	Female Questionnaire		
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
IDENTIFICATION			
001a	**Are you in the correct household?** **This is the picture of the front of the home taken during the Household Questionnaire.** [ODK will display the photo taken during the Household Questionnaire linked to this Female Questionnaire]	Yes .... 1 No.. 0	Always
001b	**RETURN TO INTERVIEW THE CORRECT HOUSEHOLD.**		001a=0
002	**Your name:** [Interviewer name from Household Questionnaire] **Is this your name?**	Yes .... 1 No.. 0	Always
	Enter your name below. *Please record your name*	Interviewer's Name	
003	**Current date and time.** [ODK will display on screen] **Is this date and time correct?**	Yes .... 1 No.. 0	Always
	Record the correct date and time.		003a=0

Day	**Month**	**Year**
Hours	**Min**	**AM/PM**

004a	**The following information is from the Household Questionnaire. Please review to make sure you are interviewing the correct respondent.** [ODK will display the Province, District, Subdistrict, Village, Blok Sensus, Structure Number, and Household Number entered into the Household Questionnaire linked to this Female Questionnaire.] **Is the above information correct?**	Yes .... 1 No.. 0	Always
004b	**GO TO THE RIGHT HOUSEHOLD OR UPDATE THE HOUSEHOLD ROSTER IF NEEDED**		004a=1

Female Questionnaire			
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
005	**CHECK: You should be attempting to interview [Respondent's Name]. Is that correct?** *If misspelled, select "yes" here and update the name in question "L."* *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.*	Yes .... 1 No... 0	Always
006	**Is the respondent present and available to be interviewed today?**	Yes .... 1 No... 0	Always
007	**How well acquainted are you with the respondent?**	Very well acquainted .... 1 Well acquainted............................... 2 Not well acquainted.......................... 3 Not acquainted 4	**006=1**
008	**Has this woman participated in a PMA2020 survey before?**	Yes .... 1 No... 0 Don't know .... -88 No response................................. -99	**006=1**
INFORMED CONSENT *Find the woman between the ages of 15-49 associated with this Female Questionnaire. The interview must have auditory privacy. Read the following greeting:*			
Hello. My name is _____ and I am working for BKKBN in collaboration with the University of North Sumatra, Universitas Gadjah Mada, Hasanuddin University, and the Central Bureau of Statistics. We are conducting a local survey that asks women about various reproductive health issues. We would very much appreciate your participation in this survey. This information will help us inform the government to better plan health services. The survey usually takes between 15 and 20 minutes to complete. Whatever information you provide will be kept strictly confidential and will not be shown to anyone other than members of our survey team. Participation in this survey is voluntary, and if we should come to any question you don't want to answer, just let me know and I will go on to the next question; or you can stop the interview at any time. However, we hope that you will participate in this survey since your views are important. At this time, do you want to ask me anything about the survey?			
009a	Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: **May I begin the interview now?**	Yes .... 1 No... 0	006=1
009b	**Respondent's signature** *Please ask the respondent to sign or check the box in agreement of their participation.*	GATHER SIGNATURE: Check box: ☐	009a=1

**Female Questionnaire**
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
010	**Interviewer's name:** [Interviewer name from Household Questionnaire] *Mark your name as a witness to the consent process.*		009a=1
011	**Respondent's name** *You may correct the spelling here if it is not correct, but you must be interviewing the person whose name appears below.*		009a=1
**Section 1 – Respondent's Background, Marital Status, HH characteristics** *Now I would like to ask about your background and socioeconomic conditions.*
101	**In what month and year were you born?** **The age in the household roster is [AGE].**	Month Year	009a=1
102	**How old were you at your last birthday?**	Age	009a=1
103	**What is the highest level of school you attended?**	Never Attended .... 0 Primary.. 1 Junior High School .... 2 Senior High School .... 3 Academy .... 4 University .... 5 No response.................................. -99	009a=1
104	**Are you currently married or living together with a man as if married?** *Probe: If no, ask whether the respondent is divorced, separated, or widowed.*	Yes, currently married .... 1 Yes, living with a man .... 2 Not currently in union: Divorced / separated .... 3 Not currently in union: Widow .... 4 No, never in union .... 5 No response.................................. -99	009a=1
105	**Have you been married or lived with a man only once or more than once?**	Only once .... 1 More than once .... 2 No response.................................. -99	104 ≠ 5
106a	**In what month and year did you start living with your FIRST husband / partner?** *Enter Jan 2020 for no response.*	Month Year	105=2
106b	**CHECK: Based on the response you entered in FQ106a, the respondent was possibly 15 years old or younger at the time of her first marriage. Did you enter FQ106a correctly?**	Yes.. 1 No... 0	106a age at marriage ≤15

	Female Questionnaire		
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
106c	**RETURN TO 106A TO CORRECT BEFORE CONTINUING**		106b=0
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?** *Enter Jan 2020 for no response.*	Month [ ] Year [ ]	105=1 or 2
107b	**CHECK: Based on the response you entered in FQ5b, the respondent was possibly 15 years old or younger at the time of her first marriage. Did you enter FQ107a correctly?**	Yes .... 1 No.. 0	If 107a is before her 16th birthday
107c	**RETURN TO 107A TO CORRECT BEFORE CONTINUING**		107b=0
108	**Does your husband / partner have other wives or does he live with other women as if married?**	Yes .... 1 No.. 0 Don't know .... -88 No Response............................ -99	104=1 or 2
109	**Is your husband / partner living with you now or is he staying elsewhere?**	Living with respondent .... 1 Staying elsewhere........................... 2 No response................................. -99	104=1 or 2
	Section 2 – Reproduction, Pregnancy & Fertility Preferences *Now I would like to ask about all the births you have had during your life.*		
ID_RPJM_201	From one menstrual period to the next, are there certain days when a woman is more likely to become pregnant if she were to have sexual intercourse?	Yes .... 1 No.. 0 No response................................. -99	009a=1
ID_RPJM_202	Is this the time just before her period begins, during her period, right after her period has ended, or halfway between two periods?	Just before her period begins.......... 1 During her period .... 2 Right after her period has ended..... 3 Halfway between.............................. 4 Other .... 96 Don't know .... -88 No response................................. -99	009a=1
200	**Now I would like to ask about all the births you have had during your life. Have you ever given birth?**	Yes .... 1 No.. 0 No response -99	009a=1
201a	**Do you have any sons or daughters to whom you have given birth who are now living with you?**	Yes .... 1 No.. 0 No response................................. -99	200=1
201b	**How many sons live with you?** *Zero is a possible response. Enter -99 for No response.*	Number [ ]	201a = 1

		Female Questionnaire	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
201c	**How many daughters live with you?** *Zero is a possible response. Enter -99 for No response.*	Number [ ]	201a = 1
202a	**Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?**	Yes .... 1 No .... 0 No response .... -99	200 = 1
202b	**How many sons are alive but do not live with you?** *Zero is a possible response. Enter -99 for No response.*	Number [ ]	202a = 1
202c	**How many daughters are alive but do not live with you?** *Zero is a possible response. Enter -99 for No response.*	Number [ ]	202a = 1
203a	**Have you ever given birth to a boy or girl who was born alive but later died?** **IF NO, PROBE: Any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?**	Yes .... 1 No .... 0 No response .... -99	009a=1
203b	**How many boys have died?** *Zero is a possible response. Enter -99 for No response.*	Number [ ]	203a = 1
203c	**And how many girls have died?** *Zero is a possible response. Enter -99 for No response.*	Number [ ]	203a = 1
CALC CEB	CALCULATE: NUMBER OF CHILDREN EVER BORN. ODK will automatically calculate the total number of children ever born from FQ201-203: (201b+201c+202b+202c+203b+203c)	Number [ ]	200 = 1
204	**Just to make sure that I have this right, you have had in TOTAL [ODK will display the total number of sons and daughters birthed from FQ201-203] births during your life. Is that correct?**	Yes .... 1 No 0	CALC CEB >0
205	**When was your FIRST live birth?** *Please record the date of the FIRST live birth. Date should be found by calculating forward or backward from memorable events if needed.* *Enter Jan 2020 for no response.*	Month [ ] Year [ ]	CALC CEB >1

Female Questionnaire			
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
206	**When was your MOST RECENT live birth?** *Please record the date of the MOST RECENT live birth. The date should be found by calculating backwards from memorable events if needed.* *Enter Jan 2020 for no response.*	Month ☐ Year ☐	CALC CEB >0
207	**When did you give birth before the most recent one?** *Please record the date of the birth before the last. The date should be found by calculating backwards from memorable events if needed.* *Enter Jan 2020 for no response.*	Month ☐ Year ☐	CALC CEB >2
208a	**Is your last baby / child still alive?**	Yes .... 1 No.. 0 Don't know .... -88 No Response………………….… -99	(201a=1 OR 202a=1) AND 203a = 1
208b	**When did your last baby / child die?** *Please record the date of the child's death.* *The date should be found by calculating backwards from memorable events if needed.* *Enter Jan 2020 for no response.*	Month ☐ Year ☐	208a = 0 or (201a=0 and 202a=0 and 203a=1)
ID_RPJM_203	**Did you ever breastfeed your last baby/child?**	Yes .... 1 No.. 0 No Response .... -99	201a=1 OR 202a=1 OR 203a=1
ID_RPJM_204	**How long after birth did you first put them to the breast?** **If less than 1 hour, select hours and enter 0. If less than 24 hours, select hours and record in hours. Otherwise record in days.**	Immediately .... 1 X hours... 2 X days .... 3 No response.................................. -99 Number ☐	ID_RPJM_203=1
ID_RPJM_205	**Are you still breastfeeding your last baby/child?**	Yes .... 1 No.. 0 No Response .... -99	206<5 years AND ID_RPJM_203=1
ID_RPJM_206	**How long after birth did your last baby/child stop breastfeeding?**	X hours... 1 X days .... 2 X weeks.. 3 X months .... 4 X years .... 5 When the baby/child died……………6 No Response………………….…-99	ID_RPJM_205≠1 ,-99 AND (ID_RPJM_203 = 1)

Female Questionnaire				
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**		**Relevant if:**
		Number		
209	**When did your last menstrual period start?** **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.**	Days ago:	1	009a=1
		Weeks ago:	2	
		Months ago:	3	
		Years ago:	4	
		Menopausal / Hysterectomy .... 5 Before last birth .... 6 Never menstruated .... 7 No response .... -99		
210a	**Are you pregnant now?**	Yes .... 1 No .... 0 Unsure .... -88 No response .... -99		209 ≠ 1
210b	**How many months pregnant are you?** **The most recent birth was: [Date of most recent birth]** **Please record the number of completed months. Enter -88 for do not know, -99 for no response.**	Number of months		210a=1
211a	**Now I have some questions about the future. Would you like to have a/another child or would you prefer not to have any / any more children?**	Have a/another child .... 1 No more/prefer no children .... 2 Says she can't get pregnant .... 3 Undecided / Don't know .... -88 No response .... -99		210a ≠1
211b	**Now I have some questions about the future. After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children?**	Have a/another child .... 1 No more/prefer no children .... 2 Says she can't get pregnant .... 3 Undecided / Don't know .... -88 No response .... -99		210a = 1
212a	**How long would you like to wait from now before the birth of a/another child?** *If you select months or years, you will enter a number for x on the next screen.*	Months:		211a=1
		Years:		
		Soon / now .... 3 Says she can't get pregnant .... 4 Other .... 5 Don't know .... -88 No response .... -99		

	Female Questionnaire			
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**		**Relevant if:**
212b	**After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?** *If you select months or years, you will enter a number for x on the next screen.*	Months:		211b=1
		Years:		
		Soon / now...3 Says she can't get pregnant............4 Other..5 Don't know....................................-88 No response ....-99		
213a	**Now I would like to ask a question about your last live birth.** **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 / any more children at all?**	Then .... 1 Later .... 2 Not at all .... 3 No response................................... -99		CALC _CEB>0 AND 210a ≠1
213b	**Now I would like to ask a question about your current pregnancy.** **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 / any more children at all?**	Then .... 1 Later .... 2 Not at all .... 3 No response................................... -99		210a=1

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. Show the image to the respondent after the probe, but not before she tells you whether she has heard of the method.

301a	**Have you ever heard of Female Sterilization?** **PROBE: Women can have an operation to avoid having any more children.**	Yes…………….…………………… 1 No ……………………………………… 0 No Response………………………. -99	009a=1
301b	**Have you ever heard of male sterilization?** **PROBE: Men can have an operation to avoid having any more children.**	Yes…………….…………………… 1 No ……………………………………… 0 No Response………………………. -99	009a=1
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.** **<IMAGE OF METHOD WILL APPEAR ON SCREEN>**	Yes…………….…………………… 1 No ……………………………………… 0 No Response………………………. -99	009a=1
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.** **<IMAGE OF METHOD WILL APPEAR ON SCREEN>**	Yes…………….…………………… 1 No ……………………………………… 0 No Response………………………. -99	009a=1

	Female Questionnaire		
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
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.** **<IMAGE OF METHOD WILL APPEAR ON SCREEN>**	Yes.. 1 No .... 0 No Response............................ -99	009a=1
301f	**Have you ever heard of the (birth control) pill?** PROBE: Women can take a pill every day to avoid becoming pregnant. <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes.. 1 No .... 0 No Response............................ -99	009a=1
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 five days to prevent pregnancy. <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes.. 1 No .... 0 No Response............................ -99	009a=1
301h	**Have you ever heard of condoms?** PROBE: Men can put a rubber sheath on their penis before sexual intercourse. <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes.. 1 No .... 0 No Response............................ -99	009a=1
301i	**Have you ever heard of female condoms?** PROBE: Women can put a sheath in their vagina before sexual intercourse. <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes.. 1 No .... 0 No Response............................ -99	009a=1
301j	**Have you ever heard of the intravag/ diaphragm?** PROBE: Women can place a thin flexible disk in their vagina before sexual intercourse. <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes.. 1 No .... 0 No Response............................ -99	009a=1

	Female Questionnaire			
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**		**Relevant if:**
301l	**Have you ever heard of the standard days method or Cycle Beads?** 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 <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes…………………………………… 1 No …………………………………… 0 No Response………………………… -99		009a=1
301m	**Have you ever heard of the Lactational Amenorrhea Method or LAM?** <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes…………………………………… 1 No …………………………………… 0 No Response………………………… -99		009a=1
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. <IMAGE OF METHOD WILL APPEAR ON SCREEN>	Yes…………………………………… 1 No …………………………………… 0 No Response………………………… -99		009a=1
301o	**Have you ever heard of the withdrawal method?** PROBE: Men can be careful and pull out before climax.	Yes…………………………………… 1 No …………………………………… 0 No Response………………………… -99		009a=1
301p	**Have you ever heard of any other ways or methods that women or men can use to avoid pregnancy?**	Yes…………………………………… 1 No …………………………………… 0 No Response………………………… -99		009a=1
302a	**Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?**	Yes…………………………………… 1 No …………………………………… 0 No Response………………………… -99		210a ≠ 1 AND 009a=1
302b	**Which method or methods are you using?** **Probe: Anything else?** **Select all methods mentioned. Be sure to scroll to bottom to see all choices.**		Y	N	302a=1
		Female Sterilization	1	0	
		Male Sterilization	1	0	
		Implant	1	0	
		IUD	1	0	
		Injectables – 1 month	1	0	
		Injectables – 3 months........	1	0	
		Pill	1	0	
		Emergency Contraception .	1	0	
		Male Condom	1	0	
		Female Condom	1	0	
		Intravag/Diaphragm	1	0	
		Std Days/Cycle Beads........	1	0	
		LAM	1	0	
		Rhythm method	1	0	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES			Relevant if:
		Withdrawal 1		0	
		Other traditional method 1		0	
		No response .... -99			
CALC_CM	**CALCULATE: CURRENT METHOD** **ODK will identify the most effective method currently being used by the respondent by selecting the highest method in the choice list**	Female Sterilization .... Male Sterilization .... Implant................................ 3 IUD .... 4 Injectables .... 5 Injectables_1mo .... 6 Pill.................................... 7 Emergency Contraception .... 8 Male Condom .... 9 Female Condom .... 10 Diaphragm .... 11 Std. Days/Cycle beads .... 13 LAM .... 14 Rhythm method .... 30 Withdrawal..................................... 31 Other traditional methods .... 39 No response…………………………-99			302a=1 & 302b ≠-99
302c	**Are you breastfeeding to delay or avoid becoming pregnant?**	Yes .... 1 No .... 0 No Response……………………… -99			LAM selected in 302b
303	**Did the provider tell you or your partner that this method was permanent?**	Yes .... 1 No .... 0 No Response……………………… -99			302b = Female or male sterilization
304	**Do you know of a place where you can obtain a method of family planning?**	Yes .... 1 No .... 0 No Response……………………… -99			009a=1 AND [302a ≠ 1]
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?**	Yes .... 1 No .... 0 No Response……………………… -99			302a=0 AND 210a ≠ 1
305b	**Do you think you will use a contraceptive method to delay or avoid getting pregnant at any time in the future?**	Yes .... 1 No .... 0 No Response……………………… -99			302a≠1 AND 210a = 1
306a	**In the last 12 months, have you ever done something or used a method to delay or avoid getting pregnant?**	Yes .... 1 No .... 0 No Response……………………… -99			302a ≠ 1 OR 210a=1
306b	**Which method did you use most recently?** **Probe: Anything else?** **Select most effective method (highest method on list). Scroll to bottom to see all choices.**	Implant .... 3 IUD .... 4 Injectables – 1 month .... 5 Injectables – 3 months..................... 6 Pill .... 7 Emergency Contraception .... 8 Male Condom .... 9 Female Condom .... 10 Intravag/Diaphragm .... 11 Std Days/Cycle Beads.................... 13 LAM 14			306a=1

		Rhythm method ....30 Withdrawal ....31 Other traditional method ....39 No response ....-99	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
307	**Before you started using [MOST RECENT / CURRENT METHOD], had you discussed the decision to delay or avoid pregnancy with your husband/partner?**	Yes ....1 No ....0 Don't know ....-88 No response ....-99	302a = 1 OR 306a = 1
308	**Would you say that using contraception is mainly your decision, mainly your husband/partner's decision or did you both decide together?**	Mainly respondent ....1 Mainly husband/partner ....2 Joint Decision ....3 Other..96 No response ....-99	302a = 1 OR 306a = 1
309a	**Since what month and year have you been using [MOST RECENT / CURRENT METHOD] without stopping?** Calculate backwards from memorable events if needed. **Most Recent Birth: [mm-yyyy]** **Current Marriage: [mm-yyyy]** Must be before today. Respondent must be at least 10 years old. Enter Jan 2020 for no response.	Month [ ] Year [ ]	302a=1
309b	**When did you stop using your [MOST RECENT METHOD]?** **Please record the date.** **The date should be found by calculating backwards from memorable events if needed.** **Enter Jan 2020 for no response.**	Month [ ] Year [ ]	306a=1
309c	**In what month and year had you started using [MOST RECENT METHOD] before stopping?** Calculate backwards from memorable events if needed. **Most Recent Birth: [mm-yyyy]** **Current Marriage: [mm-yyyy]** Must be before today. Respondent must be at least 10 years old. Enter Jan 2020 for no response.	Month [ ] Year [ ]	306a=1

	Female Questionnaire		
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
309d	**CHECK: Just to make sure I have this correct, you used [RECENT METHOD] continuously between [START DATE] and [END DATE] without stopping, is that correct?**	Yes .... 1 No 0	306a=1
310	**Why did you stop using your (MOST RECENT METHOD)?**	Infrequent sex / husband away........ 1 Became pregnant while using .... 2 Wanted to become pregnant .... 3 Husband / partner disapproved .... 4 Wanted more effective method........ 5 No method available .... 6 Health concerns............................. 7 Fear of side effects .... 8 Lack of access / too far.................. 9 Costs too much.............................. 10 Inconvenient to use .... 11 Fatalistic .... 12 Difficult to get pregnant / Menopausal .... 13 Interferes with body's processes ... 14 Other.. 15 Don't know .... -88 No response .... -99	306a=1

311a	**You first started using (CURRENT/MOST RECENT METHOD) in (DATE FROM FQ309a or 309c). Where did you or your partner get it at that time?**
	
	Scroll to bottom to see all choices.
		Public Sector:
		    Government Hospital............. ...11
		    Government Health Center.... ...12
		    Government Sub Health Center 13
		    FP Fieldworker 14
		    FP Mobile Unit 15
		    Village Health Post 16
		    Delivery Post 17
		    FP Cadre 18
		    Integrated Health Post.............19
		Private Medical Sector:
		    Private Hospital 21
		    Maternity Hospital.................. ...22
		    Maternity Home 23
		    Private Clinic.......................... ...24
		    General Practitioner................ ...25
		    Obstetrician 26
		    Midwife 27
		    Nurse 28
		    Village Midwife....................... ...29
		    Pharmacy/Drug Store 30
		Other Source:
		    Friends/Relative..................... ...41
		    Shop 42
		    Other.................................... ...96
		    Don't Know ....-88
		    No Response.................... -99
			(302a=1 & CALC_ CM ≠14, 30, 31, 32)
			
			OR
			
			(306a=1 & 306b ≠ 14, 30, 31, 32)

312a	**When you obtained your [MOST RECENT / CURRENT METHOD], were you told by the provider about side effects or problems you might have with a method to delay or avoid**	Yes .... 1 No .... 0 No Response……………………… -99	302b or 306b ≠ 14,30, 31

		Female Questionnaire	
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
	getting pregnant?		
312b	**Were you told what to do if you experienced side effects or problems?**	Yes .... 1 No .... 0 No Response………………….… -99	312a = 1
313	**At that time, were you told by the family planning provider about methods of family planning other than the [MOST RECENT/CURRENT METHOD] that you could use?**	Yes .... 1 No .... 0 No Response………………….… -99	CALC CM/306b!= 31,32
314a	**During that visit, did you obtain the method you wanted to delay or avoid getting pregnant?**	Yes .... 1 No .... 0 No Response………………….… -99	CALC _CM and/or 306b !=14, 30, 31, 32,39
314b	**When you began using [LAM/Rhythm] was this the method you wanted to use to delay or avoid getting pregnant?**	Yes .... 1 No .... 0 No response ....-99	CALC _CM and/or 306b = 14 or 30
314c	**Why didn't you obtain the method you wanted?**	Method out of stock that day ....1 Method not available at all ....2 Provider not trained to provide the method ....3 Provider recommended a different method ....4 Not eligible for method ....5 Decided not to adopt a method ....6 Too costly ....7 Other..8 No response ....-99	314a=0
315a	**During that visit, who made the final decision about what method you got?**	You alone ....1 Provider ....2 Partner..3 You and provider ....4 You and partner ....5 Other..6 No Response………………….… -99	CALC_CM and/or 306b!=14, 30, 31
315b	**Who made the final decision to use [LAM/Rhythm]?**	You alone ....1 Provider ....2 Partner..3 You and provider ....4 You and partner ....5 Other..6 Don't know ....-88 No response ....-99	CALC _CM and/or 306b = 14 or 30
316	**Would you return to this provider?** Provider: [Type of Provider from Q 311a or 311b]	Yes .... 1 No .... 0 No Response………………….… -99	CALC CM or 306b ≠ 14, 30, 31 AND 311a ≠ 41 or -99
317	**Would you refer your relative or friend to this provider / facility?**	Yes .... 1 No .... 0 No Response………………….… -99	CALC CM or 306b ≠ 14, 30, 31 AND 311a

Female Questionnaire			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
			≠ 41 or -99
318a	**In the last 12 months, have you paid any fees for family planning services (including the most current method)?**	Yes ....1 No ....0 No Response……………………… -99	302a or 306a=1
318b	**How much did you pay?** Enter all prices in Indonesian rupiah. Enter -88 if respondent does not know, Enter -99 for no response.	Fee	318a=1
ID_ INS1	**When did you last obtain the [CURRENT/MOST RECENT METHOD]?** Provider: [ODK will display response to FQ301]	Month Year	306a OR 302a=1

ID_ INS2	**Where did you last obtain your [CURRENT/MOST RECENT METHOD]?**	Public Sector:
		  Government Hospital............. ...11
		  Government Health Center.... ...12
		  Government Sub Health Center 13
		  FP Fieldworker 14
		  FP Mobile Unit 15
		  Village Health Post 16
		  Delivery Post 17
		  FP Cadre 18
		  Integrated Health Post………….19
		Private Medical Sector:
		  Private Hospital 21
		  Maternity Hospital.................. ...22
		  Maternity Home 23
		  Private Clinic.......................... ...24
		  General Practitioner............... ...25
		  Obstetrician 26
		  Midwife 27
		  Nurse 28
		  Village Midwife....................... ...29
		  Pharmacy/Drug Store 30
		Other Source:
		  Friends/Relative...................... 41
		  Shop 42
		  Other...................................... ...96
		  Don't Know .... …-88
		No Response ....-99
			302a=1 AND ID_INS1< 12 months ago

ID_ INS3	**At that visit, did you pay for any of the family planning services that you received?**	Yes ....1 No ....0 No Response……………………… -99	ID_INS1 <12 months ago
ID_ INS4	**How much did you pay?**	Enter Amount: _____	ID_INS3= 1
ID_ INS5	**Were your services covered by insurance?**	Yes ....1 No…………………………………… 0 No Response……………………… -99	ID_INS1 <12 months ago

	Female Questionnaire		
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
ID_INS6	**Which insurance program covered those services?**	BPJS: BPI .... 1 BPJS: non-BPI................................. 2 Jamskesda .... 3 Private Insurance............................. 4 Other... 5 None of the above………………… -77 No Response……………………… -99	ID_INS5 =1
319	**Have you ever done anything or tried in any way to delay or avoid getting pregnant?**	Yes .... 1 No .... 0 No response	306a ≠ 1
320	**How old were you when you first used a method to delay or avoid getting pregnant?** **The respondent said she was [age from 102] years old at her last birthday.** *Enter the age in years.* *Enter -88 if respondent does not know.* *Enter -99 if there is no response.* *Cannot be younger than 9.*	Age [ ]	302a=1 OR 306a=1 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 live births] times in 204.** *Enter -99 for no response*	Number [ ]	Age in 320>0 AND 200=1
322	**Which method did you first use to delay or avoid getting pregnant?** *Do not read the method choices. Be sure to scroll to bottom to see all choices.*	Female sterilization........................... 1 Male sterilization .... 2 Implant.. 3 IUD .... 4 Injectables- 3 months .... 5 Injectables_1month .... 6 Pill.. 7 Emergency Contraception .... 8 Male Condom .... 9 Female Condom .... 10 Diaphragm .... 11 Std. Days/Cycle beads .... 13 LAM .... 14 Rhythm method .... 30 Withdrawal...................................... 31 Other traditional methods .... 39 No response……………………….-99	319 = 1
323a	**You said that you do not want any / any more children and that you are not using a method to avoid pregnancy.** **Can you tell me the reason why you are not using a method to prevent pregnancy?** PROBE: Any other reason? RECORD ALL REASONS MENTIONED. Cannot select "Do Not Know" or "No response" with	Not married .... 1/0 Infrequent sex / Not having sex .... 1/0 Menopausal/Hysterectomy .... 1/0 Subfecund / infecund .... 1/0 Not menstruated since last birth ... 1/0 Breastfeeding .... 1/0 Husband away for multiple days... 1/0 Up to God / fatalistic .... 1/0 Respondent opposed .... 1/0 Husband / partner opposed 1/0	306a = 0 AND (212a or 212b>2 years)

	Female Questionnaire		
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
	other options. Cannot select "Not married" if FQ3 is "Yes, currently married". Scroll to the bottom to see all choices.	Others opposed .... 1/0 Religious prohibition .... 1/0 Knows no method .... 1/0 Knows no source .... 1/0 Fear of side effects .... 1/0 Health concerns .... 1/0 Lack of access / too far .... 1/0 Costs too much .... 1/0 Preferred method not available .... 1/0 No method available .... 1/0 Inconvenient to use .... 1/0 Interferes with body's processes .. 1/0 Other.. 1/0 Don't know ....-88 No response ....-99	
323b	**Would you say that not using contraception is mainly your decision, mainly your husband/partner's decision or did you both decide together?**	Mainly respondent .... 1 Mainly husband/partner .... 2 Joint Decision .... 3 Other.. 96 No response ....-99	306a = 0
ID_ RPJM_ 301	**At what age would you like to be married?**	Age in years Never ....-77 Don't know ....-88 No response ....-99	104=0
ID_ RPJM_ 302	**In your opinion, what is the best age for a woman to get married?**	Age in years	009a=1
ID_ RPJM_ 303	**In your opinion, what is the best age for a woman to have the first baby?**	Age in years	009a=1
ID_ RPJM_ 304	**How long do you think a woman should wait after one birth before she has another birth?**	X Months .... 1 X Years... 2 No response ....-99 Age in years	009a=1
LCL_ 308a	**If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?** If you select X children, you will enter a number for X on the following screen. If none, select X children, then enter '0.'	Number of Children It's God's will (not respondent's decision) .... 2 Other.. 3 Don't know ....-88 No response ....-99	(201a = 1) OR (202a = 1)
LCL_ 308b	**If you could choose exactly the number of children to have in your whole life, how many would that be?**	Number of Children	(201a = 0) AND (202a = 0) or (200 != 1)

	Female Questionnaire		
NO	**QUESTIONS AND FILTERS**	**CODING CATEGORIES**	**Relevant if:**
	If you select X children, you will enter a number for X on the following screen. If none, select X children, then enter '0.'	It's God's will (not respondent's decision) ....2 Other.............3 Don't know ....-88 No response ....-99	
ID_ RPJM_ 305	**Does your (husband/partner) want the same number of children that you want, or does he want more or fewer than you want?**	Same number ....1 More children...................2 Fewer children ....3 Do not know..............-88 No Response ....-99	104=1,2
324	**In the last 12 months, were you visited by a village health volunteer who talked to you about family planning?**	Yes ....1 No 0	009a=1
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	Yes ....1 No 0	009a=1
325b	**Did any staff member at the health facility speak to you about family planning methods?**	Yes ....1 No 0	325a=1
ID_ RPJM_ 306	**In the last few months, did you obtain family planning information from any of the following sources?**	FP officer? ....1/0 Teacher? ....1/0 Religious leader? ....1/0 Doctor? ....1/0 Nurse or midwife? ....1/0 Village leader? ....1/0 Women's group (PKK)? ....1/0 Pharmacist? ....1/0 Mobile information unit? ....1/0 Traditional art?.............1/0 None of the above ....-77 No response ....-99	009a=1
ID_ RPJM_ 307	**In the last few months, have you heard, seen, or read anything about family planning from any of the following sources?** Examples of family planning information: *Family planning methods, family planning service points, slogans "Ayo Ikut KB", KB Andalan advertisement, etc.* *Read all options aloud and select all that apply.* *Be sure to scroll to bottom to see all choices.*	Radio ....1/0 Television ....1/0 Newspaper/Tabloid.............1/0 Magazine ....1/0 Pamphlet/leaflet/brochure.............1/0 Flip chart.............1/0 Poster ....1/0 Banner ....1/0 Billboard.............1/0 Exhibition ....1/0 Internet ....1/0 FP information car unit (Mupen KB)1/0 Mural.............1/0 Traditional art?.............1/0 Puppet show...............1/0 Others ....1/0 None of the above ....-77 Don't know.............-88 No response ....-99	009a=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
	Female Questionnaire		
ID _ RPJM_ 308a	**Do you have any children between the ages of 10-19 who live with you?**	Yes .... 1 No .... 0 No response .... -99	200=1 AND 201a=1
IDE_ RPJM_ _308b	**Have you or your husband/ partner discussed the following topics with your teenage children:**	Reproductive age? .... 1/0 Sexually transmitted infection? ..... 1/0 Drugs? .... 1/0 Delay in age at marriage? .... 1/0 Issues in family planning and reproductive health? .... 1/0 Puberty? .... 1/0 None of the above .... -77 No response .... -99	ID_ RPJM__30 8=1

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

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
401a	**How old were you when you first had sexual intercourse?** *Enter the age in years.* *The respondent said she was [age from FQ1] years old at her last birthday.* *[She has had x live births.] Enter -77 if she never had sex. Enter -88 if respondent does not know. Enter -99 for no response.*	Age: [ ]	009a=1
401b	[If age at first sex <10 years:] **You have entered that the respondent was X years old when she first had sexual intercourse. Is this what she said?** *Go back and correct FQ48 if it is not correct.*	Yes .... 1 No 0	401a < 10 years and ≠ -77, -88 or -99

NO	QUESTIONS AND FILTERS	CODING CATEGORIES				Relevant if:
402	**When was the last time you had sexual intercourse?** *If less than 12 months ago, answer must be recorded in months, weeks, or days. Enter 0 days for today. You will enter a number for X on the next screen.*	DAYS AGO	WEEKS AGO	MONTHS AGO	YEARS AGO	401a ≠ -77

Section 6- Menstrual Hygiene
Now I'm going to ask you about menstrual hygiene management. This includes the use of absorbent materials; access to a private, clean, safe space; washing as required; and a place to dispose used materials

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
601	**The last time you had your period, where are all the places where you changed, washed, dried, or disposed of used sanitary materials?** PROBE: Anywhere else? *Do not read options aloud. Select all that apply.*	[Main sanitation facility from HQ... 1/0 Other household sanitation facility 1/0 Sanitation facilities at school .... 1/0 Sanitation facilities at work .... 1/0 Other public sanitation facility....... 1/0 Sleeping area/bedroom .... 1/0 Backyard....................................... 1/0 No facility/Bush/Field .... 1/0 Other... 1/0 No response .... -99	009a = 1
602a	**Where do you most often change your used pads, cloths, or other sanitary materials?** *Only record*	[Main sanitation facility from HQ... 1/0 Other household sanitation facility 1/0	More than 1 option

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
	Female Questionnaire		
	respondent's time; not anyone else's time. *[ODK will only display the options selected in 601]*	Sanitation facilities at school .... 1/0 Sanitation facilities at work .... 1/0 Other public sanitation facility .... 1/0 Sleeping area/bedroom .... 1/0 Backyard .... 1/0 No facility/Bush/Field .... 1/0 Other .... 1/0 No response .... -99	selected in 601
602b	**While managing your menstrual hygiene, was this place:** **Main place: [Selection from 601 or 602a]** *Read each option aloud and select if yes.*	Clean? .... 1/0 Private? .... 1/0 Safe? .... 1/0 Able to be locked? .... 1/0 Supplied with clean water? .... 1/0 Supplied with soap? .... 1/0 None of the above .... -77 No response .... -99	601≠-99 nor null and 602a≠-99 nor null

603	**During your last menstrual period, what did you use to collect or absorb your menstrual blood?**
	
	PROBE: Anything else?
	
	Do not read options aloud. Select all that apply.
		Reusable materials
		    Cloth/Pieces of fabric 1/0
		    Cotton wool 1/0
		    Sanitary pads 1/0
		    Foam (from a mattress or other
		    material) 1/0
		    Other 1/0
		Disposable materials
		    Tampons 1/0
		    Toilet paper 1/0
		    Paper (newspaper, pages from
		    books) 1/0
		    Natural materials (mud, dung,
		    leaves) 1/0
		No materials used .... -77
		No response .... -99
			009a = 1

604a	**Did you wash and reuse pads, cloths, or other sanitary materials during your last menstrual period?**	Yes .... 1 No .... 0 No response .... -99	603=Reusable materials
604b	**During your last menstrual period, were the sanitary materials that you washed and reused completely dried before each reuse?**	Yes .... 1 No .... 0 No response .... -99	604a=1
605	**You mentioned that you used [RESPONSES FROM 603] during your last menstrual period. Where did you dispose of these materials after use?** PROBE: Anywhere else? *Do not read options aloud. Select all that apply.*	Flush toilet .... 1/0 Latrine .... 1/0 Waste bin/Trash bag .... 1/0 Burning .... 1/0 Bush/Field .... 1/0 Other .... 1/0 No response .... -99	603=Disposable materials OR 604a=0
606	**Is there anything else that would help you manage your menstrual period that you do not usually have?** PROBE: Anything else?	I have all I need .... 1/0 Clean water .... 1/0 Soap .... 1/0 Clean absorbent materials .... 1/0 A private place 1/0	009a=1

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
	Female Questionnaire		
	Hints: Could include resources, materials, changes to your environment, etc. Do not read options aloud.	A place where I feel safe .... 1/0 More knowledge .... 1/0 A place to buy clean absorbent materials .... 1/0 A place to dry used materials .... 1/0 A place to dispose used materials 1/0 Money .... 1/0 Pain medication .... 1/0 Other .... 1/0 No response ....-99	
END OF SURVEY Thank the respondent for her time The respondent is finished, but there are still more questions for you to complete outside the home.		
096	**Location** *Take a GPS point near the entrance to the household. Record location when the accuracy is smaller than 6m.* *GPS coordinates can only be collected when outside.*	RECORD LOCATION	Always
QUESTIONNAIRE RESULT		
097	**How many times have you visited this household to interview this female respondent?**	1st time.............................. 1 2nd time.............................. 2 3rd time 3	Always
098	**In what language was this interview conducted?**	English .... 1 Indonesian language........................ 2 Traditional language........................ 3 Other 96	009a=1
099	**Questionnaire result** *Record the result of the Female Questionnaire*	Completed ....1 Not at home ....2 Postponed ....3 Refused ....4 Partly completed ....5 Incapacitated 6	Always