

Uganda Round 6 - Female Questionnaire

001a. Are you in the correct household? EA: [EA entered in the Household Questionnaire] Structure #: [Structure entered in the Household Questionnaire] Household #: [Household entered in the Household Questionnaire]	<div style="text-align: right;">Always</div> <input type="radio"/> Yes <input type="radio"/> No
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002. Enter your name below. <i>Please record your name</i>	<div style="text-align: right;">002 = 0</div>
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003b. Record the correct date and time.	<div style="text-align: right;">003 = 0</div> <div style="text-align: right;"> Day: Month: Year: </div>
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The following information is from the Household Questionnaire. Please review to make sure you are interviewing the correct respondent. [ODK will display the LIST OF GEOGRAPHIES ENTERED, Enumeration Area, Structure Number, and Household Number entered into the Household Questionnaire linked to this Female Questionnaire.] Is the above information correct?	<div style="text-align: right;">Always</div>
LOCATION INFORMATION 1: [LOCATION]	
LOCATION INFORMATION 2: [LOCATION]	
LOCATION INFORMATION 3: [LOCATION]	
Enumeration Area: [EA]	
Structure number: [#]	
Household number: [#]	
004b. Is the above information correct?	<div style="text-align: right;">004 = 0</div> <input type="radio"/> Yes <input type="radio"/> No

005. CHECK: You should be attempting to interview [Name of the interviewee]. Is that correct? <i>If misspelled, select "yes" and update the name in question "011." If this is the wrong person, you have two options: (1) exit and ignore changes to this form. Open the correct form. Or (2) find and interview the person whose name appears above.</i>	<div style="text-align: right;">Always</div> <input type="radio"/> Yes <input type="radio"/> No
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006. Is the respondent present and available to be interviewed today?	<div style="text-align: right;">Always</div> <input type="radio"/> Yes <input type="radio"/> No
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007. How well acquainted are you with the respondent?	<div style="text-align: right;">006 = 1</div> <input type="radio"/> Very well acquainted <input type="radio"/> Well acquainted
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	<input type="radio"/> Not well acquainted <input type="radio"/> Not acquainted
008. Has the respondent previously participated in PMA 2020 surveys?	<p style="text-align: right;">006 = 1</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
INFORMED CONSENT <i>Find the woman between the age of 15-49 associated with this Female Respondent Questionnaire. The interview must have auditory privacy. Read the greeting on the next screen:</i>	<p style="text-align: right;">INFORMED CONSENT</p> ['INFORMED CONSENT']
<p>Nyabo, Amanyana nze _____ era nga nkola ne Makerere University School of Public Health ekologana ne Minisitule ey'obulamu wamu n'ekitongole ky'eggwanga ekikola ku miwendo. Tukola okunonyeraza nga tubuuzabakya ebibuuzo ebikwata ku by'okuzala. Tujjakusima nnyo nga wetabye mu kunonyeraza kuno. By'onotuddamu bijja ku tuyamba okutegeza gavumenti ngeri enungi jeyinza okuteekatekera eb'yobulamu. Ebibuuzo biyinza okutwala wakati wedakiika 15 ne 20. Byona by'onotuddamu bijjakukumibwa nga byakyama era tebijja kulagibwako muntu yena okujako abali mukononyeraza kuno bokka. Okwetaba mukunonyeraza kuno kwakyeyagalire, era singa osanga ekibuuzo kyona ky'otayagala kuddamu, ntegeza tugende ku kibuuzo ekirala; oba osobola okuyimiriza okuddamu ebibuuzo esawa yonna. Naye ate, tusuubira nti ojakwetaba mukunonyera kuno olw'okuba nti ebiriwoozo byo by'amugaso. Mu kasera kano oyina ky'oyagala okumbuza kyona ekitwata ku kunonyereza kuno?</p>	<p>Ngonia, ma ru..... i. ma azi nga Makerere University School of Public Health be, ama onita oni eyo ndu ndu i ecipi alata okuni mva isuzu rini ma dria uganda si woro. Ama 'nga ovu ayikosi I'ka ai ovuzu onita 'di ma alia indi. Eri 'nga minus 'du 15 cazu 20 dipi dezu. Onita 'di nga gamete ma azako e'yo kala alata vileri otuzu kilili. E'yo mini omvileri nga ovu siriru 'ba dria ngani ni ku. Mini ovuzu indi eri mi asi ni le ri le. Aka ki ki ica zita mini le omvi ku ni ma dria, I'lumani ma a'ni mudrile zita vutinia ri be beni kaniku mi eco kuzu sawa ci ria. Te ama ni ra minga ovu onita di ma alia indi mi omvita ni ovuzu orodruru ri si. Sawa 'disi ile ma zi onita di ma dria ra ya?</p> <p><i>['Apwoyo, an nyinga..... atye katic ki dul me Makerere University, School of Public Health karacel ki Ministri me yot kom, ki bene Uganda Bureau of Statistics. Watye ka kwedo tyen lok ma pat- pat madok ikom yot kom pa mon. Wabipwoyo matek kace ibedo ikwedo tyen lok man. Tam man bikonyo wa me miyo ngec bot gamente me goyo pulan maber me miyo kony me yot kom. Kwedo tyen lok man tero dakika maromo 15 onyo 20 keken. Tam mo keken ma imiyo kibi gwoko imung madit bot wan lukwed tyen lok man keken. \nBedo i kwedo tyen lok man tye i miti ni, dok bene ka wa oo i lapeny mo keken ma pe imito gamone ci wek ange ci abi mede ki lapeny mukene. Ento wageno ni ibi yee bedo i kwedo tyen lok man pi en tam ma megii pire tek. \nKombedi itye ki lapeny mo keken ikom kwedo tyen lok man?']</i></p>

<p>009a. Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now?</p>	<p>009a. Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now? the interview now? <i>['009a. Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now?']</i></p>
<p>010. Interviewer's name Please record your name as a witness to the consent process. You previously entered "[Interviewer's name]."</p>	<p style="text-align: right;">\${consent_obtained} and (\${your_name_check} = 'no')</p>

Section 1 – Respondent's Background, Marital Status, Household characteristics
Now I would like to ask about your background and socioeconomic conditions.

	\${consent_obtained}
<p>101. In what month and year were you born? The age in the household roster is [AGE]</p>	009a = 1
<p>101. In what month and year were you born?</p>	009a = 1
<p>Month:</p>	<p> <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know </p>
<p>Year:</p>	Year:

<p>102. How old were you at your last birthday?</p>	009a = 1
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<p>103. What is the highest level of school you attended? <i>Only record formal schooling. Do not record bible or koranic school or short courses.</i></p>	<p>009a = 1</p> <p> <input type="radio"/> Never attended <input type="radio"/> Primary <input type="radio"/> 'O' Level <input type="radio"/> 'A' Level <input type="radio"/> Tertiary <input type="radio"/> University </p>
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	<input type="radio"/> Do not know <input type="radio"/> No response
104. Are you currently married or living together with a man as if married? <i>Probe: If no, ask whether the respondent is divorced, separated, or widowed.</i>	009a = 1 <input type="radio"/> Yes, currently married <input type="radio"/> Yes, living with a man <input type="radio"/> Not currently in union: Divorced / separated <input type="radio"/> Not currently in union: Widow <input type="radio"/> No, never in union <input type="radio"/> No response
105. Have you been married or lived with a man only once or more than once?	104 ≠ 5 <input type="radio"/> Only once <input type="radio"/> More than once <input type="radio"/> No response

	({\$marriage_history} = 'more_than_once')
106a. In what month and year did you start living with your FIRST husband / partner? <i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i>	105=2
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

106b. CHECK: Based on the response you entered in 106a, the respondent was possibly 15 years old or younger at the time of her first marriage. Did you enter 106a correctly?	106a age at marriage ≤15 <input type="radio"/> Yes <input type="radio"/> No
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	({\$marriage_history} = 'once') or ({\$marriage_history} = 'more_than_once')
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<p>107a. Now I would like to ask about when you started living with your CURRENT or MOST RECENT husband / partner. In what month and year was that? <i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p>	<p>105 = 1 or 2</p>
<p>Month:</p>	<p> <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know </p>
<p>Year:</p>	<p>Year:</p>

<p>107b. CHECK: Based on the response you entered in 107a, the respondent was possibly 15 years old or younger at the time of her current or most recent marriage. Did you enter 107a correctly?</p>	<p>107a age at marriage ≤15</p> <p> <input type="radio"/> Yes <input type="radio"/> No </p>
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<p>108. Does your husband / partner have other wives or does he live with other women as if married?</p>	<p>104 = 1 or 2</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response </p>
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<p>Section 5 – Water <i>Now I would like to ask about your water practices</i></p>
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<p>501. On a typical day in the DRY season, how much time do you spend collecting water? <i>Only record respondent's time; not anyone else's time. If you select minutes or hours you will enter a number for X on the next screen</i></p>	<p>009a = 1</p> <p> <input type="radio"/> X minutes per day <input type="radio"/> X hours per day <input type="radio"/> No time, someone else collects water <input type="radio"/> No time, No one collects water <input type="radio"/> Don't know <input type="radio"/> No response </p>
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<p>501. Enter [# minutes per day / hours per day]:</p>	<p> ({collect_water_dry} = 'minutes') or ({collect_water_dry} = 'hours') </p>
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<p>502. On a typical day in the WET season, how much time do you spend collecting water? <i>Only record respondent's time; not anyone else's time.</i> <i>If you select minutes or hours you will enter a number for X on the next screen</i></p>	<p style="text-align: right;">009a = 1</p> <p> <input type="radio"/> X minutes per day <input type="radio"/> X hours per day <input type="radio"/> No time, someone else collects water <input type="radio"/> No time, No one collects water <input type="radio"/> Don't know <input type="radio"/> No response </p>
<p>502. Enter [# minutes per day / hours per day]: <i>Either: 1-24 hours or 1-180 minutes.</i></p>	<p> ({\$collect_water_wet} = 'minutes') or ({\$collect_water_wet} = 'hours') </p>

Section 2 – Reproduction, Pregnancy & Fertility Preferences

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

<p>200. Have you ever given birth?</p>	<p style="text-align: right;">009a = 1</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response </p>
<p>201. How many times have you given birth? <i>Enter -99 for no response.</i></p>	<p style="text-align: right;">200 = 1</p>

	({\$birth_events} > 1)
<p>205. When was your FIRST birth? <i>Please record the date of the FIRST birth. The date should be found by calculating backwards from memorable events if needed.</i> <i>Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p>	201 > 1
<p>Month:</p>	<p> <input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know </p>
<p>Year:</p>	Year:

	({\$birth_events} > 0)
<p>206. When was your MOST RECENT birth?</p>	201 > 1

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

009a = 1	
210a. Are you pregnant now?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure <input type="radio"/> No response

	\${pregnant} = 'yes'
210b. How many months pregnant are you?	210a = 1
The most recent birth was: [Date of most recent birth]	\${recent_birth} != ''
##### Please record the number of completed months. Enter -88 for do not know, -99 for No response.	

009a = 1	
209. When did your last menstrual period start? <i>If you select days, weeks, months, or years, you will enter a number for X on the next screen. Enter 0 days for today, not 0 weeks/months/years.</i>	<input type="radio"/> X days ago <input type="radio"/> X weeks ago <input type="radio"/> X months ago <input type="radio"/> X years ago <input type="radio"/> Menopausal / Hysterectomy <input type="radio"/> Before last birth <input type="radio"/> Never menstruated <input type="radio"/> No response

209a. Enter [days / weeks / months / years] <i>Enter 0 days for today, not 0 weeks/months/years.</i>	(\${menstrual_period} = 'days') or (\${menstrual_period} = 'weeks') or (\${menstrual_period} = 'month ...
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	$\${ever_birth} = 'yes' \text{ or } \${pregnant} = 'yes'$
213a. Now I would like to ask a question about your last birth.	$201 > 0 \text{ AND } 210a \neq 1 \text{ } 201 > 0 \text{ AND } 210a \neq 1 \text{ } 201 > 0 \text{ AND } 210a \neq 1$
213b. Now I would like to ask a question about your current pregnancy.	$210a = 1$
At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any more children at all?	$(201 > 1 \text{ AND } 210a \neq 1) \text{ OR } (200 = 1 \text{ AND } 201a = 1)$
At the time you became pregnant, did you want to become pregnant then, did you want to wait until later, or did you not want to have any children at all?	$(201 = 1 \text{ AND } 210a \neq 1) \text{ OR } (200 = 2 \text{ AND } 201a = 1)$
#####	<input type="radio"/> Then <input type="radio"/> Later <input type="radio"/> Not at all <input type="radio"/> No response

Now I have some questions about the future.	$\${consent_obtained}$
	$210a \neq 1$
211a. Would you like to have a child or would you prefer not to have any children?	<input type="radio"/> Have a child <input type="radio"/> Prefer no children <input type="radio"/> Says she can't get pregnant <input type="radio"/> Undecided / Don't know <input type="radio"/> No response
	$210a \neq 1$
211a. Would you like to have another child or would you prefer not to have any more children?	<input type="radio"/> Have another child <input type="radio"/> No more <input type="radio"/> Says she can't get pregnant <input type="radio"/> Undecided / Don't know <input type="radio"/> No response
	$210a = 1$
211b. After the child you are expecting now, would you like to have another child or would you prefer not to have any more children?	<input type="radio"/> Have another child <input type="radio"/> No more <input type="radio"/> Says she can't get pregnant <input type="radio"/> Undecided / Don't know <input type="radio"/> No response
	$211a = 1$
212a. How long would you like to wait from now before the birth of a child? <i>If you select months or years, you will enter a number for X on the next screen. Select "Years" if more than 36 months. Please check that you correctly entered the value for months/years.</i>	<input type="radio"/> X months <input type="radio"/> X years <input type="radio"/> Soon/now <input type="radio"/> Says she can't get pregnant <input type="radio"/> Other

	<input type="radio"/> Don't know <input type="radio"/> No response
<p>212b. After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?</p> <p><i>If you select months or years, you will enter a number for X on the next screen.</i></p> <p><i>Select "Years" if more than 36 months.</i></p> <p><i>Please check that you correctly entered the value for months/years.</i></p>	<p style="text-align: right;">211b = 1</p> <input type="radio"/> X months <input type="radio"/> X years <input type="radio"/> Soon/now <input type="radio"/> Says she can't get pregnant <input type="radio"/> Other <input type="radio"/> Don't know <input type="radio"/> No response
<p>212c. Enter the number of [Months OR Years] you would like to wait:</p>	<p>212a OR 212b = 'months' OR 'year'</p>
<p>PNL_001. Does your husband/partner want to have a/another child within two years?</p>	<p style="text-align: right;"> ({\$marital_status} = 'currently_married') or ({\$marital_status} = 'currently_living_with_man') </p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure <input type="radio"/> No response
<p>PNL_002. In the next few weeks, if you discovered that you were pregnant, would that be a big problem, a small problem, or no problem for you?</p>	<p style="text-align: right;"> {\$consent_obtained} and {\$pregnant} != 'yes' </p> <input type="radio"/> Big <input type="radio"/> Small <input type="radio"/> No problem <input type="radio"/> No response

Section 3 – Contraception

Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.

An image will appear on the screen for some methods. If the respondent says that she has not heard of the method or if she hesitates to answer, read the probe aloud and show her the image, if available.

<p>301a. Have you ever heard of female sterilization?</p> <p>PROBE: Women can have an operation to avoid having any more children.</p>	<p style="text-align: right;">009a = 1</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
<p>301b. Have you ever heard of male sterilization?</p> <p>PROBE: Men can have an operation to avoid having any more children.</p>	<p style="text-align: right;">009a = 1</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response

<p>301c. Have you ever heard of the contraceptive implant? PROBE: Women can have one or several small rods placed in her upper arm by a doctor or nurse, which can prevent pregnancy for one or more years. [implant_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301d. Have you ever heard of the IUD? PROBE: Women can have a loop or coil placed inside them by a doctor or a nurse. [IUD_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301e. Have you ever heard of injectables? PROBE: Women can have an injection by a health provider that stops them from becoming pregnant for one or more months. [sayana_depo_150x300.jpg]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301f. Have you ever heard of the (birth control) pill? PROBE: Women can take a pill every day to avoid becoming pregnant. [pill_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301g. Have you ever heard of emergency contraception? PROBE: As an emergency measure after unprotected sexual intercourse women can take special pills at any time within three to five days to prevent pregnancy.</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301h. Have you ever heard of condoms? PROBE: Men can put a rubber sheath on their penis before sexual intercourse. [male_condom_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301i. Have you ever heard of female condoms? PROBE: Women can put a sheath in their vagina before sexual intercourse. [female_condom_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301j. Have you ever heard of the diaphragm? PROBE: Women can place a thin flexible disk in their vagina before sexual intercourse. [diaphragm_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301k. Have you ever heard of foam or jelly as a contraceptive method? PROBE: Women can place a suppository, jelly, or cream in their vagina before sexual intercourse to prevent pregnancy. [spermicide_150x300.png]</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301l. Have you ever heard of the standard days method or Cycle Beads?</p>	<p style="text-align: right;">009a = 1</p>

<p>PROBE: A Woman can use a string of colored beads to know the days she can get pregnant. On the days she can get pregnant, she and her partner use a condom or do not have sexual intercourse. [SDM-beads_only.png]</p>	<p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301m. Have you ever heard of the Lactational Amenorrhea Method or LAM?</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301n. Have you ever heard of the rhythm method? PROBE: Women can avoid pregnancy by not having sexual intercourse on the days of the month they think they can get pregnant.</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301o. Have you ever heard of the withdrawal method? PROBE: Men can be careful and pull out before climax.</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>301p. Have you ever heard of any other ways or methods that women or men can use to avoid pregnancy?</p>	<p style="text-align: right;">009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>302a. Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?</p>	<p style="text-align: right;">210a ≠ 1 AND 009a = 1 210210a ≠ 1 AND 009a = 1 210a ≠ 1 AND 009a = 1 ≠ 1 AND 009a = 1 210a ≠ 1 AND 009a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>

	<p style="text-align: right;">\${current_user} = 'yes'</p>
<p>302b. Which method or methods are you using? PROBE: Anything else? <i>Select all methods mentioned. SCROLL TO THE BOTTOM to see all choices.</i></p>	<p style="text-align: right;">302a = 1</p> <p><input type="checkbox"/> Female sterilization <input type="checkbox"/> Male sterilization <input type="checkbox"/> Implant <input type="checkbox"/> IUD <input type="checkbox"/> Injectables <input type="checkbox"/> Pill <input type="checkbox"/> Emergency Contraception <input type="checkbox"/> Male condom <input type="checkbox"/> Female condom <input type="checkbox"/> Diaphragm <input type="checkbox"/> Foam/Jelly <input type="checkbox"/> Standard Days/Cycle beads <input type="checkbox"/> LAM <input type="checkbox"/> Rhythm method</p>

<input type="checkbox"/> Withdrawal <input type="checkbox"/> No response	
LCL_301. PROBE: Was the injection administered via syringe or small needle? <i>Show the image to the respondent.</i> [sayana_depo_150x300.jpg]	CALC CM = 5
	<input type="radio"/> Syringe <input type="radio"/> Small needle (Sayana Press) <input type="radio"/> No Response
302c. Does your husband/partner know that you are using [CURRENT METHOD]?	302a = 1
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
302c. Does your husband/partner know that you are using family planning?	302a = -99
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_003. Is your husband/partner supportive of you using family planning?	<pre> \${current_user} = 'yes' and ((\${marital_status} = 'currently_married') or (\${marital_status} = 'cu ... </pre>
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No partner <input type="radio"/> Do not know <input type="radio"/> No response
303. Did the provider tell you or your partner that this method was permanent?	302b = male or female sterilization
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
305a. You said that you are not currently using a contraceptive method. Do you think you will use a contraceptive method to delay or avoid getting pregnant at any time in the future?	302a #1 AND 210a #1
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
305b. Do you think you will use a contraceptive method to delay or avoid getting pregnant at any time in the future?	302a #1 AND 201a = 1
	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_004. When do you think you will start using a method?	<pre> \${future_user_pregnant} = 'yes' </pre>
	<input type="radio"/> In less than 12 months <input type="radio"/> In 1 or 2 years <input type="radio"/> In more than 2 years <input type="radio"/> No response

PNL_005. Would your husband/partner be supportive of you using family planning?	({\$current_user} = 'no') and ({\$pregnant} != 'yes') <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No partner <input type="radio"/> Do not know <input type="radio"/> No response
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306a. In the last 12 months, have you ever done something or used a method to delay or avoid getting pregnant?	302a #1 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
--	---

306b. Which method did you use most recently? PROBE: Anything else? <i>Select most effective method (highest method in list). Scroll to bottom to see all choices.</i>	\${recent_user} = 'yes' 306a = 1 <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> No response
--	--

LCL_302. PROBE: Was the injection administered via syringe or small needle? <i>Show the image to the respondent.</i> [sayana_depo_150x300.jpg]	306b = 5 <input type="radio"/> Syringe <input type="radio"/> Small needle (Sayana Press) <input type="radio"/> No Response
--	---

307. Before you started using [CURRENT METHOD / MOST RECENT METHOD], had you discussed the decision to delay or avoid pregnancy with your husband/partner?	302a = 1 OR 306a = 1 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
--	--

308. Would you say that using contraception is mainly your decision, mainly your husband/partner's decision or did you both decide together?	302a = 1 <input type="radio"/> Mainly respondent <input type="radio"/> Mainly husband/partner <input type="radio"/> Joint decision <input type="radio"/> Other <input type="radio"/> No response
--	---

308a. The last time you received your [CURRENT METHOD / MOST RECENT METHOD], how much did you have to pay out of pocket, including any fees paid for the method, supplies or services, and transportation?

Enter all prices in Ugandan shillings. Zero is a possible answer. Enter -88 if respondent does not know, -99 for no response.

302a = 1 OR 306a = 1

	<code>#{current_user} = 'yes'</code>
309a. Since what month and year have you been using [CURRENT METHOD / MOST RECENT METHOD] without stopping? <i>Calculate backwards from memorable events if needed.</i>	302a = 1
Most Recent Birth: [mm-yyyy]	<code>#{recent_birth} != ''</code>
Current Marriage: [mm-yyyy]	<code>#{husband_cohabit_start_recent} != ''</code>
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

	<code>#{recent_user} = 'yes'</code>
309b. When did you stop using [CURRENT METHOD / MOST RECENT METHOD]? <i>Please record the date. The date should be found by calculating backwards from memorable events if needed.</i> <i>Select 'Do not know' for month and '2020' for year to indicate No Response.</i>	306a = 1
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July

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

	\${recent_user} = 'yes'
309c. In what month and year had you started using [CURRENT METHOD / MOST RECENT METHOD] before stopping? <i>Calculate backwards from memorable events if needed.</i> <i>Select 'Do not know' for month and '2020' for year to indicate No Response.</i>	306a = 1
Most Recent Birth: [mm-yyyy]	\${recent_birth} != ''
Current Marriage: [mm-yyyy]	\${husband_cohabit_start_recent} != ''
Month:	<input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October <input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

309d. CHECK: Just to make sure I have this correct, you used [CURRENT METHOD / MOST RECENT METHOD] continuously between [START DATE] and [END DATE] without stopping, is that correct?	306a = 1
	<input type="radio"/> Yes <input type="radio"/> No
GO BACK TO THE PREVIOUS SCREEN AND PROBE TO DETERMINE THE PERIOD OF MOST RECENT CONTINUOUS USE. <i>Suggested probes: - When was the last time you used [METHOD]? - How long had you been using [METHOD] without stopping</i>	309d = 0
310. Why did you stop using [CURRENT METHOD / MOST RECENT METHOD]?	306a = 1

- Infrequent sex / husband away
- Became pregnant while using
- Wanted to become pregnant
- Husband / partner disapproved
- Wanted a more effective method
- No method available
- Health concerns
- Fear of side effects
- Lack of access / too far
- Costs too much
- Inconvenient to use
- Fatalistic
- Difficult to get pregnant / menopausal
- Interferes with body's processes
- Other
- Don't know
- No response

	<pre> \${current_or_recent_user} and ((\${current_recent_method} != 'LAM') and (\${current_recent_method} ! ... </pre>
<p>311a. You first started using [CURRENT METHOD / MOST RECENT METHOD] on [DATE FROM FQ309a OR 309c] Where did you or your partner get it at that time? <i>Scroll to bottom to see all choices.</i></p>	<pre> (CALC_CM ≠ 14, 30, 31, 39, -99) OR (306b ≠ 14, 30, 31, 39, -99) </pre> <ul style="list-style-type: none"> <input type="radio"/> Govt. Hospital <input type="radio"/> Govt. Health Center <input type="radio"/> Public Family Planning Clinic <input type="radio"/> Public Outreach <input type="radio"/> Public Fieldwork/VHT <input type="radio"/> Other Public <input type="radio"/> Private Hospital/Clinic <input type="radio"/> Pharmacy <input type="radio"/> Private Doctor <input type="radio"/> Private Outreach <input type="radio"/> Private Fieldwork/VHT <input type="radio"/> Other Private <input type="radio"/> Shop <input type="radio"/> Church <input type="radio"/> Friend/relative <input type="radio"/> Other <input type="radio"/> Do not know <input type="radio"/> No Response

<p>PNL_006. When you obtained your <code>{current_recent_label}</code>, did the provider ask you about your prior experience with contraception?</p>	<p><code>{current_or_recent_user}</code> and <code>({current_recent_method} != 'LAM')</code> and <code>({current_recent_method} != ...</code></p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>312a. When you obtained your [CURRENT METHOD / MOST RECENT METHOD], were you told by the provider about side effects or problems you might have with a method to delay or avoid getting pregnant?</p>	<p>311a ≠ .</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>PNL_007. According to the provider, what are the possible side effects or problems related to the use of this method? <i>Do NOT read the response options out LOUD. Select all that apply.</i></p>	<p><code>({fp_side_effects} = 'yes')</code> and <code>(({current_recent_method} = 'implants')</code> or <code>({current_recent_me ...</code></p> <p><input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> Uterine cramping/ Lower abdominal pain <input type="checkbox"/> Weight gain <input type="checkbox"/> Weight loss <input type="checkbox"/> Facial spotting <input type="checkbox"/> Headaches <input type="checkbox"/> Infection <input type="checkbox"/> Nausea/vomiting <input type="checkbox"/> Increased menstrual cramping <input type="checkbox"/> Delayed return to fertility <input type="checkbox"/> Lowered sex drive <input type="checkbox"/> Vaginal dryness <input type="checkbox"/> Infertility/sterility <input type="checkbox"/> Method gets lost inside body <input type="checkbox"/> General body weakness <input type="checkbox"/> Diarrhea <input type="checkbox"/> Other <input type="checkbox"/> Do not know <input type="checkbox"/> No response</p>
<p>312b. Were you told what to do if you experienced side effects or problems?</p>	<p>312a = 1</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response</p>
<p>PNL_008a. Were you told that if you experienced these side effects you could switch to a different method of contraception?</p>	<p><code>({fp_side_effects} = 'yes')</code> and <code>(({current_recent_method} = 'implants')</code> or <code>({current_recent_me ...</code></p>

	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
313. At that time, were you told by the family planning provider about methods of family planning other than the [CURRENT METHOD / MOST RECENT METHOD] that you could use?	<p style="text-align: right;">311a ≠ . OR 311b ≠ .</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
314a. During that visit, did you obtain the method you wanted to delay or avoid getting pregnant?	<p style="text-align: right;">311a ≠ .</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
314c. Why didn't you obtain the method you wanted?	<p style="text-align: right;">314a = 0</p> <input type="radio"/> Method out of stock that day <input type="radio"/> Method not available at all <input type="radio"/> Provider not trained to provide the method <input type="radio"/> Provider recommended a different method <input type="radio"/> Not eligible for method <input type="radio"/> Decided not to adopt a method <input type="radio"/> Too costly <input type="radio"/> Other <input type="radio"/> No response
315a. During that visit, who made the final decision about what method you got?	<p style="text-align: right;">311a ≠ .</p> <input type="radio"/> You alone <input type="radio"/> Provider <input type="radio"/> Partner <input type="radio"/> You and provider <input type="radio"/> You and partner <input type="radio"/> Other <input type="radio"/> Do not know <input type="radio"/> No response
315b. Who made the final decision to use rhythm?	<p style="text-align: right;">311b ≠ .</p> <input type="radio"/> You alone <input type="radio"/> Provider <input type="radio"/> Partner <input type="radio"/> You and provider <input type="radio"/> You and partner <input type="radio"/> Other <input type="radio"/> Do not know <input type="radio"/> No response
315b. Who made the final decision to use LAM?	<p style="text-align: right;">311b ≠ .</p> <input type="radio"/> You alone <input type="radio"/> Provider

	<input type="radio"/> Partner <input type="radio"/> You and provider <input type="radio"/> You and partner <input type="radio"/> Other <input type="radio"/> Do not know <input type="radio"/> No response
PNL_008b. Did the provider tell you that if you do not take the pill every day, your chances of becoming pregnant are higher?	({\$current_recent_method} = 'pill') <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
PNL_008c. Did the provider tell you that if you are more than two weeks late for your shot, your chances of becoming pregnant are higher?	({\$current_recent_method} = 'injectables') <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
316. Would you return to this provider? Provider: [Type of provider selected in 311a or 311b]	311a ≠ 35 or 96 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
317. Would you refer your relative or friend to this provider / facility? Provider: [Type of provider selected in 311a or 311b]	311 a ≠ 34 or 96 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
GGR_100. How many visits did you have to make to get {\$current_recent_label} at that time? <i>Enter -88 for Don't know Enter -99 for No response</i>	({\$fp_provider_rw} = 'govt_hosp') or ({\$fp_provider_rw} = 'govt_health_center') or ({\$fp_provider_...

	$\{fp_visit_count\} > 0$
GGR_101a. How long did you have to wait in the facility to get your {\$current_recent_label} at that time? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	$\{fp_visit_count\} = 1$
GGR_101b. What was the longest you had to wait in the facility to get {\$current_recent_label} during one of these visits? <i>Enter -88 in both minutes and hours for Don't know Enter -99 in both minutes and hours for No response</i>	$\{fp_visit_count\} > 1$
Minutes	
Hours	

<p>SW_1a. Right before you started using [CURRENT METHOD / MOST RECENT METHOD] in [MOIS/ANNEE], were you doing something or using any method to delay or avoid getting pregnant?</p>	<p style="text-align: right;">302a = 1 OR 306a = 1</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response </p>
<p>SW_1b. Which method were you using?</p>	<p style="text-align: right;">SW_1a = 1</p> <p> <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> No response </p>
<p>PP_1. Since the birth of your child in [DATE OF MOST RECENT BIRTH], have you ever done something or used any method to delay or avoid getting pregnant?</p>	<p style="text-align: right;">child born in last 2 years AND 302a ≠ 1</p> <p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response </p>
<p>PP_2. How long after the birth in [DATE OF MOST RECENT BIRTH] did you start doing something or start using a method? <i>Enter 0 days for today. You will enter a number for X on the next screen.</i></p>	<p style="text-align: right;">PP_1 = 1 OR (302a = 1 AND child born in the last 2 years)</p> <p> <input type="radio"/> X days after <input type="radio"/> X weeks after <input type="radio"/> X months after <input type="radio"/> X years after <input type="radio"/> No response </p>
<p>PP_2. Enter [METHOD]. <i>If today, enter zero days only, not zero weeks/months/years.</i></p>	<p style="text-align: right;"> $\\${pp_method_units} = 'days'$ or $\\${pp_method_units} = 'weeks'$ or $\\${pp_method_units} = 'months'$ or $\\${$... </p>
<p>PP_3. What was the method?</p>	<p style="text-align: right;">PP_2 ≠ .</p> <p> <input type="radio"/> Female sterilization <input type="radio"/> Male sterilization <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom </p>

	<input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> No response
319. Have you ever done anything or tried in any way to delay or avoid getting pregnant?	$306a \neq 1 \text{ OR } 302a \neq 1$ <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
320. How old were you when you first used a method to delay or avoid getting pregnant? The respondent said she was [AGE] years old at her last birthday. <i>Enter the age in years. Enter -88 if the respondent does not know. Enter -99 if there is no response. Cannot be younger than 9.</i>	$302a = 1 \text{ OR } 306a = 1 \text{ OR } 319 = 1$
321. How many living children did you have at that time, if any? Note: the respondent said that she gave birth [NUMBER OF LIFE BIRTHS] times in 201. <i>Enter -99 for no response.</i>	$\text{Age in } 320 \geq 9 \text{ AND } 200 = 1$

	$\{\text{fp_ever_used}\} = \text{'yes'}$ $319 = 1$
322. Which method did you first use to delay or avoid getting pregnant? <i>Do not read the method choices. Scroll to bottom to see all choices.</i>	<input type="radio"/> Female sterilization <input type="radio"/> Male sterilization <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> No response

LCL_322a. PROBE: Was the injection administered via syringe or small needle? <i>Show the image to the respondent.</i> [sayana_depo_150x300.jpg]	$322 = 5$ <input type="radio"/> Syringe <input type="radio"/> Small needle (Sayana Press) <input type="radio"/> No Response
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<p>PNL_009. Which method did you use most recently? <i>Do not read the method choices. Be sure to scroll to bottom to see all choices.</i></p>	<p><code>\${fp_ever_user} = 'yes'</code></p> <ul style="list-style-type: none"> <input type="radio"/> Female sterilization <input type="radio"/> Male sterilization <input type="radio"/> Implant <input type="radio"/> IUD <input type="radio"/> Injectables <input type="radio"/> Pill <input type="radio"/> Emergency Contraception <input type="radio"/> Male condom <input type="radio"/> Female condom <input type="radio"/> Diaphragm <input type="radio"/> Foam/Jelly <input type="radio"/> Standard Days/Cycle beads <input type="radio"/> LAM <input type="radio"/> Rhythm method <input type="radio"/> Withdrawal <input type="radio"/> No response
<p>PNL_010. When did you stop using <code>\${ever_rec_method}</code>? <i>If you select days, weeks, months or years, you will enter a number for x on the next screen.</i></p>	<p><code>(\${ever_rec_method} != '') and (\${ever_rec_method} != 'female_sterilization') and (\${ever_rec_meth ...</code></p> <ul style="list-style-type: none"> <input type="radio"/> X days ago <input type="radio"/> X weeks ago <input type="radio"/> X months ago <input type="radio"/> X years ago <input type="radio"/> No response
<p>PNL_010. Enter <code>\${ever_rec_method_stop_lab}</code>. <i>If today, enter zero days only, not zero weeks/months/years.</i></p>	<p><code>\${ever_rec_method_stop} = 'days' or \${ever_rec_method_stop} = 'weeks' or \${ever_rec_method_stop} = ...</code></p>
<p>322a. Have you used emergency contraception at any time in the last 12 months? PROBE: As an emergency measure after unprotected sexual intercourse women can take special pills at any time within three to five days to prevent pregnancy.</p>	<p><code>302b ≠ emergency contraception OR 306b ≠ 8</code></p> <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response

	<p><code>((\${current_user} = 'no')) and ((\${more_children_none} = 'no_children') or ...</code></p>
<p>323a. You said that you do not want a child soon and that you are not using a method to avoid pregnancy.</p>	<p><code>302a = 0 AND ((212a or 212b > 2 years) OR (211a or 211b = 2))</code></p>
<p>323a. You said that you do not want another child soon and that you are not using a method to avoid pregnancy.</p>	<p><code>302a = 0 AND ((212a or 212b > 2 years) OR (211a or 211b = 2))</code></p>

<p>323a. You said that you do not want any children and that you are not using a method to avoid pregnancy.</p>	<p>302a = 0 AND ((212a or 212b > 2 years) OR (211a or 211b = 2))</p>
<p>323a. You said that you do not want any more children and that you are not using a method to avoid pregnancy.</p>	<p>302a = 0 AND ((212a or 212b > 2 years) OR (211a or 211b = 2))</p>
<p>Can you tell me why you are not using a method to prevent pregnancy? PROBE: Any other reason? <i>RECORD ALL REASONS MENTIONED Cannot select "Not Married" if 104 is "Yes, currently married".</i> <i>Scroll to bottom to see all choices.</i></p>	<ul style="list-style-type: none"> <input type="checkbox"/> Not married <input type="checkbox"/> Infrequent sex / Not having sex <input type="checkbox"/> Menopausal / Hysterectomy <input type="checkbox"/> Subfecund / Infecund <input type="checkbox"/> Not menstruated since last birth <input type="checkbox"/> Breastfeeding <input type="checkbox"/> Husband away for multiple days <input type="checkbox"/> Up to God / fatalistic <input type="checkbox"/> Respondent opposed <input type="checkbox"/> Husband / partner opposed <input type="checkbox"/> Others opposed <input type="checkbox"/> Religious prohibition <input type="checkbox"/> Knows no method <input type="checkbox"/> Knows no source <input type="checkbox"/> Fear of side effects <input type="checkbox"/> Health concerns <input type="checkbox"/> Lack of access / too far <input type="checkbox"/> Costs too much <input type="checkbox"/> Preferred method not available <input type="checkbox"/> No method available <input type="checkbox"/> Inconvenient to use <input type="checkbox"/> Interferes with body's processes <input type="checkbox"/> Other <input type="checkbox"/> Don't know <input type="checkbox"/> No response

<p>323b. Would you say that not using contraception is mainly your decision, mainly your husband/partner's decision or did you both decide together?</p>	<p style="text-align: right;">302a ≠ 1</p> <ul style="list-style-type: none"> <input type="radio"/> Mainly respondent <input type="radio"/> Mainly husband/partner <input type="radio"/> Joint decision <input type="radio"/> Other <input type="radio"/> No response
<p>324. In the last 12 months, were you visited by a community health worker who talked to you about family planning?</p>	<p style="text-align: right;">009a = 1</p> <ul style="list-style-type: none"> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
<p>325a. In the last 12 months, have you visited a health facility or camp for care for yourself?</p>	<p style="text-align: right;">009a = 1</p>

For any health services.	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
325a. In the last 12 months, have you visited a health facility or camp for care for yourself or your children? For any health services.	<div style="text-align: right;">009a = 1</div> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
325b. Did any staff member at the health facility speak to you about family planning methods?	<div style="text-align: right;">325a = 1</div> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response

	009a = 1		
326. In the last few months have you:			
	Yes	No	No response
326a. Heard about family planning on the radio?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326b. Seen anything about family planning on the television?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326c. Read about family planning in a newspaper or magazine?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
326d. Received a voice or text message about family planning on a mobile phone?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Section 4 – Sexual Activity
CHECK FOR THE PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.

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

`#{consent_obtained}`

	<code>#{consent_obtained}</code>
401a. How old were you when you first had sexual intercourse?	309a = 1
Current age: [AGE]	
Number of live births: [NUMBER OF LIFE BIRTHS]	<code>#{birth_events} > 0</code>
The respondent is pregnant	<code>#{pregnant} = 'yes'</code>
Enter the age in years.	

Enter -77 if she has never had sex. Enter -99 for no response. Enter -88 for do not know.	
	((\${age_at_first_sex} >= 0) or (\${age_at_first_sex} = -88) or (\${age_at_first_sex} = -99))
402. When was the last time you had sexual intercourse?	401a ≠ -77
402. Enter [# days / weeks / months / years]. If today, enter zero days only, not zero weeks/months/years. Must agree with the age of first sexual intercourse and the pregnancy status.	401a ≠ -77

Section - Panel Questions

Now I want to talk about contraceptive use over time. I am asking these questions to understand the reasons why women may switch or stop using a methods.

PNL_011. Some people try a method and then don't use it again, or stop using it, because they are not satisfied with the method. Did you ever stop using a method because you were not satisfied with it in some way?	<p style="text-align: right;">\${fp_ever_used} = 'yes'</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_012. Are you satisfied with the method you are currently using?	<p style="text-align: right;">\${current_user} = 'yes'</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_013. Have you ever experienced any side effects from a method of contraception?	<p style="text-align: right;">\${fp_ever_used} = 'yes'</p> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
PNL_014. What side-effects have you experienced? Do not read out the response options	<p style="text-align: right;">\${side_effects_exp_yn} = 'yes'</p> <input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> Uterine cramping/ Lower abdominal pain <input type="checkbox"/> Weight gain <input type="checkbox"/> Weight loss <input type="checkbox"/> Facial spotting <input type="checkbox"/> Headaches <input type="checkbox"/> Infection <input type="checkbox"/> Nausea/vomiting <input type="checkbox"/> Increased menstrual cramping

	<input type="checkbox"/> Delayed return to fertility <input type="checkbox"/> Lowered sex drive <input type="checkbox"/> Vaginal dryness <input type="checkbox"/> Infertility/sterility <input type="checkbox"/> Method gets lost inside body <input type="checkbox"/> General body weakness <input type="checkbox"/> Diarrhea <input type="checkbox"/> Other <input type="checkbox"/> Do not know <input type="checkbox"/> No response
<p>PNL_015. What method or methods of contraception were you using when you experienced these side effects? <i>Select all that apply</i></p>	<pre> \${side_effects_exp_yn} = 'yes' </pre> <input type="checkbox"/> Female sterilization <input type="checkbox"/> Male sterilization <input type="checkbox"/> Implant <input type="checkbox"/> IUD <input type="checkbox"/> Injectables <input type="checkbox"/> Pill <input type="checkbox"/> Emergency Contraception <input type="checkbox"/> Male condom <input type="checkbox"/> Female condom <input type="checkbox"/> Diaphragm <input type="checkbox"/> Foam/Jelly <input type="checkbox"/> Standard Days/Cycle beads <input type="checkbox"/> LAM <input type="checkbox"/> Rhythm method <input type="checkbox"/> Withdrawal <input type="checkbox"/> No response
<p>PNL_016. Are you currently experiencing any of these side effects?</p>	<pre> (\${current_user} = 'yes') and (\${side_effects_exp_yn} = 'yes') </pre> <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
<p>PNL_016a. Which side effects are you currently experiencing? <i>Do NOT read out responses</i> <i>Select all that apply</i></p>	<pre> (\${fp_side_effects_now} = 'yes') and (count-selected(\${side_effects_exp}) > 1) </pre> <input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> Uterine cramping/ Lower abdominal pain <input type="checkbox"/> Weight gain <input type="checkbox"/> Weight loss <input type="checkbox"/> Facial spotting <input type="checkbox"/> Headaches <input type="checkbox"/> Infection

	<input type="checkbox"/> Nausea/vomiting <input type="checkbox"/> Increased menstrual cramping <input type="checkbox"/> Delayed return to fertility <input type="checkbox"/> Lowered sex drive <input type="checkbox"/> Vaginal dryness <input type="checkbox"/> Infertility/sterility <input type="checkbox"/> Method gets lost inside body <input type="checkbox"/> General body weakness <input type="checkbox"/> Diarrhea <input type="checkbox"/> Other <input type="checkbox"/> Do not know <input type="checkbox"/> No response
<p>PNL_017. Whom did you talk to about the side effects you experienced? Anyone else? SELECT ALL THAT APPLY</p>	<pre> \${side_effects_exp_yn} = 'yes' </pre> <input type="checkbox"/> Spouse/partner <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Mother-in-law <input type="checkbox"/> Sister <input type="checkbox"/> Daughter <input type="checkbox"/> Other female relative <input type="checkbox"/> Male relative <input type="checkbox"/> Friend <input type="checkbox"/> Community health worker <input type="checkbox"/> Facility health worker <input type="checkbox"/> Pharmacist <input type="checkbox"/> Traditional healer <input type="checkbox"/> Other <input type="checkbox"/> No one <input type="checkbox"/> Do not know <input type="checkbox"/> No response
<p>PNL_018. Whose advice was the most important to you when you were talking about side effects?</p>	<pre> count- selected(\${fp_side_effects_spoken}) > 1 </pre> <input type="radio"/> Spouse/partner <input type="radio"/> Mother <input type="radio"/> Father <input type="radio"/> Mother-in-law <input type="radio"/> Sister <input type="radio"/> Daughter <input type="radio"/> Other female relative <input type="radio"/> Male relative <input type="radio"/> Friend <input type="radio"/> Community health worker <input type="radio"/> Facility health worker <input type="radio"/> Pharmacist

	<input type="radio"/> Traditional healer <input type="radio"/> Other <input type="radio"/> No one <input type="radio"/> Do not know <input type="radio"/> No response <pre>selected(\${fp_side_effects_spoken}, filter_list) or (filter_list='always')</pre>
<p>PNL_019. Have you experienced any of the following changes in your menstrual period since you have started using your current method? <i>Read all options out loud. Select all that apply.</i></p>	<pre>(\${current_user} = 'yes') and ((\${side_effects_exp_yn} = 'no') or (\${side_effects_exp_yn} = ...</pre> <input type="checkbox"/> Less bleeding or no bleeding <input type="checkbox"/> Heavier bleeding <input type="checkbox"/> Irregular bleeding <input type="checkbox"/> Spotting <input type="checkbox"/> No changes <input type="checkbox"/> Other <input type="checkbox"/> Do not know <input type="checkbox"/> No response
<p>PNL_020. How worried are you about these changes?</p>	<pre>selected(\${current_method_prd_chng}, 'bleed_less') or selected(\${current_method_prd_chng}, 'bleed ...</pre> <input type="radio"/> Very worried <input type="radio"/> A little worried <input type="radio"/> Not at all worried <input type="radio"/> No response
<p>Now I am going to read a few statements about family planning. Please tell me how much you agree with these statements: strongly agree, somewhat agree, somewhat disagree, or strongly disagree</p>	<pre> \${consent_obtained}</pre>
<p>PNL_021. If a woman uses family planning, she can have sex without worrying about pregnancy</p>	<pre> \${consent_obtained}</pre> <input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response
<p>PNL_022. If a woman uses family planning, she will not be able to get pregnant when she wants to</p>	<pre> \${consent_obtained}</pre> <input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response

<p>PNL_023. It is unhealthy for women not to get periods when they are using injectables, pills, or implants</p>	<p style="text-align: right;">\${consent_obtained}</p> <p> <input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response </p>
<p>PNL_024. Using family planning creates conflict in a couple</p>	<p style="text-align: right;">\${consent_obtained}</p> <p> <input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response </p>
<p>PNL_025. A woman's beauty will last longer if she practices family planning</p>	<p style="text-align: right;">\${consent_obtained}</p> <p> <input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response </p>
<p>PNL_026. It is acceptable for a woman to use family planning before she has children</p>	<p style="text-align: right;">\${consent_obtained}</p> <p> <input type="radio"/> Strongly agree <input type="radio"/> Somewhat agree <input type="radio"/> Somewhat disagree <input type="radio"/> Strongly disagree <input type="radio"/> No response </p>

Section 6 - Confidantes Questions

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

<p>GGR_601. I would like to talk about women with whom you share intimate secrets and who share intimate secrets with you. These women might be relatives, like sisters or aunts, or friends. These women should also be people with whom you have been close to for at least a year or more, are 15-49 years of age and live in Uganda. We will not ask you to identify the women who you tell us about. How many women do you know that fit this description? <i>Probe to confirm all women are: - Age 15-49 - Currently living in Uganda</i> <i>Please do not give examples of what these secrets or private information might be.</i> <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	
<p>GGR_602. Please think about the female who is most likely to share her intimate secrets with you.</p>	<p style="text-align: right;">\${friends} > 0</p>

<p>This should be someone with whom you are also likely to share your intimate secrets. Picture this person. For ease of referencing this woman, please provide a fake name for her that you will be able to remember.</p>	
<p>GGR_603. How old was she at her last birthday? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code>{friends} > 0</code></p>
<p>GGR_604. What is the highest level of school she attended? <i>Only record formal schooling. Do not record bible or koranic school or short courses.</i></p>	<p style="text-align: right;"><code>{friends} > 0</code></p> <ul style="list-style-type: none"> <input type="radio"/> Never attended <input type="radio"/> Primary <input type="radio"/> 'O' Level <input type="radio"/> 'A' Level <input type="radio"/> Tertiary <input type="radio"/> University <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_605a. What region does she live in? <i>By knowing the district select the region on this screen first and on the next screen select the district the respondent told you about.</i></p>	<p style="text-align: right;"><code>{friends} > 0</code></p> <ul style="list-style-type: none"> <input type="radio"/> Central <input type="radio"/> Eastern <input type="radio"/> Northern <input type="radio"/> Western <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_605b. What district does she live in?</p>	<p style="text-align: right;"><code>{friends} > 0</code></p> <ul style="list-style-type: none"> <input type="radio"/> BUIKWE <input type="radio"/> BUKOMANSIMBI <input type="radio"/> BUTAMBALA <input type="radio"/> BUVUMA <input type="radio"/> GOMBA <input type="radio"/> KALANGALA <input type="radio"/> KALUNGU <input type="radio"/> KAMPALA <input type="radio"/> KAYUNGA <input type="radio"/> KIBOGA <input type="radio"/> KYANKWANZI <input type="radio"/> KYOTERA <input type="radio"/> LUWERO <input type="radio"/> LWENGO <input type="radio"/> LYANTONDE <input type="radio"/> MASAKA <input type="radio"/> MITYANA <input type="radio"/> MPIGI <input type="radio"/> MUBENDE <input type="radio"/> MUKONO <input type="radio"/> NAKASEKE

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 - SEMBABULE
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 - HOIMA
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 - KAGADI
 - KAKUMIRO
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 - KYOTERA
 - LUWERO
 - LWENGO
 - LYANTONDE
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 - MITYANA
 - MPIGI
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 - MUKONO
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	<ul style="list-style-type: none"> <input type="radio"/> BUNYANGABU <input type="radio"/> BUSHENYI <input type="radio"/> HOIMA <input type="radio"/> IBANDA <input type="radio"/> ISINGIRO <input type="radio"/> KABALE <input type="radio"/> KABAROLE <input type="radio"/> KAGADI <input type="radio"/> KAKUMIRO <input type="radio"/> KAMWENGE <input type="radio"/> KANUNGU <input type="radio"/> KASESE <input type="radio"/> KIBAALE <input type="radio"/> KIRUHURA <input type="radio"/> KIRYANDONGO <input type="radio"/> KISORO <input type="radio"/> KYEGEGWA <input type="radio"/> KYENJOJO <input type="radio"/> MASINDI <input type="radio"/> MBARARA <input type="radio"/> MITOOMA <input type="radio"/> NTOROKO <input type="radio"/> NTUNGAMO <input type="radio"/> RUBANDA <input type="radio"/> RUBIRIZI <input type="radio"/> RUKIGA <input type="radio"/> RUKUNGIRI <input type="radio"/> SHEEMA <input type="radio"/> Do not know <input type="radio"/> No response <input type="radio"/> No response <input type="radio"/> No response <input type="radio"/> No response <p style="text-align: right;">filter_list=\${friend2_region}</p>
<p>GGR_610. Please think about the female who is third most likely to share her intimate secrets with you, and with whom you are also likely to share your intimate secrets. Picture this person. Please provide a fake name for her.</p>	<p style="text-align: right;">\${friends} > 2</p>
<p>GGR_611. How old was she at her last birthday? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p style="text-align: right;">\${friends} > 2</p>

<p>GGR_612. What is the highest level of school she attended?</p> <p><i>Only record formal schooling. Do not record bible or koranic school or short courses.</i></p>	<p style="text-align: right;">\${friends} > 2</p> <p> <input type="radio"/> Never attended <input type="radio"/> Primary <input type="radio"/> 'O' Level <input type="radio"/> 'A' Level <input type="radio"/> Tertiary <input type="radio"/> University <input type="radio"/> Do not know <input type="radio"/> No response </p>
<p>GGR_613a. What region does she live in?</p> <p><i>By knowing the district select the region on this screen first and on the next screen select the district the respondent told you about.</i></p>	<p style="text-align: right;">\${friends} > 2</p> <p> <input type="radio"/> Central <input type="radio"/> Eastern <input type="radio"/> Northern <input type="radio"/> Western <input type="radio"/> Do not know <input type="radio"/> No response </p>
<p>GGR_613b. What district does she live in?</p>	<p style="text-align: right;">\${friends} > 2</p> <p> <input type="radio"/> BUIKWE <input type="radio"/> BUKOMANSIMBI <input type="radio"/> BUTAMBALA <input type="radio"/> BUVUMA <input type="radio"/> GOMBA <input type="radio"/> KALANGALA <input type="radio"/> KALUNGU <input type="radio"/> KAMPALA <input type="radio"/> KAYUNGA <input type="radio"/> KIBOGA <input type="radio"/> KYANKWANZI <input type="radio"/> KYOTERA <input type="radio"/> LUWERO <input type="radio"/> LWENGO <input type="radio"/> LYANTONDE <input type="radio"/> MASAKA <input type="radio"/> MITYANA <input type="radio"/> MPIGI <input type="radio"/> MUBENDE <input type="radio"/> MUKONO <input type="radio"/> NAKASEKE <input type="radio"/> NAKASONGOLA <input type="radio"/> RAKAI <input type="radio"/> SEMBABULE <input type="radio"/> WAKISO <input type="radio"/> AMURIA <input type="radio"/> BUDAKA <input type="radio"/> BUDUDA </p>

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 - KABALE
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 - KAGADI
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 - KANUNGU
 - KASESE
 - KIBAALE
 - KIRUHURA
 - KIRYANDONGO
 - KISORO
 - KYEGEGWA
 - KYENJOJO
 - MASINDI
 - MBARARA
 - MITOOMA
 - NTOROKO
 - NTUNGAMO
 - RUBANDA
 - RUBIRIZI
 - RUKIGA

	<input type="radio"/> Do not know <input type="radio"/> No response
GGR_618. As far as you know has she ever done something that intentionally ended a pregnancy?	<p style="text-align: right;">\${friends} > 1</p> <input type="radio"/> Yes, I'm certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
GGR_619a. In what year did this last happen? <i>Enter '2020' for 'do not know' or 'no response'.</i>	<p style="text-align: center;">(\${friend2_abt_yn} = 'yes') or (\${friend2_abt_yn} = 'prob')</p> <p style="text-align: right;">Year:</p>
GGR_619b. If you don't know exactly, approximately how many years ago did this occur?	<p style="text-align: center;">\${friend2_abt_yr} = '2020-01-01'</p> <input type="radio"/> < 1 year ago <input type="radio"/> 1 to less than 3 years ago <input type="radio"/> 3 to less than 5 years ago <input type="radio"/> 5 or more years ago <input type="radio"/> Do not know <input type="radio"/> No response
GGR_619c. Did \${friend2_name} have any health issues and go to a health facility in the process of ending the pregnancy?	<p style="text-align: center;">\${friend2_abt_yn} = 'yes'</p> <input type="radio"/> Yes, I'm certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
GGR_620. Now please think about \${friend3_name}. Is she currently using an IUD or implant?	<p style="text-align: right;">\${friends} > 2</p> <input type="radio"/> Yes, I'm certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
GGR_621. As far as you know has she ever done something that intentionally ended a pregnancy?	<p style="text-align: right;">\${friends} > 2</p> <input type="radio"/> Yes, I'm certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
GGR_622a. In what year did this last happen? <i>Enter '2020' for 'do not know' or 'no response'.</i>	<p style="text-align: center;">(\${friend3_abt_yn} = 'yes') or (\${friend3_abt_yn} = 'prob')</p> <p style="text-align: right;">Year:</p>
GGR_622b. If you don't know exactly, approximately how many years ago did this occur?	<p style="text-align: center;">\${friend3_abt_yr} = '2020-01-01'</p> <input type="radio"/> < 1 year ago <input type="radio"/> 1 to less than 3 years ago

	<input type="radio"/> 3 to less than 5 years ago <input type="radio"/> 5 or more years ago <input type="radio"/> Do not know <input type="radio"/> No response
GGR_622c. Did \${friend3_name} have any health issues and go to a health facility in the process of ending the pregnancy?	<pre> \${friend3_abt_yn} = 'yes' </pre> <input type="radio"/> Yes, I'm certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response

Section 7 - Network Scale Up Questions

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

GGR_700. This next set of questions will help us count the number of women who you interact with. These people should be: (a) individuals you know by sight AND name, and who also know you by sight and name. In other words, you should not consider famous people who you know about, but who do not know about you; and (b) individuals you have had some contact with - either in person, over the phone, or on the computer - in the past 12 months. These could be family members, friends, co-workers, neighbors or other people you have had contact with; and (c) individuals 15-49 of age who currently live in Uganda. Is this clear?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
GGR_701. How many women have you had contact with in the last 12 months who gave birth in the last 12 months? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i>	<pre> \${wmn_prompt} != '' </pre>
GGR_702. How many women have you had contact with in the past 12 months whose most recent birth was multiples/twins? <i>Reminder: this is for the most recent birth Hint: 0 is a possible answer Enter -88 for don't know and -99 for no response</i>	<pre> \${wmn_prompt} != '' </pre>
GGR_703. How many women have you had contact with in the past 12 months who have at least one co-wife? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i>	<pre> \${wmn_prompt} != '' </pre>
GGR_704. How many women have you had contact with in the past 12 months who did any education past senior six? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i>	<pre> \${wmn_prompt} != '' </pre>

<p>GGR_705. How many women have you had contact with in the past 12 months who smoke a pipe or cigarette? <i>Reminder: Chewed doesn't count; rolled leaved that are smoked are included</i> <i>Hint: 0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_706. How many women have you had contact with in the last 12 months who live in a household with a thatched roof? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_707. How many women have you had contact with in the past 12 months who live in a household that owns a car or truck? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_708. How many women have you had contact with in the past 12 who live in a household that has a refrigerator? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_709. How many women have you had contact with in the past 12 months who live in a household that owns an exotic cow? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_710. How many women have you had contact with in the past 12 months who live in a household that owns at least one sheep? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_710a. How many women have you had contact with in the past 12 months who live in a household that has a laInldine? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_710b. How many women have you had contact with in the past 12 months who live in a household that has a piped water inside the home? <i>Reminder: piped water in the compound does not count as piped water within the household structure</i> <i>Hint: 0 is a possible answer Enter -88 for don't know and -99 for no response</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_711. While people use many different methods to avoid becoming pregnant, some of these methods are longer lasting than others. How many of the women you had contact with in the past 12 months are currently using IUDs or implants? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p><code> \${wmn_prompt} != ''</code></p>
<p>GGR_712. It is not uncommon for women to find that they are pregnant when they don't want to be, or</p>	<p><code> \${wmn_prompt} != ''</code></p>

<p>when circumstances would make it difficult to have a child, and sometimes they decide to do something or take something in order to end their pregnancy.</p> <p>Of the women you have had contact with in the past 12 months, how many have ever done something to intentionally end a pregnancy? Again, this information will be completely confidential.</p> <p><i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	
<p>GGR_713. Thinking of these $\{wmn_abt\}$ women who you have had contact with in the past 12 months and who have ever ended a pregnancy, how many have ended a pregnancy in the past 12 months? Again, this information will be completely confidential.</p> <p><i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	$\{wmn_abt\} > 0$

Section 8 - Abortion

<p>GGR_801. Now I would like to ask you about your own experience. Were you ever pregnant when you did not want to be, or when circumstances would have made it difficult to have a child?</p>	<p>$(\{age_at_first_sex\} \neq '-77')$ and $(\{consent_obtained\})$</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>
<p>GGR_802. Did you do anything to try to stop the pregnancy?</p>	<p>$\{self_unwanted_preg_yn\} = 'yes'$</p> <p><input type="radio"/> Yes, succeeded <input type="radio"/> Yes, but failed <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response</p>

	$(\{self_abt_yn\} = 'yes')$
<p>GGR_803. In what month and year did this last happen? <i>If respondent knows the year, but not month enter 'Do not know' for month Select 'Do not know' for month and '2020' for year to indicate 'No Response'.</i></p>	
<p>Month:</p>	<p><input type="radio"/> January <input type="radio"/> February <input type="radio"/> March <input type="radio"/> April <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> August <input type="radio"/> September <input type="radio"/> October</p>

	<input type="radio"/> November <input type="radio"/> December <input type="radio"/> Do not know
Year:	Year:

Date cannot be in the future.
 You entered: $\{\text{period_abt_last_full_lab}\}$ Today: $\{\text{today}\}$
 $(\{\text{period_abt_last}\} \neq \text{'2020-01-01'})$
 and $(\{\text{period_abt_last}\} \neq \text{''})$ and
 $(\{\text{period_abt_last}\} > \{\text{to ...}$

GGR_804. Were you or your partner using a method of contraception to avoid or delay getting pregnant at the time you became pregnant?
 $\{\text{self_unwanted_preg_yn}\} = \text{'yes'}$
 Yes
 No
 Do not know
 No response

GGR_805. What methods were you using at the time you became pregnant?
Do not read the choices. Be sure to scroll to bottom to see all choices. Select all that apply.
 $\{\text{self_failed_fp_yn}\} = \text{'yes'}$
 Female sterilization
 Male sterilization
 Implant
 IUD
 Injectables
 Pill
 Emergency Contraception
 Male condom
 Female condom
 Diaphragm
 Foam/Jelly
 Standard Days/Cycle beads
 LAM
 Rhythm method
 Withdrawal
 No response

GGR_806. Where did you go to end the pregnancy?
PROBE: If she went to more than one place, describe the final place that she went to end the pregnancy.
Do not read the choices. Be sure to scroll to bottom to see all choices. Please record only 1 response.
 $(\{\text{self_abt_yn}\} = \text{'yes'})$
 Govt. Hospital
 Govt. Health Center
 Public Family Planning Clinic
 Public Outreach
 Public Fieldwork/VHT
 Other Public
 Private Hospital/Clinic
 Pharmacy
 Private Doctor
 Private Outreach
 Private Fieldwork/VHT
 Other Private
 Shop

	<input type="radio"/> Church <input type="radio"/> Friend/relative <input type="radio"/> Market <input type="radio"/> Traditional healer <input type="radio"/> Self <input type="radio"/> Other <input type="radio"/> Don't know <input type="radio"/> No Response
<p>GGR_806b. Did you have any health issues and go to a health facility in the process of ending the pregnancy?</p>	<p style="text-align: right;">({self_abt_yn} = 'yes')</p> <input type="radio"/> Yes, I'm certain <input type="radio"/> Yes, I think so <input type="radio"/> No <input type="radio"/> Do not know <input type="radio"/> No response
<p>GGR_807. Did you discuss ending this pregnancy with the females you listed in the previous section? <i>Read each name out loud. Select all that apply</i></p>	<p style="text-align: right;">({self_abt_yn} = 'yes') and ({random_num} <= 0.5) and ({friends} > 0)</p> <input type="checkbox"/> Friend 1: \${friend1_name} <input type="checkbox"/> Friend 2: \${friend2_name} <input type="checkbox"/> Friend 3: \${friend3_name} <input type="checkbox"/> None <input type="checkbox"/> Do not know <input type="checkbox"/> No response <p style="text-align: right;">(filter_list < \${friends}) or (filter_list = 'always')</p>
<p>GGR_808. Did you discuss your use of \${current_method} with the females you listed in the previous section? <i>Probe: Modern methods of contraception include female sterilization, male sterilization, implants, IUDs, injectables, the pill, emergency contraception, male condom, and female condom.</i> <i>Read each name out loud. Select all that apply</i></p>	<p style="text-align: right;">(selected(\${current_method}, 'implants') or selected(\${current_method}, 'IUD')) and (\${random_num} ...</p> <input type="checkbox"/> Friend 1: \${friend1_name} <input type="checkbox"/> Friend 2: \${friend2_name} <input type="checkbox"/> Friend 3: \${friend3_name} <input type="checkbox"/> None <input type="checkbox"/> Do not know <input type="checkbox"/> No response <p style="text-align: right;">(filter_list < \${friends}) or (filter_list = 'always')</p>
<p>GGR_809. I want to ask you again about the women you know by sight AND name, and with whom you have had contact in the past 12 months and who are 15 to 49 years of age and live in Uganda. How many know that you ended this pregnancy? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i></p>	<p style="text-align: right;">({self_abt_yn} = 'yes') and ({random_num} > 0.5)</p>
<p>GGR_810. How many of these women who you had contact with in the past 12 months know that you are using an \${current_method}?</p>	<p style="text-align: right;">({random_num} > 0.5) and (selected(\${current_method},</p>

Probe: Long acting contraceptive methods includes implants and IUDs. 0 is a possible answer Enter -88 for don't know and -99 for no response	'implants') or selected(\${current_method}, ...
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Follow-up Consent	
FLW_901. Thank you for the time you have kindly granted us. Would you be willing to participate in another survey on this or any other topic either by phone or in person at some point in the future?	009a = 1 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
FLW_902. Do you own a phone?	FLW_801 = 1 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
FLW_902a. Can I have your primary phone number in case we would like to follow up with you in the future?	FLW_802 = 1 <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
FLW_902b: Enter a 10-digit number without the country code. Do not include spaces or dashes. Number MUST start with 07, 04 or 03. Eg. 0700121212 or 0414232323 or 0392141414	\${flw_number_permit_prim} = 'yes'
FLW_804. To confirm, here is the number you gave me: [FLW_803]. Is that correct? If not, return to 902b and correct it.	FLW_803 ≠ -99 <input type="radio"/> Yes <input type="radio"/> No
FLW_904a. Can I have your secondary phone number in case we would like to follow up with you in the future?	\${flw_phone_yn} = 'yes' <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> No response
FLW_904b: Enter a 10-digit number without the country code. Do not include spaces or dashes. Number MUST start with 07, 04 or 03. Eg. 0700121212 or 0414232323 or 0392141414	\${flw_number_permit_sec} = 'yes'
FLW_905. To confirm, here is the number you gave me: \${flw_number_typed_sec}. Is that correct? If not, return to 904b and correct it.	(\${flw_number_typed_sec} != '') <input type="radio"/> Yes <input type="radio"/> No
Thank the respondent for her time. The respondent is finished, but there are still more questions for you to complete outside the home.	\${available} = 'yes'

Location and Questionnaire result
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<p>095. Location Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6 m.</p>	<p>Always</p>
<p>096. How many times have you visited this household to interview this female respondent?</p>	<p>Always</p> <p><input type="radio"/> 1st time <input type="radio"/> 2nd time <input type="radio"/> 3rd time</p>
<p>097. In what language was this interview conducted?</p>	<p>009a = 1</p> <p><input type="radio"/> English <input type="radio"/> Ateso <input type="radio"/> Luganda <input type="radio"/> Lugbara <input type="radio"/> Lusoga <input type="radio"/> Luo <input type="radio"/> Runyankole-Rukiga <input type="radio"/> Runyoro-Rutoro <input type="radio"/> Ngakaramojong <input type="radio"/> Other</p>
<p>099. Questionnaire Result Record the result of the questionnaire.</p>	<p>Always</p> <p><input type="radio"/> Completed <input type="radio"/> Not at home <input type="radio"/> Postponed <input type="radio"/> Refused <input type="radio"/> Partly completed <input type="radio"/> Incapacitated</p>