

(1) Value of Birth Control and Family Planning

The 11 statements on this cluster represented attitudes toward birth control methods and the goals of the Family Planning Clinic.

(2) Climate of the Family Planning Clinic

This cluster, consisting of 12 statements, reflected attitudes toward the personnel, doctors, and medical services.

(3) Awareness of Personal Rights at the Family Planning Clinic

The 8 statements in this cluster represent attitudes toward the individual's right to plan the number of and spacing of children and the method of contraception.

Each person was assigned a cluster score (the unweighted sum of the responses to the items included in that cluster) on each of the three clusters. To determine if there were significant differences among the four groups as a function of the three clusters, a Multiple Discriminant Analysis (MDA) was computed on the four respondent groups using the three clusters as dependent variables. A chi-square test of significance of the separation of the groups yielded by a discriminant function (Rao, 1952, 372-373) indicated that the PPM and PPK groups responded differently to the items contained within each cluster ($\chi^2 = 9.82$, $df = 3$, $p < .05$). Thus, the three clusters did distinguish between the PPM and PPK respondents as a function of

Table 1. (Continued)

Items	Load- ing	Item Statistics								All Groups N = 329 Mean SD	
		PPK n = 116 Mean SD		PPM n = 53 Mean SD		SK n = 106 Mean SD		SM n = 54 Mean SD			
31. The personnel at the Family Planning Clinic ask too many questions	-	.57	3.81 .88	3.55 .84	3.62 .99	3.83 .92	3.71 .92				
42. The Family Planning Clinic tries to help women	+	.51	1.63 .53	1.70 .46	1.68 .58	1.65 .58	1.66 .54				
39. The personnel at the Family Planning Clinic are unfriendly	-	.50	4.12 .74	3.83 .86	4.01 .81	3.98 .99	4.02 .83				
32. The Family Planning Clinic has both day and evening clinics	+	.50	2.23 .76	2.36 .68	2.31 .80	2.42 .91	2.31 .79				
27. The Family Planning Clinic provides good medical service	+	.49	1.90 .77	2.17 .72	1.95 .65	1.87 .47	1.95 .59				
15. Doctors at Family Planning do not take enough time with each woman	-	.41	3.50 1.09	3.45 1.14	3.25 1.16	3.26 1.06	3.37 1.12				

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15. Doctors at Family Planning do not take enough time with each woman

ipants to strive to make favorable impressions. Thus, the major responsibility for insuring positive attitudes rests on the family planning personnel themselves.

To combat noncontinuance in the program, it also appears that it will be necessary to discover some means to make sure that every participant realizes that the choice of a birth control method is hers and hers alone. This might be accomplished by stressing all methods of birth control during the post-partum visit and orientation session rather than mentioning all methods while stressing one or two of them. In addition, the participants should be informed that they do not need to use a clinic-managed method of birth control in order to be eligible for the other family planning services. Such a tactic might make each participant feel more freedom of choice than is presently felt and, if this approach were successful, it is possible that more women would accept and use some means of contraception. For example, it may be that participants feel some fear or dislike for the oral pill, yet they accept it because after the lecture it seems that any intelligent person would choose the pill as her method of contraception. Once the participant leaves the clinic, however, the fear or dislike of the pill might overcome her fear of pregnancy and she might choose to take a chance rather than continue on the pills as directed. In such a case, the participant could remove herself from an uncomfortable situation by simply dropping out of the program.

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