on the observation form asked whether the provider “gave accurate information on how to use the method.” The parallel item in the exit interview asked the client to provide correct information on how to use the method. However, if a client cannot provide the correct information, this does not necessarily mean that the provider did not supply it during the visit.

The first step of the analysis consisted of comparing frequencies on indicators that were available from both instruments in all three countries. To simplify presentation of the data, we have organized the indicators into five of the six elements of the Bruce-Jain framework. (No indicators available from both instruments captured technical competence.) We calculated simple agreement on each indicator as the proportion of responses in which the observation and exit interview results were in agreement. Kappa coefficients were calculated to correct for the proportion of responses that would be in agreement as a result of chance alone. Since kappa values become low when the prevalence deviates from 50%, and many of the indicators were highly skewed toward positive responses, we report kappa coefficients adjusted for prevalence and bias.10 Kappa coefficients ranging from 0.00 to 0.39 indicate poor agreement, the 0.40–0.74 range indicates fair to good agreement, and values of 0.75–1.00 indicate excellent agreement.11

Finally, we combined data from all three countries and present percentage agreement and kappa coefficients. We also assessed evidence of bias or systematic error using McNemar’s test for bias. Bias was considered to be present if one instrument consistently rated the indicator higher (or lower) than did the other instrument.

Results

Client Characteristics

Clients’ characteristics, which may influence their ability to accurately report information from the visit, varied somewhat among the three countries. Overall, almost one-half of the women were aged 24–35, and age patterns were similar across countries. Educational levels, however, varied; they were highest in Ecuador, where 67% of clients had attended at least secondary school, and lowest in Uganda, where only 40% of clients had advanced beyond primary school.

Reasons for coming to the clinic were similar. Slightly more than one-quarter of clients in each country were new family planning clients (defined as those who were either coming to the facility for a family planning method for the first time, restarting a method after not using it for more than six months, switching methods or making their first visit to the facility). However, the contraceptive methods they received differed substantially. In Ecuador, the IUD predominated, with 43% of clients receiving a device during their visit; other frequently prescribed methods were the injectable (21%) and the pill (17%). In Uganda, 71% of clients received the injectable and 22% the pill. In Zimbabwe, most clients received the pill (62%) or the injectable (35%).

Interpersonal Relations

Virtually all clients in every country were treated with respect (Table 1, page 66), and results on this indicator were highly consistent between observations and client exit interviews (kappas, 0.98–0.99). Results regarding whether counseling and the pelvic examination took place in private were also similar on both instruments; consistency across instruments was good to excellent for Ecuador and Zimbabwe (kappas, 0.74–0.94), and was lower but still good in Uganda (0.63–0.65). Where disagreement occurred, clients were typically less likely than observers to report that privacy was adequate. In Ecuador, for example, 99% of observers recorded that the pelvic examination was conducted in privacy, compared with 93% of clients.

Providers were supposed to ask returning clients whether they had any concerns or problems. In Ecuador and Uganda (Zimbabwe had no data on this indicator), consistency between responses from observations and exit interviews was fair to good (kappas, 0.54 and 0.61, respectively). In Ecuador, observers noted that the providers asked 84% of clients if they had any problems or concerns, whereas 67% of respondents answered affirmatively in exit interviews. In Uganda,