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Article **Quality Characteristics of Field Workers and Contraceptive Use Dynamics: Lessons from Matlab, Bangladesh**

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Abstract The effects of field workers' socio-economic and demographic characteristics on contraceptive use behaviour are well documented. However, despite the growing body of literature on quality of care in family planning and its effects on contraceptive use dynamics, very little is known about the effects of the behavioural or quality characteristics of field workers on contraceptive use dynamics. The study focuses on this neglected issue in family planning programmes. The findings may have important implications for the monitoring, selection and training criteria of family planning field workers.

The study is based on longitudinal data obtained from the Matlab Record Keeping System and the Demographic Surveillance System, supplemented by the 1982 Socio-Economic Survey data, and the data of the 1987 evaluation study of community health workers (CHWs) in Matlab. Multivariate logistic regression and discrete-time hazard models are used to identify the significant quality characteristics of CHWs affecting the contraceptive prevalence rate (CPR), continuation and failure of contraceptive methods.

It is evident from the bivariate analysis that the aggregate characteristics of the workers had significant effects on the (CPR) and risk of failure. Results of multivariate analysis show that the effects of workers' quality characteristics on contraceptive use, continuation and failure remain significant even after controlling for the effects of the socio-economic and demographic characteristics of CHWs and the method used. However, the different components of the quality characteristics influence contraceptive use, continuation and failure differently. Among the selected characteristics, regularity in work, innovative technique in communication, technical competence, enthusiasm for work and conformity to social norms have significant positive effect on the current use of any method. However, the effects of different quality characteristics on contraceptive use, failure and continuation varied according to the specific method.

The mere presence of, or visit by, a field worker, is not sufficient to increase the CPR and contraceptive continuation and to decrease the contraceptive failure rate. Further qualities of the service providers are needed. Programme managers should emphasize the behavioural and quality characteristics of field workers when recruiting a field worker. The training curriculum should be redesigned to change the attitudes, behaviour and quality of field workers to make them more committed to the programme.

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