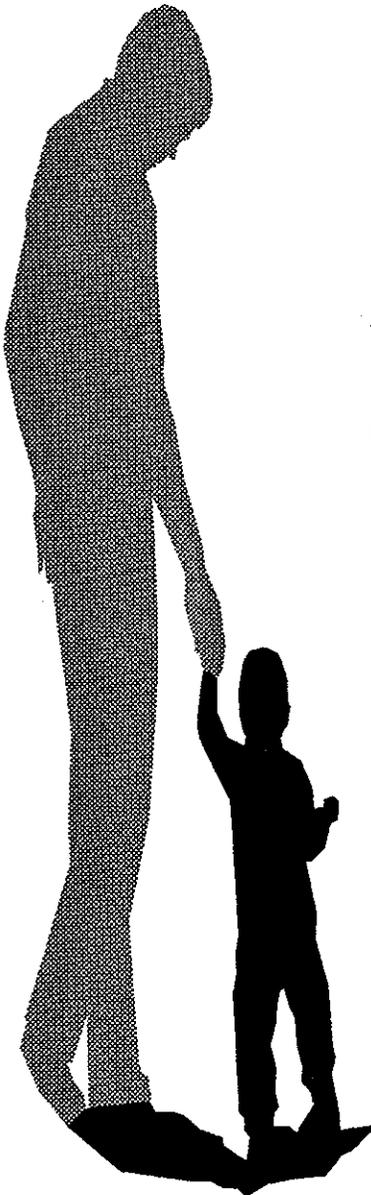


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REPORT ON PRETEST OF NSV/IUD COMMUNICATION MATERIALS

(Volume 1 of 2)

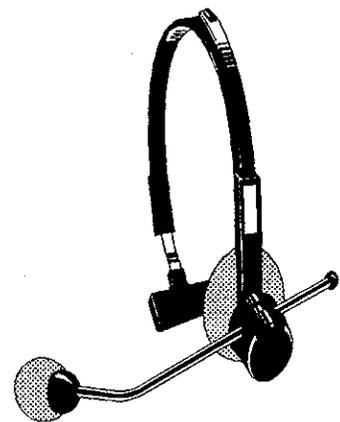
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**QUESTIONNAIRE
MESSAGES TESTED**

1.0 BACKGROUND AND PURPOSE

1.1 Background

In October, 1995, the Social Marketing for Change (SOMARC) project assisted in the launch of a social marketing initiative in Jamaica called the Personal Choice program. The social marketing program negotiated with several contraceptive manufacturers and distributors to make commercial oral and injectable contraceptive brands available at lower prices for promotion through the Personal Choice Program. The program also include no-scalpel vasectomy and is now looking to expand its line of products to include IUDs.

Although mass media advertising has been introduced for oral contraceptives and injectables, very little has been done for either no-scalpel vasectomy or IUDs. Personal Choice is now designing some new communication material to address the misinformation's, biases, fears which exist about these two additional methods. It is anticipated that these new campaigns will help generate interest in these methods and encourage consumers to seek more information about them.

The present project tested three radio spots, one brochure and one print ad for IUDs, as well as two radio spots (female version), three radio spots (male version), and two print ads, all for no-scalpel vasectomy.

1.2 Purpose

The overall objectives of the project were:

A. To determine the effectiveness of each of the communication materials.

Specifically, the project sought to determine whether:

- The message in each radio spots, print-ads and brochure is understood as intended and is appealing.
- Participants can repeat specific information relayed in each of the radio spots, the print-ads, and the brochure

- Audio and visualize are appealing.
- Participants can correctly name a service provider with whom the method can be discussed.
- Participants will seek further information about the method.
- Female participants for the vasectomy spots and print ads plan to communicate information contained in these materials to their partner.
- The materials help to allay fears/biases about the method.

B. To determine which of the different versions of the vasectomy spots, IUD spots, and vasectomy print materials is most effective.

C. To identify any changes that need to be made to the communications materials to improve their effectiveness.

2.0 RESEARCH METHODOLOGY

There were seven groups of participants selected to pre-test the communications materials. Selected participants participated in one group only. The sample size and screening criteria for each group were as follows:

- Group 1: 60 C\D women aged 25-45, currently in union, who have at least one living child assessed the three IUD spots.
- Group 2: 50 C\D women aged 25-45, currently in union, who have at least one living child assessed the IUD brochure.
- Group 3: 50 C\D women aged 25-45, currently in union, who have at least one living child assessed the IUD print ad.
- Group 4: 60 B\C\D men currently in union, aged 30-54, who have at least one living child want no more children, are not currently sterilized, and whose wives are not currently sterilized assessed the three male version no-scalpel vasectomy spots.
- Group 5: 50 B\C\D men currently in union, aged 30-54 who have at least one living child, want no more children, are not currently sterilized assessed the two no-scalpel vasectomy print ads.
- Group 6: 50 B\C\D women aged 25-45 currently in union, wants no more children, are not sterilized and whose husbands are not sterilized assessed the two female version no-scalpel vasectomy spots.

Group 7: 50 B\CD women aged 25-45, currently in union, wants no more children, are not sterilized and whose husbands are not sterilized assessed the two female version no-scalpel vasectomy print ads.

Participants were selected to represent the socio-economic groups B\CD, and as far as possible participants equal representation of the socio-economic status were sought. The survey was conducted among persons from both the Kingston Corporate Area and rural St. Catherine, respondents were intercepted in central locations. Participants had to meet all the selection criteria relevant to a particular group in order to be included in the survey.

Structured questionnaires administered through face-to-face interviews were used to gather the data. Separate questionnaires were used for each of the seven groups. each print ad was read twice and each radio spot listened to twice before participants answered the questions. Attempts to use same sex interviews as commissioned, had to be aborted as the male respondents objected to being interviewed by men on the subject of vasectomy. Men from both the middle and lower middle socio-economic groups saw this as being culturally inappropriate, "this is funny man (homosexual) business." On the other hand they were receptive and cooperative when interviewed by females. Females were therefore used to conduct all interviews.

Supervisors worked infield along with interviewers allowing for on the spot supervision.

3.0 EXECUTIVE SUMMARY

Vasectomy

Generally, the vasectomy messages were clear and easily understood. Among both men and women, recall of the method as effective and permanent, quick, and reliable was high. There was also high recall for who to contact for further information, where the procedure is done, and when it is safe to resume work. There was however comparative lack of clarity on the correct time before sex can be resumed. Recall of this was noticeably lower than for other aspects.

Men were originally more skeptical than women about the method and their fears were less easily assuaged. This is underscored in the observation that the recall of the method as reliable and safe was noticeably low among men in contrast to among women. Interest in further information on the method was also low among men but comparatively high among women and just over one third of females indicated a willingness to discuss the method with their partner. This motivation, for men emerged along class lines where the upper middle socio-economic group seemed to hold more potential to be eventually convinced as seen in the assessment of the print message (40% of them being 'not likely/not at all likely' to have a vasectomy versus 63% among the middle income and 73% among the lower income men). In contrast, women who were very likely to encourage their partner to have the method done tended to be more lower income (27.6% Vs 5.3% middle/lower middle) while the unsure and the unlikely were more likely to be middle/lower middle income women (47.4% and 31.6% respectively Vs 27.6% and 27.5% for the lower income women).

Different messages clearly communicated the different areas of focus viz. a man's way of sharing family planning responsibility, doesn't affect your manhood. There were no noticeable weaknesses in comprehension for any of the messages, whether those targeting males or females.

Print: The fact that the procedure is permanent and a no-knife one were the main benefits recalled by male respondents. During the interview process, concerns about the possibility of having a muscle cut during the procedure often surfaced and it was the minority who expressed likelihood of further interest in the method. The "Couple" was overwhelmingly preferred as the most effectively presented.

Radio: Respondents cited the need for additional information as the major suggestion for improving the materials. In answer to "overall, which is the better radio ad?" 36.7% answered "New Spirit", 31.7% answered "Manhood" and 25% answered "I Must Admit." "New Spirit" emerged as the "better radio ad" because it was "lively and interesting" however "I Must Admit" and "Manhood" communicated the messages that vasectomy is safe, quick, permanent and reliable better than "New Spirit" did. Additionally, the ad which would be most likely to motivate persons to proceed with method was "Manhood" which was thought to be the most "informative".

Among females the messages rated equally and none was preferred over the other.

The level of interest for the different messages varied considerably depending on the message and its execution. "Manhood," "Tony's Idea" and the print "Couple" had most appeal among respondents.

There was almost universal knowledge that the correct source to access further information about the vasectomy would be either "doctor/nurse" or "Personal Choice provider".

The messages generated greatest interest among women, particularly rural women.

IUD

Respondents seemed to generally understand the messages in respect of who to insert and remove the method, the duration of protection, and the source for further information and found the material easy to understand and interesting. The majority were however unable to recall the topic as the *IUD* but instead settled for the more general topic of *family planning or contraceptives*. In view of the fact that general comprehension was good, it is unclear whether they were overwhelmed by the name used, *Copper T380 IUD*, and whether this may eventually alienate the method. This is unlike what obtained for the vasectomy messages. Other comparatively weak areas of recall were in respect of how the method works, and that it is women who want to delay their next pregnancy (*spacers*), who are the real target group. There was high interest in more information about the method but low interest in the method itself. Fears about the method apparently linger as the primary suggestion given to improve the ads was that additional information on the side effects of the method be included.

The print message tested was thought to be appealing (68%), interesting (80%) and easy to understand (90%); with a high likelihood of seeking further information (70%). There was very low comprehension of the illustration of the IUD in the womb (16%). It did not however appear to impair the overall understanding of the message.

The radio messages: Just over a half of respondents reported being interested in getting further information after listening to respective messages. The message "Convenience" was thought to better communicate the method as safe, effective, convenient, reliable, long-lasting and was subsequently thought to be the more convincing and the better radio ad. Main reason for this was that it was seen as containing more information. "Reliability" was however the one thought to be most likely to motivate respondents to

try the method. Although "General" was on par with the other messages in terms of high recall of specific points it emerged as a weak message in other aspects.

The brochure was thought of as being easy to understand by the majority (96%). There was generally high comprehension of specific terms including: "convenient", "effective", "using an IUD for up to ten years", "a trained health care provider" and "unusual vaginal discharge". Majority awareness of some side effects of the method, their duration and harmless nature was also evident. Pelvic Inflammatory Disease was cited as one harmful side-effect and there was majority knowledge as to its cause. There was almost universal knowledge that there was no need to delay intercourse after insertion of method and that one can get pregnant immediately after removal. Respondents correctly perceived the procedure as taking only five minutes or a short time. The brochure was thought to be informative, and one from which the vast majority learnt something new, in particular the duration of protection.

The most important benefit of the three specifically probed was that the method was long-lasting but reversible and the least important was the benefit of not having to buy and keep taking contraceptives.

4.0 CONCLUSIONS & RECOMMENDATIONS

4.1. Vasectomy Materials

4.1.a Conclusions

Topic and benefits of method covered in the material for vasectomy, indicated a generally high level of understanding among both male and female alike in respect of the method as effective, permanent, quick and reliable. Some specific areas of concern however surfaced. These are:

- Comparative lack of clarity in respect of the correct time before sex can be resumed

- Men remained largely unconvinced of the safety of the procedure
- Women are more amenable to the procedure as a viable method and just over a third indicate a willingness to discuss it with their male partner
- The “no-scalpel” feature of the procedure holds interest for many as it eliminates the likelihood of accidentally cutting a muscle during the procedure
- Human interest illustrations (such as used in the print ad *Couple*) readily communicate love, warmth, support from the partner and as such have widespread appeal.
- There is a need for information on the method as many unanswered questions are evident.
- Messages which are “lively and interesting” will appeal to listeners and may even emerge as the “better message” but may not be able to sufficiently motivate the potential target. This was better done by messages which contain more information and which communicate the method as safe, quick and permanent.
- Levels of interest in having the procedure done seems to be influenced by socio-economic position. As such those belonging to the upper middle socio-economic are more likely to show definitive interest in the procedure, while males of the lower socio-economic group are more likely to be not at all interested.
- Lower income females are more likely to encourage their partner to have a vasectomy and thus are more willing to play a strong supportive role than middle/lower middle counterparts.

4.1.b. Recommendations

- The time lapse before resumption of sex must be clearly stated and not combined with time before resumption of normal activity or work.

- While mass media may serve to generate awareness of the method it seems unlikely to be the most effective means of marketing this method to men. Other approaches (e.g. male forums) may need to be considered in order to convince the target of the safety and reliability of the method.
- Female partners seem poised to play an important supportive role and should be targeted accordingly.
- Lower income females seem even more willing to play this supportive role and should be specifically targeted.
- Upper middle income men display more positive interest in having the procedure done, the campaign may thus be skewed more towards them.
- Include and emphasize the term no-knife/ no-scalpel wherever possible inferring this as the basis for the method's "safety".
- In print ads, use graphics which have an emotional, supportive appeal such as a used in the print ad "Couple".
- Ensure that information about the method is readily accessible and present in as many male settings as possible.
- Messages need to be serious and informative but at the same time lively and interesting to attract attention.

4.2. IUD Materials

4.2.a Conclusions

- There was overall good comprehension and recall of the specific and general nature/attributes of the method, as presented by the message. The method was generally perceived as reliable, convenient and long-lasting, and there was an overall high level of interest in seeking further information about the method. Specific concerns emerging are:

- Recall of the method as the *Copper T 380 IUD* was comparatively poor even though overall comprehension was good.
- The illustration of the IUD in the uterus in the print ad was a source of much misinterpretation unlike in the brochure where it is explained.
- There was poor comprehension of how the method works.
- There was a low level of interest in the method itself however many were interested in more information on the side effects. It is very likely that apprehension about side effects could be undermining the interest in the method.

4.2.b. Recommendations

- Introduce a more user-friendly name for the method, one which the target will be more comfortable repeating e.g. the Personal Choice IUD or the IUD from Personal Choice.
- Distinguish between women with children who want to delay having another child now versus those who want to wait for a number of years and emphasize that this method targets the latter.
- Omit the illustration of the IUD in the uterus in the print material, it is misunderstood and could be misinterpreted
- The tested description failed to effectively communicate how the IUD works. Thus a more clear and detailed description of how the method works should be included.
- Include more information about the method and side effects (in the print and radio) or ensure that the relevant information is easily accessible to the target group.

5.1 Vasectomy Print- Male

Two messages were tested, that is "Ball" and "Couple". The body copy was identical for both messages, while the graphics and layout were different. The messages were tested among fifty (50) males; ages 30-54 years; from upper, middle/lower middle, and lower socio-economic groups. Messages were tested alternatively for comprehension among respondents. Each respondent was questioned on the body copy of one message and comparison of graphics for both messages.

5.1.1 Concerns about the Vasectomy (see Table 1a and 1b)

Of the fifty (50) respondents interviewed the majority (76%) reported no previous concerns about the vasectomy and only a quarter (24%) reported having concerns. Main concerns cited included:

- a) a resulting inability to enjoy sex (33%);
- b) consequent impotence (25%);
- c) its irreversible nature (17%) and the level of safety (17%).

After reading the messages a third (33%) of those who originally reported having concerns, reported that their concerns had been addressed. Such concerns had been addressed in the provision of advice on continued discharge after the procedure (25%) and continued enjoyment of sexual intercourse (25%).

5.1.2 General Comprehension

Main Topic of the Message (see Table 2)

The majority of respondents correctly recalled the main topic of the messages to be the vasectomy (64%), while 28% perceived the main topic to be family planning. This perception of the main idea of the messages as family planning was strongest in the 50-54 years age group (57%).



MALE

VASECTOMY

PRINT

Main Points of Messages (see Table 3)

Respondents perceived the main points of the messages to be:

- a) The vasectomy as being a permanent form of family planning (44%);
- b) The vasectomy as preventing the partner from getting pregnant (42%)
- c) The vasectomy as the man's way of sharing the responsibility (30%)

5.1.3 Information Gained

Benefits of Method (see Table 4)

The majority of the respondents cited the main benefit of the method as its provision of a lifetime of family planning protection (68%). Other benefits of the method, gleaned from the messages included:

- a) the vasectomy being a no knife procedure (20%)
- b) the vasectomy being a quick procedure (18%)
- c) the vasectomy removing the fear of unplanned pregnancy (18%)

Length of Time Procedure Takes (see Tables 5, 6 and 7)

Almost all respondents (96%) recalled that the No Scalpel Vasectomy method was quick and took only 15 minutes.

After viewing the message a large portion of the sample (90%) was able to correctly recall that the man may resume normal work after 24 hours of having the procedure done. Additionally, more than half the respondents (54%) correctly recalled that the man would be able to resume normal sexual intercourse when it was comfortable to do so, while an additional 32% cited this period as within a few days. It is important to note that as much as 10% of the respondents incorrectly recalled this period as 24 hours. This may be indicative of possible confusion

between the period for returning to normal work activity versus sexual activity. This 10% may expand to represent a large enough portion of the target audience.

Source of Information (see Table 8)

More than a half (52%) of the respondents gave the Personal Choice Provider as a source of further information about the method. An additional 42% cited the doctor or nurse as a source of further information.

General Information About Method (see Table 9)

All respondents (100%) correctly recalled the doctor's office as the specific place the procedure is carried out.

5.1.4 OVERALL RATINGS

New Information Obtained (Tables 10a and 10b)

After reading the message as much as 60% of the respondents reported having learnt something new. The new information gained included:

- a) the procedure as being quick- taking only 15 minutes (40%)
- b) the No Scalpel Vasectomy as being a no knife procedure (30%)
- c) that the patient may resume normal activity within 24 hours of having the procedure done (17%).

Suggestions for Improving the Message (see Table 11)

Of those viewing the message, only two persons reported experiencing some difficulty or confusion; of which only one was able to articulate the specific point namely "The ball doesn't portray the message intended."

Most respondents reported general satisfaction with the messages with only 22% having suggestions for improvement. The main suggestions included:

- a) informing the viewer as to possible side-effects (10%)
- b) informing the viewer as to what is specifically involved in the 'no knife' procedure (4%)

Specific Response to the Messages (see Table 12)

In general the messages served to effectively impart positive connotations of the procedure. In particular after reading the messages respondents were left feeling:

- a) The vasectomy provides a lifetime of protection (96%)
- b) The vasectomy is a quick procedure (90%)
- c) The vasectomy is very reliable (74%)
- d) The vasectomy is a safe method (66%)

It is important to note that even after viewing the messages a third of the respondents did not perceive the procedure to be a safe method.

5.1.5 Likelihood of Further Interest

Level of Interest (see Table 13)

After viewing the messages 26% of the respondents reported being interested or somewhat interested in seeking further information about the method. As much as 24% reported being uncertain as to whether they would seek further information while a half of the sample (50%) remained outright uninterested in the procedure.

Reasons For Lack of Interest (see Table 14)

Respondents tended to cite the irreversible nature of the procedure (16%); uncertainty as to possible side-effects (12%) and a general dislike for the procedure (12%) as main reasons for lack of interest.

5.1.6 Comparison of Messages

Overall Preference (see Tables 15a and 15b)

In general respondents tended to prefer the "Couple" print message (66%). However the older 45-49 years age group, reported preferring the "Ball" (67%).

Of those preferring the "Couple", the main reasons given included:

- a) The message was easy to relate to couple and message (40%)
- b) The couple projected a feeling of togetherness and security (24%)
- c) The couple was eye-catching (12%)
- d) The couple was perceived as having a very human touch (12%)

The "Ball" was liked, by those preferring it because it was:

- a) Portraying sports (a man's activity) (25%)
- b) Being big and bright (25%)
- c) Reminding the viewer of a male sex organ (17%)
- d) Giving more information at a glance (17%)

Interesting Message (see Tables 16a and 16b)

In general respondents reported finding the "Couple" (68%) more interesting, 18% reported finding the "Ball" message more interesting and 12% were undecided. All in the 45-49 years age group preferred the "Ball" message.

Specifically, the "Couple" print message was preferred as it:

- a) Gave a feeling of security and togetherness (26%)
- b) It was easy to determine the message being given (26%)
- c) The loving couple was perceived as more appealing, and able to draw the viewers attention (23%)

The "Ball" print message was found to be more interesting to 18% of the sample who reported main reasons as being:

- a) The ball reminded the viewer of a very active (and therefore) virile man (33%)
- b) The ball was brighter and more forceful (11%)
- c) The ball reminded the viewer of a male sex organ (11%)

The Convincing Message (see Table 17)

An overwhelming majority found the "Couple" to be a more convincing message (82%).

5.1.7 Likelihood of Having a Vasectomy

Likelihood of Having a Vasectomy (see Table 18)

After viewing both messages, 8% of respondents reported being likely or very likely to have the procedure done. Even more important, is the 26% of respondents who reported being unsure as to whether they would have a vasectomy. The motivation for men emerged along class lines where the upper middle socio-economic group seemed to hold more potential to be eventually convinced (60% unsure vs 26% middle/lower middle and 19% for lower) while in the lower income 73% were more final about their intention "not likely/not at all likely".

DO YOU HAVE ANY CONCERNS ABOUT THE VASECTOMY?

- TABLE 1a

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Yes	12	3	5	2		2	1	7	4	6	6
%	24.0%	20.0%	31.3%	22.2%		28.6%	20.0%	36.8%	15.4%	18.2%	35.3%
No	38	12	11	7	3	5	4	12	22	27	11
%	76.0%	80.0%	68.8%	77.8%	100%	71.4%	80.0%	63.2%	84.6%	81.8%	64.7%

CONCERNS ABOUT THE VASECTOMY

- TABLE 1b

	TOTAL	Age of respondent				S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	12 *	3 *	5 *	2 *	2 *	1 *	7 *	4 *	6 *	6 *
Won't be able to enjoy sex %	4 33.3%	1 33.3%	1 20.0%	1 50.0%	1 50.0%	1 100%	2 28.6%	1 25.0%	2 33.3%	2 33.3%
Will become impotent %	3 25.0%	1 33.3%		1 50.0%	1 50.0%		1 14.3%	2 50.0%	2 33.3%	1 16.7%
Not reversible %	2 16.7%	1 33.3%	1 20.0%				1 14.3%	1 25.0%		2 33.3%
Level of safety %	2 16.7%		2 40.0%				2 28.6%		2 33.3%	
Is it a major operation %	1 8.3%	1 33.3%					1 14.3%		1 16.7%	
How it is done/the procedure %	1 8.3%		1 20.0%				1 14.3%			1 16.7%

Columns exceed 100% due to multiple responses

OVERALL WHAT IS THE TOPIC OF THE ADVERTISEMENT?

- TABLE 2

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	50 100%	15 100%	16 100%	9 100%	3 100%	7 100%	5 100%	19 100%	26 100%	33 100%	17 100%
Abortion %	32 64.0%	10 66.7%	11 68.8%	6 66.7%	3 100%	2 28.6%	4 80.0%	13 68.4%	15 57.7%	22 66.7%	10 58.8%
Family planning %	14 28.0%	4 26.7%	4 25.0%	2 22.2%		4 57.1%	1 20.0%	5 26.3%	8 30.8%	10 30.3%	4 23.5%
Male contracep. %	1 2.0%			1 11.1%				1 5.3%			1 5.9%
Other %	1 2.0%					1 14.3%			1 3.8%	1 3.0%	
Don't know %	2 4.0%	1 6.7%	1 6.3%						2 7.7%		2 11.8%

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	*	*	*	*	*	*	*	*	*	*	*
sec. is a permanent form											
FP	22	5	7	5	1	4	3	7	12	13	9
%	44.0%	33.3%	43.8%	55.6%	33.3%	57.1%	60.0%	36.8%	46.2%	39.4%	52.9%
sec. prevents partner from getting											
Pregnant	21	5	10	2	3	1	1	8	12	14	7
%	42.0%	33.3%	62.5%	22.2%	100%	14.3%	20.0%	42.1%	46.2%	42.4%	41.2%
sec. is man's way of sharing FP res-											
ponsibility	15	5	3	4	1	2	2	7	6	10	5
%	30.0%	33.3%	18.8%	44.4%	33.3%	28.6%	40.0%	36.8%	23.1%	30.3%	29.4%
sec. is the best											
FP method	7	2	2		1	2	2	5		7	
%	14.0%	13.3%	12.5%		33.3%	28.6%	40.0%	26.3%		21.2%	
sec. will not affect											
ex organ	2	1		1				1	1	1	1
%	4.0%	6.7%		11.1%				5.3%	3.8%	3.0%	5.9%
simple no knife											
operation	2	2							2	1	1
%	4.0%	13.3%							7.7%	3.0%	5.9%
ick, safe											
procedure	1	1						1		1	
%	2.0%	6.7%						5.3%		3.0%	
joy sex without											
worry	1		1						1		1
%	2.0%		6.3%						3.8%		5.9%
vents you from having too many											
children	1		1					1		1	
%	2.0%		6.3%					5.3%		3.0%	
Other	1	1						1		1	
%	2.0%	6.7%						5.3%		3.0%	
Don't know	1			1					1	1	
%	2.0%			11.1%					3.8%	3.0%	

* Columns exceed 100% due to multiple responses

BENEFITS OF THE VASECTOMY

- TABLE 4

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50 *	15 *	16 *	9 *	3 *	7 *	5 *	19 *	26 *	33 *	17 *
Vasec. is a lifetime of FP protection	34 68.0%	9 60.0%	10 62.5%	6 66.7%	2 66.7%	7 100%	5 100%	12 63.2%	17 65.4%	24 72.7%	10 58.8%
Vasectomy is a no knife procedure	10 20.0%	4 26.7%	2 12.5%	2 22.2%	1 33.3%	1 14.3%	2 40.0%	3 15.8%	5 19.2%	5 15.2%	5 29.4%
Vasec. is quick	9 18.0%	2 13.3%	3 18.8%	2 22.2%	1 33.3%	1 14.3%	1 20.0%	2 10.5%	6 23.1%	6 18.2%	3 17.6%
No fear of unplanned pregnancy with vasectomy	9 18.0%	3 20.0%	4 25.0%	1 11.1%		1 14.3%		3 15.8%	6 23.1%	6 18.2%	3 17.6%
Vasec. is safe	7 14.0%	2 13.3%	4 25.0%	1 11.1%			2 40.0%	4 21.1%	1 3.8%	4 12.1%	3 17.6%
Enjoy sex without worry	2 4.0%		2 12.5%					1 5.3%	1 3.8%	1 3.0%	1 5.9%
Assure	1 2.0%		1 6.3%					1 5.3%		1 3.0%	
Other	2 4.0%	1 6.7%			1 33.3%			1 5.3%	1 3.8%	2 6.1%	

Columns exceed 100% due to multiple responses

TIME VASECTOMY PROCEDURE TAKES

- TABLE 5

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
5 minutes	48	14	15	9	3	7	5	19	24	31	17
%	96.0%	93.3%	93.8%	100%	100%	100%	100%	100%	92.3%	93.9%	100%
10 minutes	1		1						1	1	
%	2.0%		6.3%						3.8%	3.0%	
24 hrs	1	1							1	1	
%	2.0%	6.7%							3.8%	3.0%	

HOW SOON AFTER THE VASECTOMY CAN NORMAL WORK BE RESUMED?

- TABLE 6

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid. / Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
24 hours	45	14	14	7	3	7	5	18	22	31	14
%	90.0%	93.3%	87.5%	77.8%	100%	100%	100%	94.7%	84.6%	93.9%	82.4%
Anytime he is ready	1			1					1	1	
%	2.0%			11.1%					3.8%	3.0%	
Don't know	4	1	2	1				1	3	1	3
%	8.0%	6.7%	12.5%	11.1%				5.3%	11.5%	3.0%	17.6%

WHO SHOULD YOU CONTACT FOR INFORMATION ON VASECTOMY?

- TABLE 8

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Personal Choice											
Provider	26	8	12	2	2	2	3	13	10	17	9
%	52.0%	53.3%	75.0%	22.2%	66.7%	28.6%	60.0%	68.4%	38.5%	51.5%	52.9%
Doctor/Nurse	21	7	3	5	1	5	2	4	15	14	7
%	42.0%	46.7%	18.8%	55.6%	33.3%	71.4%	40.0%	21.1%	57.7%	42.4%	41.2%
Family Planning clinic/ FP board	2			2				2		1	1
%	4.0%			22.2%				10.5%		3.0%	5.9%
Other	1		1						1	1	
%	2.0%		6.3%						3.8%	3.0%	

WHERE IS THE VASECTOMY PROCEDURE TO BE DONE?

- TABLE 9

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
In a doctor's office	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%

DID YOU LEARN ANYTHING NEW ABOUT THE VASECTOMY?

- TABLE 10a

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
30-34	30	12	10	3	2	3	2	12	16	18	12
%	60.0%	80.0%	62.5%	33.3%	66.7%	42.9%	40.0%	63.2%	61.5%	54.5%	70.6%
40-44	20	3	6	6	1	4	3	7	10	15	5
%	40.0%	20.0%	37.5%	66.7%	33.3%	57.1%	60.0%	36.8%	38.5%	45.5%	29.4%

WHAT DID YOU LEARN?

- TABLE 10b

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	30	12	10	3	2	3	2	12	16	18	12
%	*	*	*	*	*	*	*	*	*	*	*
Procedure takes a short time/											
5 minutes	12	4	2	2	2	2		4	8	8	4
%	40.0%	33.3%	20.0%	66.7%	100%	66.7%		33.3%	50.0%	44.4%	33.3%
Is a no-knife procedure	9	2	5	1	1		1	4	4	5	4
%	30.0%	16.7%	50.0%	33.3%	50.0%		50.0%	33.3%	25.0%	27.8%	33.3%
Can resume normal activities in 24 hrs	5	2	2			1	1	3	1	4	1
%	16.7%	16.7%	20.0%			33.3%	50.0%	25.0%	6.3%	22.2%	8.3%
It's a minor operation	2	1	1					1	1		2
%	6.7%	8.3%	10.0%					8.3%	6.3%		16.7%
It's effectiveness	2	2						2		2	
%	6.7%	16.7%						16.7%		11.1%	
No answer	2	1	1						2		2
%	6.7%	8.3%	10.0%						12.5%		16.7%
Can have sex soon after procedure	1			1					1	1	
%	3.3%			33.3%					6.3%	5.6%	
Provides lifetime protection	1	1							1	1	
%	3.3%	8.3%							6.3%	5.6%	
Other	1	1							1		1
%	3.3%	8.3%							6.3%		8.3%

Columns exceed 100% due to multiple responses

SUGGESTIONS FOR IMPROVING THE AD?

- TABLE 11

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	15 *	16 *	9 *	3 *	7 *	5 *	19 *	26 *	33 *	17 *
Tell about side effects %	5 10.0%	3 20.0%	2 12.5%					4 21.1%	1 3.8%	4 12.1%	1 5.9%
Tell what will be done if no knife %	2 4.0%	2 13.3%						1 5.3%	1 3.8%	2 6.1%	
Needs to get across importance of having vasectomy %	1 2.0%					1 14.3%	1 20.0%			1 3.0%	
Show results of having vasectomy %	1 2.0%					1 14.3%	1 20.0%			1 3.0%	
Have more information pictures and eye-catching writing %	1 2.0%		1 6.3%				1 20.0%			1 3.0%	
None %	39 78.0%	9 60.0%	13 81.3%	9 100%	3 100%	5 71.4%	3 60.0%	14 73.7%	22 84.6%	24 72.7%	15 88.2%
Other %	1 2.0%					1 14.3%			1 3.8%	1 3.0%	
No answer %	1 2.0%	1 6.7%						1 3.8%			1 5.9%

Columns exceed 100% due to multiple responses

FEELINGS AND LEAVES ABOUT VASECTOMY (Prompted)

- TABLE 12

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	*	*	*	*	*	*	*	*	*	*	*
Vasectomy provides lifetime protection	48	13	16	9	3	7	5	19	24	32	16
%	96.0%	86.7%	100%	100%	100%	100%	100%	100%	92.3%	97.0%	94.1%
Vasectomy is a quick procedure	45	13	15	7	3	7	5	18	22	31	14
%	90.0%	86.7%	93.8%	77.8%	100%	100%	100%	94.7%	84.6%	93.9%	82.4%
Vasectomy is very reliable	37	11	12	6	2	6	4	14	19	25	12
%	74.0%	73.3%	75.0%	66.7%	66.7%	85.7%	80.0%	73.7%	73.1%	75.8%	70.6%
Vasectomy is a safe method	33	8	11	5	3	6	3	13	17	24	9
%	66.0%	53.3%	68.8%	55.6%	100%	85.7%	60.0%	68.4%	65.4%	72.7%	52.9%

* Columns exceed 100% due to multiple responses

LEVEL OF INTEREST IN INFORMATION ABOUT THE VASECTOMY

- TABLE 13

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	50 100%	15 100%	16 100%	9 100%	3 100%	7 100%	5 100%	19 100%	26 100%	33 100%	17 100%
Very interested %	6 12.0%	2 13.3%	1 6.3%	1 11.1%		2 28.6%		2 10.5%	4 15.4%	4 12.1%	2 11.8%
Somewhat interested %	7 14.0%	2 13.3%	2 12.5%	2 22.2%	1 33.3%			4 21.1%	3 11.5%	7 21.2%	
Not sure %	12 24.0%	3 20.0%	6 37.5%	2 22.2%		1 14.3%	3 60.0%	5 26.3%	4 15.4%	9 27.3%	3 17.6%
Not very interested %	12 24.0%	3 20.0%	4 25.0%	3 33.3%		2 28.6%	1 20.0%	4 21.1%	7 26.9%	7 21.2%	5 29.4%
Not at all interested %	13 26.0%	5 33.3%	3 18.8%	1 11.1%	2 66.7%	2 28.6%	1 20.0%	4 21.1%	8 30.8%	6 18.2%	7 41.2%

REASONS FOR LACK OF INTEREST IN VASECTOMY

- TABLE 14

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	25 *	8 *	7 *	4 *	2 *	4 *	2 *	8 *	15 *	13 *	12 *
Method not reversible %	4 16.0%	1 12.5%	2 28.6%	1 25.0%				2 25.0%	2 13.3%	2 15.4%	2 16.7%
Doesn't feel it is Safe/ not sure of side effects %	3 12.0%	1 12.5%	1 14.3%	1 25.0%				1 12.5%	2 13.3%	2 15.4%	1 8.3%
Don't like vasectomy %	3 12.0%	1 12.5%	2 28.6%						3 20.0%	1 7.7%	2 16.7%
At his age doesn't need any more children %	2 8.0%					2 50.0%	1 50.0%		1 6.7%	2 15.4%	
Already using other form of contracep. %	1 4.0%				1 50.0%				1 6.7%		1 8.3%
Has only one partner %	1 4.0%				1 50.0%				1 6.7%		1 8.3%
Wife uses other forms of contracep. %	1 4.0%					1 25.0%	1 50.0%			1 7.7%	
Because of religion %	1 4.0%					1 25.0%	1 50.0%			1 7.7%	
More simple and sure ways of protecting self %	1 4.0%	1 12.5%						1 12.5%		1 7.7%	

(continued)

REASONS FOR LACK OF INTEREST IN VASECTOMY

- TABLE 14

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
Doesn't say exactly what will be done %	1 4.0%	1 12.5%						1 6.7%		1 7.7%	
Not interested in any contracep. %	1 4.0%				1 50.0%			1 12.5%		1 7.7%	
Other %	8 32.0%	4 50.0%	2 28.6%	2 50.0%			3 37.5%	5 33.3%	3 23.1%	5 41.7%	
No answer %	1 4.0%				1 25.0%			1 6.7%		1 8.3%	

* Columns exceed 100% due to multiple responses

OVERALL, WHICH IS A BETTER AD

- TABLE 15a

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Ball	12	4	3	1	2	2	1	2	9	8	4
%	24.0%	26.7%	18.8%	11.1%	66.7%	28.6%	20.0%	10.5%	34.6%	24.2%	23.5%
Couple	33	8	12	7	1	5	4	15	14	20	13
%	66.0%	53.3%	75.0%	77.8%	33.3%	71.4%	80.0%	78.9%	53.8%	60.6%	76.5%
Don't know/ not sure	5	3	1	1				2	3	5	
%	10.0%	20.0%	6.3%	11.1%				10.5%	11.5%	15.2%	

REASON FOR AD BEING BETTER

- TABLE 15b

	TOTAL	Overall, which is a better AD?	
		Ball	Couple
TOTAL %	*	12 *	33 *
Easy to determine message being sent/ easy to relate to couple %	13 28.9%		13 39.4%
Couple gives a feeling of togetherness/security %	8 17.8%		8 24.2%
Ball portrays sports %	4 8.9%	3 25.0%	1 3.0%
Couple is very eyecatching %	4 8.9%		4 12.1%
Has a human touch %	4 8.9%		4 12.1%
Big & bright %	3 6.7%	3 25.0%	
Ball reminds you of male sex organ %	2 4.4%	2 16.7%	
Ball gives more info. at a glance %	2 4.4%	2 16.7%	
Quality of print clearer %	1 2.2%	1 8.3%	
Other %	6 13.3%	2 16.7%	4 12.1%

* Columns exceed 100% due to multiple responses

WHICH OF THE TWO ADS IS MORE INTERESTING

- TABLE 16a

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	50 100%	15 100%	16 100%	9 100%	3 100%	7 100%	5 100%	19 100%	26 100%	33 100%	17 100%
Couple %	34 68.0%	10 66.7%	12 75.0%	7 77.8%		5 71.4%	5 100%	16 84.2%	13 50.0%	22 66.7%	12 70.6%
Ball %	9 18.0%	2 13.3%	2 12.5%		3 100%	2 28.6%		2 10.5%	7 26.9%	5 15.2%	4 23.5%
Don't know/ Not sure %	6 12.0%	3 20.0%	2 12.5%	1 11.1%				1 5.3%	5 19.2%	5 15.2%	1 5.9%
No answer %	1 2.0%			1 11.1%					1 3.8%	1 3.0%	

REASON FOR CHOOSING SPECIFIC AD

- TABLE 16b

	TOTAL	Which of the two ADs is more interesting?	
		Ball	Couple
TOTAL %		9 100.0%	34 100.0%
Gives a feeling of security/togetherness %	9 20.9%		9 26.5%
Can easily determine message being given %	9 20.9%		9 26.5%
Loving couple draws your attention/more appealing %	8 18.6%		8 23.5%
Ball reminds you of a very active man %	4 9.3%	3 33.3%	1 2.9%
Picture boosts a man's ego %	2 4.7%		2 5.9%
Brighter & more forceful %	1 2.3%	1 11.1%	
Ball reminds you of male sex organ %	1 2.3%	1 11.1%	
You will still have partner after vasectomy %	1 2.3%		1 2.9%
Get more information/better understanding %	1 2.3%	1 11.1%	
Arouses your curiosity %	1 2.3%	1 11.1%	

(continued)

REASON FOR CHOOSING SPECIFIC AD

- TABLE 16b

	TOTAL	Which of the two ADs is more interesting?	
		Ball	Couple
Man looks responsible %	1 2.3%		1 2.9%
Other %	2 4.7%	1 11.1%	1 2.9%
None %	2 4.7%		2 5.9%
Don't know %	1 2.3%	1 11.1%	
No answer %	1 2.3%		1 2.9%

WHICH AD IS MORE CONVINCING?

- TABLE 17

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	50 100%	15 100%	16 100%	9 100%	3 100%	7 100%	5 100%	19 100%	26 100%	33 100%	17 100%
Couple %	41 82.0%	10 66.7%	14 87.5%	8 88.9%	3 100%	6 85.7%	5 100%	18 94.7%	18 69.2%	27 81.8%	14 82.4%
Ball %	4 8.0%	2 13.3%	1 6.3%			1 14.3%			4 15.4%	2 6.1%	2 11.8%
None %	1 2.0%	1 6.7%							1 3.8%	1 3.0%	
Don't know %	4 8.0%	2 13.3%	1 6.3%	1 11.1%				1 5.3%	3 11.5%	3 9.1%	1 5.9%

LIKELIHOOD OF HAVING A VASECTOMY

- TABLE 18

	TOTAL	Age of respondent					S/E classification			Location	
		30-34 yrs	35-39 yrs	40-44 yrs	45-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	50	15	16	9	3	7	5	19	26	33	17
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Not at all likely	22	8	6	3	1	4	1	7	14	12	10
%	44.0%	53.3%	37.5%	33.3%	33.3%	57.1%	20.0%	36.8%	53.8%	36.4%	58.8%
Not likely	11	4	3	2	1	1	1	5	5	8	3
%	22.0%	26.7%	18.8%	22.2%	33.3%	14.3%	20.0%	26.3%	19.2%	24.2%	17.6%
Not sure	13	2	6	2	1	2	3	5	5	11	2
%	26.0%	13.3%	37.5%	22.2%	33.3%	28.6%	60.0%	26.3%	19.2%	33.3%	11.8%
Likely	2		1	1				2		1	1
%	4.0%		6.3%	11.1%				10.5%		3.0%	5.9%
Very likely	2	1		1					2	1	1
%	4.0%	6.7%		11.1%				7.7%	3.0%	3.0%	5.9%



FEMALE

VASECTOMY

PRINT

5.2 Vasectomy Print - Female

Two messages were tested, that is "Ball" and "Couple". The body copy was identical for both messages while the graphics and layout differed. Messages were tested alternatively for comprehension among respondents. Each respondent was questioned on the body copy of one message and comparison of graphics for both messages. Testing was done among 50 females ages 25-45 years; from upper, middle/lower middle and lower socio-economic groups.

5.2.1 Concerns About Method (see Tables 22a, 22b, 23a and 23b)

Eighteen percent (18%) of the sample reported having concerns about the method prior to their viewing of the print messages. Concerns included whether the partner would become impotent, whether the partner would still be able to enjoy sex, the side effects of the method and if the procedure is reversible. After viewing the message a half (50%) reported that their concerns had been addressed, in particular that the procedure utilized no knife, thus there would be minimal danger of impotence and a muscle being cut.

5.2.2 General Comprehension

Overall Topic of Message (see Table 1)

Overall, more than a half of the respondents were able to correctly identify the main topic of the message as being the vasectomy (69%), while more than a quarter perceived the main topic to be family planning (29%).

Main Points of Message (see Table 2 and Table 3)

After viewing the respective message, respondents were correctly able to recall the main points of the message as being: "the vasectomy prevents you from having children" (43%); it is "the

man's way of sharing the responsibility" (26%) and that it is "a permanent form of family planning" (18%).

Additionally, almost three quarters of respondents (74%) spontaneously reported that where both partners had decided against having more children, the man could share the family planning responsibility by "Having a No-Scalpel Vasectomy" done.

5.2.3 Information Gained

Benefits of the Method (see Table 4)

After viewing the messages the main benefits recalled included:

- a) Providing a lifetime of family planning protection 33%
- b) Removing the fear of pregnancy 31%
- c) Being a safe method 22%
- d) Being a no knife procedure 18%
- e) Being quick 18%

Source of Additional Information (see Table 5)

More than a half of the respondents (51%) correctly cited the *Personal Choice Provider* as a source of further information, while others (43%) cited the doctor.

Specific Information (see Tables 6, 7, 8 and 9)

Almost all respondents (94%) correctly recalled the doctor's office as the location where the procedure is performed. There were no evident differences by age and socio-economic group.

When probed as to the time the procedure takes, respondents were able to correctly recall that the procedure was quick and took only fifteen minutes (96%).

Respondents were also probed as to recall of the recovery time needed (following the procedure) before the patient can resume normal work activity and sexual activity. Overall the vast majority (94%) correctly recalled this period, before the resumption of normal work activity, as 24 hours.

Regarding the recovery time needed before resumption of sexual activity, respondents tended to recall this period as specifically "within a few days" (47%) rather than "when he is comfortable to do so" (35%)

5.2.4 Overall Ratings

Suggestions For Improvement (see Table 10)

Most respondents found the messages to be relatively clear and only two (2) respondents reported finding anything confusing in the messages. The respective respondents were however, unable to articulate precisely what it was they found confusing. Additionally, few (12%) had suggestions for improvement. Suggestions for improvement included telling what the side-effects are and how the procedure is done.

Specific Response to Message (see Table 11)

In general the messages were able to leave the respondent with relatively positive perceptions on the method. The messages left the respondent feeling the method was: quick (100%), safe (96%), able to provide a lifetime of family planning protection (92%) and reliable (82%).

5.2.5 Motivation/Likelihood of Further Interest

Likelihood of Having Partner Speak to a Health Professional (see Tables 12, 13, 14 and 15)

As much as 47% of respondents exposed to the message reported being somewhat/very interested in having their partner seek further information on the method. An additional 41% were uncertain and 12% were not very interested. Motivation to seek further information emerged along class lines where the lower socio-economic group was more likely to be very/somewhat interested (55%), while the middle socio-economic group tended to be uncertain as to their level of interest (58%).

Overall the main reason given for lack of interest is the knowledge of the partner's negative reaction (67%).

Interestingly, as many as 63% reported learning something new about the method, and these respondents were more likely to be urban dwellers (79% vs 40%). Viewers of the messages reported learning that the method was:

- a) Quick (35%)
- b) A no knife procedure (29%)
- c) Didn't affect sexual activity (26%)
- d) Can resume sex after a short while (13%)
- e) Can resume work shortly after procedure (13%)

5.2.6 Comparison of Both Messages

Better Print Message (see Tables 16 and 17)

Overall, the "Couple" was cited as better print message (63% vs 31% Ball) as it showed love and togetherness (32%), and the presence of the couple aided in interpretation and the ability of the individual to relate to the situation (26%). The "Ball" print message was preferred by 31% of the sample as it was brighter and better able to grab the viewers attention (33%).

More Interesting (see Tables 18 and 19)

Again the "Couple " message was preferred by the majority (69%). It was liked for similar reasons as previous that is: showing love and togetherness and contentment (41%). The 14% who thought the "Ball" to be the most interesting gave the main reason being its ability to draw the viewer's attention (43%).

More Convincing (see Tables 20 and 21)

The "Couple" print message was again touted as being the most convincing message (71% vs 25% Ball)

Responses to whether they would want their partners to have a vasectomy was split almost equally in three:

Likely/Very likely	35%
Unsure	35%
Unlikely	29%

Respondents in the middle/lower middle tended to be more unsure (47% vs 28% lower). Those 25-29 years old were more likely to be very interested (54%), while 30-34 years and 35-39 years tended to be unsure (44% and 46% respectively). Older respondents ages 40-45 years were not at all likely (43%).

OVERALL TOPIC OF AD

- TABLE 1

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Vasectomy %	34 69.4%	11 84.6%	9 56.3%	8 61.5%	6 85.7%	1 100%	12 63.2%	21 72.4%	19 65.5%	15 75.0%
Family Planning %	14 28.6%	2 15.4%	6 37.5%	5 38.5%	1 14.3%		7 36.8%	7 24.1%	10 34.5%	4 20.0%
Pregnancy %	1 2.0%		1 6.3%					1 3.4%		1 5.0%

MAIN POINTS OF THE ADVERTISEMENT

- TABLE 2

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	49	13	16	13	7	1	19	29	29	20
%	*	*	*	*	*	*	*	*	*	*
Vasec. prevents you from having children	21	5	6	6	4	1	9	11	13	8
%	42.9%	38.5%	37.5%	46.2%	57.1%	100%	47.4%	37.9%	44.8%	40.0%
Vasec. is man's way of sharing FP responsib.	13		6	3	4		6	7	8	5
%	26.5%		37.5%	23.1%	57.1%		31.6%	24.1%	27.6%	25.0%
Vasec. is a permanent form of FP	9	2	3	3	1	1	1	7	5	4
%	18.4%	15.4%	18.8%	23.1%	14.3%	100%	5.3%	24.1%	17.2%	20.0%
Doesn't prevent you from having sex/enjoying sex	6	3	1	2			2	4	4	2
%	12.2%	23.1%	6.3%	15.4%			10.5%	13.8%	13.8%	10.0%
Vasec. is the best FP method	5	1	2	1	1		3	2	2	3
%	10.2%	7.7%	12.5%	7.7%	14.3%		15.8%	6.9%	6.9%	15.0%
Vasec. is a simple and quick procedure	2	1		1			1	1	1	1
%	4.1%	7.7%		7.7%			5.3%	3.4%	3.4%	5.0%
It's 99% effective	1		1					1	1	
%	2.0%		6.3%					3.4%	3.4%	
Vasec. is a form of FP	1	1					1		1	
%	2.0%	7.7%					5.3%		3.4%	
Other	2	1	1					2		2
%	4.1%	7.7%	6.3%					6.9%		10.0%

* Columns exceed 100% due to multiple responses

WAYS IN WHICH PARTNER COULD SHARE RESPONSIBILITY

- TABLE 3

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Have a vasc./no vasectomy %	36 73.5%	10 76.9%	12 75.0%	9 69.2%	5 71.4%	1 100%	13 68.4%	22 75.9%	23 79.3%	13 65.0%
Family planning %	9 18.4%	3 23.1%	3 18.8%	1 7.7%	2 28.6%		5 26.3%	4 13.8%	5 17.2%	4 20.0%
Pregnancy %	3 6.1%			3 23.1%			1 5.3%	2 6.9%	1 3.4%	2 10.0%
Don't know %	1 2.0%		1 6.3%					1 3.4%		1 5.0%

BENEFITS OF THE VASECTOMY

- TABLE 4

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 *	13 *	16 *	13 *	7 *	1 *	19 *	29 *	29 *	20 *
Vasec. is lifetime of FP method %	16 32.7%	3 23.1%	5 31.3%	4 30.8%	4 57.1%		4 21.1%	12 41.4%	11 37.9%	5 25.0%
No fear of pregnancy with vasectomy %	15 30.6%	4 30.8%	1 6.3%	7 53.8%	3 42.9%		7 36.8%	8 27.6%	9 31.0%	6 30.0%
Vasec. is safe %	11 22.4%	1 7.7%	5 31.3%	3 23.1%	2 28.6%		4 21.1%	7 24.1%	6 20.7%	5 25.0%
Vasec. is a no knife procedure %	9 18.4%		5 31.3%	4 30.8%		1 100%	4 21.1%	4 13.8%	7 24.1%	2 10.0%
Vasec. is quick %	9 18.4%	2 15.4%	5 31.3%	2 15.4%		1 100%	5 26.3%	3 10.3%	6 20.7%	3 15.0%
Vasec. is over 99.8% effective %	8 16.3%	3 23.1%	2 12.5%	1 7.7%	2 28.6%	1 100%	6 31.6%	1 3.4%	6 20.7%	2 10.0%
Doesn't affect sexual activity %	6 12.2%	2 15.4%	2 12.5%	2 15.4%			2 10.5%	4 13.8%	1 3.4%	5 25.0%
No side effects %	1 2.0%		1 6.3%					1 3.4%	1 3.4%	
Other %	1 2.0%		1 6.3%				1 5.3%			1 5.0%
Don't know %	1 2.0%		1 6.3%					1 3.4%		1 5.0%

Columns exceed 100% due to multiple responses

WHO SHOULD YOU CONTACT FOR INFORMATION?

- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL	23	7	7	7	2	10	13	14	9
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Personal Choice provider	12	4	4	3	1	7	5	11	1
%	52.2%	57.1%	57.1%	42.9%	50.0%	70.0%	38.5%	78.6%	11.1%
Doctor/Nurse	10	2	3	4	1	3	7	3	7
%	43.5%	28.6%	42.9%	57.1%	50.0%	30.0%	53.8%	21.4%	77.8%
PH clinic	1	1					1		1
%	4.3%	14.3%					7.7%		11.1%

WHERE SHOULD VASECTOMY BE DONE?

- TABLE 6

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
The doctor's office %	46 93.9%	13 100%	14 87.5%	12 92.3%	7 100%	1 100%	19 100%	26 89.7%	28 96.6%	18 90.0%
Personal Choice Provider %	1 2.0%			1 7.7%				1 3.4%	1 3.4%	
Don't know %	1 2.0%		1 6.3%					1 3.4%		1 5.0%
Refuse %	1 2.0%		1 6.3%					1 3.4%		1 5.0%

LENGTH OF TIME PROCEDURE TAKES

- TABLE 7

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	49	13	16	13	7	1	19	29	29	20
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
15 minutes	47	13	15	12	7	1	19	27	28	19
%	95.9%	100%	93.8%	92.3%	100%	100%	100%	93.1%	96.6%	95.0%
24 hrs	1			1				1		1
%	2.0%			7.7%				3.4%		5.0%
Don't know	1		1					1	1	
%	2.0%		6.3%					3.4%	3.4%	

HOW SOON AFTER CAN PARTNER RESUME WORK?

- TABLE 8

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	49	13	16	13	7	1	19	29	29	20
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
4 hrs	46	12	15	12	7	1	19	26	28	18
%	93.9%	92.3%	93.8%	92.3%	100%	100%	100%	89.7%	96.6%	90.0%
few days	2	1		1				2	1	1
%	4.1%	7.7%		7.7%				6.9%	3.4%	5.0%
Don't know	1		1					1		1
%	2.0%		6.3%					3.4%		5.0%

AFTER CAN PARTNER HAVE SEX?

- TABLE 9

Age of respondent			S/E Group		Location of interview	
34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
7 100%	7 100.0%	2 100.0%	10 100.0%	13 100.0%	14 100.0%	9 100.0%
3 39%	2 28.6%		5 50.0%	4 30.8%	7 50.0%	2 22.2%
2 6%	5 71.4%	2 100.0%	5 50.0%	6 46.2%	7 50.0%	4 44.4%
2 6%				3 23.1%		3 33.3%

SUGGESTIONS/RECOMMENDATIONS FOR IMPROVEMENT

- TABLE 10

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	49	13	16	13	7	1	19	29	29	20
%	*	*	*	*	*	*	*	*	*	*
Tell what are the side effects	3			2	1		2	1	2	1
%	6.1%			15.4%	14.3%		10.5%	3.4%	6.9%	5.0%
Tell how the procedure is done	3	1		2			1	2	1	2
%	6.1%	7.7%		15.4%			5.3%	6.9%	3.4%	10.0%
None	44	12	16	10	6	1	16	27	26	18
%	89.8%	92.3%	100%	76.9%	85.7%	100%	84.2%	93.1%	89.7%	90.0%

* Columns exceed 100% due to multiple responses

FEELING AD LEAVES YOU WITH

- TABLE 11

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 *	13 *	16 *	13 *	7 *	1 *	19 *	29 *	29 *	20 *
Vasec. is quick %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Vasec. is safe %	47 95.9%	13 100%	15 93.8%	13 100%	6 85.7%	1 100%	19 100%	27 93.1%	27 93.1%	20 100%
Vasec. provides lifetime of protection %	45 91.8%	12 92.3%	14 87.5%	12 92.3%	7 100%	1 100%	18 94.7%	26 89.7%	25 86.2%	20 100%
Vasectomy is very reliable %	40 81.6%	13 100%	10 62.5%	10 76.9%	7 100%		17 89.5%	23 79.3%	23 79.3%	17 85.0%

* Columns exceed 100% due to multiple responses

LEVEL OF INTEREST IN HAVING PARTNER SEEK MORE INFORMATION? - TABLE 12

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Very interested %	17 34.7%	6 46.2%	5 31.3%	3 23.1%	3 42.9%	1 100%	4 21.1%	12 41.4%	12 41.4%	5 25.0%
Somewhat interested %	6 12.2%	1 7.7%	2 12.5%	2 15.4%	1 14.3%		2 10.5%	4 13.8%	3 10.3%	3 15.0%
Not sure %	20 40.8%	5 38.5%	6 37.5%	7 53.8%	2 28.6%		11 57.9%	9 31.0%	13 44.8%	7 35.0%
Not very interested %	6 12.2%	1 7.7%	3 18.8%	1 7.7%	1 14.3%		2 10.5%	4 13.8%	1 3.4%	5 25.0%

REASONS FOR LACK OF INTEREST?

- TABLE 13

	TOTAL	Age of respondent				S/E classification		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	6 100%	1 100%	3 100%	1 100%	1 100%	2 100%	4 100%	1 100%	5 100%
Knows that partner would react negatively %	4 66.7%	1 100%	1 33.3%	1 100%	1 100%		4 100%	1 100%	3 60.0%
Other %	2 33.3%		2 66.7%			2 100%			2 40.0%

LEARNT ANYTHING ABOUT THE VASECTOMY YOU DID NOT KNOW?

- TABLE 14

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	49	13	16	13	7	1	19	29	29	20
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Yes	31	9	9	7	6	1	11	19	23	8
%	63.3%	69.2%	56.3%	53.8%	85.7%	100%	57.9%	65.5%	79.3%	40.0%
No	17	4	7	6			7	10	5	12
%	34.7%	30.8%	43.8%	46.2%			36.8%	34.5%	17.2%	60.0%
Don't know	1				1		1		1	
%	2.0%				14.3%		5.3%		3.4%	

WHAT DID YOU LEARN?

- TABLE 15

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	31	9	9	7	6	1	11	19	23	8
%	*	*	*	*	*	*	*	*	*	*
It's a quick procedure	11	2	5	3	1	1	3	7	7	4
%	35.5%	22.2%	55.6%	42.9%	16.7%	100%	27.3%	36.8%	30.4%	50.0%
Knife procedure	9	4	1	1	3		5	4	6	3
%	29.0%	44.4%	11.1%	14.3%	50.0%		45.5%	21.1%	26.1%	37.5%
Doesn't affect sexual activity	8	1	2	1	4	1	2	5	7	1
%	25.8%	11.1%	22.2%	14.3%	66.7%	100%	18.2%	26.3%	30.4%	12.5%
Can resume work shortly after procedure	4	1	2		1	1	2	1	4	
%	12.9%	11.1%	22.2%		16.7%	100%	18.2%	5.3%	17.4%	
Can resume sex shortly after	4	1	2	1			1	3	4	
%	12.9%	11.1%	22.2%	14.3%			9.1%	15.8%	17.4%	
It's for men only	2			1	1		1	1	2	
%	6.5%			14.3%	16.7%		9.1%	5.3%	8.7%	
Women can't be pregnant	2	2					1	1	2	
%	6.5%	22.2%					9.1%	5.3%	8.7%	
It's not a major operation	1			1			1		1	
%	3.2%			14.3%			9.1%		4.3%	
No side effects will be experienced	1				1		1		1	
%	3.2%				16.7%		9.1%		4.3%	
Other	2	2						2		2
%	6.5%	22.2%						10.5%		25.0%
No answer	1			1				1	1	
%	3.2%			14.3%				5.3%	4.3%	

Columns exceed 100% due to multiple responses

OVERALL, WHICH IS A BETTER PRINT AD?

- TABLE 16

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Couple %	31 63.3%	8 61.5%	10 62.5%	7 53.8%	6 85.7%		13 68.4%	18 62.1%	20 69.0%	11 55.0%
Ball %	15 30.6%	4 30.8%	6 37.5%	4 30.8%	1 14.3%	1 100%	5 26.3%	9 31.0%	7 24.1%	8 40.0%
Don't know %	3 6.1%	1 7.7%		2 15.4%			1 5.3%	2 6.9%	2 6.9%	1 5.0%

REASONS FOR CHOOSING SPECIFIC AD

- TABLE 17

	TOTAL	Overall, which is a better print AD?	
		Ball	Couple
TOTAL %	46 *	15 *	31 *
Shows love/togetherness %	10 21.7%		10 32.3%
Couple explains what ad is about/can relate to %	9 19.6%	1 6.7%	8 25.8%
Brighter/gets your attention/prettier %	8 17.4%	5 33.3%	3 9.7%
Ball is a clearer ad %	2 4.3%	2 13.3%	
More informative %	2 4.3%	1 6.7%	1 3.2%
Bigger print- tells you exactly what ad is about %	1 2.2%	1 6.7%	
Other %	10 21.7%	3 20.0%	7 22.6%
No answer %	5 10.9%	2 13.3%	3 9.7%

* Columns exceed 100% due to multiple responses

WHICH AD IS MORE INTERESTING

- TABLE 18

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Couple %	34 69.4%	10 76.9%	11 68.8%	8 61.5%	5 71.4%		13 68.4%	21 72.4%	20 69.0%	14 70.0%
Ball %	7 14.3%	1 7.7%	4 25.0%	1 7.7%	1 14.3%	1 100%	3 15.8%	3 10.3%	3 10.3%	4 20.0%
Don't know %	6 12.2%	2 15.4%		4 30.8%			2 10.5%	4 13.8%	5 17.2%	1 5.0%
No answer %	2 4.1%		1 6.3%		1 14.3%		1 5.3%	1 3.4%	1 3.4%	1 5.0%

REASONS FOR CHOOSING SPECIFIC AD

- TABLE 19

	TOTAL	Which AD is more interested	
		Ball	Couple
TOTAL %	41 *	7 *	34 *
Shows love/togetherness/ contentment %	15 36.6%	1 14.3%	14 41.2%
Couple makes you want to read about vasectomy/explains ad %	5 12.2%		5 14.7%
Draws your attention quickly/ arouses your curiosity %	4 9.8%	3 42.9%	1 2.9%
Couple look happy after having had vasectomy %	3 7.3%		3 8.8%
Shows that you are talking about people %	2 4.9%		2 5.9%
Brighter/more colourful %	1 2.4%		1 2.9%
From beginning you know it's about vasectomy %	1 2.4%	1 14.3%	
Shows a couple planning their future %	1 2.4%		1 2.9%

(continued)

	TOTAL	Which AD is more interested	
		Ball	Couple
	1 2.4%		1 2.9%
	1 2.4%	1 14.3%	
fter	1 2.4%		1 2.9%
	1 2.4%	1 14.3%	
	4 9.8%	1 14.3%	3 8.8%
	1 2.4%		1 2.9%
	3 7.3%	1 14.3%	2 5.9%

multiple responses

WHICH OF THE ADS IS MORE CONVINCING

- TABLE 20

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Ball %	12 24.5%	3 23.1%	5 31.3%	3 23.1%	1 14.3%	1 100%	5 26.3%	6 20.7%	7 24.1%	5 25.0%
Couple %	35 71.4%	9 69.2%	11 68.8%	10 76.9%	5 71.4%		12 63.2%	23 79.3%	20 69.0%	15 75.0%
Don't know %	1 2.0%	1 7.7%					1 5.3%		1 3.4%	
No answer %	1 2.0%				1 14.3%		1 5.3%		1 3.4%	

HOW LIKELY ARE YOU TO HAVE PARTNER

- TABLE 21

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	49 100%	13 100%	16 100%	13 100%	7 100%	1 100%	19 100%	29 100%	29 100%	20 100%
Not at all likely %	10 20.4%	2 15.4%	4 25.0%	1 7.7%	3 42.9%		5 26.3%	5 17.2%	5 17.2%	5 25.0%
Not likely %	4 8.2%	1 7.7%		3 23.1%			1 5.3%	3 10.3%	2 6.9%	2 10.0%
Not sure %	17 34.7%	3 23.1%	7 43.8%	6 46.2%	1 14.3%		9 47.4%	8 27.6%	12 41.4%	5 25.0%
Likely %	7 14.3%	2 15.4%	2 12.5%	1 7.7%	2 28.6%		3 15.8%	4 13.8%	6 20.7%	1 5.0%
Very likely %	10 20.4%	5 38.5%	2 12.5%	2 15.4%	1 14.3%	1 100%	1 5.3%	8 27.6%	4 13.8%	6 30.0%
Don't know %	1 2.0%		1 6.3%					1 3.4%		1 5.0%

DO YOU HAVE ANY CONCERNS ABOUT THE VASECTOMY?

- TABLE 22a

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	49	13	16	13	7	1	19	29	29	20
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Yes	8	2	2	1	3	1	4	3	7	1
%	16.3%	15.4%	12.5%	7.7%	42.9%	100%	21.1%	10.3%	24.1%	5.0%
No	41	11	14	12	4		15	26	22	19
%	83.7%	84.6%	87.5%	92.3%	57.1%		78.9%	89.7%	75.9%	95.0%

CONCERNS ABOUT METHOD

- TABLE 22b

	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	8 100%	2 100%	2 100%	1 100%	3 100%	1 100%	4 100%	3 100%	7 100%	1 100%
Partner will become impotent %	3 37.5%		1 50.0%		2 66.7%	1 100%	1 25.0%	1 33.3%	3 42.9%	
Won't be able to enjoy sex %	2 25.0%	1 50.0%		1 100%			2 50.0%		1 14.3%	1 100%
The side effects %	1 12.5%		1 50.0%					1 33.3%	1 14.3%	
Is it reversible %	1 12.5%	1 50.0%						1 33.3%	1 14.3%	
Other %	1 12.5%				1 33.3%		1 25.0%		1 14.3%	

DO YOU STILL HAVE CONCERNS ABOUT THE VASECTOMY?

- TABLE 23a

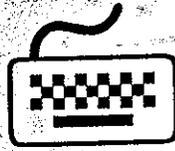
	TOTAL	Age of respondent				S/E classification			Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	8 100%	2 100%	2 100%	1 100%	3 100%	1 100%	4 100%	3 100%	7 100%	1 100%
Yes %	4 50.0%	2 100%	1 50.0%		1 33.3%		2 50.0%	2 66.7%	4 57.1%	
No %	3 37.5%		1 50.0%		2 66.7%	1 100%	1 25.0%	1 33.3%	3 42.9%	
Refuse %	1 12.5%			1 100%			1 25.0%			1 100%

WAYS IN WHICH CONCERNS WERE ADDRESSED

- TABLE 23b

	TOTAL	Age of respondent		S/E classification			Location of interview
		30-34 yrs	40-45 yrs	Upper middle (B)	Middle/lower middle (C)	Lower (D)	Urban
TOTAL %	3 *	1 *	2 *	1 *	1 *	1 *	3 *
No scalpel used therefore no risk of impotence %	3 100.0%	1 100.0%	2 100.0%	1 100.0%	1 100.0%	1 100.0%	3 100.0%
No muscles are cut %	1 33.3%		1 50.0%			1 100.0%	1 33.3%

* Columns exceed 100% due to multiple responses



**MALE
VASECTOMY
RADIO**

5.3 Vasectomy Radio- Male

Three radio messages were tested, that is: "New Spirit", "Manhood" and "I Must Admit". Each respondent listened and responded to two messages. A total of 40 persons evaluated each message. Responses are presented for individually for each specific message followed by comparisons elicited. Respondents were between 30-54 years, from upper, middle/lower middle and lower socio-economic groups.

i. "Manhood"

Q. What is the ad talking about? (unprompted) Table 1

The vast majority of respondents understood the ad to be talking about the vasectomy (90.2%)

Q. What are the main points the ad is trying to get across about vasectomy? (unprompted) Table 2

Main points of the ad were that the method "prevents you from having more children" (34.1%), "doesn't affect your manhood" 29.3%, while "is a man's way of sharing family planning responsibility", "is a permanent form of family planning" and is "quick" were each spontaneously recalled by 19.5% of the respondents.

Q. According to the ad, what are the benefits of the vasectomy as a method of contraception? (unprompted) Table 3

The main benefits recalled without prompting by respondents was that the method is "permanent" (39%), "with a vasectomy there is no need to worry about pregnancy" (24.4%), is quick (22%) and is "safe" (12.2%)

Q. According to the ad, is the no-scalpel vasectomy a permanent form of contraception? Table 4

Ninety-five (95%) percent of respondents recognized the method as permanent based on the ad.

Q. According to the ad, who should you ask for information about the no-scalpel vasectomy? Table 5

Ninety (90%) of respondents recalled the doctor as the person to ask for information about the method while 14.6% recalled the "Personal Choice Provider".

Q. According to the ad, where is the no-scalpel vasectomy procedure done? Table 6
The majority (75.6%) correctly recalled the "doctor's office" as the place where the procedure is done. Another 12.2% recalled the health clinic while 9.8% did not know.

Q. According to the ad, how soon after having the procedure can you resume having sex? (unprompted) Table 7
The majority (73.2%) recalled the time before resumption of sex as "a few days". Various times ranging from less than a month to more than a month was recalled by 14.6% while 9.8% did not know.

Q. After hearing this ad, how interested would you be in seeking further information about the no-scalpel vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 8
Respondents were split almost equally in three with 31.7% having some positive degree of interest (very interested - 14.6%, somewhat interested - 17.1%), 36.6% being "unsure", and 31.7% again being either "not very interested" (17.1%) or "not at all interested" (14.6%).

Those who were not interested were uncertain "whether it is the right thing to do" (63.6%) (Table 9)

Q. What suggestions can you give for improving this ad? Table 10
Four persons gave suggestions about how to improve the ad. Each gave a different suggestion as follows:

- "advise how soon after one can resume sex"
- "give more information on the vasectomy"
- "man needs to sound more convincing"
- "information on side effects needed".

WHAT IS AD TALKING ABOUT?

"MANHOOD"
- TABLE 1

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	41	11	17	4	5	4	1	17	23	13	28
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Vasectomy	37	9	15	4	5	4	1	16	20	11	26
%	90.2%	81.8%	88.2%	100%	100%	100%	100%	94.1%	87.0%	84.6%	92.9%
Contraceptive	1	1							1		1
%	2.4%	9.1%							4.3%		3.6%
Pregnancy	1	1						1			1
%	2.4%	9.1%						5.9%			3.6%
Family planning	2		2						2	2	
%	4.9%		11.8%						8.7%	15.4%	

OVERALL, WHAT WAS THE MAIN POINTS IN ADVERTISEMENT?

- TABLE 2

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	41	11	17	4	5	4	1	17	23	13	28
%	*	*	*	*	*	*	*	*	*	*	*
Vasec. prevents you from having more children	14	4	4	3	1	2	1	3	10	4	10
%	34.1%	36.4%	23.5%	75.0%	20.0%	50.0%	100%	17.6%	43.5%	30.8%	35.7%
Vasec. doesn't affect manhood	12	1	5	3	2	1		6	6	4	8
%	29.3%	9.1%	29.4%	75.0%	40.0%	25.0%		35.3%	26.1%	30.8%	28.6%
Vasec. is man's way of sharing FP responsibility	8	3	3			2		5	3	4	4
%	19.5%	27.3%	17.6%			50.0%		29.4%	13.0%	30.8%	14.3%
Vasec. is permanent form of FP	8		4	1	2	1		4	4	3	5
%	19.5%		23.5%	25.0%	40.0%	25.0%		23.5%	17.4%	23.1%	17.9%
Vasec. is quick	8		6	1	1			2	6	2	6
%	19.5%		35.3%	25.0%	20.0%			11.8%	26.1%	15.4%	21.4%
Vasec. gives minor discomfort	7	1	4	1	1			2	5	2	5
%	17.1%	9.1%	23.5%	25.0%	20.0%			11.8%	21.7%	15.4%	17.9%
Vasec. is safe	3	2			1		1	1	1		3
%	7.3%	18.2%			20.0%		100%	5.9%	4.3%		10.7%
Reduce # of children you have/Fam. planning	2	1	1					1	1	1	1
%	4.9%	9.1%	5.9%					5.9%	4.3%	7.7%	3.6%
Vasec. is 99% reliable	1		1					1		1	
%	2.4%		5.9%					5.9%		7.7%	
Other	2	1	1					2			2
%	4.9%	9.1%	5.9%					11.8%			7.1%

Columns exceed 100% due to multiple responses

BENEFITS OF THE VASECTOMY

"MANHOOD"
- TABLE 3

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	41	11	17	4	5	4	1	17	23	13	28
%	*	*	*	*	*	*	*	*	*	*	*
Vasec. is permanent	16	3	8	1	3	1		8	8	3	13
%	39.0%	27.3%	47.1%	25.0%	60.0%	25.0%		47.1%	34.8%	23.1%	46.4%
With vasec. no need to worry about pregnancy	10	3	3	1	1	2	1	3	6	2	8
%	24.4%	27.3%	17.6%	25.0%	20.0%	50.0%	100%	17.6%	26.1%	15.4%	28.6%
Vasec. is quick	9		6	2		1		3	6	5	4
%	22.0%		35.3%	50.0%		25.0%		17.6%	26.1%	38.5%	14.3%
Vasec. is safe	5	2	3					4	1	2	3
%	12.2%	18.2%	17.6%					23.5%	4.3%	15.4%	10.7%
Vasec. is over 99% reliable	3		1	1	1			2	1	3	
%	7.3%		5.9%	25.0%	20.0%			11.8%	4.3%	23.1%	
Helps sex drive/comfortable sex	1	1						1			1
%	2.4%	9.1%						5.9%			3.6%
Prevent pregnancy	1					1			1		1
%	2.4%					25.0%			4.3%		3.6%
Don't know	5	3	1		1			1	4	1	4
%	12.2%	27.3%	5.9%		20.0%			5.9%	17.4%	7.7%	14.3%

* Columns exceed 100% due to multiple responses

IS THE VASECTOMY PERMANENT

"MANHOOD"
- TABLE 4

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	41 100%	11 100%	17 100%	4 100%	5 100%	4 100%	1 100%	17 100%	23 100%	13 100%	28 100%
Yes %	39 95.1%	10 90.9%	16 94.1%	4 100%	5 100%	4 100%	1 100%	16 94.1%	22 95.7%	13 100%	26 92.9%
No %	1 2.4%	1 9.1%						1 5.9%			1 3.6%
Don't know %	1 2.4%		1 5.9%						1 4.3%		1 3.6%

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE VASECTOMY?

"MANHOOD"
- TABLE 5

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	41 *	11 *	17 *	4 *	5 *	4 *	1 *	17 *	23 *	13 *	28 *
Doctor %	37 90.2%	9 81.8%	15 88.2%	4 100%	5 100%	4 100%	1 100%	17 100%	19 82.6%	12 92.3%	25 89.3%
Personal Choice Provider %	6 14.6%	2 18.2%	3 17.6%			1 25.0%		1 5.9%	5 21.7%	1 7.7%	5 17.9%
Other %	2 4.9%	2 18.2%							2 8.7%		2 7.1%

* Columns exceed 100% due to multiple responses

WHERE SHOULD THE PROCEDURE BE DONE?

"MANHOOD"
- TABLE 6

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	41 *	11 *	17 *	4 *	5 *	4 *	1 *	17 *	23 *	13 *	28 *
Doctor's office %	31 75.6%	8 72.7%	13 76.5%	3 75.0%	4 80.0%	3 75.0%	1 100%	13 76.5%	17 73.9%	9 69.2%	22 78.6%
Health clinic %	5 12.2%	1 9.1%	2 11.8%		1 20.0%	1 25.0%		1 5.9%	4 17.4%	1 7.7%	4 14.3%
Hospital %	1 2.4%		1 5.9%						1 4.3%	1 7.7%	
Other %	1 2.4%		1 5.9%						1 4.3%	1 7.7%	
Don't know %	4 9.8%	2 18.2%	1 5.9%	1 25.0%				3 17.6%	1 4.3%	2 15.4%	2 7.1%

Columns exceed 100% due to multiple responses

HOW SOON AFTER THE PROCEDURE CAN YOU HAVE SEX

"MANHOOD"
- TABLE 7

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	41	11	17	4	5	4	1	17	23	13	28
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
A few days	30	7	12	4	4	3	1	13	16	9	21
%	73.2%	63.6%	70.6%	100%	80.0%	75.0%	100%	76.5%	69.6%	69.2%	75.0%
Less than a month	1	1							1		1
%	2.4%	9.1%							4.3%		3.6%
Other	5	1	2		1	1		3	2	2	3
%	12.2%	9.1%	11.8%		20.0%	25.0%		17.6%	8.7%	15.4%	10.7%
Refuse	1		1						1		1
%	2.4%		5.9%						4.3%		3.6%
Don't know	4	2	2					1	3	2	2
%	9.8%	18.2%	11.8%					5.9%	13.0%	15.4%	7.1%

LEVEL OF INTEREST IN GETTING INFO ON VASECTOMY

"MANHOOD"
- TABLE 8

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	41 100%	11 100%	17 100%	4 100%	5 100%	4 100%	1 100%	17 100%	23 100%	13 100%	28 100%
Very interested %	6 14.6%		1 5.9%		2 40.0%	3 75.0%		2 11.8%	4 17.4%	1 7.7%	5 17.9%
Somewhat interested %	7 17.1%		4 23.5%	1 25.0%	1 20.0%	1 25.0%		3 17.6%	4 17.4%	3 23.1%	4 14.3%
Not sure %	15 36.6%	5 45.5%	6 35.3%	2 50.0%	2 40.0%			9 52.9%	6 26.1%	4 30.8%	11 39.3%
Not very interested %	7 17.1%	5 45.5%	2 11.8%				1 100%	1 5.9%	5 21.7%	1 7.7%	6 21.4%
Not at all interested %	6 14.6%	1 9.1%	4 23.5%	1 25.0%				2 11.8%	4 17.4%	4 30.8%	2 7.1%

COMMENTS

"MANHOOD"
- TABLE 9

	TOTAL	Age of respondent			S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	11 100%	5 100%	5 100%	1 100%	1 100%	3 100%	7 100%	5 100%	6 100%
Not sure its the right thing to do/ don't like the idea %	7 63.6%	4 80.0%	3 60.0%		1 100%	1 33.3%	5 71.4%	2 40.0%	5 83.3%
Don't want to do anything so permanent %	1 9.1%			1 100%			1 14.3%	1 20.0%	
Contraceptives/family planning should be left to women %	1 9.1%		1 20.0%			1 33.3%		1 20.0%	
Man should have out his lot %	1 9.1%	1 20.0%					1 14.3%	1 20.0%	
Other %	1 9.1%		1 20.0%			1 33.3%			1 16.7%

SUGGESTIONS FOR IMPROVING AD

"MANHOOD"
- TABLE 10

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	41	11	17	4	5	4	1	17	23	13	28
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
None	37	10	14	4	5	4	1	15	21	11	26
%	90.2%	90.9%	82.4%	100%	100%	100%	100%	88.2%	91.3%	84.6%	92.9%
Advise how soon after can resume having sex	1	1						1			1
%	2.4%	9.1%						5.9%			3.6%
Give more info. on the vasectomy	1		1						1		1
%	2.4%		5.9%						4.3%		3.6%
Man needs to sound more convincing	1		1						1	1	
%	2.4%		5.9%						4.3%	7.7%	
Information on side effects needed	1		1					1		1	
%	2.4%		5.9%					5.9%		7.7%	

ii. "New Spirit"

Q. What is the ad talking about? (unprompted) Table 1

The majority of respondents understood the ad to be talking about the vasectomy, be it a general vasectomy (36%) or the specific No Scalpel vasectomy (49%).

Q. What are the main points the ad is trying to get across about vasectomy? (unprompted) Table 2

Main points of the ad were that the method "is quick" (33%), "prevents you from having more children" (28%), "is a permanent form of family planning" (26%), "is safe" and is 99% reliable were each spontaneously recalled by 18% of the respondents and "doesn't affect your manhood" (10%).

Q. According to the ad, what are the benefits of the vasectomy as a method of contraception? (unprompted) Table 3

The main benefits recalled without prompting by respondents was that the method is "permanent" (26%), is quick (21%), is safe (21%) and is over 99% reliable (21%).

Q. According to the ad, is the no-scalpel vasectomy a permanent form of contraception? Table 4

Eighty-five (85%) percent of respondents recognized the method as permanent based on the ad.

Q. According to the ad, who should you ask for information about the no-scalpel vasectomy? Table 5

Ninety percent (90%) of respondents recalled the doctor as the person to ask for information about the method while 13% recalled the "Personal Choice Provider".

Q. According to the ad, where is the no-scalpel vasectomy procedure done? Table 6

Two-thirds (67%) correctly recalled the "doctor's office" as the place where the procedure is done. Another 15% recalled the health clinic while 13% did not know.

Q. According to the ad, how soon after having the procedure can you resume having sex? (unprompted) Table 7

Forty-four percent (44%) recalled the time before resumption of sex as "a few days". More than a quarter did not know (28%) and 18% reported that the ad did not say.

Q. After hearing this ad, how interested would you be in seeking further information about the no-scalpel vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 8

More than a third of respondents (36%) reported having some positive degree of interest (very interested - 10.3%, somewhat interested - 25.6%), a quarter (25.6%) being "unsure", and 38.5% being either "not very interested" (15.4%) or "not at all interested" (23.1%).

Those who were not interested were uncertain "whether it is the right thing to do" (66.7%) (Table 9)

Q. What suggestions can you give for improving this ad? Table 10

Eight persons gave suggestions about how to improve the ad. Different suggestions were given as follows:

"advise how soon after one can resume sex"	(5.1%)
"give more information on the vasectomy"	(7.7%)
"advise where procedure can be done"	(2.6%)
"information on side effects needed".	(2.6%)
"needs to be more lively/appealing"	(2.6%)

WHAT IS AD TALKING ABOUT?

"NEW SPIRIT"
- TABLE 1

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	39 100%	7 100%	13 100%	8 100%	5 100%	6 100%	2 100%	14 100%	23 100%	14 100%	25 100%
No Scalpel Vasectomy %	19 48.7%	3 42.9%	7 53.8%	5 62.5%	2 40.0%	2 33.3%		7 50.0%	12 52.2%	7 50.0%	12 48.0%
Topic of AD Vasectomy %	14 35.9%	3 42.9%	3 23.1%	3 37.5%	3 60.0%	2 33.3%	2 100%	5 35.7%	7 30.4%	4 28.6%	10 40.0%
Contraceptive %	3 7.7%		1 7.7%			2 33.3%		1 7.1%	2 8.7%	2 14.3%	1 4.0%
Pregnancy %	2 5.1%		2 15.4%					1 7.1%	1 4.3%		2 8.0%
Other %	1 2.6%	1 14.3%							1 4.3%	1 7.1%	

OVERALL, WHAT WAS THE MAIN POINTS IN ADVERTISEMENT?

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	39	7	13	8	5	6	2	14	23	14	25
%	*	*	*	*	*	*	*	*	*	*	*
Vasec. is quick	13	1	5	2	2	3	2	4	7	5	8
%	33.3%	14.3%	38.5%	25.0%	40.0%	50.0%	100%	28.6%	30.4%	35.7%	32.0%
Vasec. prevents you from having more children	11	3	4	3		1	1	5	5	6	5
%	28.2%	42.9%	30.8%	37.5%		16.7%	50.0%	35.7%	21.7%	42.9%	20.0%
Vasec. is a permanent form of FP	10	1	4	2	2	1		5	5	1	9
%	25.6%	14.3%	30.8%	25.0%	40.0%	16.7%		35.7%	21.7%	7.1%	36.0%
Vasec. is safe	7		3	1		3	1	2	4	4	3
%	17.9%		23.1%	12.5%		50.0%	50.0%	14.3%	17.4%	28.6%	12.0%
Vasec. is 99% reliable	7		1	1	3	2	1	3	3	3	4
%	17.9%		7.7%	12.5%	60.0%	33.3%	50.0%	21.4%	13.0%	21.4%	16.0%
Vasec. doesn't affect manhood	4	1	1	2				1	3		4
%	10.3%	14.3%	7.7%	25.0%				7.1%	13.0%		16.0%
Vasec. gives minor discomfort	2		1	1					2		2
%	5.1%		7.7%	12.5%					8.7%		8.0%
Vasec. is man's way of sharing FP responsibility	1	1						1		1	
%	2.6%	14.3%						7.1%		7.1%	
No knife procedure	1		1						1		1
%	2.6%		7.7%						4.3%		4.0%
Reduce # of children you have/FP	1		1						1		1
%	2.6%		7.7%						4.3%		4.0%
Refuse	1	1							1		1
%	2.6%	14.3%							4.3%		4.0%

Columns exceed 100% due to multiple responses

BENEFITS OF THE VASECTOMY

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	39 *	7 *	13 *	8 *	5 *	6 *	2 *	14 *	23 *	14 *	25 *
Vasec. is permanent %	10 25.6%	2 28.6%	4 30.8%	3 37.5%	1 20.0%			6 42.9%	4 17.4%	5 35.7%	5 20.0%
Vasec. is quick %	8 20.5%	1 14.3%	3 23.1%		1 20.0%	3 50.0%	1 50.0%	3 21.4%	4 17.4%	4 28.6%	4 16.0%
Vasec. is safe %	8 20.5%	2 28.6%	1 7.7%		1 20.0%	4 66.7%	2 100%	3 21.4%	3 13.0%	4 28.6%	4 16.0%
Vasec. is over 99% reliable %	8 20.5%		2 15.4%	3 37.5%	1 20.0%	2 33.3%		3 21.4%	5 21.7%	3 21.4%	5 20.0%
With vasec. no need to worry about pregnancy %	6 15.4%	3 42.9%	1 7.7%	2 25.0%				6 26.1%			6 24.0%
Helps sex drive/comfortable sex %	4 10.3%		3 23.1%		1 20.0%			1 7.1%	3 13.0%		4 16.0%
Prevent pregnancy %	3 7.7%				2 40.0%	1 16.7%		1 7.1%	2 8.7%		3 12.0%
No knife/no scalpel procedure %	1 2.6%			1 12.5%				1 7.1%		1 7.1%	
Don't know %	2 5.1%	1 14.3%	1 7.7%					2 8.7%			2 8.0%

* Columns exceed 100% due to multiple responses

IS THE VASECTOMY PERMANENT

"NEW SPIRIT"

- TABLE 4

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	39 100%	7 100%	13 100%	8 100%	5 100%	6 100%	2 100%	14 100%	23 100%	14 100%	25 100%
Yes %	33 84.6%	5 71.4%	10 76.9%	8 100%	4 80.0%	6 100%	2 100%	12 85.7%	19 82.6%	10 71.4%	23 92.0%
No %	3 7.7%	1 14.3%	2 15.4%					1 7.1%	2 8.7%	1 7.1%	2 8.0%
AD didn't say %	2 5.1%		1 7.7%		1 20.0%			1 7.1%	1 4.3%	2 14.3%	
Don't know %	1 2.6%	1 14.3%							1 4.3%	1 7.1%	

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE VASECTOMY?

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	39	7	13	8	5	6	2	14	23	14	25
%	*	*	*	*	*	*	*	*	*	*	*
Doctor	35	5	11	8	5	6	1	14	20	13	22
%	89.7%	71.4%	84.6%	100%	100%	100%	50.0%	100%	87.0%	92.9%	88.0%
Personal Choice Provider	5	1	1		1	2	1	2	2	3	2
%	12.8%	14.3%	7.7%		20.0%	33.3%	50.0%	14.3%	8.7%	21.4%	8.0%
Family Planning Board	1		1						1		1
%	2.6%		7.7%						4.3%		4.0%
Other	2	1	1						2		2
%	5.1%	14.3%	7.7%						8.7%		8.0%

* Columns exceed 100% due to multiple responses

WHERE SHOULD THE PROCEDURE BE DONE?

"NEW SPIRIT"
- TABLE 6

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	39	7	13	8	5	6	2	14	23	14	25
%	*	*	*	*	*	*	*	*	*	*	*
Doctor's Off.	26	5	9	7	1	4		9	17	9	17
%	66.7%	71.4%	69.2%	87.5%	20.0%	66.7%		64.3%	73.9%	64.3%	68.0%
Health Clinic	6		2		1	3	1	2	3	2	4
%	15.4%		15.4%		20.0%	50.0%	50.0%	14.3%	13.0%	14.3%	16.0%
Hospital	4		1	1	1	1	1		3	1	3
%	10.3%		7.7%	12.5%	20.0%	16.7%	50.0%		13.0%	7.1%	12.0%
Ad didn't say	2			1	1			1	1	1	1
%	5.1%			12.5%	20.0%			7.1%	4.3%	7.1%	4.0%
Don't know	5	2	2		1		1	2	2	2	3
%	12.8%	28.6%	15.4%		20.0%		50.0%	14.3%	8.7%	14.3%	12.0%

* Columns exceed 100% due to multiple responses

HOW SOON AFTER THE PROCEDURE CAN YOU HAVE SEX

"NEW SPIRIT"
- TABLE 7

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	39 100%	7 100%	13 100%	8 100%	5 100%	6 100%	2 100%	14 100%	23 100%	14 100%	25 100%
A few days %	17 43.6%	3 42.9%	5 38.5%	6 75.0%	3 60.0%			9 64.3%	8 34.8%	6 42.9%	11 44.0%
AD didn't say %	7 17.9%	1 14.3%	3 23.1%	1 12.5%		2 33.3%	2 100%	3 21.4%	2 8.7%	4 28.6%	3 12.0%
Less than a mth %	2 5.1%		2 15.4%						2 8.7%		2 8.0%
Other %	2 5.1%	1 14.3%				1 16.7%			2 8.7%		2 8.0%
Don't know %	11 28.2%	2 28.6%	3 23.1%	1 12.5%	2 40.0%	3 50.0%		2 14.3%	9 39.1%	4 28.6%	7 28.0%

LEVEL OF INTEREST IN GETTING INFO ON VASECTOMY

"NEW SPIRIT"

- TABLE 8

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	39 100%	7 100%	13 100%	8 100%	5 100%	6 100%	2 100%	14 100%	23 100%	14 100%	25 100%
Very interested %	4 10.3%		1 7.7%		2 40.0%	1 16.7%		1 7.1%	3 13.0%		4 16.0%
Somewhat interested %	10 25.6%	3 42.9%	3 23.1%		2 40.0%	2 33.3%	1 50.0%	4 28.6%	5 21.7%	5 35.7%	5 20.0%
Not sure %	10 25.6%	1 14.3%	4 30.8%	3 37.5%		2 33.3%	1 50.0%	6 42.9%	3 13.0%	4 28.6%	6 24.0%
Not very interested %	6 15.4%	1 14.3%	1 7.7%	3 37.5%		1 16.7%		1 7.1%	5 21.7%	2 14.3%	4 16.0%
Not at all interested %	9 23.1%	2 28.6%	4 30.8%	2 25.0%	1 20.0%			2 14.3%	7 30.4%	3 21.4%	6 24.0%

COMMENTS

"NEW SPIRIT"
- TABLE 9

	TOTAL	Age of respondent					S/E classification		Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Mid./ Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	12 100%	3 100%	4 100%	3 100%	1 100%	1 100%	2 100%	10 100%	4 100%	8 100%
Not sure it's the right thing to do/ don't like the idea/ sound %	8 66.7%	2 66.7%	2 50.0%	3 100%	1 100%			8 80.0%	1 25.0%	7 87.5%
Contraceptives/FP should be left to the women %	2 16.7%		1 25.0%			1 100%	1 50.0%	1 10.0%	2 50.0%	
Man should have out his lot %	1 8.3%	1 33.3%						1 10.0%	1 25.0%	
Other %	1 8.3%		1 25.0%				1 50.0%			1 12.5%

SUGGESTIONS FOR IMPROVING AD

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	39	7	13	8	5	6	2	14	23	14	25
%	*	*	*	*	*	*	*	*	*	*	*
None	31	7	9	6	4	5	1	10	20	10	21
%	79.5%	100%	69.2%	75.0%	80.0%	83.3%	50.0%	71.4%	87.0%	71.4%	84.0%
Give more information on vasectomy	3		2	1				1	2	1	2
%	7.7%		15.4%	12.5%				7.1%	8.7%	7.1%	8.0%
Advise how soon after can resume having sex	2				1	1	1	1		2	
%	5.1%				20.0%	16.7%	50.0%	7.1%		14.3%	
Advise where procedure can be done	1				1			1		1	
%	2.6%				20.0%			7.1%		7.1%	
Needs to be more lively/appealing	1		1					1			1
%	2.6%		7.7%					7.1%			4.0%
Information on side effects needed	1		1					1		1	
%	2.6%		7.7%					7.1%		7.1%	
No answer	1			1					1		1
%	2.6%			12.5%					4.3%		4.0%

* Columns exceed 100% due to multiple responses

iii. "I Must Admit"

Q. What is the ad talking about? (unprompted) Table 1

The majority of respondents (57.5%) understood the ad to be talking about Personal Choice, while less than a quarter (22.5%) understood the main topic to be a vasectomy, and 5% understood it to be specifically the No Scalpel Vasectomy.

Q. What are the main points the ad is trying to get across about vasectomy? (unprompted) Table 2

Respondents perceived the main points of the ad to be: "Vasectomy is a man's way of sharing the family planning responsibility" (35%), "Vasectomy is a permanent form of family planning" (32.5%), "Vasectomy prevents you from having more children" (20%) and "Vasectomy doesn't affect manhood" (20%).

Q. According to the ad, what are the benefits of the vasectomy as a method of contraception? (unprompted) Table 3

The main benefits recalled without prompting by respondents was that "with the vasectomy there is no need to worry about pregnancy" (40%), the method is "permanent" (27.5%), safe (20%) and "helps sex drive/comfortable sex" (15%).

Q. According to the ad, is the no-scalpel vasectomy a permanent form of contraception? Table 4

Eighty-five (85%) percent of respondents recognized the No Scalpel Vasectomy as a permanent form of contraceptive.

Q. According to the ad, who should you ask for information about the no-scalpel vasectomy? Table 5

The vast majority (90%) of respondents recalled the doctor as the person to ask for information about the method while 12.5% recalled the "Personal Choice Provider".

Q. According to the ad, where is the no-scalpel vasectomy procedure done? Table 6

Almost three quarters of the sample (72.5%) correctly recalled the "doctor's office" as the place where the procedure is done. Another 5% recalled the health clinic while 15% did not know.

Q. According to the ad, how soon after having the procedure can you resume having sex? (unprompted) Table 7

More than three-quarters of the sample (77.5%) were able to correctly recall the time before resumption of sex as "a few days".

Q. After hearing this ad, how interested would you be in seeking further information about the no-scalpel vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 8

More than a third of respondents (37.5%) reported being uncertain as to their level of interest. Twenty-two percent (22.5%) reported having some positive degree of interest (very interested - 2.5%, somewhat interested - 20%) and 40% being either "not very interested" (20%) or "not at all interested" (20%). Particularly men in the lower socio-economic group who reported being not at all interested (33% vs 0% for upper middle and middle/lower middle groups).

Those who were not interested were uncertain "whether it is the right thing to do/ don't like the idea/ sound" (84.6%). (Table 9)

Q. What suggestions can you give for improving this ad? Table 10

Nine persons gave suggestions about how to improve the ad. Different suggestions were given as follows:

"Needs to be more lively/appealing"	(12.5%)
"give more information on the vasectomy"	(2.5%)
"man needs to sound more enthused"	(2.5%)
"information on side effects needed".	(2.5%)

WHAT IS AD TALKING ABOUT?

"I MUST ADMIT"
- TABLE 1

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	40 100%	10 100%	14 100%	8 100%	4 100%	4 100%	3 100%	13 100%	24 100%	13 100%	27 100%
Personal choice %	23 57.5%	6 60.0%	8 57.1%	2 25.0%	3 75.0%	4 100%	3 100%	9 69.2%	11 45.8%	8 61.5%	15 55.6%
Vasectomy %	9 22.5%	3 30.0%	3 21.4%	2 25.0%	1 25.0%			2 15.4%	7 29.2%	2 15.4%	7 25.9%
Contraceptive %	4 10.0%	1 10.0%	1 7.1%	2 25.0%				1 7.7%	3 12.5%	2 15.4%	2 7.4%
No Scalpel Vasectomy %	2 5.0%			2 25.0%					2 8.3%		2 7.4%
Family planning %	1 2.5%		1 7.1%					1 7.7%		1 7.7%	
Don't know %	1 2.5%		1 7.1%						1 4.2%		1 3.7%

OVERALL, WHAT WAS THE MAIN POINTS IN ADVERTISEMENT?

"I MUST ADMIT"
- TABLE 2

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL	40	10	14	8	4	4	3	13	24	13	27
%	*	*	*	*	*	*	*	*	*	*	*
Contraception is man's way of sharing FP responsibility	14	2	5	3	1	3	2	5	7	5	9
%	35.0%	20.0%	35.7%	37.5%	25.0%	75.0%	66.7%	38.5%	29.2%	38.5%	33.3%
Contraception is a permanent form of FP	13	4	6		2	1	1	4	8	2	11
%	32.5%	40.0%	42.9%		50.0%	25.0%	33.3%	30.8%	33.3%	15.4%	40.7%
Contraception prevents you from having more children	8	3	1	3		1		2	6	3	5
%	20.0%	30.0%	7.1%	37.5%		25.0%		15.4%	25.0%	23.1%	18.5%
Contraception doesn't affect manhood	8	1	3	1	2	1		3	5	3	5
%	20.0%	10.0%	21.4%	12.5%	50.0%	25.0%		23.1%	20.8%	23.1%	18.5%
Contraception is quick	5	1	2	1		1	1	2	2	2	3
%	12.5%	10.0%	14.3%	12.5%		25.0%	33.3%	15.4%	8.3%	15.4%	11.1%
Contraception is safe	3	1			1	1	1	2			3
%	7.5%	10.0%			25.0%	25.0%	33.3%	15.4%			11.1%
No knife procedure	3			1	1	1		2	1	1	2
%	7.5%			12.5%	25.0%	25.0%		15.4%	4.2%	7.7%	7.4%
Reduce # of children you have/FP	2	1	1					1	1		2
%	5.0%	10.0%	7.1%					7.7%	4.2%		7.4%

(continued)

OVERALL, WHAT WAS THE MAIN POINTS IN ADVERTISEMENT?

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
Vasec. is 99% reliable %	1 2.5%		1 7.1%					1 4.2%		1 3.7%	
Vasec. gives minor discomfort %	1 2.5%			1 12.5%				1 4.2%	1 7.7%		
Other %	2 5.0%	1 10.0%		1 12.5%			1 7.7%	1 4.2%	1 7.7%	1 3.7%	
Don't know %	1 2.5%		1 7.1%					1 4.2%		1 3.7%	

* Columns exceed 100% due to multiple responses

BENEFITS OF THE VASECTOMY

"I MUST ADMIT"
- TABLE 3

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL	40	10	14	8	4	4	3	13	24	13	27
%	*	*	*	*	*	*	*	*	*	*	*
With vasec. no need to worry about pregnancy	16	4	4	5	3		1	4	11	5	11
%	40.0%	40.0%	28.6%	62.5%	75.0%		33.3%	30.8%	45.8%	38.5%	40.7%
Vasec. is permanent	11	2	6	2		1	1	4	6	2	9
%	27.5%	20.0%	42.9%	25.0%		25.0%	33.3%	30.8%	25.0%	15.4%	33.3%
Vasec. is safe	8	3	2	1	1	1		5	3	2	6
%	20.0%	30.0%	14.3%	12.5%	25.0%	25.0%		38.5%	12.5%	15.4%	22.2%
Helps sex drive/ comfortable sex	6	1	2	1	1	1		2	4	2	4
%	15.0%	10.0%	14.3%	12.5%	25.0%	25.0%		15.4%	16.7%	15.4%	14.8%
Vasec. is quick	3			2		1		1	2	1	2
%	7.5%			25.0%		25.0%		7.7%	8.3%	7.7%	7.4%
Vasec. is over 99% reliable	1					1			1	1	1
%	2.5%					25.0%			4.2%	7.7%	3.7%
Don't know	2		1			1	1		1	1	1
%	5.0%		7.1%			25.0%	33.3%		4.2%	7.7%	3.7%

* Columns exceed 100% due to multiple responses

IS THE VASECTOMY PERMANENT?

"I MUST ADMIT"
- TABLE 4

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL %	40 100%	10 100%	14 100%	8 100%	4 100%	4 100%	3 100%	13 100%	24 100%	13 100%	27 100%
Yes %	34 85.0%	9 90.0%	12 85.7%	6 75.0%	4 100%	3 75.0%	2 66.7%	12 92.3%	20 83.3%	10 76.9%	24 88.9%
AD didn't say %	1 2.5%					1 25.0%	1 33.3%			1 7.7%	
Don't know %	5 12.5%	1 10.0%	2 14.3%	2 25.0%				1 7.7%	4 16.7%	2 15.4%	3 11.1%

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE VASECTOMY?

- TABLE 5

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL %	40 *	10 *	14 *	8 *	4 *	4 *	3 *	13 *	24 *	13 *	27 *
Doctor %	36 90.0%	7 70.0%	14 100%	8 100%	4 100%	3 75.0%	2 66.7%	11 84.6%	23 95.8%	12 92.3%	24 88.9%
Personal Choice Provider %	5 12.5%	3 30.0%				2 50.0%	1 33.3%	3 23.1%	1 4.2%	1 7.7%	4 14.8%
Other %	2 5.0%	1 10.0%		1 12.5%				1 7.7%	1 4.2%	1 7.7%	1 3.7%

* Columns exceed 100% due to multiple responses

WHERE SHOULD THE PROCEDURE BE DONE?

"I MUST ADMIT"
- TABLE 6

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL %	40 *	10 *	14 *	8 *	4 *	4 *	3 *	13 *	24 *	13 *	27 *
Doctor's Office %	29 72.5%	7 70.0%	10 71.4%	7 87.5%	3 75.0%	2 50.0%	1 33.3%	10 76.9%	18 75.0%	8 61.5%	21 77.8%
Health Clinic %	2 5.0%		1 7.1%			1 25.0%		1 7.7%	1 4.2%	2 15.4%	
Hospital %	2 5.0%		1 7.1%	1 12.5%					2 8.3%	1 7.7%	1 3.7%
AD didn't say %	2 5.0%			1 12.5%		1 25.0%	1 33.3%		1 4.2%	1 7.7%	1 3.7%
Other %	1 2.5%		1 7.1%						1 4.2%	1 7.7%	
Don't know %	6 15.0%	3 30.0%	2 14.3%		1 25.0%		1 33.3%	2 15.4%	3 12.5%	1 7.7%	5 18.5%

* Columns exceed 100% due to multiple responses

HOW SOON AFTER THE PROCEDURE CAN YOU HAVE SEX

"I MUST ADMIT"
- TABLE 7

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./ Lower Mid.	Lower (D)	Urban	Rural
TOTAL	40	10	14	8	4	4	3	13	24	13	27
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
A few days	31	7	9	7	4	4	3	10	18	10	21
%	77.5%	70.0%	64.3%	87.5%	100%	100%	100%	76.9%	75.0%	76.9%	77.8%
Other	3	1	1	1				1	2	2	1
%	7.5%	10.0%	7.1%	12.5%				7.7%	8.3%	15.4%	3.7%
Less than a mth	1		1						1		1
%	2.5%		7.1%						4.2%		3.7%
Don't know	5	2	3					2	3	1	4
%	12.5%	20.0%	21.4%					15.4%	12.5%	7.7%	14.8%

LEVEL OF INTEREST IN GETTING INFO ON VASECTOMY

"I MUST ADMIT"
- TABLE 8

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL %	40 100%	10 100%	14 100%	8 100%	4 100%	4 100%	3 100%	13 100%	24 100%	13 100%	27 100%
Very interested %	1 2.5%				1 25.0%			1 7.7%			1 3.7%
Somewhat interested %	8 20.0%	2 20.0%	4 28.6%	1 12.5%		1 25.0%	1 33.3%	1 7.7%	6 25.0%	1 7.7%	7 25.9%
Not sure %	15 37.5%	2 20.0%	7 50.0%	2 25.0%	2 50.0%	2 50.0%	1 33.3%	8 61.5%	6 25.0%	6 46.2%	9 33.3%
Not very interested %	8 20.0%	4 40.0%	1 7.1%	2 25.0%		1 25.0%	1 33.3%	3 23.1%	4 16.7%	3 23.1%	5 18.5%
Not at all interested %	8 20.0%	2 20.0%	2 14.3%	3 37.5%	1 25.0%				8 33.3%	3 23.1%	5 18.5%

COMMENTS

"I MUST ADMIT"
- TABLE 9

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL	13	4	3	4	1	1	1	1	11	5	8
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Not sure it's the right thing to do/don't like the idea/sound	11	4	3	3	1		1	1	9	3	8
%	84.6%	100%	100%	75.0%	100%		100%	100%	81.8%	60.0%	100%
Don't want to do anything so permanent	1			1					1	1	
%	7.7%			25.0%					9.1%	20.0%	
Contraceptives/family planning should be left to the women	1					1			1	1	
%	7.7%					100%			9.1%	20.0%	

SUGGESTIONS FOR IMPROVING AD

"I MUST ADMIT"
- TABLE 10

	TOTAL	Age of respondent					S/E classification			Location of interview	
		30-34 yrs	35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid.	Lower (D)	Urban	Rural
TOTAL	40	10	14	8	4	4	3	13	24	13	27
%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
None	31	9	9	7	4	2	1	11	19	8	23
%	77.5%	90.0%	64.3%	87.5%	100%	50.0%	33.3%	84.6%	79.2%	61.5%	85.2%
Needs to be more lively/ appealing	5	1	3			1	1	2	2	4	1
%	12.5%	10.0%	21.4%			25.0%	33.3%	15.4%	8.3%	30.8%	3.7%
Give more info. on vasectomy	1		1						1		1
%	2.5%		7.1%						4.2%		3.7%
Man needs to sound more enthused	1					1	1			1	
%	2.5%					25.0%	33.3%			7.7%	
Information on side effects needed	1		1						1		1
%	2.5%		7.1%						4.2%		3.7%
No answer	1			1					1		1
%	2.5%			12.5%					4.2%		3.7%

iv. Comparison of Ads

Each respondent compared 2 ads only. In total 60 interviews were completed with 40 persons being exposed to each of 2 ads.

Q. Which of the two ads leaves you feeling that the vasectomy is a safe method:

(Table 11)

"I Must Admit" tended to leave the most (75.0%) respondents feeling the vasectomy was a safe method. This was closely followed by "Manhood" (67.5%) with New Spirit thought by 57.5% as indicating that the method is safe.

Is a quick method: (Table 11)

A similar pattern obtained for the ad which left respondents feeling the vasectomy is a quick method with "I must admit" most favoured as such (80%), followed by Manhood (75%) and New Spirit (55%).

Is permanent: (Table 11)

As a permanent method "I must admit" was again favoured by 80% of respondents closely followed by Manhood (75%) with "New Spirit" still trailing at 45%.

Is very reliable: (Table 11)

As a reliable method however, Manhood was this time the most favoured (70%) well ahead of "I must admit" (50%) which was now closely followed by "New Spirit" (47.5%).

Q. Overall, which of the two ads would make you most want to try the No-Scalpel Vasectomy? Table 12

Although "I Must Admit" was seen as the ad which was best at communicating the ideas of the method being "safe", "quick" and "permanent" it was "Manhood" which was thought best able to convince listeners to try the method (this was also the ad which was best thought to communicate reliability). This was followed by "New Spirit" at 25% and "I must admit" at 21.7%.

Main reasons for the preference of Manhood in this respect was the fact that "the man was more convincing/sounded responsible" (Table 13).

Manhood was also later thought to be, individually, the most informative, interesting and convincing ad. (Table 14).

Overall however, "New Spirit" which had trailed the others as a safe, quick, permanent and reliable method, and placed second as the ad which would most make you want to try the method, emerged as the better radio ad (Table 15) because it was seen as convincing/interesting, and a "lively ad". (Table 16).

Response to specific factors

TABLE 11

Which ad says the vasectomy is safe?	f	%	BASE (Persons hearing ad)
"I must admit"	30	75.0	40
Manhood	27	67.5	40
New Spirit	23	57.5	40
Which ad says vsectomy is quick?			
"I must admit"	32	80.0	40
Manhood	30	75.0	40
New Spirit	22	55.0	40
Which ad says vasectomy is permanent?			
"I must admit"	32	80.0	40
Manhood	30	75.0	40
New Spirit	18	45.0	40
Which ad says vsectomy is reliable?			
"I must admit"	20	50.0	40
Manhood	28	70.0	40
New Spirit	19	47.5	40

WHICH AD MAKES YOU WANT TO HAVE THE VASECTOMY

TABLE 12

Which ad makes you want to have the vasectomy?	f	%	Total Sample
Manhood	23	38.3	60
New Spirit	15	25.0	60
"I must admit"	13	21.7	60
None	13	21.7	60
Note: Frequency adds to more than 60 because 4 persons cited 2 ads each			

REASONS FOR SPECIFIC ANSWER

- TABLE 13

	TOTAL	Which ad makes you want to have vasc.?					
		I Must Admit	M/Hood	New Spirit	None	Admit: M/hood	Admit: Spirit
TOTAL	57	10	21	12	11	1	2
%	*	*	*	*	*	*	*
Man was more convincing/sound responsible	11	1	8	1	1		
%	19.3%	10.0%	38.1%	8.3%	9.1%		
More info. given/informative	9	4	4	1			
%	15.8%	40.0%	19.0%	8.3%			
Tells how interesting life can be after vasc.	8	2	3	3			
%	14.0%	20.0%	14.3%	25.0%			
Tell you what the vasc. is about	6	1	1	3			1
%	10.5%	10.0%	4.8%	25.0%			50.0%
Men aren't supposed to do such things	2				2		
%	3.5%				18.2%		
Gets point across quicker	1		1				
%	1.8%		4.8%				
Afraid to go through that/to have the vasc. done	1				1		
%	1.8%				9.1%		

(continued)

REASONS FOR SPECIFIC ANSWER

- TABLE 13

	TOTAL	Which ad makes you want to have vasc.?					
		I Must Admit	M/Hood	New Spirit	None	Admit: M/hood	Admit: Spirit
Interesting AD %	1 1.8%	1 10.0%					
It's a livelier AD %	1 1.8%		1 4.8%				
Other %	16 28.1%	2 20.0%	4 19.0%	3 25.0%	7 63.6%		
No answer %	3 5.3%			1 8.3%		1 100.0%	1 50.0%

* Columns exceed 100% due to multiple responses

Which ad is more informative?			
Manhood	34	85.0	40
"I must admit"	28	70.0	40
New Spirit	17	42.5	40
Which ad is more interesting?			
Manhood	28	70.0	40
New Spirit	24	60.0	40
"I must admit"	19	47.5	40
Which ad is more convincing?			
Manhood	29	72.5	40
"I must admit"	27	67.5	40
New Spirit	17	42.5	40

OVERALL, WHICH IS A BETTER RADIO AD?

- TABLE 15

	TOTAL	Age of respondent				S/E classification			Location of interview	
		35-39 yrs	40-44 yrs	44-49 yrs	50-54 yrs	Upper Mid. (B)	Mid./Lower Mid. (C)	Lower (D)	Urban	Rural
TOTAL %	60 100%	14 100%	22 100%	17 100%	7 100%	3 100%	22 100%	35 100%	20 100%	40 100%
New spirit %	22 36.7%	1 7.1%	9 40.9%	8 47.1%	4 57.1%	2 66.7%	11 50.0%	9 25.7%	11 55.0%	11 27.5%
Manhood %	19 31.7%	4 28.6%	8 36.4%	5 29.4%	2 28.6%		5 22.7%	14 40.0%	6 30.0%	13 32.5%
I must admit %	15 25.0%	7 50.0%	4 18.2%	4 23.5%		1 33.3%	3 13.6%	11 31.4%	2 10.0%	13 32.5%
Don't know %	4 6.7%	2 14.3%	1 4.5%		1 14.3%		3 13.6%	1 2.9%	1 5.0%	3 7.5%

REASONS FOR SPECIFIC ANSWER - TABLE 16

	TOTAL	Overall which is a better radio AD?		
		I must admit	M/Hood	New spirit
TOTAL %	56 *	15 *	19 *	22 *
It's convincing/ interesting %	15 26.8%	3 20.0%	4 21.1%	8 36.4%
Gives more information %	14 25.0%	6 40.0%	4 21.1%	4 18.2%
It's a livelier ad/draw your attention %	10 17.9%	1 6.7%	3 15.8%	6 27.3%
Man seems responsible %	3 5.4%	1 6.7%	1 5.3%	1 4.5%
Easier to understand %	3 5.4%	1 6.7%	1 5.3%	1 4.5%
Clearly says sex can be resumed after a few days %	2 3.6%		1 5.3%	1 4.5%
Gets to the point %	1 1.8%		1 5.3%	
Other %	11 19.6%	4 26.7%	4 21.1%	3 13.6%
Don't know %	1 1.8%		1 5.3%	
No answer %	1 1.8%	1 6.7%		

* Columns exceed 100% due to multiple responses



**FEMALE
VASECTOMY
RADIO**

5.4 Vasectomy Radio- Female

Two messages were tested, that is: "Tony's Idea" and "Shared Responsibility". Respondents listened to both messages alternatively. A total of 50 females; ages 25-45 years old; from upper, middle/lower middle and lower socio-economic groups were interviewed.

Message: "Tony's Idea"

Q. What is the ad talking about? (unprompted) Table 1

Just over a half (54%) of the respondents understood the ad to be talking about vasectomy, while less than a quarter (22%) perceived its main topic to be contraceptives.

Q. What are the main points the ad is trying to get across about vasectomy? (unprompted) Table 2

Respondents saw the main topics of the ad as being: "vasectomy is a man's way of sharing the family planning responsibility (42%), "vasectomy prevents you from having children" (30%) and "vasectomy is a permanent form of family planning" (16%).

Q. According to the ad, what are the benefits of the vasectomy as a method of contraception? (unprompted) Table 3

The main benefits recalled without prompting by respondents was that the method is "permanent contraception for men" (44%), "a man's way of sharing the family planning responsibility" (18%), "prevents pregnancy" (14%) and is "safe" (10%).

Q. According to the ad, should you and your partner decide not to have any more children what can he do to share this responsibility? Table 4

The majority (74%) spontaneously cited the general vasectomy as a means for the man to share in the family planning responsibility while 20% gave the specific No Scalpel Vasectomy.

Q. According to the ad, if you do not want any more children who should you talk to about the No Scalpel Vasectomy? Table 5

The majority (84%) cited the doctor as a source of information about the No Scalpel Vasectomy, while 28% saw the partner as someone to talk to about the method.

Q. According to the ad, is the No Scalpel Vasectomy a permanent form of contraception?

Table 6

The majority (88%) correctly recalled the vasectomy as a permanent form of contraceptive.

Q. What suggestions can you give for improving this ad? Table 7

Nine persons gave suggestions about how to improve the ad. Suggestions included: "stating the benefits of the vasectomy" (6%), "using a male instead of females" (4%), "explaining what a No Scalpel Vasectomy is" (2%) and providing additional information to assure men of the safety and reliability of the method (2%).

Q. After hearing this ad, how interested would you be in having your partner seek further information about the no-scalpel vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 8

A half (50%) of respondents were either somewhat or very interested in having their orator seek further information. More than a third (36%) were uncertain and 14% were not very or not at all interested.

Those who were not interested were uncertain claimed to be using other forms of contraceptives (28.6%) or saw the use of the vasectomy as the partner's decision (28.6%). Other reasons included an expressed preference for 'tie off' (14.3%) and the partner being against the vasectomy (14.3%). (Table 9)

OVERALL, WHAT IS THE TOPIC OF THE ADVERTISEMENT?

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL	50	21	14	8	7	21	29	17	33
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Personal Choice	3	2	1			1	2	1	2
%	6.0%	9.5%	7.1%			4.8%	6.9%	5.9%	6.1%
Vasectomy	27	11	9	6	1	14	13	13	14
%	54.0%	52.4%	64.3%	75.0%	14.3%	66.7%	44.8%	76.5%	42.4%
Contraceptive	11	5	2		4	5	6	1	10
%	22.0%	23.8%	14.3%		57.1%	23.8%	20.7%	5.9%	30.3%
Pregnancy	3		1	1	1		3		3
%	6.0%		7.1%	12.5%	14.3%		10.3%		9.1%
Family planning	1				1		1		1
%	2.0%				14.3%		3.4%		3.0%
Prevention of pregnancy	1			1			1		1
%	2.0%			12.5%			3.4%		3.0%
Don't know	2	1	1				2	1	1
%	4.0%	4.8%	7.1%				6.9%	5.9%	3.0%
Refuse	2	2				1	1	1	1
%	4.0%	9.5%				4.8%	3.4%	5.9%	3.0%

OVERALL, WHAT IS THE TOPIC OF THE ADVERTISEMENT?

"TONY'S IDEA"
- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Vasec. is man's way if sharing FP responsibility %	21 42.0%	10 47.6%	6 42.9%	4 50.0%	1 14.3%	9 42.9%	12 41.4%	6 35.3%	15 45.5%
Vasec. prevents you from having more children %	15 30.0%	8 38.1%	3 21.4%	3 37.5%	1 14.3%	6 28.6%	9 31.0%	6 35.3%	9 27.3%
Vasec. is a permanent form of FP %	8 16.0%	1 4.8%	2 14.3%	2 25.0%	3 42.9%	4 19.0%	4 13.8%	3 17.6%	5 15.2%
Vasec. is quick %	3 6.0%	3 14.3%				1 4.8%	2 6.9%		3 9.1%
Vasec. is safe %	4 8.0%	1 4.8%	2 14.3%		1 14.3%	2 9.5%	2 6.9%	2 11.8%	2 6.1%
Best form of Family Planning %	2 4.0%		1 7.1%		1 14.3%	1 4.8%	1 3.4%	1 5.9%	1 3.0%
How to plan your family %	1 2.0%	1 4.8%					1 3.4%	1 5.9%	
Other %	4 8.0%	1 4.8%	1 7.1%	1 12.5%	1 14.3%		4 13.8%	1 5.9%	3 9.1%
Don't know %	1 2.0%		1 7.1%			1 4.8%			1 3.0%
Refuse %	1 2.0%	1 4.8%					1 3.4%		1 3.0%

BENEFITS OF THE VASECTOMY

"TONY'S IDEA"
- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Vasec. is a quick method %	1 2.0%	1 4.8%				1 4.8%			1 3.0%
Vasec. is a safe method %	5 10.0%	3 14.3%			2 28.6%	3 14.3%	2 6.9%	1 5.9%	4 12.1%
Vasec. is permanent contraception for men %	22 44.0%	8 38.1%	5 35.7%	6 75.0%	3 42.9%	6 28.6%	16 55.2%	7 41.2%	15 45.5%
Vasec. is man's way of sharing FP responsibility %	9 18.0%	3 14.3%	3 21.4%	1 12.5%	2 28.6%	5 23.8%	4 13.8%	4 23.5%	5 15.2%
Prevents pregnancy %	7 14.0%	3 14.3%	3 21.4%	1 12.5%		3 14.3%	4 13.8%	4 23.5%	3 9.1%
Won't affect sexual activities %	3 6.0%	2 9.5%	1 7.1%			3 14.3%		2 11.8%	1 3.0%
Provides confidence in relationship %	1 2.0%	1 4.8%				1 4.8%			1 3.0%
Less worry %	4 8.0%	3 14.3%	1 7.1%			2 9.5%	2 6.9%		4 12.1%
Long lasting method %	1 2.0%		1 7.1%				1 3.4%		1 3.0%
Refuse %	1 2.0%		1 7.1%			1 4.8%			1 3.0%

METHOD BY WHICH MAN CAN SHARE FP RESPONSIBILITY

"TONY'S IDEA"
- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Have a vastectomy %	37 74.0%	14 66.7%	10 71.4%	6 75.0%	7 100.0%	17 81.0%	20 69.0%	14 82.4%	23 69.7%
Have a No Scalpel Vasectomy %	10 20.0%	5 23.8%	3 21.4%	2 25.0%		3 14.3%	7 24.1%	3 17.6%	7 21.2%
Go to the doctor %	1 2.0%	1 4.8%				1 4.8%			1 3.0%
Don't know %	1 2.0%	1 4.8%					1 3.4%		1 3.0%
Refuse %	1 2.0%		1 7.1%				1 3.4%		1 3.0%

WHO SHOULD YOU TALK TO ABOUT THE VASECTOMY?

"TONY'S IDEA"
- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	21 *	14 *	8 *	7 *	21 *	29 *	17 *	33 *
Partner %	14 28.0%	11 52.4%		2 25.0%	1 14.3%	7 33.3%	7 24.1%	6 35.3%	8 24.2%
Doctor %	42 84.0%	16 76.2%	14 100.0%	6 75.0%	6 85.7%	18 85.7%	24 82.8%	15 88.2%	27 81.8%
Personal Choice Provider %	3 6.0%		1 7.1%	1 12.5%	1 14.3%	1 4.8%	2 6.9%	1 5.9%	2 6.1%

* Columns exceed 100% due to multiple responses

IS THE VASECTOMY PERMANENT?

"TONY'S IDEA"
- TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Yes %	44 88.0%	18 85.7%	12 85.7%	8 100.0%	6 85.7%	19 90.5%	25 86.2%	16 94.1%	28 84.8%
No %	2 4.0%	1 4.8%			1 14.3%		2 6.9%		2 6.1%
Didn't say %	2 4.0%	1 4.8%	1 7.1%			1 4.8%	1 3.4%		2 6.1%
Don't know %	2 4.0%	1 4.8%	1 7.1%			1 4.8%	1 3.4%	1 5.9%	1 3.0%

SUGGESTIONS FOR IMPROVING THE AD

"TONY'S IDEA"
TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL	50	21	14	8	7	21	29	17	33
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
None/okay	41	15	13	7	6	18	23	14	27
%	82.0%	71.4%	92.9%	87.5%	85.7%	85.7%	79.3%	82.4%	81.8%
Man needs to have a say in the procedure	1				1		1		1
%	2.0%				14.3%		3.4%		3.0%
Added information needed assuring of men safety & reliability	1	1					1	1	
%	2.0%	4.8%					3.4%	5.9%	
Explain what in non scalpel vasectomy	1	1					1		1
%	2.0%	4.8%					3.4%		3.0%
State benefits of vasectomy	3	2	1			2	1	1	2
%	6.0%	9.5%	7.1%			9.5%	3.4%	5.9%	6.1%
To use a male instead of females	2	1		1		1	1	1	1
%	4.0%	4.8%		12.5%		4.8%	3.4%	5.9%	3.0%
Other	1	1					1		1
%	2.0%	4.8%					3.4%		3.0%

LEVEL OF INTEREST IN GETTING INFORMATION ON VASECTOMY

- TABLE 8

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Very interested %	18 36.0%	9 42.9%	4 28.6%	1 12.5%	4 57.1%	7 33.3%	11 37.9%	1 5.9%	17 51.5%
Somewhat interested %	7 14.0%	2 9.5%	1 7.1%	3 37.5%	1 14.3%	3 14.3%	4 13.8%	2 11.8%	5 15.2%
Not sure %	18 36.0%	8 38.1%	8 57.1%	1 12.5%	1 14.3%	8 38.1%	10 34.5%	10 58.8%	8 24.2%
Not very interested %	5 10.0%	1 4.8%	1 7.1%	2 25.0%	1 14.3%	3 14.3%	2 6.9%	3 17.6%	2 6.1%
Not at all interested %	2 4.0%	1 4.8%		1 12.5%			2 6.9%	1 5.9%	1 3.0%

REASONS FOR LACK OF INTEREST

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	7 100.0%	2 100.0%	1 100.0%	3 100.0%	1 100.0%	3 100.0%	4 100.0%	4 100.0%	3 100.0%
Using other form of contraceptives %	2 28.6%			1 33.3%	1 100.0%	1 33.3%	1 25.0%	1 25.0%	1 33.3%
Partner's decision %	2 28.6%	2 100.0%				1 33.3%	1 25.0%	2 50.0%	
Prefer 'tie off' %	1 14.3%		1 100.0%			1 33.3%			1 33.3%
Partner against vasectomy %	1 14.3%			1 33.3%			1 25.0%		1 33.3%
No answer %	1 14.3%			1 33.3%			1 25.0%	1 25.0%	

Message: "Shared Responsibility"

Q. What is the ad talking about? (imprompted) Table 1

Most respondents (60%) understood the ad to be talking about the vasectomy, while an additional 24% perceived the main topic to be that of a contraceptive.

Q. What are the main points the ad is trying to get across about vasectomy? (imprompted) Table 2

After listening to the ad respondents recalled the main ideas contained in the message as being: "vasectomy is a man's way of sharing the family planning responsibility (34%), "vasectomy prevents you from having children" (32%) and "vasectomy is a permanent form of family planning" (24%).

Q. According to the ad, what are the benefits of the vasectomy as a method of contraception? (imprompted) Table 3

Main benefits of the method spontaneously recalled by respondents were: "the vasectomy is a permanent contraception for men" (46%), "a man's way of sharing the family planning responsibility" (26%), "prevents pregnancy" (16%) and is "quick" (14%).

Q. According to the ad, should you and your partner decide not to have any more children what can he do to share this responsibility? Table 4

Most (72%) respondents reported that should they decide not to have any more children, the man can share in the family planning responsibility by having a vasectomy, while 20% gave specifically the "No Scalpel Vasectomy" in response.

Q. According to the ad, if you do not want any more children who should you talk to about the No Scalpel Vasectomy? Table 5

The majority (84%) cited the doctor as someone to talk to about the No Scalpel Vasectomy, while 18% reported the partner as a source of information.

Q. According to the ad, is the No Scalpel Vasectomy a permanent form of contraception? Table 6

The majority (88%) correctly recalled the vasectomy as a permanent form of contraceptive.

Q. What suggestions can you give for improving this ad? Table 7

Although more than three-quarters of the sample (76%) were satisfied, suggestions for improvement included: "explain what is a non scalpel vasectomy" (4%), "added information needed assuring men of safety and reliability" (2%), "ad needs to be clearer" (2%) and "stating the benefits of the vasectomy" (2%).

Q. After hearing this ad, how interested would you be in having your partner seek further information about the no-scalpel vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 8

The majority (54%) seemed somewhat to very interested in having their partner seek further information after hearing the ad. Thirty percent (30%) were unsure and 16% were either not very interested or not at all interested in having their partner seek further information.

Respondents who reported lack of interest in having the partner seek further information cited reasons such as : "Partner's decision" (37.5%), "using other forms of contraceptives" (25%), "got turned off" (12.5%) and "partner against vasectomy" (12.5%)

OVERALL, WHAT IS THE TOPIC OF THE ADVERTISEMENT?

- TABLE 1

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Vasectomy %	30 60.0%	12 57.1%	10 71.4%	5 62.5%	3 42.9%	13 61.9%	17 58.6%	13 76.5%	17 51.5%
Contraceptive %	12 24.0%	5 23.8%	2 14.3%	3 37.5%	2 28.6%	7 33.3%	5 17.2%	3 17.6%	9 27.3%
Family planning %	3 6.0%		1 7.1%		2 28.6%		3 10.3%		3 9.1%
Pregnancy %	2 4.0%	2 9.5%					2 6.9%		2 6.1%
Personal Choice %	1 2.0%		1 7.1%				1 3.4%		1 3.0%
Prevention of pregnancy %	1 2.0%	1 4.8%					1 3.4%	1 5.9%	
Other %	1 2.0%	1 4.8%				1 4.8%			1 3.0%

OVERALL, WHAT IS THE TOPIC OF THE ADVERTISEMENT?

- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL	50	21	14	8	7	21	29	17	33
%	*	*	*	*	*	*	*	*	*
Vasec. is man's way of sharing FP responsibility	17	8	6	2	1	10	7	9	8
%	34.0%	38.1%	42.9%	25.0%	14.3%	47.6%	24.1%	52.9%	24.2%
Vasec. prevents you from having more children	16	6	4	3	3	3	13	4	12
%	32.0%	28.6%	28.6%	37.5%	42.9%	14.3%	44.8%	23.5%	36.4%
Vasec. is a permanent form of FP	12	5	3	1	3	6	6	3	9
%	24.0%	23.8%	21.4%	12.5%	42.9%	28.6%	20.7%	17.6%	27.3%
Vasec. is quick	4	2	1	1		2	2	1	3
%	8.0%	9.5%	7.1%	12.5%		9.5%	6.9%	5.9%	9.1%
There is a contraceptive/something for men	2			1	1	1	1		2
%	4.0%			12.5%	14.3%	4.8%	3.4%		6.1%
Vasec. is safe	1			1		1			1
%	2.0%			12.5%		4.8%			3.0%
How to plan your family	1	1					1		1
%	2.0%	4.8%					3.4%		3.0%
Prevent pregnancy	1	1					1		1
%	2.0%	4.8%					3.4%		3.0%
Other	6	2	2	1	1	1	5	1	5
%	12.0%	9.5%	14.3%	12.5%	14.3%	4.8%	17.2%	5.9%	15.2%

* Columns exceed 100% due to multiple responses

BENEFITS OF THE VASECTOMY

"SHARED RESPONSIBILI
- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	21 *	14 *	8 *	7 *	21 *	29 *	17 *	33 *
Vasec. is a permanent contraception for men %	23 46.0%	8 38.1%	8 57.1%	4 50.0%	3 42.9%	10 47.6%	13 44.8%	13 76.5%	10 30.3%
Vasec. is man's way of sharing FP responsibility %	13 26.0%	5 23.8%	4 28.6%	1 12.5%	3 42.9%	6 28.6%	7 24.1%	2 11.8%	11 33.3%
Prevents pregnancy %	8 16.0%	5 23.8%	2 14.3%	1 12.5%		3 14.3%	5 17.2%	4 23.5%	4 12.1%
Vasec. is a quick method %	7 14.0%	3 14.3%	3 21.4%		1 14.3%	3 14.3%	4 13.8%	2 11.8%	5 15.2%
Vasec. is a safe method %	3 6.0%	2 9.5%	1 7.1%				3 10.3%	2 11.8%	1 3.0%
Won't affect sexual activities %	3 6.0%	2 9.5%		1 12.5%		1 4.8%	2 6.9%	1 5.9%	2 6.1%
Less worry %	2 4.0%	2 9.5%				1 4.8%	1 3.4%		2 6.1%
Refuse %	2 4.0%		1 7.1%	1 12.5%		1 4.8%	1 3.4%		2 6.1%

* Columns exceed 100% due to multiple responses

METHOD BY WHICH MAN CAN SHARE FP RESPONSIBILITY

- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Have a vasectomy %	36 72.0%	13 61.9%	10 71.4%	7 87.5%	6 85.7%	16 76.2%	20 69.0%	15 88.2%	21 63.6%
Have a No Scalpel Vasectomy %	10 20.0%	5 23.8%	3 21.4%	1 12.5%	1 14.3%	4 19.0%	6 20.7%	2 11.8%	8 24.2%
Go to the doctor %	1 2.0%		1 7.1%			1 4.8%			1 3.0%
Get counselling about the vasectomy %	1 2.0%	1 4.8%					1 3.4%		1 3.0%
Other %	1 2.0%	1 4.8%					1 3.4%		1 3.0%
Don't know %	1 2.0%	1 4.8%					1 3.4%		1 3.0%

WHO SHOULD YOU TALK TO ABOUT THE VASECTOMY?

- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL	50	21	14	8	7	21	29	17	33
%	*	*	*	*	*	*	*	*	*
Doctor	42	14	13	8	7	17	25	14	28
%	84.0%	66.7%	92.9%	100.0%	100.0%	81.0%	86.2%	82.4%	84.8%
Partner	9	8		1		3	6	3	6
%	18.0%	38.1%		12.5%		14.3%	20.7%	17.6%	18.2%
Personal Choice Provider	1	1				1		1	
%	2.0%	4.8%				4.8%		5.9%	
Don't know	1		1			1		1	
%	2.0%		7.1%			4.8%		5.9%	

* Columns exceed 100% due to multiple responses

IS THE VASECTOMY PERMANENT?

- TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Yes %	44 88.0%	18 85.7%	13 92.9%	8 100.0%	5 71.4%	21 100.0%	23 79.3%	17 100.0%	27 81.8%
No %	2 4.0%	2 9.5%					2 6.9%		2 6.1%
Didn't say %	2 4.0%		1 7.1%		1 14.3%		2 6.9%		2 6.1%
Don't know %	2 4.0%	1 4.8%			1 14.3%		2 6.9%		2 6.1%

SUGGESTIONS FOR IMPROVING THE AD

- TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
None/okay %	38 76.0%	13 61.9%	12 85.7%	7 87.5%	6 85.7%	14 66.7%	24 82.8%	11 64.7%	27 81.8%
Explain what is non scalpel vasectomy %	2 4.0%	2 9.5%				1 4.8%	1 3.4%	1 5.9%	1 3.0%
Added information needed assuring men of safety & reliability %	1 2.0%	1 4.8%					1 3.4%		1 3.0%
AD needs to be clearer %	1 2.0%		1 7.1%			1 4.8%		1 5.9%	
State benefits of vasectomy %	1 2.0%	1 4.8%					1 3.4%		1 3.0%
To use a male instead of females %	1 2.0%		1 7.1%			1 4.8%			1 3.0%
Use a woman who has not had any operation prev. %	1 2.0%	1 4.8%				1 4.8%		1 5.9%	
Eliminate the word 'tie off' %	1 2.0%	1 4.8%				1 4.8%			1 3.0%
Take children out of ad %	1 2.0%				1 14.3%	1 4.8%		1 5.9%	
Other %	3 6.0%	2 9.5%		1 12.5%		1 4.8%	2 6.9%	2 11.8%	1 3.0%

"SHARED RESPONSIBILITY"
- TABLE 8

LEVEL OF INTEREST IN GETTING INFORMATION ON VASECTOMY

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Very interested %	17 34.0%	6 28.6%	4 28.6%	1 12.5%	6 85.7%	7 33.3%	10 34.5%	1 5.9%	16 48.5%
Somewhat interested %	10 20.0%	5 23.8%	2 14.3%	3 37.5%		3 14.3%	7 24.1%	3 17.6%	7 21.2%
Not sure %	15 30.0%	6 28.6%	8 57.1%	1 12.5%		8 38.1%	7 24.1%	8 47.1%	7 21.2%
Not very interested %	6 12.0%	3 14.3%		2 25.0%	1 14.3%	3 14.3%	3 10.3%	4 23.5%	2 6.1%
Not at all interested %	2 4.0%	1 4.8%		1 12.5%			2 6.9%	1 5.9%	1 3.0%

REASONS FOR LACK OF INTEREST

- TABLE 9

	TOTAL	Age of respondent			S/E Group		Location of interview	
		25-29 yrs	35-39 yrs	40-45 yrs	Middle /lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	8 100.0%	4 100.0%	3 100.0%	1 100.0%	3 100.0%	5 100.0%	5 100.0%	3 100.0%
Partner's decision %	3 37.5%	3 75.0%			1 33.3%	2 40.0%	3 60.0%	
Using other form of contraceptives %	2 25.0%		1 33.3%	1 100.0%	1 33.3%	1 20.0%	1 20.0%	1 33.3%
Got turned off %	1 12.5%	1 25.0%			1 33.3%			1 33.3%
Partner against vasectomy %	1 12.5%		1 33.3%			1 20.0%		1 33.3%
No answer %	1 12.5%		1 33.3%			1 20.0%	1 20.0%	

Vasectomy Radio Female - Comparison of Ads

Q Which of the two ads leaves you feeling that the vasectomy (Table 11):

a. Is a safe method

More than a half of the respondents (52%) were left feeling the vasectomy was safe after listening to "Tony's Idea", while less than a third (30%) reported feeling the method was safe after listening to "Shared Responsibility".

b. Is a quick method

"Tony's Idea" convinced 42% of the sample that the method was quick versus 32% who were left feeling that the No Scalpel Vasectomy was a quick method after hearing "Shared Responsibility".

c. Provides lifetime protection

Again "Tony's Idea" emerged on top, leaving 44% of the sample feeling that the No Scalpel Vasectomy provided a lifetime of protection. "Shared Responsibility" conveyed this feeling to 26% of the sample while another 26% reported 'both ads' as leaving this feeling.

d. Is very reliable

"Tony's Idea" left almost a half (48%) of the sample feeling the method was reliable. Twenty-eight percent (28%) saw "Shared Responsibility" as leaving this impression while a fifth (20%) reported 'both ads'.

Q Overall which of the two ads would make you most want your partner to try the No Scalpel Vasectomy? (Table 12)

"Tony's Idea" emerged the most convincing ad, leaving 50% wanting their partners to try the method, while "Shared Responsibility" convinced 38%.

"Tony's Idea" was preferred as it had "more information given" (24%), "both male and female involved" (16%), "man is showing responsibility" (16%) and it was "more convincing" (12%). Those preferring "Shared Responsibility" did so because "both male and female involved" (42%), "more information given" (10.5%), "easier to understand" (10.5%) and it was "more convincing" (10.5%). (Table 13)

Q Overall which of the two ads would you say (Table 14):

- a. Is more informative*
- b. Is more interesting*
- c. Is more convincing*

“Tony’s Idea” was seen as more informative (48% vs “Shared Responsibility” 36%) and more interesting (56% vs “Shared Responsibility” 38%). Both ads were seen equally as most convincing (“Tony’s Idea” 46% vs “Shared Responsibility” 46%).

Q Overall which would you say is a better radio ad? Table 10

Respondents were equally divided in their perception of best radio ad as 50% thought “Tony’s Idea” to be the best radio ad, while the remaining 50% thought this of “Shared Responsibility”.

Overall an ad was thought to be a better radio ad if it was “more convincing/gets to the point” (20%), had “both male and female sharing the family planning responsibility” (18%), detailed (12%) and easy to understand and clear (12%).

BETTER RADIO AD

TABLE 10

	f	%
<i>Which is a better radio ad?</i>		
Shared responsibility	25	50.0
Tony's idea	25	50.0
Total respondents	50	100.0

Response to specific factors

TABLE 11

Which ad leaves you feeling the vasectomy is safe ?	f	%
Tony's idea	26	52.0
Shared responsibility	15	30.0
Both	7	14.0
Neither	1	2.0
Don't know	1	2.0
Total respondents	50	100.0
Which ad leaves you feeling the vasectomy is quick ?		
Tony's idea	21	42.0
Shared responsibility	16	32.0
Both	9	18.0
Neither	2	4.0
Don't know/no answer	2	4.0
Total respondents	50	100.0
Which ad leaves you feeling that the vasectomy provides lifetime protection ?		
Tony's idea	22	44.0
Shared responsibility	13	26.0
Both	13	26.0
Don't know/no answer	2	4.0
Total respondents	50	100.0
Which ad leaves you feeling that the vasectomy is very reliable ?		
Tony's idea	24	48.0
Shared responsibility	14	28.0
Both	10	20.0
Neither	1	2.0
No answer	1	2.0
Total respondents	50	100.0

AD WHICH MAKES YOU WANT PARTNER TO TRY VASECTOMY

- TABLE 12

	TOTAL	Age of respondent				S/E classification		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle .lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	21 100.0%	14 100.0%	8 100.0%	7 100.0%	21 100.0%	29 100.0%	17 100.0%	33 100.0%
Shared responsibility %	19 38.0%	6 28.6%	6 42.9%	3 37.5%	4 57.1%	8 38.1%	11 37.9%	6 35.3%	13 39.4%
Tony's Idea %	25 50.0%	12 57.1%	7 50.0%	4 50.0%	2 28.6%	13 61.9%	12 41.4%	9 52.9%	16 48.5%
None %	4 8.0%	2 9.5%	1 7.1%	1 12.5%			4 13.8%	2 11.8%	2 6.1%
Don't know %	2 4.0%	1 4.8%			1 14.3%		2 6.9%		2 6.1%

REASONS FOR PREFERRING SPECIFIC AD

- TABLE 13

	TOTAL	AD which makes you want partner to try vasec.		
		Shared responsibility	Tony's Idea	None
TOTAL %	48 *	19 *	25 *	4 *
Both male & female involved %	12 25.0%	8 42.1%	4 16.0%	
Using other form of contraceptives %	1 2.1%			1 25.0%
More information given %	8 16.7%	2 10.5%	6 24.0%	
Easier to understand %	4 8.3%	2 10.5%	2 8.0%	
More convincing %	5 10.4%	2 10.5%	3 12.0%	
Can resume normal sexual activities %	2 4.2%	1 5.3%	1 4.0%	
Partner has to make decision %	1 2.1%			1 25.0%
Man is showing responsibility %	4 8.3%		4 16.0%	
Draws your attention %	1 2.1%		1 4.0%	
Other %	6 12.5%	1 5.3%	4 16.0%	1 25.0%
Don't know %	1 2.1%	1 5.3%		
No answer %	4 8.3%	2 10.5%	1 4.0%	1 25.0%

* Columns exceed 100% due to multiple responses

Evaluation of ads

TABLE 14

Overall which ad would you say is more informative?	f	%
Tony's idea	24	48.0
Shared responsibility	18	36.0
Both	8	16.0
Total respondents	50	100.0
Overall which ad would you say is more interesting?		
Tony's idea	28	56.0
Shared responsibility	19	38.0
Both	3	6.0
Total respondents	50	100.0
Overall which ad would you say is more convincing?		
Tony's idea	23	46.0
Shared responsibility	23	46.0
Both	4	8.0
Total respondents	50	100.0

QUESTIONNAIRES

Questionnaire # _____

Pre Test of Communication Material

(3/97)

Material: Vasectomy Radio (5)

Target Group: Males (1) Females (2)

Material to be tested: Shared Responsibility 1 Tony's Idea 2

Name of Respondent: _____ Resp. # _____

Location: _____

Name of Interviewer: _____ Supervisor: _____

Location of interview: Urban 1 Rural 2

Date of interview: _____ Time Started: _____ Time Ended: _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with women about health and family planning and would very much like your participation.

Screening Questionnaire

S.1 Are you between the ages of 25 and 45?

Yes 1 No 2 -----> TERMINATE

S.2 IF YES: How old are you? _____

S.3 Please tell me which of the following applies to you:

- Married.....1
- Common Law/Live with partner.....2
- Visiting relationship.....3
- Have a boyfriend.....4
- Single with no partner at this time.....5 -----> TERMINATE

IF RESPONDENT IS SINGLE THANK HER AND TERMINATE THE INTERVIEW

S.4 How many children do you have living? _____ IF NONE TERMINATE

HOPE ENTERPRISES LTD. 86 EAST STREET, KINGSTON: TEL. 967-4384-7

S.15 S/E Classification:

- 1 Upper middle (B) 2 Middle/Lower Middle (C) 3 Lower (D)

You are the type of person we are interested in having listen to two radio commercials. Your comments about the ads will help us make them better. I would like to take you to a private room where you can listen to them.

ROTATION ORDER: 1ST AD: _____ 2ND AD: _____

PLAY AD TWICE THEN ANSWER THE FOLLOWING QUESTIONS

General Comprehension

1. What is the ad talking about? **DO NOT READ LIST**

	<u>1ST AD</u>	<u>2ND AD</u>
Personal Choice.....	1	1
Vasectomy.....	2	2
No-Scalpel Vasectomy.....	3	3
Contraceptive.....	4	4
Pregnancy.....	5	5
Other.....	6	6
Don't Know.....	98	98
Refuse.....	99	99

2. What were the main points about vasectomy the ad was trying to get across? Anything else? **DO NOT READ LIST**

	<u>1ST AD</u>		<u>2ND AD</u>	
	<u>YES</u>	<u>NO</u>	<u>YES</u>	<u>NO</u>
Vasec. is a man's way of sharing family planning responsibility	1	2	1	2
Vasec. prevents you from having more children	1	2	1	2
It's a permanent form of family planning.....	1	2	1	2
Quick.....	1	2	1	2
Safe.....	1	2	1	2
Other.....	1	2	1	2
Don't Know.....	98		98	
Refuse.....	99		99	

6. According to the ad, if you do not want any more children who should you talk to about the No Scalpel Vasectomy? **DO NOT READ LIST**

	1ST AD	2ND AD
Partner.....	1	1
Doctor.....	2	2
Personal Choice Provider.....	3	3
Other(specify).....	4	4
Don't know.....	98	98
Refuse.....	99	99

7a. After hearing this ad, how interested would you be in having your partner seek further information about the No Scalpel Vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested?

	1ST AD	2ND AD	
Very interested.....	1	1	→ GO TO Q8
Somewhat interested.....	2	2	→ GO TO Q8
Not sure.....	3	3	
Not very interested.....	4	4	
Not at all interested.....	5	5	

7b. **IF NOT VERY OR NOT AT ALL INTERESTED, ASK:** Why wouldn't you want your partner to seek further information about the vasectomy?

1ST AD	2ND AD

8. What suggestions can you give for improving this ad?

1ST AD	2ND AD

AD 7, AD 8, 9 TO BE REPEATED TWICE AND OTHER QUESTIONS TO BE REPEATED

COMPARISON OF 1ST AD AND 2ND AD

9. Which of the two ads leaves you feeling that the Vasectomy :

	<u>1ST AD</u>	<u>2ND AD</u>	<u>BOTH ADS</u>	<u>NEITHER</u>
a. Is a safe method.....	1	2	3	4
b. Is a quick.....	1	2	3	4
c. Provides lifetime protection.....	1	2	3	4
d. Is very reliable.....	1	2	3	4

10a. Overall, which of the two ads would make you most want your partner to try the No Scalpel Vasectomy?

1. 1ST AD _____ 2. 2ND AD _____ 3. NONE

10b. Why? _____

11. Overall which of the two ads would you say :

	<u>1ST AD</u>	<u>2ND AD</u>	<u>BOTH ADS</u>	<u>NEITHER</u>
a. Is more informative.....	1	2	3	4
b. Is more interesting.....	1	2	3	4
c. Is more convincing.....	1	2	3	4

12a. Overall which ad would you say is a better radio ad?

1. 1ST AD _____ 2. 2ND AD _____

12b. Why? _____

THANK YOU FOR YOUR TIME AND COOPERATION!!!!!!

Questionnaire # _____

Pre Test of Communication Material (3/97)

Material: Vasectomy Radio (7)

Target Group: Males (1) Females (2)

Material to be tested: I must admit 1 Manhood 2 New Spirit 3

Name of Respondent: _____ **Resp. #** _____

Location of interview: _____

Name of Interviewer: _____ **Supervisor:** _____

Location of Interview: Urban 1 Rural 2

Date of interview: _____ **Time Started:** _____ **Time Ended:** _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with men about health and family planning and would very much like your participation.

Screening Questionnaire

S.1 Are you between the ages of 30 and 54?

Yes 1 No 2 -----> **TERMINATE**

S.2 **IF YES ASK:** How old are you? _____

S.3 Please tell me which of the following applies to you:

- Married 1
- Common Law/Live with partner 2
- Visiting relationship 3
- Have a girlfriend 4
- Single with no partner at this time 5 -----> **TERMINATE**

IF RESPONDENT IS SINGLE THANK HIM AND TERMINATE THE INTERVIEW

S.4 How many children do you have living? _____ **IF NONE, TERMINATE**

HOPE ENTERPRISES LTD. 86 EAST STREET, KINGSTON: TEL. 967-4384-7

PLAY 1ST AD TWICE THEN ANSWER THE FOLLOWING QUESTIONS

QUESTION 1

1. What is the ad talking about? **DO NOT READ LIST**

	<u>1ST AD</u>	<u>2ND AD</u>
Personal Choice.....	1	1
Vasectomy.....	2	2
No Scalpel Vasectomy.....	3	3
Contraceptive.....	4	4
Pregnancy.....	5	5
Other (Specify).....	6 _____	_____
Don't know/Not sure.....	98	98
Refuse.....	99	99

2. What were the main points the ad was trying to get across about vasectomy? Anything else? **DO NOT READ LIST**

	<u>1ST AD</u>		<u>2ND AD</u>	
	<u>YES</u>	<u>NO</u>	<u>YES</u>	<u>NO</u>
Vasec. is a man's way of sharing family planning responsibility	1	2	1	2
Vasec. prevents you from having more children	1	2	1	2
It's a permanent form of family planning	1	2	1	2
It doesn't affect your manhood	1	2	1	2
Quick	1	2	1	2
Safe	1	2	1	2
99% Reliable	1	2	1	2
Minor discomfort	1	2	1	2
Other	1	2	1	2
Don't Know	98		98	
Refuse	99		99	

7. According to the ad, how soon after having the procedure done can you resume having sex? **DO NOT READ LIST**

	<u>1ST AD</u>	<u>2ND AD</u>
A few days.....	1	1
Other (Specify).....	2 _____	2 _____
Don't know.....	98	98
Refuse.....	99	99

8. After hearing this ad, how interested would you be in seeking further information about the No Scalpel Vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested?

	<u>1ST AD</u>	<u>2ND AD</u>
Very interested.....	1	1
Somewhat interested.....	2	2
Not sure.....	3	3
Not very interested.....	4	4
Not at all interested.....	5	5

9. What suggestions can you give for improving this ad?

<u>1ST AD</u>	<u>2ND AD</u>

2ND AD REPEATED TO BE PLAYED TWICE AND QUESTIONS 1-9 REPEATED

COMPARISON OF 1ST AND 2ND AD

10. Which of the two ads leaves you feeling that the Vasectomy :

	<u>1ST AD</u>	<u>2ND AD</u>	<u>BOTH</u>	<u>NEITHER</u>
a. Is a safe method.....	1	2	3	4
b. Is quick.....	1	2	3	4
c. Is permanent.....	1	2	3	4
d. Is very reliable.....	1	2	3	4

11a. Overall, which of the two ads would make you most want to try the No-Scalpel Vasectomy?

1. 1st Ad 2. 2nd Ad 3. Both 4. None

11b. Why? _____

12. Overall, which of the two ads would you say:

	<u>1ST AD</u>	<u>2ND AD</u>	<u>BOTH</u>	<u>NEITHER</u>
a. Is more informative....	1	2	3	4
b. Is more interesting.....	1	2	3	4
c. Is more convincing.....	1	2	3	4

13a. Overall which would you say is a better radio ad?

1. 1st Ad

2. 2nd Ad

13b. Why? _____

THANK YOU FOR YOUR TIME AND COOPERATION!!!!

Questionnaire # _____

Pre Test of Communication Material

(3/97)

Material: Vasectomy Print (4)

Target Group: Males (1) Females (2)

Material to be tested: Ball 1 Couple 2

Name of Respondent: _____ RESP. # _____

Location: _____

Name of Interviewer: _____ Supervisor: _____

Location of interview: Urban 1 Rural 2

Date of interview: _____ Time Started: _____ Time Ended: _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with women about health and family planning and would very much like your participation.

Screening Questionnaire

S.1 Are you between the ages of 25 and 45?

Yes 1 No 2 ----->TERMINATE

S.2 IF YES: How old are you? _____

S.3 Please tell me which of the following applies to you:

Married 1
Common Law/Live with partner 2
Visiting relationship 3
Have a boyfriend 4
Single with no partner at this time 5----->TERMINATE

IF RESPONDENT IS SINGLE THANK HER AND TERMINATE THE INTERVIEW

- S.13 Are you employed:
- | | |
|-----------------------------------------|-------------------|
| Full-time (more than 30 hours per week) | 1 |
| Part time (less than 30 hours per week) | 2 |
| Only at certain times during the year | 3 |
| Not employed | 4 ---->GO TO S.15 |

S.14 What is your occupation? _____

S.15 What is the occupation of the main income earner of your household?

S.16 S/E Classification:

- 1 Upper middle (B) 2 Middle/Lower Middle (C) 3 Lower (D)

CONCERNS ABOUT THE VASECTOMY

1a. Do you have any concerns about the vasectomy?

- | | | | |
|-----|---|----|----------------|
| Yes | 1 | No | 2---->GO TO Q2 |
|-----|---|----|----------------|

1b. IF 'YES', ASK: What are your concerns? **DO NOT READ LIST**

- | | |
|------------------------------|----|
| Partner will become impotent | 1 |
| Won't be able to enjoy sex | 2 |
| Other(Specify) _____ | 3 |
| Don't Know | 98 |
| Refuse | 99 |

I have here an advertisement which I would like you to read, is that okay with you?

- | | | | |
|-----|---|----|-----------------|
| Yes | 1 | No | 2---->TERMINATE |
|-----|---|----|-----------------|

NOW HAND RESPONDENT AD, ALLOW HER ENOUGH TIME TO READ IT ONCE, THEN PROCEED

CIRCLE WHICH AD IS BEING TESTED FOR COMPREHENSION:

- | | |
|---------|-----------|
| 1. BALL | 2. COUPLE |
|---------|-----------|

6. How long does it take to have the procedure done? **DO NOT READ LIST**

15 minutes.....	1
Other	2 _____
Don't Know	98
Refuse.....	99

7. According to the ad where should the male go to have the No Scalpel Vasectomy procedure done? **DO NOT READ LIST**

The doctor's office.....	1
Other (Specify).....	2 _____
Don't Know.....	98
Refuse.....	99

8. How soon after having the vasectomy done would your partner be able to resume work? **DO NOT READ LIST**

24 hrs.....	1
Other (Specify).....	2 _____
Don't Know.....	98
Refuse.....	99

9. How soon after having the vasectomy done can a man have sex? **DO NOT READ LIST**

When he is comfortable to do so.....	1
Within a few days.....	2
Other (Specify).....	3 _____
Don't Know.....	98
Refuse.....	99

10. According to the ad, who should you contact if you needed more information about the Vasectomy? **DO NOT READ LIST**

Personal Choice Provider.....	1
Doctor/Nurse.....	2
Other Specify).....	3 _____
Don't know.....	98
Refuse.....	99

Questionnaire # _____

Pre Test of Communication Material

(3/97)

Material: Vasectomy Print (6)

Target Group: Males (1) Females (2)

Material to be tested: Ball 1 Couple 2

Name of Respondent: _____ Resp.# _____

Location: _____

Name of Interviewer: _____ Supervisor: _____

Location of Interview: Urban 1 Rural 2

Date of interview: _____ Time Started: _____ Time Ended: _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with men about health and family planning and would very much like your participation.

Screening Questionnaire

S.1 Are you between the ages of 30 and 54?

Yes 1 No 2 ----->TERMINATE

S.2 **IF YES:** How old are you? _____

S.3 Please tell me which of the following applies to you:

- Married 1
- Common Law/Live with partner 2
- Visiting relationship 3
- Have a girlfriend 4
- Single with no partner at this time 5----->TERMINATE

IF RESPONDENT IS SINGLE THANK HIM AND TERMINATE THE INTERVIEW

S.4 What is the last school that you attended?

- No formal schooling 1
- Basic/Primary 2
- Secondary/Technical 3
- High School 4
- Tertiary 5
- Trade Training Center/HEART 6
- Other _____ 7
(Specify)

S.5 IF 1 OR 2, ASK: Can you read a letter or newspaper?

- Yes 1
- No 2 -----> TERMINATE

S.6 How many children do you have living?----- IF NONE TERMINATE

S.7 Would you like to have more children?

- Yes 1 -----> TERMINATE
- No 2

S.8 Have you ever heard of the vasectomy (No Scalpel Vasectomy)?

- Yes 1
- No 2

S.9 Have you ever had an operation that will keep you from having children, by that I mean a vasectomy?

- Yes 1 -----> TERMINATE
- No 2

S.10 Has your wife/partner ever had an operation, sometimes called tubal-ligation, hysterectomy, or female sterilization that will keep her from having children?

- Yes 1 -----> TERMINATE
- No 2

S.11 Are you employed:

- Full-time (more than 30 hours per week) 1
- Part time (less than 30 hours per week) 2
- Only at certain times during the year 3
- Not employed 4 ----->GO TO S.13

S.12 What is your occupation? _____

S.13 What is the occupation of the main income earner of your household?

S.14 S/E Classification:

1 Upper middle (B) 2 Middle/Lower Middle (C) 3 Lower (D)

CONCERNS ABOUT THE VASECTOMY

1a. Do you have any concerns about the vasectomy?

Yes 1

No 2 --->GO TO Q2

1b. IF 'YES', ASK: What are your concerns? **DO NOT READ LIST**

Will become impotent	1
Won't be able to enjoy sex	2
Other(Specify) _____	3
Don't Know	98
Refuse	99

I have here an advertisement which I would like you to read, is that okay with you?

Yes 1

No 2--->TERMINATE

NOW HAND RESPONDENT AD. ALLOW HIM ENOUGH TIME TO READ IT ONCE THEN PROCEED

CIRCLE WHICH AD IS BEING TESTED FOR COMPREHENSION:

1. BALL

2. COUPLE

6. According to the ad where should you go to have the No Scalpel Vasectomy procedure done? **DO NOT READ LIST**

In a doctor's office.....	1
Other (Specify).....	2 _____
Don't Know.....	98
Refuse.....	99

7. How soon after having the vasectomy done is it normal for a man to resume work? **DO NOT READ LIST**

24 hours.....	1
Other(Specify).....	2 _____
Don't Know.....	98
Refuse.....	99

8. How soon after having the vasectomy done can a man have sex? **DO NOT READ LIST**

When he is comfortable to do so.....	1
Within a few days.....	2
Other(Specify).....	3 _____
Don't Know.....	98
Refuse.....	99

9. According to the ad, who should you contact if you needed more information about the Vasectomy? **DO NOT READ LIST**

Personal Choice Provider.....	1
Doctor/Nurse.....	2
Other(Specify).....	3 _____
Don't Know.....	98
Refuse.....	99

- 10a. After reading this ad, how interested would you be in seeking further information about the Vasectomy? Would you say very interested, somewhat interested, not very interested, or not at all interested?

Very interested.....	1 ———>GO TO Q11a
Somewhat interested.....	2 ———>GO TO Q11a
Not sure.....	3 ———>GO TO Q11a
Not very interested.....	4
Not at all interested.....	5

15. **CHECK Q1a, IF YES, ASK:** Earlier you mentioned that you had concerns about the vasectomy, do you still have those concerns?

- Yes.....1 -----> GO TO Q17a
- No.....2
- Don't Know.....98
- Refuse.....99

16a. **IF NO, ASK:** In what ways were your concerns addressed?

I have here another ad that I would like you to compare with the one you just read

COMPARISON OF LAYOUT OF PRINT ADS

17a. Overall, which would you say is a better print ad?

- 1. Ball
- 2. Couple

17b. Why? _____

18a. Which of the two ads would you say is more interesting?

- 1. Ball
- 2. Couple

18b. Why? _____

19. Which of the two ads do you think is more convincing?

- 1. Ball
- 2. Couple

20. How likely are you to have a vasectomy done?

- Not at all likely.....1
- Not Likely.....2
- Not sure.....3
- Likely.....4
- Very likely.....5

THANK YOU FOR YOUR TIME AND COOPERATION!!!!!!

MESSAGES TESTED

Portrait of a man...
a responsible family man.



VASECTOMY

Think of it as sharing the responsibility

If you're absolutely sure that you don't want any more children, having a vasectomy could possibly be the simplest family solution ever.

WHAT IS A VASECTOMY?

A vasectomy is a quick, no scalpel (no knife) procedure taking 15 minutes in a doctor's office.

After a vasectomy is done, sperm can no longer get into the man's sex fluid, but doesn't prevent him from enjoying sex. In fact, most men can resume work and other activities within 24 hours and can have sex when it is comfortable to do so, usually within a few days.

QUICK, SAFE, 99.8% SURE!

Your sex drive won't change. You'll still have strong erections and a normal discharge of sex fluid...but no sperm...no anxiety...no fear of unplanned pregnancy.

For more information, contact your PERSONAL CHOICE provider:

KINGSTON
Dr. Wesley Hoo Fatt
22 Deanery Road
Kingston 3
Tel: 928-4331

Dr Richard Reid
65 East Street
Kingston
Tel: 967-1434

MONTEGO BAY
Dr Keith Wedderburn
3 Orange Street
Tel: 952-4511



PERSONAL
CHOICE

Wherever you see this sign
you can find the high quality,
affordable, private sector
contraceptive products and
services you need.

After a vasectomy, remember, only a condom can prevent the transmission of STD and HIV/AIDS 166

Think about it...

JUST 15 MINUTES OF YOUR TIME
A LIFETIME OF FAMILY PLANNING PROTECTION!

If you're absolutely sure that you don't want any more children, having a vasectomy could possibly be the simplest family planning solution ever.

VASECTOMY.

Think of it as sharing the responsibility!

WHAT IS VASECTOMY

A vasectomy is a quick, no scalpel ("no-knife") procedure taking 15 minutes in a doctor's office.

After a vasectomy is done, sperm can no longer get into the man's sex fluid, but doesn't prevent him from enjoying sex. In fact, most men can resume work and other activities within 24 hours and can have sex when it is comfortable to do so - usually within a few days.

QUICK. SAFE. 99.8% SURE!

Your sex drive won't change. You'll still have strong erections and a normal discharge of sex fluid...but no sperm... no anxiety...no fear of unplanned pregnancy.

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Dr. Richard Reid
65 East Street
Kingston
Tel: 967-1434

MONTEGO BAY

Dr. Keith Wedderburn
3 Orange Street
Tel: 952-4511



PERSONAL
CHOICE

After a vasectomy, remember, only a condom can prevent transmission of STDs and HIV/AIDS!

RADIO COPY



**DUNLOP
CORBIN
COMPTON**

DATE: January 8, 1997
CLIENT: The Futures Group
PRODUCT: Vasectomy
MEDIA:
REMARKS: (Manhood)
DESCRIPTION: 1X45 Seconds
REF. NO: Vasec1

SFX: (ANNOUNCER'S VOICE: "Have you given thought to having a vasectomy?")

SFX: (PEALS OF MALE LAUGHTER)

MALE 1: Is what wrong wid that bredda doan eh?

MALE 2: Vasectomy? Me mus' mek doctor tamper wid my manhood?

MALE 1: (IN HIGH PITCHED VOICE) Next thing mi start talk like this...

(PEALS OF LAUGHTER)

MALE 2: Then Winston, how come you so quiet?

WINSTON: (DEEP, DEEP VOICE) Don't bother listen to all the rumours, I had a vasectomy! My wife and I definitely didn't want any more kids and after much thought I sey, why I doan' something about it...

ANNCR: A no scalpel vasectomy is a permanent form of contraception for men. It is a quick procedure done in a doctor's office with minor discomfort. Afterwards you soon resume normal activities and it is safe.

WINSTON: Now me an' mah wife don't fret 'bout pregnancy anymore, sex is for pure enjoyment...

MALE 1: Really? Tell mi more friend...

ANNCR: Talk with your doctor, or Personal Choice Provider about a no scalpel vasectomy and start thinking about it today!

RADIO COPY



DUNLOP
CORBIN
COMPTON

DATE: 2nd December, 1996
CLIENT: The Futures Group
PRODUCT: Vasectomy
MEDIA:
REMARKS: (New spirit)
DESCRIPTION: 1X30 Seconds
REF. NO: Vasec2

SFX: (BAR SOUNDS)

MALE 1: Hey Georgie, a hear you and Millie went on a second honeymoon man!

MALE 2: (CHUCKLE) Next thing yu hear is that a little Georgie will come along...

MALE 1: (LAUGHTER IN VOICE) You'll have to name him "Honeymoon!"

GEORGE: Yuh go on man... I have the last laugh! Is years now I had a vasectomy!

MALE 1 & 2: (SURPRISED) Yu wha?

GEORGE: Hold on man, uncross your legs, you obviously don't know much 'bout this thing. Is like our love life gone into high gear with nothing to fear!

ANNCR: A No Scalpel vasectomy is quick, safe and over 99% reliable. If you're sure you want no more children, talk with your partner; doctor or Personal Choice Provider and start thinking about one today!

DUNLOP CORBIN COMPTON ASSOCIATES
A CORBIN CARIBBEAN ADVERTISING AGENCY

RADIO COPY

(revised)
CLIENT: FUTURES GROUP
PRODUCT: VASECTOMY
REMARKS: (to men)

DATE: October 2, 1996
REF. NO: VASERAD2.TFG
MEDIA: RADIO
DESCRIPTION: 1X30

MV:

Boy, I must admit that even after we decided on the vasectomy I was still a little scared.. I mean, would it hurt? ... what about sex? ... but it was a no scalpel operation, no knife man! ... so after a few days I was comfortable enough to have sex!

It's been a while now and maybe it's just a mind thing, but I really think it even help put back the spark in our sex life! ...

We knew we didn't want more children, so having a vasectomy makes me a responsible family man!

ANNCR:

Vasectomy. Think of it as sharing the responsibility.
Talk it over with your partner and doctor or Personal Choice provider.

RADIO COPY



DUNLOP
CORBIN
COMPTON

DATE: 01/08/97
CLIENT: The Futures Group
PRODUCT: Vasectomy
MEDIA:
REMARKS: (Shared responsibility)
DESCRIPTION: 1X30 Seconds
REF. NO: Vasec3

SFX: (BABY CRYING AND OTHER CHILDREN PLAYING)

WOMAN: Junior, what we going do about a permanent form of contraception? (SOUNDING A LITTLE SAD)
We said we wanted only two children but look...

MAN: Well, you go get yuh tubes tied!

WOMAN: Lawks Junior...after two operations already, you would really want me to have more surgery?

ANNCR: What they could think about is a No Scalpel Vasectomy. It's a man's way of sharing the responsibility not to have any more children. It is quick, and you ^{soon} return to normal activities quickly. *and safe.*

WOMAN: Talk to the doctor about it nuh Junior...

ANNCR; Or your Personal Choice Provider and start thinking about it today.

DUNLOP CORBIN COMPTON ASSOCIATES
A CORBIN CARIBBEAN ADVERTISING AGENCY

RADIO COPY

(revised)

CLIENT: FUTURES GROUP

PRODUCT: VASECTOMY

REMARKS: (to women)

DATE: September 16, 1996

REF. NO: VASECRAD.TFG

MEDIA: RADIO

DESCRIPTION: 1X30

Tony's Idea

FV : You know, It was Tony's idea to have
 a vasectomy ... It took me a little
 by surprise ...
 I mean, we were sure we didn't want any
 more children but couldn't decide on the
 most suitable method ... well, he said he
 had checked out the details with our doctor
 and everything would be just fine ...

(chuckling): Well I tell you, since the vasectomy,
 he's a new man ... and the honeymoon
 just begin!
 Seriously though, respect is due!
 My man was showing me he cared about
 our life together ...

ANNCR: Vasectomy. Think of it as sharing the
 responsibility.

 Talk it over with your partner and doctor
 or Personal Choice provider.

REPORT ON PRETEST OF NSV/IUD COMMUNICATION MATERIALS

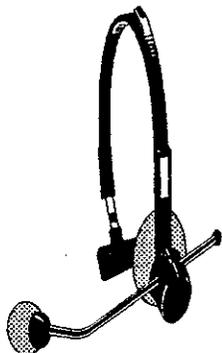
(Volume 2 of 2)

July 1997

Subcontractor name:	Hope Enterprises Ltd.
Project name:	SOMARC
Project number:	936-3051-2691210
Prime contract:	CCP-3051-C-00-2016-00/Jamaica
Subcontract No:	5300-39-HOPE-259

SOMARC LIBRARY

The Futures Group, Inc.



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(volume 2)

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QUESTIONNAIRES

MESSAGES TESTED



**IUD
PRINT**

5.5.2 Information Gained

Benefits of the Method (See Table 3)

The majority recalled the main benefit as being that the IUD is convenient/provides protection against pregnancy for up to 10 years (50%). Other specific benefits that were recalled were that the IUD is over 99% effective (34%), is reversible (32%), is safe for new mothers (30%) and that it is long lasting (28%). The younger respondents (25-29 years) were more likely to recall the specific benefits of the method while, the older respondents recalled additional benefits of the IUD such as: it is effective/over 99% effective, reversible and safe for new mothers.

Four percent (4%) of the sample were not able to recall any benefits of the IUD. All of them were from the lower socio-economic group.

Source of Additional Information (See Table 4)

Majority of the respondents (78%) cited the doctor as the person they would ask for information about the IUD. Other sources of information included Personal Choice Office (22%), and the Clinics/Health Centre (12%). Recall of the Doctor and Personal Choice Office as a source from which to access information was highest among the middle/lower middle income respondents. (89.5% vs. 71% ; 31.6% vs. 16.1% respectively).

General Information Gained

Removal of the IUD (See Table 5)

Overall, majority of the respondents were able to correctly recall that the IUD should be removed by a trained health care provider (72%), while another 22% of the sample specified the doctor, these were mainly persons 35-39 years (50% vs. 19.2% & 22.2% for the 25-29 and 30-34 age groups respectively). There were however, no other differences

in response by age and socio-economic groups. Four 4% of the sample stated that they did not know who should remove the IUD and 2% did not answer.

What To Ask For If Interested In The IUD (See Table 6)

When asked what would they ask for if they were interested in this method of contraception the majority (54%) correctly stated that they would ask for the CopperT 380A IUD/CopperT, 30% said they would ask for the IUD. Those who gave the specific response of CopperT 380A IUD/CopperT were more likely to be in the 30-34 year age group (88.8%), of the middle/lower middle income socio-economic group (68.4% vs. 42% from the lower income group) and reside in the urban area (61.5% vs. 41.7% from the rural area).

Duration of Protection (See Table 7)

Majority of the respondents (96%) were able to correctly state that the IUD provides protection against pregnancy for ten (10) years. While only 2% of the respondents stated it provides protection for three (3) years, the other 2% was unsure of the length of time it provides protection.

5.5.3 Response to Execution and Content of Message

Illustration of the Uterus with the IUD in Place (see Tables 8 and 9)

It was the minority (16%) who were able to correctly state that the drawing depicted the IUD inserted in the womb/uterus/in place. There was a significant difference in this response by socio-economic group (middle/lower middle 31.6% vs. lower 6.5%; $p = .05$). All of these respondents reside in the urban area. Another 24% seemed to be on the right track with their interpretation being "how to insert the IUD". This however may be looked at with mixed views as these persons may also be thinking that they can insert the

IUD for themselves. Clarification as to exactly what the picture is depicting is therefore important. Other interpretations given included the "uterus/womb (36%)" and "the vagina (20%)". Two respondents stated that they did not know what the drawing was depicting and both were from the lower socio-economic group and from the rural area.

Although it was only 16% of the sample who correctly interpreted the drawing of the uterus with the IUD inserted, the majority (86%) felt that the picture was not difficult to understand. While 80% also felt that the picture helped them to better understand about the IUD. There were no obvious differences in responses by age or socio-economic groups.

5.5.4 Overall Ratings Of The Message

Specific Responses to the Message

Is the Message Appealing (see Table 11)

Majority (68%) of the respondents felt that the message was appealing , 16% thought it was not appealing while 14% did not give an answer and 2% said they were unsure. Those persons who did not find the message appealing were mainly from the lower socio-economic group and from the rural area. All of whom were also from the younger age groups.

Is the Message Interesting (see Table 11)

Eighty percent (80%) of the respondents agreed that the message was interesting, 12% did not give an answer and 4% were uncertain. All the respondents who thought the message was not interesting were from the lower socio-economic group and from the rural area.

Is the Message Easy to Understand (see Table 11)

Majority of the respondents (90%) agreed that the message was easy to understand, while 6% disagreed and the remaining 4% gave no answer. There were no obvious differences in response by age or socio-economic group.

Likelihood of Seeking Further Information (see Table 12a)

Overall, there was a high interest level in the IUD as 70% said they would be interested in getting further information about the IUD (38% very interested ; 32% somewhat interested). There were no major differences by age and socio-economic group. Of the nine (9) respondents who said they were not interested in getting more information 10 % said they were not at all interested these were all from the lower socio-economic group, there were no obvious differences in ages.

Reasons for not Being Interested (see Table 12b)

The main reason cited for lack of interest in the IUD as a method of contraception was directly related to the perceived lack of safety of the product and subsequent possibility of developing an infection (44.4%). These respondents were primarily from the lower socio-economic group and from the rural area (rural 60% vs. urban 25%).

Suggestions for Improving the Message (see Table 10)

Majority (58%) of the respondents thought that the message was acceptable as is and there was no need for any improvement. Of the suggestions given by 22% of the sample, the main suggestion had to do with the need for more information about the method, in particular information about the side effects.

OVERALL, FOCUS OF AD

- TABLE 1

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	26 100.0%	9 100.0%	8 100.0%	7 100.0%	19 100.0%	31 100.0%	26 100.0%	24 100.0%
Copper T 380A IUD %	14 28.0%	5 19.2%	4 44.4%	2 25.0%	3 42.9%	8 42.1%	6 19.4%	7 26.9%	7 29.2%
Contraceptives %	10 20.0%	7 26.9%	1 11.1%	1 12.5%	1 14.3%	3 15.8%	7 22.6%	5 19.2%	5 20.8%
Family planning %	10 20.0%	6 23.1%	1 11.1%	1 12.5%	2 28.6%	4 21.1%	6 19.4%	7 26.9%	3 12.5%
IUD %	9 18.0%	4 15.4%	2 22.2%	2 25.0%	1 14.3%	4 21.1%	5 16.1%	4 15.4%	5 20.8%
Personal Choice %	3 6.0%	2 7.7%		1 12.5%			3 9.7%	1 3.8%	2 8.3%
Pregnancy %	2 4.0%	2 7.7%					2 6.5%	1 3.8%	1 4.2%
Protection against pregnancy %	1 2.0%		1 11.1%				1 3.2%	1 3.8%	

WHAT ARE THE MAIN IDEAS THE AD WAS TRYING TO GET ACROSS?

- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	26 *	9 *	8 *	7 *	19 *	31 *	26 *	24 *
Women who want to delay having children should use the IUD %	21 42.0%	12 46.2%	5 55.6%	1 12.5%	3 42.9%	7 36.8%	14 45.2%	11 42.3%	10 41.7%
The IUD is a reliable/convenient/long lasting contracep. %	20 40.0%	9 34.6%	2 22.2%	5 62.5%	4 57.1%	8 42.1%	12 38.7%	10 38.5%	10 41.7%
Prevention of pregnancy/prevent unwanted pregnancy %	11 22.0%	5 19.2%	3 33.3%	3 37.5%		2 10.5%	9 29.0%	6 23.1%	5 20.8%
IUD is safe for new mothers %	7 14.0%	3 11.5%	3 33.3%	1 12.5%		4 21.1%	3 9.7%	6 23.1%	1 4.2%
There are benefits to using the IUD %	7 14.0%	6 23.1%			1 14.3%	4 21.1%	3 9.7%	2 7.7%	5 20.8%
Safe %	2 4.0%	1 3.8%		1 12.5%		2 10.5%		1 3.8%	1 4.2%
Using an affordable contraceptive/ its less expensive %	1 2.0%		1 11.1%			1 5.3%		1 3.8%	
Don't know %	1 2.0%			1 12.5%			1 3.2%		1 4.2%
Other %	1 2.0%	1 3.8%				1 5.3%		1 3.8%	

* Columns exceed 100% due to multiple responses

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	26 *	9 *	8 *	7 *	19 *	31 *	26 *	24 *
IUD provides protection for up to 10 yrs %	20 40.0%	10 38.5%	4 44.4%	3 37.5%	3 42.9%	10 52.6%	10 32.3%	11 42.3%	9 37.5%
IUD is effective/over 99% effective %	17 34.0%	8 30.8%	3 33.3%	3 37.5%	3 42.9%	9 47.4%	8 25.8%	12 46.2%	5 20.8%
IUD is reversible %	16 32.0%	6 23.1%	3 33.3%	3 37.5%	4 57.2%	6 31.6%	10 32.2%	9 34.6%	7 39.2%
IUD is safe for new mothers %	15 30.0%	5 19.2%	6 66.6%	1 12.5%	3 42.9%	10 52.6%	5 16.1%	14 53.9%	1 4.2%
IUD is long lasting %	14 28.0%	5 19.2%	4 44.4%	3 37.5%	2 28.6%	10 52.6%	4 12.9%	8 30.8%	6 25.0%
IUD is less expensive than other brands %	10 20.0%	7 26.9%	2 22.2%		1 14.3%	4 21.1%	6 19.4%	9 34.6%	1 4.2%
IUD is reliable %	7 14.0%	2 7.7%	1 11.1%	1 12.5%	3 42.9%	4 21.1%	3 9.7%	5 19.2%	2 8.3%
IUD is convenient %	5 10.0%	2 7.7%	3 33.3%			3 15.8%	2 6.5%	2 7.7%	3 12.5%
Prevent unwanted pregnancy %	4 8.0%	1 3.8%	1 11.1%	2 25.0%			4 12.9%	2 7.7%	2 8.3%
Longer lasting than other methods %	1 2.0%	1 3.8%					1 3.2%	1 3.8%	
Don't know %	2 4.0%	1 3.8%		1 12.5%			2 6.5%	1 3.8%	1 4.2%

* Columns exceed 100% due to multiple responses

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE IUD?

- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	26 *	9 *	8 *	7 *	19 *	31 *	26 100.0%	24 100.0%
Doctor %	39 78.0%	21 80.8%	6 66.7%	5 62.5%	7 100.0%	17 89.5%	22 71.0%	20 76.9%	19 79.2%
Personal Choice Office %	11 22.0%	2 7.7%	5 55.6%	2 25.0%	2 28.6%	6 31.6%	5 16.1%	9 34.6%	2 8.3%
Health clinic/health care place %	6 12.0%	4 15.4%	1 11.1%	1 12.5%		3 15.8%	3 9.7%	5 19.2%	1 4.2%
Health care provider/health officer %	3 6.0%	2 7.7%		1 12.5%		1 5.3%	2 6.5%	1 3.8%	2 8.3%
Other %	1 2.0%			1 12.5%			1 3.2%	1 3.8%	

* Columns exceed 100% due to multiple responses

WHO SHOULD REMOVE THE IUD?

- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	26 *	9 *	8 *	7 *	19 *	31 *	26 *	24 *
A trained health care provider %	36 72.0%	20 76.9%	6 66.7%	3 37.5%	7 100.0%	14 73.7%	22 71.0%	17 65.4%	19 79.2%
Doctor %	11 22.0%	5 19.2%	2 22.2%	4 50.0%		4 21.1%	7 22.6%	6 23.1%	5 20.8%
Nurse %	1 2.0%			1 12.5%			1 3.2%	1 3.8%	
Don't know %	2 4.0%	1 3.8%	1 11.1%			1 5.3%	1 3.2%	2 7.7%	
Refuse %	1 2.0%	1 3.8%					1 3.2%		1 4.2%

* Columns exceed 100% due to multiple responses

IF YOU WERE INTERESTED IN THIS METHOD WHAT WOULD YOU ASK FOR? - TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	26 100.0%	9 100.0%	8 100.0%	7 100.0%	19 100.0%	31 100.0%	26 100.0%	24 100.0%
Copper T %	26 52.0%	13 50.0%	8 88.8%	1 12.5%	4 57.2%	13 68.4%	13 42.0%	16 61.5%	10 41.7%
IUD %	15 30.0%	8 30.8%		5 62.5%	2 28.6%	4 21.1%	11 35.5%	5 19.2%	10 41.7%
Personal Choice %	4 8.0%	2 7.7%		1 12.5%	1 14.3%		4 12.9%	2 7.7%	2 8.3%
Personal Choice Copper T %	1 2.0%		1 11.1%			1 5.3%		1 3.8%	
Other %	3 6.0%	3 11.5%				1 5.3%	2 6.5%	2 7.7%	1 4.2%
Don't know %	1 2.0%			1 12.5%			1 3.2%		1 4.2%

NUMBER OF YEARS IUD PROVIDES PROTECTION

- TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	26 100.0%	9 100.0%	8 100.0%	7 100.0%	19 100.0%	31 100.0%	26 100.0%	24 100.0%
10 years %	48 96.0%	26 100.0%	9 100.0%	7 87.5%	6 85.7%	19 100.0%	29 93.5%	24 92.3%	24 100.0%
3 years %	1 2.0%			1 12.5%			1 3.2%	1 3.8%	
Don't know %	1 2.0%				1 14.3%		1 3.2%	1 3.8%	

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WHAT IS THE DRAWING SHOWING?

- TABLE 8

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	26 *	9 *	8 *	7 *	19 *	31 *	26 *	24 *
The uterus/ womb %	18 36.0%	11 42.3%	2 22.2%	4 50.0%	1 14.3%	7 36.8%	11 35.5%	6 23.1%	12 50.0%
How to insert the IUD %	12 24.0%	7 26.9%	2 22.2%	1 12.5%	2 28.6%	6 31.6%	6 19.4%	10 38.5%	2 8.3%
The vagina %	10 20.0%	6 23.1%	3 33.3%		1 14.3%	2 10.5%	8 25.8%	3 11.5%	7 29.2%
IUD inserted/IUD in the womb/ IUD in the uterus/ IUD in place %	8 16.0%	2 7.7%	3 33.3%	2 25.0%	1 14.3%	6 31.6%	2 6.5%	8 30.8%	
The IUD/ Copper T %	2 4.0%		2 22.2%			1 5.3%	1 3.2%	2 7.7%	
Fallopian Tube %	1 2.0%			1 12.5%		1 5.3%			1 4.2%
Other %	2 4.0%			1 12.5%	1 14.3%		2 6.5%	1 3.8%	1 4.2%
Don't know %	2 4.0%	1 3.8%			1 14.3%		2 6.5%		2 8.3%

* Columns exceed 100% Due to multiple responses

RESPONSE TO PICTURE

- TABLE 9

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL	50	26	9	8	7	19	31	26	24
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Is the picture difficult to understand									
Yes	7	4	1	1	1	3	4	2	5
%	14.0%	15.4%	11.1%	12.5%	14.3%	15.8%	12.9%	7.7%	20.8%
No	43	22	8	7	6	16	27	24	19
%	86.0%	84.6%	88.9%	87.5%	85.7%	84.2%	87.1%	92.3%	79.2%
Does the picture help you to understand the IUD?									
Yes	40	19	8	8	5	17	23	23	17
%	80.0%	73.1%	88.9%	100.0%	71.4%	89.5%	74.2%	88.5%	70.8%
No	10	7	1		2	2	8	3	7
%	20.0%	26.9%	11.1%		28.6%	10.5%	25.8%	11.5%	29.2%

SUGGESTIONS FOR IMPROVING AD?

- TABLE 10

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 *	26 *	9 *	8 *	7 *	19 *	31 *	26 *	24 *
Okay as is/fine/none %	29 58.0%	18 69.2%	4 44.4%	5 62.5%	2 28.6%	8 42.1%	21 67.7%	9 34.6%	20 83.3%
Talk more about the side effects/ Copper T %	3 6.0%	3 11.5%				2 10.5%	1 3.2%	2 7.7%	1 4.2%
Safety/effectiveness of IUD against pregnancy %	2 4.0%		2 22.2%			2 10.5%		2 7.7%	
Enlarge the drawing of uterus for better view %	2 4.0%	1 3.8%			1 14.3%	1 5.3%	1 3.2%	1 3.8%	1 4.2%
Use bright colours %	1 2.0%	1 3.8%					1 3.2%	1 3.8%	
Show actual size of the IUD %	1 2.0%		1 11.1%				1 3.2%	1 3.8%	
Needs more information %	1 2.0%	1 3.8%					1 3.2%		1 4.2%
Other %	1 2.0%		1 11.1%			1 5.3%		1 3.8%	
No answer %	11 22.0%	3 11.5%	1 11.1%	3 37.5%	4 57.1%	5 26.3%	6 19.4%	10 38.5%	1 4.2%

* Columns exceed 100% due to multiple responses

DESCRIPTION OF AD?

- TABLE 11

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	26 100.0%	9 100.0%	8 100.0%	7 100.0%	19 100.0%	31 100.0%	26 100.0%	24 100.0%
Is ad appealing?									
Appealing %	34 68.0%	18 69.2%	4 44.4%	5 62.5%	7 100.0%	15 78.9%	19 61.3%	15 57.7%	19 79.2%
Not appealing %	8 16.0%	6 23.1%	2 22.2%			1 5.3%	7 22.6%	3 11.5%	5 20.8%
Don't know %	1 2.0%		1 11.1%			1 5.3%		1 3.8%	
No answer %	7 14.0%	2 7.7%	2 22.2%	3 37.5%		2 10.5%	5 16.1%	7 26.9%	
Was ad interesting?									
Interesting %	40 80.0%	22 84.6%	6 66.7%	5 62.5%	7 100.0%	14 73.7%	26 83.9%	18 69.2%	22 91.7%
Not Interesting %	2 4.0%	1 3.8%	1 11.1%				2 6.5%		2 8.3%
Don't know %	2 4.0%		1 11.1%	1 12.5%		2 10.5%		2 7.7%	
No answer %	6 12.0%	3 11.5%	1 11.1%	2 25.0%		3 15.8%	3 9.7%	6 23.1%	
Was ad easy to understand?									
Easy to understand %	45 90.0%	23 88.5%	9 100.0%	7 87.5%	6 85.7%	17 89.5%	28 90.3%	22 84.6%	23 95.8%
Not easy to understand %	3 6.0%	2 7.7%			1 14.3%	1 5.3%	2 6.5%	2 7.7%	1 4.2%
No answer %	2 4.0%	1 3.8%		1 12.5%		1 5.3%	1 3.2%	2 7.7%	

HOW INTERESTED ARE YOU IN OBTAINING INFORMATION ON THE IUD? - TABLE 12a

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL %	50 100.0%	26 100.0%	9 100.0%	8 100.0%	7 100.0%	19 100.0%	31 100.0%	26 100.0%	24 100.0%
Very interested %	19 38.0%	12 46.2%	1 11.1%	2 25.0%	4 57.1%	7 36.8%	12 38.7%	7 26.9%	12 50.0%
Somewhat interested %	16 32.0%	6 23.1%	4 44.4%	4 50.0%	2 28.6%	10 52.6%	6 19.4%	13 50.0%	3 12.5%
Not sure %	6 12.0%	3 11.5%	2 22.2%	1 12.5%		1 5.3%	5 16.1%	2 7.7%	4 16.7%
Not very interested %	4 8.0%	2 7.7%	1 11.1%	1 12.5%		1 5.3%	3 9.7%	2 7.7%	2 8.3%
Not at all interested %	5 10.0%	3 11.5%	1 11.1%		1 14.3%		5 16.1%	2 7.7%	3 12.5%

REASONS FOR LACK OF INTEREST?

- TABLE 12b

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle (C)	Lower (D)	Urban	Rural
TOTAL	9	5	2	1	1	1	8	4	5
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Can cause infection/doesn't look safe/ can cause damage	4	3			1	1	3	1	3
%	44.4%	60.0%			100.0%	100.0%	37.5%	25.0%	60.0%
No reason/never thought about it	2		1	1			2	1	1
%	22.2%		50.0%	100.0%			25.0%	25.0%	20.0%
Prefers other methods	2	2					2	1	1
%	22.2%	40.0%					25.0%	25.0%	20.0%
Would like to see the size of the IUD	1		1				1	1	
%	11.1%		50.0%				12.5%	25.0%	



IUD

BROCHURE

5.6 IUD Brochure

The colour layout of the proposed IUD brochure was evaluated by 50 respondents: ages 25-45 years, from the urban and rural areas.

5.6.1 Comprehension of Specific Terms and Phrases in Message

"Convenient" (See Table 1)

Overall, the main interpretations by respondents of the term 'convenient' were: "there is no need to remember to take or buy anything" (32%), and "easy, ready to use" (26%). Respondents who defined "convenient" as being "no need to remember to buy or take anything", tended to be from the middle/lower middle income group (middle/lower middle income 43.5% vs. lower income 22.2%), and reside in the urban area (urban 50% vs. rural 17.9%). Only 8% of the sample reported being unsure of what the word means and 4% gave no answer.

"Effective" (See Table 2)

The term "effective" as it relates to the IUD was correctly interpreted by a little less than half of the sample (44%) as "protects against pregnancy". There were no differences in response by age or socio-economic group. The other main response given was "IUD can be relied on/long term contraceptive/provides 10 years protection" (36%). These persons tended to be from the middle/lower middle socio-economic group (52.2% vs. 22.2% lower group).

"Using An IUD For Up To 10 Years" (See Table 3)

When asked to interpret the statement "using an IUD for up to 10 years", 42% of the sample correctly understood it to mean "it protects against pregnancy without replacement for up to 10 years". These persons tended to be from the middle/lower middle income group (56.5% vs. 29.6% lower socio-economic group).

There was almost universally correct interpretation of the statement "using an IUD for up to 10 years" as 96% of the respondents stated "it protects against pregnancy for up to 10 years". There were no differences in response by age or socio-economic group.

"A Trained Health Care Provider" (See Table 4)

When asked to define the term "a trained health care provider" the main response given was "a doctor" (76%), while 40% said "a nurse". While there were no major differences by age or socio-economic group among those who replied "a doctor", those who said "nurse" tended to be from the middle\lower middle income group (52.2% vs. 29.6% lower income), and reside in the urban area (urban 50% vs. rural 32.1%).

"Unusual Vaginal Discharge" (See Table 5)

The main explanation given for the term "an unusual vaginal discharge" was "a smelly discharge" (60%). These respondents tended to be from the middle\lower middle socio-economic group (73.9% vs. 48.1% lower socio-economic group), and were also mainly from the age group 40-45 years (83.3%).

Forty-two 42% of the sample explained the term to be "a bloody discharge" and these respondents were mainly in the 30-34 years age group (85.7%). They were primarily from the lower socio-economic group (51.9% vs. 30.4% middle\lower middle socio-economic group) and from the urban area (50% vs. 35.7% rural).

5.6.2 Information Gained

Benefits of the IUD (See Table 6)

The main benefits recalled by respondents were "the IUD is convenient" (90%), "long-lasting: prevents pregnancy for up to 10 years" (64%), "inexpensive" (32%) "reversible" (30%) and "effective" (20%).

5.6.3 General Information

Description of the IUD (See Table 7)

When asked to describe the IUD the, majority (70%) responded correctly "a small T shaped device made of plastic". Another 24% gave the blanket response "a small T shaped device". There was a significant difference in the percentage of persons from the urban area who gave the more specific response of " a small T shaped device made of plastic and copper" versus those from the rural area (90.9% urban vs. 53.6% rural; $p=.01$). There were no major differences in the response by age and socio-economic groups. Only 2% of the sample were unable to describe the IUD.

How the Copper T 380A IUD Works (See Table 8)

Majority (74%) correctly recalled that the IUD works by "preventing the egg and sperm from meeting". There were no differences in the response by age and socio-economic group. Only 2% of the sample stated that they did not know how the IUD works.

Who is the IUD Best Suited for (See Table 9)

The main response given was the "IUD is best suited for women who are waiting a few more years before having anymore children" (56%). These were primarily women from the lower socio-economic group (lower 70.4% vs. middle\lower income 39.1%; $p=.05$), there were no major difference in this response by age group. The two other main responses given were "women in a mutually faithful relationship" (22%) and "women not yet ready for a permanent form of contraceptive" (20%).

Who Should not use the IUD (See Table 10)

Multiplicity of partners was cited as the main reason why women should not use the IUD: "women with more than one partners" (74%) and "women whose partner has other partners" (36%). Those persons who gave the latter response tended to be from the

middle/lower middle socio-economic group (43.5% vs. 29.6% lower socio-economic group) and they were also from the urban area (urban 50% vs. rural 25%), they were also mainly ages 40-45 years.

Reasons for non-use by Women Without Children (See Table 11)

The main reason cited by respondents why women who have never given birth should carefully consider using the IUD is that side effects are more likely to occur in women who have never given birth" (56%). The other reason stated is that "a different type of contraceptive will help protect a woman from getting PID" (48%).

Who should insert the IUD (See Table 12)

Majority (82%) of the respondents correctly stated that the IUD should be inserted by a "trained health care provider", while another 10% of the sample stated the IUD should be inserted by the "doctor". There were no major differences in response by age and socio-economic groups.

Who Should Remove the IUD (See Table 13)

Overall, majority of the respondents (90%) correctly stated that the IUD should be removed by a "trained health care provider", while the other 10% specifically stated the "doctor". There were no major differences in response by age or socio-economic groups.

Responsibility in Checking for the IUD (See Table 14)

Almost all the respondents (98%) were aware that the female should check for the IUD string every month.

Adverse Effects of using the IUD

Side Effects of the IUD (See Tables 15a, 15b, 15c)

The side effect recalled by most was that the IUD may cause mild cramps (72%) or bleeding/spotting (60%).

Majority of the respondents (88%) knew that the side effects are not harmful, while 6% of the sample were unsure.

Almost all the respondents (90%) knew that the side effects should stop within three months of inserting the IUD, and there were no major differences in response by age and socio-economic groups.

Rare Problems Arising from using the IUD (See Table 16)

When asked what were some of the rare side effects that may occur from using the IUD, main responses given were "late menstrual period" (64%) and "unusual spotting or bleeding" (46%). It was primarily persons from the lower socio-economic group who gave this latter response (lower 51.9% vs. 39.1% middle\lower middle) and persons from the urban area (urban 63.6% vs. rural 32.1%).

Knowledge of Pelvic Inflammatory Disease

One Harmful Effect of PID (See Table 17)

Majority (90%) were able to correctly state one harmful effect of having PID, namely "PID can make a woman sterile". There were no differences in response by age or socio-economic groups. Only 2% of the sample did not know a harmful effect of PID.

How Can a Woman get PID (See Table 18)

When asked under what conditions can a woman get PID, the main condition cited by respondents was "if a woman is exposed to an STD through intercourse while using the

IUD" (70%). Another 34% recalled that "if a woman has an STD at the time of inserting the IUD" as the condition under which a woman can get PID. There were no major differences in response by age or socio-economic group.

How Soon After Insertion can Sex be Resumed (See Table 19a)

There was almost universal knowledge that there was no need to delay sexual intercourse after inserting the IUD (90%), however 8% of the sample stated that the female should wait 1 to 7 days before resuming sexual activities.

How Soon after Removal can a Woman Become Pregnant (See Table 19b)

Majority (94%) of the respondents were able to correctly state that a woman can become pregnant as soon as the IUD is removed. There were no differences in response by age or socio-economic group.

Length of Time Procedure Takes (See Tables 20a & 20b)

When asked how long does it take to insert the IUD 44% of the respondents correctly stated that it takes five minutes to have the procedure done. Interestingly, these were mainly persons from the lower socio-economic group (63% vs. 21.7% for the middle\lower middle income group; $p=.008$), and tended to be from the urban area (63.6% urban vs. 28.6% rural; $p=.02$). There were however no major difference in response by age.

Another 50% of the sample stated that the procedure would take a "short time", when asked for further clarification almost a half of these persons defined a short time as being either 3 to 5 minutes (40%) or 5 to 10 minutes (8%). Hence it was approximately 64% of the sample who said that the procedure takes approximately 5 minutes.

Level of Knowledge Gained from Message (See Table 22a)

Majority (54%) of the respondents stated having read the brochure they knew a lot more about the IUD than they did before. Persons tended to be from the 35-39 years age group (81.8%) and from the lower socio-economic group (lower 66.7% vs. 39.1% middle/lower middle group; $p=.09$). Another 40% of the sample stated that they knew a little more about the IUD than they had known before.

Main Things Learnt About the IUD (See Table 22b)

The main thing that respondents reported learning was "the length of time that the IUD provides protection/it protects for 10 years" (41.5%). These persons were mainly from the urban area (urban 58.8% vs. 29.2% rural). Other points recalled were about the side effects ('there were little side effects' (39%), "IUD is reversible" (27%).

5.6.4 Interest in the IUD and Knowledge

Level of interest in the IUD (See Table 21)

It was the minority (16%) who expressed a high level of interest in using the IUD, while another 20% said that they would be "somewhat" interested in using the IUD. While there were no differences in age group or socio-economic groups for persons expressing high interest, it was mainly persons 35-39 years who were "somewhat" interested in using the IUD.

5.6.5 Response to Layout

Was Message Easy to Understand (See Table 23)

Almost all the respondents (90%) thought that the brochure was easy to understand, there were no differences in response by age or socio-economic group.

Majority (94%) of the respondents did not find anything offensive about the brochure.

Description of Picture (See Table 24)

More than a half of the sample (56%) were able to correctly identify the picture as: "where the Copper T 380A IUD is inserted." Other popular responses were: "the woman's womb" (28%) and "the vagina" (6%). There were no distinct differences by age or socio-economic group.

5.6.6 Overall Ratings

Suggestions/Recommendations (See Table 25)

It was the minority (4%) who felt that the brochure needed some improvements, 90% felt that it was okay as is.

OTHER CONCERNS/COMMENTS

Respondents expressed additional concerns about the IUD that were not addressed in the questionnaire which mainly related to the maintenance and need for replacement of the IUD.

"...can it be cleaned? If no, won't it cause a smelly discharge?...."

"...how long can it be in place before renewing or cleaning?..."

"...does the copper T rust at any time?..."

"...if you lose or gain weight (while using the IUD), will it get dislodged...?"

"...if you gain or lose weight (while using the IUD), will it shift from one side to another without being noticed?..."

"...advertise the brochure on television and it will reach more women..."

"...to get more women to use the IUD don't tell them about the side effects, it sounds scary and no woman would want to endure them..."

"...I wouldn't use it because of the cramps and the side effects, and you can still get pregnant while using it..."

WHAT DO YOU UNDERSTAND THE TERM CONVENIENT TO MEAN?

- TABLE 1

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50	20	7	11	12	23	27	22	28
%	*	*	*	*	*	*	*	*	*
No need to remember to take/use or buy anything	16	5	3	3	5	10	6	11	5
%	32.0%	25.0%	42.9%	27.3%	41.7%	43.5%	22.2%	50.0%	17.9%
Easy, ready to use	13	5	3	1	4	5	8	6	7
%	26.0%	25.0%	42.9%	9.1%	33.3%	21.7%	29.6%	27.3%	25.0%
Long lasting contraceptive/can be relied on	7	4	1	1	1	1	6	2	5
%	14.0%	20.0%	14.3%	9.1%	8.3%	4.3%	22.2%	9.1%	17.9%
No problem with using IUD/ can cause less stress	6	2	1	2	1	5	1	3	3
%	12.0%	10.0%	14.3%	18.2%	8.3%	21.7%	3.7%	13.6%	10.7%
Safe to use	1			1		1			1
%	2.0%			9.1%		4.3%			3.6%
More cost effective	1	1				1			1
%	2.0%	5.0%				4.3%			3.6%
Other	5	1	1	1	2	2	3	2	3
%	10.0%	5.0%	14.3%	9.1%	16.7%	8.7%	11.1%	9.1%	10.7%
Don't know	4	1		3			4	1	3
%	8.0%	5.0%		27.3%			14.8%	4.5%	10.7%
No answer	2	1		1		1	1	1	1
%	4.0%	5.0%		9.1%		4.3%	3.7%	4.5%	3.6%

Columns exceed 100% due to multiple responses

WHAT DO YOU UNDERSTAND THE TERM EFFECTIVE TO MEAN?

- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
Protects against pregnancy	22 44.0%	8 40.0%	5 71.4%	5 45.5%	4 33.3%	9 39.1%	13 48.1%	11 50.0%	11 39.3%
UD can be relied on/long term/10 years protection	18 36.0%	8 40.0%	1 14.3%	4 36.4%	5 41.7%	12 52.2%	6 22.2%	9 40.9%	9 32.1%
Affordable	1 2.0%	1 5.0%				1 4.3%			1 3.6%
Other	4 8.0%	2 10.0%	1 14.3%		1 8.3%	1 4.3%	3 11.1%	2 9.1%	2 7.1%
Don't know	5 10.0%	3 15.0%		1 9.1%	1 8.3%	1 4.3%	4 14.8%	1 4.5%	4 14.3%
No answer	2 4.0%			1 9.1%	1 8.3%		2 7.4%		2 7.1%

Columns exceed 100% due to multiple responses

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INTERPRETATION OF "USING IUD UP TO 10 YEARS"

- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
It protects against pregnancy for up to 10 years %	48 96.0%	19 95.0%	6 86.7%	11 100.0%	12 100.0%	22 95.6%	26 96.3%	22 100.0%	26 92.8%
Don't Know %	1 2.0%		1 14.3%				1 3.7%		1 3.6%
Refuse %	1 2.0%	1 5.0%				1 4.3%			1 3.6%

UNDERSTANDING OF A TRAINED HEALTH CARE PROVIDER?

- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
A doctor %	38 76.0%	15 75.0%	6 85.7%	8 72.7%	9 75.0%	17 73.9%	21 77.8%	16 72.7%	22 78.6%
A nurse %	20 40.0%	8 40.0%	2 28.6%	5 45.5%	5 41.7%	12 52.2%	8 29.6%	11 50.0%	9 32.1%
Person trained in the medical field %	2 4.0%	2 10.0%				1 4.3%	1 3.7%		2 7.1%
Other %	1 2.0%	1 5.0%				1 4.3%			1 3.6%

Columns exceed 100% due to multiple responses

EXPLANATION OF UNUSAL VAGINAL DISCHARGE

- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
A smelly discharge	30 60.0%	11 55.0%	3 42.9%	6 54.5%	10 83.3%	17 73.9%	13 48.1%	14 63.6%	16 57.1%
A bloody discharge %	21 42.0%	9 45.0%	6 85.7%	3 27.3%	3 25.0%	7 30.4%	14 51.9%	11 50.0%	10 35.7%
A heavy discharge	9 18.0%	2 10.0%		4 36.4%	3 25.0%	6 26.1%	3 11.1%	4 18.2%	5 17.9%

Columns exceed 100% due to multiple responses

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

- TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
IUD is convenient to use	23 46.0%	10 50.0%	4 57.1%	5 45.5%	4 33.3%	12 52.2%	11 40.7%	8 36.4%	15 53.6%
IUD prevents pregnancy for up to 10 years	20 40.0%	8 40.0%	1 14.3%	3 27.3%	8 66.7%	11 47.8%	9 33.3%	7 31.8%	13 46.4%
With IUD there is no need to continue buying supplies	18 36.0%	7 35.0%	2 28.6%	3 27.3%	6 50.0%	10 43.5%	8 29.6%	8 36.4%	10 35.7%
IUD is inexpensive	16 32.0%	4 20.0%	3 42.9%	6 54.5%	3 25.0%	9 39.1%	7 25.9%	10 45.5%	6 21.4%
IUD is reversible	15 30.0%	7 35.0%	3 42.8%	3 27.2%	2 16.7%	8 21.7%	7 25.9%	7 31.8%	8 28.6%
IUD is long lasting	12 24.0%	4 20.0%	2 28.6%	1 9.1%	5 41.7%	8 34.8%	4 14.8%	6 27.3%	6 21.4%
IUD is effective/over 99% effective	10 20.0%	5 25.0%	1 14.3%	2 18.2%	2 16.7%	5 21.7%	5 18.5%	5 22.7%	5 17.9%
IUD can be inserted right after baby's birth	9 18.0%	2 10.0%	1 14.3%	4 36.3%	2 16.7%	6 26.1%	3 11.1%	6 27.3%	3 10.7%

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION - TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
Don't have to remember to take the pill %	3 6.0%	1 5.0%	1 14.3%	1 9.1%		3 11.1%	2 9.1%	1 3.6%	
IUD will not interfere with breast feeding %	1 2.0%		1 14.3%			1 3.7%	1 4.5%		
Won't interrupt sex %	1 2.0%		1 14.3%			1 3.7%		1 3.6%	
Other %	3 6.0%	1 5.0%		2 18.2%	1 4.3%	2 7.4%	2 9.1%	1 3.6%	

Columns exceed 100% due to multiple responses

DESCRIPTION OF THE COPPER T 380A IUD?

- TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
small T shaped device made of plastic copper	35 70.0%	12 60.0%	7 100.0%	7 63.6%	9 75.0%	18 78.3%	17 63.0%	20 90.9%	15 53.6%
small T shaped device	12 24.0%	8 40.0%		2 18.2%	2 16.7%	4 17.4%	8 29.6%	2 9.1%	10 35.7%
easy to use, reversible method	3 6.0%	1 5.0%		1 9.1%	1 8.3%	2 8.7%	1 3.7%	1 4.5%	2 7.1%
method	1 2.0%	1 5.0%				1 4.3%			1 3.6%
easy to use	1 2.0%				1 8.3%		1 3.7%		1 3.6%
easy	1 2.0%			1 9.1%		1 4.3%			1 3.6%

Columns exceed 100% due to multiple responses

HOW DOES THE COPPER T 380A IUD WORK?

- TABLE 8

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
It prevents the egg & sperm from meeting	36 72.0%	15 75.0%	6 85.7%	8 72.7%	7 58.3%	18 78.3%	18 66.7%	17 77.3%	19 67.9%
It prevents woman from becoming pregnant	13 26.0%	5 25.0%	1 14.3%	2 18.2%	5 41.7%	4 17.4%	9 33.3%	5 22.7%	8 28.6%
It forms a preventive barrier	1 2.0%	1 5.0%					1 3.7%		1 3.6%
Don't know	1 2.0%			1 9.1%		1 4.3%			1 3.6%

Columns exceed 100% due to multiple responses

WHO IS THE IUD BEST SUITED FOR?

- TABLE 9

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
Women who are not ready to have a child for a few years	28 56.0%	10 50.0%	6 85.7%	6 54.5%	6 50.0%	9 39.1%	19 70.4%	12 54.5%	16 57.1%
Women in a mutually faithful relationship	11 22.0%	5 25.0%			6 50.0%	8 34.8%	3 11.1%	4 18.2%	7 25.0%
Women who are not ready for a permanent contraceptive	10 20.0%	6 30.0%		4 36.4%		6 26.1%	4 14.8%	7 31.8%	3 10.7%
Women looking for a contraceptive that's easy to use	3 6.0%	2 10.0%		1 9.1%		1 4.3%	2 7.4%	2 9.1%	1 3.6%
Women with children who don't want anymore	1 2.0%	1 5.0%				1 4.3%			1 3.6%
Sexually active women	1 2.0%				1 8.3%	1 4.3%			1 3.6%
Other	2 4.0%	1 5.0%	1 14.3%				2 7.4%	1 4.5%	1 3.6%

Columns exceed 100% due to multiple responses

WHO SHOULD NOT USE THE IUD?

- TABLE 10

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
Women who have more than one partner %	37 74.0%	14 70.0%	6 85.7%	9 81.8%	8 66.7%	18 78.3%	19 70.4%	17 77.3%	20 71.4%
Women whose partner has other partners %	18 36.0%	6 30.0%	3 42.9%	1 9.1%	8 66.7%	10 43.5%	8 29.6%	11 50.0%	7 25.0%
Women without children %	4 8.0%	2 10.0%	1 14.3%	1 9.1%			4 14.8%	1 4.5%	3 10.7%
Women who are exposed to STDs/PID %	4 8.0%	1 5.0%		2 18.2%	1 8.3%	2 8.7%	2 7.4%	3 13.6%	1 3.6%
Pregnant women %	1 2.0%	1 5.0%					1 3.7%		1 3.6%
Don't know %	1 2.0%				1 8.3%		1 3.7%		1 3.6%

* Columns exceed 100% due to multiple response

REASONS FOR NON USE BY WOMEN WITH NO CHILDREN?

- TABLE 11

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50	20	7	11	12	23	27	22	28
%	*	*	*	*	*	*	*	*	*
Women who have never given birth are more likely to have side effects	28	11	3	7	7	15	13	14	14
%	56.0%	55.0%	42.9%	63.6%	58.3%	65.2%	48.1%	63.6%	50.0%
A different type of contraceptive will help protect a woman from PID	24	10	6	3	5	12	12	10	14
%	48.0%	50.0%	85.7%	27.3%	41.7%	52.2%	44.4%	45.5%	50.0%
Can cause bleeding	1				1		1		1
%	2.0%				8.3%		3.7%		3.6%
Don't Know	2	1		1			2	1	1
%	4.0%	5.0%		9.1%			7.4%	4.5%	3.6%

Columns exceed 100% due to multiple responses

WHO SHOULD INSERT THE IUD?

- TABLE 12

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
A trained health care provider %	41 82.0%	16 80.0%	6 85.7%	8 72.7%	11 91.7%	21 91.3%	20 74.1%	21 95.5%	20 71.4%
Doctor %	5 10.0%	2 10.0%		2 18.2%	1 8.3%	1 4.3%	4 14.8%	1 4.5%	4 14.3%
A professional/qualified person %	2 4.0%	2 10.0%				1 4.3%	1 3.7%		2 7.1%
Other %	1 2.0%		1 14.3%				1 3.7%		1 3.6%
Don't know %	1 2.0%			1 9.1%			1 3.7%		1 3.6%

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WHO SHOULD REMOVE THE IUD?

- TABLE 13

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
A trained health care provider %	45 90.0%	19 95.0%	6 85.7%	10 90.9%	10 83.3%	22 95.7%	23 85.2%	22 100.0%	23 82.1%
Doctor %	5 10.0%	1 5.0%	1 14.3%	1 9.1%	2 16.7%	1 4.3%	4 14.8%		5 17.9%

WHAT DOES THE WOMAN HAVE TO DO EVERY MONTH?

- TABLE 14

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
Check for the IUD string %	49 98.0%	20 100.0%	7 100.0%	11 100.0%	11 91.7%	23 100.0%	26 96.3%	22 100.0%	27 96.4%
Don't know %	1 2.0%				1 8.3%		1 3.7%		1 3.6%

SIDE EFFECTS FROM USING THE IUD?

- TABLE 15a

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
Mild cramps %	36 72.0%	15 75.0%	6 85.7%	7 63.6%	8 66.7%	18 78.3%	18 66.7%	15 68.2%	21 75.0%
Bleeding and spotting %	30 60.0%	14 70.0%	3 42.9%	7 63.6%	6 50.0%	14 60.9%	16 59.3%	13 59.1%	17 60.7%
Heavier periods %	14 28.0%	4 20.0%	2 28.6%	4 36.4%	4 33.3%	8 34.8%	6 22.2%	5 22.7%	9 32.1%
Longer periods %	13 26.0%	4 20.0%	3 42.9%	3 27.3%	3 25.0%	8 34.8%	5 18.5%	4 18.2%	9 32.1%
Spotting between periods %	7 14.0%	1 5.0%		3 27.3%	3 25.0%	4 17.4%	3 11.1%	5 22.7%	2 7.1%
Stronger cramps %	2 4.0%			1 9.1%	1 8.3%	1 4.3%	1 3.7%	1 4.5%	1 3.6%
Pains during sex %	2 4.0%	1 5.0%	1 14.3%				2 7.4%	1 4.5%	1 3.6%
Severe belly pains %	1 2.0%	1 5.0%					1 3.7%	1 4.5%	
Vaginal discharge %	1 2.0%				1 8.3%	1 4.3%			1 3.6%
Can't have any children %	1 2.0%	1 5.0%					1 3.7%		1 3.6%

Columns exceed 100% due to multiple responses

ARE SIDE EFFECTS HARMFUL?

- TABLE 15b

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
Yes %	3 6.0%	2 10.0%		1 9.1%			3 11.1%	2 9.1%	1 3.6%
No %	44 88.0%	17 85.0%	7 100.0%	9 81.8%	11 91.7%	22 95.7%	22 81.5%	19 86.4%	25 89.3%
Don't know %	3 6.0%	1 5.0%		1 9.1%	1 8.3%	1 4.3%	2 7.4%	1 4.5%	2 7.1%

HOW SOON CAN YOU EXPECT SIDE EFFECTS TO STOP?

- TABLE 15c

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
Within 3 months %	45 90.0%	17 85.0%	6 85.7%	11 100.0%	11 91.7%	22 95.7%	23 85.2%	22 100.0%	23 82.1%
5 to 10 days %	1 2.0%	1 5.0%					1 3.7%		1 3.6%
3 to 5 days %	2 4.0%	1 5.0%	1 14.3%			1 4.3%	1 3.7%		2 7.1%
1 - 2 mths %	1 2.0%				1 8.3%		1 3.7%		1 3.6%
Other %	1 2.0%	1 5.0%					1 3.7%		1 3.6%

PROBLEMS RESULTING FROM USING THE IUD?

- TABLE 16

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
Late menstrual period %	32 64.0%	10 50.0%	7 100.0%	6 54.5%	9 75.0%	16 69.6%	16 59.3%	14 63.6%	18 64.3%
Unusual spotting or bleeding %	23 46.0%	8 40.0%	5 71.4%	5 45.5%	5 41.7%	9 39.1%	14 51.9%	14 63.6%	9 32.1%
Pain in lower abdomen %	21 42.0%	9 45.0%	3 42.9%	5 45.5%	4 33.3%	11 47.8%	10 37.0%	10 45.5%	11 39.3%
Unusual vaginal discharge %	21 42.0%	8 40.0%	4 57.1%	3 27.3%	6 50.0%	12 52.2%	9 33.3%	12 54.5%	9 32.1%
IUD string missing %	8 16.0%	4 20.0%	3 42.9%	1 9.1%		3 13.0%	5 18.5%	4 18.2%	4 14.3%
Pain when having sex %	6 12.0%	2 10.0%	1 14.3%	2 18.2%	1 8.3%	2 8.7%	4 14.8%	2 9.1%	4 14.3%
IUD string shorter or longer %	5 10.0%	3 15.0%			2 16.7%	2 8.7%	3 11.1%	3 13.6%	2 7.1%
Nausea %	4 8.0%			1 9.1%	3 25.0%	4 17.4%		2 9.1%	2 7.1%
Signs of pregnancy %	2 4.0%	1 5.0%			1 8.3%	2 8.7%			2 7.1%
Severe pains in belly %	1 2.0%	1 5.0%				1 4.3%		1 4.5%	

Columns exceed 100% due to multiple responses

ONE HARMFUL EFFECT OF PID

- TABLE 17

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50	20	7	11	12	23	27	22	28
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Can make a woman sterile	22	10	2	3	7	11	11	8	14
%	44.0%	50.0%	28.6%	27.3%	58.3%	47.8%	40.7%	36.4%	50.0%
Can make a woman unable to have children	23	9	3	7	4	9	14	14	9
%	46.0%	45.0%	42.9%	63.6%	33.3%	39.1%	51.9%	63.6%	32.1%
Other	1				1	1			1
%	2.0%				8.3%	4.3%			3.6%
Can develop STDs	3	1	1	1		2	1		3
%	6.0%	5.0%	14.3%	9.1%		8.7%	3.7%		10.7%
Don't know	1		1				1		1
%	2.0%		14.3%				3.7%		3.6%

UNDER WHAT CONDITIONS CAN A WOMAN GET PID?

- TABLE 18

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50	20	7	11	12	23	27	22	28
%	*	*	*	*	*	*	*	*	*
If exposed to an STD through intercourse while using IUD	35	13	6	8	8	15	20	18	17
%	70.0%	65.0%	85.7%	72.7%	66.7%	65.2%	74.1%	81.8%	60.7%
If woman has an STD at the time of insertion of the IUD	17	9	1	3	4	10	7	8	9
%	34.0%	45.0%	14.3%	27.3%	33.3%	43.5%	25.9%	36.4%	32.1%
Has more than one partner	2	1			1	1	1		2
%	4.0%	5.0%			8.3%	4.3%	3.7%		7.1%
Don't know	2		1	1		1	1		2
%	4.0%		14.3%	9.1%		4.3%	3.7%		7.1%

Columns exceed 100% due to multiple responses

HOW SOON AFTER INSERTION CAN A WOMAN HAVE SEX?

- TABLE 19a

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
Immediately after insertion %	45 90.0%	18 90.0%	7 100.0%	10 90.9%	10 83.3%	22 95.7%	23 85.2%	21 95.5%	24 85.7%
1 to 5 days/ a week %	4 8.0%	2 10.0%		1 9.1%	1 8.3%		4 14.8%		4 14.3%
6 weeks %	1 2.0%				1 8.3%	1 4.3%		1 4.5%	

HOW SOON AFTER REMOVAL CAN A WOMAN GET PREGNANT?

- TABLE 19b

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
As soon as the IUD is removed %	47 94.0%	19 95.0%	7 100.0%	11 100.0%	10 83.3%	22 95.7%	25 92.6%	20 90.9%	27 96.4%
3 weeks %	1 2.0%				1 8.3%	1 4.3%		1 4.5%	
2 months %	1 2.0%	1 5.0%					1 3.7%	1 4.5%	
1 - 5 days %	1 2.0%				1 8.3%		1 3.7%		1 3.6%

LENGTH OF TIME IUD PROCEDURE USUALLY TAKES

- TABLE 20a

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
A short time %	25 50.0%	11 55.0%	3 42.9%	5 45.5%	6 50.0%	17 73.9%	8 29.6%	7 31.8%	18 64.3%
5 minutes %	22 44.0%	7 35.0%	4 57.1%	5 45.5%	6 50.0%	5 21.7%	17 63.0%	14 63.6%	8 28.6%
1 hr %	1 2.0%	1 5.0%					1 3.7%		1 3.6%
Other %	2 4.0%	1 5.0%		1 9.1%		1 4.3%	1 3.7%	1 4.5%	1 3.6%

EXPLANATION OF A SHORT TIME

- TABLE 20b

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	25	11	3	5	6	17	8	7	18
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
5-10 mins	10	4	2	2	2	8	2	4	6
%	40.0%	36.4%	66.7%	40.0%	33.3%	47.1%	25.0%	57.1%	33.3%
10-15 mins	2	2				1	1		2
%	8.0%	18.2%				5.9%	12.5%		11.1%
15-20 mins	3	1		1	1	3		1	2
%	12.0%	9.1%		20.0%	16.7%	17.6%		14.3%	11.1%
less than 5 mins	2				2	2			2
%	8.0%				33.3%	11.8%			11.1%
Other	7	4		2	1	2	5	2	5
%	28.0%	36.4%		40.0%	16.7%	11.8%	62.5%	28.6%	27.8%
No answer	1		1			1			1
%	4.0%		33.3%			5.9%			5.6%

LEVEL OF INTEREST IN IUD

- TABLE 21

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
Very interested %	8 16.0%	4 20.0%	1 14.3%	2 18.2%	1 8.3%	3 13.0%	5 18.5%	3 13.6%	5 17.9%
Somewhat interested %	10 20.0%	2 10.0%		5 45.5%	3 25.0%	6 26.1%	4 14.8%	6 27.3%	4 14.3%
Not sure %	13 26.0%	6 30.0%	3 42.9%	1 9.1%	3 25.0%	5 21.7%	8 29.6%	8 36.4%	5 17.9%
Not very interested %	7 14.0%	4 20.0%	1 14.3%		2 16.7%	5 21.7%	2 7.4%	2 9.1%	5 17.9%
Not at all interested %	12 24.0%	4 20.0%	2 28.6%	3 27.3%	3 25.0%	4 17.4%	8 29.6%	3 13.6%	9 32.1%

LEVEL OF KNOWLEDGE GAINED FROM AD

- TABLE 22a

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
A lot more about the IUD than did before %	27 54.0%	10 50.0%	3 42.9%	9 81.8%	5 41.7%	9 39.1%	18 66.7%	11 50.0%	16 57.1%
A little more about the IUD than did before %	14 28.0%	7 35.0%	3 42.9%	2 18.2%	2 16.7%	7 30.4%	7 25.9%	6 27.3%	8 28.6%
Not much more about the IUD than did before %	6 12.0%	3 15.0%	1 14.3%		2 16.7%	5 21.7%	1 3.7%	4 18.2%	2 7.1%
Do not know/not sure %	3 6.0%				3 25.0%	2 8.7%	1 3.7%	1 4.5%	2 7.1%

MAIN THINGS LEARNT FROM THE BROCHURE

- TABLE 22b

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	41 *	17 *	6 *	11 *	7 *	16 *	25 *	17 *	24 *
IUD protects for 10 yrs/length of time it protects %	17 41.5%	7 41.2%	3 50.0%	3 27.3%	4 57.1%	7 43.8%	10 40.0%	10 58.8%	7 29.2%
Side effects to expect/little side effects %	16 39.0%	3 17.6%	4 66.7%	7 63.6%	2 28.6%	6 37.5%	10 40.0%	9 52.9%	7 29.2%
Reversible/can get pregnant when want to %	6 14.6%	3 17.6%		1 9.1%	2 28.6%	3 18.8%	3 12.0%	4 23.5%	2 8.3%
You should have only one partner %	5 12.2%	3 17.6%	1 16.7%		1 14.3%	2 12.5%	3 12.0%	2 11.8%	3 12.5%
Can get pregnant as soon as it is removed %	5 12.2%	2 11.8%		3 27.3%		2 12.5%	3 12.0%	2 11.8%	3 12.5%
Can have sex immediately after insertion %	5 12.2%	1 5.9%		3 27.3%	1 14.3%	1 6.3%	4 16.0%		5 20.8%
How it really works/its fitted %	4 9.8%	2 11.8%		2 18.2%		2 12.5%	2 8.0%	1 5.9%	3 12.5%
Time it takes to be inserted %	3 7.3%	3 17.6%				1 6.3%	2 8.0%		3 12.5%
It's better for women with children %	3 7.3%	1 5.9%		2 18.2%		2 12.5%	1 4.0%	2 11.8%	1 4.2%

(continued)

MAIN THINGS LEARNT FROM THE BROCHURE

- TABLE 22b

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
Something is wrong if string gets shorter %	1 2.4%			1 9.1%		1 6.3%		1 5.9%	
You should check for string %	1 2.4%	1 5.9%				1 4.0%		1 5.9%	
What is IUD/who should insert it %	1 2.4%			1 9.1%		1 4.0%		1 4.2%	
Facts on STDs %	1 2.4%			1 9.1%		1 4.0%		1 4.2%	
How IUD is placed in vagina %	1 2.4%		1 16.7%			1 4.0%		1 4.2%	
IUD is an effective method %	1 2.4%	1 5.9%				1 4.0%		1 4.2%	

* Columns exceed 100% due to multiple responses

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 100.0%	20 100.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	27 100.0%	22 100.0%	28 100.0%
Yes %	48 96.0%	18 90.0%	7 100.0%	11 100.0%	12 100.0%	23 100.0%	25 92.6%	22 100.0%	26 92.9%
No %	2 4.0%	2 10.0%					2 7.4%		2 7.1%

DESCRIPTION OF PICTURE?

- TABLE 24

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL %	50 *	20 *	7 *	11 *	12 *	23 *	27 *	22 *	28 *
Where the copper T 380A IUD is inserted %	28 56.0%	9 45.0%	3 42.9%	7 63.6%	9 75.0%	19 82.6%	9 33.3%	14 63.6%	14 50.0%
Woman's womb %	14 28.0%	6 30.0%	2 28.6%	4 36.4%	2 16.7%	3 13.0%	11 40.7%	9 40.9%	5 17.9%
The vagina %	3 6.0%	2 10.0%		1 9.1%			3 11.1%		3 10.7%
The Fallopian tube %	2 4.0%		1 14.3%		1 8.3%		2 7.4%		2 7.1%
Uterus %	2 4.0%	2 10.0%				1 4.3%	1 3.7%		2 7.1%
How IUD is inserted/ fitted %	2 4.0%	1 5.0%	1 14.3%			1 4.3%	1 3.7%	2 9.1%	
D n't know %	2 4.0%	1 5.0%	1 14.3%				2 7.4%	1 4.5%	1 3.6%
Corvix %	1 2.0%				1 8.3%	1 4.3%			1 3.6%
How to use the Copper T %	1 2.0%	1 5.0%				1 4.3%			1 3.6%
Other %	1 2.0%		1 14.3%				1 3.7%		1 3.6%

* Columns exceed 100% due to multiple responses

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower middle	Lower	Urban	Rural
TOTAL	50	20	7	11	12	23	27	22	28
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
None	45	17	7	10	11	22	23	20	25
%	90.0%	85.0%	100.0%	90.9%	91.7%	95.7%	85.2%	90.9%	89.3%
Need to know about cleaning & care of it	1	1					1		1
%	2.0%	5.0%					3.7%		3.6%
Shorter brochure	1			1			1		1
%	2.0%			9.1%			3.7%		3.6%
Don't know	1	1					1		1
%	2.0%	5.0%					3.7%		3.6%
No answer	2	1			1	1	1	2	
%	4.0%	5.0%			8.3%	4.3%	3.7%	9.1%	



**IUD
RADIO**

5.7 IUD Radio

Three IUD radio messages were tested namely: "Convenience", "Reliability" and "General". The messages were tested among 60 respondents ages 25-45 years; from rural and urban areas. 40 persons were targeted to hear each ad but the final count of valid completed questionnaires reflected that "Convenience" was listened to by 38 persons, "General" by 39 persons and "Reliability" by 43 persons.

Responses are presented specific to each message followed by areas of comparison elicited.

i. Message: "Convenience"

Q. What is the topic that the ad is talking about? (unprompted) Table 1

More than a third correctly recalled the main topic of the ad to be specifically the Copper T 380A IUD/ Copper T (36.8%) and the more general IUD (34%).

Q. What were the main ideas the ad was trying to get across? (unprompted) Table 2

Main points of the ad were: "women who want to delay having children should use the IUD" (42.1%), "IUD is a reliable/convenient/long-lasting contraceptive" (26%), it is "99% sure/prevent pregnancy" (15.8%) and "there are benefits to using the IUD" (10.5%).

Q. According to the ad, what are the benefits of the IUD as a method of contraception? (unprompted) Table 3

The main benefits spontaneously recalled were that the " IUD prevents pregnancy for up to 10 years" (34.2%), it "prevents unwanted pregnancy/pregnancy" (15.8%), "the IUD is reliable/very safe" (10.5%), while no need to keep buying and taking contraceptives and that the method is "over 99% effective" were each recalled by 7.9% of the sample.

Q. According to the ad, who should you ask for information about the IUD contraceptive? (unprompted) Table 4

The vast majority of respondents (97.4%) correctly recalled the doctor/nurse as a source of information on the method.

Q. According to the ad who should insert the IUD? (unprompted) Table 5

The majority (89.5%) of respondents correctly recalled the doctor/nurse as the person who should insert the method.

Q. According to the ad, for how many years does the IUD contraceptive provide protection from pregnancy? Table 6

The majority (92%) correctly recalled the period of protection as 10 years while 5% did not know.

Q. Is it possible to get pregnant if you stop using the Copper T 380A IUD? Table 7

Ninety-two percent (92.1%) correctly recalled that one could get pregnant if one ceased use of the method.

Q. Who do you think the ad is speaking to? (unprompted) Table 8

Respondents perceived that the ad was speaking to "women who are not ready for another child" (44.7%) and "women with children" (31.6%), while a few thought the ad targeted "women with busy schedules" (7.9%).

Q. What suggestions can you give for improving the ad? Table 9

Only six (6) respondents reported having suggestions for improvement, four (4) of whom suggested giving more information on side effects and two (2) of whom had no answer.

Q. After hearing this ad, how interested would you be in seeking further information about the IUD? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 11

More (55.3%) than a half of the sample reported being somewhat interested to very interested in seeking further information (very interested- 39.5% & somewhat interested- 15.8%). Less than a quarter were uncertain (not sure- 23.7%), and more than a fifth (21.1%) were not interested (not very interested- 15.8% & not at all interested- 5.3%).

Q. Why aren't you interested in seeking further information on the IUD? Table 12

Respondents cited already using another form of contraceptive (62.5%) and allergic to any contraception (25%) as main reasons for lack of interest.

WHAT TOPIC IS THE AD TALKING ABOUT?

"CONVENIENCE"
- TABLE 1

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	38	16	8	9	5	13	25	15	23
%	*	*	*	*	*	*	*	*	*
Copper T380A IUD/ Copper T	16	4	3	5	2	4	10	6	8
%	36.8%	25.1%	37.5%	55.6%	40.0%	30.8%	40.0%	40.0%	34.7%
IUD	13	4	3	4	2	5	8	6	7
%	34.2%	25.0%	37.5%	44.4%	40.0%	38.5%	32.0%	40.0%	30.4%
Contraceptives	5	3	1		1	2	3	2	3
%	13.2%	18.8%	12.5%		20.0%	15.4%	12.0%	13.3%	13.0%
Pregnancy	2	1	1			1	1		2
%	5.3%	6.3%	12.5%			7.7%	4.0%		8.7%
Personal choice	1	1					1		1
%	2.6%	6.3%					4.0%		4.3%
IUD last for 10 yrs	1	1					1		1
%	2.6%	6.3%					4.0%		4.3%
Other	2	2				1	1		2
%	5.3%	12.5%				7.7%	4.0%		8.7%

* Columns exceed 100% due to multiple responses

WHAT WERE THE MAIN IDEAS THE AD WAS TRYING TO GET ACROSS?

"CONVENIENCE"

- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	38 *	16 *	8 *	9 *	5 *	13 *	25 *	15 *	23 *
Women who want to delay having children should use the IUD %	16 42.1%	7 43.8%	4 50.0%	3 33.3%	2 40.0%	2 15.4%	14 56.0%	4 26.7%	12 52.2%
IUD is a reliable/convenient longlasting contraceptive %	10 26.3%	3 18.8%	1 12.5%	3 33.3%	3 60.0%	6 46.2%	4 16.0%	5 33.3%	5 21.7%
Is 99% sure/prevent pregnancy %	6 15.8%	2 12.5%	3 37.5%	1 11.1%		3 23.1%	3 12.0%	4 26.7%	2 8.7%
There are benefits to using the IUD %	4 10.5%	3 18.8%		1 11.1%		2 15.4%	2 8.0%	1 6.7%	3 13.0%
Family planning/delaying pregnancy until you're ready %	2 5.3%	2 12.5%					2 8.0%		2 8.7%
IUD is a safe method for new mothers %	1 2.6%		1 12.5%				1 4.0%		1 4.3%
Can be removed when you want to get pregnant %	1 2.6%				1 20.0%		1 4.0%		1 4.3%
Safe %	1 2.6%			1 11.1%			1 4.0%	1 6.7%	
Doesn't/won't interrupt love making %	1 2.6%			1 11.1%			1 4.0%	1 6.7%	
Other %	1 2.6%				1 20.0%		1 4.0%	1 6.7%	
Don't know %	1 2.6%	1 6.3%				1 7.7%			1 4.3%

* Columns exceed 100% due to multiple responses

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

"CONVENIENCE"
- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	38 *	16 *	8 *	9 *	5 *	13 *	25 *	15 *	23 *
IUD prevents pregnancy for up to 10 yrs %	13 34.2%	5 31.3%	3 37.5%	3 33.3%	2 40.0%	5 38.5%	8 32.0%	5 33.3%	8 34.8%
Prevents unwanted pregnancy/ pregnancy %	6 15.8%	3 18.8%	3 37.5%			4 30.8%	2 8.0%	1 6.7%	5 21.7%
The IUD is reliable/ very safe %	4 10.5%	3 18.8%	1 12.5%				4 16.0%		4 17.4%
With IUD, no need to keep buying/taking contracep. %	3 7.9%	1 6.3%			2 40.0%	1 7.7%	2 8.0%	1 6.7%	2 8.7%
The IUD is over 99% effective %	3 7.9%	2 12.5%			1 20.0%	1 7.7%	2 8.0%		3 13.0%
The IUD is convenient %	2 5.3%	1 6.3%			1 20.0%		2 8.0%		2 8.7%
IUD reduces worry %	2 5.3%			2 22.2%		1 7.7%	1 4.0%	2 13.3%	
With the IUD there is very little to remember %	2 5.3%	1 6.3%			1 20.0%	1 7.7%	1 4.0%		2 8.7%

(continued)

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

"CONVENIENCE"
- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
IUD lasts long but not permanent %	1 2.6%		1 12.5%				1 4.0%		1 4.3%
IUD can be removed when you want to get pregnant %	1 2.6%	1 6.3%				1 7.7%		1 6.7%	
Doesn't affect sexual activities %	1 2.6%			1 11.1%		1 7.7%		1 6.7%	
Can space children %	1 2.6%			1 11.1%		1 7.7%		1 6.7%	
Can be removed when want to %	1 2.6%			1 11.1%			1 4.0%		1 4.3%
Don't know %	4 10.5%	2 12.5%	1 12.5%	1 11.1%			4 16.0%	3 20.0%	1 4.3%

* Columns exceed 100% due to multiple responses

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE IUD?

"CONVENIENCE"
- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	38 100.0%	16 100.0%	8 100.0%	9 100.0%	5 100.0%	13 100.0%	25 100.0%	15 100.0%	23 100.0%
Doctor/ Nurse %	37 97.4%	15 93.8%	8 100.0%	9 100.0%	5 100.0%	13 100.0%	24 96.0%	15 100.0%	22 95.7%
Personal Choice Provider %	1 2.6%	1 6.3%					1 4.0%		1 4.3%

WHO SHOULD INSERT THE IUD?

"CONVENIENCE"
- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	38 100.0%	16 100.0%	8 100.0%	9 100.0%	5 100.0%	13 100.0%	25 100.0%	15 100.0%	23 100.0%
Doctor/ Nurse %	34 89.5%	12 75.0%	8 100.0%	9 100.0%	5 100.0%	13 100.0%	21 84.0%	13 86.7%	21 91.3%
trained health care provider %	2 5.3%	2 12.5%					2 8.0%	1 6.7%	1 4.3%
Other %	2 5.3%	2 12.5%					2 8.0%	1 6.7%	1 4.3%

NUMBER OF YEARS IUD PROVIDES PROTECTION

"CONVENIENCE"
- TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	38 100.0%	16 100.0%	8 100.0%	9 100.0%	5 100.0%	13 100.0%	25 100.0%	15 100.0%	23 100.0%
10 years %	35 92.1%	13 81.3%	8 100.0%	9 100.0%	5 100.0%	12 92.3%	23 92.0%	15 100.0%	20 87.0%
Other %	1 2.6%	1 6.3%					1 4.0%		1 4.3%
Don't know %	2 5.3%	2 12.5%				1 7.7%	1 4.0%		2 8.7%

CAN YOU BECOME PREGNANT IF YOU STOP USING THE IUD?

"CONVENIENCE"
- TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	38 100.0%	16 100.0%	8 100.0%	9 100.0%	5 100.0%	13 100.0%	25 100.0%	15 100.0%	23 100.0%
Yes %	35 92.1%	15 93.8%	8 100.0%	8 88.9%	4 80.0%	11 84.6%	24 96.0%	12 80.0%	23 100.0%
No %	1 2.6%	1 6.3%					1 4.0%	1 6.7%	
Don't know %	2 5.3%			1 11.1%	1 20.0%	2 15.4%		2 13.3%	

WHO DO YOU THINK THE AD IS SPEAKING TO?

"CONVENIENCE"
- TABLE 8

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	38	16	8	9	5	13	25	15	23
%	*	*	*	*	*	*	*	*	*
Women who are not ready for another child	17	6	4	6	1	7	10	8	9
%	44.7%	37.5%	50.0%	66.7%	20.0%	53.8%	40.0%	53.3%	39.1%
Women with children	12	7	1	3	1	3	9	5	7
%	31.6%	43.8%	12.5%	33.3%	20.0%	23.1%	36.0%	33.3%	30.4%
Women with busy schedules	3	2	1			2	1		3
%	7.9%	12.5%	12.5%			15.4%	4.0%		13.0%
Women of child bearing age	1				1		1		1
%	2.6%				20.0%		4.0%		4.3%
Mothers	1		1				1	1	
%	2.6%		12.5%				4.0%	6.7%	
Young people	1				1		1	1	
%	2.6%				20.0%		4.0%	6.7%	
Other	5	2	1	1	1	1	4	1	4
%	13.2%	12.5%	12.5%	11.1%	20.0%	7.7%	16.0%	6.7%	17.4%

*Columns exceed 100% due to multiple responses

SUGGESTIONS FOR IMPROVING THE AD

"CONVENIENCE"
- TABLE 9

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	38	16	8	9	5	13	25	15	23
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Give information on side effects	4	1		1	2	2	2	3	1
%	10.5%	6.3%		11.1%	40.0%	15.4%	8.0%	20.0%	4.3%
None	32	14	8	7	3	10	22	10	22
%	84.2%	87.5%	100.0%	77.8%	60.0%	76.9%	88.0%	66.7%	95.7%
No answer	2	1		1		1	1	2	
%	5.3%	6.3%		11.1%		7.7%	4.0%	13.3%	

LEVEL OF INTEREST IN GETTING INFORMATION ON IUD

"CONVENIENCE"
- TABLE 11

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	38	16	8	9	5	13	25	15	23
%	*	*	*	*	*	*	*	*	*
Very interested	15	8	4	2	1	6	9	4	11
%	39.5%	50.0%	50.0%	22.2%	20.0%	46.2%	36.0%	26.7%	47.8%
Somewhat interested	6	2	2	2		2	4	3	3
%	15.8%	12.5%	25.0%	22.2%		15.4%	16.0%	20.0%	13.0%
Not sure	9	3	1	1	4	3	6	5	4
%	23.7%	18.8%	12.5%	11.1%	80.0%	23.1%	24.0%	33.3%	17.4%
Not very interested	6	2	1	3		2	4	3	3
%	15.8%	12.5%	12.5%	33.3%		15.4%	16.0%	20.0%	13.0%
Not at all interested	2	1		1			2		2
%	5.3%	6.3%		11.1%			8.0%		8.7%

*Columns exceed 100% due to multiple responses

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REASON FOR LACK OF INTEREST

"CONVENIENCE"
- TABLE 12

	TOTAL	Age of respondent			S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	8 100.0%	3 100.0%	1 100.0%	4 100.0%	2 100.0%	6 100.0%	3 100.0%	5 100.0%
Using another form of contracep. %	5 62.5%	3 100.0%		2 50.0%		5 83.3%	1 33.3%	4 80.0%
Allergic to any contracep. %	2 25.0%		1 100.0%	1 25.0%	2 100.0%		1 33.3%	1 20.0%
Used it before caused heavy bleeding %	1 12.5%			1 25.0%		1 16.7%	1 33.3%	

ii. Message: "Reliability"

Q. What is the topic that the ad is talking about? (unprompted) Table 1

The majority (72.1%) of the sample were able to correctly recall the main topic of the ad as being either general IUD or the specific Copper T IUD (IUD- 48.8% & Copper T IUD- 23.3%).

Q. What were the main ideas the ad was trying to get across? (unprompted) Table 2

Respondents saw the main points of the ad as being: "IUD is a reliable/convenient/long-lasting contraceptive" (37.2%), "Women who want to delay having children should use the IUD" (30.2%), "Is 99% sure/prevent pregnancy" (14%) and "IUD is a safe method for new mothers" (7%).

Q. According to the ad, what are the benefits of the IUD as a method of contraception? (unprompted) Table 3

Respondents spontaneously recalled the main benefits of the method as being "IUD prevents pregnancy for up to 10 years" (34.9%), "IUD lasts long but is not permanent" (16.3%), it "prevents unwanted pregnancy/pregnancy" (14.0%). Both "the IUD is reliable/very safe" and "IUD can be removed when you want to get pregnant" were each recalled by 11.6% as being other main benefits of the method.

Q. According to the ad, who should you ask for information about the IUD contraceptive? (unprompted) Table 4

The majority of respondents (90.7%) correctly recalled the doctor/nurse as a source of information on the method.

Q. According to the ad who should insert the IUD? (unprompted) Table 5

The vast majority (95.3%) of respondents correctly recalled the doctor/nurse as the person who should insert the method.

Q. According to the ad, for how many years does the IUD contraceptive provide protection from pregnancy? Table 6

Most respondents (93%) correctly recalled the period of protection as 10 years while 7% did not know.

Q. Is it possible to get pregnant if you stop using the Copper T 380A IUD? Table 7
Ninety-five percent (95.3%) correctly recalled that the IUD is reversible and one could thus get pregnant if one ceased use of the method.

Q. Who do you think the ad is speaking to? (unprompted) Table 8

The majority perceived that the ad was speaking to "women who are not ready for another child" (53.5%). Others perceived the ad as targeting "women with children" (23.3%) and "young people" (7%).

Q. What suggestions can you give for improving the ad? Table 9

Nine (9) respondents reported having suggestions for improvement, most (5) suggested giving more information on side effects and three (3) had no answer.

Q. After hearing this ad, how interested would you be in seeking further information about the IUD? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 11

The majority (55.8%) responded positively to the ad and reported being somewhat interested to very interested in seeking further information (very interested- 39.5% & somewhat interested- 15.8%). Sixteen percent (16.3%) were unsure of their level of interest and more than a quarter (27.9%) were not interested (not very interested- 16.3% & not at all interested- 11.6%).

Why aren't you interested in seeking further information on the IUD? Table 12

Respondents who were not interested in the method tended to be either already using another form of contraception (50%) or allergic to any contraceptive method (16.7%).

WHAT TOPIC IS THE AD TALKING ABOUT?

"RELIABILITY"
- TABLE 1

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 100.0%	22 100.0%	8 100.0%	10 100.0%	3 100.0%	11 100.0%	32 100.0%	17 100.0%	26 100.0%
IUD %	21 48.8%	15 68.2%	3 37.5%	2 20.0%	1 33.3%	7 63.6%	14 43.8%	9 52.9%	12 46.2%
Copper T IUD %	10 23.3%	3 13.6%	2 25.0%	5 50.0%		3 27.3%	7 21.9%	4 23.5%	6 23.1%
Contraceptives %	4 9.3%	2 9.1%		1 10.0%	1 33.3%		4 12.5%	2 11.8%	2 7.7%
Family Planning/preventing unwanted pregnancy/children %	4 9.3%		1 12.5%	2 20.0%	1 33.3%		4 12.5%	1 5.9%	3 11.5%
Pregnancy %	2 4.7%		2 25.0%			1 9.1%	1 3.1%	1 5.9%	1 3.8%
Personal choice %	1 2.3%	1 4.5%					1 3.1%		1 3.8%
Copper T380 IUD/ Copper T 380A IUD %	1 2.3%	1 4.5%					1 3.1%		1 3.8%

WHAT WERE THE MAIN IDEAS THE AD WAS TRYING TO GET ACROSS?

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	43	22	8	10	3	11	32	17	26
%	*	*	*	*	*	*	*	*	*
JD is a reliable/convenient/longlasting contracep.	16	9	1	5	1	2	14	4	12
%	37.2%	40.9%	12.5%	50.0%	33.3%	18.2%	43.8%	23.5%	46.2%
Women who want to delay having children should use the JD	13	6	4	1	2	5	8	6	7
%	30.2%	27.3%	50.0%	10.0%	66.7%	45.5%	25.0%	35.3%	26.9%
99% sure/prevent pregnancy	6	2	2	2		2	4	5	1
%	14.0%	9.1%	25.0%	20.0%		18.2%	12.5%	29.4%	3.8%
JD is a safe method for new mothers	3	3				1	2	2	1
%	7.0%	13.6%				9.1%	6.3%	11.8%	3.8%
Can be removed when you want to get pregnant	2	1		1		1	1	1	1
%	4.7%	4.5%		10.0%		9.1%	3.1%	5.9%	3.8%
JD protects for 1 years	2	1		1			2		2
%	4.7%	4.5%		10.0%			6.3%		7.7%
Safe	2	1		1		1	1	1	1
%	4.7%	4.5%		10.0%		9.1%	3.1%	5.9%	3.8%

(continued)

WHAT WERE THE MAIN IDEAS THE AD WAS TRYING TO GET ACROSS?

"RELIABILITY"
- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
Doesn't/won't interrupt decisionmaking %	1 2.3%			1 10.0%			1 3.1%	1 5.9%	
Family planning/delaying pregnancy until you're ready %	2 4.7%	1 4.5%	1 12.5%				2 6.3%	1 5.9%	1 3.8%
Other %	3 7.0%	2 9.1%		1 33.3%			3 9.4%	1 5.9%	2 7.7%

* Columns exceed 100% due to multiple responses

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

"RELIABILITY"

- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 *	22 *	8 *	10 *	3 *	11 *	32 *	17 *	26 *
IUD prevents pregnancy or up to 10 years %	15 34.9%	9 40.9%		5 50.0%	1 33.3%	5 45.5%	10 31.3%	7 41.2%	8 30.8%
IUD lasts long but not permanent %	7 16.3%	4 18.2%	1 12.5%	1 10.0%	1 33.3%	2 18.2%	5 15.6%	5 29.4%	2 7.7%
events unwanted pregnancy/ pregnancy %	6 14.0%	4 18.2%	1 12.5%		1 33.3%	1 9.1%	5 15.6%	3 17.6%	3 11.5%
IUD can be removed when you want to get pregnant %	5 11.6%	4 18.2%		1 10.0%		1 9.1%	4 12.5%		5 19.2%
the IUD is reliable/ very safe %	5 11.6%	2 9.1%	1 12.5%	2 20.0%		3 27.3%	2 6.3%	3 17.6%	2 7.7%
the IUD is over 99% effective %	4 9.3%		1 12.5%	2 20.0%	1 33.3%	1 9.1%	3 9.4%	2 11.8%	2 7.7%
the IUD is convenient %	3 7.0%	1 4.5%	1 12.5%	1 10.0%		1 9.1%	2 6.3%	1 5.9%	2 7.7%
IUD reduces worry %	2 4.7%	1 4.5%		1 10.0%			2 6.3%	1 5.9%	1 3.8%

(continued)

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

"RELIABILITY"

- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
With IUD, no need to keep paying/taking contracep.	1 2.3%	1 4.5%					1 3.1%		1 3.8%
Do not worry about taking pill	1 2.3%	1 4.5%				1 9.1%			1 3.8%
Can be removed when want to	1 2.3%		1 12.5%				1 3.1%		1 3.8%
Don't know	5 11.6%	1 4.5%	3 37.5%	1 10.0%		1 9.1%	4 12.5%	1 5.9%	4 15.4%

Columns exceed 100% due to multiple responses

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE IUD?

"RELIABILITY"
- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 100.0%	22 100.0%	8 100.0%	10 100.0%	3 100.0%	11 100.0%	32 100.0%	17 100.0%	26 100.0%
Doctor/ Nurse %	39 90.7%	19 86.4%	7 87.5%	10 100.0%	3 100.0%	10 90.9%	29 90.6%	15 88.2%	24 92.3%
Personal Choice provider %	3 7.0%	2 9.1%	1 12.5%			1 9.1%	2 6.3%	2 11.8%	1 3.8%
Health centre/ clinic %	1 2.3%	1 4.5%					1 3.1%		1 3.8%

WHO SHOULD INSERT THE IUD?

"RELIABILITY"
- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 100.0%	22 100.0%	8 100.0%	10 100.0%	3 100.0%	11 100.0%	32 100.0%	17 100.0%	26 100.0%
Doctor/ Nurse %	41 95.3%	21 95.5%	8 100.0%	10 100.0%	2 66.7%	11 100.0%	30 93.8%	17 100.0%	24 92.3%
A trained health care provider %	2 4.7%	1 4.5%			1 33.3%		2 6.3%		2 7.7%

NUMBER OF YEARS IUD PROVIDES PROTECTION

"RELIABILITY"
- TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 100.0%	22 100.0%	8 100.0%	10 100.0%	3 100.0%	11 100.0%	32 100.0%	17 100.0%	26 100.0%
10 years %	40 93.0%	20 90.9%	7 87.5%	10 100.0%	3 100.0%	10 90.9%	30 93.8%	15 88.2%	25 96.2%
Don't know %	3 7.0%	2 9.1%	1 12.5%			1 9.1%	2 6.3%	2 11.8%	1 3.8%

CAN YOU BECOME PREGNANT IF YOU STOP USING THE IUD?

"RELIABILITY"
- TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 100.0%	22 100.0%	8 100.0%	10 100.0%	3 100.0%	11 100.0%	32 100.0%	17 100.0%	26 100.0%
Yes %	41 95.3%	21 95.5%	8 100.0%	9 90.0%	3 100.0%	10 90.9%	31 96.9%	17 100.0%	24 92.3%
No %	1 2.3%			1 10.0%			1 3.1%		1 3.8%
Don't know %	1 2.3%	1 4.5%				1 9.1%			1 3.8%

WHO DO YOU THINK THE AD IS SPEAKING TO?

"RELIABILITY"
- TABLE 8

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	43 100.0%	22 100.0%	8 100.0%	10 100.0%	3 100.0%	11 100.0%	32 100.0%	17 100.0%	26 100.0%
Women who are not ready for another child %	23 53.5%	14 63.6%	2 25.0%	6 60.0%	1 33.3%	10 90.9%	13 40.6%	12 70.6%	11 42.3%
Women with children %	10 23.3%	5 22.7%	3 37.5%	2 20.0%		1 9.1%	9 28.1%	2 11.8%	8 30.8%
Young people %	3 7.0%	1 4.5%	1 12.5%		1 33.3%		3 9.4%	2 11.8%	1 3.8%
Women of child bearing age %	2 4.7%			1 10.0%	1 33.3%		2 6.3%	1 5.9%	1 3.8%
Women with busy schedules %	1 2.3%	1 4.5%					1 3.1%		1 3.8%
Sexually active women %	1 2.3%			1 10.0%			1 3.1%	1 5.9%	
Women who don't want to have anymore children %	1 2.3%	1 4.5%					1 3.1%		1 3.8%
Other %	1 2.3%		1 12.5%				1 3.1%		1 3.8%
Don't know %	1 2.3%		1 12.5%				1 3.1%		1 3.8%
Refuse %	1 2.3%			1 10.0%			1 3.1%		1 3.8%

SUGGESTIONS FOR IMPROVING THE AD

"RELIABILITY"
- TABLE 9

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	43	22	8	10	3	11	32	17	26
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Give info. on the side effects	5	2	1	1	1	3	2	3	2
%	11.6%	9.1%	12.5%	10.0%	33.3%	27.3%	6.3%	17.6%	7.7%
None	34	17	7	8	2	7	27	12	22
%	79.1%	77.3%	87.5%	80.0%	66.7%	63.6%	84.4%	70.6%	84.6%
No answer	3	2		1		1	2	2	1
%	7.0%	9.1%		10.0%		9.1%	6.3%	11.8%	3.8%
Other	1	1					1		1
%	2.3%	4.5%					3.1%		3.8%

LEVEL OF INTEREST IN GETTING INFORMATION ON IUD

"RELIABILITY"
- TABLE 11

	TOTAL	Age of respondent				S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	43	22	8	10	3	11	32	17	26
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Very interested	20	12	5	3		6	14	6	14
%	46.5%	54.5%	62.5%	30.0%		54.5%	43.8%	35.3%	53.8%
Somewhat interested	4	2	1	1		1	3	1	3
%	9.3%	9.1%	12.5%	10.0%		9.1%	9.4%	5.9%	11.5%
Not sure	7	2		2	3		7	3	4
%	16.3%	9.1%		20.0%	100.0%		21.9%	17.6%	15.4%
Not very interested	7	3	2	2		2	5	4	3
%	16.3%	13.6%	25.0%	20.0%		18.2%	15.6%	23.5%	11.5%
Not at all interested	5	3		2		2	3	3	2
%	11.6%	13.6%		20.0%		18.2%	9.4%	17.6%	7.7%

REASON FOR LACK OF INTEREST

"RELIABILITY"
- TABLE 12

	TOTAL	Age of respondent			S/E Group		Location of interview	
		25-29 yrs	30-34 yrs	35-39 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	12	6	2	4	4	8	7	5
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Using another form of contracep.	6	3	1	2		6	1	5
%	50.0%	50.0%	50.0%	50.0%		75.0%	14.3%	100.0%
Allergic to any contracep.	2		1	1	2		2	
%	16.7%		50.0%	25.0%	50.0%		28.6%	
Believes it not a reliable method	1	1				1	1	
%	8.3%	16.7%				12.5%	14.3%	
Don't trust contraceptive/ do not use contracep.	1	1			1		1	
%	8.3%	16.7%			25.0%		14.3%	
Used it before caused heavy bleeding	1			1		1	1	
%	8.3%			25.0%		12.5%	14.3%	
No answer	1	1			1		1	
%	8.3%	16.7%			25.0%		14.3%	

iii. Message: "General"

Q. What is the topic that the ad is talking about? (unprompted) Table 1

Respondents tended to recall the main topic of the ad as being generally contraceptives (35.9%) or specifically the IUD method (43.6%).

Q. What were the main ideas the ad was trying to get across? (unprompted) Table 2

Respondents generally perceived the main points of the ad as to be: "Women who want to delay having children should use the IUD" (35.9%) and "IUD is a reliable/convenient/long-lasting contraceptive" (23.1%). "There are benefits to using the IUD" and "Is 99% sure/prevent pregnancy" were each recognized by 10.3% of the sample as being main ideas of the ad.

Q. According to the ad, what are the benefits of the IUD as a method of contraception? (unprompted) Table 3

Many respondents spontaneously recalled the main benefit of the method as being "IUD prevents pregnancy for up to 10 years" (48.7%). Other main benefits cited were "IUD can be removed when you want to get pregnant" (15.4%), "the IUD is reliable/very safe" (12.8%) and "Prevents unwanted pregnancy/pregnancy" (12.8%).

Q. According to the ad, who should you ask for information about the IUD contraceptive? (unprompted) Table 4

An overwhelming majority of respondents (94.9%) correctly recalled the doctor/nurse as a source of information on the method.

Q. According to the ad who should insert the IUD? (unprompted) Table 5

The majority (87.2%) of respondents correctly recalled the doctor/nurse as the person who should insert the method while 7.7% gave "a trained health care provider" as responsible for insertion.

Q. According to the ad, for how many years does the IUD contraceptive provide protection from pregnancy? Table 6

All respondents (100%) correctly recalled the period of protection as 10 years.

Q. Is it possible to get pregnant if you stop using the Copper T 380A IUD? Table 7

Ninety-two percent (92.3%) correctly recalled that one could get pregnant upon removal of the IUD.

Q. Who do you think the ad is speaking to? (unprompted) Table 8

Many perceived that the ad was speaking to "women who are not ready for another child" (46.2%) and more than a quarter saw the ad as addressing "women with children" (30.8%).

Q. What suggestions can you give for improving the ad? Table 9

Seven (7) respondents reported having suggestions for improvement, most (4) suggested giving more information on side effects. One respondent suggested stressing that the method was suitable only for persons not wanting another child.

Q. After hearing this ad, how interested would you be in seeking further information about the IUD? Would you say very interested, somewhat interested, not very interested, or not at all interested? Table 11

More than two-thirds (64.1%) reported being somewhat interested to very interested in seeking further information (very interested- 51.3% & somewhat interested- 12.8%). Twenty-three percent (23.1%) were unsure of their level of interest and twelve percent (12.8%) were not interested (not very interested- 5.1% & not at all interested- 7.7%) in seeking further information on the method.

Why aren't you interested in seeking further information on the IUD? Table 12

Lack of interest was explained through allergies to any contraceptive (60%), already using a form of contraceptive (20%) and not believing that the IUD contraceptive is reliable (20%).

WHAT TOPIC IS THE AD TALKING ABOUT?

"GENERAL"
- TABLE 1

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 100.0%	20 100.0%	12 100.0%	3 100.0%	4 100.0%	10 100.0%	29 100.0%	10 100.0%	29 100.0%
IUD %	17 43.6%	10 50.0%	4 33.3%	2 66.7%	1 25.0%	5 50.0%	12 41.4%	4 40.0%	13 44.8%
Contraceptives %	14 35.9%	7 35.0%	4 33.3%	1 33.3%	2 50.0%	3 30.0%	11 37.9%	3 30.0%	11 37.9%
Family Planning/preventing of unwanted pregnancy/children %	3 7.7%		3 25.0%				3 10.3%	1 10.0%	2 6.9%
Copper T/Copper T380A IUD %	3 7.7%	1 5.0%	1 8.3%		1 25.0%	2 20.0%	1 3.4%	1 10.0%	2 6.9%
Personal Choice %	1 2.6%	1 5.0%					1 3.4%	1 10.0%	
Pregnancy %	1 2.6%	1 5.0%					1 3.4%		1 3.4%

WHAT WERE THE MAIN IDEAS THE AD WAS TRYING TO GET ACROSS?

"GENERAL"
- TABLE 2

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 *	20 *	12 *	3 *	4 *	10 *	29 *	10 *	29 *
Women who want to delay having children should use the IUD %	14 35.9%	8 40.0%	3 25.0%	1 33.3%	2 50.0%	4 40.0%	10 34.5%	6 60.0%	8 27.6%
IUD is a reliable/convenient longlasting contracep. %	9 23.1%	5 25.0%	3 25.0%	1 33.3%		1 10.0%	8 27.6%		9 31.0%
There are benefits to using the IUD %	4 10.3%	3 15.0%		1 33.3%		2 20.0%	2 6.9%		4 13.8%
Is 99% sure/prevent pregnancy %	4 10.3%	2 10.0%	2 16.7%			1 10.0%	3 10.3%	1 10.0%	3 10.3%
Family planning/delaying pregnancy until you're ready %	3 7.7%		3 25.0%			1 10.0%	2 6.9%	1 10.0%	2 6.9%
Can be removed when you want to get pregnant %	2 5.1%	1 5.0%			1 25.0%		2 6.9%		2 6.9%
Safe %	2 5.1%	2 10.0%				1 10.0%	1 3.4%		2 6.9%
IUD is a safe method for new mothers %	1 2.6%	1 5.0%				1 10.0%			1 3.4%
IUD protects for 10 years %	1 2.6%	1 5.0%					1 3.4%		1 3.4%
Other %	2 5.1%	2 10.0%					2 6.9%		2 6.9%
Don't know %	3 7.7%	1 5.0%	1 8.3%		1 25.0%		3 10.3%	2 20.0%	1 3.4%

* Columns exceed 100% due to multiple responses

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

"GENERAL"
- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 *	20 *	12 *	3 *	4 *	10 *	29 *	10 *	29 *
IUD prevents pregnancy for up to 10 years %	19 48.7%	12 60.0%	5 41.7%	1 33.3%	1 25.0%	7 70.0%	12 41.4%	4 40.0%	15 51.7%
IUD can be removed when you want to get pregnant %	6 15.4%	4 20.0%	1 8.3%		1 25.0%		6 20.7%	1 10.0%	5 17.2%
The IUD is reliable/very safe %	5 12.8%	2 10.0%	1 8.3%	1 33.3%	1 25.0%		5 17.2%	1 10.0%	4 13.8%
Prevents unwanted pregnancy/ pregnancy %	5 12.8%	3 15.0%	2 16.7%			1 10.0%	4 13.8%	1 10.0%	4 13.8%
IUD reduces worry %	4 10.3%	2 10.0%	1 8.3%	1 33.3%		1 10.0%	3 10.3%		4 13.8%
IUD lasts long but not permanent %	4 10.3%	2 10.0%		1 33.3%	1 25.0%		4 13.8%	1 10.0%	3 10.3%
The IUD is convenient %	3 7.7%	1 5.0%	1 8.3%		1 25.0%	1 10.0%	2 6.9%	2 20.0%	1 3.4%
With IUD, no need to keep buying/taking contracep. %	2 5.1%		1 8.3%	1 33.3%			2 6.9%		2 6.9%

(continued)

BENEFITS OF THE IUD AS A METHOD OF CONTRACEPTION

"GENERAL"
- TABLE 3

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
The IUD is over 99% effect. %	1 2.6%	1 5.0%				1 10.0%			1 3.4%
With the IUD there is very little to remember %	1 2.6%	1 5.0%					1 3.4%		1 3.4%
Other %	2 5.1%	1 5.0%		1 25.0%	2 20.0%			1 10.0%	1 3.4%
Don't know %	5 12.8%	2 10.0%	3 25.0%		1 10.0%	4 13.8%	1 10.0%	4 13.8%	

* Columns exceed 100% due to multiple responses

WHO SHOULD YOU ASK FOR INFORMATION ABOUT THE IUD?

"GENERAL"
- TABLE 4

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 *	20 *	12 *	3 *	4 *	10 *	29 *	10 *	29 *
Doctor/ Nurse %	37 94.9%	19 95.0%	11 91.7%	3 100.0%	4 100.0%	10 100.0%	27 93.1%	9 90.0%	28 96.6%
Personal Choice Provider %	2 5.1%	1 5.0%	1 8.3%			1 10.0%	1 3.4%	1 10.0%	1 3.4%
Health centre/ clinic %	2 5.1%		2 16.7%				2 6.9%		2 6.9%

* Columns exceed 100% due to multiple responses

WHO SHOULD INSERT THE IUD?

"GENERAL"
- TABLE 5

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 100.0%	20 100.0%	12 100.0%	3 100.0%	4 100.0%	10 100.0%	29 100.0%	10 100.0%	29 100.0%
Doctor/ Nurse %	34 87.2%	17 85.0%	12 100.0%	3 100.0%	2 50.0%	9 90.0%	25 86.2%	9 90.0%	25 86.2%
A trained health care provider %	3 7.7%	1 5.0%			2 50.0%	1 10.0%	2 6.9%		3 10.3%
Other %	2 5.1%	2 10.0%					2 6.9%	1 10.0%	1 3.4%

NUMBER OF YEARS IUD PROVIDES PROTECTION

"GENERAL"
- TABLE 6

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 100.0%	20 100.0%	12 100.0%	3 100.0%	4 100.0%	10 100.0%	29 100.0%	10 100.0%	29 100.0%
10 years %	39 100.0%	20 100.0%	12 100.0%	3 100.0%	4 100.0%	10 100.0%	29 100.0%	10 100.0%	29 100.0%

CAN YOU BECOME PREGNANT IF YOU STOP USING THE IUD?

"GENERAL"
- TABLE 7

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 100.0%	20 100.0%	12 100.0%	3 100.0%	4 100.0%	10 100.0%	29 100.0%	10 100.0%	29 100.0%
Yes %	36 92.3%	17 85.0%	12 100.0%	3 100.0%	4 100.0%	8 80.0%	28 96.6%	8 80.0%	28 96.6%
No %	2 5.1%	2 10.0%				1 10.0%	1 3.4%	1 10.0%	1 3.4%
Don't know %	1 2.6%	1 5.0%				1 10.0%		1 10.0%	

WHO DO YOU THINK THE AD IS SPEAKING TO?

"GENERAL"

- TABLE 8

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 *	20 *	12 *	3 *	4 *	10 *	29 *	10 *	29 *
Women who are not ready for another child %	18 46.2%	11 55.0%	3 25.0%	3 100.0%	1 25.0%	7 70.0%	11 37.9%	7 70.0%	11 37.9%
Women with children %	12 30.8%	4 20.0%	5 41.7%	1 33.3%	2 50.0%	1 10.0%	11 37.9%		12 41.4%
Women with busy schedules %	2 5.1%	1 5.0%	1 8.3%			1 10.0%	1 3.4%		2 6.9%
Young people %	2 5.1%	1 5.0%	1 8.3%				2 6.9%	1 10.0%	1 3.4%
Mothers %	1 2.6%		1 8.3%				1 3.4%	1 10.0%	
Other %	5 12.8%	3 15.0%	1 8.3%		1 25.0%	1 10.0%	4 13.8%		5 17.2%
Don't know %	1 2.6%	1 5.0%					1 3.4%	1 10.0%	

Columns exceed 100% due to multiple responses

SUGGESTIONS FOR IMPROVING THE AD

"GENERAL"
- TABLE 9

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	39	20	12	3	4	10	29	10	29
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
None	32	16	10	3	3	7	25	6	26
%	82.1%	80.0%	83.3%	100.0%	75.0%	70.0%	86.2%	60.0%	89.7%
Give info. on the side effects	4	2	1		1	3	1	2	2
%	10.3%	10.0%	8.3%		25.0%	30.0%	3.4%	20.0%	6.9%
Stress that it's for persons not ready for another child	1	1					1	1	
%	2.6%	5.0%					3.4%	10.0%	
Other	1		1				1	1	
%	2.6%		8.3%				3.4%	10.0%	
No answer	1	1					1		1
%	2.6%	5.0%					3.4%		3.4%

LEVEL OF INTEREST IN GETTING INFORMATION ON IUD

"GENERAL"
- TABLE 11 .

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	39 100.0%	20 100.0%	12 100.0%	3 100.0%	4 100.0%	10 100.0%	29 100.0%	10 100.0%	29 100.0%
Very interested %	20 51.3%	12 60.0%	6 50.0%	1 33.3%	1 25.0%	5 50.0%	15 51.7%	3 30.0%	17 58.6%
Somewhat interested %	5 12.8%	3 15.0%	2 16.7%			1 10.0%	4 13.8%	2 20.0%	3 10.3%
Not sure %	9 23.1%	3 15.0%	1 8.3%	2 66.7%	3 75.0%	1 10.0%	8 27.6%	2 20.0%	7 24.1%
Not very interested %	2 5.1%		2 16.7%			1 10.0%	1 3.4%	1 10.0%	1 3.4%
Not at all interested %	3 7.7%	2 10.0%	1 8.3%			2 20.0%	1 3.4%	2 20.0%	1 3.4%

REASON FOR LACK OF INTEREST

"GENERAL"
- TABLE 12

	TOTAL	Age of respondent		S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	5 100.0%	2 100.0%	3 100.0%	3 100.0%	2 100.0%	3 100.0%	2 100.0%
Allergic to any contracep. %	3 60.0%	1 50.0%	2 66.7%	3 100.0%		2 66.7%	1 50.0%
Believes it is not a reliable method %	1 20.0%	1 50.0%			1 50.0%	1 33.3%	
Using another form of contracep. %	1 20.0%		1 33.3%		1 50.0%		1 50.0%

iv. IUD Radio - Comparison of Ads

Q. Which of the two ads leaves you feeling that the IUD (Table 10):

a. Is very safe to use

"Convenience" tended to leave more respondents feeling that the method was safe to use (30%), followed by "Reliability" which left 28.3% feeling this way. "General" was least likely to effect this feeling (26.7%).

b. Is very effective

A third of respondents (33.3%) cited "Convenience" as the ad which left them feeling the IUD is very effective. "Reliability" gave 26.7% this feeling and "General" convinced a quarter (25%) of the sample.

c. Is very convenient to use

Again "Convenience" emerged on top, convincing 38.3% of respondents as to the convenience of the method. A quarter (25%) cited "Reliability", while 18.3% gave "General" as the ad which convinced them of this attribute.

d. Is very reliable

More than a third (35%) of the sample were left with the feeling that the IUD is very reliable, after listening to "Convenience". "Reliability" convinced 28.3% and "General" 18.3%.

e. Lasts long

Again more than a third (35%) reported being left with the perception of the method as long-lasting after being exposed to "Convenience". "Reliability" left 30% feeling the method was long-lasting versus "General" at 15%.

Thus "convenience" consistently emerged on top, being best able to convince respondents of the safety, effectiveness, convenience, reliability and durability of the IUD.

Q. Overall, which of the ads would make you most want to try the IUD contraceptive?
Table 13

However, "Reliability" emerged as the ad which would be most likely to stimulate trial of the method (38.3%).

Q. Why? Table 14

An ad was most likely to stimulate trial if it gave more information (24.5%), was more convincing (17%) and easy to understand (11.3%).

- "Reliability" was most likely to stimulate trial as it provided the listener with more information (31.8%) and gave more details on the advantages and disadvantages of the method.
- Respondents who were most likely to try the method after hearing "Convenience" described it as "more convincing" (29.4%), "easier to understand" (11.8%) and "gives more detail on advantages and disadvantages" (9.4%).
- "General" was liked as it gave more information (38.5%), was more convincing (23.1%) and was easier to understand (15.4%).

Q. Which of the two ads would you say is (Table 15):

a. Is more interesting.

"Reliability" emerged as the most interesting ad (31.7%), followed by "Convenience" (30.0%) and "General" (26.7%).

b. Is more informative

"Reliability" again emerged on top, and was thought to be the most informative by more than a third (35%). "Convenience" was thought to be more informative by 31.7% and "General" by a quarter (25%).

c. Is more convincing

However, "Convenience" was thought to be the most convincing ad (35%), followed by "Reliability" (31.7%) and "General" (23.3%).

Although "Reliability" was thought to be more interesting, informative and most likely to stimulate trial; "Convenience" was seen as the most convincing.

Q. Overall which would you say is a better radio ad?

Many respondents (40%) thought "Convenience" to be a better radio ad (vs 31.7%

"Reliability" vs 26.7% "General").

- An ad was seen as a better radio ad if it was thought to: give more information on the IUD (40.7%), be clear and convincing (20.3%) and be more interesting and catchy (11.9%). *Table 17*

Q. How important is it to you that once the IUD is inserted, there is no need to keep buying and taking contraceptives? Table 18

The majority of respondents (73.3%) tended to feel that it was "very important" that there is no need to keep buying and taking contraceptives. Fifteen percent (15%) thought it "somewhat important" and 8.3% were not sure.

Q. How important is it to you that once the IUD is inserted, there is no very little to remember? Table 18

The majority of the sample felt that it was "very important" (80%) that there was very little to remember. Sixteen percent (16.7%) felt it was somewhat important and only one person (1.7%) felt it was "not at all important".

Q. How important is it to you that once the IUD is long-lasting but not permanent? Table 18

Almost all respondents (90%) felt the reversible nature of the method to be "very important". Three percent (3.3%) felt it "somewhat important" and 3.3% were "not sure" of its importance.

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	60 100.0%	29 100.0%	14 100.0%	11 100.0%	6 100.0%	17 100.0%	43 100.0%	21 100.0%	39 100.0%
Which ad leaves you feeling that the IUD is safe									
Convenience %	18 30.0%	12 41.4%	3 21.4%	2 18.2%	1 16.7%	5 29.4%	13 30.2%	5 23.8%	13 33.3%
Reliability %	17 28.3%	7 24.1%	3 21.4%	5 45.5%	2 33.3%	3 17.6%	14 32.6%	6 28.6%	11 28.2%
General %	16 26.7%	6 20.7%	6 42.9%	3 27.3%	1 16.7%	6 35.3%	10 23.3%	5 23.8%	11 28.2%
Neither %	1 1.7%			1 9.1%			1 2.3%	1 4.8%	
Don't know %	8 13.3%	4 13.8%	2 14.3%		2 33.3%	3 17.6%	5 11.6%	4 19.0%	4 10.3%
Which AD leaves you feeling IUD is very effective									
Convenience %	20 33.3%	11 37.9%	4 28.6%	3 27.3%	2 33.3%	3 17.6%	17 39.5%	4 19.0%	16 41.0%
Reliability %	16 26.7%	5 17.2%	3 21.4%	5 45.5%	3 50.0%	3 17.6%	13 30.2%	8 38.1%	8 20.5%
General %	15 25.0%	10 34.5%	3 21.4%	1 9.1%	1 16.7%	6 35.3%	9 20.9%	5 23.8%	10 25.6%
Neither %	2 3.3%			2 18.2%		1 5.9%	1 2.3%	2 9.5%	

* 7 persons didn't know or were unable to answer

(continued)

FEELINGS ABOUT THE IUD AD

"Combined" - Table 10

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
Which AD leaves you feeling the the IUD is very convenient									
Convenience %	23 38.3%	12 41.4%	4 28.6%	4 36.4%	3 50.0%	6 35.3%	17 39.5%	6 28.6%	17 43.6%
Reliability %	15 25.0%	7 24.1%	3 21.4%	4 36.4%	1 16.7%	3 17.6%	12 27.9%	5 23.8%	10 25.6%
General %	11 18.3%	4 13.8%	4 28.6%	2 18.2%	1 16.7%	5 29.4%	6 14.0%	4 19.0%	7 17.9%
Neither %	1 1.7%			1 9.1%			1 2.3%	1 4.8%	
Which AD leaves you feeling the IUD is very reliable									
Convenience %	21 35.0%	11 37.9%	4 28.6%	4 36.4%	2 33.3%	6 35.3%	15 34.9%	8 38.1%	13 33.3%
Reliability %	17 28.3%	9 31.0%	4 28.6%	3 27.3%	1 16.7%	2 11.8%	15 34.9%	6 28.6%	11 28.2%
General %	11 18.3%	3 10.3%	4 28.6%	2 18.2%	2 33.3%	4 23.5%	7 16.3%	3 14.3%	8 20.5%
Neither %	1 1.7%			1 9.1%			1 2.3%	1 4.8%	

* 10 persons didn't know or were unable to answer for each

(continued)

FEELINGS ABOUT THE IUD AD

"Combined" - Table 10

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
Which AD leaves you feeling IUD lasts long									
Convenience %	21 35.0%	10 34.5%	4 28.6%	5 45.5%	2 33.3%	4 23.5%	17 39.5%	7 33.3%	14 35.9%
Reliability %	18 30.0%	10 34.5%	3 21.4%	3 27.3%	2 33.3%	3 17.6%	15 34.9%	8 38.1%	10 25.6%
General %	9 15.0%	4 13.8%	3 21.4%	1 9.1%	1 16.7%	5 29.4%	4 9.3%	3 14.3%	6 15.4%
Neither %	2 3.3%	1 3.4%		1 9.1%		1 5.9%	1 2.3%	1 4.8%	1 2.6%

* 10 persons didn't know or were unable to answer

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OVERALL WHICH AD WOULD MAKE YOU TRY THE IUD?

"Combined" - Table 13

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	60 100.0%	29 100.0%	14 100.0%	11 100.0%	6 100.0%	17 100.0%	43 100.0%	21 100.0%	39 100.0%
Reliability %	23 38.3%	13 44.8%	3 21.4%	5 45.5%	2 33.3%	5 29.4%	18 41.9%	8 38.1%	15 38.5%
Convenience %	17 28.3%	9 31.0%	3 21.4%	4 36.4%	1 16.7%	5 29.4%	12 27.9%	5 23.8%	12 30.8%
General %	13 21.7%	5 17.2%	6 42.9%	1 9.1%	1 16.7%	5 29.4%	8 18.6%	4 19.0%	9 23.1%
None %	2 3.3%		1 7.1%		1 16.7%	1 5.9%	1 2.3%	1 4.8%	1 2.6%
Don't know %	3 5.0%		1 7.1%	1 9.1%	1 16.7%	1 5.9%	2 4.7%	1 4.8%	2 5.1%
No answer %	2 3.3%	2 6.9%					2 4.7%	2 9.5%	

REASONS FOR CHOOSING SPECIFIC AD

"Combined" - Table 14

	TOTAL	Overall which AD would make you try the IUD?			
		General	Convenience	Reliability	None
TOTAL %	53 *	13 *	17 *	22 *	1 *
More information given %	13 24.5%	5 38.5%	1 5.9%	7 31.8%	
More convincing %	9 17.0%	3 23.1%	5 29.4%	1 4.5%	
Easier to understand %	6 11.3%	2 15.4%	2 11.8%	2 9.1%	
Gives more detail on advantages & disadvantages %	5 9.4%		2 11.8%	3 13.6%	
A more interesting AD %	3 5.7%		1 5.9%	2 9.1%	
Had bad experience while using product previously %	1 1.9%			1 4.5%	
Both gave same information %	1 1.9%				1 100.0%
Do not like this method %	1 1.9%			1 4.5%	
Can be inserted after having the baby %	1 1.9%			1 4.5%	
Other %	12 22.6%	4 30.8%	3 17.6%	5 22.7%	
No answer %	3 5.7%		3 17.6%		

* Columns exceed 100% due to multiple responses

COMPARISON OF THE TWO ADS

"Combined" - Table 15

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL	60	29	14	11	6	17	43	21	39
%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Which ad is more interesting?									
Reliability	19	10	3	5	1	4	15	8	11
%	31.7%	34.5%	21.4%	45.5%	16.7%	23.5%	34.9%	38.1%	28.2%
Convenience	18	10	2	5	1	4	14	5	13
%	30.0%	34.5%	14.3%	45.5%	16.7%	23.5%	32.6%	23.8%	33.3%
General	16	7	6	1	2	7	9	6	10
%	26.7%	24.1%	42.9%	9.1%	33.3%	41.2%	20.9%	28.6%	25.6%
Neither	2	1			1	1	1		2
%	3.3%	3.4%			16.7%	5.9%	2.3%		5.1%
More informative									
Reliability	21	11	3	5	2	6	15	10	11
%	35.0%	37.9%	21.4%	45.5%	33.3%	35.3%	34.9%	47.6%	28.2%
Convenience	19	9	4	5	1	4	15	5	14
%	31.7%	31.0%	28.6%	45.5%	16.7%	23.5%	34.9%	23.8%	35.9%
General	15	7	6	1	1	6	9	6	9
%	25.0%	24.1%	42.9%	9.1%	16.7%	35.3%	20.9%	28.6%	23.1%
More convincing									
Convenience	21	10	4	5	2	4	17	6	15
%	35.0%	34.5%	28.6%	45.5%	33.3%	23.5%	39.5%	28.6%	38.5%
Reliability	19	9	4	5	1	5	14	8	11
%	31.7%	31.0%	28.6%	45.5%	16.7%	29.4%	32.6%	38.1%	28.2%
General	14	6	5	1	2	6	8	4	10
%	23.3%	20.7%	35.7%	9.1%	33.3%	35.3%	18.6%	19.0%	25.6%

* 5 persons didn't know or were unable to answer for each

WHICH IS A BETTER RADIO AD?

"Combined" - Table 16

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	60 100.0%	29 100.0%	14 100.0%	11 100.0%	6 100.0%	17 100.0%	43 100.0%	21 100.0%	39 100.0%
Convenience %	24 40.0%	14 48.3%	3 21.4%	6 54.5%	1 16.7%	7 41.2%	17 39.5%	9 42.9%	15 38.5%
Reliability %	19 31.7%	8 27.6%	4 28.6%	4 36.4%	3 50.0%	4 23.5%	15 34.9%	6 28.6%	13 33.3%
General %	16 26.7%	7 24.1%	6 42.9%	1 9.1%	2 33.3%	6 35.3%	10 23.3%	6 28.6%	10 25.6%
Don't know %	1 1.7%		1 7.1%				1 2.3%		1 2.6%

	TOTAL	Which is a better radio AD?		
		General	Convenience	Reliability
TOTAL %	59 *	16 *	24 *	19 *
Gives important info. on IUD %	24 40.7%	8 50.0%	8 33.3%	8 42.1%
AD is clear/more convincing %	12 20.3%	4 25.0%	4 16.7%	4 21.1%
More interesting /more catchy %	7 11.9%	2 12.5%	2 8.3%	3 15.8%
Goes to the point/short %	3 5.1%	1 6.3%	2 8.3%	
Safe %	3 5.1%		3 12.5%	
Like the story line %	1 1.7%			1 5.3%
The AD involves the male %	1 1.7%		1 4.2%	
Other %	7 11.9%	4 25.0%	1 4.2%	2 10.5%
Don't know %	1 1.7%		1 4.2%	
No answer %	4 6.8%		3 12.5%	1 5.3%

* Columns exceed 100% due to multiple responses

WHAT IS THE IMPORTANCE OF...

"Combined" - Table 18

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
TOTAL %	60 100.0%	29 100.0%	14 100.0%	11 100.0%	6 100.0%	17 100.0%	43 100.0%	21 100.0%	39 100.0%
Not buying and taking contraceptives									
V/Important %	44 73.3%	19 65.5%	11 78.6%	9 81.8%	5 83.3%	12 70.6%	32 74.4%	10 47.6%	34 87.2%
Somewhat important %	9 15.0%	7 24.1%	1 7.1%	1 9.1%		3 17.6%	6 14.0%	5 23.8%	4 10.3%
Not sure %	5 8.3%	2 6.9%	2 14.3%		1 16.7%	2 11.8%	3 7.0%	4 19.0%	1 2.6%
Not very important %	1 1.7%	1 3.4%					1 2.3%	1 4.8%	
Not at all important %	1 1.7%			1 9.1%			1 2.3%	1 4.8%	
Having very little to remember									
V/important %	48 80.0%	23 79.3%	11 78.6%	10 90.9%	4 66.7%	14 82.4%	34 79.1%	16 76.2%	32 82.1%
Somewhat important %	10 16.7%	5 17.2%	3 21.4%		2 33.3%	3 17.6%	7 16.3%	3 14.3%	7 17.9%
Not at all important %	1 1.7%			1 9.1%			1 2.3%	1 4.8%	

(continued)

WHAT IS THE IMPORTANCE OF...

"Combined" - Table 18

	TOTAL	Age of respondent				S/E Group		Location of interview	
		24-29 yrs	30-34 yrs	35-39 yrs	40-45 yrs	Middle /Lower Middle	Lower	Urban	Rural
Importance of IUD not being permanent									
V/important %	54 90.0%	26 89.7%	14 100.0%	8 72.7%	6 100.0%	15 88.2%	39 90.7%	15 71.4%	39 100.0%
Somewhat important %	2 3.3%			2 18.2%		1 5.9%	1 2.3%	2 9.5%	
Not sure %	2 3.3%	2 6.9%					2 4.7%	2 9.5%	
Not very important %	1 1.7%	1 3.4%				1 5.9%		1 4.8%	
Not at all important %	1 1.7%			1 9.1%			1 2.3%	1 4.8%	

MESSAGES TESTED

THE COPPER T 380A IUD

Because you need a reliable,
convenient, long-lasting contraceptive.



“ Shortly after the baby was born, Mark and I decided to wait for a few years before having any more children. The Copper T IUD insertion was a quick, simple and convenient solution with a long-lasting effect. ”

• **CONVENIENT**
once inserted in the womb,
prevents pregnancy for
up to 10 years

• **REVERSIBLE**
can be removed anytime
by a trained health care
provider

• **EFFECTIVE**
over 99% effective!

• **USUALLY LESS EXPENSIVE**
than other methods because
it can be used longer

• **SAFE FOR NEW MOTHERS**
can be inserted right
after baby's birth.

(***for insertion)



**PERSONAL
CHOICE**

Wherever you see this sign
you can find the high quality,
affordable, private sector
contraceptive products and
services you need.

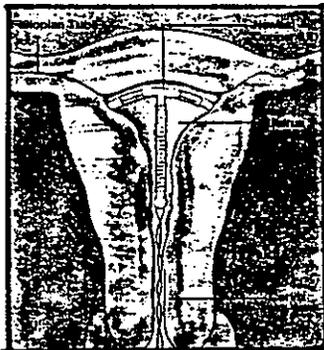
Ask your doctor about the
PERSONAL CHOICE COPPER T 380A IUD
or contact:

The Personal Choice office
Telephone: 927-6951
Fax: 978-3673



2

THE NEW COPPER T 380A IUD may be your family planning choice



WHAT IS IT?

The Copper T 380A IUD is a small T-shaped device made of plastic and copper. It is inserted by a trained healthcare provider into the woman's womb to prevent her from becoming pregnant. It can be used up to 10 years without replacement and is very effective in preventing pregnancy.

The Copper T 380A IUD is one of the most reliable, easy-to-use reversible family planning methods available in Jamaica today.

3

HOW DOES IT WORK?

A woman becomes pregnant when her egg meets a man's sperm. This device prevents the egg and sperm from meeting so the woman does not become pregnant.

HOW IS IT INSERTED?

In a simple 5 minute procedure, the Copper T 380A IUD is inserted into the womb through a narrow



tube which is passed through the vagina. This can be done at any time the woman is sure she is not pregnant.

WHAT ABOUT AFTER INSERTION?



After insertion, all she has to do is simply check for the IUD string each month.

While the device can be left in place for ten years, it may be removed any time you choose. Only a trained health-care provider should remove the Copper T 380A IUD.

4

WHAT ARE THE BENEFITS OF THE COPPER T 380A IUD?

CONVENIENT

There is no need to:

- *remember to take something every day
- *interrupt lovemaking
- *continually buy supplies

REVERSIBLE

Can be removed anytime, if you want to have another baby

LONG-LASTING

May be left in place for up to 10 years

EFFECTIVE

The Copper T 380A IUD is over 99% effective!

INEXPENSIVE

Usually less expensive than other methods because it can be used for a longer time

SAFE FOR NEW MOTHERS

Can be inserted right after baby's birth and will not interfere with breastfeeding

5

THE COPPER T 380A IUD IS ONE OF THE MOST RELIABLE, EASY TO USE REVERSIBLE FAMILY PLANNING METHODS AVAILABLE IN JAMAICA TODAY.

There are several healthcare providers in Jamaica who are specially trained in the IUD insertion procedure. If you would like to get in touch with a Personal Choice Provider who offers IUD services, contact:

the Personal Choice office at
Telephone #927-6951
Fax 978-3673



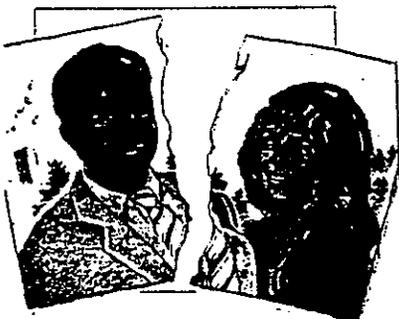
PERSONAL CHOICE

Whenever you see this sign you can find the high quality, affordable, private sector contraceptive products and services you need.

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BEST AVAILABLE COPY

ANY DISADVANTAGES?



THE COPPER T 380A IUD SHOULD NOT BE USED IF YOU HAVE MORE THAN ONE PARTNER, OR IF YOUR PARTNER HAS OTHER PARTNERS.

A woman can develop Pelvic Inflammatory Disease (PID) if she is exposed to a Sexually Transmitted Disease (STD) through intercourse while using the IUD, or if she has an STD at the time the IUD is being inserted.

Pelvic Inflammatory Disease can make a woman sterile. That means she will not be able to have any children. **AVOID SEXUAL INTERCOURSE WITH A PARTNER WHO HAS AN STD AT THE TIME THE IUD IS BEING INSERTED.**

THE COPPER T 380A IUD SHOULD BE CONSIDERED CAREFULLY BY WOMEN WHO HAVE NEVER GIVEN BIRTH

A woman who has never been pregnant but wants to have a child in the future, may want to select a different type of contraceptive, especially one that offers protection against pelvic inflammatory disease, such as the pill and condoms. Women who have given birth usually have fewer side effects than those who have not.



Use the Copper T 380A IUD if you are not pregnant and you do not want to get pregnant. It is safe and effective for up to 10 years.

WHAT ABOUT THE SIDE EFFECTS?

For the first 3-5 days after insertion of the IUD, a woman may have mild cramps, bleeding and spotting. As her body gets used to the device, she may have longer, heavier periods, stronger cramps and some spotting between periods. THESE FEATURES ARE HARMLESS AND WILL STOP USUALLY WITHIN 3 MONTHS.

In rare cases, problems may arise which can become serious if not taken care of immediately. A woman with any of the following signs should return to her health care provider for advice:

- late menstrual period or other signs of pregnancy
- unusual spotting or bleeding between periods or after intercourse
- severe pain in belly
- pain when having sex
- dizziness or fainting
- fever or chills

HOW SOON CAN I HAVE SEX AFTER INSERTION?

The Copper T 380A IUD is effective immediately after insertion. There is no need to delay intercourse.

Similarly, you will be able to get pregnant as soon as the IUD is removed.

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RADIO COPY



**DUNLOP
CORBIN
COMPTON**

DATE: 01/08/97
CLIENT: The Futures Group
PRODUCT: IUD Copper T
MEDIA:
REMARKS: (Convenience)
DESCRIPTION: 1x45 Seconds
REF. NO: Futurad2

MUSIC: (ROMANTIC SAXOPHONE MELODY)

HUSBAND: So Yvette, what's so good about this Copper T IUD that you just put in?

WIFE: Well, it's reliable, it lasts long, and I really love the convenience ...

(FADE, ANNCR UP)

ANNCR: Like Yvette, the Copper T IUD from Personal Choice may be your choice for convenient contraceptive protection - for up to ten years!

WIFE: ...that means that once it's inserted by your doctor you don't have to keep buying and taking contraceptives. So more and more women like me, with a busy schedule, children and an ~~active~~ *healthy* husband like you, are choosing the IUD.

HUSBAND: And with the Copper T we don't have to interrupt those special moments between us right?

WIFE: (LAUGHING) M-M-Mark!?

ANNCR: Ask your doctor about the Copper T 380a IUD. A Personal Choice approved method.

RADIO COPY



DUNLOP
CORBIN
COMPTON

DATE: 01/08/97
CLIENT: The Futures Group
PRODUCT: IUD Copper T
MEDIA:
REMARKS: (Reliability)
DESCRIPTION: 1X45 Seconds
REF. NO: Futurad

SFX: (CLINIC ATMOSPHERE)

WOMAN 1: Oh, look at him little face! Your baby?

MOTHER: Yeah, but the first one and we're not planning to have any more now. As a matter of fact, I just come to put in the Copper T IUD from Personal Choice.

(FADE ANNCR UP)

ANNCR: If you're looking for a reliable contraceptive method, the Copper T 380 IUD may be your family planning choice! Its modern T-shape design makes it very safe and over 99% effective, preventing pregnancy for up to ten years!

WOMAN 1: And you know you can have it removed at anytime if you want to get pregnant. It lasts long but it's not permanent.

MOTHER: Hmm, so you know about it too

(BOTH LAUGH LIGHTLY)

ANNCR: Ask your doctor about the Copper T 380 IUD. A Personal Choice approved method.

RADIO COPY



**DUNLOP
CORBIN
COMPTON**

DATE: 01/08/97
CLIENT: The Futures Group
PRODUCT: IUD Copper T
MEDIA:
REMARKS: (General)
DESCRIPTION: 1x45 Seconds
REF. NO: Futurad3

SFX: (PARTY CHATTER)

WOMAN 1: Hey, Angie, how come I never hear Jean talk about taking any kind a contraceptive?

ANGIE: Well, that's because she uses an IUD.

WOMAN 1: A what?

ANNCR: The Copper T380A IUD from Personal Choice is one of the most convenient contraceptive methods available in Jamaica today. Once inserted by a healthcare provider, you're protected from pregnancy for up to ten years. But you can have it removed whenever you want.

ANGIE: I have in an IUD too y'know. Very little to remember...no worry about pregnancy...and since I know that you're not quite ready for another child yet - it just might be your family planning choice too!

WOMAN 1: What is it they say ... birds of a feather flock together!

ANNCR: Ask your doctor about the Copper T 380a IUD.
A Personal Choice Approved method.

QUESTIONNAIRES

Questionnaire # _____

Pre Test of Communication Material

(3/97)

Material: IUD Print (3)

Target Group: Females (2)

Name of Respondent: _____

Resp. No. _____

Location: _____

Name of Interviewer: _____

Supervisor: _____

Location of interview: Urban 1

Rural 2

Date of interview: _____

Time Started: _____

Time Ended: _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with women about a family planning product and would very much like your participation.

Screening Questionnaire

S.1 Are you between the ages of 25 and 45?

Yes 1

No 2 -----> **THANK AND TERMINATE**

S.2 **IF YES:** How old are you _____?

S.3 Please tell me which of the following applies to you:

Married

1

Common Law/Live with partner

2

Visiting relationship

3

Have a boyfriend

4

Single with no partner at this time

5-----> **TERMINATE**

IF RESPONDENT IS SINGLE THANK HER AND TERMINATE THE INTERVIEW

S.4 How many children do you have living? _____ **IF NONE TERMINATE**

S.5 **Are you employed:**
 Full-time (more than 30 hours per week) 1
 Part time (less than 30 hours per week) 2
 Only at certain times during the year 3
 Not employed 4 ----->GO TO S.7

S.6 What is your occupation? _____

S.7 What is the occupation of the main income earner of your household?

S.8 What is the last school that you attended?

Basic/Primary	1
No Formal schooling	2
Secondary/Technical	3
High School	4
Tertiary	5
Trade Training Centre/HEART	6
None	7
Other (Specify) _____	8

S.9 **IF 1 OR 2 IN S.8, ASK:** Can you read a letter or a newspaper?
 Yes 1 No 2----->TERMINATE

S.10 Have you ever heard of the IUD?
 Yes 1 No 2 ----->GO TO S.14

S.11 **IF YES:** Have you ever used the IUD?
 Yes 1 No 2 ----->GO TO S.13

S.12 **IF YES:** Are you currently using the IUD?
 Yes 1 No 2

3. According to the ad what are the benefits of the IUD as a method of contraception?
DO NOT READ LIST

	Yes	No
Reliable.....	1	2
Convenient.....	1	2
Long-lasting.....	1	2
Safe for new mothers.....	1	2
Effective/Over 99% effective.....	1	2
Reversible.....	1	2
Usually less expensive than other methods.....	1	2
Can be inserted right after baby's birth.....	1	2
Can be removed anytime.....	1	2
Provides protection for up to 10 years.....	1	2
Other(Specify).....	1	2
Don't Know.....	98	
Refuse.....	99	

4. According to the ad for how many years does the IUD contraceptive provide protection?
DO NOT READ LIST

10 years	1
Other(Specify).....	_____
Don't Know	98
Refuse	99

5. According to the ad., who should you ask for information about the IUD? **DO NOT READ LIST**

Doctor.....	1
Personal Choice Office.....	2
Other(Specify).....	3
Don't Know.....	98
Refuse.....	99

6. Who does the ad., say should remove the IUD? **DO NOT READ LIST**

A trained health care provider.....	1
Other(Specify).....	2
Don't Know.....	98
Refuse.....	99

INTERVIEWER POINTS TO DRAWING OF CROSS SECTION OF WOMB AND ASKS Q7-Q9

12a. After seeing this ad, how interested are you in getting further information about the IUD?
Would you say very interested, somewhat interested, not very interested, or not at all interested?

- Very interested.....1
- Somewhat interested.....2
- Not sure.....3
- Not very interested.....4
- Not at all interested.....5

12b. **IF NOT VERY/NOT AT ALL INTERESTED, ASK:** Why aren't you interested in the IUD?

13. What suggestions can you give for improving this ad?

THANK YOU FOR YOUR TIME AND COOPERATION!!!!!!!!!!

Questionnaire # _____

Pre Test of Communication Material

(3/97)

Material: IUD Brochure (2)

Target Group: Females (2)

Name of Respondent: _____

Resp. No. _____

Location: _____

Name of Interviewer: _____

Supervisor: _____

Location of Interview: 1 Urban

2 Rural

Date of interview: _____

Time Started: _____

Time Ended: _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with women about a family planning product and would very much like your participation.

Screening Questionnaire

S.1 First, are you between the ages of 25 and 45?

Yes 1

No 2 -----> TERMINATE

S.2 IF YES: How old are you _____?

S.3 Please tell me which of the following applies to you:

Married 1

Common Law/Live with partner 2

Visiting relationship 3

Have a boyfriend 4

Single with no partner at this time 5----> TERMINATE

RESPONDENT IS SINGLE THANK HER AND TERMINATE THE INTERVIEW

S.4 How many children do you have living? _____ IF NONE, TERMINATE

INSIDE FRONT COVER (To Be Read Again)

4. According to the brochure, who is the IUD best suited for?
DO NOT READ LIST

Women in a mutually faithful relationship	1
Women who are not ready for a permanent contraceptive	2
Women looking for a contraceptive that's easy to use	3
Women who are not ready to have a child for a few years	4
Other (Specify) _____	5
Don't Know	98
Refuse	99

INSIDE FOLD #2 (To be read again)

5a. What is this picture describing? **DO NOT READ LIST**

Where the Copper T 380A IUD is inserted	1
Woman's womb	2
The Vagina	3
The Fallopian Tube	4
Uterus	5
Cervix	6
Other (Specify) _____	7
Don't Know	98
Refuse	99

5b. How does the brochure describe the Copper T 380A IUD? **DO NOT READ LIST**

A small T shaped device	1
A small T shaped device made of plastic and copper	2
One of the most reliable family planning methods	3
An easy to use, reversible family planning method	4
Other (Specify) _____	5
Don't Know	98
Refuse	99

5c. Who does it say should insert the IUD? **DO NOT READ LIST**

A trained health care provider	1
Other (Specify) _____	2
Don't Know	98
Refuse	99

INSIDE FOLD #4 (To be read again)

10. According to the brochure, what are the benefits of the IUD as a method of contraception? **DO NOT READ LIST; MULTIPLE RESPONSES POSSIBLE**

	YES	NO
Convenient.....	1	2
Safe for new mothers.....	1	2
Effective/Over 99% effective.....	1	2
Reversible.....	1	2
Inexpensive.....	1	2
Long-lasting.....	1	2
Can be inserted right after baby's birth.....	1	2
No need to continually buy supplies.....	1	2
Can be removed whenever you want to get pregnant.....	1	2
Will not interfere with breast feeding.....	1	2
Prevents pregnancy up to 10 years.....	1	2
Other (specify).....	1	2
Don't Know.....	98	
Refuse.....	99	

BACKSIDE FOLD #1 (To be read again)

11. Who does the brochure say should not use an IUD? **DO NOT READ LIST**

Women who have more than one partner	1
Women whose partner has other partners	2
Other (Specify) _____	3
Don't Know	98
Refuse	99

12. What does the brochure say that one of the possible harmful effects of Pelvic Inflammatory Disease is? **DO NOT READ LIST; ONE RESPONSE ONLY**

Can make a woman sterile	1
Can make a woman unable to have children	2
Other _____	3
Don't Know	98
Refuse	99

13. According to the brochure, under what circumstances is a woman likely to develop Pelvic inflammatory disease? **DO NOT READ LIST**

If exposed to an STD through intercourse while using IUD	1
If woman has an STD at the time of insertion of the IUD	2
Other (Specify) _____	3
Don't Know	98
Refuse	99

17. In rare cases, for women who have in the IUD, problems may arise for which she should return to her health care provider for advice. Can you tell me what are some of these problems? **DO NOT READ LIST; MULTIPLE RESPONSES POSSIBLE**

Late menstrual period	1
Unusual spotting or bleeding	2
Pain in lower abdomen	3
Unusual vaginal discharge	4
Fever	5
Nausea	6
IUD string missing	7
IUD string shorter or longer	8
Other (Specify) _____	9
Don't Know	98
Refuse	99

18. Which of the following would you say best explains "an unusual vaginal discharge"?

A smelly discharge	1
A heavy discharge	2
A bloody discharge	3
Don't Know	98
Refuse	99

BACKSIDE FOLD #4 (To be read again)

19a. How soon after insertion of the IUD can a woman have sex?

DO NOT READ LIST

Immediately after insertion	1
Other (Specify) _____	2
Don't Know	98
Refuse	99

19b. How soon after the woman has stopped using the IUD can she become pregnant?

DO NOT READ LIST

As soon as the IUD is removed	1
Other (Specify) _____	2
Don't Know	98
Refuse	99

20. How interested would you be in trying the Copper T 380A IUD? Would you say -

- | | |
|-----------------------|---|
| Very Interested | 1 |
| Somewhat interested | 2 |
| Not Sure | 3 |
| Not very interested | 4 |
| Not at all interested | 5 |

21. Now that you have read this brochure, do you feel that you know:

- | | |
|-------------------------------------------------|----------------|
| A lot more about the IUD than you did before | 1 |
| A little more about the IUD than you did before | 2 |
| Not much more about the IUD than you did before | 3—> GO TO Q22 |
| Do not Know/Not sure | 98—> GO TO Q22 |
| Refuse | 99—> GO TO Q22 |

21b. IF 1 OR 2; ASK: What were the main things that you learnt from this brochure?

22. Overall, was the brochure easy to understand?

- | | |
|---------------------|---|
| Yes | 1 |
| No | 2 |
| Don't Know/Not sure | 3 |
| Refuse | 4 |

23. Was there anything that you found offensive in this brochure?

- | | |
|---------------------|---|
| Yes | 1 |
| No | 2 |
| Don't Know/Not sure | 3 |
| Refuse | 4 |

23b. IF YES, ASK: What did you find offensive?

24. What changes would you recommend for this brochure?

THANK YOU FOR YOUR TIME AND COOPERATION!!!

Questionnaire # _____

Pre Test of Communication Material

(3/97)

Material: IUD Radio (1)

Target Group: Females (2)

Material to be tested: General 1 Convenience 2 Reliability 3

Name of Respondent: _____

Location: _____

Name of Interviewer: _____

Supervisor: _____

Location of interview: Urban 1

Rural 2

Date of interview: _____

Time Started: _____

Time Ended: _____

Introduction:

Hello, My name is _____ I work for Hope Enterprises Ltd., which is a Market Research Company, based in Kingston. Today, we are talking with women about a family planning method and would very much like your participation.

Screening Questionnaire

S.1 Are you between the ages of 25 and 45?

Yes 1

No 2---->TERMINATE

S.2 IF YES ASK: How old are you? _____

S.3 Please tell me which of the following applies to you:

Married 1

Common Law/Live with partner 2

Visiting relationship 3

Have a boyfriend 4

Single with no partner at this time 5---->TERMINATE

IF RESPONDENT IS SINGLE THANK HER AND TERMINATE THE INTERVIEW

S.4 How many children do you have living? _____ IF NONE TERMINATE

2. What were the main ideas the ad was trying to get across? Anything else? **DO NOT READ LIST**

	<u>1ST AD</u>		<u>2ND AD</u>	
	<u>YES</u>	<u>NO</u>	<u>YES</u>	<u>NO</u>
Women who want to delay having children should use the IUD.....	1	2	1	
The IUD is a safe method for new mothers.....	1	2	1	
There are benefits to using the IUD.....	1	2	1	
The IUD is a reliable, convenient, longlasting contraceptive.....	1	2	1	
Other (SPECIFY).....	1	2	1	
Don't Know.....	98		98	
Refuse.....	99		99	

Diagnostic Question

3. According to the ad, what are the benefits of the IUD as a method of contraception? **DO NOT READ LIST**

	<u>1ST AD</u>		<u>2ND AD</u>	
	<u>YES</u>	<u>NO</u>	<u>YES</u>	<u>NO</u>
Convenient.....	1	2	1	2
Reliable/ Very Safe.....	1	2	1	2
Over 99% Effective.....	1	2	1	2
Prevents pregnancy for up to 10 years.....	1	2	1	2
Reduces worry.....	1	2	1	2
Lasts long but not permanent.....	1	2	1	2
Very little to remember.....	1	2	1	2
No need to keep buying and taking contraceptives.....	1	2	1	2
Can be removed whenever you want to get pregnant.....	1	2	1	2
Other (SPECIFY).....	1	2	1	2
Don't Know.....	98		98	
Refuse.....	99		99	

4. According to the ad, for how many years does the IUD contraceptive provide protection from pregnancy?

	<u>1ST AD</u>	<u>2ND AD</u>
10 years.....	1	1
Other (specify)	2	2
Don't Know.....	98	98
Refuse.....	99	99

5. Is it possible to get pregnant if you stop using the Copper T 380A IUD?

	<u>1ST AD</u>	<u>2ND AD</u>
Yes.....	1	1
No.....	2	2
Don't Know.....	98	98
Refuse.....	99	99

10a. After hearing this ad, how interested would you be in seeking further information about the IUD? Would you say very interested, somewhat interested, not very interested, or not at all interested?

	<u>1ST AD</u>	<u>2ND AD</u>
Very interested.....	1	1
Somewhat interested.....	2	2
Not sure.....	3	3
Not very interested.....	4	4
Not at all interested.....	5	5

10b. IF NOT VERY OR NOT AT ALL INTERESTED, ASK: Why aren't you interested in seeking further information on the IUD?

<u>1ST AD</u>	<u>2ND AD</u>

AND REMIND TO GO TO THE NEXT PAGE TO ANSWER QUESTIONS 11 THROUGH 13. END TO Q11 WHEN RESPONDENT HAS COMPLETED Q11 FOR 2ND AD.

11. Which of the two ads leaves you feeling that the IUD:

	<u>1ST AD</u>	<u>2ND AD</u>	<u>NEITHER</u>
a. Is very safe to use	1	2	3
b. Is very effective.....	1	2	3
c. Is very convenient to use.....	1	2	3
d. Is very reliable.....	1	2	3
e. Lasts long.....	1	2	3

12a. Overall, which of the ads would make you most want to try the IUD contraceptive?

1. 1ST AD _____ 2. 2ND AD _____ 3. NONE

12b. Why? _____

13. Which of the two ads would you say:

	<u>1ST AD</u>	<u>2ND AD</u>	<u>NEITHER</u>
a. Is more interesting.....	1	2	3
b. Is more informative.....	1	2	3
c. Is more convincing.....	1	2	3

14a. Overall which would you say is a better radio ad?

1. 1st Ad _____ 2. 2nd Ad _____ 3. None

14b. Why? _____

15a. How important is it to you that once the IUD is inserted, there is no need to keep buying and taking contraceptives? **Would you say.....**

Very important.....1
Somewhat important.....2
Not Sure.....3
Not very important.....4
Not at all important.....5

15b. How important is it to you that once the IUD is inserted, there is very little to remember? **Would you say.....**

Very important.....1
Somewhat important.....2
Not Sure.....3
Not very important.....4
Not at all important.....5

15c. How important is it to you that the IUD is long-lasting but not permanent? **Would you say.....**

Very important.....1
Somewhat important.....2
Not Sure.....3
Not very important.....4
Not at all important.....5

THANK YOU FOR YOUR TIME AND COOPERATION!!!!