

### Female Health in Your Local Area

1. This survey will ask about women's health in your local area. (SELECT\_ONE)
  - Continue
  
2. On average, in the last six months, how many members usually live in your household counting yourself? (SELECT\_ONE)

- 0	- 7	- 14
- 1	- 8	- 15
- 2	- 9	- 16
- 3	- 10	- 17
- 4	- 11	- 18
- 5	- 12	- 19
- 6	- 13	- 20 or more
  
3. How long would you like to wait from now before the birth of a/another child? (SELECT\_ONE)
  - I want to have a/another child soon
  - I want to have a/another child later
  - Undecided whether I want a/another child
  - I don't want more children
  - I am not able to have a/another child
  - Decline to respond
  
4. Since March, has your desire for children changed? (SELECT\_ONE)
  - Yes
  - No
  
5. How has your desire for children changed since March? (SELECT\_ONE)
  - I no longer want a/another child
  - I am now undecided
  - I now want a/another child
  - I want to have a/another child but later than I did before
  - I want to have a/another child but sooner than I did before
  - Decline to respond

6. In the last 6 months, have you or your partner used any contraception method to delay or avoid getting pregnant? (SELECT\_ONE)
- Yes
  - No
7. Indicate which type of contraception method you or your partner have used in the last six months. (SELECT\_MANY)
- Female sterilization
  - Male sterilization
  - Implant
  - IUD
  - Injectables
  - Pill
  - Male Condom
  - Female Condom
  - Diaphragm
  - Foam/Jelly
  - Other
  - Other traditional methods
  - Don't know
  - Decline to respond
8. During December-February, did you experience any difficulties in accessing your method of contraception? (SELECT\_ONE)
- Yes
  - No
  - Did not need contraception
9. On average during a week, how many pills did you miss during December - February?
- Text
10. On average during a week, how many times did you require contraception during December - February? (SELECT\_ONE)
- 0
  - 1
  - 2
  - 3
  - 4
  - 5
  - 6
  - 7 or more

11. How many times were you able to access contraception during the average week from December - February? (SELECT\_ONE)
- 0
  - 1
  - 2
  - 3
  - 4
  - 5
  - 6
  - 7 or more
12. How many times during December-February did you need either an appointment for an injectable contraception but could not access it?
- Number
13. How many times during December-February did you need an appointment for IUD but could not access it?
- Number
14. What were the reason(s) you were not able to access your method of contraception during December-February? (SELECT\_MANY)
- Health facility closed
  - Turned away from health facility
  - Contraception not available
  - No transportation
  - Lack of money
  - Partner or family does not approve
  - Other
  - Decline to respond
15. Specify the other reason you were not able to access contraception during December - February.
- Text
16. Since March, did you experience any difficulties in accessing your method of contraception? (SELECT\_ONE)



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- Yes
- No
- Did not need contraception

17. On average during a week, how many pills did you miss since March?

- Text

18. On average during a week, how many times did you require contraception since March?

(SELECT\_ONE)

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7 or more

19. How many times during the average week were you able to access contraception since March? (SELECT\_ONE)

- 0
- 1
- 2
- 3
- 4
- 5
- 6
- 7 or more

20. How many times since March did you need an appointment for injectable contraception but could not access it?

- Number

21. How many times since March did you need an appointment for an IUD but could not access it?

- Number

22. What were the reason(s) you could not access your method of contraception since March? (SELECT\_MANY)

- Health facility closed | Turned away from health facility
- Contraception not available
- No transportation
- Lack of money
- Unable to access due to lockdown restrictions
- Fear of being infected with COVID-19
- Partner or family does not approve
- Other
- Decline to respond

23. Specify the other reason you were not able to access contraception since March.

- Text

24. Are you alone right now? (SELECT\_ONE)

- Yes
- No
- Decline to respond

25. How safe do you feel in your home, where you currently sleep? (SELECT\_ONE)

- Very safe
- Pretty safe
- A little unsafe
- Very unsafe
- Don't know
- Decline to respond

26. Since March, have you felt more or less safe in your home? (SELECT\_ONE)

- More safe
- Less safe
- About the same
- Don't know
- Decline to respond

27. Is there a place that you could go if something happened that made you feel unsafe in your home? (SELECT\_ONE)

- Yes
- No
- Don't know
- Decline to respond

28. During December-February, how often did you need to go to this place? (SELECT\_ONE)

- Every day
- Once a week
- Once a month
- Rarely
- Never
- Don't know
- Decline to respond

29. Since March, how often did you need to go to this place? (SELECT\_ONE)

- Every day
- Once a week
- Once a month
- Rarely
- Never
- Don't know
- Decline to respond

30. Since March, did you intend to go to this safe place but were prevented from doing so? (SELECT\_ONE)

- Yes
- No
- Don't know
- Decline to respond

31. What was the main reason that prevented you from going to this place? (SELECT\_ONE)

- Unable to access place due to lockdown
- Place was closed or unavailable for reason other than lockdown
- Afraid of consequences



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- No transportation
- Fear of being infected with COVID-19
- Other
- Decline to respond

32. During December-February, have you sought the services of a women's help organization (e.g. crisis center, shelter, hotline)? (SELECT\_ONE)

- Yes
- No
- Don't know
- Decline to respond

33. Since March, have you sought the services of a women's help organization (e.g. crisis center, shelter, hotline)? (SELECT\_ONE)

- Yes
- No
- Don't know
- Decline to respond

34. Since March, have you wanted to seek the services of a women's help organization but did not? (SELECT\_ONE)

- Yes
- No
- Don't know
- Decline to respond

35. What was the main reason you were unable to seek the services of a women's help organization? (SELECT\_ONE)

- Did not know where to go
- Too far from services
- Could not afford transport or service fees
- Services unavailable due to COVID-19 restrictions
- Unable to travel due to COVID-19 restrictions
- Fear of threats/consequences/getting into trouble
- Embarrassed for myself or my family
- Don't know



- Other
- Decline to Answer

36. We recommend that you seek out local resources if you feel unsafe in your home.

General information and suggested resources can be found in the below link:

<https://www.endvawnow.org/en/need-help>