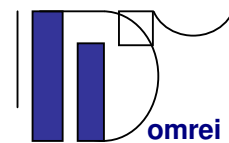


**Ministry of Health
Essential Drugs Bureau**

**Impact Survey
of the Contraceptive Promotion Campaign**

Cambodia, May 2007

**Ian Ramage and Gabriel Pictet
Domrei Research and Consulting**



**Financial Cooperation between Royal Kingdom of Cambodia and Germany
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Executive summary

Following the findings and recommendation of the 2004 contraceptive survey,¹ EDB, with KFW funding, contracted Cambodia Health Education Media Service (CHEMS) to develop and broadcast six television and eight radio spots covering different aspects of contraception.

The objectives of the campaign were to strengthen women's confidence in modern contraceptive methods, to inform women of the side effects and benefits associated with modern contraceptive methods, to empower the women with knowledge about contraceptive methods and dispel misunderstandings about side effects of the modern contraceptive methods - particularly for the IUD.

Domrei conducted an impact survey to enable MoH/EDB, GFA and partners to understand how exposure to the campaign has affected respondents' knowledge, attitudes and perception of these methods. Domrei designed the survey to capture the media habits of women of reproductive age in the four sample provinces.

Survey results demonstrate that while the campaign had a positive effect on awareness and knowledge on modern contraception, coverage can be improved by a more judicious choice of radio and TV stations. The survey findings will help maximise coverage of future media campaigns on family planning by selecting more appropriate media channels and broadcast schedules.

1) Campaign impact on women of reproductive age

- The media campaign had a positive and statistically significant impact on knowledge and awareness of contraception, in particular for the IUD for women who were exposed to the campaign.
- There is a sustained demand from women for more information on the various contraceptive methods.

2) Mass media habits and exposure to the campaign

- Among the 283 respondents, 130 (46 percent) were exposed to the campaign. The coverage rate in the four sample provinces can be estimated at 46 percent, with a 95 percent confidence interval of 40-52 percent.
- Younger and wealthier women were more exposed to the campaign than poorer and older women were. This result is due to the choice of radio and TV station for the campaign.
- Two radio stations were selected, National Radio (FM 96) and FM 99. These are the preferred radio station for, respectively, only 5 and 2 percent of women.
- TV5 is the most popular television channel, with a market share of 42 percent. Three television channels were selected: CTN, TV9 and TVK, with market shares of, respectively, 30, 12 and 4 percent.
- Because of the poor choice of radio stations, only 12 percent of women remember hearing at least one of the eight radio spots.
- Forty percent of the women remember seeing at least one of the six television spots.
- CTN is mostly watched by younger women: women aged 15 to 24 were twice more likely to watch CTN than older women. As a result, younger women were more exposed to the campaign than older women were. This is unfortunate, as the campaign emphasised long-term methods – IUD, sterilisation – that are more appropriate for older women.

¹ Ramage and Pictet, *Family Planning Survey: Contraception among Married Women in Cambodia*, Domrei, MoH, KFW Development Bank, April 2005.

3) Recommendations

1. Select broadcast channels and schedules on the basis of a more detailed analysis of the media habits and respondent profiles of the target group.
2. Re-evaluate the different spots based on qualitative responses to the spots (not reported here) and how well they were remembered.
3. Develop some new spots to better target aspects of knowledge and awareness and based on women's responses during the survey.
4. Pre-test these new spots more rigorously to ensure they are well liked, easily remembered and entertaining for women.
5. Develop media profiles with viewer/listener preferences for different groups of women – more birth children, older age groups, poorer women.
6. Use these profiles and the results of this survey to develop a broadcasting strategy including channels and times for broadcasting.
7. Develop a broader campaign structure that includes different types of media like the Village Health Volunteer network (for peer education) and cheap printed materials with more detailed information.
8. Design and distribute paper flyers and posters using pictures from the TV spots to inform women more specifically on the side effects of each method.
9. Co-ordinate the timing of the second campaign carefully with the roll-out of IUD insertion training for midwives at health centres to ensure trained providers are available to meet any increased demand for contraception.
10. Broadcast the second campaign for a longer period than the first (3 months) to allow more women to be exposed to the messages.

Acknowledgements

Domrei Research and Consulting thanks its field staff for its dedication and excellent work.

Ms. Chhy Sophearith

Ms. Ke Bopha

Ms. Ly Sreypeou

Ms. Mam Lay

Ms. Nhim Sok Chandara

Ms. Phou Maly

Ms. Prum Thongdy

Ms. Un Yaran

The survey was coordinated and supervised by Ian Ramage and the Domrei Research Coordinator, Chhy Sophearith.

Ian Ramage and Chhy Sophearith also designed the survey instruments and trained the field staff. Mr Sokha translated the questionnaire and, with Ms Ke Bopha and Kim Sarun, entered the data.

Gabriel Pictet managed and analysed the survey data, and, with Ian Ramage, prepared the draft report, with inputs from the Domrei research team.

Domrei would also like to thank the two hundred and eighty three respondents who took the time to answer our questions.

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Abbreviations

IEC	Information, Education, Communication
IUD	Intra-uterine device
MoH	Ministry of Health
EDB	Essential Drugs Bureau

Introduction

The promotion campaign on the use of contraceptive methods was conducted by CHEMS and monitored by Domrei Research and Consulting. CHEMS developed and broadcast six television and eight radio spots. These spots covered different aspects of contraception like the benefits, real side effects and how to use contraception correctly (Pill, Injection, IUD, and Sterilization).

The objectives of the campaign were to strengthen women's confidence in modern contraceptive methods, to inform the women of the side effects and benefits associated with modern contraceptive methods, to empower the women with knowledge about contraceptive methods and dispel misunderstandings about side effects of the modern contraceptive methods (particularly for the IUD).

At the end of the broadcasting, Domrei conducted an impact survey. Survey results will enable MoH/EDB, GFA and partners to understand how exposure to the campaign has affected respondents' knowledge, attitudes and perception of these methods.

The specific objectives of the survey were to collect and analyse data from a random sample of ~250 women of reproductive age (15-45 years) to assess:

- Coverage achieved by the campaign;
- Impact of the promotion campaign on knowledge, attitudes and perception about contraception;
- Habits and characteristics of women of reproductive age associated with the mass media.

The media campaign was short (December 25, 2006 to March 27, 2007) and the frequency of the broadcasting was also limited. We therefore did not expect the audience to show marked behaviour change. However, the campaign was expected to inform women about modern contraceptive methods. The survey also informs us about the characteristics and habits of the women of reproductive age with mass media.

Methods, data and limitations

Method

Sampling and Locations

We conducted the survey in four provinces: Kandal, Takeo, Kampong Speu and Kampong Chhnang. We then randomly selected two communes in each province, and two villages in each commune (total 16 villages).

Teams achieved systematic household sampling by requesting participation from all eligible women in randomly selected households in each village. The sample size from each village was 16 women of reproductive age.

Teams selected a random starting point from a sketch map of the village. The team calculated the sampling interval by dividing the total number of households in the village by the required sample (16). Teams chose the house nearest the starting point as the first house and used the sampling interval to select additional households until they reached the required sample.

The sample was designed to meet the survey objectives. The required sample is women of reproductive age from 15-45 years old. Domrei field researchers interviewed 16 women of reproductive age in each village. The total sample size objective was 250 women of reproductive age.

Instrument design

Domrei designed a structured questionnaire to record interview data. We separated the instrument into four sections. The first section captures the respondents' socio-demographic background. The second section covers the respondent's exposure to media generally, her viewing habits and preferences. The third section covers the respondents' awareness and knowledge on contraception. The fourth section covers exposure to the contraception campaign. For women who have been exposed to the campaign, this section will cover some feedback on the campaign broadcasts and what they say they have learned from the campaign. A short literacy test administered at the end of the interview assesses the respondents' reading skills. The Khmer and English versions of the instrument are in the annexes to this report.

Data collectors

Domrei recruited and trained eight experienced data collectors. The field staff recruited had all successfully worked on many surveys with Domrei in the past, and all have excellent experience in data collection. This is important to note, as the budget was insufficient to mobilise field supervisor to lead the teams or field editors to check the data. Interviewers therefore edited each other's work. All field staff had previously agreed to and signed the Domrei ethical guidelines before starting of their contracts.

Interviewer training and Pre-test

Training was conducted over two days at the Domrei office. Training covered the following topics:

- Introduction to the promotion campaign - including the campaign objectives and the spots that were broadcast;
- Survey objectives;
- Instrument review;
- Interview role plays;
- Research ethics;
- Instrument pre-test;
- Instrument revision;
- Fieldwork planning.

All interviewers were given copies of the radio and television spots and scripts for the spots several days before the training. All spots were played several times each during the training and in the breaks. This was done to ensure that interviewers were very familiar with the 14 spots in the campaign and could then recognise them when women described contraceptive advertising they had seen or heard.

Two pre-tests were carried out, both in Phnom Penh. Forty women participated in these pre-tests. The pre-tests were held to test the instrument and importantly to compile a complete list of radio and television stations for use in the survey instrument.

Data collection

Four teams were set up for data collection. Each team consisted of two female interviewers. Each team went to a different province and collected data from the four sample villages in that province.

All questionnaires were checked before leaving the village and in the case of any missing data, the interviewer returned to the household to ask the women the question and complete the answer. The four teams collected data over four to five days before returning to Phnom Penh.

Data processing and validation

Domrei entered the survey data on a tailor-made Access database that included legal values for all numerical fields and automatic skips macros for all filter questions. A Domrei co-director ran queries to identify records with inconsistent or counter-intuitive data and checked every suspect record personally.

Particular care was given to assess exposure data. Respondent's exposure to the radio and TV spots was determined, for each media, by two questions:

- 1) in the last four months, did you hear / see advertising on contraception
- 2) Can you please describe it? (open-ended answer).

Based on the respondent's answer, the interviewer coded exposed or not exposed (q60 for radio and q68 for television).

A Domrei Research Director checked the interviewer's assessment of exposure for every questionnaire. These were checked against the original answers in the questionnaires. This checking resulted in the recoding of five questionnaires. Three were recoded from exposed to unexposed (all for radio spots) as the respondent's description of the ad were too general to be related to this campaign rather than another campaign. Two were recoded from unexposed to exposed, as elements of the spot description matched elements of the campaign spots. We are therefore confident that our data does not over-estimate exposure to the campaign.

Data analysis

We analysed the quantitative data on STATA, and present the statistics in graphic or tabular form. Comparisons that are statistically significant at 95 percent are noted with asterisks (*). Confidence intervals at 95 percent are presented when appropriate. Odds ratios are used to demonstrate the likelihood of exposure to the campaign for different groups of women. The confidence intervals of the odds ratios are also presented.²

Data

Figure 1 and Table 1 describe the sample data. Out of the 296 randomly selected households, 283 interviews were completed. This is a very acceptable response rate (96%), and therefore, we do not expect non-response to be a source of bias.

² The odds ratio is not statistically significant if its confidence interval includes 1 (one)

Response rates and sample size by province

296 sampled households 283 completed interviews

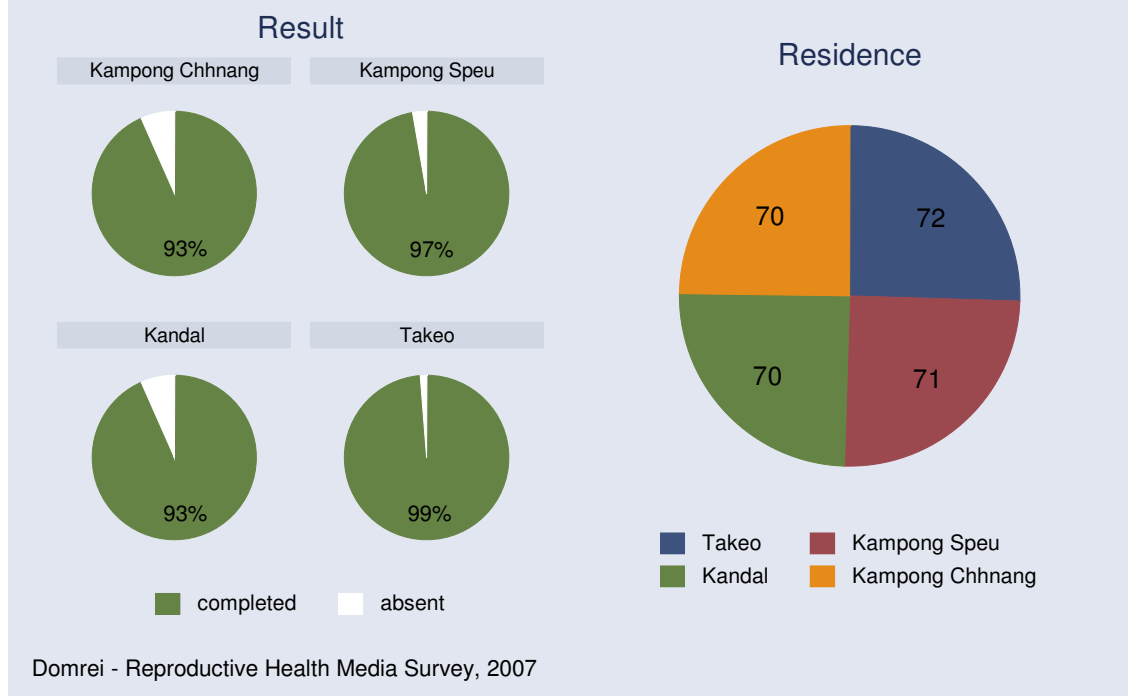


Figure 1: Response rates and sample size by province

Table 1: Sample size by province and village

Village	observations (n)	Village	observations (n)
Kampong Chhnang		Kandal	
Chong Kaoh	18	Chrouy Ampil	19
Kandal	18	Preaek Thum	17
Sala Lekh Pram	18	Trapeang Chrey	16
Chan Kiek	16	Chong Khsach	18
Total	70	Total	70
Kampong Speu		Takeo	
Krang Slaeng	17	Sdau Aem	18
Krang Krouch	18	Trapeang Trayueng	18
Ti Muoy	18	Ta Buor	18
Ti Pram	18	Ta Mouk	18
Total	71	Total	72
Total completed interviews			283

Source: Domrei - Reproductive Health Media Survey, 2007

Limitations

Domrei designed and conducted this survey with an extremely tight budget and time frame. It was therefore impossible to survey poorer, more remote provinces. This is unfortunate because the contraceptive media campaign aimed to reach the rural poor.

Budget constraints also forced us to limit the sample size to ~250 women. This means that there are some random effects (see for example the age structure). While these random effects do not affect the overall results, we would recommend a larger sample size for the next media survey.

Our sample is not representative of Cambodia as a whole: it is only representative of the four provinces taken separately (results presented here are not weighted by province). The wealth indicators show that, on average, the women interviewed for this survey come from relatively wealthier households. For example, 75 percent of the households have television sets, which is higher than the national average. As a result, generalisation of media habits to the general population would lead to an overestimation of exposure to TV.

Survey Results

We start by presenting the social and demographic characteristics of the sample. We then describe general media habits (radio and television), and how these two media compare with other IEC methods.

Respondent's background

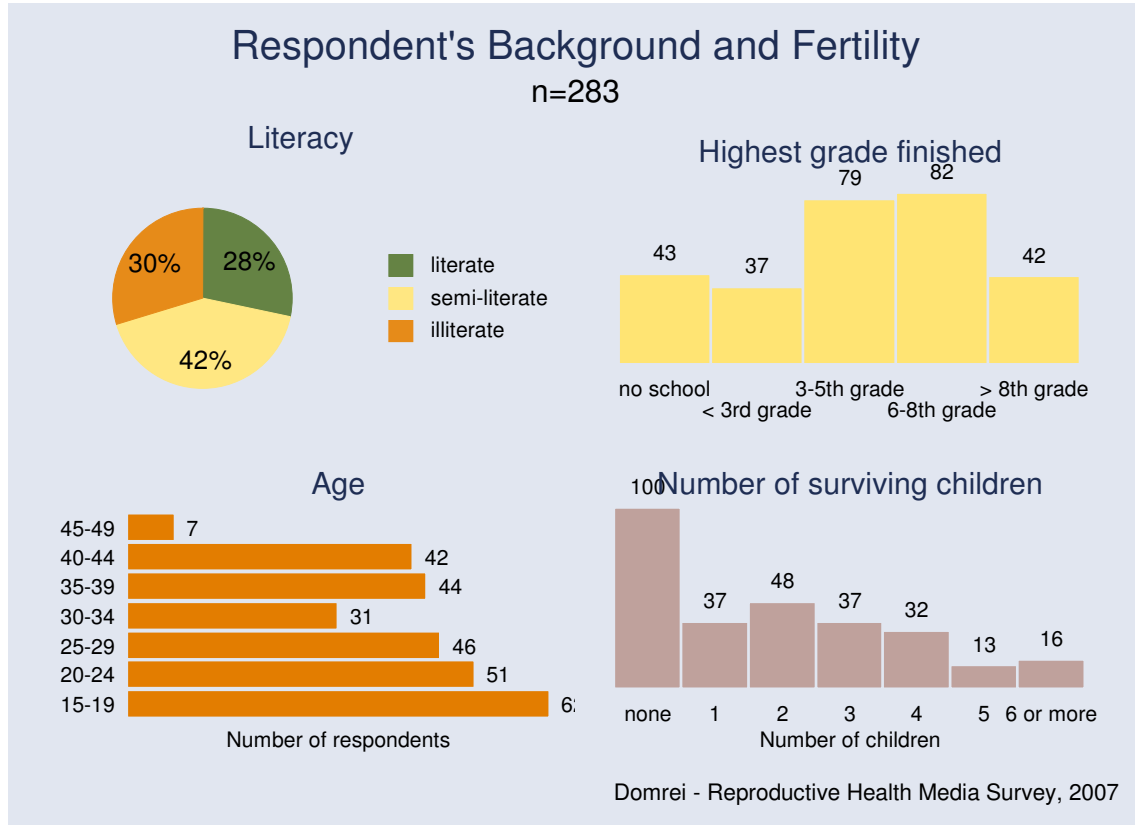


Figure 2: Respondents socio-demographic characteristics

The figures above describe the socio-demographic characteristics of the sample. A quarter (28 percent) of the women interviewed is literate. Average age is 28 years (15-45). Forty percent of respondents are under 25. Twenty-nine percent of the respondents are single, 65 percent are married and less than four percent are separated, divorced or widowed. One hundred respondents have no children. Those that do have children have, on average three children, with a maximum of nine children.

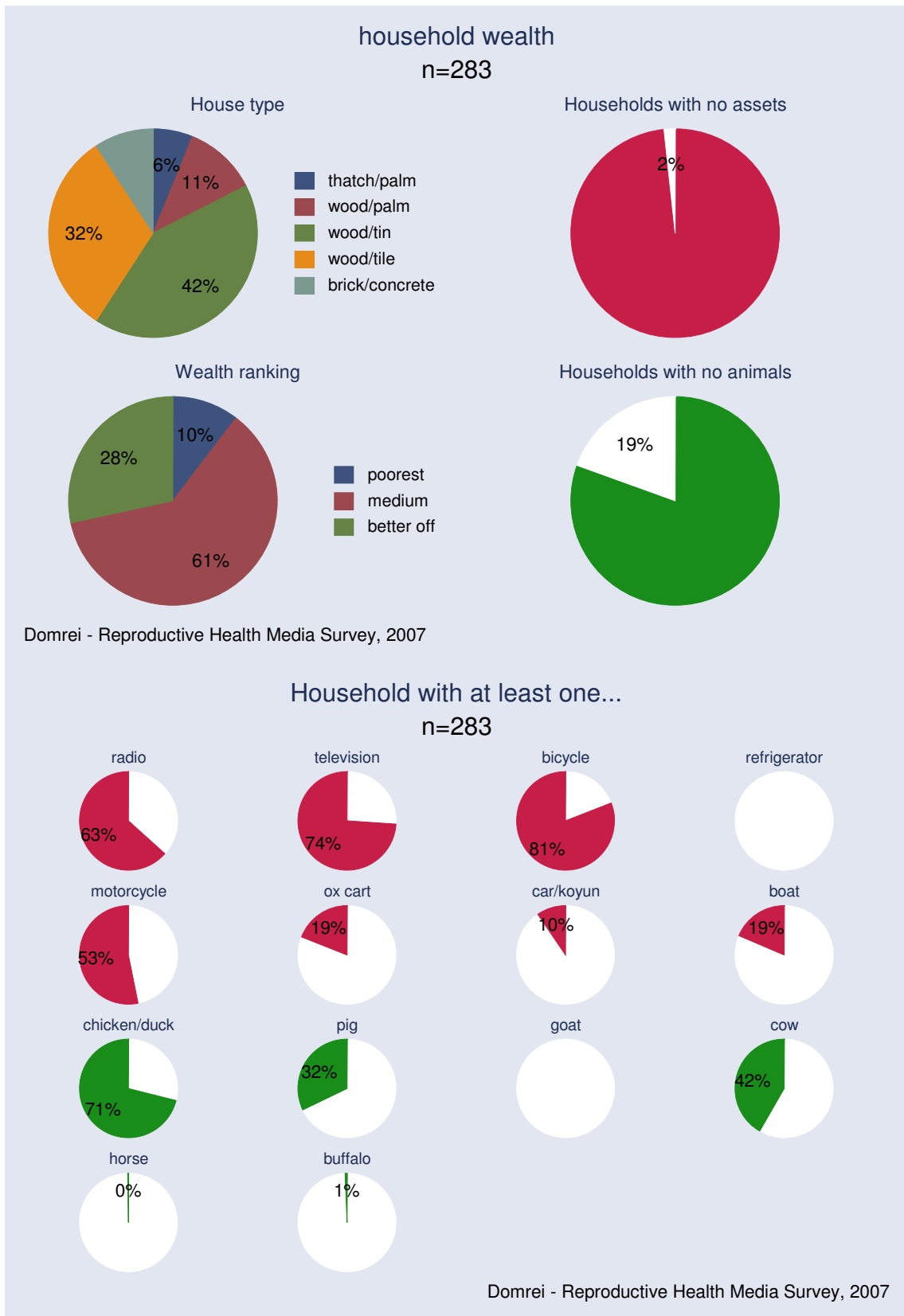


Figure 3: Household wealth indicators

Two thirds of the households have radios, and three quarters of the households have a television set. The high percentage of radio and television obviously has implications in terms of exposure to mass media campaigns.

Mass media habits

There are more than 20 radio stations broadcasting in these four provinces. The most popular are FM 103 (radio PP), FM 102 (radio WMC) and FM 95 (Bayon). The two stations that selected to broadcast the contraception campaign were FM 96 (National Radio) and FM 99.

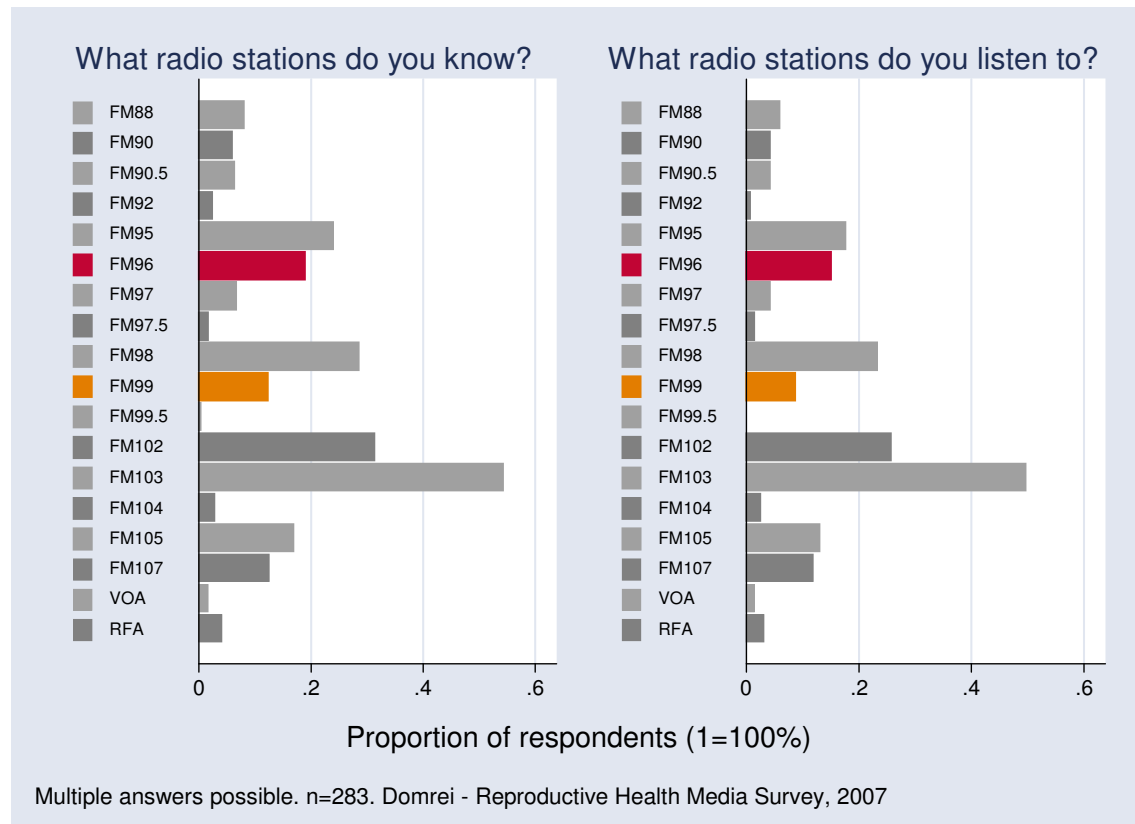


Figure 4: Radio station recognition and listening

Television viewing is less dispersed, as there are “only” seven channels. Moreover, the audience is more equally shared among TV channels than among radio stations (see Figure 5). Only three respondents do not watch television.

There are differences in viewing preferences between provinces: TVK is not watched as much in Kampong Speu as in the other three provinces (Figure 6). There are no significant differences in viewing for the other two channels where the campaign spots were broadcast.

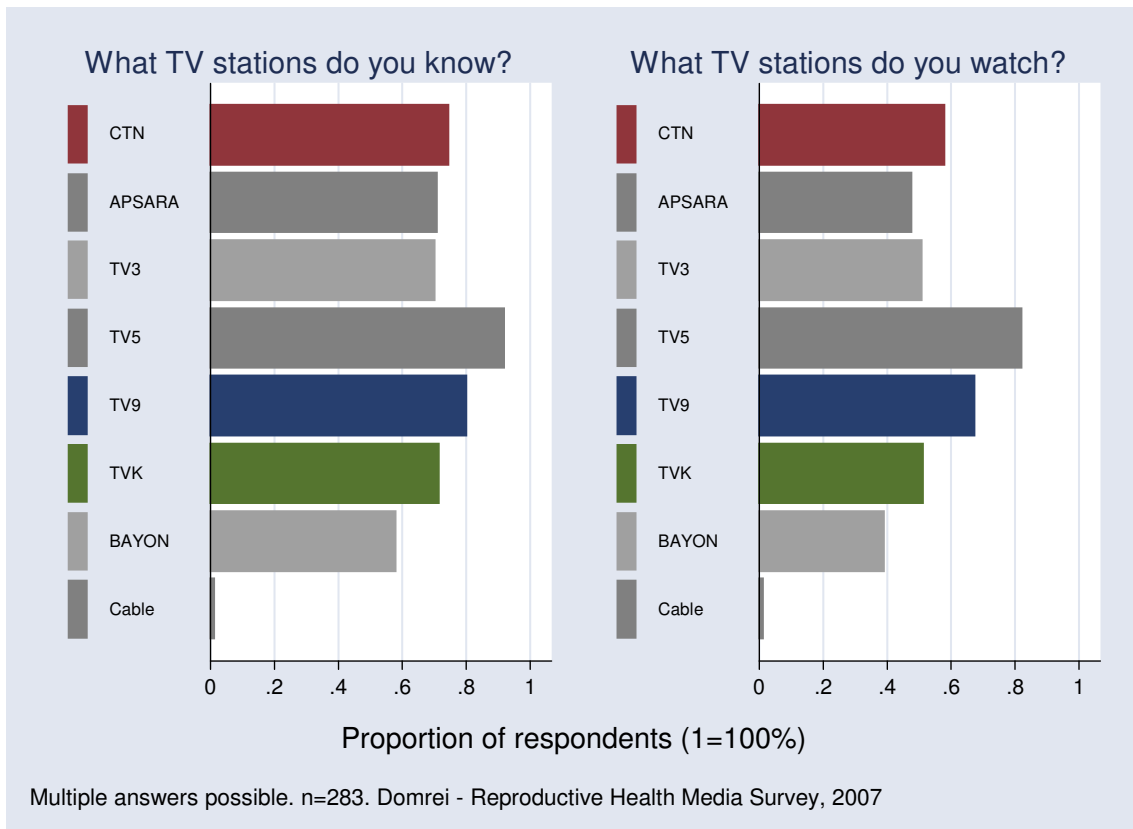


Figure 5: Television station recognition and viewing

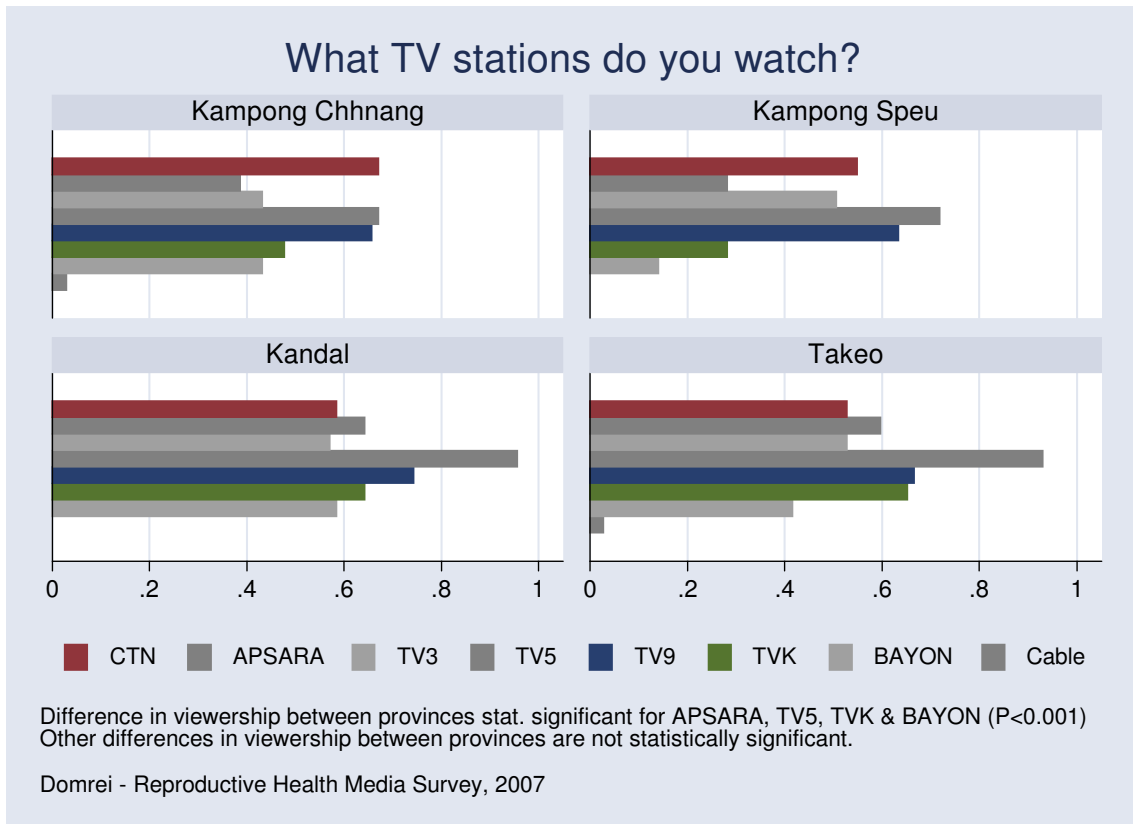
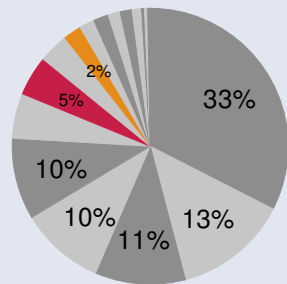


Figure 6: Differences in television viewing between provinces

Radio audience

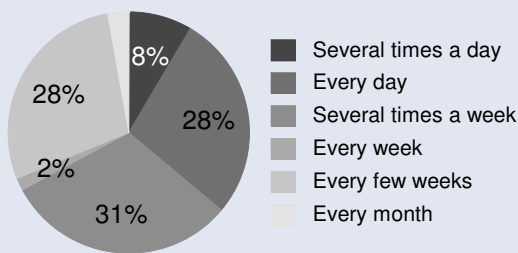
n=283

Radio most listened to

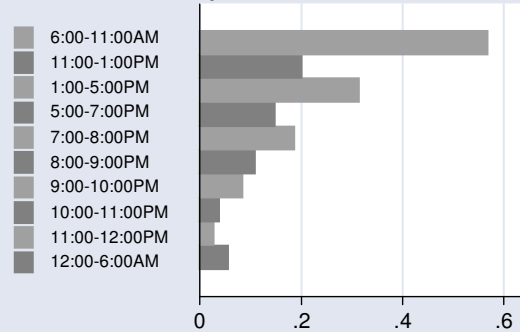


- FM 103 (Radio PP)
- Others
- FM 95 (Bayon)
- FM 96 (National Radio)
- FM 99
- FM 88 (Sweet FM)
- FM 90.5 (Taprum)
- FM104 (Sovana Phum)
- VOA (Voice of America)
- FM 102 (Radio WMC)
- FM 98 (KhémerakPhumin)
- FM107
- FM105 (Beehive)
- FM 90
- RFA (Radio Free Asia)
- FM 97 (Apsara)
- FM 92

How often



What times do you listen to the radio?

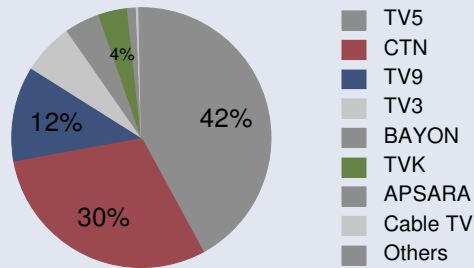


Domrei - Reproductive Health Media Survey, 2007

Television audience

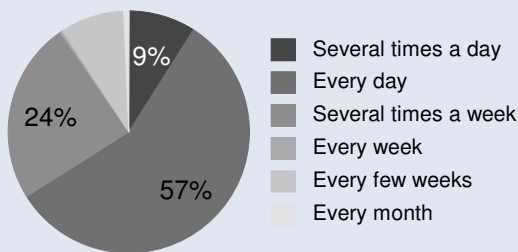
n=280

TV station most watched

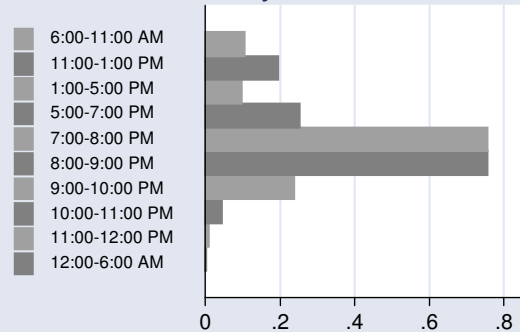


- TV5
- CTN
- TV9
- TV3
- BAYON
- TVK
- APSARA
- Cable TV
- Others

How often



What times do you watch TV?



Domrei - Reproductive Health Media Survey, 2007

Figure 7: Mass media habits

Radio and television habits are different. More households own televisions (74 percent) than radios (63 percent). Women watch television more often than they listen to the radio. Two thirds of our respondents watch television at least once a day, compared to one third who listens to the radio at least once a day.

There are more radio stations than television channels, so the radio audience is more dispersed than the television audience is. Two TV channels (TV5 and CTN) have a combined market share of 72 percent, while the four most popular radio stations (FM 103, FM 102, FM 98 and FM 95) have a combined market share of 66 percent.

Radio and television audience patterns are also very different. Women listen to the radio mostly in the morning, between 6:00 and 11:00 AM, and, to a lesser extent, in the afternoon, between 1:00 and 5:00 PM. Television viewing is concentrated in the evening, between 7:00 and 9:00 PM.

Unfortunately, these audience patterns are a poor match with the campaign broadcasting schedule. More than half of the radio spots (55%) were broadcast after 11:00 AM and more than half of the television spots (55%) were broadcast after 9:00 PM. In future campaigns aimed at women of reproductive age, broadcasting times should better reflect the media habits of the target audience.

Media ranking

Interviewers asked the respondents if they were interested in learning about contraception (1) at a village meeting, (2) from a woman coming to her house, (3) by watching a play (4) by receiving an information leaflet. While over 90 percent were interested in all four methods, the most popular method was the leaflet – despite the fact that the majority of the respondents are not fully literate (see left panel in Figure 8 below).

We now compare radio and television with other media used to promote contraception: village meetings, peer educators and theatre. Interviewers gave the respondents six cards, each card representing one type of media. The interviewer asked the respondents which type of media was the best way for her to learn, the second best way, etc until the respondent handed back the last card. We can thus rank these media as first, second, third... and sixth choice.

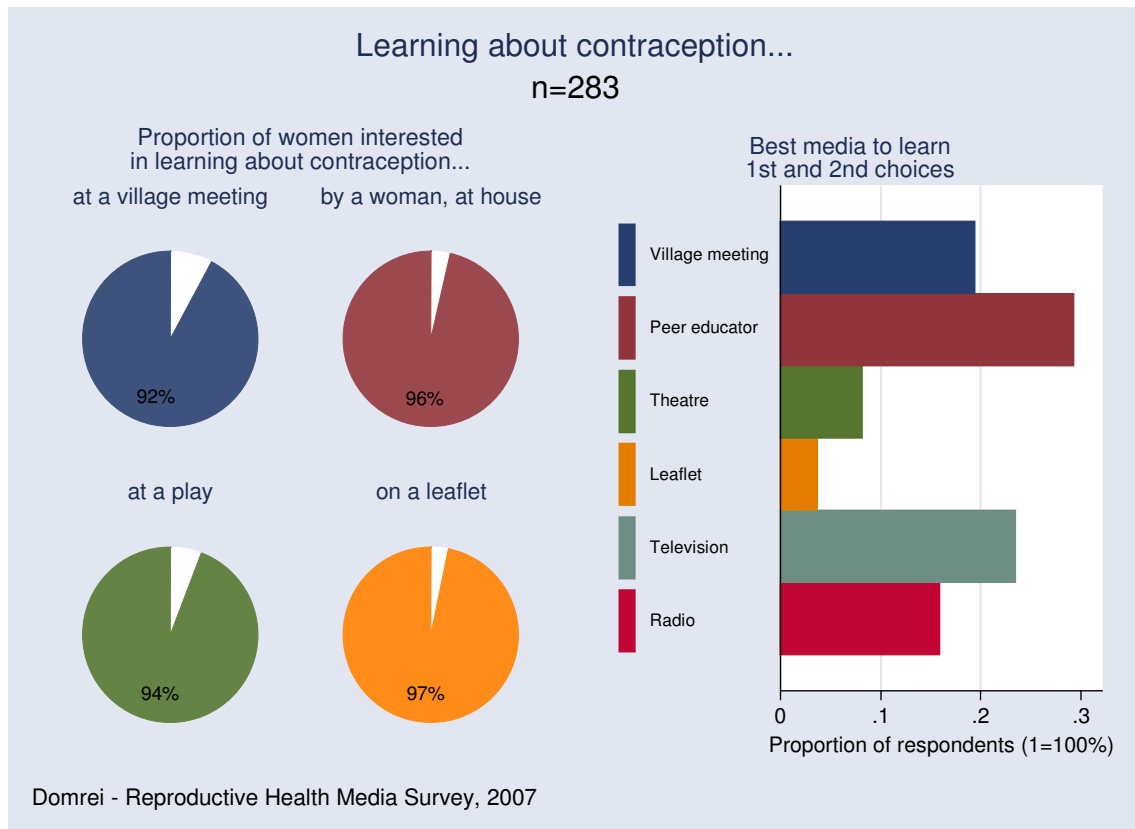


Figure 8: Preference for media types

As Figure 8 shows, women prefer peer educators to any other method. Television comes in second position, and radio in fourth position behind village meetings.

Knowledge and awareness on contraception

Interviewers asked respondents to name the contraceptive methods they have heard of. Spontaneous knowledge was thus recorded. Interviewers then read the names and descriptions of the methods that respondents did not mention spontaneously, and asked if they had heard of them. If women answered in the affirmative, prompted knowledge was recorded.

The series of pie charts in Figure 9 below shows, for each method, the proportion of respondents who mentioned the method spontaneously (dark blue), the proportion of respondents who said they heard of the method when prompted (light blue) and the proportion of respondents who, despite prompting, said they never heard of the method (white).

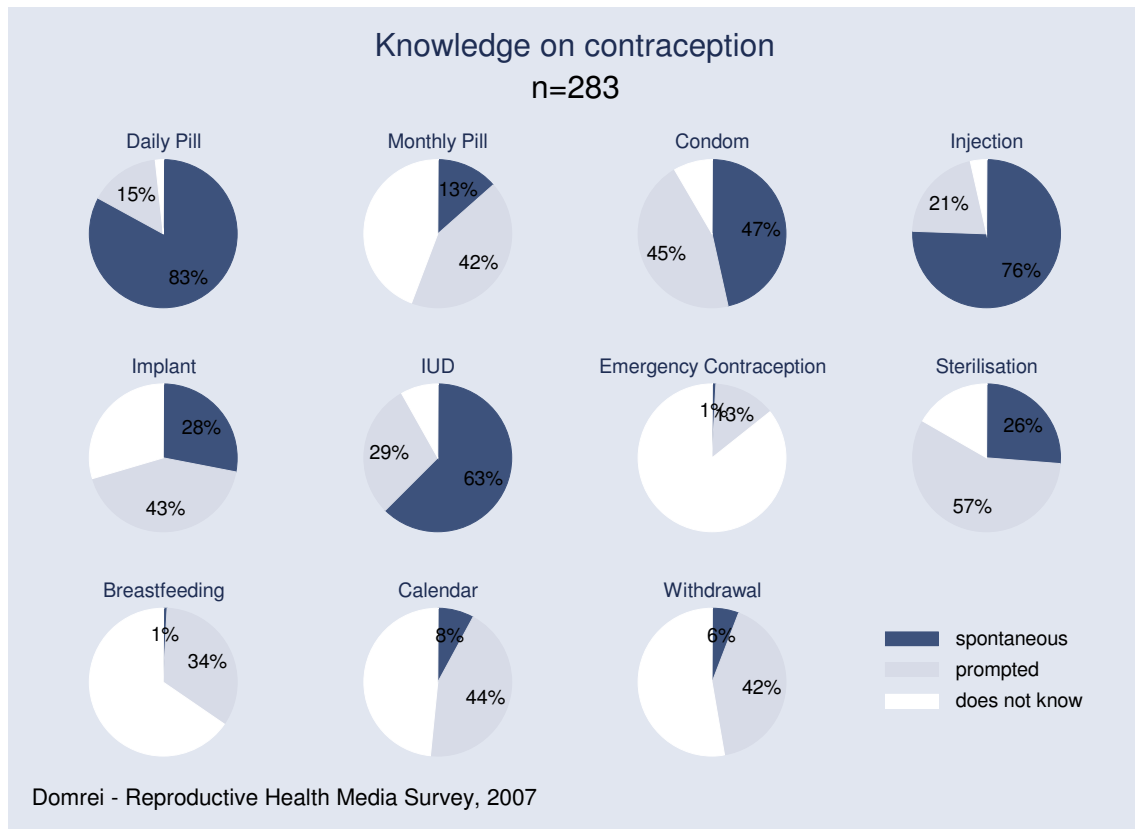


Figure 9: Spontaneous and prompted knowledge on contraceptive methods.

As expected, the daily pill is the most famous of all contraceptive methods, with 83 percent of our respondents mentioning it without being prompted. The second most famous method is the injection, followed by the IUD. A higher proportion of respondents needed to be prompted about the condom, probably because it is associated with HIV protection rather than with family planning. Sterilisation and implants were spontaneously mentioned by a quarter of the respondents.

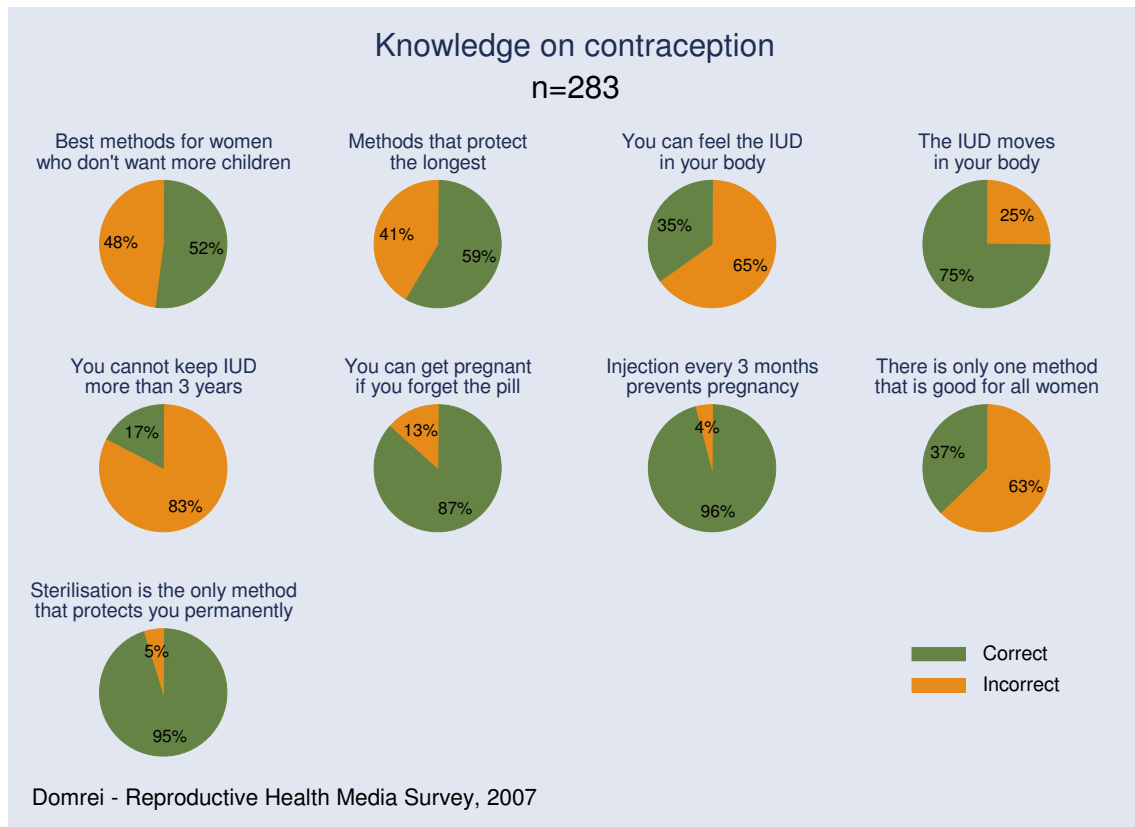


Figure 10: Specific knowledge on contraception relevant to the media campaign

The media campaign addresses specific issues on side effects, informed choice of contraceptive, and the pros and cons of different methods. Figure 10 shows the respondents answers regarding these issues, four months after the start of the campaign. The orange slice of the pie represents the proportion of respondents who gave an incorrect answer, and the green slice represents the proportion of respondents who gave the correct answers.

Figure 11 shows current contraceptive choices. Among all women, contraceptive prevalence, including traditional methods, is at 24.7 percent. Prevalence of modern contraception among all women is 17 percent. Prevalence of modern contraceptive methods among currently married women is 25.1 percent. This figure is lower than expected, perhaps because of the high proportion of young married respondents with no children in our sample.

As expected, the daily pill is the most widely used method, followed by withdrawal. Sterilisation, reported by seven respondents, is surprisingly high. We checked the seven questionnaires and this data is consistent. This is therefore a statistical fluke due to the small number of respondents. Only seven women changed methods since the campaign started.

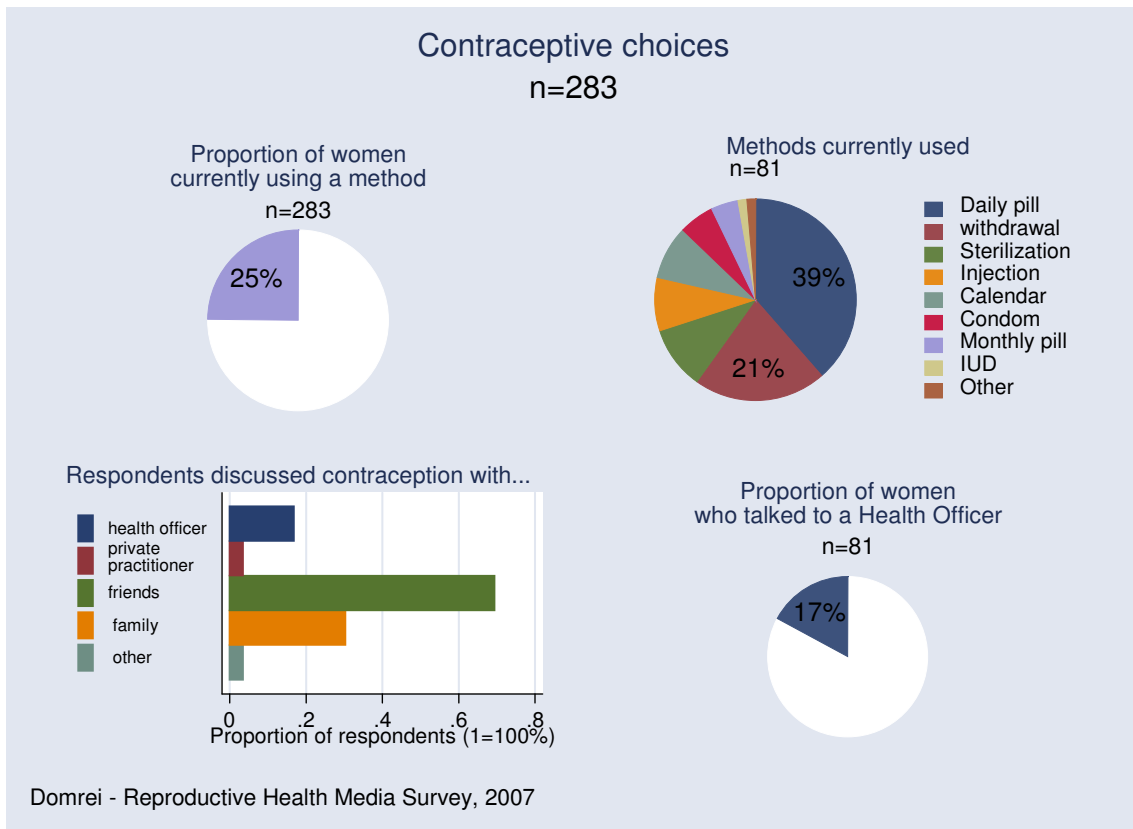


Figure 11: Contraceptive behaviour - method used and non-media sources of information

The results are similar to those of the 2005 Domrei family planning survey. Women are most likely to discuss contraception among themselves, and with family. Public health centre staff is a source of information for 17 percent of the women.

Exposure to the contraceptive promotion campaign

In this report, we define exposed as any women who could describe at least one radio or television spot. Among the 283 respondents, 130 (46 percent) were exposed to the campaign. In other words, the coverage rate in the four sample provinces is estimated roughly at 46 percent, with a 95 percent confidence interval of 40-52 percent.

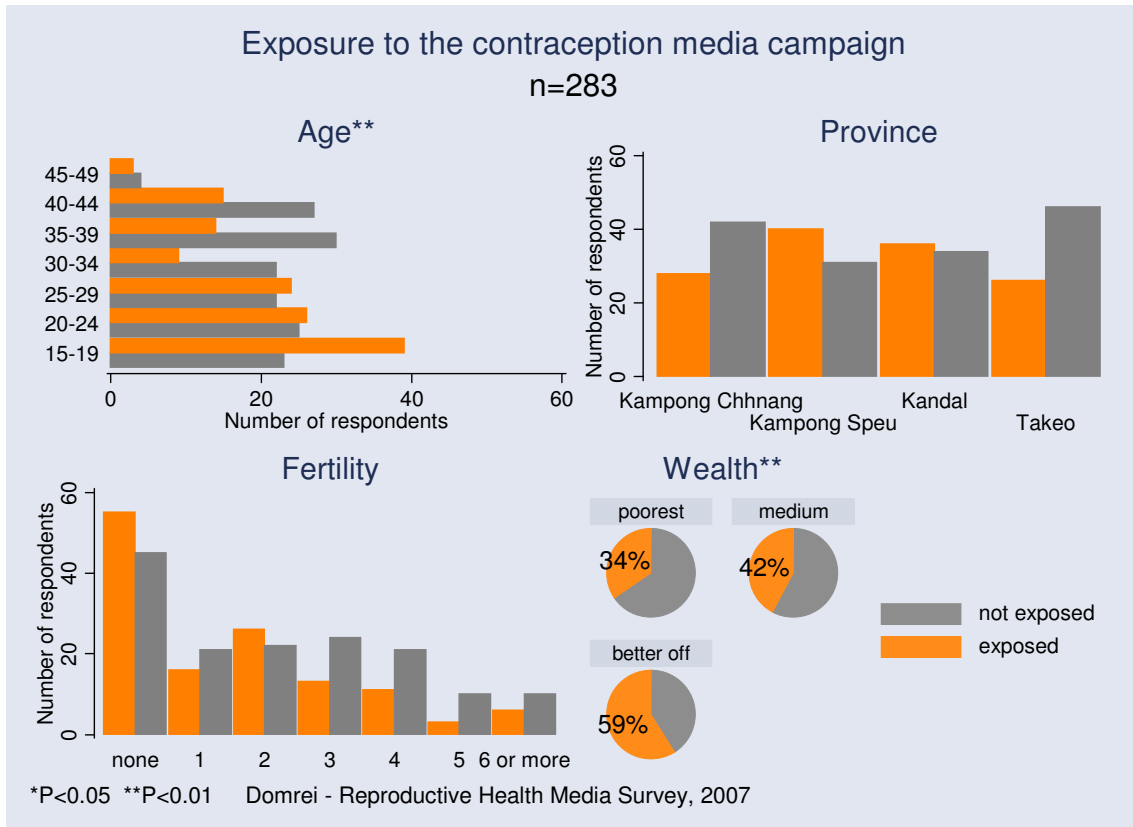


Figure 12: Exposure to the media campaign, by socio-demographic characteristics

The most exposed are young women. The exposure rate is highest in the 15-19 age group (top left panel).

Respondents were more likely to be exposed to the television spots than the radio spots. Two thirds of the respondents remember seeing a television spot on contraception, and at least 40 percent described at least one of the campaign spots. The proportions for the radio spots are much lower, at respectively 25 and 12 percent (Figure 13).

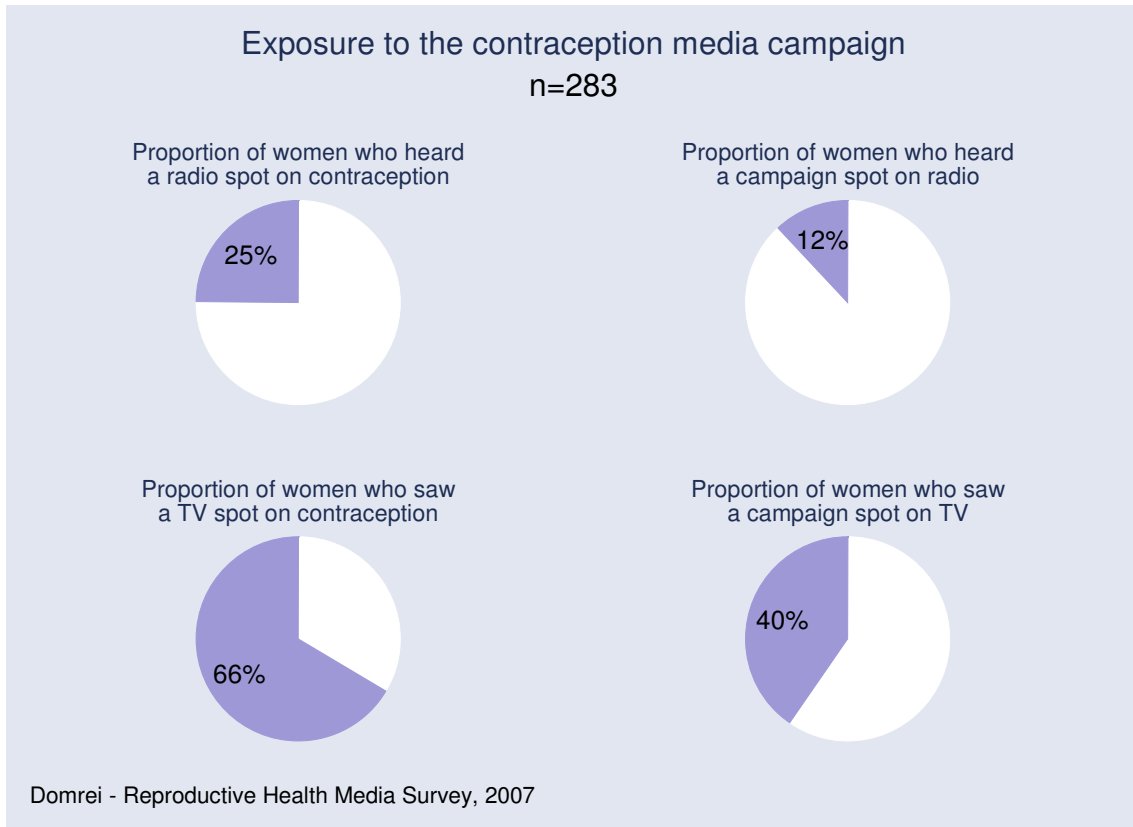


Figure 13: Exposure to the media campaign, by media.

Exposed respondents were three times more likely to have watched CTN than the non-exposed women, and almost two times more likely to have watched TV9. There is no correlation between exposure and TVK viewing (see Figure 14).

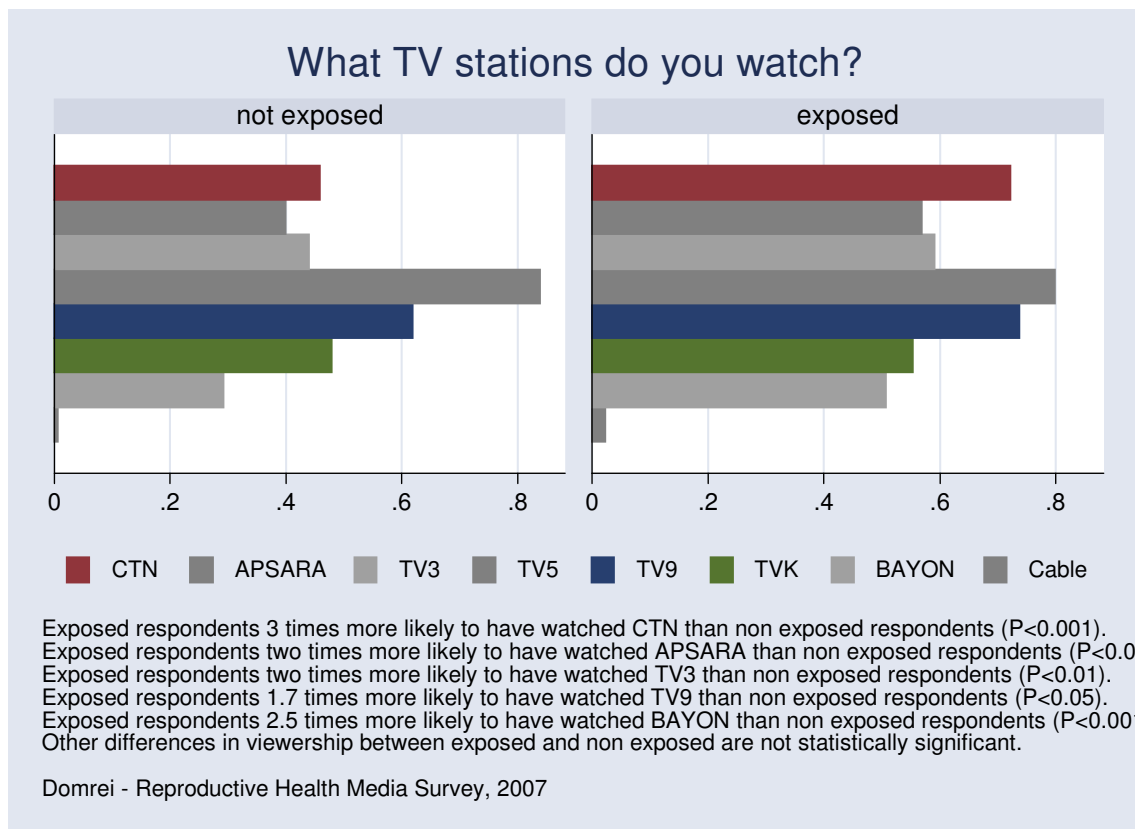


Figure 14: Differences between exposed and unexposed women in channel viewing

Has the campaign effectively reached the poorest women? Table 2 shows that exposure correlates with age, literacy and wealth. (a) Young women, aged 15 to 24, are two times more likely than older women to have heard/seen at least one campaign spot, (b) Literate women are two times more likely, and women from the “richest” wealth group are two times more likely to have seen a spot. (d) There is a correlation between being “rich” and having a television. Women from “richer” households are also more likely to be literate. When controlling for wealth, literate women are still more likely to have been exposed to the campaign.

Table 2: Correlation between exposure to the media campaign and social background

exposed	Odds Ratio	Standard Error	z	P> z	95% Confidence Interval	
(a) 15-24 yrs old	2.2	0.5	3.17	0.002	1.4	3.6
(b) literate	2.2	0.6	2.95	0.003	1.3	3.8
(c) richest	2.1	0.6	2.69	0.007	1.2	3.5
(d) has a TV	2.1	0.6	2.68	0.007	1.2	3.7
(e) literate	2.0	0.5	2.43	0.015	1.1	3.4
richest	1.8	0.5	2.10	0.036	1.0	3.1

To summarise, the campaign reached younger and “wealthier” women. Higher exposure among young women may be partly explained by the choice of television channels, as CTN is popular among younger women. Indeed, women under 25 are twice more likely to watch CTN than older women ($P < 0.005$). Other differences in viewing between youth and older women are not statistically significant (see Figure 15). TV5 is a more appropriate channel than CTN to promote long-term contraception.

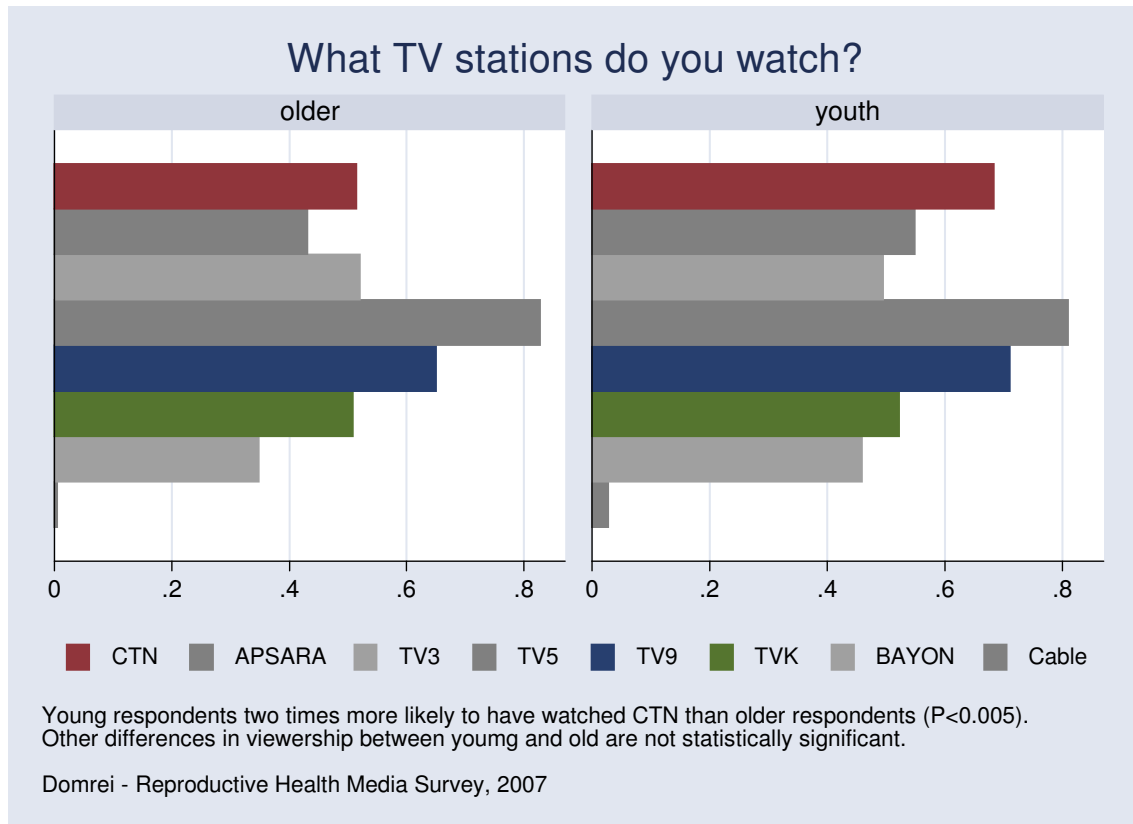


Figure 15: Youth are more likely to watch CTN than older women are

What spots did the respondents remember seeing the most?

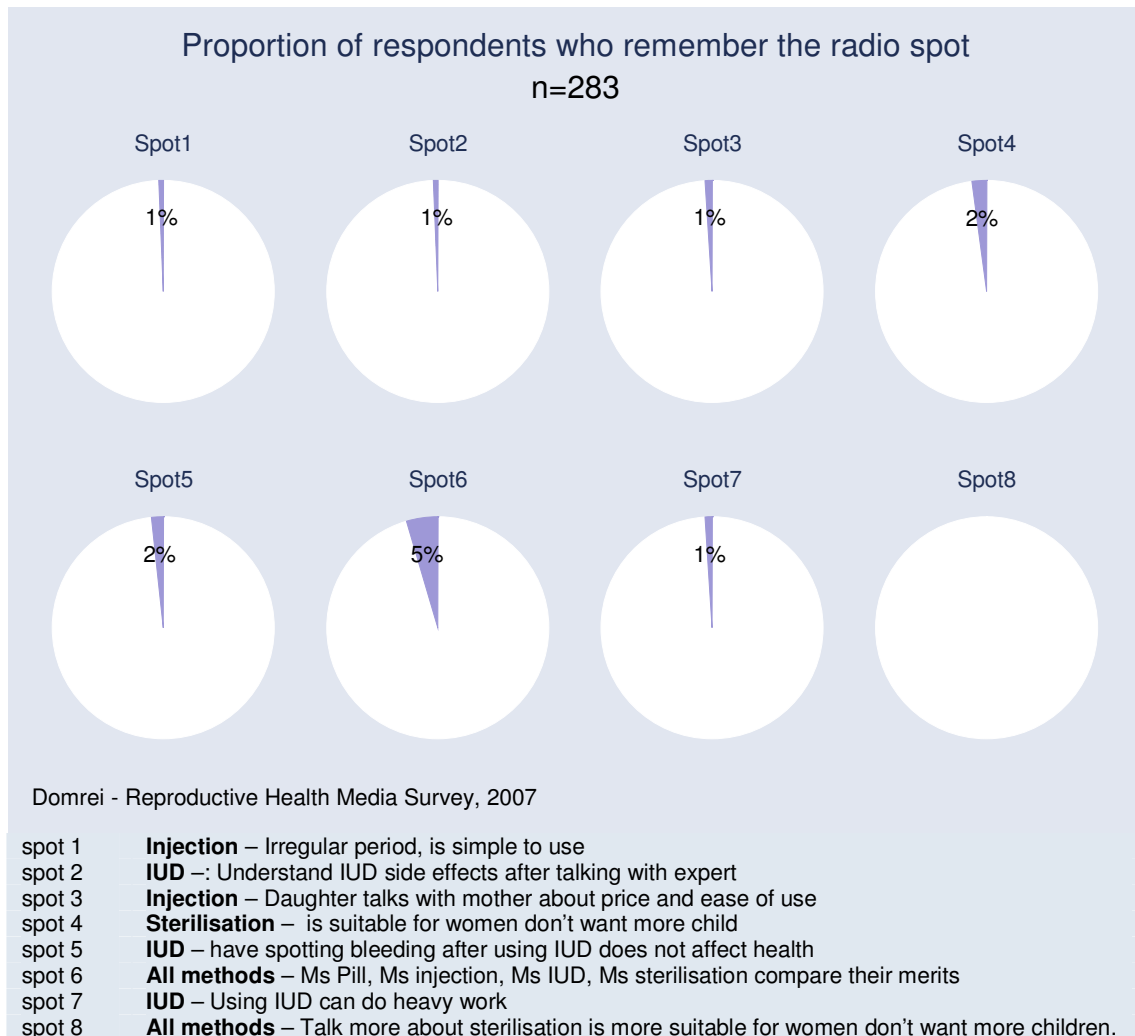


Figure 16: Spontaneous recall of campaign radio spots

Radio spot 6 is the radio spot that respondents remember the most. Five percent of respondents saw this spot (see Figure 16). None of our respondents recalled radio spot 8.

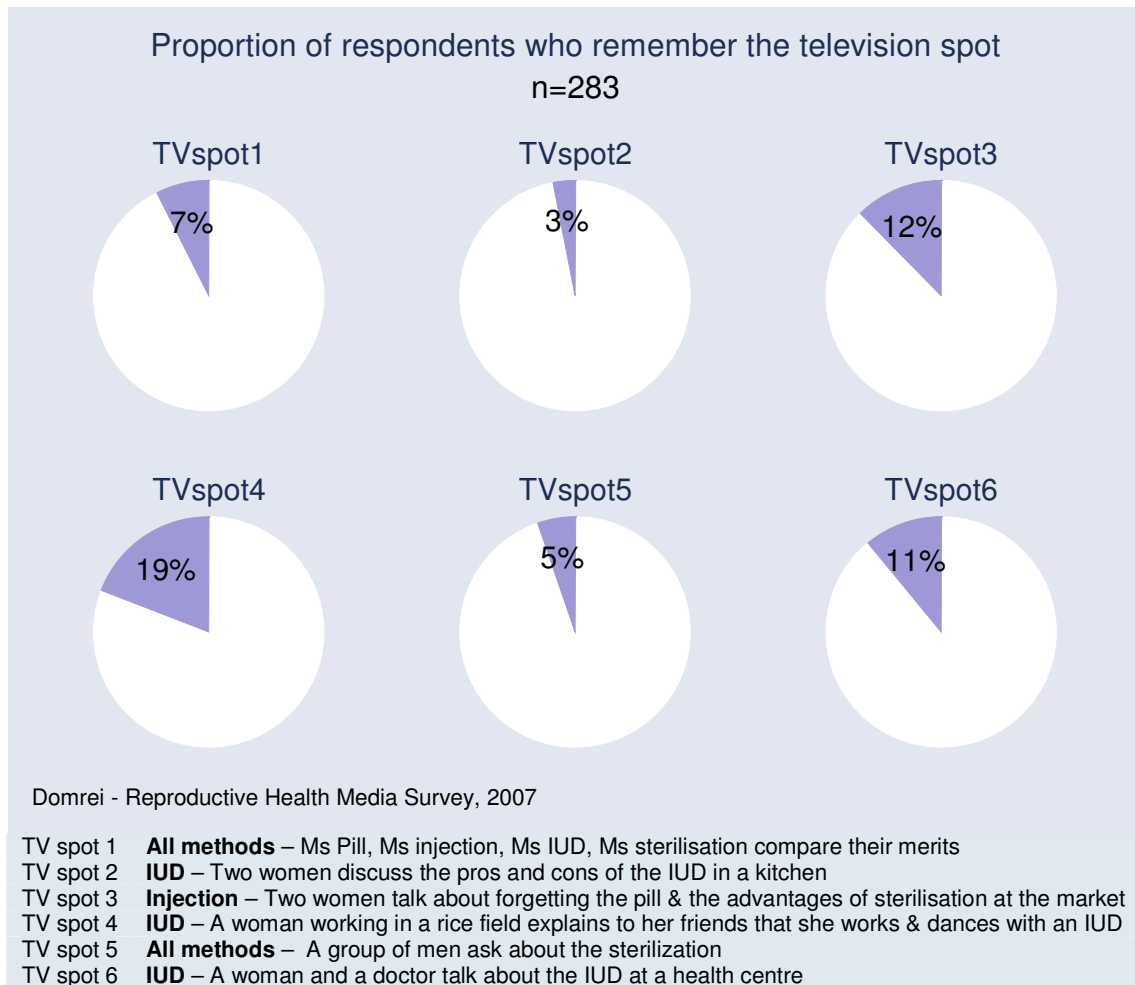


Figure 17: Spontaneous recall of campaign television spots

Television spot 4 was seen and remembered by almost one respondent in five, and television spots 3 and 6 by more than one respondent in ten. These figures reflect the fact that the respondents were more likely to be exposed to the television campaign than to the radio campaign, and not that TV spots are more easily remembered than radio spots.

Two of the three most remembered spots focus on the IUD. This result is consistent with the increase in knowledge on the IUD (see below).

Lower exposure to the radio spots is mainly due to the poor choice of radio stations (see Figure 4 above)

Impact of the campaign on contraceptive awareness and knowledge

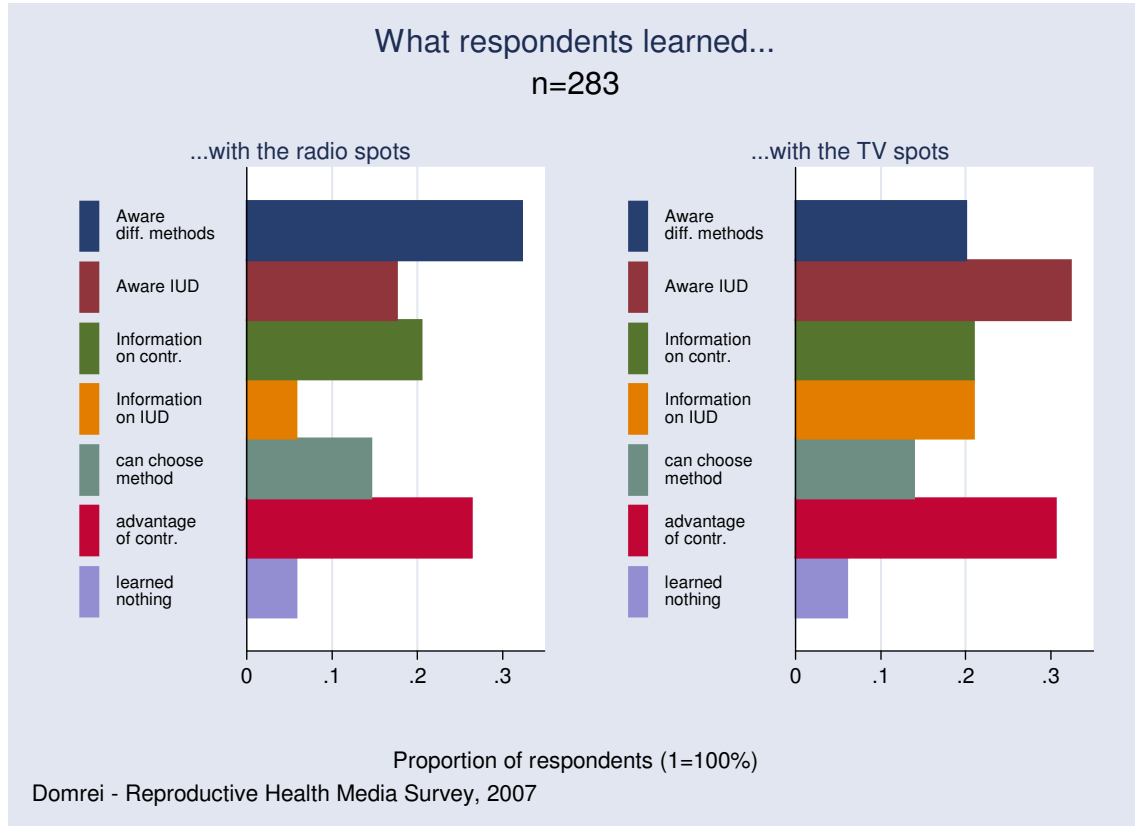
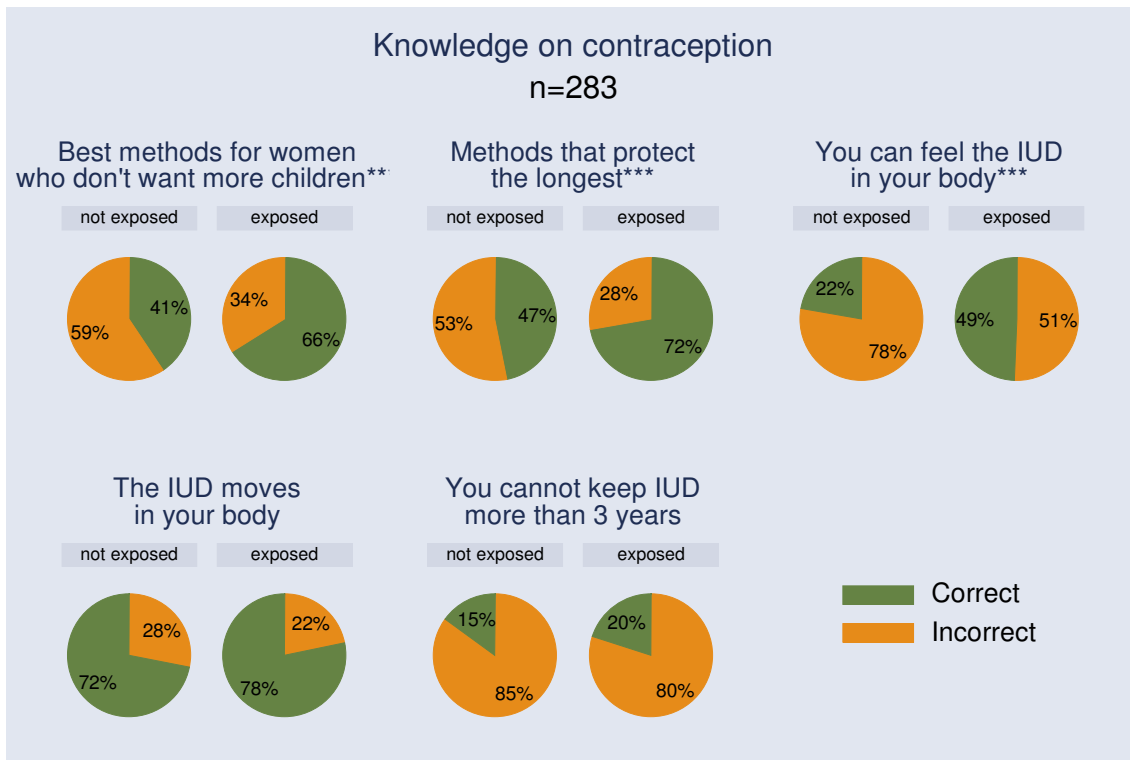


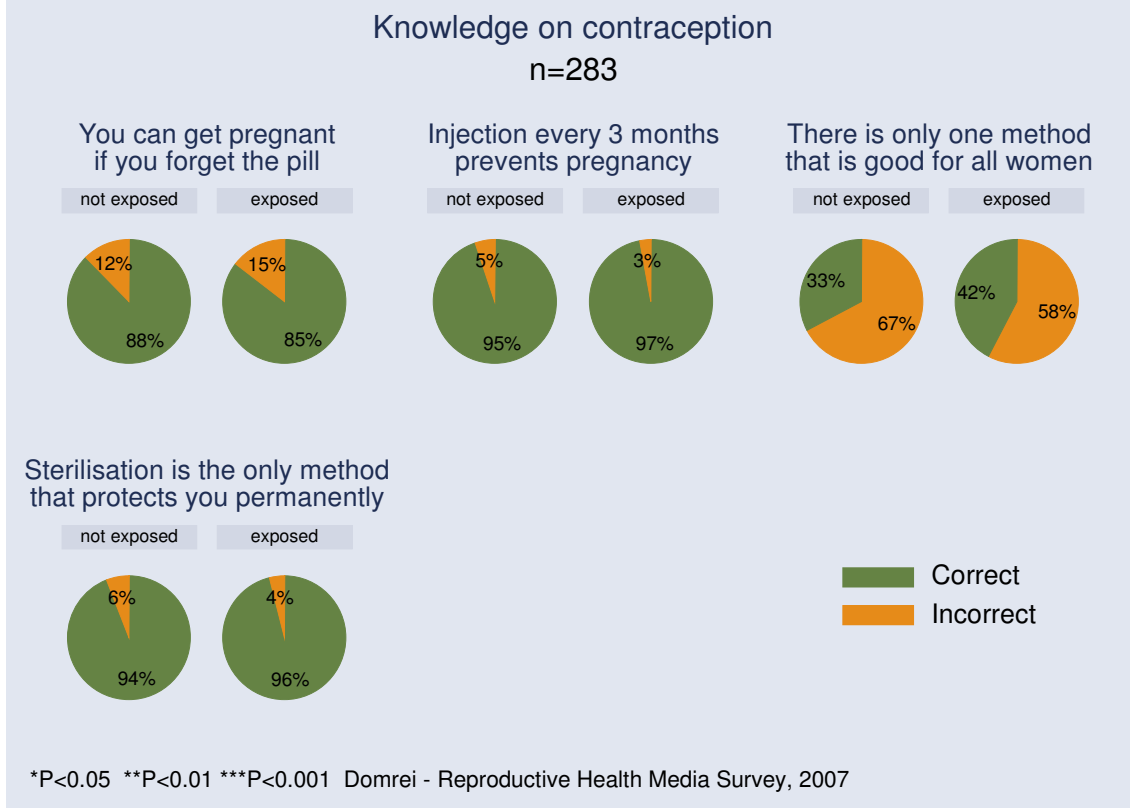
Figure 18: Reported effect of the campaign on respondent's knowledge

What women say they learned from the spots depends on the media. For example, women became more aware of the different methods by the radio spots than by the television spots, but women learned more about the IUD from the television spots (see Figure 18). This is consistent with the fact that respondents remembered the IUD television spots the most.

Women who were exposed to the campaign were more likely to give the correct answers relative to the campaign messages (see Figure 19). The difference is statistically significant for more than half the messages.



*P<0.05 **P<0.01 ***P<0.001 Domrei - Reproductive Health Media Survey, 2007



*P<0.05 **P<0.01 ***P<0.001 Domrei - Reproductive Health Media Survey, 2007

Figure 19: Effect of the campaign messages on respondent's perceptions

One of the emphases of the campaign was the promotion of long-term contraception. Awareness of the IUD is greater among the exposed group than among the unexposed group. While correlation does not necessarily imply causality, it does suggest that the campaign has contributed to awareness on the IUD. There is no statistically significant correlation between exposed and unexposed for the other methods.

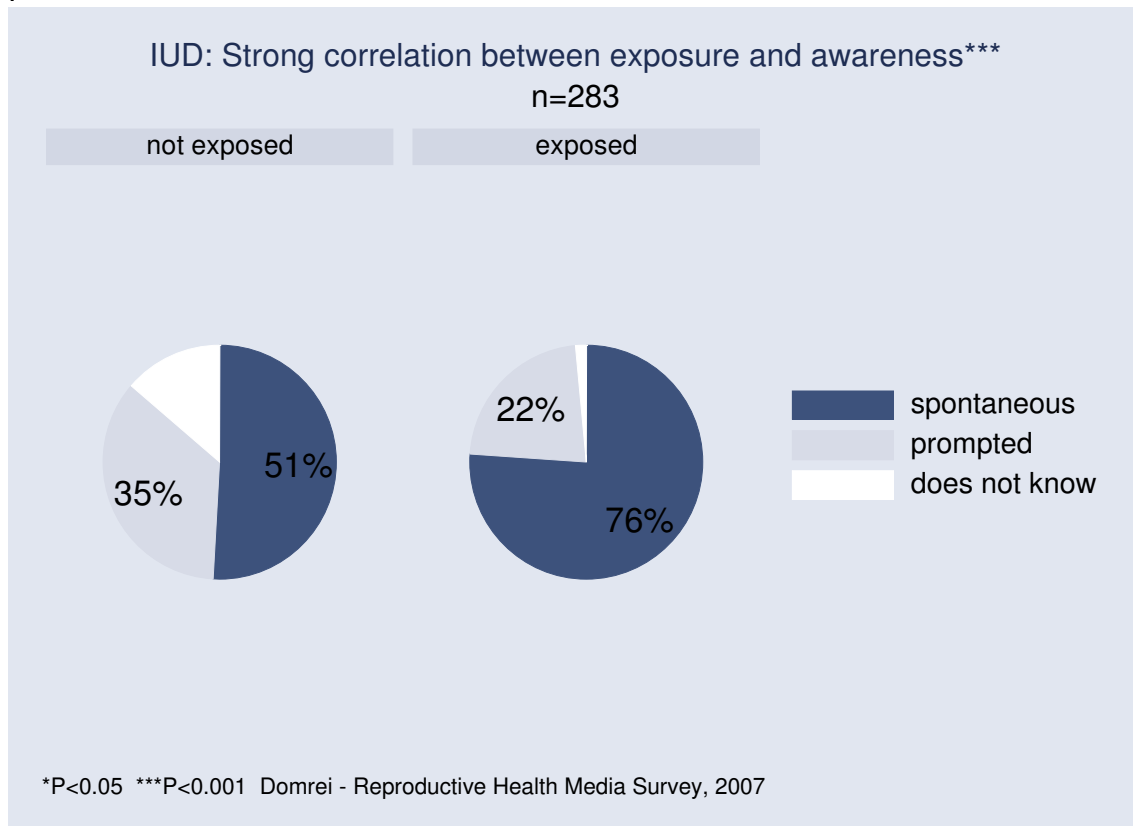


Figure 20: Effect of the campaign on respondents' awareness of sterilisation and IUD

Discussion and conclusion

The campaign did meet its objective of improving awareness and knowledge on specific contraceptive methods for the women who were exposed. Impact was greatest for the IUD. There are two reasons for that: (1) the campaign focussed more on the IUD than any other method and (2) awareness and knowledge before the campaign were probably lower on the IUD than for other methods. It is also possible that the television spots for the IUD were more effective in conveying their messages.

Campaign coverage is poor, with 46 percent (± 5 percent) of women remembering at least one spot. Coverage is mostly due to television, as few respondents listen to the radio channels CHEMS selected. Coverage can be improved if the radio spots are broadcast on more popular stations: FM 103 (Radio Phnom Penh), FM 102 (Radio WMC) and FM 98 (Khemarak Phumin).

Younger and wealthier women are more likely to remember campaign spots. A more detailed analysis of media habits can provide an audience profile for the radio and television channels. This will increase the campaign reach towards older and poorer women.

Radio and television spots are not ideal to explain technical details and side effects for each method. The spots were edited to avoid spreading additional rumours on side effects. To give women the chance to exercise informed choice, flyers and other IEC materials could be distributed to build up on the campaign. TV spot 3, 4 and 6 were the most remembered, and images from these spots could be inserted in more detailed flyers and posters.

Recommendations

1. Select broadcast channels and schedules on the basis of a more detailed analysis of the media habits and respondent profiles.
2. Re-evaluate the different spots based on qualitative responses to the spots (not reported here) and how well they were remembered.
3. Develop some new spots to better target aspects of knowledge and awareness and based on women's responses during the survey.
4. Pre-test these new spots more rigorously to ensure they are well liked, easily remembered and entertaining for women.
5. Develop media profiles with viewer/listener preferences for different groups of women – more birth children, older age groups, poorer women.
6. Use these profiles and the results of this survey to develop a broadcasting strategy including channels and times for broadcasting.
7. Develop a broader campaign structure that includes different types of media like the Village Health Volunteer network (for peer education) and cheap printed materials with more detailed information.
8. Design and distribute paper flyers and posters using pictures from the TV spots to inform women more specifically on the side effects of each method.
9. Co-ordinate the second campaign launch carefully with the roll-out of IUD insertion training for midwives at health centres to ensure trained providers are available to meet any increased demand for contraception.
10. Broadcast the second campaign for a longer period than the first (3 months) to allow more women to be exposed to the messages.

Annexes

Questionnaire in Khmer
Questionnaire in English

បញ្ជីសំណួរស្រាវជ្រាវលើយន្តនាការជួញដូរ

អំពីការពន្យារកំណើតកងដាក់ស្បូន

ត្រីមាសទី១៤-២៥ឆ្នាំ

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	1 st attempt	Appointment	2 nd attempt
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Time			
Location			
Interviewer	<input type="text"/>	<input type="text"/>	<input type="text"/>

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មិនបានបញ្ចប់ ដោយមានគេមករំខាន	3
អ្នកឆ្លើយបដិសេធ	4
ឪពុកម្តាយ/អាណាព្យាបាលបដិសេធ	5
មិនជួបអ្នកឆ្លើយ បន្ទាប់ពីការណាត់ជួបលើកទី២	6

	Interviewer	Editor	Encoder	Archived
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Date	/ /07	/ /07	/ /07	/ /07
Signature				

បញ្ជីសំណួរសំរាប់ស្ត្រី

ការណែនាំខ្លួន :

ជំរាបសួរ ! ខ្ញុំឈ្មោះធ្វើការជាមួយក្រុមហ៊ុនដីស្រាវជ្រាវ និងផ្តល់ប្រឹក្សា ។ ខ្ញុំមកទីនេះដើម្បីសម្ភាសស្ត្រីដែលមានអាយុ១៥ ទៅ ៤៥ឆ្នាំ អំពីទំលាប់ និងចរិតលក្ខណៈរបស់ពួកគាត់ជាមួយនឹងប្រពន្ធផ្សព្វផ្សាយ ។ ជាពិសេសគឺ ខ្ញុំចង់ដឹងអំពីការផ្សព្វផ្សាយអំពីវិធីពន្យារកំណើត ដែលចាក់ផ្សាយនៅតាមទូរទស្សន៍ និងវិទ្យុកន្លងមកនេះ ។ យើងចង់ដឹងផងដែរអំពី ចំណេះដឹង អាកប្បកិរិយា និងការគិតរបស់ពួកគាត់ ទៅលើវិធីសាស្ត្រនិមួយៗដែលគាត់បានលឺ ។ សូមកុំខ្លាច ឬប្រយុទ្ធប្រឆាំងប្រពន្ធជាមួយ ខ្ញុំគ្រាន់តែចង់ដឹងអំពី ការមើលទូរទស្សន៍ និងការស្តាប់វិទ្យុ របស់អ្នកតែប៉ុណ្ណោះ ។ អ្វីដែល (អ្នក) និយាយនឹងត្រូវទុកជាការសំងាត់ ។ យើងខ្ញុំមិនអោយអ្នកនៅក្នុងភូមិណាម្នាក់ ឬគ្រួសាររបស់ (អ្នក) ដឹង ពីអ្វីដែល (អ្នក) និយាយឡើយ ។

អ្នកអាចបដិសេធមិនឆ្លើយសំណួរដែលអ្នកមិនចង់ឆ្លើយ ឬក៏អ្នកអាចបញ្ឈប់អំពីសំណួរពេលណាក៏បាន ។ ខ្ញុំសូមអរគុណ ហើយនិងសង្ឃឹមថាការ សម្ភាសន៍នេះមានរយៈពេលតែ ៣០នាទី ប៉ុណ្ណោះ ។

ខ្ញុំសូមរំលឹកអ្នកថាចំលើយទាំងអស់របស់(អ្នក)គឺសំខាន់ខ្លាំងណាស់ ។ ហើយនេះមិនមែនជាការប្រលងទេ ដូច្នេះហើយគ្មានចំលើយត្រូវ ឬខុសឡើយ ។ ហេតុដូច្នេះខ្ញុំចង់សុំអោយអ្នកឆ្លើយអោយបានពិតប្រាកដ ។ ចំលើយនេះនឹងអោយក្រុមរបស់ខ្ញុំផ្តល់ព័ត៌មានពិតទៅអោយ ក្រសួងសុខាភិបាល ដើម្បីបង្កើតសេវាការកាន់តែប្រសើរឡើងទៅថ្ងៃអនាគត ។

តើ(អ្នក) មានសំណួរអ្វីសួរខ្ញុំទេ?
តើខ្ញុំអាចចាប់ផ្តើមសួរសំណួរឥឡូវនេះបានទេ?

ផ្នែកទី១: ប្រវត្តិអ្នកឆ្លើយ

1	តើអ្នកកើតនៅខែណាឆ្នាំណា? សូមសរសេរខែ និងឆ្នាំនៅខាងក្រោម ។ ប្រសិនបើអ្នកឆ្លើយមិនចាំ ចាក់ខែមិនចាំ ខែ..... ឆ្នាំ.....	អាយុគិតជាឆ្នាំ : <input type="text"/> <input type="text"/>
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3	តើអ្នកមានកូនបង្កើតដែរឬទេ?	ទេ (រំលងទៅសំណួរទី៥) 0 ចាស 1
4	តើអ្នកមានកូនបង្កើតប៉ុន្មាននាក់?	<input type="text"/> <input type="text"/>
5	តើអ្នកធ្លាប់រៀននៅសាលាដែរឬទេ?	ទេ (រំលងទៅសំណួរទី៧) 0 ចាស 1
6	តើអ្នករៀនចប់ខ្ពស់បំផុតត្រឹមថ្នាក់ទីប៉ុន្មាន?	ថ្នាក់ទី <input type="text"/> <input type="text"/> សាកលវិទ្យាល័យ 13

7	<p>តើគ្រួសារ(អ្នក) មានរបស់របរ/ទ្រព្យសម្បត្តិអ្វីខ្លះ?</p> <p>បង្ហាញបាយភោគអាចលើស</p> <p>(ចំលើយអាចលើសពីមួយ)</p> <p>សូមគូសរាល់ប្រភេទនៃរបស់របរ/ទ្រព្យសម្បត្តិគោរពសង្កេត ឃើញរបស់អ្នកផងដែរ</p>	<table border="0"> <tr><td>គ្មាន</td><td>0</td></tr> <tr><td>វិទ្យុ</td><td>1</td></tr> <tr><td>ទូរទស្សន៍</td><td>2</td></tr> <tr><td>កង់</td><td>3</td></tr> <tr><td>ទូរទឹកកក</td><td>4</td></tr> <tr><td>ម៉ូតូ</td><td>5</td></tr> <tr><td>រទេះគោ</td><td>6</td></tr> <tr><td>ទូក</td><td>7</td></tr> <tr><td>ឡាន/គោយន្ត</td><td>8</td></tr> </table>	គ្មាន	0	វិទ្យុ	1	ទូរទស្សន៍	2	កង់	3	ទូរទឹកកក	4	ម៉ូតូ	5	រទេះគោ	6	ទូក	7	ឡាន/គោយន្ត	8
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8	<p>តើគ្រួសារ(អ្នក) ចិញ្ចឹមសត្វអ្វីខ្លះ?</p> <p>បង្ហាញបាយភោគអាចលើស</p> <p>(ចំលើយអាចលើសពីមួយ)</p> <p>សូមបញ្ជាក់ថាសត្វទាំងនោះ មិនមែនជាសត្វប្រវាស់ពិគេ</p>	<table border="0"> <tr><td>គ្មាន</td><td>0</td></tr> <tr><td>មាន់/ទា</td><td>1</td></tr> <tr><td>ជ្រូក</td><td>2</td></tr> <tr><td>ពពែ</td><td>3</td></tr> <tr><td>គោ</td><td>4</td></tr> <tr><td>សេះ</td><td>5</td></tr> <tr><td>ក្របី</td><td>6</td></tr> </table>	គ្មាន	0	មាន់/ទា	1	ជ្រូក	2	ពពែ	3	គោ	4	សេះ	5	ក្របី	6				
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ផ្នែកទី ២: ទំលាប់ទៅនឹងប្រព័ន្ធផ្សព្វផ្សាយ

ខ្ញុំចង់សាកសួរអ្នកនូវសំណួរមួយចំនួនអំពីទំលាប់ទៅនឹងប្រព័ន្ធផ្សព្វផ្សាយ

9	តើអ្នកធ្លាប់ស្តាប់វិទ្យុដែរឬទេ?	<table border="0"> <tr><td>ទេ (រំលងទៅសំណួរទី១៥)</td><td>0</td></tr> <tr><td>មិន</td><td>1</td></tr> </table>	ទេ (រំលងទៅសំណួរទី១៥)	0	មិន	1																		
ទេ (រំលងទៅសំណួរទី១៥)	0																							
មិន	1																							
10	<p>តើប៉ុស្តិ៍វិទ្យុណាខ្លះដែលអ្នកស្គាល់?</p> <p>(ចំលើយអាចលើសពីមួយ)</p>	<table border="0"> <tr><td>FM 88 (sweet FM)</td><td>1</td></tr> <tr><td>FM 90.5 ព្រះហ្លួង</td><td>2</td></tr> <tr><td>FM 90</td><td>3</td></tr> <tr><td>FM 92</td><td>4</td></tr> <tr><td>FM 95 បាយន័</td><td>5</td></tr> <tr><td>FM 96 វិទ្យុជាតិ</td><td>6</td></tr> <tr><td>FM 97 (Apsara)</td><td>7</td></tr> <tr><td>FM 97.5 love FM</td><td>8</td></tr> <tr><td>FM 98 ខេមរភូមិន្ទ</td><td>9</td></tr> <tr><td>FM 99</td><td>10</td></tr> <tr><td>FM 99.5</td><td>11</td></tr> </table>	FM 88 (sweet FM)	1	FM 90.5 ព្រះហ្លួង	2	FM 90	3	FM 92	4	FM 95 បាយន័	5	FM 96 វិទ្យុជាតិ	6	FM 97 (Apsara)	7	FM 97.5 love FM	8	FM 98 ខេមរភូមិន្ទ	9	FM 99	10	FM 99.5	11
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		FM 102 សំលេងស្រ្តី	12
		FM 103 រាជធានីភ្នំពេញ	13
		FM104 សុវណ្ណភូមិ	14
		FM105 សំបុតឃុំ	15
		FM107 ទ.ទ.ខ.៩	16
		VOA សំលេងអាមេរិចកាំង	17
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		FM 90.5 តាព្រហ្ម	2
		FM 90	3
		FM 92	4
		FM 95 បាយ័ន	5
		FM 96 វិទ្យុជាតិ	6
		FM 97 (Apsara)	7
		FM 97.5 love FM	8
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		FM 99	10
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		FM 90.5 តាព្រហ្ម	2
		FM 90	3
		FM 92	4
		FM 95 បាយ័ន	5
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		FM 99	10
		FM 99.5	11
		FM 102 សំលេងស្រ្តី	12
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14	តើអ្នកស្តាប់វិទ្យុនៅម៉ោងណាខ្លះ? <i>(ចំលើយអាចលើសពីមួយ)</i>	6:00 – 11:00 AM 11:00 – 1:00 PM 1:00 – 5:00 PM 5:00 – 7:00 PM 7:00 – 8:00 PM 8:00 – 9:00 PM 9:00 – 10:00 PM 10:00 – 11:00 PM 11:00 – 12:00 PM 12:00 – 6:00 AM	1 2 3 4 5 6 7 8 9 10
15	តើអ្នកធ្លាប់មើលទូរទស្សន៍ដែរឬទេ?	ទេ (រំលងទៅសំណួរទី២១) ចាស	0 1
16	តើប៉ុស្តិ៍ទូរទស្សន៍ ណាខ្លះដែលអ្នកស្គាល់? <i>(ចំលើយអាចលើសពីមួយ)</i>	CTN APSARA TV3 TV5 TV9	1 2 3 4 5

		TVK	6
		BAYON	7
		ទូរទស្សន៍ខ្សែរកាប	8
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		APSARA	2
		TV3	3
		TV5	4
		TV9	5
		TVK	6
		BAYON	7
		ទូរទស្សន៍ខ្សែរកាប	8
		ផ្សេងៗ.....	88
18	តើប៉ុស្តិ៍ទូរទស្សន៍ណាមួយដែលអ្នកមើលច្រើនបំផុត? <i>គូសចំលើយតែមួយគត់ និងពិនិត្យថាចំលើយនេះស្មើគ្នាជាមួយសំណួរខាងលើ</i>	CTN	1
		APSARA	2
		TV3	3
		TV5	4
		TV9	5
		TVK	6
		BAYON	7
		ទូរទស្សន៍ខ្សែរកាប	8
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		រៀងរាល់ថ្ងៃ	2
		2 ឬ 3 ដងក្នុងមួយអាទិត្យ	3
		រៀងរាល់អាទិត្យ	4
		រៀងរាល់ 2 ឬ 3 ដងមួយក្នុង១ខែ	5
		រៀងរាល់ខែ	6
20	តើអ្នកមើលទូរទស្សន៍នៅម៉ោងណាខ្លះ? (ចំលើយអាចលើសពីមួយ)	6:00 – 11:00 AM	1
		11:00 – 1:00 PM	2
		1:00 – 5:00 PM	3
		5:00 – 7:00 PM	4
		7:00 – 8:00 PM	5
		8:00 – 9:00 PM	6
		9:00 – 10:00 PM	7
		10:00 – 11:00 PM	8

		11:00 – 12:00 PM	9
		12:00 – 6:00 AM	10
21	ប្រសិនបើមានការប្រជុំអំពីការពន្យារកំណើតនៅក្នុងភូមិរបស់អ្នក តើអ្នកចាប់អារម្មណ៍អត់ ?	ទេ	0
		ចាស	1
22	ប្រសិនបើស្ត្រីផ្សេងទៀតបានមកផ្ទះរបស់អ្នកពន្យារពីការពន្យារកំណើត តើអ្នកចាប់អារម្មណ៍ដែរឬអត់?	ទេ	0
		ចាស	1
23	ប្រសិនបើមានរឿងខ្លីៗ អំពីការអំពីការពន្យារកំណើត តើអ្នកចាប់អារម្មណ៍មើលឬអត់?	ទេ	0
		ចាស	1
24	ប្រសិនបើមានគេចែកបណ្តុំ ដោយមានព័ត៌មានអំពីការពន្យារកំណើត តើអ្នកចាប់អារម្មណ៍ឬអត់?	ទេ	0
		ចាស	1
ការធ្វើចំណាត់ថ្នាក់អំពីការផ្សព្វផ្សាយ –			
ខ្ញុំនឹងបង្ហាញអ្នកនូវបណ្តុំដោយមានប្រភេទនៃការផ្សព្វផ្សាយផ្សេងៗដែលខ្ញុំបានសួរពីមុន ។ ខ្ញុំសុំអោយអ្នកធ្វើចំណាត់ថ្នាក់អំពីប្រភេទនៃការផ្សព្វផ្សាយទាំងនេះ ។			
អោយអ្នកឆ្លើយនូវបណ្តុំទាំង ៦ អំពីប្រភេទនៃការផ្សព្វផ្សាយ ។ ស្មើគ្នាតំអោយផ្តល់បណ្តុំមកវិញជាមួយ និងចំលើយរបស់គាត់ ។			
25	តើការផ្សព្វផ្សាយមួយណាដែលជាវិធីស្តុំបំផុតសំរាប់អ្នកដើម្បីយល់ដឹង?	ការប្រជុំ	1
		មិត្តអប់រំមិត្ត	2
		ល្ខោន	3
		ខិត្តប័ណ្ណ	4
		ទូរទស្សន៍	5
		វិទ្យុ	6
26	តើការផ្សព្វផ្សាយមួយណាដែលល្អទី២សំរាប់អ្នកដើម្បីយល់ដឹង?	ការប្រជុំ	1
		មិត្តអប់រំមិត្ត	2
		ល្ខោន	3
		ខិត្តប័ណ្ណ	4
		ទូរទស្សន៍	5
		វិទ្យុ	6
27	តើការផ្សព្វផ្សាយមួយណាដែលល្អទី៣សំរាប់អ្នកដើម្បីយល់ដឹង?	ការប្រជុំ	1
		មិត្តអប់រំមិត្ត	2
		ល្ខោន	3
		ខិត្តប័ណ្ណ	4

		ទូរទស្សន៍	5
		វិទ្យុ	6
28	តើការផ្សព្វផ្សាយមួយណាដែលល្អទី៤សំរាប់អ្នកដើម្បីយល់ដឹង?	ការប្រជុំ	1
		មិត្តអប់រំមិត្ត	2
		ល្ខោន	3
		ខិត្តប័ណ្ណ	4
		ទូរទស្សន៍	5
		វិទ្យុ	6
29	តើការផ្សព្វផ្សាយមួយណាដែលល្អទី៥សំរាប់អ្នកដើម្បីយល់ដឹង?	ការប្រជុំ	1
		មិត្តអប់រំមិត្ត	2
		ល្ខោន	3
		ខិត្តប័ណ្ណ	4
		ទូរទស្សន៍	5
		វិទ្យុ	6
30	តើការផ្សព្វផ្សាយមួយណាដែលល្អបំផុតទី៦សំរាប់អ្នកដើម្បីយល់ដឹង?	ការប្រជុំ	1
		មិត្តអប់រំមិត្ត	2
		ល្ខោន	3
		ខិត្តប័ណ្ណ	4
		ទូរទស្សន៍	5
		វិទ្យុ	6

ផ្នែកទី៣: ចំណេះដឹងអំពីការពន្យារកំណើត				
ឥឡូវខ្ញុំចង់សួរអ្នកនូវសំណួរមួយចំនួនអំពីការពន្យារកំណើត				
តើអ្នកធ្លាប់លឺអំពីមធ្យោបាយពន្យារកំណើតណាខ្លះ?		មិនបង្ហើបចំលើយ	បន្ទាប់ពីបង្ហើបចំលើយ	
សូមគូររង្វង់លេខ 0 សំរាប់វិធីសាស្ត្រទាំងអស់ដែលបានបញ្ជាក់ដោយមិនបង្ហើបចំលើយ សូមអានឈ្មោះ និងការពិពណ៌នាអំពីគ្រប់វិធីដែលមិនទាន់បានបញ្ជាក់ ។ គូសរង្វង់លេខ 1 សំរាប់រាល់វិធីសាស្ត្រដែលពួកគេបានលឺ និងលេខ 2 សំរាប់រាល់វិធីសាស្ត្រដែលពួកគេមិនដែលលឺ ។			ចាស	ចាស
31	ស្ត្រីអាចលេបថ្នាំគ្រាប់រៀងរាល់ថ្ងៃដើម្បីការពារការកុំអោយមានផ្ទៃពោះ ។ ថ្នាំគ្រាប់លេបរាល់ថ្ងៃ	0	1	2

32	ស្ត្រីអាចលេបថ្នាំគ្រាប់ខែមួយគ្រាប់ ដើម្បីការពារកុំអោយមានផ្ទៃពោះ ។ ថ្នាំគ្រាប់លេប១ខែម្តង	0	1	2
33	ស្ត្រីអាចដាក់ស្រោមក្នុងទ្វារមាស រឺបុរសអាចពាក់ស្រោមលើ លិង្គ នៅមុនពេលរួមភេទ ។ ស្រោមអនាម័យ	0	1	2
34	ស្ត្រីអាចចាក់ថ្នាំដែលការពារការមិនអោយផ្ទៃពោះរយៈពេល ៣ខែ ។ ថ្នាំចាក់	0	1	2
35	គឺជាបំពង់តូចដែលដាក់នៅដើមដៃស្ត្រីអាចការពារមិនអោយមានផ្ទៃពោះ ។ កងដាក់ដៃ	0	1	2
36	កងនេះដាក់ក្នុងស្បូនស្ត្រីដោយវេជ្ជបណ្ឌិត ឬធុបដែលមានជំនាញអាចការពារមិនអោយ ផ្ទៃពោះរយៈពេល ៧ ឆ្នាំ ។ កងដាក់ស្បូន	0	1	2
37	ស្ត្រីអាចលេបថ្នាំក្នុងអំឡុងពេល១២០ម៉ោង ក្រោយរួមភេទមិនបានការពារ ដើម្បីការពារមិនអោយមានផ្ទៃពោះ ។ វិធីការពារកំណើតបន្ទាន់	0	1	2
38	ស្ត្រីអាចចងដៃស្បូន រឺបុរសអាចចងបំពង់មេជីវិតឈ្មោល ដើម្បីការពារស្ត្រីកុំមាន ផ្ទៃពោះរហូត ។ វិធីអចិន្ត្រៃ រឺចងបំពង់មេជីវិតឈ្មោល	0	1	2
39	ស្ត្រីអោយកូនចៅដោះសុទ្ធហើយញឹកប្រហែលអាចការពារកុំអោយស្ត្រីមានផ្ទៃពោះ ។ បំបៅដោះកូន	0	1	2
40	ស្ត្រីតមការរួមភេទក្នុងពេលដែលអាចមានកូន ប្រហែលមិនមានផ្ទៃពោះ ។ វិធីប្រតិទិន	0	1	2
41	ដកលិង្គចេញមុនពេលចេញទឹកស ប្រហែលអាចការពារកុំអោយស្ត្រីមានផ្ទៃពោះ ។ ចាក់ទឹកក្រៅពាង	0	1	2
42	តើវិធីសាស្ត្រណាខ្លះដែលល្អបំផុតសំរាប់ស្ត្រីដែលមិនចង់បានកូនទៀត? ចំលើយ (កងដាក់ស្បូន វិធីចងដៃស្បូន រឺបំពង់បង្កូរមេជីវិតឈ្មោល)	ត្រឹមត្រូវ	0	
		មិនត្រឹមត្រូវ	1	
43	តើវិធីសាស្ត្រណាដែលការពារអ្នករយៈពេលយូរបំផុត? ចំលើយ (កងដាក់ស្បូន វិធីចងដៃស្បូន រឺបំពង់បង្កូរមេជីវិតឈ្មោល)	ត្រឹមត្រូវ	0	
		មិនត្រឹមត្រូវ	1	
សូមឆ្លើយប្រាប់ខ្ញុំថាឃ្លានិមួយខាងក្រោមនេះមួយណាខុស ឬមួយណាត្រូវ				
44	ពេលដែលប្រើកងដាក់ស្បូន អ្នកមានអារម្មណ៍ថាកងដាក់ស្បូននៅក្នុងខ្លួនរបស់អ្នក	ត្រូវ	0	
		ខុស	1	
45	កងដាក់ស្បូនរត់ក្នុងខ្លួនរបស់អ្នក	ត្រូវ	0	
		ខុស	1	
46	ស្ត្រីអាចប្រើកងដាក់ស្បូនតែមួយយូរបំផុតរយៈពេល ៣ឆ្នាំ	ត្រូវ	0	
		ខុស	1	
47	ស្ត្រីអាចមានផ្ទៃពោះ ប្រសិនបើភ្លេចលេបថ្នាំមួយថ្ងៃ	ត្រូវ	0	

		ខុស	1
48	ស្ត្រីអាចចាក់ថ្នាំ១ខែម្តងដើម្បីការពារការមានផ្ទៃពោះ	ត្រូវ ខុស	0 1
49	មានវិធីសាស្ត្រពន្យារកំណើតតែមួយគត់ដែលត្រូវនិងខ្លួនស្ត្រីទាំងអស់	ត្រូវ ខុស	0 1
50	ជងដៃស្បូន រីបំពង់បង្កូរមេជីវិតឈ្មោល គឺជាវិធីតែមួយគត់ដែលការពារស្ត្រីកុំអោយមានផ្ទៃពោះ រហូត	ត្រូវ ខុស	0 1
51	តើសព្វថ្ងៃនេះអ្នកពុំប្រើវិធីពន្យារកំណើតដែរឬទេ?	ទេ (រំលងទៅសំណួរ៥៣) ចាស	0 1
52	តើវិធីណាមួយដែលអ្នកពុំប្រើ?	ថ្នាំលេបរាល់ថ្ងៃ ថ្នាំលេប១ខែម្តង ស្រោមអនាម័យ ថ្នាំចាក់ កងដាក់ស្បូន ជងដៃស្បូន បង្កូរមេជីវិតឈ្មោល ប្រតិទិន ចាក់ទឹកក្រៅពាង បំបៅដោះកូន ផ្សេងៗ.....	0 1 2 3 4 5 6 7 8 88
53	ក្នុងរយៈពេល 4ខែចុងក្រោយនេះតើអ្នកបាននិយាយជាមួយនរណាខ្លះអំពីការពន្យារកំណើត ដែរឬទេ?	ទេ (រំលងទៅសំណួរ៥៦) ចាស	0 1
54	តើនរណាខ្លះដែលអ្នកនិយាយជាមួយ? (ចំលើយអាចលើសពីមួយ) ប្រសិនបើ កូន០ បន្តសំណួរទី៥៥	បុគ្គលិកសុខាភិបាលរដ្ឋ បុគ្គលិកសុខាភិបាលឯកជន មិត្តភក្តិ គ្រួសារ ផ្សេងៗ.....	0 1 2 3 88
55	តើហេតុអ្វីបានជាមានការនិយាយគ្នាអំពីការពន្យារកំណើត?		

56	តើអ្នកមានផ្លាស់ប្តូរវិធីសាស្ត្រនៅក្នុងរយៈពេល 4ខែចុងក្រោយនេះដែរឬទេ?	ទេ (រំលងទៅសំណួរ៥៨) ចាស	0 1
57	តើហេតុអ្វីបានជាអ្នកផ្លាស់ប្តូរ?		

**ផ្នែកទី៤: ការបង្ហាញនូវលទ្ធភាពការងារផ្សេងៗដោយអំពីការពន្យារកំណើត
ឥឡូវនេះខ្ញុំចង់សាកសួរអ្នកពីការផ្សព្វផ្សាយអំពីការពន្យារកំណើតតាមវិទ្យុ និងទូរទស្សន៍**



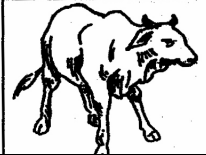
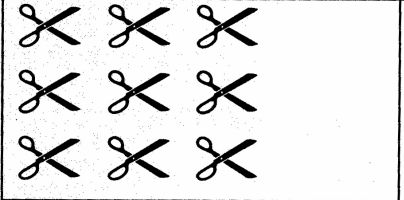
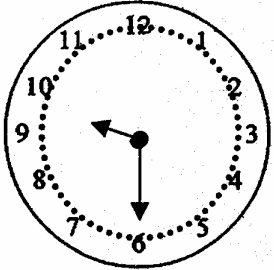
58	នៅក្នុងរយៈពេល ៤ខែចុងក្រោយនេះ តើអ្នកមានបានឮការផ្សព្វផ្សាយពីការពន្យារកំណើតតាមវិទ្យុដែរឬទេ?	ទេ (រំលងទៅសំណួរ៥៦) ចាស	0 1
59	សូមអ្នកនិយាយអំពីការផ្សព្វផ្សាយទាំងអស់ដែលអ្នកបានលឺមកខ្ញុំ		
60	អ្នកឆ្លើយបានលឺយុទ្ធនាការដែរឬទេ?	មិនបានលឺ (រំលងទៅសំណួរ៦៦) បានលឺ	0 1

61	កូដឈុតខ្លីៗតាមវិទ្យុដែលអ្នកឆ្លើយបាន	ឈុតទី 1 (ថ្នាំចាក់: កូនលេងចាក់ថ្នាំ...) 1 ឈុតទី 2 (កងដាក់ស្បូន: ស៊ីនុនទិញគ្រប់នៅផ្សា...) 2 ឈុតទី 3 (ថ្នាំចាក់: កូនស្រីនិយាយជាមួយម្តាយអំពីថ្នាំចាក់មានតំលៃសមរម្យ និងងាយស្រួលប្រើ) 3 ឈុតទី 4 (ចងដៃស្បូន : កូនយំ ម៉ែយំ...) 4 ឈុតទី 5 (កងដាក់ស្បូន: ភ្នែក និងកញ្ចាញនិយាយគ្នាការមកឈាមតិចៗបន្ទាប់ពីការដាក់កងមិនប៉ះពាល់សុខភាពទេ) 5 ឈុតទី 6 (គ្រូបរិច្ចាគ្រប់អស់: អ្នកនាងថ្នាំលេប) 6 ឈុតទី 7 (កងដាក់ស្បូន: ប្រើប្រាស់កងដាក់ស្បូនអាចធ្វើការច្រើនបាន ដូចជាកាប់អុស...) 7 ឈុតទី 8 (គ្រូបរិច្ចាគ្រប់អស់: ក្រុមនារីនិយាយគ្នាអំពីពិធីពន្យារកំណើតនៅក្នុងពិធីបុណ្យ) 8	
62	តើអ្វីដែលអ្នកបានរៀនពីឈុតខ្លី?	ដឹងពីវិធីផ្សេងៗ 1 ដឹងពីកងដាក់ស្បូន 2 ចំណេះដឹងពីការពន្យារកំណើត 3 ចំណេះដឹងពីកងដាក់ស្បូន 4 អាចជ្រើសរើសវិធីពន្យារកំណើត 5 គុណសម្បត្តិនៃការពន្យារកំណើត 6 គ្មានអ្វី 7 ផ្សេងៗ..... 88	
63	តើអ្វីដែលអ្នកចូលចិត្តបំផុតអំពីឈុតខ្លី?		
64	តើអ្វីដែលអ្នកមិនចូលចិត្តបំផុតអំពីឈុតខ្លី?		
65	តើអ្នកមានគំនិតអ្វីខ្លះដើម្បីធ្វើអោយឈុតខ្លីទាំងនេះកាន់តែប្រសើរឡើង?		
66	នៅក្នុងរយៈពេល ៤ ខែចុងក្រោយនេះ តើអ្នកមានបានឃើញការផ្សព្វផ្សាយពីការពន្យារកំណើត	ទេ (រំលងទៅសំណួរទី៧៤)	0

	តាមទូរទស្សន៍ដែរឬទេ?	ចាស	1
67	សូមអ្នកនិយាយអំពីការផ្សព្វផ្សាយទាំងអស់ដែលអ្នកបានឃើញមកខ្ញុំ		
68	អ្នកឆ្លើយបានឃើញយុទ្ធនាការដែរឬទេ?	មិនបានឃើញ(រំលងទៅសំណួរ៧៤) បានឃើញ	0 1
69	កូដឈុតខ្លីៗតាមទូរទស្សន៍ដែលអ្នកឆ្លើយបានឃើញ	ឈុតទី 1 (គ្របវិធីទាំងអស់: អ្នកនាងថ្នាំលេប.....) ឈុតទី 2 (កងដាក់ស្បូន: ស្ត្រី២នាក់និយាយអំពីប្រសិទ្ធភាពរបស់កងរយ: ពេលពេលនៅចម្រុះចាយ) ឈុតទី 3 (ថ្នាំចាក់: ស្ត្រីពីរនាក់និយាយអំពីការភ្ជួរលេបថ្នាំ និងប្តូរទៅប្រើថ្នាំចាក់នៅក្នុងផ្សារ) ឈុតទី 4 (កងដាក់ស្បូន: និយាយពីប្រើកងអាចធ្វើការចូលបានម្តង នៅវាលស្រែ) ឈុតទី 5 (គ្របវិធីទាំងអស់: មានក្រុមបុរសពីរនាក់សួរអំពីវិធីចងដៃស្បូន) ឈុតទី 6 (កងដាក់ស្បូន: និយាយអំពីកងដាក់ស្បូននៅមណ្ឌលសុខភាព)	1 2 3 4 5 6
70	តើអ្វីដែលអ្នកបានរៀនពីឈុតខ្លី?	ដឹងពីវិធីផ្សេងៗ ដឹងពីកងដាក់ស្បូន ចំណេះដឹងពីការពន្យារកំណើត ចំណេះដឹងពីកងដាក់ស្បូន អាចជ្រើសរើសវិធីពន្យារកំណើត គុណសម្បត្តិនៃការពន្យារកំណើត គ្មានអ្វី ផ្សេងៗ.....	1 2 3 4 5 6 7 88
71	តើអ្វីដែលអ្នកចូលចិត្តបំផុតអំពីឈុតខ្លី?		

72	តើអ្វីដែលអ្នកមិនចូលចិត្តបំផុតអំពីឈុតខ្លី?									
73	តើអ្នកមានគំនិតអ្វីខ្លះដើម្បីធ្វើអោយឈុតខ្លីទាំងនេះកាន់តែប្រសើរឡើង?									
74	តើអ្នកមានយោបល់អ្វីបន្ថែមដែរឬទេ?									
75	<p>ការធ្វើតេស្តទាក់ទងទៅការចេះអាន និងសរសេរ</p> <p>សូមប្រគល់ជូនអ្នកឆ្លើយទាំងអស់នូវក្រដាសធ្វើតេស្តមួយដែលទាក់ទងនឹងការចេះអាន និងសរសេររបស់ពួកគាត់។ សូមកុំអានសំណួរទាំងនោះអី។ ធ្វើការលើកទឹកចិត្តដល់អ្នកឆ្លើយទាំងនោះ អោយសាកល្បងបំពេញយ៉ាងហើចណាស់ ក៏បានសំណួរទី១ដែរ។ បន្ទាប់ពីអ្នកឆ្លើយគាត់បានធ្វើតេស្តនេះចប់ហើយ អ្នកត្រូវអរគុណពួកគាត់, ត្រូវដាក់ពិន្ទុទៅលើការធ្វើតេស្តរបស់គាត់ និងត្រូវគូសជារង្វង់ទៅលើក្នុងលទ្ធផល។</p> <table border="1" data-bbox="228 1281 1485 1480"> <tr> <td data-bbox="228 1281 1084 1354">ប្រសិនបើចម្លើយ ត្រូវទាំងអស់ ក្នុងលេខ១-ចេះអាន និងសរសេរ</td> <td data-bbox="1084 1281 1485 1354">ចេះអាន និងសរសេរ</td> <td data-bbox="1485 1281 1485 1354">1</td> </tr> <tr> <td data-bbox="228 1354 1084 1417">ប្រសិនបើចម្លើយ ខ្លះត្រូវ ក្នុងលេខ២-ចេះអាន និងសរសេរខ្លះ</td> <td data-bbox="1084 1354 1485 1417"><i>ចេះអាន និងសរសេរខ្លះ</i></td> <td data-bbox="1485 1354 1485 1417">2</td> </tr> <tr> <td data-bbox="228 1417 1084 1480">ប្រសិនបើចម្លើយ មិនត្រូវទាំងអស់ ក្នុងលេខ៣-មិនចេះអាន និងសរសេរ</td> <td data-bbox="1084 1417 1485 1480"><i>មិនចេះអាន និងសរសេរ</i></td> <td data-bbox="1485 1417 1485 1480">3</td> </tr> </table> <p>យោបល់របស់អ្នកធ្វើសម្ភាសន៍ (បើមានអ្វីខុសប្លែកពីធម្មតា អ្នកសម្ភាសន៍សូមកត់ត្រានៅទីនេះ)</p>	ប្រសិនបើចម្លើយ ត្រូវទាំងអស់ ក្នុងលេខ១-ចេះអាន និងសរសេរ	ចេះអាន និងសរសេរ	1	ប្រសិនបើចម្លើយ ខ្លះត្រូវ ក្នុងលេខ២-ចេះអាន និងសរសេរខ្លះ	<i>ចេះអាន និងសរសេរខ្លះ</i>	2	ប្រសិនបើចម្លើយ មិនត្រូវទាំងអស់ ក្នុងលេខ៣-មិនចេះអាន និងសរសេរ	<i>មិនចេះអាន និងសរសេរ</i>	3
ប្រសិនបើចម្លើយ ត្រូវទាំងអស់ ក្នុងលេខ១-ចេះអាន និងសរសេរ	ចេះអាន និងសរសេរ	1								
ប្រសិនបើចម្លើយ ខ្លះត្រូវ ក្នុងលេខ២-ចេះអាន និងសរសេរខ្លះ	<i>ចេះអាន និងសរសេរខ្លះ</i>	2								
ប្រសិនបើចម្លើយ មិនត្រូវទាំងអស់ ក្នុងលេខ៣-មិនចេះអាន និងសរសេរ	<i>មិនចេះអាន និងសរសេរ</i>	3								

សូមអរគុណចំពោះការចំណាយពេលវេលារបស់អ្នកក្នុងការផ្តល់បទសម្ភាសន៍នេះ ៗ

<p>១</p>	<p>សូមលោកអ្នកគូសភ្ជាប់ពាក្យនីមួយៗអោយត្រូវនឹងរូបភាព</p> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 20px;">    </div> <div> <p>គោ</p> <p>អារី</p> <p>ផ្លែពោត</p> </div> </div>	
<p>២</p>	<p>សូមសរសេរឈ្មោះភូមិ ឃុំ ស្រុកដែលលោកអ្នក រស់នៅសព្វថ្ងៃ</p> <p>.....</p> <p>.....</p> <p>.....</p>	
<p>៣</p>	<p>សូមលោកអ្នកសរសេរជាលេខ និង ជាអក្សរអោយត្រូវនឹងចំនួនរូបទាំងអស់ខាងក្រោមនេះ</p> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 5px; margin-right: 20px;">  </div> <div> <p>ជាលេខ:.....</p> <p>ជាអក្សរ:</p> </div> </div>	
<p>៤</p>	<p>សូមលោកអ្នកបញ្ជាក់ប្រាប់ថា នាឡិកានេះម៉ោងប៉ុន្មាន?</p> <div style="text-align: center;">  <p>.....</p> </div>	

សូមអរគុណចំពោះការចំណាយពេលវេលារបស់អ្នកក្នុងការផ្តល់បទសំភាសន៍នេះ ឧ

Media Impact Survey Questionnaire for Women aged 15-45



Province : _____	□ □
District : _____	□ □
Commune: _____	□ □
Village: _____	□ □
Wealth Ranking – Poorest (0) Medium (1) Better-off (2)	□
House Type – Check your own observation	
Palm/thatch (0) Wood/palm (1) Wood/tin (2) Wood/tile (3) Brick or concrete (4)	□

	1 st attempt	Appointment	2 nd attempt
Date	/ / 07	/ / 07	/ / 07
Time			
Location			
Interviewer	□ □	□ □	□ □

Result Codes	
Completed	1
Incomplete-respondent termination	2
Incomplete-third party interruption	3
Respondent refusal	4
Parent/guardian/spouse refusal	5
Respondent absent at 2nd appointment	6

	Interviewer	Editor	Encoder	Archived
ID code	□ □	□ □	□ □	Box: □ □
Date	/ / 07	/ / 07	/ / 07	/ / 07
Signature				

Introduction:

Hello I am working with Domrei Research and Consulting. I am here to interview 15 to 45 year old women on their habit and characteristics toward media. I want to know especially the impact of the campaign of contraceptive methods that are displayed some time ago on TV and radio. We also want to know people’s knowledge, behavior, and thinking toward each method they heard. Please don’t be scared or worried because we just only want to know the above mentioned thing. Everything you say will be confidential. We won’t let anybody in the village or your family, know what you say.

You can refuse to answer any question that you don’t want to answer or you can stop to discuss the questions at any time. I want to thank you and say I hope this interview will only take 30 minutes.

I want to remind you that all your answers are very important. It isn’t a test, so there are no wrong answers. Therefore, I want to ask you to answer truthfully. This will allow my team to give true information to the Ministry of Health to improve the campaign for future.

Do you have any questions for me?

Can I start asking the questions now?

Section 1: Respondent’s background

1	<p>What month and year were you born?</p> <p><i>Please write the month and year below.</i> <i>If the respondent does not remember the month – code June</i></p> <p>Month.....Year.....</p>	<p>Age in years <input type="text"/> <input type="text"/></p>
2	<p>What is your marital status?</p>	<p>Single 0 Married 1 Widowed/divorce 2</p>
3	<p>Do you have any birth children?</p>	<p>No (Skip to Q5) 0 Yes 1</p>
4	<p>How many birth children do you have?</p>	<p><input type="text"/> <input type="text"/> <input type="text"/></p>
5	<p>Have you ever been to school?</p>	<p>No (Skip to Q7) 0 Yes 1</p>
6	<p>What is the highest grade you completed?</p>	<p>Grade: <input type="text"/> <input type="text"/></p> <p>University 13</p>
7	<p>What assets do your family own?</p> <p><i>Prompt by reading the list</i> <i>Multiple answers possible – circle all answers given</i> <i>Check your own observation as well</i></p>	<p>Not have 0 Radio 1 Television 2 Bicycle 3 Refrigerator 4 Motorcycle 5 Ox cart 6 Boat 7 Car/Koyun 8</p>

8	What farm animals do your family own?	Not have	0
	<i>Prompt by reading the list</i>	Chicken/ducks	1
		Pigs	2
		Goats	3
		Cows	4
		Horses	5
		Buffalo	6
<i>Multiple answers possible – circle all answers given</i>			
<i>Check that they do not mind the animals for someone else</i>			

Section 2 : Mass Media Habits

I would like to ask you some questions about your media habits

9	Do you ever listen to the radio?	No (Skip to Q15)	0
		Yes	1
10	What Radio stations do you know? <i>Multiple Answers</i>	FM 88 (Sweet FM)	1
		FM 90.5 (Taprum)	2
		FM 90	3
		FM 92	4
		FM 95 (Bayon)	5
		FM 96 (National Radio)	6
		FM 97 (Apsara)	7
		FM 97.5 (love FM)	8
		FM 98 (KhémerakPhumin)	9
		FM 99	10
		FM 99.5	11
		FM 102 (Radio WMC)	12
		FM 103 (Radio PP)	13
		FM104 (Sovana Phum)	14
		FM105 (Beehive)	15
		FM107	16
VOA (Voice of America)	17		
RFA (Radio Free Asia)	18		
	Others: ...	88	
11	What Radio stations do you listen to? <i>Multiple Answers</i>	FM 88 (Sweet FM)	1
		FM 90.5 (Taprum)	2
		FM 90	3
		FM 92	4
		FM 95 (Bayon)	5
		FM 96 (National Radio)	6
		FM 97 (Apsara)	7

		FM 97.5 (love FM) 8 FM 98 (KhémerakPhumin) 9 FM 99 10 FM 99.5 11 FM 102 (Radio WMC) 12 FM 103 (Radio PP) 13 FM104 (Sovana Phum) 14 FM105 (Beehive) 15 FM107 16 VOA (Voice of America) 17 RFA (Radio Free Asia) 18 Others: ... 88
12	Which radio station do you listen to the most? Mark one only and Check that the answer is consistent with the questions above	FM 88 (Sweet FM) 1 FM 90.5 (Taprum) 2 FM 90 3 FM 92 4 FM 95 (Bayon) 5 FM 96 (National Radio) 6 FM 97 (Apsara) 7 FM 97.5 (love FM) 8 FM 98 (KhémerakPhumin) 9 FM 99 10 FM 99.5 11 FM 102 (Radio WMC) 12 FM 103 (Radio PP) 13 FM104 (Sovana Phum) 14 FM105 (Beehive) 15 FM107 16 VOA (Voice of America) 17 RFA (Radio Free Asia) 18 Others: ... 88
13	Normally, how often do you listen to the radio? Prompt by reading the answers and asking the respondent to choose one	Several times a day 1 Every day 2 Several times a week 3 Every week 4 Every few weeks 5 Every month 6
14	What times of day do you listen to the radio?	6:00 – 11:00 AM 1

	Multiple answers	11:00 – 1:00 PM	2
		1:00 – 5:00 PM	3
		5:00 – 7:00 PM	4
		7:00 – 8:00 PM	5
		8:00 – 9:00 PM	6
		9:00 – 10:00 PM	7
		10:00 – 11:00 PM	8
		11:00 – 12:00 PM	9
		12:00 – 6:00 AM	10
15	Do you ever watch television?	No (Skip to Q21)	0
		Yes	1
16	What television stations do you know? Multiple answers	CTN	1
		APSARA	2
		TV3	3
		TV5	4
		TV9	5
		TVK	6
		BAYON	7
		Cable TV	8
		Others:...	88
17	What television stations do you watch? Multiple answers	CTN	1
		APSARA	2
		TV3	3
		TV5	4
		TV9	5
		TVK	6
		BAYON	7
		Cable TV	8
		Others:...	88
18	Which television station do you watch the most? Mark one only and Check that the answer is consistent with the questions above	CTN	1
		APSARA	2
		TV3	3
		TV5	4
		TV9	5
		TVK	6
		BAYON	7
		Cable TV	8
		Others:...	88
19	Normally, how often do you watch television?	Several times a day	1

	Prompt by reading the answers and asking the respondent to choose one	Every day 2 Several times a week 3 Every week 4 Every few weeks 5 Every month 6
20	What times of day do you watch television? Multiple Answers	6:00 – 11:00 AM 1 11:00 – 1:00 PM 2 1:00 – 5:00 PM 3 5:00 – 7:00 PM 4 7:00 – 8:00 PM 5 8:00 – 9:00 PM 6 9:00 – 10:00 PM 7 10:00 – 11:00 PM 8 11:00 – 12:00 PM 9 12:00 – 6:00 AM 10
21	Would you be interested in learning about contraception at a meeting in your village?	No 0 Yes 1
22	Would you be interested if another woman came to your house to explain about contraception?	No 0 Yes 1
23	Would you be interested in attending a play that informed you about contraception?	No 0 Yes 1
24	Would you like to receive a leaflet with information about contraception?	No 0 Yes 1
Media Ranking – I am going to show you some cards with different types of media that we have just discussed. I want to ask you to rank these types of media.		
Give the respondent the cards all six cards for the media types. Ask them to give you back the card with their answer.		
25	Which media is the best way for you to learn?	Meeting 1 Peer Ed 2 Theatre 3 Leaflet 4 Television 5 Radio 6
26	Which media is the second best way for you to learn?	Meeting 1 Peer Ed 2 Theatre 3 Leaflet 4 Television 5 Radio 6
27	Which media is the third best way for you to learn?	Meeting 1 Peer Ed 2 Theatre 3 Leaflet 4 Television 5 Radio 6
28	Which media is the fourth best way for you to learn?	Meeting 1

		Peer Ed	2
		Theatre	3
		Leaflet	4
		Television	5
		Radio	6
29	Which media is the fifth best way for you to learn?	Meeting	1
		Peer Ed	2
		Theatre	3
		Leaflet	4
		Television	5
		Radio	6
30	Which media is the sixth best way for you to learn?	Meeting	1
		Peer Ed	2
		Theatre	3
		Leaflet	4
		Television	5
		Radio	6

Section 3: Knowledge of Contraception

Now, I would like to ask you some questions about contraception




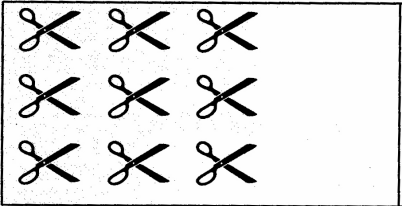
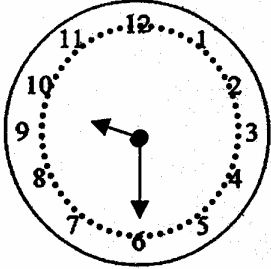
What contraceptive methods have you heard of? Please circle 0 for all methods mentioned spontaneously Please read the name and description for every method not mentioned. Circle 1 for every method that they have heard of and 2 for every method they have never heard of.		Spontaneous YES	Prompted <i>Have you ever heard of this method?</i>	
			YES	NO
31	Pill swallowed every day. Woman can swallow a pill every day to avoid getting pregnant. (Daily pill)	0	1	2
32	Pill swallowed every month. Woman can take a pill every month to avoid getting pregnant. (Monthly pill)	0	1	2
33	Condom. Women can put a rubber sheath in the vagina or men can put a rubber sheath over their penis before sex.	0	1	2
34	Injection. Woman can have an injection that prevents them from becoming pregnant for several months.	0	1	2
35	Implant in the arm. This is a small rod that is placed in a woman's upper arm, which can prevent pregnancy for several months.	0	1	2
36	IUD. This device is placed in a woman's uterus by a doctor or a nurse to prevent pregnancy.	0	1	2
37	Emergency contraception. Pills can be swallowed up to 120 hours after unprotected sex	0	1	2
38	Permanent Sterilization. The hands of a woman's uterus can be tied or a man's tubes can be knotted.	0	1	2
39	Lactic Amenorrhoea Method: Women who exclusively breastfeed may avoid pregnancy	0	1	2

40	Calendar Method: Women can avoid having sex during fertile periods	0	1	2
41	Removing the penis before the white liquid comes out: (withdrawal)	0	1	2
42	What are the best methods for women who don't want more children? Answer (IUD and sterilization)	Correct	0	
		Incorrect	1	
43	What methods protect you for the longest? Answer (IUD and sterilization)	Correct	0	
		Incorrect	1	
Please answer true or false to the following statements				
44	You can feel the IUD in your body	True	0	
		False	1	
45	The IUD moves around in your body	True	0	
		False	1	
46	You can keep the same IUD for three years the longest time	True	0	
		False	1	
47	You can get pregnant if you forget to take the pill	True	0	
		False	1	
48	You can get an injection every three months that prevents pregnancy	True	0	
		False	1	
49	There is only one method of contraception that is good for all women	True	0	
		False	1	
50	Sterilisation is the only method that protects you permanently against pregnancy	True	0	
		False	1	
51	Are you using any method of contraception now?	No(Skip to Q53)	0	
		Yes	1	
52	Which method are you currently using?	Daily pill	0	
		Monthly pill	1	
		Condom	2	
		Injection	3	
		IUD	4	
		Sterilization	5	
		Calendar	6	
		suckle	7	
		withdrawal	8	
		Other.....	88	
53	In the last four months have you talked to anyone about contraception?	No(Skip to Q56)	0	

		Yes	1
54	Who did you talk to? Multiple Answers- if code "o", continue to Q55	Health officer Private clinic officer Friends Family Others:...	0 1 2 3 88
55	Why did you talk to them about contraception?		
56	Have you changed methods in the last four months?	No (skip to Q58) Yes	0 1
57	Why did you change?		
Section 4: Exposure to Contraceptive Promotion Campaign			
Now I'd like to ask you some questions about advertising for contraception on radio and television			
58	In the last four months, have you heard contraceptive advertising on the radio?	No (Skip to Q66) Yes	0 1
59	Can you please describe all the advertising for me?		
60	Respondent exposed to campaign?	Not exposed (Skip to Q66) Exposed	0 1
61	Code the radio spot/s the respondent heard Multiple Answers	Spot 1 (Injection: Irregular period is simple) Spot 2 (IUD: Understand clearly on IUD side effect after talk with expert) Spot 3 (Injection: Daughter talk with mother about price and easy to use) Spot 4 (Sterilization: is suitable for women don't want more child) Spot 5 (IUD: have spotting bleeding after using IUD not affect to health) Spot 6 (All methods: Miss pill...) Spot 7 (IUD: Using IUD can do heavy work) Spot 8 (All methods: Talk more about sterilization is most suitable for women don't want more children.	1 2 3 4 5 6 7 8
62	What did you learn from the spot? Multiple Answers	Aware of different methods Aware of IUD Knowledge of Contraception Knowledge of IUD	1 2 3 4

		Can choose a method of contraception	5
		Advantages of contraception	6
		Learn Nothing	7
		Others: ...	88
63	What do you like the most about the spot?		
64	What do you dislike most about the spot?		
65	Do you have any comments on the spot in order to improve it?		
66	In the last four months, have you seen contraceptive advertising on TV?	No (Skip to Q74) Yes	0 1
67	Can you please describe all the advertising you saw to me?		
68	Respondent exposed to Campaign?	No (Skip to Q74) Exposed	0 1
69	Code the television spot/s the respondent saw Multiple Answers	Spot 1 (All method: Miss pill...) Spot 2 (IUD: Two women talk about effective of IUD 7 years at kitchen) Spot 3 (Injection: Two women talk about forget to take pill... in market) Spot 4 (IUD: Using IUD can do heavy work at the rice field) Spot 5 (All methods: Group of two men ask about the sterilization) Spot 6 (IUD: Talk about the IUD at health centre)	1 2 3 4 5 6
70	What did you learn from the spot? Multiple Answers	Aware of different methods Aware of IUD Knowledge of Contraception Knowledge of IUD Can choose a method of contraception Advantages of contraception Learn Nothing Others: ...	1 2 3 4 5 6 7 88
71	What do you like the most about the spot?		

72	What do you dislike most about the spot?							
73	Do you have any comments on the spot in order to improve it?							
74	Do you have any comments?							
75	<p>Literacy Test</p> <p>Hand the literacy test sheet to the respondents and ask them to complete it. Do not read out the questions. Encourage the respondent to try and complete at the least the first question. After they have finished thank them, score the test and circle the result code.</p>							
	<p>If answers are <i>all correct</i>, code 1 literate</p> <p>If <i>some answers are incorrect</i>, code 2 semi-literate</p> <p>If answers are <i>all incorrect</i>, code 3 illiterate</p>	<table border="0"> <tr> <td>Literate</td> <td style="text-align: right;">1</td> </tr> <tr> <td>Semi-literate</td> <td style="text-align: right;">2</td> </tr> <tr> <td>Illiterate</td> <td style="text-align: right;">3</td> </tr> </table>	Literate	1	Semi-literate	2	Illiterate	3
Literate	1							
Semi-literate	2							
Illiterate	3							
Interviewer notes or opinion								

<p>1</p>	<p>Please draw a line from each picture to the correct word</p> <div style="display: flex; align-items: center; margin-bottom: 10px;">  <p>Cow</p> </div> <div style="display: flex; align-items: center; margin-bottom: 10px;">  <p>Shirt</p> </div> <div style="display: flex; align-items: center;">  <p>Corn</p> </div>	
<p>2</p>	<p>Please write the name of the village, commune and district where you live every day</p> <p>.....</p> <p>.....</p> <p>.....</p>	
<p>3</p>	<p>Please write the correct number and letter using the picture below</p> <div style="display: flex; align-items: center; margin-bottom: 20px;"> <div style="border: 1px solid black; padding: 5px; display: flex; flex-wrap: wrap;">  </div> <div style="margin-left: 20px;"> <p>Number.....</p> <p>Letter.....</p> </div> </div>	
<p>4</p>	<p>Please tell me what time it is?</p> <div style="display: flex; align-items: center; margin-bottom: 20px;">  <p>.....</p> </div>	