

USING SCHOOL TEACHERS AND THE LITERACY CORPS TO
RECRUIT NEW FAMILY LIFE PLANNING USERS

by

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INTRODUCTION

In two of Iran's *shahrestans* (urban regions) school teachers, Literacy Corps workers, village teachers and religious leaders were trained to provide family life planning information. The rate of use of family life planning facilities had increased by 115% after seven months, but the full potential of using such personnel could not be determined, owing to the lack of contraceptive services and to inadequate supervision of the personnel.

The following questionnaires, forms and procedures outline some aspects of the programme. The personnel involved were asked questions on their knowledge of, and attitudes toward population problems, family size and contraception (see Part One - Surveys). An orientation programme for all the personnel of the two urban areas was then held. After the one day session on population problems and contraceptives, all personnel received numbered and colour-coded leaflets for distribution in the adult population. The colour of the leaflets designated the individuals to whom they had been given. The leaflets, which described contraceptives gave locations of

family planning clinics and instructions to the individual to take the leaflet to the clinic if he wanted to practice family life planning, were then collected from the clinics at the end of each month. Results of the distribution of the leaflets were as follows:

Of the 306 school teachers, 56 had recruited 221 new contraceptive users in 7 months.

Of the 73 Literacy Corps workers, 14 had referred 35 people to the clinics; the project was, however, completed before the Literacy Corps had added Family Life Planning to its programme content.

Resulting from the surveys and discussions with school teachers and Literacy Corps workers, the "Directive to School Teachers and Literacy Corps Workers on Family Life Planning", the "Guidelines for School Teachers and Literacy Corps Workers on their Potential Contribution to Family Life Planning", a radio talk for Literacy Corps Workers and the "Instruction for School Teachers' Supervisors", were produced and are all included in this article (see Part Two - Action taken following the surveys). The directive, however, was never issued. Despite attempts to get the school teachers and Literacy Corps workers to use the Supervisors' forms, they would not do so.

PART ONE - SURVEYS

THE COLLECTION AND DISTRIBUTION OF INFORMATION

One of the major challenges of a communications programme is to channel messages through existing manpower. In most villages there are village leaders, granny midwives and often a religious leader. Governments are developing a network of schools, health centres and agricultural stations. Iran has conscripted young men and women to serve in the Literacy Corps, Health Corps and Extension and Development Corps. Questionnaires were constructed to help answer the following questions:

1. What are the responsibilities of the personnel and their characteristics?
2. What is the working relationship between different personnel?
3. How much are they exposed to the mass media?
4. What is their knowledge of and attitudes towards population growth and family life planning?
5. What role can personnel perform in a family life planning programme?
6. If they have received any training in family life planning, how effective has the training been and how should the training be improved?

There is both practical as well as theoretical value in obtaining answers to these questions. The surveys were used to accomplish the following objectives:

1. To improve and develop training of personnel.
2. To develop a plan of campaign for both leaders of opinion and for couples in reproductive age groups.
3. To determine how to use existing communications networks or build a new network for individuals such as midwives.
4. To prepare news articles and news releases for newspapers, radio stations and magazines.
5. To explore ways of having personnel work together to maximize their impact.

A. *SURVEY OF SCHOOL TEACHERS IN ISFAHAN PROVINCE AS POTENTIAL CONTRIBUTORS TO THE FAMILY LIFE PLANNING PROGRAMME*

A survey of 145 primary and secondary school teachers, whose names were chosen at random from the Isfahan Department of Education registration list attempted to furnish definite information. A total of 63 male and 50 female primary school teachers was interviewed and 26 males and 6 female secondary school teachers. Results are as follows:

1. *Characteristics of the Teachers*

All but 7 of the persons interviewed were married. The average size of family was just over 2 children. Most of the primary teachers had a high school diploma and the secondary teachers had first degrees. Most teachers had been working 5 to 8 years and had between 40 to 50 pupils in their current classes. Almost all of the teachers had been visited by a supervisor during the last month.

2. *Knowledge of Present Health Services*

The primary school female teachers lived within two kilometres of a health centre, but less than 15% of the males lived within 2 kilometres of one. This was because almost all female teachers lived in cities. Less than 15% had visited the health centre in the 6 months prior to the interview and over half could not remember when they had last visited one. Except for the occasional teacher who had told students or their parents about the health facilities, they did not mention any relationship with the health services.

3. *Exposure to Mass Media*

All but two teachers owned a radio. They listened most frequently to the news and musical programmes. Less than half listened to the Education Corps Programme. The programme "Woman and Life" was preferred by the women and "Science Frontiers" by the men.

All but one of the secondary school teachers read a newspaper; 72% of female and 89% of male primary school teachers read one of the major Iranian newspapers. About 85% of teachers read a magazine.

All the teachers received letters, averaging about one a week.

Less than ten of the teachers had access to a 16 mm. film projector and less than a fifth had access to loud-speakers.

4. *Present Family Life Planning Activities*

About one-fifth of all the teachers had received some family life planning training. One-half of the teachers had talked about contraceptives, primarily the oral pill, with other adults. Generally, the teachers were not embarrassed to bring up the subject with members of the same sex. At the time of the interview, less than 10% had leaflets on family life planning. All but 5 of the secondary school teachers believed family life planning should be added to their curriculum.

5. *Potential Participation in the Family Life Planning Programme*

Most teachers stated that they would be willing to provide contraceptives and actively recruit new users, most preferring, however, to make home visits than to conduct group meetings to inform couples about family life planning. (Detailed figures are given below.) All the teachers wanted additional family life planning educational materials, such as flip charts, posters and pamphlets. It was unanimously stated that the teachers wanted at least one day's training in family life planning.

Primary school teachers willing to supply oral pills to adults wanting them: Males: 62% Females: Less than 6%

Secondary school teachers willing to supply oral pills:
 Males: 64% Females: 50%

Secondary school teachers willing to supply condoms:
 Males: 92%

Teachers willing to make home visits to inform couples about family life planning:

 Males: 28% Females: 14%

Teachers willing to conduct group meetings to inform couples about family life planning:

 Males: 30% Females: 26%

6. *Attitudes towards Population and Family Life Planning*

The teachers believed that the population in Iran was growing too fast, but they mistakenly believed that the family life planning programme would stop population growth. The reasons stated by the teachers for this rapid growth were generally negative. In order of stated frequency, the teachers said large families resulted from: parents who wanted support in old age; the fear of the death of their children; lack of knowledge on how to prevent births; no alternative amusements; there were also some general references to ignorance and illiteracy.

Most teachers recommended the provision of better health care and contraceptives, along with an explanation of the benefits of family life planning in small families. The teachers considered the ideal family size for themselves to be three children. In fact, two-thirds of the teachers would sign pledges saying that they would not have more than three children.

7. *Knowledge of Population and Family Life Planning*

Surprisingly, the primary school teachers had a better knowledge of population than the secondary teachers. The teachers knew, within 4 million, the present population figures for Iran and were aware of the estimated birth rate of 45 to 50. They underestimated the time (24 years) it would take for the population to double. Teachers were not aware of the fact that the population would double even with an intensive family life planning programme. Three quarters of the teachers were aware that the Ministry of Education was concerned about the present population growth. Generally, the teachers believed that the family life planning programme would improve the health of families and slow population growth. Only 50% of females and 74% of males believed that Muslim leaders supported the family life planning programme.

Knowledge on contraception was generally very poor. The respondents knew most about the oral pill. A full 90% of

The female teachers knew that a woman starts taking the pill on the fifth day after menstruation but only 62% of the men knew this. They were wrong in thinking that women continued using the oral pill for longer periods of time than the IUD. Only 50% of women and 7% of men knew that the most common side effect of the IUD was bleeding. None of the teachers knew what percentage of women starting to use the IUD retained the device after a year. Only 6% of the teachers knew that men who had been sterilized could usually experience the same sexual enjoyment after the operation. For personal use, 49% of all teachers favoured the oral pill, 20% favoured the condom, 18% the IUD, 7% withdrawal and 6% sterilization. Three-quarters of the teachers were wrong in thinking that most couples coming to family life planning clinics wanted to space not stop pregnancies.

8. *Conclusions*

The school teachers interviewed were reached by most kinds of mass media. Their current family life planning activities were negligible, but they were willing to distribute contraceptives and actively recruit new users. Their knowledge of population figures was accurate, but they were not aware of the severity of the problem. They wanted small families for themselves, but their knowledge of contraceptives (except for oral pills) was very poor.

They wanted a training programme on population control and family life planning. With adequate directives from the Ministry of Education, the provision of educational material and with supervision, they have the potential to make a contribution to the family life planning programme.

B. *SURVEY OF LITERACY CORPS WORKERS AS POTENTIAL CONTRIBUTORS TO THE FAMILY LIFE PLANNING PROGRAMME*

Fifty boys and thirty girls were interviewed. Most of them had received some family life planning training. With few exceptions they were unmarried, high school graduates and had been working in the Literacy Corps for less than two

years. Most of the students had specialized in the Natural Sciences and about half had studied English as their foreign language.

1. *Characteristics of Workers*

All but 7 of the girls lived at home. Unlike the boys they were not able to provide assistance beyond the outskirts of the town and cities. They taught between 20 and 50 children how to read. Less than half the male, and about a third of the female workers were adults. The average size of adult classes was 15 students. All Literacy Corps workers had been visited by a supervisor within the past month and most of them within the last week. Those not living in Isfahan visited the city at least once a month.

2. *Knowledge of Present Health Centres*

At that time, their contact with the Health Corps was negligible. The distance to the nearest health team was greater than 5 kilometres for 86% of the boys and 60% of the girls. However, most of the Literacy Corps workers lived within 5 kilometres of a health centre and had visited a health centre within the last month. Although some of the workers stated that centres provided first aid, gave injections or took the sick to doctors, most of them did not specify any specific health function which they performed.

3. *Exposure to Mass Media*

All the Literacy Corps workers listened to the radio. The boys usually listened to the news, music and the Revolutionary Corps' programme, the girls to the Revolutionary Corps' programme, music and plays.

About 90% of the girls and 70% of the boys read one of the major Iranian daily newspapers; all the girls read magazines; "Woman of the Day" being preferred. Only 10% of the girls and half of the boys said that they read the monthly Literacy Corps magazine although a magazine called "Youth" was read by 12% of the workers.

All the workers had access to loud-speakers, but none had access to film projectors. Attendance at cinemas was rare; most of the workers had been to only one film during the last year. Most of the workers did not have access to a telephone.

4. Present Family Life Planning Activities

All but 3 of the girls and 7 of the boys had received some instruction on family life planning. However, they were not actively recruiting new users. In fact, less than half had ever brought up the subject. The boys never talked with the women about family life planning. None had received any family life planning literature nor had their supervisors ever discussed the subject.

5. Potential Participation in the Family Life Planning Programme

The response to questions pertaining to potential contribution to the programme was very favourable. Most of the workers said that they could make about 10 home visits a month and 80% of the boys believed that they could recruit 6 new oral pill users a month; the girls felt their potential contribution in distributing the pills to be about the same. The girls believed that they could recruit one IUD user per month.

The workers all wanted additional family life planning educational materials, such as flip charts, and pamphlets. Literacy Corps workers willing to distribute oral pills:

Males: 80%	Females: 80%
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Literacy Corps workers willing to distribute condoms:

Males: 80%	Females: 50%
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6. Attitudes towards Population and Family Life Planning

The workers interviewed were not aware of the consequences of the present rate of growth of the population and did not think that the current rate of growth was too fast. They

believed that couples had large families because parents wanted support in old age; parents feared the death of their children; they wanted help on their farms; they did not know how to prevent pregnancies; they enjoyed having children and there were few alternative amusements. The workers wrongly assumed that a family life planning programme would solve the population problem.

Two-thirds of the boys and half of the girls believed that the ideal family consisted of 3 children, or fewer. None of the girls wanted more than 4 children and only 4 boys wanted 5 children or more. All but 4 of the girls and half the boys would sign pledge to limit the size of their own family to two or three children.

7. Knowledge of Population and Family Life Planning

The Literacy Corps workers were able correctly to answer most of the questions on population; most of them knew the birth rate, death rate and rate of population growth.

Most workers had received some family life planning training, and were able to supply correct answers to questions on contraception.

8. Conclusions

The Literacy Corps workers interviewed were reached by most forms of mass media. Although currently not contributing at all to the family life planning programme, the majority of workers were quite willing to distribute contraceptives and recruit new users, but they felt that they needed more educational aids. The knowledge of the workers on population and contraception facts was good, but they were not aware of population problems.

Although over two-thirds of the workers wanted three children or fewer, programmes to use the Literacy Corps workers in family life planning programmes cannot be successful until all individuals are convinced of the need to have small families.

PART TWO - ACTION TAKEN FOLLOWING THE SURVEY

A SUGGESTED DIRECTIVE TO SCHOOL TEACHERS AND LITERACY CORPS WORKERS ON FAMILY LIFE PLANNING ISSUES BY THE PROVINCIAL DIRECTOR OF EDUCATION

His Imperial Majesty the Shahanshah, and the Minister of Education and Iranian leaders generally are concerned over the rapid rate of the country's population growth. Over 500,000 teachers will be needed within twenty years. Although there is rapid progress in the construction of schools and in training teachers, we are barely able to keep up with the population increase.

You can help. During meetings with parents, discuss family life planning. If each parent could make a decision on how many children he thinks is ideal, this would be very valuable. After couples make a decision on how many children they want, inform them about the oral pill and IUD. If out of every 10 parents you talk with, 2 or 3 go to the clinics, this will be encouraging.

Teachers can volunteer to distribute condoms so that some contraceptive supplies are available. You do not have to provide contraceptives, but this would be most useful.

For your older students the materials on the economic, health and social aspects of population growth, the explanation of the IUD and oral pill and the family life planning guide may be useful. We would like to know how you use these materials and any suggestions you may have on their improvement.

After two months there will be another meeting and awards will be given to teachers for outstanding contributions to family life planning.

GUIDELINES FOR SCHOOL TEACHERS AND LITERACY CORPS WORKERS IN THEIR POSSIBLE CONTRIBUTION TO FAMILY LIFE PLANNING

Purpose

You have been invited to this meeting because you are respected by the community in which you live. You can help married couples with family life planning. Here are some problems you can help solve:

1. Couples are having more pregnancies than they want -- almost 20% of all pregnancies are not wanted.
2. The health of the mother is in danger if she has too many pregnancies too close together -- this risk usually increases after the fourth or fifth pregnancy if the pregnancies are less than two years apart.
3. Many couples cannot afford the cost of providing proper education, housing, food and clothing for each additional child.
4. Many people do not know that the oral pills and IUD are safe, inexpensive, reliable and easy to use methods. Some women have side effects but these are not harmful and usually disappear.
5. Many couples do not think about how many children they want.

How you Can Help

You can talk with couples and help them make a decision on how many children they want and when to have them. The number of children a couple wants should be based on the needs of the children and parents. Parents who want a comfortable life for themselves with good education, housing, health, clothing and food for their children, usually have only 2 or 3 children. The decision on the number of children desired should be left to the parents to make, but each child should be a wanted child.

You will probably know between 50 to 150 couples who want help. If you inform 5 to 10 couples each month about family life planning and 2 or 3 go to the clinic, your contribution will be very valuable. Although some women have some bleeding or other side effects, the contraceptives are safe, reliable, and easy to use.

For women who do not want any more children, the IUD is preferable. The oral pill is safe and 100% effective if taken every day for 3 weeks and then stopped for a week.

We would like to know if you would be interested in distributing condoms. You will be paid one rial for each condom distributed.

Give the women the Special Introduction Slips. In two months we would like you to attend another meeting. Awards will be given to those persons making an outstanding contribution to family life planning.

Radio Talk for Literacy Corps Workers

Iran is developing very rapidly. There is impressive progress in Industry, Agriculture, Health, Education and Social Welfare. Unfortunately, the progress is not as rapid as it could be, due to rapid population growth. Many couples are having 6 or 7 children; many of these children are not being properly fed, clothed, housed and educated. With the present rate of growth, the population of Iran will double every 24 years. Over half of the population is under 17 years old.

There are 30,000 Educational Corpsmen teaching 1,200,000 pupils in 16,000 villages. Besides teaching people how to read, they are building roads, mosques, bath houses, schools and wells and planting trees. In spite of this enormous effort, we are not able to keep up with the population growth.

There are many reasons why 2 or 3 children in family are better than 5 or 6: two or three children are able to support their parents in old age better than 5 or 6 children who are

not as well educated; there is better health for the mother as well as the children in 2 or 3 child family; fewer children die these days than 10 years ago, so it is not necessary to have 5 or 6 children in order to have 2 or 3 survive; farmers do not have enough cultivable land to divide among 5 or 6 children; there are a lot of people moving from the rural areas to the cities, but they do not have sufficient training and education to get good jobs; industries do not have sufficient jobs for these people; two or three children can be better fed and clothed than 5 or 6 children.

You can talk with the Literacy Corps or go to the local Health Centre or Health Corps for more information. There are safe, reliable and easy-to-use methods of spacing or stopping pregnancies. Some methods have a few side effects, but they are not serious and usually disappear. "Two or three children is enough; ask the doctor for the loop or pill." (Slogan).

Farms for Supervisors of School Teachers

Najafabad and Shahreza have been chosen for a pilot project. Religious leaders, village heads, school teachers, agricultural extension agents, Literacy Corps workers, Health Corps workers and midwives will be trained to provide family life planning assistance. We want to find out which of these community leaders is most effective in accomplishing the following objectives:

1. To increase attendance at the family life planning clinic.
2. To encourage continuous use of contraceptives chosen.
3. To help couples make a decision on a definitive family size.
4. To lower the family size so that the children and parents have better health, education and living standards.
5. To expand the distribution of oral pills and condoms by midwives and, if possible, by school teachers and literacy corps workers.

From a survey we have conducted of school teachers we have found that they would be willing to cooperate in such a programme. The school teachers can contact the parents of the children they teach and give them the oral pill or IUD Introduction Leaflets. When these leaflets are brought to the clinic, we will be able to determine which teachers were most successful. Each teacher should be able to recruit 3 new users each month.

We would like you to visit all the teachers each month and complete the attached form. We have made the form as simple as possible; also attached are some questions you are to ask the teachers to determine their problems. At the end of the month we will review these problems with you.

We will be sending the teachers the following reading materials:

- *The Economic, Health and Social Aspects of Population Growth*
- *Family Life Planning: How to choose the ideal family size*
- *Results of Interviews with School Teachers*

We would like to know how the teachers make use of these materials with the parents or older students. We would specifically like to know how the materials should be revised.

Supervisor's Form

To be completed for Each School Teacher Each Month

Today's Date: _____

Teacher's Name: _____ Location: _____

Number of Students: _____ Age Group: _____

Number of parents that teacher talked to about family life
planning _____

Number of Leaflets distributed: _____ Oral pill: _____
IUD: _____ condom: _____

If teacher have distributed condoms: _____ New users: _____
Old users: _____

Discussion with parents or students:

Subject

The population problem

Ideal family size

Contraceptive methods

Other

No. of Parents contacted	No. of Students contacted
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Comments and Problems

Notes for Comments and Problems: Raise the following questions and record answer on the supervision form.

Motivation

1. Do you find talking to the men or women difficult?
2. How does the religious leader, village head, mid-wife, Health Corps or Literacy Corps worker help or hinder you? Explain.
3. Do you make home visits? Do you conduct group meetings?
4. What are the problems you have in talking about ideal family size?
5. What educational materials would you like (pamphlets, leaflets, flip charts, samples of methods, etc.)?
6. How should the educational material we have given you be changed?
7. At what age in school do students start thinking about an ideal family size and what are the problems?

Contraceptives

1. If distributing condoms, do people dislike your doing so?
2. If not distributing condoms, would you be willing to do so?
3. What are the problems in getting people to accept oral pills?
4. If there are women who want the IUD but will not go to the clinics, would you like us to arrange to have some one in the village insert IUDs?
5. What other methods are you trying, and what are the problems?

Evaluation of this Study

This study has indicated that the rate of use of contraceptives will increase, but the additional cost does not justify the small returns as there is a need for more distribution points for the oral pill, IUD and condoms. Unless the teachers are specifically directed to recruit one new user a month, or are given tangible rewards for each new user recruited, they will not be actively interested in the project.