

# Documenting Interests and Preferences Regarding Family Planning Self-Care Interventions with Standardized Questions

While the landscape for self-care in family planning (FP) is rapidly evolving, limited data are available to understand what information or services women are interested in within the context of self-care and their preferences for accessing desired information and services. Evidence is also lacking on whether needs and choices of individuals vary across different groups.

## PURPOSE

The USAID-funded Research for Scalable Solutions (R4S) Project developed a self-care module that was added to the female questionnaire of the PMA survey in Kenya (National Phase 3, 2021/2022) and Nigeria (Kano and Lagos States Phase 3, 2021). The goal of the module is to learn about women’s interests and preferences related to key FP self-care interventions listed by the World Health Organization<sup>1</sup>, including digital information provision and FP methods—specifically oral contraceptive pills, emergency contraceptives, and injectables, methods that women may be able to administer themselves-- including which service delivery channels women may be interested in obtaining these products from and what kinds of support they may want from a health provider for these methods.

## USE

The survey questions are presented as a menu of questions that can be integrated into existing data collection platforms or studies. It is assumed that some background information would be collected as part of the broader platform or study within which the module is being used. All or a subset of questions may be included depending on available resources and the specifics of the design (e.g. cross-sectional vs. longitudinal, target population).

## CONTACT US

If you are planning on using these questions, please email us at [R4Sinfo@fhi360.org](mailto:R4Sinfo@fhi360.org) and we can provide you with a Word version of the survey module.

<sup>1</sup> WHO guideline on self-care interventions for health and well-being, 2022 revision. Geneva: World Health Organization; 2022. License: CC BY-NC-SA 3.0 IGO.

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## Interests and Preferences Regarding Family Planning Self-care Interventions Questions

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
100	I would like to ask questions about the types of information related to family planning you may be interested in getting on your own. By “on your own” we mean without necessarily engaging with a health care provider. Your answers to these questions will be used for research purposes. There are no additional risks or benefits to answering these questions. As a reminder, your participation is completely voluntary and no identifying information about you will be shared with the researchers or reported in the study results. May I continue with the questions?	Yes ..... 1 No ..... 0	
info1	<b>READ:</b> We would like to understand what types of information related to family planning you may be interested in getting on your own. By “on your own” we mean without necessarily having to access or speak with a healthcare provider at a facility.		100 = 1
101	Would you be interested in getting a series of questions that you could use <b>on your own</b> to confirm if you are pregnant?	Yes ..... 1 No ..... 2 I already have these questions ..... 3 No response ..... -99	100 = 1
102	Would you be interested in getting a series of questions that you could use <b>on your own</b> to determine when you can become pregnant again after giving birth?	Yes ..... 1 No ..... 2 I already have these questions ..... 3 No response ..... -99	100 = 1
103	Would you be interested in instructions and materials that you could use <b>on your own</b> to tell which days in your menstrual cycle you can get pregnant?	Yes ..... 1 No ..... 2 I already have these instructions/materials..... 3 No response ..... -99	100 = 1
104	Sometimes women experience changes in their period when they use a family planning method. Would you be interested in getting information <b>on your own</b> about what to do if you experience changes in your period?	Yes ..... 1 No ..... 2 I already have this information ..... 3 No response ..... -99	100 = 1

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
105	Sometimes women experience side effects like changes in weight, mild nausea, headaches or fatigue when they use a family planning method. Would you be interested in getting information <b>on your own</b> about what to do if you experience side effects?	Yes ..... 1 No ..... 2 I already have this information ..... 3 No response ..... -99	100 = 1
info2	<b>READ:</b> Now we would like to understand how you may want to receive the information we just talked about.		101 = 1 OR 102 = 1 OR 103 = 1 OR 104 = 1 OR 105=1
106	Would you be interested in receiving a voice or text message with this type of information on a mobile phone?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	101 = 1 OR 102 = 1 OR 103 = 1 OR 104 = 1 OR 105=1
107	Would you be interested in receiving this type of information on social media such as Facebook, Viber, Twitter, WhatsApp or others?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	101 = 1 OR 102 = 1 OR 103 = 1 OR 104 = 1 OR 105=1

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				Relevant if:
info3	<b>READ:</b> Now, we would like to ask about how you would prefer getting information, contraceptive methods, and products.					100 = 1
108	How important is it to engage with a provider when starting or while using the following methods? <i>Read each one.</i>	<u>Very important</u>	<u>Somewhat important</u>	<u>Not important</u>	NR	100 = 1
	a. Oral contraceptive pills that you take every day to avoid becoming pregnant	1	2	3	-99	
	b. Pills that you can take within three to five days of unprotected sex to prevent pregnancy (emergency contraception)	1	2	3	-99	
	c. A contraceptive injection administered via a small needle that you could give yourself	1	2	3	-99	
	d. A urine test to determine if you are pregnant (pregnancy test)	1	2	3	-99	
info4	<b>READ:</b> Now we would like to ask you some questions about oral contraceptive pills or emergency contraception.					100 = 1
109	Would you be interested in getting oral contraceptive pills or emergency contraception from a <b>drug shop or pharmacy</b> ?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99				100 = 1
110	Would you be interested in getting oral contraceptive pills or emergency contraception from a <b>general retail shop or from the market</b> in your community?  <i>By "shop" we mean other than a drug shop.</i>	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99				100 = 1
111	Would you be interested in getting oral contraceptive pills or emergency contraception from a <b>friend or relative</b> ?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99				100 = 1

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
112	Would you be interested in ordering contraceptive pills or emergency contraception and getting them <b>delivered to your home by a delivery service?</b>	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	100 = 1
113a	If you didn't have to pay for the product, where would you most like to obtain contraceptive pills?  <i>Read response options 1-7 aloud</i>	Health facility ..... 1 Community health worker 2 Mobile clinic / community event ..... 3 Drug shop or pharmacy... 4 Shop or market in the community ..... 5 Friend or relative ..... 6 Delivered to home ..... 7 Other ..... 96 Not interested in method. 8 No response ..... -99	100 = 1
113b	If you didn't have to pay for the product, where would you most like to obtain emergency contraception?  <i>Read response options 1-7 aloud</i>	Health facility ..... 1 Community health worker 2 Mobile clinic / community event ..... 3 Drug shop or pharmacy... 4 Shop or market in the community ..... 5 Friend or relative ..... 6 Delivered to home ..... 7 Other ..... 96 Not interested in method. 8 No response ..... -99	100 = 1
info5	<b>READ:</b> Now we would like to ask you some questions about a contraceptive injection that you could give yourself.		100 = 1
114	Would you be interested in getting instructions and materials to give yourself a contraceptive injection from a <b>drug shop or pharmacy?</b>	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	100 = 1
115	Would you be interested in getting instructions and materials to give yourself a contraceptive injection from a <b>general retail shop or from the market</b> in your community?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	100 = 1

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
116	Would you be interested in getting instructions and materials to give yourself a contraceptive injection from a <b>friend or relative</b> ?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	100 = 1
117	Would you be interested in ordering instructions and materials to give yourself a contraceptive injection and getting them <b>delivered to your home by a delivery service</b> ?	Yes ..... 1 No ..... 2 I already do ..... 3 No response ..... -99	100 = 1
118	If you didn't have to pay for the product, where would you most like to get instructions and materials to give yourself a contraceptive injection?  <i>Read response options 1-7 aloud.</i>	Health facility ..... 1 Community health worker 2 Mobile clinic / community event ..... 3 Drug shop or pharmacy... 4 Shop or market in the community ..... 5 Friend or relative ..... 6 Delivered to home ..... 7 Other ..... 96 Not interested in the method ..... 8 No response ..... -99	100 = 1



NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
119	What do you see as the benefits of engaging with a provider when starting or while using oral contraceptive pills, emergency contraception, or injections you could give yourself? <b>Do not read list. Select all that apply. Probe: "Anything else?"</b>	Already go to the health facility for other reasons / Saves time ..... 1/0 Close to home ..... 1/0 Low cost ..... 1/0 Discrete / confidential .. 1/0 Learn about different methods from provider. 1/0 Get provider's recommendation..... 1/0 Learn how to use selected method from provider .. 1/0 Manage side effects ..... 1/0 I feel confident I will get accurate information .... 1/0 Quality products (not counterfeit) ..... 1/0 Methods usually available ..... 1/0 It's what I usually do ... 1/0 Other ..... 1/0 No benefit ..... 1/0 No response ..... -99	100 = 1



NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
120	<p>What do you see as the benefits of <b>NOT</b> engaging with a provider when starting or while using oral contraceptive pills, emergency contraception, or injections you could give yourself?</p> <p><b><i>Do not read list. Select all that apply.</i></b></p> <p><b><i>Probe "Anything else?"</i></b></p>	<p>Saves time ..... 1/0</p> <p>No need to travel / less travel ..... 1/0</p> <p>Flexible schedule / get information or services when I want..... 1/0</p> <p>Lower cost ..... 1/0</p> <p>I have more control ..... 1/0</p> <p>Discrete / confidential .. 1/0</p> <p>Do not feel comfortable telling provider what I want / Do not trust provider / Not judged by provider ..... 1/0</p> <p>Not getting infected with COVID-19 while getting care ..... 1/0</p> <p>Methods usually available.....1/0</p> <p>It is what I usually do .. 1/0</p> <p>Other ..... 1/0</p> <p>No benefit ..... 1/0</p> <p>No response ..... -99</p>	100 = 1