

TRAINING FAMILY PLANNING FIELD  
WORKERS BY BEHAVIOUR MODELLING

by

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1. INTRODUCTION

Most developing countries have accepted family planning as an essential concomitant of development for some time, yet there remains concern over the limited progress made despite considerable financial expenditure on diffusion, social research and medical support.

In the Innovation-Decision process

KNOWLEDGE → PERSUASION → DECISION → CONFIRMATION

(Rogers 1973:79)

the initial knowledge gained by the target population may be from a wide variety of sources including mass media, neighbours or change agents. The next stage, persuasion, is probably the most difficult and the most important, and Rogers (1973:122) considers this stage to be almost entirely dependent on face to face contact between the client and the field worker:

"The moment of truth in any national family planning programme occurs in the interaction between a change agent and a client, for this contact is where the change agents' appeals result in either adoption or rejection of the family planning innovation being promoted. The relative success of this persuasion process depends, in some part, on how the change agent is perceived in the eyes of the client".

Rogers considers that home visits to clients by para-professional field workers are one of the most effective and often the most efficient communication strategies to secure the adoption of family planning methods.

In an address at the David Owen Centre, University College, Cardiff, Sales (1977) expressed similar views:

"The trend is to bring family planning services closer to clients by using local groups and people, by using networks already in place and integrated with the culture of their societies".

Increasingly, he continues, family planning services are supplied by a variety of carriers - midwives, health visitors, housewives, commercial outlets, and for a programme to be sustained it is essential to obtain the participation of the community, right down to the smallest social units.

These comments highlight the field worker as a key person in family planning diffusion, as the main link between the clients and the whole family planning service. It seems that in many countries the task of overcoming the manpower problems for family planning communications has not been met (Bogue, 1973). Also, the controversial nature of family planning makes the practitioner open to attack on political and religious grounds (Brook 1978) and it is all the more important therefore that the educator be able to meet such arguments confidently and sincerely.

It is hoped that this paper may make a contribution to this problem by outlining a method of training which should improve the field workers' interaction behaviour with clients.

## 2. FACTORS AFFECTING THE TRAINING OF FIELD WORKERS

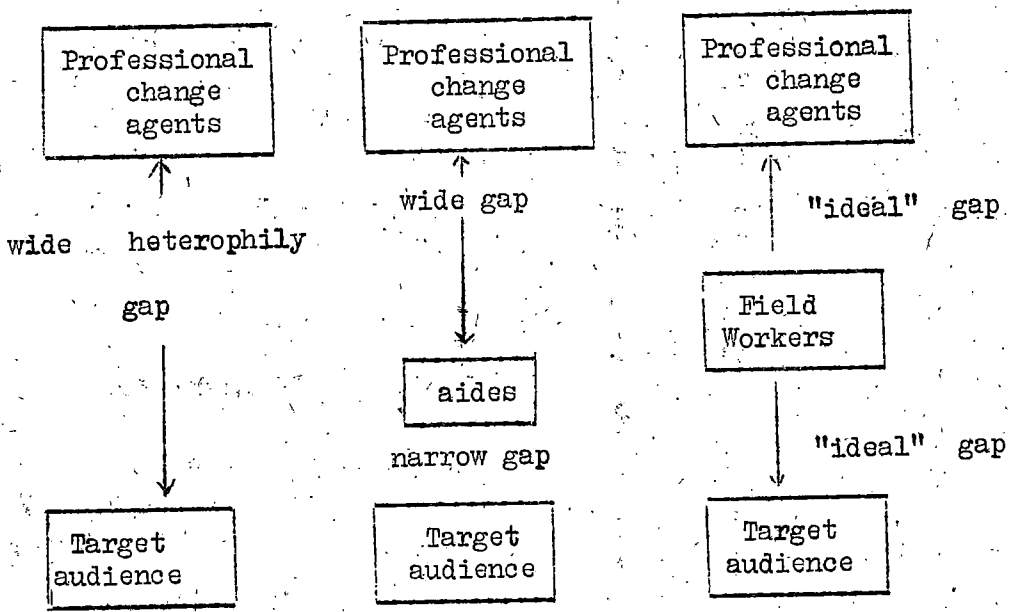
Before devising training for the field worker the factors which go to make her an important link must be considered, so that the training can develop these factors rather than weaken them.

Rogers (1973) in common with other authors in diffusion considers that for a change agent to succeed he must not be too different from his clients; i.e. he must be homophilous rather than heterophilous with the population whom the innovation is directed, whether it be in agriculture, health or family planning.

If the change agent is too heterophilous she will not have credibility with the client; for example, the average Family Planning Officer might be too highly educated to "reach" a rural peasant population. At the opposite extreme the change agent may be too homophilous to effect change; for example in Pakistan where an attempt was made to use traditional midwives as family planning aides their failure was attributed to their similarity in attitudes, lack of innovativeness and technical inability, with the groups from which they were selected. A further problem is that such aides may be too different from the trainers for them to be able to communicate with each other.

The generally agreed solution seems to be to develop a para-professional field worker who is sufficiently homophilous with the population to have credibility, but who is sufficiently educated to be trainable in the technical aspects of the job, and is therefore also likely to have attitudes favourable for innovation. She is thus likely to have the potential for developing the two main factors giving her credibility: (1) competence in the job, (2) safety credibility, i.e., is she sufficiently like the client to serve as a role model, or more simply, can she be trusted by the client.

Rogers (1973:123) summarises the position thus:



The field worker must therefore be selected for potential technical ability, and for homophily. If the target population is totally illiterate then it may be difficult to reach a compromise between these two selection criteria, but the average black community in Rhodesia is marginally literate, and the problem therefore is not acute.

The task of the trainer is to develop methods to make the field worker technically competent, and to increase her apparent homophily with the clients by improving her ability to communicate at this level. Training in the technical aspects of the work is relatively straight forward, provided three dimensional models are used; the second and more difficult task of improving communication abilities is the subject of this paper.

3. BEHAVIOUR MODELLING

Behaviour modelling has been used with some success for the training of family planning field workers in Rhodesia. Although no precise evaluation has been carried out, the method is recommended with confidence because of its good standing in training for interaction in management in industry and commerce.

Behaviour modelling is not particularly new and the principle is well established in primary and secondary schools, but in adult education it has received wide attention only recently, and with new developments in educational technology, particularly video and audio tapes, it has become increasingly popular.

The principles and techniques of behaviour modelling have been well documented and supported (Bandura 1969, Goldstein and Sorcher 1974).

The main steps are:-

1. Set Objectives
2. Analysis of the behavioural requirements of the interaction concerned.
3. Development of a model depicting the desirable feature of the interaction.
4. Presentation of the model, either by film, video-tape or audio-tape, or by role-playing to the trainees.
5. Discussion of the model by the trainees to identify the key points.
6. Imitation (= rote learning) and practice (= over-learning) of the model by the trainees.
7. Reinforcement of the new behaviour by the trainer and peers.
8. Advanced training to introduce flexibility.

Behaviour modelling has similarities with role-playing, but it has more discipline and precision, and because the objectives are clearly stated the training can be more thoroughly evaluated than can traditional open-ended role-playing. The learning principles applied in behaviour modelling are discovery learning (Step 5), imitation (6), learning by doing (6), intensive practice-leading to overlearning (6) and social reinforcement (7), all of which have a body of sound research data and knowledge to support them.

Training is conducted in small groups and the main function of the trainer is to develop a positive, reinforcing atmosphere which increases the confidence of the trainees. Practice should be intensive with many well spaced repetitions so that overlearning leads to transfer.

Goldstein and Sorcher (1974:65) show that behaviour modelling leads to increased empathy (defined as sensitivity to others feelings plus an ability to communicate this understanding in language the others comprehend). Empathy is obviously a key factor in establishing homophily, and is a difficult concept to communicate. Behaviour modelling aims to change such attitudes indirectly; underlying the approach is the behaviouristic principle of changing behaviour first, which will then lead to a change of attitude if the new behaviour is reinforced.

An additional advantage of using behaviour modelling for the training of field workers who may not have a high level of education is that it largely obviates direct training in subjects such as communication and motivation. These constructs are difficult to follow in the abstract and even if the theory is understood there is no guarantee that this will lead to transfer to the work situation. It is possible that such knowledge may even disrupt a person's natural ability to communicate with others. With behaviour modelling there is no need for the trainee to work out how to apply the new knowledge: the actual behaviour required is imitated and practised, the motivational and communication components of the interaction having been worked out and incorporated into the models by the trainer.

A possible disadvantage of this approach is that it may lead to rigid behaviour where flexibility will be important. To counter this the trainer should occasionally place herself in the role of the client, once the trainees have developed confidence, and deliberately depart from the patterns shown in the models (Step 8). Also, different personality types may have different ways of behaving, and the trainer needs to be sensitive to the manner in which trainees prefer to achieve their interaction goals.

#### 4. MODELS FOR TRAINING FIELD WORKERS

##### Objectives

The general objectives of the field worker at the 'persuasion' stage will depend on the knowledge and attitudes of the client, but will probably fall into the following hierarchy:

- Minimum objective : leave client on friendly terms.
- Intermediate objectives: arouse awareness of interest.
- Maximum objective: client makes some kind of commitment to family planning.

##### Content and Process

Following Bales (1970) interaction may be analysed according to content (what is said) and process or style (how it is said). For the interaction under discussion neither content nor process have been closely analysed, and the models recommended below are based on the experience of African family planning officers and field workers (Hancock 1977).

##### Process Model

The steps shown here apply to each content model:

1. Use customary greetings, observe formalities of manners, language, dress.
2. Find something to praise, e.g. health of child, crops, garden, house.
3. State your role clearly.
4. Avoid disparaging remarks, and maintain (increase) self-esteem of client.
5. Allow client to speak fully.
6. Listen carefully to client's views.
7. Avoid arguments.

##### Content Models

#### 4.1 WITH A PEASANT FARMER OR COUPLE

- i. Preserves health of the mother.
- ii. Assures healthy children.
- iii. Improves children's lives, giving them a better education and helping them to get a better start.

- iv. Lessen worry and overwork on the part of the mother and father.
- v. Farm produce is not all consumed by the family therefore the remainder can be sold.
- vi. Avoids overcrowding, ensures happy family life, more companionship and lessens tension.
- vii. Helps to reduce the burden of poverty and welfare which the community has to bear.
- viii. Farm cannot be subdivided into small sections for children to inherit.

#### 4.2 WITH A REMOTE COUPLE WHO HAVE NEVER HEARD ABOUT FAMILY PLANNING

- i. Family Planning and tradition accepted in the area.
- ii. Advantages of breast-feeding and how this is interfered with by an untimely pregnancy.
- iii. How spacing will help improve health of the children.
- iv. How Family Planning helps to preserve health of the mother.
- v. How Family Planning will help lessen worry and overwork.

#### 4.3 WITH NEWLY MARRIED COUPLE LIVING IN URBAN AREA

- i. Congratulate them on their newly married life.
- ii. Advantages of a small family:
  - easily accommodated and modern furniture,
  - can easily provide all necessities - food, clothing, and education,
  - can save for the future and secure a decent future for the children.
- iii. Urban financial pressures and how a large family can intensify such pressures.
- iv. Time for mother to regain her health, and have more leisure and time for herself.

#### 4.4 WITH A MAN WHO BELIEVES FAMILY PLANNING CAUSES IMMORALITY

- i. Immorality has plagued mankind since time immemorial.
- ii. Not caused by availability of contraceptives.
- iii. Depends on one's character and up-bringing.
- iv. Modern pressures contribute towards this problem.
- v. Immorality among men who are never on Family Planning.
- vi. Basic cause of this fear is lack of trust of wife.
- vii. Family Planning improves marital relationship.

#### 4.5 WITH A WEALTHY MAN WHO SAYS HE CAN AFFORD MANY CHILDREN

- i. Everyday general expenses are lessened.
- ii. Preserve the high standard of living.
- iii. Avoid subdividing property or savings among many children.
- iv. Lessen worry and overwork on part of mother and father.
- v. Children need more than material things.
- vi. Preserve health of the mother.

#### 4.6 WITH A CHURCH LEADER/MEMBER WHO BELIEVES THAT PLANNING A FAMILY IS WRONG

- i. "Multiply and replish the earth" Genesis 1:28  
Genesis 9:1.
- ii. Onan - Genesis 38:8 - 10.
- iii. Jesus encouraged planning. Luke 14:28.
- iv. Paul on support of family. I Timothy 5:8.
- v. All churches approve of Family Planning.

#### 4.7 WITH A PERSON WHO HAS POLITICAL OPPOSITION

- i. Family Planning Association is not a Government Organisation and is not a political issue.
- ii. It is a health service started by our ancestors.
- iii. Today it is encouraged at United Nations and accepted worldwide.
- iv. All countries in Africa have Family Planning.
- v. In Rhodesia Family Planning is for all races.
- vi. It will never reduce African numbers - compare African and European numbers and rate of increase.
- vii. Immigration of little or no effect on numbers and selective immigration necessary for every country.

#### 4.8 WITH A PERSON WHO WANTS MANY CHILDREN FOR CHEAP LABOUR OR OLD AGE SECURITY

- i. Children are not parents' servants, they are no longer an asset but a liability.
- ii. Parental responsibility in this modern world.
- iii. Quality more important than quantity.
- iv. Nowadays parents can plan for old age security.
- v. Mother's health ruined by frequent pregnancies.
- vi. Lessen worry and overwork on part of mother and father.

4.9 WITH COUNCIL CHAIRMAN, SECRETARY, CHIEF OR THE COUNCIL

- i. Helps to avoid over-population in their area, and famine.
- ii. Helps community to meet its responsibility in providing education, health and other services.
- iii. Helps to keep down delinquency and youth problems.
- iv. Helps to reduce welfare burden of the community.
- v. Helps to preserve their non-renewable resources.

4.10 WITH A GROUP OF MEN

- i. Ability to choose number of children according to his means.
- ii. Less financial worry and it permits savings for the future and for retirement. Worsening of present financial condition is avoided.
- iii. Disadvantages of further overcrowding in the home are avoided and there is more comfort in the home.
- iv. Provides husband and wife with more leisure, opportunity to enjoy each other's companionship. They experience happier marital relationship.
- v. Gives both husband and wife time to take part in the life and development of their community.
- vi. Preserves wife's health.
- vii. Improves children's future in life.

4.11 WITH A GROUP OF WOMEN e.g. WOMEN'S CLUB

- i. Helps preserve health of the mother.
- ii. Offers opportunity to do a better job of rearing children.
- iii. Lessens worry and overwork on the part of the mother.
- iv. Gives the wife more time to develop her personality and talents.
- v. Improves the sexual adjustment by eliminating fear of unwanted pregnancies.

4.12 WITH ANTE-NATAL POST-NATAL MOTHERS

- i. Helps mother to restore her health.
- ii. Gives her time to attend to the new baby.
- iii. Baby receives better care and love.
- iv. Gives wife more time to develop herself and enjoy her family ties.



## 5. CONCLUSION

The above models were derived by consulting experienced personnel, and a more systematic analysis of actual interactions may produce more useful models. The models were developed specifically for the Rhodesian African socio-cultural milieu, and will not necessarily apply to other situations. Nor can they be expected to provide the field worker with a complete set of answers for the Rhodesian situation. Attitudes and behaviour are contingent upon many factors, cognitive, affective and conative, and there will be wide differences between individuals in any culture and within individual over time.

Where this approach has been used, the new field workers have stated that it has enabled them to start work with immediate confidence, whereas experienced workers often say that it took them a long time to develop the correct repertoire of behaviour and the necessary confidence. Even experienced workers say that behaviour modelling has given them new insights into their own interaction behaviour.

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