

INFORMED CONSENT

Hello. My name is _____ and I am working with the African Population and Health Research Center. We are conducting a survey in all slums that asks men about various health & livelihood issues. We would very much appreciate your son's participation in this survey. This information will help the government to plan services aimed at improving the wellbeing of communities like yours. Whatever information your son provides will be kept confidential and will not be shown to anyone other than members of our survey team. Participation in this survey is voluntary, and your son can choose not to answer questions he feels uncomfortable with; or he can stop the interview at any time. However, we hope that he will participate in this survey since his views are important. The interview will take between 30 to 60 minutes to complete.

100 At this time, do you want to ask me anything about the survey? YES=1; NO=2

100a May I interview your son now? YES=1; NO=2

100b Signature of interviewee: _____

100c **CHECK 100a**
PARENT/GUARDIAN AGREES PARENT/GUARDIAN DOES NOT AGREE END

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100d At this time, do you want to ask me anything about the survey? YES=1; NO=2

100e May I begin the interview now? YES=1; NO=2

100f Signature of interviewee: _____

100g **CHECK 100e**
PARENT/GUARDIAN AGREES PARENT/GUARDIAN DOES NOT AGREE END

SECTION 1. RESPONDENT'S BACKGROUND

CHECK 100a

RESPONDENT AGREES TO BE INTERVIEWED RESPONDENT DOES NOT AGREE TO BE INTERVIEWED → END

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
101	RECORD THE TIME.	HOUR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> MINUTES <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									
102	First I would like to ask some questions about you and your household. For most of the time until you were 12 years old, did you live in Nairobi, Mombasa, Kisumu, in another city or town, or in the countryside?	NAIROBI 01 MOMBASA 02 KISUMU 03 OTHER TOWN 04 COUNTRY SIDE 05 OUTSIDE KENYA 06									
103	How long have you been living in this same area continuously? IF LESS THAN 12 MONTHS, RECORD IN MONTHS	MONTHS 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> YEARS 2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> SINCE BIRTH 91 VISITOR 92									→ 106
104	Just before you moved here, where did you live?	WITHIN SAME SLUM 01 ANOTHER SLUM IN NRB 02 NON SLUM PART OF NRB 03 ANOTHER TOWN 04 RURAL VILLAGE 05 BOARDING SCHOOL 06 OUTSIDE KENYA 07 OTHER 96 (SPECIFY) _____									
105	How long did you live at the last residence? [IF MORE THAN 2 YEARS, RECORD IN YEARS]	MONTHS 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> YEARS 2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									
	CHECK HH COL 5 USUAL RESIDENT <input type="checkbox"/>	VISITOR OR IN BOARDING SCHOOL <input type="checkbox"/>	→ 106								
105A	At the time you moved here, did you join other household members, did you move with other people to start a household or did you move alone to start your own household?	JOIN EXISTING HH 1 WITH OTHERS TO START HH 2 ALONE TO START HH 3 WITH OTHERS TO RELOCATE HH 4									
105B	Why did you move from your previous place of residence? Probe: Any other?	YES NO 01 CIVIL CONFLICT 1 2 02 FOR A CHANGE 1 2 03 RENT TOO HIGH 1 2 04 LOST JOB 1 2 05 COMMUNITY UNSAFE 1 2 06 GOT MARRIED 1 2 07 DIVORCED/WIDOWED/SEPARATED . 1 2 08 POOR HOUSING 1 2 09 MOVED WITH FAMILY 1 2 96 OTHER (SPECIFY) _____									
105C	Which of the above reasons is the most important for your moving from your previous place of residence? GET CODE FROM 105B	IMPORTANT REASON <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									
105D	Why did you move to this particular community? Probe: Any other?	YES NO 01 BETTER EMPLOYMENT OPPORTUNITIES 1 2 02 BETTER HOUSING 1 2 03 GOT A JOB 1 2 04 TO JOIN FAMILY 1 2 05 GOT MARRIED 1 2 06 RENT IS CHEAP 1 2 07 COMMUNITY SAFE 1 2 08 BETTER SOCIAL AMENITIES 1 2 96 OTHER (SPECIFY) _____									
105E	Which of the above reasons is the most important for your moving to this particular slum community? GET CODE FROM 105D	IMPORTANT REASON <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>									

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																			
105F	Who made the decision for you to move to this community?	SELF 01 SPOUSE 02 SELF AND SPOUSE 03 PARENTS 04 CHILD/CHILDREN 05 OTHER RELATIVES 06 WORK UNIT 07 GOVERNMENT RESETTLEMENT 08 OTHER 96 (SPECIFY) DONT KNOW 98																																																				
106	In what month and year were you born? [IF DATE, MONTH AND YEAR ARE NOT KNOWN, RECORD 98, 98, 9998 RESPECTIVELY]	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																																																				
107	How old were you at your last birthday? COMPARE AND CORRECT 106 AND/OR 107 IF INCONSISTENT	AGE IN COMPLETED YEARS <input type="text"/> <input type="text"/>																																																				
108	Have you ever attended school?	YES 1 NO 2	→10G																																																			
108A	In what month and year did you first attend standard one? IF MONTH IS UNKNOWN ENTER '98'; IF YEAR IS UNKNOWN ENTER '9998'	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																																																				
109	What is the highest level of school you attended: primary, vocational, secondary, or higher?	PRIMARY 01 POST-PRIMARY/VOCATIONAL 02 SECONDARY/'A' LEVEL 03 COLLEGE (MIDDLE LEVEL) 04 UNIVERSITY 05																																																				
110	What is the highest (standard/form/year) you completed at that level? IF NOT COMPLETED THE FIRST CLASS AT ANY LEVEL, WRITE '00'.	STANDARD/FORM/YEAR ... <input type="text"/> <input type="text"/>																																																				
110A	CHECK 107: AGE 24 AND BELOW <input type="checkbox"/>	AGE 25 AND ABOVE <input type="checkbox"/>	→111																																																			
110B	Are you currently attending school?	YES 1 NO 2	→10D																																																			
110C	Who contributes to your school related expenses PROBE: Who else?	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr><td>01 FATHER</td><td>1</td><td>2</td></tr> <tr><td>02 MOTHER</td><td>1</td><td>2</td></tr> <tr><td>03 STEP FATHER/MOTHER</td><td>1</td><td>2</td></tr> <tr><td>04 BROTHER</td><td>1</td><td>2</td></tr> <tr><td>05 SISTER</td><td>1</td><td>2</td></tr> <tr><td>06 UNCLE</td><td>1</td><td>2</td></tr> <tr><td>07 AUNT</td><td>1</td><td>2</td></tr> <tr><td>08 GRAND PARENT</td><td>1</td><td>2</td></tr> <tr><td>09 OTHER RELATIVES</td><td>1</td><td>2</td></tr> <tr><td>10 FRIEND</td><td>1</td><td>2</td></tr> <tr><td>11 SCHOOL</td><td>1</td><td>2</td></tr> <tr><td>12 TEACHER</td><td>1</td><td>2</td></tr> <tr><td>13 NGO</td><td>1</td><td>2</td></tr> <tr><td>14 RELIGIOUS GROUP</td><td>1</td><td>2</td></tr> <tr><td>15 NO ONE/SELF</td><td>1</td><td>2</td></tr> <tr><td>96 OTHER</td><td>1</td><td>2</td></tr> </tbody> </table> (SPECIFY)		YES	NO	01 FATHER	1	2	02 MOTHER	1	2	03 STEP FATHER/MOTHER	1	2	04 BROTHER	1	2	05 SISTER	1	2	06 UNCLE	1	2	07 AUNT	1	2	08 GRAND PARENT	1	2	09 OTHER RELATIVES	1	2	10 FRIEND	1	2	11 SCHOOL	1	2	12 TEACHER	1	2	13 NGO	1	2	14 RELIGIOUS GROUP	1	2	15 NO ONE/SELF	1	2	96 OTHER	1	2	
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110D	In what month and year did you stop going to school? IF MONTH IS UNKNOWN ENTER '98'; IF YEAR IS UNKNOWN ENTER '9998'	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>																																																				

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110E	What were the reasons why you stopped attending school? PROBE: Any other?	<table border="0"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>01 GOT PREGNANT</td> <td>1</td> <td>2</td> </tr> <tr> <td>02 GOT MARRIED</td> <td>1</td> <td>2</td> </tr> <tr> <td>03 TO CARE FOR YOUNGER CHILDREN</td> <td>1</td> <td>2</td> </tr> <tr> <td>04 FAMILY NEEDED HELP ON FARM/BUSINESS</td> <td>1</td> <td>2</td> </tr> <tr> <td>05 COULD NOT PAY SCHOOL FEES ...</td> <td>1</td> <td>2</td> </tr> <tr> <td>06 NEEDED TO EARN MONEY</td> <td>1</td> <td>2</td> </tr> <tr> <td>07 COMPLETED/HAD ENOUGH SCHOOL</td> <td>1</td> <td>2</td> </tr> <tr> <td>08 DIDN'T PASS ENTRANCE EXAM</td> <td>1</td> <td>2</td> </tr> <tr> <td>09 DIDN'T LIKE SCHOOL</td> <td>1</td> <td>2</td> </tr> <tr> <td>10 SCHOOL TOO FAR/INACCESSIBLE</td> <td>1</td> <td>2</td> </tr> <tr> <td>11 PHYSICALLY/MENTALLY DISABLED</td> <td>1</td> <td>2</td> </tr> <tr> <td>12 POOR SCHOOL QUALITY</td> <td>1</td> <td>2</td> </tr> <tr> <td>13 EXPELLED</td> <td>1</td> <td>2</td> </tr> <tr> <td>14 FAMILY SEES NO ECONOMIC BENEFIT</td> <td>1</td> <td>2</td> </tr> <tr> <td>96 OTHER</td> <td>1</td> <td>2</td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">(SPECIFY)</td> </tr> <tr> <td>98 DONT KNOW</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	01 GOT PREGNANT	1	2	02 GOT MARRIED	1	2	03 TO CARE FOR YOUNGER CHILDREN	1	2	04 FAMILY NEEDED HELP ON FARM/BUSINESS	1	2	05 COULD NOT PAY SCHOOL FEES ...	1	2	06 NEEDED TO EARN MONEY	1	2	07 COMPLETED/HAD ENOUGH SCHOOL	1	2	08 DIDN'T PASS ENTRANCE EXAM	1	2	09 DIDN'T LIKE SCHOOL	1	2	10 SCHOOL TOO FAR/INACCESSIBLE	1	2	11 PHYSICALLY/MENTALLY DISABLED	1	2	12 POOR SCHOOL QUALITY	1	2	13 EXPELLED	1	2	14 FAMILY SEES NO ECONOMIC BENEFIT	1	2	96 OTHER	1	2		(SPECIFY)		98 DONT KNOW	1	2	
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110F	Which of the above reasons is the most important? [GET CODE FROM 110E]	MOST IMPORTANT REASON <input type="text"/> <input type="text"/>																																																							
110G	What were the reasons you never attended school?	<table border="0"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>01 TO CARE FOR YOUNGER CHILDREN</td> <td>1</td> <td>2</td> </tr> <tr> <td>02 TOO MANY DOMESTIC/FAMILY RESPONSIBILITIES</td> <td>1</td> <td>2</td> </tr> <tr> <td>03 FAMILY COULD NOT PAY SCHOOL FEES</td> <td>1</td> <td>2</td> </tr> <tr> <td>04 DIDN'T LIKE SCHOOL</td> <td>1</td> <td>2</td> </tr> <tr> <td>05 SCHOOL TOO FAR/INACCESSIBLE</td> <td>1</td> <td>2</td> </tr> <tr> <td>06 PHYSICALLY/MENTALLY DISABLED</td> <td>1</td> <td>2</td> </tr> <tr> <td>07 FAMILY SEES NO BENEFIT</td> <td>1</td> <td>2</td> </tr> <tr> <td>96 OTHER</td> <td>1</td> <td>2</td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">(SPECIFY)</td> </tr> <tr> <td>98 DONT KNOW</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	01 TO CARE FOR YOUNGER CHILDREN	1	2	02 TOO MANY DOMESTIC/FAMILY RESPONSIBILITIES	1	2	03 FAMILY COULD NOT PAY SCHOOL FEES	1	2	04 DIDN'T LIKE SCHOOL	1	2	05 SCHOOL TOO FAR/INACCESSIBLE	1	2	06 PHYSICALLY/MENTALLY DISABLED	1	2	07 FAMILY SEES NO BENEFIT	1	2	96 OTHER	1	2		(SPECIFY)		98 DONT KNOW	1	2																						
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110H	Which of the above reasons is the most important? [GET CODE FROM 110G]	IMPORTANT REASON <input type="text"/> <input type="text"/>																																																							
111	CHECK 109: PRIMARY, POST-PRIMARY /VOCATIONAL, <input type="checkbox"/>	SECONDARY OR HIGHER <input type="checkbox"/>	→ 113																																																						
112	Have you ever participated in a literacy program or any other program that involves learning to read or write (not including primary school)?	YES 1 NO 2																																																							
113	Do you listen to the radio almost every day, at least once a week, less than once a week or not at all?	ALMOST EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3 NOT AT ALL 4																																																							
114	Do you watch television almost every day, at least once a week, less than once a week or not at all?	ALMOST EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3 NOT AT ALL 4																																																							
115	What is your religion?	CATHOLIC 01 PROTESTANT 02 PENTECOSTAL/CHARISMATIC 03 OTHER CHRISTIAN 04 ISLAM 05 TRADITIONALIST 06 NO RELIGION 07 OTHER 96 (SPECIFY)																																																							
116	What is your ethnic group?	EMBU 01 KALENJIN 02 KAMBA 03 KIKUYU 04 KISII 05 LUHYA 06 LUO 07 MASAI 08 MERU 09 MUIKENDA/SWAHILI 10 SOMALI 11 TAITA/TAVETA 12 OTHER 96 (SPECIFY)																																																							

SECTION 2. REPRODUCTION			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
201	Now I would like to ask about any children you have had during your life. I am interested in all of the children that are biologically yours, even if they are not legally yours or do not carry your last name. Have you ever fathered any children with any woman?	YES 1 NO 2 DONT KNOW 8	→ 204
202	Do you have any sons or daughters that you have fathered who are now living with you here?	YES 1 NO 2	
203	Do you have any sons or daughters that you have fathered but who are not living with you here?	YES 1 NO 2	
204	Have you ever fathered a son or a daughter who was born alive but later died? IF NO, PROBE: Any baby who cried or showed signs of life but did not survive?	YES 1 NO 2 DONT KNOW 8	
205	In total, how many children have you fathered even if they died shortly after birth? IF NONE, RECORD '00'.	TOTAL SONS <input type="text"/> TOTAL DAUGHTERS <input type="text"/> DONT KNOW 98	
206	CHECK 205: HAS HAD MORE THAN ONE CHILD <input type="checkbox"/> HAS HAD ONLY ONE CHILD <input type="checkbox"/> HAS NOT HAD ANY CHILDREN <input type="checkbox"/>		→ 209 → 301
207	Did all of the children you have fathered have the same biological mother?	YES 1 NO 2	→ 209
208	In all, how many women have you fathered children with?	NUMBER OF WOMEN <input type="text"/> DONT KNOW 98	
209	How old were you when your (first) child was born?	AGE IN YEARS <input type="text"/>	
210	CHECK 202 & 203: AT LEAST ONE LIVING CHILD <input type="checkbox"/> NO LIVING CHILDREN <input type="checkbox"/>		→ 301
211	How old is your (youngest) child?	AGE IN YEARS <input type="text"/>	
212	CHECK 211: (YOUNGEST) CHILD IS AGE 0-3 YEARS <input type="checkbox"/> OTHER <input type="checkbox"/>		→ 301
213	What is the name of your (youngest) child? WRITE NAME OF (YOUNGEST) CHILD _____ (NAME OF (YOUNGEST) CHILD)		
214	When (NAME)'s mother was pregnant with (NAME), did she have any antenatal check-ups?	YES 1 NO 2 DONT KNOW 3	→ 216
215	Were you ever present during any of those antenatal check-ups?	PRESENT 1 NOT PRESENT 2	
216	Was (NAME) born in a hospital or health facility?	HOSPITAL/HEALTH FACILITY 1 OTHER 2	→ 221
217	What was the main reason why (NAME)'s mother did not deliver in a hospital or health facility?	COST TOO MUCH 01 FACILITY CLOSED 02 TOO FAR/NO TRANSPORTATION 03 DONT TRUST FACILITY/POOR QUALITY SERVICE 04 NO FEMALE PROVIDER 05 NOT THE FIRST CHILD 06 CHILD'S MOTHER DID NOT THINK IT WAS NECESSARY 07 HE DID NOT THINK IT WAS NECESSARY 08 FAMILY DID NOT THINK IT WAS NECESSARY 09 OTHER 96 (SPECIFY) DONT KNOW 98	
218	When a child has diarrhea, how much fluid should he or she be given to drink: more than usual, the same amount as usual, less than usual, or should he or she not be given anything to drink at all?	MORE THAN USUAL 1 ABOUT THE SAME 2 LESS THAN USUAL 3 NOTHING TO DRINK 4 DONT KNOW 8	

SECTION 3. CONTRACEPTION

301	<p>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.</p> <p>SELECT 'YES' IN 301 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 301, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. SELECT 'YES' IF METHOD IS RECOGNIZED, AND 'NO' IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH 'YES' SELECTED IN 301, ASK 302. FOR METHODS WITH 'YES' SELECTED IN 302, PROCEED TO 303 & 304.</p>				
01	<p>FEMALE STERILIZATION Women can have an operation to avoid having any more children.</p>	<p>YES 1 NO 2 ↘</p>	<p>Have you or your partner ever used (METHOD)?</p> <p>Have you ever had a partner who had an operation to avoid having any more children?</p> <p>YES 1 NO 2</p>		<p>304 CHECK 201: IF YES, ASK: How many children did you have when you first used (METHOD)?</p>
02	<p>MALE STERILIZATION Men can have an operation to avoid having any more children</p>	<p>YES 1 NO 2 ↘</p>	<p>Have you ever had an operation to avoid having any more children?</p> <p>YES 1 NO 2</p>	<p>AGE <input type="text"/> <input type="text"/></p>	<p>NUMBER <input type="text"/> <input type="text"/></p>
03	<p>PILL Women can take a pill every day to avoid becoming pregnant.</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
04	<p>IUD Women can have a loop or coil placed inside them by a doctor or a nurse.</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
05	<p>INJECTABLES Women can have an injection by a health provider that stops them from becoming pregnant for one or more months.</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
06	<p>IMPLANTS Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for one or more years.</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
07	<p>CONDOM Men can put a rubber sheath on their penis before sexual intercourse.</p>	<p>YES 1 NO 2 ↘</p>	<p>Have you ever used a condom?</p> <p>YES 1 NO 2</p>	<p>AGE <input type="text"/> <input type="text"/></p>	<p>NUMBER <input type="text"/> <input type="text"/></p>
08	<p>FEMALE CONDOM Women can place a sheath in their vagina before sexual intercourse.</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
09	<p>LACTATIONAL AMENORRHEA METHOD (LAM)</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
10	<p>RHYTHM METHOD Every month that a woman is sexually active she can avoid pregnancy by not having sexual intercourse on the days of the month she is most likely to get pregnant.</p>	<p>YES 1 NO 2 ↘</p>	<p>Have you and your partner ever used rhythm method?</p> <p>YES 1 NO 2</p>	<p>AGE <input type="text"/> <input type="text"/></p>	<p>NUMBER <input type="text"/> <input type="text"/></p>
11	<p>WITHDRAWAL Men can be careful and pull out before climax.</p>	<p>YES 1 NO 2 ↘</p>	<p>Have you ever used the withdrawal method?</p> <p>YES 1 NO 2</p>	<p>AGE <input type="text"/> <input type="text"/></p>	<p>NUMBER <input type="text"/> <input type="text"/></p>
12	<p>EMERGENCY CONTRACEPTION As an emergency measure after sexual intercourse, women can take special pills at any time within 5 days to prevent pregnancy.</p>	<p>YES 1 NO 2 ↘</p>	<p>YES 1 NO 2</p>		
13	<p>Have you heard of any other ways or methods that women or men can use to avoid pregnancy?</p>	<p>YES 1</p>	<p>Have you ever used this method?</p> <p>YES 1 NO 2</p>	<p>AGE <input type="text"/> <input type="text"/></p>	<p>NUMBER <input type="text"/> <input type="text"/></p>
	<p>_____</p> <p>NO 2</p>	<p>YES 1 NO 2</p>			

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305	CHECK 302: AT LEAST ONE "YES" <input type="checkbox"/> (EVER USED) NOT A SINGLE "YES" <input type="checkbox"/> (NEVER USED) →		310																																																
306	Are you currently doing something or using any method with any partner to delay or avoid a pregnancy?	YES 1 NO 2	→ 310																																																
307	Which method are you using? CIRCLE ALL MENTIONED. IF MORE THAN ONE METHOD MENTIONED, FOLLOW SKIP INSTRUCTION FOR HIGHEST METHOD IN LIST.	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>A FEMALE STERILIZATION</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>B MALE STERILIZATION</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>C IUD</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>D INJECTABLES</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>E IMPLANTS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>F PILL</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>G CONDOM</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>H FEMALE CONDOM</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>I DIAPHRAGM</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>J FOAM/JELLY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>K LACTATIONAL AMENORRHEA (LAM)</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>L RHYTHM METHOD</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>M WITHDRAWAL</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>X OTHER _____</td> <td></td> <td></td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">(SPECIFY)</td> </tr> </tbody> </table>		YES	NO	A FEMALE STERILIZATION	1	2	B MALE STERILIZATION	1	2	C IUD	1	2	D INJECTABLES	1	2	E IMPLANTS	1	2	F PILL	1	2	G CONDOM	1	2	H FEMALE CONDOM	1	2	I DIAPHRAGM	1	2	J FOAM/JELLY	1	2	K LACTATIONAL AMENORRHEA (LAM)	1	2	L RHYTHM METHOD	1	2	M WITHDRAWAL	1	2	X OTHER _____				(SPECIFY)		→ 309 → 309 → 309
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308	Does your wife/partner know that you are using a method of family planning?	YES 1 NO 2 DON'T KNOW 8																																																	
309	Would you say that using contraception is mainly your decision, mainly your wife's/partner's decision, or did you both decide together?	MAINLY RESPONDENT 1 MAINLY WIFE/PARTNER 2 JOINT DECISION 3 OTHER 6 (SPECIFY)																																																	
310	Now I would like to ask you about a woman's risk of pregnancy. From one menstrual period to the next, are there certain days when a woman is more likely to become pregnant if she has sexual relations?	YES 1 NO 2 DON'T KNOW 8	→ 312																																																
311	Is this 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 2 PERIODS 4 OTHER 6 (SPECIFY) DON'T KNOW 8																																																	
312	Do you think that a woman who is breastfeeding her baby can become pregnant?	YES 1 NO 2 DEPENDS 3 DON'T KNOW 8																																																	
313	I will now read you some statements about contraception. Please tell me if you agree or disagree with each one.	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">AGREE</th> <th style="text-align: center;">DIS-AGREE</th> <th style="text-align: center;">DK</th> </tr> </thead> <tbody> <tr> <td>a) Contraception is women's business only</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>b) Contraception is a man's business only</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>c) Contraception is a couple's business</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>d) The extended family has a role in a couple's decision making about contraception</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>e) Women who use contraception may become promiscuous.</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </tbody> </table>		AGREE	DIS-AGREE	DK	a) Contraception is women's business only	1	2	8	b) Contraception is a man's business only	1	2	8	c) Contraception is a couple's business	1	2	8	d) The extended family has a role in a couple's decision making about contraception	1	2	8	e) Women who use contraception may become promiscuous.	1	2	8																									
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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																																		
314	CHECK 301 (07) KNOWS MALE CONDOM YES <input type="checkbox"/> NO <input type="checkbox"/>		401																																																																		
315	Do you know of a place where a person can get male condoms?	YES 1 NO 2	→ 401																																																																		
316	Where is that? Any other place? PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. IF UNABLE TO DETERMINE IF HOSPITAL, HEALTH CENTER OR CLINIC IS PUBLIC OR PRIVATE MEDICAL, WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE(S))	<table border="0"> <tr> <td></td> <td style="text-align: right;">Y</td> <td style="text-align: right;">N</td> </tr> <tr> <td colspan="3">PUBLIC SECTOR</td> </tr> <tr> <td>GOVT. HOSPITAL</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>GOVT. HEALTH CENTER</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>GOVERNMENT DISPENSARY</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>OTHER PUBLIC</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">(SPECIFY)</td> </tr> <tr> <td colspan="3">PRIVATE SECTOR</td> </tr> <tr> <td>FAITH-BASED, CHURCH, MISSION HOSPITAL / CLINIC</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>FHOK/FPAK HEALTH CENTER/CLINIC</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>PRIVATE HOSPITAL/CLINIC</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>PHARMACY/CHEMIST</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>NURSING/MATERNITY HOME</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>OTHER PRIV. MEDICAL</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">(SPECIFY)</td> </tr> <tr> <td colspan="3">OTHER SOURCE</td> </tr> <tr> <td>MOBILE CLINIC</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>COMMUNITY-BASED DISTRIBUTOR</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>SHOP</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>FRIEND/RELATIVE</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>OTHER</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td></td> <td colspan="2" style="text-align: center;">(SPECIFY)</td> </tr> </table>		Y	N	PUBLIC SECTOR			GOVT. HOSPITAL	1	2	GOVT. HEALTH CENTER	1	2	GOVERNMENT DISPENSARY	1	2	OTHER PUBLIC	1	2		(SPECIFY)		PRIVATE SECTOR			FAITH-BASED, CHURCH, MISSION HOSPITAL / CLINIC	1	2	FHOK/FPAK HEALTH CENTER/CLINIC	1	2	PRIVATE HOSPITAL/CLINIC	1	2	PHARMACY/CHEMIST	1	2	NURSING/MATERNITY HOME	1	2	OTHER PRIV. MEDICAL	1	2		(SPECIFY)		OTHER SOURCE			MOBILE CLINIC	1	2	COMMUNITY-BASED DISTRIBUTOR	1	2	SHOP	1	2	FRIEND/RELATIVE	1	2	OTHER	1	2		(SPECIFY)		
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317	If you wanted to, could you yourself get a male condom?	YES 1 NO 2																																																																			

SECTION 4. MARRIAGE AND SEXUAL ACTIVITY																		
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP															
400	PRESENCE OF OTHERS AT THIS POINT	<table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>CHILDREN UNDER 10</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>WIFE/PARTNER</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>OTHER MALES</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>OTHER FEMALES</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> </table>		YES	NO	CHILDREN UNDER 10	1	2	WIFE/PARTNER	1	2	OTHER MALES	1	2	OTHER FEMALES	1	2	
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401	Are you currently married or living together with a woman as if married?	YES, CURRENTLY MARRIED 1 YES, LIVING WITH A WOMAN 2 NO, NOT IN UNION 3	} → 404															
401A	Do you currently have a regular sexual partner, an occasional sexual partner or no sexual partner at all?	REGULAR SEXUAL PARTNER 1 OCCASIONAL SEXUAL PARTNER 2 NO SEXUAL PARTNER 3																
402	Have you ever been married or lived together with a woman as if married?	YES, FORMERLY MARRIED 1 YES, LIVED WITH A WOMAN 2 NO 3	} → 411															
403	What is your marital status now: are you widowed, divorced, or separated?	WIDOWED 1 DIVORCED 2 SEPARATED 3	} → 408															
404	Is your wife/partner living with you now or is she staying elsewhere?	LIVING WITH HIM 1 STAYING ELSEWHERE 2																
405	Do you have more than one wife or woman you live with as if married?	YES 1 NO 2	} → 407															
406	Altogether, how many wives do you have or other partners do you live with as if married?	TOTAL NUMBER OF WIVES AND LIVE-IN PARTNERS ... <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>																
407	CHECK 405 & 406: <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;">ONE WIFE/ PARTNER <input style="width: 20px;" type="checkbox"/></div> <div style="text-align: center;">MORE THAN ONE WIFE/ PARTNER <input style="width: 20px;" type="checkbox"/></div> </div>		} → 409															
408	Have you been married or lived with a woman only once or more than once?	ONLY ONCE 1 MORE THAN ONCE 2																
409	In what month and year did you start living with your (wife/partner)? FOR MEN WITH MORE THAN ONE WIFE/LIVE-IN PARTNERS ASK ABOUT THE MONTH AND YEAR HE STARTED LIVING WITH HIS FIRST WIFE/PARTNER.	MONTH <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> DON'T KNOW MONTH 98 YEAR <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> DON'T KNOW YEAR 9998	} → 411															
410	How old were you when you first started living with her?	AGE <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/>																
CHECK FOR THE PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.																		
411	Now I would like to ask you some questions about sexual activity in order to gain a better understanding of some important life issues. How old were you when you had sexual intercourse for the very first time? (ONLY ONE RESPONSE ALLOWED)	NEVER HAD SEXUAL INTERCOURSE 01 AGE IN YEARS <input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> FIRST TIME WHEN STARTED LIVING WITH (FIRST) WIFE/PARTNER 94 DON'T KNOW 98	} → 414															
412	CHECK 107: AGE <input style="width: 20px;" type="checkbox"/> 12-24 AGE <input style="width: 20px;" type="checkbox"/> 25-54		} → 421															
413	Do you intend to wait until you get married to have sexual intercourse for the first time?	YES 1 NO 2 DON'T KNOW/UNSURE 8	} → 501															

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
414	CHECK 107: AGE <input type="checkbox"/> 12-24 AGE <input type="checkbox"/> 25-54		→ 421
415	The <u>first</u> time you had sexual intercourse, was a condom used?	YES 1 NO 2 DONT KNOW/DONT REMEMBER ... 8	
416	How old was the person you first had sexual intercourse with?	AGE OF PARTNER <input type="text"/> <input type="text"/> DONT KNOW 98	→ 419
417	Was this person older than you, younger than you, or about the same age as you?	OLDER 1 YOUNGER 2 ABOUT THE SAME AGE 3 DONT KNOW/DONT REMEMBER ... 8	→ 419
418	Would you say this person was ten or more years older than you or less than ten years older than you?	TEN OR MORE YEARS OLDER 1 LESS THAN TEN YEARS OLDER ... 2 OLDER, UNSURE HOW MUCH 3 TEN OR MORE YEARS YOUNGER ... 4 LESS THAN TEN YEARS YOUNGER ... 5 YOUNGER, UNSURE HOW MUCH ... 6	
419	How was this person related to you at the time you first had sex with her?	WIFE 01 LIVE-IN PARTNER 02 TOTAL STRANGER 03 GIRLFRIEND NOT LIVING WITH <input type="checkbox"/> RESPONDENT 04 AUNT 05 COUSIN 06 OTHER RELATIVE 07 HOUSE GIRL 08 NEIGHBOUR 09 CLASSMATE 10 TEACHER 11 RELIGIOUS LEADER 12 SEX WORKER 13 OTHER 96 (SPECIFY)	
420	What were the circumstances of your first sexual intercourse?	WAS FORCED INTO IT 01 TO SHOW LOVE 02 WAS TRICKED INTO IT 03 WANTED TO KNOW HOW IT FEELS ... 04 WANTED TO BE LIKE SOME OF MY FRIENDS 05 NEEDED MONEY 06 NEEDED MATERIAL BENEFITS 07 OTHER 96 (SPECIFY)	
421	Now I would like to talk about the last time you had sexual intercourse How was this person related to you at the time you last had sex with her? IF RESPONDENT SAYS 'GIRLFRIEND', ASK: Were you living together as if married? [IF ANSWER IS YES CIRCLE CODE 03]	ONLY HAD SEX ONCE 01 WIFE 02 LIVE-IN PARTNER 03 TOTAL STRANGER 04 GIRLFRIEND NOT LIVING WITH <input type="checkbox"/> RESPONDENT 05 AUNT 06 COUSIN 07 OTHER RELATIVE 08 HOUSE GIRL 09 NEIGHBOUR 10 CLASSMATE 11 TEACHER 12 RELIGIOUS LEADER 13 SEX WORKER 14 OTHER 96 (SPECIFY)	→ 427
422	When was the last time you had sexual intercourse? IF LESS THAN 12 MONTHS, ANSWER MUST BE RECORDED IN DAYS, WEEKS OR MONTHS. IF 12 MONTHS (ONE YEAR) OR MORE, ANSWER MUST BE RECORDED IN YEARS.	DAYS AGO 1 <input type="text"/> <input type="text"/> WEEKS AGO 2 <input type="text"/> <input type="text"/> MONTHS AGO 3 <input type="text"/> <input type="text"/> YEARS AGO 4 <input type="text"/> <input type="text"/>	
423	How old was the person you last had sexual intercourse with? PROBE TO GET APPROXIMATE AGE CIRCLE 98 IF AGE IS NOT KNOWN	AGE OF PERSON <input type="text"/> <input type="text"/> DONT KNOW 98	→ 426

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																			
424	Was this person older than you, younger than you, or about the same age as you?	OLDER 1 YOUNGER 2 ABOUT THE SAME AGE 3 DON'T KNOW/DON'T REMEMBER ... 8	→ 426																																			
425	Would you say this person was ten or more years older than you or less than ten years older than you?	TEN OR MORE YEARS OLDER 1 LESS THAN TEN YEARS OLDER ... 2 OLDER, UNSURE HOW MUCH 3 TEN OR MORE YEARS YOUNGER ... 4 LESS THAN TEN YEARS YOUNGER ... 5 YOUNGER, UNSURE HOW MUCH ... 6																																				
426	CHECK 301: MENTIONED <input type="checkbox"/> DID NOT MENTION <input type="checkbox"/> CONDOM The last time you had sex was a condom used? Some men use a condom i.e. a rubber sheath on their penis during sexual intercourse. The last time you had sex was a condom used?	YES 1 NO 2 DONT KNOW 8																																				
427	CHECK 401: CURRENTLY MARRIED/ LIVING WITH A WOMAN <input type="checkbox"/> NOT IN UNION <input type="checkbox"/> Sometimes a man may have sex with another woman because circumstances force him to do so, or simply because he likes the other woman.		→ 430																																			
428	Have you had sex with anyone other than (your wife/the woman you are living with) in the last 12 months?	YES 1 NO 2	→ 430																																			
429	In the last 12 months, how many different persons have you had sex with?	NUMBER OF PEOPLE <input type="text"/> <input type="text"/> REFUSED TO ANSWER 97 DONT KNOW 98																																				
430	In your lifetime , how many different women have you had sex with? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS GREATER THAN 95, WRITE '95'.	NUMBER OF LIFETIME <input type="text"/> <input type="text"/> PARTNERS REFUSED TO ANSWER 97 DONT KNOW 98																																				
431	Now I am going to read you a series of statements. After I read each statement, please tell me whether you agree with the statement, disagree with it or have no opinion one way or the other. i) If you ask your partner to use a condom, she would get angry or violent. ii) If you ask your partner to use a condom, she would think you are having sex with other people. iii) Using a condom is a sign of not trusting your partner iv) Your partner might be having sex with someone else. v) When you and your partner disagree, she gets her way most of the time	<table border="0"> <tr> <td></td> <td>AGREE</td> <td>DISAGREE</td> <td>NO</td> <td>OPINION</td> </tr> <tr> <td>i)</td> <td>1</td> <td>2</td> <td>3</td> <td>3</td> </tr> <tr> <td>ii)</td> <td>1</td> <td>2</td> <td>3</td> <td>3</td> </tr> <tr> <td>iii)</td> <td>1</td> <td>2</td> <td>3</td> <td>3</td> </tr> <tr> <td>iv)</td> <td>1</td> <td>2</td> <td>3</td> <td>3</td> </tr> <tr> <td>v)</td> <td>1</td> <td>2</td> <td>3</td> <td>3</td> </tr> </table>		AGREE	DISAGREE	NO	OPINION	i)	1	2	3	3	ii)	1	2	3	3	iii)	1	2	3	3	iv)	1	2	3	3	v)	1	2	3	3						
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432	Now, I am going to ask you a series of questions. After I ask each question please tell me whether it is your partner, whether it is both of you equally or whether it is just you. i) Who usually has more say about whether you have sex? ii) In general, who do you think has more power in your relationship? iii) Who usually has more say about whether you use condoms? iv) Who usually has more say when you talk about using family planning? v) Who usually has more say when you talk about the number of children you should have?	<table border="0"> <tr> <td></td> <td>YOUR</td> <td>BOTH</td> <td>YOU</td> <td>N/A</td> </tr> <tr> <td></td> <td>PARTNER</td> <td>EQUALLY</td> <td></td> <td></td> </tr> <tr> <td>i)</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>ii)</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>iii)</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>iv)</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>v)</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> </table>		YOUR	BOTH	YOU	N/A		PARTNER	EQUALLY			i)	1	2	3	4	ii)	1	2	3	4	iii)	1	2	3	4	iv)	1	2	3	4	v)	1	2	3	4	
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v)	1	2	3	4																																		
433	In the past 12 months, have you ever paid or received money or gifts in exchange for sex?	YES 1 NO 2																																				

SECTION 5. FERTILITY PREFERENCES			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
501	CHECK 405: ONE OR MORE WIVES/PARTNERS <input type="checkbox"/>	QUESTION NOT ASKED <input type="checkbox"/>	→ 508
502	CHECK 302: MAN NOT STERILIZED <input type="checkbox"/> MAN STERILIZED <input type="checkbox"/>		→ 508
503	Is your wife/partner or are any of your wives/partners currently pregnant?	YES 1 NO 2 DONT KNOW 8	
504	NO WIFE/PARTNER PREGNANT OR DONT KNOW <input type="checkbox"/> Now I have some questions about the future. Would you like to have (a/another) child, or would you prefer not to have any (more) children?	WIFE(WIVES)/PARTNER(S) PREGNANT <input type="checkbox"/> Now I have some questions about the future. After the child(ren) you and your (wife(wives)/partner(s)) 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/NONE 2 COUPLE INFECUND 3 WIFE (WIVES)/PARTNER(S) STERILIZED 4 UNDECIDED/DONT KNOW 8 → 508
505	CHECK 407: ONE WIFE/PARTNER <input type="checkbox"/>	MORE THAN ONE WIFE/PARTNER <input type="checkbox"/>	→ 507
506	CHECK 503: WIFE/PARTNER NOT PREGNANT OR DONT KNOW <input type="checkbox"/> How long would you like to wait from now before the birth of (a/another) child?	WIFE/PARTNER PREGNANT <input type="checkbox"/> After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?	MONTHS 1 <input type="text"/> <input type="text"/> YEARS 2 <input type="text"/> <input type="text"/> SOON/NOW 993 COUPLE INFECUND 994 OTHER 996 (SPECIFY) DONT KNOW 998 → 508
507	How long would you like to wait from now before the birth of (a/another) child?	MONTHS 1 <input type="text"/> <input type="text"/> YEARS 2 <input type="text"/> <input type="text"/> SOON/NOW 993 HE/ALL HIS WIVES/PARTNERS ARE INFECUND 994 OTHER 996 (SPECIFY) DONT KNOW 998	
508	CHECK 202 AND 203: HAS LIVING CHILDREN <input type="checkbox"/> NO LIVING CHILDREN <input type="checkbox"/> 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? PROBE FOR A NUMERIC RESPONSE.	If you could choose exactly the number of children to have in your whole life, how many would that be?	NONE 00 → 510 NUMBER <input type="text"/> <input type="text"/> OTHER 96 → 510 (SPECIFY)
509	How many of these children would you like to be boys, how many would you like to be girls and for how many would the sex not matter?	NUMBER: BOYS <input type="text"/> <input type="text"/> GIRLS <input type="text"/> <input type="text"/> EITHER <input type="text"/> <input type="text"/> OTHER 96 (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP												
510	In the last one month have you: Heard about family planning on the radio? Seen about family planning on the television? Read about family planning in a newspaper, poster or magazine?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td></td> <td style="text-align: right;">YES</td> <td style="text-align: right;">NO</td> </tr> <tr> <td>RADIO</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>TELEVISION</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> <tr> <td>NEWSPAPER, POSTER OR MAGAZINE</td> <td style="text-align: right;">1</td> <td style="text-align: right;">2</td> </tr> </table>		YES	NO	RADIO	1	2	TELEVISION	1	2	NEWSPAPER, POSTER OR MAGAZINE	1	2	
	YES	NO													
RADIO	1	2													
TELEVISION	1	2													
NEWSPAPER, POSTER OR MAGAZINE	1	2													
511	Now I want to ask you about your wife's/partner's views on family planning. Do you think that your wife/partner approves or disapproves of couples using a method to avoid pregnancy?	APPROVES 1 DISAPPROVES 2 DOES NOT KNOW 8													
512	How often have you talked to your husband/partner about family planning in the past year?	NEVER 1 ONCE OR TWICE 2 MORE OFTEN 8													
513	CHECK 302C: NEITHER <input type="checkbox"/> STERILIZED ↓ HE OR SHE <input type="checkbox"/> STERILIZED →		601												
514	Does your wife/partner want the same number of children that you want, or does she want more or fewer than you want?	SAME NUMBER 1 MORE CHILDREN 2 FEWER CHILDREN 3 DONT KNOW 8													

SECTION 6. EMPLOYMENT AND GENDER ROLES			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	Have you done any work in the last seven days?	YES 1 NO 2	→ 604
602	Although you did not work in the last seven days, do you have any job or business from which you were absent for leave, illness, vacation, or any other such reason?	YES 1 NO 2	→ 604
603	Have you done any work in the last 12 months?	YES 1 NO 2	→ 613
604	What is your main income generating activity?	_____ <input type="text"/> _____ _____	
605	CHECK 604: WORKS IN AGRICULTURE <input type="checkbox"/> ↓ DOES NOT WORK IN AGRICULTURE <input type="checkbox"/>		→ 607
606	Do you work mainly on your own land or on family land, or do you work on land that you rent from someone else, or do you work on someone else's land?	OWN LAND 1 FAMILY LAND 2 RENTED LAND 3 SOMEONE ELSE'S LAND 4	
607	Are you self-employed or do you do this work for a member of your family or for someone else?	SELF-EMPLOYED 1 FOR FAMILY MEMBER 2 FOR SOMEONE ELSE 3	
608	Do you usually work throughout the year, or do you work seasonally, or only once in a while?	THROUGHOUT THE YEAR 1 SEASONALLY/PART OF THE YEAR 2 ONCE IN A WHILE 3	
609	Are you paid in cash or kind for this work or are you not paid at all?	CASH ONLY 1 CASH AND KIND 2 IN KIND ONLY 3 NOT PAID 4	
609a	How much do you earn for this work per month? Is it: 01 Less than 1000 shillings? 02 1000-3000 shillings? 03 3001-4000 shillings? 04 4001-5000 shillings? 05 5001-10000 shillings? 06 More than 10000 shillings?	_____ <input type="text"/> _____	
610	CHECK 407: ONE OR MORE WIVES/PARTNERS <input type="checkbox"/> ↓ QUESTION NOT ASKED <input type="checkbox"/>		→ 613
611	CHECK 609: CODE 1 OR 2 CIRCLED <input type="checkbox"/> ↓ OTHER <input type="checkbox"/>		→ 613
612	Who usually decides how the money you earn will be used: mainly you, mainly your (wife (wives)/partner(s)), or you and your (wife (wives)/partner(s)) jointly?	RESPONDENT 01 WIFE(WIVES)/PARTNER(S) 02 RESPONDENT AND WIFE (WIVES)/ PARTNER(S) JOINTLY 03 SOMEONE ELSE 04 JOINTLY WITH SOMEONE ELSE 05 OTHER 96 SPECIFY _____	

SECTION 7. HIV/AIDS AND OTHER STIs			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	Now I would like to talk about something else. Have you heard about diseases that can be transmitted through sex?	YES 1 NO 2	→ 713
702	Which diseases have you heard of?	YES NO SYPHILIS 1 2 GONORRHEA 1 2 HIV/AIDS 1 2 GENITAL WARTS 1 2 OTHER _____ (SPECIFY) OTHER _____ (SPECIFY)	
703	CHECK 411: HAS HAD SEXUAL INTERCOURSE <input type="checkbox"/> HAS NEVER HAD SEXUAL INTERCOURSE <input type="checkbox"/>		→ 713
704	During the last 12 months, did you have any of these diseases?	YES 1 NO 2	→ 712
705	Which of the diseases did you have? PROBE: ANY OTHER? CIRCLE ALL RESPONSES	YES NO SYPHILIS 1 2 GONORRHEA 1 2 HIV/AIDS 1 2 GENITAL WARTS 1 2 OTHER _____ (SPECIFY) OTHER _____ (SPECIFY)	
706	The last time you had (DISEASE(S) FROM 705) did you seek advice or treatment?	YES 1 NO 2	→ 708
707	Where did you seek advice or treatment?	YES NO PUBLIC SECTOR GOVT. HOSPITAL 1 2 GOVT. HEALTH CENTER 1 2 GOVT. DISPENSARY 1 2 PRIVATE SECTOR MISSION HOSP/CLINIC 1 2 OTHER PRIVATE HOS/CLINIC ... 1 2 PHARMACY 1 2 PRIVATE DOCTOR 1 2 MOBILE CLINIC 1 2 COMM. BASED DISTRIBUTOR ... 1 2 COMM. HEALTH WORKER 1 2 OTHER SOURCE 1 2 SHOP 1 2 HERBALIST/TRAD. PRACT. 1 2 RELATIVE/FRIEND 1 2 OTHER _____ 1 2 (SPECIFY) 1 2 DON'T KNOW 1 2	→ 709
708	Why did you not seek treatment	HAD NO MONEY 1 DIDN'T KNOW WHERE TO GO 2 DIDN'T WANT ANYONE TO KNOW ... 3 SELF MEDICATION/KNEW WHAT TO DO 4 OTHER _____ 6 (SPECIFY)	
709	When you had (DISEASE(S) FROM 705) did you inform your partner(s)?	YES 1 NO 2	
710	When you had (DISEASE(S) FROM 705) did you do something not to infect your partner(s)?	YES 1 NO 2 PARTNER ALREADY INFECTED 3	→ 712

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
711	What did you do? ANY OTHER?	YES NO NO SEXUAL INTERCOURSE ... 1 2 USED CONDOMS 1 2 TOOK MEDICINES 1 2 OTHER _____ (SPECIFY)	
712	CHECK 702: DID NOT MENTION <input type="checkbox"/> MENTIONED <input type="checkbox"/> HIV/AIDS HIV/AIDS		716
713	Now I would like to talk about something else. Have you ever heard of an illness called AIDS?	YES 1 NO 2	724
714	Where did you hear/learn about HIV/AIDS? PROBE: Anywhere else??	YES NO RADIO 1 2 TV 1 2 NEWSPAPERS/MAGAZINES 1 2 PAMPHLETS/POSTERS 1 2 HEALTH WORKERS 1 2 MOSQUES/CHURCHES 1 2 SCHOOLS/TEACHERS 1 2 COMMUNITY MEETINGS 1 2 FRIENDS/RELATIVES 1 2 WORK PLACE 1 2 DRAMA/PERFORMANCE 1 2 OTHER _____ (SPECIFY)	
715	How can a person get HIV/AIDS? PROBE: Any other way? RECORD ALL MENTIONED	YES NO SEXUAL INTERCOURSE 1 2 SEX WITH MULTIPLE PARTNERS ... 1 2 SEX WITH PROSTITUTES 1 2 SEX WITH INFECTED PERSON 1 2 NOT USING CONDOM 1 2 HOMOSEXUAL CONTACT 1 2 MOTHER TO CHILD 1 2 BLOOD TRANSFUSION 1 2 SHARING RAZOR BLADES 1 2 INJECTIONS 1 2 KISSING 1 2 MOSQUITO BITES 1 2 OTHER _____ (SPECIFY) OTHER _____ (SPECIFY)	
716	Is there anything a person can do to avoid getting HIV/AIDS or the virus?	YES 1 NO 2 DONT KNOW 8	718
717	What can a person do? Anything else? CIRCLE ALL MENTIONED	YES NO LIMIT NUMBER OF SEX PARTNERS 1 2 USE CONDOMS 1 2 ABSTAIN FROM SEX 1 2 REMAIN FAITHFUL TO PARTNER ... 1 2 AVOID SEX WITH PROSTITUTES ... 1 2 AVOID SEX WITH PERSONS WHO _____ HAVE MANY PARTNERS 1 2 AVOID SEX WITH HOMOSEXUALS 1 2 AVOID SEX WITH DRUG USERS ... 1 2 AVOID BLOOD TRANSFUSIONS ... 1 2 AVOID INJECTIONS 1 2 AVOID SHARING RAZORS/BLADES 1 2 AVOID KISSING 1 2 SEEK PROTECTION FROM _____ TRADITIONAL HEALER 1 2 OTHER _____ 1 2 (SPECIFY) DONT KNOW 1 2	
718	Is it possible for a healthy-looking person to have the AIDS virus?	YES 1 NO 2 DONT KNOW 8	
719	Can the virus that causes AIDS be transmitted from a mother to her baby: a) During pregnancy? b) During delivery? c) By breastfeeding?	YES NO DK a) DURING PREG. 1 2 8 b) DURING DELIVERY ... 1 2 8 c) BREASTFEEDING ... 1 2 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
720	Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had the AIDS virus?	YES 1 NO 2 DONT KNOW 8	
721	If a member of your family got infected with the AIDS virus, would you want it to remain a secret or not?	YES, REMAIN A SECRET 1 NO 2 DK/NOT SURE/DEPENDS 8	
722	If a member of your family became sick with AIDS, would you be willing to care for her or him in your own household?	YES 1 NO 2 DK/NOT SURE/DEPENDS 8	
723	In your opinion, if a teacher has the AIDS virus but is not sick, should he/she be allowed to continue teaching in the school?	SHOULD BE ALLOWED 1 SHOULD NOT BE ALLOWED 2 DONT KNOW/NOT SURE 8	
724	Husband and wives do not always agree on everything. If a wife knows her husband has a disease that she can get during sexual intercourse, is she justified in refusing to have sex with him?	YES 1 NO 2 DONT KNOW 8	
725	If a wife knows her husband has a disease that she can get during sexual intercourse, is she justified in asking that they use a condom when they have sex?	YES 1 NO 2 DONT KNOW 8	
726	Is a wife justified in refusing to have sex with her husband when she is tired or not in the mood?	YES 1 NO 2 DONT KNOW 8	
727	Is a wife justified in refusing to have sex with her husband when she knows her husband has sex with women other than his wife/wives?	YES 1 NO 2 DONT KNOW 8	
728	Can AIDS be cured?	YES 1 NO 2 DONT KNOW 8	
729	Do you personally know someone who has HIV/AIDS or has died of AIDS?	YES 1 NO 2 DONT KNOW 8	
730	Do you think your chances of getting HIV/AIDS are small, moderate, great or you have no risk at all?	SMALL 1 MODERATE 2 GREAT 3 NO RISK AT ALL 4 DONT KNOW 8	732 733
731	Why do you think you have NO RISK/A SMALL CHANCE of getting AIDS? Any other reasons?	YES NO ABSTAIN FROM SEX 1 2 USE CONDOMS 1 2 HAVE ONLY ONE SEX PARTNER ... 1 2 LIMITED # OF SEX PARTNERS 1 2 SPOUSE HAS NO OTHER PARTNER 1 2 NO HOMOSEXUAL CONTACT 1 2 NO BLOOD TRANSFUSIONS 1 2 NO INJECTIONS 1 2 OTHER 1 2 (SPECIFY)	733
732	Why do you think you have a MODERATE/GREAT chance of getting AIDS? Any other reasons?	YES NO DO NOT USE CONDOMS 1 2 MORE THAN ONE PARTNER 1 2 MAY SEX PARTNERS 1 2 SPOUSE HAS OTHER PARTNERS ... 1 2 HOMOSEXUAL CONTACT 1 2 HAD BLOOD TRANSFUSION 1 2 HAD INJECTIONS 1 2 SUSPECT SPOUSE HAS APARTNER 1 2 OTHER 1 2 (SPECIFY)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																										
733	<p>Since you heard of AIDS, have you changed your behaviour to avoid getting AIDS?</p> <p>IF YES: What did you do?</p>	<table> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>DIDN'T START SEX</td> <td>1</td> <td>2</td> </tr> <tr> <td>STOPPED ALL SEX</td> <td>1</td> <td>2</td> </tr> <tr> <td>STARTED USING CONDOMS</td> <td>1</td> <td>2</td> </tr> <tr> <td>RESTRICTED SEX TO ONE PARTNER</td> <td>1</td> <td>2</td> </tr> <tr> <td>REDUCED NUMBER OF PARTNERS</td> <td>1</td> <td>2</td> </tr> <tr> <td>ASK SPOUSE TO BE FAITHFUL</td> <td>1</td> <td>2</td> </tr> <tr> <td>NO MORE HOMOSEXUAL CONTACTS</td> <td>1</td> <td>2</td> </tr> <tr> <td>STOPPED INJECTIONS</td> <td>1</td> <td>2</td> </tr> <tr> <td>OTHER</td> <td></td> <td></td> </tr> <tr> <td></td> <td>(SPECIFY)</td> <td></td> </tr> <tr> <td>OTHER</td> <td></td> <td></td> </tr> <tr> <td></td> <td>(SPECIFY)</td> <td></td> </tr> <tr> <td>NO BEHAVIOUR CHANGE</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	DIDN'T START SEX	1	2	STOPPED ALL SEX	1	2	STARTED USING CONDOMS	1	2	RESTRICTED SEX TO ONE PARTNER	1	2	REDUCED NUMBER OF PARTNERS	1	2	ASK SPOUSE TO BE FAITHFUL	1	2	NO MORE HOMOSEXUAL CONTACTS	1	2	STOPPED INJECTIONS	1	2	OTHER				(SPECIFY)		OTHER				(SPECIFY)		NO BEHAVIOUR CHANGE	1	2	
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734	<p>CHECK 702 AND 713:</p> <p>KNOWS AIDS <input type="checkbox"/> DOES NOT KNOW AIDS <input type="checkbox"/></p>		801																																										
735	<p>Have you ever been tested to see if you have the AIDS virus?</p>	<table> <tr> <td>YES</td> <td>1</td> </tr> <tr> <td>NO</td> <td>2</td> </tr> <tr> <td>DON'T KNOW/UNSURE</td> <td>8</td> </tr> </table>	YES	1	NO	2	DON'T KNOW/UNSURE	8	742																																				
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736	<p>The last time you had the test, did you yourself ask for the test, was it offered to you and you accepted or was it required?</p>	<table> <tr> <td>RESPONDENT ASKED FOR THE TEST ..</td> <td>1</td> </tr> <tr> <td>OFFERED AND ACCEPTED</td> <td>2</td> </tr> <tr> <td>REQUIRED</td> <td>3</td> </tr> </table>	RESPONDENT ASKED FOR THE TEST ..	1	OFFERED AND ACCEPTED	2	REQUIRED	3																																					
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737	<p>What was the main reason you got tested the last time?</p>	<table> <tr> <td>TO KNOW STATUS</td> <td>01</td> </tr> <tr> <td>PREGNANT/ PRENATAL</td> <td>02</td> </tr> <tr> <td>I'M SEXUALLY ACTIVE</td> <td>03</td> </tr> <tr> <td>ENCOURAGED BY COUNSELOR</td> <td>04</td> </tr> <tr> <td>ENCOURAGED BY PEER EDUCATOR</td> <td>05</td> </tr> <tr> <td>ENCOURAGED BY PARENTS/FAMILY ..</td> <td>06</td> </tr> <tr> <td>ENCOURAGED BY PEERS</td> <td>07</td> </tr> <tr> <td>TO GET MARRIED</td> <td>08</td> </tr> <tr> <td>PARTNER TOLD ME TO DO SO</td> <td>09</td> </tr> <tr> <td>CONCERN ABOUT A PARTNER</td> <td>10</td> </tr> <tr> <td>REQUIRED TO GET A JOB</td> <td>11</td> </tr> <tr> <td>OTHER</td> <td>96</td> </tr> <tr> <td></td> <td>(SPECIFY)</td> </tr> </table>	TO KNOW STATUS	01	PREGNANT/ PRENATAL	02	I'M SEXUALLY ACTIVE	03	ENCOURAGED BY COUNSELOR	04	ENCOURAGED BY PEER EDUCATOR	05	ENCOURAGED BY PARENTS/FAMILY ..	06	ENCOURAGED BY PEERS	07	TO GET MARRIED	08	PARTNER TOLD ME TO DO SO	09	CONCERN ABOUT A PARTNER	10	REQUIRED TO GET A JOB	11	OTHER	96		(SPECIFY)																	
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738	<p>Where did you go for the test the last time?</p>	<table> <tr> <td>GOVERNMENT CLINIC/HOSPITAL</td> <td>01</td> </tr> <tr> <td>PRIVATE CLINIC/HOSPITAL/DOCTOR ...</td> <td>02</td> </tr> <tr> <td>NGO CLINIC</td> <td>03</td> </tr> <tr> <td>DRUG SHOP/PHARMACY</td> <td>04</td> </tr> <tr> <td>MOBILE CLINIC</td> <td>05</td> </tr> <tr> <td>VCT CENTER</td> <td>06</td> </tr> <tr> <td>PART OF A RESEARCH STUDY</td> <td>07</td> </tr> <tr> <td>OTHER</td> <td>96</td> </tr> <tr> <td></td> <td>(SPECIFY)</td> </tr> </table>	GOVERNMENT CLINIC/HOSPITAL	01	PRIVATE CLINIC/HOSPITAL/DOCTOR ...	02	NGO CLINIC	03	DRUG SHOP/PHARMACY	04	MOBILE CLINIC	05	VCT CENTER	06	PART OF A RESEARCH STUDY	07	OTHER	96		(SPECIFY)																									
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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
739	At any time during that last test, did you get any counseling about ways of protecting yourself or your partner from AIDS?	Yes 1 No 2	
740	I don't want to know the results, but did you get the results of that test?	YES 1 NO 2 REFUSED TO ANSWER 7	→ 801 → 801
741	What is the main reason you did not get the results?	I'M NOT AT RISK 01 SCARED TO KNOW STATUS 02 SOMEONE MIGHT SEE ME 03 JUST DON'T WANT TO KNOW 04 INDIFFERENT/DON'T CARE 05 OTHER 96 (SPECIFY)	→ 801
742	What is the main reason you have not been tested yet?	NEVER HAD SEX 01 NOT SEXUALLY ACTIVE 02 NOT AT RISK FOR OTHER REASONS ... 03 DO NOT KNOW WHERE TO GO 04 COSTS TOO MUCH 05 CAN GET INFECTION FROM TES 06 DON'T WANT TO KNOW STATUS 07 SOMEONE MIGHT SEE M 08 TRUST MYSELF 09 AFRAID TO KNOW STATUS 10 OTHER 96 (SPECIFY)	
743	Would you like to be tested for the AIDS virus?	YES 1 NO 2 DON'T KNOW 8	

SECTION 8. OTHER HEALTH ISSUES			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801	Have you ever heard of an illness called tuberculosis or TB?	YES 1 NO 2	→ 805
802	How does tuberculosis spread from one person to another? PROBE: Any other ways? CIRCLE ALL MENTIONED.	THROUGH THE AIR WHEN COUGHING OR SNEEZING 1 2 THROUGH SHARING UTENSILS . . . 1 2 THROUGH TOUCHING A PERSON WITH TB 1 2 THROUGH FOOD 1 2 THROUGH SEXUAL CONTACT ... 1 2 THROUGH MOSQUITO BITES ... 1 2 OTHER _____ (SPECIFY)	
803	Can tuberculosis be cured?	YES 1 NO 2 DONT KNOW 8	
804	If a member of your family got tuberculosis, would you want it to remain a secret or not?	YES, REMAIN A SECRET 1 NO 2 DONT KNOW/NOT SURE/ DEPENDS 8	
805	Have you ever smoked cigarettes?	YES 1 NO 2	→ 807
805a	Do you currently smoke cigarettes? FW: IF RESPONSE IS NO, ASK 805b THEN SKIP TO 807	YES 1 NO 2	
805b	For how long have/did you smoke cigarettes? IF LESS THAN 12 MONTHS RECORD MONTHS OTHERWISE RECORD IN YEARS	MONTHS 1 <input type="text"/> YEARS 2 <input type="text"/>	
806	In the last 24 hours, how many cigarettes did you smoke?	CIGARETTES <input type="text"/>	
807	Do you currently smoke or use any other type of tobacco?	YES 1 NO 2	→ 809
808	What (other) type of tobacco do you currently smoke or use? RECORD ALL MENTIONED.	PIPE TOBACCO 1 2 CHEWING TOBACCO 1 2 SNUFF 1 2 OTHER _____ (SPECIFY)	
809	Are you covered by any health insurance?	YES 1 NO 2	→ 811
810	What type of health insurance? RECORD ALL MENTIONED.	MUTUAL HEALTH ORGANIZN/ COMMUNITY-BASED HEALTH INSURANCE 1 2 HEALTH INSURANCE THROUGH EMPLOYER 1 2 NHIF 1 2 OTHER PRIVATELY PURCHASED COMMERCIAL HEALTH INSURANCE 1 2 JAMII BORA HEALTH INSURANCE 1 2 OTHER _____ (SPECIFY)	
811	I want to discuss with you the circumcision of males. Is male circumcision practiced in your community?	YES 1 NO 2	
812	Have you ever been circumcised?	YES 1 NO 2	→ 814
813	How old were you when you got circumcised?	AGE AT CIRCUMCISION <input type="text"/> REFUSED TO ANSWER 97 DONT KNOW 98	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
814	CHECK Q202& 203: HAS AT LEAST ONE LIVING DAUGHTER <input type="checkbox"/>	HAS NO LIVING DAUGHTER <input type="checkbox"/>	816
815	I would like us to talk about the practice of female circumcision in different communities. Do you intend to have your daughter(s) circumcised?	YES 1 NO 2 DAUGHTER(S) ALREADY CIRCUMCISED 3 DONT KNOW 8	
816	Do you approve of the circumcision of girls?	YES 1 NO 2	
817	What benefits do girls themselves get if they are circumcised? PROBE: Any other?	YES NO CLEANLINESS/HYGIENE 1 2 SOCIAL ACCEPTANCE 1 2 BETTER MARRIAGE PROSPECTS 1 2 PRESERVE VIRGINITY/PREVENT PREMARITAL SEX 1 2 MORE SEXUAL PLEASURE FOR THE MAN 1 2 RELIGIOUS APPROVAL 1 2 OTHER _____ (SPECIFY) NO BENEFITS 1 2	
SECTION 9. GENERAL MATTERS			
901	What are the general/basic needs of people in this community? PROBE: Any other?	YES NO 01 HOUSING 1 2 02 JOBS 1 2 03 EDUCATION 1 2 04 WATER 1 2 05 HEALTH SERVICES 1 2 06 FOOD 1 2 07 ROADS 1 2 08 TOILETS 1 2 09 SECURITY 1 2 10 GARBAGE/SEWAGE DISPOSAL 1 2 11 OTHER _____ (SPECIFY)	
901A	What is the major general/basic need of people in this community? GET CODE FROM 901	MOST IMPORTANT NEED <input type="checkbox"/>	
902	What are the general health problems/concerns of people in this community? PROBE: Any other?	YES NO 01 TOILETS 1 2 02 HEALTH CARE 1 2 03 HEALTH FACILITIES 1 2 04 CHOLERA 1 2 05 WATER 1 2 06 HIV/AIDS 1 2 07 STIs 1 2 08 DRAINAGE 1 2 09 GARBAGE 1 2 10 OTHER _____ (SPECIFY)	
902A	What is the major health problem/concern of people in this community? GET CODE FROM 902	MOST IMPORTANT NEED ... <input type="checkbox"/>	
903	What are the reproductive health problems/needs of people in this community? PROBE: Any other?	YES NO 01 HIV/AIDS 1 2 02 STDS 1 2 03 UNWANTED PREGNANCY 1 2 04 ABORTION 1 2 05 FAMILY PLANNING 1 2 06 ANTENATAL CARE 1 2 07 POST NATAL CARE 1 2 08 OTHER _____ (SPECIFY)	
903A	What is the major reproductive health problem/need of people in this community? GET CODE FROM 903	MOST IMPORTANT NEED ... <input type="checkbox"/>	
904	How would you rate your health in general?	VERY GOOD 01 GOOD 02 FAIR 03 POOR 04 VERY POOR 05 DONT KNOW 98	

SECTION 10. ADDITIONAL MODULE FOR YOUNG MEN			
NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1001	CHECK 107: AGED 12-24 <input type="checkbox"/>	AGED 25 AND ABOVE <input type="checkbox"/>	1053
1002	Is your mother alive?	YES 1 NO 2 DON'T KNOW 8	1005 1006
1003	Does your mother live here?	ALWAYS 1 SOMETIMES 2 NEVER 3	1006
1004	ENTER MOTHER'S LINE NUMBER FROM THE HOUSEHOLD SCHEDULE; IF NOT IN HOUSEHOLD ENTER "00"	MOTHER'S LINE NUMBER <input type="text"/>	1006
1005	How old were you when your mother passed away?	AGE IN COMPLETED YEARS <input type="text"/> DON'T KNOW AGE 98	
1006	Is your father alive?	YES 1 NO 2 DON'T KNOW 8	1009 1010
1007	Does your father live here?	ALWAYS 1 SOMETIMES 2 NEVER 3	1010
1008	ENTER FATHER'S LINE NUMBER FROM THE HOUSEHOLD SCHEDULE; IF NOT IN HOUSEHOLD ENTER "00"	FATHER'S LINE NUMBER <input type="text"/>	1010
1009	How old were you when your father passed away?	AGE IN COMPLETED YEARS <input type="text"/>	
1010	What is (was) the highest level of education your mother completed?	NO EDUCATION 1 PRIMARY INCOMPLETE 2 PRIMARY COMPLETE 3 SECONDARY 4 COLLEGE/UNIVERSITY 5 DON'T KNOW 8	
1011	What is (was) the highest level of education your father completed?	NO EDUCATION 1 PRIMARY INCOMPLETE 2 PRIMARY COMPLETE 3 SECONDARY 4 COLLEGE/UNIVERSITY 5 DON'T KNOW 8	
1012	Until you were 12, whom did you live with ?	MOTHER ALONE 01 FATHER ALONE 02 BOTH PARENTS 03 RELATED GUARDIANS 04 UNRELATED GUARDIAN 05 FRIEND 06 ALONE 07	
1013	Who are you currently living with?	MOTHER ALONE 01 FATHER ALONE 02 BOTH PARENTS 03 RELATED GUARDIANS 04 UNRELATED GUARDIAN 05 FRIEND 06 ALONE 07	
1014	Now I am going to read you a series of statements. After I read each statement please tell me whether you agree with the statement, disagree with it or have no opinion one way or the other. a) A woman has to get her husband's permission for everything. b) If a woman differs with her husband's opinion, she must accept his opinion. c) If a girl has not gone to school, the best thing for her is an early marriage. d) If a boy asks for a girl's hand in marriage and her parents agree, she has to accept him. e) If a man wants children, his wife has to comply even if she doesn't want children. f) If a woman does not have a boy, she has to keep trying even if she is satisfied with the number of children she has. g) If a woman does not have a girl, she has to keep trying even if she is satisfied with the number of children she has.	AGREE DISAGREE NO OPINION a) 1 2 3 b) 1 2 3 c) 1 2 3 d) 1 2 3 e) 1 2 3 f) 1 2 3 g) 1 2 3	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																								
1015	What do you think of sex among young unmarried people?	APPROVE 1 DISAPPROVE 2 NO OPINION 3																									
1016	For young unmarried people your age who engage in sex, do you approve of their using methods to delay or prevent pregnancy?	YES 1 NO 2 NO OPINION 3																									
1017	For young unmarried people your age who engage in sex, do you approve of their using condoms to prevent sexually transmitted diseases?	YES 1 NO 2 NO OPINION 3																									
1018	Would your partner/parents refuse your using contraceptives if you wanted to?	YES 1 NO 2 DON'T KNOW 8																									
1019	What would you do if she/they refuse while you think you need it?	I WOULD STILL USE IT 1 I WOULD NOT USE IT 2 DON'T KNOW WHAT I WOULD DO 3 OTHER 6 (SPECIFY)																									
1020	Whom would you speak to about sex related issues or if you were having sex related problems? PROBE: Anyone else?	FATHER 01 MOTHER 02 BROTHER 03 SISTER 04 UNCLE 05 AUNT 06 GRAND PARENT 07 STEP FATHER/MOTHER 08 OTHER RELATIVE 09 FRIEND 10 SCHOOL TEACHER 11 RELIGIOUS LEADER 12 COUNSELLOR 13 MEDICAL PERSON 14 NO ONE 15 OTHER 96 (SPECIFY)																									
1021	If you had a sexually transmitted infection, who would you speak to about it? PROBE: Anyone else?	FATHER 01 MOTHER 02 BROTHER 03 SISTER 04 UNCLE 05 AUNT 06 GRAND PARENT 07 STEP FATHER/MOTHER 08 OTHER RELATIVE 09 FRIEND 10 SCHOOL TEACHER 11 RELIGIOUS LEADER 12 COUNSELLOR 13 MEDICAL PERSON 14 NO ONE 15 OTHER 96 (SPECIFY)																									
1022	I am now going to read some statements to you about HIV/AIDS and other diseases that are transmitted through sex. As I read each statement, please tell me if you think it is true, false or you don't know. a) One can always tell when a person has a sexually transmitted infection. b) I can tell if a person is HIV positive c) If signs of sexually transmitted disease disappear, it means the person no longer has the disease. d) A healthy-looking person may be carrying the HIV virus. e) A woman who has the HIV virus will always give birth to a child with the HIV virus.	<table border="0"> <thead> <tr> <th></th> <th>TRUE</th> <th>FALSE</th> <th>DON'T KNOW</th> </tr> </thead> <tbody> <tr> <td>a)</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>b)</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>c)</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>d)</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>e)</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		TRUE	FALSE	DON'T KNOW	a)	1	2	8	b)	1	2	8	c)	1	2	8	d)	1	2	8	e)	1	2	8	
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b)	1	2	8																								
c)	1	2	8																								
d)	1	2	8																								
e)	1	2	8																								
1023	CHECK Q411: HAS HAD SEXUAL INTERCOURSE <input type="checkbox"/>	HAS NEVER HAD SEXUAL INTERCOURSE <input type="checkbox"/>	→ 1034																								
1024	Sometimes a girl becomes pregnant when she does not want to be. Have you ever made a girl pregnant when you both did not want to get pregnant?	YES 1 NO 2	→ 1032																								

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																														
1025	How many times has this occurred?	NUMBER <input type="text"/> <input type="text"/>																															
1026	The last time this happened, how did it end?	TERMINATED THE PREGNANCY 01 NOTHING/CONTINUED WITH PREGNANCY 02 TRIED ABORTION WITHOUT SUCCESS 03 AND GAVE BIRTH 04 MISCARRIED 05 STILL PREGNANT 06 OTHER 96 (SPECIFY)	→ 1031																														
1027	Who performed it?	QUALIFIED DOCTOR 01 QUALIFIED NURSE/MIDWIFE 02 MEDICAL PERSON WITH UNCLEAR 03 QUALIFICATIONS 04 TRADITIONAL HEALER/HERBALIST 05 NON-MEDICAL PERSON 06 FAMILY MEMBER 07 MYSELF 08 THE WOMAN HERSELF 09 OTHER 96 (SPECIFY)																															
1028	What were the reasons why she had an abortion ? PROBE: Any other reason?	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>0: TO CONTINUE SCHOOL</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: DIDN'T WANT PREGNANCY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: DIDN'T WANT PARENTS TO KNOW</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: WILL BE UNABLE TO SUPPORT</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: PARENT(S) PRESSURED HER</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: BOYFRIEND PRESSURED HER</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: HEALTH CONSIDERATIONS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>0: PEER INFLUENCE</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>9: OTHER</td> <td></td> <td></td> </tr> </tbody> </table> (SPECIFY)		YES	NO	0: TO CONTINUE SCHOOL	1	2	0: DIDN'T WANT PREGNANCY	1	2	0: DIDN'T WANT PARENTS TO KNOW	1	2	0: WILL BE UNABLE TO SUPPORT	1	2	0: PARENT(S) PRESSURED HER	1	2	0: BOYFRIEND PRESSURED HER	1	2	0: HEALTH CONSIDERATIONS	1	2	0: PEER INFLUENCE	1	2	9: OTHER			
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1028A	Of all the reasons you mentioned about her decision to have an abortion, which one was the most important? [GET CODE FROM 1028]	MOST IMPORTANT REASON <input type="text"/> <input type="text"/>																															
1029	Did you support her decision to have an abortion?	YES 1 NO 2																															
1030	Did you pay/contribute towards the abortion costs?	YES 1 NO 2																															
1031	What was your relationship with the person you last made pregnant?	WIFE 01 FIANCE 02 GIRLFRIEND 03 TEACHER 04 STRANGER 05 PASTOR/RELIGIOUS LEADER 06 OTHER 96 (SPECIFY)																															
1032	CHECK 1026: IF CODE 01 IS CIRCLED SKIP TO 1033. Has someone you made pregnant ever end that pregnancy through abortion?	YES 1 NO 2 DON'T KNOW 8	→ 1034																														
1033	In your lifetime , how many pregnancies that were caused by you were successfully ended through abortion?	NUMBER <input type="text"/> <input type="text"/> DON'T KNOW 98 REFUSED TO ANSWER 97																															
1034	Have you ever had a drink of beer, wine, chang'aa, kumi kumi, muratina, busaa etc, more than two or three times in your life? not just a sip or taste of someone else drink?	YES 1 NO 2	→ 1037																														
1035	How old were you when you first drank beer, wine, chang'aa, kumi kumi, muratina or busaa? [PROBE IF AGE GIVEN IS LESS THAN 8 YEARS]	AGE <input type="text"/> <input type="text"/> DON'T KNOW 98																															
1036	During the past one month how many times did you drink alcohol until you got drunk?	DIDN'T DRINK IN THE PAST MONTH 01 WASN'T DRUNK IN THE PAST MONTH 02 ONCE 03 2-3 TIMES 04 4-10 TIMES 05 OTHER 96 (SPECIFY)																															

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1037	Do any of your friends take any kind of drug (or sniff anything)?	YES 1 NO 2 DON'T KNOW 8	1043
1038	What exactly do they take/sniff? PROBE: what else?	YES NO PILLS 1 2 BHANG 1 2 MIRAA 1 2 COCAINE 1 2 PETROL SNIFFING 1 2 GLUE SNIFFING 1 2 PAINT SNIFFING 1 2 OTHER (SPECIFY) DON'T KNOW 98	
1039	Have you ever tried any of these things?	YES 1 NO 2	1043
1040	What have you tried? PROBE: what else?	YES NO PILLS 1 2 BHANG 1 2 MIRAA 1 2 COCAINE 1 2 PETROL SNIFFING 1 2 GLUE SNIFFING 1 2 PAINT SNIFFING 1 2 OTHER (SPECIFY) DON'T KNOW 98	
1041	Are you currently using these things?	YES 1 NO 2	1042
1041A	What are you using? PROBE: what else?	YES NO PILLS 1 2 BHANG 1 2 MIRAA 1 2 COCAINE 1 2 PETROL SNIFFING 1 2 GLUE SNIFFING 1 2 PAINT SNIFFING 1 2 OTHER (SPECIFY)	
1042	How old were you when you first tried one of these things?	AGE <input type="text"/> <input type="text"/> DON'T KNOW 98	
1043	During the past year, has any of the following people hit, slapped, kicked or physically hurt you on purpose?	YES NO WIFE 1 2 OTHER SEXUAL PARTNER 1 2 FATHER 1 2 MOTHER 1 2 OTHER MALE RELATIVES 1 2 OTHER FEMALE RELATIVES 1 2 TEACHER 1 2 STRANGER 1 2 LAW ENFORCEMENT OFFICER 1 2 OTHER (SPECIFY)	
1044	During the past year, have you hit, slapped, kicked or physically hurt any of the following people on purpose?	YES NO WIFE 1 2 OTHER SEXUAL PARTNER 1 2 FATHER 1 2 MOTHER 1 2 OTHER MALE RELATIVES 1 2 OTHER FEMALE RELATIVES 1 2 TEACHER 1 2 STRANGER 1 2 LAW ENFORCEMENT OFFICER 1 2 OTHER 1 2 (SPECIFY)	
1045	CHECK Q411: IF NEVER HAD SEX CIRCLE 3 AND FOLLOW SKIP Have you ever been forced to have sexual intercourse when you did not want to?	YES 1 NO 2 NEVER HAD SEX 3	1047

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP				
1046	Have you ever had sexual intercourse with someone when she did not want sex?	YES 1 NO 2					
1047	Sometimes young people go to the street to beg. Have you ever done this?	YES 1 NO 2	→ 1050				
1048	What is the main reason that made you do it? ONLY ONE RESPONSE ALLOWED	NO FOOD IN THE HOUSE 01 PARENT(S) FORCED/ASKED ME 02 HAD NO HOME/PARENTS 03 TO JOIN MY FRIEND 04 HAD NO JOB 05 OTHER 96 (SPECIFY)					
1049	How old were you when you first did it?	AGE <table border="1" data-bbox="1219 426 1312 478" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> DON'T KNOW 98					
1050	Sometimes some girls and boys have sex in order to get money for their family or for themselves. Do you know of your neighbour's sons or daughters who do this?	YES 1 NO 2					
1051	Have you ever been involved in this type of activity?	YES 1 NO 2 REFUSED TO ANSWER 7					
1052	What is the main cause for girls and boys having sex in exchange for money?	POVERTY/NO FOOD 01 FAMILY/MARITAL PROBLEMS 02 PEER PRESSURE/BAD COMPANY 03 LACK OF SELF DISCIPLINE 04 MATERIAL BENEFITS 05 DON'T KNOW 98 OTHER 96 (SPECIFY)					
1053	RECORD THE TIME.	HOUR <table border="1" data-bbox="1219 888 1312 940" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> MINUTES <table border="1" data-bbox="1219 940 1312 982" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					

