



## PMA Democratic Republic of Congo Phase 1 Service Delivery Point Questionnaire

| 001a. Your ID: \${your_name}<br>Is this your ID?  | ○ Yes<br>○ No   |                         |
|---|---|-------------------------|
| 001b. Enter your ID below.<br>Please record your ID                                     |   |                         |
| 002a. Current date and time.  |   | Day:<br>Month:<br>Year: |
| Is this date and time correct?  | ○ Yes<br>○ No   |                         |
| 002b. Record the correct date and time.   |   | Day:<br>Month:<br>Year: |
| 003a. Province  | <ul><li>○ Kongo Central</li><li>○ KINSHASA</li></ul>  |                         |
| 003b. District  |   |                         |
| 003b. Zone de Santé   |   |                         |
| 003c. Aire de Santé   |   |                         |
| 003c. Quartier  |   |                         |
| 003d. Village   |   |                         |
| 003d. Localité / rue  |   |                         |
| 004. Enumeration Area   |   |                         |
| 005. Facility number<br>Please record the number of the facility from the listing form. |   |                         |
| 006. Type of facility<br>Please select the type of facility.                            | <ul> <li>○ Hospital / Polyclinic</li> <li>○ Health clinic</li> <li>○ Health center</li> <li>○ Dispensary</li> <li>○ Pharmacy / Chemist</li> <li>○ Boutique</li> <li>○ Ligablo</li> <li>○ Other</li> </ul> |                         |
| 007. Managing authority<br>Please select the managing authority for the facility.       | <ul><li>○ Government</li><li>○ NGO</li><li>○ Faith-based organization</li></ul>   |                         |



|  | Other         |
|--|---------------|
| 008. Is a competent respondent present and available to be interviewed today?  | ○ Yes<br>○ No |
| INFORMED CONSENT Find the competent respondent responsible for patient services (main  |               |
| administrator and family planning in-charge) who is present at the facility. Adminster the consent procedures.   |               |
| Hello. My name is  |               |
| Do you have questions about this survey?  009a. Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now?   | ○ Yes<br>○ No |
| OOOL Description of the state o |               |
| 009b. Respondent's signature  Please ask the respondent to sign or check the box in agreement of their participation.  |               |
| Checkbox   | 0             |
| WARNING: The respondent has not signed or checked the box, despite agreeing to be interviewed. To conduct the survey, the respondent must sign or touch the checkbox.  You may go back to obtain a signature or check the box or you should go back to question I to indicate the respondent does not want to be interviewed.  |               |
| 010. Interviewer's ID: \${your_name}<br>Mark your ID as a witness to the consent process.  | 0             |
| 010. Interviewer's ID Please record your ID as a witness to the consent process. You previously entered "\${name_typed}."  |               |



|   | -   |
|---|---|
| 011. Name of the facility<br>Please select the name of the facility.  |   |
| 011. Name of the facility Please record the name of the facility.   |   |
| 012. What is your position in this facility?<br>Select the highest managerial qualification of the respondent.  | <ul><li>Owner</li><li>In-charge / manager</li><li>Staff</li><li>No response</li></ul> |
|   |   |
| Section 1 – Information Ab  Now I would like to ask about the services p  |   |
| 101. Now I have some questions about staffing for this facility. For the following questions, please tell me how many staff with this qualification are currently assigned to this facility and provide family planning services.  Finally, tell me the total number present at any time today. We want to know the highest technical qualification that any staff may hold regardless of the person's actual assignment or specialist studies.  Enter -88 for do not know and -99 for no response. 0 is a possible answer. |   |
|   | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.           |
| 101. Total number: doctors  |   |
| 104b. Present today: doctors  |   |
|   | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.           |
| 101. Total number: nurses   |   |
| 104b. Present today: nurses   |   |
|   | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.           |
| 101. Total number: Nurse Aides / Clinical Assistants  |   |
| 104b. Present today: Nurse Aides / Clinical Assistants  |   |
|   | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.           |
| 101. Total number: Paramedic(s)   |   |
| 104b. Present today: Paramedic(s)   |   |



|  | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.                                    |
|--|--|
| 101. Total number: clinical officer(s)   |  |
| 104b. Present today: clinical officer(s)   |  |
|  | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.                                    |
| 101. Total number: pharmaceutical technologists  |  |
| 104b. Present today: pharmaceutical technologists  |  |
|  | 101. Enter -88 for do not know, -99 for no response. 0 is a possible answer.                                   |
| 101. Total number: pharmacists   |  |
| 104b. Present today: pharmacists   |  |
|  | 101. Enter -88 for do not know,-99 for no response. 0 is a possible answer.                                    |
| 101. Total number: other medical staff   |  |
| 104b. Present today: other medical staff   |  |
| 102. Does this facility have electricity at this time? Select for running electricity only.  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 103. At any point today, has the electricity been out for two or<br>more hours?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>                               |
| 104. Does this facility have running water at this time?<br>Select for running water only.   | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 105. At any point today, has running water been unavailable for<br>two or more hours?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>                               |
| 106. How many handwashing facilities are available on site for staff to use?  Enter -88 for do not know, -99 for no response.                        |  |
| 107. May I see a nearby handwashing facility that is used by staff?  Handwashing facility must be accessible to most health workers in the facility. | ☐ Soap is present ☐ Stored water is present ☐ Running water is present ☐ Handwashing area is near a sanitation |





| At the handwashing facility, OBSERVE:<br>(select all that apply)   | facility ☐ None of the above ☐ Did not see the facility.  |
|--|---|
| Section 2 – Family Planni  | ng Services   |
| Now I would like to ask about family planning service<br>another provider who would be better able to answer my<br>in this facility, I would appreciate if you could refe  | questions on family planning services   |
| 201. Do you usually offer family planning services / products?   | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 202. How many days in a week are family planning services / products offered / sold here? Enter a number between 0 and 7. Enter 0 for less than 1 day per week. Enter -88 for do not know, -99 for no response.  |   |
| 203. Does this facility provide family planning supervision, support, or supplies to community health volunteers?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 204. How many community health volunteers are supported by this facility to provide family planning services?  Record only who receive supervision, support, or supplies for family planning.  If were recorded as employees in 104, please do not include them here as well.  Enter -88 for do not know, -99 for no response. |   |
| 205. Do the community health volunteers provide any of the following contraceptives:   | ☐ Condoms ☐ Pills ☐ Injectables ☐ None of the above ☐ No response   |
| 206. How many times in the last 12 months has a mobile outreach team visited your facility to deliver supplementary/additional family planning services?  Enter -88 for do not know, -99 for no response. 0 is a possible answer.  |   |
| 207. Which of the following family planning services do you offer to unmarried adolescents age 10-19? Read all options and select all that apply.  | ☐ Counsel for contraceptive methods ☐ Provide contraceptive methods ☐ Prescribe / refer for contraceptive methods ☐ None of the above ☐ No response |
| Section 4: Provision of Family F   | Planning Methods  |



| 401. Which of the following methods are provided to clients at<br>this facility?<br>Read all options out loud.    | ☐ Female steril ☐ Male steriliza ☐ Implant ☐ IUD ☐ Injectables - S ☐ Pill ☐ Emergency of ☐ Male condom ☐ Female cond ☐ Diaphragm ☐ Foam / jelly ☐ Standard day ☐ None of the a | Depo Provera Sayana Press contraception om |
|---|--|--|
| 402. Are clients charged for obtaining any of the following methods at this facility?  Read all options out loud. |  |  |
|   | Yes  | No   |
| Female sterilization  | $\circ$  | 0  |
| Male sterilization  | $\circ$  | 0  |
| Implant   | $\circ$  | 0  |
| IUD   | $\circ$  | 0  |
| Injectables - Depo Provera  | $\circ$  | 0  |
| Injectables - Sayana Press  | $\circ$  | 0  |
| Pill  | $\circ$  | 0  |
| Emergency contraception   | $\circ$  | 0  |
| Male condom   | $\circ$  | 0  |
| Female condom   | $\circ$  | 0  |
| Diaphragm   | 0  | 0  |
| Foam / jelly  | 0  | 0  |
| Standard days / cycle beads   |  | 0  |
| Did the respondent answer the questions or give no response?  | <ul><li>Respondent</li><li>No response</li></ul>   | answered                                   |
| 403. How much do you charge for one unit of each method that you provide?  Enter all prices in Congolese Francs.  |  |  |



| Enter -88 for do not know, -99 for no response.   |  |
|---|--|
| Female sterilization (full cost of procedure)   |  |
| Male sterilization (full cost of procedure)   |  |
| Implants (full cost of the implant and insertion)   |  |
| IUD (full cost of the IUD and insertion)  |  |
| One shot of 3-month injectable (Depo Provera)   |  |
| One shot of 3-month injectable (Sayana Press)   |  |
| One month supply of pills   |  |
| A single dose of emergency contraception  |  |
| One male condom   |  |
| One female condom   |  |
| A diaphragm   |  |
| Foam / jelly  |  |
| Standard days / cycle beads   |  |
| 404. Do family planning clients need to pay any fees in order to be seen by a provider in this facility even if they do not obtain a method of contraception?  These may be consultation or registration fees charged to everyone who is seen in this facility or may be specific to family planning clients. | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 405. On days when you offer family planning services, does this facility have trained personnel able to insert implants?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 406. On days when you offer family planning services, does this facility have trained personnel able to remove implants?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 407. On days when you offer family planning services, does this facility have trained personnel able to insert IUDs?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 408. On days when you offer family planning services, does this facility have trained personnel able to remove IUDs?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 409. Does this facility have the following supplies needed to insert and/or remove implants: Read out all supplies and select all that apply. Supplies do not need to be observed, but must be available on the day of the interview.   | <ul> <li>□ Clean Gloves</li> <li>□ Antiseptic</li> <li>□ Sterile Gauze Pad or Cotton Wool</li> <li>□ Local Anesthetic</li> <li>□ Sealed Implant Pack</li> <li>□ Surgical Blade</li> <li>□ Mosquito forceps (straight or curved)</li> </ul> |



|   | ☐ None of the above<br>☐ No response  |
|---|---|
| 410. If a woman came in today needing an implant inserted, could that service be provided to her today onsite?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 411. If a woman came today needing her implant removed, could that service be provided to her today onsite?   | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 412. If a woman comes to your facility today needing her implant removed, but it is deeply placed, could that service be provided to her today onsite?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 413. Would someone at this facility know where to send her to have the implant removed?   | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 414. Does this facility have the following supplies needed to insert and/or remove IUDs: Read out all supplies and select all that apply. Supplies do not need to be observed, but must be available on the day of the interview.   | <ul> <li>□ Exam gloves</li> <li>□ Antiseptic (povidone iodine)</li> <li>□ Drapes</li> <li>□ Scissors</li> <li>□ Sponge-holding forceps</li> <li>□ Speculums (large and medium)</li> <li>□ Tenaculum</li> <li>□ Uterine Sound</li> <li>□ None of the above</li> <li>□ No response</li> </ul> |
| 415a. May I see your family planning register from the last completed month? From family planning register, record: (1) The total number of family planning visits (new and continuing) in the last completed month, for each method. (2) The number of new clients who received family planning services in the last completed month, for each method. | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
|   | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response.  |
| 415a. Total number of visits: Female Sterilization  |   |
|   | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response.  |
| 415a. Total number of visits: Male Sterilization  |   |



| II   |  |
|--|--|
|  | Enter for past completed month. Enter - 88 for do not know, enter -99 for no response.       |
| 415a. Total number of visits: Implants                   |  |
| 415a. Number of new clients: Implants                    |  |
|  |  |
|  | Enter for past completed month. Enter - 88 for do not know, enter -99 for no response.       |
| 415a. Total number of visits: IUD                        |  |
| 415a. Number of new clients: IUD                         |  |
|  | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response. |
| 415a. Total number of visits: Injectables - Depo Provera |  |
| 415a. Number of new clients: Injectables - Depo Provera  |  |
|  |  |
|  | Enter for past completed month. Enter - 88 for do not know, enter -99 for no response.       |
| 415a. Total number of visits: Injectables - Sayana Press |  |
| 415a. Number of new clients: Injectables - Sayana Press  |  |
|  | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response. |
| 415a. Total number of visits: Pill                       |  |
| 415a. Number of new clients: Pill                        |  |
|  |  |
|  | Enter for past completed month. Enter - 88 for do not know, enter -99 for no response.       |
| 415a. Total number of visits: Emergency contraception    |  |
| 415a. Number of new clients: Emergency contraception     |  |
|  | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response. |
| 415a. Total number of visits: Male condom                |  |
| 415a. Number of new clients: Male condom                 |  |
|  | <u> </u>   |



|  | 1  |
|--|--|
|  | Enter for past completed month. Enter - 88 for do not know, enter -99 for no response.       |
| 415a. Total number of visits: Female condom  |  |
| 415a. Number of new clients: Female condom   |  |
|  |  |
|  | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response. |
| 415a. Total number of visits: Diaphragm  |  |
| 415a. Number of new clients: Diaphragm   |  |
|  | Enter for past completed month. Enter -<br>88 for do not know, enter -99 for no<br>response. |
| 415a. Total number of visits: Foam / jelly   |  |
| 415a. Number of new clients: Foam / jelly  |  |
|  |  |
|  | Enter for past completed month. Enter - 88 for do not know, enter -99 for no response.       |
| 415a. Total number of visits: Standard days / cycle beads  |  |
| 415a. Number of new clients: Standard days / cycle beads   |  |
|  |  |
| 415b. May I see your family planning record book from the last completed month?  From family planning record book, record the total number of family planning products sold in the last completed month, for each method.  Enter -88 for do not know. Enter -99 for no response. |  |
| Number of units sold or provided: Implants   |  |
| Number of units sold or provided: IUD  |  |
| Number of units sold or provided: Injectables - Depo Provera   |  |
| III  |  |
| Number of units sold or provided: Injectables - Sayana Press   |  |
|  |  |
| Number of units sold or provided: Injectables - Sayana Press   |  |
| Number of units sold or provided: Injectables - Sayana Press  Number of units sold or provided: Pill   |  |
| Number of units sold or provided: Injectables - Sayana Press  Number of units sold or provided: Pill  Number of units sold or provided: Emergency contraception  |  |
| Number of units sold or provided: Injectables - Sayana Press  Number of units sold or provided: Pill  Number of units sold or provided: Emergency contraception  Number of units sold or provided: Male condom   |  |





| Number of units sold or provided: Standard days / cycle beads   |  |
|---|--|
| NOTE: Questions 417a-e will repeat for each of the methods provided at this SDP. Methods selected in 401: \${methods_selected}                      |  |
| 417a. You mentioned that you typically provide Implants at this facility, can you show them to me? If no, probe: Is the implant out of stock today? | <ul><li>○ In-stock and observed</li><li>○ In-stock but not observed</li><li>○ Out of stock</li><li>○ No response</li></ul>   |
| 417b. How many days have Implants been out of stock?<br>Enter 1 if only today. Enter -88 for do not know. Enter -99 for no<br>response.             |  |
| 417c. Have Implants been out of stock at any time in the last 3<br>months?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Implants?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?                              | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of<br>Implants?  | <ul><li>○ X weeks</li><li>○ X months</li><li>○ Don't know</li><li>○ No response</li></ul>  |
| 417e. Enter a value for \${ship_implants_lab}:  |  |
| 417a. You mentioned that you typically provide IUDs at this facility, can you show them to me?<br>If no, probe: Is the IUDs out of stock today?     | <ul><li>○ In-stock and observed</li><li>○ In-stock but not observed</li><li>○ Out of stock</li><li>○ No response</li></ul>   |
| 417b. How many days have IUDs been out of stock?<br>Enter 1 if only today. Enter -88 for do not know. Enter -99 for no<br>response.                 |  |
| 417c. Have IUDs been out of stock at any time in the last 3<br>months?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |



| 417d. Why is this facility out of stock for IUD?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?  | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
|--|--|
| 417e. When do you expect to receive your next shipment of IUDs?  | X weeks X months Don't know No response  |
| 417e. Enter a value for \${ship_IUD_lab}:  |  |
| 417a. You mentioned that you typically provide Injectables<br>Sayana Press at this facility, can you show them to me?<br>If no, probe: Is the Injectables Sayana Press out of stock today? | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 417b. How many days have Injectables Sayana Press been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.  |  |
| 417c. Have Injectables Sayana Press been out of stock at any<br>time in the last 3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Injectables Sayana<br>Press?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?  | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of Injectables Sayana Press?  | X weeks X months Don't know No response  |
| 417e. Enter a value for \${ship_sp_lab}:   |  |
| 417a. You mentioned that you typically provide Injectables Depo Provera at this facility, can you show them to me? If no, probe: Is the Injectables Depo Provera out of stock today?       | <ul><li>○ In-stock and observed</li><li>○ In-stock but not observed</li></ul>  |



|  | Out of stock No response   |
|--|--|
| 417b. How many days have Injectables Depo Provera been out of stock?   |  |
| Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.   |  |
| 417c. Have Injectables Depo Provera been out of stock at any<br>time in the last 3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Injectables Depo<br>Provera?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?      | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of Injectables Depo Provera?  | <ul><li>X weeks</li><li>X months</li><li>Don't know</li><li>No response</li></ul>  |
| 417e. Enter a value for \${ship_dp_lab}:   |  |
| 417a. You mentioned that you typically provide Pills at this facility, can you show it to me?<br>If no, probe: Is the Pillsout of stock today? | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 417b. How many days have Pills been out of stock?<br>Enter 1 if only today. Enter -88 for do not know. Enter -99 for no<br>response.           |  |
| 417c. Have Pills been out of stock at any time in the last 3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Pills?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?                            | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |





| 417e. When do you expect to receive your next shipment of Pills?  | <ul><li>X weeks</li><li>X months</li><li>Don't know</li><li>No response</li></ul>  |
|---|--|
| 417e. Enter a value for \${ship_pills_lab}:   |  |
| 417a. You mentioned that you typically provide Emergency<br>Contraception at this facility, can you show it to me?<br>If no, probe: Is the Emergency Contraception out of stock<br>today? | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 417b. How many days has Emergency Contraception been out of stock?  Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.  |  |
| 417c. Has Emergency Contraception been out of stock at any<br>time in the last 3 months?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Emergency<br>Contraception?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?  | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of Emergency Contraception?  | <ul><li>X weeks</li><li>X months</li><li>Don't know</li><li>No response</li></ul>  |
| 417e. Enter a value for \${ship_ec_lab}:  |  |
| 417a. You mentioned that you typically provide Male condoms at this facility, can you show it to me? If no, probe: Is the Male condoms out of stock today?                                | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 417b. How many days have Male condoms been out of stock?<br>Enter 1 if only today. Enter -88 for do not know. Enter -99 for no<br>response.   |  |
| 417c. Have Male condoms been out of stock at any time in the last 3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |



| 417d. Why is this facility out of stock for Male condoms?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?                                     | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
|--|--|
| 417e. When do you expect to receive your next shipment of<br>Male condoms?   | <ul><li>○ X weeks</li><li>○ X months</li><li>○ Don't know</li><li>○ No response</li></ul>  |
| 417e. Enter a value for \${ship_male_condoms_lab}:   |  |
| 417a. You mentioned that you typically provide Female condoms at this facility, can you show it to me? If no, probe: Is the Female condoms out of stock today? | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 417b. How many days have Female condoms been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.                        |  |
| 417c. Have Female condoms been out of stock at any time in the last 3 months?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Female condoms?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?                                   | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of Female condoms?  | <ul><li>X weeks</li><li>X months</li><li>Don't know</li><li>No response</li></ul>  |
| 417e. Enter a value for \${ship_female_condoms_lab}:   |  |
| 417a. You mentioned that you typically provide Diaphragms at this facility, can you show it to me? If no, probe: Is the Diaphragms out of stock today?         | <ul><li>○ In-stock and observed</li><li>○ In-stock but not observed</li></ul>  |



|  | Out of stock No response   |
|--|--|
| 417b. How many days have Diaphragms been out of stock?<br>Enter 1 if only today. Enter -88 for do not know. Enter -99 for no<br>response.              |  |
| 417c. Have Diaphragms been out of stock at any time in the last<br>3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Diaphragms?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?                               | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of Diaphragms?  | <ul><li>○ X weeks</li><li>○ X months</li><li>○ Don't know</li><li>○ No response</li></ul>  |
| 417e. Enter a value for \${ship_diaphragm_lab}:  |  |
| 417a. You mentioned that you typically provide Foam/Jelly at this facility, can you show it to me? If no, probe: Is the Foam/Jelly out of stock today? | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 417b. How many days has Foam/Jelly been out of stock?<br>Enter 1 if only today. Enter -88 for do not know. Enter -99 for no<br>response.               |  |
| 417c. Has Foam/Jelly been out of stock at any time in the last 3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Foam/Jelly?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?                               | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |



| 417e. When do you expect to receive your next shipment of Foam/Jelly?   | <ul><li>X weeks</li><li>X months</li><li>Don't know</li><li>No response</li></ul>  |
|---|--|
| 417e. Enter a value for \${ship_foam_lab}:  |  |
| 417a. You mentioned that you typically provide Standard<br>Days/Cycle Beads at this facility, can you show them to me?<br>If no, probe: Is the Standard Days/Cycle Beads out of stock<br>today? | <ul><li>○ In-stock and observed</li><li>○ In-stock but not observed</li><li>○ Out of stock</li><li>○ No response</li></ul>   |
| 417b. How many days have Standard Days/Cycle Beads been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.  |  |
| 417c. Have Standard Days/Cycle Beads been out of stock at any<br>time in the last 3 months?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 417d. Why is this facility out of stock for Standard Days/Cycle<br>Beads?<br>PROBE IF MULTIPLE REASONS GIVEN: What was the main<br>reason?  | <ul> <li>Did not place order for shipment</li> <li>Ordered but did not receive shipment</li> <li>Did not order right quantities</li> <li>Ordered but did not receive right quantities</li> <li>Unexpected increase in consumption</li> <li>Other</li> <li>Don't know</li> <li>No response</li> </ul> |
| 417e. When do you expect to receive your next shipment of<br>Standard Days/Cycle Beads?   | <ul><li>○ X weeks</li><li>○ X months</li><li>○ Don't know</li><li>○ No response</li></ul>  |
| 417e. Enter a value for \${ship_beads_lab}:   |  |
| 418. Is Miso-Kare (misoprostol) available in the facility for<br>management of postpartum hemorrhage or other gynecologic<br>issues?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 419. Can you show it to me?<br>If no, probe: Is it out of stock today?  | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>   |
| 420. Is Ma-Kare (misoprostol & mifepristone) available in the facility for management of postpartum hemorrhage or other gynecologic issues?   | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |





| 421. Can you show it to me?<br>If no, probe: Is it out of stock today?  | <ul><li>In-stock and observed</li><li>In-stock but not observed</li><li>Out of stock</li><li>No response</li></ul>  |
|---|---|
| Section 5: Family Planning Se   | rvice Integration   |
| 501. Which of the following services are provided at this facility?<br>Read all options and select all that apply.  | ☐ Antenatal ☐ Delivery ☐ Postnatal ☐ Post-abortion ☐ None of the above ☐ No response  |
| 502. Which of the following is discussed with the mother during an antenatal care visit? Read all options and select all that apply. If your respondent is not involved in antenatal care, ask if they can refer you to someone at the facility who provides these services.                                    | ☐ Return to fertility ☐ Healthy timing and spacing of pregnancies ☐ Immediate and exclusive breastfeeding ☐ Family planning methods available to use while breastfeeding ☐ Lactational Amenorrhea Method and transition to other methods ☐ Long-acting method options ☐ None of the above ☐ No response |
| 503. Which of the following is discussed with the mother after delivery and before discharge from the facility? Read all options and select all that apply. If your respondent is not involved in delivery or postnatal care, ask if they can refer you to someone at the facility who provides these services. | ☐ Return to fertility ☐ Healthy timing and spacing of pregnancies ☐ Immediate and exclusive breastfeeding ☐ Family planning methods available to use while breastfeeding ☐ Lactational Amenorrhea Method and transition to other methods ☐ Long-acting method options ☐ None of the above ☐ No response |
| 504. Is the woman offered a method of family planning before discharge from the facility?   | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>  |
| 505. Which of the following is discussed with the mother during a postnatal care visit?  Read all options and select all that apply. If your respondent is not involved in delivery or postnatal care, ask if they can refer you to someone at the facility who provides these services.                        | <ul> <li>□ Return to fertility</li> <li>□ Healthy timing and spacing of pregnancies</li> <li>□ Immediate and exclusive breastfeeding</li> <li>□ Family planning methods available to</li> </ul>   |



|   | use while breastfeeding  ☐ Lactational Amenorrhea Method and transition to other methods ☐ Long-acting method options ☐ None of the above ☐ No response  |
|---|--|
| 506. Is the woman offered a method of family planning during a postnatal care visit?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 507. Which of the following is discussed with the woman during a post-abortion visit? Read all options and select all that apply. If your respondent is not involved in post-abortion care, ask if they can refer you to someone at the facility who provides these services. | <ul> <li>□ Post-abortion mental health</li> <li>□ Return to fertility</li> <li>□ Healthy timing and spacing of pregnancies</li> <li>□ Long-acting method options</li> <li>□ Family planning methods</li> <li>□ None of the above</li> <li>□ No response</li> </ul> |
| 508. Is the woman offered a method of family planning during a post-abortion visit?   | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 509. Does this facility offer any service related to diagnosis, treatment, or supportive services for HIV?  | <ul><li>○ Yes</li><li>○ No</li><li>○ No response</li></ul>   |
| 510. When a client comes in for HIV services, are they offered condoms by the HIV service provider?  If your respondent is not involved in HIV service provision, ask if they can refer you to someone at the facility who provides these services.                           | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 511. Does the HIV service provider offer them any other method of contraception besides condoms?  | <ul><li>○ Yes</li><li>○ No</li><li>○ Do not know</li><li>○ No response</li></ul>   |
| 094. Ask permission to take a photo of the entrance of the facility. Did you get consent to take the photo?   | ○ Yes<br>○ No  |
| Thank the respondent for his / her time. The respondent is finished, but there are still more questions for you to complete outside the facility.   |  |
| Location and Questionn  | aire result  |
| SDP is not selected for client exit interviews  |  |
| SDP is selected for client exit interviews. Interview as many women as possible in two days.  |  |
| 095. Ensure that no people are in the photo.  |  |





| 096. Take a GPS point outside near the entrance to the facility.  Record location when the accuracy is smaller than 6m. |   |
|---|---|
| 097. How many times have you visited this service delivery point for this interview?                                    | <ul><li>○ 1st time</li><li>○ 2nd time</li><li>○ 3rd time</li></ul>  |
| 098. In what language was this interview conducted?   | <ul> <li>○ French</li> <li>○ Lingala</li> <li>○ Kikongo</li> <li>○ Tshiluba</li> <li>○ Swahili</li> <li>○ Kintandu</li> <li>○ Manianga</li> <li>○ Kiyombe</li> <li>○ Kindibu</li> <li>○ Kilemfu</li> <li>○ Other</li> </ul> |
| 099. Questionnaire Result<br>Record the result of the questionnaire.  | <ul><li>Completed</li><li>Not at facility</li><li>Postponed</li><li>Refused</li><li>Partly completed</li><li>Other</li></ul>  |