

Private Sector Project for Women's Health

Jordan Private Doctors Family Planning and Breast Cancer Survey

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Acknowledgement:

This survey was carried out by the Private Sector Project for Women's Health (PSP) in an effort to improve the quality of private sector services in Jordan. This survey aims to measure the knowledge and behaviour of private physicians in family planning and breast cancer services and to identify gaps to be addressed in the project's future activities.

We would like to acknowledge the support of the United States Agency for International Development (USAID)/Jordan and the cooperation of the private doctors who accepted to participate in the survey. Special thanks are extended to Dr.Rita Leavell and Dr.Maha Shadid for their valuable technical assistance in developing and reviewing the survey and the report, Dr. Nagham Abu Shaqra and Mays Zaneh for their assistance in developing the survey, Mrs. Iman Bara for her assistance in data collection and Ms. Lubna Weshah for her assistance in data entry.

TABLE OF CONTENTS:

1.	Summary	4
2.	Introduction	6
3.	Methodology	6
4.	Family planning results	7
5.	Breast cancer results	.17
6.	Family planning general tables	.20
7.	Breast cancer table	.24
8.	Conclusion	. 25
9.	Recommendations	.25
10.	Attachment: survey questionnaire	.26

1. Summary:

As part of the Private Sector Project for Women's Health (PSP) monitoring and evaluation, PSP conducted a survey in May 2008 to measure the following:

- 1. Knowledge and behavior of physicians in FP/BC.
- 2. Number of clients coming to doctors for FP or BC services.

The results of the survey would enable PSP to:

- Identify gaps in the knowledge and behavior of physicians in FP/BC, and find ways to improve it.
- Identify women's major concerns regarding the use of oral contraceptives according to doctors.
- Identify reasons that make women stop using oral contraceptives according to doctors.
- Identify what makes a woman ask about breast cancer, according to doctors.
- Identify future messages for our communications for the change of behavior component of our communication activities.

Eighty private doctors in Amman, Zarka, and Irbid were interviewed in their clinics by a research consultant and filled out a questionnaire about their general practices in family planning and breast cancer behaviors.

The key findings are the following:

Doctors claim on average to see about 37 women clients per week, provide information on family planning to 27% and provide a modern family planning method to 23%.

Doctors who prescribe modern methods generally prescribe OC's or condoms for newly married nulliparous couples and OC's for women with one child, progestin only pills for those who are breast-feeding and mainly IUD's for women with two or more children.

Results show that doctors are knowledgeable about modern family planning methods, are prescribing modern methods, and know they should provide counseling.

- Almost all doctors recommended spacing for 2-3 years, except for newly married couples.
- 90% of doctors said that they ask the woman which FP method she prefers, provide her with counseling and mention side effects.

However, there are attitude issues regarding the use of modern family planning methods, especially by newly married or nulliparous couples, which need to be addressed in the future. For example:

- 50% of doctors do not advise newly married couples to use modern family planning methods. This seems to be mainly out of fear that this might affect the woman's fertility and is seen more among male doctors.
- If a nulliparous newly married woman wants to delay her first pregnancy, 15% of doctors say they would advise her to get pregnant immediately and 13% would advise a traditional method.
- 67% of doctors advise a mid-20s woman with one child who wishes to delay pregnancy to use a modern family planning method, mainly oral contraceptives. However, 15% advise the woman not to use any FP method, and 16% recommend traditional methods.
- 86% of doctors would advise a woman in her 30s with 3 children who wants no more children to use an IUD, but only 2.5% of doctors would recommend female sterilization.

According to doctors, the most common concern women have regarding the use of oral contraceptives is weight gain, followed by infertility. Women stop using oral contraceptives mainly because they want to have another child or because they fear side effects. Unfortunately, 78% of doctors would advise her to change to another method and 20% would advise a "rest period". These incorrect approaches will require attention in changing doctors' behavior.

With regards to breast cancer, doctors provide information about breast cancer to 26% of their female patients. Nearly 83% said they advise women to do self-breast exam monthly and advise women above 40 to do mammogram tests. Seventy percent of doctors said that they do CBE routinely.

Doctors said that 85% of women ask them about breast cancer because they felt a mass or pain in the breast and 70% ask after seeing an announcement on TV or hearing a message about breast cancer on the Radio. 67% of doctors think that women are aware of the importance of CBE & mammogram and willing to take the tests.

In conclusion:

Although private doctors' knowledge and practices about family planning appear generally appropriate, there are certain common beliefs and practices regarding the use of modern family planning methods that need to be addressed in the future.

Recommendations and related program actions:

- The program can improve the behavior of doctors regarding the use of modern family planning methods through training and detailing, focusing on the identified gaps and emphasizing the importance of doctors' role in FP counseling.
- The program can focus especially on the management of hormonal methods, mainly side effects and myths, through working jointly with private pharma firms to improve doctors counseling skills and addressing their concerns.

 The program can address women's fears, concerns and reaction to side effects, especially in the use of oral contraceptives, through communication and outreach activities.

Doctors' knowledge and behavior regarding breast cancer are good; women are willing and aware of the importance of clinical breast examinations and mammograms.

2. Introduction:

The Private Sector Project for Women's Health (PSP-Jordan) is a five-year project funded by the United States Agency for International Development (USAID) with a mandate to improve the health of Jordanian women and families. The project aims to increase the availability of quality private sector health care services, improve knowledge of how to self-manage illness, increase demand for modern contraception and related women's health issues, increase early detection of breast cancer, and address domestic violence. The project addresses these technical areas through seven main components:

- Outreach to women
- o Communication for Behavior Change
- o Training, Quality Assurance, Continuing Medical Education
- Private Provider Network
- Private Contraceptive Market Access
- o Breast Cancer Early Detection Program
- o Violence Against Women Program

The Private Sector Project for Women's Health (PSP-Jordan) to date has trained over 1,000 private sector medical professionals in better quality in FP/RH and women's health services. PSP is also conducting detailing visits to private doctors to provide them with technical knowledge and communications materials, and has conducted media campaigns on FP and breast cancer to increase demand for FP/RH services in Jordan.

As part of PSP monitoring and evaluation, PSP conducted a survey in May 2008 to measure the following:

- 1. Knowledge and behavior of physicians in FP/BC.
- 2. Number of clients coming to doctors for FP or BC services.

3. Methodology:

A random stratified sample of 80 private doctors, out of 300 known private doctors who provide women's health services and have attended our basic and advanced family planning training courses at JMC from Amman, Zarka, and Irbid, were asked to fill the attached questionnaire.

- o 10 female OB/GYN.
- o 20 female GP.
- 20 female Network doctors.
- o 20 male GP.
- o 10 male OB/GYN.

4. Family planning results:

Q1: Average numbers of female patients whom the doctors saw in the last week before conducting the survey.

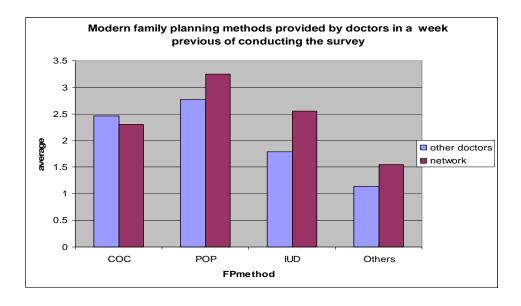
The average number of female patients seen by doctors was 37 in the last week before conducting the survey. Doctors provided information about FP to about 27% of these female patients. Doctors provided modern family planning methods to about 23% of female clients seen in the previous week.

More than 90% of doctors said that they ask a woman which FP method she prefers, provide her with counseling, mention side effects and ask for follow up visit.

The following table shows the modern methods provided by all doctors and by PSP network doctors specificly, in the week before the survey.

	COC	POP	IUD	Others
Other				
doctors	3	3	2	1
Network	2	3	3	2

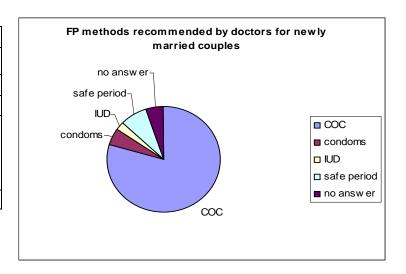
Progestin only pills are the most common FP method provided by doctors who see pregnant women or women who have recently given birth, followed by IUD as a long-term FP method.



Q2: Doctors advice to newly married couples regarding use of modern family planning methods.

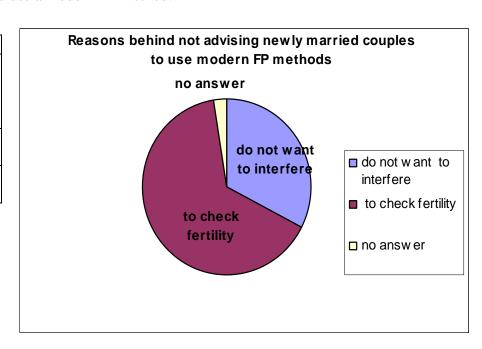
Fifty percent of doctors said that they advise newly married couples to use family planning methods. The table below shows the FP methods they would recommend. Note that 7.5% of doctors considered "safe period" to be a modern FP method.

Method	%
COC	78%
Condoms	5%
IUD	2.50%
Safe	
period*/	
traditional	
method	7.50%
no answer	5%



The remaining 50% said that they do not advise newly married couples to use modern family planning methods. When asked why, 65% of them said that newly married couples should first check their fertility before using any modern family planning methods because they are afraid that FP methods might affect women's fertility. Of the rest, 33% said that due to considerations of culture and traditions, they do not want to be responsible for such a decision and prefer to let the woman (most specified "the woman") decide if she wants to use a modern FP method.

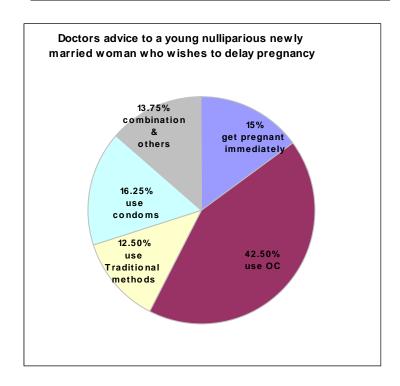
Reasons	%
Do not	
want to	
interfere	
or advice	33%
Check	
fertility	65%
No	
answer	2.50%



Q3: Doctors' advice to a young nulliparous newly married woman who wishes to delay pregnancy.

Two thirds of doctors recommended one or more modern FP methods, but one third did not advise a modern FP method for a young newly married woman even if she wants to delay her pregnancy. 15% of doctors said that they would advise the woman to get pregnant immediately and 13% would advise a traditional method. The range of possible answers is listed in the table below:

Advice	% percent
Get pregnant immediately	15%
Use OC	42.50%
Use Traditional methods	12.50%
Use condoms	16.25%
Other - unspecified	2.50%
Use OC/traditional	3.75%
Get pregnant immediately /traditional	1.25%
Use traditional/condoms	1.25%
Use OC/condoms	5%

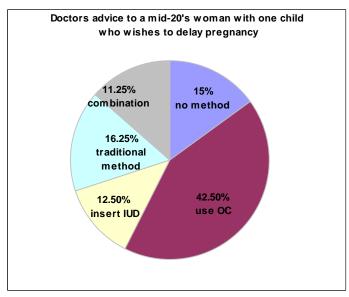


Q4: Doctors' advice to a mid -20s woman who has one child and wishes to delay pregnancy.

Thirty-one percent of doctors did not recommend a modern FP method. 15% of doctors would advise the woman not to use *any* FP method and at least 16% recommend a traditional method. The rest (nearly 67%) recommend various modern family planning methods, mainly oral contraceptives.

Advice	%
No method	15%
Use OC	42.50%
Insert IUD	12.50%
Traditional method	16.25%
Use DMPA	2.50%
Use OC/traditional	5%
Use OC/IUD	3.75%
Use traditional/IUD	1.25%
Use IUD/no method	1.25%

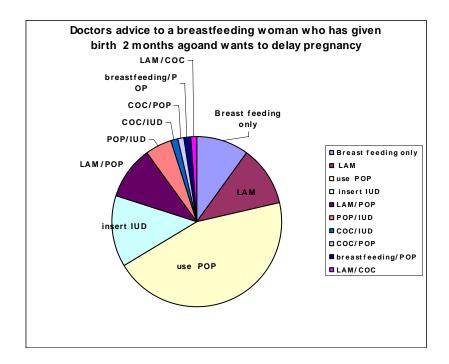
Nearly 99% of doctors said that they ask the woman which FP method she prefers, provide her with counseling and mention side effects.



Q5: Doctors' advice to a young breastfeeding woman, who gave birth to her first child two months previously and wants to delay pregnancy.

Ten percent of doctors said that they would advise the woman to stick to breastfeeding only. 11.25% recommended LAM, while 45% recommended progestin only pills and nearly 14% would insert an IUD. The table below shows FP methods recommended by doctors.

Advice	%
Breast feeding only	10%
LAM	11.25%
Use POP	45%
Insert IUD	13.75%
LAM/POP	10%
POP/IUD	5%
COC/IUD	1.25%
COC/POP	1.25%
Breastfeeding/POP	1.25%
LAM/COC	1.25%

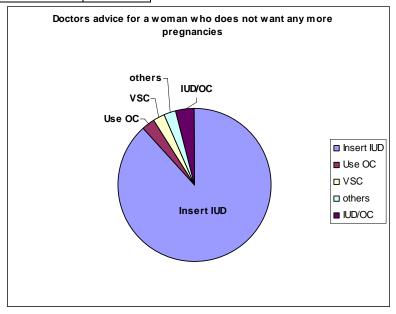


Q6: Doctors' advice to a woman in her 30s with three children who wants no more pregnancies.

Eighty six percent of doctors would advise the woman to insert an IUD as it is the most common long-term family planning method in Jordan. Only a small percentage said that they would advise the woman to use oral contraceptives, because they are afraid that she would not remember to take the pill daily, and 2.5% advise VSC (they would refer her to a private doctor).

The table below shows the FP methods recommended by doctors.

Advice	%
Insert IUD	86.25%
Use OC	2.50%
Advice	
VSC	2.50%
Others	2.50%
IUD/OC	3.75%

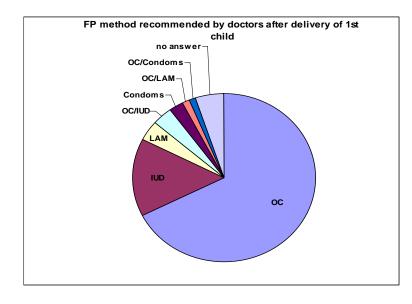


Nearly 99% of the doctors said that they would ask the woman which method she prefers, provide counseling and mention side effects.

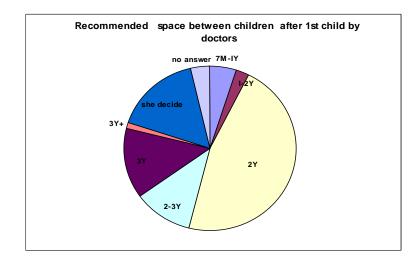
Q7:

$\bf A-\bf Family$ planning methods recommended by doctors and duration of use after delivery of first child.

Sixty eight percent of doctors recommend oral contraceptives and 46.3% advise the woman to use a family planning method for 2 years after delivery of first child. The following tables show the recommended FP methods and duration.



Method	%
OC	67.50%
IUD	15%
LAM	3.75%
OC/IUD	3.75%
Condoms	2.50%
OC/LAM	1.25%
OC/Condoms	1.25%
no answer	5%

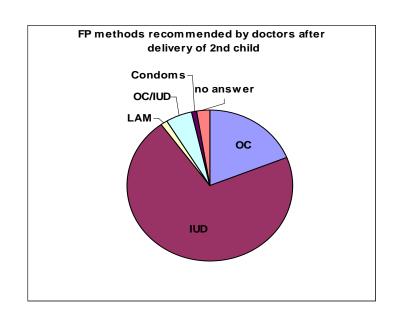


Duration	%
7M-IY	5%
I-2Y	2.50%
2Y	46.25%
2-3Y	11.25%
3Y	13.75%
3Y+	1.25%
She decides	16.25%
No answer	3.75%

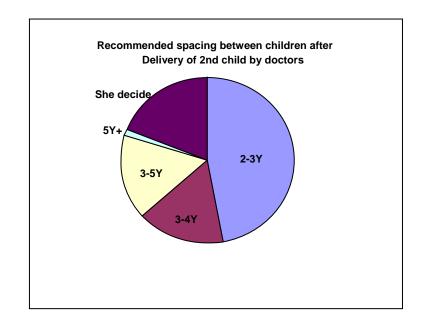
B- Family planning methods recommended by doctors and duration of use after delivery of second child.

Seventy one percent of doctors recommend IUD and 46.3% advise women to use a family planning method for 2-3 years. The following tables show the recommended FP methods and duration.

Method	%
OC	18.75%
IUD	71%
LAM	1.25%
OC/IUD	5%
Condoms	1.25%
No answer	2.50%



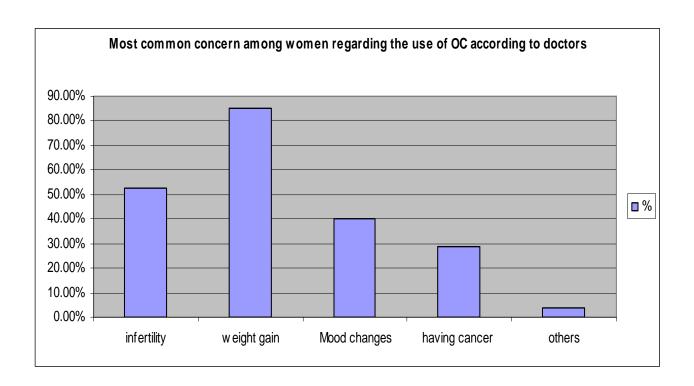
Duration	%
2-3Y	46.25%
3-4Y	16.25%
3-5Y	16.25%
5Y+	1.25%
She decides	18.75%



Q8: Most common concerns women have regarding the use of oral contraceptives, according to doctors.

According to doctors, 85% of women are concerned about weight gain when using oral contraceptives, while 52.5% are afraid of becoming infertile. Clearly this is still an issue that needs to be addressed in the future.

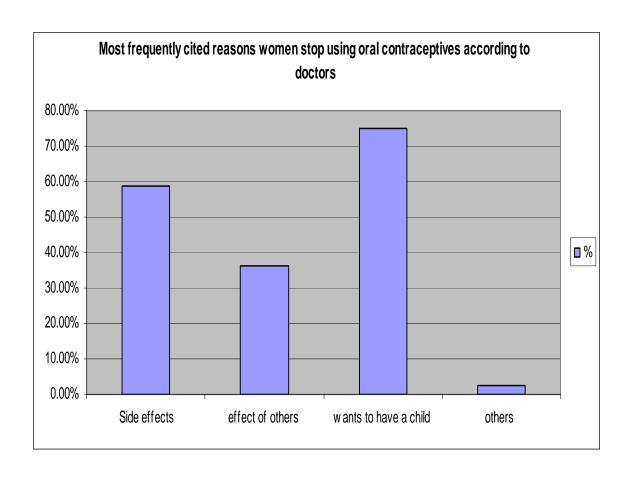
Concern	%
Infertility	52.50%
Weight gain	85%
Mood changes	40%
Having cancer	28.75%
Others	3.75%



Q9: Most common reasons that make women stop using oral contraceptives, according to doctors.

According to doctors, the reasons women give for wanting to stop OCs are: 75% because they want to have more children and 59% stop using them because they suffer from side effects. This means that the high discontinuation rate might be because women use oral contraceptives as a family planning method for a short period and they stop takes pills mainly when they want to have a child. Doctors also note the strong influence of others on the woman's decision.

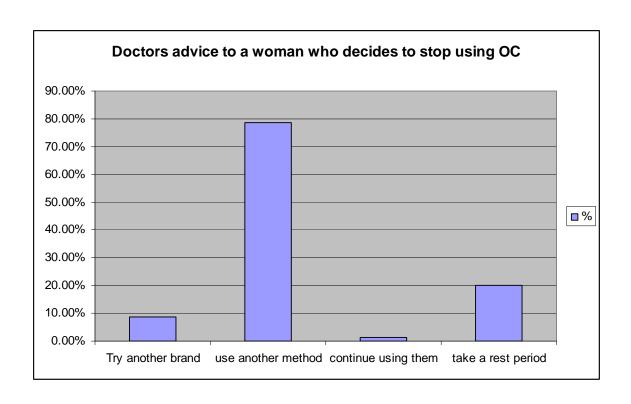
reason	%
Side effects	58.75%
Others influence	36.25%
Wants to have a	
child	75%
others	2.50%



Q10: Doctors' advice to women who decide to stop using oral contraceptives.

Seventy eight percent of doctors said that they would advise the woman to use another family planning method, while 20 % said that they would advise her to take a period of rest. It appears that some doctors still believe that woman should take a rest period from using family planning methods, mainly oral contraceptives. This may contribute to a high discontinuation rate.

Advice	%
Try another brand	8.75%
Use another	
method	78.75%
Continue using	
them	1.25%
Take a rest period	20%



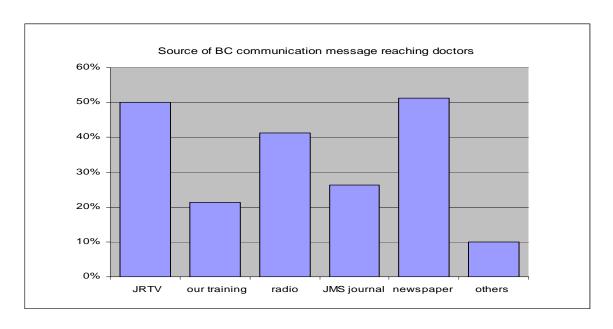
5. Breast Cancer results:

Q1: Average number of women to whom doctors provided information about breast cancer in the week before the survey.

The average number of women who received information about breast cancer was 9.3, which is 26% of female patients seen by doctors during the week before the survey.

Q2, 3: Doctors who came across information or a message about breast cancer in the past 3 months and source of breast cancer message.

Ninety percent of doctors received communication about breast cancer in the past 3 months. Fifty—one percent of them read information about breast cancer in the newspapers while 50% saw it on Jordan TV and 41% heard about breast cancer on the radio.

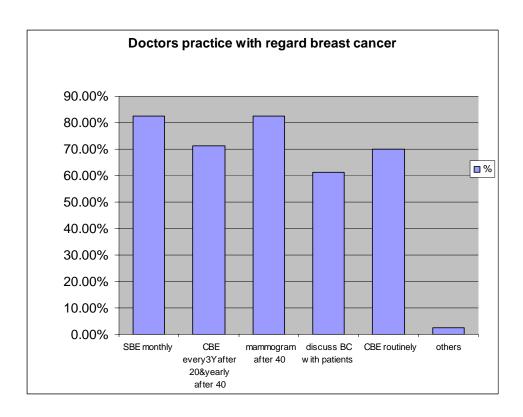


Q4: Doctors' practices with regard breast cancer during the past three months.

Nearly 83% of doctors said that they advise women to do self-breast exam monthly and advise women above 40 to do mammogram tests. 71% of them said that they advise women to do a clinical breast exam every 3 years after 20 and yearly after 40. Seventy percent of doctors said that they do CBE routinely. This indicates that doctors are aware of the importance of SBE, mammogram and CBE in the early detection of breast cancer.

	%
SBE monthly	82.50%
CBE every3Yafter 20&yearly	
after 40	71.25%
Mammogram after 40	82.50%
Discuss BC with patients	61.25%
CBE routinely	70%
Others	2.50%

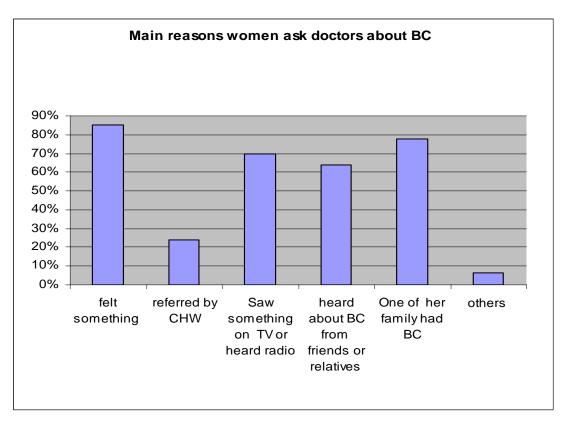
Source	%
JRTV	50%
Our training	21.25%
Radio	41.25%
JMS journal	26.25%
Newspaper	51.25%
Others	10%



Q5: Main reasons why women ask about breast cancer.

Eighty – five percent of women ask about breast cancer because they felt something like a mass or pain, 78% because a family member had breast cancer, while 70% ask about breast cancer because they saw something about it on TV or heard it on the radio.

Reason	%
Felt something	85%
referred by CHW	23.75%
Saw something on TV or heard	
radio	70%
Heard about BC from friends or	
relatives	63.75%
One of her family had BC	77.50%
Other	6.25%



Q6: Doctors' view if women are aware of the importance of CBE & mammogram and willing to take the tests.

Seventy-six percent of doctors think that women are aware of the importance of CBE & mammogram and willing to take the tests.

6. Family planning general tables:

Family planning:	
Demand for family planning	
Percentage of female patients	Network doctors: 29%.
provided with information about	Other doctors: 26%.
family planning in the week before	
conducting the survey.	
Modern family planning methods	Network doctors provided modern FP methods to 31%
provided by doctors in the week	of females seen, mainly IUD and POP. Other doctors
before conducting the survey.	actually provided modern FP method to 21% of
	females seen, mainly oral contraceptives both POP,
	COC.
Knowledge and behavior of doctors	
in FP	
Doctors' advice to newly married	50% advise couples to use modern FP methods, of
couples regarding use of modern FP	whom 78% advise COC.
methods.	50% do not advise couples to use modern FP methods,

	of whom 65% were concerned that it might affect fertility and 33% due to culture and traditions.
Doctors' advice to a young	33% did not advise women to use modern FP methods
nulliparous newly married woman	(15% advised women to get pregnant immediately, 12
who wishes to delay pregnancy.	% recommended traditional methods).
	66% recommeded modern FP methods (42% OC, 16%
	condoms)
Doctors' advice to a mid-20s	31% did not recommend modern FP methods (16% no
woman who has one child and	FP method, 15% traditional methods).
wishes to delay pregnancy.	67% recommended modern FP methods mainly OC,
	IUD, DMPA.
Doctors' advice to a young breast	45% recommended POP, 14% IUD, 11%
feeding woman, who gave birth to	recommended LAM.
her first child 2 months previously	10% recommended breastfeeding only.
and wants to delay pregnancy.	
Doctors' advice to a woman in her	86% advise her to insert IUD, 2.5% COC, 2.5% VSC.
30s with 3 children, who wants no	
more children.	
Family planning methods and	After 1st child: method: 68% recommended OC, 15%
duration recommended by doctors	IUD. 46% recommended 2years,
after delivery of 1 st and 2 nd child.	Duration :16% said that she decides
	After 2nd child: method 71% recommended IUD, 19% OC.
	Duration: 46% recommended 2-3 years, 19% said that
	she decides.
Doctors' advice to a woman, if she	79% advise her to use another method, 9% advice her
decides to stop using oral	to use another brand, 20% advise her to take a rest
contraceptives.	period.
Women's concerns and reasons to	
stop using oral contraceptives.	950/ one concerned shout weight onin 52.5.0/
Most common concern women have	85% are concerned about weight gain, 52.5 %
regarding the use of OC, according	infertility, 40% mood changes, and 29% having
to doctors.	cancer.
Most common reasons that make a	75% want to have a child, 59% because of side effects,
woman stop using OC, according to doctors.	and 37% because of peer pressure.
1 GOCIOTS	

*Comparison between male and female doctors:

Family planning:	
Demand for family planning	
Percent of female patients provided with information about family planning in the week before conducting the survey.	Female doctor: 28% Male doctors: 23%
Modern family planning methods provided by doctors in the week before conducting the survey.	Female doctors provided modern FP methods to 26% of females seen, mainly POP & COC followed by IUD. Male doctors actually provided modern FP method to 15% of females seen, mainly oral contraceptives both POP and COC.
Knowledge and behavior of doctors in FP	
Doctors' advice to newly married couples regarding use of modern FP methods.	Female doctors: 52 % advise couples to use modern FP methods, of whom 82% advice COC. 48 %do not advise couples to use modern FP methods, of whom 58% were concerned that they might affect fertility and 33% due to culture and traditions. Male doctors: 47 % advise them to use modern FP methods, of whom 71% advice COC. 53% do not advise them to use modern FP methods, of which 75% were concerned that they might affect fertility and 31% due to culture and traditions.
Doctors' advice to a young nulliparous newly married woman who wishes to delay pregnancy.	Female doctors: 18 % did not advise modern FP methods (8% recommended getting pregnant immediately, 10% recommended traditional methods). 76% recommeded modern FP methods (46% OC,22 % condoms) Male doctors: 43% did not advise modern FP methods (26% recommended getting pregnant immediately, 17% recommended traditional methods). 53% recommeded modern FP methods (37% OC, 7 % condoms).
Doctors' advice to a mid-20s woman who has one child and	Female doctors: 6% did not recommend modern FP methods (2% no FP method, 4 % traditional methods).

wishes to delay pregnancy.	78% recommended modern FP methods mainly 62% OC&16% IUD. Male doctors: 13% did not recommend modern FP methods (3% no FP method, 10 % traditional methods). 70% recommended modern FP methods mainly 47% OC & 20% IUD.
Doctors' advice to a young breast feeding woman, who gave birth to her first child 2 months previously and wants to delay pregnancy.	Female doctors: 50 % recommended POP, 10% IUD, 12 % recommended LAM. 8% recommended breastfeeding only. Male doctors: 37% recommended POP, 20% IUD, 10 % recommended LAM. 13% recommended breastfeeding only.
Doctors' advice to a woman in her 30s with 3 children, who wants no more children.	Female doctors: 88 % advise her to insert IUD, 2 % COC, 2% VSC. Male doctors: 83% advise her to insert IUD, 3 % COC, 3% VSC.
Family planning methods and duration recommended by doctors after delivery of 1 st and 2 nd child.	Female doctors: After 1st child: method: 56% recommended OC, 6% IUD. Duration: 62% recommended 2 years 18% said that she decides After 2nd child: method 74% recommended IUD, 14% OC. Duration: 16% recommended 4 years, 12% recommended 2-3 years, and 22 % said she decides. Male doctors: After 1st child: method: 53% recommended OC, 30 % IUD. Duration: 37% recommended 3 years 13% said that she decides. After 2nd child: method 67% recommended IUD, 13% OC. Duration: 27% recommended 3 years 10% said she decides.
Doctors' advice to a woman, if she decides to stop using oral contraceptives.	Female doctors: 88% advise her to use another method, 12 % advise her to use another brand, 12 % advise her to take a rest period. Male doctors: 63% advise her to use another method, 3 % advise her to use another brand, 7 % advise her to take a rest period.

7. Breast cancer table:

Breast cancer:	
Knowledge and behavior of doctors regarding breast cancer	
Percent of female patients provided with information about breast cancer in a week before conducting the survey Doctors practices with regard breast cancer in the past three months.	Doctors provide information about BC to 26% of female patients seen in a week before the survey. 83% of doctor's advice women to do self breast exam monthly& mammogram after 40. 71 % of doctor's advice CBE every 3 years after 20 and yearly after 40. 70% do CBE routinely 61% discuss BC with patients.
Doctors source of breast cancer information	
Information about BC heard or seen by doctors in the past three months and source of messages.	90% of doctors have heard about BC in the past three months. Source of BC messages: 51% newspaper, 50% JRTV, 41% radio.
Reasons women ask about breast cancer	
Main reasons women ask about breast cancer according to doctors.	85% of women ask about breast cancer because they felt a mass or pain in breast, 78% ask because one of her family had cancer, 70% ask because they saw something on T.V or heard in radio, 64% ask because they heard about it from friends or relatives.

8. Conclusions:

The results of the survey show that doctors have good medical knowledge about modern family planning methods. However, there are certain common beliefs and practices regarding the use of modern family planning methods that need to be addressed in the future, such as refraining from providing modern family planning methods to newly married couples out of concern that it might affect their fertility. In addition some doctors believe that they do not have any role in recommending the duration of use of modern family planning methods, and leave it to the woman to decide.

Women's concerns regarding the use of oral contraceptives are mainly weight gain and infertility. Both can be addressed in future. The main reason for stopping the use of oral contraceptive was mainly to have more children, followed by side effects, which can be managed if doctors provide women with good counseling.

Doctors' knowledge and behavior regarding breast cancer are good; women are willing and aware of the importance of clinical breast examinations and mammograms.

9. Recommendations:

Recommendations and related program actions:

- The program can improve the behavior of doctors regarding the use of modern family planning methods through training and detailing, focusing on the identified gaps and emphasizing the importance of doctors' role in FP counseling.
- The program can focus especially on the management of hormonal methods, mainly side effects and myths, through working jointly with private pharma firms to improve doctors counseling skills and addressing their concerns.
- The program can address women's fears, concerns and reaction to side effects, especially in the use of oral contraceptives, through communication and outreach activities.

Private Doctor Survey Questionnaire:

Date:		Sex: M/F	
Type of facility: private center / clinic		Type of Doctor: GP / OBGYN	V
Doctor in PSP network: Y / N			
1- How many female patients have you	seen in the l	last week?	
A-How many women did you pro			
B -How many IUD's did you inse			
C -How many OC's did prescribe	in the last v	week?COC	
		POP	
		Other methods	
2- Do you advise newly married couples		• 1	
	thod do you	advice them to use?	
b- No Why?			
3- What do you advise a young nulliparou	s newly mar	rried woman who wishes to dela	137
pregnancy?	s newly mai	ined woman who wishes to dela	ıy
Programme)			
A - Advise her to get pregnant immediate	ely.		
B - Advise her to use OC			
C - Advise her to use traditional method			
D - Advise her to use condoms			
E - Others			
*do you ask her which method she prefers?	-Yes	-no	
*do you provide counseling on method use?		-no	
* do you mention side effects? * do you do you ask for follow up visit?	-Yes -Yes	-no	
do you do you ask for follow up visit?	- 1 es	-no	
4- What do you advise a mid-20's woma pregnancy?	nn who has	one child and wishes to dela	ıy
A- Do not provide her with any method.			
B - Advise her to use OC			
C- Advise her to insert IUD	i		
D- Advise her to use traditional method			
E - Advise her to use DMPA			
F- Others *do you ask her which method she prefers?	-Yes	no	
*do you ask her which method she prefers? *do you provide counseling on method use?	- i es -Yes	-no -no	
* do you mention side effects?	-Yes	-no	
as you mention olde offees.	_ 05		

5- If the woman mentioned above has given birth two months ago and is breast feeding what do you advise her to delay pregnancy? A- Stick to Breast-feeding only. B- Advice LAM C-Advice COC D- Advice POP E- Insert IUD
6- What do you advise a woman in her 30's with three children who wants no more pregnancies?
A - Do not provide her with any method B- Advise her to insert IUD C- Advise her to use OC D- Advise her with VSC where E - Others *do you ask her which method she prefers? -Yes -no *do you provide counseling on method use? -Yes -no * do you mention side effects? -Yes -no
7- Which family planning method and for how long you advise the woman to use it in these conditions: A- After delivery of first child: method duration B- After delivery of second child: method duration
8- What are the most common concerns among women regarding the use of oral contraceptives? (You can choose more than one) Infertility b- Weight gain c- Mood changes. d- Having cancer. e-others
9- What are the reasons that make a woman stop using oral contraceptives? a- side effects. B-effect of others. c- Wants to have a child. d- Others 10- If a woman decides to stop using oral contraceptives, you advise her to:

a- Try another brand.b- Use another method.c-Continue using themd- Take a rest period before using any method.	
Breast Cancer:	
1- How many women did you provide info about BC in the last week? 2 Hove you board of any communication about BC in the past 3 months?	
2-Have you heard of any communication about BC in the past 3 months? -Yes -No	
-165 -100	
3-If yes where did you hear info or communication about BC in the past 3 months	?
A-JRTV	
B-attended our training courses	
C-Radio	
d- Medical Syndicate Journal	
e -Newspaper .	
f- Other	
4- In the past 3 months what are your practices with regard to BC?	
a- Advise women to do SBE monthly	
b- Advise women to do CBE every 3 years after 20 and yearly after 40	
c- Advise women above 40 to do mammogram.	
d- Discuss BC with patients	
e- Clinical Breast Exam routinely	
f- Others	
5- What are the main reasons women ask about BC?	
a- Felt something like mass or pain	
b- Referred by CHW	
c- Saw something on T.V or heard on radio.	
d- Heard something about BC from relatives or friends	
e- One of her family had breast cancer	
f- others	

6- Do you think women are willing and are aware of the importance of CBE and mammogram?

a- Yes

b-No