

Date: 09 Oct 2019

Version: 11

Client Exit Interview (CEI) Questionnaire


IDENTIFICATION															
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:												
001a	Your name: Is this your name? [ODK will display the name associated with the phone's serial number]	Yes 1 No 0	Always												
001b	Enter your name below. <i>Please record your name</i>	Interviewer's Name	001a = 0												
002a	Current date and time. [ODK will display on screen] Is this date and time correct?	Yes 1 No 0	Always												
002b	Record the correct date and time.	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">Day</td> <td style="text-align: center;">Month</td> <td style="text-align: center;">Year</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">Hours</td> <td style="text-align: center;">Min</td> <td style="text-align: center;">AM/PM</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </table>	Day	Month	Year				Hours	Min	AM/PM				002a = 0
Day	Month	Year													
Hours	Min	AM/PM													
003a	LOCATION INFORMATION 1	LOCATION INFORMATION 1a 1 LOCATION INFORMATION 1b 2 LOCATION INFORMATION 1c 3 LOCATION INFORMATION 1d 4 LOCATION INFORMATION 1e 5 LOCATION INFORMATION 1f 6 LOCATION INFORMATION 1g 7	Always												
003b	LOCATION INFORMATION 2	ODK will populate a list of appropriate LOCATION INFORMATION 2 based on the LOCATION INFORMATION 1 selected	Always												
003c	LOCATION INFORMATION 3	ODK will populate a list of appropriate LOCATION INFORMATION 3 based on the LOCATION INFORMATION 2 selected.	Always												
003d	LOCATION INFORMATION 4	ODK will populate a list of appropriate LOCATION INFORMATION 4 based on the LOCATION INFORMATION 3 selected	Always												
004	Enumeration area	ODK will populate a list of appropriate enumeration areas based on the LOCATION INFORMATION 4 selected	Always												
005	Facility number <i>Please record the number of the facility from the listing form.</i>	Facility number <input style="width: 100px; height: 20px;" type="text"/>	Always												

Client Exit Interview Questionnaire



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
006	<p>Type of facility</p> <p><i>Please select the type of facility.</i></p>	<p>FACILITY TYPE 1 1</p> <p>FACILITY TYPE 2 2</p> <p>FACILITY TYPE 3 3</p> <p>FACILITY TYPE 4 4</p> <p>FACILITY TYPE 5 5</p> <p>FACILITY TYPE 6 6</p> <p>Other..... 7</p>	Always
006a	<p>Advanced facility</p>	<p>Yes 1</p> <p>No 0</p>	006 = #
007	<p>Managing authority</p> <p><i>Please select the managing authority for the facility.</i></p>	<p>Government..... 1</p> <p>NGO 2</p> <p>Faith-based organization..... 3</p> <p>Private 4</p> <p>Other..... 5</p>	Always
008	<p>Is a competent respondent present and available to be interviewed today?</p>	<p>Yes 1</p> <p>No 0</p>	Always

INFORMED CONSENT			
<i>Find the competent female respondent. Administer the consent procedures.</i>			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
009a	Provide a paper copy of the Consent Form to the respondent and read it. / Read the verbal consent text. Then, ask: May I begin the interview now?	Yes 1 No 0	008 = 1
009b	Respondent's signature <i>Please ask the respondent to sign or check the box in agreement of their participation.</i>	Gather signature: Check box: <input type="checkbox"/>	009a = 1
009c	Respondent's name <i>Enter the respondent's full name.</i>	<div style="border: 1px solid black; width: 250px; height: 30px; margin: 0 auto;"></div>	009a = 1
010	Interviewer's name: <i>Mark your name as a witness to the consent process.</i>	<div style="border: 1px solid black; width: 250px; height: 30px; margin: 0 auto;"></div>	009a = 1
011	Name of the facility <i>Please record the name of the facility.</i>	<div style="border: 1px solid black; width: 250px; height: 30px; margin: 0 auto;"></div>	009a = 1

Section 1 – Background Information I would like to start by asking a few questions about yourself			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
101	<p>Did you receive any family planning information or a method during your visit today?</p> <p><i>If no, thank her for her time and end the interview</i></p>	Yes 1 No 0 No response -99	009a = 1
102	<p>How old were you at your last birthday?</p>	Age <input style="width: 100px; height: 20px;" type="text"/>	101 = 1
102a	<p>CHECK: The respondent is not eligible for interview. Please thank her for her time.</p>		102 < 15 or > 49
103	<p>Are you currently married or living together with a man as if married?</p> <p>Probe: If no, ask whether the respondent is divorced, separated, or widowed.</p>	Yes, currently married 1 Yes, living with a man..... 2 Not currently in union: Divorced / separated 3 Not currently in union: Widow 4 No, never in union 5 No response -99	101 = 1
104	<p>What is the highest level of school you attended?</p> <p><i>Only record formal schooling. Do not record bible or koranic school or short courses.</i></p>	Never Attended 0 LEVEL 1 1 LEVEL 2 2 LEVEL 3 3 LEVEL 4 4 LEVEL 5 5 No response -99	101 = 1
105	<p>How many times have you given birth?</p> <p><i>Enter 0 if she has never given birth. Enter -99 for no response.</i></p>	Number <input style="width: 100px; height: 20px;" type="text"/>	101 = 1
106	<p>Imagine a 10-step staircase where on the bottom, the first step, stand the poorest people, and on the highest step, the 10th, stand the rich. On which step is your household located today?</p> 	One (poorest) 1 Two 2 Three 3 Four 4 Five 5 Six 6 Seven 7 Eight 8 Nine 9 Ten (richest) 10 No response -99	101 = 1

Client Exit Interview Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
107	Is this the closest health facility to your current residence?	Yes 1 No 0 No response -99	101 = 1
108	What was the main reason you did not go to the facility nearest to your home?	No family planning services 1 Inconvenient operating hours 2 Bad reputation / bad prior experience 3 Don't like personnel 4 No medicine 5 Prefers to remain anonymous 6 It is more expensive than other options 7 Was referred 8 Less convenient location 9 Absence of provider 10 Other 96 Don't know -88 No response -99	107 ≠ 1
109	How much time did it take you to travel here today?	<div style="display: flex; align-items: center; justify-content: center;"> <div style="margin-right: 10px;">Minutes (1)</div> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> </div> <div style="display: flex; align-items: center; justify-content: center; margin-top: 10px;"> <div style="margin-right: 10px;">Hours (2)</div> <div style="border: 1px solid black; width: 100px; height: 20px;"></div> </div> No response -99	101 = 1
110	What means of transportation did you use to travel here? <i>If multiple means used</i> PROBE: What was the primary mode of transportation?	Motor vehicle (car, motorcycle, bus) 1 Bicycle / pedicab 2 Animal drawn cart 3 Walking 4 No response -99	101 = 1

Section 2 – Family Planning Services			
Now I would like to ask about family planning services you received today.			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
201	Was family planning the main reason you came here today?	Yes 1 No 0 No response -99	101 = 1
202	What was the main reason for your visit today?	STI 1 HIV/AIDS 2 Maternal health 3 Child health 4 General health 5 Other 6 No response -99	201 = 0
203	During your visit today, were you given a family planning method, a prescription for a method, or neither?	A contraceptive method 1 A prescription for a method 2 Neither 3 No response -99	101 = 1
204	Did your provider discuss family planning with you today?	Yes 1 No 0 No response -99	203 ≠ 3
205	Which method were you prescribed or given?	Female Sterilization 1 Male Sterilization 2 Implant 3 IUD 4 Injectables 5 Pill 7 Emergency Contraception 8 Male Condom 9 Female Condom 10 Diaphragm 11 Foam/Jelly 12 Std. Days/Cycle beads 13 LAM 14 Rhythm method 30 Withdrawal 31 Other traditional methods 39 No response -99	203 = 1 or 2
LCL _201	ADD ON A COUNTRY SPECIFIC BASIS: PROBE: Was the injection administered via syringe or small needle? <i>Show the image to the respondent.</i> [IMAGES OF BOTH INJECTION SYSTEMS WILL APPEAR ON SCREEN]	Syringe 1 Small needle (Sayana Press) 2 No response -99	205 = 5
206	Just before this visit, were you using the same method, did you switch from another method or were you using no method?	Same method 1 Another method 2 No method 3 No response -99	203 = 1 or 2

Client Exit Interview Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
207	How long have you been using this method without stopping?	Weeks (1) <input type="text"/> Months (2) <input type="text"/> No response.....-99	206 = 1
208	Have you ever used this method before?	Yes 1 No.....0 No response.....-99	206 = 2 or 3
209	Have you used it in the past 12 months?	Yes 1 No.....0 No response.....-99	208 = 1
210	During your visit today, did you obtain the method of family planning you wanted?	Yes 1 No.....0 No response.....-99	101 = 1
211	Which method did you initially want to use?	Female Sterilization 1 Male Sterilization.....2 Implant3 IUD4 Injectables5 Pill7 Emergency Contraception8 Male Condom.....9 Female Condom10 Diaphragm11 Foam/Jelly.....12 Std. Days/Cycle beads.....13 LAM.....14 Rhythm method.....30 Withdrawal31 Other traditional methods.....39 No response.....-99	210 = 0
212	Why didn't you obtain the method you wanted?	Method out of stock..... 1 Method not available at all2 Provider not trained to provide the method...3 Provider recommended a different method ..4 Not eligible for method5 Decided not to adopt a method.....6 Too costly.....7 Other96 Don't know-88 No response.....-99	210 = 0

NO	QUESTIONS AND FILTERS	CODING CATEGORIES			Relevant if:
213	Who made the final decision about what method you got today?	Respondent alone1 Provider.....2 Partner3 Respondent and provider.....4 Respondent and partner5 Other96 Don't know-88 No response.....-99			203 = 1 or 2
214	Did you pay any money for any of the family planning services you received or were provided today?	Yes1 No.....0 No response.....-99			203 = 1 or 2
215	Did the provider tell you that if you do not take the pill every day, your chances of becoming pregnant are higher?	Yes1 No.....0 No response.....-99			205 = 7
216	Did the provider tell you that if you are more than one month late for your shot, your chances of becoming pregnant are higher?	Yes1 No.....0 No response.....-99			205 = 5
217	During your visit today, for the method you were prescribed or given, did the provider:	YES	NO	NR	203 = 1 or 2
	a. Explain how to use the method?	1	0	-99	
	b. Talk about possible side effects?	1	0	-99	
	c. Tell you what to do if you have problems?	1	0	-99	
	d. Tell you when to return for follow-up?	1	0	-99	
218	During your visit today, did the provider:	YES	NO	NR	203 = 1 or 2
	a. Tell you about contraceptive methods other than the method you were given or prescribed?	1	0	-99	
	b. Talk about the methods that protect against HIV/AIDs and STIs?	1	0	-99	
	c. Ask about your family planning method preference?	1	0	-99	
	d. Tell you that you could switch to a different method in the future?	1	0	-99	

Client Exit Interview Questionnaire

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
219	How clear was the family planning information you received today?	Very clear1 Clear2 Somewhat clear3 Not clear4 Not at all clear5 Don't Know-88 No response-99	101 = 1
220	Did the provider allow you to ask questions?	Yes1 No0 No response-99	101 = 1
221	Did the provider answer all your questions in a way you understood?	Yes1 No0 No response-99	220 = 1
222	During your visit today, were you told by the provider about advantages and disadvantages with a method to delay or avoid pregnancy?	Yes1 No0 No response-99	101 = 1
223	What advantages did the provider tell you about your [METHOD]?	Efficacy1/0 Less bleeding1/0 More regular bleeding1/0 Protects for a long time1/0 No hormones1/0 Ease of use1/0 Return to fertility1/0 Discrete1/0 Few side effects1/0 Other1/0 No response-99	222 = 1
224	What disadvantages did the provider tell you about your [METHOD]?	Irregular bleeding1/0 More bleeding1/0 Few or no periods1/0 Weight gain1/0 Nausea1/0 Cramping1/0 Not easy to use1/0 Not very effective1/0 Headache1/0 Other1/0 No response-99	222 = 1

Section 3 – Client Satisfaction			
Now I would like to ask about the services you received today.			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
301	<p>How long did you wait between the time you arrived at this facility and the time you were able to see a provider for the consultation?</p> <p><i>Enter responses in minutes. 0 is a possible answer.</i></p>	<p style="text-align: right;">Minutes (1) <input style="width: 100px; height: 20px;" type="text"/></p> <p style="text-align: right;">Hours (2) <input style="width: 100px; height: 20px;" type="text"/></p> <p>Don't know-88 No response-99</p>	101 = 1
302	<p>During this visit did the provider and other staff treat you very politely, politely, neither politely nor impolitely, impolitely, or very impolitely?</p>	<p>Very politely1 Politely2 Neither politely nor impolitely3 Impolitely4 Very impolitely5 No response -99</p>	101 = 1
303	<p>Overall, how satisfied are you with the family planning services you received at this establishment today? Would you say very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?</p>	<p>Very satisfied1 Satisfied2 Neither satisfied nor dissatisfied3 Dissatisfied4 Very dissatisfied5 No response -99</p>	101 = 1
304	<p>Would you refer your relative or friend to this facility?</p>	<p>Yes1 No0 Don't know -88 No response -99</p>	101 = 1
305	<p>Would you return to this facility?</p>	<p>Yes1 No0 Don't know -88 No response -99</p>	101 = 1

Follow-up Consent			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant If:
FLW_801	<p>Thank you for the time you have kindly granted us.</p> <p>Could we contact you via phone to ask you questions to update this information in the next four months?</p>	Yes 1 No 0 No response.....-99	101 = 1
FLW_802	<p>Do you own a phone?</p>	Yes 1 No 0 No response.....-99	FLW_801 = 1
FLW_803	<p>Can I have your primary phone number in case we would like to follow up with you in the future?</p> <p><i>Enter an #-digit number without the country code. Do not include spaces or dashes. Enter 0 for no response.</i></p> <p>[UPDATE TO MATCH COUNTRY PHONE SYSTEM]</p>	Primary phone number: <div style="border: 1px solid black; width: 200px; height: 20px; margin: 5px auto;"></div> No response..... -99	FLW_802 = 1
FLW_804	<p>Can you repeat the number again?</p> <p><i>Enter an #-digit number without the country code. Do not include spaces or dashes. Enter 0 for no response.</i></p> <p>[UPDATE TO MATCH COUNTRY PHONE SYSTEM]</p> <p><i>Number entered must match previously entered number.</i></p>	Primary phone number: <div style="border: 1px solid black; width: 200px; height: 20px; margin: 5px auto;"></div> No response..... -99	FLW_803 ≠ 0

QUESTIONNAIRE RESULT			
<p>Thank the respondent for her time.</p> <p><i>The respondent is finished, but there are still more questions for you to complete.</i></p>			
098	<p>In what language was this interview conducted?</p>	English1 French2 Language 33 Language 44 Language 55 Language 66 Other96	009a = 1
099	<p>Record the result of the Client Exit Interview Questionnaire.</p>	Completed1 Not at facility.....2 Postponed3 Refused4 Partly completed5 Other6	Always