VILLAGE LEADERS QUESTIONNAIRE

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. How old are you? \_\_\_\_\_\_\_\_\_\_\_
4. Are you married? Yes \_\_\_\_ No \_\_\_\_ Divorced \_\_\_\_
5. How many living children do you have? Boys \_\_\_\_ Girls \_\_\_\_
6. What is the population of the village you live in? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. How long have you been the village leader? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Would you describe some of your responsibilities and functions?
	1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	4. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
9. How often do you have meetings with the people in this village?

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mass Media

Radio

1. Do you have a radio Yes \_\_\_\_ No \_\_\_\_
	1. What is your favorite program? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	2. Do you listen to the Education Corps programs? Yes \_\_\_\_ No \_\_\_\_

 (1) Weekly program? All the time \_\_\_\_ Occasionally \_\_\_\_ Rarely \_\_\_\_

 (2) Daily program? All the time \_\_\_\_ Occasionally \_\_\_\_ Rarely \_\_\_\_

Newspaper

1. Do you read a newspaper? Yes \_\_\_\_ No \_\_\_\_
2. Which paper do you read? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Magazines

1. Do you read a magazine? Yes \_\_\_\_ No \_\_\_\_
2. Which magazine? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mail

1. Do you have mail service? Yes \_\_\_\_ No \_\_\_\_
2. About how many letters do you receive a month? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. How often is the mail delivered? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Loudspeakers

1. Do you have a loudspeaker? Yes \_\_\_\_ No \_\_\_\_

Film Strips

1. Do you have a film strip projector? Yes \_\_\_\_ No \_\_\_\_
2. Does it work? Yes \_\_\_\_ No \_\_\_\_
3. How often do you use it in a month? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Film Showings

1. When was the last film showing in your area? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. About how often are films shown? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone

1. Where is the nearest telephone? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Village Leader Participation

1. Is it possible for you to talk with women about contraceptives? Yes \_\_\_\_ No \_\_\_\_
2. If no, can you talk to men about contraceptives? Yes \_\_\_\_ No \_\_\_\_
3. Can you talk to both? Yes \_\_\_\_ No \_\_\_\_
4. What educational aids would you like?

Flip Chart \_\_\_\_ How many \_\_\_\_

Poster \_\_\_\_ How many \_\_\_\_

Film strips \_\_\_\_ How many \_\_\_\_

Pamphlets \_\_\_\_ How many \_\_\_\_

Pelvic models \_\_\_\_ How many \_\_\_\_

1. Would you rather make home visits or conduct group meetings to inform couples of family planning? Home visits \_\_\_\_ Meetings \_\_\_\_
2. How many home visits and group meetings for family planning purposes would you be willing to do in a month? Home visits \_\_\_\_ Meetings \_\_\_\_
3. Would you be willing to supply oral contraceptives to women after they have been given their first prescription by a doctor? Yes \_\_\_\_ No \_\_\_\_
4. How much would it cost for you and a loop acceptor to travel to the nearest clinic? \_\_\_\_\_\_\_\_\_\_\_
5. Would you be willing to take potential acceptors to the clinics? Yes \_\_\_\_ No \_\_\_\_
6. How many new loop, condom and oral contraceptive acceptors could you refer in a month?
7. Loop \_\_\_\_ Oral Contraceptives \_\_\_\_ Condoms \_\_\_\_ Don't Know \_\_\_\_
8. Would you like to have another day of training in family planning? Yes \_\_\_\_ No \_\_\_\_
9. How could the training you received be improved? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Attitude Questions

1. Do you believe married couples should be given an opportunity to have children when they want them? Yes \_\_\_\_ No \_\_\_\_ Don't Know \_\_\_\_
2. How many children do you think are ideal? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Do you think the population growth rate is too fast, too slow, or about right?

Too fast \_\_\_\_ Too slow \_\_\_\_ About right \_\_\_\_

1. Do you believe a family planning program will stop population growth?

Yes \_\_\_\_ No \_\_\_\_

1. What do you think is the major reason your adult public wants large families?
	1. To be provided for in old age \_\_\_\_
	2. Because some children will die and one or two more are needed \_\_\_\_
	3. Other (specific) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. What do you believe could be done so couples would want only two or three children?

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1. How many children do you think is ideal for your family? \_\_\_\_
2. Would you sign a pledge stating you plan to have only two or three children?

Yes \_\_\_\_ No \_\_\_\_