

BIBLIOGRAPHY

SORIANO, JUNELYN T. MARCH 2012. Evaluation of the Decision- making Tool Flipchart in Promoting Family Planning in Barangay Poblacion, La Trinidad, Benguet. Benguet State University, La Trinidad, Benguet.

Adviser: Igrelyn P. Pinos- an, BSc.

ABSTRACT

The study on the evaluation of the decision- making tool flipchart (DMT) in promoting family planning in Barangay Poblacion, La Trinidad, Benguet was conducted from December 2011 to February 2012. Generally, it evaluated the effectiveness of the DMT Flipchart in promoting Family Planning. Specifically, it identified the socio-demographic profile of the respondents; determined the effectiveness of the Decision-making Tool Flipchart in terms of Comprehensibility, Attractiveness, Acceptability, Self involvement and Persuasion; determined the problems encountered by the midwife in explaining the tool; and determined the suggestions of the respondents for the improvement of the Decision-making Tool.

An interview schedule was used in obtaining data from the 40 respondents practicing family planning in Municipal Health Office. Also, These were chosen through purposive sampling. Guide questions were used in obtaining data from the three Barangay Health Workers.

Results show that, all of the respondents claimed to have comprehended and easily understood the words. Majority of them also find the decision- making flipchart attractive while rest thought otherwise. Likewise, majority of them accepted the words used in the material and believed in its content. Most of the respondents also perceived that the material was written for them and were persuaded enough to give the recommended family planning method try.

The BHWs stated that the following problems they have encountered when it comes



to communicating the tool: clients are not attentive during the counseling; were not financial capable; and were hard to be persuaded due to their different belief system.

The researcher recommends that the flipchart should be encouraged as a medium of instruction not only in the Health Centers but also at the community at large. The use of audio- visuals or recorders for more practice discussions between clients and providers may be considered by the DOH. It is also recommended that BHWs find ways on how they can motivate both couples or help each other attend family planning counseling.



RESULTS AND DISCUSSION

Socio- demographic Profile of the Respondents.

Table 1 shows the socio- demographic profile of the respondents. These were in terms of age, address, language spoken, occupation, sex, civil status, religion, number of children and educational attainment.

Age. The data shows that majority (22) of the respondents was aged 26-35, 10 were aged 15-25 and 8 were aged 36-45.

This implies that among the respondents, those who were 30-35 years old were more involved in practicing family planning in MHO.

Civil status and Sex. Results show that almost all of the respondents were married (39) and were female (38). Only 2 of them were male. This implies that married couples, especially the females were the most active participants in family planning counseling.

This supports Lague and De Leon (2001) stating that at the most basic level, family planning programs involved women more often than men as acceptors of contraception. It is essential that women be involved not merely as acceptors of this or that contraceptive device, but as makers of decisions and active participants on an equal basis with men in the formulation of policies which will profoundly affect their lives.

As to the role of being wives and mothers, it is still very important that men should be involved in the family planning programs because as married couples they do not just desire for parenthood but also the responsibilities involved.

Languages spoken. Results show that the respondents were multi-lingual. Majority (22) of the respondents knew how to speak Ilocano and Kankana-ey.



Table 1. Shows the Socio- demographic Profile of the Respondents

CHARACTERISTICS	FREQUENCY (n=40)	PERCENTAGE (%)
Age		
15-25	10	25
26-35	22	55
36-45	8	20
Total	40	100
Sex		
Female	38	95
Male	2	5
Total	40	100
Civil Status		
Married	39	97.5
Single	1	2.5
Total	40	100
Educational Attainment		
College Graduate	14	35
College Level	11	27.5
High School Graduate	7	17.5
High School Level	4	10
Elementary Graduate	4	10
Total	40	100
Occupation		
House wife	25	62.5
Self- employed	13	32.5
Government employed	2	5
Total	40	100
Language Spoken		
Ilocano	22	55
Kankanaey	22	55
Ibaloi	12	30
Tagalog	4	10
Address		
Buyagan	16	40
Poblacion	5	10
Puguis	4	5
Betag	4	10
Pico	3	2.5



Table 1. continued...

Bineng	2	2.5
Balili	2	2.5
Alno	1	7.5
Ambiong	1	2.5
Wangal	1	5
Shilan	1	12.5
Religion		
Roman Catholic	21	52.5
Born Again	9	22.5
Anglican	5	12.5
UCCP	2	5
Lutheran	2	5
INC	1	2.5

Address. Most of the clients (17) were residents of Buyagan. The rest of the clients were distributed to the other barangays.

This implies that clients near MHO were the ones regularly coming in the center for check- ups.

Occupation. Majority of the respondents (25) were housewives. This implies that women were the ones actively attending counseling in the MHO because men were the ones working for the family.

Educational attainment. Among the 40 respondents, (14) finished college and (11) of them reached college level. This implies that most of the clients were able to read and write.

Religion. As to the religion of the 40 respondents, majority (52.5%) belonged to the denomination of Roman Catholic (RC).

Significantly, most of the respondents were RC and using family planning contraceptives or methods.



Number of children. As to the number of children of the 40 respondents, (13) of them have one child.

Based on the results of the study, it shows that most Catholic members were the active participants of family planning using contraceptive methods. The same respondents noted that using contraceptives has a good effect because they only have one child. Therefore, religion for them is not a reason not to use contraceptive.

This is in contrast with the study of Lugue and De Leon (2001), that in the teachings of the RC church, it is sinful to attempt to control or regulate the generative process of child-bearing and aided by the influences of family mores and traditions in the rural areas. Children are considered signs of God's blessing.

Evaluation of the Respondents on the Flipchart

Comprehensibility. Based from the results of the study, there were no words or sentences that were not understood. All of them understood all the words used in the content of the flipchart. The respondents even commented that some terms used like “vomiting and nausea” were easily understood because there were pictures that supported the texts. The respondents said that graphics and illustrations used helped portray the message of the flipchart. This implies that there were no problems with regards to the comprehensibility aspect of the respondents in the material.

The researcher believes that pictures are very important in a certain medium to achieve effective and a more comprehensive communication. However, words that are being used in the material should always be visible through the use of pictures and illustrations to show the appearance of one thing.



This was supported by the website saying that every graphic should have a purpose. Graphics and photographs are very important components of a material because they add interesting visuals to the material, helping the audience to get the message across (Hess *et al.*, n.d).

Attractiveness. Table 2 shows that great majority (92.5%) of the respondents find the decision- making flipchart attractive. Table 3 supports this result in terms of the reasons for attraction of the flipchart. Among the 40 respondents, 19 (47.5%) of them said that with the presence of illustrations or the pictures, it made them perceived the flipchart to be attractive because the material has simple and visible illustrations. Eleven (27.5%) of them were attracted with the font style and font size used because according to the respondents letters used are clear and easily read. Nine (22.5%) said that the colors of the material are pleasing to the eyes and 5 (12.5%) of them said that they perceived the layout to be attractive because according to the respondents, the arrangement or alignment of the pictures were well organized and well presented.

The respondents perceived the material to be attractive because of the pictures, colors, font styles and layout. This means that the respondents were dependent enough to the given designs of the material. What they see in the material is not always what they perceived to be attracted with because all the elements enumerated by the respondents were presented in the flipchart regardless to their knowledge in flipchart design.

On the other hand, there were some of the respondents who perceived the material to be not attractive. According to one respondent, the picture in the flipchart like “implants” was not familiar to her. This can be reflected in the flipchart that “implants” did not have a page in the flipchart and so it was not well explained to the clients. Another



respondent commented that she did not appreciate the pictures in the material because according to her, they were not eye catching.

Table 2. Evaluation of the respondents on the effectiveness to the flipchart

EFFECTIVENESS	FREQUENCY (n=40)	PERCENTAGE (%)
Attractiveness		
Material was attractive	37	92.5
Material was not attractive	3	7.5
Acceptability		
Elements are annoying/offensive	2	5
Elements are not offensive	38	95
Content		
Believed in the flipchart	38	95
Did not believe in the flipchart	2	5
Self-Involvement		
Flipchart was written for them	40	100
Persuasion		
Try the recommended FP method	35	87.5
Will not try the recommended method	5	12.5
TOTAL	40	100

Table 3. Respondents' perceived reasons for attraction to the flipchart

REASONS	FREQUENCY (n=40)	PERCENTAGE (%)
Illustrations/pictures are simple and visible	19	47.5
Font styles and size used are easily read	11	27.5
Colors used are pleasing to the eyes	9	22.5
Well organized presentation of elements	5	12.5

* Multiple answers



In general, the flipchart for the respondents was attractive because it has all the necessary elements needed as Cadiz mentioned.

According to Cadiz (1991), an important tip in using words in the visual media pertains to their appearance: words must be legible or readable and legibility is determined by several factors like size which based on letter height, width and thickness. As general rule, the shorter, narrower and lighter letterings are less legible. However, letter size should also be determined by the importance that a word plays in the visual medium.

center of interest; follows normal left to right and top to bottom reading/ viewing directions or patterns; balance and blend the different elements; simple and with empty breathing spaces.

Type of illustrations according to Mindanao training Resource Center (n.d) must be big and bold with minimum of details. Illustration must depict the idea or message; and select the best types of line or stick figure, cartoons, stylized drawings and photographs.

Acceptability. The result of the study on the respondents' evaluation on the acceptability aspects shows that great majority (95%) perceived the material inoffensive as shown earlier in Table 2. This includes the evaluation of the respondents in the content of the flipchart.

Table 4 shows that majority (85%) of the respondents said that words/pictures used in the flipchart were normally and plainly used for educational purposes. According to the respondents, the family planning methods were all common to them regardless of their exposure to the material because they were using some of the methods. In addition,

Table 4. Respondents' perceived reason for the acceptability to the flipchart

REASONS	FREQUENCY (n=40)	PERCENTAGE (%)
---------	------------------	----------------



Words/pictures were used for educational purposes	34	85
Illustrations were relevant to the topic	10	25
Attitudinal basis of acceptance	3	7.5
*Multiple response		

respondents said that it is better for them to see the appearance of all these methods rather than being ignorant about it. Ten (25%) of the respondents said that illustrations specifically the expressions of the people in the pictures support the information in the flipchart. Based also on the data, there were 3 (7.5%) respondents who perceived the material to be inoffensive because of their attitudinal basis of acceptance. The basis of the researcher was according to the respondents statements also. They said that it depends on how the person consider all these things like being open- minded with regards to this issue and also in the practicality of life nowadays. The respondent further noted, “*Wala na aarte- arte ngayon*”.

This may imply that all pictures used in the flipchart provided impact to the respondents. The two respondents, who said that they were annoyed in some of the pictures in the flipchart, identified the pictures of the pregnant and breastfeeding mothers to be offensive because they were not use to see them in the picture.

Content. As to the content of the material, nearly all (95%) of the respondents believed the flipchart.

This implies that the flipchart was a credible source of information about family planning. The two who did not believe the content of the material argued that it rested upon the married couple’s decision whether or not to practice family planning and acknowledged that the method did not work all the time.



This shows that the respondents had a parameter in believing the content of the flipchart and this was shown in the result that they must prove it their selves first.

Flipchart as visual aids according to Brown (1985), the amount of information or the content intended to be communicated in the material should be brief and should highlight only the salient words or phrases necessary to make a point.

Self- involvement. As seen in Table 2, all of the respondents perceived that the content of the material was written for them.

Hence, the self- involvement aspect of this flipchart succeeded. As reflected in the results, the flipchart was effective in making the respondents more involved in the family planning counseling. The BHWs validated these findings when all of them said that during the presentation their clients often ask questions regarding the content of the flipchart which they also tried to explain. Moreover the BHWs also added that when their clients ask questions regarding family planning methods they observed that the interest of the clients regarding the topic increases and that the clients were able to voice out their insights regarding the problems that family planning is trying to address. This finding supports the idea of Cadiz (1991) where she stated that in order to encourage more participation of learners the presentor should allow learners to reflect on the given problems in order to let the learners realize by themselves the solutions to such problems instead of directly telling the learners the solution. This further encourages learners to reflect, raise questions, and think of solutions creatively, not just remain as passive learners.

Persuasion. As seen in Table 2, results show that that majority of the respondents (87.5%) stated that they will try the recommended family planning method. However, there



were five who said that they will not try the recommended family planning method because the contraceptive methods have side effects.

Based on the result of the study, this implies that almost all respondents felt right to be part of the family planning practice and they were willing to alter from the traditional family planning because they were now open for contraceptive methods and even natural methods knowing their advantages and benefits from it.

This supports the study of Cadiz (1991) stating to adequately arrest learners' attention, arouse and sustain the interest of the audience; presenters must explain why the information they share is important by relating it to learners' needs, problems or future situations that they may encounter. This is part of applying the basic communication principle "know your audience" and the concept of empathy. To be an effective presenter must be learner- oriented. In the case of the La Trinidad MHO the respondents said that they were persuaded by the explanation of the BHWs because as the respondents read the content of the flipchart the BHWs coupled the content of the flipchart with oral explanations wherein they related the content of the flipchart to the situation of the respondents.

General Evaluation. Multiple answers were gathered in the general evaluation to the flipchart. Table 5 shows that among the 40 respondents, there were twenty- one of them who said that it was good because it helps married couples in choosing what family planning method to use, eleven (27.5%) of the respondents said that it was good for educational purposes. Nine (22.5%) of them said that the flipchart was simple and the content was easily understood, four (10%) of them said that it was satisfactory and



informative. Respondents were satisfied because the flipchart helped and taught them how to do family planning and lastly, only one said that the flipchart has well laid- out.

Table 5. General evaluation of the respondents to the flipchart

GENERAL EVALUATION	FREQUENCY	PERCENTAGE (%)
It helps married in FP decision-making	21	52.5
It is purposeful educationally	11	27.5
Flipchart was simple and easily understood	9	22.5
Flipchart was satisfactory and informative	4	10

*Multiple answers

All the general evaluations of the respondents were positive. Thus, the flipchart used in the MHO were very useful and effective in counseling about family planning.

The researcher generally rated the flipchart good as it satisfied almost all the basic elements in designing a material. Although the material violated the criteria mentioned by Cadiz (1991) regarding the maximum of colors for every page, still, it was effective as supported by the evaluation of the respondents. The respondents said that it would have been better if they used photographs of the artificial method and not just graphics.

Problems Encountered by the BHWs

Some clients are not attentive during the counseling. According to the key informants, they made sure that they explained well the content of the flipchart but their clients tend to forget the following instructions and the process being instructed them so they ended up not continuing what is advised to them.



Financial capability of the clients. The BHWs may explain well the family planning method and clients may easily accept what method they wanted to use but they can only use what is available to them or what they can afford. In situations like these, there must be a continuous in taking of pill tablet and it should be completed to be effective, but the problem arises to the clients. Clients would say to the midwife what other method they can suggest due to financial constraint.

This implies that the decision- making tool flipchart remained to be a tool as stated in the study's rationale where it seeks to guide the providers' response to the client's acclaim and preferences at each step in the counseling process.

The study found out that financial reason was also a factor why such family planning contraceptives were disregarded by some respondents to go on family planning. Moreover, the midwife found it difficult to explain the tool to the respondent because of this factor. She gave recommendation of a good method for a client's situation but she cannot do anything about it but to really help the clients give appropriate points regarding family planning.

Client's attitude toward the method. According to the midwife, the agreement between married couples depends on the acquisition of a certain method. For the midwife, it is hard for her to insist what is good for the clients because often times it is unacceptable to the couples or offensive to the other and accordingly, this is only a guide for decision-making. On the other hand, clients also consider the health risks that will cause them if they chose to use the method. Otherwise, clients insist what they like and the midwife cannot do anything.



The result of the study showed that majority of the female participants was the ones active in family planning; this did not mean that the absence of males in family planning is the reason. This means that male partners were the ones working because most female were housewives and it did not mean that they were not active participants in family planning. It can be implied that the conversation of the couple during bedtime were also considered as part of the planning decision- making.

In line with this, the researcher suggests that there should be more motivation done on the part of BHWs to motivate both couples attends family planning counseling.

Clients' belief system. According to the key informant, older clients were hardly convinced in terms of explaining a certain method because for some they still believe in their own beliefs and that the midwife found it hard to convince them. It shows that clients' belief system was also a factor which made the midwife difficult to explain the flipchart. Such belief system included: Social environment, Culture, and Religion.

Social environment. A person's social environment usually has more influence on family planning decisions than the attributes of specific contraceptives. When clients were asked to give reason for their choice of a specific family planning method, most of them cited the attitudes of their spouse and their neighbors. People chose contraceptive methods that are commonly used in their community because of its social acceptability and they claimed to know more about these methods.

Culture. Household and community influences can be so powerful that they can obscure the line between individual desires and community norms. For instance, in some culture, according to David (2008), many women reject contraception because bearing and raising children is the path to respect and dignity in the society. This can be reflected from the



result of the study that most women use contraception because having small families is the norm.

Religion. According to the BHWs they observed that the religious beliefs of their clients often limit the full participation of the clients in family planning. This supports the findings of Dixon-Meuller (1999) as cited by David (2008) that religious beliefs accord their preferences about family size, family pressures to have children and whether to have family planning in their customs.

The researcher observed that the BHWs who were the providers were subjecting to the choice of the clients. In a way, it was good because the flipchart encourages only the providers to give accurate, relevant and up-to-date technical information at appropriate points and not to force the clients to follow their recommendations.

Suggestions of the Respondents for the Improvement of the Flipchart

The clients were asked to suggest for the improvement of the flipchart. According to them, the BHWs should think of other ways on how to promote educational family planning. Also, they suggested that texts in the flipchart should be lessened into a shorter one. Information should go straight to the point as they were also requesting a handy one so that they could always read it at home.

In addition, clients suggested that the flipchart must be written in multiple language translations especially in vernacular so that they may understand it more easily. The clients also suggested lectures to be done in groups rather than one on one so that they could help each other in following the instructions in using a method. Finally, the clients said that it is best if the providers show actual samples during counseling.



SUMMARY, CONCLUSIONS AND RECOMMENDATIONS

Summary

The study on the evaluation of the decision- making tool flipchart (DMT) in promoting family planning in Poblacion, La Trinidad, Benguet was conducted from December 2011 to February 2012. Generally it evaluated the effectiveness of the DMT Flipchart in promoting Family Planning. Specifically it identified the socio- demographic profile of the respondents; determined the effectiveness of the Decision-making Tool Flipchart in terms of Comprehensibility, Attractiveness, Acceptability, Self involvement and Persuasion; determined the problems encountered by the BHWs in explaining the tool; and determined the suggestions of the respondents for the improvement of the Decision-making Tool.

An interview schedule was used in obtaining data from the respondents in Municipal Health Office. Also, guide questions were used in obtaining data from the Barangay Health Workers.

The respondents of the study were three Barangay Health Workers which include one midwife and two health care volunteers. These three BHWs have seen and used the flipchart in counseling.

Also, 40 respondents who were practicing family planning were chosen through purposive sampling. These respondents have undergone counseling in the Municipal Health Office.

Majority of the respondents interviewed were female and there were only two male. On the comprehension, all of them claimed that words were easily understood. It appeared to be comprehensible enough to the respondents while majority found the decision- making



flipchart attractive. In terms of acceptability, majority perceived that there were no annoying words about the flipchart.

Further, majority of the respondents believed in the content of the material and was written for them. Lastly, majority responded that they will try the recommended family planning method.

As to their general evaluation, they said that it was good because it helps the married couples in choosing what they wanted to use for family planning, it was also good for educational purposes, simple and easily understood, and was satisfactory and informative. The respondents were satisfied of knowing some information on DMT for them to be aware on how to do family planning and lastly, it was lay- outed well.

The following were the problems encountered by the BHWs in explaining the tool: respondents were not attentive during the counseling, financial capability of the clients, client's attitude towards the method and clients are hard to persuade due to belief system.

Finally, the respondents suggested that there must be other ways in promoting educational family planning. Clients suggested lessening the information into a shorter one and getting straight to the point. It must be written in multiple language translations especially in vernacular ones, lectures must be done in groups aside from one on one, and show actual samples of the artificial family planning method during the counseling.

Conclusions

Based on the results of the study, the following conclusions were derived:

1. The effectiveness of the Decision- making Tool Flipchart does not only depend on the colors, graphics and texts but also on the effective delivery of the one explaining the flipchart.



2. The flipchart is an effective medium in helping people make choices and decisions.
3. Clients' decision in choosing a family planning method does not rely only on the flipchart but could be affected by their personal circumstances like their attitudes, financial status and belief system.

Recommendations

Based from the conclusions, the following recommendations were derived:

1. The flipchart should be retained as a medium of instruction and it needs to be promoted more not only in the Health Center but also in the community at large.
2. The use of alternative medium like audio- visuals or recorders for more interactive discussions between clients and providers may be considered by the DOH.
3. It is recommended that BHWs should strategize other ways on how they can motivate both couples attend family planning counseling.



LITERATURE CITED

- AMADEO, J. 2004. The effect of using flipchart in learning agricultural technology in Benguet. MS Thesis. Benguet State University- Open University La Trinidad, Benguet. Pp. 15-37, 138-150.
- BROWN, J. 1985. Audio Visual Instruction Technology and Methods; 6th Edition. New York. Mc Graw Hill Book Company.
- CADIZ, M. H. 1991. Educational Communication for Development: basic concepts, theories and know-how. CA Publications Program, UPLB, Laguna. Pp. 39-67.
- DAVID, O. 2008. European Journal of Scientific Research. EuroJournals Publishing, Inc. Olabisi Onabanjo University, Ago-Iwoye, Nigeria. Vol.23 No.2. Pp. 212-218. Retrieved March 17, 2012 from <http://www.eurojournals.com/ejsr.htm>.
- HESS, G., TOSNEY, K. and LIEGEL, L. n.d. Creating Effective Poster Presentations: Create Your Poster: Text. Retrieved February 3, 2012 from CreatePosterText.html
- KIM, Y. M. , A. KOLS, A. MARTIN, D. SILVA, W. RINEHART, S. PRAMM WAT, S. JOHNSON and K. CHURCH. 2005. Promoting Informed Choice: Evaluating a Decision-Making Tool for Family Planning Clients and Providers in Mexico. International Family Planning Perspectives, 31, 4. Retrieved October 12, 2011 from Guttmacher Institute Research database.
- LUGUE, Q. L. and M. F. DE LEON. 1989. Textbook on Family Planning: with an overview of population trends, problems and policies. REX Book Store, Manila, Philippines. Pp. 100-146.
- LUGUE, Q. L. and M. F. DE LEON. 2001. Textbook on Family Planning: with an overview of population trends, problems and policies. REX Book Store, Manila, Philippines. Pp. 90-138.
- MINDANAO TRAINING RESOURCE CENTER. n. d. A training manual on Development Communication. Davao City. Mindanao Training Resource Center Institute of Primary Health Care- Davao Medical School Foundation. Pp. 109-112.
- POPULATION INFORMATION PROGRAM, CENTER FOR COMMUNICATION PROGRAMS. 1994. Population Reports. The Johns Hopkins School of Public Health, 22,2. Population reports Articles database. Retrieved October 18, 2011 from <http://info.k4health.org/pr/j40/j40chap6.shtml>.



QUINTONG, J. 1994. Health Benefits of Family Planning. *In*: Cabanos, C., F. Cawaon, E. Dela Cruz, J. Lalo, O. Medrano and J. Pantig. 1994. Family Planning in the Philippine Setting: An Anthropology. University of the Philippines: Manila. Pp.1-10.

REGIONAL INFORMATION TRAINING CENTER. n.d. Pretesting Instructional Materials. Benguet State University Pp. 1, 17-19.

TIWARI, M. 2010. Family Planning Methods. [Electronic version]. Journal of Bibliographic Research. Retrieved October 10, 2011 from http://www.buzzle.com/articles/family_planning-methods.html.

WORLD HEALTH ORGANIZATION-DEPARTMENT OF REPRODUCTIVE HEALTH AND RESEARCH. 2005. Decision-making tool for family planning Clients and providers. Retrieved October 18, 2011 from http://www.who.int/reproductivehealth/publications/family_planning/9241593229_index/en/index.html.

