced abortees did not have any major complication at the time of admission. About 36 per cent induced abortees had scopsis or pelvic infection and 23.8 per cent spontaneous abortees had excessive bleeding. In most of the abortions ( 77.8%), procedure prior to hospital admission was oral abortificients ; solid object introduction through the cervix was applied on 18.9 per cent. Antibiotic therapeutical treatment was given to 22.1 per cent of the spontaneous abortees and 99.2 per cent of the induced abortees respectively, and oxytocies was given therapeutically to 22.4 per cent and 3.7 per cent of the spontaneous and induced abortees respectively. Mortality rate for induced abortees was 49 per 1,000 and for spontaneous abortees it was 6 per 1,000. On follow-up 14 patients were readmitted from one to six nights with complications. Contraceptives practice rate before abortion for the induced abortees was 60.5 per cent compared to 17.2 per cent of the spontaneous abortees. Post-abortion contraceptive practice rate was 96.0 per cent for the induced abortees and 38.6 per cent for the spontaneous abortees.

### **Programme implication and Recommendations :**

The data indicated that both the induced and the spontaneous abortees should be the targets of intensive family planning evaluation as a part of study.



**REDUCTION OF NEO-NATAL MORTALITY BY IMMUNIZATION OF NON-PREGNANT WOMEN AND PREGNANT WOMEN IN RURAL BANGLADESH**

**Makblesur Rahman\***

**Objective :**

To ascertain the effect of tetanus injection on pregnant mother.

**Methodology .**

The study analysed neo-natal mortality rates for a cohort of live-births born between September 1, 1978, and December 31, 1979. The data of the study were collected from the field station of the ICDDR,B located in Matlab thana in Comilla district. In the analysis, live-births registered in the MCH-FP and the comparison areas during the period of September 1, 1978, through December 31, 1979 were identified. These records were linked with death records of 28 days' period following birth. The acceptance of tetanus vaccination during 1974 ambiguous trial by methods of these live-births was ascertained from the 1974 vaccine registry books. The acceptance of vaccinations during the 1978-79 programme was obtained from FWVs field registers which contained in addition to other information an up-to-date list of pregnant women, their census, identification number and date and number of tetanus injections.

**Findings :**

The analysis of the study revealed that for the infants of the mothers who had received two tetanus injections 48-64 months before giving birth, the neo-natal mortality rate was about 15 per 1,000 live-births which was lower than the rate for the infants of the mothers who did receive tetanus immunization. On the other hand, it had appeared

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\*Scientific Report No. 41, International Centre for Diarrhoeal Disease & Research Dhaka, Bangladesh, January 1981.

that immunization of women during pregnancy with two tetanus injections tended to reduce neo-natal mortality rates by about one half and mortality within 4-14 days by about 70 per cent. Acceptance of one injection during pregnancy did not appear to provide protection against tetanus neo-natorum.

A comparison of still-birth rates showed that the women immunized with two tetanus injections during pregnancy had significantly lower still-birth ratio in comparison to the never-immunized mothers.

**Programme implication and Recommendations :**

Tetanus immunization ( two injections ) during pregnancy should be regarded an essential part of pre-natal case.



# 8

## Others (Migration, MCH)



### DEMOGRAPHIC CHANGE AND TRENDS OF FOOD PRODUCTION AND AVAILABILITIES IN BANGLADESH (1960—74)

Lincoln C. Chen and others\*

#### **Objective :**

To re-assess the food and population situation in Bangladesh with particular focus on the implication for development policy.

#### **Methodology :**

A descriptive analysis had been made of the food and population situation in Bangladesh over the period of 1960 to 1974. Trends of food production and population, the implication on caloric and protein consumption, relationship of food and land utilization with density and distribution were compared and analysed.

#### **Findings :**

There had been a perceptible decline of food availability over the past 15 years. From an average of 0.6 million tons per year in 1960-65, imports climbed to 1.4 million tons in 1970—75. In 1960-65 imports represented only 6 per cent of the total availability. By

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\*Published by the Ford Foundation, Dhaka, October 1975

1970-75, the contribution had increased to 12 per cent. This indicated that in the short-run, the economy of Bangladesh would be heavily dependent on foodgrain imports.

In addition to quantitative declines of caloric and protein consumption there was evidence of a qualitative shift toward protein composition of inferior quality. This negative trend underscored the need for agricultural policies to develop food sources other than cereals. During the years 1960-65, the average per capita daily caloric consumption was estimated at 1,715. Of this amount, cereals contributed 90 per cent. By the 1970s, however, a noticeable decline (6 per cent from 1960-65) in caloric consumption was noted. The decline was observed in nearly all food groups but cereal was primarily responsible for the reduction. In the 1970s, wheat was contributing to the percentage of cereal calories. By 1965-70, protein levels declined modestly and the fall accelerated in the early 1970s. By 1970-74, protein intake dropped by 6 per cent. Again, protein consumption matched the standard of 1960, but the level declined to about 40 grams in the early 1970s.

The population had been redistributing itself through internal migration from high to low density districts. Internal migration acted as an "escape valve" releasing population pressure from high density regions and reducing somewhat the impact of the deteriorating food situation in those regions.

There was evidence that the absolute and relative number of the rural and urban poor increased. Domestic food production failed to keep up with food demand generated by rapid population growth over the past 15 years. As a result, there had been a perceptible decline of per capita food availability and consumption.

Finally, while the short-term outlook was bleak, the food situation in Bangladesh over the long run could brighten considerably, regardless of the progress in agriculture. However, long range food demand would not be met unless rapid population growth could be curbed.

#### **Programme Implication and Recommendations :**

It was the general agreement that over the long run a balance of food supply and demand shall not be achieved without an immediate,

substantial and sustained reduction of rapid population growth. Therefore, a breakthrough both in agricultural and demographic field was and would be needed to feed the nation sufficiently at present and future. The Government should utilize the modern technology in full to help achieve the goal of self-sufficiency in food. The constraints in nature and culture, which inhibited the productivity, should be eliminated in order to ensure better yield.



## **DEMOGRAPHIC CRISIS : THE IMPACT OF THE BANGLADESH WAR OF LIBERATION (1971) ON BIRTHS AND DEATHS IN A RURAL AREA OF BANGLADESH**

**George T. Curlin\***

### **Objective :**

To investigate the impact of one recent crisis, the 1971 Bangladesh War of Liberation, on births and deaths in Bangladesh.

### **Methodology :**

Data were collected by the Cholera Research Laboratory in Matiab thana.

### **Findings :**

During 1971, food consumption probably fell to a near starvation level of 12 ounces. The nutrition survey conducted in May 1972, showed that the proportion of severely malnourished children had nearly doubled over the five base years (1966-67 to 1970-71) and the crude birth-rate averaged 45.0. During the year of the conflict (1971-72), there was no detectable change in the birthrate. A small but significant decline of the rate to 41.8 was recorded in the year following the disturbance. By 1973-74, the birthrate had recorded fully. In the war-year, death

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\*The Ford Foundation, Dhaka, 1975.

rate climbed sharply to 21.0 per 1,000, 37 per cent higher than the five year average. Over a seven-year period, the study population increased from 112,711 to 132,797 which was equivalent to an average annual growth rate of 23.7 per 1,000 and less than the average crude rate of natural increase during the base years. This was attributed in part to two abnormal years (1971-72 and 1972-73) when the rate of natural increase declined.

In May-July and August-October 1971, quarterly birthrates remained within the range of the five previous years but the rate for November 1971 and January 1972 exceeded the upper limit. Thereafter, the rate fell and by early 1973 it returned to within normal limits. Between 1966-67 and 1970-71, the general fertility rate fell from 233.7 to 191.1 per 1,000 and the total fertility rate declined from 6.7 to 5.9 births/woman. Similarly, the reproduction rates declined by 12 to 17 per cent over the same period.

During the year of the war, the infant mortality rate rose to 146.4, 15 per cent above the three base averages. The actual number of deaths (2,688) in 1971-72 exceeded the projected number (1,820) by 868.

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## **FAMILY PLANNING IN BANGLADESH : AN EMPIRICAL INVESTIGATION**

**Ismail Sirageldin\***

### **Objective :**

To critically examine the response of Bangladesh's population as of 1968-69 to the National Family Planning Programme in terms of the pattern and extent of knowledge and practice of family planning.

### **Methodology :**

The analysis was based on cross-sectional data obtained from a national survey of 3,088 married women conducted in Bangladesh in the years 1968-69.

### **Findings :**

It was evident from the study that there were constraints on both the availability of services and the level of demand. The findings clearly indicated that even among the few who did not have serious cultural constraints in terms of practising some methods of birth control, the necessary knowledge for effective use was lacking. The programme with its relatively large inputs did not reach the target couples whose need for family planning seemed to be immediate.

There was a larger reserve of future intentions that were also highly related to programme inputs. The important point was that even if we had taken current use and expected future use based on reported intentions, the total expected demand would not have been large enough to generate the desired fertility reductions in Bangladesh.

### **Programme Implication and Recommendations :**

Serious efforts that go beyond family planning and that explore more critically the cultural and environmental factors that determine family size and fertility behaviour shall obviously be needed in Bangladesh.

## **DEMOGRAPHIC SURVEILLANCE SYSTEM—MATLAB VOLUME FIVE—VITAL EVENTS, MIGRATION AND MARRIAGE**

**Ludo T. Ruzicka and others\***

### **Objectives :**

- i) To give a summary overview of the vital events migration, marriage and divorces recorded in 1976 with a descriptive analysis of the results ;
- ii) To give a description of marriage and divorce patterns in the years 1975-76 ; and
- iii) Selected cross-tabulations of the recorded events.

### **Methodology :**

The present volume was a part of a series describing and analysing the annual results of the DSS-Matlab.

### **Findings :**

The caption of the figures and tables were elaborately detailed and closely related to the contents, they accompanied.

A total of 2,63,507 population enumerated at the 1974 census and there was an increase of 1,187 persons between July, 1, 1975, and July 1976, and the number of deaths recorded was 3,850. In 1976, 11,265 live-births were registered out of 12,684 marriages recorded in the DSS. The causes of death, pregnancy termination, live-births, migration, marriages and divorces had clearly been defined in the report.

### **Programme implication and Recommendation :**

The book would be a valuable source of primary data.



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\*Cholera Research Laboratory, Dhaka, 1976.

## **DOUBLE ROUND SURVEY ON PREGNANCY AND ESTIMATES OF TRADITIONAL FERTILITY RATES**

**A.K.M. Alauddin Chowdhury\***

### **Objectives :**

To investigate a new method of pregnancy prevalence survey to determine the traditional fertility rates for the next 12-month period in addition to rates for the past 12-month period.

### **Methodology :**

The study was based on the population taken from 10 sample villages situated in CRL field station at Matlab. A survey was conducted in those villages to detect the fecund marriage women aged below 50 years and to collect information on socio-economic background and pregnancy status of those women. Another survey was conducted among the same group of women to detect the live-births out of the pregnancies and new conceptions. With the help of the two-round survey the fertility estimates were computed by using a mathematical formula and the estimated fertility and the fertility out of vital registration were compared.

### **Findings :**

The report included detailed theoretical discussions on the pregnancy prevalence survey method. The fertility estimates were computed by using data from both the sources, such as, the survey and vital registration. Result indicated that the CBR computed by these two methods were almost same. It was 31.1 in registration system and 31.3 in the prevalence survey. However, the pregnancy prevalence survey as a new method of fertility determining technique was found as good as the registration system.

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\*Cholera Research Laboratory (now ICDDR,B) Sr. No. 1, Dhaka, Bangladesh, 1977.

### **Programme implication and Recommendations :**

The method may be adopted in determining fertility rates of certain area or of the whole country at any time instead of adopting vital registration or waiting for national census data. The success of any F.P. Programme may be checked by applying this technique in any experimental area.



## **MIGRATION STATUS AND URBAN FERTILITY IN BANGLADESH (A SAMPLE STUDY IN CHITTAGONG CITY)**

**A. Matin Khan\***

### **Objectives :**

- i) To study the fertility differential among different classes of migrants ;
- ii) To measure the urban-rural differences in propensity to migrate ; and
- iii) To gather information about attitudes toward knowledge and practice of family planning.

### **Methodology :**

To select a random sample of areas, Chittagong was divided into 300 blocks of which 10 blocks were chosen for the study. Data were collected by administering questionnaire.

### **Findings :**

Of all the 510 households interviewed, only 40 (78.4%) were urban migrants. Out of 78.41 per cent migrants, 70.59 per cent came from rural areas.

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\*Institute of Statistical Research and Training, Dhaka University (sponsored by University Grants Commission), 1977.

The minimum percentage 7.25 per cent of migrants was recorded during the year 1951, and from 1956 onward a steady upward trend of migration was observed. The highest percentage (26.75%) of arrival was during the period 1971-75.

Transfer in service (26.25%), prospect for better employment (22.75%) and expansion in business (21.75%) seemed to be the main reasons for migration. The most important migratory motives were economic. About 54 per cent of the total respondents came to find jobs in the city.

The average household income of the migrant families was Taka 981.42 per month. The crude birthrate for the migrants was 32.5 per 1,000 of the population. The general fertility rate for the non-migrant wives was 191.8 per 1,000 women in the ages ranging from 15-49 years and that of the migrant was 146.7 per 1,000.

It was found that 70 per cent of non-migrant (native) wives were illiterate and 31.50 per cent of the migrant wives were in that group. The percentage of higher educated wives among the locals was only 9.09 per cent while that in the migrant class was much higher, 31.25 per cent.

For native wives, average number of children ever born was 5.06. Illiterate wives gave birth, on an average, to 5.42 children, while higher educated wives (matriculation and above), on an average, gave birth to 2.35 children. For migrant wives, the average fertility was 3.79 while the average fertility for illiterate wives was 4.32 children and for the higher educated, it was 2.52 children. It was found that only 39.09 per cent of the native wives had favourable attitudes toward family planning while 75 per cent of the migrant wives supported family planning. The percentage of native couples who ever practised family planning method was lower (25.45%) than that of the migrant couples (68%).

#### **Programme implication and Recommendations :**

It appeared that the high economic motivation of migrant families had favourable impact on the practice and they actually practised family planning to a greater extent than the locals in the study population.



**DEMOGRAPHIC SURVEILLANCE SYSTEM—MATLAB  
VOL. 4 : VITAL EVENTS AND MIGRATION**

**Ludo T. Ruzicka and others\***

**Objective :**

The objective of the report was to present the longitudinal registration of births, deaths, marriages, divorces and migration in the demographic programme of the Matlab field station.

**Methodology :**

The results of the Demographic Surveillance System (DSS) in Matlab thana under Comilla district for the calendar year 1975 were presented in three sections: (a) summary overview of the vital events, migration, marriages and divorces recorded in 1975 with a descriptive analysis of the results, (b) a detailed study of the demographic implication of the economic crisis of 1974-75 in the DSS area and (c) selected cross-tabulation of the recorded events.

The present volume was a part of a series describing and analysing the annual results of the DSS-Matlab.

**Findings :**

The estimated population size as of July 1, 1975 was 2,59,194 out of which 1,32,251 were males and 1,26,943 females, yielding a sex ratio of 104.2. 5,393 deaths and 8,347 pregnancies were recorded. A total of 14,000 people had left the DSS area. During the year preceding the study 2,795 marriages and 681 divorces had been recorded. The causes of death, divorce, migration etc. had clearly been defined in the report.

**Programme implication and Recommendation :**

The report should be a valuable source of primary data.



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\*Cholera Research Laboratory, Dhaka, 1978.

## DEMOGRAPHIC SURVEILLANCE SYSTEM—MATLAB METHODS AND PROCEDURES\*

### **Objective :**

The monograph described the containing Demographic Surveillance System (DSS) of the former CRL field station situated at the Matlab police station in Comilla district of Bangladesh. It briefly reviewed the history of surveillance in that area and described the main features of the area and the characteristics of the people.

### **Methodology :**

The field station conducted special census in its area from time to time and maintained other vital registration records. The census information and other registrations were maintained by the 290 Female Field workers (FFW) and 16 Male Field assistants (MFA). The field activities were usually supervised by other senior staff. The Demographic Surveillance System had a four-tier structure involving over 300 full-time workers.

### **Findings :**

The paper clearly described the techniques and procedures of data collection and its preservation. Lists of codes and registration forms were appended for the information of the users of the data gathered by the DSS at the end of the report. The average household consisted of persons residing in homes built of owner floors, jute-stick wall and thatched roofs. An average household owned about some acres of land.

### **Programme implication and Recommendations :**

Demographic Surveillance System is an important technique to monitor the magnitude of population growth. The system developed in the Matlab field station was a unique example which effectively worked in the soil of Bangladesh. The Government may establish few such field stations at different strategic points to monitor the direct effect of FP activities now prevailing in the country.

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\*Cholera Research Laboratory, (now ICDDR,B); Dhaka, Bangladesh, March 1978.

## DEMOGRAPHIC SURVEILLANCE SYSTEM—MATLAB

Lado T. Ruzicka and others\*

### Objective :

To present the annual results of the DSS in Matlab area.

### Methodology :

The surveillance system consisted of two types of operations:  
(1) continued registration of vital events, marriage and divorces, and  
(2) cross-sectional censuses taken at different points of time.

Four censuses were taken in various areas that were under surveillance at one time or the other, namely, the old trial area in 1966 and 1970, the new trial area in 1968 and DSS area in 1974.

The results of the census taken between 22 April and 4 July 1974 in 228 villages of the then continuing DSS were described and analysed in this volume. The contents were divided into eight sections, (i) method and definitions used in the census, (ii) population size and distribution, (iii) sex and age structure, (iv) marital status, (v) religion, (vi) education, (vii) occupation, and (viii) family size and structure. The appendices contained the census schedule, instruction for the enumerators, code list of the census returns and list of the village under DSS with the enumerated population by census month.

### Findings :

Selected tabulations were added in a separate annex to the report containing the summary of the socio-economic data collected during the

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\*Cholera Research Laboratory, Dhaka, 1978.

census, housing condition (i.e. the number of rooms and materials with which the houses and roofs were constructed) and the sources of water for varied uses. The data were collected for each household and the tabulations were self-explanatory.

**Programme implication and Recommendation :**

The report was a valuable source of primary data.

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**DEMOGRAPHIC SURVEILLANCE SYSTEM—MATLAB  
VITAL EVENTS AND MIGRATION-1974**

**Lado T. Ruzicka and other\***

**Objective :**

The main objective of the monograph was to furnish only selected cross-tabulations which might be utilized by health and population researchers.

**Methodology :**

The monograph was a part of a series describing and analysing the annual results of the demographic surveillance system (DSS) of the former CRL field station situated at the Matlab police station. The volume presented the information on vital events and migration in three consecutive sections such as, (a) a summary overview of the vital event and migration recorded in the year 1974 with a descriptive analysis of the results, (b) a detailed study of mortality differentials between males and females, and an analysis of the then prevailing patterns of marital fertility and (c) selected cross-tabulations of the recorded events.

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\*Volume 3, Scientific Report No.11, Cholera Research Laboratory (now ICDDR,B), Dhaka, Bangladesh, March 1978.

## **Findings :**

The DSS maintained records of 228 villages with a population of 2,63,507 during the 1974 census. The population of the area had increased during 1974 by 4,587 persons, representing a growth rate of 2.6 per cent a year on the average. Among 1,972, 875 persons 1,182 males and 1,963 females had moved into the DSs area. The migration into and out of the DSS area ended up with a net loss of 2,367 persons. The reasons of such migration had clearly been illustrated graphically in the report. The reproduction had continued to display typical features of high fertility moderate mortality. Birthrate in 1974 was 42.9 live-births per 1,000 of the population and the crude death rate was 16.5 per 1,000 of the population, which, at best might have been described as moderate. There were 4,362 deaths recorded in the DSS in 1974, more than half of them (2,451 or 56.2 per cent) among infants and young children under the age of five years.

Infant and child mortality was, till then, very high in Bangladesh in general and the DSS area was no exception. Out of 1,000 live-births of that year 137.9 were lost during the first year of life, the majority of them during the first month of life. The risk of death during the first month after birth was 30 per cent higher for male than for female babies (87.9 in contrast with 67.8 deaths per 1,000 live-births for male and female babies respectively.). Between the ages 1 and 4 years mortality of girls exceeded that of boys by, on an average, 80 per cent. From the life tables based on the 1974 mortality data it had appeared that only at the ages of 35 to 60 years women had slightly lower or almost equal mortality as men. As a result, the life expectation of females at birth was, in 1974, more than four years shorter than that of males.

The food shortage may have contributed to the high mortality in the last four months of 1974. The captions of the figures and tables were agreeably detailed and closely related to the contents they accompanied.

## **Programme implication and Recommendations :**

Demographic Surveillance System was an important technique to monitor the magnitude of population growth. The system developed in the Matlab field station was a unique example. The Government might establish a few such field stations at different strategic points to monitor the direct effect of Family Planning activities prevalent in the country.

## **SURVEY OF HEALTH, MCH AND FAMILY PLANNING INFRASTRUCTURE IN BANGLADESH\***

### **Objectives :**

- i) To identify and locate the existing Health, MCH and family planning facilities in the country ; and
- ii) To collect comprehensive information of these facilities on staff, equipment and supplies, physical condition, services offered, possibilities of improvement/modification etc.

### **Methodology :**

The study was a descriptive type. Since the primary objective of the survey was to prepare a comprehensive inventory of health, MCH, and family planning facilities in the country with special emphasis on those in the rural areas, the survey included such facilities except the following : (i) eight medical college hospitals, (ii) Institute of Post-Graduate Medicine, (iii) Shahid Suhrawardy Hospital, (iv) Military Hospitals, (v) Cholera Research Laboratory, (vi) Mohakhali Chest Diseases Hospital, (vii) Bangladesh Rifles Hospital, and (viii) Commercial establishments.

### **Findings :**

In all there were 3,363 health, MCH, and family planning facilities in the country, excluding Medical College hospitals, IPGM, Military hospitals, CRL, BDR hospitals, Chest Disease hospital, Suhrawardy hospital and Commercial establishments. It included hospitals, Thana health complex/Thana health centres, Rural dispensaries/Union health sub-centres, Family Planning clinics/Sub-centres/Family Welfare centres, Maternal and Child Welfare/Maternal Child Health centres and other types of Health, MCH and family planning centres.

The facilities belonged to different organisations, such as, Health Division, Population Control and Family Planning Division, other

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\*Population Control and Family Planning Division, Bangladesh, 1978.

Government and semi-Government organisations, local Government bodies (Zilla Board, Union Parishad, Pourashava) and voluntary organisations. Number of facilities under different organisations were : of the total facilities, Health Division owned 54.6 per cent, Population Control and Family Planning Division had 22 per cent, other Government, semi-Government and local Government organisations together had 11.2 per cent and voluntary organisations offered 12.2 per cent.

There were 13 District hospitals belonging to Health Division. There were 39 Sub-divisional hospitals found functioning. The Sub-divisional hospitals were located at the Sub-divisional headquarters and belonged to Health Division. There was also urban facility which had 20 to 125 beds and 1 to 4 physicians. There were also 31 other hospitals. These included T.B. Hospital, Mental hospitals etc. There were 188 operational Thana Health complexes; 120 were under construction and land had been selected for another 31. Thana Health complex was the standard facility for rural areas located at the thana headquarters. It provided preventive and curative health care services with in-patient and out-patient facilities. There were 1,268 dispensaries of health division found functioning ; 19 dispensaries were completed but not functioning, 16 were under construction and land had been selected for another 87. There were 53 urban and 518 rural F.P. clinics and MCH centres functioning. Fifty-eight were complete, but not functioning, 49 were construction and land was selected for 35 and all of them belonged to PC and FP Division.

There were 40 urban and 23 rural MCH centres found functioning. There were another 52 urban and 40 rural other Government, Semi-Government and local Government hospitals found functioning ; 71 urban and 236 rural hospitals, belonging to voluntary organisations, were also found functioning.

#### **Programme implication and Recommendation :**

It was a basic source book for health planners and resarchers.



# **INDIGENOUS BIRTH PRACTICE IN RURAL BANGLADESH AND THEIR IMPLICATIONS FOR A MATERNAL AND CHILD HEALTH PROGRAMME**

**Shushum Bhatia and others\***

## **Objectives :**

The work was undertaken to investigate the traditional practices associated with pregnancy, child birth and the post-partum period before embarking on a village based MCH-FP programme in a rural area of Bangladesh.

The monograph intended to investigate the traditional taboos and practices associated with pregnancy, child birth and puerperium in the villages of Matlab thana in Bangladesh and to compare the findings with traditional child-bearing practices prevalent in some Asian countries.

## **Methodology :**

The study was conducted in the field station of ICDDR,B at Matlab thana of Comilla district in Bangladesh. The data were collected in cooperation with the 80 Female village workers (FVW) who were undergoing training in the basic aspects of human reproductive contraceptive methods, side-effects and follow-up.

The FVWs collected the information through a specially designed format developed by the authors and through personal supervision of more than 60 deliveries. Information about their dietary habits and tabooed food was also gathered. About the same number of post-partum reports were also obtained from FVWs. The information was in descriptive manner.

## **Findings :**

The findings included two case studies of delivery, one was normal and the other complex. The authors also described the traditional

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\*Published in Scientific Report No.26, International Centre for Diarrhoeal Disease Research, Bangladesh, Dhaka, Bangladesh, July, 1979.

practices adopted during delivery, and maternal and child care after delivery. The post-partum practices including breast feeding and child nutrition were also described. The study also examined the similar practices prevailing in the East and South-east Asian countries.

#### **Programme implication and Recommendations :**

The possible implication of the study was discussed and setting up of MCH and FP training programmes were suggested in the rural Bangladesh with limited financial, technical, health and manpower resources. In order to improve the health of mothers and children in the rural areas, establishment of health centres was recommended. The Government might train the traditional birth attendants for rural health facilities in the villages.

The incidence of neo-natal tetanus would be one of the several indicators that could be used to determine the improved quality of ante-natal delivery and post-natal care.



### **CHILD-SPACING AND BIRTH CONTROL PRACTICE IN RURAL BANGLADESH : A CASE STUDY**

**Samad Abedin\***

#### **Objectives :**

- i) To determine the level of fertility and to estimate the child spacing from the cumulative reproductive performance ;
- ii) To evaluate the observed child-spacing and the desired birth interval ;
- iii) To investigate the level of practice of birth control methods ;  
and
- iv) To examine the relationship among child-spacing, stage of life, marriage group, number of children and birth order.

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\*Department of Statistics, University of Rajshahi, November 1979.

**Methodology :**

The survey was conducted in two villages of Haripur union in the district of Rajshahi, Bangladesh. Three separate schedules were used in the study. Schedule I was concerned with listing and numbering of households in the study villages ; schedule II was related to collect statistics for household, family and socio-economic background and schedule III was meant for the enumeration of individual respondents on various aspects needed for research. The total number of households enumerated included 701 nuclear households, 144 joint and 53 extended households.

**Findings :**

Fertility level in rural community was high enough. The CBR, TFR and GFR were respectively 0.0431, 6.398 and 0.2248 (0.372762). Average number of children ever born per ever-married and currently married women were 4.148 and 4.156 respectively.

The observed child-spacing obtained from the data was 35 months on the average. Only 8.4 per cent of the married women of reproductive ages were currently using methods of birth control. Oral pill was found to be the well-accepted birth control device while injection was a well-known method. It was observed that for young women who had enjoyed a short duration of marriage and, in particular, were without any children the proportion of using of contraceptives among them was relatively low.

**Programme implication and Recommendations :**

A significant relationship between child-spacing and birth-control practice reflected that women of the study community were used to the practice of family planning to lengthen birth interval at different stages of life.

It had appeared that older couples used contraceptives when they had already a large number of children. If the programme planners wanted to attain  $NRR=1$  by 1990 efforts should be made to get young couples to practise family planning.

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## NUPTIALITY IN RURAL BANGLADESH

Barkat-e-Khuda\*

### Objective :

To examine the marriage customs and pattern in rural Bangladesh.

### Methodology :

The data were collected from the village Sree Ballavpur by two sources (i) household census and (ii) marriage history.

The household census covered persons in the village. There were 1,466 persons, roughly 50 per cent of them were females. The data on marital status and age at marriage of every person were collected through census. But a detailed marriage history had been collected on a sample basis. In total 167 households were selected for the purpose of the study, with proportional allocation to the size of the stratum (landless 0.01-1.0 acres, 1.01-2.0 acres and greater than 2 acres). All ever-married persons belonging to the households were interviewed. In total 261 males and 321 females were interviewed. The male and female respondents were interviewed by male and female investigators respectively.

### Findings :

Marriage was almost universal. Permanent celibacy was virtually absent in Bangladesh. The proportion of currently married was quite high. The age at marriage had remained low, although it was slowly rising with time. However, the findings from the Sree Ballavpur suggested that people there generally preferred a relatively low age at marriage. Males reported 25.9 years and 16.2 years for son and daughter respectively ; while females had reported 23.8 years 14.6 years for son and daughter respectively. It indicated that females preferred a higher age at marriage for both sons and daughters by about 2.1 years and 1.6 years respectively. It was higher than the earlier preferences.

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\*Economics Department, Dhaka University.

The slight rise in the age at marriage of females might have been due to (a) higher costs associated with dowry payment, (b) lack of suitable groom and (c) higher schooling for females.

At any age the proportion of females whose marriages were dissolved were higher than that of males. This was due to the male-oriented and male-dominated marriage market, age structure of the population etc. The incidence of widowhood of women took place only under special circumstances.

#### **Programme implication and Recommendations :**

Marriage was directly related to population growth and identified as one of the important factors. The findings of the study regarding the marriage pattern and customs might be helpful to the programme for policy formulations.

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## **POPULATION GROWTH AND FOOD PRODUCTION IN BANGLADESH**

**M. Kabir and others\***

#### **Objectives :**

- i) To investigate the relationship between population growth and food production in Bangladesh since the 1971 war ;
- ii) Descriptive analysis of food production and population growth situation in Bangladesh over the period 1970-1980 ;
- iii) To investigate and compare the trends in food production and population growth ; and
- iv) To determine the relationship of food production and land utilization to population density and distributions.

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\*Institute of Statistical Research and Training, University of Dhaka, 1981.

### **Methodology :**

Data were collected from various secondary sources. The sources were Bangladesh Agricultural Statistical Year Book 1979-80, Bangladesh Statistical Year Book, 1980, Bangladesh Government and various Research institutes. The information presented here should be viewed with caution because no attempt was made to evaluate the quality of data. There had always been a pessimistic view about the quality of Bangladesh data. However, there was reason to believe that in recent years the collection of information had improved greatly because of improvement in methodology and collection procedures.

### **Findings :**

1) The rapid growth of population superficially did not seem to be as much a health problem as it was a food problem, or, rather an economic problem of importing food from surplus areas with a considerable drainage of national income.

(2) Compared to rural growth rates urban growth rates were consistently high.

(3) Low density districts with higher levels of per capita production would be expected to have higher level of nutritional status.

(4) Poorer families had fewer children and the relationship had been explained in terms of the demand for labour by large farmers, but it might well have been due to biological factors.

(5) The rural-to-urban migration was also important because an increased level of rural-to-urban movement within high density districts would have tended to decrease differential growth rates between higher and low density areas.

(6) Migration from high to low density areas could have been due to population pressure on land in high density districts and more economic opportunities in low density districts, which had higher levels of per capita rice production and fewer agricultural labourers per acre of cultivated land.

### **Programme implication and Recommendations :**

Reduction of population growth must be complemented by agriculture development if the need for adequate supplies to be met in Bangladesh. To achieve that change social reforms would be required to ensure the effective application of modern technology and equitable distribution of benefits.

## **ECONOMIC VALUE OF CHILDREN IN RURAL BANGLADESH**

**Barkat-e-Khuda\***

### **Objective :**

The study examined the economic costs and benefits of children in rural Bangladesh.

### **Methodology :**

The study was conducted in a village named Sree Ballavpur which was about 3 miles away from Comilla town. The paper was mainly based on data collected by administering questionnaire to 113 households during June-July 1980. In total, 50 per cent of the households were selected from the total number of households of the study village. Two criteria were employed in selecting the sample, (i) Net cultivable land area of the household and (ii) ever married population. The households in the village were classified into five groups according to their net cultivable land area. A total of 113 households were selected on P.P.S. basis. These groups according to their land holdings were : landless, 0.01-1.0 acres, 1.01-2.0 acres, 2.01-3.0 acres and greater than 3.0 acres. A total of 301 ever-married persons (138 males and 163 females) were selected for interview. The male and female respondents were interviewed by the male and female investigators respectively.

The questionnaire were divided into three sections: (1) attitude towards family size and son-preference, (2) cost incurred on children and (3) benefits received from children.

### **Findings :**

The fertility level in the village under study was found to be relatively high. The respondents had a reasonably favourable attitude towards having a relatively large family size and a reasonably strong son-preference.

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\*Economics Department, University of Dhaka, April 1981.

Most respondents felt that the educational cost of children was the main economic problem of the family, a girl cost roughly 5 per cent more than a boy in respect of clothing and footwear. Most respondents had claimed that the marriage of a girl became an economic burden to the families. Parents had reported that school-going and non-school-going boys became non-producers at around 23 and 18 years respectively. The respondents in the village under study had agreed that children were the most important source of security and support for parents in distress and during old age. About one-fifth and two-fifths of the males and females respectively had reported receiving help from their sons.

A proportion of ever-married females had reported to have ever used contraceptives. In Sree Ballavpur the proportion of ever-users was 29.9 per cent while 14.49 per cent of them were current-users. About 15 per cent and 14 per cent reported to have ever used any modern method and traditional method respectively. As regards current use 4.4 per cent and 10 per cent females were reported using modern and traditional methods respectively.

#### **Programme implication and Recommendations :**

The study was based on only one village and thus the findings of the study ought not to be generalised.



## **FEMALE STATUS IN BANGLADESH**

**Rafiqul Huda Chowdhury and others\***

### **Objective :**

The study examined the UN definition of the status of women, i.e., to what extent do women, compared with men, have access to knowledge of economic resources and to political power, and what degree of personal autonomy do these resources permit in the process of decision-making and choice at crucial points in the life cycle compared with men in the field of law, education, employment, marriage, fertility and mortality.

### **Methodology :**

The paper had reviewed specifically the socio-cultural milieu of Bangladesh, civil rights of women, personal laws which covered the field of marriage, inconveniences and guardianship, the extent of educational achievement and opportunities, position of women in employment, and traces of the demographic characteristics of women.

### **Findings :**

It was found that only 7 per cent of the women aged 15 years and above had received 1-5 years of schooling while 13.0 per cent of men had received the same level of education. Less than 3 per cent of the respondents aged 10 years and above were reported to have participated in the labour force compared to 53 per cent of the men.

Women married at younger ages and that they were 10 years junior to their husbands. Men were at liberty to divorce their wives but the women could hardly exercise their power as we had found that there was a wide gap between the legal status and the actual status of women in Bangladesh.

Inheritance law was then discriminatory against women. And even though the Muslim law offers the females a maintenance from

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\*Bangladesh Institute of Development Studies, Dhaka, November 1980.

her husband and subsequently her son, it was hardly attainable as the social milieu and cumbersome court procedures made it difficult for the wives to acquire maintenance through the court.

Few females were engaged in politics and those who were involved in politics were only part-time workers. Mortality of girls under 5 years of age exceeded that of boys by, on an average, 80 per cent. Due to the purdah system, the women were restricted in mobility and it also prohibited contact with men or the outside world.

**Programme implication and Recommendations :**

The improvement of socio-economic status of women was directly linked with overall development and reduction of fertility. The programme should include the socio-economic aspect in their plan of action.



- iii) Bangladesh Fertility Survey (BFS), 1975-76 ;
- iv) Bangladesh Contraceptive Prevalence Survey (BCPS), 1979-80 ;  
and
- v) National Contraceptive Prevalence Survey (NCPS), 1971-82.

Even among the national sample surveys one observes a wide variation in the sample size. The largest was the first Bangladesh Contraceptive Prevalence Survey (1979) having a sample size of 15,481 of currently married women, while the National Impact Survey (1969) had only 3,200 ever married women as its sample.

**a.ii. Nature of Sample Surveys :**

Out of 278 studies only 1.79 per cent was based on national representative samples, 45.33 per cent were based on rural-urban population but not representative samples, others were either based on urban or rural population and hospital/clinic population.

**Table 1 : Percentage distribution of sample according to nature of sample.**

National Representative Sample	—	1.8
Rural sample only	—	23.4
Urban sample only	—	19.8
Rural/Urban mixed sample	—	45.3
Clinic/Hospital Based Population	—	9.7

It appears from the annotated reports that only 15.10 per cent of studies followed some kind of sampling method, while the rest did not indicate their sampling frame. Consequently the latter group leaves a wide open arena for investigation.

**a. iii. Statistical Analysis :**

In reviewing the reports one is struck with the fact that only 8.27 per cent of the studies show that some kind of statistical method was used in analysing the data, 2.78 per cent of the reports only described the findings, and the rest 88.95 per cent of the reports used percentage distribution only.

#### a. iv. Data Source :

Most (91.38%) reports were based on directly collected data from the field, 6.47 per cent reports prepared out of secondary data, and 2.17 per cent reports were descriptions of observations made by the researchers. The secondary source of data primarily present ICDDR,B data collected in Matlab thana of Comilla district and used by the same organisation, and the BFS data are used by Scholars of Bangladesh for Graduate and Post-Graduate thesis or dissertation. The former source was one of the lowest administrative data unit in the country and in no way representative of the country while BFS was based on national sample survey.

#### a. v. Other Problems :

Apart from these we find some problems in annotated reports. They are as follows : (a) lack of effective or absence of linkage between the study objective/s and the findings and conclusions, (b) review of literature is absent in almost all the reports, (c) except a few reports no attempt has been made to compare reported data with the previous ones, (d) there has been repetitions of the same study within almost the same time period and having the same study objectives, (e) theoretical frame of reference was used by a very limited number of researchers.

#### b. Changes in Contraceptive Method Use :

A total of 69 studies on various contraceptive methods have been included in the bibliography, studies on abortion and menstrual regulation are included as these two supportive activity/services are increasingly being used for meeting the exigencies arising out of contraceptive failure.

Table 2 : Studies showing pre and post-Independence period in contraception method and birth prevention measures.

Methods	Pre-Independence	Post-Independence
Lippes Loop/Copper T	7	12
Sterilization	2	15
MR/Abortion	—	8
Oral Pill	—	7
Injectables	—	13
Conversational/Traditional	3	2
Total	12	57

Only a dozen of the studies on contraceptive methods were completed during the pre-independence period. This small number of studies can be attributed primarily to three factors : (a) availability of a method and its use, (b) research of family planning were in almost all cases carried out in three Government or Government supported agencies, and (c) there was no fund available for outside researchers. Against this background, when we look into the post-independence period the picture appears to be diametrically opposite. There are more researches carried out on various methods, as new methods are available and as various Government and non-Government funding agencies are offering support for research and universities are taking greater interest in research. So far as the family planning method related studies are concerned there is an increase of nearly five times over the pre-independence period.

With the advent of mid-seventies and early eighties more improved methods of contraception were available together with the availability of menstrual regulation services. In addition, the long-term method in the shape of injectables is also gaining popularity. Studies on these and sterilization are increasingly providing information on the effectiveness of modern methods and their resultant expansion all over the country. Studies show increment in the size of acceptors of sterilization, particularly, female sterilization, use of oral pill, condom, injectables and MR. It is, however, observed that there are more drop-outs among pillusers due to reported side-effects and irregular supply. The unpopularity of condom has been observed among men and women alike. Female methods are in greater use than male methods. Most obvious reason is the availability of female methods. Nevertheless, it is observed that husbands are either less interested in using a method they are socially debarred from using some methods, such as, the sterilization method. The achievement of target is most likely to remain a far-fetched idea, as long as male methods are the least used and menstrual regulation (MR) services are not extended throughout the country.

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\* (a) Central Family Planning Evaluation Unit, (b) East Pakistan Research and Evaluation Centre, (c) Bangladesh Academy for Rural Development, Comilla.

Table 3 : Percentage distribution of currently married women under 50 years of age using contraception by method, Bangladesh.

	BFS-1975	CPS-1979	CPS-1981
Modern Method <sup>1</sup>	4.7	8.9	11.0
Traditional method <sup>2</sup>	3.0	3.8	7.6

In a period of six years starting from 1975 there has been an increment of 7.7 per cent from 4.7 per cent in the use of modern methods. In case of traditional method the increment is 4.6 per cent. Between the years 1979 and 1981 the use rate of this group of methods has doubled. Safe-period and withdrawal account for most of this increment. The explanation available for this unusual rise in use of traditional method may simply be due to interviewer differences in probing and recording in the two surveys.

**(c) Policy Implications :**

According to the Second (Draft) Five-Year Plan of 1980-85 published in 1980 "The Government adopted a comprehensive population policy in June 1976, reflecting high priority to population control programmes as an integral part of the development process. It was directed towards influencing the demographic behaviour through information, education and motivation (IEM) activities, and family planning services, some other important determinants of fertility, such as, employment, improved health, reduction of infant and maternal mortality, female employment, etc. have also been recognised as important components of the policy."

Herein an attempt is being made to review the abovestated population policy related activities in the light of research findings. To begin with the field personnel who are to deliver the family planning services at the doorsteps of couples, the Government has deployed one female worker (FWA) for every ward, and one male worker/supervisor (FPA) for every union. Each FWA is again aided by dai. They are responsible for IEM activity, service delivery and referral of sterilization, IUD, injectable and MR clients as well. The national

\*<sup>1</sup>Oral Pill, Condom, IUD, Sterilization, Injectable Vaginal methods.

\*\*<sup>2</sup>Abstinence, Safe period, Withdrawal and other.

objective of motivating at least 37 per cent eligible couples into continuous contraceptive users depends, to a large extent, on these grass-root level workers. Their work in turn is contingent upon the effective support they receive from the programme management in the form of training, time assigned to them for carrying out their primary job related responsibility, effective arrangement for reward and punishment, etc. Their success will contribute to reduction in birth rate of the nation. A number of studies do, however, show that nearly one half of field workers do not carry out their field-work duties. There is no known effective mechanism yet in the official programme, that will make field workers carry out their field duties. It is evident, that wherever field workers go out on field duty there is a higher rate of contraceptive use. The regularity of field visit ensures still higher rate of continuous acceptors. The most glaring example of this is to be found in some official programme areas, some non-Government agencies and Swanirvar Prokolpos (projects), where intensive field work is carried out at regular frequency including the follow-up. The distinctive features of these NGOs are their flexibility at all levels of management, localised supervisory system with clear-cut job description including scope for reward and punishment, viable communication between the workers and supervisors and manageable demarcated geographical area for each worker. Where official management of the programme is relatively inflexible, centrally controlled supervisory system is again vitiated by continuous changes brought about in the control mechanism at the thana level through integration and disintegration of functions of Health and Family Planning personnel at regular intervals, while district and other higher functions of Health and Family Planning personnel remain separated. All these contribute to the confusion at the field level and result in dislocation in the official field performance.

The face-to-face communication between the people and the worker continues to remain a very important source of information, education and motivation (IEM) activity. This activity is truncated by partial and infrequent field visit of workers. Radio broadcast seems to play an important part in the education and information of people. No study has ever been made so as to reveal the nature and extent of utilization of radio as a means of education and information for family planning programmes and its level of success. The use of various media and family planning contents used in the media has never been tested before their use and withdrawal. Decisions on use and disconti-

uation of a media message or strategy remain to be the function of policymakers, administrators with no or little attempt on their part, in pretesting their idea.

In the near absence of continuity of an economic policy of this new nation on the one hand, and near complete dependence on foreign aid and loan on the other, there cannot but be an unstable situation in vital aspects of Bangladeshi life. This includes developmental works including the population control programme. Under the umbrella of these facts the solution of the unemployment crisis, prospect of achievement of goals for better health nutrition, reduction of maternal and child morbidity and mortality and birthrate continues to remain a far cry. Again due to the unstable and ever-deteriorating economic situation job opportunities are becoming thinner at a fast rate for men, not to speak of women, whereas population policy visualises a reduction in birthrate through female employment. It should be mentioned here that all administrations had agreed on the issue of providing job for all, irrespective of sex. Mechanism for achieving these goals, adopted so far, has not yet borne any fruit. Thus the expected contributions of the various striving measures adopted to attain the national goals for basic human needs and better health including MCH services could contribute nothing much to the reduction of birthrate of the country.

There has been significant increase in knowledge of contraception. Knowledge status suggests that there is now a basic awareness of the ability to limit fertility. However, this basic awareness does not imply any real understanding of the method. The programme should focus future informational efforts on increasing understanding or in-depth knowledge of contraception.

Knowledge of specific contraceptive methods that have been "heavily" prompted by the programme such as sterilization is especially high, suggesting that the programme can and does have some impact.

Acceptors incentives associated with certain methods do not seem to influence levels of knowledge. Pill has no monetary incentive attached to it, and yet is very widely known. Female and male sterilization has incentives but less widely known. The role of acceptor incentives in promoting family planning in Bangladesh is not clear at this time and needs further examination.

Injectable contraceptives have only recently been introduced in small quantities and in urban areas. Despite their newness to Bangladesh, injectable contraceptives are increasingly gaining popularity. It may be that "good news travels fast" and that there would be considerable demand for injection if it were more widely available.

Contraceptive use among currently married women has increased since it was measured in 1975 by the Bangladesh Fertility Survey. Although the changes have not been enough to have any significant demographic impact, they do imply that change is occurring, that it is possible to generate change, and that change is accelerating.

Contraceptive use among younger women is increasing. It is this group of women who must alter their fertility practices (through the use of contraception) for there to be any change in the dangerous population spiral being experienced by Bangladesh. Efforts to support contraceptive use by this group should be made. Since pill is the most popular among younger age groups, any effort to increase effective use of this method will probably have a more significant demographic impact.

There continue to be significant differences in urban and rural level of contraceptive knowledge and use that cannot be totally explained by standard socio-economic differentials. It is likely that higher contraceptive use rates in urban areas are a function of an environment that is more conducive to family planning acceptance and greater accessibility of methods. Rural areas clearly need more efforts aimed at producing a more conducive environment for reducing desired family size and increasing availability of a variety of methods.

The proportion of contraceptive-users using more effective methods has increased significantly since measured by WFSB in 1976. Although the improvement is heartening, efforts should be made to encourage the acceptance and use of more effective methods.

There appears to be a gap in the method currently being used in Bangladesh. Women in Bangladesh seem to use permanent female sterilization, or pill, condom, and other temporary methods. There is little use of methods that offer long-term non-permanent protection from unwanted pregnancy. In most countries IUD, and increasingly injectable contraceptives serve the population of women who want no more children but are not yet ready to accept permanent methods. Even though this transitional population may never be the largest segment of the potential-user population, they are

too important in terms of future contraceptive use and demographic impact to ignore. When a woman says she does not want more children but will not be sterilized, or she says she does not think she wants more children, the programme should be able to offer her a method that suits her situation.

The number of women who indicate discontinued use of contraception and the proportion who say they want no more children indicate there is a tremendous latent demand for family planning services. Non-use of contraception in Bangladesh is a function of insufficient motivation to terminate child-bearing, inadequate methods, general lack of accessibility, inconsistency of supply or resupply methods, and inadequate follow-up of acceptors to ensure continued use of the method or a shift to another more appropriate method.

#### **Population Control Programme Integral to Development Process :**

Population Control Programme can be made integral to development process of the country through inclusion of Information, Education and Motivation Programme and, wherever possible, family planning service delivery in the Ministries of Education, Social Welfare and Women's Affairs, Local Government and Rural Development, Agriculture and Labour. Beyond these ministries various non-Government development organisations, such as the Bangladesh Rural Advancement Committee (BRAC), Savar Gano-Shastho Kendro (SGK), Christian Commission for Development of Bangladesh (CCDB), International Union for Child Welfare (IUCW) are the important ones. The current contraceptive users among currently married women covered by various other multi-sectoral ministries are relatively higher than the national figure. The women participating in the social welfare projects were the highest users of contraceptive (47.75%), while the Agriculture project population was the lowest with only 17.75 per cent current users. The latter was lower than the national figures of 18 (CPS, 1981). Similarly, contraceptive users among population served by non-Government organisations is on the higher side, varying between 26 per cent and 40 per cent. It may, therefore, be concluded that inclusion of population control programmes, in development programmes, popularly known as multi-sectoral programmes, including the non-Government organisations, was found to bear expected results. Many of the non-Government organisations are limited to only family planning services. They are the BFPA, CWFP, FPSTC sub-groups, the Path Finders Fund, BAVS, SMP-FP, etc.

# 10

## A Review of the Bibliography—1981

POPULATION AND FAMILY  
PLANNING RESEARCH  
IN BANGLADESH

### A REVIEW OF THE BIBLIOGRAPHY—1981

#### Introduction :

Over the past twenty years, a great variety of different demographic and family planning related studies have been conducted in Bangladesh. The total number of these studies is not known but probably runs into hundreds. Unfortunately for researchers and other interested person, most of these studies are scattered among various agencies and institutes and, in general, are not easily available and accessible also. Thus, their utility, particularly for programmatic purposes, is limited.

In an effort to overcome this situation, NIPORT undertook a small project designed to collect and summarise in abstract form as many population and family planning studies as could be identified. As a part of the activities of this project, organisations throughout Dhaka and in other districts were contacted and copies of reports collected. So far, a total of 268 studies conducted from the year 1961 to 1980 and which was made available to the project have been abstracted. The effort to present these in abstract form may not have attained the desired standard; but our sincere goal was to make these reports available to all concerned and at least to focus what those reports are all about.

It should be pointed out that the 268 studies, collected so far, are by no means the total number of research studies conducted in Bangladesh

over the past twenty years. We did not attempt to collect and review studies which have been published in foreign academic journals. Many of these studies are well known to researchers, and in any case, all of them have been catalogued and are available in libraries. Essentially, our purpose was to obtain reports, studies and descriptive documents, which have a limited circulation and, more often than not, were printed in cyclostyled form.

### **Type of Studies Conducted from 1961-1980**

Table-1 shows the number and percentage of the 268 studies which were conducted each year between 1961 and 1980. Thirteen per cent (36 studies) of the 268 studies were conducted during the pre-liberation period from 1961 through 1970. The remaining 241 studies or 87 per cent were conducted after liberation. The great majority of the studies (74.3%) reviewed were written recently between 1977 and 1980. This, of course, should not be taken to mean that there has been a sudden flourishing of research in the past three years. It simply indicates that more recent studies are easier to find, while older studies are either lost, forgotten, or buried under files.

### **The General Subject Areas of the 268 Studies :**

In both pre-and post-liberation periods, the larger number of studies were concerned with investigating contraceptive methods such as the pill, IUD, Depo-provera, sterilization and M.R. Typically, these studies used small clinic population of acceptors to examine contraceptive effectiveness, side-effects, characteristics of acceptors and clinical procedures. A second large area, which accounted for a number of reports was concerned with evaluative studies of service delivery activities, training programmes, field worker's performance and information-education activities. Somewhat surprisingly, only 9 (nine) studies between the years 1961 and 1980 were concerned with mortality, morbidity and general health conditions as these relate to fertility and family planning behaviour.

In a few cases, it was difficult to classify a particular study under one of the nine subject areas. Some studies touched on multiple topics and, logically, could be classified under two or more of the general subject headings. In such cases, we used as a guideline the objectives of the study and what seemed to us to be the major focus of research.

## **Research Methodology and Quality of the Studies :**

The 268 studies vary considerably in quality, sample size and research methodology. Some of the studies, particularly those conducted by ICDDR,B as well as a few by the PCFP division, employed large samples of several thousand respondents randomly drawn. The tabulation of the data from such studies was done by computer and the data analysis usually employed standard statistical techniques such as cross-tabulation, measures of association and test for statistical significance. These studies, however, were the exceptions. The vast majority were limited in scope and used purposeful samples ranging from 30-40 respondents to a few hundreds at the most.

One striking aspect of almost all the studies is that they are what can be called exploratory studies which simply describe a particular phenomenon but fail to test a hypothesis or set of hypotheses. Indeed, in some of the studies, it is difficult or impossible to determine the objective of the study. Very few of the investigations attempted to compare a study population against a similar control population. Without this type of comparison, it is difficult to determine the significance of the findings. There is really no way of knowing unless a comparison is made. Moreover, the practice used by most of the studies of reporting the data in simple frequency distribution form tends to obscure the potential findings from the data.

Knowing the age distribution of a particular study population may be of some interest but much more interesting would be the information regarding age by acceptance, acceptance by a number of field workers' visits, visits by methods used, etc. While simple cross-tabulations can be cumbersome to compile by hand, they certainly add to the value of the research and increase the potential for drawing programmatic implications.

Almost all of the 268 studies were cross-sectional or retrospective in nature and used structural questionnaire as a data-collecting technique. Although some of the studies claimed to be baseline surveys, very few of them ever reported findings from a second follow-up study which would allow for meaningful comparisons over time.

As noted earlier, the majority of the studies reviewed are concerned with clinical, managerial, administrative and supervisory aspects of the

family planning programme. That is to say, excluding studies concerned with the correlates of fertility behaviour plus a few others, approximately 80 per cent of the studies reviewed, examined technical or administrative solutions to the problems of rapid population growth rather than the underlying causes of the problem. There is an apparent paucity of studies which investigate the social, economic, cultural and political factors which powerfully influence the fertility behaviour. Most of the studies seem to be assumed that family planning programme represent the most viable approach to the problem of rapid population growth. Given this assumption, it is not entirely surprising that these studies have drawn the solution to the problem of rapid population growth. Given this assumption it is not entirely surprising that these studies conclude that the solution to the problem lies in the perfection of the family planning programme through an application of more and better technology, more and better training, more effective communication, more efficient administration & safer contraceptive methods with fewer side-effects. While these are undoubtedly important as part of the overall solution to rapid population growth, the question, which is rarely asked and even less frequently answered, is even assuming significant improvement in the technology of family planning, can rapid population growth be curtailed without a concomitant change in the social and economic structure which influence not only fertility behaviour but also other actions as well. These and other similar questions need to be addressed through careful research. To limit the scope of our research to the technology of family planning will simply limit our ability to find appropriate solutions to the problem of rapid population growth. Family planning programme do not exist in a vacuum. They are just one of many developmental programmes that interact with the others. Sometimes, this interaction can increase the impact of a programme beyond what it might be expected to do alone. At other times, the interaction may decrease the impact. In either case, we need to know how programmes interact and what the effect of the interaction is.

We conclude with a few suggestions on research based upon our examination of past studies.

1. Far greater attention needs to be given in future research to the use of scientific research methodology. The utility of past studies is often limited because of inappropriate study design. Greater attention needs to be given to a clear formulation of the study objectives, sampling technique from which meaningful inferences can be drawn, data

collection procedures and controls, and statistical treatment of the data.

2. Research involves more than just the collection and reporting of data. The data must be analysed and inferences as well as programmatic implications must be drawn from the data. A report which does not include a discussion section of the findings leaves the reader with nothing more than a mere mass of statistics. Far greater attempts should be made to employ prospective research designs which examine, over time, trends and changes.
3. Hypothesis-testing studies rather than mere exploratory or descriptive studies should be encouraged. Comparative case-control studies should also be undertaken.
4. Researchers need to give greater attention to the findings of past studies. Much is already known about population and family planning. There is no need to continually re-investigate the same phenomena. A little time spent reviewing the relevant literature can lead to the formulation of meaningful hypotheses.
5. Numerous factors affect fertility behaviour. Family planning is just one of those factors. Studies need to be conducted to investigate the causes of high and low fertility, the interaction of one developmental programme with another and the effect this has on fertility.

25

TABLE-1 : NUMBER AND PERCENTAGE DISTRIBUTION  
OF STUDIES BY YEARS

Year	Number	Percent
1961	1	3.0
1962	1	3.0
1963	0	0.0
1964	1	3.0
1965	4	12.1
1966	3	9.0
1967	4	12.2
1968	9	27.0
1969	8	24.0
1970	2	6.7
	<b>33</b>	<b>100.0</b>
1971	1	0.4
1972	1	0.4
1973	1	0.4
1974	8	3.4
1975	14	6.0
1976	22	9.4
1977	48	20.4
1978	48	20.4
1979	45	19.2
1980	23	9.8
1981	24	10.2
<b>Total :</b>	<b>268</b>	<b>100.0</b>

## CORRIGENDUM

Page No.	Para	Line	Printed	To be read
16.	Footnote	—	Bangladesh	Pakistan
17.	„	—	Nil	East Pakistan Research & Evaluation Centre Dhaka.
21.	Methodology	2	Twenty-four	Twenty-four
21.	„	5	weer	were
25.	Footnote	—	Bangladesh	Pakistan
27.	„	—	Bangladesh	Pakistan
36.	Findings	4	Ninet-eight	Ninety-eight.
37.	Methodology	1	as	was
47.	Findings	5	does	dose
52.	Footnote	—	Bangladesh Development Studies	Bangladesh Institute of Development Studies
54.	Methodology	4	partilineally	patrilineally
60.	Findings	2	cpmposition	composition.
69.	Recommendation 1	—	cut-gut	cat-gut
72.	Footnote	—	Diarroheal	Diarrhoeal
79.	2nd para	6	Services	Series
79.	Findings	5	menorrhoea	amenorrhoea
80.	Methodology	3	sudy	Study
80.	Findings	2	missing	3
88.	Methodology	7	roups	groups
88.	Major Findings	5	reduced	found
103.	Footnote	—	centrol	control
109.	4 para	2	Fifteen of	Fifty-one per cent of
123.	Objectives	1	Bangladesh	Bangladeshi
125.	Methodology	7	date	data
128.	Findings	8	Later	Latter
130.	Findings	2	Thsse	These
132.	Findings	23	older	uneducated
137.	1st para	4	1970's,	1960's,

Page No.	Para	Line	Printed	To be read
138.	Last para	3	every of users	ever-users
158.	1st para	15	power fertility	lower fertility
162.	Methodology	1	two state	two stage
166.	2nd para	3	or	on
170.	Methodology	3	femal	female
171.	Recommen- dations	2	rear	gear
172.	Findings	4	derive	derived
174.	Objective		force	forces
179.	Methodology	5	marriage	married
186.	3rd para	5	friends	friends
199.	Rccommen- dations	2	like	likely
203.	Last para	2	sawe	same
222.	Findings	8	hill boards,	bill boards,
230.	Methodology	1	Maultia,	Caultia,
231.	Findings	2	member	number
233.	Methodology	3	three of	three districts of
238.	1st para	1	cleient	client
239.	3rd para	7	cares	cards
243.	Findings	7	promoted	Prompted
245.	Methodology	5	other	offer
247.	Findings	1	positive	positive attitude
248.	Methodology	3	stated	started
264.	Objectives	2	Bangadesh	Bangladesh
281.	Last Para	4	specing	spacing
295.	"	2	suggest	which
295.	"	3	which	suggest
298.	"	6	furture	future
304.	Recommenda- tions	3	utitlized	utilized
307.	6 para	8	remours	rumours
308.	footnote	-	Bangladeh	Bangladesh
314.	2nd para	5	haracteristics	Characteristics
316.	"	2	feld	field
322.	1st para	4	3	35
325.	Methodology	6	members	members were
332.	2nd para	2	continious	continuous
346.	1st "	5	as	was

Page No.	Para	Line	Printed	To be read
346.	„ „	8	as	was
353.	Last para	2	committed	stated
358.	Last para	2	understanding	understanding
362.	3rd para	10	milt	miles
375.	1st Para	1	has	was
387.	Recommendations	1	pronged	prolonged
413.	Last line		resarchers	researchers
426.	Table		Conversational	Conversional
434.	268 studies	7	progrmmes	programmes
436.	1st para	22	quesions	questions
436.		23	reserach	research

## AUTHORS' INDEX

Sl. No.	Authors' name	Page No.	Sl. No.	Authors' name	Page No.
<b>A</b>					
1.	Abedin, Usamad	124, 415	28.	Begum, J.A.	12, 15, 19
2.	Ahmed, B.U.	123	29.	Begum, K.	323
3.	Ahmed, G.U.	17, 88, 141, 236, 352, 357	30.	Begum, S.F.	38, 40, 87, 199, 394
4.	Ahmed, M.U.	241	31.	Bhatia, S.	57, 150, 192, 414
5.	Ahmed, N.R.	162	32.	Bhuyan, N.	65
6.	Ahmed, Sultan	122, 135, 381	<b>C</b>		
7.	Akbar, M.A.	119, 133	33.	Chen, L. C.	228, 398
8.	Akther, F.	325	34.	Cholera Research Laboratory	408
9.	Akhter, H.H.	42, 92	35.	Croley, H.T.	8, 203, 303
10.	Alauddin, M.	127	36.	Curlin, G. T.	400
11.	Ali, M. Hazrat	27, 99	37.	Chowdhury, A.H.	330
12.	Ali, M. Hashmat	300	38.	Chowdhury, A.K.M.A.	377, 382, 393, 404
13.	Ali, M.N.	41, 86	39.	Chowdhury, M.I.	52
14.	Ali, N.	276	40.	Chowdhury, R.H.	100, 115, 246, 281, 422
15.	Ali, R.	106	41.	Chowdhury, T.A.	80
16.	Amin, R.	230	<b>D</b>		
<b>B</b>					
17.	Bairagi, R.	78	42.	Duza, B.M.	102
18.	Bangladesh Family Planning Association	267, 312, 320	<b>E</b>		
19.	Bangladesh Fertility Research Programme	322	43.	East Pakistan Research & Evaluation Centre	13
20.	Bangladesh Rural Advancement Committee	28, 121	44.	Elahi, K.M.	117
21.	Barua, K.	284	45.	External Evaluation Unit, Planning Commission.	130, 172, 261, 290, 316, 319
22.	Barua, B.B.	84	<b>F</b>		
23.	Becker, S.	72	46.	Family Planning Social Marketing Project	159, 191
24.	Begum, A.I.	7			
25.	Begum, Sultana	36, 39, 68, 76, 193			
26.	Begum, Sakhina	61			
27.	Begum, G.A.	30			

Sl. No.	Authors' name	Page No.	Sl. No.	Authors' name	Page No.
<b>G</b>					
47.	Gescho, C.	374	75.	Khan, A.M	405
48.	Ghaffar, S.	287	76.	Khan, Atiqur, R.	24, 33, 37, 45, 46, 49, 64, 71, 173, 179, 201
59.	Green, L. W.	227	77.	Khan, Abdur, R.	59
<b>H</b>					
50.	Haq, M.N.	219, 265	78.	Khan, M.R.	151
51.	Haq, Najma	116	79.	Khatun, S.	77
52.	Haque, M.N.	222, 257	80.	Khanam, Sharifa	110
53.	Hasan, M.S.	256	81.	Khanam, Sufia	189
54.	Hossain, M.K.	113, 346	82.	Khanam, Z.	75
55.	Hossain, M.Z.	251	83.	Khuda, B.E.	299, 417, 420
56.	Howie, I.	214	<b>L</b>		
57.	Huber, D.H.	47, 55, 60, 66, 196	84.	Lewis, L.H.	126
58.	Huda, N.	21	85.	Langsten, R.	101, 266, 274
59.	Huffman, S.L.	254	<b>M</b>		
<b>I</b>					
60.	Ishaq, M.	70	86.	Mabud, M. A.	157, 310
61.	International Centre for Diarrhoeal Disease Research, Bangladesh	139	87.	McCord, .	174
62.	Institute of Education and Research, D.U.	211	88.	Malaker, M.	32; 43, 63
63.	Islam, A.N.M.A.	295	89.	Maloney, C.	157
64.	Islam, M.N.	250	90.	MIS Unit, Population Control Division	144
65.	Islam, R.	190, 321	91.	Mannan, M.A.	22, 25, 212
66.	Islam, S.M.S.	387, 389	92.	Mannan, Mamtaz	389
67.	Islam, Shamima	81	93.	Measham, A.	58, 94
68.	Islam, K.	16	94.	McCarthy, E.F.	183
<b>J</b>					
69.	Jabeen, S.	69	95.	Mia, A.	146, 181, 215, 260, 268, 332
<b>K</b>					
70.	Kabir, M.	418	96.	Miller, R.A.	10, 168
71.	Karim, K.B.	108	97.	Mahmud, M.M.	264
72.	Karim, R.	345	98.	Mosley, W.H.	112
73.	Keith, F.S.	247	99.	Muhuri, P.K.	366
74.	Khan, A. H.	167	100.	Muniruzzaman, A.N.M.	156
<b>N</b>					
101.	National Foundation For Research on Human Re- source Development	220, 348			

Sl. No.	Authors' name	Page No.	Sl. No.	Authors' name	Page No.
102.	National Institute of Population Research and Training	309	120.	Rahim, M.A.	164
103.	Nelson, J. H.	305	121.	Rapport, Bangladesh Ltd.	283
<b>O</b>			122.	Ratcliff, J.W.	231
104.	Obaidullah, M.	74, 194, 195, 294	123.	RESP Unit, Directorate of Population Control and Family Planning	270, 272, 273, 314, 338
105.	Osteria, T.	53, 187, 275, 349	124.	Roberts, B. J.	96, 204
<b>P</b>			125.	Rosenberg, M.J.	301
106.	Pakistan Family Planning Council	238	126.	Ruzicka, L.T.	403, 407, 409, 410
107.	Philips, J.R.	148.	<b>S</b>		
108.	Population Control and Family Planning Division	103, 188, 412	127.	Sabir, A.A.	163
109.	Population Education Programme, Ministry of Education.	279, 292, 327, 343	128.	Satter, E.	289
110.	Population Planning Cell, Radio Bangladesh, Ministry of Information and Broadcasting	216	129.	Satter, M.A.	328, 384
111.	Population Services International Dhaka, Bangladesh	185, 243, 255	130.	Sirageldin, I.	402
<b>Q</b>			131.	Siddiqui, A.N.S.K.	361, 363, 364
112.	Quddus, A.H.G.	233, 306, 336	132.	Sorker, N.R.	213, 253, 259
<b>R</b>			133.	Stoeckel, J.	97, 149, 375
113.	Radelfinger, S.F.	235	134.	Souza, Stan D.	184
114.	Rahman, Azizur	50, 83	135.	Swenson, I.	379
115.	Rahman, A.S.N.M.	278, 335,	<b>U</b>		
116.	Rahman, Mahnur	297, 308	136.	Uddin M.M.	350
117.	Rahman, Makhlesur	54, 131, 200, 313, 339, 396	<b>W</b>		
118.	Rahman, M. Bazlur	369	137.	Waliullah, S.	91, 105, 142, 154, 176, 207, 209, 245, 249, 318, 341, 371
119.	Rahman, S.	34, 89, 355, 385, 391,	<b>Y</b>		
			138.	Yaukey, D.	206, 226
			<b>Z</b>		
			139.	Zaidi, W.H.	224
			140.	Zaman, S.S.	286
			141.	Zeidenstein, S.	170