

STRICTLY CONFIDENTIAL



Uganda Bureau
of Statistics



THE UGANDA NATIONAL PANEL SURVEY 2009/10

WOMAN QUESTIONNAIRE

[TO BE ANSWERED BY WOMEN AGED 15-49]

SECTION 1A: HOUSEHOLD IDENTIFICATION PARTICULARS										
1. District Name and Code										
2. EA										
3. Household Sample Number										
4. Name and Line Number of respondent										
5. Household code										

THIS SURVEY IS BEING CONDUCTED BY THE UGANDA BUREAU OF STATISTICS
UNDER THE STATISTICS ACT, 1998.

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Section 2: Contraception and Birth Related Issues
2A: CONTRACEPTION

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.				
ENTER CODE 1 IN COLUMN 3 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 3, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY.				
		Which ways or methods have you heard about? FOR METHODS NOT MENTIONED SPONTANEOUSLY, ASK: Have you ever heard of (METHOD)? Yes=1 No=2 >>NEXT METHOD	Have you ever used (METHOD)? Yes=1 No=2 >>NEXT METHOD	Are you or your partner currently using any method? SPECIFY Yes=1 No=2
(1)	(2)	(3)	(4)	(5)
1	FEMALE STERILIZATION: Women can have an operation to avoid having any more children.			
2	MALE STERILIZATION: Men can have an operation to avoid having any more children.			
3	PILL: Women can take a pill every day to avoid becoming pregnant.			
4	IUD: Women can have a loop or coil placed inside them by a doctor or a nurse.			
5	INJECTABLES: Women can have an injection by a health provider that stops them from becoming pregnant for one or more months.			
6	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			
7	CONDOM: Men can put a rubber sheath on their penis before sexual intercourse.			
8	FEMALE CONDOM: Women can place a sheath in their vagina before sexual intercourse.			
9	LACTATIONAL AMENORRHEA METHOD (LAM) : Women delay the onset of their menstrual periods after childbirth by breast feeding their newborn babies exclusively.			
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.			
11	WITHDRAWAL: Men can be careful and pull out before climax.			
12	MOON BEADS: As a protective measure women use a collection of specially colored beads secured by a strong cord to monitor their cycle so as to avoid pregnancy by not having sexual intercourse on the days of the month she is most likely to get pregnant.			
13	FOAM/JELLY: Women place special foam tablets or jelly in the vagina before sexual intercourse.			
14	EMERGENCY CONTRACEPTION: Women can take pills up to five days after sexual intercourse as a one-time method if unprotected sex has occurred to avoid becoming pregnant.			
15	Have you heard of any other ways or methods that women or men can use to avoid pregnancy? Other, Specify _____			

SECTION 2B: BIRTH HISTORY

FOR ALL CHILDREN EVER BORN		NUMBER	
1	How many children have you borne? (Write number. If none, write "00")		
2	How many are living in this Household? (Write number. If none, write "00")		
3	How many are alive, but living elsewhere? (Write number. If none, write "00")		
4	How many are dead? (Write number. If none, write "00")		
5	RECORD SUM OF Q.2, 3, AND 4.		
6	Probe if answer is not equal to total number of children in Q. 1. ensure that the total number of children ever borne equals the sum of Questions 2,3,and 4		

LAST CHILD BORN IN THE LAST FIVE YEARS (WHETHER LIVING OR DEAD)

7	When did (NAME) deliver her last child? (RECORD DATE OF BIRTH OF LAST BORN CHILD)	<table border="1"> <tr> <td>D</td><td>D</td><td>M</td><td>M</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	D	D	M	M	Y	Y	Y	Y								
D	D	M	M	Y	Y	Y	Y											
8	Where did you give birth to (NAME OF LAST CHILD)? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE. IF UNABLE TO DETERMINE IF A HOSPITAL, HEALTH CENTER, OR CLINIC IS PUBLIC OR PRIVATE MEDICAL, WRITE THE NAME OF THE PLACE. _____	HOME Your Home.....1 TBA's Home.....2 Other Home.....3 PUBLIC SECTOR Govt. Hospital.....4 Govt. Health Center.....5 Govt. Health Post.....6 Other Public.....7 (Specify) _____ PRIVATE MED. SECTOR Private Hospital/Clinic.....8 Other Private Med.....86 (Specify) _____ Other Public.....96 (Specify) _____																
9	Who assisted with the delivery of (NAME OF LAST CHILD)? Anyone else? 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 Medical Assistant/ Clinical Officer.....C Nursing AideD OTHER PERSON Traditional Birth Attendant.....E Relative/FriendF NO ONEX OTHER (SPECIFY).....Y																
10	What is the sex of the last child? (Write code Male = 1, Female = 2)																	
11	Is the last child still alive? (Write code Yes = 1, No = 2)																	
12	If last child is dead, write age at death in completed months (If age is more than 59 months, write 60)																	