# PMA Niger
## Phase 2 Survey
### Client Exit Interview Baseline Questionnaire

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>001a. Your name:</td>
<td></td>
</tr>
<tr>
<td>001b. Enter staff name below:</td>
<td></td>
</tr>
<tr>
<td>Please record your name</td>
<td></td>
</tr>
<tr>
<td>002a. Is this date and time correct?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>$(today_formatted)</td>
<td></td>
</tr>
<tr>
<td>002b. Record the correct date and time.</td>
<td>Day: Month: Year:</td>
</tr>
<tr>
<td>003a. Region</td>
<td>tahoua, maradi, agadez, tillaberi, zinder, dosso, diffa, niamey</td>
</tr>
<tr>
<td>003b. Commune / Departement</td>
<td></td>
</tr>
<tr>
<td>003c. Locality / Commune</td>
<td></td>
</tr>
<tr>
<td>004. Enumeration Area</td>
<td>For existing facilities the EA-level is determined from the dataset at a</td>
</tr>
<tr>
<td></td>
<td>previous phase as a facility may be serving more than one EA.</td>
</tr>
<tr>
<td>005a. Is this a facility from the previous phase or is this a new facility added this phase?</td>
<td>Follow up facility, New facility</td>
</tr>
<tr>
<td>006. Name of the facility</td>
<td></td>
</tr>
<tr>
<td>Please select the name of the facility from the previous phase.</td>
<td></td>
</tr>
<tr>
<td>006. Name of the facility</td>
<td></td>
</tr>
<tr>
<td>007. Facility number</td>
<td></td>
</tr>
<tr>
<td>Please record the number of the facility from the listing form.</td>
<td></td>
</tr>
<tr>
<td>008. Is a competent respondent present and available to be interviewed today?</td>
<td>Yes, No</td>
</tr>
<tr>
<td>Please confirm that you have screened the respondent for COVID-19 before continuing.</td>
<td>Yes, No</td>
</tr>
<tr>
<td>INFORMED CONSENT</td>
<td></td>
</tr>
</tbody>
</table>
Find the competent female respondent. Administer the consent procedures.

Bonjour. Je m'appelle ...................... et je travaille l'Institut National de la Statistique (INS) dans le but d'aider le gouvernement à améliorer les services de santé.

Vous avez été sélectionné(e) au hasard pour participer à cette étude. Je souhaiterais vous poser quelques questions concernant votre expérience avec les services que vous avez reçus aujourd'hui. Votre participation à cette étude implique une interview sur les services de santé reproductive, qui durera 10 à 15 minutes. Nous vous poserons des questions sur cette structure de santé, et les services que vous avez reçus. Le responsable/propriétaire de cet établissement a aussi été interviewé. Les informations de cette interview pourront être utilisées par le gouvernement et des organisations de santé afin d'améliorer les services ou pour mener de futures enquêtes.

Votre nom ne sera pas relié à vos réponses afin de protéger la confidentialité de votre identité. Nous ne partagerons pas vos informations et vos réponses avec les personnels de cette structure, et le personnel de cette structure ne saura pas comment vous avez répondu à nos questions. En plus vos réponses n'affecteront en rien la nature ou la qualité des soins que vous pourriez recevoir à l'avenir de la part de ce prestataire.

Après cette enquête, nous vous demanderons si nous pourrons vous recontacter par téléphone dans l'avenir pour mettre à jour vos informations sur votre expérience des services que vous aurez reçus. Cette participation est volontaire. Vous pouvez refuser de répondre à une question ou choisir d'interrompre l'interview à tout moment. Pour toutes questions ou préoccupations concernant l'étude, vous pouvez contacter le directeur de l'étude, le Souleymane Alzouma au numéro téléphonique suivant Tél + (227) 20723560. Avez-vous jusqu'ici des questions sur cette enquête ?

009a. Read the verbal consent text. Then, ask: May I begin the interview now?

[Yes] [No]

009b. Respondent's signature

Please ask the respondent to sign or check the box in agreement of their participation.

Checkbox

[ ]

**WARNING:** The respondent has not signed or checked the box, despite agreeing to be interviewed in the previous question. To conduct the survey, the respondent must sign or touch the checkbox.

You may go back to obtain a signature or check the box or you should go back to the previous question to indicate the respondent does not want to be interviewed.

009c. Respondent’s name

Enter the respondent’s full name.

010. Interviewer's name: ${your_name}
Mark your name as a witness to the consent process.

<table>
<thead>
<tr>
<th>010. Interviewer’s name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please record your name as a witness to the consent process. You previously entered &quot;${your_name_text}&quot;.</td>
</tr>
</tbody>
</table>

SECTION 1 – Background Information
I would like to start by asking a few questions about yourself.

<table>
<thead>
<tr>
<th>101. Did you receive any family planning information or a method during your visit today?</th>
</tr>
</thead>
<tbody>
<tr>
<td>If no, thank her for her time and end the interview.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>012. How old were you at your last birthday?</th>
</tr>
</thead>
<tbody>
<tr>
<td>102a. CHECK: The respondent is not eligible for interview. Please thank her for her time.</td>
</tr>
</tbody>
</table>

103. Are you currently married or living together with a man as if married?
Probe: If no, ask whether the respondent is divorced, separated, or widowed.

<table>
<thead>
<tr>
<th>103. Are you currently married or living together with a man as if married?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, currently married</td>
</tr>
<tr>
<td>Yes, living with a man</td>
</tr>
<tr>
<td>Not currently in union: Divorced / separated</td>
</tr>
<tr>
<td>Not currently in union: Widow</td>
</tr>
<tr>
<td>No, never in union</td>
</tr>
<tr>
<td>No response</td>
</tr>
</tbody>
</table>

104. What is the highest level of school you attended?
Only record formal schooling. Do not record bible or koranic school or short courses.

<table>
<thead>
<tr>
<th>104. What is the highest level of school you attended?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never attended</td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td>Secondary</td>
</tr>
<tr>
<td>Tertiary</td>
</tr>
<tr>
<td>No response</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>105. How many times have you given birth?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Enter 0 if she has never given birth. Enter -99 for no response.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>106. Imagine a 10-step ladder where on the bottom, the first step, stand the poorest people, and on the highest step, the 10th, stand the rich. On which step is your household located today?</th>
</tr>
</thead>
<tbody>
<tr>
<td>One (poorest)</td>
</tr>
<tr>
<td>Two</td>
</tr>
<tr>
<td>Three</td>
</tr>
<tr>
<td>Four</td>
</tr>
<tr>
<td>Five</td>
</tr>
<tr>
<td>Six</td>
</tr>
<tr>
<td>Seven</td>
</tr>
<tr>
<td>Eight</td>
</tr>
<tr>
<td>Nine</td>
</tr>
<tr>
<td>Ten (richest)</td>
</tr>
<tr>
<td>No response</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>107. Is this the closest health facility to your current residence?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Do not know</td>
</tr>
<tr>
<td>No response</td>
</tr>
</tbody>
</table>

108. What was the main reason you did not go to the facility nearest to your home?

<table>
<thead>
<tr>
<th>108. What was the main reason you did not go to the facility nearest to your home?</th>
</tr>
</thead>
<tbody>
<tr>
<td>No family planning services</td>
</tr>
<tr>
<td>Inconvenient operating hours</td>
</tr>
<tr>
<td>Bad reputation / Bad prior experience</td>
</tr>
<tr>
<td>Do not like personnel</td>
</tr>
<tr>
<td><strong>109. How much time did it take you to travel here today?</strong></td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td><strong>Hours</strong></td>
</tr>
</tbody>
</table>

**SECTION 2 – Family Planning Services**

Now I would like to ask about family planning services you received today.

<table>
<thead>
<tr>
<th><strong>201. Was family planning the main reason you came here today?</strong></th>
<th><strong>Yes</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No</strong></td>
<td></td>
</tr>
<tr>
<td><strong>No response</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>202. What was the main reason for your visit today?</strong></th>
<th><strong>STI</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>HIV/AIDS</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Maternal health</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Child health</strong></td>
<td></td>
</tr>
<tr>
<td><strong>General health</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Other</strong></td>
<td></td>
</tr>
<tr>
<td><strong>No response</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>203. During your visit today, were you given a family planning method, a prescription for a method, or neither?</strong></th>
<th><strong>A contraceptive method</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A prescription for a method</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Neither</strong></td>
<td></td>
</tr>
<tr>
<td><strong>No response</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>204. Did your provider discuss family planning with you today?</strong></th>
<th><strong>Yes</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>No</strong></td>
<td></td>
</tr>
<tr>
<td><strong>No response</strong></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>205. Which method were you prescribed or given?</strong></th>
<th><strong>Female sterilization</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Male sterilization</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Implant</strong></td>
<td></td>
</tr>
<tr>
<td><strong>IUD</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Injectables</strong></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>Options</td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>----------------------------------------------</td>
</tr>
<tr>
<td>LCL_201. PROBE: Was the injection administered via syringe or small needle?</td>
<td>Syringe, Small needle (Sayana Press), No Response</td>
</tr>
<tr>
<td>![sayana_depo_150x300.jpg]</td>
<td></td>
</tr>
<tr>
<td>LCL_202. Did you inject it yourself or did a healthcare provider do it for you?</td>
<td>Self, Provider, No Response</td>
</tr>
<tr>
<td>LCL_203. Were you offered the choice of doing the injection yourself?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>LCL_204. Were you offered the choice of having the provider give you the injection?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>LCL_205. Have you heard that there is a type of injectable that you can inject yourself?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>![sayana_only.jpg]</td>
<td></td>
</tr>
<tr>
<td>LCL_206. Would you be interested in doing the injection yourself instead of going back to the provider?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>206. Just before this visit, were you using the same method, did you switch from another method or were you using no method?</td>
<td>Same method, Another method, No method, No response</td>
</tr>
<tr>
<td>207. How long have you been using this method without stopping?</td>
<td>X days, X weeks, X months, X years, No response</td>
</tr>
<tr>
<td>207. Enter a value for ${method_duration_lab}:</td>
<td></td>
</tr>
<tr>
<td>208. Have you ever used this method before?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>209. Have you used it in the past 12 months?</td>
<td>Yes, No, No response</td>
</tr>
</tbody>
</table>
210. During your visit today, did you obtain the method of family planning you wanted?

- Yes
- No
- Neither, follow-up visit only
- No response

211. Which method did you initially want to use?

- Female sterilization
- Male sterilization
- Implant
- IUD
- Injectable
- Pill
- Emergency contraception
- Male condom
- Female condom
- Standard days / cycle beads
- LAM
- Rhythm method
- Withdrawal
- Other traditional methods
- No response

212. Why didn't you obtain the method you wanted?

- Method out of stock
- Method not available at all
- Provider not trained to provide the method
- Provider recommended a different method
- Not eligible for method
- Decided not to adopt a method
- Too costly
- Other
- Do not know
- No response

213. Who made the final decision about what method you got today?

- Respondent alone
- Provider
- Partner
- Respondent and provider
- Respondent and partner
- Other
- Do not know
- No response

214. Did you pay any money for any of the family planning services you received or were provided today?

- Yes
- No
- No response

215. Did the provider tell you that if you do not take the pill every day, your chances of becoming pregnant are higher?

- Yes
- No
- No response
<table>
<thead>
<tr>
<th>Question</th>
<th>Response Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>216. Did the provider tell you that if you are more than one month late for your shot, your chances of becoming pregnant are higher?</td>
<td>Yes</td>
</tr>
<tr>
<td>Now I am going to ask you some questions about the family planning consultation you had with your provider today. Would you completely agree, agree, disagree, completely disagree with the following statements?</td>
<td>Completely agree</td>
</tr>
<tr>
<td>217. I felt encouraged to ask questions and express my concerns.</td>
<td>Completely agree</td>
</tr>
<tr>
<td>218. The provider made efforts to ensure there were no interruptions during our session.</td>
<td>Completely agree</td>
</tr>
<tr>
<td>219. The provider asked me questions in order to provide counseling that fit me personally.</td>
<td>Completely agree</td>
</tr>
<tr>
<td>220. I received all of the information I wanted to know about my options for contraceptive methods.</td>
<td>Completely agree</td>
</tr>
<tr>
<td>221. The provider gave me the time I needed to consider the contraceptive options we discussed.</td>
<td>Completely agree</td>
</tr>
<tr>
<td>222. After this consultation, I could understand how my body might react to using contraception.</td>
<td>Completely agree</td>
</tr>
<tr>
<td>223. I could understand how to use the method(s) we talked about during the consultation.</td>
<td>Completely agree</td>
</tr>
</tbody>
</table>
224. I was able to give my opinion about what I needed.

<table>
<thead>
<tr>
<th>Option</th>
<th>No response</th>
<th>Do not know</th>
<th>Agree</th>
<th>Disagree</th>
<th>Completely disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

225. I felt pressured by the healthcare provider to use the method they wanted me to use.

<table>
<thead>
<tr>
<th>Option</th>
<th>No response</th>
<th>Do not know</th>
<th>Agree</th>
<th>Disagree</th>
<th>Completely disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

226. I felt scolded because of my marital status.

<table>
<thead>
<tr>
<th>Option</th>
<th>No response</th>
<th>Do not know</th>
<th>Agree</th>
<th>Disagree</th>
<th>Completely disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completely</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

227. Did the provider discuss the role of your husband/partner in using contraception?

<table>
<thead>
<tr>
<th>Option</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

LCL_207. Did you receive complete information about your method, including:

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Where to store the injection material until I use it?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>What do with the syringe after the injection?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>An instruction sheet to take home to remind me of steps for self-injection?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A reinjection calendar to take home for example, information on when and how to remember my next injection date?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

LCL_208. How comfortable do you feel using the method on your own?

<table>
<thead>
<tr>
<th>Option</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very comfortable</td>
<td></td>
</tr>
<tr>
<td>Comfortable</td>
<td></td>
</tr>
<tr>
<td>Uncomfortable</td>
<td></td>
</tr>
<tr>
<td>Very uncomfortable</td>
<td></td>
</tr>
<tr>
<td>Do not know</td>
<td></td>
</tr>
</tbody>
</table>

228. During your visit today, were you told by the provider about advantages and disadvantages with a method to delay or avoid pregnancy?

<table>
<thead>
<tr>
<th>Option</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

229. What advantages did the provider tell you about your \$\text{method\_prescribed\_lab}\$?

<table>
<thead>
<tr>
<th>Option</th>
</tr>
</thead>
<tbody>
<tr>
<td>Efficacy</td>
</tr>
<tr>
<td>Less bleeding</td>
</tr>
<tr>
<td>More regular bleeding</td>
</tr>
<tr>
<td>Protects for a long time</td>
</tr>
<tr>
<td>-------------------------</td>
</tr>
<tr>
<td>No hormones</td>
</tr>
<tr>
<td>Ease of use</td>
</tr>
<tr>
<td>Return to fertility</td>
</tr>
<tr>
<td>Discrete</td>
</tr>
<tr>
<td>Few side effects</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>No response</td>
</tr>
<tr>
<td>Irregular bleeding</td>
</tr>
<tr>
<td>More bleeding</td>
</tr>
<tr>
<td>Few or no periods</td>
</tr>
<tr>
<td>Weight gain</td>
</tr>
<tr>
<td>Nausea</td>
</tr>
<tr>
<td>Cramping</td>
</tr>
<tr>
<td>Not easy to use</td>
</tr>
<tr>
<td>Not very effective</td>
</tr>
<tr>
<td>Headache</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>No response</td>
</tr>
</tbody>
</table>

230. What disadvantages did the provider tell you about your ${method_prescribed_lab}?

SECTION 3: Client Satisfaction

Now I would like to ask about the services you received today.

301. How long did you wait between the time you arrived at this facility and the time you were able to see a provider for the consultation?

Enter responses in minutes and hours. 0 is a possible answer. Enter -88 for do not know in both, -99 for no response in both.

<table>
<thead>
<tr>
<th>Minutes</th>
<th>Hours</th>
</tr>
</thead>
</table>

302. Overall, how satisfied are you with the family planning services you received at this establishment today? Would you say very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied
- No response

303. Would you refer your relative or friend to this facility?

- Yes
- No
- Do not know
- No response

304. Would you return to this facility?

- Yes
- No
- Do not know
- No response

305. People have different opinions about family planning services. In your community, would you say most people, some people or few people have the following opinions about family planning services:

1 = Most 2 = Some 3 = Few -99 = No Response
| a. Women are treated respectfully when they go to this facility for family planning. | 1 | 2 | 3 | -99 |
| b. Women will be able to receive family planning method of their choice at this facility. | 0 | 0 | 0 | 0 |
| c. Women have access to affordable family planning services at this facility. | 0 | 0 | 0 | 0 |

### Follow-Up Consent

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>401. Thank you for the time you have kindly granted us. Could we contact you via phone to ask you questions to update this information in the next four months?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>402. Do you have access to a phone?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>403a. Can I have your primary phone number in case we would like to follow up with you in the future?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>403b. What is your primary phone number? Enter an 8-digit number without the country code. Do not include spaces or dashes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>403c. Can you repeat the number again? Enter an 8-digit number without the country code. Do not include spaces or dashes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>403d. Is this your personal phone number? A personal phone is not shared with other people.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>404a. Can I have your secondary phone number in case we would like to follow up with you in the future?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>404b. What is your secondary phone number? Enter an 8-digit number without the country code. Do not include spaces or dashes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>404c. Can you repeat the number again? Enter an 8-digit number without the country code. Do not include spaces or dashes.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>404d. Is this your personal phone number? A personal phone is not shared with other people.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>405. Is $[firstname]$ the name you go by in your household?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
406. What is the name you go by in your household?

407. Is ${firstname} the name you go by in your community?

- Yes
- No
- No response

408. What is the name you go by in your community?

Thank the respondent for her time.
The respondent is finished, but there are still more questions for you to complete.

Thank you.
There are still more questions for you to complete.

### Questionnaire Result

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>098. In what language was this interview conducted?</td>
<td>Anglais, Français, Djerma/Sonraï, Haussa, Fulfulde, Kanouri, Gourmantchema, Tamacheq, Toubou, Arabe, Autre</td>
</tr>
<tr>
<td>099. Record the result of the Client Exit Interview Questionnaire.</td>
<td>Completed, Postponed, Refused, Partly completed, Other</td>
</tr>
</tbody>
</table>