Interaction between Clients and Grass-root Family Planning Workers in Korea : Implications for Program Performance

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The main purpose of this study is to assess the effects of the interaction patterns between family planning workers and potential clients upon acceptance of family planning. This study was carried out as a part of an inter-country collaborative study and guided by UN-ESCAP in 1991. For data collection, a random sampling procedure was applied in picking up the final units of areas(nine "dongs" in Choonchon city, one county in Kyeonggi Province and two counties in Kangwon Province) 1,383 married eligible women, and 66 family planning workers in these areas were interviewed.

Among the survey respondents, 75.3 percent was currently practicing family planning (77.7% in urban 72.1% in rural areas), and only 19.2 percent of the urban respondents and 45.8 percent of the rural respondents had ever been exposed to a family planning worker, and those who had met a worker within the three current months totalled 3.1 percent in the urban and 22.9 percent in rural areas.

The focal point of this study was to review the correlation between the interaction of clients and grass-root family planning workers, and the adoption of family planning practices. Family planning practice as a dependent variable was applied to tabulate multiple regression analysis in order to explain the power of the variables including interaction-related factors. The variables appearing to explain the non-adoption of family planning at a highly significant level were : 1) time and distance to service institutions, 2) friendliness of service institutions, 3) frequency of meetings with a family planning worker, 4) support of friends, 5) visits to friends, 6) wife's occupation, 7) number of living sons, 8) number of living daughters, and 9) friendliness of family planning workers. The study suggested that the training programs for field workers should be strengthened to provide a greater proportion of special sessions in the curriculum to develop the human interaction skills of workers in helping clients identify their own problems and solve them.

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I. Introduction

The natioanl FP program in Korea was strongly promoted by the government as a part of its national economic development plans and so the government allocated a considerable proportion of the FP program's annual revenue to hire full time FP field workers at each township, and paid physician subsidies of a satisfactory amount. Mass communication channels were never enough to reach the population whereas talking about FP matters on the radio or in printed matter was considered obscene. FP dialogue itself belonged to the taboo communication category in both the mass media and personal discussion in the 1960s in Korea. Radio, the only available mass channel at that time was not permitted to talk about FP methods but could merely use its slogan "Have an appropriate number of children and raise them well".

The only channel the government could rely upon to reach the public at that time was personal communication, so it was decided to use manpower that was then cheap to deliver the FP message and induce behavioral change in the reproductive behavior of the population. This policy decision was supported by empirical research findings.

The research findings carried out in the 1970s agreed upon the critical effect of FP field workers in inducing the acceptance of FP in Korea. The author in collaboration with N.H. Cho of this report provided in 1978① statistical support on the importance of the role of field workers in inducing FP practice and Chija Kim reported the same results in her research in 1978②. These research projects argue that the more exposure to the FP worker, the more extensive the practice of FP whereas more of the "Pong-eem"* group were less exposed to interaction with family planning workers.

When considering the experiences of the Korean National FP program, any country's FP program would require two stages of development. In the first stage, the personal interaction of field workers with the clients is critical whereas it becomes less essential to the acceptance of FP as socio-economic development variables dominate influences on the adoption of FP. Korea in such a case.

It is useless to point out that the role and personal interaction of the field workers with clients is essential in disseminating FP among the general public, but it is also true that the effect of field workers is somewhat limited as a certain stage of socio-economic development is reached.

This proposed study is addressed to various

* Pong-eem is the term originally used by this author to depict the behavior of those who do not want to have additional children or are satisfied with the current number of living children but do not practice FP. This variable is enumerated in the computer processes as follows :

1. Want additional child(ren) 1(Yes) 2(No)
2. Take Code 2 above to compute whether to practice FP(1) or not(2).
3. The Code 2 of the first question and Code 2 of question 2. Present the real problem target for the FP program in increasing the practice rate of the total eligible population.

aspects of client-worker interactions to identify areas for improvement of such interactions. The study aims at achieving the following objectives : 1) establishing the quantity and quality of client-worker interactions, and 2) identifying areas for improvement of interactions and barriers to effective interaction.

This study would be able to contribute to indicating the following : 1) in the early stage establishing the significance of the role of field workers, 2) later shifting policy direction to self-reliance in practice of FP.

II. Study Areas and Samples

Two out of the nine Korean provinces were selected to reflect a local urban setting and a rural area. Metropolitan areas were intentionally excluded since the role of field workers there has been very limited and much different from that of rural field workers from the beginning of the program.

The Korean population consists of a single race, and hence it is highly homogeneous in terms of cultural and behavioral patterns. Also owing to time limitations, time and budget constraints as well as the need to study the interaction phases among clients, field workers and clinical personnel in a same area, it was not considered pragmatic or cost-effective to draw statistically representative samples covering the whole country.

For this study, a random sampling procedure was applied in picking up the final units of areas for data collection in two provinces. As a result, nine dongs out of 38 in Choonchon city, 2 counties out of 27 in Kyeonggi and two counties out of 21 in Kangwon Province were chosen randomly. In these sample areas, we interviewed 1,383 eligible women aged 15－44, (790 urban married women and 608 rural women) and 66 family planning wokers in the same areas.

III. Major Findings

A. Basic Picture Serving as Basis for Analyses

Those exposed to an FP worker in the urban setting represented only 19.2% while their counterparts in rural areas stood at 45.8% of the total. Furthermore, the frequent meetings with a field worker within three months among urban respondents turned out to be negligable. Only 3.1% met several times, whereas 22.9% met a worker a few times and 3.0% did so several times in the same period in rural areas.

Although the extent of interaction with a field worker was essentially limited, the factors of awareness and frequency of meeting with a field worker appear to have had some influence on the practice of family planning. The current practice rate of those who were aware of a field worker in their area was 81.0% whereas those unware of a worker was 72.8%.

The current family planning practice rate of those who had met with a field worker stood at 79.9% compared with the 73.5% rate of those who had never met with one. The average practice rate of the population studied turned out to be 75.3% while that in urban areas was 77.7% and in rural areas was 72.1%. The frequency of meeting with a field worker does not reveal a statistically significant difference in the practice rate.

Among the contraceptive methods currently in use, the major method was female sterilization, 43.6% in cities and 46.9% in rural areas ; followed by condoms, 21.3% in cities and 20.7% in rural areas ; male sterilization, 19.3% in cities and 9.0% rural areas ; IUD, 8.9% in cities and 13.8% in rural areas. Other methods were oral pills, 2.5% in cities, and 5.5% in rural areas ; rhythm method, 4.5% in cities and 2.8% in rural areas, and others 1.4% only in rural areas. Currently 95% of urban clients and 83.1% of rural clients are satisfied with these methods.

What are the purposes of current FP practices? The majority, 65.8% in cities and 60.7% in rural areas, practice FP to end child bearing and only 10.4% in cities and 9.0% in rural areas practice FP for spacing purposes, while children's welfare, 9.9% in cities and 8.3% in rural areas, and incentives for adopting, 3.0% in cities and 3.4 % in rural areas, and the mother's health, 10.9% in cities and 13.8% in rural areas, were also reasons for practicing FP.

It is likely that personal interactions between workers and clients end after adopting FP as we see that only 8.9% of urban adopters and 18.6% of rural adopters had ever met with a worker after adopting an FP method. Then, who and what was the source of the initial motivation for adopting FP? Regardless of accuracy, 79.7% of the urban clients vis-a-vis 74.5% of the rural clients named self as the initial motivator. The FP worker was pointed out as a motivator only by 6.4% in cities and 6.9% in rural areas and next, neighbors and friends were named as initial sources by 9.9% in cities and 12.4% in rural areas. The percentage of those who named a doctor, a nurse or an other source as the initial motivator was almost negligible.

There was an urban-rural difference in initial motivation. Among the urban adopters 34.7% named self and 28.0% indicated other categories followed by the mass media named by 9.9%. The majority of rural clients, 37.2%, named such other sources as mass media 29.0% and self 11.7%. In short, the proportion of FP workers as the initial source of motivation is small both in urban and rural areas according to the client's perception.

B. Influence of Interaction Variables

It is obviously impractical to review the corre-

Table 1. Status of FP Practice by Interaction with FP Worker

		Not	Practicing	N.R.	Total
FP Worker	Aware	18.9	80.5	0.6	100.0(477)
	Unaware	26.9	72.4	0.7	100.0(903)
Ever met	Yes	20.3	79.7	—	100.0(414)
	No	25.8	73.3	0.9	100.0(966)
Frequency meeting in 3 months	0	24.4	74.9	0.7	100.0(1204)
	1	22.2	77.8	—	100.0(162)
	2	16.7	83.3	—	100.0(18)

Table 2. Percent Distribution of Status of FP Practice among those who had ever met with Worker by Manners of Workers perceived

	Not	Practicing	Total
Form of Meeting			
Individually	19.0	81.0	100.0(300)
Other	23.7	76.3	100.0(114)
Hurriedness			
Yes	25.0	75.0	100.0(60)
No	19.5	80.5	100.0(354)
Opportunity to ask Question ?			
Yes	18.8	81.2	100.0(207)
No	21.7	78.3	100.0(207)
Ever asked Question ?			
Yes	17.4	82.6	100.0(138)
No	21.7	78.3	100.0(276)
Feel at ease asking Question ?			
Yes	17.2	82.8	100.0(174)
No	22.5	77.5	100.0(240)
Clear & Easy to Understand			
Clear	17.6	82.4	100.0(324)
No	31.0	69.0	100.0(87)
Friendliness of Worker			
Yes	18.9	81.1	100.0(381)
No	36.4	63.6	100.0(33)
Explanations in simple language			
Yes	18.4	81.6	100.0(342)
No	29.2	70.8	100.0(72)
Treat with Respect			
Yes	17.5	82.5	100.0(291)
No	27.5	72.5	100.0(120)
Decision made by Worker			
Yes	24.4	75.6	100.0(234)
No	15.3	84.7	100.0(177)
Sufficient Explanation on How to Use Method			
Yes	15.7	84.3	100.0(306)
No	31.4	68.6	100.0(105)
Sufficient Explanation on Contraceptive Methods			

Yes	13.2	86.8	100.0(228)
No	27.9	72.1	100.0(183)
Sufficient Explanation on Referral Service			
Yes	11.3	88.7	100.0(213)
No	29.9	70.1	100.0(201)
Understanding of Client's Situation			
Yes	21.4	78.6	100.0(168)
No	19.5	80.5	100.0(246)

lations between interaction variables such as the awareness of the existence of an FP field worker, the experience of meeting with a worker, and the frequency of meeting with a worker within three months, and the status of FP practice from among the total population studied since the base population exposed to a worker occupied too small a proportion, particularly in urban areas. There is, apparently, a consistant positive correlation between the worker's perceived characteristics and the status of FP practice when we tabulate only those respondents exposed to an FP worker, 414.

As shown in Table 2, the practice rate was clearly higher among those who responded positively in the following areas :

1. those who met a worker individually, 81.0% vs 76.3%
2. those who felt that the FP worker did not hurry, 80.5% vs 75.0%
3. those who were given opportunities to ask questions, 81.2% vs 78.3%
4. those who felt it was easy to ask questions, 82.8% vs 77.5%
5. those who felt the worker's explanation was clear and easy to understand, 82.4% vs 63.6 %
6. those who thought workers were friendly, 81.1% vs 63.6
7. those who thought that the worker's explanation was in simple language, 81.6% vs 70. 8%
8. those who thought that workers treated them with respect, 82.5% vs 82.5%
9. those who considered that every decision was made by workers, 84.7% vs 75.6% (contradictory)
10. those who felt that workers' explanation of how to use contraceptive method was sufficient(84.3% vs 68.6%).
11. those who made positive assessment of the worker's explanation of the contraceptive methods, 86.8% vs 72.1%
12. those who thought that the worker's explanation of referral services was sufficient, 88. 7% vs 70.1%
13. those who felf that the workers did not understand client's situation, 78.6% vs 80.5%

Among the above illustrations, items 5, 6 and 12 showed a greater gap between the practice rates of positive respondents vis-a-vis negative respondents whereas item 9 indicated a somewhat contradictory tendency. In all, psychological variables related with the field worker's manner as

Table 3. Worker's Characteristics Perceived by Residence

	Urban	Rural	Total
Hurriedness			
Yes	2.0	21.8	12.1
No	98.0	78.2	87.9
Total	100.0(153)	100.0(261)	100.0(414)
Opportunities to ask Questions			
Yes	52.3	44.8	50.0
No	47.7	55.2	50.0
Total	100.0(153)	100.0(261)	100.0(414)
Asking Questions ?			
Yes	37.3	31.0	33.3
No	62.7	69.0	66.7
Total	100.0(153)	100.0(261)	100.0(414)
Feel at ease asking			
Yes	43.1	41.4	42.0
No	56.9	58.6	58.0
Total	100.0(153)	100.0(261)	100.0(414)
Clear and easy to understand			
Yes	94.1	69.0	78.3
No	5.9	31.0	21.7
Total	100.0(153)	100.0(261)	100.0(414)
Friendliness			
Yes	94.1	90.8	92.0
No	5.9	9.2	8.0
Total	100.0(153)	100.0(261)	100.0(414)
Sufficient Explanation			
Yes	82.4	82.8	82.6
No	17.6	17.2	17.4
Total	100.0(153)	100.0(261)	100.0(414)
Treat with Respect			
Yes	80.4	64.4	70.3
No	19.6	35.6	29.7
Total	100.0(153)	100.0(261)	100.0(414)
Decision made by Worker			
Yes	68.6	50.6	57.2
No	31.4	49.4	42.8
Total	100.0(153)	100.0(261)	100.0(414)

Table 4. Multiple Regression Analyses explaining Practice Status in Urban Areas

Variable	B	SE B	BETA	T	SIG T
Time distance from service institution	-.160044	.026844	.230458	5.962	.0000
Friendliness of service institution	-.113313	.026506	-.161123	-4.275	.0000
Support from friends	.028366	.005195	.211931	5.460	.0000
Number of daughter	.028843	.005940	.173124	.4856	.0003
Wife's job	.165289	.045451	.129207	3.637	.0003
Friendliness of FP worker	-.008529	.003166	-.097325	-2.694	.0073
Wife's education	-.122001	.054444	-.080138	-2.241	.0254
(CONSTANT)	.133511	.119551		1.117	.2645

the rationale of our collaborative study on the interaction aspects, and we do need to try to improve the quality of interaction behaviors of the field workers.

Table 5. Multiple Regression Analyses explaining Pong-eem Status in Rural Areas

Variable	B	SE B	BETA	T	SIG T
Time distance from service institution	.121656	.021591	.202611	5.635	.0000
Friendliness of service institution	-.128511	.021153	-.204830	-6.075	.0000
Frequeney of meeting with a worker within 3 months	-.002523	.004935	-.033631	-.511	.6093
Support from friends	.022179	.004351	.179039	5.097	.0000
Visits to friends within community	-.063463	.020399	-.101866	-3.111	.0019
Wife's job	-.076009	.023597	-.102779	-3.221	.0013
Number of living son	.028680	.007426	.141533	3.862	.0001
Number of living daughter	.027250	.007647	.127092	3.564	.0004
Friendliness of FP worker	-.011647	.005643	-.125512	-2.064	.0394
(CONSTANT)	.029041	.041893		.693	.4884

perceived by the client seem to have a clear correlation with the adopting or practicing of FP.

On the other hand, a positive assessment of the worker's characteristics as perceived by the client does not reveal any consistant influence upon satisfaction or dissatisfaction with the contraceptive method currently in use.

C. Influence of Socio-demographic Variables ;

It is necessary to observe the status of FP practice according to socio-demographic variables although this study aims at assessing the effect of interactions between FP workers and clients.

Among the independent variables applied, the meaningful ones are such factors as the wife's age, additional children wanted, number of living sons and number of living daughers while the rest : education, wife's occupation, religion, son preference, do not reveal significant differences. The practice rate jumps drastically from 60.0% in late 30s to over 80 percent in the 40s. The practice rate of 84.2% among respondents who do not want additional children is critical compared with only 47.3% among the clients who want more. This may indicate that the latter use contraceptive methods for spacing, but this group represents only 11.4% of the total clients studied or 15.2 % of those currently practicing FP. The practice rate indicates a more marked difference according to the number of sons than the number of daughters.

D. Role of Primary Group and Community Variables

The classic theory of the influence of the primary group and the community appears to be co-

Table 6. Multiple Regression Analyses of Workers Characteristics Perceived by practice of FP

Variable	B	SE B	BETA	T	SIG T
Free to ask questions	.053848	.059775	.041799	.901	.3678
Awareness of a field worker	.074341	.032495	.082451	2.288	.0223
Frequency of meeting with a worker	-.029691	.037243	-.026799	-.797	.4255
Form of meeting with a worker	.030640	.051048	.029541	.600	.5485
Opportunity to ask questions	.006317	.055995	.005274	.113	.9102
Whether asked questions	-.006638	.067260	-.004657	-.099	.9214
Hurriedness of a worker	.007967	.064654	.008131	.123	.9019
Experience of meeting a worker	-.030255	.064296	-.032392	-.470	.6380
(CONSTANT)	.728952	.014642		49.785	.0000

nfirmed by the FP behavior patterns of clients.

The current FP practice rate is higher among clients who are positively linked with all the neighborhood and community variables except in only one case, visit friends outside of community, vis-a-vis among those negatively related. It is worth drawing special attention to the effect of the influence of elements of primary contact among these variables. That is, the gaps in the practice rates between the client's positive contact with friends using contraceptive method, relatives supporting FP, neighbors supporting FP, and friends supporting FP reveal greater differences than those with negative exposure.

To be exact, the practice rate of those with friends using contraceptive methods is 78.3% which is noteworthy compared with 62.5% of those who do not have any such friend. The practice rate of those with a positive perception of the attitude of a relative toward FP stands at 88.6 % whereas that of those with a negative perception reaches only 65.9%. This difference is of course statistically highly significant. Among the clients perceiving their neighbors' attitudes toward FP positively, 88.6% practice FP which is also noteworthy compared with the 61.2% who have negative perceptions of their neighbor's attitudes. The perception of friends' attitudes reveals the same tendency, 88.5% vs 67.4%.

To sum up, an individual's perception of the primary group members' attitudes toward FP indicates a strong influence upon the adoption or non-adoption of FP.

E. Urban-Rural Perceived Difference in Workers' Characteristics

When we compare the perceived characteristics of FP workers according to the residence variable among respondents exposed to a worker, the urban client's assessment appears to be more positive than that of their rural counterparts.

The finding indicates a tendency that once exposed to a worker, the urban respondents perceive their characteristics more positively than do rural clients. Although we do not possess any empirical evidence, it may not be wrong to assume that field workers tend to look down upon rural women or treat local clients less seriously. On the contrary, we can also assume a low self-esteem among the rural woman in interaction situations with the well-dressed workers which may result in an antagonistic reaction against the workers as social outsiders.

Rural client respondents reacted less positively than urban clients in eleven out of thirteen questions. The assumption that workers may look down upon rural women is partially supported by the response to the question on whether or not the workers treat clients with respect. To this question, only 64.4% of rural clients responded positively while 80.4% of the urban clients were positive in their response.

The trends which appear in the analyses suggest a need to observe the behavior of rural workers closely and to provide special training to improve the quality of their interaction behavior. In reality, we could see that rural workers tended to use a more informal approach even with unknown local clients. This might irritate or hurt the sense of pride of rural women. It may be argued, however, that such an informal approach to the first encoutner may be considered a warm approach

whereas a formal approach might be considered cold or vice versa. According to our field observations, there is a clear difference in the approaches of urban and of rural workers. That is, rural workers tend to use an informal approach while urban workers are more formal, but we do not know at this stage whether the formal or the informal approach is recommendable. This may lead us to another avenue of research.

F. Assessment of Service Institutions by Residence

Assessment of the characteristics of the FP service institutions by residence is the opposite of that of workers' characteristics. In order to make the measurement as practical as possible the various aspects of the FP service institutions at which contraceptive services had been obtained were tabulated only for those currently practicing and those who had at some time practiced FP.

The responses of rural clients were more positive than those of urban respondents, which is quite contrary to the case of the asessment of workers' characteristics. In other words, field workers were more positively evaluated in urban areas whereas service institutions were more positively evaluated in rural areas. This tendency appeared among those who had practiced FP.

The major reason for this urban-rural difference may be attributable to the difference in service institutions by residence. That is, more urban clients may have obtained services from hospitals where the interpersonal interaction patterns are more formal and official whereas rural clients might have done so at a more informal and personal general practitioner's.

G. Outcome of Multi-variate Analyses

At the initial stage of in-depth analysis, we processed the data through step-wise multiple regression with the current status of practice as the dependent variable. Many indepent variables related to the workers' characteristics turned out to be negatively correlated which is not common sense. For example, the more frequently they meet with a worker, the more likely it is that they do not practice family planning. The variables, opportunity to ask questions and experience of meeting with a worker are negatively correlated with current practice, which is nonsense.

At a later stage, we applied a sophisticated approach to enumerate the "pong-eem" group, hoping that the role of the FP worker might have had some influence on this special group. The results are shown in Tables 5 for the urban group and 6 for the rural group. We may need to explain once more what the "pong-eem" group means. "Pong-eem" is a Korean word similar to laissez-faire. For measurement, we compute Code 2 out of the responses to the question whether one wants additional children, Code 1 or not, Code 2, to cross with whether practicing FP is current Code 1, or not, Code 2. This means that the "pong-eem" group belongs to the catagory of those who do not practice FP, but they do not want additional children. We used this group as the dependent variable to compute a multiple regression analysis separately by urban respondents and rural ones.

The variables appearing to explain the "pong-eem" at a highly significant level in rural areas are : 1) time distance to service institution, 2) friendliness of service institution, 3) frequency of

meeting with a worker, 4) support of friends, 5) visits to friends, 6) wife's occupation, 7) number of living sons, 8) number of living daughters, and 9) friendliness of FP worker. All of these variables together indicate that the "pong-eem" tends to result from being a long distance from the service institution, unfriendliness of the service institution, not meeting with a worker within three months, support from friends, no visits to friends, no job, having sons, daughters and unfriendliness of FP worker. All the factors listed above are meaningful in producing the "pong-eem" group, and, therfore, deserve special attention in improving program performance. In other words, we had better pay due attention to such aspects as listed above to solve the problems of the "pong-eem" group which is a real problem group for the FP program in rural areas.

On the other hand, the variables explaining "pong-eem" in urban areas are : 1) time and distance from service institution, 2) unfriendliness of service institution, 3) support of friends, 4) having daughter(s), 5) wife's job, 6) unfriendliness of FP worker, and 7) number of years of wife's education. Out of these variables, positive support from friends and wife's having a job appear to be positively correlated with "pong-eem" in urban areas, and this phenomenon is hard to understand. The rest of the variables deserve our attention for program performance in urban areas.

Coming back to our original major interests in the effect of interaction between the FP worker and clients, such variables as unfriendliness of service institutions and unfriendliness of FP workers appear to have significantly strong correlations with "pong-eem" status in both urban and rural areas. This finding strongly supports the rational of our collaborative study on interaction aspects, and we do need to try to improve the quality of the interaction behavior of field workers.

Ⅳ. Findings from Field Workers

A. General Picture of Workers Interviewed

As the total number of the field workers interviewed was too small, it is necessary to review the findings with an understanding that the figures can not respresent a universal picture of all of them. On the other hand, we do not have any evidence that our findings are a distortion of the general picture. The merit of these findings is that it was possible to obtain data on the field workers working in the areas where we interviewed clients.

1. 66 workers were female.
2. The mean number of years of employment in their current jobs was 8.7 years and the mean number of years of working at their current sites was 3.7 years.
3. Their average age was 32.9 year with 24 the youngest and 49 the oldest.
4. 80% or 53 workers were currently living with their husbands and 8(12.0%) were unmarried. The rest were divorced, 5.0% or their husbands were dead, 3.1%.
5. The majority had graduated from high school, 48%, professional college 36.0% and five(8%) had graduated from a university.
6. 44% of all workers interviewed were affiliated with no religion as is generally true in Korea ; 29% Protestant, 14% Catholic, and

14% Buddist.

7. Only 27% live in the area and the rest commute.
8. Annual incomes :

Less than US $4,000	=5%
$4,000 − $8,000	=12%
$4,000 − $13,000	=26%
over $13,000	=36%

B. Aspects of Family planning

1. The average number of living sons among the married workers is 2.0 and daughters 2.2.
2. Among 53 currently or at some time married workers, 69.8% are currently practicing FP, 1.9% have at some time practiced it, and 29.3% never did.
3. Among the current users, 37 workers, 56.8% had been sterilized and in 10.8% of the cases the husband had been sterilized, 8.1% used condom, while 8.1% used oral pills, 5.4% IUDs, and 8.1% the rhythem method.
4. 41% of them had never received any special training in FP.

C. Interaction

1. The majority of the workers interviewed, 83%, thought that both husband and wife should be approached to adopt FP while 9% chose wife and 6% gave other responses.
2. 56% think FP motivational activities are still needed while 13% think them unnecessary.
3. In general, workers seem conservative since only 45% support the idea of women's social participation. Local workers seem unexpectedly traditional. The rest reply that women's social participation be considered on a case by case basis depending upon the individual situation.
4. They meet with 9.1 clients per day for FP purposes and 8.1 people for other purposes.
5. 18% take less than 10 minutes to explain the sterilization method, 11% 10−20minutes, 36% 20−30 minutes, and 23% over 30 minutes.
6. 27% use less than 10 minutes to explain temporary contraceptive methods, 30% take 10−20 minutes, 29% 20−30 minutes, and only 6% use over 30 minutes.
7. 26% stress the importance of FP to help stimulate clients' interest in FP, and 15% give only counseling, only 14% use educational materials and another 14% give lip service to counseling.
8. Only 60%, 12% always, 48% often, provide clients with informational materials on FP.
9. Interaction behavior between clients and users.
   a. 98%(50% always, 48% often) give opportunities to ask questions
   b. 91%(39% always, 52% often) encourage clients to raise questions
   c. 20% were always asked questions on FP by clients and 73% often.
   d. Field workers' positive responses to the following items of clients' behavior are as follows.

Field Workers	Always	Often
Friendly	30%	64%
Interested	45%	50%
Clear explanations	61%	36%
Concrete questions		

on FP	53%	41%
Respect	27%	61%
Decision maker	11%	41%

e) Questions on how often workers explain

Items	Always	From time to time
Good side of contraceptive use	58%	38%
Effectiveness of contraceptives	61%	33%
Weakness of contraceptives	33%	42%
Selection of appropriate method	58%	33%
How to use contraceptive	55%	36%
Side-effects of contraceptives	41%	33%
Costs of contraceptives	36%	30%
Location of service	42%	41%
Incentive system for adopters	30%	35%
Referral Service	48%	41%

D. Job Satisfaction

Conditions	Very satisfied	Satisfied
Salary	3%	17%
Opportunity for promotion	0%	2%
Relationship with colleagues	15%	44%
Relationship with supervisor	9%	45%
Cooperation with colleagues	12%	47%
Technical guidence of supervisor	2%	23%
Travel expenses	2%	9%
Administrative work	0%	23%
Cooperation with service institution	2%	23%
Cooperation with related organizations	0%	18%
Cooperation with community	0%	15%

9 In general, 55% of the field workers interviewed were satisfied with their current jobs and the rest were dissatisfied.

V. Conclusion

Based on our findings from the current study, the major point to be stressed is that the role of FP field workers shifts depending upon many variables and that is also true from country to country. Their roles are as different as their environments are. Examples of such variables are the client's literacy rate, national supply of mass media, transportation system connecting city and rural areas, distribution of medical service institutions and personnel, social mood and local cultural traditions, stage of national economic development, and others. These factors are outside the control of any national family planning program.

On the other hand, there are variables that directly affect shifts in the role of field workers. They are the status of the field worker, whether FP worker or intergrated health worker, payment and incentives, target system of contraceptive su-

pply assigned to individual worker and opportunities to move to other jobs in the society. These factors remain within the scope of family planning, which can control the role and quality of interaction between clients and field workers.

Retrospectively reviewing the trends of the role and quality of interaction of FP field workers in Korea, interaction had a strong influence upon adopting family planning in the early stages of the national program when the distribution of mass media was not extensive and the local trasportation system was not efficient. In a word, the best channel we can rely upon for the diffusion of family planning is less developed. In the two decades of the 1960s and 1970s in Korea, the interpersonal communication network via the field worker was the only thing we could rely upon as mass media could release only the FP slogan which was inadequate. Concrete messages on contraceptives were considered obscene. The significance of the role of field workers was empirically supported by research carried out in 1970's (Chi Cha Kim, et al, 1979, N.H. Cho & K.K. Chung, 1978). Chi Cha Kim and her colleagues argued that interpersonal contacts between clients and FP workers played the strongest role in adopting FP($P<0.01$), Cho and Chung found that the practice rate among those who had met a field worker was 63.3% whereas those who had never met one was only at 50.6%.

This difference appeared even in the current study, but it was not as significant statistically as in the past. Rather, the variables that had strong influences on the practice of family planning in both urban and rural areas were : time distance to a service place, friendliness of workers and service institutions, support from friends and community variables. We can separate these variables into three concepts, 1) inter-personal variables-support from friends and neighbors, community variables, and friendly encounters resulting in interactions between clients and local field workers or service personnel, 2) physical conditions : time distance, and 3) social conditions-women's social participation. This means that it is not simply the role of the field worker that affects the adopting of family planning.

Taking all the illustrations and findings from this study into consideration, the role of field workers becomes multi-faceted and family planning per se occupies only a portion of many areas related to comprehensive health matters when the national family planning practice rate reaches a saturation level as is the situation in Korea(77.1 % as of 19.88%). We suggest, therefore, a special manpower policy that allocates manpower not simply by administrative units but strategically concentrates it in less developed or under-priveleged areas when the national F.P. practice rate reaches the saturation point or national economic development approaches the developed stage as in present day Korea.

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《국문초록》

家族計劃要員과 可姙女性과의 交互作用에 관한 硏究

정 경 균* · 조 남 훈**

본연구는 ESCAP 후원으로 인도, 태국, 비율빈, 방글라데쉬 및 한국에서 1991년에 실시된 것이다.

주된 연구목적은 일선가족계획요원과 피임대상자간의 인간관계가 가족계획채택에 미치는 영향을 밝힘으로써 가족계획채택률을 높이는데 필요한 정보를 얻으려는데 있다. 지금까지의 가족계획분야 연구중에서는 새로운 연구영역으로서 일선요원 훈련 및 감독에 지침이 되는 것을 발견하려는 노력으로 이 연구가 실시된 것이다.

한국에서는 춘천시에서 9개동, 경기도에서 1개군, 강원도에서 2개군을 선정, 15~49세까지의 유배우가임 여성 1,383명과 66명의 가족계획담당보건요원과 25명의 시술의사를 면접하였다.

조사대상 유배우가임여성 중 지금까지 가족계획담당 보건요원을 만나본 적이 있는 응답자는 도시에서 불과 19.2%, 농촌에서도 45.8%에 그쳤다. 그리고 지역담당 보건요원을 안다는 사람들 중에서는 피임실천률이 81.0%인데 비해서 요원을 한명도 모른다는 응답부인 중에서는 실천률이 72.8%였다.

본연구의 주요변수인 요원과 대상부인과의 교호작용(Interaction)과 관련하여 실천률의 차이를 비교하면 다음과 같다.

(1) 요원을 만나본 일이 있는 부인 중 실천률은 81.0%, 만나본 일이 없는 부인중의 실천률은 76.3%였다.

(2) 요원을 만나본 응답자중 요원과의 대화가 원만했던 부인 중 실천률은 82.8%, 그렇지 못했던 부인들 중에서는 77.5%였다.

(3) 요원을 만나본 일이 있다는 응답자 중 요원의 설명이 이해하기 쉬웠다고 응답한 자들의 실천률은 82.4%인데 비해 그 반대쪽은 실천률이 63.6%였다.

(4) 요원이 친절하다고 응답한 부인 중의 실천률은 81.1%인데 비해 불친절하다고 응답한 부인 중의 실천률은 63.6%였다.

(5) 요원이 대상부인을 존중한다고 느꼈다는 응답자 중의 실천률은 82.5%, 그 반대측은 72.5%였다.

이상에서 보듯, 요원이 주는 인간적 인상여하와 응답부인의 피임실천률과는 밀접한 상관관계를 나타내고 있다.

한편 다변량분석결과를 보면, 피임을 하여야 할 입장에 있으면서 실천하지 않는 방임행위에 통계적으로 매우 유의한 상관관계를 나타내는 변수는 (1) 시술기관까지의 거리, (2) 시술기관의 친절성, (3) 요원과의 접촉빈도, (4) 친구의 지지, (5) 친구교분관계, (6) 부인의 직업 유무, (7) 생존 아들 수, (8) 생존 딸 수, (9) 일선 보건요원의 친절 등의 순으로 나타난다.

이처럼 요원의 대인접촉과 관련된 변수들이 대상자의 피임실천에 중대한 영향을 미치고 있는 것이 분명한데도 불구하고 지금까지 ESCAP지역 각국의

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가족계획사업에서는 요원훈련이나 현지 감독상 이런 인간관계적 측면을 너무 소홀히 하고 있는 것은 커다란 문제로 지적된다.

그러나 한국처럼 인구의 도시화가 급속하게 이루어진 나라, 즉 도시적 상황에서는 요원에 의한 가정방문활동이 제약을 받기 때문에 내방자에 대한 친절한 안내, 즉 시술기관 현장에서의 요원의 행위양식에 각별한 관심을 가져야 할 것이다.