

NEGOTIATING REPRODUCTIVE OUTCOMES SURVEY  
MEN'S QUESTIONNAIRE

ENGLISH VERSION  
DATE: 11/01/95

INSTITUTE OF STATISTICS AND APPLIED ECONOMICS/MAKERERE UNIVERSITY AND MACRO INTERNATIONAL, INC.

IDENTIFICATION					
RESPONDENT'S SURNAME	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>			<div style="border: 1px solid black; width: 40px; height: 40px; margin: 10px auto;"></div>	
RESPONDENT'S FIRST NAME	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>				
LINE NUMBER OF RESPONDENT.....			<div style="border: 1px solid black; width: 40px; height: 20px;"></div>		
PLACE NAME _____					
STATUS (Married=1, Living together=2).....			<div style="border: 1px solid black; width: 20px; height: 20px;"></div>		
WIFE/PARTNER INFORMATION					
PLACE NAME _____				<div style="border: 1px solid black; width: 60px; height: 100px; margin: 10px auto;"></div>	
NAME OF HOUSEHOLD HEAD _____					
NAME AND LINE NUMBER OF WIFE/PARTNER _____					
CLUSTER NUMBER.....					
HOUSEHOLD NUMBER.....					
REGION (Masaka=1, Lira=2).....					
URBAN/RURAL (urban=1, rural=2).....					
HAS RESPONDENT BEEN INTERVIEWED BEFORE? (Yes=1, No=2).....				<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	
INTERVIEWER VISITS					
	1	2	3	FINAL VISIT	
DATE	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	<div style="border: 1px solid black; height: 40px; width: 100%;"></div>	DAY MONTH YEAR NAME RESULT <div style="border: 1px solid black; width: 40px; height: 100px; margin: 10px auto;"></div>	
INTERVIEWER'S NAME	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
RESULT*	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>		
NEXT VISIT: DATE	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="background-color: black; width: 100%; height: 20px;"></div>	TOTAL NO. OF VISITS	
	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>	<div style="border: 1px solid black; width: 20px; height: 20px;"></div>	
<p><b>*RESULT CODES:</b></p> <div style="display: flex; justify-content: space-between;"> <div> 1 COMPLETED 2 NOT AT HOME 3 POSTPONED </div> <div> 4 REFUSED 5 PARTLY COMPLETED 6 INCAPACITATED </div> <div> 7 UNABLE TO CONTACT/TOO FAR AWAY 8 OTHER _____ (SPECIFY) </div> </div>					
<b>SUPERVISOR</b> NAME _____ DATE _____ <div style="border: 1px solid black; width: 40px; height: 20px; margin-left: 10px;"></div>		<b>OFFICE EDITOR</b> <div style="border: 1px solid black; width: 40px; height: 20px; margin-left: 10px;"></div>			<b>KEYED BY</b> <div style="border: 1px solid black; width: 40px; height: 20px; margin-left: 10px;"></div>

The men's questionnaire is parallel to the women's questionnaire. However, the following questions have been excluded from the male interview: Q107-110 (marital status and duration of relationship), Q217 (control over savings), Q219 (participation in rotating credit or savings schemes), Q301-303 (current marital status), Q514 (partner's knowledge of first contraceptive use), Q525-527 (partner's approval of respondent's use of contraception and partner's reaction to respondent's prior use of contraception without her knowledge), and Q529 (partner's knowledge of current contraceptive use).

Two questions are unique to the men's questionnaire and the rationale for including them in the male survey are described below.

Intention to Marry Another Wife (305c)

To the extent that African marriage is potentially polygynous, this question is an important aspect of men's and their partner's fertility preferences.

Current Use of Contraception With Other Wives/Partners (510c)

Previous analysis of DHS data has shown that married men report greater contraceptive use than their wives. This question is asked in order to distinguish whether some of the gender difference in reported use of contraception is due to gender differences in reporting or to the male use of contraception with partners other than their wives, even in monogamous unions.

NEGOTIATING REPRODUCTIVE OUTCOMES SURVEY

SECTION 1. RESPONDENT'S BACKGROUND

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME.	HOUR..... MINUTES.....	
102	Thank you for taking the time to talk to me. I would like to ask some questions about you and your household.  In what month and year were you born?	MONTH..... DON'T KNOW MONTH.....98 YEAR..... DON'T KNOW YEAR.....98	
103	How old were you at your last birthday?  COMPARE AND CORRECT 102 AND/OR 103 IF INCONSISTENT.	AGE IN COMPLETED YEARS.....	
104	Have you ever attended school?	YES.....1 NO.....2	→ 111
105	What is the highest level of school you attended: primary, lower secondary, upper secondary or higher?	PRIMARY.....1 LOWER SECONDARY.....2 UPPER SECONDARY.....3 HIGHER.....4	
106	What is the highest (grade/form/year) you completed at that level?	GRADE.....	
111	Please remember that for the rest of this interview, we will be talking about (NAME). Does she usually live in this household, in this village/town, or does she live elsewhere?	SAME HOUSEHOLD.....1 SAME VILLAGE/TOWN.....2 SAME DISTRICT.....3 ELSEWHERE.....4	→ 113
112	How often do you see (NAME)?	DAILY.....1 AT LEAST ONCE A WEEK.....2 AT LEAST ONCE A MONTH.....3 AT LEAST ONCE A YEAR.....4 LESS THAN ONCE A YEAR.....5 OTHER.....6 (SPECIFY)	
113	CHECK 104 AND 105: PRIMARY <input type="checkbox"/> OR NEVER <input type="checkbox"/> ATTENDED <input type="checkbox"/> LOWER SECONDARY <input type="checkbox"/> OR HIGHER <input type="checkbox"/>		→ 115
114	Can you read and understand a letter or newspaper easily, with difficulty, or not at all?	EASILY.....1 WITH DIFFICULTY.....2 NOT AT ALL.....3	→ 116
115	Do you usually read a newspaper or magazine at least once a week?	YES.....1 NO.....2	
116	Approximately how many days a week do you usually listen to a radio?  IF LESS THAN ONCE A WEEK, RECORD '0'.	NUMBER.....	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
117	Do you usually watch television at least once a week?	YES.....1 NO.....2	
118	What is your religion?	ROMAN CATHOLIC.....1 PROTESTANT.....2 MUSLIM.....3 TRADITIONAL.....4 NO RELIGION.....5 OTHER.....6 (SPECIFY)	→120
119	How many times a week do you usually attend church/mosque related activities, if at all?  IF LESS THAN ONCE A WEEK, RECORD '00'.	NUMBER.....	
119A	CHECK 118: PROTESTANT <input type="checkbox"/> OR CATHOLIC <input type="checkbox"/> OTHER <input type="checkbox"/>		→120
119B	Do you consider yourself a "saved" or "born again" Christian?	YES.....1 NO.....2 DON'T KNOW.....3	
120	What is your ethnic group?	BAGANDA.....01 LANGO.....02 OTHER.....96 (SPECIFY)	
121	For most of the time until you were 12 years old, did you live in a city, in a town, or in the countryside?	CITY.....1 TOWN.....2 COUNTRYSIDE.....3	
122	How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)?	YEARS..... ALWAYS.....95	→124
123	Just before you moved here, did you live in a city, in a town, or in the countryside?	CITY.....1 TOWN.....2 COUNTRYSIDE.....3	
124	Is your mother still alive?	YES.....1 NO/ DON'T KNOW.....2	→127
125	Where does your mother live?	SAME HOUSEHOLD.....1 SAME VILLAGE/TOWN.....2 SAME DISTRICT.....3 ELSEWHERE.....4	→127
126	How often do you see your mother?	DAILY.....1 AT LEAST ONCE A WEEK.....2 AT LEAST ONCE A MONTH.....3 AT LEAST ONCE A YEAR.....4 LESS THAN ONCE A YEAR.....5 HAVE NEVER SEEN HER.....6	
127	Can/could your mother read and understand a letter or newspaper easily, with difficulty, or not at all?	EASILY.....1 WITH DIFFICULTY.....2 NOT AT ALL.....3 DON'T KNOW.....8	
128	Is your father still alive?	YES.....1 NO/ DON'T KNOW.....2	→131
129	Where does your father live?	SAME HOUSEHOLD.....1 SAME VILLAGE/TOWN.....2 SAME DISTRICT.....3 ELSEWHERE.....4	→131

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
130	How often do you see your father?	DAILY.....1 AT LEAST ONCE A WEEK.....2 AT LEAST ONCE A MONTH.....3 AT LEAST ONCE A YEAR.....4 LESS THAN ONCE A YEAR.....5 HAVE NEVER SEEN HIM.....6	
131	Can/could your father read and understand a letter or newspaper easily, with difficulty, or not at all?	EASILY.....1 WITH DIFFICULTY.....2 NOT AT ALL.....3 DON'T KNOW.....8	
132	Does/did your father ever have more than one wife at the same time?	YES.....1 NO.....2 DON'T KNOW.....8	
134	Is (NAME)'s mother still alive?	YES.....1 NO/ DON'T KNOW.....2	→ 137
135	Where does she live?	SAME HOUSEHOLD/COMPOUND.....1 SAME VILLAGE/TOWN.....2 SAME DISTRICT.....3 ELSEWHERE.....4	→ 137
136	How often do you see her?	DAILY.....1 AT LEAST ONCE A WEEK.....2 AT LEAST ONCE A MONTH.....3 AT LEAST ONCE A YEAR.....4 LESS THAN ONCE A YEAR.....5 HAVE NEVER SEEN HER.....6	
137	Is (NAME)'s father still alive?	YES.....1 NO/ DON'T KNOW.....2	→ 139A
138	Where does he live?	SAME HOUSEHOLD/COMPOUND.....1 SAME VILLAGE/TOWN.....2 SAME DISTRICT.....3 ELSEWHERE.....4	→ 139A
139	How often do you see him?	DAILY.....01 AT LEAST ONCE A WEEK.....02 AT LEAST ONCE A MONTH.....03 AT LEAST ONCE A YEAR.....04 LESS THAN ONCE A YEAR.....05 HAVE NEVER SEEN HIM.....06	
139A	CHECK 111: WIFE/PARTNER DOES NOT LIVE <input type="checkbox"/> IN SAME HOUSEHOLD WIFE/PARTNER LIVES IN <input type="checkbox"/> SAME HOUSEHOLD		→ 201
140	(Aside from your parents and your parents-in-law), do any other adult relatives usually live in this household?  Who usually lives here?  CIRCLE ALL MENTIONED.	GRANDPARENT(S) OF RESPONDENT...A GRANDPARENT(S) OF PARTNER.....B ADULT SONS.....C ADULT DAUGHTERS.....D SISTER(S).....E BROTHER(S).....F SISTER(S)-IN-LAW.....G BROTHER(S)-IN-LAW.....H AUNT(S) OF RESPONDENT.....I AUNT(S) OF PARTNER.....J UNCLE(S) OF RESPONDENT.....K UNCLE(S) OF PARTNER.....L OTHER WIFE/WIVES.....M OTHER ADULT RELATIVE(S).....N  NO ADULT RELATIVE(S).....O	

# SECTION 2. WORK AND FINANCIAL RESOURCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
201	Are you currently working?	YES.....1 NO.....2	→204
203	Have you done any work in the last 12 months?	YES.....1 NO.....2	→218
204	What is your occupation, that is, on what kind of work do you spend most of your time?	<div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px 0;"></div> _____ _____ _____	
205	CHECK 204: WORKS IN AGRICULTURE <input type="checkbox"/> DOES NOT WORK IN AGRICULTURE <input type="checkbox"/>		→207
206	Do/did you work mainly on your own land, on family land, on communal land, or do you rent land, or work on someone else's land?	OWN LAND.....1 FAMILY LAND.....2 RENTED LAND.....3 COMMUNAL LAND.....4 SOMEONE ELSE'S LAND.....5	
207	Do/did you do this work for a member of your family, for someone else, or are you self-employed?	FOR FAMILY MEMBER.....1 FOR SOMEONE ELSE.....2 SELF-EMPLOYED.....3	
208	Do/did you usually work throughout the year, or do you work seasonally, or only once in a while?	THROUGHOUT THE YEAR.....1 SEASONALLY/PART OF THE YEAR.....2 ONCE IN A WHILE.....3	→210 →211
209	During the last 12 months, how many months did you work?	NUMBER OF MONTHS..... <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	
210	(In the months you worked,) How many days a week did you usually work?	NUMBER OF DAYS..... <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	→212
211	During the last 12 months, approximately how many days did you work?	NUMBER OF DAYS..... <div style="border: 1px solid black; width: 60px; height: 20px; display: inline-block;"></div>	
212	On a typical working day, how many hours do you spend working?	NUMBER OF HOURS..... <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	
213	Do you usually work at home or away from home?	HOME.....1 AWAY.....2	
214	Do/did you earn cash for your work? PROBE: Do you make money for working?	YES.....1 NO.....2	→218

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																						
215	<p>How much do/did you usually earn for this work?</p> <p>PROBE: Is this by the day, by the week, or by the month?</p> <p>AMOUNT IN SINGLE SHILLINGS.....1</p> <p>AMOUNT IN THOUSAND SHILLINGS.....2</p>	<p>PER HOUR.....1</p> <p>PER DAY.....2</p> <p>PER WEEK.....3</p> <p>PER MONTH.....4</p> <p>PER YEAR.....5</p> <p>OTHER _____ 999996</p> <p>(SPECIFY)</p>																							
215A	Do you share information with your partner about how much you earn from this work?	<p>YES\USUALLY.....1</p> <p>NO\RARELY.....2</p> <p>SOMETIMES.....3</p>																							
215B	Does your partner share information with you about how much he earns from his main source of income?	<p>YES\USUALLY.....1</p> <p>NO\RARELY.....2</p> <p>SOMETIMES.....3</p> <p>DOESN'T WORK.....4</p>																							
216	Who mainly decides how the money you earn will be used: you, your wife/partner, you and your wife/partner jointly, or someone else?	<p>RESPONDENT DECIDES.....1</p> <p>WIFE/PARTNER DECIDES.....2</p> <p>JOINTLY WITH WIFE/PARTNER.....3</p> <p>SOMEONE ELSE DECIDES.....4</p> <p>JOINTLY WITH SOMEONE ELSE.....5</p>																							
218	<p>There are many ways a man can get money for basic family needs. He might use his own money, ask his wife or relatives, borrow from someone or use general housekeeping money - with or with or without permission.</p> <table border="1"> <thead> <tr> <th>ITEMS</th> <th>218A When you have to spend money on (ITEM), how do you usually get the money?</th> <th>218B In your household, who is usually responsible for paying for (ITEM)?</th> </tr> </thead> <tbody> <tr> <td>Your own health care</td> <td> <p>CIRCLE ALL MENTIONED.</p> <p>A B C D E F G H I</p> </td> <td> <p>CIRCLE ONE.</p> <p>1 2 3 4 5 6 7</p> </td> </tr> <tr> <td>Children's health care</td> <td> <p>A B C D E F G H I</p> </td> <td> <p>1 2 3 4 5 6 7</p> </td> </tr> <tr> <td>Children's education</td> <td> <p>A B C D E F G H I</p> </td> <td> <p>1 2 3 4 5 6 7</p> </td> </tr> <tr> <td>Support for own parents/rels.</td> <td> <p>A B C D E F G H I</p> </td> <td> <p>1 2 3 4 5 6 7</p> </td> </tr> <tr> <td>Support for partner's par/rels</td> <td> <p>A B C D E F G H I</p> </td> <td> <p>1 2 3 4 5 6 7</p> </td> </tr> <tr> <td>Other basic needs (e.g.transport/clothing)</td> <td> <p>A B C D E F G H I</p> </td> <td> <p>1 2 3 4 5 6 7</p> </td> </tr> </tbody> </table> <p>RESPONSE CODES:</p>	ITEMS	218A When you have to spend money on (ITEM), how do you usually get the money?	218B In your household, who is usually responsible for paying for (ITEM)?	Your own health care	<p>CIRCLE ALL MENTIONED.</p> <p>A B C D E F G H I</p>	<p>CIRCLE ONE.</p> <p>1 2 3 4 5 6 7</p>	Children's health care	<p>A B C D E F G H I</p>	<p>1 2 3 4 5 6 7</p>	Children's education	<p>A B C D E F G H I</p>	<p>1 2 3 4 5 6 7</p>	Support for own parents/rels.	<p>A B C D E F G H I</p>	<p>1 2 3 4 5 6 7</p>	Support for partner's par/rels	<p>A B C D E F G H I</p>	<p>1 2 3 4 5 6 7</p>	Other basic needs (e.g.transport/clothing)	<p>A B C D E F G H I</p>	<p>1 2 3 4 5 6 7</p>	<p>A. ASKS WIFE/PARTNER</p> <p>B. ASKS OWN FAMILY MEMBER</p> <p>C. ASKS WIFE'S FAMILY MEMBER</p> <p>USES HOUSEKEEPING MONEY</p> <p>D. WITH PERMISSION</p> <p>E. WITHOUT PERMISSION</p> <p>F. USES OWN SEPARATE MONEY</p> <p>G. BORROWS</p> <p>H. NOT APPLICABLE</p> <p>I. OTHER</p>	<p>1. RESPONDENT</p> <p>2. WIFE/PARTNER</p> <p>3. BOTH</p> <p>4. RELATIVE OF RESP.</p> <p>5. RELATIVE OF WIFE</p> <p>6. OTHER</p> <p>7. NOT APPLICABLE</p>	
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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
220	In your home, does your wife/partner's opinion carry about the same weight as your opinion, more weight than your opinion, less weight, or is her opinion not taken into account at all?	SAME WEIGHT.....1 MORE WEIGHT.....2 LESS WEIGHT.....3 NOT TAKEN INTO ACCOUNT.....4	
221	Whose opinion carries more weight in your home on the following: yours, your wife's/partner's, both of yours equally or someone else's?	R W B E N E I O L / S F T S A P E H E	
	What food to cook	FOOD TO COOK.....1 2 3 4 5	
	Children's health care	HEALTH CARE.....1 2 3 4 5	
	Children's education	EDUCATION.....1 2 3 4 5	
	Support for own parents/relatives	SUPPORT.OWN.....1 2 3 4 5	
	Support for partner's parents/relatives	SUPPORT.PARTNER..1 2 3 4 5	
	Fostering children	FOSTERING.....1 2 3 4 5	
	Children's marriage	MARRIAGE.....1 2 3 4 5	



NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
222	Does your household own any land?	YES.....1 NO.....2	→ 224
223	How much land does it own?	ACRES.....1 HECTARES.....2 SQUARE FEET....3 SQUARE METERS..4  DON'T KNOW.....999998 OTHER.....999996 (SPECIFY)	
224	Do you own any land personally?	YES.....1 NO.....2	→ 226
225	How much land do you own personally?	ACRES.....1 HECTARES.....2 SQUARE FEET....3 SQUARE METERS..4  DON'T KNOW.....999998 OTHER.....999996 (SPECIFY)	
226	Does your household own any livestock?	YES.....1 NO.....2	→ 228
227	How many: Cattle? Goats? Sheep? Other animals? IF NONE ENTER '000'	NUMBER OF CATTLE..... NUMBER OF GOATS..... NUMBER OF SHEEP..... NUMBER OF OTHERS.....	
228	Do you have any livestock that belongs only to you?	YES.....1 NO.....2	→ 229A
229	How many: Cattle? Goats? Sheep? Other animals? IF NONE ENTER '000'	NUMBER OF CATTLE..... NUMBER OF GOATS..... NUMBER OF SHEEP..... NUMBER OF ANIMALS.....	
229A	CHECK 111: WIFE/PARTNER DOES NOT LIVE IN SAME HOUSEHOLD <input type="checkbox"/> WIFE/PARTNER LIVES IN SAME HOUSEHOLD <input type="checkbox"/>		→ 232
230	Does your household have:	YES NO Electricity? ELECTRICITY.....1 2 A radio? RADIO.....1 2 A television? TELEVISION.....1 2 A refrigerator? REFRIGERATOR.....1 2	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																		
231	Does any member of your household own: A house? A bicycle? A pikipiki? A car?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>HOUSE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>BICYCLE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>PIKIPIKI.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>CAR.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	HOUSE.....	1	2	BICYCLE.....	1	2	PIKIPIKI.....	1	2	CAR.....	1	2				
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CAR.....	1	2																			
232	We are interested in knowing about property that belongs only to you. Do you own:  A house? A bicycle? A pikipiki? A car? A radio?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>HOUSE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>BICYCLE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>PIKIPIKI.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>CAR.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>RADIO.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	HOUSE.....	1	2	BICYCLE.....	1	2	PIKIPIKI.....	1	2	CAR.....	1	2	RADIO.....	1	2	
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232A	CHECK 111: WIFE/PARTNER DOES NOT LIVE IN SAME HOUSEHOLD <input type="checkbox"/> WIFE/PARTNER LIVES IN SAME HOUSEHOLD <input type="checkbox"/>		→ 237																		
233	What is the main source of drinking water for members of your household?	PIPED WATER PIPED INTO RESIDENCE/YARD/PLOT.....11 PUBLIC TAP.....12 WELL WATER WELL IN RESIDENCE/YARD/PLOT..21 PUBLIC WELL.....22 BORE HOLE.....23 SURFACE WATER SPRING.....31 RIVER/STREAM.....32 POND/LAKE.....33 DAM.....34 RAINWATER.....41 TANKER TRUCK.....51 BOTTLED WATER.....61 OTHER.....96 (SPECIFY)																			
234	What kind of toilet facility does your household have?	FLUSH TOILET OWN FLUSH TOILET.....11 SHARED FLUSH TOILET.....12 PIT TOILET/LATRINE TRADITIONAL PIT TOILET.....21 VENTILATED IMPROVED PIT (VIP) LATRINE.....22 NO FACILITY/BUSH/FIELD.....31 OTHER.....96 (SPECIFY)																			
235	MAIN MATERIAL OF THE ROOF  RECORD OBSERVATION.	THATCH.....1 IRON/TIN.....2 TILES.....3 MULTI-STORY DWELLING.....4 OTHER.....6 (SPECIFY)																			
236	MAIN MATERIAL OF THE FLOOR  RECORD OBSERVATION.	EARTH.....1 CEMENT.....2 TILE.....3 OTHER.....6 (SPECIFY)																			

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
237	<p>Now, I am going to read you a series of statements. After I read each statement, please tell me whether you agree with the statement, disagree with it, or have no opinion one way or the other.</p> <p>It's not always wise for me to plan too far ahead because many things turn out to be a matter of good or bad luck.</p>	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
238	I have often found that what is going to happen will happen, whether I want it to or not.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
239	My life is chiefly controlled by people with more power than me.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
240	In order to get what I want, I have to conform to the wishes of others.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
241	What others in the family want should always come first before what I want.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
242	I can generally determine what will happen in my own life.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
243	When I get what I want, it's usually because I've worked hard for it.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	

# SECTION 3. MARRIAGE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
304	CHECK COVER SHEET: <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <input type="checkbox"/>  MARRIED  ↓  Do you have any other  wives besides (NAME)? </div> <div style="text-align: center;"> <input type="checkbox"/>  LIVING WITH A WOMAN  ↓  Do you have any other  wives or partners besides  (NAME)? </div> </div>	YES.....1 NO.....2	→ 305c
305	How many other wives/partners do you have?	NUMBER..... <input type="text"/> <input type="text"/>	
305A	Is (NAME) your most recent wife/partner?	YES.....1 NO.....2	→ 305c
305B	Before marrying another wife/getting another partner, did you discuss it with (NAME)?	YES.....1 NO.....2	
305C	Do you intend to marry another wife/get another partner?	YES.....1 NO.....2 DON'T KNOW.....8	
312	In what month and year did you start living with (NAME)?	MONTH..... <input type="text"/> <input type="text"/> DON'T KNOW MONTH.....98 YEAR..... <input type="text"/> <input type="text"/> DON'T KNOW YEAR.....98	→ 313A
313	How old were you when you started living with her?	AGE..... <input type="text"/> <input type="text"/>	
313A	Is (NAME) the first woman you have ever married or lived with?	YES.....1 NO.....2	→ 317
315	In what month and year did you start living with your first wife/partner?	MONTH..... <input type="text"/> <input type="text"/> DON'T KNOW MONTH.....98 YEAR..... <input type="text"/> <input type="text"/> DON'T KNOW YEAR.....98	→ 317
316	How old were you when you started living with her?	AGE..... <input type="text"/> <input type="text"/>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																		
317	Did the union with (NAME) involve any bridewealth payment?	YES.....1 NO.....2	→ 320																		
318	What amount of bridewealth was agreed to?  ENTER ZEROS IF NONE.	NUMBER OF CATTLE..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table> NUMBER OF GOATS..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td></tr></table> NUMBER OF SHILLINGS.. <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td><td></td><td></td></tr></table> OTHER.....1 (SPECIFY) NO OTHER ITEMS.....2																			
319	Has all the bride-price been paid or does some part still remain to be paid?	ALL PAID.....1 PARTIALLY PAID.....2																			
320	CHECK MARITAL STATUS ON COVER SHEET:  MARRIED <input type="checkbox"/> LIVING WITH A WOMAN <input type="checkbox"/>		→ 322																		
321	Do you have a marriage certificate?  PROBE: Is your marriage registered?	YES.....1 NO.....2																			
322	How long did you know (NAME) before you were married to her/started living with her?  IF LESS THAN ONE MONTH, RECORD '00'.	MONTHS.....1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> YEARS.....2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>																			
323	Who introduced you to each other?	NOBODY/JUST MET.....1 PARENTS/RELATIVES.....2 AGE-MATES/FRIENDS.....3 RELIGIOUS GROUP.....4 OTHER.....6 (SPECIFY)																			
324	We are interested in knowing the influence of parents and relatives in your choice of a wife/partner.  How much influence did your parents and relatives have on your choice of a (marriage) partner: a major influence, some influence, little influence, or no influence?	MAJOR INFLUENCE.....1 SOME INFLUENCE.....2 LITTLE INFLUENCE.....3 NO INFLUENCE.....4																			
325	Did your parents and relatives approve of (NAME) when you got married/started living with her?	YES.....1 NO.....2 DON'T KNOW.....8	→ 327																		
326	Would you have married/started living with (NAME) if your parents and relatives did not approve?	YES.....1 NO.....2 DON'T KNOW.....8																			
327	Was there ever a person who you wanted to marry, but did not because your parents or relatives did not approve?	YES.....1 NO.....2 DON'T KNOW.....8																			

# SECTION 4. REPRODUCTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
401	Now I would like to ask about your children. I am interested only in the children that are biologically yours. Have you ever had children?	YES.....1 NO.....2	→406
402	Do you have any sons or daughters who are now living with you?	YES.....1 NO.....2	→404
403	How many sons live with you? And how many daughters live with you? IF NONE, RECORD '00'.	SONS AT HOME..... DAUGHTERS AT HOME.....	
404	Do you have any sons or daughters who are alive but do not live with you?	YES.....1 NO.....2	→406
405	How many sons are alive but do not live with you? And how many daughters are alive but do not live with you? IF NONE, RECORD '00'.	SONS ELSEWHERE..... DAUGHTERS ELSEWHERE.....	
406	Have you ever had a son or daughter who was born alive but later died? IF NO, PROBE: Any baby who cried or showed signs of life but survived only a few hours or days?	YES.....1 NO.....2	→408
407	How many boys have died? And how many girls have died? IF NONE, RECORD '00'.	BOYS DEAD..... GIRLS DEAD.....	
408	SUM ANSWERS TO 403, 405, AND 407, AND ENTER TOTAL. IF NONE, RECORD '00'.	TOTAL.....	
409	CHECK 408: Just to make sure that I have this right: you have had in TOTAL ____ children during your life. Is that correct?  YES <input type="checkbox"/> NO <input type="checkbox"/> PROBE AND CORRECT 401-408 AS NECESSARY.		
410	CHECK 408: ONE OR MORE CHILDREN <input type="checkbox"/> NO CHILDREN <input type="checkbox"/>		→413
411	You told me you had given birth to ____ children in total. How many of these children did you have with [NAME]?	NONE.....00 NUMBER.....	→413
412	How many of the children that you had with (NAME) are living with you?	NUMBER.....	
413	(Aside from your own children), are there any (other) children under age 15 for whom you alone or you and (NAME) together are responsible?	YES.....1 NO.....2	→415

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
414	How many of these children (aside from your own) are living in this household?	NUMBER.....	
415	Is (NAME) currently pregnant?	YES.....1 NO.....2 DON'T KNOW.....8	

416	CHECK 411:	
	ONE OR MORE CHILDREN <input type="checkbox"/>	NO CHILDREN <input type="checkbox"/> → 501

417 Now I would like to record the name of the most recent child you had with (NAME) whether still alive or not.

RECORD NAME OF LAST BIRTH IN 417. RECORD TWINS ON SEPARATE LINES.

418	419	420	421	422	423	424	425
What name was given to your (last) baby?	Was this birth twins?	Is (NAME) a boy or a girl?	In what month and year was (NAME) born?  PROBE: What is his/her birthday? OR: In what season was he/she born?	Is (NAME) still alive?	IF ALIVE:  How old was (NAME) at his/her last birthday?  RECORD AGE IN COMPLETED YEARS.	FROM YEAR OF INTERVIEW SUBTRACT YEAR OF BIRTH.  IS THE DIFFERENCE 4 OR MORE?	Were there any other births since the birth of (NAME)?
01   (NAME)	SING..1 MULT..2	BOY...1 GIRL..2	MONTH.. <input type="text"/> YEAR... <input type="text"/>	YES..1 NO...2 ↓ 424	AGE IN YEARS <input type="text"/>	YES....1 NO.....2 (425A)←	YES..1 NO...2
02	SING..1 MULT..2	BOY...1 GIRL..2	MONTH.. <input type="text"/> YEAR... <input type="text"/>	YES..1 NO...2 ↓ 424	AGE IN YEARS <input type="text"/>	YES....1 NO.....2 (425A)←	YES..1 NO...2

425A	CHECK 402 AND 404:	
	HAS LIVING CHILDREN <input type="checkbox"/>	DOES NOT HAVE LIVING CHILDREN <input type="checkbox"/> → 501

426	What is the age of your oldest living child?	AGE..... <input type="text"/>
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# SECTION 5. CONTRACEPTION

Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.

CIRCLE CODE 1 IN 501 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 502, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 2 IF METHOD IS RECOGNIZED AND CODE 3 IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH CODE 1 OR 2 CIRCLED IN 501 OR 502, ASK 503.

501 Which ways or methods have you heard about?	502 Have you ever heard of (METHOD)?		503 Have you ever used (METHOD)?
	SPONTANEOUS YES	PROBED YES NO	
01] PILL Women can take a pill every day.	1	2 3	YES.....1 NO.....2
02] IUD Women can have a loop or coil placed inside them by a doctor or a nurse.	1	2 3	YES.....1 NO.....2
03] INJECTIONS Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months.	1	2 3	YES.....1 NO.....2
04] IMPLANTS Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1	2 3	YES.....1 NO.....2
05] DIAPHRAGM,FOAM,JELLY Women can place a sponge, suppository, diaphragm, jelly, or cream inside themselves before intercourse.	1	2 3	YES.....1 NO.....2
06] CONDOM Men can put a rubber sheath on their penis during sexual intercourse.	1	2 3	YES.....1 NO.....2
07] FEMALE STERILIZATION Women can have an operation to avoid having any more children.	1	2 3	Have you ever had a partner who had an operation to avoid having children? YES.....1 NO.....2
08] MALE STERILIZATION Men can have an operation to avoid having any more children.	1	2 3	Have you ever had an operation to avoid having children? YES.....1 NO.....2
09] RHYTHM, PERIODIC ABSTINENCE Every month that a woman is sexually active she can avoid having sexual intercourse on the days of the month she is most likely to get pregnant.	1	2 3	YES.....1 NO.....2
10] WITHDRAWAL Men can be careful and pull out before climax.	1	2 3	YES.....1 NO.....2
11] SPORADIC ABSTINENCE In order to prevent pregnancy, some men and women avoid sexual intercourse by various means, such as pretending to be ill, spending nights away from home, "facing the wall".	1	2 3	YES.....1 NO.....2
12] Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	1 (SPECIFY) (SPECIFY)	3	YES.....1 NO.....2  YES.....1 NO.....2



NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
504	CHECK 503: NOT A SINGLE "YES" <input type="checkbox"/> (NEVER USED) AT LEAST ONE "YES" <input type="checkbox"/> (EVER USED)		507
505	Have you or any of your partners ever used anything or tried in any way to delay or avoid getting pregnant?	YES.....1 NO.....2	533
506	What have you used or done? CORRECT 503 AND 504 (AND 502 IF NECESSARY).		
507	CHECK 503: MAN NOT STERILIZED <input type="checkbox"/> MAN STERILIZED <input type="checkbox"/>		510A
508	CHECK 415: WIFE/PARTNER NOT PREGNANT OR UNSURE <input type="checkbox"/> WIFE/PARTNER PREGNANT <input type="checkbox"/>		512
509	Are you or (NAME) currently doing something or using any method to delay or avoid pregnancy?	YES.....1 NO.....2	510B
510	Which method are you using?	PILL.....01 IUD.....02 INJECTIONS.....03 IMPLANTS.....04 DIAPHRAGM/FOAM/JELLY.....05 CONDOM.....06 FEMALE STERILIZATION.....07 MALE STERILIZATION.....08 RHYTHM.....09 WITHDRAWAL.....10 SPORADIC ABSTINENCE.....11 OTHER.....96 (SPECIFY)	
510A	CIRCLE '08' FOR MALE STERILIZATION.		
510B	CHECK 304: RESPONDENT HAS OTHER WIVES/PARTNERS <input type="checkbox"/> RESPONDENT DOES NOT HAVE OTHER WIVES/PARTNERS <input type="checkbox"/>		510D
510C	Are you currently using a method with any of your other wives/partners?	YES.....1 NO.....2	
510D	CHECK 503: OTHER <input type="checkbox"/> ONLY METHOD EVER USED IS FEMALE OR MALE STERILIZATION <input type="checkbox"/>		518
511	Since the first time you started doing something to delay or avoid a pregnancy, have you or your partner ever stopped using a method for some time?	YES.....1 NO.....2	518
512	Thinking back to the last time you stopped using something to delay or avoid a pregnancy, what was the main reason you or she stopped?	INFREQUENT SEX/PARTNER AWAY....01 WIFE BECAME PREG. WHILE USING...02 WANTED TO HAVE CHILDREN.....03 WIFE/PARTNER DISAPPROVED.....04 HEALTH CONCERNS.....05 SIDE EFFECTS.....06 LACK OF ACCESS/TOO FAR.....07 COST TOO MUCH.....08 INCONVENIENT TO USE.....09 FATALISTIC.....10 WIFE MENOPAUSE/ DIFFICULT TO GET PREGNANT.....11 MARITAL DISSOLUTION/SEPARATION.12 OTHER.....96 (SPECIFY) DON'T KNOW.....98	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
513	Were you using this method with (NAME)?	YES.....1 NO.....2	
515	Did you and your partner at that time discuss whether to stop using a method at that time?	YES.....1 NO.....2	
516	CHECK 509: NOT CURRENTLY USING ANY METHOD <input type="checkbox"/> CURRENTLY USING ANY METHOD <input type="checkbox"/>		518
517	Since you first married/started living with (NAME), have you ever done anything to delay or avoid a pregnancy?	YES.....1 NO.....2	533
518	Thinking back to the (first) time that you started to do something so that (NAME) would not get pregnant, what was the main reason you started to do this?	ECONOMIC REASONS.....01 HEALTH REASONS.....02 REACHED DESIRED FAMILY SIZE...03 PREVIOUS DELIVERY DIFFICULT...04 WANTED TO REST.....05 WIFE/PARTNER WANTED TO STOP...06 WANTED SPACE BETWEEN BIRTHS...07 DID NOT WANT PREMARITAL BIRTH..08  OTHER _____ 96 (SPECIFY)  DON'T KNOW.....98	
519	Did you suggest using a method, or did (NAME) or someone else suggest it?	RESPONDENT.....1 WIFE/PARTNER.....2  SOMEONE ELSE _____ 6 (SPECIFY)	524
520	Did you agree at the time?	YES.....1 NO.....2	523
521	What was the main reason that you disagreed?	WANTED ANOTHER CHILD.....01 AFRAID OF SIDE EFFECTS.....02 RELIGIOUS REASONS.....03 AFRAID TO GO TO FP CLINIC.....04 COST TOO MUCH.....05 DIFFICULT TO GET METHODS.....06 CO-WIVES ARE HAVING CHILDREN...07  OTHER _____ 96 (SPECIFY)  DON'T KNOW.....98	
522	What was the main reason that you and (NAME) ended up using a method even though you did not want to?	HAD ENOUGH CHILDREN.....01 HAD A BOY/GIRL.....02 WIFE TIRED/NEEDED TO REST.....03 ECONOMIC DIFFICULTIES.....04 WIFE INSISTED.....05  OTHER _____ 96 (SPECIFY)  DON'T KNOW.....98	
523	CHECK 519: WIFE SUGGESTED <input type="checkbox"/>  SOMEONE ELSE SUGGESTED <input type="checkbox"/>		524A
524	Did your wife/partner agree at the time?	YES.....1 NO.....2 WIFE DID NOT KNOW.....3	544

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
524A	CHECK 510: NOT CURRENTLY USING <input type="checkbox"/> CURRENTLY USING <input type="checkbox"/>		→544
530	What would you do if you discovered that (NAME) was doing something to delay or avoid pregnancy?  CIRCLE ALL MENTIONED.	WOULD FORCE HER TO LEAVE.....A WOULD LEAVE HER.....B WOULD TALK WITH RELATIVES/ELDERS.C WOULD MAKE HER STOP.....D WOULD GET ANOTHER WOMAN.....E WOULD BEAT HER.....F WOULD QUARREL WITH HER.....G WOULD NOT DO ANYTHING.....H OTHER _____ X (SPECIFY) DON'T KNOW.....Z	→544
533	Have you and (NAME) ever discussed doing something to delay or avoid a pregnancy?	YES.....1 NO.....2	→540
534	Who proposed using a method: you, your wife/partner or did someone else suggest it?	RESPONDENT.....1 WIFE/PARTNER.....2 SOMEONE ELSE _____ 6 (SPECIFY)	→537
535	Did you want to use a method at the time?	YES.....1 NO.....2	
536	CHECK 534: WIFE PROPOSED <input type="checkbox"/> SOMEONE ELSE PROPOSED <input type="checkbox"/>		→538
537	Did your wife/partner want to use a method at the time?	YES.....1 NO.....2	
538	CHECK 535 AND 537: BOTH WANTED TO USE A METHOD OR THEY DISAGREED <input type="checkbox"/> NEITHER WANTED TO USE A METHOD <input type="checkbox"/>		→540
539	What is the main reason you and (NAME) have never used a method to delay or avoid a pregnancy?	AFRAID OF SIDE EFFECTS.....01 RELIGIOUS REASONS.....02 DOESN'T WANT TO GO TO FP CLINIC.03 COST TOO MUCH.....04 DIFFICULT TO GET METHODS.....05 WANT CHILDREN.....07 SHE CAN'T GET PREGNANT.....08 OPPOSED TO FP.....09 WIFE OPPOSED TO FP.....10 OTHER _____ 96 (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
540	Do you think you will do something to delay or avoid a pregnancy at any time in the future?	YES.....1 NO.....2 DK/UNDECIDED.....8	→542   →543
541	What is the main reason that you do not intend to use a method at any time in the future?	NOT MARRIED.....11  FERTILITY-RELATED REASONS INFREQUENT SEX.....22 PARTNER IS MENOPAUSAL/HYSTERECTOMY.....23 SUBFECUND/INFECUND.....24 WANTS (MORE) CHILDREN.....26  OPPOSITION TO USE RESPONDENT OPPOSED.....31 WIFE OPPOSED.....32 OTHERS OPPOSED.....33 RELIGIOUS PROHIBITION.....34  LACK OF KNOWLEDGE KNOWS NO METHOD.....41 KNOWS NO SOURCE.....42  METHOD-RELATED REASONS HEALTH CONCERNS.....51 FEAR OF SIDE EFFECTS.....52 LACK OF ACCESS/TOO FAR.....53 COST TOO MUCH.....54 INCONVENIENT TO USE.....55 INTERFERES WITH BODY'S NORMAL PROCESSES.....56  OTHER.....96 (SPECIFY) DON'T KNOW.....98	→543
542	What method do you think you will use?	PILL.....01 IUD.....02 INJECTIONS.....03 IMPLANTS.....04 DIAPHRAGM/FOAM/JELLY.....05 CONDOM.....06 FEMALE STERILIZATION.....07 MALE STERILIZATION.....08 RHYTHM.....09 WITHDRAWAL.....10 SPORADIC ABSTINENCE.....11  OTHER.....96 (SPECIFY) DON'T KNOW.....98	
543	Do you think your wife/partner will want to do something to delay or avoid a pregnancy in the future?	YES.....1 NO.....2 UNDECIDED.....3 DON'T KNOW.....8	
544	In the last 6 months have you discussed the practice of family planning with your wife/partner, friends, neighbors, or relatives?	YES.....1 NO.....2	→546
545	With whom?  Anyone else?   RECORD ALL MENTIONED.	WIFE/PARTNER.....A MOTHER.....B FATHER.....C PATERNAL AUNT.....D MEDICAL PERSONNEL.....E FAMILY PLANNING WORKER.....F SISTER(S).....G BROTHER(S).....H DAUGHTER(S).....I MOTHER-IN-LAW.....J FRIENDS/NEIGHBORS.....K  OTHER.....X (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
546	Would you say that most of the people you know approve of the practice of family planning, disapprove of it, or have no opinion?	MOST APPROVE.....1 MOST DISAPPROVE.....2 MOST HAVE NO OPINION.....3 DON'T KNOW.....8	
547	Between the first day of a woman's period and the first day of her <u>next</u> period, are there certain times when she has a greater chance of becoming pregnant than other times?	YES.....1 NO.....2 DON'T KNOW.....8	→ 549
548	During which times of the monthly cycle does a woman have the greatest chance of becoming pregnant?	DURING HER PERIOD.....1 RIGHT AFTER HER PERIOD HAS ENDED.....2 IN THE MIDDLE OF THE CYCLE.....3 JUST BEFORE HER PERIOD BEGINS...4  OTHER.....6 (SPECIFY) DON'T KNOW.....8	
549	Please tell me if you agree, disagree or have no opinion about the following statements.  If my partner doesn't want to use family planning or condoms, there is nothing I can do to change her mind.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
550	A couple can choose the exact number of children they will have and stop after that.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
551	If I decide that I want no more children, I will be able to have my way.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
552	If I decide that I want to delay the next birth, I will be able to have my way.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
553	Even if she doesn't agree at first, I could convince my wife/partner to use family planning or condoms if I feel we should.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	

SECTION 6. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	<p>CHECK 403 AND 405:</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>HAS LIVING CHILDREN <input type="checkbox"/></p> <p>↓</p> <p>If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?</p> </div> <div style="text-align: center;"> <p>NO LIVING CHILDREN <input type="checkbox"/></p> <p>↓</p> <p>If you could choose exactly the number of children to have in your whole life, how many would that be?</p> </div> </div> <p>PROBE FOR A NUMERIC RESPONSE.</p>	<p>NUMBER..... <input type="text"/> <input type="text"/></p> <p>OTHER _____ 96 (SPECIFY)</p>	→603
602	How many of these children would you like to be boys, how many would you like to be girls and for how many would it not matter?	<p>NUMBER OF BOYS..... <input type="text"/> <input type="text"/></p> <p>NUMBER OF GIRLS..... <input type="text"/> <input type="text"/></p> <p>NUMBER OF EITHER..... <input type="text"/> <input type="text"/></p> <p>OTHER _____ 96 (SPECIFY)</p>	
603	<p>CHECK 408:</p> <div style="display: flex; justify-content: space-around;"> <p>HAS CHILDREN <input type="checkbox"/></p> <p>HAS NEVER HAD CHILDREN <input type="checkbox"/></p> </div>		→606
604	Before you had your first child, did you ever think about the number of children you would like to have?	<p>YES.....1</p> <p>NO.....2</p>	→606
605	How many children did you want at that time?	<p>NUMBER..... <input type="text"/> <input type="text"/></p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW .....98</p>	
606	Have you talked with (NAME) at any time about the total number of children you would like to have together?	<p>YES.....1</p> <p>NO.....2</p>	→610
607	At the time you first talked, did she want more children than you, fewer children than you, or the same number as you?	<p>MORE.....1</p> <p>FEWER.....2</p> <p>SAME.....3</p> <p>DON'T KNOW.....8</p>	
608	<p>CHECK 408:</p> <div style="display: flex; justify-content: space-around;"> <p>HAS HAD CHILDREN <input type="checkbox"/></p> <p>HAS NEVER HAD CHILDREN <input type="checkbox"/></p> </div>		→610
609	How many children did you have when you first talked with (NAME) about the number of children to have together?	<p>NUMBER..... <input type="text"/> <input type="text"/></p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW .....98</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
610	Has your opinion about the number of children you want to have changed since the time you first started going with (NAME)?	YES.....1 NO.....2 NO OPINION/DON'T KNOW.....8	→ 613
611	Do you now want more children than before or fewer children than before?	MORE CHILDREN.....1 FEWER CHILDREN.....2 NOT SURE.....3	→ 613
612	Why has the number of children you want changed?  RECORD RESPONSE	HEALTH REASONS.....1 ECONOMIC REASONS.....2 WIFE/PARTNER'S PREFERENCE.....3 RELIGIOUS REASONS.....4 DEMANDS OF CHILDREARING.....5  OTHER _____ 6 (SPECIFY)	
613	How many children do you think (NAME) would like to have with you?	NUMBER..... <input type="text"/> <input type="text"/>  OTHER _____ 96 (SPECIFY)  DON'T KNOW .....98	
614	CHECK 408 AND 411: HAD CHILDREN IN PAST RELATIONSHIP <input type="checkbox"/>  DID NOT HAVE CHILDREN IN PAST RELATIONSHIP <input type="checkbox"/>		→ 616
615	Thinking back to the time you started going with (NAME), how many children did you want to have with her at that time?	NUMBER..... <input type="text"/> <input type="text"/>  OTHER _____ 96 (SPECIFY)  DON'T KNOW .....98	
616	CHECK 510:  NEITHER STERILIZED <input type="checkbox"/>  HE OR SHE STERILIZED <input type="checkbox"/>		→ 621
617	CHECK 415: WIFE/PARTNER NOT PREGANT OR UNSURE <input type="checkbox"/> ↓ Now I have some questions about the future. Would you like to have (a/another) child with (NAME) or would you prefer not to have any (more) children?  WIFE/PARTNER PREGNANT <input type="checkbox"/> ↓ Now I have some questions about the future. After the child (NAME) is expecting now, would you like to have another child with her or would you prefer not to have any more children?	HAVE (A/ANOTHER) CHILD.....1 NO MORE/NONE.....2 SAYS SHE CAN'T GET PREGNANT.....3 UNDECIDED/DON'T KNOW.....8	→ 619 → 621 → 620
618	What is the main reason that you prefer not to have any (more) children with (NAME)?	ECONOMIC REASONS.....01 REACHED DESIRED FAMILY SIZE....02 PREVIOUS DELIVERY DIFFICULT....03 WIFE WANTS TO REST/TIRED OUT...04 WIFE WANTS TO STOP.....05  OTHER _____ 96 (SPECIFY)  DON'T KNOW.....98	→ 620

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
619	What is the main reason that you would like to have another child with (NAME)?	WANTS A BOY.....01 WANTS A GIRL.....02 CHILD(REN) DIED.....03 PARTNER WANTS.....04 DOESN'T HAVE ENOUGH.....05 CAN STILL FATHER CHILDREN.....06  OTHER _____ 96 (SPECIFY)  DON'T KNOW.....98	
620	CHECK 415: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>WIFE/PARTNER NOT PREGNANT OR UNSURE <input type="checkbox"/></p> <p>Do you think (NAME) would like to have a/another child or would she prefer not to have any (more) children with you?</p> </div> <div style="width: 45%;"> <p>WIFE/PARTNER PREGNANT <input type="checkbox"/></p> <p>After the child (NAME) is expecting now, do you think she would like to have another child or would she prefer not to have any more children with you?</p> </div> </div>	HAVE (A/ANOTHER) CHILD.....1 NO MORE/NONE.....2 UNDECIDED.....3 DON'T KNOW PARTNER'S DESIRE....8 → 624	
621	CHECK 510 AND 617: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">OTHER <input type="checkbox"/></div> <div style="width: 45%;">CAN'T GET PREGNANT OR EITHER PARTNER STERILIZED <input type="checkbox"/></div> </div>		→ 624
622	CHECK 617 AND 620: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">OTHER <input type="checkbox"/></div> <div style="width: 45%;">BOTH WANT NO MORE OR BOTH WANT MORE OR BOTH UNDECIDED <input type="checkbox"/></div> </div>		→ 624
623	CHECK 415: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>WIFE/PARTNER NOT PREGNANT OR UNSURE <input type="checkbox"/></p> <p>Do you think you and (NAME) will have a/another child or will you not have any (more) children?</p> </div> <div style="width: 45%;"> <p>WIFE/PARTNER PREGNANT <input type="checkbox"/></p> <p>After the child (NAME) is expecting now, do you think you will have another child or will you not have any (more) children?</p> </div> </div>	WILL HAVE A/ANOTHER CHILDO.....1 WILL HAVE NO MORE/NONE.....2 UNDECIDED.....3 DON'T KNOW.....8	
624	CHECK 408: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;">HAS CHILDREN <input type="checkbox"/></div> <div style="width: 45%;">HAS NEVER HAD CHILDREN <input type="checkbox"/></div> </div>		→ 633
625	Have you and (NAME) ever discussed whether to stop having children?	YES.....1 NO.....2 → 629	
626	How many children did you have when you first discussed it?	NUMBER..... <input type="text"/> <input type="text"/>  DON'T REMEMBER.....98	
627	At the time you first discussed this, did you want a/another child?	YES.....1 NO.....2	
628	Did (NAME) want a/another child?	YES.....1 NO.....2 → 631	



NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
629	CHECK 620 AND 510: DOES NOT KNOW PARTNER'S DESIRE (Q.620=8) OR EITHER PARTNER STERILIZED  OTHER		631
630	Since you have not discussed it, how is it that you know that she wants/doesn't want a/another child?	SHE WANTS AS MANY CHILDREN AS POSSIBLE.....01 ALL WOMEN WANT AS MANY CHILDREN AS POSSIBLE.....02 SOMEONE ELSE TOLD RESPONDENT...03 RELIGIOUS REASONS.....04 SHE MADE SUGGESTIVE REMARKS...05 OVERHEARD HER TALKING ABOUT IT.....07 ALWAYS WANTS TO PLAY SEX.....08 OPPOSES USE OF FAMILY PLANNING.....09 HASN'T GOT ENOUGH BOYS/GIRLS..10 SHE USES FAMILY PLANNING.....11 OTHER 96	
631	(Aside from (NAME)), have you ever talked to anyone (else) about stopping having children?	YES.....1 NO.....2	633
632	Who have you talked to?  CIRCLE ALL MENTIONED.	MOTHER.....A FATHER.....B SISTER(S).....C BROTHER(S).....D OTHER FEMALE RELATIVE(S).....E OTHER MALE RELATIVE(S).....F FRIEND/NEIGHBOR(S).....G HEALTH WORKER(S).....H RELIGIOUS LEADER(S).....I CO-WORKERS.....J OTHER WIFE/WIVES.....K OTHER (SPECIFY) X	
633	CHECK 617 AND 510:  WANTS ANOTHER CHILD  DOES NOT WANT ANOTHER CHILD OR EITHER PARTNER STERILIZED		645
634	CHECK 415: WIFE/PARTNER NOT PREGANT OR UNSURE WIFE/PARTNER PREGNANT How long would you like to wait from now before having (a/another) child? After the child (NAME) is expecting now now, how long would you like to wait before the birth of another child?	MONTHS.....1 YEARS.....2 SOON/NOW.....993 WIFE/PARTNER CAN'T GET PREG...994 AFTER MARRIAGE.....995 OTHER 996 (SPECIFY) DON'T KNOW.....998	645 638
634A	CHECK 620: PARTNER WANTS ANOTHER CHILD OR DON'T KNOW PARTNER'S DESIRE PARTNER DOES NOT WANT ANOTHER CHILD OR EITHER PARTNER STERILIZED		645
635	Do you think (NAME) would like to wait longer than you, shorter than you, or about the same time as you would like to wait?	LONGER.....1 SHORTER.....2 ABOUT THE SAME.....3 DON'T KNOW PARTNER'S DESIRE....8	638

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
637	Do you think you will wait as long as you want to wait or as long as (NAME) wants to wait?	AS LONG AS RESPONDENT WANTS.....1 AS LONG AS WIFE WANTS.....2 OTHER _____ 6 (SPECIFY) DON'T KNOW.....8									
638	Have you ever discussed this with (NAME)?	YES.....1 NO.....2	→ 641								
639	At the time you first discussed this, how long did you want to wait to have another child?	MONTHS.....1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> YEARS.....2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> AS SOON AS POSSIBLE.....993 AFTER MARRIAGE.....995 OTHER _____ 996 (SPECIFY) DON'T KNOW.....998									
640	How long did (NAME) want to wait?	MONTHS.....1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> YEARS.....2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> AS SOON AS POSSIBLE.....993 AFTER MARRIAGE.....995 OTHER _____ 996 (SPECIFY) DON'T KNOW.....998									→ 643
641	CHECK 635: DOES NOT KNOW PARTNER'S DESIRE <input type="checkbox"/> OTHER <input type="checkbox"/>		→ 643								
642	Since you have not discussed it, how is it that you know how long (NAME) wants to wait to have another child?	SHE WANTS AS MANY CHILDREN AS POSSIBLE.....01 ALL WOMEN WANT AS MANY CHILDREN AS POSSIBLE.....02 SOMEONE ELSE TOLD RESPONDENT..03 RELIGIOUS REASONS.....04 SHE MADE SUGGESTIVE REMARKS...05 OVERHEARD HER TALKING ABOUT IT.....07 ALWAYS WANTS TO PLAY SEX.....08 OPPOSES USE OF FAMILY PLANNING.....09 HASN'T GOT ENOUGH BOYS/GIRLS..10 OTHER _____ 96									
643	Aside from your wife/partner, have you ever talked to anyone (else) about how long to wait before having another child?	YES.....01 NO.....02	→ 645								

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
644	Who have you talked to?  CIRCLE ALL MENTIONED.	MOTHER.....A FATHER.....B SISTER(S).....C BROTHER(S).....D OTHER FEMALE RELATIVE(S).....E OTHER MALE RELATIVE(S).....F FRIEND/NEIGHBOR(S).....G HEALTH WORKER(S).....H RELIGIOUS LEADER(S).....I CO-WORKERS.....J OTHER WIFE/WIVES.....K  OTHER.....X (SPECIFY)	
645	Please tell me whether you agree, disagree, or have no opinion about the following statements.  I don't have much control over the number of children I will have with my partner; it is mostly up to the will of God or chance.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
646	I don't have much control over how long I wait until I have the next child; it is mostly up to the will of God or chance.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
647	The number of children that I will have with my partner depends mostly on what my partner or others want, not what I want.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	
648	The time we wait before the next birth depends mostly on what my partner or others want, not what I want.	AGREE.....1 DISAGREE.....2 NO OPINION/DK.....3	

SECTION 7. SEXUAL DYNAMICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																																
701	<p>Now, I want to ask you some questions about men and women and playing sex. I am aware that these questions are personal, but we hope that your answers will be as complete and truthful as possible.</p> <p>In your opinion, should a <u>married</u> woman be able to refuse to play sex with her husband if:</p> <p>She is menstruating?            She knows he has AIDS?            She doesn't want to get pregnant?            He beat her?            She is tired or not in the mood?            He doesn't provide economic support for her children?            for her?            He treats a co-wife better?            He is drunk?            He plays sex with outside women?            She is breastfeeding?            He is planning to marry another wife?</p> <p>Any other reasons?</p>	<table> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> <tr> <td>MENSTRUATING.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>HE HAS AIDS.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>PREGNANT.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>BEAT HER.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>TIRED/MOOD.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>ECONOMIC SUPPORT</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CHILDREN .....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>RESPONDENT.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>CO-WIFE BETTER...1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>DRUNK.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>OUTSIDE WOMEN...1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>BREASTFEED.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>MARRY ANOTHER...1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>OTHER.....</td> <td colspan="3">(SPECIFY)</td> </tr> </table>		YES	NO	DK	MENSTRUATING.....1	2	8		HE HAS AIDS.....1	2	8		PREGNANT.....1	2	8		BEAT HER.....1	2	8		TIRED/MOOD.....1	2	8		ECONOMIC SUPPORT				CHILDREN .....1	2	8		RESPONDENT.....1	2	8		CO-WIFE BETTER...1	2	8		DRUNK.....1	2	8		OUTSIDE WOMEN...1	2	8		BREASTFEED.....1	2	8		MARRY ANOTHER...1	2	8			1	2	8	OTHER.....	(SPECIFY)			
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OTHER.....	(SPECIFY)																																																																		
702	<p>In your opinion, should an woman who is <u>not married</u> be able to refuse to play sex with her partner if:</p> <p>She is menstruating?            She knows he has AIDS?            She doesn't want to get pregnant?            He beat her?            She is tired or not in the mood?            He doesn't provide economic support for her children?            for her?            He is drunk?            He plays sex with other women?            She is breastfeeding?            He is planning to marry another woman?</p> <p>Any other reasons?</p>	<table> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> <tr> <td>MENSTRUATING.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>HE HAS AIDS.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>NOT WANT PREG....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>BEAT HER.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>TIRED/MOOD.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>ECONOMIC SUPPORT</td> <td></td> <td></td> <td></td> </tr> <tr> <td>CHILDREN .....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>RESPONDENT.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>DRUNK.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>OUTSIDE WOMEN...1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>BREASTFEED.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>MARRY ANOTHER...1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>OTHER.....</td> <td colspan="3">(SPECIFY)</td> </tr> </table>		YES	NO	DK	MENSTRUATING.....1	2	8		HE HAS AIDS.....1	2	8		NOT WANT PREG....1	2	8		BEAT HER.....1	2	8		TIRED/MOOD.....1	2	8		ECONOMIC SUPPORT				CHILDREN .....1	2	8		RESPONDENT.....1	2	8		DRUNK.....1	2	8		OUTSIDE WOMEN...1	2	8		BREASTFEED.....1	2	8		MARRY ANOTHER...1	2	8			1	2	8	OTHER.....	(SPECIFY)							
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OTHER.....	(SPECIFY)																																																																		
703	<p>Some couples find it difficult to talk about sex while others do not. For you and (NAME), is it very difficult to talk about sex, somewhat difficult, or not difficult to talk about sex?</p>	<p>VERY DIFFICULT.....1            SOMEWHAT DIFFICULT.....2            NOT DIFFICULT.....3            DON'T KNOW.....8</p>																																																																	
704	<p>Aside from (NAME), do you talk to anyone else about sex?</p>	<p>YES.....1            NO.....2            OTHER.....6            (SPECIFY)</p>	706																																																																
705	<p>Who do you talk to?</p> <p>CIRCLE ALL MENTIONED.</p>	<p>MOTHER.....A            FATHER.....B            SISTER.....C            SISTER-IN-LAW.....D            BROTHER.....E            OTHER FEMALE RELATIVE.....F            OTHER MALE RELATIVE.....G            MALE FRIEND/NEIGHBOR.....H            FEMALE FRIEND/NEIGHBOR.....I            RELIGIOUS LEADER.....J            HEALTH WORKER.....K            CO-WORKER.....L            OTHER WIFE/WIVES.....M            OTHER.....X            (SPECIFY)</p>																																																																	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
706	In your marriage/relationship, who would you say has more influence over whether or not to play sex - you, your wife/partner or both of you equally?	RESPONDENT.....1 PARTNER.....2 BOTH EQUALLY.....3	
707	When was the last time that you and (NAME) played sex?	DAYS AGO.....1 WEEKS AGO.....2 MONTHS AGO.....3 YEARS AGO.....4 BEFORE LAST BIRTH.....996	
708	CHECK 707: LAST SEX ONE MONTH AGO OR LESS <input type="checkbox"/> LAST SEX MORE THAN ONE MONTH AGO <input type="checkbox"/>		717
709	In the last month, was there a time when (NAME) wanted to play sex and you did not?	YES.....1 NO.....2	714
709A	Thinking back to the last time this happened, why did you not want to play sex?	WIFE WAS PREGNANT.....01 WIFE WAS MENSTRUATING.....02 NOT IN MOOD/NOT WILLING.....03 TIRED.....04 SICK.....05 ANGRY WITH WIFE/PARTNER.....06 OTHER.....96 (SPECIFY)	
710	Thinking back to the last time this happened, did you let her know that you did not want to play sex?	YES.....1 NO.....2	712
711	How did you let him know this?	TOLD HER I DID NOT WANT TO.....1 TOLD HER I WAS SICK.....2 TOLD HER I WAS TIRED.....3 FACED THE WALL.....4 OTHER.....6 (SPECIFY)	
712	Did you play sex that time?	YES.....1 NO.....2	714
713	What was the main reason you decided to play sex even though you did not want to at first?	SHE PERSISTED/PERSUADED HIM ...01 SHE THREATENED HIM.....02 AFRAID TO REFUSE.....03 SHE OFFERED HIM SOMETHING.....04 HE WANTED TO PLEASE HER.....05 IT IS WRONG TO REFUSE.....06 SHE HAS MORE AUTHORITY.....07 OTHER.....96 (SPECIFY)	
714	In the last month, was there a time when you wanted to play sex and (NAME) did not?	YES.....1 NO.....2	717
715	Did you play sex that time?	YES.....1 NO.....2	717
716	What made her decide to play sex even though she did not want to at first?	HE PERSISTED/PERSUADED HER.....01 HE THREATENED HER.....02 AFRAID TO REFUSE.....03 HE OFFERED HER SOMETHING.....04 SHE WANTED TO PLEASE HIM.....05 IT IS WRONG TO REFUSE.....06 HE HAS MORE AUTHORITY.....07 OTHER.....96 (SPECIFY) DON'T KNOW.....98	

717 Sometimes men and women have serious misunderstandings or arguments. I would like to talk about the ways people behave during such times.

718 Sometimes men and women (ACTION) when they have a serious misunderstanding with their partner?

719 Has your wife/partner ever (ACTION)?

720 Have you ever (ACTION)?

01 QUARREL OR YELL

YES.....1

YES.....1

NO.....2

NO.....2

02 KEEP QUIET

YES.....1

YES.....1

NO.....2

NO.....2

03 CRY

YES.....1

YES.....1

NO.....2

NO.....2

04 THREATEN TO BEAT, SLAP, KICK OR PHYSICALLY HARM PARTNER

YES.....1

YES.....1

NO.....2

NO.....2

05 ACTUALLY BEAT, SLAP, KICK OR PHYSICALLY HARM PARTNER

YES.....1

YES.....1

NO.....2

NO.....2

06 DENY PARTNER SEX

YES.....1

YES.....1

NO.....2

NO.....2

07 GO OUTSIDE MARRIAGE/RELATIONSHIP TO PLAY SEX

YES.....1

YES.....1

NO.....2

NO.....2

DK.....8

DK.....8

08 SEPARATE FROM THEIR PARTNER

YES.....1

YES.....1

NO.....2

NO.....2

09 Do you know of any other things men and women do when they have a serious misunderstanding with their partner?

YES

NO

1

2

(SPECIFY)

(SPECIFY)

YES.....1

YES.....1

NO.....2

NO.....2

DK.....3

YES.....1

YES.....1

NO.....2

NO.....2

DK.....3

721 When you and (NAME) have a misunderstanding, who usually takes the initiative to restore peace: you or (NAME)?

RESPONDENT.....1

WIFE/PARTNER.....2

IT DEPENDS.....3

NEVER HAD A MISUNDERSTANDING....4

→801

722 Have you ever called on your family or on (NAME)'s family to help you resolve a misunderstanding or conflict?

YES.....1

NO.....2

**SECTION 8. AIDS AND CONDOM USE**

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801	Have you ever heard of an illness called AIDS?	YES.....1 NO.....2	803
802	Have you ever heard of any diseases that a person can get by playing sex?	YES.....1 NO.....2	817 828
803	How can a person get AIDS?  Any other ways?  RECORD ALL MENTIONED	SEXUAL INTERCOURSE WITH INFECTED PERSON.....A SKIN PIERCING INSTRUMENTS.....B SEXUAL INTERCOURSE WITH MULTIPLE PARTNERS.....C SEX WITH PROSTITUTES.....D NOT USING CONDOM.....E HOMOSEXUAL CONTACT.....F BLOOD TRANSFUSION.....G INJECTIONS.....H KISSING.....I MOSQUITO BITES.....J MOTHER TO CHILD.....K RAZOR BLADES.....L  OTHER.....W (SPECIFY) OTHER.....X (SPECIFY) DOES NOT KNOW.....Z	
804	Is there anything a person can do to avoid getting AIDS?	YES.....1 NO.....2 DOES NOT KNOW.....8	808
805	What can a person do?  Any other ways?  RECORD ALL MENTIONED	ABSTAIN FROM SEX.....A USE CONDOMS.....B AVOID MULTIPLE SEX PARTNERS.....C AVOID SEX WITH PROSTITUTES.....D AVOID SEX WITH HOMOSEXUALS.....E AVOID BLOOD TRANSFUSIONS.....F AVOID INJECTIONS.....G AVOID KISSING.....H AVOID MOSQUITO BITES.....I SEEK PROTECTION FROM FROM TRADITIONAL HEALER.....J HAVE SEX WITH A VIRGIN.....K HAVE SEX WITH AN OLD WOMAN.....L PRAY.....M AVOID SHARING RAZOR BLADES.....N AVOID SEX WITH INFECTED PERSONS.O USE SCREENED BLOOD FOR TRANSFUSIONS.....P  OTHER.....W (SPECIFY) OTHER.....X (SPECIFY) DOES NOT KNOW.....Z	
806	CHECK 805:  DID NOT MENTION CONDOMS <input type="checkbox"/> MENTIONED CONDOMS <input type="checkbox"/>		808
807	Can using a condom during sexual intercourse reduce the chances of getting AIDS?	YES.....1 NO.....2 DON'T KNOW.....8	
808	Do you think your chances of getting HIV/AIDS are great moderate, small, or no risk at all?	GREAT.....1 MODERATE.....2 SMALL.....3 NO RISK AT ALL.....4 HIV+/HAS AIDS.....5 CANNOT TELL.....6	810 814 811

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
809	<p>Why do you think that you have (NO RISK/A SMALL CHANCE) of getting AIDS?</p> <p>Any other reasons?</p> <p>RECORD ALL MENTIONED</p>	<p>ABSTAIN FROM SEX.....A</p> <p>INFREQUENT SEX.....B</p> <p>USE CONDOMS.....C</p> <p>HAVE ONLY ONE SEX PARTNER.....D</p> <p>LIMITED NUMBER OF SEX PARTNERS.....E</p> <p>SPOUSE HAS NO OTHER PARTNER.....F</p> <p>NO HOMOSEXUAL CONTACT.....G</p> <p>NO BLOOD TRANSFUSIONS.....H</p> <p>NO INJECTIONS.....I</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>	→811
810	<p>Why do you think that you have a (MODERATE/GREAT) chance of getting AIDS?</p> <p>Any other reasons?</p> <p>RECORD ALL MENTIONED</p>	<p>DO NOT USE CONDOMS.....A</p> <p>MORE THAN ONE SEX PARTNER.....B</p> <p>MANY SEX PARTNERS.....C</p> <p>SPOUSE HAS OTHER PARTNER(S).....D</p> <p>HOMOSEXUAL CONTACT.....E</p> <p>HAD BLOOD TRANSFUSION.....F</p> <p>HAD INJECTIONS.....G</p> <p>SPOUSE/PARTNER HAS AIDS.....H</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>	
811	<p>Since you first heard of AIDS, have you changed your behavior to prevent getting AIDS?</p> <p>IF YES, what did you do?</p> <p>Anything else?</p> <p>RECORD ALL MENTIONED</p>	<p>STOPPED ALL SEX.....A</p> <p>STARTED USING CONDOMS.....B</p> <p>RESTRICTED SEX TO ONE PARTNER...C</p> <p>REDUCED NUMBER OF PARTNERS.....D</p> <p>ASK SPOUSE TO BE FAITHFUL.....E</p> <p>NO MORE HOMOSEXUAL CONTACTS.....F</p> <p>STOPPED INJECTIONS.....G</p> <p>OTHER _____ W</p> <p>(SPECIFY)</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p> <p>NO, HAVE NOT CHANGED.....Y</p> <p>NO, ALREADY RESTRICTED TO ONE SEX PARTNER.....Z</p>	
812	<p>Do you personally know someone who has AIDS or has died of AIDS?</p>	<p>YES.....1</p> <p>NO.....2</p> <p>NOT SURE/DOES NOT KNOW.....8</p>	→814
813	<p>Do any of your family members or close friends have AIDS or has anyone died of AIDS?</p>	<p>YES.....1</p> <p>NO.....2</p> <p>NOT SURE/DOES NOT KNOW.....8</p>	
814	<p>CHECK 502, 805, AND 807:</p> <p>KNOWS ABOUT CONDOMS <input type="checkbox"/></p> <p>DOES NOT KNOW ABOUT CONDOMS <input type="checkbox"/></p>		→828
815	<p>Do you think it is acceptable for a married woman to ask her husband to use a condom?</p>	<p>YES.....1</p> <p>NO.....2</p> <p>IT DEPENDS.....3</p> <p>DOES NOT KNOW.....8</p>	
816	<p>If a woman and her sexual partner are not married, is it acceptable for her to ask him to use a condom?</p>	<p>YES.....1</p> <p>NO.....2</p> <p>IT DEPENDS.....3</p> <p>DOES NOT KNOW.....8</p>	



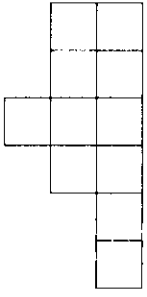
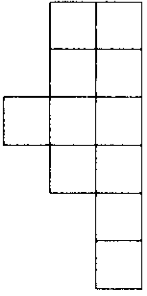
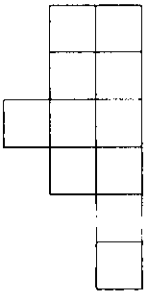
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
816A	CHECK 805 AND 807:  KNOWS CONDOMS CAN PREVENT AIDS <input type="checkbox"/> DOES NOT KNOW CONDOMS CAN PREVENT AIDS <input type="checkbox"/>		828
817	CHECK 510:  NOT USING CONDOM <input type="checkbox"/> USING CONDOM <input type="checkbox"/>		822
818	Have you ever used a condom with (NAME)?	YES.....1 NO.....2	822
819	Have you ever discussed with her about whether or not to use a condom?	YES.....1 NO.....2	822
821	What is the main reason that you have not discussed this directly with (NAME)?	EMBARRASSED/SHY.....01 AFRAID.....02 DON'T WANT TO USE CONDOM.....03 DON'T NEED TO USE CONDOM.....04 SHE WILL THINK I'M PROMISCUOUS.....05 WILL THINK I DON'T TRUST HER.....06 SHE WOULDN'T LIKE CONDOM.....07 NEVER THOUGHT ABOUT IT.....08 DON'T KNOW.....98  OTHER.....96 (SPECIFY)	828
822	The first time you and (NAME) used or discussed using condoms, who proposed the idea: you, your partner, or someone else?	RESPONDENT PROPOSED.....1 PARTNER PROPOSED.....2 SOMEONE ELSE.....3 DOES NOT REMEMBER.....8	827 828
825	At that time, did (NAME) want to use condoms?	YES.....1 NO.....2 DON'T KNOW.....8	
826	CHECK 822:  SOMEONE ELSE PROPOSED <input type="checkbox"/> PARTNER PROPOSED <input type="checkbox"/>		828
827	At that time did you want to use condoms?	YES.....1 NO.....2 DON'T KNOW.....8	
828	RECORD THE TIME.	HOUR..... MINUTES.....	

**SECTION 9. IDENTIFICATION OF OTHER INTERVIEWED WIVES/PARTNERS**

<b>901</b>	<b>CHECK COVER PAGE:</b> RESPONDENT HAS BEEN INTERVIEWED BEFORE	<input style="width: 20px; height: 20px;" type="checkbox"/>	RESPONDENT HAS NOT BEEN INTERVIEWED BEFORE	<input style="width: 20px; height: 20px;" type="checkbox"/>	→ <b>10A</b>
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**901A** HOW MANY TIMES HAS RESPONDENT BEEN INTERVIEWED?

NUMBER.....

INFORMATION ON WIFE/PARTNER ABOUT WHOM RESPONDENT WAS PREVIOUSLY INTERVIEWED  PLACE NAME _____ NAME OF HOUSEHOLD HEAD _____ NAME AND LINE NUMBER OF WIFE/PARTNER _____ LINE NUMBER OF RESPONDENT..... CLUSTER NUMBER..... HOUSEHOLD NUMBER..... REGION (Masaka=1, Lira=2)..... URBAN/RURAL (urban=1, rural=2).....	
INFORMATION ON WIFE/PARTNER ABOUT WHOM RESPONDENT WAS PREVIOUSLY INTERVIEWED  PLACE NAME _____ NAME OF HOUSEHOLD HEAD _____ NAME AND LINE NUMBER OF WIFE/PARTNER _____ LINE NUMBER OF RESPONDENT..... CLUSTER NUMBER..... HOUSEHOLD NUMBER..... REGION (Masaka=1, Lira=2)..... URBAN/RURAL (urban=1, rural=2).....	
INFORMATION ON WIFE/PARTNER ABOUT WHOM RESPONDENT WAS PREVIOUSLY INTERVIEWED  PLACE NAME _____ NAME OF HOUSEHOLD HEAD _____ NAME AND LINE NUMBER OF WIFE/PARTNER _____ LINE NUMBER OF RESPONDENT..... CLUSTER NUMBER..... HOUSEHOLD NUMBER..... REGION (Masaka=1, Lira=2)..... URBAN/RURAL (urban=1, rural=2).....	

SECTION 10. LANGUAGE INFORMATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
10A	WHAT IS THE RESPONDENT'S OWN LANGUAGE?	LUGANDA.....1 LANGO.....2 OTHER.....6 (SPECIFY)	
10B	IN WHAT LANGUAGE DID YOU CONDUCT THE INTERVIEW?	LUGANDA.....1 LANGO.....2 OTHER.....6 (SPECIFY)	
10C	FOR HOW MUCH OF THE INTERVIEW DID YOU DEPEND ON A THIRD PERSON TO INTERPRET FOR YOU?	NONE OF THE INTERVIEW.....1 A SMALL PORTION.....2 MOST OF THE INTERVIEW.....3 ALL OF THE INTERVIEW.....4	

INTERVIEWER OBSERVATIONS: \_\_\_\_\_

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