

FACT FINDING QUESTIONNAIRES  
QUESTIONNAIRE FOR PRIVATE DOCTORS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

A. Characteristics

1. How old are you?
2. When did you complete your medical training?
3. Do you have a specialty? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, what is it?
4. Do you work for the health service now? Yes \_\_\_\_\_ No \_\_\_\_\_
5. In what way?
6. What percentage of your time? \_\_\_\_\_
7. Do you work in a hospital? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, which hospital? \_\_\_\_\_
8. What part of the week? \_\_\_\_\_

B. Family Planning Activities

1. Do you currently give advice on family planning? Yes \_\_\_\_\_ No \_\_\_\_\_
2. How many cycles of oral contraceptives do you prescribe in a month? \_\_\_\_\_
3. How many babies do you deliver in a month? \_\_\_\_\_
4. Do you do a pelvic examination before you prescribe OC's? Yes \_\_\_\_\_ No \_\_\_\_\_
5. How much do you charge for an office visit? \_\_\_\_\_

6. How much do you charge for prescribing OC's? \_\_\_\_\_
7. How much do you charge to insert an IUD? \_\_\_\_\_
8. Have you ever done a vasectomy? Yes \_\_\_\_\_ No \_\_\_\_\_
9. Have you ever done a salpingectomy? Yes \_\_\_\_\_ No \_\_\_\_\_
10. If you were given free OC's, would you give free prescriptions to indigent women?  
Yes \_\_\_\_\_ No \_\_\_\_\_
11. If we were to pay the cost of an IUD for an indigent woman, how much would the cost be? \_\_\_\_\_
12. About how many women on your current caseload would accept the OC's if they were given free? \_\_\_\_\_
13. What contraindications do you cite for the OC's and the IUD?  
OC's \_\_\_\_\_  
IUD \_\_\_\_\_
14. Would you like to receive training in:  
IUD Insertion? Yes \_\_\_\_\_ No \_\_\_\_\_  
Vasectomy? Yes \_\_\_\_\_ No \_\_\_\_\_  
Salpingectomy? Yes \_\_\_\_\_ No \_\_\_\_\_

C. Potential Participation

1. Would you be willing to help with a family planning program? Yes \_\_\_\_\_ No \_\_\_\_\_
2. In what way would you be willing to help? \_\_\_\_\_  
\_\_\_\_\_
3. Would you go to a 1-day training course at the nearest Health Corps or Public Health

Station? Yes \_\_\_\_\_ No \_\_\_\_\_

4. Would your wife? Yes \_\_\_\_\_ No \_\_\_\_\_

5. Would you be willing to introduce a family planning worker at a group meeting?

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

6. Would you or your wife be willing to:

|  | <u>Doctor</u> | <u>His Wife</u> |
|--|---------------|-----------------|
| Distribute Leaflets                            | _____         | _____           |
| Distribute Condoms                             | _____         | _____           |
| Take someone to the clinic for family planning | _____         | _____           |

D. Mass Media

1. Radio

a. Do you have a radio? Yes \_\_\_\_\_ No \_\_\_\_\_

b. What is your favorite program? \_\_\_\_\_

c. Do you listen to Education Corps programs? Yes \_\_\_\_\_ No \_\_\_\_\_

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

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

2. Newspapers:

a. Do you read a newspaper? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Which paper do you read? \_\_\_\_\_

3. Magazines:

a. Do you read a magazine? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Which magazine? \_\_\_\_\_

## 4. Mail:

- a. Do you have a mail service? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. About how many letters do you get a month? \_\_\_\_\_
- c. How often is the mail delivered? \_\_\_\_\_

## 5. Loudspeakers:

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

## 6. Filmstrips:

- a. Do you have a filmstrip projector? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Does it work? Yes \_\_\_\_\_ No \_\_\_\_\_

## 7. Film Showings:

- a. When was the last film showing in your area? \_\_\_\_\_
- b. About how often are films shown? \_\_\_\_\_

## 8. Telephone:

- a. Where is the nearest telephone? \_\_\_\_\_

E. Knowledge Questions

- 1. What is the birth rate of Iran? \_\_\_\_\_
- 2. What is the death rate of Iran? \_\_\_\_\_
- 3. What is the population of Iran? \_\_\_\_\_
- 4. When will the population double? \_\_\_\_\_
- 5. Do most Muslim religious leaders approve of family planning? Yes \_\_\_\_\_ No \_\_\_\_\_
- 6. Can a male who has been sterilized have the same sexual experiences and enjoyment after the operation? Yes \_\_\_\_\_ No \_\_\_\_\_
- 7. What percentage of women with an IUD retain the device after one year? \_\_\_\_\_

8. What is the most common side effect of the IUD? \_\_\_\_\_
9. Which is more effective, the oral contraceptives or the IUD? \_\_\_\_\_
10. Does the IUD or the oral contraceptives have the highest continuous use rate? \_\_\_\_\_  
\_\_\_\_\_
11. On what day should women begin taking the pill after the onset of the menstrual period? \_\_\_\_\_
12. Is the Ministry of Education concerned about rapid population increase?  
Yes \_\_\_\_\_ No \_\_\_\_\_
13. Is the purpose of the Iran Family Planning Program mainly to improve health of mothers or to slow population growth? Health \_\_\_\_\_ Slow population growth \_\_\_\_\_
14. When is the "safe period" in a woman? \_\_\_\_\_
15. Which is the best method to stop childbirth? \_\_\_\_\_
16. When most couples come to the clinic, do they want to stop or space childbirth?  
Stop \_\_\_\_\_ Space \_\_\_\_\_
17. Will the population of Iran double even with an intensive family planning program?  
Yes \_\_\_\_\_ No \_\_\_\_\_

F. 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 \_\_\_\_\_

4. Do you believe a family planning program will stop population growth?  
Yes \_\_\_\_\_ No \_\_\_\_\_
5. What do you think is the major reason your adult public wants large families for?
- a. To be provided for in old age \_\_\_\_\_
  - b. Because some children will die and one or two more are needed \_\_\_\_\_
  - c. Other (specify): \_\_\_\_\_
6. What do you believe could be done so couples wanted only two or three children?  
\_\_\_\_\_
7. How many children do you think is ideal for your family? \_\_\_\_\_
8. Would you sign a pledge stating you plan to have only two or three children?  
Yes \_\_\_\_\_ No \_\_\_\_\_

VILLAGE LEADERS

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 leaders? \_\_\_\_\_
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?

Contact with Revolutionary CoLp

1. Is there a Literacy Corps in this village? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Would you approve of him (her) providing information on family planning?  
Approve \_\_\_\_\_ Disapprove \_\_\_\_\_
3. Is there a Health Corps Station or subcenter? Yes \_\_\_\_\_ No \_\_\_\_\_
4. When was the last time this village was visited by the Health Corps? \_\_\_\_\_
5. Is there a school teacher in this village? Yes \_\_\_\_\_ No \_\_\_\_\_

Mass Media1. Radio

- a. Do you have a radio? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. What is your favorite program? \_\_\_\_\_
- c. 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

- a. Do you read a newspaper? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Which paper do you read? \_\_\_\_\_

Magazines

- a. Do you read a magazine? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Which magazine? \_\_\_\_\_

Mail

- a. Do you have a mail service? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. About how many letters do you get a month? \_\_\_\_\_
- c. How often is the mail delivered? \_\_\_\_\_

Loudspeakers

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

Film Strips

- a. Do you have a film strip projector? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Does it work? Yes \_\_\_\_\_ No \_\_\_\_\_
- c. How often do you use it in a month? \_\_\_\_\_



Film Showings

- a. When was the last film showing in your area? \_\_\_\_\_
- b. About how often are films shown? \_\_\_\_\_

Telephone

- a. Where is the nearest telephone? \_\_\_\_\_

Participation

We would like to know in what way you could provide maximum participation in this program.

1. Would you rather spend a month recruiting 24 new family planning acceptors or obtain two new acceptors each month? Yes \_\_\_\_\_ No \_\_\_\_\_
2. Is it possible for you to talk with women about contraceptives? Yes \_\_\_\_\_ No \_\_\_\_\_  
If no, can you talk to men? Yes \_\_\_\_\_ No \_\_\_\_\_  
Can you talk to both? Yes \_\_\_\_\_ No \_\_\_\_\_
3. What educational aids would you like?

|               |       |          |       |
|---------------|-------|----------|-------|
| Flip chart    | _____ | How many | _____ |
| Posters       | _____ | How many | _____ |
| Film strips   | _____ | How many | _____ |
| Pamphlets     | _____ | How many | _____ |
| Pelvic models | _____ | How many | _____ |
4. Would you rather make home visits or conduct group meetings to inform couples of family planning? Home visits \_\_\_\_\_ Meetings \_\_\_\_\_
5. How many home visits and group meetings for family planning purposes would you be willing to do in a month? Home visits \_\_\_\_\_ Meetings \_\_\_\_\_
6. Would you be willing to supply oral contraceptives to women after they have been given

- their first prescription by a doctor? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Would you be willing to distribute condoms? Yes \_\_\_\_\_ No \_\_\_\_\_
8. How much would it cost if we paid your travel expenses and those of a loop acceptor to take her to the nearest clinic? \_\_\_\_\_
9. Would you be willing to take potential acceptors to the clinics? Yes \_\_\_\_\_ No \_\_\_\_\_
10. How many new loop, condom and oral contraceptive acceptors could you refer in a month?
- |         |       |            |       |
|---------|-------|------------|-------|
| Loop    | _____ | OC's       | _____ |
| Condoms | _____ | Don't know | _____ |
11. Would you like to have another day of training in family planning?
- Yes \_\_\_\_\_ No \_\_\_\_\_
12. How could the training you received be improved? \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

### Attitude Questions

1. Do you believe married couples should be given an opportunity to have children when they want them? Yes \_\_\_\_\_ No \_\_\_\_\_
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 \_\_\_\_\_

4. Do you believe a family planning program will stop population growth?  
Yes \_\_\_\_\_ No \_\_\_\_\_
5. What do you think is the major reason your adult public wants large families?
- a. To be provided for in old age.
  - b. Because some children will die and one or two more are needed.
  - c. Other (specify): \_\_\_\_\_  
\_\_\_\_\_
6. What do you believe could be done so couples would want only two or three children?  
\_\_\_\_\_  
\_\_\_\_\_
7. How many children do you think is ideal for your family? \_\_\_\_\_
8. Would you sign a pledge stating you plan to have only two or three children?  
Yes \_\_\_\_\_ No \_\_\_\_\_

QUESTIONNAIRE FOR HEALTH CORPS DOCTORS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

A. Characteristics

1. How old are you? \_\_\_\_\_

2. When did you complete your medical training? \_\_\_\_\_

3. How long have you been working as a Health Corps doctor? \_\_\_\_\_

B. Health Corps Activities

1. How many patients do you see in a day? \_\_\_\_\_

2. How many babies did you deliver in a month? \_\_\_\_\_

3. Do women who have attempted an abortion come to you? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how many did you see last month? \_\_\_\_\_

4. Have you been asked to perform an abortion? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, how many times last month? \_\_\_\_\_

5. How many midwives have you trained? \_\_\_\_\_

6. How can the midwives be used to recruit new acceptors? \_\_\_\_\_

7. How often do you see the Literacy Corps? \_\_\_\_\_

8. Do you encourage the Literacy Corps to recruit new family planning acceptors?

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

9. How do your assistants help in family planning? \_\_\_\_\_

\_\_\_\_\_

C. Family Planning Activities

1. Do you wait until a mother asks you for advice on family planning or do you offer advice? Wait until asked \_\_\_\_\_ Offer \_\_\_\_\_
2. Do most women want to space or stop childbirth? Stop \_\_\_\_\_ Space \_\_\_\_\_
3. Would women allow you to insert a loop? Yes \_\_\_\_\_ No \_\_\_\_\_
4. Do you do a pelvic examination before you prescribe OC's? Yes \_\_\_\_\_ No \_\_\_\_\_
5. What contraindications do you use for the OC's? \_\_\_\_\_  
\_\_\_\_\_  
For the IUD? \_\_\_\_\_  
\_\_\_\_\_
6. Could you perform a vasectomy if a man wanted the operation? Yes \_\_\_\_\_ No \_\_\_\_\_
7. Could you perform a salpingectomy? Yes \_\_\_\_\_ No \_\_\_\_\_
8. If a woman had complications while using a loop, would she allow you to remove it?  
\_\_\_\_\_
9. How many cycles of OC's do you give at one time? \_\_\_\_\_
10. If a woman has to walk more than an hour to come to the clinic, do you give her more more cycles? Yes \_\_\_\_\_ No \_\_\_\_\_
11. If distribution points for OC's were set up in the villages, who would be the best person to do the distributing? \_\_\_\_\_
12. Would your loop acceptances increase if there was a female doctor visiting your Health Center once a month? Yes \_\_\_\_\_ No \_\_\_\_\_
13. About how many more women would come? \_\_\_\_\_
14. Do you think that vasectomies and salpingectomies should be offered by the family

planning program? Yes \_\_\_\_\_ No \_\_\_\_\_

15. What are some of your biggest obstacles in promoting family planning?

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16. How should the training you received be improved? \_\_\_\_\_

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17. Would you like to receive more training? Yes \_\_\_\_\_ No \_\_\_\_\_

D. Mass Media

1. Radio:

a. Do you have a radio? \_\_\_\_\_

b. What is your favorite program? \_\_\_\_\_

c. Do you listen to Education Corps programs? Yes \_\_\_\_\_ No \_\_\_\_\_

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

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

Newspapers:

a. Do you read a newspaper? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Which paper do you read? \_\_\_\_\_

Magazines:

a. Do you read a magazine? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Which magazine? \_\_\_\_\_

Mail:

a. Do you have a mail service? Yes \_\_\_\_\_ No \_\_\_\_\_

- b. About how many letters do you get a month? \_\_\_\_\_
- c. How often is the mail delivered? \_\_\_\_\_
5. Loudspeakers:
- a. Do you have a loudspeaker? Yes \_\_\_\_\_ No \_\_\_\_\_
6. Film Strips:
- a. Do you have a film strip projector? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Does it work? Yes \_\_\_\_\_ No \_\_\_\_\_
- c. How often do you use it in a month? \_\_\_\_\_
7. Film Showings:
- a. When was the last film showing in your area? \_\_\_\_\_
- b. About how often are films shown? \_\_\_\_\_
8. Telephone:
- a. Where is the nearest telephone? \_\_\_\_\_
- E. Knowledge Questions
1. What is the birth rate of Iran? \_\_\_\_\_
2. What is the death rate of Iran? \_\_\_\_\_
3. What is the population of Iran? \_\_\_\_\_
4. When will the population double? \_\_\_\_\_
5. Do most Muslim religious leaders approve of family planning? Yes \_\_\_\_\_ No \_\_\_\_\_
6. Can a male who has been sterilized have the same sexual experiences and enjoyment after the operation? Yes \_\_\_\_\_ No \_\_\_\_\_
7. What percentage of women with an IUD retain the device after one year? \_\_\_\_\_

8. What is the most common side effect of the IUD? \_\_\_\_\_
9. Which is more effective, oral contraceptives or the IUD? \_\_\_\_\_
10. Does the IUD or oral contraceptives have the highest continuous use rate? \_\_\_\_\_
11. On what day should women begin taking the pill after the onset of the menstrual period?  
\_\_\_\_\_
12. Is the Ministry of Education concerned about rapid population increase?  
Yes \_\_\_\_\_ No \_\_\_\_\_
13. Is the purpose of the Iran Family Planning Program mainly to improve health of mothers  
or to slow population growth? Health \_\_\_\_\_ Slow population growth \_\_\_\_\_
14. When is the "safe period" in a woman? \_\_\_\_\_
15. Which is the best method to stop childbirth? \_\_\_\_\_
16. When most couples come to the clinic, do they want to stop or space childbirth?  
Stop \_\_\_\_\_ Space \_\_\_\_\_
17. Will the population of Iran double even with an intensive family planning program?  
Yes \_\_\_\_\_ No \_\_\_\_\_

F. 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 \_\_\_\_\_
4. Do you believe a family planning program will stop population growth?



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

5. What do you think is the major reason the adult public wants large families:
- a. To be provided for in old age \_\_\_\_\_
  - b. Because some children will die and one or two more are needed \_\_\_\_\_
  - c. Other (specify): \_\_\_\_\_
6. What do you believe could be done so couples wanted only two or three children?
- \_\_\_\_\_
7. How many children do you think is ideal for your family? \_\_\_\_\_
8. Would you sign a pledge stating you plan to have only two or three children?
- Yes \_\_\_\_\_ No \_\_\_\_\_

QUESTIONNAIRE FOR FULL-TIME FIELDWORKERS

Name: \_\_\_\_\_

Address: \_\_\_\_\_

A. Characteristics

1. How old are you? \_\_\_\_\_
2. What was the last year of education you completed? \_\_\_\_\_
3. Are you married? Yes \_\_\_\_\_ No \_\_\_\_\_ Divorced \_\_\_\_\_
4. How many children do you have? Boys \_\_\_\_\_ Girls \_\_\_\_\_
5. Special training? \_\_\_\_\_
6. How long have you been working in family planning? \_\_\_\_\_

B. Present Family Planning Activities

1. Have you received any training in family planning? Yes \_\_\_\_\_ No \_\_\_\_\_
2. If yes, how many hours or days? \_\_\_\_\_
3. What part of this training program was most useful? \_\_\_\_\_
4. What should be added to the program? \_\_\_\_\_  
\_\_\_\_\_
5. What percentage of your working day do you now spend on family planning? \_\_\_\_\_
6. How much time do you spend at clinics? \_\_\_\_\_
7. How much time do you spend on home visits? \_\_\_\_\_

8. Please supply the following information on EDUCATIONAL AIDS:

| Items                     | Do you have: |    | How many | Do you use: |    | Would you like: |    | How many |
|---------------------------|--------------|----|----------|-------------|----|-----------------|----|----------|
|                           | Yes          | No |          | Yes         | No | Yes             | No |          |
| Film Charts               |              |    |          |             |    |                 |    |          |
| Film Strips               |              |    |          |             |    |                 |    |          |
| Posters                   |              |    |          |             |    |                 |    |          |
| Pamphlets                 |              |    |          |             |    |                 |    |          |
| Pelvic Models             |              |    |          |             |    |                 |    |          |
| Other Items:<br>(Specify) |              |    |          |             |    |                 |    |          |

9. How many new acceptors did you recruit last month? \_\_\_\_\_

What is the total? \_\_\_\_\_

10. About how many loop referrals did you make last month? \_\_\_\_\_

11. Do you hold group meetings with women? Yes \_\_\_\_\_ No \_\_\_\_\_

12. About how many home visits can you make in a day? \_\_\_\_\_

13. How much time do you spend during a visit? \_\_\_\_\_

14. Which method do you stress? Loop \_\_\_\_\_ OC's \_\_\_\_\_

15. How many home visits should be required a month? \_\_\_\_\_

16. How many new acceptors should there be a month? \_\_\_\_\_

17. About how many visits a month do you make to women who have previously accepted family planning? \_\_\_\_\_

18. How many hours a day do you work? \_\_\_\_\_

19. What people or organizations in your area do you use to help you in your work?

\_\_\_\_\_

\_\_\_\_\_

20. What is done to assist you? \_\_\_\_\_

\_\_\_\_\_

21. What are your major working problems? \_\_\_\_\_  
\_\_\_\_\_

C. Population and Family Planning Knowledge

1. What is the birth rate of Iran? \_\_\_\_\_
2. What is the death rate of Iran? \_\_\_\_\_
3. What is the population of Iran? \_\_\_\_\_
4. When will the population double? \_\_\_\_\_
5. Do most Muslim religious leaders approve of family planning? Yes \_\_\_\_\_ No \_\_\_\_\_
6. Can a male who has been sterilized have the same sexual experiences and enjoyment after the operation? Yes \_\_\_\_\_ No \_\_\_\_\_
7. What percentage of women with an IUD retain the device after one year? \_\_\_\_\_
8. What is the most common side effect of the IUD? \_\_\_\_\_
9. Which is more effective, the oral contraceptives or the IUD? \_\_\_\_\_
10. Does the IUD or the oral contraceptives have the highest continuous use rate?  
\_\_\_\_\_
11. On what day should women begin taking the pill after the onset of her menstrual period?  
\_\_\_\_\_
12. Is the Ministry of Education concerned about rapid population increase?  
Yes \_\_\_\_\_ No \_\_\_\_\_
13. Is the purpose of the Iran Family Planning Program mainly to improve health of mothers or to slow population growth? Health \_\_\_\_\_ Slow population growth \_\_\_\_\_
14. When is the "safe period" in a woman? \_\_\_\_\_

15. Which is the best method to stop childbirth? \_\_\_\_\_
16. When most couples come to the clinic, do they want to stop or space childbirth?  
Stop \_\_\_\_\_ Space \_\_\_\_\_
17. Will the population of Iran double even with an intensive family planning program?  
\_\_\_\_\_

D. Mass Media

1. Radio

- a. Do you have a radio? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. What is your favorite program? \_\_\_\_\_
- c. Do you listen to Education Corps programs? Yes \_\_\_\_\_ No \_\_\_\_\_
- (1) Weekly Program? All the time \_\_\_\_\_ Occasionally \_\_\_\_\_ Rarely \_\_\_\_\_
- (2) Daily Program? All the time \_\_\_\_\_ Occasionally \_\_\_\_\_ Rarely \_\_\_\_\_

2. Newspapers

- a. Do you read a newspaper? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Which paper do you read? \_\_\_\_\_

3. Magazines

- a. Do you read a magazine? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. Which magazine? \_\_\_\_\_

4. Mail

- a. Do you have a mail service? Yes \_\_\_\_\_ No \_\_\_\_\_
- b. About how many letters do you get a month? \_\_\_\_\_
- c. How often is the mail delivered? \_\_\_\_\_

5. Loudspeakers

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

6. Film Strips

a. Do you have a film strip projector? Yes \_\_\_\_\_ No \_\_\_\_\_

b. Does it work? Yes \_\_\_\_\_ No \_\_\_\_\_

c. How often do you use it in a month? \_\_\_\_\_

7. Film Showings

a. When was the last film showing in your area? \_\_\_\_\_

b. About how often are films shown? \_\_\_\_\_

8. Telephone

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

RELIGIOUS LEADERS

1. Name \_\_\_\_\_
2. Address \_\_\_\_\_
3. How old are you? \_\_\_\_\_
4. When was your last year of school? \_\_\_\_\_
5. Are you married? Yes \_\_\_\_\_ No \_\_\_\_\_
6. How many children do you have? Total \_\_\_\_\_ Boys \_\_\_\_\_ Girls \_\_\_\_\_
7. We would like to know what you think of married couples who want to space or stop childbirth. Do you approve or disapprove of couples doing something to plan their births? Approve \_\_\_\_\_ Disapprove \_\_\_\_\_
8. If you approve, why? \_\_\_\_\_
9. If you disapprove, why? \_\_\_\_\_
10. What statements do you know of that support family planning in the Koran?
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
11. Has anyone ever asked you if the Muslim religion supports or disapproves of family planning? Yes \_\_\_\_\_ No \_\_\_\_\_ Uncertain \_\_\_\_\_
12. Do you believe most Muslims support family planning programs?  
Yes \_\_\_\_\_ No \_\_\_\_\_ Uncertain \_\_\_\_\_
13. Would it be helpful if you had a signed Fatwa supporting family planning?  
Yes \_\_\_\_\_ No \_\_\_\_\_

What Imam would provide the greatest prestige to a statement if he were to sign a Fatwa?

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_

14. In what way could you help the family planning program?

15. Would you make supporting statements during your services? Yes \_\_\_\_\_ No \_\_\_\_\_

16. Do you provide council to couples seeking help in family planning problems?

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

Would you provide family planning counseling? Yes \_\_\_\_\_ No \_\_\_\_\_

17. Would you like to have one day training in family planning? Yes \_\_\_\_\_ No \_\_\_\_\_