

## **MEN'S QUESTIONNAIRE**



SECTION 1. RESPONDENT'S BACKGROUND

INTRODUCTION AND CONSENT

INFORMED CONSENT

Hello. My name is \_\_\_\_\_ and I am working with Nauru **Bureau of Statistics**. We are conducting a national survey to ask men and women about various health issues. We would very much appreciate your participation in this survey. This information will help the government to plan health services. The survey usually takes about 20 minutes to complete. Whatever information you provide will be kept strictly confidential and will not be shown to other persons.

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?  
May I begin the interview now?

Signature of interviewer: \_\_\_\_\_ Date: \_\_\_\_\_

RESPONDENT AGREES TO BE INTERVIEWED ..... 1      RESPONDENT DOES NOT AGREE TO BE INTERVIEWED ..... 2 → END  
↓

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE TIME.	HOUR ..... <input type="text"/> <input type="text"/> MINUTES ..... <input type="text"/> <input type="text"/>	
102	How long have you been living continuously in (NAME OF CURRENT DISTRICT)? IF LESS THAN ONE YEAR, RECORD '00' YEARS.	YEARS ..... <input type="text"/> <input type="text"/> ALWAYS ..... 95 VISITOR ..... 96	→ 104
103	Just before you moved here, did you live in NAURU or overseas?	NAURU ..... 1 OVERSEAS ..... 2	
104	In what month and year were you born?	MONTH ..... <input type="text"/> <input type="text"/> DON'T KNOW MONTH ..... 98 YEAR ..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW YEAR ..... 9998	
105	How old were you at your last birthday? COMPARE AND CORRECT 104 AND/OR 105 IF INCONSISTENT.	AGE IN COMPLETED YEARS <input type="text"/> <input type="text"/>	
106	Have you ever attended school?	YES ..... 1 NO ..... 2	→ 110a
107	What is the highest level of school you attended: primary, secondary, or higher?	PRE SCHOOL ..... 0 PRIMARY ..... 1 SECONDARY ..... 2 TERTIARY ..... 3 HIGHER ..... 4	
108	What is the highest year you completed at that level?	YEAR ..... <input type="text"/> <input type="text"/>	
109	CHECK 107: PRE SCHOOL OR PRIMARY <input type="checkbox"/> SECONDARY OR HIGHER <input type="checkbox"/>		→ 113

110a	<p>Now I would like you to read this sentence to me.</p> <p>SHOW CARD IN <b>ENGLISH</b> TO RESPONDENT.</p> <p>IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE: Can you read any part of the sentence to me?</p>	<p>CANNOT READ AT ALL ..... 1</p> <p>ABLE TO READ ONLY PARTS OF SENTENCE ..... 2</p> <p>ABLE TO READ WHOLE SENTENCE.. 3</p> <p>BLIND/VISUALLY IMPAIRED ..... 5</p>	→ 116
110b	<p>SHOW CARD IN <b>NAURUAN</b> TO RESPONDENT.</p> <p>IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE: Can you read any part of the sentence to me?</p>	<p>CANNOT READ AT ALL ..... 1</p> <p>ABLE TO READ ONLY PARTS OF SENTENCE ..... 2</p> <p>ABLE TO READ WHOLE SENTENCE.. 3</p> <p>NO CARD WITH REQUIRED LANGUAGE ..... 4</p> <p>(SPECIFY LANGUAGE)</p> <p>BLIND/VISUALLY IMPAIRED ..... 5</p>	
111	<p>Have you ever participated in a literacy program or any other program that involves learning to read or write (not including primary school)?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	
112	<p>CHECK 110a AND 110b:</p> <p>CODE '2', '3' OR '4' CIRCLED <input type="checkbox"/>      CODE '1' OR '5' CIRCLED <input type="checkbox"/></p>	→ 114	
113	<p>Do you read a newspaper or magazine almost every day, at least once a week, less than once a week or not at all?</p>	<p>ALMOST EVERY DAY ..... 1</p> <p>AT LEAST ONCE A WEEK ..... 2</p> <p>LESS THAN ONCE A WEEK ..... 3</p> <p>NOT AT ALL ..... 4</p>	
114	<p>Do you listen to the radio almost every day, at least once a week, less than once a week or not at all?</p>	<p>ALMOST EVERY DAY ..... 1</p> <p>AT LEAST ONCE A WEEK ..... 2</p> <p>LESS THAN ONCE A WEEK ..... 3</p> <p>NOT AT ALL ..... 4</p>	
115	<p>Do you watch television almost every day, at least once a week, less than once a week or not at all?</p>	<p>ALMOST EVERY DAY ..... 1</p> <p>AT LEAST ONCE A WEEK ..... 2</p> <p>LESS THAN ONCE A WEEK ..... 3</p> <p>NOT AT ALL ..... 4</p>	
116	<p>What is your religion?</p>	<p>NAURU CONGREGATIONAL ..... 1</p> <p>ROMAN CATHOLIC ..... 2</p> <p>NAURU INDEPENDENCE ..... 3</p> <p>NO RELIGION ..... 4</p> <p>OTHER ..... 6</p>	
117	<p>What is your ethnicity?</p>	<p>NAURUAN ..... 1</p> <p>PART NAURUAN ..... 2</p> <p>IKIRIBATI ..... 3</p> <p>TUVALUAN ..... 4</p> <p>CHINESE ..... 5</p> <p>OTHER ..... 6</p>	

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 have your last name. Have you ever fathered any children with any woman?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	→ 206
202	Do you have any sons or daughters that you have fathered who are now living with you?	YES ..... 1 NO ..... 2	→ 204
203	How many sons live with you? And how many daughters live with you? IF NONE, RECORD '00'.	SONS AT HOME ..... <input type="text"/> <input type="text"/> DAUGHTERS AT HOME ..... <input type="text"/> <input type="text"/>	
204	Do you have any sons or daughters that you have fathered who are alive but do not live with you?	YES ..... 1 NO ..... 2	→ 206
205	How many sons are alive but do not live with you? And how many daughters are alive but do not live with you? IF NONE, RECORD '00'.	SONS ELSEWHERE ..... <input type="text"/> <input type="text"/> DAUGHTERS ELSEWHERE ..... <input type="text"/> <input type="text"/>	
206	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 DON'T KNOW ..... 8	→ 208
207	How many boys have died? And how many girls have died? IF NONE, RECORD '00'.	BOYS DEAD ..... <input type="text"/> <input type="text"/> GIRLS DEAD ..... <input type="text"/> <input type="text"/>	
208	SUM ANSWERS TO 203, 205, AND 207, AND ENTER TOTAL. IF NONE, RECORD '00'.	TOTAL CHILDREN ..... <input type="text"/> <input type="text"/>	
209	CHECK 208:  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"/> →	212  301	
210	Did all of the children you have fathered have the same biological mother?	YES ..... 1 NO ..... 2	→ 212
211	In all, how many women have you fathered children with?	NUMBER OF WOMEN ..... <input type="text"/> <input type="text"/>	
212	How old were you when your (first) child was born?	AGE IN YEARS ..... <input type="text"/> <input type="text"/>	
213	CHECK 203 AND 205:  AT LEAST ONE LIVING CHILD <input type="checkbox"/> ↓ NO LIVING CHILDREN <input type="checkbox"/> →	301	

214	How many years old is your (youngest) child?	AGE IN YEARS .....	<input type="text"/>	
215	CHECK 214: (YOUNGEST) CHILD <input type="checkbox"/> IS AGE 0-3 YEARS	OTHER <input type="checkbox"/>		→ 301
216	What is the name of your (youngest) child? WRITE NAME OF (YOUNGEST) CHILD  _____ (NAME OF (YOUNGEST) CHILD)			
217	When (NAME)'s mother was pregnant with (NAME), did she have any antenatal check-ups?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 3		→ 219
218	Were you ever present during any of those antenatal check-ups?	PRESENT ..... 1 NOT PRESENT ..... 2		
219	Was (NAME) born in a hospital or health facility?	HOSPITAL/HEALTH FACILITY .... 1 OTHER ..... 2		→ 221
220	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 DON'T 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) DON'T KNOW ..... 98		
221	When a child has diarrhea, how much 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 DON'T KNOW ..... 8		

SECTION 3. CONTRACEPTION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
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. <i>Ngage a teng en dorereiy angoget atateen I karig oa emedenan oa erit imin ngana buok in oduok ijeng?</i> Which ways or methods have you heard about? <i>Ekeget emedena wo ogiten kaiot angogen?</i> FOR METHODS NOT MENTIONED SPONTANEOUSLY, ASK: Have you ever heard of (METHOD)? <i>Wo kaiot in angoget METHOD</i> CIRCLE CODE 1 IN 301 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 301, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 1 IF METHOD IS RECOGNIZED, AND CODE 2 IF NOT RECOGNIZED. THEN, FOR METHODS 02, 07, 09, 10, AND 11, ASK 302 IF 301 HAS CODE 1 CIRCLED.</p>		<p>302 Have you ever used (METHOD)?</p>
01	<p>FEMALE STERILIZATION Women can have an operation to avoid having any more children. <i>En gona detow bwe ang anim eo gauwei tsimine ngaiura?</i></p>	<p>YES ..... 1 NO ..... 2</p>	
02	<p>MALE STERILIZATION Men can have an operation to avoid having any more children. <i>Emwan e gona detow bwe ang anim eo gauwei tsimine ngaiura?</i></p>	<p>YES ..... 1 NO ..... 2</p>	<p>Have you ever had an operation to avoid having any more children? YES ..... 1 NO ..... 2</p>
03	<p>PILL Women can take a pill every day to avoid becoming pregnant. <i>En gona ko adaparo iaran iaran bwe ar anim eo ijeng?</i></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 <i>E gona omeatu I loop oa coil ian an bwer en.</i></p>	<p>YES ..... 1 NO ..... 2</p>	
05	<p>INJECTABLES Women can have an injection by a health their upper provider that stops them from becoming pregnant for one or more months. <i>E gona tabwab eiy en bwe ar anim eo gauweiy ijeng ean aiquen oa aro maramen.</i></p>	<p>YES ..... 1 NO ..... 2</p>	
06	<p>IMPLANTS Women can have several small rods placed in arm by a doctor or nurse which can prevent pregnancy for one or more years. <i>Docta oa enurse gona totu ian bwet en imin ngana inan oduok ijeng dogin aiquen oa aro eobweni.</i></p>	<p>YES ..... 1 NO ..... 2</p>	
07	<p>CONDOM Men can put a rubber sheath on their penis before sexual intercourse. <i>Emwan gona totu a dorera erubber oa condom ian obwen aeora ejad.</i></p>	<p>YES ..... 1 NO ..... 2</p>	<p>YES ..... 1 NO ..... 2</p>
08	<p>FEMALE CONDOM Women can place a sheath in their vagina before sexual intercourse. <i>En gona reiy ijan aeora mwin ian obwen aeora ejad.</i></p>	<p>YES ..... 1 NO ..... 2</p>	
09	<p>LACTATIONAL AMENORRHEA METHOD (LAM) (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 <i>lat maramen eaeow eaeow en gona eo ijeng eow ean aeora edegeri edae eat calendar ino ar eab gona ijeng.</i></p>	<p>YES ..... 1 NO ..... 2</p>	<p>YES ..... 1 NO ..... 2</p>
11	<p>WITHDRAWAL Men can be careful and pull out before climax. <i>Emwan gona a ker ret duwora atonin rabadat eita en.</i></p>	<p>YES ..... 1 NO ..... 2</p>	<p>YES ..... 1 NO ..... 2</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>	
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>_____</p> <p>(SPECIFY)</p> <p>_____</p> <p>(SPECIFY)</p> <p>NO ..... 2</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
303	In the last few months have you heard about family planning: On the radio? On the television? In a newspaper or magazine?	YES NO RADIO ..... 1 2 TELEVISION ..... 1 2 NEWSPAPER OR MAGAZINE 1 2	
304	In the last few months, have you discussed the practice of family planning with a health worker or health professional?	YES ..... 1 NO ..... 2	
305	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 DONT KNOW ..... 8	→ 307
306	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 TWO PERIODS ..... 4 OTHER ..... 6 (SPECIFY) DONT KNOW ..... 8	
307	Do you think that a woman who is breastfeeding her baby can become pregnant?	YES ..... 1 NO ..... 2 DEPENDS ..... 3 DONT KNOW ..... 8	
308	I will now read you some statements about contraception. Please tell me if you agree or disagree with each one. a) Contraception is women's business and a man should not have to worry about it. b) Women who use contraception may become promiscuous.	DIS- AGREE AGREE DK CONTRACEPTION WOMAN'S BUSINESS . 1 2 8 WOMAN MAY BECOME PROMISCUOUS ... 1 2 8	
309	CHECK 301 (07) KNOWS MALE CONDOM YES <input type="checkbox"/> NO <input type="checkbox"/>		→ 401
310	Do you know of a place where a person can get condoms?	YES ..... 1 NO ..... 2	→ 401
311	Where is that? Any other place? PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	PUBLIC SECTOR GOVT. HOSPITAL ..... A MOBILE CLINIC ..... B PRIMARY HEALTH CARE ..... C OTHER SOURCE COMMUNITIES..... D FRIEND/RELATIVE..... E OVERSEAS..... F SHOPS..... G OTHER ..... X (SPECIFY)	
312	If you wanted to, could you yourself get a condom?	YES ..... 1 NO ..... 2	

**SECTION 4. MARRIAGE AND SEXUAL ACTIVITY**

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
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
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	→ 409
403	What is your marital status now: are you widowed, divorced, or separated?	WIDOWED ..... 1 DIVORCED ..... 2 SEPARATED ..... 3	→ 406
404	Is your wife/partner living with you now or is she staying elsewhere?	LIVING WITH HIM ..... 1 STAYING ELSEWHERE ..... 2	
405	RECORD THE WIFE'S/PARTNER'S NAME AND LINE NUMBER FROM THE HOUSEHOLD QUESTIONNAIRE. IF SHE IS NOT LISTED IN THE HOUSEHOLD, RECORD '00'.	NAME _____  LINE NUMBER ..... <input type="text"/> <input type="text"/>	
406	Have you been married or lived with a woman only once or more than once?	ONLY ONCE ..... 1 MORE THAN ONCE ..... 2	→ 407a
407	In what month and year did you start living with your wife (partner)?	MONTH ..... <input type="text"/> <input type="text"/> DON'T KNOW MONTH ..... 98	
407a	Now I would like to ask a question about your first wife/partner. In what month and year did you start living with your first wife/partner?	YEAR ..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW YEAR ..... 9998	→ 409
408	How old were you when you first started living with her?	AGE ..... <input type="text"/> <input type="text"/>	
409	CHECK FOR THE PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.		
410	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?	NEVER HAD SEXUAL INTERCOURSE ..... 00  AGE IN YEARS ..... <input type="text"/> <input type="text"/>  FIRST TIME WHEN STARTED LIVING WITH (FIRST) WIFE/PARTNER ..... 95	→ 413  → 413
411	CHECK 105: AGE <input type="text"/> <input type="text"/> 15-24 ↓      AGE <input type="text"/> <input type="text"/> 25-49		→ 501
412	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
413	CHECK 105: AGE <input type="text"/> <input type="text"/> 15-24 ↓      AGE <input type="text"/> <input type="text"/> 25-49		→ 415
414	The <u>first</u> time you had sexual intercourse, was a condom used?	YES ..... 1 NO ..... 2 DON'T KNOW/DON'T REMEMBER... 8	
415	When was the <u>last</u> 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 WEEKS AGO ..... 2 MONTHS AGO ..... 3 YEARS AGO ..... 4	→ 431

		LAST SEXUAL PARTNER	SECOND-TO-LAST SEXUAL PARTNER	THIRD-TO-LAST SEXUAL PARTNER
416	Now I would like to ask you some questions about your recent sexual activity. Let me assure you again that your answers are completely confidential and will not be told to anyone. If we should come to any question that you don't want to answer, just let me know and we will go to the next question.			
417	When was the last time you had sexual intercourse with this person?		DAYS . 1 <input type="text"/> <input type="text"/> WEEKS 2 <input type="text"/> <input type="text"/> MONTHS 3 <input type="text"/> <input type="text"/>	DAYS . 1 <input type="text"/> <input type="text"/> WEEKS 2 <input type="text"/> <input type="text"/> MONTHS 3 <input type="text"/> <input type="text"/>
418	The last time you had sexual intercourse (with this second/third person), was a condom used? (2)	YES ..... 1 NO ..... 2 (SKIP TO 420) ←	YES ..... 1 NO ..... 2 (SKIP TO 420) ←	YES ..... 1 NO ..... 2 (SKIP TO 420) ←
419	Was a condom used every time you had sexual intercourse with this person in the last 12 months?	YES ..... 1 NO ..... 2	YES ..... 1 NO ..... 2	YES ..... 1 NO ..... 2
420	What was your relationship to this (second/third) person with whom you had sexual intercourse?  IF GIRLFRIEND: Were you living together as if married? IF YES, CIRCLE '02'. IF NO, CIRCLE '03'.	WIFE ..... 1 (SKIP TO 422) ← LIVE-IN PARTNER ..... 2 GIRLFRIEND NOT LIVING WITH RESPONDENT ..... 3 CASUAL ACQUAINTANCE ... 4 PROSTITUTE ..... 5 OTHER ..... 6 (SPECIFY)	WIFE ..... 1 (SKIP TO 422) ← LIVE-IN PARTNER ..... 2 GIRLFRIEND NOT LIVING WITH RESPONDENT ..... 3 CASUAL ACQUAINTANCE ... 4 PROSTITUTE ..... 5 OTHER ..... 6 (SPECIFY)	WIFE ..... 1 (SKIP TO 422) ← LIVE-IN PARTNER ..... 2 GIRLFRIEND NOT LIVING WITH RESPONDENT ..... 3 CASUAL ACQUAINTANCE ... 4 PROSTITUTE ..... 5 OTHER ..... 6 (SPECIFY)
421	For how long (have you had/did you have) a sexual relationship with this (second/third) person? IF ONLY HAD SEXUAL RELATIONS WITH THIS PERSON ONCE, RECORD '01' DAYS.	DAYS . 1 <input type="text"/> <input type="text"/> MONTHS 2 <input type="text"/> <input type="text"/> YEARS 3 <input type="text"/> <input type="text"/>	DAYS . 1 <input type="text"/> <input type="text"/> MONTHS 2 <input type="text"/> <input type="text"/> YEARS 3 <input type="text"/> <input type="text"/>	DAYS . 1 <input type="text"/> <input type="text"/> MONTHS 2 <input type="text"/> <input type="text"/> YEARS 3 <input type="text"/> <input type="text"/>
422	The last time you had sexual intercourse with this (second/third) person, did you or this person drink alcohol?	YES ..... 1 NO ..... 2 (SKIP TO 424) ←	YES ..... 1 NO ..... 2 (SKIP TO 424) ←	YES ..... 1 NO ..... 2 (SKIP TO 424) ←
423	Were you or your partner drunk at that time?  IF YES: Who was drunk?	RESPONDENT ONLY 1 PARTNER ONLY ... 2 RESPONDENT AND PARTNER BOTH . 3 NEITHER ..... 4	RESPONDENT ONLY 1 PARTNER ONLY ... 2 RESPONDENT AND PARTNER BOTH . 3 NEITHER ..... 4	RESPONDENT ONLY 1 PARTNER ONLY ... 2 RESPONDENT AND PARTNER BOTH . 3 NEITHER ..... 4
424	Apart from [this person/these two people], have you had sexual intercourse with any other person in the last 12 months?	YES ..... 1 (GO BACK TO 417 ← IN NEXT COLUMN) NO ..... 2 (SKIP TO 426) ←	YES ..... 1 (GO BACK TO 417 ← IN NEXT COLUMN) NO ..... 2 (SKIP TO 426) ←	
425	In total, with how many different people have you had sexual intercourse in the last 12 months?  IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE.  IF NUMBER OF PARTNERS IS GREATER THAN 95, WRITE '95.'			NUMBER OF PARTNERS LAST 12 MONTHS ... <input type="text"/> <input type="text"/>  DON'T KNOW ... 98

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
426	CHECK 420 (ALL COLUMNS): AT LEAST ONE PARTNER IS PROSTITUTE <input type="checkbox"/>	NO PARTNERS ARE PROSTITUTES <input type="checkbox"/>	428
427	CHECK 420 AND 418 (ALL COLUMNS): OTHER <input type="checkbox"/>	CONDOM USED WITH EVERY PROSTITUTE <input type="checkbox"/>	430 431
428	In the last 12 months, did you pay anyone in exchange for having sexual intercourse?	YES ..... 1 NO ..... 2	431
429	The last time you paid someone in exchange for having sexual intercourse, was a condom used? (2)	YES ..... 1 NO ..... 2	431
430	Was a condom used during sexual intercourse every time you paid someone in exchange for having sexual intercourse in the last 12 months?	YES ..... 1 NO ..... 2 DK ..... 8	
431	In total, with how many different people have you had sexual intercourse in your lifetime? IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS GREATER THAN 95, WRITE '95.'	NUMBER OF PARTNERS IN LIFETIME ..... <input type="text"/> <input type="text"/> DON'T KNOW ..... 98	
432	CHECK 418, MOST RECENT PARTNER (FIRST COLUMN): CONDOM USED <input type="checkbox"/>	NO CONDOM USED <input type="checkbox"/>	438
433	You told me that a condom was used the last time you had sex. May I see the package of condoms you were using at that time? RECORD NAME OF BRAND IF PACKAGE SEEN.	PACKAGE SEEN ..... 1 BRAND NAME _____ <input type="text"/> <input type="text"/> (SPECIFY) DOES NOT HAVE/NOT SEEN ..... 2	435
434	Do you know the brand name of the condom used at that time? RECORD NAME OF BRAND.	BRAND NAME _____ <input type="text"/> <input type="text"/> (SPECIFY) DON'T KNOW ..... 98	
435	How many condoms did you get the last time?	NUMBER OF CONDOMS ..... <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW ..... 998	
436	The last time you obtained the condoms, how much did you pay in total, including the cost of the condom(s) and any consultation you may have had?	COST ..... <input type="text"/> <input type="text"/> <input type="text"/> FREE ..... 995 DON'T KNOW ..... 998	

437	From where did you obtain the condom the last time?  PROBE TO IDENTIFY TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	PUBLIC SECTOR GOVERNMENT HOSPITAL ..... 11 MOBILE CLINIC ..... 12 PRIMARY HEALTH WORKE..... 13  OTHER SOURCE HOTER/NIGHT CLUB..... 21 FRIEND/RELATIVE..... 22 OVERSEAS..... 23  OTHER _____ 96 (SPECIFY)
-----	--	---

438	CHECK 302 (02): RESPONDENT EVER STERILIZED  NO <input type="checkbox"/> YES <input type="checkbox"/>	501
-----	--	-----

439	The last time you had sex did you or your partner use any method (other than a condom) to avoid or prevent a pregnancy?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8
-----	---	---

440	What method did you or your partner use?  PROBE: Did you use any other method to prevent pregnancy?  RECORD ALL MENTIONED.	FEMALE STERILIZATION ..... A PILL ..... B IUD ..... C INJECTABLES ..... D IMPLANTS ..... E FEMALE CONDOM ..... F DIAPHRAGM ..... G FOAM/JELLY ..... H RHYTHM METHOD ..... I WITHDRAWAL ..... J OTHER _____ X (SPECIFY)
-----	---	---



**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 occupation, that is, what kind of work do you mainly do?	 _____ <input type="checkbox"/> <input type="checkbox"/> _____ _____																															
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	Do you do this work for a member of your family, for someone else, or are you self-employed?	FOR FAMILY MEMBER ..... 1 FOR SOMEONE ELSE ..... 2 SELF-EMPLOYED ..... 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																															
610	CHECK 609: CODE 1 OR 2 CIRCLED <input type="checkbox"/> OTHER <input type="checkbox"/>		→ 612																														
611	Who decides how the money you earn will be used: mainly you, mainly your wife/partner, or you and your wife/partner jointly?	RESPONDENT ..... 1 WIFE(WIVES)/PARTNER(S) ..... 2 RESPONDENT AND WIFE (WIVES)/PARTNER(S) JOINTLY ..... 3 OTHER ..... 6 SPECIFY _____																															
612	In a couple, who do you think should have the greater say in each of the following decisions: the husband, the wife or both equally: a) making large household purchases? b) making small daily household purchases? c) deciding when to visit the wife's family or relatives? d) deciding what to do with the money she earns for her work? e) deciding how many children to have?	<table border="1"> <thead> <tr> <th></th> <th>HUS-BAND</th> <th>WIFE</th> <th>BOTH EQUALLY</th> <th>DON'T KNOW/DEPENDS</th> </tr> </thead> <tbody> <tr> <td>a)</td> <td>1</td> <td>2</td> <td>3</td> <td>8</td> </tr> <tr> <td>b)</td> <td>1</td> <td>2</td> <td>3</td> <td>8</td> </tr> <tr> <td>c)</td> <td>1</td> <td>2</td> <td>3</td> <td>8</td> </tr> <tr> <td>d)</td> <td>1</td> <td>2</td> <td>3</td> <td>8</td> </tr> <tr> <td>e)</td> <td>1</td> <td>2</td> <td>3</td> <td>8</td> </tr> </tbody> </table>		HUS-BAND	WIFE	BOTH EQUALLY	DON'T KNOW/DEPENDS	a)	1	2	3	8	b)	1	2	3	8	c)	1	2	3	8	d)	1	2	3	8	e)	1	2	3	8	
	HUS-BAND	WIFE	BOTH EQUALLY	DON'T KNOW/DEPENDS																													
a)	1	2	3	8																													
b)	1	2	3	8																													
c)	1	2	3	8																													
d)	1	2	3	8																													
e)	1	2	3	8																													
613	I will now read you some statements about pregnancy. Please tell me if you agree or disagree with them. a) Childbearing is a woman's concern and there is no need for the father to get involved. b) It is crucial for the mother's and child's health that a woman have assistance from a doctor or nurse at delivery.	<table border="1"> <thead> <tr> <th></th> <th>AGREE</th> <th>DIS-AGREE</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>CHILDBEARING WOMAN'S CONCERN</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>DOCTOR/NURSE'S ASSISTANCE CRUCIAL</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		AGREE	DIS-AGREE	DK	CHILDBEARING WOMAN'S CONCERN	1	2	8	DOCTOR/NURSE'S ASSISTANCE CRUCIAL	1	2	8																			
	AGREE	DIS-AGREE	DK																														
CHILDBEARING WOMAN'S CONCERN	1	2	8																														
DOCTOR/NURSE'S ASSISTANCE CRUCIAL	1	2	8																														
614	Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations: If she goes out without telling him? If she neglects the children? If she argues with him? If she refuses to have sex with him? If she burns the food?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>GOES OUT</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>NEGL. CHILDREN</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>ARGUES</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>REFUSES SEX</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>BURNS FOOD</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	GOES OUT	1	2	8	NEGL. CHILDREN	1	2	8	ARGUES	1	2	8	REFUSES SEX	1	2	8	BURNS FOOD	1	2	8							
	YES	NO	DK																														
GOES OUT	1	2	8																														
NEGL. CHILDREN	1	2	8																														
ARGUES	1	2	8																														
REFUSES SEX	1	2	8																														
BURNS FOOD	1	2	8																														
615	Do you think that if a woman refuses to have sex with her husband when he wants her to, he has the right to... a) Get angry and reprimand her? b) Refuse to give her money or other means of support? c) Use force and have sex with her even if she doesn't want to? d) Go ahead and have sex with another woman?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DON'T KNOW/DEPENDS</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> </tbody> </table>		YES	NO	DON'T KNOW/DEPENDS	a)	1	2	8	b)	1	2	8	c)	1	2	8	d)	1	2	8											
	YES	NO	DON'T KNOW/DEPENDS																														
a)	1	2	8																														
b)	1	2	8																														
c)	1	2	8																														
d)	1	2	8																														

SECTION 7. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																														
701	<p>Now I would like to talk about something else.</p> <p>HIV is a virus (infection) that can be passed from person to person. If people catch HIV they can become ill. This illness is called AIDS.</p> <p>Prior to this interview, have you ever heard of HIV or the disease called AIDS?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	→ 743																														
702	<p>CHECK Q. 110a and 110b:</p> <p>CODE '2', '3', or '4' CIRCLED IN IN 110a OR 110b <input type="checkbox"/> OR NO ANSWER ↓</p> <p>CODE '1' CIRCLED IN 110a AND 110b <input type="checkbox"/> OR CODE '5' CIRCLED IN 110b</p>		→ 704																														
703	<p>The following is a list of sources of information on prevention of getting HIV, the virus that causes AIDS. Have you ever</p> <p>a. Read messages about HIV or AIDS in newspapers or magazines?</p> <p>b. Seen leaflets, brochures, or booklets on HIV or AIDS?</p> <p>c. Gotten information on HIV or AIDS from the internet?</p>	<table border="0"> <thead> <tr> <th></th> <th align="center"><u>YES</u></th> <th align="center"><u>NO</u></th> </tr> </thead> <tbody> <tr> <td>NEWSPAPER/MAGAZINE . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>LEAFLETS/BOOKLETS . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>INTERNET . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> </tbody> </table>		<u>YES</u>	<u>NO</u>	NEWSPAPER/MAGAZINE . . . . .	1	2	LEAFLETS/BOOKLETS . . . . .	1	2	INTERNET . . . . .	1	2																			
	<u>YES</u>	<u>NO</u>																															
NEWSPAPER/MAGAZINE . . . . .	1	2																															
LEAFLETS/BOOKLETS . . . . .	1	2																															
INTERNET . . . . .	1	2																															
704	<p>READ INTRODUCTORY STATEMENT ONLY IF Q703 WAS NOT ASKED:</p> <p>The following is a list of sources of information on prevention of getting HIV, the virus that causes AIDS.</p> <p>Have you ever</p> <p>a. Seen messages about HIV or AIDS on billboards, signs or posters?</p> <p>b. Seen messages about HIV or AIDS on TV?</p> <p>c. Heard messages about HIV or AIDS on radio?</p> <p>d. Seen HIV or AIDS film or CD?</p> <p>e. Attended a community event about HIV or AIDS?</p> <p>f. Received information about AIDS or HIV, the virus that causes AIDS, from an outreach work, that is someone who came to your community and talked about HIV or AIDS?</p> <p>g. Participated in an HIV or AIDS peer education program?</p> <p>h. Participated in another type of HIV or AIDS education program such as a workshop or school program?</p> <p>i. Discussed AIDS OR HIV, the virus that causes AIDS, with other persons such as friend, family members, or work colleagues?</p>	<table border="0"> <thead> <tr> <th></th> <th align="center"><u>YES</u></th> <th align="center"><u>NO</u></th> </tr> </thead> <tbody> <tr> <td>SIGNS/POSTERS . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>TV . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>RADIO . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>FILM/CD . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>COMMUNITY EVENT . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>OUTREACH WORKER . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>PEER EDUCATION . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>OTHER EDUCATION . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> <tr> <td>FAMILY/FRIENDS . . . . .</td> <td align="center">1</td> <td align="center">2</td> </tr> </tbody> </table>		<u>YES</u>	<u>NO</u>	SIGNS/POSTERS . . . . .	1	2	TV . . . . .	1	2	RADIO . . . . .	1	2	FILM/CD . . . . .	1	2	COMMUNITY EVENT . . . . .	1	2	OUTREACH WORKER . . . . .	1	2	PEER EDUCATION . . . . .	1	2	OTHER EDUCATION . . . . .	1	2	FAMILY/FRIENDS . . . . .	1	2	
	<u>YES</u>	<u>NO</u>																															
SIGNS/POSTERS . . . . .	1	2																															
TV . . . . .	1	2																															
RADIO . . . . .	1	2																															
FILM/CD . . . . .	1	2																															
COMMUNITY EVENT . . . . .	1	2																															
OUTREACH WORKER . . . . .	1	2																															
PEER EDUCATION . . . . .	1	2																															
OTHER EDUCATION . . . . .	1	2																															
FAMILY/FRIENDS . . . . .	1	2																															
705	<p>Can people reduce their chance of getting the AIDS virus by having just one uninfected sex partner who has no other sex partners?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 8</p>																															
706	<p>Can people get the AIDS virus from mosquito bites?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 8</p>																															
707	<p>Can people reduce their chance of getting the AIDS virus by using a condom every time they have sex?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 8</p>																															

708	Can people get the AIDS virus by sharing food with a person who has AIDS?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
709	Can people reduce their chance of getting the AIDS virus by not having sexual intercourse at all?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
710	Can people get the AIDS virus from the saliva of someone who HIV or AIDS?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
711	Can people get HIV by having injections with a needle or syringe that has already been used by someone else?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
712	Can only gay men get HIV?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
713	Can people get HIV because of witchcraft or other supernatural means?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
714	Is it possible for a healthy-looking person to have HIV?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
715	Can HIV, the virus that causes AIDS, be transmitted from a mother to her baby:  During pregnancy? During delivery? By breastfeeding?	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;"></th> <th style="width: 10%; text-align: center;">YES</th> <th style="width: 10%; text-align: center;">NO</th> <th style="width: 10%; text-align: center;">DK</th> </tr> </thead> <tbody> <tr> <td>DURING PREG. ....</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>DURING DELIVERY ...</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>BREASTFEEDING ...</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>		YES	NO	DK	DURING PREG. ....	1	2	8	DURING DELIVERY ...	1	2	8	BREASTFEEDING ...	1	2	8	
	YES	NO	DK																
DURING PREG. ....	1	2	8																
DURING DELIVERY ...	1	2	8																
BREASTFEEDING ...	1	2	8																
716	CHECK 715: AT LEAST <input type="checkbox"/> ONE 'YES' <input type="checkbox"/>  OTHER <input type="checkbox"/> → 718																		
717	Are there any special drugs that a doctor or a nurse can give to a woman infected with HIV to reduce the risk of transmission to the baby?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
718	Have you heard about special drugs that people infected with HIV can get from a doctor or a nurse to help them live longer?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8																	
719	CHECK FOR PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.																		
720	I don't want to know the results, but have you ever been tested to see if you have HIV?	YES ..... 1 NO ..... 2	→ 725																
721	When was the last time you were tested?	LESS THAN 12 MONTHS AGO ..... 1 12 - 23 MONTHS AGO ..... 2 2 OR MORE YEARS AGO ..... 3																	
722	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?	ASKED FOR THE TEST ..... 1 OFFERED AND ACCEPTED ..... 2 REQUIRED ..... 3																	

723	I don't want to know the results, but did you get the results of the test?	YES ..... 1 NO ..... 2	
724	Where was the test done?  PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	PUBLIC SECTOR GOVERNMENT HOSPITAL ..... 11  OVERSEAS ..... 21 OTHER ..... 96 (SPECIFY)	→ 727
725	Do you know of a place where people can go to get tested for HIV?	YES ..... 1 NO ..... 2	→ 727
726	Where is that?  Any other place?  PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S).	PUBLIC SECTOR GOVERNMENT HOSPITAL ..... A MOBILE CLINICS ..... B  OVERSEAS ..... C OTHER ..... X (SPECIFY)	
727	Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
728	Would you share a meal with a person if you knew that this person had HIV?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
729	If a member of your family got infected with HIV, would you want it to remain a secret or not?	YES, REMAIN A SECRET ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8	
730	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	
731	In your opinion, if a female teacher has HIV but is not sick, should she be allowed to continue teaching in the school?	SHOULD BE ALLOWED ..... 1 SHOULD NOT BE ALLOWED ..... 2 DK/NOT SURE/DEPENDS ..... 8	
732	Should the names of all persons with HIV be displayed in a public place for everyone to see?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
733	Should all persons with HIV live apart from the general community?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
734	Should it be a criminal offence to knowingly pass HIV onto someone else?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
735	Should all newcomers to Nauru be required to take a test for HIV?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
736	Do you personally know someone who has been denied health services in the last 12 months because he or she has or is suspected to have HIV?	YES ..... 1 NO ..... 2 DK ANYONE WITH HIV ..... 3	→ 741
737	Do you personally know someone who has been denied involvement in social events, religious services, or community events in the last 12 months because he or she has or is suspected to have HIV?	YES ..... 1 NO ..... 2	
738	Do you personally know someone who has been verbally abused or teased in the last 12 months because he or she has or is suspected to have HIV?	YES ..... 1 NO ..... 2	

739	CHECK 736, 737, AND 738: NOT A SINGLE YES' <input type="checkbox"/>	AT LEAST ONE 'YES' <input type="checkbox"/>	→ 741
740	Do you personally know someone who has or is suspected to have HIV or AIDS?	YES ..... 1 NO ..... 2	
741	Do you agree or disagree with the following statement: People with HIV or AIDS should be ashamed of themselves.	AGREE ..... 1 DISAGREE ..... 2 DON'T KNOW/NO OPINION ..... 8	
742	Do you agree or disagree with the following statement: People with HIV or AIDS should be blamed for bringing the disease into the community.	AGREE ..... 1 DISAGREE ..... 2 DON'T KNOW/NO OPINION ..... 8	
743	CHECK 701: HEARD ABOUT AIDS Apart from AIDS, have you heard about other infections that can be transmitted through sexual contact?	NOT HEARD ABOUT AIDS Have you heard about infections that can be transmitted through sexual contact? YES ..... 1 NO ..... 2	
744	CHECK 410: HAS HAD SEXUAL INTERCOURSE <input type="checkbox"/>	HAS NOT HAD SEXUAL INTERCOURSE <input type="checkbox"/>	→ 752
745	CHECK 743: HEARD ABOUT OTHER SEXUALLY TRANSMITTED INFECTIONS? YES <input type="checkbox"/>	NO <input type="checkbox"/>	→ 747
746	Now I would like to ask you some questions about your health in the last 12 months. During the last 12 months, have you had a disease which you got through sexual contact?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
747	Sometimes men experience an abnormal discharge from their penis. During the last 12 months, have you had an abnormal discharge from your penis?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
748	Sometimes men have a sore or ulcer near their penis. During the last 12 months, have you had a sore or ulcer near your penis?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8	
749	CHECK 746, 747, AND 748: HAS HAD AN INFECTION (ANY 'YES') <input type="checkbox"/>	HAS NOT HAD AN INFECTION OR DOES NOT KNOW <input type="checkbox"/>	→ 752
750	The last time you had (PROBLEM FROM 746/747/748), did you seek any kind of advice or treatment?	YES ..... 1 NO ..... 2	→ 752
751	Where did you go? Any other place?  PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S).	PUBLIC SECTOR GOVERNMENT HOSPITAL ..... A MOBILE CLINIC ..... B PRIMARY HEALTH CARE ..... C  OTHER SOURCE LOCAL PRACTITIONER ..... D OVERSEAS ..... E OTHER ..... X (SPECIFY)	

752	Husband and wives do not always agree in 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 DON'T KNOW ..... 8
753	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 DON'T KNOW ..... 8
754	Is a wife justified in refusing to have sex with her husband when she knows her husband has sex with other women?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8
755	Do you believe that young men should wait until they are married to have sexual intercourse?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
756	Do you think that most young men you know wait until they are married to have sexual intercourse?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
757	Do you believe that men who are not married and are having sex should only have sex with one partner?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
758	Do you think that most men you know who are not married and are having sex have sex with only one partner?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
759	Do you believe that married men should only have sex with their wives?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
760	Do you think that most married men you know have sex only with their wives?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
761	Do you believe that young women should wait until they are married to have sexual intercourse?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
762	Do you think that most young women you know wait until they are married to have sexual intercourse?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
763	Do you believe that women who are not married and are having sex should only have sex with one partner?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
764	Do you think that most women you know who are not married and are having sex have sex with only one partner?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
765	Do you believe that married women should only have sex with their husbands?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8
766	Do you think that most married women you know have sex only with their husbands?	YES ..... 1 NO ..... 2 DK/NOT SURE/DEPENDS ..... 8



809	<p>Among these injections, how many were administered by a doctor, a nurse, a pharmacist, a dentist, or any other health worker?</p> <p>IF NUMBER OF INJECTIONS IS GREATER THAN 90, OR DAILY FOR 3 MONTHS OR MORE, RECORD '90'.</p> <p>IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE.</p>	<p>NUMBER OF INJECTIONS ... <input type="text"/> <input type="text"/></p> <p>NONE ..... 00 → 812</p>	
810	<p>The last time you had an injection given to you by a health worker, where did you go to get the injection?</p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.</p>	<p>PUBLIC SECTOR</p> <p>GOVERNMENT HOSPITAL ..... 11</p> <p>MOBILE CLINIC ..... 12</p> <p>PRIMARY HEALTH WORKER..... 13</p> <p>OVERSEAS ..... 21</p> <p>OTHER ..... 96</p> <p>_____</p> <p>(SPECIFY)(SPECIFY)</p>	
811	<p>Did the person who gave you that injection take the syringe and needle from a new, unopened package?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p> <p>DON'T KNOW ..... 8</p>	
812	<p>Do you currently smoke cigarettes?</p>	<p>YES ..... 1</p> <p>NO ..... 2 → 814</p>	
813	<p>In the last 24 hours, how many cigarettes did you smoke?</p>	<p>CIGARETTES ..... <input type="text"/> <input type="text"/></p>	
814	<p>Do you currently smoke or use any other type of tobacco?</p>	<p>YES ..... 1</p> <p>NO ..... 2 → 816</p>	
815	<p>What (other) type of tobacco do you currently smoke or use?</p> <p>RECORD ALL MENTIONED.</p>	<p>PIPE ..... A</p> <p>RAUARA..... B</p> <p>OTHER _____ X</p> <p>(SPECIFY)</p>	
816	<p>Now I would like to ask you about alcohol and drug use. Remember that your responses are completely anonymous and confidential and will not be released to anyone.</p> <p>During the last 12 months, how often did you have drinks containing alcohol, such as beer, wine, liquor, spirits, homebrew, toddy, yeast? Would you say?</p> <p>a. Never</p> <p>b. Monthly or less?</p> <p>c. 2 to 4 times a month?</p> <p>d. 2 to 3 times a week?</p> <p>e. 4 or more times a week?</p> <p>f. Don't know</p> <p>g. No answer / refused</p>	<p>NEVER ..... 0 → 820</p> <p>&lt; 2 PER MONTH ..... 1</p> <p>2-4 PER MONTH ..... 2</p> <p>2-3 PER WEEK ..... 3</p> <p>4+ PER WEEK ..... 4</p> <p>DON'T KNOW ..... 8</p> <p>NO ANSWER/REFUSED ..... 7</p>	

817	<p>During the last 12 months, how many standard drinks containing alcohol did you have on a typical day when drinking? A standard drink is a can of beer, a glass of wine, a shot of liquor, etc.</p> <p>f. 1 or 2?  e. 3 or 4?  d. 5 or 6?  c. 7, 8 or 9?  b. 10 to 19?  a. 20 or more?  g. Don't know  h. No answer / refused</p>	<p><b>NUMBER OF STANDARD DRINKS</b></p> <p>1 OR 2 ..... 1  3 OR 4 ..... 2  5 OR 6 ..... 3  7, 8 OR 9 ..... 4  10 TO 19 ..... 5  20 OR MORE ..... 6  DON'T KNOW ..... 8  NO ANSWER/REFUSED ..... 7</p>																																																																		
818	<p>During the last 12 months, how often did you have five or more standard drinks at one time? drinking? A standard drink is a can of beer, a glass of wine, a shot of liquor, etc.</p> <p>a. Never  b. Less than monthly?  c. Monthly?  d. Weekly?  e. Daily or almost daily?  f. Don't know  g. No answer / refused</p>	<p>NEVER ..... 0  LESS THAN MONTHLY ..... 1  MONTHLY ..... 2  WEEKLY ..... 3  DAILY OR ALMOST DAILY ..... 4  DON'T KNOW ..... 8  NO ANSWER/REFUSED ..... 7</p>																																																																		
819	<p>Next I would like to ask you about use of the following items.</p> <p>Have you <u>ever</u> tried...?  IF YES, ASK:  Did you use it in the last 30 days?</p> <p>a. Betel nut?  b. Kava?  c. Marijuana/Cannibis  d. Ecstasy/E/Eccies?  e. Inhalants including gas?  f. Speed/Base/Other amphetamines?  g. Ice/Crystal meth?  h. Cocaine/Crack/Freebasing?  i. Heroin?  j. LSD/Acid/Hallucinogens?  k. Steroids (non-medical use)?  l. Viagra/Cialis/Sex enhancers?</p>	<table border="1"> <thead> <tr> <th></th> <th>NEVER TRIED</th> <th>EVER TRIED</th> <th>USED IN LAST 30 DAYS</th> <th>NO ANSWER, REFUSED</th> </tr> </thead> <tbody> <tr><td>a.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>b.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>c.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>d.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>e.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>f.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>g.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>h.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>i.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>j.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>k.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> <tr><td>l.</td><td>1</td><td>2</td><td>3</td><td>7</td></tr> </tbody> </table>		NEVER TRIED	EVER TRIED	USED IN LAST 30 DAYS	NO ANSWER, REFUSED	a.	1	2	3	7	b.	1	2	3	7	c.	1	2	3	7	d.	1	2	3	7	e.	1	2	3	7	f.	1	2	3	7	g.	1	2	3	7	h.	1	2	3	7	i.	1	2	3	7	j.	1	2	3	7	k.	1	2	3	7	l.	1	2	3	7	
	NEVER TRIED	EVER TRIED	USED IN LAST 30 DAYS	NO ANSWER, REFUSED																																																																
a.	1	2	3	7																																																																
b.	1	2	3	7																																																																
c.	1	2	3	7																																																																
d.	1	2	3	7																																																																
e.	1	2	3	7																																																																
f.	1	2	3	7																																																																
g.	1	2	3	7																																																																
h.	1	2	3	7																																																																
i.	1	2	3	7																																																																
j.	1	2	3	7																																																																
k.	1	2	3	7																																																																
l.	1	2	3	7																																																																
820	<p>Some people have tried injecting drugs using a syringe. In the last 12 months, have you injected drugs (not including injections for medial reasons or treatment of an illness)?</p>	<p>YES ..... 1  NO ..... 2  NO ANSWER, REFUSED ..... 8</p>																																																																		
821	<p>RECORD THE TIME.</p>	<p>HOUR ..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p> <p>MINUTES ..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table></p>																																																																		

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT RESPONDENT:

---

---

---

---

---

---

COMMENTS ON SPECIFIC QUESTIONS:

---

---

---

---

---

---

ANY OTHER COMMENTS:

---

---

---

---

---

---

SUPERVISOR'S OBSERVATIONS

---

---

---

---

---

---

---

---

NAME OF SUPERVISOR: \_\_\_\_\_ DATE: \_\_\_\_\_

EDITOR'S OBSERVATIONS

---

---

---

---

---

---

NAME OF EDITOR: \_\_\_\_\_ DATE: \_\_\_\_\_

