

WOMEN'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 that asks women (and men) 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 between 30 and 60 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?

Ekamawir. Anga..... a makur epoa Nauru Burea of Statistics. Ama nim riring survey ngune oudot en me eman angoget imin ngana towe itsimor. Ama nan ibiboki kor ia wo totow am buok ian bitune. Bitune survey nan buok edogor iwidoduwa ranga et tsimoret engame Edae in riring bitune survey inan obu animoe oa angamae minute. Am dorer inat eranga okor bwe engame re nim eo tsiet Tamo ikido wo eo teng onei wo nim opan me ar nan erowi. Tsin ia wo eo teng en onuwaiw bitune aeo bwibwit mwim ar gona otoki eow ina, ino ar egada. Mi ita ngana ma tobei ngana wo nan otoki am dae, bwe tsimine kor woun am kamarar. Ngage inga am kido wo teng oudo ngana towe bitune survey.

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)? <i>Egen araquin am mek ine ian bitune tekawa me ekeow am kiwiwidei ino wo mek?</i> IF LESS THAN ONE YEAR, RECORD '00' YEARS.	YEARS <input type="text"/> <input type="text"/> ALWAYS 95 VISITOR 96	<input type="checkbox"/> → 104
103	Just before you moved here, did you live in Nauru or overseas? <i>Ian obwen am mek ine, wo mek ian Nauru oa mago?</i>	NAURU 1 OVERSEAS 2	
104	In what month and year were you born? <i>Maramen ken me eobweni ken ngea wo pudu ean?</i>	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? <i>Egen am obweni ngago dogin am dae in pudu?</i> 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? <i>Inga ia wo edegeri ekereri?</i>	YES 1 NO 2	<input type="checkbox"/> → 110a
107	What is the highest level of school you attended? <i>Eken ngea ekewew magit ogoda ngea wo egada?</i>	PRE SCHOOL 1 PRIMARY 2 SECONDARY 3 TERTIARY 4 HIGHER 5	

108	What is the highest year you completed at that level? <i>Eken bita magit ogoda eobweni ngea wo egada ean bita level?</i>	YEAR <input type="text"/>	
109	CHECK 107: PRE SCHOOL OR PRIMARY <input type="checkbox"/> SECONDARY OR HIGHER <input type="checkbox"/>	→	113
110a	Now I would like you to read this sentence to me. <i>A kongaw bwe wo nim retsin ei mungane edorer erre eow ine.</i> SHOW CARD IN ENGLISH TO RESPONDENT. IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE: Can you read any part of the sentence to me? <i>Wo gona retsin ei edorer ibun ean mungane oa ekeow?</i>	CANNOT READ AT ALL 1 ABLE TO READ ONLY PARTS OF SENTENCE 2 ABLE TO READ WHOLE SENTENCE.. 3 BLIND/VISUALLY IMPAIRED 4	→ 111
110b	SHOW CARD IN NAURUAN TO RESPONDENT. IF RESPONDENT CANNOT READ WHOLE SENTENCE, PROBE: Can you read any part of the sentence to me? <i>Wo gona retsin ei edorer ibun ean mungane oa ekeow?</i>	CANNOT READ AT ALL 1 ABLE TO READ ONLY PARTS OF SENTENCE 2 ABLE TO READ WHOLE SENTENCE.. 3 NO CARD WITH REQUIRED LANGUAGE 4 (SPECIFY LANGUAGE) BLIND/VISUALLY IMPAIRED 5	
111	Have you ever participated in a literacy program or any other program that involves learning to read or write (not including primary school)? <i>Inga ia wo edegeri ekereri ngana enim buok engame egona dar me retsin? Eo adu primary school?</i>	YES 1 NO 2	
112	CHECK 110a and 110b: CODE '2', '3' OR '4' <input type="checkbox"/> CODE '1' OR '5' CIRCLED <input type="checkbox"/>	→	114
113	Do you read a newspaper or magazine almost every day, at least once a week, less than once a week or not at all? <i>Aworit egen am retsin newspaper oa magazine, eo goeow iaran iaran, aiworin iat 1 week, oad ea iat 1 wek, ekeow okor?</i>	ALMOST EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3 NOT AT ALL 4	
114	Do you listen to the radio almost every day, at least once a week, less than once a week or not at all? <i>Aworit egen am kaiot e radio, eo goeow, iaran iaran, aiworin iat 1 week, oad ea aiworin iat week oa ekeow okor?</i>	ALMOST EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3 NOT AT ALL 4	
115	Do you watch television almost every day, at least once a week, less than once a week or not at all? <i>Aworit egen am tero TV, eo goeow iaran iaran, aiworin iat 1 week, oad ea aiworin iat 1 week, ekeow okor.</i>	ALMOST EVERY DAY 1 AT LEAST ONCE A WEEK 2 LESS THAN ONCE A WEEK 3 NOT AT ALL 4	
116	What is your religion? <i>Ekegen am makur in tueb?</i>	NAURU CONGREGATIONAL 1 ROMAN CATHOLIC 2 NAURU INDEPENDENCE 3 NO RELIGION 4 OTHER 6 (SPECIFY)	
117	What is your ethnicity? <i>Auwe ngamen i?</i>	NAURUAN 1 PART NAURUAN 2 IKIRIBATI 3 TUVALUAN 4 CHINESE 5 OTHER 6 (SPECIFY)	

211 Now I would like to record the names of all your births, whether still alive or not, starting with the first one you had.
 RECORD NAMES OF ALL THE BIRTHS IN 212. RECORD TWINS AND TRIPLETS ON SEPARATE LINES.
 (IF THERE ARE MORE THAN 12 BIRTHS, USE AN ADDITIONAL QUESTIONNAIRE, STARTING WITH THE SECOND ROW).

212	213	214	215	216	217	218	219	220	221
What name was given to your (first/next) baby? <i>Eken egen nea adamonin/karoworin ngaim?</i> (NAME)	Were any of these births twins? <i>Inga eara ia ibiyoro?</i>	Is (NAME) a boy or a girl? <i>En oa emwan?</i>	In what month and year was (NAME) born? <i>Eken maramen oa eobweni pudu ean?</i> PROBE: What is his/her birthday? <i>Eken ngea an dae in pudu ametune/eitune?</i>	Is (NAME) still alive? <i>Tsimor ngune ouge egen?</i>	How old was (NAME) at his/her last birthday? <i>Egen an obweni bita dogin an dae in pudu?</i> RECORD AGE IN COMPLETED YEARS.	Is (NAME) living with you? <i>Meg tangam ngune (egen)</i>	RECORD HOUSE-HOLD LINE NUMBER OF CHILD (RECORD '00' IF CHILD NOT LISTED IN HOUSE-HOLD).	How old was (NAME) when he/she died? <i>Egen an obweni eman. Ia aiquen egen an maram?</i> IF '1 YR', PROBE: How many months old was (NAME)? <i>Egen an maram?</i> RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	Were there any other live births between (NAME OF PREVIOUS BIRTH) and (NAME), including any children who died after birth? <i>Inga iu ngaim ngabuna pudu jugagan me odu memak eoning ngabuna ima imur.</i>
01	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (NEXT BIRTH)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	
02	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD ↙ BIRTH NO ... 2 NEXT ↘ BIRTH
03	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD ↙ BIRTH NO ... 2 NEXT ↘ BIRTH
04	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD ↙ BIRTH NO ... 2 NEXT ↘ BIRTH
05	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD ↙ BIRTH NO ... 2 NEXT ↘ BIRTH
06	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD ↙ BIRTH NO ... 2 NEXT ↘ BIRTH
07	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> YEAR <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD ↙ BIRTH NO ... 2 NEXT ↘ BIRTH

212	213	214	215	216	217	218	219	220	221	
What name was given to your next baby? <i>Ijen egen ngea ngaim erowin?</i>	Were any of these births twins? <i>Inga ia ibiyoro?</i>	Is (NAME) a boy or a girl? <i>Ngea ___ en oa emwan?</i>	In what month and year was (NAME) born? <i>Maramen me eobweni eken an pudu?</i> PROBE: What is his/her birthday? <i>Egen an bumun pudu</i>	Is (NAME) still alive? <i>Oreit tsimor ngune NAME?</i>	How old was (NAME) at his/her last birthday? <i>Egen an obweni ngago dogin an dae in pudu?</i> RECORD AGE IN COMPLETED YEARS.	IF ALIVE: Is (NAME) living with you? <i>Oreit emek itangum ngea NAME?</i>	IF ALIVE: RECORD HOUSE-HOLD LINE NUMBER OF CHILD (RECORD '00' IF CHILD NOT LISTED IN HOUSE-HOLD).	IF DEAD: How old was (NAME) when he/she died? <i>Egen an obweni ___ eman. Ia aiquen egen an maram?</i> IF '1 YR', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	Were there any other live births between (NAME OF PREVIOUS BIRTH) and (NAME), including any children who died after birth? <i>Inga ngaim pudu jugagan ___ odu mak ngaim ngabuna ima erowin an pudu?</i>	
08	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD BIRTH NO ... 2 NEXT BIRTH	
09	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD BIRTH NO ... 2 NEXT BIRTH	
10	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD BIRTH NO ... 2 NEXT BIRTH	
11	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD BIRTH NO ... 2 NEXT BIRTH	
12	SING 1 MULT 2	BOY 1 GIRL 2	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2 ↓ 220	AGE IN YEARS <input type="text"/> <input type="text"/>	YES ... 1 NO ... 2	LINE NUMBER <input type="text"/> <input type="text"/> (GO TO 221)	DAYS ... 1 MONTHS ... 2 YEARS ... 3	YES ... 1 ADD BIRTH NO ... 2 NEXT BIRTH	
222	Have you had any live births since the birth of (NAME OF LAST BIRTH)? IF YES, RECORD BIRTH(S) IN TABLE. <i>Inga iu ngaim tsimor pudu iruwin NAME?</i>					YES ... 1 NO ... 2				
223	<p>COMPARE 208 WITH NUMBER OF BIRTHS IN HISTORY ABOVE AND MARK:</p> <p>NUMBERS ARE SAME <input type="checkbox"/> NUMBERS ARE DIFFERENT <input type="checkbox"/> (PROBE AND RECONCILE)</p> <p>CHECK: FOR EACH BIRTH: YEAR OF BIRTH IS RECORDED.</p> <p>FOR EACH BIRTH SINCE JANUARY 2002: MONTH AND YEAR OF BIRTH ARE RECORDED.</p> <p>FOR EACH LIVING CHILD: CURRENT AGE IS RECORDED.</p> <p>FOR EACH DEAD CHILD: AGE AT DEATH IS RECORDED.</p> <p>FOR AGE AT DEATH 12 MONTHS OR 1 YEAR: PROBE TO DETERMINE EXACT NUMBER OF MONTHS.</p>									
224	CHECK 215 AND ENTER THE NUMBER OF BIRTHS IN 2002 OR LATER. IF NONE, RECORD '0' AND SKIP TO 226.									

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
225	FOR EACH BIRTH SINCE JANUARY 2002, ENTER 'B' IN THE MONTH OF BIRTH IN THE CALENDAR. WRITE THE NAME OF THE CHILD TO THE LEFT OF THE 'B' CODE. FOR EACH BIRTH, ASK THE NUMBER OF MONTHS THE PREGNANCY LASTED AND RECORD 'P' IN EACH OF THE PRECEDING MONTHS ACCORDING TO THE DURATION OF PREGNANCY. (NOTE: THE NUMBER OF 'P's MUST BE ONE LESS THAN THE NUMBER OF MONTHS THAT THE PREGNANCY LASTED.)		
226	Are you pregnant now? <i>Wo tuk ian am ijeng ngage oa ekeow?</i>	YES 1 NO 2 UNSURE 8	<input type="checkbox"/> → 229
227	How many months pregnant are you? <i>Egen am maram?</i> RECORD NUMBER OF COMPLETED MONTHS. ENTER 'P's IN THE CALENDAR, BEGINNING WITH THE MONTH OF INTERVIEW AND FOR THE TOTAL NUMBER OF COMPLETED MONTHS.	MONTHS <input type="text"/> <input type="text"/>	
228	At the time you became pregnant, did you want to become pregnant <u>then</u> , did you want to wait until <u>later</u> , or did you <u>not want</u> to have any (more) children at all? <i>Edae ngaga wo ijeng en, wo teng ijeng ngaga oa wo teng ober eken, oa wo eo teng tsimine ngaim oa wo eo teng aeong ebak ngaim?</i>	THEN 1 LATER 2 NOT AT ALL 3	
229	Have you ever had a pregnancy that miscarried, was aborted, or ended in a stillbirth? <i>Inga ian am dae in ijeng ia wo ebwijbwij, ia eo goro am bum in ijeng oa pudu n ima bita ngaim?</i>	YES 1 NO 2	→ 237
230	When did the last such pregnancy end? <i>Gona pan bita edae ouga dedein an toki am ijeng?</i>	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
231	CHECK 230: LAST PREGNANCY ENDED IN <input type="checkbox"/> JAN. 2002 OR LATER LAST PREGNANCY ENDED BEFORE <input type="checkbox"/> JAN. 2002		→ 237
232	How many months pregnant were you when the last such pregnancy ended? <i>Egen am maram ngaga wo ebwijbwij eo goro am jeng oa pudu n ima ngaim?</i> RECORD NUMBER OF COMPLETED MONTHS. ENTER 'T' IN THE CALENDAR IN THE MONTH THAT THE PREGNANCY TERMINATED AND 'P' FOR THE REMAINING NUMBER OF COMPLETED MONTHS.	MONTHS <input type="text"/> <input type="text"/>	
233	Since January 2002, have you had any other pregnancies that did not result in a live birth? <i>Atsin ngago Januar 2002, inga ia eko metan am ijeng bwe pudu n ima ngaim?</i>	YES 1 NO 2	→ 235
234	ASK THE DATE AND THE DURATION OF PREGNANCY FOR EACH EARLIER NON-LIVE BIRTH PREGNANCY BACK TO JANUARY 2002. ENTER 'T' IN THE CALENDAR IN THE MONTH THAT EACH PREGNANCY TERMINATED AND 'P' FOR THE REMAINING NUMBER OF COMPLETED MONTHS.		
235	Did you have any miscarriages, abortions or stillbirths that ended before 2002? <i>Ian obwen 2002 inga ia wo ebwijbwij, eo goro am ijeng, oa pudu n ima ngaim?</i>	YES 1 NO 2	→ 237
236	When did the last such pregnancy that terminated before 2002 end? <i>Bitu em ijeng ngea oduok in ian obwen 200, ngata ngaga tuk en?</i>	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

237	<p>When did your last menstrual period start? <i>Ngata ngago wo roga am maram?</i></p> <p>_____</p> <p>(DATE, IF GIVEN)</p>	<p>DAYS AGO 1</p> <p>WEEKS AGO 2</p> <p>MONTHS AGO 3</p> <p>YEARS AGO 4</p> <p>IN MENOPAUSE/ HAS HAD HYSTERECTOMY ... 994</p> <p>BEFORE LAST BIRTH 995</p> <p>NEVER MENSTRUATED 996</p>	<table border="1" style="width: 40px; height: 80px; margin: auto;"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>								
238	<p>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? <i>Inimagen an dae n era en inga ibum ia en ri nan gonan ijeng ia ar ejad?</i></p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	<p>→ 301</p>								
239	<p>Is this time just before her period begins, during her period, right after her period has ended, or halfway between two periods? <i>Ngune bitune edae ian obwen an arak in era en, ngaga oreit kunuwaw, erowin an arak, oa ijugagan oa inimaget eroga ion me ion?</i></p>	<p>JUST BEFORE HER PERIOD BEGINS 1</p> <p>DURING HER PERIOD 2</p> <p>RIGHT AFTER HER PERIOD HAS ENDED 3</p> <p>HALFWAY BETWEEN TWO PERIODS 4</p> <p>OTHER _____ 6 (SPECIFY)</p> <p>DON'T KNOW 8</p>									

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. <i>Ngage a teng ia am dorer ei emedena oa dedein at engame nim ngeaa maren ebwakin ngaiura?</i> Which ways or methods have you heard about? <i>Inga emedena ia wo kaiot bwe gonan buok engame bwe re enim gona ea ura bitune?</i> FOR METHODS NOT MENTIONED SPONTANEOUSLY, ASK: Have you ever heard of (METHOD)? <i>Inga emedena ia wo ogen kaiot angogen?</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 EACH METHOD WITH CODE 1 CIRCLED IN 301, ASK 302.</p>	302 Have you ever used (METHOD)? <i>Inga ia wo ouwonon imin oa emedenat eo ijeng?</i>	
01	FEMALE STERILIZATION Women can have an operation to avoid having any more children. <i>Egona riring en bwe re nim eo gauwei gona ngaiura?</i>	YES 1 NO 2 ↘	Have you ever had an operation to avoid having any more children? YES 1 NO 2
02	MALE STERILIZATION Men can have an operation to avoid having any more children. <i>Egona riring emwan bwe re nim eo gauwei karig.</i>	YES 1 NO 2 ↘	Have you ever had a partner who had an operation to avoid having any more children? YES 1 NO 2
03	PILL Women can take a pill every day to avoid becoming pregnant. <i>Tsimine adaparo ngea en enim on aeow aeow bwe bwe re nim eo ijeng?</i>	YES 1 NO 2 ↘	YES 1 NO 2
04	IUD Women can have a loop or coil placed inside them by a doctor or a nurse. <i>Egona etotu ian an bwer in karig en loop, coil bwe re enim eo gona karig.</i>	YES 1 NO 2 ↘	YES 1 NO 2
05	INJECTABLES Women can have an injection by a health provider that stops them from becoming pregnant for one or more months. <i>Tsimine etobab ngea eoija en ian aiqen oa ebak eken maramen bwe re nim eo karig.</i>	YES 1 NO 2 ↘	YES 1 NO 2
06	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. <i>Egona bett totu ian beora implant bwe en re nim eo karig. Ngane engaeow itugain maien beora.</i>	YES 1 NO 2 ↘	YES 1 NO 2
07	CONDOM Men can put a rubber sheath on their penis before sexual intercourse. <i>Emwan gona eduwa on dorora erubber ian obwen aeora ejad?</i>	YES 1 NO 2 ↘	YES 1 NO 2
08	FEMALE CONDOM Women can place a sheath in their vagina before sexual intercourse. <i>En gona totu ian aura min e rubber ian obwen aura ejad bwe nimrejida an metu ian aura ebar n oning ret duwen amea emwan.</i>	YES 1 NO 2 ↘	YES 1 NO 2
09	LACTATIONAL AMENORRHEA METHOD (LAM) (2)	YES 1 NO 2 ↘	YES 1 NO 2
10	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>Ian maramen tsimine edae oa ibum ngana en re re eab ejad, pwer a ura daein era bwe ia ar ejad re re nan ijeng?</i>	YES 1 NO 2 ↘	YES 1 NO 2
11	WITHDRAWAL Men can be careful and pull out before climax. <i>Emwan re gona okeatu ret duwora atonin rabadat aita eita en ia re nim eo karig.</i>	YES 1 NO 2 ↘	YES 1 NO 2
12	EMERGENCY CONTRACEPTION As an emergency measure after unprotected sexual intercourse, women can take special pills at any time within five days to prevent pregnancy. <i>Tsimine adaparo ngana en gona on iruwin aura ejad ia re eo og duwor. Me ngane enim on ian obwen an mag abumin aijimo ibum.</i>	YES 1 NO 2 ↘	YES 1 NO 2
13	Have you heard of any other ways or methods that women or men can use to avoid pregnancy? <i>Inga iu emedena wo tsiet ngana gona edug an karig engame?</i>	YES 1 _____ (SPECIFY) _____ (SPECIFY) NO 2	YES 1 NO 2 YES 1 NO 2
303	CHECK 302: NOT A SINGLE "YES" (NEVER USED) <input type="checkbox"/> AT LEAST ONE "YES" (EVER USED) <input type="checkbox"/>		307

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
304	Have you ever used anything or tried in any way to delay or avoid getting pregnant? <i>Inga imin ia wo ogiten ouwonon me riring bwe wo nim eo ijeng?</i>	YES 1 NO 2	→ 306
305	ENTER '0' IN THE CALENDAR IN EACH BLANK MONTH. → 333		
306	What have you used or done? <i>Eket imin wo ouwonon oa wo riring?</i> CORRECT 302 AND 303 (AND 301 IF NECESSARY).		
307	Now I would like to ask you about the first time that you did something or used a method to avoid getting pregnant. <i>Ngage a teng oudonuw angogen bita adamonin am riring bitune me emedena kegen wo ouwonon bwe wo eo ijeng</i> How many living children did you have at that time, if any? <i>Egen ebwakin ngaim eat edae ean ngage ia tsimine?</i> IF NONE, RECORD '00'.	NUMBER OF CHILDREN <input type="text"/> <input type="text"/>	
308	CHECK 302 (01): WOMAN NOT STERILIZED <input type="checkbox"/> ↓ WOMAN STERILIZED <input type="checkbox"/> → 311A		
309	CHECK 226: NOT PREGNANT OR UNSURE <input type="checkbox"/> ↓ PREGNANT <input type="checkbox"/> → 322		
310	Are you currently doing something or using any method to delay or avoid getting pregnant? <i>Ngage ngauwe wo ouwonot imin bwe wo nim eo ijeng?</i>	YES 1 NO 2	→ 322
311	Which method are you using? <i>Ekegen ngea wo ouwonon?</i> CIRCLE ALL MENTIONED. IF MORE THAN ONE METHOD MENTIONED, FOLLOW SKIP INSTRUCTION FOR HIGHEST METHOD ON LIST.	FEMALE STERILIZATION A MALE STERILIZATION B PILL C IUD D INJECTABLES E IMPLANTS F CONDOM G FEMALE CONDOM H DIAPHRAGM I FOAM/JELLY J LACTATIONAL AMEN. METHOD K RHYTHM METHOD L WITHDRAWAL M OTHER _____ X (SPECIFY)	→ 316 → 315 → 315 → 319A
311A	CIRCLE 'A' FOR FEMALE STERILIZATION.		
312	RECORD IF CODE C FOR PILL IS CIRCLED IN 311. YES (USING PILL) <input type="checkbox"/> ↓ May I see the package of pills you are using? <i>Wo gona weweida ame oangam adaparo wo tuk ean?</i> RECORD NAME OF BRAND IF PACKAGE SEEN. NO (USING CONDOM BUT NOT PILL) <input type="checkbox"/> ↓ May I see the package of condoms you are using? <i>Wo gona weweida ame wam oangam adaparo wo tuk ean? rubber wo ouwonon?</i>	PACKAGE SEEN 1 BRAND NAME _____ <input type="text"/> <input type="text"/> (SPECIFY) PACKAGE NOT SEEN 2	→ 314
313	Do you know the brand name of the (pills/condoms) you are using? <i>Wo tsiet egen oangam adaparo oa rubber wo ouwonon?</i> RECORD NAME OF BRAND.	BRAND NAME _____ <input type="text"/> <input type="text"/> (SPECIFY) DON'T KNOW 98	

314	How many (pill cycles/condoms) did you get the last time? <i>Eget (adporo/rubber) wo obu ngago tokit edae wo koni?</i>	NUMBER OF PILL CYCLES/CONDOMS ... <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 998	
315	The last time you obtained (HIGHEST METHOD ON LIST IN 311), how much did you pay in total, including the cost of the method and any consultation you may have had? <i>Eget emark wo pumwe dogin medenan am tuk am karig me onani en am nim oduog am karig?</i>	COST <input type="text"/> <input type="text"/> <input type="text"/> FREE 995 DON'T KNOW 998	} → 319A
316	In what facility did the sterilization take place? <i>Eriring aw eow l bita oduog en am karig?</i> PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	PUBLIC SECTOR GOVT. HOSPITAL 1 OVERSEAS 2 OTHER _____ 6 (SPECIFY)	
317	CHECK 311/311A: <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> CODE 'A' CIRCLED <input type="checkbox"/> ↓ </div> <div style="text-align: center;"> CODE 'A' NOT CIRCLED <input type="checkbox"/> ↓ </div> </div> <div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> Before your sterilization operation, were you told that you would not be able to have any (more) children because of the operation? <i>Ian obwen oduok en am karig epanaw a iok ngana wo eab gauwei gona ngaim?</i> </div> <div style="width: 45%;"> Before the sterilization operation, was your husband/partner told that he would not be able to have any (more) children because of the operation? <i>Ian obwen oduok en an karig agem/dangam , epana ngaga eab gauwei tsimine (iu) ngain dogin bita edeto?</i> </div> </div>	YES 1 NO 2 DON'T KNOW 8	
318	How much did you (your husband/partner) pay in total for the sterilization, including any consultation you (he) may have had? <i>Egen tebin pumwen riring en me onani en (agem/dangam) bwe mwar nim eo gona gauwei gona ngaimur?</i>	COST <input type="text"/> <input type="text"/> <input type="text"/> FREE 995 DON'T KNOW 998	
319	In what month and year was the sterilization performed? <i>Maramen me eobweni kegen ngaga eriring ea urur bitune?</i>	MONTH <input type="text"/> <input type="text"/> YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
319A	Since what month and year have you been using (CURRENT METHOD) without stopping? <i>Bita emedena ngea wo ouwonon bwe wo nim eo gona karig egeten raquin am ouwonon me wo eo tuk?</i> PROBE: For how long have you been using (CURRENT METHOD) now without stopping? <i>Egen raquin am ouwonon me wo eo tuk oa onano?</i>		
320	CHECK 319/319A, 215 AND 230: ANY BIRTH OR PREGNANCY TERMINATION AFTER MONTH AND YEAR OF START OF USE OF CONTRACEPTION IN 319/319A GO BACK TO 319/319A, PROBE AND RECORD MONTH AND YEAR AT START OF CONTINUOUS USE OF CURRENT METHOD (MUST BE AFTER LAST BIRTH OR PREGNANCY TERMINATION).	YES <input type="checkbox"/> NO <input type="checkbox"/>	

321	<p>CHECK 319/319A:</p> <p style="text-align: center;">YEAR IS 2002 OR LATER</p> <div style="text-align: center;">  </div> <p>ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND IN EACH MONTH BACK TO THE DATE STARTED USING.</p>	<p style="text-align: center;">YEAR IS 2001 OR EARLIER</p> <div style="text-align: center;">  </div> <p>ENTER CODE FOR METHOD USED IN MONTH OF INTERVIEW IN THE CALENDAR AND EACH MONTH BACK TO JANUARY 2002.</p> <p style="text-align: center;">THEN SKIP TO 331</p>
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322 I would like to ask you some questions about the times you or your partner may have used a method to avoid getting pregnant during the last few years.
A teng oudonuw ikudo ibun towew auwe me amea dangam. Oten manin amurur oduk amurur karig ian mungana eobweni nuwawen?
 USE CALENDAR TO PROBE FOR EARLIER PERIODS OF USE AND NONUSE, STARTING WITH MOST RECENT USE, BACK TO JANUARY 2002.
 USE NAMES OF CHILDREN, DATES OF BIRTH, AND PERIODS OF PREGNANCY AS REFERENCE POINTS.
 ENTER METHOD USE CODE OR '0' FOR NONUSE IN EACH BLANK MONTH.

ILLUSTRATIVE QUESTIONS:
 * When was the last time you used a method? Which method was that?
Ngata dogin am ouwonon emedena/dedein eo ijeng? Ekegen ngea wo ouwonon?
 * When did you start using that method? How long after the birth of (NAME)?
Ngata ngaga wo auweidan ouwonon bitune emedena? Egen raquin erowin an pudu (NAME)
 * How long did you use the method then?
Egen raquin am ouwonon ngune bitune emedenan eo ijeng?

323	<p>CHECK 311/311A:</p> <p>CIRCLE METHOD CODE:</p> <p>IF MORE THAN ONE METHOD CODE CIRCLED IN 311/311A, CIRCLE CODE FOR HIGHEST METHOD IN LIST.</p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td>NO CODE CIRCLED</td><td style="text-align: right;">00</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 333</td></tr> <tr><td>FEMALE STERILIZATION</td><td style="text-align: right;">01</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 326</td></tr> <tr><td>MALE STERILIZATION</td><td style="text-align: right;">02</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 335</td></tr> <tr><td>PILL</td><td style="text-align: right;">03</td><td></td></tr> <tr><td>IUD</td><td style="text-align: right;">04</td><td></td></tr> <tr><td>INJECTABLES</td><td style="text-align: right;">05</td><td></td></tr> <tr><td>IMPLANTS</td><td style="text-align: right;">06</td><td></td></tr> <tr><td>CONDOM</td><td style="text-align: right;">07</td><td></td></tr> <tr><td>FEMALE CONDOM</td><td style="text-align: right;">08</td><td></td></tr> <tr><td>DIAPHRAGM</td><td style="text-align: right;">09</td><td></td></tr> <tr><td>FOAM/JELLY</td><td style="text-align: right;">10</td><td></td></tr> <tr><td>LACTATIONAL AMEN. METHOD ...</td><td style="text-align: right;">11</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 324A</td></tr> <tr><td>RHYTHM METHOD</td><td style="text-align: right;">12</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 324A</td></tr> <tr><td>WITHDRAWAL</td><td style="text-align: right;">13</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 335</td></tr> <tr><td>OTHER METHOD</td><td style="text-align: right;">96</td><td style="border-left: 1px solid black; padding-left: 10px;">→ 335</td></tr> </table>	NO CODE CIRCLED	00	→ 333	FEMALE STERILIZATION	01	→ 326	MALE STERILIZATION	02	→ 335	PILL	03		IUD	04		INJECTABLES	05		IMPLANTS	06		CONDOM	07		FEMALE CONDOM	08		DIAPHRAGM	09		FOAM/JELLY	10		LACTATIONAL AMEN. METHOD ...	11	→ 324A	RHYTHM METHOD	12	→ 324A	WITHDRAWAL	13	→ 335	OTHER METHOD	96	→ 335
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WITHDRAWAL	13	→ 335																																													
OTHER METHOD	96	→ 335																																													

324	<p>Where did you obtain (CURRENT METHOD) when you started using it?</p> <p><i>Wo otsin I bita medenam in oduok am karig me ngage wo auweidaten ouwonon bitune emedena?</i></p>	<table style="width: 100%; border-collapse: collapse;"> <tr><td colspan="2">PUBLIC SECTOR</td></tr> <tr><td>GOVT. HOSPITAL</td><td style="text-align: right;">11</td></tr> <tr><td>MOBILE CLINIC</td><td style="text-align: right;">12</td></tr> <tr><td>PRIMARY HEALTH CARE</td><td style="text-align: right;">13</td></tr> <tr><td colspan="2">OTHER SOURCE</td></tr> <tr><td>COMMUNITIES.....</td><td style="text-align: right;">21</td></tr> <tr><td>FRIEND/RELATIVE</td><td style="text-align: right;">22</td></tr> <tr><td>OVERSEAS.....</td><td style="text-align: right;">23</td></tr> <tr><td>SHOPS.....</td><td style="text-align: right;">24</td></tr> <tr><td>OTHER _____</td><td style="text-align: right;">96</td></tr> <tr><td colspan="2" style="text-align: center;">(SPECIFY)</td></tr> </table>	PUBLIC SECTOR		GOVT. HOSPITAL	11	MOBILE CLINIC	12	PRIMARY HEALTH CARE	13	OTHER SOURCE		COMMUNITIES.....	21	FRIEND/RELATIVE	22	OVERSEAS.....	23	SHOPS.....	24	OTHER _____	96	(SPECIFY)	
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SHOPS.....	24																							
OTHER _____	96																							
(SPECIFY)																								
324A	<p>Where did you learn how to use the rhythm/lactational amenorhea method?</p> <p><i>Wo kereri ei iow I bita rhythm method (ouwononet edae iat calendar ngea wo inan eo ijeng ean)/ me am eo gaida am maram dogin am okimama ngaim?</i></p>																							

325	CHECK 311/311A: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 311/311A, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	PILL 03 IUD 04 INJECTABLES 05 IMPLANTS 06 CONDOM 07 FEMALE CONDOM 08 DIAPHRAGM 09 FOAM/JELLY 10 LACTATIONAL AMEN. METHOD ... 11 RHYTHM METHOD 12	 → 332 → 329 → 329 → 329 → 335 → 335	
326	You obtained (CURRENT METHOD FROM 323) from (SOURCE OF METHOD FROM 316 OR 324) in (DATE FROM 319/319A). At that time, were you told about side effects or problems you might have with the method? <i>Eat edae ngaga wo ouwonoten bita medenan e panaw angogen baka n bitune emedena?</i>	YES 1 NO 2	→ 328	
327	Were you ever told by a health or family planning worker about side effects or problems you might have with the method? <i>Inga ia amen makur iat arak/amen buok engame re nim ngaea maren aura karig ia re ereri eaw baka in mungana emedena nan gona metaw.</i>	YES 1 NO 2	→ 329	
328	Were you told what to do if you experienced side effects or problems? <i>Inga ia epanaw imin wo nim riring ia emetaw mungana ekejeija atsin eat bita emedenan am oduok am karig?</i>	YES 1 NO 2		
329	CHECK 326: <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> CODE '1' CIRCLED  </div> <div style="text-align: center;"> CODE '1' NOT CIRCLED  </div> </div> At that time, were you told about other methods of family planning that you could use? <i>Ean ngaga inga iu medenan praneiy am karig ngana epanaw wo gonan ouwonon?</i>	When you obtained (CURRENT METHOD FROM 323) from (SOURCE OF METHOD FROM 316 OR 324) were you told about other methods of family planning that you could use? <i>Ngaga wo gona ..., epanaw oa ijok angoget emedena ibun ngana wo kona ouwonon?</i>	YES 1 NO 2	→ 331
330	Were you ever told by a health or family planning worker about other methods of family planning that you could use? <i>Inga pana em atsin turit amen makur ei angoget praneiyen ebakin am karig eorit emedena wo gonan ouwonon?</i>	YES 1 NO 2		
331	CHECK 311/311A: CIRCLE METHOD CODE: IF MORE THAN ONE METHOD CODE CIRCLED IN 311/311A, CIRCLE CODE FOR HIGHEST METHOD IN LIST.	FEMALE STERILIZATION 01 MALE STERILIZATION 02 PILL 03 IUD 04 INJECTABLES 05 IMPLANTS 06 CONDOM 07 FEMALE CONDOM 08 DIAPHRAGM 09 FOAM/JELLY 10 LACTATIONAL AMEN. METHOD ... 11 RHYTHM METHOD 12 WITHDRAWAL 13 OTHER METHOD 96	 → 335 → 335	

332	<p>Where did you obtain CURRENT METHOD the last time? <i>Wo otsin I bitune emedena wo tuk ean ngaga?</i> PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.</p>	<p>PUBLIC SECTOR GOVT. HOSPITAL 11 MOBILE CLINIC 14 PRIMARY HEALTH CARE 15</p> <p>OTHER SOURCE COMMUNITIES..... 21 FRIEND/RELATIVE 22 OVERSEAS..... 23 SHOPS..... 24</p> <p>OTHER _____ 96 (SPECIFY)</p>	<p>→ 335</p>
333	<p>Do you know of a place where you can obtain a method of family planning? <i>Wo tsiet etang ino wo nan gona medenan in pranei am karig?</i></p>	<p>YES 1 NO 2</p>	<p>→ 335</p>
334	<p>Where is that? <i>I ngune etang?</i> Any other place? <i>Inga iu etang?</i> PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S). 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))</p>	<p>PUBLIC SECTOR GOVT. HOSPITAL A MOBILE CLINIC B PRIMARY HEALTH CARE C</p> <p>OTHER SOURCE COMMUNITIES..... D FRIEND/RELATIVE..... E OVERSEAS..... F SHOPS..... G</p> <p>OTHER _____ X (SPECIFY)</p>	
335	<p>In the last 12 months, were you visited by a primary health care who talked to you about family planning? <i>Ata me aro maramen nuwawen inga ia nangaw Primary Health Care engame bwe enim dorer aw angogen praneiyen am karig?</i></p>	<p>YES 1 NO 2</p>	
336	<p>In the last 12 months, have you visited a health facility for care for yourself (or your children)? <i>Ian ata ma aro maramen nuwawen inga ia amen makur iat arak nangaw bwe re nim buokuw me ngaim?</i></p>	<p>YES 1 NO 2</p>	<p>→ 401</p>
337	<p>Did any staff member at the health facility speak to you about family planning methods? <i>Inga amen makur iat arak ia pan aw dogin praneiy en am karig?</i></p>	<p>YES 1 NO 2</p>	

SECTION 4. PREGNANCY AND POSTNATAL CARE

401	CHECK 224:	ONE OR MORE BIRTHS IN 2002 OR LATER <input type="checkbox"/>	NO BIRTHS IN 2002 OR LATER <input type="checkbox"/>	→ 546
402	<p>CHECK 215: ENTER IN THE TABLE THE LINE NUMBER, NAME, AND SURVIVAL STATUS OF EACH BIRTH IN 2002 OR LATER. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH. (IF THERE ARE MORE THAN 3 BIRTHS, USE LAST 2 COLUMNS OF ADDITIONAL QUESTIONNAIRES).</p> <p>Now I would like to ask you some questions about the health of all your children born in the last five years. (We will talk about each separately.) <i>Ngaga a teng odonuw ikudo towe tsimorin ngaim ajimo auro obweni me eoning eken.</i></p>			
403	LINE NUMBER FROM 212	LAST BIRTH LINE NO. <input type="text"/>	NEXT-TO-LAST BIRTH LINE NO. <input type="text"/>	SECOND-FROM-LAST BIRTH LINE NO. <input type="text"/>
404	FROM 212 AND 216	NAME _____ LIVING <input type="checkbox"/> DEAD <input type="checkbox"/>	NAME _____ LIVING <input type="checkbox"/> DEAD <input type="checkbox"/>	NAME _____ LIVING <input type="checkbox"/> DEAD <input type="checkbox"/>
405	At the time you became pregnant with (NAME), did you want to become pregnant <u>then</u> , did you want to wait until <u>later</u> , or did you <u>not want</u> to have any (more) children at all? <i>Ngaga wo ijeng ean (EGEN), wo teng ijeng nganga, ober ken, oa wo eo teng en ia ituk tsimine ngaim ngaga?</i>	THEN 1 (SKIP TO 407) <input type="checkbox"/> LATER 2 NOT AT ALL 3 (SKIP TO 407) <input type="checkbox"/>	THEN 1 (SKIP TO 426) <input type="checkbox"/> LATER 2 NOT AT ALL 3 (SKIP TO 426) <input type="checkbox"/>	THEN 1 (SKIP TO 426) <input type="checkbox"/> LATER 2 NOT AT ALL 3 (SKIP TO 426) <input type="checkbox"/>
406	How much longer would you have liked to wait? <i>la wo nim ober egen araquit edae ngea wo ouge bwe eimwi?</i>	MONTHS1 <input type="text"/> YEARS2 <input type="text"/> DON'T KNOW ... 998	MONTHS1 <input type="text"/> YEARS2 <input type="text"/> DON'T KNOW ... 998	MONTHS1 <input type="text"/> YEARS2 <input type="text"/> DON'T KNOW ... 998
407	Did you see anyone for antenatal care for this pregnancy? <i>Tsimine engame wo arowong a ngaga wo ijeng dogin ranga em ian obwen an pudu ngaim?</i> IF YES: Whom did you see? Anyone else? (i) <i>ijegen ngune?</i> (ii) <i>inga iu engame?</i> PROBE TO IDENTIFY EACH TYPE OF PERSON AND RECORD ALL MENTIONED.	HEALTH PERSONNEL DOCTOR A NURSE/MIDWIFE B PRIMARY HEALTH CARE C OTHER PERSON TRADITIONAL BIRTH ATTENDANT ... D OTHER _____ X (SPECIFY) NO ONE Y (SKIP TO 414) <input type="checkbox"/>		
NO.	QUESTIONS AND FILTERS	LAST BIRTH NAME _____	NEXT-TO-LAST BIRTH NAME _____	SECOND-FROM-LAST BIRTH NAME _____
408	Where did you receive antenatal care for this pregnancy? <i>Erangaw eow l ian obwen an pudu ngaim?</i> Anywhere else? <i>Inga iu ino erangaw ean?</i> PROBE TO IDENTIFY TYPE(S) OF SOURCE(S) AND CIRCLE THE APPROPRIATE CODE(S).	HOME YOUR HOME A OTHER HOME B PUBLIC SECTOR GOVT. HOSPITAL ... C MOBILE CLINIC ... D PRIMARY HEALTH CARE E OVERSEAS HEALTH FACILITY F HOME G OTHER _____ X (SPECIFY)		
409	How many months pregnant were you when you first received antenatal care for this pregnancy? <i>Egen am maram ngaga wo aiweiyidaten antenatal care dogin am ijeng?</i>	MONTHS <input type="text"/> DON'T KNOW 98		
410	How many times did you receive antenatal care during this pregnancy? <i>Egen ebakin am edegeri check ei en tsimorum dogin am ijen?</i>	NUMBER OF TIMES . <input type="text"/> DON'T KNOW 98		

411	As part of your antenatal care during this pregnancy, were any of the following done at least once? <i>Ean bitune am ijeng inga ia iriring aw mungane bet eworin?</i> Were you weighed? <i>(i) Ebaun ei uw?</i> Was your blood pressure measured? <i>(ii) Aea wan bem?</i> Did you give a urine sample? <i>Totow kabebem bwe enim aea?</i> Did you give a blood sample? <i>Totow aram bwe enim aea?</i>	YES NO WEIGHT 1 2 BP 1 2 URINE 1 2 BLOOD 1 2	
412	During (any of) your antenatal care visit(s), were you told about the signs of pregnancy complications? <i>Ean daein aea em inga ia epanaw itema ngana tsimine imin eo eimwi?</i>	YES 1 NO 2 (SKIP TO 414) ← DON'T KNOW 8	
413	Were you told where to go if you had any of these complications? <i>Epanaw en bita imin wo nim riring me ino wo nim nanga me koni buok?</i>	YES 1 NO 2 DON'T KNOW 8	
414	During this pregnancy, were you given an injection in the arm to prevent the baby from getting tetanus, that is, convulsions after birth? <i>Ean am ijeng ngage inga ia oijaw etobab bwe ngam etar ngaim iruwin an pdu?</i>	YES 1 NO 2 (SKIP TO 417) ← DON'T KNOW 8	
415	During this pregnancy, how many times did you get this tetanus injection? <i>Aworin egen am obu bitune etabab ean am ijeng ngage?</i>	TIMES <input type="text"/> DON'T KNOW 8	
416	CHECK 415:	2 OR MORE TIMES <input type="checkbox"/> OTHER <input type="checkbox"/> (SKIP TO 421) ↓	
417	At any time before this pregnancy, did you receive any tetanus injections, either to protect yourself or another baby? <i>Inga edae ian obwen am ijeng ngage ia wo tobab bweit tetanus bwe dogin tsimorum me ngaim?</i>	YES 1 NO 2 (SKIP TO 421) ← DON'T KNOW 8	
418	Before this pregnancy, how many other times did you receive a tetanus injection? <i>Egen ebakin tabwab ei em dogit tetanus ian obwen bitune am ijeng? IF 7 OR MORE TIMES, RECORD '7'.</i>	TIMES <input type="text"/> DON'T KNOW 8	
419	In what month and year did you receive the last tetanus injection before this pregnancy? <i>Egen ngea maraman me eobweni ngaga tokin am obu etabwab bwe dogit tetanus ian obwen am ijeng ngage?</i>	MONTH <input type="text"/> <input type="text"/> DK MONTH 98 YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> (SKIP TO 421) ← DK YEAR 9998	
420	How many years ago did you receive that tetanus injection? <i>Egetet eobweni nuwawen ngaga tabwab ei onuw bitune tetanuw tabwab?</i>	YEARS AGO <input type="text"/> <input type="text"/>	
421	During this pregnancy, were you given or did you buy any iron tablets? <i>Ean am ijeng e oijaw adaparo ngana iron, oa wo rouw mungane?</i> SHOW TABLETS.	YES 1 NO 2 (SKIP TO 423) ← DON'T KNOW 8	
422	During the whole pregnancy, for how many days did you take the tablets? <i>Ean am ijeng ngage, egen ebakit ibum wo on mungane adaparo?</i> IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER OF DAYS.	DAYS <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 998	

423	During this pregnancy, did you take any drug for intestinal worms? <i>Ean am ijeng ngage, wo ko kogomwe bwe dogit emwe (worms) ?</i>	YES 1 NO 2 DON'T KNOW 8		
424	During this pregnancy, did you have difficulty with your vision during daylight? <i>Ean am ijeng ngage inga ia baka am tero ijeaoaw?</i>	YES 1 NO 2 DON'T KNOW 8		
425	During this pregnancy, did you suffer from night blindness? <i>Ean bitune am ijeng ngage inga ia baka am tero ijobum?</i>	YES 1 NO 2 DON'T KNOW 8		
426	When (NAME) was born, was he/she very large, larger than average, average, smaller than average, or very small? <i>Ngaga pudu (EGEN) odituwen ngaben? Ouwak okor, ouwak a average, normal, oning a normal, kadudu?</i>	VERY LARGE 1 LARGER THAN AVERAGE 2 AVERAGE 3 SMALLER THAN AVERAGE 4 VERY SMALL 5 DON'T KNOW 8	VERY LARGE 1 LARGER THAN AVERAGE 2 AVERAGE 3 SMALLER THAN AVERAGE 4 VERY SMALL 5 DON'T KNOW 8	VERY LARGE 1 LARGER THAN AVERAGE 2 AVERAGE 3 SMALLER THAN AVERAGE 4 VERY SMALL 5 DON'T KNOW 8
427	Was (NAME) weighed at birth? <i>Egen roen (NAME) ngaga oren pudu?</i>	YES 1 NO 2 (SKIP TO 429) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 429) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 429) ← DON'T KNOW 8
428	How much did (NAME) weigh? <i>Egen roen NAME?</i> RECORD WEIGHT IN KILOGRAMS FROM HEALTH CARD, IF AVAILABLE.	1 KG FROM CARD [] . [] [] [] 2 KG FROM RECALL [] . [] [] [] DON'T KNOW . 99.998	1 KG FROM CARD [] . [] [] [] 2 KG FROM RECALL [] . [] [] [] DON'T KNOW . 99.998	1 KG FROM CARD [] . [] [] [] 2 KG FROM RECALL [] . [] [] [] DON'T KNOW .. 99.998
429	Who assisted with the delivery of (NAME)? <i>Ijegen buokuw opuduan ngaim?</i> Anyone else? <i>Ijegen bet?</i> PROBE FOR THE TYPE(S) OF PERSON(S) AND RECORD ALL MENTIONED. IF RESPONDENT SAYS NO ONE ASSISTED, PROBE TO DETERMINE WHETHER ANY ADULTS WERE PRESENT AT THE DELIVERY.	HEALTH PERSONNEL DOCTOR A NURSE/MIDWIFE .. B OTHER PERSON TRADITIONAL BIRTH ATTENDANT .. C RELATIVE/FRIEND . D OTHER E _____ (SPECIFY) NO ONE F	HEALTH PERSONNEL DOCTOR A NURSE/MIDWIFE .. B OTHER PERSON TRADITIONAL BIRTH ATTENDANT .. C RELATIVE/FRIEND . D OTHER E _____ (SPECIFY) NO ONE F	HEALTH PERSONNEL DOCTOR A NURSE/MIDWIFE .. B OTHER PERSON TRADITIONAL BIRTH ATTENDANT .. C RELATIVE/FRIEND . D OTHER E _____ (SPECIFY) NO ONE F
430	Where did you give birth to (NAME)? <i>Pudu i ngaim?</i> PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	HOME YOUR HOME 11 (SKIP TO 437) ← OTHER HOME 12 PUBLIC SECTOR GOVT. HOSPITAL 21 MOBILE CLINICS 22 PRIMARY HEALTH CARE 23 OVERSEAS HEALTH FACILITY..... 31 HOME..... 32 (SKIP TO 437) ← OTHER 96 _____ (SPECIFY) (SKIP TO 437) ←	HOME YOUR HOME 11 (SKIP TO 438) ← OTHER HOME 12 PUBLIC SECTOR GOVT. HOSPITAL 21 MOBILE CLINICS 22 PRIMARY HEALTH CARE 23 OVERSEAS HEALTH FACILITY..... 31 HOME..... 32 (SKIP TO 437) ← OTHER 96 _____ (SPECIFY) (SKIP TO 438) ←	HOME YOUR HOME 11 (SKIP TO 438) ← OTHER HOME 12 PUBLIC SECTOR GOVT. HOSPITAL 21 MOBILE CLINICS 22 PRIMARY HEALTH CARE 23 OVERSEAS HEALTH FACILITY..... 31 HOME..... 32 (SKIP TO 437) ← OTHER 96 _____ (SPECIFY) (SKIP TO 438) ←
431	How long after (NAME) was delivered did you stay there? <i>Egen araquin am mek iat arak iruwin an pudu ngaim?</i> IF LESS THAN ONE DAY, RECORD HOURS. IF LESS THAN ONE WEEK, RECORD DAYS.	HOURS 1 [] [] DAYS 2 [] [] WEEKS 3 [] [] DON'T KNOW . 998	HOURS 1 [] [] DAYS 2 [] [] WEEKS 3 [] [] DON'T KNOW ... 998	HOURS 1 [] [] DAYS 2 [] [] WEEKS 3 [] [] DON'T KNOW 998
432	Was (NAME) delivered by caesarean section? <i>Ngea (NAME) etow jem me eroda in ngaim?</i>	YES 1 NO 2	YES 1 NO 2	YES 1 NO 2
433	Before you were discharged after (NAME) was born, did any health care provider check on your health? <i>Ian obwen amur meta bwimurur iruwin an pudu ____ inga engame aia tsimorumur?</i>	YES 1 NO 2 (SKIP TO 436) ←	YES 1 (SKIP TO 449) ← NO 2	YES 1 (SKIP TO 449) ← NO 2

<p>434 How long after delivery did the first check take place? <i>Egen raquin iruwin an pudu ngaim ngaga adamonin aea em?</i> IF LESS THAN ONE DAY, RECORD HOURS. IF LESS THAN ONE WEEK, RECORD DAYS.</p>	<p>HOURS 1 <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> DAYS 2 <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> WEEKS 3 <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> DONT KNOW 998</p>								
<p>435 Who checked on your health at that time? <i>Ijen aeaw ngaga?</i></p> <p>PROBE FOR MOST QUALIFIED PERSON.</p>	<p>HEALTH PERSONNEL DOCTOR 11 NURSE/MIDWIFE 12 PRIMARY HEALTH CARE 13 OTHER _____ 96 (SPECIFY) (SKIP TO 447) ←</p>								
<p>436 After you were discharged, did any health care provider or a traditional birth attendant check on your health? <i>Iruwin am meta inga engame bain iat earak me amen karaiedu oning ngabuna ngamait karaiedu eoning ngago ia aea tsimorum?</i></p>	<p>YES 1 (SKIP TO 439) ← NO 2 (SKIP TO 447) ←</p>	<p>YES 1 (SKIP TO 449) ← NO 2</p>	<p>YES 1 (SKIP TO 449) ← NO 2</p>						
<p>437 Why didn't you deliver in a health facility? <i>Ada wo eo opuduan ngaim iat arak?</i></p> <p>PROBE: Any other reason? <i>Inga iu dogin?</i> RECORD ALL MENTIONED.</p>	<p>COST TOO MUCH A FACILITY NOT OPEN B TOO FAR/ NO TRANSPORTATION C DONT TRUST FACILITY/POOR QUALITY SERVICE D NO FEMALE PROVIDER AT FACILITY E HUSBAND/FAMILY DID NOT ALLOW F NOT NECESSARY G NOT CUSTOMARY H OTHER _____ X (SPECIFY)</p>								
<p>438 After (NAME) was born, did any health care provider or a traditional birth attendant check on your health? <i>Ngaga erowin an pudu (NAME) inga ia ngamain iat arak oa enim kapudu eoning nangaw bwe e nim aea tsimorim?</i></p>	<p>YES 1 NO 2 (SKIP TO 443) ←</p>	<p>YES 1 NO 2</p>	<p>YES 1 NO 2</p>						
<p>439 How long after delivery did the first check take place? <i>Egen araquin iruwin an pudu ngaim ngaga adamoniten check ei en tsimorum?</i> IF LESS THAN ONE DAY, RECORD HOURS. IF LESS THAN ONE WEEK, RECORD DAYS.</p>	<p>HOURS 1 <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> DAYS 2 <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> WEEKS 3 <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> DONT KNOW 998</p>								
<p>440 Who checked on your health at that time? <i>Ijen check ei uw ean bita edae?</i></p> <p>PROBE FOR MOST QUALIFIED PERSON.</p>	<p>HEALTH PERSONNEL DOCTOR 11 NURSE/MIDWIFE 12 PRIMARY HEALTH CARE 13 OTHER _____ 96 (SPECIFY)</p>								
<p>441 Where did this first check take place? <i>Iring eow I bita adamonin check ei em?</i></p> <p>PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.</p> <p>IF UNABLE TO DETERMINE JUST WRITE THE NAME OF THE PLACE. _____ (NAME OF PLACE)</p>	<p>HOME YOUR HOME 11 OTHER HOME 12 PUBLIC SECTOR GOVT. HOSPITAL 21 MOBILE CLINIC 22 PRIMARY HEALTH CARE 23 OTHER _____ 96 (SPECIFY)</p>								
<p>442 CHECK 436:</p>	<p>YES NOT ASKED ↓ ↓ (SKIP TO 447)</p>								

443	In the two months after (NAME) was born, did any health care provider or a traditional birth attendant check on his/her health? <i>Aro maramen iruwin an pudu (Name) inga ia amen nganga engame aia tsimorim ametune/eitune eoning?</i>	YES 1 NO 2 (SKIP TO 447) ← DON'T KNOW 8		
444	How many hours, days or weeks after the birth of (NAME) did the first check take place? <i>Eget hour, ibum oa I week iruwin an pudu eoning ngaga check ei in?</i> IF LESS THAN ONE DAY, RECORD HOURS. IF LESS THAN ONE WEEK, RECORD DAYS.	HRS AFTER BIRTH ... 1 DAYS AFTER BIRTH ... 2 WKS AFTER BIRTH ... 3 DON'T KNOW 998		
445	Who checked on (NAME)'s health at that time? <i>Ijen check ei eat (EGEN) edae ia?</i> PROBE FOR MOST QUALIFIED PERSON.	HEALTH PERSONNEL DOCTOR 11 NURSE/MIDWIFE 12 PRIMARY HEALTH CARE 13 OTHER 96 (SPECIFY)		
446	Where did this first check of (NAME) take place? <i>Bitune adamonit check ei en (EGEN) iriring eow i?</i> PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	HOME YOUR HOME 11 OTHER HOME 12 PUBLIC SECTOR GOVT. HOSPITAL 21 MOBIL CLINIC 22 PRIMARY HEALTH CARE 23 OTHER 96 (SPECIFY)		
447	In the first two months after delivery, did you receive a vitamin A dose (like this?) <i>Eoija ngaim etabab dogit Vitamin A, aro maramen iruwin an pudu ngaim oa ekeow?</i> SHOW COMMON TYPE OF SYRUPS.	YES 1 NO 2 DON'T KNOW 8		
448	Has your menstrual period returned since the birth of (NAME)? <i>Redo angin an gaida am maram iruwin an pudu bita tokin ngaim oa ekeow?</i>	YES 1 (SKIP TO 450) ← NO 2 (SKIP TO 451) ←		
449	Did your period return between the birth of (NAME) and your next pregnancy? <i>Redoda oa ijok am era inimagen an pudu (NAME) me bita am ijeng iruwin?</i>	YES 1 NO 2 (SKIP TO 453) ←	YES 1 NO 2 (SKIP TO 453) ←	
450	For how many months after the birth of (NAME) did you <u>not</u> have a period? <i>Egen maramen iruwin an pudu ngaim (NAME) ngaga wo eo era ean?</i>	MONTHS DON'T KNOW 98	MONTHS DON'T KNOW 98	MONTHS DON'T KNOW 98
451	CHECK 226: IS RESPONDENT PREGNANT?	NOT PREG-NANT <input type="checkbox"/> OR PREGNANT <input type="checkbox"/> OR UNSURE <input type="checkbox"/> (SKIP TO 453) ←		
452	Have you begun to have sexual intercourse again since the birth of (NAME)? <i>Wo aweiyidaten ejad iruwin an pudu ngaim (NAME) oa ekeow?</i>	YES 1 NO 2 (SKIP TO 454) ←		
453	For how many months after the birth of (NAME) did you <u>not</u> have sexual intercourse? <i>Egen ebakin maramen iruwin an pudu ngaim (NAME) wo eo ejad ean?</i>	MONTHS DON'T KNOW 98	MONTHS DON'T KNOW 98	MONTHS DON'T KNOW 98
454	Did you ever breastfeed (NAME)? <i>Inga ia wo okimama (NAME)?</i>	YES 1 NO 2 (SKIP TO 461) ←	YES 1 NO 2 (SKIP TO 461) ←	YES 1 NO 2 (SKIP TO 461) ←

455	How long after birth did you first put (NAME) to the breast? <i>Egen araquin an pudu ngaim (NAME) ngaga adamonin am totu ean kingamamam?</i> IF LESS THAN 1 HOUR, RECORD '00' HOURS. IF LESS THAN 24 HOURS, RECORD HOURS. OTHERWISE, RECORD DAYS.	IMMEDIATELY 000 HOURS 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> DAYS 2 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>											
456	In the first three days after delivery, was (NAME) given anything to drink other than breast milk? <i>Aijubum iruwin an pudu (NAME) inga kimama ibun irurun kimamat inen ia e oiya?</i>	YES 1 NO 2 (SKIP TO 458) ←											
457	What was (NAME) given to drink? <i>Eken (NAME) nimen oiya?</i> <i>Anything else?</i> <i>Inga iu irurun bita?</i> RECORD ALL LIQUIDS MENTIONED.	MILK (OTHER THAN BREAST MILK) ... A PLAIN WATER B SUGAR OR GLUCOSE WATER C SUGAR-SALT-WATER SOLUTION D FRUIT JUICE E INFANT FORMULA F TEA/INFUSIONS G HONEY H OTHER _____ X (SPECIFY)											
458	CHECK 404: IS CHILD LIVING?	LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (SKIP TO 460) ←											
459	Are you still breastfeeding (NAME)? <i>Wo oreit okimama (NAME)?</i>	YES 1 (SKIP TO 462) ← NO 2											
460	For how many months did you breastfeed (NAME)? <i>Egen maraman am okimama (NAME)?</i>	MONTHS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> DON'T KNOW 98			MONTHS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> STILL BF 95 DON'T KNOW 98			MONTHS <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table> STILL BF 95 DON'T KNOW 98					
461	CHECK 404: IS CHILD LIVING?	LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 501) (SKIP TO 464)	LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 501) (SKIP TO 464)	LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (GO BACK TO 405 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 501) (SKIP TO 464)									
462	How many times did you breastfeed last night between sunset and sunrise? <i>Egen ebwakin am okimama ngaim inimagen an eog equan me tsioda equan?</i> IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER.	NUMBER OF NIGHTTIME FEEDINGS . <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>											
463	How many times did you breastfeed yesterday during the daylight hours? <i>Aworit egen am akimama ngaim ngago nene ngaga eao?</i> IF ANSWER IS NOT NUMERIC, PROBE FOR APPROXIMATE NUMBER.	NUMBER OF DAYLIGHT FEEDINGS . <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr></table>											
464	Did (NAME) drink anything from a bottle with a nipple yesterday or last night? <i>Inga ia (EGEN) ren atsin wot eoning dabadar nene oa abum?</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8									
465		GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 501.	GO BACK TO 405 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 501.	GO BACK TO 405 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 501.									

SECTION 5. CHILD IMMUNIZATION AND HEALTH AND CHILD'S AND WOMAN'S NUTRITION

501 ENTER IN THE TABLE THE LINE NUMBER, NAME, AND SURVIVAL STATUS OF EACH BIRTH IN 2002 OR LATER. ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH. (IF THERE ARE MORE THAN 3 BIRTHS, USE LAST 2 COLUMNS OF ADDITIONAL QUESTIONNAIRES).				
502	LINE NUMBER FROM 212	LAST BIRTH LINE NUMBER	NEXT-TO-LAST BIRTH LINE NUMBER	SECOND-FROM-LAST BIRTH LINE NUMBER
503	FROM 212 AND 216	NAME LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (GO TO 503 IN NEXT COLUMN OR, IF NO MORE BIRTHS, GO TO 543)	NAME LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (GO TO 503 IN NEXT COLUMN OR, IF NO MORE BIRTHS, GO TO 543)	NAME LIVING <input type="checkbox"/> DEAD <input type="checkbox"/> (GO TO 503 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE, OR IF NO MORE BIRTHS, GO TO 543)
504	Do you have a card where (NAME'S) vaccinations are written down? <i>Inga wam card no eare eow ian won tabwab ngaim?</i> IF YES: May I see it please? <i>Gona aea magada?</i> (THE NURSE SHOULD COLLECT THE CARD FROM THE BABY CLINIC)	YES, SEEN 1 (SKIP TO 506) ← YES, NOT SEEN 2 NO CARD (SKIP TO 508) ← 3	YES, SEEN 1 (SKIP TO 506) ← YES, NOT SEEN 2 NO CARD (SKIP TO 508) ← 3	YES, SEEN 1 (SKIP TO 506) ← YES, NOT SEEN 2 NO CARD (SKIP TO 508) ← 3
505	Did you ever have a vaccination card for (NAME)? <i>Tsimine oa ekeow record in won tabwab ngaim (EGEN)?</i>	YES 1 (SKIP TO 508) ← NO 2	YES 1 (SKIP TO 508) ← NO 2	YES 1 (SKIP TO 508) ← NO 2

506	(1) COPY VACCINATION DATE FOR EACH VACCINE FROM THE CARD. (2) WRITE '44' IN 'DAY' COLUMN IF CARD SHOWS THAT A VACCINATION WAS GIVEN, BUT NO DATE IS RECORDED.											
		LAST BIRTH			NEXT-TO-LAST BIRTH			NEXT-TO-LAST BIRTH				
		DAY	MONTH	YEAR	DAY	MONTH	YEAR	DAY	MONTH	YEAR		
	BCG 1 (AT BIRTH)											
	HB VAX 1											
	HB VAX 2											
	DPT 1											
	DPT 2											
	DPT 3											
	DPT 4											
	SABIN 1											
	SABIN 2											
	SABIN 3											
	SABIN 4											
MR 1												
MEASLES												
CDT												

NO.	QUESTIONS AND FILTERS	LAST BIRTH	NEXT-TO-LAST BIRTH	SECOND-FROM-LAST BIRTH
		NAME _____	NAME _____	NAME _____
507	Has (NAME) received any vaccinations that are not recorded on this card? <i>Inga won tobab (NAME) ngana ogiten obu me eo eare?</i> RECORD 'YES' ONLY IF RESPONDENT MENTIONS BCG, POLIO 0-3, DPT 1-3, AND/OR MEASLES VACCINES.	YES 1 (PROBE FOR ←) VACCINATIONS AND WRITE '66' IN THE CORRESPONDING DAY COLUMN IN 506) (SKIP TO 510) ← NO 2 DON'T KNOW 8	YES 1 (PROBE FOR ←) VACCINATIONS AND WRITE '66' IN THE CORRESPONDING DAY COLUMN IN 506) (SKIP TO 510) ← NO 2 DON'T KNOW 8	YES 1 (PROBE FOR ←) VACCINATIONS AND WRITE '66' IN THE CORRESPONDING DAY COLUMN IN 506) (SKIP TO 510) ← NO 2 DON'T KNOW 8
508	Did (NAME) ever receive any vaccinations to prevent him/her from getting diseases? <i>Inga ia (NAME) obu etobab bwe enim eo bo eat earak?</i>	YES 1 NO 2 (SKIP TO 510) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 510) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 510) ← DON'T KNOW 8
509	Please tell me if (NAME) received any of the following vaccinations: <i>Pana ame ko ia (NAME) ogiten obu etobab ngane ouge:</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
509A	A BCG vaccination against tuberculosis, that is, an injection in the arm or shoulder that usually causes a scar? <i>Ngea BCG bwait TB. Ngune etobab ean beta ngea inan meta itema n?</i>			
509B	Sabin (Polio vaccine), that is, drops in the mouth? <i>Sabin (Polio tabab) e dropeiy ian mwim.</i>	YES 1 NO 2 (SKIP TO 509E) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 509E) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 509E) ← DON'T KNOW 8
509C	Was the first sabin (polio vaccine) received in the first two weeks after birth or later? <i>Ngea adamonit sabin etotow ian mungana aro 1 week iruwin an pudu eoning oa imur eken?</i>	FIRST 2 WEEKS 1 LATER 2	FIRST 2 WEEKS 1 LATER 2	FIRST 2 WEEKS 1 LATER 2
509D	How many times was the polio vaccine received? <i>Aworit egen an etotow me ogog ngune bitune polio tabab?</i>	NUMBER OF TIMES <input type="text"/>	NUMBER OF TIMES <input type="text"/>	NUMBER OF TIMES <input type="text"/>
509E	A DPT vaccination, that is, an injection given in the thigh or buttocks, sometimes at the same time as polio drops? <i>Bitu DPT tabwab ngea e tabwab ean onam oa obum, ngea eat edae etotow tsitobo dain polio drops?</i>	YES 1 NO 2 (SKIP TO 509G) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 509G) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 509G) ← DON'T KNOW 8
509F	How many times was a DPT vaccination received? <i>Aworit egen bitune DPT tabab wo obu?</i>	NUMBER OF TIMES <input type="text"/>	NUMBER OF TIMES <input type="text"/>	NUMBER OF TIMES <input type="text"/>
509G	A HB VAX vaccination against Hepatitis B infection? <i>Bitu HB VAX tabwab enim bo ea Hep B earak?</i>	YES 1 NO 2 (SKIP TO 509I) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 509I) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 509I) ← DON'T KNOW 8
509H	How many time was a HB VAX vaccination received? <i>Aworit egen ngea HB VAX tabab wo obu?</i>	NUMBER OF TIMES <input type="text"/>	NUMBER OF TIMES <input type="text"/>	NUMBER OF TIMES <input type="text"/>
509I	A measles injection or an MR injection - that is, a shot in the arm at the age of 9 months or older - to prevent him/her from getting measles? <i>E tabab bet measles oa MR tabab ngea egotoi ean bwaim, ia ado am maram oa engab bet -bwe e nim adug ameta/ eita ia enim gona measles?</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8

510	In the last seven days, did (NAME) take iron pills, or iron syrup (like this/any of these)? SHOW COMMON TYPES OF PILLS/SYRUPS <i>Ian mungana aeiu ibum nuwawen, (NAME) obu iron adparo, oa ren ebok reno ngana tsitobo bitune/mungane?</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
511	Has (NAME) taken any drug for intestinal worms in the last six months? <i>Inga ia (NAME) obu drug dogit emwe n yeta ian mungano ango maramen nuwawen?</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
512	Has (NAME) had diarrhea in the last 2 weeks? <i>Inga ia (NAME) boeow ian mungane aro week nuwawen?</i>	YES 1 NO 2 (SKIP TO 525) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 525) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 525) ← DON'T KNOW 8
513	Was there any blood in the stools? <i>Inga era ian bwiyan?</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
514	Now I would like to know how much (NAME) was given to drink during the diarrhea (including breastmilk). <i>Ngage a teng tsiet ngabet eren (NAME) eoija ngaga oreita beoeow (epoa ikimaman inen)?</i> Was he/she given less than usual to drink, about the same amount, or more than usual to drink? IF LESS, PROBE: Was he/she given much less than usual to drink or somewhat less? <i>Ngea amea/eita oning eken nimen, tsitobo oa ouwak eken ea ngago?</i> PROBE: <i>Ngea ameta/eita e oija nimen oning eken ea ngago oa oning okor ea ngago?</i>	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 NOTHING TO DRINK 5 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 NOTHING TO DRINK 5 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 NOTHING TO DRINK 5 DON'T KNOW 8
515	When (NAME) had diarrhea, was he/she given less than usual to eat, about the same amount, more than usual, or nothing to eat? IF LESS, PROBE: Was he/she given much less than usual to eat or somewhat less? <i>Ngaga beoeow, ameta/eita e oija ijeiji oning eken ea ngago, tsitobo, ouwak eken ea ngago, oa eo oija ijeiji?</i>	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 STOPPED FOOD .. 5 NEVER GAVE FOOD 6 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 STOPPED FOOD .. 5 NEVER GAVE FOOD 6 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 STOPPED FOOD .. 5 NEVER GAVE FOOD 6 DON'T KNOW 8
516	Did you seek advice or treatment for the diarrhea from any source? <i>Wo kanaani edor in mwan oa ekagamwe dogin an beoeo ino e kona I puok?</i>	YES 1 NO 2 (SKIP TO 521) ←	YES 1 NO 2 (SKIP TO 521) ←	YES 1 NO 2 (SKIP TO 521) ←
517	Where did you seek advice or treatment? <i>I ino wo kona ipuok oa ekagame Anywhere else?</i> <i>I bet?</i> PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S).	PUBLIC SECTOR GOVT HOSPITAL A MOBILE CLINICS B PRIMARY HEALTH CARE C OTHER SOURCE TRADITIONAL PRACTITIONER D FRIEND/RELATIVE E OTHER X (SPECIFY)	PUBLIC SECTOR GOVT HOSPITAL A MOBILE CLINICS B PRIMARY HEALTH CARE C OTHER SOURCE TRADITIONAL PRACTITIONER D FRIEND/RELATIVE E OTHER X (SPECIFY)	PUBLIC SECTOR GOVT HOSPITAL A MOBILE CLINICS B PRIMARY HEALTH CARE C OTHER SOURCE TRADITIONAL PRACTITIONER D FRIEND/RELATIVE E OTHER X (SPECIFY)

518	CHECK 517:	<p>TWO OR MORE CODES CIRCLED</p> <p>ONLY ONE CODE CIRCLED</p> <p>(SKIP TO 520) ←</p>	<p>TWO OR MORE CODES CIRCLED</p> <p>ONLY ONE CODE CIRCLED</p> <p>(SKIP TO 520) ←</p>	<p>TWO OR MORE CODES CIRCLED</p> <p>ONLY ONE CODE CIRCLED</p> <p>(SKIP TO 520) ←</p>
519	<p>Where did you first seek advice or treatment? <i>Edegen l ino wo adamonin kanaani puok oa kagamwe?</i></p> <p>USE LETTER CODE FROM 517.</p>	FIRST PLACE <input type="checkbox"/>	FIRST PLACE <input type="checkbox"/>	FIRST PLACE ... <input type="checkbox"/>
520	<p>How many days after the diarrhea began did you first seek advice or treatment for (NAME)? <i>Eget ibum nuwaw erowin an beoew ngaga adamonin am kanaani puok oa kagamwe?</i> IF THE SAME DAY, RECORD '00'.</p>	DAYS <input type="text"/>	DAYS <input type="text"/>	DAYS <input type="text"/>
521	<p>Does (NAME) still have diarrhea? <i>Ngea (NAME) oreita beoew?</i></p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>
522	<p>Was he/she given any of the following to drink at any time since he/she started having the diarrhea: <i>Ngune ametune/eitune e oija mungane bwe enim nim ngaga boeow?</i></p> <p>a) A fluid made from a special packet called ORS PACKET? <i>Eren e amwamwo atsin packet ngea ORS PACKET?</i></p> <p>b) A pre-packaged ORS liquid? <i>ORS eren ngea ogiten pack eiy?</i></p> <p>c) A local government-recommended homemade fluid? <i>Eren ngea recommendeiy atsin turit edogor?</i></p>	<p>YES NO DK</p> <p>FLUID FROM</p> <p>ORS PKT .. 1 2 8</p> <p>ORS LQD .. 1 2 8</p> <p>HOMEMADE FLUID ... 1 2 8</p>	<p>YES NO DK</p> <p>FLUID FROM</p> <p>ORS PKT .. 1 2 8</p> <p>ORS LQD .. 1 2 8</p> <p>HOMEMADE FLUID ... 1 2 8</p>	<p>YES NO DK</p> <p>FLUID FROM</p> <p>ORS PKT .. 1 2 8</p> <p>ORS LQD .. 1 2 8</p> <p>HOMEMADE FLUID ... 1 2 8</p>
523	<p>Was anything (else) given to treat the diarrhea? <i>Inga iu imin e oija bwe enim otsimor atsin eat eboeow?</i></p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 525) ←</p> <p>DON'T KNOW 8</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 525) ←</p> <p>DON'T KNOW 8</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 525) ←</p> <p>DON'T KNOW 8</p>
524	<p>What (else) was given to treat the diarrhea? <i>Inga iu imin ngana e oija bwe enim otsimor atsin ean an beoew?</i></p> <p>Anything else? <i>Inga iu imin?</i> RECORD ALL TREATMENTS GIVEN.</p>	<p>PILL OR SYRUP</p> <p>ANTIBIOTIC A</p> <p>ANTIMOTILITY..... B</p> <p>OTHER (NOT ANTI-BIOTIC, ANTI-MOTILITY) C</p> <p>INJECTION</p> <p>ANTIBIOTIC D</p> <p>NON-ANTIBIOTIC .. E</p> <p>UNKNOWN INJECTION F</p> <p>(IV) INTRAVENOUS .. G</p> <p>HOME REMEDY/ HERBAL MEDICINE H</p> <p>OTHER _____ X (SPECIFY)</p>	<p>PILL OR SYRUP</p> <p>ANTIBIOTIC A</p> <p>ANTIMOTILITY..... B</p> <p>OTHER (NOT ANTI-BIOTIC, ANTI-MOTILITY) C</p> <p>INJECTION</p> <p>ANTIBIOTIC D</p> <p>NON-ANTIBIOTIC .. E</p> <p>UNKNOWN INJECTION F</p> <p>(IV) INTRAVENOUS .. G</p> <p>HOME REMEDY/ HERBAL MEDICINE H</p> <p>OTHER _____ X (SPECIFY)</p>	<p>PILL OR SYRUP</p> <p>ANTIBIOTIC A</p> <p>ANTIMOTILITY..... B</p> <p>OTHER (NOT ANTI-BIOTIC, ANTI-MOTILITY) C</p> <p>INJECTION</p> <p>ANTIBIOTIC D</p> <p>NON-ANTIBIOTIC .. E</p> <p>UNKNOWN INJECTION F</p> <p>(IV) INTRAVENOUS .. G</p> <p>HOME REMEDY/ HERBAL MEDICINE H</p> <p>OTHER _____ X (SPECIFY)</p>
525	<p>Has (NAME) been ill with a fever at any time in the last 2 weeks? <i>Ngune (NAME) fever oa ekeow tamo edae ian mungana aro l week nuwawen?</i></p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>

526	Has (NAME) had an illness with a cough at any time in the last 2 weeks? <i>Ngune (NAME) arakei ebobo tamo edae ian mungana aro week nuwawen?</i>	YES 1 NO 2 (SKIP TO 529) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 529) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 529) ← DON'T KNOW 8
527	When (NAME) had an illness with a cough, did he/she breathe faster than usual with short, rapid breaths or have difficulty breathing? <i>Ngago (NAME) arakei ebobo, ameta/eita wipo an kanano ea ngago, ebo me wipo oa eo gona kanano?</i>	YES 1 NO 2 (SKIP TO 530) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 530) ← DON'T KNOW 8	YES 1 NO 2 (SKIP TO 530) ← DON'T KNOW 8
528	Was the fast or difficult breathing due to a problem in the chest or to a blocked or runny nose? <i>Bitā an wipo me eiya an kanano dogin egaturae ian baran oa tsima ian bodin oa ke bererin bodin?</i>	CHEST ONLY 1 NOSE ONLY 2 BOTH 3 OTHER 6 (SPECIFY) _____ DON'T KNOW 8 (SKIP TO 530) ←	CHEST ONLY 1 NOSE ONLY 2 BOTH 3 OTHER 6 (SPECIFY) _____ DON'T KNOW 8 (SKIP TO 530) ←	CHEST ONLY 1 NOSE ONLY 2 BOTH 3 OTHER 6 (SPECIFY) _____ DON'T KNOW 8 (SKIP TO 530) ←
529	CHECK 525: HAD FEVER?	YES <input type="checkbox"/> NO OR DK <input type="checkbox"/> ↓ (GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543)	YES <input type="checkbox"/> NO OR DK <input type="checkbox"/> ↓ (GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543)	YES <input type="checkbox"/> NO OR DK <input type="checkbox"/> ↓ (GO TO 503 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 543)
530	Now I would like to know how much (NAME) was given to drink (including breastmilk) during the illness with a (fever/cough). Was he/she given less than usual to drink, about the same amount, or more than usual to drink? IF LESS, PROBE: Was he/she given much less than usual to drink or somewhat less? <i>A teng en tsiet ngaben nimwen NAME epo kimaman inen) ngaga oreita arak eiy fever/ebeobeo). Oija ameta/eita eren oning a beonin, tsitobo ngaben oa ouwak eken ea bita beonin? PROBE: E oija ameta/eita oning eken ea beonin oa oning kor?</i>	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 NOTHING TO DRINK 5 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 NOTHING TO DRINK 5 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 NOTHING TO DRINK 5 DON'T KNOW 8
531	When (NAME) had a (fever/cough), was he/she given less than usual to eat, about the same amount, more than usual, or nothing to eat? <i>Ngaga (NAME) fever/beobeo, e oija angan oning ken ea beonin, tsitobo ngaben, ouwak ea ngago oa eko ijeiji oija? IF LESS, PROBE: Was he/she given much less than usual to eat or somewhat less? E oija ijeiji oning eken ea beonin oa oning okor?</i>	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 STOPPED FOOD .. 5 NEVER GAVE FOOD 6 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 STOPPED FOOD .. 5 NEVER GAVE FOOD 6 DON'T KNOW 8	MUCH LESS 1 SOMEWHAT LESS .. 2 ABOUT THE SAME .. 3 MORE 4 STOPPED FOOD .. 5 NEVER GAVE FOOD 6 DON'T KNOW 8
532	Did you seek advice or treatment for the illness from any source? <i>Wo kanaani ipuok me ekagamwe tamo ino wo gona?</i>	YES 1 NO 2 (SKIP TO 537) ←	YES 1 NO 2 (SKIP TO 537) ←	YES 1 NO 2 (SKIP TO 537) ←

533	Where did you seek advice or treatment? <i>Edegen I ino wo kanaani puok oa ekagamwe?</i> Anywhere else? <i>Tsimine bet iu etang?</i> PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S).	PUBLIC SECTOR GOVT HOSPITAL . A MOBILE CLINICS B PRIMARY HEALTH CARE C OTHER SOURCE FRIENDS/RELATIVE D TRADITIONAL PRACTITIONER E OVERSEAS..... F OTHER _____ X (SPECIFY)	PUBLIC SECTOR GOVT HOSPITAL . A MOBILE CLINICS B PRIMARY HEALTH CARE C OTHER SOURCE FRIENDS/RELATIVE D TRADITIONAL PRACTITIONER E OVERSEAS..... F OTHER _____ X (SPECIFY)	PUBLIC SECTOR GOVT HOSPITAL . A MOBILE CLINICS B PRIMARY HEALTH CARE C OTHER SOURCE FRIENDS/RELATIVE D TRADITIONAL PRACTITIONER E OVERSEAS..... F OTHER _____ X (SPECIFY)
534	CHECK 533:	TWO OR MORE CODES CIRCLED ONLY ONE CODE CIRCLED (SKIP TO 536)	TWO OR MORE CODES CIRCLED ONLY ONE CODE CIRCLED (SKIP TO 536)	TWO OR MORE CODES CIRCLED ONLY ONE CODE CIRCLED (SKIP TO 536)
535	Where did you first seek advice or treatment? <i>I ino wo geduwa amo bwe wo nim kanaani ipuok me kagamwe?</i> USE LETTER CODE FROM 533.	FIRST PLACE <input type="checkbox"/>	FIRST PLACE <input type="checkbox"/>	FIRST PLACE ... <input type="checkbox"/>
536	How many days after the illness began did you first seek advice or treatment for (NAME)? <i>Eget ibum iruwin an auweiyeda arakin (NAME) ngaga wo kanani edor in puok me kagamwe?</i> IF THE SAME DAY, RECORD '00'.	DAYS <input type="text"/>	DAYS <input type="text"/>	DAYS <input type="text"/>
537	Is (NAME) still sick with a (fever/ cough)? <i>Ngea (NAME) oreita arak eiy fever oa ebobo?</i>	FEVER ONLY 1 COUGH ONLY 2 BOTH FEVER AND COUGH 3 NO, NEITHER 4 DON'T KNOW 8	FEVER ONLY 1 COUGH ONLY 2 BOTH FEVER AND COUGH 3 NO, NEITHER 4 DON'T KNOW 8	FEVER ONLY 1 COUGH ONLY 2 BOTH FEVER AND COUGH 3 NO, NEITHER 4 DON'T KNOW 8
538	At any time during the illness, did (NAME) take any drugs for the illness? <i>Ngaga oreita arak, inga ia NAME ko kagamwe dogin bitune arakin?</i>	YES 1 NO 2 (GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543) DON'T KNOW 8	YES 1 NO 2 (GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543) DON'T KNOW 8	YES 1 NO 2 (GO TO 503 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 543) DON'T KNOW 8
539	What drugs did (NAME) take? <i>Eken angan kagamwe an?</i> Any other drugs? <i>Inga iu angan kagamwe?</i> RECORD ALL MENTIONED.	ANTIBIOTIC DRUGS PILL/SYRUP A INJECTION B OTHER DRUGS PARACETAMOL/ PANADOL C OTHER _____ X (SPECIFY) DON'T KNOW Z	ANTIBIOTIC DRUGS PILL/SYRUP A INJECTION B OTHER DRUGS PARACETAMOL/ PANADOL C OTHER _____ X (SPECIFY) DON'T KNOW Z	ANTIBIOTIC DRUGS PILL/SYRUP A INJECTION B OTHER DRUGS PARACETAMOL/ PANADOL C OTHER _____ X (SPECIFY) DON'T KNOW Z
540	CHECK 539: CODE A CIRCLED?	YES <input type="checkbox"/> NO <input type="checkbox"/> (GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543)	YES <input type="checkbox"/> NO <input type="checkbox"/> (GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543)	YES <input type="checkbox"/> NO <input type="checkbox"/> (GO TO 503 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 543)
541	Did you already have the antibiotic pill/syrup at home when the child became ill? <i>Ogiten tsimine wam antibiotic adparo/bokot ekagamwe ino bwiem ngaga arak bita ngaim?</i>	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8	YES 1 NO 2 DON'T KNOW 8
542		GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543.	GO BACK TO 503 IN NEXT COLUMN; OR, IF NO MORE BIRTHS, GO TO 543.	GO TO 503 IN NEXT-TO-LAST COLUMN OF NEW QUESTIONNAIRE; OR, IF NO MORE BIRTHS, GO TO 543.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																				
543	<p>CHECK 215 AND 218, ALL ROWS:</p> <p>NUMBER OF CHILDREN BORN IN 2002 OR LATER LIVING WITH THE RESPONDENT</p> <p>ONE OR MORE <input type="checkbox"/> NONE <input type="checkbox"/></p>		546																				
544	<p>The last time (NAME OF YOUNGEST CHILD) passed stools, what was done to dispose of the stools? <i>Ngaga dogin an bita (DOGIN NGAIM) magayen, eket iriringa a buriowet ibwiya?</i></p>	<p>CHILD USED TOILET OR LATRINE ... 01 PUT/RINSED INTO TOILET OR LATRINE 02 PUT/RINSED INTO DRAIN OR DITCH 03 THROWN INTO GARBAGE 04 BURIED 05 LEFT IN THE OPEN 06 OTHER _____ 96 (SPECIFY)</p>																					
545	<p>CHECK 522(a) AND 522(b), ALL COLUMNS:</p> <p>NO CHILD RECEIVED FLUID FROM ORS PACKET OR PRE-PACKAGED ORS LIQUID <input type="checkbox"/></p> <p>ANY CHILD RECEIVED FLUID FROM ORS PACKET OR PRE-PACKAGED ORS LIQUID <input type="checkbox"/></p>		547																				
546	<p>Have you ever heard of a special product called [LOCAL NAME FOR ORS PACKET] or a pre-packaged ORS liquid you can get for the treatment of diarrhea? <i>Inga ia wo kaiot angoget ekagamwe ion (LOCAL NAME oa bokot ORS ngea ogiten packeyi ngea wo gona kani bwe dogin okirowanet ebeoeow?</i></p>	<p>YES 1 NO 2</p>																					
547	<p>CHECK 215 AND 218, ALL ROWS:</p> <p>HAS AT LEAST ONE CHILD BORN IN 2004 OR LATER AND LIVING WITH HER <input type="checkbox"/></p> <p>DOES NOT HAVE ANY CHILDREN BORN IN 2004 OR LATER AND LIVING WITH HER <input type="checkbox"/></p> <p>RECORD NAME OF YOUNGEST CHILD LIVING WITH HER (AND CONTINUE WITH 548)</p> <p>_____ (NAME)</p>		601																				
548	<p>Now I would like to ask you about liquids or foods (NAME FROM 547) had yesterday during the day or at night. <i>A nim odonuw angagot ijeji me eren ngan (547) on nene ngaga eao oa ngago bumen.</i> Did (NAME FROM 547) (drink/eat): *547) <i>nim oa on?</i> Plain water? <i>Ebok</i> Commercially produced infant formula? <i>Nimet eoning iat diribod?</i> Any baby food E.G., Cereal? <i>Angat eoning cereal mimwin?</i> Any (other) porridge or gruel? <i>Ibun tekei oatmeal oa gruel?</i></p>	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>PLAIN WATER.....</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>FORMULA</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>BABY CEREAL</td> <td>1</td> <td>2</td> <td>8</td> </tr> <tr> <td>OTHER PORRIDGE/GRUEL..</td> <td>1</td> <td>2</td> <td>8</td> </tr> </tbody> </table>		YES	NO	DK	PLAIN WATER.....	1	2	8	FORMULA	1	2	8	BABY CEREAL	1	2	8	OTHER PORRIDGE/GRUEL..	1	2	8	
	YES	NO	DK																				
PLAIN WATER.....	1	2	8																				
FORMULA	1	2	8																				
BABY CEREAL	1	2	8																				
OTHER PORRIDGE/GRUEL..	1	2	8																				

549

Now I would like to ask you about (other) liquids or foods that (NAME FROM 547)/you may have had yesterday during the day or at night. I am interested in whether your child/you had the item even if it was combined with other foods.

Ngage a teng odonuw angoget ijeiji oa erenibun ngana (547) gokae ngago nene n ijeao oa ngaga bum. Nga teng tsiet ia ngaim/auwe on oa nim mungane ijong epoa ijeiji ibun?

Did (NAME FROM 547)/you drink (eat):

- a) Milk such as tinned, powdered, or fresh animal milk?
Ikimama, diribod, poweder, fresh kimama n imin gokoro?
- b) Tea or coffee?
I tea oa ecabe?
- c) Any other liquids?
Eren ibun?
- d) Bread, rice, noodles, or other foods made from grains?
Brot, rade, noodles, oa ijeiji ibun atsin ean baban?
- e) Pumpkin, carrots, squash or sweet potatoes that are yellow or orange inside?
Demamikin, carrot, kumara ngana yellow oa orange ian?
- f) White potatoes, white yams, manioc, cassava, or any other foods made from roots?
Pateta burubur, yam burubur, cassava oa ijeiji ngana ngon ean aworot imin ero?
- g) Any dark green, leafy vegetables?
Tamo vedetable ngana green me ouwak ren?
- h) Ripe and green mangoes, papayas
Mangoes ngana green me mer, da babaiya?
- i) Any other fruits or vegetables?
Fruit me vedetable inon
- j) Liver, kidney, heart or other organ meats?
Aein, kidney, dirikon or ibun duwon ngana organs?
- k) Any meat, such as beef, pork, lamb, goat, chicken, or duck?
Duwon, ikumo, schafe, goat, domo, oa deruk?
- l) Eggs?
Epet domo?
- m) Fresh or dried fish or shellfish?
Fresh oa iu kamedeto, shellfish?
- n) Any foods made from beans, peas, lentils, or nuts?
Ijeiji ngon ean bean, peas lentils, ebwabwa?
- o) Cheese, yogurt or other milk products?
Cheese, yogurt oa imin ngon eat ikimama?
- p) Any oil, fats, or butter, or foods made with any of these?
Oil, epat, bada oa ijeiji ngon ean mungane?
- q) Any sugary foods such as chocolates, sweets, candies, pastries, cakes, or biscuits?
Ijeiji kouga me duga, chocolate, canty.
- r) Any other solid or semi-solid food?
Ijeiji ngana oaio oa ken oaio duwora?

	CHILD			MOTHER		
	YES	NO	DK	YES	NO	DK
a	1	2	8	1	2	8
b	1	2	8	1	2	8
c	1	2	8	1	2	8
d	1	2	8	1	2	8
e	1	2	8	1	2	8
f	1	2	8	1	2	8
g	1	2	8	1	2	8
h	1	2	8	1	2	8
i	1	2	8	1	2	8
j	1	2	8	1	2	8
k	1	2	8	1	2	8
l	1	2	8	1	2	8
m	1	2	8	1	2	8
n	1	2	8	1	2	8
o	1	2	8	1	2	8
p	1	2	8	1	2	8
q	1	2	8	1	2	8
r	1	2	8	1	2	8

550

CHECK 548 (LAST 2 CATEGORIES: BABY CEREAL OR OTHER PORRIDGE/GRUEL) AND 549 (CATEGORIES d THROUGH r FOR CHILD):

AT LEAST ONE "YES"

NOT A SINGLE "YES" → 601

551

How many times did (NAME FROM 547) eat solid, semisolid, or soft foods yesterday during the day or at night?
Egen ebwakin an (547) on ijeiji enawewe, gain enawewe, oa meroro ngago nene n ieao oa ngaga bum?

IF 7 OR MORE TIMES, RECORD '7'.

NUMBER OF TIMES

DON'T KNOW 8

SECTION 6. MARRIAGE AND SEXUAL ACTIVITY

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
601	Are you currently married or living together with a man as if married? <i>Ngage wo mere oa mek epo a emwan ion tsitobo ngaga wo mere?</i>	YES, CURRENTLY MARRIED 1 YES, LIVING WITH A MAN 2 NO, NOT IN UNION 3	<input type="checkbox"/> → 604
602	Have you ever been married or lived together with a man as if married? <i>Inga ia wo ogiten mere oa wo mek epo a engame ion tsitobo ia wo mere?</i>	YES, FORMERLY MARRIED 1 YES, LIVED WITH A MAN 2 NO 3	→ 609
603	What is your marital status now: are you widowed, divorced, or separated? <i>Ekegen ejom iat mere, iman agem, divorce oa wo bao?</i>	WIDOWED 1 DIVORCED 2 SEPARATED 3	<input type="checkbox"/> → 606
604	Is your husband/partner living with you now or is he staying elsewhere? <i>Ngea agem/dangam mek turim ngage oa mek eat etang ion?</i>	LIVING WITH HER 1 STAYING ELSEWHERE 2	
605	RECORD THE HUSBAND'S/PARTNER'S NAME AND LINE NUMBER FROM THE HOUSEHOLD QUESTIONNAIRE. IF HE IS NOT LISTED IN THE HOUSEHOLD, RECORD '00'.	NAME _____ LINE NO. <input type="text"/> <input type="text"/>	
606	Have you been married or lived with a man only once or more than once? <i>Inga ia wo mere oa wo mek epo a emwan ion eworin oa ebwaka eworin?</i>	ONLY ONCE 1 MORE THAN ONCE 2	
607	CHECK 606: MARRIED/ LIVED WITH A MAN <input type="checkbox"/> ONLY ONCE ↓ In what month and year did you start living with your husband/partner? <i>Ian eken maramen me eobweni ngaga wo auweiyedaten mek epo agem/dangam?</i> MARRIED/ LIVED WITH A MAN <input type="checkbox"/> MORE THAN ONCE ↓ Now I would like to ask about when you started living with your first husband/partner. In what month and year was that? <i>Ngage a teng odonuw angogen ngaga adamonin am mek epoa ameta adamonin agem/dangom? Iat maramen me eobweni eken?</i>	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	→ 609
608	How old were you when you first started living with him? <i>Egen am obweni ngaga wo auweidaten mek epoa ameta?</i>	AGE <input type="text"/> <input type="text"/>	
609	CHECK FOR THE PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.		
610	Now I need to ask you some questions about sexual activity in order to gain a better understanding of some important life issues. <i>Ngage a teng oudonuw ikudo ibun angoget an moromori ejad bwe a nim gona tsiet eken angogen imin iat itsimor ngune.</i> How old were you when you had sexual intercourse for the very first time? <i>Egen am obweni ngaga wo adamonin am ejad?</i>	NEVER HAD SEXUAL INTERCOURSE 00 AGE IN YEARS <input type="text"/> <input type="text"/> FIRST TIME WHEN STARTED LIVING WITH (FIRST) HUSBAND/PARTNER 95	→ 613 → 613

611	CHECK 105: AGE 15-24 <input type="checkbox"/> AGE 25-49 <input type="checkbox"/>		633
612	Do you intend to wait until you get married to have sexual intercourse for the first time? <i>Wo kamwarareiy bwe wo nim obereiy eaden am mere ia wo nim adamonin am ejad?</i>	YES 1 NO 2 DON'T KNOW/UNSURE 8	633
613	CHECK 105: AGE 15-24 <input type="checkbox"/> AGE 25-49 <input type="checkbox"/>		618
614	The <u>first</u> time you had sexual intercourse, was a condom used? <i>Ngaga adamonin am ejad, eowenon oa ijok e condom oa rubber?</i>	YES 1 NO 2 DON'T KNOW/DON'T REMEMBER ... 8	
615	How old was the person you first had sexual intercourse with? <i>Egen an obweni ngea bita engame adamonin am ejadi?</i>	AGE OF PARTNER <input type="text"/>	618
616	Was this person older than you, younger than you, or about the same age as you? <i>Ngune bitune engame engabaw, eoningaw, oa tsitobo am obweni?</i>	OLDER 1 YOUNGER 2 ABOUT THE SAME AGE 3 DON'T KNOW/DON'T REMEMBER ... 8	618
617	Would you say this person was ten or more years older than you or less than ten years older than you? <i>Wo nan ouge ngage bitune engame engab eaw ean atae eobweni oa oad a bita atae eobweni engab aw?</i>	TEN OR MORE YEARS OLDER 1 LESS THAN TEN YEARS OLDER ... 2 OLDER, UNSURE HOW MUCH 3	
618	When was the <u>last</u> time you had sexual intercourse? <i>Ngata dogin am ejad?</i> 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 11 WEEKS AGO 22 MONTHS AGO 33 YEARS AGO 44	632

		LAST SEXUAL PARTNER	SECOND-TO-LAST SEXUAL PARTNER	THIRD-TO-LAST SEXUAL PARTNER
618A	<p>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.</p> <p><i>Ngage a ten kudo iuw angogen am ejad. A nim tuk panaw ngaga tamo am dorer inan eko engame tsiet, me inat ebwabwiyi. Ia ar egada ikudo ngana wo eo teng oneij, wo paname me ar inan tuk nanga bita ikudo erowin.</i></p>			
619	<p>When was the last time you had sexual intercourse with this person?</p> <p><i>Ngata dogin am ejad epoa bitune engame</i></p>		<p>DAYS . 1 <input type="text"/> <input type="text"/></p> <p>WEEKS 2 <input type="text"/> <input type="text"/></p> <p>MONTHS 3 <input type="text"/> <input type="text"/></p>	<p>DAYS . 1 <input type="text"/> <input type="text"/></p> <p>WEEKS 2 <input type="text"/> <input type="text"/></p> <p>MONTHS 3 <input type="text"/> <input type="text"/></p>
620	<p>The last time you had sexual intercourse (with this second/third person), was a condom used?</p> <p><i>Ngea dogit edae ngaga wo ejad (ameta karumenin/katiworit) e ouwonon oa ijok condom?</i></p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 622) ←</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 622) ←</p>	<p>YES 1</p> <p>NO 2</p> <p>(SKIP TO 622) ←</p>
621	<p>Did you use a condom every time you had sexual intercourse with this person in the last 12 months?</p> <p><i>Wo ouwonon condom tamo edae ngaga wo ejadi bitune engame ian mungane ata me aro maramen nuwawen?</i></p>	<p>YES 1</p> <p>NO 2</p>	<p>YES 1</p> <p>NO 2</p>	<p>YES 1</p> <p>NO 2</p>
622	<p>What was your relationship to this person with whom you had sexual intercourse?</p> <p><i>Etenmwan amur tsiet kamur ngune amune mwar ejad?</i></p> <p>IF BOYFRIEND: Were you living together as if married? <i>Mwar mek epo tsitobo mwar mere?</i></p> <p>IF YES, CIRCLE '2'. IF NO, CIRCLE '3'.</p>	<p>HUSBAND 1 (SKIP TO 628) ←</p> <p>LIVE-IN PARTNER 2</p> <p>BOYFRIEND NOT LIVING WITH RESPONDENT 3</p> <p>CASUAL ACQUAINTANCE 4</p> <p>OTHER 6 (SPECIFY)</p>	<p>HUSBAND 1 (SKIP TO 628) ←</p> <p>LIVE-IN PARTNER 2</p> <p>BOYFRIEND NOT LIVING WITH RESPONDENT 3</p> <p>CASUAL ACQUAINTANCE 4</p> <p>OTHER 6 (SPECIFY)</p>	<p>HUSBAND 1 (SKIP TO 628) ←</p> <p>LIVE-IN PARTNER 2</p> <p>BOYFRIEND NOT LIVING WITH RESPONDENT 3</p> <p>CASUAL ACQUAINTANCE 4</p> <p>OTHER 6 (SPECIFY)</p>
623	<p>For how long (have you had/did you have) a sexual relationship with this person? IF ONLY HAD SEXUAL RELATIONS WITH THIS PERSON ONCE, RECORD '01' DAYS.</p> <p><i>Egen raquin am ejad epoa bitune engame?</i></p>	<p>DAYS .. 1 <input type="text"/> <input type="text"/></p> <p>MONTHS 2 <input type="text"/> <input type="text"/></p> <p>YEARS 3 <input type="text"/> <input type="text"/></p>	<p>DAYS .. 1 <input type="text"/> <input type="text"/></p> <p>MONTHS 2 <input type="text"/> <input type="text"/></p> <p>YEARS 3 <input type="text"/> <input type="text"/></p>	<p>DAYS .. 1 <input type="text"/> <input type="text"/></p> <p>MONTHS 2 <input type="text"/> <input type="text"/></p> <p>YEARS 3 <input type="text"/> <input type="text"/></p>
624	CHECK 105:	<p>AGE 15-24 <input type="checkbox"/></p> <p>AGE 25-49 <input type="checkbox"/></p> <p>(SKIP TO 628) ←</p>	<p>AGE 15-24 <input type="checkbox"/></p> <p>AGE 25-49 <input type="checkbox"/></p> <p>(SKIP TO 628) ←</p>	<p>AGE 15-24 <input type="checkbox"/></p> <p>AGE 25-49 <input type="checkbox"/></p> <p>(SKIP TO 636) ←</p>
625	<p>How old is this person?</p> <p><i>Egen an obweni ngune bitune engame?</i></p>	<p>AGE OF PARTNER <input type="text"/> <input type="text"/></p> <p>(SKIP TO 628) ←</p> <p>DON'T KNOW 98</p>	<p>AGE OF PARTNER <input type="text"/> <input type="text"/></p> <p>(SKIP TO 628) ←</p> <p>DON'T KNOW 98</p>	<p>AGE OF PARTNER <input type="text"/> <input type="text"/></p> <p>(SKIP TO 628) ←</p> <p>DON'T KNOW 98</p>

626	Is this person older than you, younger than you, or about the same age? <i>Engab aw, eoning aw oa tsitobo amur obweni ngune bitune engame?</i>	OLDER 1 YOUNGER 2 SAME AGE 3 DON'T KNOW ... 8 (SKIP TO 628) ←	OLDER 1 YOUNGER 2 SAME AGE 3 DON'T KNOW ... 8 (SKIP TO 628) ←	OLDER 1 YOUNGER 2 SAME AGE 3 DON'T KNOW ... 8 (SKIP TO 628) ←
627	Would you say this person is ten or more years older than you or less than ten years older than you? <i>Wo nan ouge ngune engame gona atae eobweni engab aw oa wad a atae eobweni engab aw?</i>	TEN OR MORE YEARS OLDER . 1 LESS THAN TEN YEARS OLDER . 2 OLDER, UNSURE HOW MUCH ... 3	TEN OR MORE YEARS OLDER . 1 LESS THAN TEN YEARS OLDER . 2 OLDER, UNSURE HOW MUCH ... 3	TEN OR MORE YEARS OLDER .. 1 LESS THAN TEN YEARS OLDER .. 2 OLDER, UNSURE HOW MUCH 3
628	The last time you had sexual intercourse with this person, did you or this person drink alcohol? <i>Ngago dogin am ejadi bitune engame mwar mungi oa ijok?</i>	YES 1 NO 2 (SKIP TO 630) ←	YES 1 NO 2 (SKIP TO 630) ←	YES 1 NO 2 (SKIP TO 631) ←
629	Were you or your partner drunk at that time? <i>Auwe me ameta dangam mwar pwe memur ean bita edae? Ijegen ngea pwe men? IF YES: Who was drunk?</i>	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
630	Apart from [this person/these two people], have you had sexual intercourse with any other person in the last 12 months? <i>Irurun bitune engame amero mina engame, inga bet ia wo ejadi engame ion ian mungano ata me aro maramen nuwawen?</i>	YES 1 (GO BACK TO 619 ← IN NEXT COLUMN) NO 2 (SKIP TO 632) ←	YES 1 (GO BACK TO 619 ← IN NEXT COLUMN) NO 2 (SKIP TO 632) ←	
631	In total, with how many different people have you had sexual intercourse in the last 12 months? <i>Memak, egen ebwakit engame ekekae wo ejadi ian mungano ata me aro maramen nuwawen?</i> 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
632	<p>In total, with how many different people have you had sexual intercourse in your lifetime? <i>Egen ebwakin memak engame ekekae wo ogiten ejadi ian tsimorim?</i></p> <p>IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE. IF NUMBER OF PARTNERS IS GREATER THAN 95, WRITE '95.'</p>	<p>NUMBER OF PARTNERS IN LIFETIME <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p>	
633	<p>Do you know of a place where a person can get condoms? <i>Wo tsiet etang ino engame gona kani condom oa rubber?</i></p>	<p>YES 1 NO 2</p>	→ 701
634	<p>Where is that? <i>Edegen I ngana?</i> Any other place? <i>Inga iu etang?</i> PROBE TO IDENTIFY EACH TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S).</p>	<p>PUBLIC SECTOR GOVERNMENT HOSPITAL A MOBILE CLINIC B PRIMARY HEALTH CARE C</p> <p>OTHER SOURCE COMMUNITIES..... D FRIEND/RELATIVE..... E OVERSEAS..... F SHOPS..... G</p> <p>OTHER _____ X (SPECIFY)</p>	
635	<p>If you wanted to, could you yourself get a condom? <i>la ouga bwe am teng, wo gona oa ekeow ta auwe kani wam condom?</i></p>	<p>YES 1 NO 2 DON'T KNOW/UNSURE 8</p>	

SECTION 7. FERTILITY PREFERENCES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	<p>CHECK 311/311A:</p> <p>NEITHER STERILIZED <input type="checkbox"/> HE OR SHE STERILIZED <input type="checkbox"/></p>		713
702	<p>CHECK 226:</p> <p>NOT PREGNANT OR UNSURE <input type="checkbox"/> PREGNANT <input type="checkbox"/></p> <p>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?</p> <p><i>Ngage etsimine aeo ikudo ibun dogin itsimor ijamwan. Wo teng ia enim tsimine ngaim (ion/tuk ion) oa wo teng eken ia wo eo tuk tsimine (bet) ngaim?</i></p> <p>Now I have some questions about the future. After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children?</p> <p><i>Ngage etsimine aeo ikudo ibun dogin itsimor ijamwan. Erowin bitune ngaim ngune wo obereiy bwe enim pudu, inan wo teng ia tuk tsimine ngaim ion, oa wo teng eken ia tuk eken an an tsimine ngaim?</i></p>	<p>HAVE (A/ANOTHER) CHILD 1</p> <p>NO MORE/NONE 2 → 704</p> <p>SAYS SHE CAN'T GET PREGNANT . 3 → 713</p> <p>UNDECIDED/DON'T KNOW AND PREGNANT 4 → 709</p> <p>UNDECIDED/DON'T KNOW AND NOT PREGNANT OR UNSURE 5 → 708</p>	
703	<p>CHECK 226:</p> <p>NOT PREGNANT OR UNSURE <input type="checkbox"/> PREGNANT <input type="checkbox"/></p> <p>How long would you like to wait from now before the birth of (a/another) child?</p> <p><i>Egen raqon am teng ober atsin ngage ea an tuk pudu ngaim (ion)?</i></p> <p>After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?</p> <p><i>Ia pudu ngaim ngune, inan egen raqon am inan ober ia an tuk pudu ngaim ion?</i></p>	<p>MONTHS 1 <input type="checkbox"/></p> <p>YEARS 2 <input type="checkbox"/></p> <p>SOON/NOW 993 → 708</p> <p>SAYS SHE CAN'T GET PREGNANT 994 → 713</p> <p>AFTER MARRIAGE 995</p> <p>OTHER _____ 996 → 708 (SPECIFY)</p> <p>DON'T KNOW 998</p>	
704	<p>CHECK 226:</p> <p>NOT PREGNANT OR UNSURE <input type="checkbox"/> PREGNANT <input type="checkbox"/></p>		709
705	<p>CHECK 310: USING A CONTRACEPTIVE METHOD?</p> <p>NOT ASKED <input type="checkbox"/> NOT CURRENTLY USING <input type="checkbox"/> CURRENTLY USING <input type="checkbox"/></p>		713
706	<p>CHECK 703:</p> <p>NOT ASKED <input type="checkbox"/> 24 OR MORE MONTHS OR 02 OR MORE YEARS <input type="checkbox"/> 00-23 MONTHS OR 00-01 YEAR <input type="checkbox"/></p>		709

707	CHECK 702:	<p>WANTS TO HAVE A/ANOTHER CHILD <input type="checkbox"/></p> <p>You have said that you do not want (a/another) child soon, but you are not using any method to avoid pregnancy.</p> <p><i>Wo ogiten pan ngaga wo wo eo teng (ia/enim tuk)tsimine ngaim eat edae eo raquo, me ta dogin wo eo ouwonon imin bwe wo enim eo ijeng?</i></p> <p>Can you tell me why you are not using a method?</p> <p><i>Wo gona paname dogin ngaga wo eo ouwonon emedena/imin bwait eo ijeng?</i></p> <p>Any other reason?</p> <p><i>Inga iju dogin?</i></p> <p>RECORD ALL REASONS MENTIONED.</p>	<p>WANTS NO MORE/ NONE <input type="checkbox"/></p> <p>You have said that you do not want any (more) children, but you are not using any method to avoid pregnancy.</p> <p><i>Wo ogiten pan naga wo eo teng (iu) eoning, me ta dogin wo eo ouwonon emedena/imin bwe wo nim eo ijeng?</i></p> <p>Can you tell me why you are not using a method?</p> <p><i>Wo gona paname dogin ngaga wo ouwonon emedena/imin bwait eo ijeng?</i></p> <p>Any other reason?</p> <p><i>Inga iju dogin?</i></p>	<p>NOT MARRIED A</p> <p>FERTILITY-RELATED REASONS</p> <p>NOT HAVING SEX B</p> <p>INFREQUENT SEX C</p> <p>MENOPAUSAL/HYSTERECTOMY D</p> <p>SUBFECUND/INFECUND E</p> <p>POSTPARTUM AMENORRHEIC F</p> <p>BREASTFEEDING G</p> <p>FATALISTIC H</p> <p>OPPOSITION TO USE</p> <p>RESPONDENT OPPOSED I</p> <p>HUSBAND/PARTNER OPPOSED J</p> <p>OTHERS OPPOSED K</p> <p>RELIGIOUS PROHIBITION L</p> <p>LACK OF KNOWLEDGE</p> <p>KNOWS NO METHOD M</p> <p>KNOWS NO SOURCE N</p> <p>METHOD-RELATED REASONS</p> <p>HEALTH CONCERNS O</p> <p>FEAR OF SIDE EFFECTS P</p> <p>LACK OF ACCESS/TOO FAR Q</p> <p>COSTS TOO MUCH R</p> <p>INCONVENIENT TO USE S</p> <p>INTERFERES WITH BODY'S NORMAL PROCESSES T</p> <p>OTHER _____ X (SPECIFY)</p> <p>DON'T KNOW Z</p>	
708	CHECK 310: USING A CONTRACEPTIVE METHOD?	<p>NOT ASKED <input type="checkbox"/> NO, NOT CURRENTLY USING <input type="checkbox"/> YES, CURRENTLY USING <input type="checkbox"/></p>		713	
709	<p>Do you think you will use a contraceptive method to delay or avoid pregnancy at any time in the future?</p> <p><i>Ia wo tsiet, wo inan ouwonon imin ngana inan oaku oa gorotsinin ijeng, ean tamo edae ngana rewo ian obwom?</i></p>	<p>YES..... 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>		711 713	
710	<p>Which contraceptive method would you prefer to use?</p> <p><i>Ekegen emedena oa imin bwait oadug ijeng ngea wo inan epo tubum ia wo nim ouwonon?</i></p>	<p>FEMALE STERILIZATION 01</p> <p>MALE STERILIZATION 02</p> <p>PILL 03</p> <p>IUD 04</p> <p>INJECTABLES 05</p> <p>IMPLANTS 06</p> <p>CONDOM 07</p> <p>FEMALE CONDOM 08</p> <p>DIAPHRAGM 09</p> <p>FOAM/JELLY 10</p> <p>LACTATIONAL AMEN. METHOD 11</p> <p>RHYTHM METHOD 12</p> <p>WITHDRAWAL 13</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>UNSURE 98</p>		713	
711	<p>What is the main reason that you think you will not use a contraceptive method at any time in the future?</p> <p><i>Ekeken dogin am inan eo ouwonon imin bwait eo ijeng iat edae ngana rewo ian obwom?</i></p>	<p>NOT MARRIED 11</p> <p>FERTILITY-RELATED REASONS</p> <p>INFREQUENT SEX/NO SEX 22</p> <p>MENOPAUSAL/HYSTERECTOMY 23</p> <p>SUBFECUND/INFECUND 24</p> <p>WANTS AS MANY CHILDREN AS POSSIBLE 26</p> <p>OPPOSITION TO USE</p> <p>RESPONDENT OPPOSED 31</p> <p>HUSBAND/PARTNER OPPOSED 32</p> <p>OTHERS OPPOSED 33</p> <p>RELIGIOUS PROHIBITION 34</p> <p>LACK OF KNOWLEDGE</p> <p>KNOWS NO METHOD 41</p> <p>KNOWS NO SOURCE 42</p> <p>METHOD-RELATED REASONS</p> <p>HEALTH CONCERNS 51</p> <p>FEAR OF SIDE EFFECTS 52</p> <p>LACK OF ACCESS/TOO FAR 53</p> <p>COSTS TOO MUCH 54</p> <p>INCONVENIENT TO USE 55</p> <p>INTERFERES WITH BODY'S NORMAL PROCESSES 56</p> <p>OTHER _____ 96 (SPECIFY)</p> <p>DON'T KNOW 98</p>		713	

712	Would you ever use a contraceptive method if you were married? <i>Ia wo mere, wo inan ouwonon oa ijok imin ngana gona oadug ijeng?</i>	YES 1 NO 2 DON'T KNOW 8	
713	CHECK 216: 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? <i>Ia wo gona redo a edae ngago eko ngaim, me wo gona ijj ebakin ngaim ian tsimorim, inan egen ebakin ngabuna ngaim?</i> If you could choose exactly the number of children to have in your whole life, how many would that be? <i>Ia wo gona ijj ebakin ngaim wo enim gona ian tsimorim, inan egen ebakin ngabuna?</i> PROBE FOR A NUMERIC RESPONSE.	NONE 00 NUMBER <input type="text"/> <input type="text"/> OTHER _____ 96 (SPECIFY)	→ 715 → 715
714	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? <i>Ean amebune eoning, inan egen emwan, egen ien, me inan egen ngabune eko woun ia ien oa emwan?</i>	BOYS GIRLS EITHER NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> OTHER _____ 96 (SPECIFY)	
715	In the last few months have you heard about family planning: <i>Ian mungana maramen nuwawen, inga ia wo kaiot angoget onanianen epon amenbwini?</i> On the radio? <i>Atsin iat eradio?</i> On the television? <i>Atsin iat tv?</i> In a newspaper or magazine? <i>Atsin iat dabuok in imwinen oa magazine?</i>	YES NO RADIC. 1 2 TELEVISION 1 2 NEWSPAPER OR MAGAZINE ... 1 2	
716	CHECK 601: YES, <input type="checkbox"/> YES, <input type="checkbox"/> NO, <input type="checkbox"/> CURRENTLY MARRIED LIVING WITH A MAN NOT IN UNION		→ 801
717	CHECK 311/311A: CODE B, G, OR M CIRCLED <input type="checkbox"/> NO CODE CIRCLED <input type="checkbox"/> OTHER <input type="checkbox"/>		→ 719 → 721
718	Does your husband/partner know that you are using a method of family planning? <i>Ameta agem/dangom tsiet oa ekeo ngaga wo ouwonon medenan onanianen epon amen bwiem?</i>	YES 1 NO 2 DON'T KNOW 8	
719	Would you say that using contraception is mainly your decision, mainly your husband's/partner's decision, or did you both decide together? <i>Ia wo pan ngea ouwononen bwait eo ijeng mek ia ian ben agem/dangom oa mwar buokin kamarareiy bitune?</i>	MAINLY RESPONDENT 1 MAINLY HUSBAND/PARTNER 2 JOINT DECISION 3 OTHER _____ 6 (SPECIFY)	
720	CHECK 311/311A: NEITHER STERILIZED <input type="checkbox"/> HE OR SHE STERILIZED <input type="checkbox"/>		→ 801
721	Does your husband/partner want the same number of children that you want, or does he want more or fewer than you want? <i>Ngea amea agem/dangom, epo an kamarar ebakin ngaimur, oa ebak eken an teng ngei, oa oad eken eaw?</i>	SAME NUMBER 1 MORE CHILDREN 2 FEWER CHILDREN 3 DON'T KNOW 8	

SECTION 8. HUSBAND'S BACKGROUND AND WOMAN'S WORK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801	<p>CHECK 601 AND 602:</p> <p>CURRENTLY MARRIED/ LIVING WITH A MAN <input type="checkbox"/></p> <p>FORMERLY MARRIED/ LIVED WITH A MAN <input type="checkbox"/></p> <p>NEVER MARRIED AND NEVER LIVED WITH A MAN <input type="checkbox"/></p>		<p>803</p> <p>807</p>
802	<p>How old was your husband/partner on his last birthday? <i>Egen an obweni agem/dangam ngago dogin an dae in pudu?</i></p>	<p>AGE IN COMPLETED YEARS <input type="text"/> <input type="text"/></p>	
803	<p>Did your (last) husband/partner ever attend school? <i>Inga ia ameta dogin agem edegeri ekereri?</i></p>	<p>YES 1 NO 2</p>	806
804	<p>What was the highest level of school he attended: primary, secondary, or higher? <i>Ekegen ngea dogin me magit ogoda an kereri ngea ameta agem: primary, secondary, oa ogoda eken?</i></p>	<p>PRE SCHOOL..... 1 PRIMARY 2 SECONDARY 3 TERTIARY 4 HIGHER 5 DON'T KNOW 8</p>	806
805	<p>What was the highest year he completed at that level? <i>Ekegen won magit ogoda eobweni a goro ean?</i></p>	<p>YEAR <input type="text"/> <input type="text"/> DON'T KNOW 98</p>	
806	<p>CHECK 801:</p> <p>CURRENTLY MARRIED/ LIVING WITH A MAN <input type="checkbox"/></p> <p>FORMERLY MARRIED/ LIVED WITH A MAN <input type="checkbox"/></p> <p>What is your husband's/partner's occupation? <i>Ekegen an makur ngea ameta agem/dangam?</i></p> <p>That is, what kind of work does he mainly do? <i>Oa, ekegen makur in ben ngea eyi riring?</i></p> <p>What was your (last) husband's/ partner's occupation? <i>Ekegen an makur ngea ameta dogin agem/dangam?</i></p> <p>That is, what kind of work did he mainly do? <i>Oa, ekegen makur in ben ngea riring?</i></p>	<p><input type="text"/> <input type="text"/></p> <p>_____</p> <p>_____</p> <p>_____</p>	
807	<p>Aside from your own housework, have you done any work in the last seven days? <i>Irurun makur in bem in anewak inga iju emakur wo riring ian mungano aieu ibum nuwawen?</i></p>	<p>YES 1 NO 2</p>	811
808	<p>As you know, some women take up jobs for which they are paid in cash or kind. Others sell things, have a small business or work on the family farm or in the family business. In the last seven days, have you done any of these things or any other work? <i>Tekei am tsiet, en ibun makur eat etang ino ipumwe ura emak oa imin. Ibun rowiow imin, auweiyida business eken oa makur ean won amen bwiora etang in kiyeow, oa ian won business epon amenbwieni. Ian mungano aieu ibum nuwawen inga emakur atsin ean mungane wo ogiten riring oa emakur bet ibun?</i></p>	<p>YES 1 NO 2</p>	811
809	<p>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, maternity leave or any other such reason? <i>Ngaga bet wo eo makur ian mungana aieu ibum nuwawen tsimine oa ijok am makur ngea wo obu am onano bwe dogit earak, holiday, maternity oa ibun?</i></p>	<p>YES 1 NO 2</p>	811
810	<p>Have you done any work in the last 12 months? <i>Inga ia wo riring emakur ian mungana ata me aro maramen nuwawen?</i></p>	<p>YES 1 NO 2</p>	818
811	<p>What is your occupation, that is, what kind of work do you mainly do? <i>Eken am makur, oa ekegen makur in bem ngea ouwak am riring?</i></p>	<p><input type="text"/> <input type="text"/></p> <p>_____</p> <p>_____</p>	

812	CHECK 811: WORKS IN AGRICULTURE <input type="checkbox"/> DOES NOT WORK IN AGRICULTURE <input type="checkbox"/>		814
813	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? <i>Oouwaken am makur ean eben bwitem oa eben bwien amen bwitem, oa wo makur ean bwiet engame ion?</i>	OWN LAND 1 FAMILY LAND 2 RENTED LAND 3 SOMEONE ELSE'S LAND 4	
814	Do you do this work for a member of your family, for someone else, or are you self-employed? <i>Wo riring ngune emakur dogin amen bwitem, dogit engame ion, oa ta auwe makur aw?</i>	FOR FAMILY MEMBER 1 FOR SOMEONE ELSE 2 SELF-EMPLOYED 3	
815	Do you usually work at home or away from home? <i>Wo makur atsin bwitem oa wo goeow ea bwitem?</i>	HOME 1 AWAY 2	
816	Do you usually work throughout the year, or do you work seasonally, or only once in a while? <i>Wo makur ea an magada eobweni, oa wo makur ean kiwiwit tekekeow, oa eworin iat edae eken?</i>	THROUGHOUT THE YEAR 1 SEASONALLY/PART OF THE YEAR 2 ONCE IN A WHILE 3	
817	Are you paid in cash or kind for this work or are you not paid at all? <i>I pumweanuw emak oa eo pumwew kor?</i>	CASH ONLY 1 CASH AND KIND 2 IN KIND ONLY 3 NOT PAID 4	
818	CHECK 601: CURRENTLY MARRIED/LIVING WITH A MAN <input type="checkbox"/> NOT IN UNION <input type="checkbox"/>		827
819	CHECK 817: CODE 1 OR 2 CIRCLED <input type="checkbox"/> OTHER <input type="checkbox"/>		822
820	Who usually decides how the money that you earn will be used: you, your husband/partner, or you and your husband/partner jointly? <i>Ijegen mwit angogen owononen bita moromum, auwe, ameta agem/dangam oa amurur arumen ajuk?</i>	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY ... 3 OTHER 6 (SPECIFY)	
821	Would you say that the money that you earn is more than what your husband/partner earns, less than what he earns, or about the same? <i>Ia wo pan, ngea moromum ouwak eken ea moromun agem, kadudu eken ea moromum, oa ar tsitobo dad?</i>	MORE THAN HIM 1 LESS THAN HIM 2 ABOUT THE SAME 3 HUSBAND/PARTNER DOESN'T BRING IN ANY MONEY 4 DON'T KNOW 8	823

822	Who usually decides how your husband's/partner's earnings will be used: you, your husband/partner, or you and your husband/partner jointly? <i>ljegen mwit angogen moromun agem/dangom me owononen: auwe, ameta agem/dangom, oa amurur ameta agem?</i>	RESPONDENT 1 HUSBAND/PARTNER 2 RESPONDENT AND HUSBAND/PARTNER JOINTLY ... 3 HUSBAND/PARTNER HAS NO EARNINGS 4 OTHER 6 (SPECIFY)
823	Who usually makes decisions about health care for yourself: you, your husband/partner, you and your husband/partner jointly, or someone else? <i>ljegen mwit angogen ranga en tsimorum: auwe, ameta agem/dangom, auwe me agem/dangam epoda oa engame ion?</i>	RESPONDENT = 1 HUSBAND/PARTNER = 2 RESPONDENT & HUSBAND/PARTNER JOINTLY = 3 SOMEONE ELSE = 4 OTHER = 6 1 2 3 4 6
824	Who usually makes decisions about making major household purchases? <i>ljegen mwit angogen rouwen bwain anewak ngana ouwak?</i>	1 2 3 4 6
825	Who usually makes decisions about making purchases for daily household needs? <i>ljegen mwit angogen rouwen bwain anewak mungana bwai ouwononen eorata me eorata</i>	1 2 3 4 6
826	Who usually makes decisions about visits to your family or relatives? <i>ljegen mwit angogen uaden epon am wak oa amen bwiem?</i>	1 2 3 4 6
827	PRESENCE OF OTHERS AT THIS POINT (PRESENT AND LISTENING, PRESENT BUT NOT LISTENING, OR NOT PRESENT)	PRES./ PRES./ NOT LISTEN. NOT PRES. LISTEN. CHILDREN < 10 1 2 3 HUSBAND 1 2 3 OTHER MALES 1 2 3 OTHER FEMALES ... 1 2 3
828	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: <i>Eat edae ibiun ngea amea agen eong duwon oa egirow dogit imin ngana eita agen riring. la wo</i> If she goes out without telling him? <i>Nuwaw me eo pana agen</i> If she neglects the children? <i>Eo iwidoduwa eoning</i> If she argues with him? <i>la eita kangeoda ameta</i> If she refuses to have sex with him? <i>la eita eo teng eijadi agen</i> If she burns the food? <i>ia eita ateda ijeji</i>	aea eimwi oa ijok an ameta ijatow aten dogin mungane: 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

SECTION 9. HIV/AIDS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																														
901	<p>Now I would like to talk about something else. <i>Ngage a teng en dorer eat imin ion ekae.</i></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. <i>HIV eiy earak ion ngea ekona ababareow atsin eat engame ion ea ion. Ia engame gona HIV inan arak en. Ngune bitune earak eiy egen bwe AIDS</i></p> <p>Prior to this interview, have you ever heard of HIV or the disease called AIDS? <i>Ian obwen bitune atar dorer, inga ia wo kaiot angogen HIV oa bita earak ngea AIDS egen?</i></p>	<p>YES 1</p> <p>NO 2</p>	→ 952																														
902	<p>CHECK Q. 110a and 110b:</p> <p>CODE '2', '3', or '4' CIRCLED IN <input type="checkbox"/> IN 110a OR 110b</p> <p>OR NO ANSWER</p> <p>CODE '1' CIRCLED IN 110a AND 110b <input type="checkbox"/> OR CODE '5' CIRCLED IN 110b</p>		→ 904																														
903	<p>The following is a list of sources of information on prevention of getting HIV, the virus that causes AIDS. Have you ever <i>Ngane ijong ura engat ababareow angogen an gona adug gonaen HIV, bita emwe ngea ameata AIDS. Inga ia ogen:</i></p> <p>a. Read messages about HIV or AIDS in newspapers or magazines? <i>Reitsineiy angogen HIV oa AIDS iat dabuk in imwinen.</i></p> <p>b. Seen leaflets, brochures, or booklets on HIV or AIDS? <i>Et dabuk oning angogen HIV oa AIDS</i></p> <p>c. Gotten information on HIV or AIDS from the internet? <i>Gona angogen HIV oa AIDS atsin iat internet?</i></p> <p>READ INTRODUCTORY STATEMENT ONLY IF Q903 WAS NOT ASKED: The following is a list of sources of information on prevention of getting HIV, the virus that causes AIDS. <i>Ngane ijong ura engat abareow anggen an gona adug gonaen</i></p>	<table> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>NEWSPAPER/MAGAZINE</td> <td>1</td> <td>2</td> </tr> <tr> <td>LEAFLETS/BOOKLETS</td> <td>1</td> <td>2</td> </tr> <tr> <td>INTERNET</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	NEWSPAPER/MAGAZINE	1	2	LEAFLETS/BOOKLETS	1	2	INTERNET	1	2																			
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904	<p>Have you ever Inga ia wo ogiten:</p> <p>a. Seen messages about HIV or AIDS on billboards, signs or posters? <i>Et angogen HIV oa AIDS eat poster oa itema</i></p> <p>b. Seen messages about HIV or AIDS on TV? <i>Et angoget HIV oa AIDS eat TV?</i></p> <p>c. Heard messages about HIV or AIDS on radio? <i>Kaiot angoget HIV oa AIDS eat eradio?</i></p> <p>d. Seen any films about HIV or AIDS? <i>Et etameneiy angoget HIV oa AIDS?</i></p> <p>e. Attended a community event about HIV or AIDS? <i>Edegeri an epo tekawa angogen HIV oa AIDS?</i></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? <i>Gona angoget HIV oa AIDS, atsin turin engame aton ngea kwad ian wam tekawa bwe enim ababareow angoget HIV oa AIDS</i></p> <p>g. Participated in an HIV or AIDS peer education program? <i>Edegeri ekereri ea be eo angoget HIV oa AIDS?</i></p> <p>h. Participated in another type of HIV or AIDS education program such as a wokshop or school program? <i>Edegeri ekereri oa programme iat ekereri angoget HIV/AIDS</i></p> <p>i. Discussed AIDS OR HIV, the virus that causes AIDS, with other persons such as friend, family members, or work colleagues? <i>Dorereiy angoget HIV oa AIDS epoa dangam, amen bwiem me dangam in makur?</i></p>	<table> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>SIGNS/POSTERS</td> <td>1</td> <td>2</td> </tr> <tr> <td>TV</td> <td>1</td> <td>2</td> </tr> <tr> <td>RADIO</td> <td>1</td> <td>2</td> </tr> <tr> <td>FILM</td> <td>1</td> <td>2</td> </tr> <tr> <td>COMMUNITY EVENT</td> <td>1</td> <td>2</td> </tr> <tr> <td>OUTREACH WORKER</td> <td>1</td> <td>2</td> </tr> <tr> <td>PEER EDUCATION</td> <td>1</td> <td>2</td> </tr> <tr> <td>OTHER EDUCATION</td> <td>1</td> <td>2</td> </tr> <tr> <td>FAMILY/FRIENDS</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	SIGNS/POSTERS	1	2	TV	1	2	RADIO	1	2	FILM	1	2	COMMUNITY EVENT	1	2	OUTREACH WORKER	1	2	PEER EDUCATION	1	2	OTHER EDUCATION	1	2	FAMILY/FRIENDS	1	2	
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905	<p>Can people reduce their chance of getting the AIDS virus by having just one uninfected sex partner who has no other sex partners? <i>Engame gona oreoatu aeora gona AIDS iow ean aeora kewina dangora in ejad ngea eo arakeiy bitune arak me ngea eko bet iju dango n in ejad?</i></p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>																															

906	Can people get the AIDS virus from mosquito bites? <i>Engame gona oa ijok AIDS atsin ean an kaeaj dimininer?</i>	YES 1 NO 2 DON'T KNOW 8	
907	Can people reduce their chance of getting the AIDS virus by using a condom every time they have sex? <i>Gona oa ijok redodu gonaen AIDS ia teiy daien ouwononen rubber ia ang ejad?</i>	YES 1 NO 2 DON'T KNOW 8	
908	Can people get the AIDS virus by sharing food with a person who has AIDS? <i>Engame gona oa ijok AIDS emwe eow ean aeora epo n ijeiji amea AIDS?</i>	YES 1 NO 2 DON'T KNOW 8	
909	Can people reduce their chance of getting the AIDS virus by not having sexual intercourse at all? <i>Gona oa ijok redodu gona en AIDS ia engame eo ejad kor?</i>	YES 1 NO 2 DON'T KNOW 8	
910	Can people get the AIDS virus from the saliva of someone who HIV or AIDS? <i>Engame gona or ijok AIDS atsin ean bereren engame ngea HIV oa AIDS?</i>	YES 1 NO 2 DON'T KNOW 8	
911	Can people get HIV by having injections with a needle or syringe that has already been used by someone else? <i>Gona oa ijok engame gona AIDS eow ean aeora epo mwit tabwab oa tabwab ngea e ogiten engame ion ouwonon?</i>	YES 1 NO 2 DON'T KNOW 8	
912	Can only gay men get HIV? <i>Ta emwan ngabuna ejadi emwan ion gona HIV?</i>	YES 1 NO 2 DON'T KNOW 8	
913	Can people get HIV because of witchcraft or other supernatural means? <i>Gona oa ijok engame gona HIV dogit Itsibe imin oa imit ibun ngana towe emwaeaeo?</i>	YES 1 NO 2 DON'T KNOW 8	
914	Is it possible for a healthy-looking person to have HIV? <i>Gona oa ijok engame ion ngea eo arak aeaeen gona HIV?</i>	YES 1 NO 2 DON'T KNOW 8	
915	Can HIV, the virus that causes AIDS, be transmitted from a mother to her baby: <i>Gona oa ijok HIV bita emwe ngea orig AIDS abwabwareow atsin eat enimwen ea ngain?</i> During pregnancy? <i>Ngaga oreit ljeng?</i> During delivery? <i>Ngaga oreit guti?</i> By breastfeeding? <i>Eow ean an akimama ngain?</i>	YES NO DK DURING PREG. 1 2 8 DURING DELIVERY ... 1 2 8 BREASTFEEDING ... 1 2 8	
916	CHECK 915: AT LEAST <input type="checkbox"/> OTHER <input type="checkbox"/> → 918 ONE 'YES' ↓		
917	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? <i>Inga ekagamwe kamadauning eken ia docta oa e nurse oija en ion ngea HIV bwe enim ore oreoat tu ken onuweiyeen bitune earak ea ngain?</i>	YES 1 NO 2 DON'T KNOW 8	-
918	Have you heard about special drugs that people infected with HIV can get from a doctor or a nurse to help them live longer? <i>Inga ia wo kaiot angogen ekagamwe kamadauning eken ngea engame ngabuna HIV inan gona atsin turin wongora docta oa e nurse bwe enim buok ura bwe ang enim raquo eken tsimorura.</i>	YES 1 NO 2 DON'T KNOW 8	-
919	CHECK 208 AND 215: NO BIRTHS <input type="checkbox"/> → 929 LAST BIRTH SINCE <input type="checkbox"/> LAST BIRTH BEFORE <input type="checkbox"/> JANUARY 2004. JANUARY 2004. → 929		
920	CHECK 407 FOR LAST BIRTH: HAD <input type="checkbox"/> NO <input type="checkbox"/> ANTENATAL ANTENATAL CARE CARE → 929		
921	CHECK FOR PRESENCE OF OTHERS. BEFORE CONTINUING, MAKE EVERY EFFORT TO ENSURE PRIVACY.		

922	During any of the antenatal visits for your last birth, did anyone talk to you about: <i>Ngago ean am kwad iat arak bwe wo nim aeo am ijeng dogin bituno ngaim dogin, inga ia engame dorer aw dogin:</i> Babies getting HIV from their mother? <i>Eoning gona HIV atsin turin inora?</i> Things that you can do to prevent getting HIV? <i>Imin ngana wo gona riring bwe wo nim eo gona HIV?</i> Getting tested for the HIV? <i>Test eiy em dogin HIV?</i>	YES NO DK AIDS FROM MOTHER 1 2 8 THINGS TO DO . 1 2 8 TESTED FOR AIDS . 1 2 8	
923	Were you offered a test for HIV as part of your antenatal care? <i>Inga ia aeoaw dogit HIV inimagen ranga em ngaga wo ijeng?</i>	YES 1 NO 2	
924	I don't want to know the results, but were you tested for the HIV as part of your antenatal care? <i>A eo teng tsiet angogen wam dobwi, me ta ngana e aeaw oa ijok dogin HIV inimagen ranga em ngaga wo ijeng?</i>	YES 1 NO 2	→ 929
925	I don't want to know the results, but did you get the results of the test? <i>A eo teng tsiet angogen wam dobi me ta ngana wo e gona oa ijok wam dobwi ?</i>	YES 1 NO 2	
926	Where was the test done? <i>Edegen I ino ogog wam test?</i>	PUBLIC SECTOR GOVERNMENT HOSPITAL 11 OTHER OVERSEAS 21	
927	Have you been tested for HIV since that time you were tested during your pregnancy? <i>Inga ia I tuk test eiyuw dogin HIV atsin ngaga dogin am test ngaga wo ijeng?</i>	YES 1 NO 2	→ 930
928	When was the last time you were tested for HIV? <i>Ngada ngaga dogin am test dogin HIV?</i>	LESS THAN 12 MONTHS AGO 1 12 - 23 MONTHS AGO 2 2 OR MORE YEARS AGO 3	→ 936
929	I don't want to know the results, but have you ever been tested to see if you have HIV? <i>A ei teng tsiet wam dobwi, me ta dogin, inga ia test eiyuw enim aea ia wo HIV?</i>	YES 1 NO 2	→ 934
930	When was the last time you were tested? <i>Eken ngaga dogin test eiyem?</i>	LESS THAN 12 MONTHS AGO 1 12 - 23 MONTHS AGO 2 2 OR MORE YEARS AGO 3	
931	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? <i>Ngago dogin wo test, wo ta auwe kangan bita test, e oijaw me wo obuin, oa ouga be e tengeiy?</i>	ASKED FOR THE TEST 1 OFFERED AND ACCEPTED 2 REQUIRED 3	
932	I don't want to know the results, but did you get the results of the test? <i>A eo teng tsiet wam dobwi, me wo gona oa ijok wam dobwi dogin bitune test?</i>	YES 1 NO 2	
933	Where was the test done? <i>Edegen I ino riring ngune test?</i> PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE.	PUBLIC SECTOR GOVERNMENT HOSPITAL 11 OVERSEAS 21 OTHER 96 (SPECIFY)	→ 936
934	Do you know of a place where people can go to get tested for HIV? <i>Inga etang wo tsiet ino engame gona nuwaw me test dogin HIV?</i>	YES 1 NO 2	→ 936
935	Where is that? <i>I ngana ?</i> Any other place? <i>Inga iu etang?</i> 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)	

936	Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? <i>Wo inan tuwab vegetables atsin turin amen karowiow ion ngea wo tsiet bwe gona HIV?</i>	YES 1 NO 2 DON'T KNOW 8	
937	Would you share a meal with a person if you knew that this person had HIV? <i>Wo gona ijeji epo a engame ngea wo tsiet bwe gona HIV?</i>	YES 1 NO 2 DON'T KNOW 8	
938	If a member of your family got infected with HIV, would you want it to remain a secret or not? <i>Ia engame ian am ewak gona HIV, wo nan teng ia engame eo tsiet oa ekeow?</i>	YES, REMAIN A SECRET 1 NO 2 DK/NOT SURE/DEPENDS 8	
939	If a member of your family became sick with AIDS, would you be willing to care for her or him in your own household? <i>Ia engame ran am ewak arak bwe dogin AIDS, wo nan epo tubwum bwe wo nim ranga ameta oa eita ian am ewak?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8	
940	In your opinion, if a female teacher has HIV but is not sick, should she be allowed to continue teaching in the school? <i>Ian am aea, ia enimen kereri gona HIV me eo arak, eimwi bwe enim oija bwe enim ta agoro an kereri ian bita ekereri oa ijok?</i>	SHOULD BE ALLOWED 1 SHOULD NOT BE ALLOWED 2 DK/NOT SURE/DEPENDS 8	
941	Should the names of all persons with HIV be displayed in a public place for everyone to see? <i>Et ia mungana egon engame memak ngabuna HIV e nim omeata ian met engame bwe engame enim aia?</i>	YES 1 NO 2 DON'T KNOW 8	
942	Should all persons with HIV live apart from the general community? <i>Engame ngabuna HIV enim mek goeowa epon ngame memak?</i>	YES 1 NO 2 DON'T KNOW 8	
943	Should it be a criminal offence to knowingly pass HIV onto someone else? <i>Eimwi bwe enim eiy idura ia engame ababareow HIV ea engame ion?</i>	YES 1 NO 2 DON'T KNOW 8	
944	Should all newcomers to Nauru be required to take a test for HIV? <i>Eimwi bwe engame tsimedu orre Naeoro enim test dogin HIV?</i>	YES 1 NO 2 DON'T KNOW 8	
945	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? <i>Inga engame wo tsiet ngea eo oija ibuok atsin iat earak ian mungana ata me aro maramen nuwawen bwe dogin e jouwa ameta oa eita ngaga HIV?</i>	YES 1 NO 2 DK ANYONE WITH HIV 3	→ 950
946	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? <i>Wo tsiet o ijok engame ngea e eo omeatu iat an epwepwo tekawa, etondak, oa an maramari tekawa ian mungano ata me aro maramen nuwawen bwe dogin e jouwa ameta oa eita ngaga gona HIV?</i>	YES 1 NO 2	
947	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? <i>Wo tsiet oa ijok engame ngea ogiten amamodo ian mungana ata me aro maramen nuwawen bwe e jouwa (ameta oa eita) ngaga HIV?</i>	YES 1 NO 2	
948	CHECK 945, 946, AND 947: NOT A SINGLE <input type="checkbox"/> YES' ↓ AT LEAST ONE 'YES' <input type="checkbox"/>		→ 950
949	Do you personally know someone who has or is suspected to have HIV or AIDS? <i>Wo tsiet oa ijok engame ngea gona oa ejouwa bwe gona HIV oa AIDS?</i>	YES 1 NO 2	

950	Do you agree or disagree with the following statement: People with HIV or AIDS should be ashamed of themselves. <i>Wo epo oa eo epo tubwum ean bitune edorer: Engame ngabuna gona HIV oa AIDS nim guduqurongeiy ura.</i>	AGREE 1 DISAGREE 2 DON'T KNOW/NO OPINION 8	
951	Do you agree or disagree with the following statement: People with HIV or AIDS should be blamed for bringing the disease into the community. <i>Epo oa eo epo tubwum ea bitune edorer: Engame ngabuna HIV oa AIDS enim obu ikudura bwe dogin aeora oreat earak iat tekawa.</i>	AGREE 1 DISAGREE 2 DON'T KNOW/NO OPINION 8	
952	CHECK 901: HEARD ABOUT AIDS Apart from AIDS, have you heard about other infections that can be transmitted through sexual contact? <i>Irurun AIDS, inga ia wo ogiten kaiot angoget earak ngana e gona ababareow eow eat ejad?</i>	NOT HEARD ABOUT AIDS Have you heard about infections that can be transmitted through sexual contact? <i>Inga ia wo kaiot angoget earak ngana egona ababareow ean ejad?</i>	YES 1 NO 2
953	CHECK 610: HAS HAD SEXUAL INTERCOURSE <input type="checkbox"/>	HAS NOT HAD SEXUAL INTERCOURSE <input type="checkbox"/>	→ 961
954	CHECK 952: HEARD ABOUT OTHER SEXUALLY TRANSMITTED INFECTIONS? YES <input type="checkbox"/>	NO <input type="checkbox"/>	→ 956
955	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? <i>Ngage a teng en kudo ijuw angogen tsimorim ian mungana ata me aro maramen nuwawen. Ian mungana ata me aro maramen nuwawen, inga ia wo kaiot angoget earak ngana egona atsin ean an ejad engame?</i>	YES 1 NO 2 DON'T KNOW 8	
956	Sometimes women experience a bad smelling abnormal genital discharge. During the last 12 months, have you had a bad smelling abnormal genital discharge? <i>Tsimine edae ngea en inan arowonga bot duwora ngea mamutsi atsin ean bokon duwora. Ian mungana ata me aro maramen maramen nuwawen inga ia wo arowonga bitune bokot duwom ngea mamutsi bon?</i>	YES 1 NO 2 DON'T KNOW 8	
957	Sometimes women have a genital sore or ulcer. During the last 12 months, have you had a genital sore or ulcer? <i>Tsimine edae ngea en etsimine eone or ekamwu ean wangora mwini. Ian mungana ata me aro maramen nuwawen inga ia wo kamu oa one ina eam?</i>	YES 1 NO 2 DON'T KNOW 8	
958	CHECK 955, 956, AND 957: HAS HAD AN INFECTION (ANY 'YES') <input type="checkbox"/>	HAS NOT HAD AN INFECTION OR DOES NOT KNOW <input type="checkbox"/>	→ 961
959	The last time you had (PROBLEM FROM 955/956/957) did you seek any kind of advice or treatment? <i>Ngago dogin an metaw bitune earak epatow ituga, wo kanaani edorer in mwan oa ekagamwe oa ekeow?</i>	YES 1 NO 2	→ 961

960	Where did you go? <i>Wo nuwaw edegen i?</i> Any other place? <i>I bet?</i> 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 TRADITIONAL D OVERSEAS..... E OTHER _____ X (SPECIFY)
961	Husbands 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? <i>Ngabuna ageni eo epwo tubwura eat imin memak. Ia eita agen tsiet ngaga ngea ameta agen tsimine araken ngea ei eita inan gona eow ean aeor ejad, eimwi eita oa ijok ia eo teng ia enim ejadi amea?</i>	YES 1 NO 2 DON'T KNOW 8
962	Is a wife justified in refusing to have sex with her husband when she is tired or not in the mood? <i>Ia ijrung oa ogi eita agen eimwi oa ijok eita ia eo teng ejadi ameta agen?</i>	YES 1 NO 2 DON'T KNOW 8
963	Is a wife justified in refusing to have sex with her husband when she knows her husband has sex with other women? <i>Eimwi ia eita en eo teng ejadi agen bwe dogin tsiet ngaga ameta agen oreit ejadi en bet ibun?</i>	YES 1 NO 2 DON'T KNOW 8
964	Do you believe that young men should wait until they are married to have sexual intercourse? <i>Wo eijo ean ngaga ngabuna eoning in mwan enim ober bwe ar enim mere ian obwen aeora ejad?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
965	Do you think that most young men you know wait until they are married to have sexual intercourse? <i>Wo tsiet oa ijok ngaga ebakin eoning in mwan ngabuna wo tsiet ober ea aeora mere bwe ar nim ejad?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
966	Do you believe that men who are not married and are having sex should only have sex with one partner? <i>Wo tuebon ngaga emwan ngabuna eo mere me oreita ejad enim ejad dangora ta aiqwen?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
967	Do you think that most men you know who are not married and are having sex, have sex with only one partner? <i>Wo tsiet ngaga ebakin emwan ngabuna wo tsiet ngaga ar mere me oreita kewinan ejad, enim ejadi dangora ta aiqwen?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
968	Do you believe that married men should only have sex with their wives? <i>Wo o oejo ean bita ngaga emwan ngabuna mere enim ta ejadi ageora?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
969	Do you think that most married men you know have sex only with their wives? <i>Wo tsiet ngaga ebakin emwan ngabuna mere ngabuna wo tsiet ta ejadi kor ageora?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
970	Do you believe that young women should wait until they are married to have sexual intercourse? <i>Wo tuebon oa ijok ngaga eoning in en enim ober bwe ar enim mere ian obwen aeora ejad?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
971	Do you think that most young women you know wait until they are married to have sexual intercourse? <i>Wo tsiet oa ijok ia ebakit eoning in en wo tsiet ober bwe ar enim mere ian obwen aeora ejad?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
972	Do you believe that women who are not married and are having sex should only have sex with one partner? <i>Wo tuebon oa ijok ngaga en ngabuna eo mere me oreita ejad enim ta ejadi dangora ta aiqwen?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
973	Do you think that most women you know who are not married and are having sex have sex with only one partner? <i>Wo tsiet oa ijok ngaga ebakin en ngabuna wo tsiet bwe eo mere me oreita kewinan ejad enim ejadi dangora ta aiqwen?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
974	Do you believe that married women should only have sex with their husbands? <i>Wo tuebon ngaga en ngabuna mere enim ta ejadi ageora?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8
975	Do you think that most married women you know have sex only with their husbands? <i>Wo tsiet oa ijok ngaga ebakit en ngabuna mere ngabuna wo tsiet ejadi ta ageora?</i>	YES 1 NO 2 DK/NOT SURE/DEPENDS 8

SECTION 10. OTHER HEALTH ISSUES

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																				
1001	Have you ever heard of an illness called tuberculosis or TB? <i>Inga ia wo kaiot angogot earak ion ngea tuberculosis oa TB?</i>	YES 1 NO 2	→ 1008																																				
1002	CHECK Q. 110a and 110b: CODE '2', '3', or '4' CIRCLED IN <input type="checkbox"/> 114 OR 115 OR <input type="checkbox"/> NO ANSWER ↓	CODE '1' CIRCLED IN 114 & 115 <input type="checkbox"/> OR CODE '5' CIRCLED IN 114 <input type="checkbox"/>	→ 1004																																				
1003	The following is a list of sources of information on tuberculosis or TB. Have you ever done any of the following? <i>Ngane ijong ura engat onanien angogen tuberculosis oa TB. Inga ia wo ogiten riring mungane ijong?</i> a. Heard messages about TB on the radio? <i>a. Kaiot angogen TB eat radio?</i> b. Seen messages about TB on TV? <i>b. Iet angogot TB eat TV?</i> c. Read messages about TB in newspapers or magazines? <i>c. Reitsineiy angogot TB ian dabuk in imwinen oa magazines?</i>	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>RADIO</td> <td>1</td> <td>2</td> </tr> <tr> <td>TV</td> <td>1</td> <td>2</td> </tr> <tr> <td>NEWSPAPER/MAGAZINE ..</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	RADIO	1	2	TV	1	2	NEWSPAPER/MAGAZINE ..	1	2																									
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1004	The following is a list of sources of information on tuberculosis or TB. Have you ever done any of the following? <i>Ngane ijong angogen etang in onani angogen tuberculosis oa TB. Inga ia wo riring mungane iong?</i> a. Heard messages about TB on the radio? <i>a. Kaiot angogen TB eat radio?</i> b. Seen messages about TB on TV? <i>b. Iet angogen TB eat TV?</i> c. Read messages about TB in newspapers or magazines? <i>c. Reitsineiy angogen TB iat dabuk in imwinen oa magazines?</i> d. Seen messages about TB on billboards, signs or posters? <i>d. Iet angogen TB eat ijor ouwak, poster oa signs?</i> e. Seen leaflets, brochures, or booklets on TB? <i>e. Iet dabuk ngana oning angogen TB?</i> f. Gotten information on TB from the internet? <i>f. Gona angogen TB atsin iat internet?</i> g. Participated in an TB peer education program? <i>g. Edegeri ekereri n angogot TB ea be eo</i> h. Participated in another type of TB education program such as a wokshop or school program? <i>h. Edegeri workshop oa tuk ekereri ekae eken ngana auweida angogen TB</i> i. Attended a community event about TB? <i>i. Edegeri epo n tekawa towe angogen TB?</i> j. Received information about TB from an outreach work, that is someone who came to your community and about TB? <i>j. Gona angogen TB atsin turin engame ngabuna orre a am tekawa bwe enim ababareow aeora imwinen</i> k. Discussed TB with other persons such as friends, family members, or work colleagues? <i>k. Opapan angogot TB ea engame ibun ngabuna dangon, amen bwien oa dangon in makur?</i>	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>RADIO</td> <td>1</td> <td>2</td> </tr> <tr> <td>TV</td> <td>1</td> <td>2</td> </tr> <tr> <td>NEWSPAPER/MAGAZINE ..</td> <td>1</td> <td>2</td> </tr> <tr> <td>SIGNS/POSTERS</td> <td>1</td> <td>2</td> </tr> <tr> <td>LEAFLETS/BOOKLETS ...</td> <td>1</td> <td>2</td> </tr> <tr> <td>INTERNET</td> <td>1</td> <td>2</td> </tr> <tr> <td>PEER EDUCATION</td> <td>1</td> <td>2</td> </tr> <tr> <td>OTHER EDUCATION</td> <td>1</td> <td>2</td> </tr> <tr> <td>COMMUNITY EVENT</td> <td>1</td> <td>2</td> </tr> <tr> <td>OUTREACH WORKER</td> <td>1</td> <td>2</td> </tr> <tr> <td>FAMILY/FRIENDS</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	RADIO	1	2	TV	1	2	NEWSPAPER/MAGAZINE ..	1	2	SIGNS/POSTERS	1	2	LEAFLETS/BOOKLETS ...	1	2	INTERNET	1	2	PEER EDUCATION	1	2	OTHER EDUCATION	1	2	COMMUNITY EVENT	1	2	OUTREACH WORKER	1	2	FAMILY/FRIENDS	1	2	
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1005	How does tuberculosis spread from one person to another? <i>Eken medenan an babareow tuberculosis atsin ean engame ion me ion.</i> PROBE: Any other ways? <i>Inga l u emedena?</i> RECORD ALL MENTIONED.	THROUGH THE AIR WHEN COUGHING OR SNEEZING A THROUGH SHARING UTENSILS B THROUGH TOUCHING A PERSON WITH TB C THROUGH FOOD D THROUGH SEXUAL CONTACT E THROUGH MOSQUITO BITES F OTHER _____ X (SPECIFY) DON'T KNOW Z																																					

1006	Can tuberculosis be cured? <i>Gona oa ijok otsimor/okirowan ngune tuberculosis?</i>	YES 1 NO 2 DON'T KNOW 8	
1007	If a member of your family got tuberculosis, would you want it to remain a secret or not? <i>Ia ran am ewak gona tuberculosis, wo inan teng oa ijok ia eko engame enim tsiet angogen oa ekeow?</i>	YES, REMAIN A SECRET 1 NO 2 DON'T KNOW/NOT SURE/ DEPENDS 8	
1008	Now I would like to ask you some other questions relating to health matters. Have you had an injection for any reason in the last 12 months? <i>Ngage a teng en ia a nim odonuw ikudo ibun touwe tsimorum. Inga ia wo tabwab ian mungano ata me aro maramen nuwawen?</i> IF YES: How many injections have you had? <i>Egen ebwakin tabwab ngana wo ogen obu?</i> IF NUMBER OF INJECTIONS IS GREATER THAN 90, OR DAILY FOR 3 MONTHS OR MORE, RECORD '90'. IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE.	NUMBER OF INJECTIONS ... <input type="text"/> <input type="text"/> NONE 00	→ 1012
1009	Among these injections, how many were administered by a doctor, a nurse, a pharmacist, a dentist, or any other health worker? <i>Ean mungane tabwabweiyem, egen ebwakin etotow eow turin docta, enurse, amen eat ekagamwe, amen kuda imwi, oa engame bet ion makur iat earak?</i> IF NUMBER OF INJECTIONS IS GREATER THAN 90, OR DAILY FOR 3 MONTHS OR MORE, RECORD '90'. IF NON-NUMERIC ANSWER, PROBE TO GET AN ESTIMATE.	NUMBER OF INJECTIONS ... <input type="text"/> <input type="text"/> NONE 00	→ 1012
1010	The last time you had an injection given to you by a health worker, where did you go to get the injection? <i>Ngago dogin am tabwab ngea oijaw atsin turin amen makur iat earak, edegen I ino wo nuwaw bwe wo nim tabwab?</i> PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. IF THE RESPONDENTS UNABLE TO DETERMINE THE SOURCE, JUST WRITE THE NAME OF THE PLACE _____ (NAME OF PLACE)	PUBLIC SECTOR GOVERNMENT HOSPITAL 11 MOBILE CLINICS 12 PRIMARY HEALTH CARE 13 OTHER _____ 96 (SPECIFY)	
1011	Did the person who gave you that injection take the syringe and needle from a new, unopened package? <i>Ngea bita engame tabwabweiyuw oni bita tabwab me bodin atsin iat packet ngea tsimeduw me eo baita men?</i>	YES 1 NO 2 DON'T KNOW 8	
1012	Do you currently smoke cigarettes? <i>Wo oreita tsiw dabaike?</i>	YES 1 NO 2	→ 1014
1013	In the last 24 hours, how many cigarettes did you smoke? <i>Ian mungano anarama me aeq hour nuwawen, egen ebakin dabaike wo tsiw?</i>	CIGARETTES <input type="text"/> <input type="text"/>	
1014	Do you currently smoke or use any other type of tobacco? <i>Wo oreita tsiw oa tsiw dabaike ibun?</i>	YES 1 NO 2	→ 1016
1015	What (other) type of tobacco do you currently smoke or use? <i>Ekegen erin dabaike ngea wo oreita tsiw oa ouwonon?</i> RECORD ALL MENTIONED.	PIPE A RAUARA (Local name) B OTHER _____ X (SPECIFY)	

		BIG PROB- LEM	NOT A BIG PROB- LEM	
1016	<p>Many different factors can prevent women from getting medical advice or treatment for themselves. When you are sick and want to get medical advice or treatment, is each of the following a big problem or not?</p> <p><i>Ebak dugun an en eo kanaani puok or ekagamwe iat earak. Ia wo arak me wo teng ia wo nim kanaani edor in mwan oa ekagamwe, inan gaturae oa keyeiya oa ijok ngane?:</i></p> <p>Getting permission to go? <i>Kerom bwe enim nuwaw?</i></p> <p>Getting money needed for treatment? <i>Kani emak bwe dogin pumwet ekagamwe?</i></p> <p>The distance to the health facility? <i>Goeow in earak?</i></p> <p>Having to take transport? <i>Enim kanaani towon?</i></p> <p>Not wanting to go alone? <i>Eo teng teiy ia nuwaw?</i></p> <p>Concern that there may not be a female health provider? <i>Worry bwe ngam eko en enim buok ina iat earak?</i></p> <p>Concern that there may not be any health provider? <i>Worry be ngam eko engame ia enim buok iat earak?</i></p> <p>Concern that there may be no drugs available? <i>Worry ngam eko ekagamwe?</i></p>	<p>PERMISSION TO GO 1</p> <p>GETTING MONEY 1</p> <p>DISTANCE 1</p> <p>TAKING TRANSPORT 1</p> <p>GO ALONE 1</p> <p>NO FEMALE PROV. 1</p> <p>NO PROVIDER 1</p> <p>NO DRUGS 1</p>	<p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>2</p> <p>2</p>	
1017	<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. During the last 12 months, how often did you have drinks containing alcohol, such as beer, wine, liquor, spirits, homebrew(Moonshine), toddy(Kaokioki), yeast(Ebeda)? <i>Ngage a teng kudo iuw angoget demungi me ouwononet drugs? Wo omaran ngaga tamo am dorer eat meta angogen me eko engame inan tsiet angogen. Ian mungano ata me aro maramen nuwawen, egen ebwakin am ren erit damungi.</i></p> <p>a. Never <i>Eko edae</i></p> <p>b. Monthly or less? <i>Ead eken ea maramen</i></p> <p>c. 2 to 4 times a month? <i>Awarin aruwuri ea awuri ian maramen</i></p> <p>d. 2 to 3 times a week? <i>Awarin aruwuri ea ajuwuri</i></p> <p>e. 4 or more times a week? <i>Aworin awori oa ebak bet iat week</i></p> <p>f. Don't know <i>Eki</i></p> <p>g. No answer / refused <i>Eko edor/eo teng dor</i></p>	<p>NEVER 0</p> <p>< 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>		1020
1018	<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. <i>Ian mungano ata me aro maramen nuwawen, egen ebwakin eren normal ngaben ngana damungi ian iat ibwum? Ngea normal eren ei diribodit beer, daguradit wine, shot of liquor?</i></p> <p>f. 1 or 2? <i>aiquen oa aro</i></p> <p>e. 3 or 4? <i>aiju oa aeoq</i></p> <p>d. 5 or 6? <i>aijimo oa ango</i></p> <p>c. 7, 8 or 9? <i>aeiu, aoju oa ado</i></p> <p>b. 10 to 19? <i>atai ea ata me ado</i></p> <p>a. 20 or more? <i>anaramae oa ebwaka bet</i></p> <p>g. Don't know <i>Eki</i></p> <p>h. No answer / refused <i>Eko edor/eo teng dor</i></p>	<p><u>NUMBER OF STANDARD DRINKS</u></p> <p>1 OR 2 1</p> <p>3 OR 4 2</p> <p>5 OR 6 3</p> <p>7, 8 OR 9 4</p> <p>10 TO 19 5</p> <p>20 OR MORE 6</p> <p>DON'T KNOW 8</p> <p>NO ANSWER/REFUSED 7</p>		
1019	<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. <i>Ian mungano ata me aro maramen nuwawen, auwurit ebwakin am ren aijimo oa ebak bet eren iat edae aiquen? Ngea standard eren ei diribodin beer, dagarudin wine oa shot of liquor</i></p> <p>a. Never <i>Eko edae</i></p> <p>b. Less than monthly? <i>Uada ian maramen</i></p> <p>c. Monthly? <i>Ian maramen eaeow eaeow</i></p> <p>d. Weekly? <i>Iat I week eaeow eaeow</i></p> <p>e. Daily or almost daily? <i>Yaran yaran</i></p> <p>f. Don't know <i>Eki</i></p> <p>g. No answer / refused <i>Eko dor/EO teng dor</i></p>	<p>NEVER 0</p> <p>LESS THAN MONTHLY 1</p> <p>MONTHLY 2</p> <p>WEEKLY 3</p> <p>DAILY OR ALMOST DAILY 4</p> <p>DON'T KNOW 8</p> <p>NO ANSWER/REFUSED 7</p>		

1020	<p>Next I would like to ask you about use of the following items. <i>Ngage a teng en oudonuw ouwononen mungane imin</i> Have you <u>ever</u> tried...? <i>Inga ia wo ouwonon?</i> IF YES, ASK: Did you use it in the last 30 days?</p> <p>a. Betel nut? b. Kava? <i>grog</i> 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>NEVER TRIED</th> <th>EVER TRIED</th> <th>USED IN LAST 30 DAYS</th> <th>NO ANSWER, REFUSED</th> </tr> </thead> <tbody> <tr><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	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	1	2	3	7	
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1021	<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)? <i>Engame ibun kewewey tabwabweiy an ura drug atsin iat tabwab. lan mungano ata me aro maramen nuwawen inga ia wo tabwab eiy anuw drug (eo mungana bwait abi earak)</i></p>	<p>YES 1 NO 2 NO ANSWER, REFUSED 8</p>																																																																	
1022	<p>RECORD THE TIME.</p> <p>_____</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>																																																																	

SECTION 11. DOMESTIC VIOLENCE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																			
1100	CHECK HOUSEHOLD QUESTIONNAIRE, Q. 129 AND 130. WOMAN SELECTED FOR THIS SECTION <input type="checkbox"/> WOMAN NOT SELECTED <input type="checkbox"/>		1133																																			
1101	CHECK FOR PRESENCE OF OTHERS: DO NOT CONTINUE UNTIL EFFECTIVE PRIVACY IS ENSURED. PRIVACY OBTAINED 1 <input type="checkbox"/> PRIVACY NOT POSSIBLE 2 <input type="checkbox"/>		1133																																			
	<p>READ TO THE RESPONDENT</p> <p>Now I would like to ask you questions about some other important aspects of a woman's life. I know that some of these questions are very personal. However, your answers are crucial for helping to understand the condition of women in Nauru Islands. Let me assure you that your answers are completely confidential and will not be told to anyone and no one else will know that you were asked these questions.</p> <p><i>Ngage a teng ia odonuw ikudo ibun ngana tsimine kor woun iat tsimorit en. A tsiet ngage ibun ngane ikudo inan towew kor me ura imin ngana ta wam. Ngaga bet ouga, am oneij atar dorer magit tsimine woun bwe angongen tsimorit en ine Naeoro. A nan panaw iu eworin ngaga am dorer inan ebabwitsi me eko engame inan tsiet angongen oa ngaga a odonuw mungane ikudo.</i></p>																																					
1102	CHECK 601 AND 602: CURRENTLY MARRIED/LIVING WITH A MAN <input type="checkbox"/> FORMERLY MARRIED/LIVED WITH A MAN <input type="checkbox"/> (READ IN PAST TENSE)																																					
1103	<p>First, I am going to ask you about some situations which happen to some women. Please tell me if these apply to your relationship with your (last) husband/partner?</p> <p><i>Adamonin, a nan kudo iuw angoget imin ibun ngana emeta ibut en. A kong aw bwe wo nim paname ia meta mungane ian amurur meg epwo ameta dogin agem oa dangom?</i></p> <p>a) He (is/was) jealous or angry if you (talk/talked) to other men? <i>Tei dain an boron oa egirow ia wo dorer a/ogiten dorera emwat ibun?</i></p> <p>b) He frequently (accuses/accused) you of being unfaithful? <i>Ebak edae kuduraeuw/ogiten kuduraeuw ngaga wo rereange?</i></p> <p>c) He (does/did) not permit you to meet your female friends? <i>E o oijaw medenam bwe wo nim arowonga dangom en?</i></p> <p>d) He (tries/tried) to limit your contact with your family? <i>E oduok am dae/ebakin am arowonga amen bwiem?</i></p> <p>e) He (insists/insisted) on knowing where you (are/were) at all times? <i>Eat edae memak ameta teng ia enim tsiet ino wo tuk?</i></p> <p>f) He (does/did) not trust you with any money? <i>Ameta eo tobwon anuw emark?</i></p>	<table border="0"> <tr> <td></td> <td align="right">YES</td> <td align="right">NO</td> <td align="right">DK</td> </tr> <tr> <td>JEALOUS</td> <td align="right">1</td> <td align="right">2</td> <td align="right">8</td> </tr> <tr> <td>ACCUSES</td> <td align="right">1</td> <td align="right">2</td> <td align="right">8</td> </tr> <tr> <td>NOT MEET FRIENDS</td> <td align="right">1</td> <td align="right">2</td> <td align="right">8</td> </tr> <tr> <td>NO FAMILY</td> <td align="right">1</td> <td align="right">2</td> <td align="right">8</td> </tr> <tr> <td>WHERE YOU ARE ...</td> <td align="right">1</td> <td align="right">2</td> <td align="right">8</td> </tr> <tr> <td>MONEY</td> <td align="right">1</td> <td align="right">2</td> <td align="right">8</td> </tr> </table>		YES	NO	DK	JEALOUS	1	2	8	ACCUSES	1	2	8	NOT MEET FRIENDS	1	2	8	NO FAMILY	1	2	8	WHERE YOU ARE ...	1	2	8	MONEY	1	2	8								
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1104	<p>Now if you will permit me, I need to ask some more questions about your relationship with your (last) husband/partner. If we should come to any question that you do not want to answer, just let me know and we will go on to the next question.</p> <p><i>A kongaw bwe wo nim oijame edae bwe a nim oudonuw angongen amur keiwin ameta dogin agem/dangam.</i></p> <p>A (Does/did) your (last) husband/partner ever: <i>Inga ia ameta agem (dogin):</i></p> <p>a) say or do something to humiliate you in front of others? <i>pan oa riring imin ian met engame bwe nim riring uw wo nim gudukurong ian met engame?</i></p> <p>b) threaten to hurt or harm you or someone close to you? <i>pan iat egirow ngaga nan oturoiyuw oa engame ngabuna turun aw?</i></p> <p>c) insult you or make you feel bad about yourself? <i>Amamadow oa riring uw wo nim eo tsimor oa omo am kamwarareiyuw?</i></p>	<p>CHECK 603: ASK ONLY IF RESPONDENT IS NOT A WIDOW</p> <p>How often did this happen during the last 12 months: often, only sometimes, or not at all?</p> <table border="0"> <tr> <td></td> <td></td> <td align="right">OFTEN</td> <td align="right">SOME-TIMES</td> <td align="right">NOT AT ALL</td> </tr> <tr> <td>YES</td> <td align="right">1 →</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NO</td> <td align="right">2 ↓</td> <td align="right">1</td> <td align="right">2</td> <td align="right">3</td> </tr> <tr> <td>YES</td> <td align="right">1 →</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NO</td> <td align="right">2 ↓</td> <td align="right">1</td> <td align="right">2</td> <td align="right">3</td> </tr> <tr> <td>YES</td> <td align="right">1 →</td> <td></td> <td></td> <td></td> </tr> <tr> <td>NO</td> <td align="right">2 ↓</td> <td align="right">1</td> <td align="right">2</td> <td align="right">3</td> </tr> </table>			OFTEN	SOME-TIMES	NOT AT ALL	YES	1 →				NO	2 ↓	1	2	3	YES	1 →				NO	2 ↓	1	2	3	YES	1 →				NO	2 ↓	1	2	3	
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1105	<p>A (Does/did) your (last) husband/partner ever do any of the following things to you: <i>Inga ia ameta (dogin) agem/dangam riring aw mungane:</i></p> <p>a) push you, shake you, or throw something at you? <i>yowuw, raranuw, timidanuw imin</i></p> <p>b) slap you? <i>iyatowuw</i></p> <p>c) twist your arm or pull your hair? <i>arong bwem oa urur tubwum?</i></p> <p>d) punch you with his fist or with something that could hurt you? <i>idoweiyanuw tubun ben oa imit on ngana e gona amakaw ean?</i></p> <p>e) kick you, drag you or beat you up? <i>tudeiyuw, ururew, kanakeiuw?</i></p> <p>f) try to choke you or burn you on purpose? <i>kokon bwe enim amwat terem oa atedaw ian an akwakwi?</i></p> <p>g) threaten or attack you with a knife or any other weapon? <i>kwokwon bwe enim amiowanuw oa enim abiw ouwonot ijibiji?</i></p> <p>h) physically force you to have sexual intercourse with him even when you did not want to? <i>force eiyuw bwe wo nim ejadi ngaga bet wo eo teng ia enim ouga?</i></p> <p>i) force you to perform any sexual acts you did not want to? <i>force eiyuw wo nim riring erut ejad ngana wo eo teng riring?</i></p>	<p>B CHECK 603: ASK ONLY IF RESPONDENT IS NOT A WIDOW How often did this happen during the last 12 months: often, only sometimes, or not at all?</p> <table border="1"> <thead> <tr> <th></th> <th></th> <th>OFTEN</th> <th>SOME-TIMES</th> <th>NOT AT ALL</th> </tr> </thead> <tbody> <tr> <td>YES</td> <td>1 →</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>NO</td> <td>2 ↓</td> <td></td> <td></td> <td></td> </tr> <tr> <td>YES</td> <td>1 →</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>NO</td> <td>2 ↓</td> <td></td> <td></td> <td></td> </tr> <tr> <td>YES</td> <td>1 →</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>NO</td> <td>2 ↓</td> <td></td> <td></td> <td></td> </tr> <tr> <td>YES</td> <td>1 →</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>NO</td> <td>2 ↓</td> <td></td> <td></td> <td></td> </tr> <tr> <td>YES</td> <td>1 →</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>NO</td> <td>2 ↓</td> <td></td> <td></td> <td></td> </tr> <tr> <td>YES</td> <td>1 →</td> <td>1</td> <td>2</td> <td>3</td> </tr> <tr> <td>NO</td> <td>2 ↓</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			OFTEN	SOME-TIMES	NOT AT ALL	YES	1 →	1	2	3	NO	2 ↓				YES	1 →	1	2	3	NO	2 ↓				YES	1 →	1	2	3	NO	2 ↓				YES	1 →	1	2	3	NO	2 ↓				YES	1 →	1	2	3	NO	2 ↓				YES	1 →	1	2	3	NO	2 ↓			
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1106	<p>CHECK 1105A (a-i):</p> <p>AT LEAST ONE 'YES' <input type="checkbox"/> NOT A SINGLE 'YES' <input type="checkbox"/></p>		1109																																																																
1107	<p>How long after you first got married to/started living with your (last) husband/partner did (this/any of these things) first happen? <i>Egen raquin am mere/mek epow ea ameta dogin agem/partner ngaga metan mungane imin?</i></p> <p>IF LESS THAN ONE YEAR, RECORD '00'.</p>	<p>NUMBER OF YEARS <input type="text"/></p> <p>BEFORE MARRIAGE/BEFORE LIVING TOGETHER 95</p>																																																																	
1108	<p>Did the following ever happen as a result of what your (last) husband/partner did to you: <i>Inga ia meta teman an makur ameta agem eaw?</i></p> <p>a) You had cuts, bruises or aches? <i>Wo wurio, bouw, oa magamaga?</i></p> <p>b) You had eye injuries, sprains, dislocations, or burns? <i>Wo gaturae mem, wo ruwij, roda rom, oa ong duwom?</i></p> <p>c) You had deep wounds, broken bones, broken teeth, or any other serious injury? <i>Wo gona eone ngea kob, mae rom, bakoro ron mwim, oa erit bwet igaturae ngana bwaka?</i></p>	<table border="1"> <tbody> <tr> <td>YES</td> <td>.....</td> <td>1</td> </tr> <tr> <td>NO</td> <td>.....</td> <td>2</td> </tr> <tr> <td>YES</td> <td>.....</td> <td>1</td> </tr> <tr> <td>NO</td> <td>.....</td> <td>2</td> </tr> <tr> <td>YES</td> <td>.....</td> <td>1</td> </tr> <tr> <td>NO</td> <td>.....</td> <td>2</td> </tr> </tbody> </table>	YES	1	NO	2	YES	1	NO	2	YES	1	NO	2																																															
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1109	<p>Have you ever hit, slapped, kicked, or done anything else to physically hurt your (last) husband/partner at times when he was not already beating or physically hurting you? <i>Inga ia wo ogen ibwato, oge, tudeiy oa riring imit inon enim amaga ameta dogin agem/dangam ia ngaga eo oreita ogew oa amagaw?</i></p>	<table border="1"> <tbody> <tr> <td>YES</td> <td>.....</td> <td>1</td> </tr> <tr> <td>NO</td> <td>.....</td> <td>2</td> </tr> </tbody> </table>	YES	1	NO	2	1112																																																										
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1110	<p>CHECK 603:</p> <p>RESPONDENT IS NOT A WIDOW <input type="checkbox"/> RESPONDENT IS A WIDOW <input type="checkbox"/></p>		1112																																																																
1111	<p>In the last 12 months, how often have you done this to your husband/partner: often, only sometimes, or not at all? <i>Ian mungano ata me aro maramen nuwawen, aworit egen am riring mungane eor ea agem/dangam. Ebak edae, eat edae ibun oa ekeow kor?</i></p>	<table border="1"> <tbody> <tr> <td>OFTEN</td> <td>.....</td> <td>1</td> </tr> <tr> <td>SOMETIMES</td> <td>.....</td> <td>2</td> </tr> <tr> <td>NOT AT ALL</td> <td>.....</td> <td>3</td> </tr> </tbody> </table>	OFTEN	1	SOMETIMES	2	NOT AT ALL	3																																																								
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1112	Does (did) your husband/partner drink alcohol? <i>Ngea ameta agem/dangom mungi oa ngago?</i>	YES 1 NO 2	→ 1114
1113	How often does (did) he get drunk: often, only sometimes, or never? <i>Aworit egen an ren, oa pwe men: ebak edae, eat edae ibun, oa ekeow kor?</i>	OFTEN 1 SOMETIMES 2 NEVER 3	
1114	From the time you were 15 years old has anyone other than your (current/last) husband/partner hit, slapped, kicked, or done anything else to hurt you physically? <i>Atsin ngago ata me aijimo am obweni, inga engame irurun ameta age/dangam ngage/ngago ogew, ijatowuw, tudeiyuw, oa riring aw imin ngana nim amaga robodom?</i>	YES 1 NO 2 REFUSED TO ANSWER/ NO ANSWER 3	→ 1117
1115	Who has hurt you in this way? <i>Ijen ngea amagaw ian bitune emedena?</i> Anyone else? <i>Engame bet ibun?</i> RECORD ALL MENTIONED.	MOTHER/STEP-MOTHER A FATHER/STEP-FATHER B SISTER/BROTHER C DAUGHTER/SON D OTHER RELATIVE E FORMER HUSBAND/PARTNER F CURRENT BOYFRIEND G FORMER BOYFRIEND H MOTHER-IN-LAW I FATHER-IN-LAW J OTHER IN-LAW K TEACHER L EMPLOYER/SOMEONE AT WORK M POLICE N OTHER _____ X (SPECIFY)	
1116	In the last 12 months, how often have you been hit, slapped, kicked, or physically hurt by this/these person(s): often, only sometimes, or not at all? <i>Ian mungano ata me aro maramen nuwawen, aworit egen ogewem, ijatowem, tudeiyem oa amagaw atsin turin bitune amebune engame: eat edae ibun, mek oa mek, oa ekeow kor?</i>	OFTEN 1 SOMETIMES 2 NOT AT ALL 3	
1117	CHECK 201, 226, AND 229: EVER BEEN PREGNANT (YES ON 201 OR 226 OR 229) <input type="checkbox"/> NEVER BEEN PREGNANT <input type="checkbox"/>		→ 1120
1118	Has any one ever hit, slapped, kicked, or done anything else to hurt you physically while you were pregnant? <i>Inga ia engame ogiten ogew, ijatowuwu, tudeiyuw oa imit bet ibun ngana inan amaga robodom ngaga wo oreit ijeng?</i>	YES 1 NO 2	→ 1120
1119	Who has done any of these things to physically hurt you while you were pregnant? <i>Ijegen ngea riring mungane bwe e nim amaga robodom ngaga wo oreit ijeng?</i> Anyone else? <i>Engame bet iu?</i> RECORD ALL MENTIONED.	CURRENT HUSBAND/PARTNER A MOTHER/STEP-MOTHER B FATHER/STEP-FATHER C SISTER/BROTHER D DAUGHTER/SON E OTHER RELATIVE F FORMER HUSBAND/PARTNER G CURRENT BOYFRIEND H FORMER BOYFRIEND I MOTHER-IN-LAW J FATHER-IN-LAW K OTHER IN-LAW L TEACHER M EMPLOYER/SOMEONE AT WORK N POLICE/SOLDIER O OTHER _____ X (SPECIFY)	
1120	The first time you had sexual intercourse, would you say that you had it because you wanted to, or because you were forced to have it against your will? <i>Ngaga adamonin am ejad, wo kona pan ngaga wo riring bwe dogin wo teng oa dogin e force eiyuw wo nim ejad?</i>	WANTED TO 1 FORCED TO 2 REFUSED TO ANSWER/ NO RESPONSE 3	
1121	In the last 12 months, has anyone other than your (current/last) husband/partner forced you to have sexual intercourse against your will? <i>Ian mungano ata me aro maramen nuwawen, inga engame irurun ameta agem ngage/dogin force eiy uw bwe wo nim ejad ngaga bet wo eo teng?</i>	YES 1 NO 2 REFUSED TO ANSWER/ NO ANSWER 3	
1122	CHECK 1120 AND 1121: 1120 = '1' OR '3' <input type="checkbox"/> AND 1121 = '2' OR '3' <input type="checkbox"/> OTHER <input type="checkbox"/>		→ 1127
1123	CHECK 1105(h) and 1105(i): 1105(h) IS NOT '1' <input type="checkbox"/> AND 1105(i) IS NOT '1' <input type="checkbox"/> OTHER <input type="checkbox"/>		→ 1128

1124	At any time in your life, as a child or as an adult, has anyone ever forced you in any way to have sexual intercourse or perform any other sexual acts? <i>Inga edae ian tsimorim, ian am oning oa engab, inga engame ia force eiy wo nim ejad oa riring erit ejad ngana ekae ken?</i>	YES 1 NO 2 REFUSED TO ANSWER/ NO ANSWER 3	→ 1128
1125	How old were you the first time you were forced to have sexual intercourse or perform any other sexual acts? <i>Egen am obweni ngaga adamonin force eiyem bwe wo nim ejad oa riring dedeit ijeng ngana ekae eken?</i>	AGE IN COMPLETED YEARS ... <input type="text"/> DON'T KNOW 98	
1126	Who was the person who was forcing you at that time? <i>Ijen ngea engame forceiyuw ngaga ean bita edae?</i>	CURRENT HUSBAND/PARTNER . 01 FORMER HUSBAND/PARTNER . 02 CURRENT/FORMER BOYFRIEND . 03 FATHER 04 STEP FATHER 05 OTHER RELATIVE 06 IN-LAW 07 OWN FRIEND/ACQUAINTANCE . 08 FAMILY FRIEND 09 TEACHER 10 EMPLOYER/SOMEONE AT WORK . 11 POLICE/SOLDIER 12 PRIEST/RELIGIOUS LEADER . 13 STRANGER 14 OTHER 96 (SPECIFY)	
1127	CHECK 1105A (a-i), 1114, 1118, 1121 AND 1124: AT LEAST ONE <input type="checkbox"/> NOT A SINGLE <input type="checkbox"/> 'YES' 'YES'		→ 1131
1128	Thinking about what you yourself have experienced among the different things we have been talking about, have you ever tried to seek help to stop (the/these) person(s) from doing this to you again? <i>Ia wo kamarareiy mungana imin metaw ian tsimorim irurun mungane ar ogiten pan angogen, ngana wo kwokwon kanaani ipuok bwe e nim oduog ameta/amebune engame ean aeora enim tuk riring aw imin iu eworin?</i>	YES 1 NO 2	→ 1130
1129	From whom have you sought help? <i>Tangan ijegen ngea wo kanaani puok?</i> Anyone else? <i>Engame bet ijen?</i> RECORD ALL MENTIONED.	OWN FAMILY A HUSBAND/PARTNER'S FAMILY B CURRENT/LAST/LATE HUSBAND/PARTNER C CURRENT/FORMER BOYFRIEND D FRIEND E NEIGHBOR F RELIGIOUS LEADER G DOCTOR/MEDICAL PERSONNEL H POLICE I LAWYER J SOCIAL SERVICE ORGANIZATION K OTHER X (SPECIFY)	→ 1131
1130	Have you ever told any one else about this? <i>Inga ia wo pana engame bitune?</i>	YES 1 NO 2	
1131	As far as you know, did your father ever beat your mother? <i>Ia wo tsiet, ameta etongim oge oa kanakeiy oa ijok inem?</i>	YES 1 NO 2 DON'T KNOW 8	
THANK THE RESPONDENT FOR HER COOPERATION AND REASSURE HER ABOUT THE CONFIDENTIALITY OF HER ANSWERS. FILL OUT THE QUESTIONS BELOW WITH REFERENCE TO THE DOMESTIC VIOLENCE MODULE ONLY.			
1132	DID YOU HAVE TO INTERRUPT THE INTERVIEW BECAUSE SOME ADULT WAS TRYING TO LISTEN, OR CAME INTO THE ROOM, OR INTERFERED IN ANY OTHER WAY?	YES ONCE HUSBAND 1 OTHER MALE ADULT 1 FEMALE ADULT 1 YES, MORE THAN ONCE 2 2 2 NO 3 3 3	
1133	INTERVIEWER'S COMMENTS / EXPLANATION FOR NOT COMPLETING THE DOMESTIC VIOLENCE MODULE <hr/> <hr/> <hr/>		
1134	RECORD THE TIME.	HOUR <input type="text"/> MINUTES <input type="text"/>	

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: _____

INSTRUCTIONS:

WOMAN'S BIRTH CALENDAR

ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
ALL MONTHS SHOULD BE FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

BIRTHS, PREGNANCIES, CONTRACEPTIVE USE **

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 FEMALE STERILIZATION
- 2 MALE STERILIZATION
- 3 PILL
- 4 IUD
- 5 INJECTABLES
- 6 IMPLANTS
- 7 CONDOM
- 8 FEMALE CONDOM
- 9 DIAPHRAGM
- J FOAM OR JELLY
- K LACTATIONAL AMENORRHEA METHOD
- L RHYTHM METHOD
- M WITHDRAWAL
- X OTHER _____
(SPECIFY)

12	DEC	01		
11	NOV	02		
10	OCT	03		
09	SEP	04		
2	08	AUG	05	2
0	07	JUL	06	0
0	06	JUN	07	0
7	05	MAY	08	7
*	04	APR	09	*
	03	MAR	10	
	02	FEB	11	
	01	JAN	12	

12	DEC	13		
11	NOV	14		
10	OCT	15		
09	SEP	16		
2	08	AUG	17	2
0	07	JUL	18	0
0	06	JUN	19	0
6	05	MAY	20	6
*	04	APR	21	*
	03	MAR	22	
	02	FEB	23	
	01	JAN	24	

12	DEC	25		
11	NOV	26		
10	OCT	27		
09	SEP	28		
2	08	AUG	29	2
0	07	JUL	30	0
0	06	JUN	31	0
5	05	MAY	32	5
*	04	APR	33	*
	03	MAR	34	
	02	FEB	35	
	01	JAN	36	

12	DEC	37		
11	NOV	38		
10	OCT	39		
09	SEP	40		
2	08	AUG	41	2
0	07	JUL	42	0
0	06	JUN	43	0
4	05	MAY	44	4
*	04	APR	45	*
	03	MAR	46	
	02	FEB	47	
	01	JAN	48	

12	DEC	49		
11	NOV	50		
10	OCT	51		
09	SEP	52		
2	08	AUG	53	2
0	07	JUL	54	0
0	06	JUN	55	0
3	05	MAY	56	3
*	04	APR	57	*
	03	MAR	58	
	02	FEB	59	
	01	JAN	60	

12	DEC	61		
11	NOV	62		
10	OCT	63		
09	SEP	64		
2	08	AUG	65	2
0	07	JUL	66	0
0	06	JUN	67	0
2	05	MAY	68	2
*	04	APR	69	*
	03	MAR	70	
	02	FEB	71	
	01	JAN	72	