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NATIONAL SURVEY

FINAL REPORT

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INSTITUTE OF PHILIPPINE CULTURE

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THE IPC/POMCH 1970 NATIONAL SURVEY*

Final report submitted to the Commission on Population by the
Institute of Philippine Culture on February 15, 1971

Frank Lynch, S. J.
Perla Q. Makil

This report includes sections on the plan of the survey, its limitations, findings, and conclusions. Three appendices present a list of the municipalities studied, a list of personnel involved in various aspects of the research, and the tables derived from the study.

PLAN OF THE SURVEY

Purpose. As originally planned, the IPC/POMCH 1970 National Survey was directed toward a 20 per cent sample of those rural residents who had been respondents in the BRAC 1967 Filipino family survey.¹ The purpose was (a) to see what changes had occurred among them in the intervening years, and (b) to discover, if possible, likely explanations for those changes. Attitudes toward family planning were of particular interest, as was the respondents' awareness of Pope Paul's encyclical, Humanae Vitae (July 1968). The hypothesis was that this encyclical had had minimal impact on the rural population.

*The twofold project reported on here was completed in fulfillment of a sub-agreement between the Project Office for Maternal and Child Health (POMCH) and the Institute of Philippine Culture (IPC), signed on October 29, 1969, and amended on March 20, 1970. Since the POMCH's functions have since May 15, 1970, been taken over by the Commission on Population, this report is submitted to the latter entity.

¹The Baguio Religious Acculturation Conference (BRAC) 1967 Lowland Christian Family Survey was conducted in the latter months of 1967. It is reported in Lynch and Makil 1968.

Before the IPC/POMCH 1970 national survey could be fielded, however, several amendments to its design were proposed. Since the Social Communications Center was about to start a large-scale mass media project aimed at changing attitudes toward family planning and parental responsibility, it was suggested we might include in the survey some questions likely to produce a baseline against which to measure the progress of the SCC project after about five months of its operation. It was also suggested the sample should be about 1000 respondents. The proposed changes in design and sample were accepted, and the survey design, sample, interview schedule, and budget correspondingly modified.

Sample. According to the original plan, respondents in 1970 were to be about one fifth of those who had been interviewed in the BRAC 1967 survey.² Using a list of the 100 municipalities where the survey was conducted in 1967, we randomly selected 20 municipalities (with substitutes) for the 1970 round. Our plan was to interview as many of the 1967 respondents as we could locate. For the municipalities we actually selected, this would have meant a maximum of 480 people. Instructions to interviewers would have been quite simple: go to Municipality X (the Poblacion and such-and-such Barrio), locate as many of the 1967 respondents as you can, interview them, and go on to your next municipality.

When the change was made in the size of our sample, matters became considerably more complicated. Since we were to add around 600 new respondents (we did not want to increase the size of our municipality sample, so we had to get more interviews in the same 20 municipalities), we decided to select them in such a way as to enhance the representativeness of the new combined sample (those interviewed in 1967 and 1970 plus those interviewed only in 1970).

For each of the 40 places (20 poblaciones, 20 barrios) we were to visit, we prepared a chart telling the interviewer what background characteristics the new respondents should have. In other words, the quota sample of 1967 was to be added to, and in part replaced, in such a way as to make the 1970 combined sample

²For an explanation of the BRAC 1967 sampling plan, see Lynch and Makil 1968:295-97.

closer to the lowland rural population than the original 1967 sample had been. In all, we expected this combined sample to number 1,252 at most.

In summary, the 1970 sample was to be a combination of as many of the 1967 respondents as could be found (ideally 480) and an additional 772 people chosen to (a) bring the sample total up to over 1,000, and (b) make it more representative in background characteristics to the general lowland rural population. Ideally this plan would have yielded a sample of 1,252.

Hypotheses. Two time periods are of interest: first, the years 1967-70, for which the "BRAC re-do" component of the study is a posttest, the principal experimental variable being the encyclical Humanae Vitae (July 1968); second, the months April-December 1970, for which the "SCC baseline" component is a pretest, the major experimental treatment being exposure to the SCC mass media campaign during the months following this study. By the nature of the case, the BRAC re-do hypotheses can be tested with data in hand from the current study; by the same token, however, the formal SCC baseline hypotheses cannot be tested here. This step will come after the SCC posttest has been completed. Nonetheless, we shall relate a number of independent and dependent baseline variables among themselves to see in what way they are associated with one another.

A. Baseline (April 1970) variables related to one another

1. Knowledge, discussion, approval, and practice of family planning vary by respondent's age, sex, civil status, socioeconomic status, education, schools attended, occupation, residence, closeness to FP clinic, source of knowledge, and (for married respondents) number of pregnancies and live births (males, females) in present marriage.
2. Preferred and foreseen family size, the desire to learn more about, and the intention to practice, family planning vary by the same independent variables as in paragraph A-1, above (age, sex, etc.).

3. Respondent's perception of FP approval by spouse, community members, President Marcos, and the Pope is associated with R's own approval of FP.

B. Changes in the period 1967-1970 (BRAC re-do)

1. Of respondents interviewed in 1967 and 1970, the percentage approving of FP in 1970 is higher than it was in 1967.
2. In the 1967-1970 period the percentage of respondents changing to approval of FP is higher than the percentage changing to disapproval.
3. Among reasons given for changing (in the period 1967-1970) from approval or "Don't know" to disapproval of FP the Church, the Pope and Humanae Vitae do not occur with significant frequency.

C. Changes in the period April-December 1970³

1. Changes in knowledge, discussion, approval, and practice of family planning vary with levels of exposure to the SCC mass media campaign.
2. Changes in preferred and foreseen family size, the desire to learn more about, and the intention to practice, family planning also vary by levels of SCC exposure (paragraph C-1, above).

³These hypotheses will be tested using data gathered both in this survey and in the posttest survey (December or January 1971). The latter data are not available at this writing.

3. Changes in the reasons given for having a small (3-4 children) or large (7 children) family, and in respondent's perception of FP approval by Pope also vary by levels of SCC exposure.

Interview schedule. Unlike the 1967 BRAC survey (see Lynch and Makil 1968:297-98), the 1970 study had only one form of interview schedule. Information sought from respondents was as follows.

DEMOGRAPHIC DATA

All respondents: municipality, mother tongue, residence (barrio or poblacion), name, age, sex, civil status, social status ("big" or "little"⁴), educational attainment, kind of schools attended (public, private religious, private nonreligious), literacy (claimed), religious identification, primary occupation.

Married respondents: age of respondent's spouse, duration of present marriage, spouse's educational attainment, literacy, primary occupation, religious identification, mother tongue; number of pregnancies and number of live births (males, females) in present and past marriages; rural-urban background of couple.

BEHAVIORAL DATA

All respondents: mass-media exposure in month preceding interview, names (recalled) of four magazines read most often, names (recognized)

⁴The use of the reputational technique for social class placement is explained in the BRAC 1967 Report (Lynch and Makil 1968: 297) and justified as valid in Lynch's Social Class in a Bikol Town (1959).

of magazines read in past two months; usual radio listening times, usual (favorite) radio programs and stations listened to, whether "Mirror of Life" program ever heard, number of functioning radios in home; knowledge of names of Pope, President of the Philippines and of the United States; awareness of term "responsible parenthood" and its meaning; church attendance in past month.

Married respondents: work patterns before and after present marriage; whether respondent and spouse ever talked about number of children they should have.

OPINIONS

All respondents: reasons (if any) why 2-3 children are preferable, reasons (if any) why 7 or more are preferable, preferred number of children, approval/disapproval of family limitation/planning, reasons for approving/disapproving of family limitation/planning, how respondent thinks neighbors, spouse, President Marcos, and Pope feel about family planning; desire to learn more about family planning--what in particular, and from whom; intentions regarding family planning practice in future, whether mind has changed on family planning since January 1968 and, if so, probable reason for the change; major problems facing the nation today, and likely solutions.

Married respondents: preferred number of children of respondent and spouse; likely number of children respondent and spouse will have in addition to present number, and why.

Field procedures. The routine followed by interviewers did not differ greatly from that followed in the BRAC 1967 survey (Lynch and Makil 1968:298-99). The most important distinction is that in 1970

the interviewers started with a list of people to be re-interviewed, as well as instructions for the selection of a new quota sample.

Interviews took about 45 minutes on the average and were conducted by one interviewer in the respondent's mother tongue, in English, or in Tagalog, as the respondent wished. Check-up interviews were conducted and protocols were edited both in the field and at the IPC main office in Quezon City. Field research began March 30, 1970, and was substantially completed by May 31, 1970.

LIMITATIONS OF THE STUDY

The respondents in this survey are a sample of a quota sample plus a second quota sample. The first (1967) sample was in several characteristics proportionally unrepresentative of the rural lowland Christian population from which it was drawn. In general, it was more sophisticated than that population, largely because of the overrepresentation of college graduates in the sample and what this implies in terms of qualities associated with higher educational attainment.

The unrepresentativeness of the 1967 sample has been somewhat corrected in the 1970 selection. Without losing the representativeness of the 1967 sample in mother tongue, religion, sex, age, and civil status, the 1970 sample now closely approximates the lowland percentages in terms of residence (barrio or poblacion), social status, and literacy. The population's education percentages were less successfully matched, but a comparison with the 1967 sample shows how great an improvement has been made.

Level	1967	1970	Population
Less than elem.	19%	56%	66%
Elem. grad.	15	13	16
Some HS	20	9	8
HS grad.	10	6	5
Some coll.	11	4	3
Coll. grad.	24	11	2
TOTAL	99%	99%	100%

For all that, and regardless of its representativeness, the sample remains basically a quota sample, which is difficult to generalize from with accuracy.

However, two facts mitigate this limitation. One is that the sample can be used to show what intercategory differences exist, that is, how differences in age and other characteristics (our independent variables) relate to various kinds of behavior and belief. The second fact is this: in this study, as well as in the SCC posttest to follow, we are in part interested in the changes that have taken place in particular respondents over the time period 1967-70 or April-December 1970. This latter part of the research can be construed as a multiple case study, valid in its own right, regardless of the generalizability, narrowly understood, of the findings.

In summary, this survey sample is fairly representative of the population from which it was drawn--the rural lowland Christians residing in 37 provinces of the Philippines. While a quota sample cannot be the basis of accurate generalizations regarding the population which it represents, it can be used to show the existence of intercategory differences in that population.⁵ Further, an important part of the present study concerns changes over time within particular individuals studied before and after exposure (or non-exposure) to the encyclical Humanae Vitae (BRAC re-do) or the SCC mass-media campaign. Here generalizability is desirable but not necessary.

⁵See Lynch and Makil (1968:299-300) for a further discussion of the 1967 sample.

FINDINGS

In this section we first report the replies of respondents to the questions our interviewers asked of them in April and May 1970. We have grouped this information under five headings, namely, background characteristics, knowledge of family planning, approval of family planning, practice of family planning, and reported exposure to the information and motivation program of the Social Communications Center (SCC). Except in the sub-section on background characteristics (where no cross-tabulations are presented), an overall statement is followed by refinements derived from cross-tabulations by sex, civil status, age, educational attainment, residence, social class, presence or absence in the municipality of a family planning (FP) clinic, recall or recognition of an SCC publication, awareness of the SCC's "Mirror of Life" radio program, and sources of knowledge regarding FP techniques. In the sub-section on approval of FP, additional cross-tabulations are reported.

Following the section on respondents' 1970 replies is a section in which we compare selected categories of these responses with those of the same categories recorded in 1967.

I. Respondents' background characteristics.

In terms of age, sex, civil status, religion, mother tongue, residence, social status, literacy, and kind of schools attended, the sample of the 1970 survey closely approximates the lowland Christian population which it is supposed to represent (Tables 1 and 2). Nonetheless, it still has fewer respondents with minimal education and more with college education than it should have (see above, under "Limitations").

Because of the way the sample differs in composition from that of 1967, and because it remains more sophisticated in some ways than its parent population, it follows that (a) the 1970 totals, or averages, are more valid than those of 1967, but (b) intercategory differences remain the more valid indicators of differences to be found in the larger population.

II. Findings related mainly to knowledge of FP

A. AWARENESS OF FP IN GENERAL

1. Overall. Of 1043 respondents asked if they were aware of any kind of family planning, 67 per cent respond that they are.
2. Significant associations. Awareness of family planning is positively associated with being female (70 vs. 64 per cent for males; 0.05), married (72 vs. 58 for single respondents; 0.001), 25 years of age or older (75 vs. 56 per cent for those under 25; 0.001), a poblacion resident (76 vs. 61 per cent for barrio people; 0.001), well educated (from 56 per cent for those with no education to 85 per cent for college graduates; 0.001), and of the upper social class (85 vs. 62 per cent for little people; 0.001).

Awareness is negatively associated with residence in a municipality which has a family planning clinic (61 vs. 69 per cent; 0.05).

3. This awareness is not associated with recall or recognition of any of the SCC magazines nor with having heard the "Mirror of Life" radio program.
4. Of those who profess a general awareness of FP and a knowledge of some specific techniques, the most important sources of information are non-medical friends and relatives (48 per cent), medical people other than FP clinic personnel (16 per cent), FP clinic personnel (5 per cent), newspapers (2 per cent), priests and ministers (1 per cent), and others (10 per cent).

B. FREE RECALL OF SPECIFIC FP TECHNIQUES⁶

1. Overall. Respondents' spontaneous recall of specific FP techniques differs considerably from their recognition of

⁶In the sub-section that follows (C), the data concern specific FP techniques recalled or recognized. Here they are only about those which are freely recalled.

various techniques when the names of these techniques are suggested to them. The findings are these:

Technique	Percentages of 1043 respondents		
	Recalling	Recognizing	Total
Oral pill	48%	10%	58%
Rhythm	24	14	38
Withdrawal	14	14	28
IUCD	12	8	20
Condom	9	20	29
Sterilization	7	25	32
Douche*	3	9	12
Diaphragm	3	7	10
Foam	1	6	7
Suppository	1	6	7

*Because the douche, diaphragm, foam, and suppository techniques are known by so few respondents, they will henceforth be treated as an "OTHERS" category or simply dropped from consideration.

2. Significant associations with free recall. A study of the data presented in Table 3 reveals that respondents who are of the upper social class ("big people") or who have had at least a complete high school education are much more likely than others (0.001 level) to recall almost all FP techniques. Residents of the poblacion are similarly distinguished from barrio people (0.001 or 0.01 level).

Closer examination of the associations displayed in Table 3 indicates that, particularly where the oral pill and IUCD are concerned, women are better informed than men (53 vs. 43 per cent and 15 vs. 9 per cent, respectively), and married people better informed than the unmarried (52 vs. 42 per cent and 15 vs. 7 per cent, respectively).

Further, it seems clear that, compared with married women, single women are almost equally aware of FP techniques. Single males, on the other hand, show much less knowledge of these matters than do married men.

The relation between residence and education is worthy of special note. Among high school graduates, poblacion residents mention rhythm (but no other technique) more frequently than barrio residents do (63 vs. 33 per cent; 0.001 level). Awareness of the oral pill is associated with mentioning at least one SCC magazine among publications most often read (88 vs. 58 per cent; 0.05); mention of rhythm is associated with recognition of the name of at least one such magazine as read in the past two months (39 vs. 28 per cent; 0.01).

3. Recall of specific FP techniques is not associated with residence in a FP-clinic municipality.
4. Of respondents who spontaneously mention the oral pill as a FP technique they know about (48 per cent), almost all (41 per cent) say that at least one source of their knowledge is non-medical friends and relatives. Only 4 per cent mention FP-clinic personnel, though 13 per cent say other medical people were among their informants. Radios and magazines are each mentioned by 9 per cent of these respondents.

Among those respondents who mention rhythm (24 per cent), non-medical people again emerge as common sources of information (16 per cent). Three per cent mention FP clinic personnel, but 7 per cent speak of other medical people and of newspapers.

Knowledge of withdrawal, mentioned by 14 per cent of respondents, seems to come especially through non-medical people (8 per cent) and non-FP-clinic medical personnel (5 per cent). The picture is the same relative to the IUCD (mentioned by 12 per cent of respondents), where the same sources lead the way (7 and 6 per cent, respectively).

5. When a comparison is made of respondents mentioning various information sources, to see what differences exist in their recall of specific FP techniques, these results appear:
 - a. Magazine readers mention rhythm (0.001), withdrawal (0.001), and the IUCD (0.001) more often than do radio listeners; they also mention withdrawal (0.05) more often than do those who say FP clinics are a source of their FP information.

- b. Those who say non-FP-clinic medical personnel are a source of their FP information mention rhythm (0.001), withdrawal (0.01), and the IUCD (0.001) more often than do those who speak of non-medical relatives and friends as one of their information sources.
- c. Those who get information from FP clinics mention rhythm (0.001) and the IUCD (0.01) more often than do those for whom non-medical people are a source of information.

C. RECALL-AND-RECOGNITION OF SPECIFIC FP TECHNIQUES

1. Oral pill

- a. Overall. Forty-eight per cent of 1043 respondents spontaneously recall the oral pill as a FP technique, 10 per cent recognize its name when it is mentioned to them, while 26 per cent neither recall nor recognize it. Sixteen per cent do not recall the technique but were not asked if they recognized the name.
- b. Significant associations. Recall or recognition of the oral pill as a FP technique is positively associated with being a female (64 against 53 per cent for male respondents; 0.001), married (63 against 52 per cent for single respondents; 0.01), a poblacion resident (70 against 51 per cent for barrio residents; 0.001), of the upper social class (79 against 53 per cent for lower class respondents; 0.001), and an approver of FP in general (69 against 48 per cent for non-approvers; 0.001).

Respondents within the child-bearing ages of 25-44 years (67 per cent) have greater awareness of the oral pill than respondents 15-24 years old (51 per cent) or those who are 45-54 years old (59 per cent) or older (47 per cent). Level of significance is at the 0.001 level.

There is a direct association between awareness of the pill and educational attainment (from 30 per cent for non-educated respondents to 77 per cent for college graduates; 0.001).

Respondents who claim to have heard the "Mirror of Life" program two months prior to the interview tend to have greater awareness of the oral pill than others do (61 vs. 57 per cent; 0.02). Furthermore, among literate respondents who read a magazine at least once a month, those who recognize at least one SCC magazine as a publication they read during the past two months tend more than others to be aware of the oral pill as a FP technique (74 vs. 63 per cent; 0.001).

- c. Knowing about the oral pill as a FP technique is not associated with frequent reading of any of the SCC magazines.

2. Rhythm

- a. Overall. Twenty-four per cent of respondents freely mention rhythm as a FP technique, 14 per cent recognize its name, while 46 per cent neither recall nor recognize it. Sixteen per cent do not recall the technique but were not asked if they recognized its name.
- b. Significant associations. Married respondents tend more than single ones to have an awareness of rhythm as a FP technique (44 vs. 26 per cent; 0.001). This awareness is likewise greater among respondents 25-54 years of age (45 per cent) than it is among those who are 15-24 years old (29 per cent) or 55 years and older (28 per cent; 0.001).

There is also a positive association between awareness of rhythm as a FP technique and being a poblacion resident (50 vs. 30 per cent for barrio residents; 0.001), of higher educational attainment (from 9 per cent for respondents without education to 71 per cent for college graduates; 0.001), of the upper social class (68 vs. 30 per cent for lower class respondents; 0.001), and having listened to the "Mirror of Life" program during the two months prior to the interview (39 vs. 38 per cent for non-listeners; 0.05).

Among literate respondents who read magazines at least once a month, those who recognize one of the SCC magazines as a publication they read in the two months preceding the

interview tend more than others do to say they know about rhythm as a FP technique (57 vs. 44 per cent; 0.001).

Respondents who approve of FP in general tend to have greater awareness of rhythm as a FP technique than disapprovers do (47 vs. 25 per cent; 0.001).

- c. There is no association between awareness of rhythm as a FP technique and respondent's sex or frequent reading of any of the SCC magazines.

3. Withdrawal

- a. Overall. Withdrawal as a FP technique is spontaneously mentioned by 14 per cent of respondents; 14 per cent recognize its name at the suggestion of the interviewer, while 59 per cent profess no knowledge about it at all. Thirteen per cent do not recall the technique but were not asked if they recognized its name.
- b. Significant associations. Awareness of withdrawal as a FP technique is positively associated with being married (30 against 14 per cent for unmarried respondents; 0.001), a poblacion resident (32 against 19 per cent for barrio residents; 0.001), belonging to the upper social class (47 against 19 per cent for lower class respondents; 0.001), and of higher educational attainment (from 15 per cent for respondents who have no formal education to 56 per cent for college graduates; 0.001).

Approvers of FP in general (32 against 14 per cent for disapprovers; 0.001) have greater awareness of withdrawal as a FP technique.

With respect to age, respondents who are 35-44 years old tend more than others to be more aware of withdrawal as a FP technique. The following table illustrates the differences:

Age in years	Not aware	Aware	Total N	Signif.
15-24	82%	18%	349	
25-34	71	29	256	
35-44	62	38	190	0.001
45-54	82	18	145	
55 and over	75	15	103	
Total	75	25	1,043	

Among literate respondents who read magazines at least once a month, those who recognize an SCC magazine as one they read in two months prior to interview tend to have a greater awareness of withdrawal than others do (40 vs. 31 per cent; 0.01).

- c. There is no association between awareness of withdrawal as a FP technique and respondent's sex. Nor is there an association with having listened to the "Mirror of Life" program or having mentioned any of the SCC magazines as a favorite publication.

4. IUCD (Intrauterine contraceptive device)

- a. Overall. The IUCD as a FP technique is spontaneously mentioned by 12 per cent of the respondents, 8 per cent recognize its name, while 62 per cent profess no knowledge of the technique. Eighteen per cent do not recall the technique but were not asked if they recognized its name.
- b. Significant associations. There is a positive association between awareness of the IUCD as a FP technique and being a female (25 against 16 per cent for male respondents; 0.01), married or widowed (24 against 13 for single respondents; 0.001), 25-44 years of age (28 against 14 per cent for 15-24 years and 17 per cent for 55 years and over; 0.001), a poblacion resident (28 against 15 per cent for barrio residents; 0.001), of higher educational attainment, i.e., a high school graduate or beyond (42 against 14 per cent for elementary graduate respondents or less; 0.001),

and belonging to the upper social class (40 against 15 per cent for lower social class respondents; 0.01).

Among literate respondents who read magazines at least once a month, those who recognize an SCC magazine as one they read in the past two months are more aware than others of the IUCD (34 against 25 per cent for non-readers; 0.001).

More than the disapprovers, respondents who approve of FP in general tend to be aware of the IUCD as a FP technique (29 vs. 12 per cent; 0.001).

- c. There is no association between knowing about the IUCD as a FP technique and frequent reading of any of the SCC magazines.

5. Condom

- a. Overall. Nine per cent of 1043 respondents freely recall the condom as a FP technique, 20 per cent do not freely recall it but recognize its name, and 55 per cent neither recall nor recognize it. Sixteen per cent do not recall the technique but were not asked if they recognized its name.
- b. Significant associations. Knowing about the condom as a FP technique is positively associated with being a male (35 against 24 per cent for female respondents; 0.001), being married or widowed (34 per cent against 19 per cent for single respondents; 0.001), a poblacion resident (36 against 25 per cent for barrio residents; 0.001), and of the upper social class (50 against 24 per cent for lower social class respondents; 0.001).

The higher the education the greater the awareness of the condom as a FP technique (from 19 per cent for respondents without any formal education to 48 per cent for college graduates; 0.001). With respect to age, respondents belonging to the 25-54-years age group tend to be more aware of the condom as a FP technique than those who are younger or older (36 per cent against 19 for the 15-24 years old respondents and 20 per cent for those who are 55 years old and over; 0.001).

Knowledge of the condom as a FP technique is also positively associated with approval of FP in general (38 for approvers against 18 per cent for disapprovers; 0.001).

Listeners to the "Mirror of Life" program tend more than others to say they know about the condom as a FP technique (29 vs. 26 per cent, 0.02).

- c. Awareness of the condom as a FP technique is not associated with reading an SCC magazine often or recognizing one of them as read within the two months preceding the interview.

6. Sterilization

- a. Overall. Of 1043 respondents, 7 per cent spontaneously mention sterilization as a FP technique, 25 per cent recognize it when it is mentioned to them, while 51 per cent profess no knowledge at all of it. Seventeen per cent do not recall it but were not asked if they recognized its name.
- b. Significant associations. As with the other FP techniques, married respondents tend to have greater awareness of sterilization as a FP technique (34 vs. 24 per cent for single respondents; 0.001).

Awareness tends to increase with age (from 29 per cent for respondents 15-24 years old to 38 per cent for those 45-54 years old; 0.05). However, there is a tendency for the awareness to decrease among those in the oldest age group (only 22 per cent of those 55 years old and over say they are aware of sterilization as a FP technique).

There is a positive association between awareness of sterilization as a FP technique and being a poblacion resident (37 against 28 per cent for barrio residents; 0.05), belonging to the upper social class (44 against 27 per cent for lower class respondents; 0.001), of higher educational attainment (from 19 per cent for respondents who are less than elementary graduates to 51 per cent for college graduates; 0.001), and approving of FP in general (38 for unconditional approvers, and 34 for conditional approvers against 24 per cent for disapprovers; 0.001).

For the literate respondents who read a magazine at least once a month, the tendency to know about sterilization is greater among those who recognize an SCC magazine as among those they read during the two months prior to the interview (46 against 33 per cent; 0.001).

- c. Awareness of sterilization as a FP technique is not associated with respondent's sex or frequent reading of any SCC magazine.

D. KNOWLEDGE OF HOW TO USE FP TECHNIQUES

1. Oral pill

- a. Overall. Of 482 respondents who say they know about the oral pill as a FP technique, 45 per cent (215) say they know how to use it.
- b. Significant associations. Knowing how to use the oral pill as a FP technique is almost directly associated with respondent's educational attainment, i. e., the higher the education the more likely it is that the respondent will know how it is used (from 27 per cent for respondents without education to 67 per cent for high school graduates and 53 for college graduates; 0.001). There is also a positive association between knowing how to use the oral pill and being of the higher social class (53 against 41 per cent for lower class respondents; 0.02).

Reading any of the SCC magazines is negatively associated with knowing how to use the oral pill (0 against 56 per cent for those who do not mention an SCC magazine among the publications they read most often).

- c. There is no association between knowledge of the use of the oral pill as a FP technique and respondent's sex, civil status, age, or residence in the poblacion or barrio. Neither is it associated with respondent's listening to the "Mirror of Life" radio program or recognizing any of the SCC magazines as among those read within two months prior to the interview.

2. Rhythm

- a. Overall. Seventy-six per cent of 243 respondents who say they are aware of the rhythm as a FP technique profess knowledge about how it is used.
- b. Significant associations. Married respondents (80 per cent) more than the single (62 per cent) and widowed (60 per cent) say they know how to use the rhythm technique (0.02).
- c. No association exists between respondent's sex, age, residence in the poblacion or barrio, educational attainment, or social class and knowing how to use the rhythm method. Neither is there any association between respondent's having listened to the "Mirror of Life" radio program or his having mentioned any of the SCC magazines among the magazines he reads most often or has read in the two months before the interview.

3. Withdrawal

- a. Overall. Of 117 respondents who say they are aware of withdrawal as FP technique, 80 per cent say they know how to use it.
- b. Knowing how to use withdrawal as a FP technique is not associated with respondent's sex, civil status, age, residence (whether poblacion or barrio), educational attainment, or social class. Neither is it associated with having listened to the "Mirror of Life" program or recognizing any of the SCC magazines as read during the two months prior to the interview. Nor is there an association with having any of the SCC magazines among those the respondent says he reads most often.

4. IUCD

- a. Overall. Of 117 respondents who say they know about the IUCD as a FP device, 44 per cent say they know how it is used.

- b. Significant associations. More than less well educated respondents, high school graduates tend to say that they know how to use the IUCD (64 per cent vs. 22 per cent for those with no formal education and 28 per cent for those with an incomplete grade school education; 0.02). High school graduates are even more knowledgeable in this matter than are college graduates (40 per cent).
- c. Knowing how to use the IUCD as a FP technique is not associated with respondent's sex, civil status, age, residence in the poblacion or barrio, educational attainment, social class, having mentioned any of the SCC magazines as read most often or recognized any of them as among magazines read in the previous two months. Neither is it associated with having heard the "Mirror of Life" program within the same period.

5. Condom

- a. Overall. Fifty-eight per cent of 92 respondents who say they are aware of the condom as a FP technique also say they know how to use it.
- b. Significant association. Knowledge of the use of the condom is positively associated with being a male (70 against 37 per cent for females; 0.01) and of the upper social class (75 against 51 per cent for lower class respondents; 0.05).
- c. There is no association between knowing how to use the condom as a FP technique and respondent's age, civil status, poblacion or barrio residence, or educational attainment. It is not associated with having mentioned any of the SCC magazines among magazines read most often, having recognized any of the SCC magazines as read two months prior to the interview, or having listened to the "Mirror of Life" program during the same period.

Sterilization

- a. Overall. Thirty-nine per cent of 69 respondents who say they are aware of sterilization as a FP technique, also say they know how it is done.
- b. Significant associations. Single respondents (69 per cent) more than the married ones (33 per cent) say they know how sterilization is employed as a FP technique (0.05).
- c. Knowing how sterilization is performed is not associated with respondent's sex, age, residence in the poblacion or barrio, educational attainment, or social class. Neither is it associated with whether or not the respondent has heard the "Mirror of Life" program or read any of the SCC magazines frequently. Nor is recognition of an SCC magazine as read during the two months preceding the interview associated with knowledge of how sterilization is used as a FP technique.

III. Findings related mainly to approval of family planning

A. APPROVAL OF FP IN GENERAL

1. Overall. Of 1043 respondents who were asked whether or not they approved of family planning, 59 per cent say "Yes," 28 per cent say "No," 6 per cent say "It depends," and 7 per cent say they do not know what their position is in the matter.
2. Significant associations (see Tables 4 and 5). Approval of family planning--outright and conditional combined--is more common among married respondents than it is among those who are single or widowed (67 vs. 62 and 59 per cent, respectively; 0.001). A further distinction exists, moreover, in that while married respondents show a greater tendency to approve conditionally (7 per cent vs. 4 per cent; 0.05), the unmarried respondents tend more often to say they do not know what their position is (11 vs. 4 per cent; 0.001).

The tendency to approve of family planning is positively associated with high educational attainment (from 45 per cent for those with no formal schooling to 80 per cent for college graduates; 0.001), higher social class (79 vs. 61 per cent for the little people; 0.001), and residence in a poblacion rather than a barrio (71 vs. 61 per cent; 0.01). When people of the same educational level are compared, however, this barrio-poblacion difference disappears.

Comparing the upper and lower social classes, there are significant differences in terms of sex. Among males, those in the upper social class tend to approve of family planning more than those in the lower class (82 vs. 61 per cent; 0.001). Among females, those of the upper social class tend more often to give a conditional response (17 vs. 4 per cent for little people; 0.001) while those in the lower social class tend to give a "Don't know" response (2 vs. 8 per cent for the big people; 0.05). Among respondents in the upper social class, the tendency to say "Yes" to family planning is greater among the males (82 vs. 74 per cent; 0.01). More than males, females tend to say "It depends" (17 vs. 7 per cent; 0.05).

In terms of age (significant at the 0.01 level), the most favorable toward FP are those respondents in the 25-34-years-old category (70 per cent). Next are those in the 35-44 category (67 per cent).

There is great variation (0.001) by mother tongue. Especially high percentages of approval are reported by Ilongo (78 per cent) and Kapampangan (74) speakers. Especially low are speakers of Waray (35), Iloko (56), and Cebuano (58 per cent).

Of our respondents, about half are either housewives or unemployed males. The others are divided as follows: employees, 28 per cent; self-employed but working alone, 15 per cent; self-employed and employing others, 8 per cent. Variation in approval of FP is significant (0.001), with employees showing the highest percentage (72) and self-employed independent workers the lowest (60 per cent).

About one out of three respondents reads a newspaper at least once a week (14 per cent daily; 56 per cent seldom and never). About two out of five read a magazine at least once a week (12 per cent daily; 47 per cent seldom or never). Seventy per cent listen to a radio every day (only 13 per cent seldom or never). Approval of FP is associated with newspaper and magazine reading (0.001 and 0.02 respectively), but not with radio listening. As will be shown below, approval is not related to the reading of SCC magazines, however (see section IV). It is noteworthy that respondents reporting daily reading of a newspaper show the greatest tendency to approve of FP conditionally (12 per cent vs. 5-8 per cent for others). They also show the second highest overall percentage approving of FP (79 per cent vs. 80 per cent for those reading a newspaper three times a week). The "seldom or never" readers of newspaper and magazines are the least likely to approve of FP (61 per cent in both cases).

Municipalities were categorized according to the percentage of respondents who mentioned as their favorite radio station one which had agreed to broadcast the "Mirror of Life" program or FP "spot" announcements. The highest percentage of approvers (69 per cent) are from municipalities where 21-40 per cent of respondents say "SCC stations" are their favorites, but municipalities where no such respondents are found nonetheless show a similar approval level (67 per cent). The latter respondents are much higher however, in conditional approval (12 vs. 4-7 per cent; 0.02).

Only about 11 per cent of respondents say they heard the "Mirror of Life" program. They tend to show less approval than others do of FP (53 vs. 67 per cent; 0.01).

Variables related to the Church are apparently important. Thus we find that about half our respondents say they went to church (mass) once (27 per cent) or not at all (21 per cent) in the month preceding the interview. A third (32 per cent) say they went every week. Approval of FP varies directly with church attendance (from 59 per cent for the "not once" category to 72 per cent for those who went weekly; 0.01). Knowledge of who the head of the Catholic Church might be is not widely shared: 68 per cent of respondents have no idea; 12 per cent know it is the Pope but do not know his name, and 20 per cent know it is Pope Paul (or

Paul VI). Compare this with 95 per cent who know Marcos is President of the Philippines and 30 per cent who know Nixon is President of the United States. Approval of FP is related to awareness of the Pope in this way: those who do not know he exists show least approval of FP (60 per cent); those who know the Pope is head of the Church but do not know his name show greatest approval (81 per cent); in between (69 per cent) are those who know that Pope Paul is the head of the Roman Catholic church.

In reference to the Pope, we note that 34 per cent of respondents believe he approves of family planning (5 per cent, and no more, of these respondents think his approval is conditional). Only 28 per cent say he disapproves. The other 38 per cent do not know what he thinks on the question. "Important others" besides the Pope about whom respondents have an opinion are their spouse, their community, and President Marcos. The percentage of respondents who think these people approve of FP are, respectively, 60, 47, and 14 (about 40 per cent say they do not know what President Marcos or their neighbors think). In any event, there is an association between the respondent's approving and his thinking that others approve (in all four cases, 0.001). However, it is only with regard to the Pope that most (57 per cent) of those who think he disapproves are themselves approvers; in the other three cases, those perceiving others as disapprovers tend themselves also to be against family planning.

There are predictable associations between some variables and approval of FP in general. Among them are the respondent's having discussed FP with friends and neighbors (about 48 per cent say they have, and they are much more likely than others to approve of FP--76 vs. 56 per cent for those who have not discussed FP and 26 per cent for those who cannot recall if they have; 0.001). The median ideal number of children mentioned by respondents is four, and the greatest approval of FP comes from respondents whose expressed ideal number is three (77 per cent approve of FP) or four (72 per cent). Those who desire to learn more about FP (61 per cent) or intend to practice FP (63 per cent) also tend strongly to approve of FP (81 and 89 per cent, respectively; 0.001 in both cases). Naturally, those aware of FP show a greater tendency to approve of it than do those who say they are not (73 vs. 49 per cent; 0.001).

Among married respondents, significant associations exist between approval of FP and spouse's educational attainment (0.001), literacy (70 per cent for those with literate spouses vs. 46 for those whose spouses are illiterate; 0.001) and mother tongue (0.001). Approval also varies significantly (0.01) according to the respondent's work pattern after marriage, the highest percentage (75) being found among those who have worked continuously since marriage.

3. Approval is not associated with respondent's sex, religion, kind of schools attended, frequency of radio listening, or the sources of information he mentioned by (mass media, FP clinic, medical or non-medical people, priest or minister). Neither is it associated with the presence or absence of a family planning clinic in the municipality, frequency of radio listening, or having read or recognized any of the SCC magazines.

Among married respondents, approval of FP is not associated with spouse's age, years married, religion, pregnancies or live births (either sex), ideal or expected number of children, pre-marriage employment pattern, or residential background. Married women of childbearing age (15-44 years) show no significant difference from older women in their tendency to approve FP

B. REASONS FOR APPROVAL OF FP

1. Overall. Reasons most commonly offered for approving of FP fall under the general category of economic (56 per cent). The hope of giving a better education and better character formation to one's children accounts for 21 and 18 per cent, respectively. Mother's health (5 per cent), the population explosion (8 per cent), and other reasons (6 per cent) are less important considerations. Eight per cent of respondents cannot specify why they approve of FP.
2. No clear associations emerge between the respondent's reasons for approval and his sex, age, civil status, residence, social class, or being from a municipality with or without a FP clinic.

C. REASONS FOR DISAPPROVAL OR HESITATION TO APPROVE OF FP

1. Overall. Among those who disapprove of FP or hesitate to approve of it, the greatest number (43 per cent) give as their reason that it is "sinful" or "against God's will." "Harmful physical effects" ranks second as a reason here (24 per cent). Twelve per cent of respondents simply want more children. Fourteen per cent give no specific reason for their disapproval, but only two per cent mention the Catholic church, the Pope, or priestly teaching.
2. Significant associations. Males and females differ (0.001) in the frequency with which they mention different reasons for disapproving FP. The women speak of sinfulness more often than men (48 vs. 36 per cent); they also emphasize harmful physical effects (27 vs. 21 per cent). Men more often express the desire for more children (9 vs. 5 per cent). In general, the greater his or her formal education, the less likely the respondent is to give "sinfulness" as a reason for disapproving FP and the more likely he or she is to give harmful physical effects as a reason. The ranges, from the no-education to the college-graduate category, are respectively these: 45 to 29 per cent and 7 to 45 per cent (0.01). Big people differ from little people in the same way as the better educated do from the less well educated (0.02).
3. No difference are associated with civil status, age, residence, or living in municipality with FP clinic.

D. ADVANTAGES IN HAVING 2-3 CHILDREN

1. Overall. Answers to an open-ended question regarding the advantages (if any) of having only 2-3 children fall into two major categories: parent-centered and child-centered. Most respondents give replies which we categorize as parent-centered: it is financially easier to support a small family (49 per cent); raising a small family is physically less burdensome, or less likely to impair the mother's health (9 per cent). Twenty per cent of respondents think primarily of the children's welfare, particularly the possibility of their getting a better formal education. Only 8 per cent see no advantages at all in having only 2-3 children. The remaining 14 per cent offer no answer to the question.

2. Significant associations. The tendency toward child-centered answers is greater among married males than it is among their single brothers (29 vs. 16 per cent; 0.01 level); single females are more child-centered than single males (28 vs. 16 per cent; 0.05).

Age emerges as a significant factor among males, but not females. Male respondents 15-34 years of age are notably less child-centered than those 35 years of age and over (17 vs. 32 per cent; 0.01). Generally speaking, the higher the educational attainment, the greater the tendency to give child-centered replies, an association found at the 0.001 level in both barrio and poblacion (the average range is from 12 per cent for those with no formal schooling to 32 per cent for college graduates). While poblacion residents show greater child-centeredness than barrio people (31 vs. 21 per cent; 0.01), this difference by residence disappears when one considers only those respondents who have had at least a complete elementary education.

Differences by social class are marked. In general, lower class respondents are less child-centered in their replies than are those of the upper social class (17 vs. 30 per cent) and tend more often to see no advantage in a small family (9 vs. 4 per cent). Interclass differences are at the 0.001 level when no distinction is made by sex. When this distinction is made, upper-class males differ from lower-class males more than the corresponding females do.

Within social classes, a difference by sex occurs only among the little people, where females are more child-centered than males and less likely to see no advantage in a small family (0.02).

3. There is no significant difference between clinic and non-clinic municipalities in the pattern of replies reported regarding the advantages of a small family.

E. FP TECHNIQUE ABOUT WHICH RESPONDENT MOST DESIRES FURTHER INFORMATION

1. Overall. Fifty-six per cent of respondents say they are not interested in further information about any specific FP technique. Relatively small percentages express interest in particular means: rhythm (18 per cent), the oral pill (6 per cent), withdrawal (4 per cent), sterilization, condom, or the IUCD (3 per cent). For other techniques the percentages are all below 1.0.
2. Significant associations. Among single respondents, females tend more often than males to say they desire no further information about any FP technique (62 vs. 50 per cent; 0.02). More than others in the age category 15-44 years, those respondents who are 35-44 years old are interested in the oral pill (12 vs. 6 per cent; 0.01); this is especially true of males of this age category (18 per cent vs. 7 per cent for females; 0.05). Within the 15-44 years category, males are more interested in the IUCD than females (7 vs. 2 per cent; 0.01); the same kind of difference obtains in the 15-24 year category (9 vs. 2 per cent; 0.05).

More than poblacion residents, barrio people tend to show no interest in further information about any specific FP techniques (59 vs. 52 per cent; 0.05). Poblacion dwellers show a greater tendency to want information about rhythm (21 vs. 16 per cent; n. s.).

In general, interest in learning more about at least one FP technique increases directly with education (from 18 per cent for those with no formal education to 53 per cent for college graduates; 0.001). The desire to learn more about rhythm follows the same pattern: from 4 to 26 per cent (0.001). For withdrawal the desire to learn is not so simply associated with education, for those with a complete high school education show significantly more interest than others do (10 vs. 3-5 per cent; 0.05). When barrio dwellers are compared with townspeople of the same educational level, significant differences disappear.

Lower class respondents, compared with those of the upper class, more often say they are interested in no further information at all (59 vs. 48 per cent; 0.01); they are also less interested in rhythm (16 vs. 25 per cent; 0.01). When males and

females are considered separately, the differences disappear among females, but remain among males.

Intraclass intersex differences exist only among the little people, and only for rhythm, in which females are more interested than males (19 vs. 13 per cent; 0.05).

Those who freely recall one or more SCC magazines as read most often tend to be interested in the IUCD more than others are (15 vs. 4 per cent; n. s., but close to 0.05). Those who recognize the name of one or more SCC magazines similarly are more interested than others in knowing about at least one FP technique (55 vs. 48 per cent; n. s., but close to 0.05), and particularly in the condom (7 vs. 3 per cent; n. s., close to 0.05).

3. No association appears between interest in further information about FP techniques, on the one hand, and, on the other, having heard the "Mirror of Life" program or living in a municipality with a FP clinic.

F. INTENTION TO PRACTICE FP IN THE FUTURE

1. Overall. Forty-nine per cent of respondents say they intend to continue, or to start using family planning methods in the future; 29 per cent say they do not intend to do so; 21 per cent say they do not know whether they will or not.
2. Significant associations. The intention to use family planning methods in the future is associated with being married (54 vs. 42 per cent for single respondents; 0.01), residing in the population (55 vs. 46 per cent for barrio folks; 0.02), having a higher educational attainment (from 36 per cent for those with no formal education to 70 per cent for college graduates; 0.001), and being of the upper social class (64 vs. 45 per cent; 0.001). It is also significantly associated with being 25-44 years old (57 vs. 45 per cent for other respondents; 0.001).

Married females tend more than the unmarried females to state the intention to use family planning methods in the future (55 vs. 37 per cent; 0.001). Similarly, among respondents of the upper social class, males tend more than females to say they intend

to use family planning methods in the future (67 vs. 44 per cent; 0.001).

3. Willingness to use or continue to use family planning methods in the future is not associated with the presence or absence of a family planning clinic in the municipality, having read or recognized any of the SCC magazines, or having heard the "Mirror of Life" program.

IV. Findings related mainly to practice of family planning

A. PRACTICE OF FP TECHNIQUES

All methods. Of 704 respondents who know of at least one method of family planning, 23 per cent say they have used at least one of them. No association is found between the practice of any FP technique and respondent's source(s) of information.

1. Oral pill

- a. Overall. Of 1043 respondents 48 per cent (503) freely recall the oral pill as a FP technique. An additional 10 per cent (109) recognize its name when it is suggested to them. Considering only these 503 respondents, we find that 43 per cent (215) say they know how to use the pill. Of the latter 215, 24 per cent say they have used it. Users can be compared against other respondent bases as well, with these results:

Base	Users (N = 52)
All respondents (1043)	5%
Respondents aware of FP in general (699)	7
Respondents approving of FP in general (676)	8
Respondents who freely recall or recognize the oral pill (612)	8
Respondents who know how to use the oral pill technique (215)	24

- b. Significant associations. Use of the oral pill as a FP technique is associated with being married (67 vs. 32 per cent for single respondents; 0.001) and belonging to the 35-54-years-old category.⁷ The range of percentages among age groups is shown in the following table:

Age in years	Users (Per cent)	Total N knowing how to use pill
15-24	7%	60
25-34	26	73
35-44	38	47
45-54	36	25
55 and over	20	10
Total	24	215

- c. There is no association between using the oral pill as a FP technique and respondent's sex, residence in the poblacion or barrio, educational attainment, or social class. Neither is there any association with frequent reading of an SCC magazine, recognizing any of them as among the magazines read during the two months as among the magazines read during the two months prior to the interview, or having heard the "Mirror of Life" program

⁷ It should be noted that the question asked was whether the respondent ever used this FP technique. This may explain the high percentage of respondents within the 45-54 age group who say they used the oral pill. Inferentially, they would have been talking about use of the pill during the child-bearing years.

within the same period. Respondent's attitude towards FP in general shows no significant association with the use of the oral pill.

2. Rhythm

- a. Overall. Twenty-four per cent (254) of 1043 respondents spontaneously mention rhythm as a FP technique, while 14 per cent (142) recognize it when it is mentioned to them. If only the first group of 254 respondents is considered, 73 per cent (185) say they know how to use the technique. Of these 185 respondents, 58 per cent (107) say they have used it. Users of the rhythm method can be compared with other respondent bases.

Base	Users (N=107)
All respondents (1043)	10%
Respondents aware of FP in general (699)	15
Respondents approving of FP in general (676)	16
Respondents who freely recall or recognize rhythm (396)	27
Respondents who know how to use rhythm (185)	58

- b. Significant associations. Practice of rhythm as a FP technique is positively associated with being married (70 per cent against 3 for single respondents; 0.001) and directly associated with age (ranging from 29 to 77 per cent with a slight decline to 69 per cent at the 55 years or older age group; 0.001).
- c. No significant association exists between the practice of rhythm and respondent's sex, residence, educational attainment, social class, frequent reading of any of the SCC magazines, recognizing any of them as read during

the two months prior to the interview, or having listened to the "Mirror of Life" program within the same period. There is no association between the practice of rhythm as a FP technique and respondent's attitude toward FP in general.

3. Withdrawal

- a. Overall. Of 1043 respondents, 12 per cent (120) freely recall withdrawal as a method of family planning, while 14 per cent (141) recognize its name when it is suggested to them. Considering only those who freely recalled this technique (120), we find that 78 per cent (94) say they know how to use it. Of these 94 respondents, 58 (62 per cent) say they have actually used it. Users of the withdrawal technique may be considered against other respondent bases as well.

Base	Users (N=58)
All respondents (1043)	6%
Respondents aware of FP in general (699)	8
Respondents approving of FP in general (676)	9
Respondents who freely recall or recognize withdrawal (161)	36
Respondents who know how to use the withdrawal technique (94)	62

- b. Significant associations. Practice of the withdrawal technique is positively associated with being married (70 against 8 per cent for single respondents; 0.001).
- c. There is no association between use of withdrawal as a FP technique and respondent's sex, age, educational attainment, residence (poblacion or barrio), social class, frequent reading of any of the SCC magazines, having read any of them two months prior to the interview, or having listened to the "Mirror of life" program within the same period.

of Life" program within the same period. Neither is there an association with the respondent's approval or disapproval of FP in general.

4. IUCD

- a. Overall. Of 1043 respondents, 12 per cent (127) spontaneously mention the IUCD as a FP technique, while 8 per cent (86) recognize its name when it is suggested to them. If we consider only those who spontaneously mention this technique (127), it is found that 41 per cent (52) say they know how to use it. Of these 52 respondents, 15 per cent (8) say they have actually used it. The following table relates IUCD users to other respondent bases.

Base	Users (N=8)
All respondents (1043)	1%
Respondents aware of FP in general (699)	1
Respondents approving of FP in general (676)	1
Respondents who freely recall or recognize the IUCD (213)	4
Respondents who know how to use the IUCD (52)	15

- b. Use of the IUCD as a FP technique is not associated with respondent's sex or civil status, age, educational attainment, poblacion or barrio residence, social class, or exposure to any of the SCC magazines or the "Mirror of Life" program.

5. Condom

- a. Overall. Of 1043 respondents, 9 per cent (96) freely mention the condom as a FP technique. An additional 20 per cent (210) recognize its name when it is mentioned to them. Considering only the 96 respondents who freely mention this technique, we find that per cent say they know how to use it. Of these 53 respondents, only 15 per cent (8) say they have used it.

Against various respondent bases, we derive the following percentages.

Base	Users (N=8)
All respondents (1043)	1%
Respondents aware of FP in general (699)	1
Respondents approving of FP in general (676)	1
Respondents who freely recall or recognize condom (306)	3
Respondents who know how to use the condom (53)	15

- b. Use of the condom as a FP technique is associated with being married (42 against 0 per cent for single respondents; 0.001) and belonging to the upper social class (50 against 16 per cent for lower social class respondents; 0.02).
- c. No association exists between use of the condom and respondent's sex, age, residence in the poblacion or barrio, educational attainment, exposure to any of the SCC magazines or the "Mirror of Life" program. Neither is there an association with whether or not the respondent approves of FP in general.

6. Sterilization

- a. Overall. Seven per cent (71) of 1043 respondents freely mention sterilization as a FP technique, while 25 per cent (258) recognize it when it is suggested to them. Considering only the 71 respondents who freely recall this technique, we find that 38 per cent (27) say they know how it is done. Of these 27 respondents, only 7 per cent (2) say they have actually undergone sterilization. These are the percentages when compared with other respondent bases.

Base	Users (N=2)
All respondents (1043)	0%
Respondents aware of FP in general (699)	0
Respondents approving of FP in general (676)	0
Respondents who freely recall or recognize sterilization (329)	1
Respondents who know how sterilization is done (27)	7

- b. Use of sterilization as a FP technique is not associated with the variables of sex, civil status, age, residence in a barrio or poblacion, educational attainment, social class, frequent exposure to any of the SCC magazines, or listening to the "Mirror of Life" program in the two months prior to the interview. Nor is it associated with respondent's attitude towards FP in general.

B. REPORTED FAILURES IN THE PRACTICE OF SPECIFIC FP TECHNIQUES

1. The following table illustrates the failure rate reported for each specific FP techniques used by the respondents:

Technique	Reported pregnancies (Per cent)	Users (N)
Rhythm	32%	107
Oral pill	29	52
Withdrawal	22	58
Condom	6	16
IUCD	0	8
Sterilization	100 ^a	2
Total	27	243

^aThe authors of this report have no explanation for this datum.

2. The failure rate of none of these FP techniques shows any association with respondent's residence (barrio or poblacion), educational attainment, age, social class, exposure to the SCC magazines or the "Mirror of Life" program, or source of FP knowledge.

V. Findings regarding SCC publications and radio broadcasts

A. FOUR MAGAZINES RECALLED AS READ MOST OFTEN

1. Overall. Of those respondents who say they read magazines at least once a month, 606 named the four magazines they read most often. Only 3 per cent of these respondents freely mention any of the four SCC magazines, namely, Ang Tao, Halina, Action Now, or Philippine Digest.
2. Of those 17 respondents who mention one or more of these magazines, 14 mention Ang Tao, one mentions Action Now, and five mention Philippine Digest. No one mentions Halina. All these respondents come from municipalities where there are no family planning clinics.
3. Recalling one or more of the four SCC magazines is not associated with sex, civil status, residence (barrio or poblacion), age, educational attainment, literacy, or social status. Neither is it associated with having heard the "Mirror of Life" radio program.

B. RECOGNITION OF SCC MAGAZINE TITLES AS PUBLICATIONS READ IN THE PAST TWO MONTHS

1. Overall. Of the 622 respondents who say they read a magazine at least once a month, 34 per cent recognize one or more of the four SCC magazines (Ang Tao, Action Now, Halina, and Philippine Digest) as a publication they read during the two months preceding the interview. Twenty-one per cent say they read Ang Tao; 12 per cent, the Philippine Digest; 7 per cent, Action Now; and 5 per cent, Halina.

2. Significant associations. Recognition of one or more of the four SCC magazines is positively associated with being single (49 vs. 34 per cent for married respondents; 0.001), 15-24 years old (48 vs. 35 per cent for those 25 and over; 0.01), at least an elementary school graduate (49 vs. 27 per cent for those who did not complete grade school; 0.001), the resident of a municipality where there is a family planning clinic (45 vs. 31 per cent; 0.01), a poblacion resident (41 vs. 28 per cent for barrio people; 0.001), and of the upper social class (43 vs. 37 per cent for little people; 0.001).
3. There is no association between recognition of these magazines and respondent's sex, or with his having heard the "Mirror of Life" radio program.

C. RECOGNITION OF THE "MIRROR OF LIFE" RADIO PROGRAM AS HEARD BY RESPONDENT IN PAST TWO MONTHS

1. Overall. Of the 834 respondents who listen to a radio at least once a month, 13 per cent say they heard the "Mirror of Life" program at least once in the two months preceding the interview. Eleven per cent say they cannot recall whether or not they listened to it. The remainder (76 per cent) say they did not hear the program.
2. Significant associations. Having listened to the "Mirror of Life" program is significantly associated with younger and middle age (14 per cent for those 15-54 years old vs. 3 per cent for others; 0.01 level), and being a resident of a municipality without a family planning clinic (15 vs. 8 per cent; 0.05).
3. There is no association between having listened to the "Mirror of Life" program and the respondent's sex, civil status, educational attainment, or social status.

Percentages indicate, however, that compared with those of the upper social class, respondents of the lower social class tend more often to say that they have heard the "Mirror of Life" program.

VI. Findings about changes in the period 1967 to 1970

The BRAC 1967 Lowland Christian Family Survey gathered information from almost 2400 respondents residing in 100 municipalities. That was in October 1967. The IPC/POMCH 1970 survey (April-May 1970) revisited 20 of those municipalities and succeeded in re-interviewing 310 of our old respondents as well as an additional 733 new ones. Because we have the replies of many individuals for both time periods we are in a position to make two kinds of statements about changes that took place between surveys: (a) the usual aggregate comparisons in terms of percentages for 1967 and 1970, respectively, and (b) comparisons of what individual respondents said in 1970 with what they said in 1967. For the most part, we shall use only the first kind of comparison, but we do have individual before-after data on the question of approval or disapproval of family planning in general.

There are at least three ways in which before-after percentages can be calculated. The first is a simple difference in percentage, which is determined merely by subtracting the initial percentage (P_1) from the second, or final percentage (P_2). The formula for this difference in percentage (DP) is, then, simply this: $DP = P_2 - P_1$.

A second measure is that of the percentage improvement, or proportionate increase in the initial level. Here one uses the starting percentage (P_1) as a base and determines the proportion that the difference in percentage (DP) represents of that base. The formula for the percentage improvement (PI) is this: $PI = (DP/P_1) \times 100$. A third measure of change, called the "Effectiveness Index" (EI), represents the percentage of improvement made between the baseline percentage level (P_1) and the maximum possible level, or ceiling (100 per cent). The formula is this: $EI = (DP/100 - P_1) \times 100$. Both the difference in percentage (DP) and percentage improvement (PI) measures present serious disadvantages when one wishes to compare the changes effected in two groups that had different initial levels (P_1). The third measure, the Effectiveness Index (EI), controls for this variable and tells us, as it were, what percentage of the distance between starting point and goal (100 per cent) was accomplished in each case considered.⁸

⁸For an explanation of the Effectiveness Index and its advantages, see Hovland, Lumsdaine, and Sheffield 1955.

A. AWARENESS OF FP

As a prelude to any comparison of the awareness of family planning manifested in 1967 and in 1970, we should recall an important fact; namely, that the 1967 sample includes twice the percentage of college graduates that the 1970 sample does (24 vs. 12 per cent; Table 1). Correspondingly it has a much smaller representation of those members of the lowland Christian population who have had less than a complete elementary education (19 vs. 63 per cent; Table 1). Moreover, the 1967 sample is more sophisticated than the 1970 sample in one other way: it includes a much higher percentage of upper class people (51 vs. 21 per cent; Table 1). This difference between the samples is somewhat lessened by two additional characteristics of the 1970 sample: it has a greater proportion of barrio dwellers than the 1967 sample (59 vs. 33 per cent; Table 1) and fewer literate respondents (89 vs. 96 per cent; Table 1). On balance, though, we believe that the 1967 sample remains considerably more sophisticated than the 1970 selection, while both are somewhat more enlightened, as it were, than the parent population from which they were drawn--the rural municipalities of the lowland Philippines.

1. With this understanding regarding the composition of our samples, we note that the percentage of respondents expressing awareness of family planning in general has leaped from 47 per cent in 1967 to 67 per cent in 1970 (Table 6). In the short space of about 32 months, awareness of FP has shown a proportionate increase of 42 per cent, closing almost two-fifths of the gap between the initial level of 47 per cent and the ceiling of 100 per cent.

Since the initial level was probably considerably lower than 47 per cent (given the undue sophistication of the 1967 sample) and the 1970 level only slightly below 67 per cent, the increase in awareness is in reality even greater than our figures show it to be.

2. The greatest increases in percentage (DP) are those of high school and college graduates (31 and 29 per cent, respectively), but those with less education are not far behind (about 24-25 per cent, Table 6).

The greatest percentage improvement (PI) is that accomplished by respondents with less than a complete elementary education (78 per cent), but it is the two better educated categories who score highest on the Effectiveness Index (EI). In the period 1967-1970 high school graduates went 69 per cent of the distance between their initial level and the goal of 100 per cent; college graduates traveled 85 per cent of the way (Table 6).

B. RECALL OF SPECIFIC FP TECHNIQUES

In 1967, only 17 per cent of respondents freely recalled the oral pill as a FP technique; in 1970 the percentage who recalled its name was 48--a proportionate increase of 182 per cent with an Effectiveness Index of 37 per cent (Table 7).

Similarly dramatic increases are recorded for withdrawal, the IUCD, condom, sterilization, and even the less well known FP means such as the douche, diaphragm, foam, and suppository. For these techniques the percentage increases range from 350 to 1300 per cent and the Effectiveness Indices from 7 to 13 per cent.

Rhythm, which was mentioned spontaneously by one out of three respondents in 1967, dropped to 24 per cent in 1970. Even where the idea was suggested to them, only an additional 14 per cent of the 1970 respondents said they recognized it.

It seems clear that the anovulant oral pill is far and away the FP technique of which respondents are currently most aware, and that this saliency has been attained in the short period of 32 months (between 1967 to April-May 1970).

C. APPROVAL OF FP IN GENERAL

1. Looked at in terms of averages, there seems to have been little change in the approval of family planning in the period 1967-70. The overall figure was 64 per cent in 1967 and was 65 per cent in 1970, a difference of only 1 per cent.

This fact is altered somewhat by the recollection that the 1967 figure was in reality considerably lower than the average we show of 64 per cent.

2. But what are interesting are the changes over time that emerge when respondents are considered as members of one category or another (by age, educational level, social status, or religion).
3. Thus there is little difference to be found among age categories in their increase in approval of FP in the period 1967-70. The oldest group, however (55 years and over), showed the greatest increase in approval (8 per cent; Table 8).

Respondents in the later child-bearing years (25-44 years) show a decline in outright approval of FP and an increase of 5-8 per cent in conditional approval of FP.

4. Difference by educational attainment are marked. Elementary and high school graduates showed differences in percentage of 15 and 10, respectively, over their initial levels. College graduates moved only 1 per cent, from 79 to 80 (Table 8).

The Effectiveness Indices of the elementary and high school graduates are most impressive. In the period 1967-70 they both moved about one third the distance from their starting points to the ceiling of 100 per cent (Table 8).

5. Upper class respondents moved ahead much further than those of the lower class (from 67 to 79 per cent and from 60 to 61 per cent, respectively (Table 8).
6. Findings by religious identification are interesting. While Catholics, Aglipayans, and members of the Iglesia ni Cristo increased slightly in their approval of FP, Protestants show a decrease of 5 per cent (Table 8).
7. Of special significance perhaps is the great increase over time in the percentage of conditional approvals of FP. This is true not only of the age group 25-44 years old (see above), but also of better educated respondents (especially college

graduates, who went from 3 to 15 per cent) and members of the upper class (2 to 11 per cent).

College graduates dropped from 76 to 65 per cent in outright approval, compensating for this by the increase from 3 to 15 per cent in conditional approval (Table 8).

D. REASONS GIVEN FOR APPROVAL OF FP

1. There are three reasons commonly given for approving of family planning in general. The first, which we consider parent-centered, is that it is financially easier on the parents to raise a smaller number of children. The second, which we label child-centered, is that a smaller number of children can be assured better moral and intellectual formation. The third reason requires a worldview that goes beyond the immediate family: it appeals to the threat posed by unchecked world population increase.
2. A study of the percentages for 1967 and 1970 (Table 9) suggests that the parent-centered reason alone has increased in importance over time. The financial burden of raising a large family has since 1967 become the leading reason for approving of deliberate limitation of family size.

E. REASONS GIVEN FOR DISAPPROVAL OF FP

1. The two most commonly given reasons for disapproving of family planning in general are these: first, it is "sinful" or "against God's Will"; second, it may harm the mother's health.
2. In the period 1967-70 appeals to the "sinfulness" of family planning have declined dramatically, from 66 per cent to 43 per cent on the average (Table 10). The difference in percentage is highest among college graduates (-28 per cent), but even respondents with less than a complete elementary education show a drop of 23 per cent.

3. On the other hand, the fear of harmful physical effects has shown an increase over time, from 13 per cent in 1967 to 24 per cent in 1970 (Table 10). The increase is especially great among high school (27 per cent) and college (24 per cent) graduates.

F. 1967-70 SHIFTS IN ATTITUDE TOWARD FP IN GENERAL AS RECORDED AND RECALLED

1. Whether one considers the actual replies of the same respondents given in 1967 and 1970, or what respondents report in 1970 as their feelings about FP in 1967, the finding is the same: there has been a great shift from disapproval or "Don't know" to approval, a shift unmatched by changes from approval to disapproval.

2. Of 310 respondents who were interviewed in 1967 and 1970, 57 per cent of the 1967 disapprovers became outright approvers while another 12 per cent became conditional approvers. Only 29 per cent persisted in their disapproval (Table 11).

On the other hand, of the outright approvers in 1967, 74 per cent retained this view in 1970. Only 18 per cent became disapprovers; 14 per cent said "It depends" in 1970.

Of those who said "Don't know" in 1967, 87 per cent were approvers in 1970--83 per cent unconditionally so (Table 11).

3. When they were asked to recall what the history of their approval or disapproval of FP in general had been, 841 respondents answered as follows: of 264 disapproving of FP in 1970, only 37 per cent said they had acquired this attitude since January 1968; of 577 approving of FP in 1970, however, 68 per cent said they had begun to feel this way since January 1968 (Table 12).
4. Whether by record or respondents' recall, the tendency to shift from disapproval to approval in the period 1967-70 is significantly greater than the opposite tendency (0.001 by the McNemar test for the significance of changes; Tables 11 and 12).

VII. Summary of findings

Findings may be summarized according to the propositions set forth earlier in this report (pages 3-4) as statements to be tested in the course of the research.

A. BASELINE VARIABLES RELATED TO ONE ANOTHER

1. Awareness, or knowledge, of FP in general is associated with respondent's sex (0.05), civil status (0.001), age (0.001), residence (0.001), educational attainment (0.001), and social class (0.001). It is negatively associated with residence in a municipality with a FP clinic (0.05).

Awareness of FP in general is not associated with respondent's reported sources of knowledge.

2. Approval of FP in general is associated with respondent's civil status (0.001), age (0.01), residence (0.01), educational attainment (0.001), social class (0.001), and employment status (0.01).

Approval is not associated with respondent's sex, kind of schools attended, residence in a municipality with a FP clinic, source of knowledge, or, for married respondents, with the number of pregnancies and live births in present marriage. See Tables 4 and 5.

3. Practice of specific family planning techniques shows a variety of associations, depending on which technique is considered. Use of the oral pill and of rhythm are associated with civil status (0.001) and age (0.001). Practice of withdrawal and use of the condom are associated with civil status (0.001); condom users also tend to be of the upper social class (0.02).
4. The desire to learn more about FP is associated with sex (0.02), age (0.01), residence (0.05), educational attainment (0.001), and social class (0.01).

There is no association with residence in a municipality having a FP clinic.

5. The intention to practice FP is associated with civil status (0.01), residence (0.02), educational attainment (0.001), social class (0.001), and age (0.001).

There is no association with respondent's sex or his living in a municipality with a FP clinic.

6. For the variables of discussion of FP with friends or neighbors and ideal and foreseen family size, our information is limited to their relationship to approval or disapproval of FP in general.

The associations of these variables with approval of FP are the following: discussion, 0.001; ideal number of children, 0.001; expected additional number of children, n.s.,

7. There is a close association between respondent's approval of FP in general and his perceiving "important others" as also approving of it. Reference in particular is to respondent's spouse and community, and to President Marcos and the Pope (0.001 in all cases).

B. CHANGES IN THE PERIOD 1967-70

1. The percentage of respondents approving of FP in general is higher in 1970 than it was in 1967.
2. The percentage of respondents changing to approval of FP is higher than the percentage changing to disapproval.
3. Mention of the Pope, the Church, or Humanae Vitae do not occur frequently as reasons for changing from approval or "Don't know" to disapproval of FP (only 2 per cent).

C. ADDITIONAL ASSOCIATIONS WITH APPROVAL OF FP

Approval of FP is also associated with frequency of newspaper exposure (0.01), frequency of reading magazines (0.02), frequency of church attendance (0.01), knowing the Pope's name (0.001) respondent's mother tongue (0.001), awareness of FP in general (0.001), frequency of exposure to the "Mirror of Life" program (0.01), level of municipality's exposure to an SCC radio station

(0.01), level of municipality's exposure to an ECC radio station (0.02), and, among married respondents, with educational attainment of spouse (0.001) and respondent's employment pattern after marriage (0.01).

CONCLUSIONS

The IPC/POMCH 1970 National Survey was conducted with three major goals in mind: (a) to see what had happened to the status of family planning and related subjects in the period 1967 to 1970; (b) to suggest likely cases or conditions for any important changes that were observed to have occurred in that period; and (c) to lay the baseline for a before-after study of the information and motivation program which the Social Communications Center began just about the time (April 1970) that we began the fieldwork for this study.

We have already given ample evidence that the status of family planning in the rural Philippines has indeed undergone great changes in the 32 months between the BRAC 1967 survey and the 1970 round. So now look at our findings in broader context. Remembering especially that Humanae Vitae, the encyclical of Pope Paul VI which (some say) outlawed all forms of conception control other than periodic abstinence, or rhythm, was published in July 1968, we come to these conclusions.

1. There is no evidence that Humanae Vitae has moved significant numbers of Filipinos to disapprove of family planning in general.
 2. Further, it is not even clear that the 1967-70 drop in outright approvers and rise in the percentage of conditional approvers can be traced to the Pope's encyclical. For if Humanae Vitae were indeed the moving force we should expect more respondents to mention this document, or at least the Pope, or the Church's teaching. It is perhaps significant that the majority of those who think the Pope disapproves of family planning themselves approve of it.
- . Again, if Humanae Vitae were at work, we should expect a rise in the percentage of respondents who give "sinfulness" as a

reason for disapproving of FP or accepting it only conditionally. As a matter of fact, this percentage has dropped dramatically in the past three years.

Finally, a rival explanation exists to explain changes from approval to disapproval: fear of physical side effects on the mother's health. Since 1967 this has become an increasingly prominent reason, offered especially by the better educated.

The above evidence, gathered in 1970, seems to confirm the conclusion we drew on grounds of the BRAC 1967 data, namely, that "those Catholics who are opposed to all family planning take this position, not because of Church influence, but because of popular norms largely independent of Catholic doctrine" (Lynch and Makil 1968:305; see also ibidem, 305-12).

3. Family planning techniques most widely used are rhythm (10 per cent), and the oral pill (5 per cent). For practical purposes, promotion of the douche, diaphragm, foam, and suppository techniques might be discontinued.
4. In the near future, the average potential acceptor of family planning techniques for the limitation or spacing of children will likely be moved most by sheer financial considerations--a smaller family is easier to support.
5. In the near future, the average potential acceptor of family planning procedures will likely be dissuaded most by fears of harmful physical effects, and less by fears of offending God.

Given the relative popularity of rhythm, this technique may deserve greater promotion. On the other hand, information is needed to counteract widespread belief in the undesirable side effects of such techniques as the oral pill.

6. Sophistication--or the respondent's general level of living (at least high school education, poblacion residence, upper social class)--remains, as in previous surveys, closely associated with awareness and approval of family planning.
7. Sophistication is only partially associated with knowing how to use specific FP techniques and their actual use. Becoming pregnant while using these various methods shows no association, however, with the respondent's sophistication.

8. The presence of a family planning clinic in a municipality has little effect on the awareness, approval, or practice of FP in that municipality.

It should be added, however, that most of our FP-clinic municipalities had only recently acquired that status. Hence there may not have been sufficient time for these clinics to make their presence felt.

9. The SCC magazine and reprint program, and the "Mirror of Life" and spot broadcasts, despite their having been inaugurated almost simultaneously with our baseline research, show a surprisingly large reading and listening public, and appear likely to have a definite influence on FP attitudes and even awareness of specific techniques.

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Appendix A

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Appendix B

POBLACIONES AND BARRIOS INCLUDED IN THE IPC/POMCH 1970 NATIONAL SURVEY

<u>Poblaciones</u>	<u>Barrios</u>
<u>Cebuano area</u>	
Barili, Cebu	Bolocboloc
*Salay, Misamis Oriental	Salay River
Malimono, Surigao del Norte	Cantapoy
Santa Catalina, Negros Oriental	Cagangan
Vallehermoso, Negros Oriental	Tagbino
<u>Tagalog area</u>	
San Antonio, Quezon	Pury
Lumban, Laguna	Bagong Silang
*Baliwag, Bulacan	Barangka
*Sariaya, Quezon	Balubal
<u>Iloko area</u>	
Lasam, Cagayan	Alannay
Pidigan, Abra	Arab
Pasauquin, Ilocos Norte	Cababaan
<u>Ilongo area</u>	
Valladolid, Negros Occidental	Pacol
Milagros, Masbate	Calasuche
Pulupandan, Negros Occidental	Pag-ayon

*There is now (or was, prior to or during our study) a family planning clinic in this municipality. The dates of their inauguration and their sponsors are the following: Salay - January 1969 (Institute for Maternal and Child Health); Baliwag - August 1970 (Department of Health); Sariaya - December 1970 (Family Planning Organization of the Philippines); Virac - October 1968 (IMCH, joined in August 1970 by the FPOP); Apalit - terminated September 1970 (National Land Reform Council).

Appendix B (Cont'd) page 2

<u>Poblaciones</u>	<u>Barrios</u>
<u>Bikol area</u>	
*Virac, Catanduanes	Danicop
Palanas, Masbate	Libtong
<u>Waray area</u>	
Carigara, Leyte	Camansi
<u>Kapampangan area</u>	
*Apalit, Pampanga	Sulipan
<u>Pangasinan area</u>	
Aguilar, Pangasinan	Buer

Appendix C

TABLES TO ACCOMPANY REPORT ON THE IPC/POMCH 1970 NATIONAL SURVEY

Note: Two tests of significance are used in the tables that follow: the Chi-square for Tables 1-10 and the McNemar test for the significance of changes for Tables 11 and 12.

Table 1. Respondents of the BRAC 1967 Lowland Christian Family Survey compared with those of the IPC/POMCH 1970 National Survey, classified by selected characteristics

Characteristic	1967		1970		Population (Per cent)
	N	Per cent	N	Per cent	
a. MOTHER TONGUE					
Cebuano	645	27%	254	24%	25%
Tagalog	550	23	220	21	24
Iloko	408	17	208	20	14
Ilongo	309	13	132	13	13
Bikolano	213	9	35	3	10
Waray	168	7	37	4	7
Kapampangan	65	3	42	4	4
Pangasinan	24	1	25	2	3
Other	-	-	87	8	-
Total	2,382	100	1,040	99	100
No information	0		3		
b. RELIGION					
Roman Catholic	2,095	88%	898	86%	90%
Protestant	125	5	28	3	2
Aglipayan	102	4	85	8	6
Iglesia ni Cristo	16	1	10	1	1
Other	24	1	13	1	1
None	12	1	6	1	0
Total	2,374	100	1,040	100	100
No information	8	-	3	-	-
c. SEX					
Male	1,192	50%	509	49%	49%
Female	1,190	50	534	51	51
Total	2,382	100	1,043	100	100

Table 1 (Cont'd) page 2

Characteristic	1967		1970		Population (Per cent)
	N	Per cent	N	Per cent	
d. AGE (IN YEARS)					
15-24	702	29%	345	33%	35%
25-34	560	24	257	25	23
35-44	620	26	193	18	17
45-54	345	14	145	14	12
55 and over	153	6	103	10	12
Total	2,380	99	1,043	100	99
No information	2	-	0	-	-
e. SOCIAL STATUS					
Upper	1,198	51%	215	21%	15%
Lower	1,176	50	826	79	85
Total	2,374	101	1,041	100	100
No information	8	-	2	-	-
f. EDUCATIONAL ATTAINMENT					
None	55	2%	90	9%	24%
Some elementary	404	17	498	48	42
Elementary grad.	357	15	137	13	16
Some HS	469	20	91	9	8
HS grad.	244	10	62	6	5
Some college	268	11	44	4	3
College grad.	583	24	120	12	2
Total	2,380	99	1,042	101	100
No information	2	-	1	-	-

Table 1 (Cont'd) page 3

Characteristic	1967		1970		Population (Per cent)
	N	Per cent	N	Per cent	
g. CIVIL STATUS					
Single	791	33%	363	35%	36%
Married	1,574	66	658	63	63
Widowed	15	1	22	2	0
Total	2,380	100	1,043	100	99
No information	2	-	0	-	-
h. RESIDENCE					
Poblacion	1,585	67%	424	41%	18%
Barrio	795	33	619	59	82
Total	2,380	100	1,043	100	100
No information	2	-	0	-	-
i. LITERACY					
Literate	2,280	96%	931	89%	86%
Illiterate	91	4	111	11	14
Total	2,371	100	1,042	100	100
No information	11	-	1	-	-

Table 2. FOMCH 1970 National Survey respondents classified by kind of school attended, crossclassified by academic level of that school (April-May 1970)

Kind of school	Elementary	High School	College
Public	97%	50%	16%
Private, nonreligious	0	21	50
Private, religious	1	25	28
Combinations	1	3	5
Total who attended this level	945	306	165
Did not attend this level	95	734	875
No information	3	3	3

Table 3. Characteristics of POMCH 1970 National Survey respondents showing significantly more frequent recall of specific FP techniques than other respondents with whom they are compared, classified by the paired characteristics, crossclassified by the specific FP techniques (April-May 1970)

Characteristic	Family Planning Techniques						
	Rhythm	Withdr	Cond	Pill	IUCD	Ster	Others
a. SEX AND CIVIL STATUS							
M vs. F	ns	ns	M*	F**	F**	ns	ns
S vs. Md	Md***	ns	ns	Md**	Md***	ns	ns
Md vs. MdF	ns	ns	ns	MdF**	ns	ns	ns
SM vs. MdM	MdM***	MdM**	ns	ns	MdM**	MdM*	ns
SF vs. MdF	ns	ns	ns	MdF**	ns	ns	ns
b. AAGE							
Y vs O	ns	ns	Y*	ns	ns	ns	ns
c. RESIDENCE AND EDUCATION							
Ba vs. P	P***	P***	ns	P***	P***	ns	P**
Lo vs. H	H***	H***	H***	H***	H***	ns	H***
BLo vs. PLo	ns	PLo***	ns	PLo**	ns	ns	PLo***
BaMi vs. PMi	Pmi***	ns	ns	Pmi***	ns	ns	PMi***
BaH vs. PH	PH***	ns	ns	ns	ns	ns	ns

Abbreviations: Withdr - withdrawal; Cond - condom; Pill - anovulant oral pill; IUCD - intrauterine contraceptive device; Ster - sterilization; Others - foam, douche, suppository, diaphragm; M - male; F - female; S - single; Md - married; MdM - married male; MdF - married female; SM - single male; MdM - married male; SF - single female; MdF - married female; Y - young (25-34 years); O - old (35-44 years); Ba - Barrio; P - poblacion; Lo - low education (incomplete elementary); Mi - middle education (complete elementary); H - high education (complete high school or more); Bi - big people (upper social class); Li - little people (lower social class); * - significant at the 0.05 level; ** - significant at the 0.01 level; *** - significant at the 0.001 level; ns - not significant.

Table 3. (Cont'd) page 2

Characteristic	Family Planning Techniques						
	Rhythm	Withdr	Cond	Pill	IUCD	Ster	Others
d. SEX AND SOCIAL CLASS							
Bi vs. Li	Bi***	Bi***	Bi***	Bi***	Bi***	ns	Bi***
BiM vs. BiF	ns	ns	ns	ns	ns	ns	ns
LiM vs. LiF	ns	ns	ns	LiF***	LiF**	ns	ns
e. CLINIC VS. NON-CLINIC							
Cl vs. non-Cl	ns	ns	ns	ns	ns	ns	ns
f. RECALL OF SCC MAGAZINES							
SCC vs. non-SCC	ns	ns	ns	SCC*	ns	ns	ns
g. RECOGNITION OF SCC MAGAZINES							
SCC vs. non-SCC	SCC**	ns	ns	ns	ns	ns	ns

Table 4. POMCH 1970 National Survey respondents, classified by selected characteristics, crossclassified by approval or disapproval of family planning in general (April-May 1970)

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
a. SEX						
Male	61%	27%	6%	7%	508	n. s.
Female	57	30	6	7	535	
Total	59	28	6	7	1043	
b. CIVIL STATUS						
Single	58%	27%	4%	11%	363	0.001
Married	60	29	7	4	658	
Widowed	50	32	9	9	22	
Total	59	28	6	7	1043	
c. AGE (IN YEARS)						
15-24	60%	27%	4%	10%	346	0.01
25-34	62	25	8	5	257	
35-44	57	29	9	5	192	
45-54	61	28	5	6	145	
55 and over	47	42	6	6	103	
Total	59	28	6	7	1043	
d. RESIDENCE						
Barrio	55%	31%	6%	8%	619	0.01
Poblacion	65	24	6	5	424	
Total	59	28	6	7	1043	

Table 4 (Cont'd) page 2

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
e. EDUCATION						
None	43%	44%	3%	10%	89	0.001
Incomplete elem.	56	30	3	10	498	
Complete elem.	63	25	8	5	228	
Complete HS	70	23	8	0	105	
Complete coll.	65	20	15	0	121	
Total	59	28	6	7	1041	
Educ. unknown	1	0	0	1	2	
f. KIND OF ELEMENTARY SCHOOL ATTENDED						
Public	61%	27%	6%	7%	928	n. s.
Private (rel.)	64	27	9	0	22	
Private(non-rel)	75	25	0	0	8	
Total responses	61	27	6	6	958*	
Respondents (N)	572	254	58	61	945	
Not applicable	40	40	4	10	94	
No information	2	2	0	0	4	
g. KIND OF HIGH SCHOOL ATTENDED						
Public	68%	20%	10%	2%	161	n. s.
Private (rel.)	69	22	10	0	83	
Private (non-rel)	70	22	8	0	73	
Total responses	69	21	10	1	317*	
Respondents (N)	209	64	30	3	306	
Not applicable	404	230	31	68	733	
No information	1	2	1	0	4	

*Responses are greater in number than respondents because some respondents attended more than one kind of school.

Table 4 (Cont'd) page 3

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
h. KIND OF COLLEGE ATTENDED						
Public	57%	23%	20%	0%	30	n. s.
Private (rel.)	54	29	16	0	55	
Private (non-rel)	75	17	8	0	89	
Total reponses	66	22	13	0	174*	
Respondents (N)	108	36	20	0	164	
Not applicable	505	257	42	71	875	
No information	1	3	0	0	4	
i. SOCIAL CLASS						
Upper	68%	20%	11%	1%	212	0.001
Lower	56	31	5	8	819	
Total	59	28	6	7	1031	
Class unknown	10	1	0	1	12	
j. RELIGION						
Roman Catholic	59%	29%	6%	6%	897	n. s.
Protestant	71	25	0	4	28	
PIC (Aglipayan)	54	22	11	13	85	
Iglesia ni Cristo	50	40	10	0	10	
"No religion "	100	0	0	0	6	
Others	54	38	0	8	13	
Total	59	28	6	7	1039	
No information	1	1	0	2	4	

*Responses are greater in number than respondents because some respondents attended more than one kind of school.

Table 4 (Cont'd) page 4

Characteristic	Approval of FP				Total N	Signif.
	Yes	No	Depends	DK		
k. EMPLOYMENT STATUS						
Unemployed	57%	29%	5%	9%	494	0.01
Employee	64	23	8	5	277	
Self-employed, with employees	63	28	4	5	79	
Self-employed, no employees	54	37	6	3	147	
Total	59	28	6	7	997	
No information	25	12	3	6	46	
l. NEWSPAPER EXPOSURE IN PAST MONTH						
Daily	67%	21%	12%	1%	130	0.01
3 X per week	75	19	5	2	59	
Once a week	64	23	8	6	119	
Twice a month	68	18	3	10	38	
Once a month	64	23	7	7	61	
Seldom/never	56	32	5	8	525	
Total	60	27	6	6	932	
Not literate (N)	50	43	4	14	111	
m. MAGAZINE EXPOSURE IN PAST MONTH						
Daily	67%	22%	8%	3%	110	0.02
3 X per week	74	13	8	5	61	
Once a week	60	28	7	5	205	
Twice a month	60	24	9	7	70	
Once a month	74	16	2	8	50	
Seldom/ never	56	31	5	8	436	
Total	61	27	6	6	932	
Not literate (N)	49	45	5	11	111	

Table 4 (Cont'd) page 5

Characteristic	Approval of FP				Total N	Signif.
	Yes	No	Depends	DK		
n. RADIO EXPOSURE IN PAST MONTH						
Daily						
5 hrs.-plus	65%	25%	5%	5%	248	n. s.
Under 5 hrs.	58	27	7	8	449	
3 X per week	54	37	5	3	59	
Once a week	56	32	7	5	57	
Twice a month	50	50	0	0	14	
Once a month	50	50	0	0	8	
Seldom/never	58	28	6	8	155	
Total	59	28	6	7	990	
No information(N)	29	16	2	6	53	
o. CHURCH ATTENDANCE IN PAST MONTH						
Not once	53%	32%	6%	9%	214	0. 01
Once	61	30	5	4	279	
Twice	49	32	6	13	122	
Three times	58	27	4	10	77	
4 X/more	64	24	8	4	331	
Total	59	29	6	7	1022	
No information(N)	14	2	0	5	21	
p. KNOWLEDGE OF POPE'S NAME						
Does not know who head of RC church is	55%	31%	5%	10%	707	0. 001
Knows head is "Pope" but does not know name	72	19	9	0	213	
Knows head is Pope Paul	62	29	7	2	120	
Total	59	28	6	7	1040	
No information (N)	1	1	0	1	3	

Table 4 (Cont'd) page 6

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
q. MOTHER TONGUE						
Bikol	60%	34%	6%	0%	35	0.001
Cebuano	55	34	3	8	253	
Iloko	50	31	6	13	208	
Ilongo	76	21	2	1	132	
Kapampangan	67	17	7	10	42	
Pangasinan	52	16	16	16	25	
Tagalog	61	27	7	5	220	
Waray	11	54	24	11	37	
Other Phil.*	78	16	4	1	88	
English	33	33	33	0	3	
Total	59	28	6	7	1043	
r. EVER DISCUSSED FP WITH FRIENDS OR NEIGHBORS						
No	50%	34%	6%	11%	502	0.001
Yes	70	22	6	2	480	
Cannot recall	13	40	13	33	15	
Total	59	28	6	7	997	
No information	25	12	3	6	46	
s. PRESENCE OF FP CLINIC IN MUNICIPALITY						
FP clinic	60%	27%	5%	8%	249	n. s.
No FP clinic	59	29	6	6	794	
Total	59	28	6	7	1043	

*Includes the following: from Palanas, Masbate, 28 "Masbateño" (Bikol?) and 6 "Bisaya" (Ilongo?); from Milagros, Masbate, 46 "Masbateño" (Ilongo?) 2 "Bisaya" (Ilongo?), and 1 "other"; from Lasam, Cagayan, 4 "other" (Ibanag).

Table 4 (Cont'd) page 7

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
t. AWARENESS OF FP IN GENERAL						
No/cannot recall	45%	34%	4%	17%	344	0.001
Yes	66	26	7	2	699	
Total	59	28	6	7	1043	
u. RESPONDENT'S IDEAL NUMBER OF CHILDREN						
None	0%	100%	0%	0%	2	0.001
One	50	44	0	6	16	
Two	67	27	3	3	127	
Three	72	17	5	6	236	
Four	64	22	8	5	214	
Five	64	24	7	5	125	
Six	63	29	3	5	75	
Seven	48	50	2	0	48	
Eight or more	37	43	7	7	71	
Total	63	26	6	5	914	
No information	35	55	12	28	129	
v. DESIRE TO LEARN MORE ABOUT FP						
No	40%	45%	6%	9%	361	0.001
Yes	76	16	5	2	575	
Depends	50	50	0	0	8	
Don't Know	27	33	10	29	99	
Total	59	28	6	7	1043	
w. INTENTION TO PRACTICE FP IN FUTURE						
No	36%	53%	5%	6%	252	0.001
Yes	84	9	5	5	426	
Don't Know	40	31	9	20	183	
Total	61	27	6	7	861	
Not applicable	92	66	10	14	182	

Table 4 (Cont'd) page 8

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
x. ANY SCC PUBLICATION AMONG THOSE READ MOST OFTEN IN PAST TWO MONTHS						
No	65%	24%	6%	5%	585	n. s.
Yes	29	53	12	6	17	
Total	65	24	7	5	602	
Not applicable	151	209	22	40	222	
No information	2	15	0	2	19	
y. NAME OF ANY SCC PUBLICATION RECOGNIZED AS READ IN PAST TWO MONTHS						
No	66%	23%	6%	6%	410	n. s.
Yes	65	24	8	3	212	
Total	65	23	6	5	622	
Not applicable	150	207	22	41	420	
No information	0	1	0	0	1	
z. HEARD "MIRROR OF LIFE" PROGRAM						
No	61%	27%	6%	6%	635	0.01
Yes	45	36	8	10	108	
Cannot recall	42	35	9	14	91	
Total	57	29	6	8	834	
Not asked (N)	138	54	9	8	209	

Table 4 (Cont'd) page 9

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK		
aa. SOURCES OF FP KNOWLEDGE						
Radio	63%	30%	6%	1%	70	n. s.
Newspapers	73	27	0	0	11	
Magazines	74	17	9	0	66	
FP clinic						
local	84	16	0	0	19	
non-local	83	8	8	0	12	
Medical paper						
local	67	22	8	1	77	
non-local	82	10	8	0	38	
Non-med. people	64	28	5	3	373	
Priest/Min.	80	20	0	0	5	
Others	72	20	7	1	71	
<hr/>						
Total	68	24	6	2	742*	
Total Rs (N)	421	160	39	15	635	
Not applicable	158	124	18	56	356	
No answer	35	12	5	0	52	
<hr/>						
bb. SPOUSE'S ATTITUDE TOWARD FP (AS PERCEIVED BY R)						
Approves	83%	11%	4%	1%	372	0.001
Disapproves	29	66	5	1	156	
Depends	31	31	38	0	26	
Don't know	29	38	12	21	104	
<hr/>						
Total	60	29	7	4	658	
Not applicable	103	222	15	45	385	

*Total is greater than number of respondents who answered this question (635) because of multiple responses.

Table 4 (Cont'd) page 10

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK		
cc. COMMUNITY'S ATTITUDE TOWARD FP (AS PERCEIVED BY R)						
Approves	82%	14%	3%	2%	390	0.001
Disapproves	38	53	6	2	174	
Depends	63	22	12	3	101	
Don't know	44	33	8	16	378	
Total	59	28	6	7	1043	
dd. PRES. MARCOS' ATTITUDE TOWARD FP (AS PERCEIVED BY R)						
Approves	74%	18%	6%	2%	104	0.001
Disapproves	41	49	2	8	477	
Depends	50	30	17	2	46	
Don't know	46	35	6	13	416	
Total	59	28	6	7	1043	
ee. LEVEL OF MUNICIPALITY'S EXPOSURE TO SCC RADIO STATION*						
0	55%	29%	12%	4%	137	0.02
1 (1-20%)	58	30	5	7	466	
2 (21-40%)	62	22	7	8	254	
3 (41-65 %)	58	33	4	6	186	
Total	59	28	6	7	1043	
*Level of exposure here means the percentage of respondents in a municipality who mention as their favorite radio station one which the SCC reports as having agreed to broadcast the "Mirror of Life" program or FP "spot" announcements.						
ff. POPE'S ATTITUDE TOWARD FP (AS PERCEIVED BY R)						
Approves	78%	13%	7%	3%	306	0.001
Disapproves	54	41	3	2	292	
Depends	58	25	15	2	48	
Don't know	48	31	6	14	397	
Total	59	28	6	7	1043	

Table 5. Married respondents in POMCH 1970 National Survey, classified by selected characteristics, crossclassified by approval or disapproval of family planning in general (April-May 1970)

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
a. SPOUSE'S AGE (IN YEARS)						
15-24	60%	29%	7%	3%	68	n. s.
25-34	63	26	8	3	187	
35-44	60	27	8	5	183	
45-54	64	27	4	4	141	
55 and over	40	46	9	5	79	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
b. NUMBER OF YEARS MARRIED TO SPOUSE						
Under 5	58%	29%	7%	5%	113	n. s.
5-9	64	26	8	3	102	
10-14	65	25	8	2	111	
15-19	61	29	7	4	84	
20-24	57	35	4	5	83	
25-29	61	19	15	4	72	
30 and over	51	41	2	6	93	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
c. SPOUSE'S EDUCATIONAL ATTAINMENT						
None	37%	46%	6%	11%	46	0.001
Incomplete elem.	52	37	5	6	263	
Complete elem.	68	21	8	2	205	
Complete HS	66	23	11	0	70	
Complete coll.	70	20	10	0	74	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	

Table 5 (Cont'd) page 2

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
d. LITERACY OF SPOUSE						
Illiterate	42%	47%	4%	8%	79	0.001
Literate	62	27	8	4	579	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
e. SPOUSE'S RELIGION						
Roman Catholic	60%	30%	6%	4%	553	n. s.
Protestant	67	25	4	4	24	
PIC (Aglipayan)	55	23	15	7	60	
Iglesia ni Cristo	54	27	9	9	11	
"No religion"	100	0	0	0	1	
Others	78	22	0	0	9	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
f. SPOUSE'S MOTHER TONGUE						
Bikol	50%	42%	8%	0%	26	0.001
Cebuano	55	35	5	5	156	
Iloko	52	29	8	11	141	
Ilongo	78	20	1	1	89	
Kapampangan	76	19	5	0	21	
Pangasinan	46	36	18	0	11	
Tagalog	63	29	7	2	129	
Waray	17	55	24	3	29	
Other Phil.	79	12	9	0	56	
English	0	0	0	0	0	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	

Table 5 (Cont'd) page 3

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK		
g. PREGNANCIES AND LIVE BIRTHS IN RESPONDENT'S PAST MARRIAGES						
No pregnancies	73%	27%	0%	0%	11	n. s.
No live births	0	100	0	0	1	
Male live birth(s)	100	0	0	0	4	
Female live birth(s)	50	50	0	0	4	
Live births both sexes	55	33	11	0	9	
Total	66	31	3	0	29	
No prev. marriage	373	183	46	27	629	
Single/widowed	222	104	15	44	385	
h. PREGNANCIES IN PRESENT MARRIAGE						
None	45%	45%	4%	4%	22	n. s.
1-3	60	27	9	4	206	
4-6	58	30	10	3	175	
7-9	64	28	3	5	148	
10-12	58	31	5	6	80	
13-15	68	27	4	0	22	
16-18	50	50	0	0	4	
19-21	0	0	100	0	1	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
i. MALE LIVE BIRTHS IN PRESENT MARRIAGE						
None	54%	33%	8%	4%	96	n. s.
1-3	60	28	8	4	377	
4-6	62	27	5	6	154	
7-9	61	39	0	0	31	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	

Table 5 (Cont'd) page 4

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
j. FEMALE LIVE BIRTHS IN PRESENT MARRIAGE						
None	61%	29%	6%	3%	124	n. s.
1-3	57	29	9	6	365	
4-6	66	28	5	1	152	
7-9	47	47	0	6	17	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
k. SPOUSE'S IDEAL NUMBER OF CHILDREN						
None	83%	17%	0%	0%	6	n. s.
1	60	30	10	0	10	
2	70	23	5	2	56	
3	72	15	8	5	102	
4	64	26	11	0	104	
5	68	29	3	0	73	
6	65	24	7	4	54	
7	67	33	0	0	24	
8 or more	58	34	4	4	53	
Total	67	25	6	2	482	
Don't know	70	73	16	17	176	
Single/widowed	222	104	15	44	385	
l. EXPECTED NUMBER OF ADDITIONAL CHILDREN						
None	59%	32%	6%	4%	308	n. s.
1	76	10	13	0	67	
2	60	31	9	0	58	
3	71	21	4	4	28	
4	76	18	6	0	17	
5	64	9	18	9	11	
6	67	33	0	0	6	
7	80	20	0	0	5	
8-more	64	27	9	0	11	
Total	63	27	7	2	511	
Don't know	69	53	11	14	147	
Single/widowed	222	104	15	44	385	

Table 5 (Cont'd) page 5

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK		
m. EMPLOYER OF RESPONDENT BEFORE MARRIAGE						
Private co. or person	57%	32%	7%	5%	164	n. s.
Government	69	20	10	1	81	
Self-employed with employees	60	40	0	0	5	
Self-employed without employees	61	22	17	0	18	
Family farm or bus. with pay	61	32	4	2	44	
Family farm or bus. without pay	50	34	8	8	125	
Never employed	63	28	6	3	221	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	
n. EMPLOYMENT OF RESPONDENT AFTER MARRIAGE						
Continuous throughout marriage	66%	23%	9%	2%	247	0.01
Off and on throughout marriage	60	31	9	0	67	
Just before first child	65	30	4	0	23	
After all children were in school	33	67	0	0	3	
Regular after first child	68	20	0	12	25	
Not employed	52	35	6	7	270	
Other	70	26	4	0	23	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	

Table 5 (Cont'd) page 6

Characteristic	Approval of FP				Total	Signif.
	Yes	No	Depends	DK	N	
o. RESIDENCE OF RESPONDENT AND SPOUSE TILL 12 YEARS OLD						
On farm	56%	34%	5%	6%	293	
Not on farm but both from farm background	67	25	5	3	75	
Not on farm but either husband or wife from farm background	60	28	8	4	124	n. s.
Not on farm; nei- ther from farm background	62	24	12	3	154	
Other	83	17	0	0	12	
Total	60	29	7	4	658	
Single/widowed	222	104	15	44	385	

Table 6. Respondents of the BRAC 1967 and IPC/POMCH 1970 surveys who expressed awareness of family planning in general, classified by educational attainment

Educational level	Percentage aware		Changes 1967-70			Total N	
	1967 ^a	1970	DP ^b	PI	EI	1967 ^a	1970
Less than compl. elem.	32%	57%	25%	78%	37%	440	587
Complete elem.	47	71	24	51	45	737	228
Complete HS	55	86	31	56	69	476	105
Complete college	66	85	29	44	85	568	121
Total ^c	47	67	20	42	38	2221	1041

^aSource is Lynch and Makil 1969, Table 13.

^bAbbreviations: DP - difference in percentage; PI - percentage improvement; EI - Effectiveness Index. See text of this report, section VI.

^cBecause of the differences in the proportion of college graduates, on the one hand, and poorly educated respondents, on the other, in the 1967 and 1970 samples, average percentages are not to be taken at face value. The 1967 average percentage (47) would probably be considerably lower than it is; the 1970 percentage (67) is, in reality, probably slightly lower than it appears here. In other words the average, or total, changes recorded in this table should be taken as a minimum estimate.

Table 7. Respondents of the BRAC 1967 and IPC/POMCH 1970 surveys who freely recalled specific FP techniques, classified by techniques recalled (1967 N=2300; 1970 N=1043)

Technique recalled	Percentage who recall technique		Changes 1967-70		
	1967 ^a	1970	DP ^b	PI	EI
Oral pill	17%	48%	31%	182%	37%
Rhythm	33	24	-7	-21	-10
Withdrawal	1	14	13	1300	13
IUCD	1	12	11	1100	11
Condom	2	9	7	350	7
Sterilization	1	7	7	700	7
Others	2	9	7	350	7

^aSource is Lynch and Makil 1968:319.

^bSee Footnote b to Table 6, above.

Table 8. Respondents of the BRAC 1967 and IPC/POMCH 1970 surveys who approved of family planning in general, classified by selected characteristics

Characteristic	Percentage approving of FP						Changes 1967-70			Total N	
	Outright		Conditionally		Total		DP ^b	PI	EI	1967 ^a 1970	
	1967 ^a	1970	1967 ^a	1970	1967 ^a	1970					
a. AGE IN YEARS											
15-24	59%	60%	2%	4%	61%	64%	3%	5%	8%	673	346
25-34	64	62	3	2	67	70	3	5	9	544	257
35-44	65	57	1	9	66	66	0	0	0	585	192
45-54	61	61	2	5	63	66	3	5	9	325	145
55 and over	54	47	1	6	55	63	8	14	7	151	103
Total ^c	62	59	2	6	64	65	1	2	8	2278	1043
b. EDUCATIONAL ATTAINMENT											
None	42%	43%	0%	3%	42%	46%	4%	10%	7%	48	89
Incomplete elem.	56	58	1	3	53	59	6	11	13	388	498
Complete elem.	55	63	1	8	56	71	15	27	34	773	228
Complete HS	66	70	2	8	68	78	10	15	31	494	105
Complete college	76	65	3	15	79	80	1	1	5	573	121
Total ^c	62	59	2	6	64	65	1	2	1	2276	1041
c. SOCIAL STATUS											
Upper	65%	68%	2%	11%	67%	79%	12%	18%	36%	1148	212
Lower	59	56	1	5	60	61	1	2	2	1121	819
Total ^c	62	59	2	6	64	65	1	2	3	2269	1031

Table 8 (cont'd)

Characteristic	Percentage approving of FP						Changes 1967-70			Total N	
	Outright		Conditionally		Total		DP ^b	PI	EI	Total N	
	1967 ^a	1970	1967 ^a	1970	1967 ^a	1970				1967 ^a	1970
d. RELIGION											
Roman Catholic	61%	59%	2%	6%	63%	65%					
Protestant	76	71	0	0	76	71	2%	3%	5%	2015	897
Aglipayan (PIC)	60	54	1	11	61	65	-5	-6	-21	119	28
Iglesia ni Kristo	59	50	0	10	59	60	4	6	10	90	85
Others	79	58	0	0	79	68	1	2	2	17	10
Total ^c	62	59	2	6	64	65	-11	-14	-52	29	19
							1	2	3	2270	1039

^aSource is Lynch and Makil 1968:317-18 and Lynch 1967, Tables 23 and 54-56.

^bSee Footnote b to Table 6.

^cSee Footnote c to Table 6.

Table 9. Respondents of the BRAC 1967 and IPC/POMCH 1970 surveys who gave various reasons for approving of family planning in general, classified by reasons given and respondents' educational attainment (1967 N=1392; 1970 N=613)^a

Reason given and R's educational attainment	Percentage giving this reason		Changes 1967-70		
	1967 ^b	1970	DP ^c	PI	EI
a. SMALLER FAMILY LESS BURDENSOME FINANCIALLY					
Less than compl. elem.	37%	60%	23%	62%	36%
Complete elem.	38	54	16	42	26
Complete HS	38	57	19	50	31
Complete college	34	46	12	35	18
Total ^d	36	56	20	56	31
b. EASIER TO FORM AND EDUCATE SMALL FAMILY					
Less than compl. elem.	38%	35%	-3%	-8%	-5%
Complete elem.	42	45	3	7	5
Complete HS	43	45	2	5	4
Complete college	44	35	-9	-20	-16
Total ^d	43 ^d	39	-4	-9	-7
c. THREAT OF POPULATION EXPLOSION					
Less than compl. elem.	6%	5%	-1%	-17%	-1%
Complete elem.	10	7	-3	-30	-3
Complete HS	13	12	-1	-8	-1
Complete college	15	19	4	27	5
Total ^d	12 ^d	8	-4	-33	-4

^aThe total number of respondents for each educational level (from lowest level to highest in that order) is as follows: for 1967: 218, 420, 329, 425; for 1970: 318, 143, 74, 78.

^bSource is Lynch and Makil 1969, Table 24.

^cSee Footnote b to Table 6, above.

^dSee Footnote c to Table 6, above.

Table 10. Respondents of the BRAC 1967 and IPC/POMCH 1970 surveys who gave various reasons for disapproving of family planning in general, classified by reasons given and respondents' educational attainment (1967 N=789; 1970 N=357)^a

Reason given and R's educational attainment	Percentage giving this reason		Changes 1967-70		
	1967 ^b	1970	DP ^c	PI	EI
a. FP IS "SINFUL," "AGAINST GOD'S WILL"					
Less than compl. elem.	66%	43%	-23%	-35%	-68%
Complete elem.	71	47	-24	-34	-83
Complete HS	63	50	-13	-21	-35
Complete college	58	30	-28	-48	-67
Total ^d	66	43	-23	-35	-103
b. FP IS "HARMFUL TO MOTHER'S HEALTH"					
Less than compl. elem.	13%	18%	5%	38%	6%
Complete elem.	10	23	13	130	14
Complete HS	10	37	27	270	30
Complete college	21	45	24	114	30
Total ^d	13	24	11	85	13

^aThe total number of respondents for each educational level (from lowest level to highest in that order) is as follows: for 1967: 198, 306, 155, 130; for 1970: 210, 73, 32, 42.

^bSource is Lynch and Makil 1969, Table 23.

^cSee Footnote b to Table 6, above.

^dSee Footnote e to Table 6, above.

Table 11. Respondents interviewed in both the BRAC 1967 and IPC/POMCH 1970 surveys, classified by their attitude toward FP as recorded in 1967, crossclassified by their attitude toward FP as recorded in 1970

Attitude recorded in 1967	Attitude recorded in 1970 *				Total N
	Disapproves	Approves		Don't know	
		Outright	Depends		
Approves					
Outright	28	117	14	0	159
Depends	3	8	3	0	14
Disapproves	31	61	13	2	107
Don't know	4	25	1	0	30
Total	66	211	31	2	310
Interviewed only in 1970	229	403	31	70	733

*The McNemar test for the significance of changes yielded a chi-square of 17.61 (0.001). We conclude that disapprovers in 1967 show a significant tendency to express approval in 1970.

Table 12. Respondents of the IPC/POMCH 1970 survey classified by what they recalled their attitude toward FP was in 1967, crossclassified by their attitude toward FP as recorded in 1970 (cases of outright approval and disapproval only)

Attitude in 1967 as recalled in 1970 by respondent	Attitude recorded in 1970*		
	Disapproves	Approves	Total N
Approved	98	184	282
Disapproved	166	393	559
Total	264	577	841

*The McNemar test for the significance of changes yielded a chi-square of 177.24 (0.001). We conclude that disapprovers in 1967 show a significant tendency to express approval in 1970.

Appendix D

ENGLISH/ILONGO INTERVIEW SCHEDULE USED IN THE IPC/POMCH 1970 NATIONAL SURVEY

IPC Projects 061/073
1970 Lowland Christian Family Survey

Interview schedule - page 1

Respondent's name _____ R No. _____

Address _____
barrio _____ poblacion _____ province _____

Language(s) of interview _____ Place(s) of interview: _____

Date interview completed _____

Interviewer _____

Was R interviewed in 1967 BRAC? ☐ No ☐ Yes Old R. No.? _____
MAP
Is R included in the 073 sample? ☐ No ☐ Yes

Attempts made:	Date	Time		Reason for failure
		From	To	
First				
Second				
Third				

Session	Date	Time		Reason for non-completion
		From	To	
First				
Second				
Third				

Remarks:

BLOCK ONE: R's BACKGROUND

1. R's age last birthday

Edad ni R bang nagligad nga birthday _____

0 15-19	3 30-34	6 45-49	9 60-plus
1 20-24	4 35-39	7 50-54	
2 25-29	5 40-44		

2. R's sex and civil status

1 Male/single	3 Female/single	5 Male/widowed
2 Male/married	4 Female/married	6 Female/widowed

3. R's mother tongue

Nataohan nga hambal ni R

0 English	4 Cebuano	8 Pangasinan
1 Tagalog	5 Ilongo	9 Other, namely:
2 Iloko	6 Waray	
3 Bikol	7 Kapampangan	

4. R's social class

1 Big people	2 Little people
--------------	-----------------

5. R's educational attainment (Natapos sa pag-eskwela)

0 None	5 Vocational (post-high sch.)
1 Katon/kartilya; less than elem. grad.	6 Less than coll. grad.
2 Elem. graduate	7 College graduate
3 Less than high school grad.	8 Post graduate
4 High school graduate	9 DK/NA

6. R's literacy

1 Yes	2 No
-------	------

7-9. Kind(s) of schools attended by R

Klase sang eskwelahan nga gintambungan ni R

	<u>Elementary</u> (7)	<u>High school</u> (8)	<u>College</u> (9)
0 NAP		0	0
1 Public		1	1
2 Priv. religious		2	2
3 Priv. non-religious		3	3
4 1 and 2		4	4
5 1 and 3		5	5
6 1, 2, and 3		6	6
7 2 and 3		7	7
9 DK/NA		9	9

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10. R's religion

Reliyhon ni R

- | | |
|------------------|--|
| 0 "No religion" | 4 INC |
| 1 Roman Catholic | 5 Other (Muslim, Buddhist, Anglican, etc.) |
| 2 Protestant | 6 DK/NA |
| 3 Aglipay (PIC) | |

11. R's present occupation

Trabaho subong ni R (encircle correct code number and underline particular subcategory; if subcategory not given, write it in space provided after "specify")

Not employed

- 0 No employment: housewife, retired, student, idle, other (specify _____)

Employed by government

- 1 Municipal official: mayor, vice mayor, mun. councilor, mun. secretary/treasurer, judge, police chief, RHU personnel, bo. capt/councilor, other (specify _____)
- 2 Gov't. employee : clerk, policeman, PC sergeant, BIR employee, Comelec employee, other (specify _____)

Employed by private organization

- 3 Manager, salesman, detective, other (specify _____)
- 4 Skilled worker: dressmaker/tailor, carpenter, radio technician, driver, other (specify _____)
- 5 Unskilled worker: laborer, tenant, farmer, stevedore, other (specify _____)

Employed by either government or private organization

- 6 Teacher: elementary, high school, college, principal, head teacher, supervisor, other (specify _____)

Self-employed

- 7 Professional: MD, LLB, CPA, dentist, engineer, midwife, other (specify _____)
- 8 Non-professional: rice/tobacco/corn/sugar dealer, sari-sari store owner, marchand, jeepney operator, piggery/poultry operator, farmer-landowner, eatery operator, fisherman-boat owner, other (specify _____)
- 9 Other (specify _____)
- NA

12. Respondent as employer

- 0 R not self-employed
- 1 R self-employed, with employees
- 2 R self-employed, without employees

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BLOCK TWO: MASS MEDIA EXPOSURE

13. In the past month, on how many days did you read a newspaper?
Sang nagligad nga bulan, mga pila ka adlaw ka nagbasa sang peryodiko?

- | | |
|---------------------------|-------------------|
| 0 NAP (R is illiterate) | 4 Twice a month |
| 1 Every day | 5 Once a month |
| 2 Every other day (3x/wk) | 6 Seldom or never |
| 3 Once a week | 9 DK/NA |

14. In the past month, on how many days did you read magazines or comics?
Sang nagligad nga bulan, mga pila ka adlaw ka nagbasa sang magazines ukon comics?

- | | |
|---------------------------|-------------------|
| 0 NAP (R is illiterate) | 4 Twice a month |
| 1 Every day | 5 Once a month |
| 2 Every other day (3x/wk) | 6 Seldom or never |
| 3 Once a week | 9 DK/NA |

INTERVIEWER: If R reads magazines at least once a month, go to Q. 15; otherwise, skip to Q. 17.

15. What four magazines do you read most often?
Ano ang apat nga magazines nga firmo mo ginabasa?

- | | |
|----------|--|
| 1. _____ | 00 NAP |
| 2. _____ | 01 Mentioned only <u>Ang Tao</u> |
| 3. _____ | 02 Mentioned only <u>Action Now</u> |
| 4. _____ | 03 Mentioned only <u>Halina</u> |
| | 04 Mentioned only <u>Philippine Digest</u> |
| | 05 Mentioned 01 and 02 |
| | 06 Mentioned 01 and 03 |
| | 07 Mentioned 01 and 04 |
| | 08 Mentioned 02 and 03 |
| | 09 Mentioned 02 and 04 |
| | 10 Mentioned 03 and 04 |
| | 11 Mentioned 01, 02, 03 |
| | 12 Mentioned 01, 03, 04 |
| | 13 Mentioned 01, 02, 04 |
| | 14 Mentioned 02, 03, 04 |
| | 15 Mentioned 01, 02, 03, 04 |
| | 99 DK/NA |

INTERVIEWER: If R does not mention Philippine Digest, Halina, Ang Tao, and Action Now, then include the unmentioned one(s) in the next question (Q. 16).

16. What about these magazines? Have you read any of them in the past two months?
 Ang masunod ya nga mga balasahon? Nakabasa ka bala sini nga mga balasahon sang nagligad nga duha ka bulan?

	Yes	No	DK/NAP
Philippine Digest (if not mentioned in Q. 15)	_____	_____	_____
Philippine Free Press	_____	_____	_____
Action Now (if not mentioned in Q. 15)	_____	_____	_____
Free World	_____	_____	_____
Ang Tao (if not mentioned in Q. 15)	_____	_____	_____
Liwayway*	_____	_____	_____
Halina (if not mentioned in Q. 15)	_____	_____	_____

*Local language equivalent to be substituted: e.g., Bannawag for Ilocos area, Hiligaynon for Ilongo area.

17. In the past month, on how many days did you listen to the radio?
 Sang nagligad nga bulan, mga pila ka adlaw ka nga namati sa radyo?

- | | |
|------------------------------|-------------------|
| 0 Everyday, 5 hrs. or more | 4 Twice a month |
| 1 Everyday, less than 5 hrs. | 5 Once a month |
| 2 Every other day (3x/wk) | 6 Seldom or never |
| 3 Once a week | 9 DK/NA |

INTERVIEWER: If R listens to the radio at least once a month, go to Q. 18; otherwise, skip to Q. 22.

18. What time(s) of day do you usually listen?
 Mga anong oras ka masami nga nagapamati?

A.M.			P.M.		
From	:	To	From	:	To
_____	:	_____	_____	:	_____
_____	:	_____	_____	:	_____
_____	:	_____	_____	:	_____
_____	:	_____	_____	:	_____

[] From _____ a.m. to _____ p.m.

[] No regular time

19. How many radios are there in your home?
 Pila ang radyo sa inyo balay?

- | | | |
|--------|---------|-------------|
| 0 None | 2 Two | 4 Four/more |
| 1 One | 3 Three | 9 DK/NA |

20. What are your favorite radio programs?

Ano ang imo paborito nga programa sa radyo?

- | | | |
|----------|---|----------------------|
| 1. _____ | 0 | No favorite programs |
| 2. _____ | 1 | |
| | 2 | |
| | 3 | |
| 3. _____ | 4 | |
| | 9 | DK/NA |

21. What about these radio programs? Have you heard any of them in the past two months?

Ang masunod ya nga programa sa radyo? Nakapamati ka bala sini nga mga programa sang nagligad nga duha ka bulan?

Yes	No	DK/NAP
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

22. In the past month, how many times did you: (if RC) go to mass on Sunday or Saturday afternoon? (if Muslim) Go to mosque on Friday? (if other) Go to church services on Sunday?

Sang nagligad nga bulan, mga pila ka beses ka nga (if RC) nagtambong sang misa kon Domingo ukon Sabado sang hapon? (if Muslim) nagkadto sa "mosque" kon Biernes? (if other) nagtambong sang "church services" kon Domingo?

- | | | |
|------------|---------------|----------------|
| 0 Not once | 2 Twice | 4 Four or more |
| 1 Once | 3 Three times | 9 DK/NA |

23. I wonder if you can tell me the name of each of the following?

Puede mo ako masugiran kon sin-o ang ngalan sang mga masunod?

- | | |
|---|---------------------|
| 1. President of the Philippines | 0 None correct |
| 2. President of the United States | 1 Only #1 correct |
| 3. Head of the Roman Catholic Church on earth | 2 Only #2 correct |
| (leader of all Catholics in the world) | 3 Only #3 correct |
| | 4 #1 and #2 correct |
| | 5 #2 and #3 correct |
| | 6 #1 and #3 correct |
| | 7 All correct |
| | 9 DK/NA |

N.B. Correct answers are as follows:

1. Marcos, Ferdinand Marcos, Apo Ferdie, etc.
2. Nixon, Richard Nixon, etc.
3. Paul VI, Pope Paul, or even "the Pope"

INTERVIEWER: If R answers DK or "Paul VI" or "Pope Paul" to Q 23.3, skip to Q. 25; if R merely says "the Pope," go to Q. 24.

24. Do you know the name of the Pope?
Nahibal-an mo bala ang ngalan sang Santo Papa?

0 Does not know name 8 NAP
1 Yes, Pope Paul 9 NA

- 24a. Do you have any favorite radio station(s)?
May favorite ka bala nga estasyon sang radyo?

0 No, because I listen to any station that interests me
1 No, because I can hear only one station, namely: _____
2 Yes, this one: _____
9 DK/NA

BLOCK THREE: FAMILY PLANNING

25. Have you ever heard or read anything on "family planning?"
Nakabati ka bala ukon nakabasa man parte sa "family planning?"

0 No 1 Yes 9 Cannot recall

- 25a. What about "responsible parenthood"? Have you ever heard or read anything on that?
Ang parte ya sa "responsible parenthood"? Nakabati ka bala ukon nakabasa man parte sina?

0 No 1 Yes 9 Cannot recall

- 25b. Is there any difference between family planning and responsible parenthood?
May kinatubay bala ang family planning kag responsible parenthood?

0 No 1 Yes 9 DK/NA

If yes, ask: What is the difference?
Ano ang kinatubay?

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INTERVIEWER: If R answered Yes to either Q. 25 or 25a, go to Q 25c and 25d; otherwise, skip to Q. 26.

- 25c. Where did you hear something on "family planning?" (Be specific.)
Sa diin ikaw nakabatí parte sa "family planning?"

VF (M) F (M) UNF (m) ~~VUNF (mg)~~ *

8 R heard nothing

9 R cannot recall

- 25d. Where did you read something on "family planning?" (Be specific.)
Sa diin ikaw nakabasa parte sa family planning?

VF (MG) F (M) UNF (m) VUNF (mg)

8 R read nothing

9 R cannot recall

*AFTER R HAS LISTED ALL SOURCES, ask--for each one--Was it very favorable (VF), favorable (F), unfavorable (UNF), or very unfavorable (VUNF) to family planning/responsible parenthood?

Ang imo nabatíon/nabasaan parte sa family planning/responsible parenthood, maayo gid (MG), maayo (M), malain (m), malain gid (mg)?

Check appropriate column. If R has said (Q. 25b) there is a difference between FP and RP, use "FP" and "RP" instead of a check.

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26. Some people want to have only two-three children. Others would like seven or more. Are there any reasons why it is better to have two or three children instead of seven or more?

Ang iban nga tao gusto nga duha ukon tatlo lang ang ila bata. Ang iban gusto nga pito ukon mas madamo pa. May nga rason bala ngaa mas maayo nga duha ukon tatlo lang ang kabataan sangsa pito ukon mas madamo?

0 No 1 Yes 9 DK/NA

If Yes, ask:

- a. What reasons are there?

Ano ang mga rason?

i. _____	0	4
	1	5
ii. _____	2	9 DK/NA
	3	
iii. _____		

- b. Which is the most important reason?

Ano ang pinaka-importante nga rason?
(encircle number in a, above)

0	4
1	5
2	9 DK/NA
3	

27. Are there any reasons why it is better to have seven or more children instead of two or three?

May nga rason bala ngaa mas maayo nga may pito ukon mas madamo pa nga kabataan sangsa duha lang ukon tatlo?

0 No 1 Yes 9 DK/NA

If Yes, ask:

- a. What reasons are there?

Ano ang mga rason?

i. _____	0	4
	1	5
ii. _____	2	9 DK/NA
	3	
iii. _____		

- b. Which is the most important reason?

Ano ang pinaka-importante nga rason?
(encircle number in a, above)

0	4
1	5
2	9 DK/NA
3	

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28. If you had your choice (and if you are/were married), how many children would you like to have?

Kon ikaw papilion (kag kon ikaw may asawa/hans), pila ka bilog nga bata ang imo gusto maangkon?

- | | | |
|---------|---------|-----------------|
| 0 None | 4 Four | 8 Eight or more |
| 1 One | 5 Five | 9 DK/NA |
| 2 Two | 6 Six | |
| 3 Three | 7 Seven | |

29. Some married couples do something to avoid getting pregnant too often, or to plan the number of children they have. Have you heard of this? Ang iban nga mag-asawa nagapangita sang paagi para indi magbusong ang babae sang masami, ukon ila ginaplano ang kadamuon sang ila mangin-kabataan. Nakabati ka bala parte sini?

- | | | |
|------|-------|-----------------|
| 0 No | 1 Yes | 9 Cannot recall |
|------|-------|-----------------|

30. Do you approve of doing something to avoid getting pregnant too often, or to plan the number of children one has?

Nagapasugot ka bala sa paghimo sang paagi para ang isa ka tawo indi magbusong pirme, ukon magplano sang kadamuon sang iya mangin-kabataan?

- | | | |
|------|---------|--------------|
| 0 No | 1 Yes | 2 It depends |
| | 9 DK/NA | |

INTERVIEWER: If No, Yes, or It depends, go to Q. 31;
if DK/NA, go to Q. 32.

31. Why do you disapprove/approve/say it depends?
Nгаа nga nagapasugot ka/nagapamutok/nagsiling nga depende?

<u>Disapproves</u>	<u>Approves</u>	<u>It depends</u>
0 Sinful, against God's will	0 Economic reasons	0
1 Against Church/Pope/priests	1 Formal education	1
2 Harmful physical effect	2 Better character	2
3 Want more children	formation of children	3
8 Other	3	8
9 DK/NA	8 Other	9 DK/NA
	9 DK/NA	

32. What about most other people in your barrio/poblacion? Do you think they approve?

Ang kalabanan ya nga tao diri sa barrio/poblacion? Sa banta mo mapasugot sila?

- | | |
|-------------------|--------------|
| 0 They do not | 2 It depends |
| 1 They do approve | 9 DK/NA |

INTERVIEWER: If R is married, go to Q. 33; otherwise, skip to Q. 51.

33. What about your spouse? Does he/she approve?
Ang imo ya asawa/bana? Nagapasugot bala siya?

0 He/she does not 2 It depends
1 He/she approves 9 DK/NA

34. What about President Marcos? Do you think he approves of one's doing something to avoid getting pregnant too often, or to plan the number of children one has?
Si Presidente Marcos ya? Sa banta mo nagapasugot siya sa paghimo sang paagi para indi (ikaw/ang imo asawa) masami nga magbusong, ukon magplano sang kadamun sang kabataan nga dapat nimo maangkon?

0 He does not approve 2 It depends
1 He approves 9 DK/NA

35. And what about the Pope? Do you think he approves?
Kag ang Santo Papa ya? Sa banta mo nagapasugot siya?

0 He does not 2 It depends
1 He approves 9 DK/NA

36. Have you ever talked with your friends and neighbors about ways of delaying or preventing pregnancies?
Nakapagkigsugilanon ka bala sa imo kaabyanan kag kaingod parte sa mga paagi sa pagpugong ukon pagtapna sang pagbusong?

0 No 1 Yes 9 Do not recall

37. Please tell me what methods you have heard of, if any, for delaying or preventing pregnancies (encircle applicable numbers in col. 1 of Chart A).
Palihog sugiri ako sang mga paagi nga imo nabatian, kon may ara, parte sa pagpugong ukon pagtapna sang pagbusong.

38-41. See chart, next page.

43. How did you learn about these methods? (encircle all correct answers).
Paano ka nagtuon ukon nakahibalo parte sini nga mga paagi?

00 N/A (R has never heard of methods)
01 Radio
02 Newspapers
03 Magazines
04 F.P. clinic in community
05 F.P. clinic in another community
06 Other medical people in community
07 Other medical people in another community
08 Non-medical people (friends, relatives)
09 Priest-minister in community
10 Priest-minister in another community
88 Other (specify) 99 DK/NA

CHART A

38. (If R has heard of F.P. methods) What methods have you heard of? <u>Ano nga</u> <u>nga paagi ang imo</u> <u>nabatian?</u> (Encircle all applicable code which corresponds to answer given.)	39. :For every method :mentioned, i.e. :encircled in col. :1 ask: Have you :ever used ...? : <u>Nagagamit ka na</u> : <u>gid man sang ...</u> :(Specify the :method mentioned :in col. 1)	40. :If Yes(col.2 :checked), ask: :Did you become :pregnant while :you were using :it? <u>Nagbusong</u> : <u>ka bala sang</u> : <u>ginagamit</u> : <u>mo ang . . .</u>	41. :If No (col. 3 :checked), ask: :Do you :know about :how it is :used? <u>Kahi-</u> : <u>balo ka kon</u> : <u>pano ini</u> : <u>ginagamit?</u>	42. :For every method :not mentioned, i. :e., not checked :in col. 1, ask :Do you remember :having heard of :...? <u>Kadumtum</u> : <u>ka kon nakabat</u> : <u>ka parte sa...</u> :(Specify methods :not checked.)					
Methods	:Yes : No : NA	:Yes : No, not : sure	:Yes : No, not : sure	:Yes : No					
(1)	(2) (3) (4)	(5) (6) (7) (8) (9) (10)							
00 Has not heard of any method, or NAF	:	:	:	:	:	:	:	:	:
01 Rhythm	:	:	:	:	:	:	:	:	:
02 Withdrawal	:	:	:	:	:	:	:	:	:
03 Condom	:	:	:	:	:	:	:	:	:
04 Douche	:	:	:	:	:	:	:	:	:
05 Diaphragm and jelly	:	:	:	:	:	:	:	:	:
06 Foam	:	:	:	:	:	:	:	:	:
07 Suppository or sponge	:	:	:	:	:	:	:	:	:
08 Oral pill	:	:	:	:	:	:	:	:	:
09 IUCD	:	:	:	:	:	:	:	:	:
10 Sterilization Male or female	:	:	:	:	:	:	:	:	:
88 Others (specify)	:	:	:	:	:	:	:	:	:
	:	:	:	:	:	:	:	:	:
	:	:	:	:	:	:	:	:	:
	:	:	:	:	:	:	:	:	:
99 DK/NA	:	:	:	:	:	:	:	:	:

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44. Would you like to learn more about any of these methods?
Gusto mo magtuon pa gid parte sini nga mga paagi, bisan diin sini sa
ila?

0 No 1 Yes 2 It depends 9 DK/NA

INTERVIEWER: If Yes or It depends, go to Q. 45; otherwise,
skip to Q. 46.

45. If so, from whom would you like to learn these methods?
Kay sin-o mo gusto magtuon parte sini nga mga paagi?

- 00 Not applicable (answered No to Q. 44)
01 Doctor, nurse, midwife, or other medical person
02 Friend, relative, neighbor, husband, wife
03 Priest or minister
04 Meeting, book, TV, or periodical
05 1 and 2
06 1 and 3
07 1 and 4
08 2 and 3
09 2 and 4
10 3 and 4
11 1, 2, 3
12 1, 2, 4
13 1, 3, 4
14 2, 3, 4
15 1, 2, 3, 4
98 Woman incapable of giving birth

46. Is there one method that you prefer to know about above all others?
May isa bala ka paagi nga gusto mo mahibal-an ukon matun-an sang maayo
sangsa iban?

0 No 1 Yes 2 It depends 9 DK/NA

INTERVIEWER: If Yes or It depends, go to Q. 47; otherwise,
skip to Q. 48

47. Which of these methods do you prefer to know about above all others?
Ano nga paagi ang imo gusto mahibal-an sang maayo kag labaw sangsa
iban?

- | | |
|---------------|--|
| 00 None | 06 Foam |
| 01 Rhythm | 07 Suppository |
| 02 Withdrawal | 08 Pill |
| 03 Condom | 09 IUCD |
| 04 Douche | 10 Sterilization |
| 05 Diaphragm | 88 Others (specify _____) |
| | 99 NAP (Woman incapable of giving birth) |
- 48

48. Do you think you or your spouse will (continue to/decide to) use some methods to delay or avoid pregnancy (sometime) in the future?
Sa banta mo ikaw ukon ang imo asawa/bana (magsigi/magdecider nga) maghimo sang paagi para indí anay (ikaw/ang imo asawa) magbusong sa palaabuton?
- 0 No (i.e., will not continue or will not decide to start)
1 Yes (i.e., will continue or will decide to use them)
8 NAF (cannot have children, widowed, separated)
9 DK/NA
49. Have you changed your mind about this subject (Q. 44) in recent years or months, or do you still feel now as you have felt for many years? Nagbalhin bala ang imo painuino parte sini nga topico (Q. 44) sining ulihi nga tinuig ukon binulan, ukon ang imo pamatayag parte sini subong pareho man sang nagligad nga tinuig?
- 0 No change in recent years; same now as before
1 Yes, R has changed in recent years
9 DK/NA
50. What do you think is the main reason why you have/have not changed your mind?
Ano sa banta mo ang mayor nga rason ngaa nagbalhin/wala nagbalhin ang imo painuino?
- 0 Pope Paul/Pope
1 Church
2
3
4
5
6
7
8
9 DK/NA

BLOCK FOUR: NATIONAL PROBLEMS

51. In your opinion, what is the most important problem that the Philippines faces today?
Sa imo ya opinyon, ano ang pinakaimportante nga problema ang gina-atubang subong sang Pilipinas?
-
52. Are there other problems?
May iban pa nga mga problema?
- 0 No (Go to Q. 53) 1 Yes 9 DK/NA (Go to Q. 53)

INSERT AFTER Q. 48

INTERVIEWER: If R answered No to Q. 30, ask Q. 49a; if R answered Yes to Q. 30, ask Q. 49b; if R answered It depends to Q. 30, ask Q. 49c.

Check which question R will answer: 49a () 49b () 49c ()

49a. You said earlier you did not approve of family planning. [INTERVIEWER: Read aloud Q. 30 and R's reply, if necessary.] Have you felt this way for a long time (at least since December 1967) or did you begin disapproving of it sometime between January 1968 and the present? (Nagsiling ka kaina nga indi mo gustu sang family planning. Madugay na bala ini nga imo ginapanumdum o ginahunahuna (halin pa sang Disyembre 1967) o indi mo ini nagustuhan nga paghunahuna sugod sang Enero 1968 hasta karon?)

- 0 Disapproved of it even in December 1967
- 1 Began disapproving of it between January 1968 and the present
- 8 NAP (R approves of family planning or feels it depends)
- 9 Cannot recall/DK

49b. You said earlier you approved of family planning. [INTERVIEWER: Read aloud Q. 30 and R's reply, if necessary.] Have you felt this way for a long time (at least since December 1967) or did you begin approving of it sometime between January 1968 and the present? (Nagsiling ka kaina nga gusto mo sang family planning. Madugay na bala ini nga imo ginapanumdum o ginahunahuna (halin pa sang Disyembre 1967) o nagustuhan mo ini nga paghunahuna sugod sang Enero 1968 hasta karon?)

- 0 Approved of it even in December 1967
- 1 Began approving of it between January 1968 and the present
- 8 NAP (R disapproves of family planning or feels it depends)
- 9 Cannot recall/DK

49c. You said earlier that you neither completely approved nor completely disapproved of family planning (You said "It depends," or something similar). [INTERVIEWER: Read aloud Q. 30 and R's reply.] Have you felt this way for a long time (at least since December 1967) or did you begin feeling this way sometime between January 1968 and the present? (Nagsiling ka kaina nga indi mo man lubos nga gusto kag indi mo man lubos nga indi gusto sang family planning. Madugay na bala ini nga imo ginapanumdum o ginahunahuna (halin sang Disyembre 1967) o gin-umpisa mo sing panumdum o pamatyag ini sa sulod sa Enero 1968 hasta karon?)

- 0 Felt this way even in December 1967
- 1 Began feeling this way between January 1968 and the present
- 8 NAP (R approves/disapproves of family planning)
- 9 Cannot recall/DK

INTERVIEWER: GO TO Q. 50 ON PRECEDING PAGE.

52. (Cont'd)

If Yes, ask: Please tell me what they are. Then rank them in order of importance (2nd, 3rd, etc.)

Palihog sugiri ako kon ano ini. Dason palihog tagai ang kada isa ka problema sang ranggo suno sa pagka-importante sini.

<u>Problem</u>	<u>Rank order</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

INTERVIEWER: If R has mentioned graft and corruption (in Q. 51 or 52), or something like it, ask Q. 53; otherwise, skip to Q. 54.

53. You mention (something like) graft and corruption. Would you say this is a general problem, or is it concentrated in particular groups? If in particular groups, which?

Ginhambal mo ang "graft and corruption." Isiling mo bala nga problema ini sang kabilugan ukon natingob lang ini sa particular nga grupo? Kon sa particular lang nga grupo, ano nga grupo?

- | | |
|------------------------|-------------------------|
| 1 General problem | 5 2 and 3 |
| 2 Government officials | 7 Other (specify _____) |
| 3 "Politicians" | 8 NAP |
| 4 Private sector | 9 DK/NA |

54. What should be done to solve the problem(s) you mentioned?
Ano ang dapat himuon para masolver ang mga problema nga ginhambal mo?

Rank order
of problem

Solution

- | | |
|---|-------|
| 1 | _____ |
| 2 | _____ |
| 3 | _____ |
| 4 | _____ |
| 5 | _____ |
| 6 | _____ |

55. Please tell me how you feel about this statement, whether you agree with it strongly or somewhat, disagree with it strongly or somewhat, or you don't know how you feel about it:

Palihog sugidi ako sang imo pamatyag parte sini nga panugdaon, ina kon ikaw nagapasugot sang hugot ukon diutay lang, kon ikaw nagapamatok sang hugot ukon diutay lang, ukon wala ka makahibalo sang imo balatyagon?

"If all Filipinos received religious instruction, we would now have less graft and corruption in the Philippines."

"Kon ang tanan nga Filipino natudluan parte sa relihyon, ang graft and corruption sa Pilipinas indi masyado subong."

- | | |
|------------------|---------------------|
| 1 Agree strongly | 4 Disagree somewhat |
| 2 Agree somewhat | 5 Disagree strongly |
| 3 Don't know | |

INTERVIEWER: If R agrees strongly or somewhat, go to Q. 56; otherwise, skip to Q. 57.

56. Who should receive religious instruction . . . students only, adults or both?

Sin-o ang dapat tudluan parte sa relihyon . . . estudiante lang, tigulang, ukon tanan?

- 1 Students only
- 2 Adults only
- 3 Both
- 9 DK/NA

If Students or Both, ask: At what level of school should religious instruction be given?

Sa ano nga kataason sang eskwelahan dapat itudlo ang parte sa relihyon?

- | | |
|--------------|-------------------------|
| 1 Elementary | 4 All levels |
| 2 Secondary | 5 Other (specify _____) |
| 3 College | 9 DK/NA |

57. There are some things about which many people don't agree. These are what are called issues or controversies. Please tell me if you think the following is an issue. If it is, do you think it is crucial or not crucial?

May mga bagay nga ginabaisan sang madamo nga tao. Ano ini ang mga issues ukon controversies. Palihog sugiri ako kon ang masunod isa ka issue. Kon isa ka issue, sa banta mo tam, gid sini ka importante ukon daw indi gid man?

"The breakdown of traditional morality in contemporary Philippine society"

Ang pagkaguba sang traditional nga moralidad (ukon moralidad sang aton katigulangan) sa Pilipinas subong nga panahon.

- | | |
|---------------|------------|
| 1 Crucial | 3 No issue |
| 2 Not crucial | 4 DK/NA |

INTERVIEWER: If R is single or widowed, end interview here.
Thank R for cooperation and leave..

BLOCK FIVE: FOR MARRIED R's ONLY

58. Age of respondent's spouse last birthday
Ang edad sang asawa/bana ni R sang nagligad nga birthday _____
59. When was he/she born?
San-o siya natawo? _____
Year
60. How long have you and your spouse been married?
Ano kadugay na kamo nakasal ukon nag-asawahay? _____
61. When did you get married?
San-o kamo ginkasal? , _____
Year
62. Spouse's educational attainment
Natapos sa pag-eskwela sang bana/asawa:
- | | |
|-----------------------------------|---------------------------------|
| 0 None | 5 Vocational (post-high school) |
| 1 Katon/kartilya; less than elem. | 6 Less than college graduate |
| 2 Elementary graduate | 7 College graduate |
| 3 Less than high school graduate | 8 Post graduate |
| 4 High school graduate | 9 DK/NA |

63. Is R's spouse able to read and write? 0 No 1 Yes
Ang imo asawa/bana kahibalo bala magbasa ukon magsulat?

64. Spouse's present occupation (encircle code and underline particular
Trabaho subong sang category)
imo bana/asawa:

Not employed

- 0 No employment: housewife, retired, student, idle, other (specify _____)

Employed by government

- 1 Municipal official: mayor, vice mayor, mun. councilor, mun. secretary/
treasurer, judge, police chief, RHU personnel,
bo. apt/councilor, other (specify _____)
2. Gov't employee: clerk, policeman, PC sergeant, BIR employee, Comelec
employee, other (specify _____)

Employed by private organization

- 3 Manager, salesman, detective, other (specify _____)
- 4 Skilled worker: dressmaker/tailor, carpenter, radio technician, driver,
other (specify _____)
- 5 Unskilled worker: laborer, tenant, farmer, stevedore, other
(specify _____)

64. (cont'd)

Employed by either government or private organization

- 6 Teacher: elementary, high school, college, principal, head teacher, supervisor, other (specify _____)

Self-employed

- 7 Professional: MD, LLB, CPA, dentist, engineer, midwife, other (specify _____)
- 8 Non-professional: rice/tobacco/corn dealer, sari-sari store owner, merchant, jeepney operator, piggery/poultry operator, farmer-landowner, eatery operator, fisherman-boat operator, other (specify _____)
- 9 Other (specify _____)
- NA

65. Spouse's religion
Relihiyon sang bana/asawa

- 0 "No religion"
1 Roman Catholic
2 Protestant
3 Aglipay (PIC)

- 4 INC
8 Other (Muslim, Buddhist, Anglican, etc.)
9 DK/NA

66. Spouse's mother tongue
Nataohan nga hambal sang bana/asawa

- 0 English
1 Tagalog
2 Iloko
3 Bikol
4 Cebuano
5 Ilongo

- 6 Waray
7 Kapampangan
8 Pangasinan
9 Other, namely: _____

67. How many pregnancies did wife have in:
Kapila magbusong ang asawa sang:

Previous marriage(s) _____
This marriage _____
Total _____

68. No. of children born alive of wife:
Mga kabataan nga ginpanganak nga buhi sang imo asawa:

Previous marriage(s) _____	This marriage _____	Total _____
sons _____	sons _____	sons _____
daughters _____	daughters _____	daughters _____

69. Now we would like to know about your work experience. At any time before your present marriage, did you ever work for pay or profit or in a family farm or business without pay for at least two consecutive weeks full time? (Encircle as many correct answers as possible)

Gusto tani namon mamangkot parte sa imo experensya sa trabaho. Antes sang imo pagpangasawa (sa imo subong asawa), nakatrabaho bala ikaw sang bilog nga adlaw ukon fulltime para sa sueldo ukon ginansya, ukon sa uma o negosyo sang imo pamilya nga wala sang bayad sa sulod sang duha ka nagasunod nga semana?

- 0 NAP (R single)
- 1 For private company or person
- 2 For government
- 3 For own business profession with employee
- 4 For own business profession without employee
- 5 For family farm or business with pay
- 6 For family farm or business without pay
- 7 Never worked
- 9 DK/NA

70. Have you ever worked for pay or profit for at least two consecutive weeks full time since your marriage?

Halin sang imo pagpangasawa, nakaobra ka bala sang bilog nga adlaw ukon fulltime para sa sueldo ukon ginansya sa sulod sang duha ka nagasunod nga semana?

- 0 NAP (R single)
- 1 Continuous throughout marriage
- 2 Off and on throughout marriage
- 3 Just before first child
- 4 After all children were in school
- 5 Regular after first child
- 7 No
- 8 Other (specify _____)
- 9 DK/NA

71. Rural-urban background of husband and wife when 12 years of age
(Sa diin nagaestar ang bana kag asawa halin sang sila 12 ka tuig sang edad.)

- 1 On farm
- 2 Not on farm but both from farm background
- 3 Not on farm but either H or W farm background
- 4 Not on farm neither farm background
- 8 Other (specify _____)
- 9 DK/NA

72. Did you and your spouse ever talk about the number of children you should have or would like to have altogether?

Nagasugilanan bala kamo sang imo bana/asawa kon pila ka bilog nga bata ang dapat ninyo maangkon ukon kon pila ka bilog nga bata ang gusto ninyo nga maangkon?

- 1 Yes
- 2 No

73. If you had your choice, how many children would you like to have?
Kon ikaw papilion, pila ka bilog nga bata ang gusto mo? _____

74. How many would your spouse like to have?
Pila ang gusto sang imo bana/asawa? _____

75. How many more children do you think you will have in addition to your children now?
Sa banta mo pila pa ka bilog nga bata ang madugang sa inyo subong kabataan? _____

76. Why so?
Ngaa?