

**2002 REPRODUCTIVE HEALTH SURVEY
JAMAICA
HOUSEHOLD QUESTIONNAIRE FEMALE**

**FORM RHS 1A
CONFIDENTIAL
CAP. 368**

IDENTIFICATION No.

QUESTNO

QUESTIONNAIRE No. 2 _ _ _ _ _

PARISH	CONSTITUENCY	E.D. No.	DWELLING No.	HOUSEHOLD No.
PAR	CONSTIT	EDNO	DWELL	HOUSE
ELIGIBLE RESPONDENTS				SEX 2

Interview calls	1	2	3	4	Final Visit
Day (Date)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Month	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> MONTHF
Interview Status *	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> ISTATUSF
Interviewer's Name					
Interviewer's No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Supervisor's Name					
Supervisor's No.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Next Visit: Date	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Time	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

*** Interview Status Codes:**

- | | |
|---|---|
| 1. Completed household and individual interviews | 5. Partly completed individual interview - deferred |
| 2. Completed household interview - no eligible respondent | 6. Refusal - household |
| 3. Completed Household interview - selected respondent at home or available | 7. Refusal - individual |
| 4. Completed household interview - selected respondent not at home - deferred | 8. Vacant dwelling |
| | 9. Other (specify): _____ |

FOR OFFICE USE ONLY:

Reviewed By: _____

Position: _____

Edited by: _____

Date: _____

Date: _____

10. How many persons live in this household? HHOLDNO number

PLEASE RECORD THE NAMES AND OTHER PARTICULARS OF ALL PERSONS WHO LIVE IN THIS HOUSEHOLD. THIS SHOULD INCLUDE ALL WHO USUALLY EAT AND SLEEP HERE. START WITH THE OLDEST MEMBER, THEN THE NEXT OLDEST, ETC.

SCHEDULE OF ALL PERSONS LIVING IN HOUSEHOLD

LINE NO.	NAME	SEX *	AGE	EDUCATIONAL STANDARD **		SEQ. NO.
	<i>Please give me the names of all persons who usually live in your household</i>	<i>Is _____ male or female?</i>	<i>How old Is he/she</i>	Highest Level	Years	***
01		SEX1	AGE1	LEVEL1	YEARS1	SEQN01
02		SEX2	AGE2	LEVEL2	YEARS2	SEQN02
03		SEX3	AGE3	LEVEL3	YEARS3	SEQN03
04		SEX4	AGE4	LEVEL4	YEARS4	SEQN04
05		SEX5	AGE5	LEVEL5	YEARS5	SEQN05
06		SEX6	AGE6	LEVEL6	YEARS6	SEQN06
07		SEX7	AGE7	LEVEL7	YEARS7	SEQN07
08		SEX8	AGE8	LEVEL8	YEARS8	SEQN08
09		SEX9	AGE9	LEVEL9	YEARS9	SEQN09
10		SEX10	AGE10	LEVEL10	YEARS10	SEQN010
11		SEX11	AGE11	LEVEL11	YEARS11	SEQN011
12		SEX12	AGE12	LEVEL12	YEARS12	SEQN012

* Gender codes

** Educational Standard Codes

*** Eligible Females aged

Level

Years

N/S

– 49 years on

(Use appropriate No.)

1. Males

2. Females

0.	None	1	-	8+	9
1.	Primary/All age	1	-	8+	9
2.	Junior High	1	-	8+	9
3.	Secondary	1	-	8+	9
4.	Post-secondary	1	-	8+	9
8.	Other	1	-	8+	9

11. Number of eligible males aged 15-24 years living in household
(Total of number of eligible males recorded in the Schedule).

NOFEMAL

IF THERE IS ONE OR MORE ELIGIBLE RESPONDENTS, SELECT THE ONE TO BE INTERVIEWED, BASED ON THE INSTRUCTIONS GIVEN AND USING THE RANDOM TABLE SHOWN BELOW.

THEN COMPLETE THE INDIVIDUAL QUESTIONNAIRE FOR THE SELECTED RESPONDENT.

IF THERE ARE NO ELIGIBLE RESPONDENTS, COMPLETE TITLE PAGE AND MOVE ON TO THE NEXT HOUSEHOLD.

RANDOM SELECTION OF RESPONDENT

Questionnaire Number 1 _ _ _ _ _

Number of Eligible Females _ _

Last digit on questionnaire number	Number of Eligible Males in Household									
	1	2	3	4	5	6	7	8	9	10
0	1	2	3	4	2	2	6	2	4	10
1	1	1	1	1	3	3	7	3	5	1
2	1	2	2	2	4	4	1	4	6	2
3	1	1	3	3	5	5	2	5	7	3
4	1	2	1	4	1	6	3	6	8	4
5	1	1	2	1	2	1	4	7	9	5
6	1	2	3	2	3	2	5	8	1	6
7	1	1	1	3	4	3	6	1	2	7
8	1	2	2	4	5	4	7	2	3	8
9	1	1	3	1	1	5	1	3	4	9

SEQUENCE NUMBER OF MALE SELECTED FOR INTERVIEW:

		SEQNO
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AFTER COMPLETING THE HOUSEHOLD QUESTIONNAIRE, RETURN TO TITLE PAGE AND COMPLETE INFORMATION ON INTERVIEW CALLS.

COMMENTS

[illegible]

**2002 REPRODUCTIVE HEALTH SURVEY
JAMAICA
INDIVIDUAL QUESTIONNAIRE - FEMALE
FORM RHS 3**

CONFIDENTIAL
CAP.368
October 2002

Questionnaire No. QUESTNO				Line No.		Sequence No.			
2					LINENO	SEQNUM			
Parish		Constituency		ED No.		Dwelling No.		Household No.	
PARFEM		CONSTIFEM		EDNOFEM		DWELLNO		HOUSENO	

SECTION I - RESPONDENT'S BACKGROUND

DATE AND TIME INTERVIEW STARTED _____

<p>101. <i>In what month and year were you born?</i></p> <div style="display: flex; align-items: center;"> Q101M <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 5px;"> <div style="width: 15px;"></div> <div style="width: 15px;"></div> </div> 19 <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 5px;"> <div style="width: 15px;"></div> <div style="width: 15px;"></div> </div> Q101Y </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> month year </div> <p>29. <i>Don't Know (Month/Year)</i></p>	<p>102. <i>How old were you on your last birthday?</i></p> <div style="display: flex; align-items: center;"> Q102 <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 5px;"> <div style="width: 15px;"></div> <div style="width: 15px;"></div> </div> years </div>
<p>103. <i>Have you ever attended school?</i></p> <div style="display: flex; align-items: center;"> Q103 </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> 1. Yes 2. No (SKIP TO Q105) </div>	<p>104. <i>How many years did you attend school?</i></p> <div style="display: flex; align-items: center;"> Q104 <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 5px;"> <div style="width: 15px;"></div> <div style="width: 15px;"></div> </div> Years </div> <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> 29. Don't know/Don't remember </div>
<p>105. <i>With what frequency do you attend religious services?</i></p> <div style="display: flex; align-items: center;"> Q105 </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 45%;"> <p>1. At least once a week</p> <p>2. At least once a month</p> <p>3. Less than once a month</p> </div> <div style="width: 45%;"> <p>4. Only for special occasions (weddings, funerals, christenings, etc.)</p> <p>5. Doesn't attend at all</p> <p>6. No response</p> </div> </div>	
<p>106. <i>What were you doing during the past week? Were you _____ ? [READ].</i></p> <div style="display: flex; align-items: flex-start;"> <div style="width: 40%;"> Q106 <ol style="list-style-type: none"> 1. Working 2. Not working but had a job 3. Looking for work 4. Wanted work and was available 5. Keeping house 6. Going to school 7. At home, not keeping house 8. Incapable of working 9. Other (specify): _____ </div> <div style="width: 55%; padding-left: 20px;"> <div style="border: 1px solid black; width: 50px; height: 60px; margin: 10px auto;"></div> <p>SKIP TO Q111.</p> <div style="text-align: right; margin-top: 20px;"> OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px;"></div> <div style="width: 15px;"></div> </div> </div> </div> </div>	
<p>107. <i>Do you work regularly (at least 5 days every two weeks) in your present job?</i></p> <div style="display: flex; align-items: center;"> Q107 </div> <div style="display: flex; justify-content: space-around; margin-top: 5px;"> 1. Yes 2. No 9. DK </div>	
<p>108. <i>How many hours do usually work per week?</i></p> <div style="display: flex; align-items: center;"> Q108 <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center; margin: 0 5px;"> <div style="width: 15px;"></div> <div style="width: 15px;"></div> </div> Hours </div> <div style="display: flex; justify-content: flex-end; margin-top: 5px;"> 98 99 </div>	

109. <i>How many hours did you work during the week ending ?</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q109</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. Less than 9 hours</td> <td style="width: 50%;">5. 33 - 40 hours</td> </tr> <tr> <td>2. 9 - 16 hours</td> <td>6. 41 - 49 hours</td> </tr> <tr> <td>3. 17 - 24 hours</td> <td>7. 49 + hours</td> </tr> <tr> <td>4. 25 - 32 hours</td> <td>8. Not specified</td> </tr> </table>					1. Less than 9 hours	5. 33 - 40 hours	2. 9 - 16 hours	6. 41 - 49 hours	3. 17 - 24 hours	7. 49 + hours	4. 25 - 32 hours	8. Not specified																												
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110. <i>Do you work at home or away from home?</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q110</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">1. At home</td> <td style="width: 25%;">2. Away from home</td> <td style="width: 25%;">3. Both</td> <td style="width: 25%;">9. DK</td> </tr> </table>					1. At home	2. Away from home	3. Both	9. DK																																
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111. <i>Do you regularly read any of the following newspapers? [READ OPTIONS A - E].</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q111</div> <table style="width: 100%; border: none;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>YES</u></th> <th style="text-align: center;"><u>NO</u></th> <th style="text-align: center;"><u>DK</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111A</div> A. <i>Gleaner</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> <td></td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111B</div> B. <i>Star</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> <td></td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111C</div> C. <i>Jamaica Herald</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> <td></td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111D</div> D. <i>Observer</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> <td></td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111E</div> E. Other (specify):</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> <td> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q111OTH</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> </td> </tr> </tbody> </table>						<u>YES</u>	<u>NO</u>	<u>DK</u>		<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111A</div> A. <i>Gleaner</i>	1	2	9		<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111B</div> B. <i>Star</i>	1	2	9		<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111C</div> C. <i>Jamaica Herald</i>	1	2	9		<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111D</div> D. <i>Observer</i>	1	2	9		<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q111E</div> E. Other (specify):	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q111OTH</div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>						
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112. <i>Are there any of the following possessions in your household? [READ LIST].</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q112</div> <table style="width: 100%; border: none;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>YES</u></th> <th style="text-align: center;"><u>NO</u></th> <th style="text-align: center;"><u>DK</u></th> </tr> </thead> <tbody> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112A</div> A. <i>Telephone (land)</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112B</div> B. <i>Telephone (Cellular)</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112C</div> C. <i>Radio</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112D</div> D. <i>Television</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112E</div> E. <i>VCR</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112F</div> F. <i>Refrigerator</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112G</div> G. <i>Computer</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> <tr> <td><div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112H</div> H. <i>A working motor vehicle</i></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">9</td> </tr> </tbody> </table>						<u>YES</u>	<u>NO</u>	<u>DK</u>	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112A</div> A. <i>Telephone (land)</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112B</div> B. <i>Telephone (Cellular)</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112C</div> C. <i>Radio</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112D</div> D. <i>Television</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112E</div> E. <i>VCR</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112F</div> F. <i>Refrigerator</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112G</div> G. <i>Computer</i>	1	2	9	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q112H</div> H. <i>A working motor vehicle</i>	1	2	9
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113. <i>How many rooms does your household occupy (exclude bathrooms and kitchen)?</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q113</div> <div style="display: flex; align-items: center; margin-top: 5px;"> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; margin-right: 5px;"></div> <div>number</div> </div> <div style="margin-top: 5px;">99. No response</div>																																								
114. <i>What is the main source of water for the household? [READ OPTIONS 1 - 7].</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q114</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. <i>Public piped into dwelling</i></td> <td style="width: 50%;">6. <i>Public catchment</i></td> </tr> <tr> <td>2. <i>Public piped into yard</i></td> <td>7. <i>Spring or river</i></td> </tr> <tr> <td>3. <i>Private piped into dwelling</i></td> <td>8. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q114OTH</div></td> </tr> <tr> <td>4. <i>Private catchment, not piped</i></td> <td>9. Not stated</td> </tr> <tr> <td>5. <i>Public standpipe</i></td> <td></td> </tr> </table> <div style="text-align: right; margin-top: 10px;"> OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> </div>					1. <i>Public piped into dwelling</i>	6. <i>Public catchment</i>	2. <i>Public piped into yard</i>	7. <i>Spring or river</i>	3. <i>Private piped into dwelling</i>	8. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q114OTH</div>	4. <i>Private catchment, not piped</i>	9. Not stated	5. <i>Public standpipe</i>																											
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115. <i>What type of toilet facilities does this household have? [READ OPTIONS 1 - 3].</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q115</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">1. <i>WC linked to sewer</i></td> <td style="width: 50%;">4. None (SKIP TO STATEMENT BEFORE Q201)</td> </tr> <tr> <td>2. <i>WC not linked to sewer</i></td> <td>8. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q115OTH</div></td> </tr> <tr> <td>3. <i>Pit</i></td> <td>9. Not stated / Don't know (SKIP TO STATEMENT BEFORE Q201)</td> </tr> </table> <div style="text-align: right; margin-top: 10px;"> OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> </div>					1. <i>WC linked to sewer</i>	4. None (SKIP TO STATEMENT BEFORE Q201)	2. <i>WC not linked to sewer</i>	8. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q115OTH</div>	3. <i>Pit</i>	9. Not stated / Don't know (SKIP TO STATEMENT BEFORE Q201)																														
1. <i>WC linked to sewer</i>	4. None (SKIP TO STATEMENT BEFORE Q201)																																							
2. <i>WC not linked to sewer</i>	8. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-right: 10px;">Q115OTH</div>																																							
3. <i>Pit</i>	9. Not stated / Don't know (SKIP TO STATEMENT BEFORE Q201)																																							
116. <i>Are these facilities shared with another household?</i> <div style="border: 1px solid red; padding: 2px; display: inline-block; margin-bottom: 5px;">Q116</div> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">1. Shared</td> <td style="width: 33%;">2. Not shared</td> <td style="width: 33%;">9. Not stated</td> </tr> </table>					1. Shared	2. Not shared	9. Not stated																																	
1. Shared	2. Not shared	9. Not stated																																						

SECTION II - RELATIONSHIP STATUS AND PARTNERSHIP HISTORY

Now, I would like to ask you some questions about your steady relationships.

201.	<i>Are you legally married now?</i>	
	<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q201</div> <div style="margin-left: 10px;">1. Yes</div> </div> <div> <div style="margin-left: 10px;">2. No (SKIP TO Q203)</div> </div> </div>	
202.	<i>Are you and your wife living together as man and wife now?</i>	
	<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q202</div> <div style="margin-left: 10px;">1. Yes (SKIP TO Q206)</div> </div> <div> <div style="margin-left: 10px;">2. No</div> </div> </div>	
203.	<i>Are you living with a common-law partner now; that is, are you living as man and wife now with a partner to whom you are not legally married?</i>	
	<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q203</div> <div style="margin-left: 10px;">1. Yes (SKIP TO Q206)</div> </div> <div> <div style="margin-left: 10px;">2. No</div> </div> </div>	
204.	<i>Do you have a visiting partner, that is, a more or less steady partner with whom you have sexual relations?</i>	
	<div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q204</div> <div style="margin-left: 10px;">1. Yes (SKIP TO Q206)</div> </div> <div> <div style="margin-left: 10px;">2. No</div> </div> </div>	
205.	<p>[IF RESPONDENT IS LEGALLY MARRIED, BUT IS NOT LIVING WITH WIFE (Q201 = "YES" AND Q202 = "NO"), ANSWER THIS QUESTION "YES" WITHOUT ASKING. OTHERWISE ASK:]</p> <div style="display: flex; justify-content: space-between;"> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q205</div> <div style="margin-left: 10px;"><i>Have you ever been in a partnership; that is, a marriage, a common-law union or a visiting relationship?</i></div> </div> </div>	
	<div style="display: flex; justify-content: space-between;"> <div>1. Yes</div> <div>2. No (SKIP TO Q301)</div> </div>	
206.	<p>What was the month and year when your first marriage, first common-law or first visiting relationship began?</p>	
	<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q206MTH</div> <div style="margin-left: 10px;"> <div style="display: flex; width: 40px; height: 20px; border: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; width: 40px; height: 20px; border: 1px solid black; margin-bottom: 5px;"></div> <div>month</div> </div> </div> <div> <div style="margin-left: 10px;">77. Don't know</div> <div style="margin-left: 10px;">month</div> </div> <div> <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q206YR</div> <div style="margin-left: 10px;"> <div style="display: flex; width: 80px; height: 20px; border: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; width: 80px; height: 20px; border: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; width: 80px; height: 20px; border: 1px solid black; margin-bottom: 5px;"></div> <div style="display: flex; width: 80px; height: 20px; border: 1px solid black; margin-bottom: 5px;"></div> <div>year</div> </div> </div> <div> <div style="margin-left: 10px;">29. Don't know</div> <div style="margin-left: 10px;">year</div> </div> </div>	

SECTION III – FERTILITY

Now, we are going to talk about your history of menstruation and your childbearing history. Some of the questions may not apply to you. In these cases, just say so.

301.	<i>How old were you when your first period started (first started menstruation)?</i>		
	Q301 <input type="text"/> <input type="text"/> age	77. Never had a period (SKIP TO Q303)	
302.	<i>How long has it been since your last period (your last menstruation)?</i>		
	Q302 <input type="text"/> <input type="text"/> months	00. Up to one month 66. Currently having a period 96. Do not have a period (menstruate) any more 97. Before last pregnancy 98. Don't remember	
303.	<i>At what age did you have your first intercourse?</i>		
	Q303 <input type="text"/> <input type="text"/> years	00. Never had sexual intercourse (SKIP TO Q401) 88. Doesn't remember 99. Refused	
304.	<i>Were you forced to have sex at your first intercourse?</i>		
	Q304 1. Yes 3. Don't know / Don't remember 2. No 4. Refusal		
305.	<i>Are you pregnant now?</i>		
	Q305 1. Yes (SKIP TO Q307) 2. No 8. Not sure		
306.	<i>Have you ever been pregnant?</i>		
	Q306 1. Yes 2. No (SKIP TO Q401)		
<i>Now we want to collect information on your pregnancies.</i>			
Q307	307.	<i>How many pregnancies resulted in live births?</i>	<input type="text"/> <input type="text"/>
Q308	308.	<i>How many in still births?</i>	<input type="text"/> <input type="text"/>
Q309	309.	<i>How many pregnancies resulted in miscarriages?</i>	<input type="text"/> <input type="text"/>
Q310	310.	<i>How many births were induced before time, that is, were aborted?</i>	<input type="text"/> <input type="text"/>
Q311	311.	<i>Currently pregnant?</i> [Yes = "1", No = "0". RECORD FROM Q305]	<input type="text"/> <input type="text"/>
Q312	312.	<i>Therefore, the total number of your pregnancies is:</i>	<input type="text"/> <input type="text"/>
<div style="border: 1px solid black; padding: 10px; margin: 0 auto; width: 80%;"> IF SHE HAD AT LEAST ONE ABORTION (Q310 = "1 OR MORE"), CONTINUE. ALL OTHERS, SKIP TO Q314. </div>			
313.	<i>What was the main reason for having this abortion/the last abortion?</i>		
	Q313 1. Pregnancy was life threatening 5. Partner did not want (any) children 2. Risk of birth defects 6. Did not have a partner 3. Could not afford to have another child 7. Other (specify): Q1130TH 4. Respondent did not want (any) children 8. Don't know		
			OFFICE USE ONLY <input type="text"/> <input type="text"/>

**IF SHE HAS HAD NO LIVE BIRTHS ("0" IN Q307)
SKIP TO QUESTION 339.
OTHERWISE, CONTINUE.**

314. *Now, I would like to talk to you about all the live births you have had. Beginning with your last live birth, please give me the names and dates of birth of each. [WHEN YOU HAVE COMPLETED THE RECORDING, CHECK QUESTION 307 TO ENSURE THAT THE ANSWER IS CONSISTENT. IF NOT, QUERY AND CORRECT AS APPROPRIATE.]*

Birth order	Name	Sex	BIRTH DATE		Year	
			Month	Year		
00. Last birth		Q3140S	Q3140M	Q3140Y		00.
01. Next to last		Q3141S	Q3141M	Q3141Y		01.
02. Second from last		Q3142S	Q3142M	Q3142Y		02.
03. Third from last		Q3143S	Q3143M	Q3143Y		03.
04. Fourth from last		Q3144S	Q3144M	Q3144Y		04.
05. Fifth from last		Q3145S	Q3145M	Q3145Y		05.
06. Sixth from last		Q3146S	Q3146M	Q3146Y		06.
07. Seventh from last		Q3147S	Q3147M	Q3147Y		07.
08. Eighth from last		Q3148S	Q3148M	Q3148Y		08.
09. Ninth from last		Q3149S	Q3149M	Q3149Y		09.
10. Tenth from last		Q31410S	Q31410M	Q31410Y		10.
11. Eleventh from last		Q31411S	Q31411M	Q31411Y		11.
12. Twelfth from last		Q31412S	Q31412M	Q31412Y		12.

Sex Code 29. Don't remember
1=Boy, 2=Girl (Month/Year)
98. Not Stated
 (Month/Year)

**IF LAST LIVE BIRTH WAS BEFORE JANUARY 1, 1997
SKIP TO Q328.
FOR ALL BIRTHS ON OR AFTER JANUARY 1, 1997,
RECORD THE NAMES AND LINE NUMBERS FROM Q314
IN THE BIRTH HISTORY CHART ON NEXT PAGE.**

BIRTH HISTORY CHART (Only for live births occurring from January 1, 1997)

COPY LINE NUMBER AND NAME
FROM Q314 ON PREVIOUS PAGELINE NUMBER
NAME:

Q315LT01

LINE NUMBER
NAME:

Q315LT02

315. When you became pregnant with [NAME], did you want to become pregnant? Q315	1. Yes (SKIP TO Q317) 3. God's will, fate, etc. (SKIP TO Q317) 2. No (CONTINUE) 8. Don't know (SKIP TO Q317) Q315A	1. Yes (SKIP TO Q317) 3. God's will, fate, etc. (SKIP TO Q317) 2. No (CONTINUE) 8. Don't know (SKIP TO Q317) Q315B
316. Was it that you wanted no more children or just wanted to wait longer before another pregnancy? Q316	1. Wanted no more children. Q316A 2. Wanted to wait longer. Q316B 8. Don't know.	1. Wanted no more children. Q316B 2. Wanted to wait longer. Q316B 8. Don't know.
317. When you were pregnant with [NAME], were you given any injection to prevent the baby from getting tetanus, that is, lock jaw? Q317	1. Yes - for tetanus Q317A 2. Yes - don't know what for 3. No (SKIP TO Q319) 9.	1. Yes - for tetanus Q317B 2. Yes - don't know what for 3. No (SKIP TO Q319) Q317B
318. How many injections were given? Q318	<input type="checkbox"/> Number 8. Don't remember Q318A	<input type="checkbox"/> Number 8. Don't remember Q318B
319. When you were pregnant with [NAME], did you see anyone for a prenatal check on this pregnancy? Q319	1. Yes Q319A 2. No (SKIP TO Q323)	1. Yes Q319B 2. No (SKIP TO Q323)
320. Where did you go for most of this care? Q320	1. Gov't health centre / clinic Q320A 2. Government hospital 3. Private hospital 4. Rural maternity centre 5. Private doctor / clinic 6. Midwife 7. Other (Specify) Q320AOTH OFFICE USE <input type="text"/> <input type="text"/>	1. Gov't health centre / clinic Q320B 2. Government hospital 3. Private hospital 4. Rural maternity centre 5. Private doctor / clinic 6. Midwife Q320BOTH 7. Other (Specify) Q320BOTH OFFICE USE ONLY <input type="text"/> <input type="text"/>
321. How many times did you go? Q321	<input type="text"/> <input type="text"/> times 77. Can't remember / more than 9 times Q321A	<input type="text"/> <input type="text"/> times 77. Can't remember / more than 9 times Q321B
322. In what month of the pregnancy did the prenatal care begin? Q322	<input type="text"/> <input type="text"/> month 0. Don't remember Q322A	<input type="text"/> <input type="text"/> month 0. Don't remember Q322B
323. Where did you give birth to [NAME]? Q323 HOSPITAL CODES A = Victoria Jubilee Hospital (VJH); University Hospital of the West Indies(UHWI); Cornwall Regional Hospital(CRH). B = Savanna-la-mar Hospital (SLMH); Mandeville Hospital (MH); St. Ann's Bay Hospital(SABH); Spanish Town Hospital(STH).	1. A Q323A 2. B 3. Other Government hospital 4. Private hospital 5. Private nursing home 6. Rural maternity centre 7. Own home 8. Home of relative / friend 9. Other (Specify) Q323AOTH OFFICE USE ONLY <input type="text"/> <input type="text"/>	1. A Q323B 2. B 3. Other Government hospital 4. Private hospital 5. Private nursing home 6. Rural maternity centre 7. Own home 8. Home of relative / friend 9. Other (Specify) Q323BOTH OFFICE USE ONLY <input type="text"/> <input type="text"/>
324. Who is the main person who assisted with the delivery of [NAME]? Q324	1. Doctor Q324A 2. Trained Nurse / Midwife 3. Nana 8. Other (Specify) Q324AOTH 0. No one OFFICE USE ONLY <input type="text"/> <input type="text"/>	1. Doctor Q324B 2. Trained Nurse / Midwife 3. Nana 8. Other (Specify) Q324BOTH 0. No one OFFICE USE ONLY <input type="text"/> <input type="text"/>
325. Was [NAME] delivered by a normal delivery, by forceps or by a Caesarean Section? Q325	1. Normal delivery Q325A 2. Forceps delivery 3. Caesarean delivery 9.	1. Normal delivery Q325B 2. Forceps delivery 3. Caesarean delivery
326. Is [NAME] still alive? Q326	1. Yes (SKIP TO BOX) 2. No Q326A	1. Yes (SKIP TO BOX) 2. No Q326B
327. IF DEAD: How old was [NAME] when he / she died?. [RECORD DAYS IF UNDER 30 DAYS, MONTHS IF UNDER 12 MONTHS, YEARS IF 12 MONTHS AND OVER	1. <input type="text"/> <input type="text"/> day(s) Q327AD 3. <input type="text"/> <input type="text"/> year(s) 2. <input type="text"/> <input type="text"/> month(s) Q327AY Q327M Q327AM Q327	1. <input type="text"/> <input type="text"/> day(s) Q327BD 3. <input type="text"/> <input type="text"/> year(s) 2. <input type="text"/> <input type="text"/> month(s) Q327BY Q327BM

IF NO OTHER LIVE BIRTHS, CONTINUE WITH Q328 ON THE NEXT PAGE.
OTHERWISE, CONTINUE WITH NEXT BIRTH;
THAT IS, RETURN TO QUESTION 315.

BIRTH HISTORY CHART (Only for live births occurring from January 1, 1997)

LINE NUMBER
NAME:

Q315LT03

LINE NUMBER
NAME:

Q315LT04

LINE NUMBER
NAME:

Q315LT05

<p>1. Yes (SKIP TO Q317) 3 God's will, fate, etc. (SKIP TO Q317)</p> <p>2. No (CONTINUE) 8 Don't know (SKIP TO Q317)</p> <p align="right">Q315C</p>	<p>1. Yes (SKIP TO Q317) 3 God's will, fate, etc. (SKIP TO Q317)</p> <p>2. No (CONTINUE) 8 Don't know (SKIP TO Q317)</p> <p align="right">Q315D</p>	<p>1. Yes (SKIP TO Q317) 3. God's will, fate, etc. (SKIP TO Q317)</p> <p>2. No (CONTINUE) 8. Don't know (SKIP TO Q317)</p> <p align="right">Q315E</p>
<p>1. Wanted no more children.</p> <p>2. Wanted to wait longer.</p> <p>8. Don't know.</p> <p align="right">Q316C</p>	<p>1. Wanted no more children.</p> <p>2. Wanted to wait longer.</p> <p>8. Don't know.</p> <p align="right">Q316D</p>	<p>1. Wanted no more children.</p> <p>2. Wanted to wait longer.</p> <p>8. Don't know.</p> <p align="right">Q316E</p>
<p>1 Yes - for tetanus</p> <p>2 Yes - don't know what for</p> <p>3 No (SKIP TO Q319)</p> <p align="right">Q317C</p>	<p>1. Yes - for tetanus</p> <p>2. Yes - don't know what for</p> <p>3. No (SKIP TO Q319)</p> <p align="right">Q317D</p>	<p>1. Yes - for tetanus</p> <p>2. Yes - don't know what for</p> <p>3. No (SKIP TO Q319)</p> <p align="right">Q317E</p>
<p><input type="checkbox"/> Number 8. Don't remember</p> <p align="right">Q318C</p>	<p><input type="checkbox"/> Number 8. Don't remember</p> <p align="right">Q318D</p>	<p><input type="checkbox"/> Number 8. Don't remember</p> <p align="right">Q318E</p>
<p>1. Yes</p> <p>2. No (SKIP TO Q323)</p> <p align="right">Q319C</p>	<p>1. Yes</p> <p>2. No (SKIP TO Q323)</p> <p align="right">Q319D</p>	<p>1. Yes</p> <p>2. No (SKIP TO Q323)</p> <p align="right">Q319E</p>
<p>1. Gov't health centre / clinic</p> <p>2. Government hospital</p> <p>3. Private hospital</p> <p>4. Rural maternity centre</p> <p>5. Private doctor / clinic</p> <p>6. Midwife</p> <p>7. Other (Specify)</p> <p align="right">Q320C</p> <p align="right">Q320COTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>	<p>1. Gov't health centre / clinic</p> <p>2. Government hospital</p> <p>3. Private hospital</p> <p>4. Rural maternity centre</p> <p>5. Private doctor / clinic</p> <p>6. Midwife</p> <p>7. Other (Specify)</p> <p align="right">Q320D</p> <p align="right">Q320DOTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>	<p>1. Gov't health centre / clinic</p> <p>2. Government hospital</p> <p>3. Private hospital</p> <p>4. Rural maternity centre</p> <p>5. Private doctor / clinic</p> <p>6. Midwife</p> <p>7. Other (Specify)</p> <p align="right">Q320E</p> <p align="right">Q320EOTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>
<p><input type="text"/> times 77. Can't remember / more than 9 times</p> <p align="right">Q321C</p>	<p><input type="text"/> times 77. Can't remember / more than 9 times</p> <p align="right">Q321D</p>	<p><input type="text"/> times 77. Can't remember / more than 9 times</p> <p align="right">Q321E</p>
<p><input type="text"/> month 0. Don't remember</p> <p align="right">Q322C</p>	<p><input type="text"/> month 0. Don't remember</p> <p align="right">Q322D</p>	<p><input type="text"/> month 0. Don't remember</p> <p align="right">Q322E</p>
<p>1. A</p> <p>2. B</p> <p>3. Other Government hospital</p> <p>4. Private hospital</p> <p>5. Private nursing home</p> <p>6. Rural maternity centre</p> <p>7. Own home</p> <p>8. Home of relative / friend</p> <p>0. Other (Specify)</p> <p align="right">Q323C</p> <p align="right">Q323COTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>	<p>1. A</p> <p>2. B</p> <p>3. Other Government hospital</p> <p>4. Private hospital</p> <p>5. Private nursing home</p> <p>6. Rural maternity centre</p> <p>7. Own home</p> <p>8. Home of relative / friend</p> <p>0. Other (Specify)</p> <p align="right">Q323D</p> <p align="right">Q323DOTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>	<p>1. A</p> <p>2. B</p> <p>3. Other Government hospital</p> <p>4. Private hospital</p> <p>5. Private nursing home</p> <p>6. Rural maternity centre</p> <p>7. Own home</p> <p>8. Home of relative / friend</p> <p>0. Other (Specify)</p> <p align="right">Q323E</p> <p align="right">Q323EOTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>
<p>1. Doctor</p> <p>2. Trained Nurse / Midwife</p> <p>3. Nana</p> <p>8. Other (Specify)</p> <p>0. No one</p> <p align="right">Q324C</p> <p align="right">Q324COTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>	<p>1. Doctor</p> <p>2. Trained Nurse / Midwife</p> <p>3. Nana</p> <p>8. Other (Specify)</p> <p>0. No one</p> <p align="right">Q324D</p> <p align="right">Q324DOTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>	<p>1. Doctor</p> <p>2. Trained Nurse / Midwife</p> <p>3. Nana</p> <p>8. Other (Specify)</p> <p>0. No one</p> <p align="right">Q324E</p> <p align="right">Q324EOTH <input type="text"/></p> <p align="right">OFFICE USE ONLY</p>
<p>1. Normal delivery</p> <p>2. Forceps delivery</p> <p>3. Caesarean delivery</p> <p align="right">Q325C</p>	<p>1. Normal delivery</p> <p>2. Forceps delivery</p> <p>3. Caesarean delivery</p> <p align="right">Q325D</p>	<p>1. Normal delivery</p> <p>2. Forceps delivery</p> <p>3. Caesarean delivery</p> <p align="right">Q325E</p>
<p>1. Yes (SKIP TO BOX) 2. No</p> <p align="right">Q326C</p>	<p>1. Yes (SKIP TO BOX) 2. No</p> <p align="right">Q326D</p>	<p>1. Yes (SKIP TO BOX) 2. No</p> <p align="right">Q326E</p>
<p>1. <input type="text"/> day(s)</p> <p>2. <input type="text"/> month(s)</p> <p align="right">Q327CD</p> <p align="right">Q327CM</p>	<p>1. <input type="text"/> day(s)</p> <p>2. <input type="text"/> month(s)</p> <p align="right">Q327DD</p> <p align="right">Q327DM</p>	<p>1. <input type="text"/> day(s)</p> <p>2. <input type="text"/> month(s)</p> <p align="right">Q327ED</p> <p align="right">Q327EM</p>

**IF NO OTHER LIVE BIRTHS, CONTINUE WITH Q328 ON THE NEXT PAGE.
OTHERWISE, CONTINUE WITH NEXT BIRTH;
THAT IS, RETURN TO QUESTION 315.**

THE FOLLOWING ELEVEN QUESTIONS (Q328 TO Q338) REFER TO LAST BIRTH

328.	NAME OF LAST BORN CHILD (SEE Q314 - CODE "0")?		
	NAME _____		
329.	Did you have any seizures or convulsions while giving birth to _____ ?		
	[NAME]		
	1. Yes	2. No	9 Don't remember
330.	How many months after _____ 's birth did your period (menstruation) return?		
	[NAME]		
	00. Less than 1 month		
	66. Don't remember		
	77. Not yet returned		
	88. Did not return and have become pregnant again		
331.	How many weeks after _____ 's birth did you resume sexual relations?		
	[NAME]		
	00. Less than 1 week		
	66. Don't remember		
	77. Not yet resumed		
	88. More than 1 year		
332.	Were you tested for HIV/AIDS when you were pregnant with _____ ?		
	[NAME]		
	1. Yes	8. Don't know / Not sure	
	2. No	9. Refused	
333.	Did you breastfeed _____ ?		
	[NAME]		
	1. Yes	2. No (SKIP TO Q337)	
334.	How soon (in minutes, hours <u>or</u> days) after the baby's birth did you first breastfeed that last child, that is, first put him/ her to the breast?		
	[INTERVIEWER: RECORD AS MINUTES, HOURS OR DAYS BUT ENTER ONE ANSWER ONLY].		
	1. [Q3341] [] [] minutes	2. [Q3342] [] [] hours	3. [Q3343] [] [] days
335.	Are you still breastfeeding _____ ?		
	[NAME]		
	1 Yes (SKIP TO BOX BEFORE Q338)	2 No	
336.	How many months did you breastfeed _____ ?		
	[NAME]		
	[Q336] [] [] Months	99.	
	SKIP TO BOX BEFORE QUESTION 338		
337.	Why did you never breastfeed _____ ?		
	[NAME]		
	1. Inconvenient	5. Baby refused	
	2. Had to work	6. Child sick	
	3. Insufficient milk	7. Child died	OFFICE USE ONLY
	4. Had no where to store milk	8. Other (specify): [Q337OTH] [] []	[] []
	SKIP TO QUESTION 339		

**IF CHILD IS MORE THAN 24 MONTHS OLD,SKIP TO
QUESTION 339.**

338. During the last 24 hours, did _____ get any of the following food besides breastmilk? [READ LIST]
[NAME]

		<u>YES</u>	<u>NO</u>
Q338A	A. Fresh Milk	1	2
Q338B	B. Tinned or powdered milk	1	2
Q338C	C. Infant formula	1	2
Q338D	D. Plain water	1	2
Q338E	E. Glucose	1	2
Q338F	F. Sugar water	1	2
Q338	G. Bush tea	1	2
Q338H	H. Juices	1	2
Q338I	I. Solid food (rice, potatoes, bananas, etc.)	1	2
Q338J	J. Puree, pap, baby food	1	2

339. CURRENTLY PREGNANT: [REFER TO QUESTION 305. **DON'T READ QUESTION**].

- Q339**
1. Yes (**CONTINUE**)
 2. No (**SKIP TO Q401**)
 8. Not sure (**SKIP TO Q401**)

340. When you became pregnant (this last time), did you want to become pregnant?

- Q340**
1. Yes (**SKIP TO Q401**)
 2. No (**CONTINUE**)
 3. God's will, fate, etc. (**SKIP TO Q401**)
 8. Don't know / Not sure (**SKIP TO Q401**)

341. Was it that you wanted no more children or just wanted to wait longer before getting pregnant?

- Q341**
1. Wanted no more children
 2. Wanted to wait longer.
 8. Don't know / Not sure

SECTION IV - WOMEN'S HEALTH

Now, I would like to ask you some questions about your health.

401.	<i>Have you ever had a gynecologic examination?</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q401</div>	1. Yes (SKIP TO Q403)	2. No	9. Don't remember

402.	<i>What is the principal reason why you have not had a gynecologic examination?</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q402</div>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Respondent feels that she does not need to go for a gynecologic examination</div> <div style="width: 50%;">9. Waiting time is too long</div> <div style="width: 50%;">2. She is healthy and has no gynecologic problems</div> <div style="width: 50%;">10. Doctor has not recommended</div> <div style="width: 50%;">3. There is no time to go for gynecologic examination</div> <div style="width: 50%;">11. She is embarrassed to have gynecologic examination</div> <div style="width: 50%;">4. She forgets about it</div> <div style="width: 50%;">12. Never thought of it</div> <div style="width: 50%;">5. She does not like gynecologic examinations</div> <div style="width: 50%;">13. Not currently sexually active</div> <div style="width: 50%;">6. It is difficult to get appointment</div> <div style="width: 50%;">14. Never had sexual intercourse (CHECK IF "00" IN Q303)</div> <div style="width: 50%;">7. Does not like the place / facility</div> <div style="width: 50%;">29. Other (specify): <div style="border: 1px solid red; padding: 0 5px;">Q402OTH</div></div> <div style="width: 50%;">8. Does not like the staff</div> <div style="width: 50%;">88. Don't know / Don't remember</div> </div>		
			<div style="border: 1px solid black; padding: 2px; display: inline-block;">OFFICE USE ONLY</div> <div style="display: flex; width: 100px; height: 20px; border: 1px solid black; margin-top: 2px;"></div>
<div style="border: 1px solid black; padding: 5px; display: inline-block; background-color: #f0f0f0;">SKIP TO QUESTION 404</div>			

403.	<i>When was your last <u>routine</u> gynecologic examination (not pregnancy related)? [READ 1-4].</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q403</div>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Within the last year</div> <div style="width: 50%;">4. 3 or more years ago</div> <div style="width: 50%;">2. 1 - 2 years ago (12 - 23 months)</div> <div style="width: 50%;">9. Don't know / Don't remember</div> <div style="width: 50%;">3. 2 - 3 years ago (24 - 35 months)</div> </div>		

404.	<i>A Pap Smear is a test for cancer of the cervix which is done during a pelvic examination by a doctor or nurse. How long has it been since your last Pap smear, if ever?</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q404</div>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Less than 1 year (SKIP TO Q406)</div> <div style="width: 50%;">4. More than 3 years ago (SKIP TO Q406)</div> <div style="width: 50%;">2. 1 year, less than 2 years ago (SKIP TO Q406)</div> <div style="width: 50%;">5. Never had one</div> <div style="width: 50%;">3. 2 to 3 years (SKIP TO Q406)</div> <div style="width: 50%;">7. Don't know / Not sure (SKIP TO Q410)</div> </div>		

405.	<i>What is the main reason why you have never had a Pap smear?</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q405</div>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Never heard of it</div> <div style="width: 50%;">8. She is afraid it could be painful</div> <div style="width: 50%;">2. Doctor has not recommended it</div> <div style="width: 50%;">9. Too embarrassed to get the test or a pelvic examination</div> <div style="width: 50%;">3. She is healthy and has no gynecologic problems</div> <div style="width: 50%;">10. She has no partner / She is not sexually active</div> <div style="width: 50%;">4. She does not feel test is necessary</div> <div style="width: 50%;">29. Other (specify): <div style="border: 1px solid red; padding: 0 5px;">Q405OTH</div></div> <div style="width: 50%;">5. Does not have time to go for test / She forgets about it</div> <div style="width: 50%;">88. Don't know</div> <div style="width: 50%;">6. Never thought of it</div> <div style="width: 50%;">99. Refused to answer</div> <div style="width: 50%;">7. She is afraid of the results</div> </div>		
			<div style="border: 1px solid black; padding: 2px; display: inline-block;">OFFICE USE ONLY</div> <div style="display: flex; width: 100px; height: 20px; border: 1px solid black; margin-top: 2px;"></div>
<div style="border: 1px solid black; padding: 5px; display: inline-block; background-color: #f0f0f0;">ALL SKIP TO QUESTION 410</div>			

406.	<i>After the test, were you told that you needed follow-up treatment?</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q406</div>	1. Yes	2. No (SKIP TO Q410)	9. Don't remember (SKIP TO Q410)

407.	<i>Did you go for this treatment?</i>		
<div style="border: 1px solid red; padding: 2px; width: fit-content; margin: 0 auto;">Q407</div>	1. Yes	2. No (SKIP TO Q410)	9. Don't remember (SKIP TO Q410)

408.	<i>What was this treatment?</i>		
<div style="border: 1px solid red; padding: 2px;">Q408</div>	1. Repeat smear 2. Medicine given - tablets (SKIP TO Q410) 3. Medicine given - cream (SKIP TO Q410)	4. Referred to clinic / special services (SKIP TO Q 410) 8. Other (specify): <div style="border: 1px solid red; padding: 2px;">Q408OTH</div> 9. (SKIP TO Q410)	OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>
409.	<i>When was this repeat smear done?</i>		
<div style="border: 1px solid red; padding: 2px;">Q409M</div>	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> month	<div style="border: 1px solid red; padding: 2px;">Q409Y</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> year	29. Don't remember
410.	<i>How often, if ever, do you examine your breast for lumps?</i>		
<div style="border: 1px solid red; padding: 2px;">Q410</div>	1. Monthly 2. Less than once a month, at least once per year 3. Less than once per year	4. Never (SKIP TO Q413) 7. Don't know / Not sure (SKIP TO Q413) 9.	
411.	<i>When doing your breast examination, did you ever find a suspicious lump?</i>		
<div style="border: 1px solid red; padding: 2px;">Q411</div>	1. Yes	2. No (SKIP TO Q413)	7. Don't know / Not sure (SKIP TO Q413)
412.	<i>When you found the lump, did you go to see a doctor for advice?</i>		
<div style="border: 1px solid red; padding: 2px;">Q412</div>	1. Yes	2. No	7. Don't know / Not sure
413.	<i>Have you ever been taught by a doctor or other health professional to do a breast self-examination to check for lumps?</i>		
<div style="border: 1px solid red; padding: 2px;">Q413</div>	1. Yes	2. No	9. Don't know / Don't remember
414.	<i>How many women in your family who are blood relatives (mother and sisters only) have had breast cancer?</i>		
<div style="border: 1px solid red; padding: 2px;">Q414</div>	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> number	00. None 77. Don't know	
415.	<i>Have you smoked at least 100 cigarettes in your whole life? [100 cigarettes is about 5 packs].</i>		
<div style="border: 1px solid red; padding: 2px;">Q415</div>	1. Yes	2. No (SKIP TO Q418)	
416.	<i>How old were you when you started smoking regularly?</i>		
<div style="border: 1px solid red; padding: 2px;">Q416</div>	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> years	77. Not Regular Smoker 88. Don't know / Don't remember 99. Refused	
417.	<i>Do you smoke cigarettes now?</i>		
<div style="border: 1px solid red; padding: 2px;">Q417</div>	1. Yes	2. No	9. Refused
418.	<i>In your whole life, have you had 12 drinks containing alcohol, that is, beer, wine, vodka, rum, whiskey, etc.?</i>		
<div style="border: 1px solid red; padding: 2px;">Q418</div>	1. Yes	2. No (SKIP TO Q422)	9. Refused (SKIP TO Q422)
419.	<i>In the past month, have you had a drink containing alcohol?</i>		
<div style="border: 1px solid red; padding: 2px;">Q419</div>	1. Yes	2. No (SKIP TO Q421)	8. Don't remember / Refused (SKIP TO Q421)
420.	<i>In the past month, have you had 5 or more drinks of alcohol on one occasion?</i>		
<div style="border: 1px solid red; padding: 2px;">Q420</div>	1. Yes	2. No	8. Don't remember / Refused

421.	<i>How many drinks do you have in a typical week?</i>			
<div style="border: 1px solid red; display: inline-block; padding: 2px;">Q421</div>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> number of drinks	00. No drinks / only a few sips 88. Don't know 99. Refused		

422.	<i>Now, I will ask you about some medical conditions that you may have had. Has a doctor ever told you that you have [READ LIST]</i>				
		<u>YES</u>	<u>NO</u>	<u>DK</u>	<u>REF</u>
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422A</div>	A. Diabetes	1	2	8	9
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422B</div>	B. Anemia	1	2	8	9
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422C</div>	C. Heart disease	1	2	8	9
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422D</div>	D. Pelvic Inflammatory Disease (PID)	1	2	8	9
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422E</div>	E. Urinary tract infection	1	2	8	9
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422F</div>	F. Asthma	1	2	8	9
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q422G</div>	G. Hepatitis B	1	2	8	9

423.	<i>In the past 12 months, have you had a vaginal discharge that was not menstrual?</i>			
<div style="border: 1px solid red; display: inline-block; padding: 2px;">Q423</div>	<div style="display: flex; justify-content: space-between;"> <div> 1. Yes 2. No (SKIP TO Q427) </div> <div> 8. Not sure (SKIP TO Q427) 9. Refused (SKIP TO Q427) </div> </div>			

424.	<i>Along with the discharge, did you have any? [READ LIST]</i>			
		<u>YES</u>	<u>NO</u>	<u>NOT SURE</u>
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q424A</div>	A. Itching	1	2	8
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q424B</div>	B. Painful urination	1	2	8
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q424C</div>	C. Painful intercourse	1	2	8
<div style="border: 1px solid red; display: inline-block; padding: 1px;">Q424D</div>	D. Lower abdominal pain	1	2	8

425.	<i>Did you have any treatment for this(ese) condition(s)?</i>			
<div style="border: 1px solid red; display: inline-block; padding: 2px;">Q425</div>	<div style="display: flex; justify-content: space-between;"> <div>1. Yes</div> <div>2. No (SKIP TO Q427)</div> <div>8. Not sure (SKIP TO Q427)</div> </div>			

426.	<i>Where have you been treated?</i>			
<div style="border: 1px solid red; display: inline-block; padding: 2px;">Q426</div>	<div style="display: flex; justify-content: space-between;"> <div> 1. Government hospital 2. Government health clinic / centre 3. Private hospital 4. Private clinic 5. Private doctor 6. Pharmacy </div> <div> 7. Factory / workplace 8. Self-treatment 9. Treatment recommended by friend / relative 28. Other (specify) Q426OTH 99. Doesn't know / doesn't remember </div> </div> <div style="text-align: right; padding-top: 10px;"> OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> </div>			

427.	<i>In the past 12 months, have you had any sores, warts or ulcers in the genital area?</i>			
<div style="border: 1px solid red; display: inline-block; padding: 2px;">Q427</div>	<div style="display: flex; justify-content: space-between;"> <div> 1. Yes 2. No (SKIP TO Q430) </div> <div> 8. Not sure (SKIP TO Q430) 9. Refused (SKIP TO Q430) </div> </div>			

428.	<i>Did you have treatment for this condition?</i>			
<div style="border: 1px solid red; display: inline-block; padding: 2px;">Q428</div>	<div style="display: flex; justify-content: space-between;"> <div>1. Yes</div> <div>2. No (SKIP TO Q430)</div> <div>8. Not sure (SKIP TO Q430)</div> </div>			

429.	<i>Where have you been treated?</i>			
<div style="border: 1px solid red; padding: 2px;">Q429</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. Government hospital 2. Government health clinic / centre 3. Private hospital 4. Private clinic 5. Private doctor 6. Pharmacy </div> <div style="width: 45%;"> 7. Factory / workplace 8. Self-treatment 9. Treatment friend / relative 28. Other (specify): <div style="border: 1px solid red; padding: 2px;">Q429OTH</div> 99. Doesn't know / doesn't remember </div> </div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">OFFICE USE ONLY</div> <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> </div>		
430.	EVER BEEN PREGNANT? ["YES" IN Q306].			
<div style="border: 1px solid red; padding: 2px;">Q430</div>	<div style="display: flex; justify-content: space-around;"> 1. Yes (CONTINUE) 2. No (SKIP TO Q501) </div>			
431.	<i>During your last (this) pregnancy, how often did you (do you) usually drink beer, stout, wine, rum, liquor or other alcoholic drinks?</i>			
<div style="border: 1px solid red; padding: 2px;">Q431</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 0. Not at all 1. Less than once a month 2. 1 or 2 days a month 3. 1 or 2 days a week </div> <div style="width: 45%;"> 4. 3 or 4 days a week 5. Nearly every day 7. Don't remember 9. </div> </div>			
432.	<i>During your last (this) pregnancy, how many cigarettes did you (do you) usually smoke?</i>			
<div style="border: 1px solid red; padding: 2px;">Q432</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 0. None 1. About one a day or less 2. 2 - 10 a day 3. 11 - 19 a day </div> <div style="width: 45%;"> 4. About 1 pack a day 5. About 2 packs a day 6. More than 2 packs 9. Don't remember </div> </div>			
433.	<i>During your last (this) pregnancy, did you (do you) use any of the following hard drugs? [READ OPTIONS 1 - 4].</i>			
		<u>YES</u>	<u>NO</u>	<u>REFUSED</u>
<div style="border: 1px solid red; padding: 2px;">Q433A</div>	A. Marijuana (ganja)	1	2	9
<div style="border: 1px solid red; padding: 2px;">Q433B</div>	B. Cocaine	1	2	9
<div style="border: 1px solid red; padding: 2px;">Q433C</div>	C. Crack	1	2	9
	Any other? Specify:			
<div style="border: 1px solid red; padding: 2px;">Q433D</div>	D. <div style="border: 1px solid red; padding: 2px;">Q433DOTH</div>	1	2	9
<div style="border: 1px solid red; padding: 2px;">Q433E</div>	E. <div style="border: 1px solid red; padding: 2px;">Q433EOTH</div>	1	2	9
<div style="border: 1px solid red; padding: 2px;">Q433F</div>	F. <div style="border: 1px solid red; padding: 2px;">Q433FOTH</div>	1	2	9
				<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin-right: 5px;"></div> </div> <div style="font-size: small;">OFFICE USE ONLY</div>
434.	<i>During your last (this) pregnancy, was your blood pressure ever checked?</i>			
<div style="border: 1px solid red; padding: 2px;">Q434</div>	<div style="display: flex; justify-content: space-around;"> 1. Yes 2. No (SKIP TO Q436) 9. Don't remember (SKIP TO QUESTION 436) </div>			
435.	<i>During your last (this) pregnancy, were you told more than once that your blood pressure was high?</i>			
<div style="border: 1px solid red; padding: 2px;">Q435</div>	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. Told two or more times 2. Told once only </div> <div style="width: 45%;"> 3. Was never told 9. Don't know / Don't remember </div> </div>			
436.	<i>During your last (this) pregnancy, did you have convulsions or fits?</i>			
<div style="border: 1px solid red; padding: 2px;">Q436</div>	<div style="display: flex; justify-content: space-around;"> 1. Yes 2. No 9. Don't remember </div>			

SECTION V - CONTRACEPTIVE KNOWLEDGE AND USAGE

Now, I would like to talk about methods that people use to avoid becoming pregnant

501. a. READ THE NAME OF EACH METHOD AND MARK "YES" OR "NO" IN COLUMN 1 AS APPROPRIATE.
- b. THEN, IF CONTRACEPTIVE METHOD IS KNOWN BY RESPONDENT, ASK ABOUT USE FOR THAT METHOD AND MARK "YES" OR "NO" IN COLUMN 2 AS APPROPRIATE.

IF NOT KNOWN, GO TO THE NEXT METHOD

Method	COLUMN 1		COLUMN 2			
	Have you ever heard of [METHOD]?		IF HEARD OF, ASK: Have you / your partner ever used it?			
	YES	NO	YES	NO		
A. Female sterilization, tubal ligation	Q501A1	1	2	3	4	Q501A2
B. Male sterilization, vasectomy	Q501B1	1	2	3	4	Q501B2
C. Implant (Norplant)	Q501C1	1	2	3	4	Q501C2
D. Injection	Q501D1	1	2	3	4	Q501D2
E. Pill	Q501E1	1	2	3	4	Q501E2
F. Emergency Contraceptive Protection Pill(ECP)	Q501F1	1	2	3	4	Q501F2
G. IUD / Coil	Q501G1	1	2	3	4	Q501G2
H. Condom	Q501H1	1	2	3	4	Q501H2
I. Foaming Tablets / Creams / Jellies	Q501I1	1	2	3	4	Q501I2
J. Diaphragm	Q501J1	1	2	3	4	Q501J2
K. Abstinence	Q501K1	1	2	3	4	Q501K2
L. Withdrawal	Q501L1	1	2	3	4	Q501L2
M. Rhythm, Calendar, Billings	Q501M1	1	2	3	4	Q501M2
N. Other specify: Q501OTH	Q501N1	1	2	3	4	Q501N2

OFFICE USE ONLY

502. HAS RESPONDENT EVER USED AT LEAST ONE METHOD OF CONTRACEPTION? [AT LEAST ONE "YES" IS MARKED IN COLUMN 2 IN Q501].

Q502

1. Yes 2. No (SKIP TO Q518)

503. How old were you when you first used contraception?

Q503

age

88. Don't remember
99.

504. [IF NEVER HAD ANY LIVE BIRTHS (Q307 = "00"), CODE "00" AND CONTINUE. OTHERWISE ASK]: How many living children did you have when you first used contraception?

Q504

number

00.
29. Don't remember
99.

505. Are you and your partner currently using a method of contraception or doing anything to prevent pregnancy?

Q505

1. Yes 2. No (SKIP TO Q516)

506.	<i>Which method?</i>		
<div style="border: 1px solid red; padding: 2px;">Q506</div>	1. Female sterilization, tubal ligation 2. Male sterilization, vasectomy 3. Implant (Norplant) 4. Injection 5. Pill 6. Emergency Contraceptive Protection (ECP) 7. IUD / Coil	8. Condom 9. Spermicides 10. Diaphragm 11. Withdrawal 12. Rhythm, Calendar, Billings 88. Other (specify): _____	<div style="border: 1px solid red; padding: 2px;">Q506OTH</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> OFFICE USE ONLY
507.	<i>Are you and your partner also using a second method at the same time for either sexually transmitted disease prevention or contraception?</i>		
<div style="border: 1px solid red; padding: 2px;">Q507</div>	1. Yes 2. No (SKIP TO Q509)		
508.	<i>Which method?</i>		
<div style="border: 1px solid red; padding: 2px;">Q508</div>	1. Female sterilization, tubal ligation 2. Male sterilization, vasectomy 3. Implant (Norplant) 4. Injection 5. Pill 6. Emergency Contraceptive Protection (ECP) 7. IUD / Coil	8. Condom 9. Spermicides 10. Diaphragm 11. Withdrawal 12. Rhythm, Calendar, Billings 88. Other (specify): _____	<div style="border: 1px solid red; padding: 2px;">Q508OTH</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> OFFICE USE ONLY
509.	CURRENT PILL USER ["5" IN Q506 OR Q508. CODE WITHOUT ASKING].		
<div style="border: 1px solid red; padding: 2px;">Q509</div>	1. Yes 2. No (SKIP TO Q511)		
510.	<i>What brand of pill do you currently use?</i>		
<div style="border: 1px solid red; padding: 2px;">Q510</div>	1. Minigynon 2. Perle (Low Dose) 3. Ovral 4. Nordette	5. Gynera 6. Tri-Regol 7. Other (specify): _____ 9. Don't know / Not sure	<div style="border: 1px solid red; padding: 2px;">Q510OTH</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> OFFICE USE ONLY
511.	CURRENTLY USING EMERGENCY CONTRACEPTIVE PROTECTION PILL (ECP). ("6" IN Q506 OR Q508):		
<div style="border: 1px solid red; padding: 2px;">Q511</div>	1. Yes 2. No (SKIP TO Q514)		
512.	<i>Where did you get the information about the Emergency Contraceptive Protection Pill (ECP), that is, the Morning After Pill?</i>		
<div style="border: 1px solid red; padding: 2px;">Q512</div>	1. Government hospital 2. Government health clinic / centre 3. Private hospital 4. Private clinic 5. Private doctor	6. Pharmacy 7. Outreach worker 8. Factory / work place 28. Other (specify): _____ 29. Doesn't know / doesn't remember	<div style="border: 1px solid red; padding: 2px;">Q512OTH</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> OFFICE USE ONLY
513.	<i>Where did you get the Emergency Contraceptive Protection Pill (ECP), that is, the Morning After Pill?</i>		
<div style="border: 1px solid red; padding: 2px;">Q513</div>	1. Government hospital 2. Government health clinic / centre 3. Private hospital 4. Private clinic 5. Private doctor 6. Pharmacy	7. Outreach worker 8. Factory / work place 9. Supermarket / shop / bar 28. Other (specify): _____ 29. Doesn't know / doesn't remember	<div style="border: 1px solid red; padding: 2px;">Q513OTH</div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; vertical-align: middle;"></div> OFFICE USE ONLY
<div style="border: 2px solid black; padding: 5px; display: inline-block;">SKIP TO QUESTION 515</div>			

514.	RESPONDENT OR HUSBAND / PARTNER CURRENTLY STERILIZED. ["1" OR "2" IN Q506 OR Q508].	
Q514	1. Yes (SKIP TO Q550)	2. No
515.	CURRENT USER OF ANY OF METHODS 3 - 10 IN Q506 OR Q508.	
Q515	1. Yes (SKIP TO Q522)	2. No (SKIP TO Q531)
516.	<i>What was the last contraceptive method you or your partner used?</i>	
Q516	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Female sterilization, tubal ligation</div> <div style="width: 50%;">8. Condom</div> <div style="width: 50%;">2. Male sterilization, vasectomy</div> <div style="width: 50%;">9. Spermicides</div> <div style="width: 50%;">3. Implant (Norplant)</div> <div style="width: 50%;">10. Diaphragm</div> <div style="width: 50%;">4. Injection</div> <div style="width: 50%;">11. Withdrawal (SKIP TO Q518)</div> <div style="width: 50%;">5. Pill</div> <div style="width: 50%;">12. Rhythm, Calendar, Billings</div> <div style="width: 50%;">6. Morning after pill (ECP)</div> <div style="width: 50%;">88. Other (specify): Q5160TH</div> <div style="width: 50%;">7. IUD / Coil</div> </div>	<div style="text-align: right; font-size: small;">OFFICE USE ONLY</div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
517.	<i>Where did you or your partner get your contraceptive supplies/ orientation?</i>	
Q517	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Government hospital</div> <div style="width: 50%;">7. Outreach worker</div> <div style="width: 50%;">2. Government health clinic / centre</div> <div style="width: 50%;">8. Factory / work place</div> <div style="width: 50%;">3. Private hospital</div> <div style="width: 50%;">9. Supermarket / shop / bar</div> <div style="width: 50%;">4. Private clinic</div> <div style="width: 50%;">88. Other (specify): Q5170TH</div> <div style="width: 50%;">5. Private doctor</div> <div style="width: 50%;">29. Doesn't know / doesn't remember</div> <div style="width: 50%;">6. Pharmacy</div> </div>	<div style="text-align: right; font-size: small;">OFFICE USE ONLY</div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
518.	IF SHE IS PREGNANT NOW [SEE Q305], CIRCLE CODE "3". OTHERWISE ASK: <i>Do you think you are able to get pregnant at the present time?</i>	
Q518	1. Yes (SKIP TO Q520)	3. Currently pregnant (SKIP TO Q537) 4. Not sure, don't know (SKIP TO Q520)
519.	<i>Why not?</i>	
Q519	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Menopause (SKIP TO Q601)</div> <div style="width: 50%;">4. Respondent was told by a doctor that she could not get pregnant (SKIP TO Q601)</div> <div style="width: 50%;">2. Respondent or partner has had an operation for medical reasons which makes pregnancy impossible (SKIP TO Q601)</div> <div style="width: 50%;">5. Respondent is not sexually active (SKIP TO Q537)</div> <div style="width: 50%;">3. Respondent has tried to get pregnant for at least two years without success (or has not gotten pregnant despite at least two years of non-contraception) (SKIP TO Q601)</div> <div style="width: 50%;">6. Postpartum / breastfeeding</div> <div style="width: 50%;">8. Other (specify): Q5190TH</div> <div style="width: 50%;">9.</div> </div>	<div style="text-align: right; font-size: small;">OFFICE USE ONLY</div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
520.	<i>Would you like to become pregnant now?</i>	
Q520	1. Yes (SKIP TO Q543)	3. God's will, fate 9. Don't know, not sure
521.	<i>Why are you or your partner not using a method to prevent pregnancy now?</i>	
Q521	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;">1. Health / medical</div> <div style="width: 50%;">9. Lack of knowledge</div> <div style="width: 50%;">2. Doesn't like contraceptives</div> <div style="width: 50%;">10. Can't afford cost</div> <div style="width: 50%;">3. Had side effects using last method</div> <div style="width: 50%;">11. Religion against</div> <div style="width: 50%;">4. Fear of side effects</div> <div style="width: 50%;">12. Partner wants to become pregnant</div> <div style="width: 50%;">5. Not sexually active</div> <div style="width: 50%;">13. Health care provider / pharmacist won't give them</div> <div style="width: 50%;">6. Postpartum / breastfeeding</div> <div style="width: 50%;">88. Other (specify): Q5210TH</div> <div style="width: 50%;">7. Sources far away</div> </div>	<div style="text-align: right; font-size: small;">OFFICE USE ONLY</div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
<div style="border: 2px solid black; display: inline-block; padding: 5px 20px; font-weight: bold;">SKIP TO QUESTION 537</div>		

<p>522. <i>Where do you or your partner get your contraceptive supplies?</i></p>					
<p>Q522</p>	<p>1. Government hospital</p> <p>2. Government health clinic / centre</p> <p>3. Private hospital (SKIP TO Q528)</p> <p>4. Private clinic (SKIP TO Q528)</p> <p>5. Private doctor (SKIP TO Q528)</p> <p>6. Pharmacy (SKIP TO Q528)</p> <p>7. Outreach worker (SKIP TO Q528)</p>	<p>8. Factory / work place (SKIP TO Q528)</p> <p>9. Supermarket / shop / bar (SKIP TO Q528)</p> <p>77. Rhythm without instruction (SKIP TO Q528)</p> <p>88. Other (specify): Q5220TH (SKIP TO Q528)</p> <p>29. Doesn't know / doesn't remember (SKIP TO Q528)</p>	<p>OFFICE USE</p> <table border="1" style="width: 40px; height: 20px; margin: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>		
<p>523. <i>Do they offer family planning, services there at any time or do they only offer family planning services at special times of day or on certain days?</i></p>					
<p>Q523</p>	<p>1. Can get family planning services at any time (SKIP TO Q527)</p> <p>2. Can only get family planning services at special times or on certain days</p> <p>7. Don't know / Not sure (SKIP TO Q525)</p>				
<p>524. <i>Are the special times or days convenient for you?</i></p>					
<p>Q524</p>	<p>1. Yes (SKIP TO Q527) 2. No 7. Not sure</p>				
<p>525. <i>What time of day is convenient for you to get family planning services?</i> [READ].</p>					
		<u>YES</u>	<u>NO</u>		
Q525A	A. Early morning (Until 10.00 a.m.)	1	2		
Q525B	B. Late morning (10.00 a.m. - noon)	1	2		
Q525C	C. Early afternoon (12.00 a.m. - 3.00 p.m.)	1	2		
Q525D	D. Late afternoon(3.00 p.m. - 6.00 p.m.)	1	2		
Q525E	E. Evenings (6.00 p.m or later)	1	2		
Q525F	F. Not sure	1	2		
Q525G	G. Other (specify): Q525G0TH	1	2		
			<p>OFFICE USE ONLY</p> <table border="1" style="width: 40px; height: 20px; margin: auto;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>		
<p>526. <i>Which day, or days of the week are convenient for you?</i> [DO NOT READ.]</p>					
		<u>YES</u>	<u>NO</u>		
Q526A	A. Monday	1	2		
Q526B	B. Tuesday	1	2		
Q526C	C. Wednesday	1	2		
Q526D	D. Thursday	1	2		
Q526E	E. Friday	1	2		
Q526F	F. Saturday	1	2		
Q526G	G. Sunday	1	2		
<p>527. <i>What are your views on the length of the waiting time at the health centre / hospital? Is it?</i> [READ</p>					
<p>Q527</p>	<p>OPTIONS 1 and 2].</p> <p>1. Too long 2. Not too long 7. Don't know / No opinion</p>				
<p>528. <i>How long does it take you to get to the place?</i></p>					
<p>Q528</p>	<p>1. At home or workplace (SKIP TO Q530) 5. 45 to 59 minutes</p> <p>2. Less than 15 minutes 6. 1 hour or more</p> <p>3. 15 to 29 minutes 9. No response</p> <p>4. 30 to 44 minutes</p>				
<p>529. <i>Is it too far away thus causing a problem for you to get there?</i></p>					
<p>Q529</p>	<p>1. Yes 2. No 7. Not sure</p>				

530.	<i>Do you or your partner pay for the contraceptive method you now use?</i>		
Q530	1. Yes	2. No	7. Don't know, not sure

531.	<i>Would you prefer using a different method than the one you now use to prevent pregnancy?</i>		
Q531	1. Yes	2. No (SKIP TO Q537)	7. Don't know, not sure (SKIP TO Q537)

532.	<i>What method would you most like to use?</i>		
Q532	1. Female sterilization, tubal ligation 2. Male sterilization, vasectomy 3. Implant (Norplant) 4. Injection 5. Pill 6. Morning after pill (ECP) 7. IUD / Coil	8. Condom 9. Foaming tablets / cream / jelly 10. Diaphragm 11. Withdrawal (SKIP TO Q536) 12. Rhythm, Calendar, Billings 88. Other (specify): Q532OTH	OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

533.	<i>Do you know where to obtain the method (or information about this method if it is the Rhythm, Calendar or Billings method [METHOD 12]).</i>		
Q533	1. Yes	2. No (SKIP TO Q536)	

534.	<i>Where? [IF MORE THAN ONE PLACE MENTIONED, CIRCLE THE ONE SHE WOULD MOST LIKELY USE]</i>		
Q534	1. Government hospital 2. Government health clinic / centre 3. Private hospital 4. Private clinic 5. Private doctor 6. Pharmacy	7. Outreach worker 8. Factory / workplace 9. Supermarket / shop / bar 88. Other (specify): Q534OTH 29. Doesn't know / Doesn't remember	OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

535.	<i>How much time would you or your partner have to travel to obtain the supplies or information about the method?</i>		
Q535	1. At home 2. Less than 15 minutes 3. 15 to 29 minutes 4. 30 to 44 minutes	5. 45 to 59 minutes 6. One hour or more 9. No response	

536.	<i>What is the most important reason why you and your partner are not using the other method?</i>		
Q536	1. Family planning or health staff won't prescribe it 2. Too expensive 3. Not available / Unreliable supply / Difficult access 4. Source too far away 5. Don't know how to get it 6. Husband / Partner objects to it	7. Religious reasons 8. Fear of side effects 9. Still thinking about it / Have not made up my mind 28. Other (specify): Q536OTH 29. Don't know / Not sure	OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>

537.	<i>Do you want to have any (more) children (after this pregnancy)?</i>		
Q537	1. Yes (SKIP TO Q543)	3. God's will, fate (SKIP TO Q545)	
	2. No	7. Not sure (SKIP TO Q545)	

Q538	<div style="border: 2px solid black; padding: 5px; margin: 0 auto; width: 80%;"> QUESTIONS 538 - 542 ARE ONLY FOR WOMEN WHO DO NOT WANT MORE CHILDREN </div>
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538.	<i>Would you or your partner be interested in an operation that would prevent you from having any (more) children?</i>		
	1. Yes	2. No (SKIP TO Q549)	7. Not sure

<p>539. <i>Do you know where to go for this operation?</i></p> <p>Q539</p> <div style="display: flex; justify-content: space-between;"> 1. Yes (SKIP TO Q541) 2. No </div>	
<p>540. <i>Do you know where to get information about this operation?</i></p> <p>Q540</p> <div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Q601) </div>	
<p>541. <i>Where?</i> [IF MORE THAN ONE PLACE MENTIONED, MARK THE ONE SHE WOULD MOST LIKELY USE].</p> <p>Q541</p> <div style="display: flex; justify-content: space-between;"> <div> <p>1. Clinic / health centre</p> <p>2. Public hospital</p> </div> <div> <p>3. Private doctor / clinic</p> <p>8. Other (specify): Q5410TH</p> </div> </div>	
<p>542. <i>Since you have (or will have) all the children you want (and you know where to get this operation / information about this operation), why have you not had it?</i> [IF CURRENTLY PREGNANT (MARKED "Yes" IN QUESTION 305), MARK "14"].</p> <p>Q542</p> <div style="display: flex; justify-content: space-between;"> <div> <p>1. Fear of method / side effects</p> <p>2. Fear of operation (cut)</p> <p>3. Thinking about it</p> <p>4. Too young</p> <p>5. Plan to have it soon</p> <p>6. May want more children if situation changes</p> <p>7. Lack of information</p> <p>8. Lack of money</p> </div> <div> <p>9. Current partner opposes</p> <p>10. Advanced age, approaching menopause</p> <p>11. Not sexually active</p> <p>12. Service facility too far away</p> <p>13. Doctor refused to do the operation</p> <p>14. Currently pregnant</p> <p>88. Other(specify): Q5420TH</p> <p>99. No reason stated</p> </div> </div> <div style="text-align: right; margin-top: 10px;"> <p>OFFICE USE ONLY</p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> </div> <div style="text-align: center; margin-top: 10px; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>SKIP TO QUESTION 601</p> </div>	
<div style="border: 1px solid black; padding: 5px; margin: 0 auto; width: 80%;"> <p>QUESTIONS 543 - 548 ARE ONLY FOR WOMEN WHO WANT OR MIGHT WANT MORE CHILDREN</p> </div>	
<p>543. <i>How many (more) children would you like to have (after this pregnancy)?</i></p> <p>Q543 <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; margin: 0 5px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; margin: 0 5px;"></div> children</p> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <p>66. As many as possible</p> <p>77. As many as God sends, up to fate</p> <p>29. Don't know</p> </div>	
<p>544. <i>When would you like to have (the next) one?</i> [ANSWER IN MONTHS IF LESS THAN TWENTY FOUR MONTHS OR IN YEARS IF TWO YEARS OR MORE].</p> <p>Q544M <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; margin: 0 5px;"></div> months Q544Y <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block; margin: 0 5px;"></div> years</p> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <p>00. Now, as soon as possible</p> <p>29. Don't know (month / year)</p> </div>	
<p>545. <i>When you have had all the children you want, would you be interested in an operation that would prevent you from having any (more) children?</i></p> <p>Q545</p> <div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Q549) 7. Not sure </div>	
<p>546. <i>Do you know where to go for this operation?</i></p> <p>Q546</p> <div style="display: flex; justify-content: space-between;"> 1. Yes (SKIP TO Q548) 2. No </div>	
<p>547. <i>Do you know where to get information about this operation?</i></p> <p>Q547</p> <div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Q601) </div>	
<p>548. <i>Where?</i> [IF MORE THAN ONE PLACE MENTIONED, CIRCLE THE ONE SHE WOULD MOST LIKELY USE].</p> <p>Q548</p> <div style="display: flex; justify-content: space-between;"> <div> <p>1. Clinic / health centre</p> <p>2. Public hospital</p> <p>3. Private hospital</p> </div> <div> <p>4. Private doctor / clinic</p> <p>8. Other (specify): Q5480TH</p> </div> </div> <div style="text-align: right; margin-top: 10px;"> <p>OFFICE USE ONLY</p> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> </div> <div style="text-align: center; margin-top: 10px; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;"> <p>SKIP TO QUESTION 601</p> </div>	

549.	<i>Why would you not be interested in this operation?</i>		
<div style="border: 1px solid red; padding: 2px;">Q549</div>	[IF CURRENTLY PREGNANT (MARKED "Yes" IN Q305), MARK "14"].		
	1. Fear of method / side effects 2. Fear of operation (cut) 3. Thinking about it 4. Too young 5. Plan to have it soon 6. May want more children if situation changes 7. Lack of information 8. Lack of money	9. Current partner opposes 10. Advanced age, approaching menopause 11. Not sexually active 12. Service facility too far away 13. Doctor refused to do the operation 14. Currently pregnant 88. Other (specify): <div style="border: 1px solid red; padding: 2px;">Q549OTH</div> 99. No reason stated	OFFICE USE <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>
	SKIP TO QUESTION 601		
550.	<i>Were you or your husband / partner sterilized or both?</i>		
<div style="border: 1px solid red; padding: 2px;">Q550</div>	1. Husband / partner only 2. Respondent only (SKIP TO Q553) 3. Both		
551.	<i>Where was your husband's / partner's vasectomy done?</i>		
<div style="border: 1px solid red; padding: 2px;">Q551</div>	1. Public hospital 2. Private hospital 3. Private doctor / clinic	7. Don't know 8. Other (specify): <div style="border: 1px solid red; padding: 2px;">Q551OTH</div>	OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>
552.	<i>How old were you when your husband / partner had the operation ?</i>		
<div style="border: 1px solid red; padding: 2px;">Q552</div>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> age 99. Don't know / Not sure		
	IF BOTH ARE STERILIZED, CONTINUE OTHERWISE, SKIP TO QUESTION 601.		
553.	<i>Where was your tubal ligation done?</i>		
<div style="border: 1px solid red; padding: 2px;">Q553</div>	1. Public hospital 2. Private hospital	3. Private doctor / clinic 8. Other(specify): <div style="border: 1px solid red; padding: 2px;">Q553OTH</div>	OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>
554.	<i>How old were you when you had the operation ?</i>		
<div style="border: 1px solid red; padding: 2px;">Q554</div>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> age 88. Don't know / Not sure		
555.	<i>In what month and year was the operation done?</i>		
<div style="border: 1px solid red; padding: 2px;">Q555M</div>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div> month <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> year 29. Don't remember		
556.	<i>Did you receive any counselling about family planning methods at this location?</i>		
<div style="border: 1px solid red; padding: 2px;">Q556</div>	1. Yes 2. No		
557.	<i>Are you satisfied with having had the operation?</i>		
<div style="border: 1px solid red; padding: 2px;">Q557</div>	1. Yes (SKIP TO Q601) 2. No		
558.	<i>Why are you not satisfied with the operation?</i>		
<div style="border: 1px solid red; padding: 2px;">Q558</div>	1. Had severe side effects from operation 2. The operation has caused complications 3. It has decreased sexual enjoyment 4. Desires more children because child(ren) died 5. Would like another child 6. Husband / partner treats her differently	7. Has different husband / partner 8. Sterilization is morally wrong 28. Other (specify): <div style="border: 1px solid red; padding: 2px;">Q558OTH</div> 29. Don't know 99. Refused	OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>

**SECTION VI - ATTITUDES TOWARDS CONTRACEPTION,
CHILDBEARING AND CURRENT SEXUAL ACTIVITY**

601. EVER HAD SEX [DO NOT ASK. SEE ANSWER IN QUESTION 303]. <div style="display: flex; justify-content: space-between;"> Q601 <div> 1. Yes (CONTINUE WITH Q602) 2. No (SKIP TO Q625) </div> </div>		
602. Have you had sexual intercourse in the last 30 days? <div style="display: flex; justify-content: space-between;"> Q602 <div> 1. Yes 2. No (SKIP TO Q604) </div> </div>		
603. With how many men have you had sexual intercourse in the last 30 days? <div style="display: flex; justify-content: space-between;"> <div> Q603 <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div> men </div> <div> 77. Don't remember but less than 10 88. Don't remember but 10 or more </div> <div> 98. Don't remember 99. Refused </div> </div> <div style="text-align: center; margin-top: 10px;"> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> SKIP TO QUESTION 605 </div> </div>		
604. Have you had sexual intercourse in the last 3 months? <div style="display: flex; justify-content: space-between;"> Q604 <div> 1. Yes 2. No (SKIP TO Q606) </div> </div>		
605. With how many men have you had sexual intercourse in the last 3 months? <div style="display: flex; justify-content: space-between;"> <div> Q605 <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div> men </div> <div> 77. Don't remember but less than 10 88. Don't remember but 10 or more </div> <div> 98. Don't remember 99. Refused </div> </div>		
606. What was your relationship to the last person with whom you had sexual intercourse? <div style="display: flex; justify-content: space-between;"> <div> Q606 <div> 1. Husband / partner 5. Casual acquaintance 4. Friend </div> </div> <div> 2. Visiting partner 6. Mother's partner 8. Other (specify): _____ </div> <div> 3. Boyfriend 7. Other relative's partner <div style="text-align: right;"> OFFICE USE ONLY <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div> </div> </div> </div> <div style="text-align: right; margin-top: -20px;"> Q606OTH </div>		
607. Did you or the man involved use a contraceptive method the last time you had sexual intercourse? <div style="display: flex; justify-content: space-between;"> Q607 <div> 1. Yes 2. No (SKIP TO Q611) 8. Can't remember / Don't know (SKIP TO Q611) </div> </div>		
608. What was this method? <div style="display: flex; justify-content: space-between;"> <div> Q608 <div> 1. Female sterilization, tubal ligation 4. Injection 7. IUD / Coil 10. Diaphragm 88. Other (specify): _____ </div> </div> <div> 2. Male sterilization, vasectomy 5. Pill 8. Condom 11. Withdrawal </div> <div> 3. Implant (Norplant) 6. Morning after pill (ECP) 9. Foaming tablets / cream / jelly 12. Rhythm, Calendar, Billings </div> </div> <div style="text-align: right; margin-top: -20px;"> Q608OTH <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div> </div>		
609. At the same time, did you or the man involved also use a second contraceptive method for disease prevention or contraception the last time you had sexual intercourse? <div style="display: flex; justify-content: space-between;"> Q609 <div> 1. Yes 2. No (SKIP TO Q611) </div> </div>		
610. What was this method? <div style="display: flex; justify-content: space-between;"> <div> Q610 <div> 1. Female sterilization, tubal ligation 4. Injection 7. IUD / Coil 10. Diaphragm 88. Other (specify): _____ </div> </div> <div> 2. Male sterilization, vasectomy 5. Pill 8. Condom 11. Withdrawal </div> <div> 3. Implant (Norplant) 6. Morning after pill (ECP) 9. Foaming tablets / cream / jelly 12. Rhythm, Calendar, Billings </div> </div> <div style="text-align: right; margin-top: -20px;"> Q610OTH <div style="border: 1px solid black; width: 30px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> <div style="width: 15px; height: 15px; border: 1px solid black;"></div> </div> </div>		

611.	<i>Have you ever asked a partner to use a condom?</i>				
Q611	<div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Q613) </div>				
612.	<i>Has any of the following ever happened to you because you asked a partner to use a condom?</i> [READ A-E]				
		<u>YES</u>	<u>NO</u>	<u>DK</u>	<u>REF</u>
Q612A	A. <i>He refused to wear a condom ?</i>	1	2	8	9
Q612B	B. <i>He refused to have sex with you?</i>	1	2	8	9
Q612C	C. <i>He threatened you with physical violence?</i>	1	2	8	9
Q612D	D. <i>He threatened never to go out with you again?</i>	1	2	8	9
Q612E	E. <i>He forced you to have sex without a condom?</i>	1	2	8	9
613.	<i>Has a partner ever suggested to you that he wear a condom?</i>				
Q613	<div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Q615) </div>				
614.	<i>Did you ever do the following because a partner wanted to wear a condom?</i> [READ OPTIONS A-D]				
		<u>YES</u>	<u>NO</u>	<u>DK</u>	<u>REF</u>
Q614A	A. <i>You refused to let him wear a condom ?</i>	1	2	8	9
Q614B	B. <i>You refused to have sex with him?</i>	1	2	8	9
Q614C	C. <i>You threatened never to go out with him again?</i>	1	2	8	9
Q614D	D. <i>You suspected that he had other partners?</i>	1	2	8	9
615.	CURRENT CONDOM USER:				
Q615	<div style="display: flex; justify-content: space-between;"> 1. Yes (CODE 8 in Q506 OR Q508) 2. No (SKIP TO Q619) </div>				
616.	<i>Why do you and your partner use condoms?</i>				
Q616	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. Prevent pregnancy 2. Prevent sexually transmitted diseases (STDs) including AIDS 3. Both </div> <div style="width: 45%;"> 8. Other (specify): Q6160TH 9. Don't know / Don't remember 5. </div> </div> <div style="text-align: right; margin-top: 5px;"> OFFICE USE <div style="border: 1px solid black; width: 40px; height: 20px; display: flex; align-items: center; justify-content: center;"> <div style="border: 1px solid black; width: 15px; height: 15px;"></div> <div style="border: 1px solid black; width: 15px; height: 15px;"></div> </div> </div>				
617.	<i>How often do you use condoms when you have sexual intercourse with a steady partner?</i> [READ OPTIONS 1- 4]				
Q617	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. <i>Always</i> 2. <i>Most of the time</i> 3. <i>Seldom</i> </div> <div style="width: 45%;"> 4. <i>Never</i> 5. <i>Has no steady partner</i> 9. <i>Refused to answer</i> </div> </div>				
618.	<i>How often do you use condoms when you have sexual intercourse with a non-steady partner?</i> [READ OPTIONS 1- 4]				
Q618	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> 1. <i>Always</i> 2. <i>Most of the time</i> 3. <i>Seldom</i> </div> <div style="width: 45%;"> 4. <i>Never</i> 8. <i>Never had non-steady partner</i> 9. <i>Refused to answer</i> </div> </div>				

619.	<i>Have you ever in your lifetime been forced to have sexual intercourse?</i>			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q619</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 1. Yes 2. No (SKIP TO Q622) </div> <div> 7. Not sure (SKIP TO Q622) 9. Refused (SKIP TO Q622) </div> </div>			
620.	<i>How many times?</i>			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q620</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 0. One time 1. Two to five times 2. Six to ten times </div> <div> 3. More than ten times 4. Not sure 9. Refused </div> </div>			
621.	<i>By whom?</i> [INTERVIEWER: IF MORE THAN ONE INDIVIDUAL, ASK: WHO WAS IT THE LAST TIME].			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q621</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 1. Husband/Common-law partner 2. Visiting partner 3. Boyfriend 4. Friend 5. Casual acquaintance 6. Mother's partner </div> <div> 7. Father 8. Other relative / relative of partner 9. Gang rape 29. Other (specify): 99. Refusal </div> </div>	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q6210TH</div>	<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto;"></div>	OFFICE USE ONLY
622.	<i>"Have you ever received any money or goods in exchange for sex?"</i>			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q622</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 1. Yes 2. No (SKIP TO Q625) </div> <div> 3. Don't remember (SKIP TO Q625) 9. Refused (SKIP TO Q625) </div> </div>			
623.	<i>How many times?</i>			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q623</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 0. One time 1. Two to five times 2. Six to ten times </div> <div> 3. More than ten times 4. Not sure 9. Refused </div> </div>			
624.	<i>Were you in school when this (any of these) transaction (s) occurred?</i>			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q624</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 1. In school 2. Out of school </div> <div> 3. Both in school and out of school 8. Don't remember </div> </div>			
625.	<i>Over the past year, have you ever had..</i> [READ ALTERNATIVES].			
		<u>YES</u>	<u>NO</u>	<u>REF</u>
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q625A</div> A. A discharge from the sex organ due to disease?	1	2	9
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q625B</div> B. A sore on the sex organ?	1	2	9
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q625C</div> C. To visit a doctor / clinic / other health centre for a sexually transmitted illness (venereal disease) such as gonorrhea or syphilis?	1	2	9
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q625D</div> D. To treat yourself for a sexually transmitted illness such as gonorrhea or syphilis?	1	2	9
626.	<i>In your opinion, if a woman takes the pill correctly, how sure can she be that she will not become pregnant?</i> [READ OPTIONS 1 - 4]			
	<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q626</div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> 1. Completely sure 2. Almost sure 3. Some risk of pregnancy </div> <div> 4. Not sure at all 9. Don't know </div> </div>			

627.	<i>In your opinion, how safe for a woman's health is the pill?</i> [READ OPTIONS 1-4]						
Q627	<table style="width: 100%;"> <tr> <td style="width: 50%;">1. <i>Completely safe</i></td> <td style="width: 50%;">4. <i>Unsafe</i></td> </tr> <tr> <td>2. <i>Almost completely safe</i></td> <td>7. <i>Depends on the woman</i></td> </tr> <tr> <td>3. <i>Not very safe</i></td> <td>9. <i>Don't know</i></td> </tr> </table>	1. <i>Completely safe</i>	4. <i>Unsafe</i>	2. <i>Almost completely safe</i>	7. <i>Depends on the woman</i>	3. <i>Not very safe</i>	9. <i>Don't know</i>
1. <i>Completely safe</i>	4. <i>Unsafe</i>						
2. <i>Almost completely safe</i>	7. <i>Depends on the woman</i>						
3. <i>Not very safe</i>	9. <i>Don't know</i>						
628.	<i>In your opinion, how safe for a woman's health is the contraceptive injection?</i> [READ OPTIONS 1-4].						
Q628	<table style="width: 100%;"> <tr> <td style="width: 50%;">1. <i>Completely safe</i></td> <td style="width: 50%;">4. <i>Unsafe</i></td> </tr> <tr> <td>2. <i>Almost completely safe</i></td> <td>7. <i>Depends on the woman</i></td> </tr> <tr> <td>3. <i>Not very safe</i></td> <td>9. <i>Don't know</i></td> </tr> </table>	1. <i>Completely safe</i>	4. <i>Unsafe</i>	2. <i>Almost completely safe</i>	7. <i>Depends on the woman</i>	3. <i>Not very safe</i>	9. <i>Don't know</i>
1. <i>Completely safe</i>	4. <i>Unsafe</i>						
2. <i>Almost completely safe</i>	7. <i>Depends on the woman</i>						
3. <i>Not very safe</i>	9. <i>Don't know</i>						
629	<i>In your opinion. If a couple uses a condom correctly, how sure can the woman be that she will not become pregnant?</i>						
Q629	[READ OPTIONS 1-4]. <table style="width: 100%;"> <tr> <td style="width: 50%;">1. <i>Completely sure</i></td> <td style="width: 50%;">4. <i>Not sure at all</i></td> </tr> <tr> <td>2. <i>Almost sure</i></td> <td>9. <i>Don't know</i></td> </tr> <tr> <td>3. <i>Some risk of pregnancy</i></td> <td></td> </tr> </table>	1. <i>Completely sure</i>	4. <i>Not sure at all</i>	2. <i>Almost sure</i>	9. <i>Don't know</i>	3. <i>Some risk of pregnancy</i>	
1. <i>Completely sure</i>	4. <i>Not sure at all</i>						
2. <i>Almost sure</i>	9. <i>Don't know</i>						
3. <i>Some risk of pregnancy</i>							
630.	<i>In your opinion, if a couple uses a condom correctly, how, sure can the woman be that she will not get a sexually transmitted disease?</i> [READ OPTIONS 1-4].						
Q630	<table style="width: 100%;"> <tr> <td style="width: 50%;">1. <i>Completely sure</i></td> <td style="width: 50%;">4. <i>Not sure at all</i></td> </tr> <tr> <td>2. <i>Almost sure</i></td> <td>9. <i>Don't know</i></td> </tr> <tr> <td>3. <i>Some risk of getting STD</i></td> <td></td> </tr> </table>	1. <i>Completely sure</i>	4. <i>Not sure at all</i>	2. <i>Almost sure</i>	9. <i>Don't know</i>	3. <i>Some risk of getting STD</i>	
1. <i>Completely sure</i>	4. <i>Not sure at all</i>						
2. <i>Almost sure</i>	9. <i>Don't know</i>						
3. <i>Some risk of getting STD</i>							
631.	<i>Have you ever tried to obtain contraceptives and been refused?</i>						
Q631	<table style="width: 100%;"> <tr> <td style="width: 50%;">1. <i>Yes</i></td> <td style="width: 50%;">8. <i>Don't remember (SKIP TO Q634)</i></td> </tr> <tr> <td>2. <i>No (SKIP TO Q634)</i></td> <td>9.</td> </tr> </table>	1. <i>Yes</i>	8. <i>Don't remember (SKIP TO Q634)</i>	2. <i>No (SKIP TO Q634)</i>	9.		
1. <i>Yes</i>	8. <i>Don't remember (SKIP TO Q634)</i>						
2. <i>No (SKIP TO Q634)</i>	9.						
632.	<i>How many times?</i>						
Q632	<table style="width: 100%;"> <tr> <td style="width: 50%;">1. <i>Five times or less</i></td> <td style="width: 50%;">4. <i>Not sure</i></td> </tr> <tr> <td>2. <i>Six to ten times</i></td> <td>9. <i>Refused</i></td> </tr> <tr> <td>3. <i>More than ten times</i></td> <td></td> </tr> </table>	1. <i>Five times or less</i>	4. <i>Not sure</i>	2. <i>Six to ten times</i>	9. <i>Refused</i>	3. <i>More than ten times</i>	
1. <i>Five times or less</i>	4. <i>Not sure</i>						
2. <i>Six to ten times</i>	9. <i>Refused</i>						
3. <i>More than ten times</i>							
633.	<i>Where was it and what was the gender of the (last) person(s) who refused to provide the contraceptive?</i> [READ LIST].						
	Gender of Refuser						
	<table style="width: 100%;"> <tr> <th></th> <th style="text-align: center;"><u>Male</u></th> <th style="text-align: center;"><u>Female</u></th> <th style="text-align: center;"><u>DK/DR</u></th> </tr> </table>		<u>Male</u>	<u>Female</u>	<u>DK/DR</u>		
	<u>Male</u>	<u>Female</u>	<u>DK/DR</u>				
Q633A	A. <i>Government hospital</i>	1	2	8			
Q633B	B. <i>Government health clinic / centre</i>	1	2	8			
Q633C	C. <i>Private hospital</i>	1	2	8			
Q633D	D. <i>Private clinic</i>	1	2	8			
Q633E	E. <i>Private doctor</i>	1	2	8			
Q633F	F. <i>Pharmacy</i>	1	2	8			
Q633G	G. <i>Outreach worker</i>	1	2	8			
Q633H	H. <i>Factory / work place</i>	1	2	8			
Q633I	I. <i>Supermarket / shop / bar</i>	1	2	8			
Q633J	J. <i>Any other place (specify):</i>	1	2	8			
<div style="display: flex; justify-content: space-between; align-items: center; margin-top: 10px;"> <div style="border: 1px solid black; padding: 2px 5px;">Q6330TH</div> <div style="border: 1px solid black; padding: 2px 5px;">OFFICE USE ONLY</div> </div>							

Now, I would like to ask you about your attitude towards childbearing.

634. <i>If you could choose exactly the number of children to have in your whole life, how many would that be?</i>			
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q634</div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> number	77. Fate, up to God 98. Don't know	
635. <i>In Jamaica, what is the earliest age a woman can legally consent to having sexual intercourse?</i>			
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q635</div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> years	88. There is no legal limit 77. Doesn't know / Doesn't have an opinion 99.	
636. <i>What is the punishment for the man if it can be proved that he had sex with a girl under sixteen years of age?</i>			
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q636</div>	1. None 2. Go to jail	7. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q636OTH</div> 8. Don't know 9.	OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>
637. <i>In your opinion, at what age is a woman responsible enough to have her first child?</i>			
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q637</div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> years	55. Depends on circumstances 66. One year after entering first union 77. When she is in a stable union	88. Other (specify): <div style="border: 1px solid red; padding: 2px; display: inline-block;">Q637OTH</div> 98. Doesn't have an opinion 99.
638. <i>How old do you think it is best for a child to be before another child is born?</i>			
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q638</div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> months	88. Fate, up to God 66. No opinion 77. More than 5 years	
639. <i>How old do you think a child should be before the mother stops breastfeeding him / her?</i>			
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q639</div>	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div> months	77. For as long as possible 29. Don't know	

SECTION VII - FAMILY LIFE AND SEX EDUCATION
[FOR RESPONDENTS AGED 15 - 24 YEARS]

701.	AGE OF RESPONDENT: [SEE QUESTION 102]		
<div style="border: 1px solid red; padding: 2px;">Q701</div>	1. 15 - 24 [CONTINUE WITH Q702]	2. 25 - 49 [SKIP TO STATEMENT BEFORE Q901]	

702.	<i>For young people your age who have sexual intercourse, what do you think is the most appropriate method to use to avoid pregnancy?</i>		
<div style="border: 1px solid red; padding: 2px;">Q702</div>	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"> 1. Female sterilization, tubal ligation 2. Male sterilization, vasectomy 3. Implant (Norplant) 4. Injection 5. Pill 6. Morning after pill (ECP) 7. IUD / Coil 8. Condom 9. Foaming tables / creams / jellies </div> <div style="width: 50%;"> 10. Diaphragm 11. Withdrawal 12. Rhythm 13. Billings method 14. Abstinence 00. None 29. Doesn't know 99. Doesn't answer 88. Other (specify): _____ </div> </div>	<div style="border-left: 1px solid black; border-right: 1px solid black; border-bottom: 1px solid black; width: 100px; height: 100px; margin: 0 auto;"></div> <p>SKIP TO Q704</p>	<div style="border: 1px solid black; padding: 5px; text-align: center;"> <div style="border: 1px solid black; display: inline-block; padding: 2px;">Q7020TH</div> </div> <div style="text-align: center; margin-top: 10px;"> OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div> </div>

703.	<i>Could you afford to use this method?</i>		
<div style="border: 1px solid red; padding: 2px;">Q703</div>	1. Yes	2. No	9. Doesn't know

704.	[FOR THOSE WHO HAVE NEVER HAD A PERIOD - (Q301 = "77"), ASK]: <i>Have you ever received any information from your parents or guardians about menstruation?</i> [IN ALL OTHER CASES, ASK]: <i>Before you started having periods, did you ever receive any information from your parents or guardians about menstruation?</i>		
<div style="border: 1px solid red; padding: 2px;">Q704</div>	1. Yes	2. No (SKIP TO Q706)	9. Doesn't know (SKIP TO Q706)

705.	<i>How difficult was it to discuss the subject of menstruation with your parents or guardians?</i>		
<div style="border: 1px solid red; padding: 2px;">Q705</div>	1. Easy	3. Extremely difficult	8. Don't know / Not sure
	2. Somewhat difficult		

706.	[FOR THOSE WHO HAVE NEVER HAD A PERIOD (Q301 = "77"), ASK]: <i>Have you ever received any information from your parents or guardians about pregnancy and how it occurs?</i> [IN ALL OTHER CASES, ASK]: <i>Before you started having periods, did you ever receive any information from your parents or guardians about pregnancy and how it occurs?</i>		
<div style="border: 1px solid red; padding: 2px;">Q706</div>	1. Yes	2. No (SKIP TO Q708)	9. Doesn't know (SKIP TO Q708)

707.	<i>How difficult was it to discuss the subject of pregnancy with your parents or guardians?</i>		
<div style="border: 1px solid red; padding: 2px;">Q707</div>	1. Easy	2. Somewhat difficult	3. Extremely difficult
			9. Don't know / Not sure

708.	[FOR THOSE WHO HAVE NEVER HAD SEX (Q303 = "00"), ASK]: <i>Have you ever received any information from your parents or guardians about pregnancy and how it occurs?</i> [IN ALL OTHER CASES, ASK]: <i>Before you started having sex, did you ever receive any information from your parents or guardians about pregnancy and how it occurs?</i>		
<div style="border: 1px solid red; padding: 2px;">Q708</div>	1. Yes	2. No (SKIP TO Q710)	9. Doesn't know (SKIP TO Q710)

709.	<i>How difficult was it to discuss the subject of sexual relations with your parents or guardians?</i>										
Q709	1. Easy 2. Somewhat difficult					3. Extremely difficult 9. Don't know / Not sure					
710.	<i>Have you ever had a class or course about family life or sex education <u>in school</u>?</i>										
Q710	1. Yes			2. No (SKIP TO Q718)			9. Doesn't know (SKIP TO Q718)				
711.	<i>How many weeks did the class or course last? [IF LESS THAN 1 WEEK, CODE AS '00']</i>										
Q711	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> weeks					97. Many weeks, don't remember number 29. Don't remember at all					
712.	<i>On the average, how many hours per week was the class or course taught?</i>										
Q712	[IF LESS THAN ONE HOUR, CODE AS "00"].										
	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> hours					97. Many hours, don't remember number 29. Don't remember at all					
713.	<i>What grade of schooling (level and years) had you reached when you had this first class or course?</i>										
	<u>LEVEL</u>		<u>YEARS</u>							<u>NS</u>	
Q713A	A. Primary/All age	0	1	2	3	4	5	6	7	8+	9
Q713B	B. Junior High	0	1	2	3	4	5	6	7	8+	9
Q713C	C. Secondary	0	1	2	3	4	5	6	7	8+	9
Q713D	D. Post-secondary	0	1	2	3	4	5	6	7	8+	9
Q713E	E. Doesn't remember										
714.	<i>How old were you at that time?</i>										
Q714	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> age					29. Don't remember at all					
715.	<i>Who was the main person who taught this first class or course ?</i>										
Q715	1. School teacher 2. Counselor or psychologist					3. Nurse 8. Other (specify): Q7150TH					OFFICE USE ONLY <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div>
716.	<i>Did this first class or course in school include information about ? [READ]</i>										
		<u>YES</u>				<u>NO</u>			<u>DR</u>		
Q716A	A. The human reproductive system	1				2			8		
Q716B	B. The woman's menstrual cycle or period	1				2			8		
Q716C	C. Pregnancy and how it occurs	1				2			8		
Q716D	D. Modern birth control methods such as the pill, IUD or injections	1				2			8		
Q716E	E. Condoms	1				2			8		
Q716F	F. Disease that can result from sexual contact	1				2			8		
Q716G	G. Abstinence	1				2			8		
717.	<i>Did the class or course include information on the following services available for adolescents? [READ].</i>										
		<u>YES</u>				<u>NO</u>			<u>DK</u>		
Q717A	A. Counselling	1				2			7		
Q717B	B. Clinic services	1				2			7		
Q717C	C. Distribution of contraceptives	1				2			7		
718.	<i>At what age do you think family life or sex education should begin in schools?</i>										
Q718	<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> age					77. It should not be taught in schools 29. Doesn't know 99.					

729. How helpful have you found the following sources? [READ]									
		<u>Very helpful</u>	<u>Somewhat helpful</u>	<u>Not helpful</u>	<u>Not a source</u>				
Q729A	A. Parents / guardians	1	2	3	4				
Q729B	B. Sisters or brothers	1	2	3	4				
Q729C	C. Telephone Counsellor (Marge Roper)	1	2	3	4				
Q729D	D. Teachers	1	2	3	4				
Q729E	E. Peers / friends	1	2	3	4				
Q729F	F. Radio	1	2	3	4				
Q729G	G. Television	1	2	3	4				
Q729H	H. Audiovisual materials	1	2	3	4				
Q729I	I. Printed materials	1	2	3	4				
OFFICE USE ONLY									
Q729J	J. _____ Q729JOTH	1	2	3	<table border="1" style="width: 30px; height: 20px; border-collapse: collapse;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>				
Q729K	K. _____ Q729KOTH	1	2	3	<table border="1" style="width: 30px; height: 20px; border-collapse: collapse;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>				

730. What are the most effective sources to learn about sexuality, that is, which sources cause you to change the way you behave?									
		<u>Mentioned</u>		<u>Not mentioned</u>					
Q730A	A. Printed materials	1		2					
Q730B	B. Audiovisual materials	1		2					
Q730C	C. Radio/Television advertisements	1		2					
Q730D	D. Radio/Television documentaries	1		2					
Q730E	E. One to one discussion	1		2					
Q730F	F. Classroom discussion	1		2					
Q730G	G. Lecture	1		2					
OFFICE USE ONLY									
Q730H	H. Other (specify): _____ Q730HOTH	1		2	<table border="1" style="width: 30px; height: 20px; border-collapse: collapse;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>				
Q730I	I. _____ Q730IOTH	1		2	<table border="1" style="width: 30px; height: 20px; border-collapse: collapse;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>				

731. Have you ever heard a family planning message on the radio or television or read one in a newspaper?			
Q731	1. Yes 2. No	3. Don't know / Not sure 9. Refused to answer	

732. Within the past six months, have you seen or heard any of the following NFPB programmes? [READ OPTIONS A TO E].									
		<u>YES</u>		<u>NO</u>					
Q732A	A. Teen Seen	1		2					
Q732B	B. NFPB Youth Forum	1		2					
Q732C	C. Radio Drama for men	1		2					
Q732D	D. Radio commercials	1		2					
Q732E	E. TV commercials	1		2					
OFFICE USE ONLY									
Q732F	F. Other (specify): _____ Q732FOTH	1		2	<table border="1" style="width: 30px; height: 20px; border-collapse: collapse;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>				
Q732G	G. _____ Q732GOTH	1		2	<table border="1" style="width: 30px; height: 20px; border-collapse: collapse;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>				

IF NO PROGRAMME(S) SEEN OR HEARD (ALL ANSWERED "2"), SKIP TO QUESTION 735 OTHERWISE, CONTINUE

733. Did any of these programmes cause you to behave differently?					
Q733					
1. Yes		2. No (SKIP TO Q735)		8. Don't know (SKIP TO Q735)	

734. Which? [READ OPTIONS A TO E].					
		<u>YES</u>		<u>NO</u>	
Q734A	A. Teen Seen	1		2	
Q734B	B. NFPB Youth Forum	1		2	
Q734C	C. Radio Drama for men	1		2	
Q734D	D. Radio commercials	1		2	
Q734E	E. TV commercials	1		2	
Other (specify):					
Q734F	F. _____	Q734FOTH	1	2	OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; flex-wrap: wrap;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> </div>
Q734G	G. _____	Q734GOTH	1	2	

735. Have you ever heard any messages on the YOUTH.NOW program?					
Q735					
1. Yes		2. No (SKIP TO Q737)		9. Don't know / Not sure (SKIP TO Q737)	

736. Did any of these messages include information on the following? [READ].							
		<u>YES</u>		<u>NO</u>		<u>DK/DR</u>	
Q736A	A. Type of services available to adolescents	1		2		8	
Q736B	B. Using dual methods	1		2		8	
Q736C	C. Sources of information	1		2		8	
Q736D	D. Sources of contraception	1		2		8	
Q736E	E. Popular myths and beliefs relating to contraception	1		2		8	

737. Have you ever been involved in extra-curricular activities which could help you to prevent early sexual activity?					
Q737					
1. Yes		8. Don't remember (SKIP TO STATEMENT BEFORE Q801)			
2. No (SKIP TO STATEMENT BEFORE Q801)		9. Refused (SKIP TO STATEMENT BEFORE Q801)			

738. What were these activities?					
		<u>YES</u>		<u>NO</u>	
Q738A	A. Sporting activities	1		2	
Q738B	B. Debating	1		2	
Q738C	C. Church activities	1		2	
Q738D	D. Educational activities (extra lessons, etc.)	1		2	
Q738E	E. Social activities	1		2	
Other (specify):					
Q738F	F. _____	Q738FOTH	1	2	OFFICE USE ONLY <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; flex-wrap: wrap;"> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px; margin: 2px;"></div> </div>
Q738G	G. _____	Q738GOTH	1	2	
Q738H	H. _____	Q738HOTH	1	2	

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807.	Where did you or your partner get this method used during your first sexual intercourse?									
Q807	[IN THE CASE OF BILLINGS, CALENDAR OR RHYTHM METHOD, ASK]: Where did you or your partner receive orientation?									
	1. Government hospital	5. Private doctor	9. Supermarket / shop / bar	OFFICE USE ONLY						
	2. Government health clinic/centre	6. Pharmacy	77. Rhythm without instruction	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>						
	3. Private hospital	7. Outreach worker	88. Other (specify): Q807OTH							
	4. Private clinic	8. Factory / work place	29. Doesn't know / doesn't remember							

808.	Whose decision was it to use this method? You alone, your partner alone, or was it made together?									
Q808	<div style="display: flex; justify-content: space-between;"> <div>1. My decision</div> <div>3. Decision made together</div> </div> <div style="display: flex; justify-content: space-between;"> <div>2. Partner's decision</div> <div>9. Doesn't remember</div> </div>									
<div style="border: 2px solid black; padding: 5px; display: inline-block;">ALL SKIP TO QUESTION 810</div>										

809.	Why didn't you or your partner use a contraceptive method during this first sexual intercourse?									
Q809	<div style="display: flex; justify-content: space-between;"> <div>1. Didn't expect to have sexual relations at that time</div> <div>6. Too embarrassed to get method</div> </div> <div style="display: flex; justify-content: space-between;"> <div>2. Partner was against using it</div> <div>7. Wanted to become pregnant</div> </div> <div style="display: flex; justify-content: space-between;"> <div>3. Didn't know of any methods</div> <div>8. Other (specify): Q809OTH</div> </div> <div style="display: flex; justify-content: space-between;"> <div>4. Knew of methods but didn't know where to get them</div> <div>29. Doesn't know</div> </div> <div style="display: flex; justify-content: space-between;"> <div>5. Wanted to use something but couldn't get it at that moment</div> <div>98. No response</div> </div>									
OFFICE USE ONLY										
<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>										

810.	EVER HAD A LIVE BIRTH: [SEE ANSWER TO Q307]									
Q810	<div style="display: flex; justify-content: space-between;"> <div>1. Yes (CONTINUE)</div> <div>2. No (SKIP TO STATEMENT BEFORE Q901)</div> </div>									

811.	When pregnant with your first child, were you still in school?									
Q811	<div style="display: flex; justify-content: space-between;"> <div>1. Yes</div> <div>2. No (SKIP TO Q814)</div> </div>									

812.	What grade of schooling (level and years) had you reached?										
	LEVEL	<u>0</u>	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>	<u>6</u>	<u>7</u>	<u>8+</u>	<u>NS</u>
Q812A	A. Primary/All age	0	1	2	3	4	5	6	7	8+	9
Q812B	B. Junior High	0	1	2	3	4	5	6	7	8+	9
Q812C	C. Secondary	0	1	2	3	4	5	6	7	8+	9
Q812D	D. Post-secondary	0	1	2	3	4	5	6	7	8+	9
Q812E	E. Doesn't remember	0									

813.	After the first child was born, did you return to school?									
Q813	<div style="display: flex; justify-content: space-between;"> <div>1. Yes</div> <div>2. No</div> </div>									

814.	Do you have a child who is / children who are alive today for anyone other than your present husband / partner?									
Q814	<div style="display: flex; justify-content: space-between;"> <div>1. Yes</div> <div>2. No (SKIP TO Q820)</div> <div>9. Refused to answer (SKIP TO Q820)</div> </div>									

Now, the next four questions [Q815 - Q818] are about your youngest child with that previous partner.

Q815	815. Does the baby father help you with the care or financial support of the child? [READ RESPONSES 1 - 3]					
	1. At all times 2. Sometimes	3. Seldom 4. No (SKIP TO Q818)				
	816. What kind of help does he give you? [READ OPTIONS A TO C].					
Q816A	A. Child care	<u>YES</u> 1	<u>NO</u> 2			
Q816B	B. Financial help	1	2			
Q816C	C. Gifts	1	2			
	Other (specify):			OFFICE USE ONLY		
Q816D	D. _____ Q816DOTH	1	2	<table border="1" style="display: inline-table; width: 40px; height: 20px;"> <tr><td></td><td></td></tr> </table>		
Q816E	E. _____ Q816EOTH	1	2	<table border="1" style="display: inline-table; width: 40px; height: 20px;"> <tr><td></td><td></td></tr> </table>		
	817. Do you think the help he gives you is important or not important in taking care of his child?					
Q817	1. Important 2. Not important					
	818. Who is the main source of help?					
Q818	1. Baby's father 2. Current partner 3. Maternal grandparent(s) 4. Paternal grandparent(s) 5. Friend / neighbour		6. Mother's relative 7. Father's relative 8. Don't receive help 88. Other (specify): _____ Q818OTH			
			OFFICE USE ONLY			
	819. How many children do you have who are still alive?					
Q819	1. One living child (SKIP TO Q823) 2. Two or more living children (CONTINUE) 2 9.					
	820. Does any one help with the care or financial support of your child / children with your current husband / partner?					
Q820	1. Yes 8. No other (living) children with current husband / partner (SKIP TO Q823) 2. No (SKIP TO Q823)					
	821. What kind of help do you get?					
Q821A	A. Child care	<u>YES</u> 1	<u>NO</u> 2			
Q821B	B. Financial help	1	2			
Q821C	C. Gifts	1	2			
	Other (specify):			OFFICE USE ONLY		
Q821D	D. _____ Q821DOTH	1	2	<table border="1" style="display: inline-table; width: 40px; height: 20px;"> <tr><td></td><td></td></tr> </table>		
	822. Who is the main source of help?					
Q822	1. Husband / partner 2. Respondent's mother 3. Respondent's grandmother 4. Other relative		5. Partner's parents / relative 6. Partner's grandparents 7. Partner's other relative 8. Other (specify): _____ Q822OTH			
			OFFICE USE ONLY			

823.	PREGNANT NOW	[DO NOT ASK. CHECK Q305 OR Q311]	
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q823</div>	<div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Q825) 8. Doesn't know (SKIP TO Q825) </div>		
824.	What type of support do you get from this prospective "baby father"? [READ RESPONSES].		
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q824</div>	<div style="display: flex; justify-content: space-between;"> <div> 1. None/ No relationship at this time 2. Gives emotional support only 3. Gives financial support only </div> <div> 4. Gives emotional <u>and</u> financial support 8. Other support (specify): _____ </div> </div>		<div style="text-align: right; font-size: small;">OFFICE USE ONLY</div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q824OTH</div>			
825.	Do you and your partner discuss the type of family you want to have together such as ? [READ]		
		YES	NO
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q825A</div>	A. Number of children you may have in the future	1	2
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q825B</div>	B. Spacing of children	1	2
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q825C</div>	C. Adoption	1	2
826.	Do you feel loved by and connected to at least one significant adult?		
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q826</div>	<div style="display: flex; justify-content: space-between;"> 1. Yes 2. No (SKIP TO Section IX) 8. Doesn't answer (SKIP TO Section IX) </div>		
827.	What is the relationship of this adult to you?		
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q827</div>	<div style="display: flex; justify-content: space-between;"> <div> 1. Husband / Common-law partner 2. Visiting partner 3. Boyfriend 4. Friend 5. Casual acquaintance </div> <div> 6. Mother 7. Mother's partner 8. Father 9. Other relative / relative of partner 29. Other (specify): _____ </div> </div>		<div style="text-align: right; font-size: small;">OFFICE USE ONLY</div> <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>
<div style="border: 1px solid red; padding: 2px; display: inline-block;">Q827OTH</div>			

SECTION IX - GENERAL ATTITUDES AND OPINIONS

Now, I'd like to read some statements to you. Please tell me whether you agree or disagree....

		<u>Agree</u>	<u>Don't agree</u>	<u>Un-certain</u>	<u>No response</u>
Q901	901. If a woman doesn't have sex, she'll get sick	1	2	8	9
Q902	902. A girl must have a baby by the time she is 18 years old	1	2	8	9
Q903	903. A girl can get pregnant only after she has seen her first period	1	2	8	9
Q904	904. A boy must have sex to show he is a man	1	2	8	9
Q905	905. A girl can avoid getting pregnant by having sex standing , up, using pepsi or going to the sea	1	2	8	9
Q906	906. It is not necessary to use a condom with a steady partner	1	2	8	9
Q907	907. Planning too far ahead is not wise since many things turn out to be a matter of good or bad luck	1	2	8	9
Q908	908. Your life is mostly controlled by people with more power than you	1	2	8	9
Q909	909. To get what you want, you have to conform to the wishes of others	1	2	8	9
Q910	910. What others in your family want should always come first before what you want	1	2	8	9
Q911	911. You can generally determine what will happen in your life	1	2	8	9
Q912	912. When you get what you want, it is usually because you worked hard for it	1	2	8	9
	913. In your opinion, who would you regard as "a real man":				
Q913A	A. A sexually responsible person	1	2	8	9
Q913B	B. One who treats a woman good	1	2	8	9
Q913C	C. One who helps in the home	1	2	8	9
Q913D	D. One who has as many women as he wants	1	2	8	9
Q913E	E. One who has as many children as he wants	1	2	8	9
Q913F	F. One who takes sexual risks	1	2	8	9

END OF INTERVIEW THANK YOU!!!!

