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TRIP REPORT: FEMAP/COATZACOALCOS

Prepared by: Evelyn Folch-Lyon, PIACT

Dates of In-Country Work: November 15 - 17, 1984

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DRA EVELYN PETERS DE FOLCH LYON

December 28, 1984

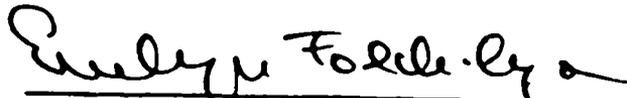
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FEMAP/Coatzacoalcos Trip and Research

Activities Report

In accordance with Request for Services (Cooperative Agreement No. DPE-3004-A-00-2018-00) to pretest FEMAP radio spots in four Mexican cities, I carried out the necessary motivational research in Coatzacoalcos.

1. Four Focus Group Discussions were held in Coatzacoalcos from November 15 to 17. Nine radio spots were pretested, the same that had been evaluated already in Monterrey and Matamoros.
2. The sample included male and female participants, all from urban and peri-urban low income groups ; participants were predominantly contraceptive users although some non-users were also present. The male group included respondents ranging in age from 26 to 44 (7 participants). Of the three female groups, two brought together nineteen respondents aged from 18 to 26, one had nine participants ranging in age from 29 to 38. All participants were married or living in union, all had children.
3. Local social workers were interviewed also to discover some of the regional peculiarities of Coatzacoalcos.
4. On November 17, 1984, I traveled back to Mexico City.
5. Analysis/interpretation of collected data, as well as report writing, was carried out from December 1 to 22.
6. Summarized findings, with recommendations, are enclosed.


Evelyn Folch-Lyon

Enclosure



DRA. EVELYN PETERS DE FOLCH LYON

MOTIVATIONAL RESEARCH (FOCUS GROUP RESEARCH)

ON FAMILY PLANNING RADIO CAMPAIGN

FOR COATZACOALCOS

November 1984



I N T R O D U C T I O N

A pretest of FEMAP's Family Planning radio spots, which are being broadcast since August 1984 in Ciudad Juárez, was effected in Coatzacoalcos, using motivational research techniques. Field work in Coatzacoalcos was carried out from November 15 to 17, 1984.

Nine radio spots were pretested with urban and peri-urban low socioeconomic groups ; participants were predominantly contraceptive users, although some non-users were also present. Age of participants ranged from 18 to 44 years. Of the three female groups, two brought together 19 respondents from 18 to 26, one had nine participants ranging in age from 29 to 38. One male group was held with 7 participants, from 26 to 44 years.

All group participants were exposed to the recorded radio spots, discussing freely topics related to credibility, degree of comprehension, acceptance and interest in messages, appropriateness of production values and manners of speech, etc., compatibility with perceived needs, favorable and unfavorable connotations, etc.

Spots tested were the same as in Monterrey and Matamoros :

Spot 1 - Doña Rosita explains her cheerfulness to neighbor

Spot 2 - Rosita explains why she decided to plan her family

- Spot 3 - Rosita explains spacing to neighbor still wanting another child and recommends Promotoras
- Spot 4 - Rosita talks to neighbor who has just undergone tubal ligation
- Spot 5 - Rosita and husband talks about family planning (husband invites her to movies, she accepts, always has time)
- Spot 6 - Neighbor asks whether tubal ligation is possible when a woman is not pregnant
- Spot 7 - Juan recommends Femap clinic on grounds of inexpensive delivery services, also tells neighbor to inquire about family planning
- Spot 8 - Juan gives advice on vasectomy, offering himself as testimony
- Spot 9 - Neighbor declares that he has decided to be vasectomized.

Again, findings have been compared to data collected in Ciudad Juarez, Monterrey and Matamoros.

Some of the environmental and sociocultural differences between these Northern towns and the Southeastern region where Coatzacoalcos is located have been pointed out in preliminary comments, since they are important as far as family planning is concerned.



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SUMMARIZED FINDINGS AND RECOMMENDATIONS

I SOCIOCULTURAL AND ENVIRONMENTAL FACTORS

1. Coatzacoalcos, with 350,000 inhabitants, located in the Southeastern region of Mexico on the Gulf of Mexico, has a tropical, humid climate, with an abundance of tropical fruits.

2. In most peri-urban, low-income areas, swamps breeding insects make housing conditions extremely difficult. Construction of sewer systems is hindered, even residential areas lack sewer system. Squatters, on the outskirts of town, not only lack sewers but often also electricity, running water. Shacks are built of wood, cardboard, etc., cement floors; frequent floods keep streets inundated for a long time, barefoot children suffer from micosis ; contaminated water and foods make infections from parasites almost endemic.

3. In spite of nearby oil fields, there is high unemployment at present, possibly also due to migration from other areas. Unskilled workers are paid minimum salary (\$840 pesos approx. per day).

4. Women often work (laundry, etc.), but few jobs are available. Even small children are left alone at home, malnutrition seems to be frequent.

5. With regard to family planning, machismo attitudes seem to predominate. Most women of the depressed socioeconomic areas studied have little schooling, little mental development, usually give in to demands to bear more children.

In some cases, newborn children are given away. It seems preferable to give proof to the partner that one gets pregnant by him, ^(and then give the child away) than to take contraceptives.

6. Promotoras - and contraceptive users - declare



that husbands destroy pills if they find them. One participant, a pregnant woman with eight children who had been taking pills without the husband's knowledge, had become pregnant again (and was desperate about it) because the husband found the pills, destroyed them, stayed at home, away from work, for one week during which he did not leave his wife alone for a minute to prevent her buying more pills. As a result, she had become pregnant. In the FGD she declared she had wanted to get an abortion, had been unable to get it.

7. The great majority of women have submissive attitudes, tolerate any number of excesses from the husband (extremely frequent drunkenness, spending almost all the money on liquor, beatings, contempt when they give birth to a baby girl, threats with sharp knives "I'll kill you because you had a man hidden there in the house").

But there is an interesting minority of women who come from the nearby region of Tehuantepec, where women have been known for a long time to be much more self-assertive than the men. These women hit the men back, demand that he gives them enough money, call the police when he threatens them. But even they declare that "it took me 20 years and 9 children to work up enough courage" for this kind of behavior.

It could be very interesting to make a family planning study taking into account sociocultural attitudes in the region of Tehuantepec : motivational research could disclose factors not present in other parts of the country, but which could be used to advantage in communication strategies.

II OVERALL EVALUATION

1. Family planning is approved both by men and women on grounds of severe financial hardship. A radio campaign is welcome since women hope that men will recognize their responsibility, and men think that women should be reminded of her responsibility. If she has too many children, she will not care adequately for all of them.

2. Male approval is more theoretical and rational than behavioral. Men believe they forget their good intentions when they are drunk, admit that this happens frequently ("abunda aquí mucho la alegría... nos tomamos cartones de Caguamas.."), but considers anyway that men do not have to get involved in family planning measures, much less resort to vasectomy.

3. Women relate male resistance to machismo ("abunda mucho el machismo aquí"), interpret this term as a compulsion to proof virility through keeping women pregnant, coupled with indifference as to how to provide for the children.

4. It is interesting that while vasectomy (as proposed in radio spots) causes rejection and hilarity, "live" testimony can diminish these reactions considerably : one male participant, encouraged by the radio spots, disclosed that he had been vasectomized and was as satisfied as ever, had no regrets after several years. His testimony had a good effect on the other participants, who became somewhat more aware that they also should participate in family planning, even though they still showed no inclination towards vasectomy.

This writer suggested to the program coordinators to try to obtain cooperation from the vasectomized participant for some of the program goals.

5. Female attitudes of submissiveness seem to be more pronounced than in the Northern areas of the country. As a result, Doña Rosita is seen more as a Promotora than as a wife who gets along well with her husband, is smart, young and good-looking. Marital frustration seems to be more the rule, also marital conflicts when the wife is more self-assertive than usual.

Despite common strained marital relations and a lack of capacity to identify with Rosita, the communication strategy seems to be adequate (Rosita as an advisor, i.e. as a Promotora) as long as "unrealistic" messages are left out: for instance, husband inviting Rosita to movies (Spot 5).

6. Production values require local adaptation, also slower speech, longer pauses, emphasis on key concepts. Since manner of speech differs considerably from the Northern areas, local production will be necessary.

III SPECIFIC EVALUATION OF INDIVIDUAL SPOTS

SPOT 1 Rosita explains her cheerfulness to neighbor, relates it to family planning and a happy marital life.

1. The idea of leading a happy marital life is difficult to grasp; once understood it has little stimulating value since reality is usually too far removed from this "ideal".

2. The message is recognized as true, but identification is difficult. Rosita does not even become a symbol of aspiration; rather, she is a Promotora giving advice to another woman.

3. Promotoras participating in the FGD find the neighbors curiosity appealing since they have themselves experienced negative attitudes - even from women - when they approach them with advice on family planning.

This experience makes them distort the message: they do not grasp the fact that a neighbor is asking Rosita for the reason of her cheerfulness, but rather believe that Rosita may get annoyed since someone is "prying into her life" ("¿por qué se mete en mi vida?"). In fact, promotoras have been rejected on this ground, hope that spot will change attitudes, "will make women realize that family planning is something important".

4. The spot, therefore, does not seem to be an adequate starter for a radio campaign on family planning; the message is hard to understand and is too unrealistic. Promotoras are the only one's who believe they will profit from it, but even this is unlikely.

5. Spot 2 (below) is much more convincing and motivating. Spot 1 should be left out or broadcast at a later date.

SPOT 2 Rosita is asked why she decided to plan her family.

1. As in other towns, this spot is highly persuasive, easily understood, highly plausible.

2. Lack of money is the most immediate concern of women, marital conflicts arise precisely from her demands for more money. Family planning is justified since she sees no way to satisfy the needs of her children.

3. This spot in fact seems to communicate in part the message contained in Spot 1 : both husband and wife realize that they cannot raise a large number of children since they cannot provide for them; from this it follows that they agree on this issue and therefore "get along well".

4. Promotoras believe that the spot will help dispel some of the rumors related to methods, since financial worries are acute and only need to be emphasized in order to make a non-contraceptive user reach a decision.

5. On the other hand it is insisted (promotoras) that information is needed on the different methods available and that women have to be reassured as to their side effects.

Some female participants (non-contraceptive users) in fact are in conflict between their desire to control their fertility (mainly financial reasons and excessive work) and their fears : "They say that it is more dangerous to take the pill than to have children", "all the pills remain in the ovaries".

6. Some of the better educated men insist that the message is true but has to be emphasized by a conclusion, explicitly and clearly worded (something like: "Señora, do you realize that if you have 7 children and one gets sick, the other six have nothing to eat since all the money goes to the doctor and medicines?").



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Otherwise, women will not understand since they are limited by low education.

7. It seems that, in fact, most women could derive greater and quicker benefit from this spot - and from most others - if they are addressed directly with the main message, just as they are used to in advertising.

This does not hold for the promotoras, whose horizon has widened considerably through constant exposure to the problems and difficulties related to the decision to plan one's family.

8. This spot should be the first in the radio campaign. Its effectiveness would increase by adding a direct message. This, at the end of the spot, could replace the phrase "Con planificación familiar, amor en el hogar", which does not seem too appealing to participants.

SPOT 3 Rosita explains spacing to neighbor still wanting another child. Services of promotoras are recommended.

1. Most female participants agree to the message : spacing "gives one time to see if things get better; if they do, I'll have another child, if they don't I'll just remain with three".

2, Many women believe the spot will help men realize that they should not insist on one child after another : "He already got his way (through two to three pregnancies of the wife, one after another).. now he should think a bit".

3. Promotoras are pleased that their services are recognized and recommended. Also other participants believe this part of the spot will be remembered easily, since in fact women rarely have time to go to the clinic to get their pills. They are also inhibited by medical personnel.

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4. Spot does not need any changes, unless - again - the definite conclusion is added at the end. This would not only help assimilate the idea but also reinforce hesitant decisions.

SPOT 4 Rosita talks to neighbor who has just undergone tubal ligation

1. The message understood is : Tubal ligation is a procedure which does not require a woman to stay overnight at the clinic. The woman feels good in spite of having just been operated.

2. Message is credible, although there are negative rumors related to the operation. The main problem seems to be the type of anesthesia used : women are afraid of spinal blockage, insist that they would decide if they could have a general anesthesia.

3. Although spot is convincing enough, it is felt that something has to be added to reassure women as to the consequences. One participant, who had undergone tubal ligation a few years ago, voiced emphatically her satisfaction but declared that she had been scared by negative rumors and had reached the decision in a state of desperation.

Rumors which should be dispelled - perhaps in a different spot - relate to : an operated woman gets pregnant again; she is unfit to work hard ; she becomes sickly ; she has severe and permanent abdominal pains ; she "dries out" ("se seca uno").

4. Although additional spots related to tubal ligation would be useful, this spot can be broadcast as is (with the necessary local adaptation).



SPOT 5 Rosita's husband invites her to movies, she accepts, explains her cheerfulness and relates it to small number of children.

1. The spot lacks credibility for two reasons : husbands go out alone, not with their wife; few children may give a woman more time, but will not induce the husband to take her out.

2. Cheerfulness is not immediately grasped. Even when there are few children, most women feel neglected by the husband, even humiliated : there is no reason to be cheerful.

3. According to women, no husband invites a wife to the movies. His attitude changes radically once the couple is married : "Before you marry they never show up drunk, they invite you to go out. Afterwards, they couldn't care less because they already got what they wanted."

4. A man's friends are more important than the wife. On payday they go out with friends, get drunk, show up at dawn next day, disappear again on Sunday until Monday dawn. The wife has no right to make demands since he claims "I earn the money, I have the right to spend it as I wish" - even if he has nothing left to bring home.

5. It is interesting that men do grasp the message of cheerfulness. They find it motivating that the wife receives them in a good mood always, no matter what he does outside the home, when he comes home, and in what state of drunkenness.

6. Men do not seem motivated adequately by the main message, i.e. the convenience of having few children, only want to be assured that the wife accepts uncomplainingly the conditions under which she has to live, and is cheerful besides. Women, on the other hand, do not sufficiently relate cheerfulness to a small number of children.

7. The spot has little effectiveness. Women are not

aware of any free time once they have children; even if they had it, the men lead totally separate lives, there is little companionship and clear ^{under} currents of hostility.

Instead of this spot, other of informative content should be produced and broadcast.

SPOT 6 Rosita gives advice on tubal ligation, which is possible even if woman is not pregnant.

1. There seems to be sufficient knowledge about the possibility of tubal ligation at any moment.

2. Promotoras confirm that resistance to the operation stems not from lack of knowledge but from fear of anesthesia, immediate or long term consequences (health), threats from the husband.

3. Resistance to operation is especially strong when no males are among already existing children. One participant with three girls described how her husband got angry at each delivery and blamed her for "only being able to bear girls ('viejas').. he doesn't care about me, leaves me and gets drunk".

4. Men confirm this trend. They refuse permission to the use of contraceptives and especially to tubal ligation because they insist on male children : "One continues having children until the boy comes... maybe one shouldn't, I have six girls now... but that is the way it is".

5. The spot may be useful not so much because of the information contained, but because it will raise the issue of tubal ligation, leading to a higher degree of awareness. However, it would be most important to communicate lack of negative consequences. Although this is already communicated in Spot 4, it seems that any message related to tubal ligation has to contain reassuring comments.



SPOT 7 Don Juan recommends clinic on account of low cost delivery. Advises family planning.

1. Men have no difficulty in understanding the message related to low cost, consider that the spots need added explanation on family planning, if it is to be effective for such a purpose. The radio announcer should clearly warn the male audience : "Do avoid future problems. Plan your family now".

2. Women do not believe the spot will be motivating for men, in fact, they will not even listen to the second part of the spot (plan the family).

3. Men, according to women, will ridicule the spot. They do not think of consequences when they demand sexual gratification, "there are so many months in between" (conception and delivery), claim that any warnings with regard to lack of planning are "nonsense" ("puras tonteras"). Women see here a clear sign of "machismo", which is furthered by ill-advice coming from the cronies.

4. Spot should eliminate message regarding low cost, should add a clear warning-conclusion of the type described above.

SPOT 8 Advice on vasectomy; testimony by Don Juan.

SPOT 9 Male character declares he has decided to be vasectomized.

1. Same reactions as in other areas already researched.

2. Virtual impossibility of men accepting vasectomy is shown by hilarity among women. These know that :

- a) men fear impotence as consequence of vasectomy
- b) insist on a woman's pregnancy if "their marriage fails and they get married again", otherwise they "feel they are not men";
- c) men will ridicule the spot, will use it as a joke among themselves.

3. Women are also aware that in a Mexican well-known TV program comments were made that vasectomized men "become homosexual".

It is of course significant that no other part of this program was remembered, nor the context in which the assertion was made.

4. Castration is also the main fear voiced by men. A man's virility should not be put at risk. Family planning is more of a concern for women. If needed, they should take measures, never the man.

5. One vasectomized participant had enough courage during the latter part of the FGD to disclose that he had been vasectomized. He had agreed to the operation since his wife's life was in danger, she could not tolerate any contraceptive measures, and the doctor had "talked it over with him several times as a friend," and had convinced him.

6. This personal testimony was very impressive for other participants, but served mainly as a catalyst to disclose their own fondest desires : "In this whole area one is very 'macho', afraid that the woman will make a fool of one if one does not keep her tied down with children. One wants to have three wives, all with children, all totally faithful and submissive".

7. It does not seem advisable to broadcast spots on vasectomy, among other reasons because in this sociocultural group achievement and "social" standing is greatly related to the number of children and the number of women a man can have : these are "objective" measures and mean prestige and envy from other men.



R E C O M M E N D A T I O N S

1. Local adaptation/execution of all radio spots.
2. Spots with informative content should be added, are of high importance to reassure women, diminish their fears, offset rumors (i.e. "pills accumulate in the ovaries").
3. Single spots should be broadcasted long enough so that messages are caught despite inattentive listening.
4. All spots require slower speech of actors, longer pauses, more emphasis on key concepts.
5. It would be best not to leave conclusions from the messages up to the audience but to have the radio announcer clearly state such conclusion at the end of each spot (in the manner of commercial advertising).
6. Spot 1 is not meaningful enough, is misunderstood, lack of attention will be the consequence. It is best to start the campaign with Spot 2 : Rosita is adequately introduced, situation is easily understood, female audience can identify with message, feels motivated.
7. Spot 3 can be produced locally as is. However a conclusion at the end (replacing the slogan) would be useful, help women reach a positive decision.
8. Spot 4 raises again fears about anesthesia. It can be broadcast, but other spots should be produced addressing specific fears related to tubal ligation (see page 11).
9. There is little sense in broadcasting Spot 5. It lacks credibility and motivating force.
10. Spot 6 can be broadcast if it contains reassurances about consequences of tubal ligation.
11. Spot 7 should not reassure men with regard to

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low cost of delivery. Rather, a warning (radio announcer, at the end of spot) should be added (see page 14).

12. Spots 8 and 9 are too controversial at this point to be of any use, should not be broadcast.

R E C O M M E N D A T I O N S

1. Spots can be produced in Ciudad Juarez, no adaptation of colloquialisms or manner of speech is necessary for Nogales.
2. Execution should be as simple as possible, "small talk" distracts women from main message.
3. Campaign can start with Spot 2, which is credible and persuasive, also very uncomplicated. Spot 1 should be left out.
4. Other simple spots of an informative character should be added after Spot 2 : for instance, giving address of clinic, explain services available, explain pill use, perhaps explain IUD (without frightening).
5. Spot 4 (tubal ligation) can be broadcasted after audience has been exposed for some length of time to other messages.
Ideally, fears related to tubal ligation should be dispelled by talks offered by trained professionals (see page 15). Only with such backup will Spot 4 have sufficient success.
6. Spot 5 should be changed (another leisure activity, less dialog) and simplified. Can then be broadcasted.
7. Spot 6 should add that the operation is free. Emphasis on speed of attention at the clinic and speed of recovery is important (see Overall Evaluation).
8. Spot 7 lacks meaning in Nogales. Should be left out. The same holds true of Spots 8 and 9, which will antagonize men, not help women.
9. Other spots where male characters appear might be important in the long run. Should not be controversial,

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address perhaps advantages of family planning for one's children, such as the spot where father talks to son about education, which was not recorded and not tested).

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February 12, 1985

Mr. Anselmo Bernal
S&T/POP/IT Room 806
Office of Population
U.S. Agency for International Development
Washington, D.C. 20523

Re: Cooperative Agreement
DPE-3004-A-00-2018-00

Dear Al,

Attached is a copy of Evelyn Folch-Lyon's trip report covering her trip to Mexico from November 15 - 17, 1984.

Please indicate your approval of this report on the line below and return a copy of this letter to me for our project files. Once we have received your approval, we will distribute copies of the report to the AID Mission in Mexico and to other AID officials, as you request.

Thank you for your assistance.

Sincerely,
Cynthia P. Green
Cynthia P. Green
Project Director
Population Communication Services

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Enclosure

APPROVED:
Anselmo E Bernal
Signature

Feb. 22, 1985
Date