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TRIP REPORT:
COUNTRY PROJECT MONITORING
MEXICO

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Population Information Program
Population Communication Services
The Johns Hopkins University
621 North Broadway
Baltimore, Maryland 21205
USA

TRIP REPORT:

PROVIDING TECHNICAL ASSISTANCE IN PROJECT EVALUATION

TO THE DIRECTOR OF COMMUNICATIONS OF THE

FEDERACION MEXICANA DE ASOCIACIONES PRIVADAS

DE PLANIFICACION FAMILIAR (FEMAP)

Ciudad Juárez, Chihuahua, México

January 20 - 26, 1985

Submitted by Caridad Inda, Ph.D.

to

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Executive Summary

I spent the week of January 20 to 26, 1985 in Ciudad Juárez, Chihuahua, México, providing technical assistance on evaluation to Lic. César Saldivar, Director of Communications of the Federación Mexicana de Asociaciones Privadas de Planificación Familiar (FEMAP).

The purpose of my trip was to:

- 1) develop plans for a follow-up survey to evaluate the impact of radio spots and print materials
- 2) develop a monitoring system for the second series of radio spots to be broadcast in four different cities
- 3) discuss methodologies which may be used to evaluate the entire FEMAP project.

Given the thorough and detailed work done in the beginning of the IEC project to gather data on client utilization and the documentation already on hand, the evaluation and monitoring plans developed for this phase of the project could easily be based on existing systems and complement the quantitative results with qualitative information.

To evaluate the entire FEMAP project (understanding this to be the JHU/PCS IEC project as it

relates to FEMAP), two approaches are offered. One is to determine how the communications component has supported the work of FEMAP. It would take into account the stage of development of the Federation and highlight the importance of the support of the communications component in the work of key areas of the organization. It would relate the communications component to the goals to be achieved outlined by the FEMP model. The other would focus on the community-based distribution system to assess the impact of the communications component by measuring changes in client utilization patterns of each affiliated programs.

I confidently recommend that JHU/PCS continue supporting FEMAP and its affiliates. FEMAP has been very successful in implementing an organizational model which presupposes the active involvement of members of different social classes. The IEC Project has enriched that model and the support the communications component could offer as the Federation clarifies its goals and objectives could have a decisive effect on the growth of FEMAP and the potential of its demonstration effect.

LIST OF ABBREVIATIONS

CMI/PF	Centros Materno Infantil y de Planificación Familiar
FEMAP	Federación Mexicana de Asociaciones Privadas de Planificación Familiar
IEC	Information, Education, Communication Project
JHU/PCS	Johns Hopkins University/Population Population Communication Services

Introduction

I spent the week of January 20 to 26 in Ciudad Juárez, Chihuahua, México on an assignment to provide technical assistance on evaluation to the Federación Mexicana de Asociaciones Privadas de Planificación Familiar (FEMAP) on the JHU/PCS supported project. Specifically, the purpose of my trip was to:

- 1) develop plans for a follow-up survey to evaluate the impact of radio spots and print materials
- 2) develop a monitoring system for the second series of radio spots to be broadcast in four different cities
- 3) discuss methodologies which may be used to evaluate the entire FEMAP project.

In this effort I worked very closely with the Director of Communication of FEMAP, Lic. César Saldivar. I also had the opportunity to exchange views with other members of the staff, both office and

field-based, and to study carefully the booklet describing the FEMAP model. With Lic. Saldivar's close collaboration I undertook a range of field visits and informal interviews which allowed me to develop a comprehensive information base which facilitated an understanding of the project both in terms of its organizational structure at the local and national levels and in terms of its community-based distribution system. The Information, Education and Communication (IEC) activities César Saldivar coordinates focus largely on the community-based distribution system of the Ciudad Juárez project and he is reaching out to support the field work of the other affiliates.

Among the secondary sources of information which proved to be helpful in the work done with Lic. Saldivar were Dr. Nancy D. Loy's July 1984 Trip Report and the Plan de Estrategia de Comunicación - FEMAP/JHU.

Contact with the Fieldwork

Largely because of the dedication of Evangelina Martínez Salmón to the project, I had the opportunity

to visit many of the areas where the promotoras carry out their mission and to speak with many of them. I met and informally interviewed promotoras of the "Módulo Evangelina" in Bellavista, San Felipe el Real, Galeana, El Rastro, La Chaveña, Anáhuac, Horizonte, Colonia Militar, División del Norte, Santa María, Col. del Periodista, Emiliano Zapata, Colonia Madero, Barrio Alto, Colonia del Carmen, Col. Anapro, La Carbonífera, El Retiro, Felipe Angeles, Col. Cazadores Juarences.... These site visits and discussions gave me a comprehensive view of the area and of the importance attached by coordinators, promotoras and clients to the work of the communications project. It also allowed me to observe interactions, primarily among coordinators and promotoras, but also between coordinators and clients, promotoras and clients, social workers and promotoras/es and social workers and coordinators.

Evangelina also introduced me to members of some of her other "módulos": cigarette vendors, barmaids, gas station attendants, parking garage attendants, pasamojados, military personnel, musicians, etc.

I accompanied Social Workers Cecilia Escobedo Cárdenas and Consuelo Soto García on visits to nurses and doctors in factories (maquiladoras) where the local program offers support to medical services. We also visited the infirmary facilities at El Cerezo, the Ciudad Juárez jail, and had an opportunity to speak with the promotores among the male inmates.

Visits to other coordinators and promotoras of the Ciudad Juárez program and to the CMI/PF Clinic also helped to corroborate the positive impact of the communications program and their enthusiastic support of the work of FEMAP. I also viewed several of the videotapes depicting the work of the organization. It rounded out for me the FEMAP experience.

Responding to the Objectives

- 1) Develop plans for a follow-up survey to evaluate the impact of radio spots and print materials.

Extensive research was done by Lic. Saldivar and his research team in preparing for the creation of the radio spots and print materials. A knowledge/attitudes/practices questionnaire was used for the original research. It was administered to 420 persons in randomly-selected households. This

questionnaire established baseline data on levels of literacy, media habits and contraceptive knowledge, attitudes and practices.

I proposed that a similar effort be undertaken again to assess the impact of radio spots and print materials in Ciudad Juárez. Lic. Saldivar explained that there would be several problems involved, but the two main considerations were time and personpower. The first questionnaire was administered with the cooperation of student/interviewers and was regarded by them almost as a class project. It took a great deal of time and with only six months left to complete the contract, he did not feel it could be done well. We then agreed on a shorter questionnaire to gather pertinent data for a follow-up survey. (Cf. Appendix 1)

We chose key questions from the original questionnaire and added others based on the content of the radio spots and print materials Lic. Saldivar had created. He will use the same sample size, 420 randomly-chosen households. Those interviewed will be

men and women of low socio-economic status, of reproductive age, living in the suburban Ciudad Juárez area. The same operational definitions will be used. The data gathered by this instrument will be comparable to key data obtained earlier. In a sense, this could be the beginning of a longitudinal client utilization study in the Ciudad Juárez area.

In engaging in client utilization studies, FEMAP has the advantage of having a systematic way of describing clients, i.e. definition of target population on p. 1, Plan de Estrategia de Comunicación - FEMAP/JHU. It also has a systematic way of counting the number of clients contacted. The promotoras submit monthly reports to the coordinators and the clinics report on cases per month. The organization also has a systematic means of counting the number of service contacts each community-based distribution program has, so that every time a client is served, this event is tabulated. It can likewise systematically combine information on the types of services with categories of clients so that the kinds of clients in any one service can be specified. The organization also has a systematic means of combining information on the types

of services with categories of clients so that the kinds of services provided to any one category of clients are specified. It also has a systematic way of keeping track of the amount and types of services provided to each client. Since the affiliates are following the same organizational model, it should be possible to extend the survey to regional and then national dimensions as the affiliate network grows.

For purposes of this evaluation, only the Ciudad Juárez affiliate will be targeted. The comparative study will provide pre- and post-communications campaign information. To complement this data, an analysis of the national survey on print materials will be submitted as part of the follow-up survey. Although this survey yields no data on client utilization as such, it does gather the combined opinions of potential users in various parts of the country. The forecast it presents is favorable. On the local level, the results of on-going monitoring of the radio spots at the Centros Materno Infantil y de Planificación Familiar (CMI/PF) will provide an up-to-date indicator of the impact of the radio spots. The clinics average 300 cases a month.

In an effort to obtain a qualitative measure of the impact of the radio spots and print materials, I suggested that Lic. Saldivar conduct a workshop with the field coordinators of the Ciudad Juárez Community Distribution Program to obtain their views of the advantages and disadvantages of the materials used in the campaign, both orally and in writing.

This suggestion was based on my previous experience with community-based efforts involving field representatives (a role equivalent to that of coordinator in this program) and on my field observations of interactions in the Ciudad Juárez program. The workshop is a way to simplify data gathering by circumventing the logistical problems involved in individual interviews or bringing together large numbers of people with dissimilar work schedules. The coordinators are in close (if not daily, probably weekly) touch with the promotoras. They keep very strict control of the client data sheets completed by the promotoras and often know the clients personally. Moreover, the coordinators themselves live among their people and share their concerns. Their efficient

response to the needs of the promotoras, who themselves reflect the needs of the clients, appears to be motivated not by a bureaucratic sense of control, but rather by a desire to offer support and service. It is in this context that I believe they would be true representatives of the promotoras and the clients and transmitters of their views and feelings.

The basic instrument to be used at this workshop is a short questionnaire calling for open-ended answers. (Cf. Appendix 2) Because of the working style of the coordinators and the constraints of varying educational levels, we felt that giving them an opportunity to write their answers and to talk about them as a group would surface a more realistic appraisal.

A by-product of such a discussion could be heightened awareness among the coordinators of the role of the communications project in the daily implementation of the community-based distribution program.

- 2) Develop a monitoring system for the second series of radio spots to be broadcast in four different cities.

In an attempt to obtain comparable data from all four cities, Lic. Saldívar and I agreed to ask CMI/PF clinics in each location to add to their intake forms for all patients the two questions which have been added to the forms in Ciudad Juárez to allow for the monitoring of the radio spots there. (Cf. Appendix 3). The fact that new local units may not yet have the services of a communications person on staff makes it desirable, if not necessary, for the national FEMAP office to provide simple ways to allow them to monitor their own growth, while at the same time obtaining figures that can be used for an overall view of the work of the Federation. This suggested activity presupposes that the community-based distribution systems operate along the same lines as that of Ciudad Juárez and that the coordinators have established similar patterns of interaction with the promotoras and they in turn with the clients.

According to Lic. Saldívar's proposed schedule, he is to spend one week in each city arranging for the broadcasting of the second series of radio spots. It

did not seem realistic to attempt to structure a more complex monitoring activity at this time. The fact that the four cities have clinics and will be obtaining comparable data is positive.

- 3) Discuss methodologies which may be used to evaluate the entire FEMAP project.

For purposes of this discussion, the "entire FEMAP project" is understood to refer to the JHU/PCS IEC project as it relates to FEMAP. The IEC project could be evaluated from various perspectives. I proposed to Lic. Saldívar that one of these could well be the Federation. This would be appropriate insofar as César Saldívar is a member of the FEMAP team. In this connection it would be important to remember that the Federation is very young and so is, in a sense, in a formative period. I suggest that a useful way to measure the impact of the IEC project would be to analyze how it has supported various areas of the work of the Federation and of its members.

This approach has the potential of focusing the

attention of the various components of FEMAP on the development of the organization as such. It would also highlight the importance of the communications component in terms of the goals to be achieved. An instrument with open-ended questions could be prepared and administered to appropriate staff and volunteers to obtain qualitative data. Four areas could be covered: a) the educational component; b) the community-based distribution component; c) the affiliates; d) the administration.

It appears that the Federation could become an important instrument for fostering its own growth and development as well as that of its affiliates. To achieve this, one requirement might be that it succeed from the beginning in establishing a pattern of organic growth that is true to the model so well presented on paper. The Plan de Estrategia de Comunicación seems to me to have set the stage for creating a supportive infrastructure. My time with the field staff and in the field corroborate my belief that the work in IEC has been very successful and has added considerably to the success of the on-going project. There is, however, much more that needs to be done. If it were

possible to establish the importance of the communications component in such a way that it would be seen as one of the elements essential to the success of the FEMAP model, an enrichment of the model would have occurred.

The IEC project could also be evaluated in terms of the support it affords the community based distribution system of the Ciudad Juárez affiliate. This would be appropriate because the Ciudad Juárez program provided the working environment for many of the activities of the communications program. Moreover, since the essential function of evaluation is to provide data on goal achievement and program effectiveness to a primary audience consisting of administrators, both internal (FEMAP management) and external (funding and monitoring institutions), a local assessment of impact could produce concrete figures, for example, on cost.

I had an opportunity to present some of these ideas not only to Lic. Saldívar, but also to the new Executive Director, Ernesto Barraza, the head of the educational in-service training, Dr. Enrique Suárez and

to the President of FEMAP, Mrs. Guadalupe de De la Vega. Under her leadership and, I believe, prompted by her example, remarkable alliances have been achieved among members of various social classes, a very difficult thing to do in a society such as Mexico's. The staff members I spoke with expressed interest in continuing to explore the organization development approach. Lic. Saldívar was enthusiastic about the idea and saw it as complementary to the quantitative data which he continues to gather. He would also summarize and present these figures as part of the global evaluation of the project.

The Time Factor

In order to give ourselves a timeframe within which to place the various activities still to be done in the last six months of the project, we made some tentative projections. This schedule assumes that the effort will begin the first of February and be completed at the end of July.

Weeks 1 - 5

--design PR flyer

--produce and distribute print materials

- produce material on breast feeding and
diaphragm
- field research
- evaluations

Weeks 6 - 10

- travel to the four cities and arrange for
the broadcast of the second series of
radio spots
- train staff to monitor/evaluate

Weeks 11 - 17

- produce a film

Weeks 18 - 20

- tie loose ends regarding evaluation data
both for FEMAP and its affiliates

Weeks 21 - 24

- prepare a final evaluation report

This proposed schedule does not include, of course, the activities of Lic. Saldívar as a member of the FEMAP team which do not come directly under the IEC project. Later in February, for example, he has been invited by the Governor of Chihuahua to attend a meeting of state governors at which copies of one of the videotapes César Saldívar has produced for FEMAP will be distributed to the participants.

Conclusions and Recommendations

After a week's work with FEMAP I am able to put the IEC project in a broader context. It is obvious to me that the JHU/PCS-supported communications project has significantly contributed to the laying of a strong IEC infrastructure for the work of FEMAP as a Federation and for the individual affiliates. It is likewise obvious that a great deal of the success of FEMAP to date is due to the persons involved, especially the President, Mrs. Guadalupe de De la Vega, who has attracted exceptionally dedicated and talented persons to the project. In Ciudad Juárez the FEMAP model seems to have been extremely well implemented. There is a healthy balance between desk and field work

and unusually enthusiastic and sustained support for the work on the part of the volunteer coordinators and promotoras. If such volunteers are not available or have not been found in other programs, does the model work as well?

In terms of organization development, FEMAP as a federation is very young. Given its growth projections and the financial and political problems it faces, the next few months could be crucial in establishing a sustaining but not dependency-creating relationship with its affiliates. In order to achieve this, its goals would have to include improving its own ability to offer technical assistance to its affiliates and assisting them in identifying and attracting other sources of such assistance.

In light of the above, I offer the following recommendations:

1. That support be renewed at the end of the contract period for an on-going communications program which will strengthen both the Federation and its affiliates.

2. That funding for specific projects be considered, i.e. a film or video or a booklet similar to 100 Preguntas which would present the most common myths related to family planning methods and/or child care practices. Some of the information is already available and the rest could be collected rather easily in the field. A tool such as this could be the basis for in-service training as well as informational workshops by coordinators and promotoras. It could be presented as a FEMAP project or, if the booklet format were considered, could be proposed as a collaborative effort of the affiliates. Perhaps someone on the FEMAP staff might coordinate the effort.

3. That audiovisual materials and training in their use as teaching tools be considered an important part of the resources available to the field staff and volunteers. The banning of imports and the continuing pauperization of the Mexican society create further constraints for the use of print materials. Given the strong oral tradition of Mexicans, the person to person approach of FEMAP seems to favor the use of situations fostering group discussions.

4. That FEMAP affiliates be encouraged to strengthen their communications capabilities, develop ways to share and develop resources, and keep abreast of developments in the field of development communications.

APPENDIX A

LIST OF PERSONS CONTACTED

Cecilia Escobedo Cardenas, Social Worker
Consuelo Soto Garcia, Social Worker
Marcia G. Jaramillo Peregrina, Coordinator of Small
Business Venture
Evangelina Martinez Salmon, Coordinator of Promotoras
Marta Mena, Coordinator of Promotoras
Maria Felix U. de Nares, Secretary, Modulo Evangelina
Gloria Villa, Coordinator of Promotoras
Centros Materno Infantil y de Planificacion Familiar
Plutarco E. Calles 744 Nte.
Ciudad Juarez, Chihuahua, Mexico

Ernesto Barraza Salgado, Executive Director
Manuel Castillo, Administrator
Guadalupe A. de De la Vega, President
Magdalena Gomez Cicena, Secretary, Communications Dept.
Rebeca Ramos, Director of Research
Cesar Saldivar, Director of Communications
Dr. Enrique Suarez, Director of Education
Federacion Mexicana de Asociaciones Privadas de
Planificacion Familiar, AC
Plutarco E. Calles 744 Nte.
Ciudad Juarez, Chihuahua, Mexico

20

ENCUESTA NUMERO _____

SEXO _____

EDAD _____

1. ¿CUAL ES SU OCUPACION? (RESPUESTA ESPECIFICA)

2. ¿HASTA QUE AÑO LLEGO EN LA ESCUELA?

3. ¿CUANTO DINERO GANA AL MES LA PERSONA QUE SOSTIENE LA CASA?

4. ¿CUANTAS PERSONAS VIVEN EN ESTA CASA?

5. ¿HA ESCUCHADO POR EL RADIO ANUNCIOS DE PLANIFICACION FAMILIAR?

SI _____ NO _____ NO RECUERDA _____

6. (EN CASO DE NO HABER ESCUCHADO PASE A LA PREGUNTA # 9)
(EN CASO DE HABER ESCUCHADO) DE LOS SIGUIENTES NOMBRES DIGA CUALES SON LOS -
ANUNCIOS QUE USTED HA ESCUCHADO: *PUEDE ESCOGER VARIAS*

DOÑA PETRA. _____ DOÑA MECHE _____

DOÑA ROSITA _____ DOÑA GLORIA _____

7. ¿SABE USTED QUE EN JUAREZ ESTAN LAS CLINICAS MATERNO INFANTIL Y DE PLANIFI-
CACION FAMILIAR?

SI _____ NO _____ NO RECUERDA _____

7.1 ¿COMO SE ENTERO USTED DE ESTAS CLINICAS? *PUEDE ESCOGER VARIAS*

POR UNA AMIGA _____ EN EL RADIO _____

EN EL CINE _____ EN EL CAMTON _____

PORQUE VIVE CERCA _____ POR UN PARIENTE _____

POR PROMOTORAS _____ OTROS _____

7.2 ¿RECUERDA USTED DONDE ESTAN LAS CLINICAS DE PLANIFICACION FAMILIAR?
SI _____ NO _____ NO RECUERDA _____

7.3 (EN CASO AFIRMATIVO)
-DIGA DONDE- (PUEDE DAR LA DIRECCION, SEÑAS, PUNTOS DE REFERENCIA; ETC.)

7.4 ¿LOS SERVICIOS DE PLANIFICACION FAMILIAR EN ESTAS CLINICAS:
NO CUESTAN NI UN CENTAVO _____ SON CAROS _____
SE COBRAN _____ SON BARATOS _____
NO SABE _____ NO RECUERDA _____

8. *Después* ¿DIGA CUAL DE LAS SIGUIENTES FRASES HA ESCUCHADO USTED: EN EL RADIO ?
(SOLO PUEDE ESCOGER UNA)

CON PLANIFICACION FAMILIAR MEJOR VIDA PARA TODOS _____

CON PLANIFICACION FAMILIAR AMOR EN EL HOGAR _____

CON PLANIFICACION FAMILIAR LA FAMILIA NO VIVE MAL _____

9. ¿HA OIDO USTED SOBRE LOS METODOS QUE SE USAN PARA NO TENER EMBARAZOS?

SI _____ NO _____ NO RECUERDA _____ NO CONTESTO _____

10. ¿HA USADO (EN EL PASADO) ALGUN METODO PARA NO TENER EMBARAZOS?

SI _____ NO _____ ESTA USANDO _____

NO CONTESTO _____

10.1 (EN CASO AFIRMATIVO) ¿CUAL O CUALES ?
(SI ESTA USANDO PASE A LA PREGUNTA # 11)

_____ PASTILLAS

_____ DIAFRAGMA

_____ DIU

_____ OVULOS

_____ INYECCION

_____ ESPUMAS

_____ SALPINGOCLASIA (LIGAR TROMPAS)

_____ JALEAS

_____ VASECTOMIA (OPERACION DE HOMBRES)

_____ RITMO

_____ CONDON

_____ HIERBAS

_____ OTROS

11. ¿ESTA USANDO ALGUN METODO PARA NO TENER EMBARAZOS?
SI _____ NO _____ NO CONTESTO _____

11.1 (EN CASO AFIRMATIVO) ¿CUAL O CUALES?

_____ PASTILLAS	_____ DIAFRAGMA
_____ DIU	_____ OVULOS
_____ INYECCION	_____ ESPUMAS
_____ SALPINGOCLASIA (LIGAR TROMPAS)	_____ JALEAS
_____ VASECTOMIA (OPERACION DE HOMBRES)	_____ RITMO
_____ CONDON	_____ HIERBAS
	_____ OTROS

11.2 ¿DONDE LOS CONSIGUE?

12. ¿HA OIDO USTED DE UNA OPERACION (LIGARSE LAS TROMPAS) QUE SE PUEDEN HACER LAS MUJERES PARA NO TENER EMBARAZOS?

SI _____ NO _____ NO RECUERDA _____ NO CONTESTO _____

12.1 (EN CASO NEGATIVO PASE A LA PREGUNTA # 13)

(EN CASO AFIRMATIVO) ¿CUANDO UNA MUJER SE OPERA, LO NORMAL QUE DURE EN EL HOSPITAL ES :

VARIAS HORAS O UN DIA _____ 3 DIAS _____

UNA SEMANA _____ NO SABE _____

13. ¿SABE USTED SI HAY PASTILLAS PARA NO TENER EMBARAZOS?

SI _____ NO _____ NO CONTESTO _____

13.1 (EN CASO NEGATIVO PASE A LA PREGUNTA # 14)

(EN CASO AFIRMATIVO) ¿LAS PASTILLAS PARA NO TENER EMBARAZOS, LAS DEBE TOMAR:

EL HOMBRE _____ LA MUJER _____ LOS DOS _____

NO SABE _____ NO RECUERDA _____ NO CONTESTO _____

13.2 ¿LAS PASTILLAS PARA NO TENER EMBARAZOS SE DEBEN TOMAR:

TODOS LOS DIAS _____ CADA VEZ QUE SE TIENEN RELACIONES _____

CADA TERCER DIA _____ CADA MES _____

NO SABE _____ NO RECUERDA _____ NO CONTESTO _____

13.3 SI SE OLVIDA TOMAR UN DIA LA PASTILLA :

LA MUJER YA NO PUEDE SEGUIR CON PASTILLAS ESE MES _____

LA MUJER PUEDE TOMAR DOS AL DIA SIGUIENTE _____

SE DEBE USAR OTRO METODO DURANTE ESE MES _____

NO SABE _____ NO RECUERDA _____ NO CONTESTO _____

14. PLANIFICAR LA FAMILIAR QUIERE DECIR:

TENER POCOS MUCHACHOS _____

TENER SOLO LOS MUCHACHOS QUE UNO QUIERE Y DECIDE TENER _____

Para uso con coordinadores en taller -
contestaciones individuales → discusión → consenso

Anda
1/23/85

APPENDIX 2

#1 #2
③
cualitativo

¿HA TENIDO MAS ALTAS DESDE QUE SE HAN PASADO LOS ANUNCIOS POR RADIO?

¿CUALES SON LAS VENTAJAS DE LOS ANUNCIOS POR RADIO?

¿CUALES SON LAS DESVENTAJAS?

¿PARA QUE USA LOS FOLLETOS?

¿HA TENIDO MAS ALTAS DESDE QUE USA LOS FOLLETOS?

¿CUALES SON LAS VENTAJAS DE LOS FOLLETOS?

¿CUALES SON LAS DESVENTAJAS?

SI EL PROGRAMA PUDIERA OFRECER SOLAMENTE UNO DE LOS DOS, O LA FOLLETERIA, O LOS ANUNCIOS POR RADIO, CUAL PREFERIRIA ? ¿POR QUE ?

¿LE GUSTARIA PODER PASARLES PELICULAS A SUS PROMOTORAS? ¿POR QUE?

SI UN DIA SE ACABARA LA FOLLETERIA, ¿COMO AFECTARIA SU TRABAJO EN EL PROGRAMA?

¿SI UN DIA SE ACABARA LA FOLLETERIA, ~~DE QUE OTRO MODO SE~~ PODRIA DAR INFORMACION SOBRE LOS METODOS?

APPENDIX 3

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CASOS INTERNOS NUEVOS

FECHA _____
 NOMBRE _____
 FECHA DE NACIMIENTO _____
 No. DE REGISTRO _____ EDAD _____
 No. DE EMBARAZOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 No. DE ABORTOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 No. DE HIJOS VIVOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 ESCOLARIDAD:
 Primaria; _____
 _____ 1º _____ 2º _____ 3º _____ 4º _____ 5º _____ 6º
 Secundaria; _____
 _____ 1º _____ 2º _____ 3º _____
 Tecnico _____ Profesional _____ Otros _____
 COMO SUPO DE LA CLINICA: _____
 _____ Un Familiar _____ Un Amigo _____ Promotor
 _____ Radio _____ Volante _____ Empleado
 _____ Otro _____ Clinica
 ¿ HA ESCUCHADO LOS ANUNCIOS DE RADIO DE LA CLINICA?
 _____ SI _____ NO _____ NO RECUERDO
 ¿ RECUERDA ALGUN MENSAJE, NOMBRE DE PERSONAJE O LUGAR?
 _____ SI _____ NO
 DOMICILIO _____

FECHA _____
 NOMBRE _____
 FECHA DE NACIMIENTO _____
 No. DE REGISTRO _____ EDAD _____
 No. DE EMBARAZOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 No. DE ABORTOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 No. DE HIJOS VIVOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 ESCOLARIDAD:
 Primaria; _____
 _____ 1º _____ 2º _____ 3º _____ 4º _____ 5º _____ 6º
 Secundaria; _____
 _____ 1º _____ 2º _____ 3º _____
 Tecnico _____ Profesional _____ Otros _____
 COMO SUPO DE LA CLINICA: _____
 _____ Un Familiar _____ Un Amigo _____ Promotor
 _____ Radio _____ Volante _____ Empleado
 _____ Otro _____ Clinica
 ¿ HA ESCUCHADO LOS ANUNCIOS DE RADIO DE LA CLINICA?
 _____ SI _____ NO _____ NO RECUERDO
 ¿ RECUERDA ALGUN MENSAJE, NOMBRE DE PERSONAJE O LUGAR?
 _____ SI _____ NO
 DOMICILIO _____

11

CASOS EXTERNOS NUEVOS

FECHA _____
 NOMBRE _____
 FECHA DE NACIMIENTO _____
 No. DE REGISTRO _____ EDAD _____
 No. DE EMBARAZOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 No. DE ABORTOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 No. DE HIJOS VIVOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 ESCOLARIDAD: _____
 Primaria; _____
 _____ 1º _____ 2º _____ 3º _____ 4º _____ 5º _____ 6º
 Secundaria; _____
 _____ 1º _____ 2º _____ 3º _____
 Tecnico _____ Profesional _____ Otros _____
 COMO SUPO DE LA CLINICA: _____
 _____ Un Familiar _____ Un Amigo _____ Promotor
 _____ Radio _____ Volante _____ Empleado
 _____ Otro _____ Clinica
 ¿ HA ESCUCHADO LOS ANUNCIOS DE RADIO DE LA CLINICA?
 _____ SI _____ NO _____ NO RECUERDO
 ¿ RECUERDA ALGUN MENSAJE, NOMBRE DE PERSONAJE O LUGAR?
 _____ SI _____ NO
 DOMICILIO _____

FECHA _____
 NOMBRE _____
 FECHA DE NACIMIENTO _____
 No. DE REGISTRO _____ EDAD _____
 No. DE EMBARAZOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____
 No. DE ABORTOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 No. DE HIJOS VIVOS: _____
 _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6
 _____ 7 _____ 8 _____ 9 _____ 10 _____ 11 _____
 ESCOLARIDAD: _____
 Primaria; _____
 _____ 1º _____ 2º _____ 3º _____ 4º _____ 5º _____ 6º
 Secundaria; _____
 _____ 1º _____ 2º _____ 3º _____
 Tecnico _____ Profesional _____ Otros _____
 COMO SUPO DE LA CLINICA: _____
 _____ Un Familiar _____ Un Amigo _____ Promotor
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 ¿ HA ESCUCHADO LOS ANUNCIOS DE RADIO DE LA CLINICA?
 _____ SI _____ NO _____ NO RECUERDO
 ¿ RECUERDA ALGUN MENSAJE, NOMBRE DE PERSONAJE O LUGAR?
 _____ SI _____ NO
 DOMICILIO _____

CASOS EXTERNOS SUBSECUENTES

FECHA _____

NOMBRE _____

METODO QUE UTILIZA:

_____	Pastilla	_____	Condon	_____	Espuma.
_____	Ovulos	_____	Inyeccion	_____	D.I.U.
_____	Salpingoclasia	_____	Vasectomia	_____	Otros.

ANTICONCEPTIVOS ENTREGADOS:

Ciclo (s) _____ Unidad (es) _____

COMO SE ENTERO DE LA CLINICA.

_____	Un Familiar	_____	Un Amigo	_____	Promotor
_____	Radio	_____	Volatens	_____	Emplcados
_____	Otros			_____	Clinica.

HA ESCUCHADO LOS ANUNCIOS DE RADIO?

Si _____ No. _____ No recuerda _____

¿Recuerda algún mensaje (personaje o Slogan)?

Si _____ No _____

DOMICILIO _____

CASOS EXTERNOS SUBSECUENTES

FECHA _____

NOMBRE _____

METODO QUE UTILIZA:

_____	Pastilla	_____	Condon	_____	Espuma
_____	Ovulos	_____	Inyección	_____	D.I.U.
_____	Salpingoclasia	_____	Vasectomia	_____	Otros

ANTICONCEPTIVOS ENTREGADOS:

Ciclo (s) _____ Unidad (es) _____

COMO SE ENTERO DE LA CLINICA.

_____	Un Familiar	_____	Un Amigo	_____	Promotor
_____	Radio	_____	Volantes	_____	Emplcados
_____	Otros.			_____	Clinica

HA ESCUCHADO LOS ANUNCIOS DE RADIO?

Si _____ No. _____ No recuerda _____

¿Recuerda algún mensaje (personaje o Slogan) ?

Si _____ No _____

DOMICILIO _____