PMA Nigeria
COVID-19 Questionnaire (2020)

001a. Your name: ${your_name}
Is this your name?  
◯ Yes
◯ No

001b. Enter your name below.
*Please record your name*

002a. Current date and time: ${now_lab}.
Is this date and time correct?  
◯ Yes
◯ No

002b. Record the correct date and time.

Now you will select an assignment

Select an RE group

Select an RE

Select an EA assignment

Select from among assigned respondents

There is no information for this woman from the previous survey. Please choose another woman from the assignments list.

You have not selected an assignment.
*Make a selection on the previous screen.*

<table>
<thead>
<tr>
<th>Respondent summary</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Respondent first name: ${name_auto} Age: ${age_auto}</td>
<td></td>
</tr>
<tr>
<td>Survey language: ${language_lab} Head of household first name: ${hh_head_name_auto}</td>
<td></td>
</tr>
<tr>
<td>Location summary Level 1: ${level1_auto} Level 2: ${level2_auto} Level 3: ${level3_auto}</td>
<td></td>
</tr>
<tr>
<td>EA name: ${EA_auto} Structure: ${structure_auto} Household: ${household_auto}</td>
<td></td>
</tr>
<tr>
<td>Phone number: ${phone_auto}</td>
<td></td>
</tr>
</tbody>
</table>
| Is this the correct respondent?  
◯ Yes
◯ No |  |

Tap to call ${name_auto} at ${phone_auto}

008. Call attempt number

009. Did someone answer your call?  
◯ Yes
◯ No
010. Hello. My name is . . . . . . . . . . . . calling from the CRERD. May I speak to ${name_auto}?

☐ Yes
☐ No

011. Do you have the correct person on the phone?

☐ Yes
☐ No

012. Record the result of the phone call.

☐ Reached correct participant
☐ No answer
☐ Wrong number
☐ Phone switched off
☐ Phone no longer working
☐ Participant not available

INFORMED CONSENT

Read the greeting on the next screen

Title of research: Performance Monitoring for Action – Lagos, Nigeria

Name(s) and affiliation(s) of researcher(s) of application: This research is being conducted by Dr. Scott Radloff of the Johns Hopkins University, and Dr. Funmilola OlaOlorun on behalf of the Center for Research Evaluation and Resource Development, Ile-Ife.

Sponsor(s) of Research: This study is sponsored by the Bill & Melinda Gates Foundation through the Bill & Melinda Gates Institute for Population and Reproductive Health, Johns Hopkins University, Baltimore, MD.

Purpose of research: The purpose of this research is to learn about the awareness, knowledge, risk perception, behavior change, and impact of the coronavirus pandemic on women ages 15-49 years in Lagos in order to provide government and other stakeholders with data to improve interventions and programs aimed at this population.

Procedure of the research, what shall be required of each participant, and approximate total number of participants that would be involved in the research: We are asking you to join our study because you were interviewed by a member of our team in December 2019/January 2020 for a similar survey, and agreed to be contacted again. If you agree to participate in the study, we will ask you to complete a short questionnaire by phone where I will ask you about your knowledge related to the coronavirus, and how this virus has impacted you. The questionnaire should take about 20 minutes to complete. After you complete the survey, you will be provided with recharge cards worth N300.

Expected duration of research, and of participant’s involvement:
In total, we expect you to be involved in the original research for which we first contacted you for 3 years.
Your participation in the study will only include annual or biannual surveys in-person or by phone.

Risk(s): There are no major risks to participating in the study, but you may get tired or bored when completing the questionnaire. Some questions may be personal or sensitive and may make you feel embarrassed or uncomfortable. Please let us know if you feel distressed. There is a small risk that someone outside the study will see your information. We will do our best to keep your information safe by not including your name anywhere in the survey. Upon completion of the survey, data will be sent to and stored on a secure, password-protected server. Only authorized individuals will be able to access the data. All data are encrypted when transferred. When we share your information with other researchers, we will ask them to use the same protections.

Costs to the participant, if any, of joining the research: Your participation in this research will not cost you anything, apart from some of your time.

Benefit(s): There is no direct benefit to you from being in this study. We hope this knowledge will help us understand how the coronavirus is affecting women’s lives. The data collected from this study will provide information for future research, interventions, and programs.

Confidentiality: All information collected in this study will be given code numbers, and no names will be recorded. Your responses cannot be linked to you in any way, and your name or any identifier will not be used in any publications or reports from this study.

Voluntariness: Your participation in this research is entirely voluntary. You do not have to join, it is your choice. There will be no penalty if you decide not to join.

Alternatives to participation: If you choose not to participate, this will not affect your ability to participate in other surveys or receive services in your community.

Due inducement: You will be given a small token for your time. You will receive recharge cards worth ₦300 for participating in the study.

Consequences of participant’s decision to withdraw from research and procedures for orderly termination of participation: You can also choose to withdraw from the research at any time. Please note that any information that has been obtained from you before you choose to withdraw may have been used in data analysis or report writing. These cannot be removed, but the researchers will comply with your wish as much as it is practicable.

Modality of providing treatments and action(s) to be taken in case of injury or adverse event(s): If you suffer any injury as a result of your participation in this research, the project will ensure you are referred to appropriate services.
What happens to research participants and communities when the research is over? The researchers will post the outcome of the research on the project website. During the course of this research, you will be informed about anything that may affect your continued participation, or your health.

Statement about sharing of benefits among researchers, and whether this includes or excludes research participants: If this research leads to commercial products, the Johns Hopkins University shall own it. There is no plan to contact any participant now or in the future about such commercial benefits.

Any apparent or potential conflict of interest: We are not aware of anything that may prevent the researchers from conducting the research in a manner that will be fair.

Statement of person obtaining informed consent:

Hello. My name is . . . . . . . . . . . . . and I am working for the Center for Research, Evaluation Resources, and Development. We are conducting a local survey about COVID-19. You have been selected for this survey because you gave us your phone number after you were interviewed in the Phase 1 of PMA Survey in December 2019 or January 2020.

We would very much appreciate your participation in this survey. This information will help us inform the government to better plan health services. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team, and only fully de-identified data will be shared.
used when conducting analyses, presenting results, or sharing data.
Participation in this survey is voluntary, and if we should come to any question you don’t want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important. The survey will take about 20 minutes to complete.

Women who participate in the phone interview will receive a small incentive to compensate them for their time. A N700 recharge card will be provided to each respondent after the interview is completed.

I am going to ask you questions about what you know and what you practice about COVID-19.

At this time, do you want to ask me anything about the survey?

May I begin the interview now?

If yes continue with interview, if no thank the respondent and end the interview. If you have any questions about the study and your right as a research participant, you may ask me now or you may also contact Dr. Musa Sani Zakirai at Center for Research, Evaluation Resources and Development in Ile-Ife, Nigeria at +234 8094749830.

At this time, do you want to ask me anything about the survey? May I begin the interview now?

If yes continue with interview, if no thank the respondent and end the interview.

| 013. Read the verbal consent text. Then, ask: May I begin the interview now? | Yes | No |
| 014. Please tell me your name | |
| 015. Please tell me your age in years. Enter -88 for do not know. Enter -99 for no response. | |
| CHECK: The respondent said in a previous survey that she is ${age_auto}. Did the respondent say she is ${age} years old? If yes, then she is too young to participate in this survey. | Yes | No |
| CHECK: The respondent said in a previous survey that she is ${age_auto}. Did the respondent say she is ${age} years old? | Yes | No |
| 016. What is the highest level of school you attended? Only record formal schooling. Do not record bible or koranic school or short courses. | Never attended | Primary | Secondary | Higher | No response |
### SECTION 1: BACKGROUND

I would like to ask you some questions about your background and residence

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>101. Are you currently in ${\text{region}}?$</td>
<td>□ Yes □ No □ No response</td>
</tr>
<tr>
<td>102. In which state are you staying now?</td>
<td></td>
</tr>
<tr>
<td>103. Do you have a dedicated place to wash your hands at your current residence?</td>
<td>□ Yes □ No □ No response</td>
</tr>
<tr>
<td>104. Do you have soap at this place to wash your hands?</td>
<td>□ Yes □ No □ No response</td>
</tr>
<tr>
<td>105. How many times did you wash your hands with soap yesterday?</td>
<td>□ Zero (0) □ 1 to 3 □ 4 to 10 □ More than 10 □ No response</td>
</tr>
</tbody>
</table>

### SECTION 2: AWARENESS OF COVID-19, and MEDIA EXPOSURE

The next series of questions are about COVID-19, also called Coronavirus.

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>201. How much, if anything, have you heard or read about the recent Coronavirus (COVID-19) outbreak?</td>
<td>□ A lot □ Some □ A little □ Not at all □ No response</td>
</tr>
<tr>
<td>202. How did you learn about Coronavirus (COVID-19)?</td>
<td>□ Newspaper □ Radio □ Television □ Poster / billboard □ Town crier □ Phone message □ Family □ Friends / neighbors □ Community/religious leaders □ Social media (Twitter, Facebook, WhatsApp) □ Health personnel □ Messages from government or authorities □ School □ None of the above □ No response</td>
</tr>
</tbody>
</table>
203. Have you ever heard of an emergency number or call center for reporting suspected cases of coronavirus? **PROBE:** If yes, ask if the respondent knows the number

<table>
<thead>
<tr>
<th>Option</th>
<th>Yes</th>
<th>No</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes, knows the number</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes, but does not know the number</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

204. Which of these sources do you trust for accurate information about Coronavirus (COVID-19)?

*Read all options Select all that apply*

<table>
<thead>
<tr>
<th>Source</th>
<th>Yes</th>
<th>No</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Newspaper</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Radio</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Television</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Poster / billboard</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Town crier</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone message</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td></td>
<td></td>
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<tr>
<td>Friends / religious leaders</td>
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<td></td>
<td></td>
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<tr>
<td>Community / religious leaders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social media (Twitter, Facebook, WhatsApp)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Health personnel</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Messages from government or authorities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>None of the above</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No response</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

205. Do you trust the call center number for accurate information?

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

206. Have you tried to call the emergency number or call center?

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

**SECTION 3: COVID-19 RISK PERCEPTION**

*Now I would like to ask about your views about Coronavirus (COVID-19). Your answers will be kept completely confidential.*

301. If someone in your family caught Coronavirus (COVID-19), would you want to keep it a secret?

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

302. How concerned are you about the spread of Coronavirus (COVID-19) in your community?

*Read all options*

<table>
<thead>
<tr>
<th>Level</th>
<th>Very concerned</th>
<th>Concerned</th>
<th>A little concerned</th>
<th>Not concerned</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>No</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>No response</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

303. Approximately how many people in your community do you think are or have been infected with Coronavirus (COVID-19)?

*Read all options*

<table>
<thead>
<tr>
<th>Number</th>
<th>Most people</th>
<th>Some people</th>
<th>Few people</th>
<th>No one is infected</th>
<th>Do not know</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td></td>
<td></td>
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<tr>
<td>No</td>
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<tr>
<td>No response</td>
<td></td>
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</tr>
</tbody>
</table>
304. Have any of your close relatives or friends had or have Coronavirus (COVID-19)?

- Yes
- No
- Do not know
- No response

305. How concerned are you about getting infected yourself?

**Read all options**
- Very concerned
- Concerned
- A little concerned
- Not concerned
- I am currently / was infected with COVID-19
- No response

---

**SECTION 4: COVID-19 SYMPTOMS AND TRANSMISSION**

*Now I would like to ask about your knowledge of COVID-19 symptoms and transmission.*

401. What are common symptoms of Coronavirus (COVID-19) infection?

*Do not read responses. Select all that apply*

- Fever
- Cough
- Shortness of breath/difficulty breathing
- Chest pain
- Sore throat
- Runny or stuffy nose
- Muscle or body aches
- Headaches
- Fatigue (tiredness)
- Diarrhea
- Loss of taste
- Loss of smell
- Rash
- Dizziness
- Sneezing
- Other
- Do not know any symptoms
- No response

402. Which of the following statements are true about the Coronavirus (COVID-19) infection?

*Read all options*

- Some people cannot be infected with Coronavirus (COVID-19)

- Yes
- No
- Do not know
- No response

- Most people experience mild or no symptoms

- Yes
- No
<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Do not know</th>
<th>No response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Most people develop serious illness requiring hospitalization</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>People can be infected and not have symptoms</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Only people with symptoms are contagious</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>You can become infected by shaking hands with someone who is infected</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>You can become infected by close contact with infected people even if you are not touching</td>
<td></td>
<td></td>
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<tr>
<td>People of all ages can become infected</td>
<td></td>
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<tr>
<td>Coronavirus (COVID-19) is mostly a risk to rich people</td>
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<tr>
<td>403. Which of the following actions can reduce the risk of being infected?</td>
<td></td>
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<tr>
<td>Read all options</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Washing hands with soap and water frequently</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Washing hands with hand sanitizer frequently</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avoiding any close contact (2 meters) with people when you go out</td>
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</tr>
<tr>
<td>Question</td>
<td>Options</td>
<td></td>
<td></td>
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<tr>
<td>-------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>404. Have you taken any action to prevent becoming infected?</td>
<td>○ Yes&lt;br&gt;○ No&lt;br&gt;○ Do not know&lt;br&gt;○ No response</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>405. What have you done?</td>
<td>□ Washing hands with soap and water frequently&lt;br&gt;□ Washing hands with hand sanitizer frequently&lt;br&gt;□ Avoiding any close contact (2 meters) with people when you go out&lt;br&gt;□ Staying in your home&lt;br&gt;□ Getting vaccinated&lt;br&gt;□ Traditional practices&lt;br&gt;□ Wearing something that covers your mouth and nose when you go out (a mask)</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
406. Are you able to avoid contact with people outside of your household?

☐ Yes
☐ No
☐ No response

407. What are some reasons why you might not be able to avoid contact with people outside of your household?

☐ My work or way of earning money requires me to leave the house
☐ I need to visit the market
☐ I need to visit the water source / well
☐ My studies require me to leave the household
☐ I need to attend funerals in the community
☐ I need to attend religious services
☐ I need to visit my family/relatives
☐ To seek out health care
☐ None of the above
☐ No response

SECTION 5: SOCIAL CONSEQUENCES OF COVID-19

We understand that COVID-19 is affecting many people's lives. We're interested in learning more about how you are being affected.

501. Since Coronavirus (COVID-19) restrictions began, how much of a loss of income has your household experienced?

☐ None
☐ Complete
☐ Partial
☐ No response

502. Since Coronavirus (COVID-19) restrictions began, how much of a loss of income have you experienced?

☐ Large
☐ Moderate
☐ Small
☐ Has no income
☐ No response

503. Are you worried about the impact of Coronavirus (COVID-19) on your household's finances in the future?

☐ Yes
☐ No
☐ Do not know
☐ No response

504. Since the Coronavirus (COVID-19) restrictions began, did you or any household member go a whole day and night without eating anything because there was not enough food?

☐ Yes
☐ No
☐ Do not know
☐ No response
505. Is this more common now compared to before the Coronavirus (COVID-19) restrictions began?

- Yes
- No
- Do not know
- No response

506. Since the Coronavirus (COVID-19) restrictions began, how often has this happened?

- Rarely (1-2 times)
- Sometimes (3-10 times)
- Often (more than 10 times)
- Do not know
- No response

507. Are you currently married or living together with a man as if married?

- Yes, currently married
- Yes, living with a man
- Not currently in union: Divorced / separated
- Not currently in union: Widow
- No, never in union
- No response

508. Since the Coronavirus (COVID-19) restrictions began, who usually makes decisions about making household purchases for daily needs: you, your husband/partner, you and your husband/partner jointly, or someone else?

- Respondent
- Husband/partner
- Respondent and husband/partner
- Someone else
- No response

509. Are you currently economically reliant on your husband/partner for basic needs?

- Yes
- No
- No response

510. Are you more economically reliant on your husband/partner now than before the Coronavirus (COVID-19) restrictions began?

- Yes
- No
- Do not know
- No response

SECTION 6: COVID-19 AND FAMILY PLANNING

Now I would like to ask you about pregnancy and family planning.

601. Are you currently pregnant?

- Yes
- No
- Unsure
- No response

602. Have you needed to visit a health facility since the Coronavirus (COVID-19) restrictions began, including for family planning?

- Yes
- No
- No response

603. What was the reason why you needed to visit a health facility?

- Family planning services
- ANC
- Delivery
- PNC
- Child’s health
- Immunization
- Pick up of regular medications

Read all options Select all that apply
604. Have you experienced any of the following difficulties in accessing healthcare services since the Coronavirus (COVID-19) restrictions began?  
*Read all options Select all that apply*

- □ Healthcare facility or doctor’s office closed, appointment not possible
- □ Partner does not approve
- □ No transportation to access healthcare services
- □ Unable to access services because of government restrictions on movement
- □ Unable to afford healthcare services
- □ Fear of being infected with COVID-19 at healthcare facilities
- □ Did not attempt to access healthcare services or did not experience difficulties accessing care
- □ No response

605. Did you successfully access the health services you needed?  
- □ Yes
- □ No
- □ No response

606a. Now I have some questions about the future. Would you like to have a child or would you prefer not to have any children?  
- □ Have a/another child
- □ No more/prefer no children
- □ Says she can’t get pregnant
- □ Undecided / Don’t know
- □ No response

606b. Now I have some questions about the future. After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children?  
- □ Have a/another child
- □ No more/prefer no children
- □ Says she can’t get pregnant
- □ Undecided / Don’t know
- □ No response

607a. How long would you like to wait from now before the birth of a child?  
*If you select months or years, you will enter a number for X on the next screen. Select “Years” if more than 36 months.*  
*Please check that you correctly entered the value for months/years.*  
- □ X months
- □ X years
- □ Soon/now
- □ Says she can’t get pregnant
- □ Other
- □ Do not know
- □ No response

607b. After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?  
*If you select months or years, you will enter a number for X on the next screen. Select “Years” if more than 36 months.*  
- □ X months
- □ X years
- □ Soon/now
- □ Says she can’t get pregnant
- □ Other
- □ Do not know
- □ No response
<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Please check that you correctly entered the value for months/years</td>
<td></td>
</tr>
<tr>
<td>607c. Enter the number of waitchild_lab you would like to wait:</td>
<td></td>
</tr>
<tr>
<td>608. Have you changed your mind about wanting to get pregnant due to concerns about Coronavirus (COVID-19)?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>609. If you got pregnant now, how would you feel? Read all options</td>
<td>Very happy, Sort of happy, Mixed happy and unhappy, Sort of unhappy, Very unhappy, No response</td>
</tr>
<tr>
<td>610. Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?</td>
<td>Yes, No, No response</td>
</tr>
<tr>
<td>611. You said that you do not want any more children and that you are not using a method to avoid pregnancy. Can you tell me the reason why you are not using a method to prevent pregnancy?</td>
<td>Healthcare facility or doctor’s office closed, appointment not possible, Partner does not approve, No transportation to access services, Preferred contraceptive method unavailable, Unable to access services because of government restrictions on movement, Unable to afford FP services, Fear of being infected with COVID-19 at healthcare facilities, Other, No response</td>
</tr>
<tr>
<td>612. Which method or methods are you using? PROBE: Anything else? Select all methods mentioned. SCROLL TO THE BOTTOM to see all choices.</td>
<td>Female sterilization, Male sterilization, Implant, IUD, Injectables, Pill, Emergency Contraception, Male condom, Female condom, Diaphragm, Foam/Jelly, Standard Days/Cycle beads, LAM, Rhythm method, Withdrawal</td>
</tr>
<tr>
<td>Question</td>
<td>Options</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>--------------------------</td>
</tr>
</tbody>
</table>
| 613. Have you used emergency contraception since the Coronavirus (COVID-19) restrictions began? | □ Yes  
□ No  
□ No response |
| 701. Thank you for the time you have kindly granted us. We look forward to speaking with you again. Do you have a better number we can reach you at in case we would like to follow-up with you in the future? | □ Yes  
□ No  
□ No response |
| 702. What is the updated number? Enter an 11-digit number without the country code. Do not include spaces or dashes. Enter 0 for no response. |  |
| 703. Can you repeat the number again? Enter an 11-digit number without the country code. Do not include spaces or dashes. Enter 0 for no response. |  |
| **Questionnaire result**                                               |                          |
| Thank the respondent for her time.                                     |                          |
| The respondent is finished, but there are still more questions for you to complete outside the home. |                          |
| 098. In what language was this interview conducted?                    | □ English  
□ Hausa  
□ Yoruba  
□ Pidgin  
□ Other |
| 099. Questionnaire Result                                              | □ Completed  
□ Postponed  
□ Refused  
□ Partly completed  
□ Other |