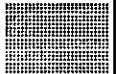


**REPUBLIC OF GHANA
GHANA DEMOGRAPHIC AND HEALTH SURVEY -1993.
MALE QUESTIONNAIRE (ENGLISH)**

| IDENTIFICATION | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| PLACE NAME _____ | <table border="1"> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table> | | | | | | | | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | | | | | | | | | |
| NAME OF HOUSEHOLD HEAD _____ | | | | | | | | | | | | | | | | | | | | | |
| E A NUMBER | | | | | | | | | | | | | | | | | | | | | |
| STRUCTURE NUMBER..... | | | | | | | | | | | | | | | | | | | | | |
| HOUSEHOLD NUMBER | | | | | | | | | | | | | | | | | | | | | |
| REGION..... | | | | | | | | | | | | | | | | | | | | | |
| URBAN/RURAL (urban=1, rural=2)..... | | | | | | | | | | | | | | | | | | | | | |
| NAME AND LINE NUMBER OF RESPONDENT _____ (copy from household schedule) | <table border="1"><tr><td> </td><td> </td></tr></table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| NAME AND LINE NUMBER OF WIFE _____ | <table border="1"><tr><td> </td><td> </td></tr></table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| NAME AND LINE NUMBER OF SECOND WIFE _____ | <table border="1"><tr><td> </td><td> </td></tr></table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| NAME AND LINE NUMBER OF THIRD WIFE _____ | <table border="1"><tr><td> </td><td> </td></tr></table> | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | |
| ENTER '98', IF NOT MARRIED AND '99' IF PARTNER IS NOT A MEMBER OF HOUSEHOLD | | | | | | | | | | | | | | | | | | | | | |
| FOR OFFICE USE | | | | | | | | | | | | | | | | | | | | | |
| LARGE CITY/MEDIUM CITY/SMALL CITY/TOWN/VILLAGE..... (large city=1, medium city=2, small city=3, town=4, village=5) | | | | | | | | | | | | | | | | | | | | | |
| Large city 1,000,000 and over Town 5,000 - 49,999 | | | | | | | | | | | | | | | | | | | | | |
| Medium city 500,000 - 999,999 Village < 5,000 | | | | | | | | | | | | | | | | | | | | | |
| Small city 50,000 - 499,999 | | | | | | | | | | | | | | | | | | | | | |
| <table border="1"> <tr><td> </td></tr> </table> | | | | | | | | | | | | | | | | | | | | | |
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| INTERVIEWER VISITS | | | | |
|--|-------|-------|---|------------------------|
| | 1 | 2 | 3 | FINAL VISIT |
| DATE | _____ | _____ | _____ | DAY MONTH YEAR |
| INTERVIEWER'S NAME | _____ | _____ | _____ | NAME |
| RESULT * | _____ | _____ | _____ | RESULT |
| NEXT VISIT: DATE TIME | _____ | _____ |  | TOTAL NUMBER OF VISITS |
| * RESULT CODES: 1 COMPLETED 4 REFUSED 7 OTHER _____ 2 NOT AT HOME 5 PARTLY COMPLETED (SPECIFY) 3 POSTPONED 6 INCAPACITATED | | | | |

| | FIELD EDITED BY | OFFICE EDITED BY | KEYED BY | KEYED BY | | |
|------|-----------------|------------------|----------|---|--|--|
| NAME | _____ | _____ | _____ | <table border="1"><tr><td> </td><td> </td></tr></table> | | |
| | | | | | | |
| DATE | _____ | _____ | _____ | | | |

SECTION M1. RESPONDENT'S BACKGROUND

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|------|--|--|---------|
| M101 | RECORD THE TIME. | HOUR..... <input type="text"/> <input type="text"/> MINUTES..... <input type="text"/> <input type="text"/> | |
| M102 | First I would like to ask some questions about your background. For most of the time until you were 12 years old, did you live in a city, in a town or in a village? | CITY1 TOWN2 VILLAGE3 | |
| M103 | How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)? IF LESS THAN A YEAR, CODE "00" | YEARS..... <input type="text"/> <input type="text"/> ALWAYS.....95 VISITOR.....96 | ->M105 |
| M104 | Just before you moved here, did you live in a city, town or village? | CITY1 TOWN2 VILLAGE.....3 | |
| M105 | In what month and year were you born? | MONTH..... <input type="text"/> <input type="text"/> DK MONTH.....98 YEAR..... <input type="text"/> <input type="text"/> DK YEAR.....98 | |
| M106 | How old were you at your last birthday? COMPARE AND CORRECT 105 AND/OR 106 IF INCONSISTENT. | AGE IN COMPLETED YEARS..... <input type="text"/> <input type="text"/> | |
| M107 | Have you ever attended school? | YES.....1 NO.....2 | ->M111 |
| M108 | What was the highest level of school you attended: primary, middle/jss, secondary, or higher? | PRIMARY..... 1 MIDDLE/JSS..... 2 SSS/COMM/VOC/TECH..... 3 POST SEC./NURSING/POLYTECH..... 4 HIGHER..... 5 | |
| M109 | What was the highest (GRADE/FORM/YEAR) you completed at that level? | GRADE..... <input type="text"/> <input type="text"/> | |

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|------|--|---|-----------------------|
| M110 | CHECK 108: PRIMARY OR MIDDLE/JSS <input type="checkbox"/> SECONDARY/SSS OR HIGHER <input type="checkbox"/> | | M112 |
| M111 | Can you read and understand a letter or newspaper easily, with difficulty, or not at all? | EASILY.....1 WITH DIFFICULTY.....2 NOT AT ALL.....3 | →M113 |
| M112 | Do you usually read a newspaper or magazine at least once a week? | YES.....1 NO.....2 | |
| M113 | Do you usually listen to a radio at least once a week? | YES.....1 NO.....2 | |
| M114 | Do you usually watch television at least once a week? | YES.....1 NO.....2 | |
| M115 | What is your religious denomination? | CATHOLIC 01 ANGLICAN 02 METHODIST 03 PRESBYTERIAN 04 PENTECOSTAL 05 SPIRITUALIST 06 OTHER CHRISTIAN 07 MOSLEM 08 TRADITIONAL 09 NO RELIGION 10 OTHER 96 | |
| M116 | To which ethnic group do you belong? | ASANTE 01 AKWAPIM 02 FANTI 03 OTHER AKAN 04 GA-ADANGBE 05 EWE 06 GUAN 07 MOLE-DAGBANI 08 GRUSSI 09 GURMA 10 HAUSA 11 OTHER 96 | |
| M117 | What kind of work do you mainly do? | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | TO BE CODED BY EDITOR |
| M118 | CHECK M117: WORKS IN FARMING <input type="checkbox"/> DOES NOT WORK IN FARMING <input type="checkbox"/> | | →M121 |
| M119 | Do you work mainly on your own land or family land, or do you rent land, or do you work on someone else's land? | OWN/FAMILY LAND.....1 RENT LAND.....2 SOMEONE ELSE'S LAND.....3 | →121 |
| M120 | Do you work mainly for money or do you work for a share of the crops? | MONEY.....1 A SHARE OF CROPS.....2 | |
| M121 | CHECK Q.4 IN THE HOUSEHOLD SCHEDULE: THE RESPONDENT IS NOT A USUAL RESIDENT OF THE HH <input type="checkbox"/> THE RESPONDENT IS A USUAL RESIDENT OF THE HH <input type="checkbox"/> | | →M201 |

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|------|--|---|---------|
| M122 | Now I would like to ask about the place where you usually live. Do you usually live in a city, town or village? | CITY1 TOWN2 VILLAGE.....3 | |
| M123 | In which region is that located? IF USUAL RESIDENCE IS OUTSIDE GHANA, RECORD COUNTRY OF RESIDENCE: ----- (COUNTRY) | WESTERN01 CENTRAL.....02 GREATER ACCRA03 VOLTA04 EASTERN05 ASHANTI06 BRONG-AHAFO07 NORTHERN08 UPPER WEST09 UPPER EAST10 OUTSIDE GHANA11 | |
| M124 | Does the household in which you usually live have: Electricity? A functioning radio? A functioning television? A functioning refrigerator? A functioning video? | YES NO ELECTRICITY.....1 2 RADIO.....1 2 TELEVISION.....1 2 REFRIGERATOR.....1 2 VIDEO.....1 2 | |
| M125 | How many rooms in your household are used for sleeping? | ROOMS..... <input type="text"/> <input type="text"/> | |
| M126 | Could you describe the main material of the floor of your home? | NATURAL FLOOR EARTH/SAND/MUD.....11 MUD MIXED WITH DUNG.....12 RUDIMENTARY FLOOR WOOD PLANKS.....21 PALM/BAMBOO.....22 FINISHED FLOOR PARQUET OR POLISHED WOOD.....31 LINOLEUM.....32 CERAMIC TILES.....33 CEMENT.....34 CARPET.....35 TERRAZZO.....36 OTHER.....96 (SPECIFY) | |
| M127 | Does any member of your household own: A bicycle? A motorcycle? A motor vehicle? A tractor? A cart/horse? | YES NO BICYCLE.....1 2 MOTORCYCLE.....1 2 MOTOR VEHICLE.....1 2 TRACTOR.....1 2 CART/HORSE1 2 | |

Now I would like to ask about all the births you have fathered during your life time.

SECTION M2. REPRODUCTION

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO | | | | |
|------|---|--|--|--|--|--|--|
| M201 | Do you have any sons or daughters that you have fathered who are now living with you? | YES.....1 NO.....2 | →M203 | | | | |
| M202 | How many of your sons live with you? And how many of your daughters live with you? IF NONE ENTER '00'. | SONS AT HOME..... DAUGHTERS AT HOME..... | <table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> | | | | |
| | | | | | | | |
| | | | | | | | |
| M203 | Do you have any of your own sons or daughters that are alive but are not living with you? | YES.....1 NO.....2 | →M205 | | | | |
| M204 | How many sons are alive but do not live with you? And how many daughters are alive but do not live with you? IF NONE ENTER '00'. | SONS ELSEWHERE..... DAUGHTERS ELSEWHERE..... | <table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> | | | | |
| | | | | | | | |
| | | | | | | | |
| M205 | Have you ever had a son or daughter born alive to you but who later died? IF NO, PROBE: Any baby who cried or showed any sign of life but only survived a few hours or days? | YES.....1 NO.....2 | →M207 | | | | |
| M206 | In all, how many boys have died? And how many girls have died? IF NONE ENTER '00'. | BOYS DEAD..... GIRLS DEAD..... | <table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table> | | | | |
| | | | | | | | |
| | | | | | | | |
| M207 | SUM ANSWERS TO M202, M204, AND M206, AND ENTER TOTAL. IF NONE ENTER '00'. | TOTAL..... | <table border="1"><tr><td></td><td></td></tr></table> | | | | |
| | | | | | | | |
| M208 | CHECK M207: Just to make sure that I have this right: you have had in TOTAL ___ children born alive to you during your life. Is that correct? YES <input type="checkbox"/> NO <input type="checkbox"/> → PROBE AND CORRECT M201-M207 AS NECESSARY | | | | | | |
| M209 | Between the first day of a woman's period and the first day of her next period, is there a certain time when she has a greater chance of becoming pregnant? | YES.....1 NO.....2 DK.....3 | →M301 | | | | |
| M210 | During which time between the first day of a woman's period and the first day of her next period does she have the greatest chance of becoming pregnant? | DURING HER PERIOD.....1 RIGHT AFTER HER PERIOD HAS ENDED.....2 IN THE MIDDLE OF THE CYCLE.....3 JUST BEFORE HER PERIOD BEGINS...4 OTHER.....6 (SPECIFY) DK.....8 | | | | | |

SECTION M3: CONTRACEPTION

M301 Now I would like to talk about the various ways or methods that a couple can use to delay or avoid a pregnancy. Which ways or methods have you heard about?

CIRCLE CODE 1 IN M302 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN THE COLUMN, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 2 IF METHOD IS RECOGNIZED, AND CODE 3 IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH CODE 1 OR 2 CIRCLED IN M302, ASK M303 AND M304 BEFORE PROCEEDING TO THE NEXT METHOD.

| | M302 Have you ever heard of (METHOD)? READ DESCRIPTION OF EACH METHOD. | M303 Have you (or your wife/partner) ever used (METHOD)? | M304 Do you know where a person could go to get (METHOD)? |
|---|---|--|--|
| 01] PILL Women can take a pill every day. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | YES.....1 NO.....2 |
| 02] IUD Women can have a loop or coil placed inside them by a doctor or a nurse. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | YES.....1 NO.....2 |
| 03] INJECTIONS Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | YES.....1 NO.....2 |
| 04] DIAPHRAGM, FOAM, JELLY Women can place a sponge, suppository, diaphragm, jelly or cream inside them before intercourse. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | YES.....1 NO.....2 |
| 05] CONDOM Men can use a rubber sheath during sexual intercourse. The rubber sheath is used to avoid pregnancy, to prevent transmission of diseases such as AIDS, or for cleanliness. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | YES.....1 NO.....2 |
| 06] FEMALE STERILIZATION Women can have an operation to avoid having any more children. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | Has (any of) your partner(s) ever had an operation to avoid having any more children? YES.....1 NO.....2 | YES.....1 NO.....2 |
| 07] IMPLANT Women can have a NORPLANT implant inserted under the skin of their upper arm. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | YES.....1 NO.....2 |
| 08] MALE STERILIZATION Men can have an operation to avoid having any more children. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | Have you ever had an operation to avoid having any more children? YES.....1 NO.....2 | YES.....1 NO.....2 |
| 09] RHYTHM, PERIODIC ABSTINENCE Couples can avoid having sexual intercourse on certain days of the month when the woman is more likely to become pregnant. | YES/SPONT.....1 YES/PROBED.....2 NO.....3 | YES.....1 NO.....2 | Do you know where a person can obtain advice on how to use periodic abstinence? YES.....1 NO.....2 |

SECTION M3 CONTINUED

M301

CIRCLE CODE 1 IN M302 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN THE COLUMN, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 2 IF METHOD IS RECOGNIZED, AND CODE 3 IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH CODE 1 OR 2 CIRCLED IN M302, ASK M303 AND M304 BEFORE PROCEEDING TO THE NEXT METHOD.

M302 Have you ever heard of (METHOD)?

READ DESCRIPTION OF EACH METHOD.

M303 Have you (or your wife/partner) ever used (METHOD)?

M304 Do you know where a person could go to get (METHOD)?

10] WITHDRAWAL Men can be careful and pull out before climax.

YES/SPONT.....1
YES/PROBED.....2
NO.....3

YES.....1
NO.....2

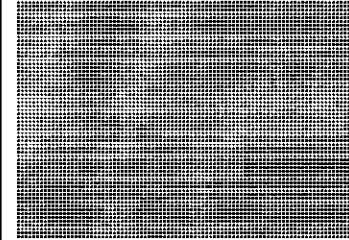


11] Have you heard of any other ways or methods that women or men can use to avoid pregnancy?

1 _____
(SPECIFY)

YES.....1
NO.....3

YES.....1
NO.....2



2 _____
(SPECIFY)

YES.....1
NO.....2

M305

CHECK M303: NOT A SINGLE "YES" (NEVER USED)

AT LEAST ONE "YES" (EVER USED)

→ SKIP TO M308

M306 Have you (or your wife/partner) ever used anything or tried in any way to delay or avoid having a child?

YES.....
NO..... → M322

M307 What have you used or done?
CORRECT M303-M305 (AND M302 IF NECESSARY).

(ENTER WHAT WAS DONE)

M308 How I would like to ask you about the time when you first did something or used a method to avoid getting your wife or partner pregnant?
How many living children did you have at that time, if any?
IF NONE, RECORD '00'.

NUMBER OF CHILDREN.....

M309 CHECK M303:

MAN NOT STERILIZED

MAN STERILIZED

→ M311A

M310 Are you (or your wife/partner) currently doing something or using any method to delay or avoid having a child?

YES.....1
NO.....2 → M316

M311 Which method are you using?

M311A CIRCLE '08' FOR MALE STERILIZATION.

PILL.....01
IUD.....02
INJECTIONS.....03
DIAPHRAGM/FOAM/JELLY.....04
CONDOM.....05
FEMALE STERILIZATION.....06
IMPLANT.....07
MALE STERILIZATION.....08
PERIODIC ABSTINENCE.....09
WITHDRAWAL.....10
OTHER.....96
(SPECIFY) → M316

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO | | | | | | |
|------|--|--|--|--|--|--|---|--|--|
| M312 | <p>CHECK M311</p> <p>SHE/HE STERILIZED <input type="checkbox"/> USING ANOTHER METHOD <input type="checkbox"/></p> <p>Where did the sterilization take place? _____</p> <p>Where did you (or your wife/partner) obtain (METHOD) last time? _____</p> <p>(NAME OF PLACE)</p> | <p>PUBLIC SECTOR</p> <p>GOVT HOSPITAL/POLYCLINIC.....11</p> <p>GOVERNMENT HEALTH CENTRE.....12</p> <p>FAMILY PLANNING CLINIC.....13</p> <p>MOBILE CLINIC.....14</p> <p>VILLAGE H. POST/FIELD WORKER..15</p> <p>MEDICAL PRIVATE SECTOR</p> <p>PRIVATE HOSPITAL.....21</p> <p>PHARMACY/CHEMIST/DRUG STORE ..22</p> <p>PRIVATE CLINIC/DOCTOR.....23</p> <p>MOBILE CLINIC.....24</p> <p>VILLAGE H. POST/FIELD WORKER..25</p> <p>PPAG/FAMILY PLANNING CLINIC...26</p> <p>MATERNITY HOME.....27</p> <p>OTHER PRIVATE SECTOR</p> <p>SHOP.....31</p> <p>CHURCH.....32</p> <p>FRIENDS/RELATIVES.....33</p> <p>OTHER.....96</p> <p>DOM'T KNOW.....98</p> | <p>→M315</p> <p>→M315</p> <p>→M315</p> | | | | | | |
| M313 | <p>How long does it take to travel from your home to this place?</p> <p>IF LESS THAN 2 HOURS, RECORD TIME IN MINUTES. OTHERWISE, RECORD TIME IN HOURS.</p> | <p>MINUTES.....1</p> <p>HOURS.....2</p> <p>DK.....9998</p> | <table border="1" data-bbox="1214 619 1313 703"> <tr><td></td><td></td><td></td></tr> <tr><td>0</td><td></td><td></td></tr> </table> | | | | 0 | | |
| | | | | | | | | | |
| 0 | | | | | | | | | |
| M314 | <p>Is it convenient or inconvenient to get there?</p> | <p>CONVENIENT.....1</p> <p>INCONVENIENT.....2</p> | | | | | | | |
| M315 | <p>CHECK M310/M311:</p> <p>NOT CURRENTLY USING CONDOM <input type="checkbox"/> USING CONDOM <input type="checkbox"/></p> | | <p>→M317</p> | | | | | | |
| M316 | <p>Have you used a condom in the last four weeks?</p> | <p>YES.....1</p> <p>NO.....2</p> | <p>→M321</p> | | | | | | |
| M317 | <p>What is the brand name of the condom you last used?</p> | <p>BRAND _____</p> <p>DK.....98</p> | | | | | | | |
| M318 | <p>How much did a single condom cost you the last time you bought one?</p> | <p>COST.....</p> <p>PARTNER OBTAINED IT.....995</p> <p>FREE.....996</p> <p>DK.....998</p> | | | | | | | |
| M319 | <p>Do you use more condoms now than a year ago, about the same number, or fewer?</p> | <p>MORE.....1</p> <p>SAME NUMBER.....2</p> <p>FEWER.....3</p> | <p>→M321</p> | | | | | | |
| M320 | <p>What is the main reason why you use more condoms now than a year ago?</p> | <p>FEAR OF GETTING AIDS.....1</p> <p>FEAR OF GETTING OTHER STD.....2</p> <p>FAMILY PLANNING.....3</p> <p>LESS EXPENSIVE NOW.....4</p> <p>MORE AVAILABLE NOW.....5</p> <p>OTHER.....6</p> <p>(SPECIFY)</p> <p>DK.....8</p> | | | | | | | |
| M321 | <p>CHECK M310:</p> <p>NOT CURRENTLY USING A METHOD <input type="checkbox"/> USING A METHOD <input type="checkbox"/></p> | | <p>→M332</p> | | | | | | |
| M322 | <p>Do you intend to use a method to delay or avoid having a child at any time in the future?</p> | <p>YES.....1</p> <p>NO.....2</p> <p>DK.....8</p> | <p>→M324</p> <p>→M332</p> | | | | | | |

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|---------------------------------|-------|----------|------------|--|---|-----------------|---|---|----------------|---|---|---|---|---|-----------------------------|-------------------------------------|---|-----------------------------|---|--|------------------------|---|---|-------------------------------------|---|---|---|--------------------------------------|---|---|---|----------------------------------|---|---|---|--|
| M329 | Where is that? IF MORE THAN ONE ASK FOR THE NEAREST _____ (NAME OF SOURCE) | PUBLIC SECTOR GOVT. HOSPITAL/POLYCLINIC.....11 GOVERNMENT HEALTH CENTRE.....12 FAMILY PLANNING CLINIC.....13 MOBILE CLINIC.....14 VILLAGE H. POST/FIELD WORKER..15 MEDICAL PRIVATE SECTOR PRIVATE HOSPITAL.....21 PHARMACY/CHEMIST/DRUG STORE...22 PRIVATE CLINIC/DOCTOR.....23 MOBILE CLINIC.....24 VILLAGE H. POST/FIELD WORKER..25 PPAG/FAMILY PLANNING CLINIC...26 MATERNITY HOME.....27 OTHER PRIVATE SECTOR SHOP.....31 CHURCH.....32 FRIENDS /RELATIVES33 OTHER.....96 DON'T KNOW.....98 | }M332 }M332 }M332 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M330 | How long does it take to travel from your home to this place? IF LESS THAN 2 HOURS RECORD TIME IN MINUTES. OTHERWISE, RECORD TIME IN HOURS. | MINUTES.....1 <table border="1" data-bbox="1197 651 1296 735"> <tr><td></td><td></td><td></td></tr> <tr><td>0</td><td></td><td></td></tr> </table> HOURS.....2 DK.....9998 | | | | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M331 | Is it convenient or inconvenient to get there? | CONVENIENT.....1 INCONVENIENT.....2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M332 | In the last month, have you heard or seen a message about family planning: on the radio? on television? in a newspaper? on poster/billboard? from community health nurse? from family planning worker? from friends/relatives? | <table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr><td>RADIO.....</td><td>1</td><td>2</td></tr> <tr><td>TELEVISION.....</td><td>1</td><td>2</td></tr> <tr><td>NEWSPAPER.....</td><td>1</td><td>2</td></tr> <tr><td>POSTER/BILLBOARD.....</td><td>1</td><td>2</td></tr> <tr><td>COMMUNITY HEALTH NURSE.....</td><td>1</td><td>2</td></tr> <tr><td>FAMILY PLANNING WORKER.....</td><td>1</td><td>2</td></tr> <tr><td>FRIENDS/RELATIVES.....</td><td>1</td><td>2</td></tr> </tbody> </table> | | YES | NO | RADIO..... | 1 | 2 | TELEVISION..... | 1 | 2 | NEWSPAPER..... | 1 | 2 | POSTER/BILLBOARD..... | 1 | 2 | COMMUNITY HEALTH NURSE..... | 1 | 2 | FAMILY PLANNING WORKER..... | 1 | 2 | FRIENDS/RELATIVES..... | 1 | 2 | | | | | | | | | | | | | |
| | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RADIO..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TELEVISION..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NEWSPAPER..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| POSTER/BILLBOARD..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| COMMUNITY HEALTH NURSE..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FAMILY PLANNING WORKER..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FRIENDS/RELATIVES..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M333 | Is it acceptable or not acceptable to you for family planning information to be provided on the radio or television? | ACCEPTABLE.....1 NOT ACCEPTABLE.....2 DK.....8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M334 | CHECK M302: KNOWS CONDOM <input type="checkbox"/> DOES NOT KNOW CONDOM <input type="checkbox"/> | | }M401 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M335 | Do you agree or disagree with the following statements: READ AND OBTAIN A RESPONSE FOR EACH STATEMENT. Condoms are used primarily with casual partners. Condoms reduce risk of sexually transmitted diseases. Most women don't like men to use condoms. Using condoms shows responsibility. Condoms are used primarily for family planning purposes. Condoms are embarrassing to obtain. A condom can be used more than once. Condoms make sex less enjoyable. | <table border="1"> <thead> <tr> <th></th> <th>AGREE</th> <th>DISAGREE</th> <th>UNDECIDED</th> </tr> </thead> <tbody> <tr><td>Condoms are used primarily with casual partners.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>Condoms reduce risk of sexually transmitted diseases.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>Most women don't like men to use condoms.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>Using condoms shows responsibility.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>Condoms are used primarily for family planning purposes.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>Condoms are embarrassing to obtain.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>A condom can be used more than once.</td><td>1</td><td>2</td><td>8</td></tr> <tr><td>Condoms make sex less enjoyable.</td><td>1</td><td>2</td><td>8</td></tr> </tbody> </table> | | AGREE | DISAGREE | UNDECIDED | Condoms are used primarily with casual partners. | 1 | 2 | 8 | Condoms reduce risk of sexually transmitted diseases. | 1 | 2 | 8 | Most women don't like men to use condoms. | 1 | 2 | 8 | Using condoms shows responsibility. | 1 | 2 | 8 | Condoms are used primarily for family planning purposes. | 1 | 2 | 8 | Condoms are embarrassing to obtain. | 1 | 2 | 8 | A condom can be used more than once. | 1 | 2 | 8 | Condoms make sex less enjoyable. | 1 | 2 | 8 | |
| | AGREE | DISAGREE | UNDECIDED | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Condoms are used primarily with casual partners. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Condoms reduce risk of sexually transmitted diseases. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Most women don't like men to use condoms. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Using condoms shows responsibility. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Condoms are used primarily for family planning purposes. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Condoms are embarrassing to obtain. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A condom can be used more than once. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Condoms make sex less enjoyable. | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

SECTION M4. MARRIAGE

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO | | | | | | | | | | | | | | | |
|------------------------|---|--|---------|-----|----|------------------------|---|---|-----------|---|---|--------------------|---|---|------------------|---|---|--|
| M401 | Have you ever been married or lived with a woman? | YES.....1 NO.....2 | →M405 | | | | | | | | | | | | | | | |
| M402 | Are you now married or living with a partner, or are you now widowed, or divorced or separated? | MARRIED.....1 CONSENSUAL UNION.....2 WIDOWED.....3 DIVORCED.....4 SEPARATED.....5 | →M404 | | | | | | | | | | | | | | | |
| M403 | How many wives/partners do you currently have? | NUMBER..... <input type="text"/> | | | | | | | | | | | | | | | | |
| M404 | How old were you when you started living with your (first) wife or partner? | AGE..... <input type="text"/> | →M406 | | | | | | | | | | | | | | | |
| M405 | IF NEVER MARRIED OR LIVED WITH A WOMAN: Have you ever had sexual intercourse? | YES.....1 NO.....2 | →M413 | | | | | | | | | | | | | | | |
| M406 | Now I would like to talk to you about some aspects of your sexual life in order to get a better understanding of family planning and fertility. How many times did you have sexual intercourse in the last four weeks? | TIMES..... <input type="text"/> | | | | | | | | | | | | | | | | |
| M407 | How many times in a month do you usually have sexual intercourse? | TIMES..... <input type="text"/> | | | | | | | | | | | | | | | | |
| M408 | CHECK M406: HAD SEXUAL INTERCOURSE ONE OR MORE TIMES IN LAST FOUR WEEKS <input type="checkbox"/> ZERO TIMES <input type="checkbox"/> | | →M411 | | | | | | | | | | | | | | | |
| M409 | With how many different women have you had sex in the last four weeks? | NUMBER OF WOMEN..... <input type="text"/> | | | | | | | | | | | | | | | | |
| M410 | Did you use a condom with any of these women? | YES.....1 NO.....2 | | | | | | | | | | | | | | | | |
| M411 | When was the last time you had sexual intercourse? | DAYS AGO.....1 <input type="text"/> WEEKS AGO.....2 <input type="text"/> MONTHS AGO.....3 <input type="text"/> YEARS AGO.....4 <input type="text"/> | | | | | | | | | | | | | | | | |
| M412 | How old were you when you first had sexual intercourse? | AGE..... <input type="text"/> FIRST TIME WHEN MARRIED.....96 | | | | | | | | | | | | | | | | |
| M413 | PRESENCE OF OTHERS AT THIS POINT. | <table border="0"> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>CHILDREN UNDER 10.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>WIFE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>OTHER FEMALES.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>OTHER MALES.....</td> <td>1</td> <td>2</td> </tr> </table> | | YES | NO | CHILDREN UNDER 10..... | 1 | 2 | WIFE..... | 1 | 2 | OTHER FEMALES..... | 1 | 2 | OTHER MALES..... | 1 | 2 | |
| | YES | NO | | | | | | | | | | | | | | | | |
| CHILDREN UNDER 10..... | 1 | 2 | | | | | | | | | | | | | | | | |
| WIFE..... | 1 | 2 | | | | | | | | | | | | | | | | |
| OTHER FEMALES..... | 1 | 2 | | | | | | | | | | | | | | | | |
| OTHER MALES..... | 1 | 2 | | | | | | | | | | | | | | | | |

SECTION M5. AIDS KNOWLEDGE AND OTHER SEXUALLY TRANSMITTED DISEASES

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------|---|---|---------|-----|----|------------------|---|---|--------------|---|---|--------------|---|---|-------------------------|---|---|----------------------|---|---|-----------------------------|---|---|-----------------------------|---|---|-----------------------------|---|---|-------------------------|---|---|--|
| M501 | Now I have a few questions about a very important topic. Have you heard of an illness called AIDS? | YES.....1 NO.....2 | →M509 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M502 | From which sources of information or persons have you heard about AIDS in the last month? CIRCLE ALL MENTIONED. | RADIO.....A TV.....B NEWSPAPERS.....C HEALTH WORKERS.....D MOSQUES/CHURCHES.....E FRIENDS/RELATIVES.....F SCHOOLS.....G SLOGANS/MUSIC.....H PAMPHLETS/POSTERS.....I COMMUNITY MEETINGS.....J OTHER.....K (SPECIFY) NONE.....L | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M503 | How is AIDS transmitted? CIRCLE ALL MENTIONED. | NEEDLES/BLADES/SKIN WOUND.....A MOTHER TO CHILD.....B SEXUAL INTERCOURSE.....C TRANSFUSION OF INFECTED BLOOD...D OTHER.....E (SPECIFY) DON'T KNOW.....F | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M504 | Do you think that you can get AIDS from shaking hands with someone who has AIDS? hugging someone who has AIDS? kissing someone who has AIDS? sexual intercourse with someone who has AIDS? wearing the clothes of someone who has AIDS? sharing eating utensils with someone who has AIDS? stepping on the urine or stool of someone who has AIDS? mosquito, flea or bedbug bites? not using condom? | <table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>HANDSHAKING.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>HUGGING.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>KISSING.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>SEXUAL INTERCOURSE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>SHARING CLOTHES.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>SHARING EATING UTENSILS....</td> <td>1</td> <td>2</td> </tr> <tr> <td>STEPPING ON URINE/STOOL....</td> <td>1</td> <td>2</td> </tr> <tr> <td>MOSQUITO/FLEA/BEDBUG BITES.</td> <td>1</td> <td>2</td> </tr> <tr> <td>NOT USING A CONDOM.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table> | | YES | NO | HANDSHAKING..... | 1 | 2 | HUGGING..... | 1 | 2 | KISSING..... | 1 | 2 | SEXUAL INTERCOURSE..... | 1 | 2 | SHARING CLOTHES..... | 1 | 2 | SHARING EATING UTENSILS.... | 1 | 2 | STEPPING ON URINE/STOOL.... | 1 | 2 | MOSQUITO/FLEA/BEDBUG BITES. | 1 | 2 | NOT USING A CONDOM..... | 1 | 2 | |
| | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HANDSHAKING..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HUGGING..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| KISSING..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SEXUAL INTERCOURSE..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SHARING CLOTHES..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SHARING EATING UTENSILS.... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STEPPING ON URINE/STOOL.... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MOSQUITO/FLEA/BEDBUG BITES. | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NOT USING A CONDOM..... | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M505 | Is it possible for a healthy looking person to have the AIDS virus? | YES.....1 NO.....2 DK.....8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M506 | Is it possible for a woman who has the AIDS virus to give birth to a child with the AIDS virus? | YES.....1 NO.....2 DK.....8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M507 | What do you suggest is the most important thing the government should do for people who have AIDS? | PROVIDE FREE MEDICAL TREATMENT..1 HELP RELATIVES PROVIDE CARE....2 ISOLATE/QUARANTINE.....3 GOVT. SHOULD NOT BE INVOLVED ...4 OTHER.....6 (SPECIFY) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M508 | If your relative is suffering from AIDS, who would you prefer to care for him/her? | RELATIVES.....1 FRIENDS.....2 GOVERNMENT ORGANISATION.....3 RELIGIOUS ORG./MISSION.....4 NOBODY/ABANDON.....5 OTHER.....6 (SPECIFY) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

Now I would like to talk to you about other diseases apart from AIDS

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|-----|---|--|------------|
| 509 | Have you heard of other diseases apart from AIDS which could be transmitted through sexual intercourse? | YES.....1 NO.....2 | →601 |
| 510 | Name the diseases. Any other? CIRCLE AS MANY AS MENTIONED. | GONORRHEA.....A SYPHILIS.....B HERPES.....C HEPATITIS.....D OTHER.....E (SPECIFY) | |
| 511 | CHECK 510 FOR DISEASES MENTIONED AND ASK Q 512 - Q 516 WHERE APPROPRIATE. | | |
| 512 | Where can one go to treat gonorrhoea? CIRCLE ALL MENTIONED | PUBLIC SECTOR GOV'T. HOSP./CLINIC.....A GOV'T. HEALTH CENTRE.....B GOV'T. HEALTH POST.....C MOBILE CLINIC.....D C'MMTY HEALTH WORKER.....E MEDICAL PRIVATE SECTOR PRIVATE HOSPITAL.....F PHARMACY/DRUGGIST/CHEMIST.....G PRIVATE DOCTOR/CLINIC.....H MOBILE CLINIC.....I C'MMTY HEALTH WORKER.....J OTHER PRIVATE SECTOR SHOP.....K TRADITIONAL PRACTITIONER.....L SPIRITUALIST.....M OTHER.....N (SPECIFY) | |

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |
|-----|--|---|
| 513 | <p>Where can one go to treat syphilis?</p> <p>CIRCLE ALL MENTIONED</p> | <p>PUBLIC SECTOR</p> <p>GOV'T. HOSP./CLINIC.....A GOV'T. HEALTH CENTRE.....B GOV'T. HEALTH POST.....C MOBILE CLINIC.....D C'MMTY HEALTH WORKER.....E</p> <p>MEDICAL PRIVATE SECTOR</p> <p>PRIVATE HOSPITAL.....F PHARMACY/DRUGGIST/CHEMIST.....G PRIVATE DOCTOR/CLINIC.....H MOBILE CLINIC.....I C'MMTY HEALTH WORKER.....J</p> <p>OTHER PRIVATE SECTOR</p> <p>SHOP.....K TRADITIONAL PRACTITIONER.....L SPIRITUALIST.....M OTHER _____ N (SPECIFY)</p> |
| 514 | <p>Where can one go to treat herpes?</p> <p>CIRCLE ALL MENTIONED</p> | <p>PUBLIC SECTOR</p> <p>GOV'T. HOSP./CLINIC.....A GOV'T. HEALTH CENTRE.....B GOV'T. HEALTH POST.....C MOBILE CLINIC.....D C'MMTY HEALTH WORKER.....E</p> <p>MEDICAL PRIVATE SECTOR</p> <p>PRIVATE HOSPITAL.....F PHARMACY/DRUGGIST/CHEMIST.....G PRIVATE DOCTOR/CLINIC.....H MOBILE CLINIC.....I C'MMTY HEALTH WORKER.....J</p> <p>OTHER PRIVATE SECTOR</p> <p>SHOP.....K TRADITIONAL PRACTITIONER.....L SPIRITUALIST.....M OTHER _____ N (SPECIFY)</p> |

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES |
|-----|--|--|
| 515 | <p>Where can one go to treat hepatitis?</p> <p>CIRCLE ALL MENTIONED</p> | <p>PUBLIC SECTOR</p> <p>GOV'T. HOSP./CLINIC.....A GOV'T. HEALTH CENTRE.....B GOV'T. HEALTH POST.....C MOBILE CLINIC.....D C'MMTY HEALTH WORKER.....E</p> <p>MEDICAL PRIVATE SECTOR</p> <p>PRIVATE HOSPITAL.....F PHARMACY/DRUGGIST/CHEMIST....G PRIVATE DOCTOR/CLINIC.....H MOBILE CLINIC.....I C'MMTY HEALTH WORKER.....J</p> <p>OTHER PRIVATE SECTOR</p> <p>SHOP.....K TRADITIONAL PRACTITIONER.....L SPIRITUALIST.....M OTHER _____ N (SPECIFY)</p> |
| 516 | <p>Where can one go to treat? (NAME OF DISEASE RECORDED ON THE "OTHER SPECIFY" LINE OF Q 510).</p> <p>CIRCLE ALL MENTIONED</p> | <p>PUBLIC SECTOR</p> <p>GOV'T. HOSP./CLINIC.....A GOV'T. HEALTH CENTRE.....B GOV'T. HEALTH POST.....C MOBILE CLINIC.....D C'MMTY HEALTH WORKER.....E</p> <p>MEDICAL PRIVATE SECTOR</p> <p>PRIVATE HOSPITAL.....F PHARMACY/DRUGGIST/CHEMIST....G PRIVATE DOCTOR/CLINIC.....H MOBILE CLINIC.....I C'MMTY HEALTH WORKER.....J</p> <p>OTHER PRIVATE SECTOR</p> <p>SHOP.....K TRADITIONAL PRACTITIONER.....L SPIRITUALIST.....M OTHER _____ N (SPECIFY)</p> |

SECTION M6. FERTILITY PREFERENCES

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|------|--|--|---------|
| M601 | <p>CHECK M311:</p> <p>SHE/HE NOT STERILIZED <input type="checkbox"/></p> <p>HE OR SHE STERILIZED <input type="checkbox"/></p> | | ->M605 |
| M602 | <p>CHECK M401 AND M402:</p> <p>CURRENTLY MARRIED OR LIVING TOGETHER <input type="checkbox"/></p> <p>NOT MARRIED/NOT LIVING TOGETHER <input type="checkbox"/></p> | | ->M609 |
| M603 | <p>Now I have some questions about the future.</p> <p>Would you like to have a (another) child or would you prefer not to have any more children?</p> | <p>HAVE A (ANOTHER) CHILD.....1</p> <p>NO MORE/NONE.....2</p> <p>WIFE CAN'T GET PREGNANT.....3</p> <p>UNDECIDED OR DK.....8</p> | ->M608 |
| M604 | <p>How long would you like to wait from now before the birth of a (another) child?</p> <p>(RECORD IN MONTHS IF LESS THAN 2 YEARS)</p> | <p>MONTHS.....1</p> <p>YEARS.....2</p> <p>NOW.....995</p> <p>OTHER.....996</p> <p>(SPECIFY)</p> <p>DK.....998</p> | ->M608 |
| M605 | <p>Given your present circumstances, if you had to do it over again, do you think you would make the same decision to have an operation not to have any more children?</p> | <p>YES.....1</p> <p>NO.....2</p> | |
| M606 | <p>Do you regret that you (your wife) had the operation in order not to have any (more) children?</p> | <p>YES.....1</p> <p>NO.....2</p> | ->M609 |
| M607 | <p>Why do you regret it?</p> | <p>RESPONDENT WANTS ANOTHER CHILD..1</p> <p>PARTNER WANTS ANOTHER CHILD....2</p> <p>COUPLE WANT ANOTHER CHILD.....3</p> <p>SIDE EFFECTS.....4</p> <p>OTHER REASON.....6</p> <p>(SPECIFY)</p> | ->M609 |
| M608 | <p>Do you think that your wife/partner approves or disapproves of couples using a method to avoid pregnancy?</p> | <p>APPROVES.....1</p> <p>DISAPPROVES.....2</p> <p>DK.....8</p> | |

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|-------|---|---|---------|
| M609 | <p>How long should a couple wait before starting sexual intercourse after the birth of a baby?</p> <p>(RECORD IN MONTHS IF LESS THAN 2 YEARS)</p> | <p>MONTHS.....1 <input type="checkbox"/> <input type="checkbox"/></p> <p>YEARS.....2 <input type="checkbox"/> <input type="checkbox"/></p> <p>OTHER _____ 996 (SPECIFY)</p> | |
| M610 | <p>Should a mother wait until she has completely stopped breastfeeding before starting to have sexual relations again, or doesn't it matter?</p> | <p>WAIT.....1</p> <p>DOESN'T MATTER.....2</p> | |
| M611 | <p>In general, do you approve or disapprove of couples using a method to avoid pregnancy?</p> | <p>APPROVE.....1</p> <p>DISAPPROVE.....2</p> | →M612 |
| M611B | <p>Who do you think should decide on which method to use?</p> | <p>SELF.....01</p> <p>SPOUSE.....02</p> <p>BOTH OF US.....03</p> <p>HEALTH PROFESSIONAL.....04</p> <p>RELATIVE.....05</p> <p>FRIEND.....06</p> <p>OTHER _____ 96 (SPECIFY)</p> | |
| M612 | <p>CHECK M202 AND M204:</p> <p>HAS LIVING CHILDREN <input type="checkbox"/></p> <p>NO LIVING CHILDREN <input type="checkbox"/></p> <p>V</p> <p>If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?</p> <p>V</p> <p>If you could choose exactly the number of children to have in your whole life, how many would that be?</p> <p>RECORD ONLY ONE NUMBER OR OTHER ANSWER. IF "NONE" CIRCLE 96 AND RECORD RESPONSE</p> | <p>NUMBER..... <input type="checkbox"/> <input type="checkbox"/></p> <p>OTHER ANSWER _____ 96 (SPECIFY)</p> | →M614 |
| M613 | <p>How many of those children would be sons?</p> <p>And how many would be daughters?</p> | <p>BOYS GIRLS EITHER</p> <p>NUMBER <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p> <p>UP TO GOD.....999995</p> <p>OTHER ANSWER _____ 999996</p> | |
| M614 | <p>What do you think is the best number of months or years between the birth of one child and the birth of the next child?</p> <p>RECORD MONTHS IF LESS THAN 2 YEARS</p> | <p>MONTHS.....1 <input type="checkbox"/> <input type="checkbox"/></p> <p>YEARS.....2 <input type="checkbox"/> <input type="checkbox"/></p> <p>OTHER _____ 996 (SPECIFY)</p> <p>DON'T KNOW.....998</p> | |
| M615 | <p>RECORD THE TIME</p> | <p>HOURS..... <input type="checkbox"/> <input type="checkbox"/></p> <p>MINUTES..... <input type="checkbox"/> <input type="checkbox"/></p> | |

SECTION M7. LANGUAGE INFORMATION

| NO. | QUESTIONS AND FILTERS | CODING CATEGORIES | SKIP TO |
|------|--|--|---------|
| M701 | WHAT IS THE RESPONDENT'S OWN LANGUAGE? | TWI.....01 FANTI.....02 GA-ADANGBE.....03 EWE.....04 NZEMA.....05 DAGBANI.....06 HAUSA.....07 ENGLISH.....08 OTHER _____ 96 (SPECIFY) | |
| M702 | IN WHAT LANGUAGE DID YOU CONDUCT THE INTERVIEW? | TWI.....01 FANTI.....02 GA-ADANGBE.....03 EWE.....04 NZEMA.....05 DAGBANI.....06 HAUSA.....07 ENGLISH.....08 OTHER _____ 96 (SPECIFY) | |
| M703 | FOR HOW MUCH OF THE INTERVIEW DID YOU DEPEND ON A THIRD PERSON TO INTERPRET FOR YOU? | NONE OF THE INTERVIEW.....1 SOME OF THE INTERVIEW.....2 MOST OF THE INTERVIEW.....3 ALL OF THE INTERVIEW.....4 | →END |
| M704 | IF AN INTERPRETER WAS USED, INDICATE THE SEX AND APPROXIMATE AGE OF INTERPRETER. | ADULT FEMALE.....1 TEENAGE FEMALE.....2 ADULT MALE.....3 TEENAGE MALE.....4 CHILD.....5 | |

INTERVIEWER'S OBSERVATIONS
(To be filled in after completing interview)

Comments About Respondent: _____

Comments on Specific Questions: _____

Any Other Comments: _____

SUPERVISOR'S OBSERVATIONS

Name of Supervisor: _____ Date: _____

EDITOR'S OBSERVATIONS

Name of Field Editor: _____ Date: _____