

CHAPTER VI

Annotated Bibliography

1. Pradhan, A. , Aryal, R. H. , Regmi, G. , Ban, B. & Govandasamy, P. (1997). *Nepal family health survey, 1996*. Family Health Division, Department of Health Services, Ministry of Health, Kathmandu, Nepal; New Era, Kathmandu, Nepal; Demographic and Health Survey Macro International Inc. , Calverton, Maryland, USA.

This is a fifth series of nationally representative demographic and health survey of 8429 ever-married women. This report presents the detail information on fertility, family planning, infant, child and maternal mortality, child health, nutrition and knowledge of AIDS. The chapter family planning, describes the knowledge, attitude and practice of family planning, future intention to use family planning methods, source of methods, reasons for not using contraception, exposure to media for family planning information and need for family planning. Survey report indicate that the knowledge of contraceptive methods to CMWRA have 98.3% and the use of contraception is only 29% among CMWRA.

2. Shrestha, H. , Thapa, M. & Shrestha, S. (1993). *A report of study of the impact of counselling service on the acceptance and continuation of temporary contraceptive measures*. Human reproduction Project, Department of Community Medicine, Institute of Medicine, Nepal.

This report describes the impact of counselling on acceptance, continuation and discontinuation patterns of temporary contraceptive methods among married women of reproductive age. The result obtained from this study is compared with a health post for control group and a health post for experimental group. The report indicate that the 70. 8% women continued using temporary contraceptive methods in experimental health post whereas only 37. 7% women continued using temporary contraceptive methods in control health posts. Further it indicates that women continued using contraception, even they have some side effects of the methods in experimental health post.

3. Family Health Division (1995). Family planning counselling. *National Medical Standard for Reproductive Health*, Vol. 1, contraceptive Services, Nepal .

This is an updated book of medical standard for contraceptive services. This book presents the clear picture of family planning counselling, client assessment for contraception, infection prevention and medical supervision and monitoring. Further it describes the different natural family planning methods and non-clinical as well as clinical methods of contraception. The family planning counselling chapter provides the in-depth knowledge on what is family planning counselling, principle of

counselling, qualities of effective counsellors, counselling process, stage of counselling and counselling method which is very relevant.

4. Gallen, M. E. & Lettenmaier, C. (1987). Counselling makes difference. *Population Reports*, series J, No. 35. John Hopkins School of Public Health, Population Information Program, Baltimore, USA.

This report provides an overview of important development in the population field. This series J, No. 35 describes specially about family planning counselling to the clients. This report provides knowledge of interpersonal communication, counselling process, counselling training, training methods and evaluation of counselling training in different stages. This report is really a helpful for those who want to conduct the counselling training and to provide counselling services to the family planning clients.

5. Robey, B. , Pitrow, P. T. & Salter, C. (1994). Family planning lesson and challenges. *Population Reports*, Series J, No. 40. John Hopkins School of Public Health, Population Information Program, Baltimore, USA.

This report also provides an overview of important development in the population field. This report has identified 10 key lesson such as family planning demand, contraceptive access, choice of contraceptive methods, client centered quality, communication, well trained providers, program leadership, research and evaluation, political commitment and financial resources for successful family planning program. These lessons are identified based on a new survey of consensus

of opinion among respondents and review of family planning research and program findings. Further it presents that no single formula for the design of family planning programs suit all countries and cultures.