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**PREGNANCY CONFIRMATION**

2.01 At the time you became pregnant with this pregnancy that has just ended, how did you know you were pregnant? Mark X all mentioned

pregnancy test	How did she know about test? where get test? Cost? Anyone else involved in getting / doing test? Difficult to get?
period late	How long notice her period delayed for? Tell anyone else about late period? Try to keep delayed period a secret?
someone else noticed	Who was this person? What did they notice? What did they say to her?
body changes	What sort of body changes (eg: vomiting, breast tenderness)? Did she try to keep changes secret from others?
anything else?	What?

**PREGNANCY TIMING**

2.02 Now I am going to ask you a question and there are 4 possible responses to it. Please tell me which one applies to you.  
Do you feel that this pregnancy happened at the time you....

...wanted pregnancy then	<input type="checkbox"/>	...wanted pregnancy later	<input type="checkbox"/>	Don't know	<input type="checkbox"/>
...wanted pregnancy sooner	<input type="checkbox"/>	...did not want to be pregnant at all	<input type="checkbox"/>		

**PREGNANCY INTENTION**

2.03 Now I am going to ask you a question and there are 3 possible responses. Please choose the one option that applies to you.  
Think about the time just before you became pregnant. Would you say...

...you intended to get pregnant	<input type="checkbox"/>	...your intentions to get pregnant kept changing	<input type="checkbox"/>
...you did not intend to get pregnant	<input type="checkbox"/>	Don't know	<input type="checkbox"/>

**PREGNANCY WANT**

2.04 Now I am going to ask you a question and there are 3 possible responses to it. Please choose the one option that is applicable to you.  
Again think about the time just before you became pregnant. Would you say...

...you wanted to have a baby	<input type="checkbox"/>	...you did not want to have a baby	<input type="checkbox"/>
...you had mixed feelings about having a baby	<input type="checkbox"/>	Don't know	<input type="checkbox"/>

**RELATIONSHIP**

2.05 Was this the first time you had had sex?  Yes  No Check that sex is penetrative vaginal sex not anal sex, oral sex, fingering

2.06 In your own words, please could you describe the relationship that led to this pregnancy. Probe: was it a steady boyfriend? A husband? An extra-marital partner? A casual boyfriend? A sugar daddy? A stranger?

**EMERGENCY CONTRACEPTION**

2.07 Have you ever heard of Emergency Contraception? [As an emergency measure, within three days after they have unprotected sexual intercourse, women can take special pills to prevent pregnancy. Sometimes referred to as morning after pill here]

<input type="checkbox"/>	Yes. GO TO 2.08	<input type="checkbox"/>	No. GO TO 2.11
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2.08 For the pregnancy that has just ended, did you use Emergency Contraception?

<input type="checkbox"/>	Yes GO TO 2.09	<input type="checkbox"/>	No GO TO 2.10
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2.09 What type of Emergency Contraception did you use?  
\_\_\_\_\_

2.10 Why do you think it did not work?  
Probe: Don't know? Took it too late? Was sick?  
\_\_\_\_\_ GO TO 2.11

2.11 Why did you not use Emergency Contraception?  
Probe: did not know where to get it? Was refused? Could not afford?  
\_\_\_\_\_

**CONTRACEPTION**

2.12 At the time you became pregnant with this most recent pregnancy, were you or your partner/husband using anything to delay or avoid pregnancy?  YES: GO TO 2.12  NO:GO TO 2.13  Do not know: GO TO 2.13

2.13 If YES using family planning at the time of this pregnancy that just ended, what family planning method(s) were you using? (X all methods mentioned)

	Using (X)	For each method mentioned		
		Why chose method?	Where did you get this method?	Why do you think got pregnant?
female sterilisation				
pill (sometimes referred to as family planning)				
Injection / Depo Provera				
male condom				
diaphragm				
male sterilisation				
IUD/Loop				
implants				
female condom				
foam/jelly (spermicides)				
emergency contraception				
lactational amenorrhea (breastfeeding)				
rhythm method / moon beads / cycle beads / fertility awareness				
withdrawal				
other (specify)				

2.13 If NOT using family planning at the time of this pregnancy that just ended:  YES: GO TO 2.14  NO:GO TO 2.15  
 Have you ever used anything to delay or avoid getting pregnant?

2.14 If you have ever used something to avoid or delay getting pregnant, but not for this pregnancy that has just ended, what methods have you used? (X all methods mentioned)

	Ever used (X)	For each method mentioned		
		Why chose method?	Where did you get this method?	Why not using at time of most recent pregnancy?
pill (sometimes referred to as family planning)				
Injection / Depo Provera				
male condom				
diaphragm				
IUD/Loop				
implants				
female condom				
foam/jelly (spermicides)				
emergency contraception				
lactational amenorrhea (breastfeeding)				
rhythm method / moon beads / cycle beads / fertility awareness				
withdrawal				
other (specify)				

2.15 If NEVER used anything to delay or avoid getting pregnant, why? Mark all mentioned

did not think I could get pregnant	<input type="checkbox"/>	Probe: why did she think she could not get pregnant?
did not know there was anything I could do to avoid getting pregnant	<input type="checkbox"/>	Probe: has she ever heard anything about family planning? From who or what?
my partner refused to use	<input type="checkbox"/>	Probe: why did her partner refuse?
unable to access family planning services and supplies	<input type="checkbox"/>	Probe: did she try to use family planning services? What happened? Does she know where to get family planning supplies?
had not planned on having sex	<input type="checkbox"/>	Probe with care in case of forced sex / rape. If had not planned on having sex, what had happened?
fears / worries (eg: infertility, cancer)	<input type="checkbox"/>	Probe: what specific fears did she have? Were these fears for certain methods? Side effects?

other reasons  Probe: for details

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ABORTION DECISION-MAKING

2.16 Why did you decide to end the most recent pregnancy? Do not read out options. Indicate all that are mentioned. For any reason mentioned, probe: Why? Was anyone else involved in the decision? How did she feel about this?

- husband did not want at the time
- partner did not want at the time
- have enough children already
- cost of raising children is too high
- too soon after last pregnancy
- would have to drop out of school due to pregnancy
- would have to leave job
- too young
- not married
- pregnancy was without a husband or partner
- fear of having to tell anyone about the pregnancy
- not the right time to have a baby
- influenced by someone else (eg: parent, friend, relative)
- forced or coerced sex / rape/incest
- my own health concerns (including HIV)
- other (specify)
- don't know

2.17 After deciding to terminate your pregnancy, did you do something immediately or did you delay for some time?

Immediate: go to 3.00  Delayed

2.18 For how long did you delay?

days

2.19 Why did you delay? Do not read out options. Indicate all that are mentioned.

<input type="checkbox"/>	Did not have transportation
<input type="checkbox"/>	Did not know what to do
<input type="checkbox"/>	Tried to go to another facility, but was turned away
<input type="checkbox"/>	I was afraid
<input type="checkbox"/>	Partner refused
<input type="checkbox"/>	Did not know where to go
<input type="checkbox"/>	Other (Specify)