

PMA2019/Uganda Round 6 Follow-up Survey Female Questionnaire

<p>READ THIS WARNING: This female questionnaire is not linked to a household questionnaire. ONLY continue if there is no linked female questionnaire under the "Edit Saved Form" Menu.</p>	
<p>Press OK to continue</p>	<input type="radio"/> OK

<p>Did you check the Edit Saved forms menu for a linked female questionnaire?</p>	<input type="radio"/> Yes <input type="radio"/> No
<p>Provide your signature to acknowledge that there is no linked female questionnaire.</p>	
<p>Close and exit this form without saving. Look for a linked female questionnaire through the 'Edit Saved Forms' Menu.</p>	

Region	
District	
Sub-county	
Enumeration Area:	
Structure number:	
Household number:	

<p>001a. Are you in the correct household?</p>	<input type="radio"/> Yes <input type="radio"/> No
<p>EA: \${EA} Structure #: \${structure} Household #: \${household}</p>	

<p>B. How many times have you visited this household to interview this female respondent?</p>	<input type="radio"/> 1st time <input type="radio"/> 2nd time <input type="radio"/> 3rd time
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<p>002. Your name:</p>	
<p>Is this your name?</p>	<input type="radio"/> Yes <input type="radio"/> No

<p>002. Enter your name below. <i>Please record your name</i></p>	
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<p>003a. Current date and time.</p>	<p>Day:</p>
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	Month: Year:
Is this date and time correct?	<input type="radio"/> Yes <input type="radio"/> No

003b. Record the correct date and time.	Day: Month: Year:
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004a. The following info is from the household questionnaire. Please review to make sure you are interviewing the correct respondent.	
004a. The following info is what you provided previously. Please review.	
Region: \${region_unlinked}	
District: \${district_unlinked}	
Sub-county: \${subcounty_unlinked}	
Enumeration Area: \${EA_unlinked}	
Structure number: \${structure_unlinked}	
Household number: \${household_unlinked}	
004b. Is the above information correct?	<input type="radio"/> Yes <input type="radio"/> No

005. CHECK: You should be attempting to interview \${firstname}. Is that correct? <i>If misspelled, select "yes" and update the name in question "011." If this is the wrong person, you have two options: (1) exit and ignore changes to this form. Open the correct form.</i> <i>Or (2) find and interview the person whose name appears above.</i>	<input type="radio"/> Yes <input type="radio"/> No
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(\${firstname}) is a PANEL respondent. Please remember to provide a PANEL CONSENT FORM.	
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(\${firstname}) is a CROSS SECTIONAL respondent. Please remember to provide a CROSS SECTIONAL CONSENT FORM.	
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006. Is the respondent present and available to be interviewed today?	<input type="radio"/> Yes <input type="radio"/> No
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007. How well acquainted are you with the respondent?	<input type="radio"/> Very well acquainted <input type="radio"/> Well acquainted <input type="radio"/> Not well acquainted <input type="radio"/> Not acquainted
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H. Is this the respondent that was interviewed in Round 6 (on \${f6fq_int_date}) ?	
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H. Is this the respondent that was interviewed in Round 6 in 2018 ?	
#####	<input type="radio"/> Yes <input type="radio"/> No

008. Has the respondent previously participated in PMA 2020 surveys?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
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INFORMED CONSENT
Find the woman aged 15-49 associated with this Female Questionnaire. The interview must have auditory privacy.

I. Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now?	<input type="radio"/> Yes <input type="radio"/> No
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K. Interviewer's name: \${your_name} <i>Mark your name as a witness to the consent process.</i>	<input type="radio"/>
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K. Interviewer's name You previously entered "\${name_typed}. " <i>Please record your name as a witness to the consent process.</i>	
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L. Respondent's first name. <i>You may correct the spelling here if it is not correct, but you must be interviewing the person whose name appears below.</i>	
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Section 1 – Respondent’s Background, Marital Status, Household characteristics

Now I would like to ask about your background and socioeconomic conditions.

101. In what month and year were you born? The age in the household roster is \${age}.	
101. In what month and year were you born?	
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know

Year:	Year:
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102. How old were you at your last birthday?

	Age in the Household Roster:
<p>WARNING: The age you entered for 102 is \${FQ_age}, which makes her ineligible for interview. She must be at least 15 years old and not more than 49 years old.</p> <p>If that age is correct, update her age on this screen, hit the back key, and save changes to exit the interview. This form will be deleted automatically upon saving it.</p> <p>If that age is not correct, go back to the previous screen and enter the correct age.</p>	
<p>WARNING: The age you entered for 102 is \${FQ_age}. This does not agree with the household roster, but she is still eligible to be interviewed. If 102 is correct update the age on this screen to \${FQ_age}. Otherwise, return to the previous screen and enter the correct age.</p>	
<p>The age in the roster agrees with the age in 102. Go to the next screen without changing the number on this screen.</p>	
#####	

103. 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
- 'O' Level
- 'A' Level
- Tertiary
- University
- Do not know
- No response

104. 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.

- 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

105. Have you been married or lived with a man only once or more than once?

- Only once
- More than once
- No response

<p>106a. In what month and year did you start living with your FIRST husband / partner?</p> <p><i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p>	
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Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

Date cannot be in the future. You entered: \${husband_cohabit_start_first_lab} Today: \${today}	
Date of first living with husband/partner cannot be before respondent's birth. You entered: \${husband_cohabit_start_first_lab} Respondent's birth: \${birthdate_lab}	
Date of first living with husband/partner cannot be before respondent's birth. You entered: \${hcf_y_lab} Respondent's birth: \${birthdate_lab}	
106b. CHECK: Based on the response you entered in 106a, the respondent was possibly 15 years old or younger at the time of her first marriage. Did you enter 106a correctly?	<input type="radio"/> Yes <input type="radio"/> No

107a. Now I would like to ask about when you started living with your CURRENT or MOST RECENT husband / partner. In what month and year was that? <i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i>	
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know

Year:	Year:
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Date cannot be in the future. You entered: \${husband_cohabit_start_recent_lab} Today: \${today}	
Date of living with current / most recent husband/partner cannot be before respondent's birth. You entered: \${husband_cohabit_start_recent_lab} Respondent's birth: \${birthdate_lab}	
Date of living with current / most recent husband/partner cannot be before respondent's birth. You entered: \${hcs_y_lab} Respondent's birth: \${birthdate_lab}	
Date of living with current / most recent husband/partner cannot be before date respondent started living with first partner. You entered: \${husband_cohabit_start_recent_lab} Date started living with first partner: \${husband_cohabit_start_first_lab}	
Year of living with current / most recent husband/partner cannot be before year respondent started living with first partner. You entered: \${hcs_y_lab} Year started living with first partner: \${hcf_y_lab}	
107b. CHECK: Based on the response you entered in 107a, the respondent was possibly 15 years old or younger at the time of her current or most recent marriage. Did you enter 107a correctly?	<input type="radio"/> Yes <input type="radio"/> No
108. Does your husband / partner have other wives or does he live with other women as if married?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response

Section 2- Reproduction, Pregnancy & Fertility Preferences Calendar

Now I am going to ask you some questions about the pregnancies you have had in the past two years

First, I would like to ask about all the live births you have had during your life.	
200. Have you ever given birth?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response

209. When did your last menstrual period start? <i>If you select days, weeks, months, or years, you will enter a number for X on the next screen. Enter 0 days for today, not 0 weeks/months/years.</i>	<input type="radio"/> X days ago <input type="radio"/> X weeks ago <input type="radio"/> X months ago <input type="radio"/> X years ago <input type="radio"/> Menopausal / Hysterectomy <input type="radio"/> Before last birth
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	<input type="radio"/> Never menstruated <input type="radio"/> No response
You entered "Never menstruated" in 209 but the respondent 206 indicates she previously gave birth. Is that what she said? <i>If no, return to the previous screen and change the response.</i>	<input type="radio"/> Yes <input type="radio"/> No
209a. Enter $\{\text{menstrual_period_lab}\}$ <i>Enter 0 days for today, not 0 weeks/months/years.</i>	
210a. Are you pregnant now?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure <input type="radio"/> No response
210b. How many months pregnant are you? <i>Please record the number of completed months. Enter -88 for do not know, -99 for No response.</i>	
You entered that the respondent is $\{\text{months_pregnant}\}$ months pregnant, but she said her last menstrual period started $\{\text{menstrual_period_value}\}$ ($\{\text{menstrual_period_lab}\}$) ago. Is that what she said? <i>If no, return to the previous screen and change the response.</i>	<input type="radio"/> Yes <input type="radio"/> No
You entered "Never menstruated" in 209 but 210a indicates that the respondent is pregnant currently. Is that what she said? <i>If no, return to the previous screen and change the response.</i>	<input type="radio"/> Yes <input type="radio"/> No
210c. At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any / any more children at all?	<input type="radio"/> Then <input type="radio"/> Later <input type="radio"/> Not at all <input type="radio"/> No response
P0a. You said you are currently pregnant. How many other times have you been pregnant in the last 2 years? (since $\{\text{two_yr_ago_lab}\}$)? <i>Enter -99 for no response. 0 is a possible answer.</i>	
P0b. How many times have you been pregnant in the past 2 years (since $\{\text{two_yr_ago_lab}\}$)? <i>Enter -99 for no response. 0 is a possible answer.</i>	
You reported having $\{\text{cc_num_pregnancies_2y}\}$ pregnancies in the past 2 years (since $\{\text{two_yr_ago_lab}\}$). For this purposes of this survey, we will only be asking you about the last 2.	
Now I'd like to ask you about your pregnancy history over the last 2 years. <i>Please move forward to the next screen and, if prompted, select "Add Group".</i>	

Pregnancy History for the Last 2 Years

ERROR You have added too many pregnancy groups. You are on pregnancy number $\{\text{P_pos}\}$ out of the $\{\text{cc_num_of_preg_to_ask}\}$ that you reported in P0a/b.	
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<p>If the total number of pregnancies previously reported ($\{cc_num_pregnancies_2y\}$) was incorrect, go back to P0a/P0b and adjust the number.</p> <p>Otherwise, remove this group by pressing your finger down on the small circle below, and selecting "remove group" from the menu that appears.</p>	
<p>#####</p>	<input type="radio"/>
<p>P1. In what month and year did your most recent pregnancy end? Enter 'Jan 2020' to indicate 'no response'.</p>	<p>Month: Year:</p>
<p>P1. In what month and year did the previous pregnancy end, before the $\{cc_preg_next_result_lab\}$? Enter 'Jan 2020' to indicate 'no response'.</p>	<p>Month: Year:</p>
<p>P1 OVER 2 YEARS AGO ERROR. This pregnancy history is only designed to cover the last two years since $\{two_yr_ago_lab\}$. You entered: $\{cc_preg_end_date_lab\}$ Please go back and fix any incorrect entries.</p>	
<p>ERROR Reported end date of this pregnancy conflicts with the previous pregnancy dates. You just entered a pregnancy end date of $\{cc_preg_end_date_lab\}$ Previously, you reported a pregnancy end date of $\{cc_preg_next_end_date_lab\}$ with a duration of $\{cc_preg_next_duration\}$ months. Please go back and fix any incorrect entries.</p>	
<p>WARNING Reported end date of this pregnancy overlaps with the date of the previously entered pregnancy. You just entered a pregnancy end date of $\{cc_preg_end_date_lab\}$ Previously, you entered a pregnancy that approximately started on $\{cc_preg_next_start_date_lab\}$ Please review go back and fix any incorrect entries. Otherwise, if pregnancies did end/begin in same month, proceed forward.</p>	
<p>ERROR Reported end date of this pregnancy conflicts with current pregnancy dates. You just entered a pregnancy end date of $\{cc_preg_end_date_lab\}$ Earlier, you reported a current pregnancy that started approximately $\{current_preg_earliest_start_date_lab\}$ Please go back and fix any incorrect entries.</p>	
<p>P2. How many months pregnant were you when that pregnancy ended? Enter -99 for no response. 0 is a possible answer.</p>	
<p>P3. Did that pregnancy end in a live birth, spontaneous miscarriage, other type of termination, or stillbirth? In the event of multiple birth where one or more was a live birth, select 'live birth'.</p>	<p><input type="radio"/> Live birth <input type="radio"/> Still birth <input type="radio"/> Miscarriage (spontaneous)</p>

	<input type="radio"/> Abortion <input type="radio"/> No response
P3b. What is his or her name?	
P4. At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any / any more children at all?	<input type="radio"/> Then <input type="radio"/> Later <input type="radio"/> Not at all <input type="radio"/> No response
You have \${cc_preg_num_remaining} more pregnancy(ies) to enter. Please move forward to the next screen and select "Add Group".	
You have entered pregnancy \${cc_preg_position} of \${cc_num_of_preg_to_ask}. <i>Please move forward to the next screen and, if prompted, select "Do not Add".</i>	
Your last pregnancy ended on \${cc_preg_end_date_lab}. This survey only covers the last 2 years (since (\${two_yr_ago_lab})). <i>Please move forward to the next screen and, if prompted, select "Do not Add".</i>	
[This exists simply for the purpose of text lookup.]	<input type="radio"/> Live birth <input type="radio"/> Still birth <input type="radio"/> Miscarriage (spontaneous) <input type="radio"/> Abortion <input type="radio"/> No response
[This exists simply for the purpose of text lookup.]	<input type="radio"/> the contraceptive method
ERROR Pregnancy history was not completed correctly. Number of pregnancies you reported in P0a/P0b for the calendar period: \${cc_num_of_preg_to_ask} Number of entries in pregnancy history: \${P_count} <i>If you'd like to add another pregnancy, go back to the previous screen and and select "Add Group."</i> <i>If you originally reported too many pregnancies, go back to P0a/P0b and enter the correct number of pregnancies for the calendar period.</i>	
201. How many times have you given birth? <i>Enter -99 for no response.</i>	
205. When was your FIRST birth? <i>Please record the date of the FIRST birth. The date should be found by calculating backwards from memorable events if needed.</i> <i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i>	
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May

	<input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

Date cannot be in the future.

You entered: \${first_birth_lab} Today: \${today}

First birth cannot be before respondent was 10 years of age. You entered: \${first_birth_lab}

Respondent's birth date: \${birthdate_lab}

206. When was your MOST RECENT birth? <i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i>	
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

Date cannot be in the future.

You entered: \${recent_birth_lab} Today: \${today}

Date of most recent birth cannot be before respondent was 10 years of age. You entered: \${recent_birth_lab}

Respondent's birth date: \${birthdate_lab}

Date of most recent birth must be at least 6 months after the first birth.

You entered: \${recent_birth_lab}

First birth: \${first_birth_lab}

Year of most recent birth cannot be before first birth. You entered: \${rb_y_lab}

Year of first birth: \${fb_y_lab}

213a. Now I would like to ask a question about your last birth. At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any more children at all?	
At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any more children at all?	
#####	<input type="radio"/> Then <input type="radio"/> Later <input type="radio"/> Not at all <input type="radio"/> No response
211a. Do you think you would like to have a/another child or would you prefer not to?	<input type="radio"/> Have a / another child <input type="radio"/> No more/prefer no children <input type="radio"/> Says she can't get pregnant <input type="radio"/> Undecided / Don't know <input type="radio"/> No response
211b. After the birth of the child you are expecting now, would you like to have another child, or would you prefer not to?	<input type="radio"/> Have a / another child <input type="radio"/> No more/prefer no children <input type="radio"/> Says she can't get pregnant <input type="radio"/> Undecided / Don't know <input type="radio"/> No response
212a. How long would you like to wait from now before the birth of a/another child? <i>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.</i>	<input type="radio"/> X months <input type="radio"/> X years <input type="radio"/> Soon/now <input type="radio"/> Says she can't get pregnant <input type="radio"/> Other <input type="radio"/> Don't know <input type="radio"/> No response
212a. Enter the number of $\{wait_birth_pregnant\}$ you would like to wait:	
PNL_001. Does your husband/partner want to have a/another child with you within two years?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure <input type="radio"/> No response
PNL_002. In the next few weeks, if you discovered that you were pregnant, how would you feel?	<input type="radio"/> Very happy <input type="radio"/> Somewhat happy <input type="radio"/> Somewhat unhappy <input type="radio"/> Very unhappy <input type="radio"/> Don't know <input type="radio"/> No response

Section 3 – Contraceptive Calendar

Now I'd like to ask you about your use of family planning over the last 2 years.

<p>301a. Have you ever heard of female sterilization? PROBE: Women can have an operation to avoid having any more children.</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301b. Have you ever heard of male sterilization? PROBE: Men can have an operation to avoid having any more children.</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301c. Have you ever heard of the contraceptive implant? PROBE: Women can have one or several small rods placed in her upper arm by a doctor or nurse, which can prevent pregnancy for one or more years. [implant_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301d. Have you ever heard of the IUD? PROBE: Women can have a loop or coil placed inside them by a doctor or a nurse. [IUD_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301e. Have you ever heard of injectables? PROBE: Women can have an injection by a health provider that stops them from becoming pregnant for one or more months. [sayana_depo_150x300.jpg]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301f. Have you ever heard of the (birth control) pill? PROBE: Women can take a pill every day to avoid becoming pregnant. [pill_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301g. Have you ever heard of emergency contraception? PROBE: As an emergency measure after unprotected sexual intercourse women can take special pills at any time within three to five days to prevent pregnancy.</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301h. Have you ever heard of condoms? PROBE: Men can put a rubber sheath on their penis before sexual intercourse. [male_condom_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301i. Have you ever heard of female condoms? PROBE: Women can put a sheath in their vagina before sexual intercourse. [female_condom_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301j. Have you ever heard of the diaphragm? PROBE: Women can place a thin flexible disk in their vagina before sexual intercourse. [diaphragm_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>

<p>301k. Have you ever heard of foam or jelly as a contraceptive method? PROBE: Women can place a suppository, jelly, or cream in their vagina before sexual intercourse to prevent pregnancy. [spermicide_150x300.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301l. Have you ever heard of the standard days method or Cycle Beads? PROBE: A Woman can use a string of colored beads to know the days she can get pregnant. On the days she can get pregnant, she and her partner use a condom or do not have sexual intercourse. [SDM-beads_only.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301m. Have you ever heard of the Lactational Amenorrhea Method or LAM?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301n. Have you ever heard of the rhythm method? PROBE: Women can avoid pregnancy by not having sexual intercourse on the days of the month they think they can get pregnant.</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301o. Have you ever heard of the withdrawal method? PROBE: Men can be careful and pull out before climax.</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301p. Have you ever heard of any other ways or methods that women or men can use to avoid pregnancy?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>302a. Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>

<p>302b. Which method or methods are you using? PROBE: Anything else? <i>Select all methods mentioned. SCROLL TO THE BOTTOM to see all choices.</i></p>	<p><input type="checkbox"/> Female sterilization <input type="checkbox"/> Male sterilization <input type="checkbox"/> Implant <input type="checkbox"/> IUD <input type="checkbox"/> Injectables <input type="checkbox"/> Pill <input type="checkbox"/> Emergency Contraception <input type="checkbox"/> Male condom <input type="checkbox"/> Female condom <input type="checkbox"/> Diaphragm <input type="checkbox"/> Foam/Jelly <input type="checkbox"/> Standard Days/Cycle beads <input type="checkbox"/> LAM <input type="checkbox"/> Rhythm method <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other traditional method <input type="checkbox"/> Monthly Chinese Pill <input type="checkbox"/> No response</p>
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Check here to acknowledge you considered all options.	<input type="radio"/>
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LCL_301a. PROBE: Was the injection administered via syringe or small needle? Show the image to the respondent. [sayana_depo_150x300.jpg]	<input type="radio"/> Syringe <input type="radio"/> Small needle (Sayana Press) <input type="radio"/> No Response
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CHECK: Please confirm with the respondent that you she is using the oral pill that is taken once a month to prevent pregnancy. This is different from the oral contraceptive pill that is taken every day and from the emergency contraception pill.	
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309a. Since what month and year have you been using \${current_method_label} without stopping? Calculate backwards from memorable events if needed. Use contraceptive calendar visual aid if needed. Select 'Do not know' for month and '2020' for year to indicate 'No Response'.	
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

306a. Did you or your partner use any other methods between \${two_yr_ago_lab} and when you started using \${current_method_label} in \${begin_using_full_lab}? [Since \${two_yr_ago_lab}]. Probe to see if she has used the same method at a previous time Use contraceptive calendar visual aid if needed.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
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CS1. Have you or your partner done anything or used a method to delay or avoid getting pregnant in the last 2 years (since \${two_yr_ago_lab})? Use contraceptive calendar visual aid if needed.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
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CS2. Which method did you use just before \${current_method_label}? Do not include the current episode of use. Only select the current method if the woman used it continuously, stopped and restarted during the two-year period]	
CS2. Which method did you use most recently?	

Do not include the current episode of use. Only select the current method if the woman used it continuously, stopped and restarted during the two-year period]	
#####	<input type="radio"/> Female sterilization <input type="radio"/> Male sterilization <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> Other traditional method <input type="radio"/> Monthly Chinese Pill <input type="radio"/> No response
Check here to acknowledge you considered all options.	<input type="radio"/>

CHECK: Please confirm with the respondent that you she is using the oral pill that is taken once a month to prevent pregnancy. This is different from the oral contraceptive pill that is taken every day and from the emergency contraception pill.

Please swipe forward and select "ADD GROUP" to add Start and Stop Dates for this method.

Contraceptive Methods

You previously selected "No" to 309d and were prompted NOT to add a group Please press down on the button below to delete the group.	
##### Long press on this button to delete the group	<input type="radio"/>
You are now entering start and stop dates for method \${fpuseloop} (which is \${show_method}).	
You are now entering start and stop dates for method \${fpuseloop} (which is \${show_method1}).	
309b. When did you stop using your \${show_method}? Please record the date. The date should be found by calculating backwards from memorable events if needed. Select 'Do not know' for month and '2020' for year to indicate 'No Response'. Use contraceptive calendar visual aid if needed.	

<p>309b. When did you stop using your \${show_method1}?</p> <p><i>Please record the date. The date should be found by calculating backwards from memorable events if needed. Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p> <p><i>Use contraceptive calendar visual aid if needed.</i></p>	
<p>Month:</p>	<p> <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know </p>
<p>Year:</p>	<p>Year:</p>
<p>309b OVER 2 YEARS AGO ERROR This history is only designed to cover the last two years since \${two_yr_ago_lab}. You entered: \${rec_fp_end_date_lab} <i>Please go back and fix any incorrect entries.</i></p>	
<p>309b PREVIOUS METHOD WARNING Reported end date of using this contraception conflicts with the previous contraceptive use dates. You just entered an end date of \${rec_fp_end_date_lab} Previously, you reported a usage end date of \${rec_fp_next_end_date_lab} with a duration of \${rec_fp_next_duration} months. <i>Please go back and fix any incorrect entries.</i></p>	
<p>309b PREVIOUS METHOD WARNING Reported end date of this use overlaps with the date of the previously entered usage. You just entered an end date of \${rec_fp_end_date_lab} Previously, you entered a period of usage that approximately started on \${rec_fp_next_start_date_lab} <i>Please review and, if necessary, go back and fix any incorrect entries. Otherwise, if pregnancies did end/begin in same month, proceed forward.</i></p>	
<p>309b CURRENT METHOD WARNING Reported end date of using this contraception conflicts with current method. You just entered an end date of \${rec_fp_end_date_lab} Current method start: \${begin_using_full_lab} <i>Please review and, if necessary, go back and fix any incorrect entries.</i></p>	
<p>309c. When did you start using \${show_method}?</p> <p><i>Use contraceptive calendar visual aid if needed.</i></p>	

<p>309c. When did you start using \${show_method1}?</p> <p><i>Use contraceptive calendar visual aid if needed.</i></p>	
<p>Month:</p>	<p> <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know </p>
<p>Year:</p>	<p>Year:</p>
<p>309c2. You said you did not know when you started using \${show_method}.</p> <p>Can you remember about how long you used \${show_method} for?</p> <p><i>Answer in Months Enter -88 if respondent does not know, -99 for no response.</i></p>	
<p>309c2. You said you did not know when you started using \${show_method1}.</p> <p>Can you remember about how long you used \${show_method1} for?</p> <p><i>Answer in Months Enter -88 if respondent does not know, -99 for no response.</i></p>	
<p>#####</p>	
<p>Date entered for "start using" is after the date entered for "stop using. Please go back and correct.</p>	
<p>The month of "Start using" is after the month of interview!!! Please correct appropriately</p>	
<p>The month of "Stop using" is after the month of interview!!! Please correct appropriately</p>	
<p>309d. Before the \${show_method}, did you or your partner use anything else to delay or avoid getting pregnant since \${two_yr_ago_lab}?</p>	
<p>309d. Before the \${show_method1}, did you or your partner use anything else to delay or avoid getting pregnant since \${two_yr_ago_lab}?</p>	

#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
309e. Which method did you use?	<input type="radio"/> Female sterilization <input type="radio"/> Male sterilization <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> Other traditional method <input type="radio"/> Monthly Chinese Pill <input type="radio"/> No response
CHECK: Please confirm with the respondent that you she is using the oral pill that is taken once a month to prevent pregnancy. This is different from the oral contraceptive pill that is taken every day and from the emergency contraception pill.	
You have more start and Stop dates to add, Please swipe forward and select "ADD GROUP".	
You do not have any more start and Stop dates to add, Please swipe forward and select "DO NOT ADD".	

[This exists simply for the purpose of text lookup.]

- 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

- Other traditional method
- Monthly Chinese Pill
- No response

	Summary
Please review with the respondent that all information is correct.	
Current method: \${current_method_label} Start date: \${begin_using_full_lab}	
Most recent method: \${most_recent_mtd} Start date: \${mrec_mtd_start_lab} Stop date: \${mrec_mtd_stop_lab}	
2nd most recent method: \${most_recent_mtd2} Start date: \${brec_mtd_start_lab} Stop date: \${brec_mtd_stop_lab}	
No current or past method used	

Now I will ask you a few more questions on the method that you are currently using or the method you used most recently. I will ask about your experiences obtaining the method.

302c. Does your husband/partner know that you are using \${current_method_label}?

- Yes
- No
- No response

302c. Does your husband/partner know that you are using family planning?

- Yes
- No
- No response

303. Did the provider tell you or your partner that this method was permanent?

- Yes
- No
- No response

Contraceptive Method Experiences

This respondent is only eligible for one loop. Please press down on the button below to delete the group.	
We only take two (2) loops for this section, you cannot add a third. Please press down on the button below to delete the group.	
##### Long press on this button to delete the group	<input type="radio"/>
307. Before you started using \${current_method_label}, had you discussed the decision to delay or avoid pregnancy with your husband/partner?	
307. Before you started using \${most_recent_mtd}, had you discussed the decision to delay or avoid pregnancy with your husband/partner?	
307. Before you started using \${most_recent_mtd2}, had you discussed the decision to delay or avoid pregnancy with your husband/partner?	

#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
308. Would you say that using contraception is mainly your decision, mainly your husband/partner's decision or did you both decide together?	<input type="radio"/> Mainly respondent <input type="radio"/> Mainly husband/partner <input type="radio"/> Joint decision <input type="radio"/> Other <input type="radio"/> No response
308a. The last time you received your \${current_method_label}, how much did you have to pay out of pocket, including any fees paid for the method, supplies or services, and transportation?	
308a. The last time you received your \${most_recent_mtd}, how much did you have to pay out of pocket, including any fees paid for the method, supplies or services, and transportation?	
308a. The last time you received your \${most_recent_mtd2}, how much did you have to pay out of pocket, including any fees paid for the method, supplies or services, and transportation?	
##### <i>Enter all prices in Ugandan shillings. Zero is a possible answer. Enter -88 if respondent does not know, -99 for no response.</i>	
311a. You first started using \${current_method_label} in \${begin_using_full_lab}. Where did you or your partner get it at that time?	
311a. You first started using \${most_recent_mtd} in \${mrec_mtd_start_lab}. Where did you or your partner get it at that time?	
311a. You first started using \${most_recent_mtd2} in \${brec_mtd_start_lab}. Where did you or your partner get it at that time?	
#####	<input type="radio"/> Govt. Hospital <input type="radio"/> Govt. Health Center <input type="radio"/> Public Family Planning Clinic <input type="radio"/> Public Outreach <input type="radio"/> Public Fieldwork/VHT <input type="radio"/> Other Public <input type="radio"/> Private Hospital/Clinic <input type="radio"/> Pharmacy <input type="radio"/> Private Doctor <input type="radio"/> Private Outreach <input type="radio"/> Private Fieldwork/VHT <input type="radio"/> Other Private <input type="radio"/> Shop <input type="radio"/> Church

	<input type="radio"/> Friend/relative <input type="radio"/> Other <input type="radio"/> Do not know <input type="radio"/> No Response
Check here to acknowledge you considered all options.	<input type="radio"/>
PNL_006. When you obtained your \${current_method_label}, did the provider ask you about your prior experience with contraception?	
PNL_006. When you obtained your \${most_recent_mtd}, did the provider ask you about your prior experience with contraception?	
PNL_006. When you obtained your \${most_recent_mtd2}, did the provider ask you about your prior experience with contraception?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
312a. When you obtained your \${current_method_label}, were you told by the provider about side effects or problems you might have with a method to delay or avoid pregnancy?	
312a. When you obtained your \${most_recent_mtd}, were you told by the provider about side effects or problems you might have with a method to delay or avoid pregnancy?	
312a. When you obtained your \${most_recent_mtd2}, were you told by the provider about side effects or problems you might have with a method to delay or avoid pregnancy?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response

PNL_007. According to the provider, what are the possible side effects or problems related to the use of this method? <i>Do NOT read the response options out LOUD.</i> <i>Select all that apply.</i>	<input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> Non-specific bleeding changes <input type="checkbox"/> Uterine cramping <input type="checkbox"/> lower abdominal pain <input type="checkbox"/> Weight gain <input type="checkbox"/> Weight loss <input type="checkbox"/> Facial spotting <input type="checkbox"/> Headaches <input type="checkbox"/> Infections <input type="checkbox"/> Nausea/vomiting <input type="checkbox"/> Increased menstrual cramping
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	<input type="checkbox"/> Lowered sex drive <input type="checkbox"/> Vaginal dryness <input type="checkbox"/> Infertility/sterility <input type="checkbox"/> Delayed return to fertility <input type="checkbox"/> Method gets lost inside body <input type="checkbox"/> General weakness <input type="checkbox"/> Diarrhea <input type="checkbox"/> OTHER <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> NO RESPONSE <input type="checkbox"/> NO SIDE EFFECTS
312b. Were you told what to do if you experienced side effects or problems?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_008a Were you told that if you experienced these side effects you could switch to a different method of contraception?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
313. At that time, were you told by the family planning provider about methods of family planning other than the <code>#{current_method_label}</code> that you could use?	
313. At that time, were you told by the family planning provider about methods of family planning other than the <code>#{most_recent_mtd}</code> that you could use?	
313. At that time, were you told by the family planning provider about methods of family planning other than the <code>#{most_recent_mtd2}</code> that you could use?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
314a. During that visit, did you obtain the method you wanted to delay or avoid getting pregnant?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
314c. Why didn't you obtain the method you wanted?	<input type="radio"/> Method out of stock that day <input type="radio"/> Method not available at all <input type="radio"/> Provider not trained to provide the method <input type="radio"/> Provider recommended a different method <input type="radio"/> Not eligible for method <input type="radio"/> Decided not to adopt a method <input type="radio"/> Too costly

	<input type="radio"/> Other <input type="radio"/> No response
315a. During that visit, who made the final decision about what method you got?	<input type="radio"/> You alone <input type="radio"/> Provider <input type="radio"/> Partner <input type="radio"/> You and provider <input type="radio"/> You and partner <input type="radio"/> Other <input type="radio"/> No response
PNL_008b. Did the provider tell you that if you do not take the pill every day, your chances of becoming pregnant are higher?	
PNL_008b. Did the provider tell you that if you do not take the pill every day, your chances of becoming pregnant are higher?	
PNL_008b. Did the provider tell you that if you do not take the pill every day, your chances of becoming pregnant are higher?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
PNL_008c. Did the provider tell you that if you are more than two weeks late for your shot, your chances of becoming pregnant are higher?	
PNL_008c. Did the provider tell you that if you are more than two weeks late for your shot, your chances of becoming pregnant are higher?	
PNL_008c. Did the provider tell you that if you are more than two weeks late for your shot, your chances of becoming pregnant are higher?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
316. Would you return to this provider? Provider: \${provider_label}	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
317. Would you refer your relative or friend to this provider / facility? Provider: \${provider_label}	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response

GGR_100. How many visits did you have to make to get \${current_method_label} at that time?	
GGR_100. How many visits did you have to make to get \${most_recent_mtd} at that time?	
GGR_100. How many visits did you have to make to get \${most_recent_mtd2} at that time?	
##### <i>Enter -88 for Don't know Enter -99 for No response</i>	
GGR_101a. How long did you have to wait in the facility to get your \${current_method_label} at that time? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	
GGR_101a. How long did you have to wait in the facility to get your \${most_recent_mtd} at that time? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	
GGR_101a. How long did you have to wait in the facility to get your \${most_recent_mtd2} at that time? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	
GGR_101b. What was the longest you had to wait in the facility to get \${current_method_label} during one of these visits? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	
GGR_101b. What was the longest you had to wait in the facility to get \${most_recent_mtd} during one of these visits? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	
GGR_101b. What was the longest you had to wait in the facility to get \${most_recent_mtd2} during one of these visits? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	
Minutes	
Hours	
PNL_012. Do you like the \${current_method_label}?	
PNL_012. Did you like the \${most_recent_mtd}?	
PNL_012. Did you like the \${most_recent_mtd2}?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_019. Are you experiencing any of the following changes in your menstrual cycle due to \${current_method_label}?	

PNL_019. Did you experience any of the following changes in your menstrual cycle due to \${most_recent_mtd}?	
PNL_019. Did you experience any of the following changes in your menstrual cycle due to \${most_recent_mtd}?	
##### Read all options out loud. Select all that apply.	<input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> No changes <input type="checkbox"/> Other <input type="checkbox"/> Do not know <input type="checkbox"/> No response
PNL_020. How worried are/ were you about these changes?	<input type="radio"/> Very worried <input type="radio"/> A little worried <input type="radio"/> Not at all worried <input type="radio"/> No response
CP1. Are you currently experiencing any side effects?	
CP1. Did you experience any side effects?	
CP1. Did you experience any side effects?	
#####	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
CP1b. What are the side effects you are currently experiencing? <i>Do not read option choices aloud</i>	
CP1b. What were the side effects that you EXPERIENCED while using the method? <i>Do not read option choices aloud</i>	
CP1b. What were the side effects that you EXPERIENCED while using the method? <i>Do not read option choices aloud</i>	
#####	<input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding/spotting <input type="checkbox"/> Uterine cramping/ <input type="checkbox"/> lower abdominal pain <input type="checkbox"/> Gained weight <input type="checkbox"/> Lost weight <input type="checkbox"/> Facial spotting <input type="checkbox"/> Headaches <input type="checkbox"/> Got infection <input type="checkbox"/> Nausea/vomiting

	<input type="checkbox"/> Increased menstrual cramping <input type="checkbox"/> Lowered sex drive <input type="checkbox"/> Decreased sexual pleasure <input type="checkbox"/> Vaginal dryness <input type="checkbox"/> General weakness/pain <input type="checkbox"/> Diarrhea <input type="checkbox"/> Partner feels during sex <input type="checkbox"/> Pain at insertion site <input type="checkbox"/> Mood swings <input type="checkbox"/> Backache <input type="checkbox"/> OTHER <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> NO RESPONSE
<p>CP1c. Did you talk to anyone about the side effects that you are experiencing/ experienced?</p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
<p>CP1d. Who did you talk to? <i>Anyone else?</i> SELECT ALL THAT APPLY</p>	<input type="checkbox"/> Spouse/partner <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Mother-in-law <input type="checkbox"/> Sister <input type="checkbox"/> Daughter <input type="checkbox"/> Other female relative <input type="checkbox"/> Male relative <input type="checkbox"/> Friend <input type="checkbox"/> Community health worker <input type="checkbox"/> Facility health worker <input type="checkbox"/> Pharmacist <input type="checkbox"/> Traditional healer <input type="checkbox"/> Other <input type="checkbox"/> No one <input type="checkbox"/> No response
<p>CP2a. Are there any side effects that you are WORRIED ABOUT EXPERIENCING while using this method, but are not actually experiencing?</p>	
<p>CP2a. Were there any side effects that you WERE WORRIED ABOUT EXPERIENCING while using this method, but did not actually experience?</p>	
<p>CP2a. Were there any side effects that you WERE WORRIED ABOUT EXPERIENCING while using this method, but did not actually experience?</p>	
<p>#####</p>	<input type="radio"/> Yes <input type="radio"/> No

<p>CP2b. What are the side effects that you WERE WORRIED ABOUT EXPERIENCING while using this method, but are not actually experiencing? <i>Do not read option choices aloud</i></p>	
<p>CP2b. What were the side effects that you WERE WORRIED ABOUT EXPERIENCING while using this method, but did not actually experience? <i>Do not read option choices aloud</i></p>	
<p>CP2b. What were the side effects that you WERE WORRIED ABOUT EXPERIENCING while using this method, but did not actually experience? <i>Do not read option choices aloud</i></p>	
<p>#####</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> Uterine cramping <input type="checkbox"/> lower abdominal pain <input type="checkbox"/> Weight change <input type="checkbox"/> Facial spotting <input type="checkbox"/> Headaches <input type="checkbox"/> General weakness/pain <input type="checkbox"/> Pain at insertion site <input type="checkbox"/> Infection <input type="checkbox"/> Method gets lost inside body <input type="checkbox"/> Nausea/vomiting <input type="checkbox"/> Lowered sex drive <input type="checkbox"/> Decreased sexual pleasure <input type="checkbox"/> Vaginal dryness <input type="checkbox"/> Partner feels during sex <input type="checkbox"/> Infertility/sterility <input type="checkbox"/> Delayed return to fertility <input type="checkbox"/> Deformation of babies <input type="checkbox"/> Diarrhea <input type="checkbox"/> Mood swings <input type="checkbox"/> Backache <input type="checkbox"/> OTHER <input type="checkbox"/> DON'T KNOW <input type="checkbox"/> NO RESPONSE
<p>CP2c. Did you talk to anyone about the side effects you were worried about, but did not experience?</p>	<ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> No
<p>CP2d. Who did you talk to? <i>Anyone else?</i> SELECT ALL THAT APPLY</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Spouse/partner <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Mother-in-law

	<input type="checkbox"/> Sister <input type="checkbox"/> Daughter <input type="checkbox"/> Other female relative <input type="checkbox"/> Male relative <input type="checkbox"/> Friend <input type="checkbox"/> Community health worker <input type="checkbox"/> Facility health worker <input type="checkbox"/> Pharmacist <input type="checkbox"/> Traditional healer <input type="checkbox"/> Other <input type="checkbox"/> No one <input type="checkbox"/> No response
<p>CP3. Did you stop using $\\${\text{most_recent_mtd}}$ because of any of the following reasons? <i>Read option choices aloud. RECORD ALL REASONS MENTIONED.</i></p>	<input type="checkbox"/> Became pregnant while using <input type="checkbox"/> Infrequent sex / husband/partner away <input type="checkbox"/> Wanted to become pregnant <input type="checkbox"/> Side effects you experienced <input type="checkbox"/> Side effects you were worried about, but did not experience <input type="checkbox"/> None of the above/other reasons for stopping <input type="checkbox"/> Don't know <input type="checkbox"/> No response
<p>310. Why did you stop using your $\\${\text{most_recent_mtd}}$? <i>Select all that apply</i></p>	<input type="checkbox"/> Husband / partner disapproved <input type="checkbox"/> Wanted a more effective method <input type="checkbox"/> No method available <input type="checkbox"/> Lack of access / too far <input type="checkbox"/> Costs too much <input type="checkbox"/> Inconvenient to use <input type="checkbox"/> Fatalistic <input type="checkbox"/> Difficult to get pregnant / menopausal <input type="checkbox"/> Other <input type="checkbox"/> Don't know <input type="checkbox"/> No response
<p>You have entered data for $\\${\text{rpt_pos}}$ of $\\${\text{mtd_rpt_num}}$ methods. Please move forward and select "Add group". <i>Please move forward and, if prompted, select "Add Group".</i></p>	
<p>You have entered data for $\\${\text{rpt_pos}}$ of $\\${\text{mtd_rpt_num}}$ methods. Please move forward and select "Do not add". <i>Please move forward and, if prompted, select "Do Not Add".</i></p>	
<p>You have only entered $\\${\text{count_mtds_rpt}}$ yet this respondent is both a current and recent user. They should at least be two loops. Please go back and add another one.</p>	

We only take two (2) loops for this section, you cannot add a third.
Please review and remove one of the groups.

Now I will ask you a few more detailed questions about your use of the pill and/or injectable in the past two years.
Now I'd like to discuss a little more about your use of pill or injectable.

CP10. Since $\{\text{begin_using_full_lab}\}$ did you stop using the pill even for a short period of time, and then start using it again?	
CP10. Between $\{\text{mrec_mtd_start_lab}\}$ and $\{\text{mrec_mtd_stop_lab}\}$, did you stop using the pill even for a short period of time, and then start using it again?	
##### <i>Read aloud: Don't count the week where you are supposed to stop your pill</i>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response

CP11. How long did you stop using the Pill? <i>Note: If paused multiple times, please record the most recent time she paused.</i>	<input type="radio"/> X days <input type="radio"/> X weeks <input type="radio"/> X months
--	---

CP11. Enter a value for X

CP12. Since $\{\text{begin_using_full_lab}\}$, did you receive your shot more than four weeks after the scheduled re-injection date?	
CP12. Between $\{\text{mrec_mtd_start_lab}\}$ and $\{\text{mrec_mtd_stop_lab}\}$, did you receive your shot more than four weeks after the scheduled re-injection date?	
##### <i>Read aloud: Don't count the week where you are supposed to stop your injectables.</i>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response

CP13. How many weeks or months after the scheduled date did you receive it? <i>If respondent has been late in receiving her re-injection multiple times, have her report on how late she was during the most recent time.</i>	<input type="radio"/> X weeks <input type="radio"/> X months
--	---

CP13. Enter a value for X

CURRENT NON-USERS

319. Have you ever done anything or tried in any way to delay or avoid getting pregnant?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
--	--

320. How old were you when you first used a method to delay or avoid getting pregnant? The respondent said she was $\{\text{age}\}$ years old at her last birthday. <i>Enter the age in years. Enter -88 if the respondent does not know. Enter -99 if there is no response. Cannot be younger than 9.</i>	
--	--

Check: You entered that the respondent first used family planning at the age of $\{age_at_first_use\}$. Is that what she said?
Go back and change 320 if that is not correct.

- Yes
- No

321. How many living children did you have at that time, if any?
 Note: the respondent said that she gave birth $\{birth_events\}$ times in 201.
Enter -99 for no response.

WARNING: you entered that the respondent gave birth $\{birth_events\}$ times in 201, and you entered that the respondent had $\{age_at_first_use_children\}$ children alive at the time she first used a method to delay or avoid getting pregnant in 321. Is this what the respondent said?
It may be that the answers to 201 and 321 are correct. This screen is a warning for verification.

- Yes
- No

<p>322. Which method did you first use to delay or avoid getting pregnant? <i>Do not read the method choices. Scroll to bottom to see all choices.</i></p>	<ul style="list-style-type: none"> <input type="radio"/> Female sterilization <input type="radio"/> Male sterilization <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> Other traditional method <input type="radio"/> Monthly Chinese Pill <input type="radio"/> No response
<p>Check here to acknowledge you considered all options.</p>	<input type="radio"/>

CHECK: Please confirm with the respondent that you she is using the oral pill that is taken once a month to prevent pregnancy. This is different from the oral contraceptive pill that is taken every day and from the emergency contraception pill.

The respondent said she first used female sterilization, but she did not say that is her current method. Go back to 302a and 302b and update the selection for current method.

<p>323a. You said that you do not want any / anymore 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? PROBE: Any other reason? <i>RECORD ALL REASONS MENTIONED</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Not married <input type="checkbox"/> Infrequent sex / Not having sex <input type="checkbox"/> Menopausal / Hysterectomy <input type="checkbox"/> Subfecund / Infecund
--	---

<p>Scroll to bottom to see all choices.</p>	<input type="checkbox"/> Not menstruated since last birth <input type="checkbox"/> Breastfeeding <input type="checkbox"/> Husband away for multiple days <input type="checkbox"/> Up to God / fatalistic <input type="checkbox"/> Respondent opposed <input type="checkbox"/> Husband / partner opposed <input type="checkbox"/> Others opposed <input type="checkbox"/> Religious prohibition <input type="checkbox"/> Knows no method <input type="checkbox"/> Knows no source <input type="checkbox"/> Fear of side effects <input type="checkbox"/> Health concerns <input type="checkbox"/> Lack of access / too far <input type="checkbox"/> Costs too much <input type="checkbox"/> Preferred method not available <input type="checkbox"/> No method available <input type="checkbox"/> Inconvenient to use <input type="checkbox"/> Interferes with body's processes <input type="checkbox"/> Other <input type="checkbox"/> Don't know <input type="checkbox"/> No response
<p>Check here to acknowledge you considered all options.</p>	<input type="radio"/>

<p>323b. Would you say that not using contraception is mainly your decision, mainly your husband/partner's decision or did you both decide together?</p>	<input type="radio"/> Mainly respondent <input type="radio"/> Mainly husband/partner <input type="radio"/> Joint decision <input type="radio"/> Other <input type="radio"/> No response
<p>305b. Do you think you will use a contraceptive method to delay or avoid getting pregnant at any time in the future?</p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
<p>PNL_004. When do you think you will start using a method?</p>	<input type="radio"/> In less than 12 months <input type="radio"/> In 1 or 2 years <input type="radio"/> In more than 2 years <input type="radio"/> No response
<p>324. In the last 12 months, were you visited by a community health worker who talked to you about family planning?</p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
<p>325a. In the last 12 months, have you visited a health facility or camp for care for yourself or your children? <i>For any health services.</i></p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response

325b. Did any staff member at the health facility speak to you about family planning methods?

- Yes
 No
 No response

326. In the last few months have you:			
	Yes	No	No response
326a. Heard about family planning on the radio?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326b. Seen anything about family planning on the television?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326c. Read about family planning in a newspaper or magazine?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326d. Received a voice or text message about family planning on a mobile phone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326e. Heard about family planning on whatsapp, Facebook, or any other social media	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section 4 – Sexual Activity

The questions in the following section relate to your recent sexual activity with your husband/partner. You do not have to answer any questions you do not wish to, but if you do, let's confirm we can have this conversation without anyone overhearing.

Now I would like to ask some questions about sexual activity in order to gain a better understanding of some important life issues. Let me assure you again that your answers are completely confidential and will not be told to anyone. If we should come to any question that you don't want to answer, just let me know and we will go to the next question.

401a. How old were you when you first had sexual intercourse?	
Current age: \${age}	
Number of live births: \${birth_events}	
The respondent is pregnant	
Enter the age in years. <i>Enter -77 if she has never had sex. Enter -99 for no response. Enter -88 for do not know.</i>	

WARNING: you entered -77, but the respondent is currently pregnant or has given birth before. Go back and fix.

WARNING: the respondent gave birth \${birth_events} times, but first had sex at the age of \${age_at_first_sex}, only \${years_since_first_sex} years ago. Is that correct?

The timing of the number of births should agree with 401a.

- Yes
 No

You entered that the respondent was \${age_at_first_sex} years old the first time she had sexual intercourse. Is that what she said?

Go back and change 401a if it is not correct.

- Yes
 No

You entered that the respondent's age at first sex was $\{age_at_first_sex\}$. Previously the respondent said she has given birth at an earlier age: $\{age_first_birth\}$. Is that correct?
Go back and change "age at first sex" if it is not correct

- Yes
- No

402. When was the last time you had sexual intercourse?
 Respondent is $\{months_pregnant\}$ months pregnant.
 Answer must be in days or weeks up to 4 weeks or 30 days

*If less than 12 months ago, answer must be recorded in months, weeks, or days.
 Enter 0 days for today.
 You will enter a number for X on the next screen.*

- X days ago
- X weeks ago
- X months ago
- X years ago
- No response

402. Enter $\{last_time_sex_lab\}$.
*If today, enter zero days only, not zero weeks/months/years.
 Must agree with the age of first sexual intercourse and the pregnancy status.*

The respondent is pregnant. The time since last sex must not be earlier than one month prior to the start of pregnancy.
 If number of months pregnant is unknown, then the time since last sex must be less than 11 months.
 Months pregnant: $\{months_pregnant\}$ Last time sex units: $\{last_time_sex\}$ Last time sex value: $\{last_time_sex_value\}$

The respondent cannot enter a time since last sex that would be before her age at first sex.
 Age at first sex: $\{age_at_first_sex\}$ Current age: $\{age\}$ Last time sex units: $\{last_time_sex\}$ Last time sex value: $\{last_time_sex_value\}$

The next set of questions will ask about your opinion on the benefits and risk of family planning. I will read 10 statements and for each, please indicate if you agree or disagree. For each statement, you have four response options, you can say you strongly agree, somewhat agree, somewhat disagree, or strongly disagree.

PNL_021. If a woman uses family planning, she can have sex without worrying about pregnancy

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- No response

PNL_022. If a woman uses family planning, she may have a hard time getting pregnant when she wants to

- Strongly agree
- Somewhat agree
- Somewhat disagree
- Strongly disagree
- No response

PNL_023. It is unhealthy for women not to get periods when they are using injectables, pills, or implants

- Strongly agree
- Somewhat agree
- Somewhat disagree

	<input type="radio"/> Strongly disagree <input type="radio"/> No response
PNL_024. Using family planning creates conflict in a couple	<input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response
PNL_025. It is acceptable for a woman to use family planning before she has children	<input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response
<p>People have different opinions about family planning. In your community, would you say most people, some people or few people have the following opinions about family planning:</p> <p><i>NOTE: If the woman originates from a different part of the country, remind her that we are referring to this community where she currently lives.</i></p>	
PNL_026. Women who use family planning methods are considered promiscuous	<input type="radio"/> Most people <input type="radio"/> Some people <input type="radio"/> Few people <input type="radio"/> NO RESPONSE
PNL_027. Couples who use family planning methods are financially responsible	<input type="radio"/> Most people <input type="radio"/> Some people <input type="radio"/> Few people <input type="radio"/> NO RESPONSE
PNL_028. Women should be the one's to decide about family planning methods	<input type="radio"/> Most people <input type="radio"/> Some people <input type="radio"/> Few people <input type="radio"/> NO RESPONSE
PNL_029. People who use family planning methods have a better quality of life	<input type="radio"/> Most people <input type="radio"/> Some people <input type="radio"/> Few people <input type="radio"/> NO RESPONSE
PNL_030. Women who use family planning methods without their husband's permission deserve the potential consequences on their relationship	<input type="radio"/> Most people <input type="radio"/> Some people <input type="radio"/> Few people <input type="radio"/> NO RESPONSE

Section 6 - Confidantes Questions

The next series of questions are about women you know in Uganda. I want to remind you that your answers will be confidential. If we come to any question that you don't want to answer just let me know and I will skip to the next question.

GGR_601. I would like to talk about women with whom you share intimate secrets and who share intimate secrets with you. These women might be relatives, like sisters or aunts, or friends. These women should also be people with whom you have been close for at least a year or more, are 15-49 years of age and live in Uganda. We will not ask you to identify the women whom you tell us about. How many women do you know that fit this description?

Probe to confirm all women are: - Age 15-49 - Currently living in Uganda

Please do not give examples of what these secrets or private information might be.

Enter -88 for do not know, -99 for no response. 0 is a possible answer.

GGR_602. Please think about the female who is most likely to share her intimate secrets with you. This should be someone with whom you are also likely to share your intimate secrets. Picture this person. For ease of referencing this woman, please provide a fake name for her that you will be able to remember.

GGR_603. How old was she at her last birthday?

Enter -88 for do not know, -99 for no response.

GGR_604. What is the highest level of school she attended?

Only record formal schooling. Do not record bible or koranic school or short courses.

- Never attended
- Primary
- 'O' Level
- 'A' Level
- Tertiary
- University
- Do not know
- No response

GGR_605a. What region does she live in?

By knowing the district select the region on this screen first and on the next screen select the district the respondent told you about.

- Central
- Eastern
- Northern
- Western
- Do not know
- No response

GGR_605b. What district does she live in?

GGR_606. Please think about the female who is second most likely to share her intimate secrets with you, and with whom you are also likely to share your intimate secrets. Picture this person. Please provide a fake name for her.

GGR_607. How old was she at her last birthday?

Enter -88 for do not know, -99 for no response. 0 is a possible answer.

GGR_608. What is the highest level of school she attended?

- Never attended
- Primary

<p>Only record formal schooling. Do not record bible or koranic school or short courses.</p>	<input type="radio"/> 'O' Level <input type="radio"/> 'A' Level <input type="radio"/> Tertiary <input type="radio"/> University <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_609a. What region does she live in? <i>By knowing the district select the region on this screen first and on the next screen select the district the respondent told you about.</i></p>	<input type="radio"/> Central <input type="radio"/> Eastern <input type="radio"/> Northern <input type="radio"/> Western <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_609b. What district does she live in?</p>	
<p>GGR_610. Please think about the female who is third most likely to share her intimate secrets with you, and with whom you are also likely to share your intimate secrets. Picture this person. Please provide a fake name for her.</p>	
<p>GGR_611. How old was she at her last birthday? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	
<p>GGR_612. What is the highest level of school she attended? <i>Only record formal schooling. Do not record bible or koranic school or short courses.</i></p>	<input type="radio"/> Never attended <input type="radio"/> Primary <input type="radio"/> 'O' Level <input type="radio"/> 'A' Level <input type="radio"/> Tertiary <input type="radio"/> University <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_613a. What region does she live in? <i>By knowing the district select the region on this screen first and on the next screen select the district the respondent told you about.</i></p>	<input type="radio"/> Central <input type="radio"/> Eastern <input type="radio"/> Northern <input type="radio"/> Western <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_613b. What district does she live in?</p>	
<p>GGR_614. Now I would like to ask you just a few questions about each of those females/this female. First, let's go back to \${friend1_name}. Is she using an IUD or implant?</p>	<input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_615. It is not uncommon for women to find that they are pregnant when they don't want to be, or when circumstances would make it difficult to have a child, and sometimes they decide to do something or take something in order to end their pregnancy.</p>	<input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No

<p>As far as you know, has \${friend1_name} ever done something that intentionally ended a pregnancy? Again, this information will be completely confidential.</p>	<p><input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_616a. Approximately how many years ago did this last occur?</p>	<p><input type="radio"/> 1 year or less ago <input type="radio"/> More than 1 year to 3 years ago <input type="radio"/> More than 3 year to 5 years ago <input type="radio"/> More than 5 years ago <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_616b. Did \${friend1_name} have any health issues and go to a health facility for treatment in the process of ending the pregnancy?</p>	<p><input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_617. Now please think about \${friend2_name}. Is she currently using an IUD or implant?</p>	<p><input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_618. As far as you know has she ever done something that intentionally ended a pregnancy?</p>	<p><input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_619a. Approximately how many years ago did this last occur?</p>	<p><input type="radio"/> 1 year or less ago <input type="radio"/> More than 1 year to 3 years ago <input type="radio"/> More than 3 year to 5 years ago <input type="radio"/> More than 5 years ago <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_619b. Did \${friend2_name} have any health issues and go to a health facility for treatment in the process of ending the pregnancy?</p>	<p><input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_620. Now please think about \${friend3_name}. Is she currently using an IUD or implant?</p>	<p><input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_621. As far as you know has she ever done something that intentionally ended a pregnancy?</p>	<p><input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No</p>

	<input type="radio"/> Do not know <input type="radio"/> No response
GGR_622a. Approximately how many years ago did this last occur?	<input type="radio"/> 1 year or less ago <input type="radio"/> More than 1 year to 3 years ago <input type="radio"/> More than 3 year to 5 years ago <input type="radio"/> More than 5 years ago <input type="radio"/> Do not know <input type="radio"/> No response
GGR_622b. Did \${friend3_name} have any health issues and go to a health facility for treatment in the process of ending the pregnancy?	<input type="radio"/> Yes, I am certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response

Section 7 - Network Scale Up Questions

The next series of questions are about women you know in Uganda. I want to remind you that your answers will be confidential. If we come to any question that you don't want to answer just let me know and I will skip to the next question.

<p>GGR_700. This next set of questions will help us count the number of women who you interact with. These people should be: (a) individuals you know by sight AND name, and who also know you by sight and name. In other words, you should not consider famous people who you know about, but who do not know about you; and (b) individuals you have had some contact with - either in person, over the phone, or on the computer - in the past 12 months. These could be family members, friends, co-workers, neighbors or other people you have had contact with; and (c) individuals 15-49 years of age who currently live in Uganda. Is this clear?</p> <p><i>If the woman does not understand or does not respond, please go over the text above again.</i></p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_701. How many women have you had contact with in the last 12 months who gave birth in the last 12 months?</p> <p><i>We are only asking about live births. Still borns should not be counted. 0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_702. How many women have you had contact with in the past 12 months who live in a household that has a toilet that flushes?</p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_703. How many women have you had contact with in the past 12 months who have at least one co-wife?</p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_704. How many women have you had contact with in the past 12 months who did any education past senior six?</p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_705. How many women have you had contact with in the past 12 months who live in a household that owns a motorcycle or scooter?</p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	

<p>GGR_706. How many women have you had contact with in the last 12 months who live in a household with a thatched roof? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_707. How many women have you had contact with in the past 12 months who live in a household that owns a car or truck? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_708. How many women have you had contact with in the past 12 months who live in a household that has a refrigerator? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_709. How many women have you had contact with in the past 12 months who live in a household that owns an exotic cow? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_710. How many women have you had contact with in the past 12 months who live in a household that owns at least one sheep? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_711. How many women have you had contact with in the past 12 months who live in a household that has a landline phone? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_712. How many women have you had contact with in the past 12 months whose husband/partner has not worked in the last 12 months ? <i>A "partner" is a boyfriend that the woman is living with, but they are not married. 0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_714. How many women have you had contact with in the past 12 months who are named Sarah? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_715. How many women have you had contact with in the past 12 months who are named Beatrice? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_716. How many women have you had contact with in the past 12 months who are named Catherine or Kate? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_717. How many women have you had contact with in the past 12 months who are named Lydia? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_718. How many women have you had contact with in the past 12 months who are named Lillian? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_719. How many women have you had contact with in the past 12 months who are named Gorrethi? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_720. How many women have you had contact with in the past 12 months who are named Milly? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_721. While people use many different methods to avoid becoming pregnant, some of these methods are longer lasting than others. How many of the women you had contact with in the past 12 months are currently using IUDs or implants? <i>0 is a possible answer Enter -88 for do not know, -99 for no response.</i></p>	

<p>GGR_722. It is not uncommon for women to find that they are pregnant when they don't want to be, or when circumstances would make it difficult to have a child, and sometimes they decide to do something or take something in order to end their pregnancy.</p> <p>Of the women you have had contact with in the past 12 months, how many have ever done something that intentionally ended a pregnancy? Again, this information will be completely confidential.</p> <p><i>0 is a possible answer Enter -88 for do not know, -99 for no response.</i></p>	
<p>GGR_723. Thinking of these \${wmn_abt} women who you have had contact with in the past 12 months and who have ever intentionally ended a pregnancy, how many told you directly themselves that they intentionally ended their pregnancy?</p> <p><i>If the respondent heard about an abortion from a third party, she should not include that abortion in her response</i></p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_724. Thinking of these \${wmn_abt} women who you have had contact with in the past 12 months and who have ever intentionally ended a pregnancy, how many have intentionally ended a pregnancy in the past 12 months? Again, this information will be completely confidential.</p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_725. When two people marry or live together, they usually share both good and bad moments. Sometimes violence can occur between married people.</p> <p>Of the women you have had contact with in the past 12 months, how many have EVER been physically harmed by their husband or partner they live with? This could include hitting, kicking, shoving, choking, or threatening with a gun, knife, or other weapon.</p> <p><i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_726. You previously mentioned that \${friend_abt_names} did something to end a pregnancy. Did you include [her/them] when you reported the number of women you have had contact with in the past 12 months who have ever done something to intentionally end a pregnancy?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Do not know</p> <p><input type="radio"/> No response</p>

Section 8 - Abortion

<p>GGR_801. Now I would like to ask you about your own pregnancies. Besides the pregnancies we already discussed. Were you ever pregnant when you did not want to be, or when circumstances would have made it difficult to have a child?</p>	
<p>GGR_801. Now I would like to ask you about your own experience. Were you ever pregnant when you did not want to be, or when circumstances would have made it difficult to have a child?</p>	
<p>#####</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Do not know</p> <p><input type="radio"/> No response</p>

<p>GGR_802. Have you ever done anything to try to end a pregnancy? <i>Do not count if the woman only used emergency contraception</i></p>	<input type="radio"/> Yes, succeeded <input type="radio"/> Yes, but failed <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
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<p>GGR_803a. In what month and year did this last happen? <i>If respondent knows the year, but not month enter 'Do not know' for month. Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p>	
<p>Month:</p>	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
<p>Year:</p>	<p>Year:</p>

<p>Date cannot be in the future. You entered: \${period_abt_last_full_lab} Today: \${today} Birth Date: \${birthdate_lab}</p>	
--	--

<p>The calculate age at last abortion (\${age_at_abt}) is less than the age at first sex (\${age_at_first_sex})!!!! Is this correct? <i>Please verify and correct where appropriate.</i></p>	
---	--

<p>GGR_803b. If you don't know exactly, approximately how many years ago did this occur?</p>	<input type="radio"/> 1 year or less ago <input type="radio"/> More than 1 year to 3 years ago <input type="radio"/> More than 3 year to 5 years ago <input type="radio"/> More than 5 years ago <input type="radio"/> Do not know <input type="radio"/> No response
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<p>GGR_804. Were you or your partner using a method of contraception to avoid or delay getting pregnant at the time you became pregnant? <i>This question is asking about the woman's unintended pregnancy or attempt to intentionally end a pregnancy.</i></p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
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<p>GGR_805. What methods were you using at the time you became pregnant? <i>Do not read the choices. Be sure to scroll to bottom to see all choices. Select all that apply.</i></p>	<input type="checkbox"/> Female sterilization <input type="checkbox"/> Male sterilization <input type="checkbox"/> Implant <input type="checkbox"/> IUD
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	<input type="checkbox"/> Injectables <input type="checkbox"/> Pill <input type="checkbox"/> Emergency Contraception <input type="checkbox"/> Male condom <input type="checkbox"/> Female condom <input type="checkbox"/> Diaphragm <input type="checkbox"/> Foam/Jelly <input type="checkbox"/> Standard Days/Cycle beads <input type="checkbox"/> LAM <input type="checkbox"/> Rhythm method <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other traditional method <input type="checkbox"/> Monthly Chinese Pill <input type="checkbox"/> No response
<p>CHECK: Please confirm with the respondent that you she is using the oral pill that is taken once a month to prevent pregnancy. This is different from the oral contraceptive pill that is taken every day and from the emergency contraception pill.</p>	
<p>GGR_806. Where did you go to end the pregnancy? <i>PROBE: If she went to more than one place, describe the final place that she went to end the pregnancy.</i> <i>Do not read the choices. Be sure to scroll to bottom to see all choices. Please record only 1 response.</i></p>	<input type="radio"/> Govt. Hospital <input type="radio"/> Govt. Health Center <input type="radio"/> Public Family Planning Clinic <input type="radio"/> Public Outreach <input type="radio"/> Public Fieldwork/VHT <input type="radio"/> Other Public <input type="radio"/> Private Hospital/Clinic <input type="radio"/> Pharmacy <input type="radio"/> Private Doctor <input type="radio"/> Private Outreach <input type="radio"/> Private Fieldwork/VHT <input type="radio"/> Other Private <input type="radio"/> Shop <input type="radio"/> Church <input type="radio"/> Friend/relative <input type="radio"/> Market <input type="radio"/> Traditional healer <input type="radio"/> Self <input type="radio"/> Other <input type="radio"/> Don't know <input type="radio"/> No Response
<p>GGR_806b. Did you have any health issues and go to a health facility in the process of ending the pregnancy? <i>Hint: This is asking about a health facility other than a health facility a woman may have reported visiting in the prior question.</i></p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_807. I want to ask you again about the women with whom you share intimate secrets and who share intimate secrets with you. Did you</p>	<input type="checkbox"/> Friend 1: \${friend1_name} <input type="checkbox"/> Friend 2: \${friend2_name}

<p>discuss ending this pregnancy with the females you listed in the previous section? <i>Read each name out loud. Select all that apply</i></p>	<input type="checkbox"/> Friend 3: \${friend3_name} <input type="checkbox"/> None <input type="checkbox"/> Do not know <input type="checkbox"/> No response
<p>GGR_808. Did you discuss your use of the \${current_method_label} with the women with whom you share intimate secrets and who share intimate secrets with you that you listed in the previous section? <i>Read each name out loud. Select all that apply</i></p>	<input type="checkbox"/> Friend 1: \${friend1_name} <input type="checkbox"/> Friend 2: \${friend2_name} <input type="checkbox"/> Friend 3: \${friend3_name} <input type="checkbox"/> None <input type="checkbox"/> Do not know <input type="checkbox"/> No response
<p>GGR_809. I want to ask you again about the women you know by sight AND name, and with whom you have had contact in the past 12 months and who are 15 to 49 years of age and live in Uganda. How many did you tell directly that you ended this pregnancy? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_810. Thinking about these same women, how many additional women know that you ended this pregnancy that you did NOT tell directly? These women may have found out through your close friends, family members, or in some other. <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_811. How many of the women that you know by sight and name, with whom you had contact with in the past 12 months and who are 15 to 49 years of age and live in Uganda know that you use an \${current_method_label}? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>GGR_812. Now I would like to ask you a question about your experience with your husband/partner. Let me assure you that your answers are completely confidential and will not be told to anyone and no one else in your household will know that you were asked these questions. Has a partner or husband ever physically harmed you? This could include, hitting, kicking, shoving, choking, or threatening with a gun, knife, or other weapon.</p>	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_813. Thinking again about the women you know by sight and name, with whom you had contact with in the past 12 months and who are 15 to 49 years of age and live in Uganda, how many of these women know that a husband or partner physically harmed you? <i>0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	
<p>Thank the respondent for her time. <i>The respondent is finished, but there are still more questions for you to complete outside the home.</i></p>	
<p>Thank you. <i>There are still more questions for you to complete outside the home.</i></p>	

Location and Questionnaire result

095. Location
Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6 m.

098. In what language was this interview conducted?

- English
- Ateso
- Luganda
- Lugbara
- Lusoga
- Luo
- Runyankole-Rukiga
- Runyoro-Rutoro
- Ngakaramojong
- Other

099. Questionnaire Result

Record the result of the questionnaire.

- Completed
- Not at home
- Postponed
- Refused
- Partly completed
- Incapacitated