

EDITOR: \_\_\_\_\_  
INTERVIEWER: \_\_\_\_\_  
(IDIVWR)

CONFIDENTIAL

HHID : \_\_\_\_\_

INDONESIA FAMILY LIFE SURVEY 2000

BOOK IV

SECTIONS: KW, BR, BA, BF, CH, BX, CX, KL, CP

Respondent is an ever-married woman age 15-49 years

TO BE FILLED OUT BY INTERVIEWER WHO COMPLETED ROSTER AR:

PID \_\_\_\_\_

HOUSEHOLDER \_\_\_\_\_ (NAME) \_\_\_\_\_

PANEL: IS HOUSEHOLDER: (Circle One)  
Panel Respondent (AR01h=1) ..... 1  
New Respondent (AR01h=3) ..... 3

TO BE FILLED OUT BY INTERVIEWER FOR BOOK IV

QUESTIONS FOR RESPONDENT:

AGE. How old are you? ..... years

MARSTAT. What is your marital status? Married .....2  
Separated .....3  
Divorced .....4  
Widow .....5

BIRTHDATE. Date of birth ..... / ..... / .....  
DAY MONTH YEAR

CODES FOR LANGUAGE	
00.	Indonesian
01.	Javanese
02.	Sundanese
03.	Balinese
04.	Batak
05.	Bugis
06.	Chinese
07.	Maduranese
08.	Sasak
09.	Minang
10.	Banjar
11.	Bima
12.	Makassar
13.	Nias
14.	Palembang
15.	Sumbawa
16.	Toraja
17.	Lahat
18.	Other South Sumatra
19.	Betawi
20.	Lampung
96.	NO OTHER
91.	Other _____

# INTERVIEW SESSIONS OF BOOK IV: (NUMVIS)

INTERVIEW	1	2	3
DATE:	/	/	/
	DAY / MONTH	DAY / MONTH	DAY / MONTH
TIME STARTED:	/	/	/
	HOUR/ MINUTE	HOUR/ MINUTE	HOUR/ MINUTE
TIME FINISHED:	/	/	/
	HOUR/ MINUTE	HOUR/ MINUTE	HOUR/ MINUTE

LANGMAIN. Interview was entirely/mostly conducted in what language?  
Other: \_\_\_\_\_

LANGOTHR. Other language used (if any):  
Other: \_\_\_\_\_

RESULT OF INTERVIEW OF BOOK IV	REASON	EDIT_CHK REVIEW BY EDITOR	SUP LOCAL SUPERVISOR MONITORING
1. Completed 2. Partially completed →REASON 3. Not completed →REASON	1. Respondent was not at home/not available 2. Respondent was seriously ill 3. Respondent refused (to be interviewed) 5. Other: _____	1. Entered, no corrections necessary 2. Entered AND corrected 4. Manual edit without CAFÉ 3. Entered, but not corrected, explain: _____	Yes No a. Observed by local supervisor (SUP_OBS) ..... 1 3 b. Edited by local supervisor (SUP_EDIT)..... 1 3

SECTION KW (MARITAL HISTORY)

Now we would like to ask about your marital history.

KW03.	How many times have you been married ?	<input type="text"/> Times
KW02a.	What is the name of your current/latest spouse?	<input type="text"/>
KW02g.	INTERVIEWER VERIFY: 1. IF HUSBAND LIVES IN THE HOUSEHOLD, FILL IN AR00 (LINE # FROM ROSTER) 2. IF HUSBAND DIED/DOES NOT LIVE IN HOUSEHOLD, BUT REGISTERED IN ROSTER, FILL IN AR00. 3. HUSBAND IS NOT REGISTERED IN ROSTER	1. <input type="text"/> 2. <input type="text"/> 3. <input type="text"/>
KW02b.	In the last 4 weeks, have you taken iron pills?	No ..... 3 → KW02e Yes ..... 1
KW02c.	In the last 4 weeks, how many iron pills did you take?	<input type="text"/> ..... 1 DON'T KNOW ..... 8
KW02d.	Where did you get these pills?  CIRCLE ALL THAT APPLY	Posyandu..... A Health Center ..... B Place of work ..... C Midwife ..... D Pharmacy ..... F Private doctor ..... G Hospital..... H Paramedic ..... I Other ..... E
KW02e.	Before you got married did you receive an injection of TT to keep your babies from getting tetanus or convulsions at birth?	Yes ..... 1 No ..... 3
KW02h.	INTERVIEWER CHECK Respondent is panel respondent (AR01h=1)	NO ..... 3 → KW12a YES ..... 1
KW02i.	What was the date of your current/most recent marriage?	1. <input type="text"/> / <input type="text"/> Month Year 8. DON'T KNOW
KW02j.	INTERVIEWER CHECK Is the year at KW02i before 1997?	NO ..... 3 → KW08 YES ..... 1

KW12a.	What was the dowry for your current/ most recent marriage?  CIRCLE ALL THAT APPLY	Nothing ..... J → KW13a Sholat (praying) accessory ..... A Money..... B Land ..... C Building/House ..... D Jewelry ..... E Complete set of clothing ..... G Food ..... H Household Items ..... I Religious book..... K Beauty items..... L Livestock ..... M Other, specify ..... F
KW12b.	What was the value of the dowry of your current/most recent marriage at the time of the marriage?	<input type="text"/> , <input type="text"/> , <input type="text"/> Rp. .... 1 <input type="text"/> , <input type="text"/> , <input type="text"/> Other currency ..... 2 DON'T KNOW ..... 8
KW13a.	What did you receive for <i>peningset</i> (a gift and it is not a dowry) at the time of your current/most recent marriage, that was not consumed for the wedding party?  CIRCLE ALL THAT APPLY	Nothing ..... J → KW14 Sholat (praying) accessory ..... A Money..... B Land ..... C Building/House ..... D Jewelry ..... E Complete set of clothing ..... G Food ..... H Household Items ..... I Religious book..... K Beauty items..... L Livestock ..... M Other, specify ..... F
KW13b.	At the time of your current/most recent marriage, what was the value of what you received as <i>peningset</i> (a gift and it is not a dowry), that was not consumed for the wedding party?	<input type="text"/> , <input type="text"/> , <input type="text"/> Rp. .... 1 <input type="text"/> , <input type="text"/> , <input type="text"/> Other currency ..... 2 DON'T KNOW ..... 8
KW14.	What was the value of the assets you owned just prior to the wedding of your current/latest marriage?	<input type="text"/> , <input type="text"/> , <input type="text"/> Rp. .... 1 DON'T KNOW ..... 8

SECTION KW (MARITAL HISTORY)

<b>KW14a.</b>	Right after the wedding ceremony of your current/latest marriage, did you move?	NO, lived at the same place ..... 3 → <b>KW14c</b> YES, moved within the same village/town ..... 2 → <b>KW14c</b> YES, moved to another village/town ..... 1
<b>KW14b.</b>	What is the [...] name at the place you moved at that time?	A. Vill: 1. _____ 3. Same as current residence 8. DON'T KNOW B. Kec: 1. _____ 3. Same as current residence 8. DON'T KNOW C. Kab: 1. _____ 3. Same as current residence 8. DON'T KNOW D. Prov: 1. _____ 3. Same as current residence 8. DON'T KNOW
<b>KW14c.</b>	How long did you reside at your first residence after the wedding?	_____ Weeks ..... 04 Months ..... 05 Years ..... 06 Still live there ..... 96 DON'T KNOW ..... 98
<b>KW14d.</b>	At the time you married your current/latest husband, did your husband change residence?	Yes ..... 1 No ..... 3
<b>KW14e.</b>	Did you and your current/latest husband start to live together right after the wedding?	Yes ..... 1 → <b>KW14g</b> No ..... 3

<b>KW14f.</b>	How long after the wedding took place did you start to live together with your husband?	_____ Not yet living together ..... 96 → <b>KW04</b> Weeks ..... 04 Months ..... 05 Years ..... 06 DON'T KNOW ..... 98
<b>KW14g.</b>	At the time you lived together with your current/latest husband for the first time, who else lived in the house?  <b>CIRCLE ALL THAT APPLY.</b>  <b>IN THIS CASE THE WEDDING LOCATION IS NOT REGARDED AS A JOINT RESIDENCE (REFER TO ANSWER KW14e = 1 (YES)) AND RESIDENCE REGISTERED IN KW14f.</b>	NOBODY ELSE ..... A OWN PARENTS ..... B PARENTS-IN-LAW ..... C BIOLOGICAL BROTHER ..... D BIOLOGICAL SISTER ..... E BROTHER-IN-LAW ..... F SISTER-IN-LAW ..... G OTHER FAMILY MEMBERS ..... H NOT FAMILY-RELATED ..... I
<b>KW04.</b>	Who chose your husband (from your first marriage) ?	Parents ..... 1 Self ..... 3 Family ..... 4 Other, specify: ..... 5
<b>KW08.</b>	Please mention the names of all your husbands, (starting with whom you are married now or the latest marriage, then the previous marriage and so forth).	→ <b>KW09</b>

SECTION KW (MARITAL HISTORY)

FILL OUT NAMES AND DATES STARTING WITH CURRENT/LATEST MARRIAGE

KWN: NUMBER OF MARRIAGE .....	Latest / Current	Second Latest	Third Latest	Fourth Latest	Fifth Latest	Sixth Latest
KW09. Name of husband: .....	_____	_____	_____	_____	_____	_____
KW10. What (month/year) did you get married? IF ABLE TO ANSWER →KW16	1. ____ / ____ Month Year → KW16 8. DON'T KNOW	1. ____ / ____ Month Year → KW16 8. DON'T KNOW	1. ____ / ____ Month Year → KW16 8. DON'T KNOW	1. ____ / ____ Month Year → KW16 8. DON'T KNOW	1. ____ / ____ Month Year → KW16 8. DON'T KNOW	1. ____ / ____ Month Year → KW16 8. DON'T KNOW
KW11. How old were you when your [...] marriage started?	____ Years	____ Years	____ Years	____ Years	____ Years	____ Years
KW16. What is the status of the marriage?  2. Still married ..... 3. Separated ..... 4. Divorced ..... 5. Widow/widower .....	2 → KW20 3 4 5	2 → KW20 3 4 5	2 → KW20 3 4 5	2 → KW20 3 4 5	2 → KW20 3 4 5	2 → KW20 3 4 5
KW18. When (month/year) did the marriage end/separation begin?	1. ____ / ____ Month Year → KW20 8. DON'T KNOW	1. ____ / ____ Month Year → KW20 8. DON'T KNOW	1. ____ / ____ Month Year → KW20 8. DON'T KNOW	1. ____ / ____ Month Year → KW20 8. DON'T KNOW	1. ____ / ____ Month Year → KW20 8. DON'T KNOW	1. ____ / ____ Month Year → KW20 8. DON'T KNOW
KW19. How old were you when the [...] marriage ended/separation began?	____ Years	____ Years	____ Years	____ Years	____ Years	____ Years
KW20. What was the highest education level attended by your husband/wife of the [...] marriage?						
01. Unschooled .....	01. ....	01. ....	01. ....	01. ....	01. ....	01. ....
02. Elementary School .....	02. ....	02. ....	02. ....	02. ....	02. ....	02. ....
03. Junior High General.....	03. ....	03. ....	03. ....	03. ....	03. ....	03. ....
04. Junior High Vocational .....	04. ....	04. ....	04. ....	04. ....	04. ....	04. ....
05. Senior High General .....	05. ....	05. ....	05. ....	05. ....	05. ....	05. ....
06. Senior High Vocational .....	06. ....	06. ....	06. ....	06. ....	06. ....	06. ....
60. Academy (D1, D2, D3) .....	60. ....	60. ....	60. ....	60. ....	60. ....	60. ....
61. University (Bachelor) .....	61. ....	61. ....	61. ....	61. ....	61. ....	61. ....
62. University (Masters).....	62. ....	62. ....	62. ....	62. ....	62. ....	62. ....
63. University (PhD) .....	63. ....	63. ....	63. ....	63. ....	63. ....	63. ....
09. University (BA, MA, PHD).....	09. ....	09. ....	09. ....	09. ....	09. ....	09. ....
11. Adult Education A .....	11. ....	11. ....	11. ....	11. ....	11. ....	11. ....
12. Adult Education B .....	12. ....	12. ....	12. ....	12. ....	12. ....	12. ....
13. Open University .....	13. ....	13. ....	13. ....	13. ....	13. ....	13. ....
14. Islamic School (Pesantran).....	14. ....	14. ....	14. ....	14. ....	14. ....	14. ....
17. School for the Disabled .....	17. ....	17. ....	17. ....	17. ....	17. ....	17. ....
70. Madrasah, General.....	70. ....	70. ....	70. ....	70. ....	70. ....	70. ....
72. Islamic Elementary School (Madrasah Ibtidaiyah) .....	72. ....	72. ....	72. ....	72. ....	72. ....	72. ....
73. Islamic Junior/High School (Madrasah Tsanawiyah) .....	73. ....	73. ....	73. ....	73. ....	73. ....	73. ....
74. Madrasah Senior High School.....	74. ....	74. ....	74. ....	74. ....	74. ....	74. ....
90. Kindergarten .....	90. ....	90. ....	90. ....	90. ....	90. ....	90. ....
98. Don't Know .....	98. ....	98. ....	98. ....	98. ....	98. ....	98. ....
10. Other, Specify .....	10. ....	10. ....	10. ....	10. ....	10. ....	10. ....

SECTION KW (MARITAL HISTORY)

KWN: NUMBER OF MARRIAGE .....			Latest / Current	Second Latest	Third Latest	Fourth Latest	Fifth Latest	Sixth Latest
KW21.	What was the highest grade completed by your husband/wife of the [...] marriage?		00	00	00	00	00	00
			01	01	01	01	01	01
	00. Didn't complete 1 <sup>st</sup> grade at that level		02	02	02	02	02	02
			03	03	03	03	03	03
	01. 1	04. 4	07. Graduated	04 07 Graduated	04 07 Graduated	04 07 Graduated	04 07 Graduated	04 07 Graduated
	02. 2	05. 5	96. Not answered	05 96 Not answered	05 96 Not answered	05 96 Not answered	05 96 Not answered	05 96 Not answered
	03. 3	06. 6	98. DON'T KNOW	06 98 DON'T KNOW	06 98 DON'T KNOW	06 98 DON'T KNOW	06 98 DON'T KNOW	06 98 DON'T KNOW
KW22x.	INTERVIEWER CHECK: IS RESPONDENT: 3. NEW →KW22b 1. PANEL		3. →KW22b 1.	3. →KW22b 1.	3. →KW22b 1.	3. →KW22b 1.	3. →KW22b 1.	3. →KW22b 1.
KW22a.	INTERVIEWER'S NOTE: CHECK KW10 FOR PANEL: 3. NO OTHER MARRIAGE ..... 2. MARRIAGE BEGAN BEFORE 1997 ..... 1. MARRIAGE BEGAN AFTER 1996 .....		3.→KW23a 2.→KW23a 1.→KW09 COLUMN 2	3.→KW23a 2.→KW23a 1.→KW09 COLUMN 3	3.→KW23a 2.→KW23a 1.→KW09 COLUMN 4	3.→KW23a 2.→KW23a 1.→KW09 COLUMN 5	3.→KW23a 2.→KW23a 1.→KW09 COLUMN 6	3.→KW23a 2.→KW23a 1.→SUPPLEMENT KW
KW22b.	INTERVIEWER'S NOTE: CHECK NUMBER OF MARRIAGES FOR NEW: 3. NO OTHER MARRIAGE ..... 1. ANOTHER MARRIAGE.....		3.→KW23a 1.→KW09 COLUMN 2	3.→KW23a 1.→KW09 COLUMN 3	3.→KW23a 1.→KW09 COLUMN 4	3.→KW23a 1.→KW09 COLUMN 5	3.→KW23a 1.→KW09 COLUMN 6	3.→KW23a 1.→SUPPLEMENT KW

KW23a.	If you could choose exactly the number of children to have in your whole life, how many would that be?	<div>Children</div> <div>Up to God ..... 95</div>
KW23b.	How old were you on your first menstruation?	<div>Years</div> <div>Never menstruated..... 96 →KW24</div>
KW23c.	INTERVIEWER'S NOTE:	RESPONDENT'S AGE <35..... 1 →KW24 RESPONDENT'S AGE >=35..... 3
KW23d.	Do you now still have menstruation?	Yes ..... 1 → KW24 No ..... 3
KW23e.	How old were you when you stopped having menstruation?	<div>Years → SECTION BR</div>

KW24.	Are you and your Husband physically able to conceive a child (again)?	No..... 3 Yes ..... 1
KW25.	Do you personally wish to have another child (besides the children you already have)?	No..... 3→SECTION BR Yes ..... 1
KW26.	How many (more) children do you wish to have?	<div>Children</div> <div>Up to God ..... 95</div>
KW27.	Among the children that you (still) wish to have, how many sons and daughters do you wish to have?	<div>Sons</div> <div>Daughters</div> <div>Up to God ..... 95</div>

SECTION BR (PREGNANCY SUMMARY)

Now I would like to ask you about all of your pregnancies.

BR00x. INTERVIEWER CHECK:	NEW RESPONDENT ..... 3 → BR01 PANEL RESPONDENT ..... 1
BR00a. INSTRUCTION FOR INTERVIEW:	HAS CHILD ROSTER AND A CHILD LISTED AT CH00a..... 1 → BA00a HAS CHILD ROSTER AND NO CHILD LISTED AT CH00a..... 2 → BR001 HAS NO CHILD ROSTER AND HAS NO CHILD LISTED AT CH00a ..... 3 → BR001 HAS NO CHILD ROSTER BUT DOES HAVE A CHILD LISTED AT CH00a ..... 4 → BA00a
BR01. Now I would like to ask you about all children that you have so far. Have you ever given birth?	No.....3 → BR08 Yes ..... 1
BR02. Do you have biological sons or daughters who are now living with you?	No.....3 → BR05 Yes ..... 1
BR03. How many biological sons are now living with you?	<div>    </div> <div>    </div> <div>Males</div>
BR04. How many biological daughters are now living with you?	<div>    </div> <div>    </div> <div>Females</div>
USE LIST OF HOUSEHOLDERS TO VERIFY NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN WHO LIVE IN THIS HOUSEHOLD. IF THE TOTAL OF BR03 + BR04 AND THE NUMBER OF RESPONDENT'S BIOLOGICAL CHILDREN IN LIST OF HOUSEHOLDERS DO NOT MATCH, DO SOME PROBING TO CONFIRM THE NUMBER. REPEAT THE QUESTION BY MENTIONING EACH BIOLOGICAL CHILD'S NAME FROM LIST OF HOUSEHOLDERS (AR01).	
BR05. Do you have biological sons or daughters, who are still alive, but do not live with you?	No..... 3 → BR08 Yes ..... 1
BR06. How many biological sons are still alive, but do not live with you?	<div>    </div> <div>    </div> <div>Males</div>
BR07. How many biological daughters are still alive, but do not live with you?	<div>    </div> <div>    </div> <div>Females</div>
BR08. Have you ever given live birth to a son or daughter, even one who lived only for a short a while?	No..... 3 → BR11 Yes ..... 1

BR09. How many sons were born alive but passed away later?	<div>    </div> <div>    </div> <div>Males</div>
BR10. How many daughters were born alive but passed away later?	<div>    </div> <div>    </div> <div>Females</div>
BR11. Have you ever had a pregnancy that resulted in a stillbirth?	No ..... 3 → BR13 Yes..... 1
BR12. How many stillbirths have you had?	<div>    </div> <div>    </div>
BR13. (Besides that) have you had any miscarriages?	No ..... 3 → BR15 Yes..... 1
BR14. How many miscarriages have you had?	<div>    </div> <div>    </div>
BR15. INTERVIEWER GUIDELINE:  ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE: To confirm your answers, you have had <div>    </div> livebirths, is it correct ?	<div>    </div> <div>    </div> <div>No ..... 3 → REVISE BR01-BR10</div> <div>Yes..... 1</div>
BR16. INTERVIEWER GUIDELINE:  ADD THE NUMBERS (BR12 AND BR14) AND ENTER AMOUNT HERE: Again, to confirm your answers, you have had <div>    </div> stillbirths and miscarriages, is it correct?	<div>    </div> <div>    </div> <div>No ..... 3 → REVISE BR12 and BR14</div> <div>Yes..... 1</div>
BR16a. INTERVIEWER CHECK BR00a.	HAVE ROSTER ..... 2 → BA00a NO ROSTER ..... 3 → CH00

CHILD ROSTER

BA00a. INTERVIEWER CHECK (Choose One)	
RESPONDENT HAS A CHILD ROSTER FOR BOOK IV ..... 1 ↓ ↓ ↓ INSERT PREPRINTED CHILD ROSTER FOR BOOK IV	RESPONDENT HAS NO PREPRINTED CHILD ROSTER FOR BOOK IV / NEW RESPONDENT ..... 3 ↓ ↓ ↓ CH00

SECTION BA: (NON-CORESIDENT CHILD ROSTER)

BAAR00	BA63a	BA63b		BA64	BA64a	BA64b		BA64c	BA65	BA65a		BA66	BA67	BA68		BA69	BA70		
NO. OF HHM		NAME		Sex	Age in '97	Birth Date Mo/Yr		In HH in '97?	Is [...] alive?	Death Date Month/Year		Current Age/Age when died Yrs	Marital Status	Highest education level attended by non-HHM	Highest grade completed by non-HHM	Where does [...] live now/before died?			
<div></div>	01			<div></div>		1. <div></div> / <div></div> Month / Year 8. DON'T KNOW			1→BA66 3 8→BA66	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> _____	<div></div> _____	00↓ <div></div> _____			
<div></div>	02			<div></div>		1. <div></div> / <div></div> Month / Year 8. DON'T KNOW			1→BA66 3 8→BA66	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> _____	<div></div> _____	00↓ <div></div> _____			
<div></div>	03			<div></div>		1. <div></div> / <div></div> Month / Year 8. DON'T KNOW			1→BA66 3 8→BA66	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> _____	<div></div> _____	00↓ <div></div> _____			
<div></div>	04			<div></div>		1. <div></div> / <div></div> Month / Year 8. DON'T KNOW			1→BA66 3 8→BA66	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> _____	<div></div> _____	00↓ <div></div> _____			
<div></div>	05			<div></div>		1. <div></div> / <div></div> Month / Year 8. DON'T KNOW			1→BA66 3 8→BA66	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> _____	<div></div> _____	00↓ <div></div> _____			
AR00 97. Not registered at the roster		BA64 1. Male 3. Female		BA65 1. Yes 3. No 8. DON'T KNOW		BA67 1. Unmarried 2. Married 3. Separated/estranged 4. Divorced 5. Widow/widower 8. DON'T KNOW		BA68 01. No school/Not yet in School 02. Elementary 03. Junior High - General 04. Junior High - Vocational 05. Senior High - General 06. Senior High - Vocational 60. College, D1, D2, D3 61. University (Bachelor) 62. University (Master) 63. University (PhD) 09. University 10. Other, specify _____ 11. Adult Education A 12. Adult Education B 13. Open University 14. Islamic School ( <i>Pesantren</i> ) 17. School for the Disabled 70. Madrasah 72. Islamic Elementary School ( <i>Madrasah Ibtidaiyah</i> ) 73. Islamic Junior/High School ( <i>Madrasah Tsanawiyah</i> ) 74. Madrasah Aliyah 90. Kindergarten 98. DON'T KNOW										BA69 00. Did not complete 1st grade at this level 01. 1 02. 2 03. 3 04. 4 05. 5 06. 6 07. Graduated 96. No school 98. DON'T KNOW	
BA70 00. In this household 01. In the same village 02. In the same subdistrict 03. In the same district 04. In the same province 10. Sumatra 11. Aceh 12. North Sumatra 13. West Sumatra 14. Riau 15. Jambi 16. South Sumatra 17. Bengkulu 18. Lampung 31. Jakarta 32. West Java 33. Central Java 34. D.I. Yogyakarta 35. East Java 51. Bali 52. West Nusa Tenggara 53. East Nusa Tenggara 54. East Timor 60. Kalimantan 61. West Kalimantan 62. Central Kalimantan 63. South Kalimantan 64. East Kalimantan 70. Sulawesi 71. North Sulawesi 72. Central Sulawesi 73. South Sulawesi 74. South East Sulawesi 81. Maluku 82. Irian Jaya 85. Malaysia 86. Singapore 87. Argentina 88. Yemen 89. Taiwan 90. USA 91. Saudi Arabia 92. Australia 93. Holland 94. Brunei 95. Hong Kong 96. Japan 97. South Korea 95. Other _____ 98. DON'T KNOW																			



SECTION BA: (NON-CORESIDENT CHILD ROSTER)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

(BA63a)	(BA63b)	BA80	BA81	BA82	BA84
	(NAME)	What is/was [ ]'s primary activity now/before his/her death?	What is/was [ ]'s work status now/before his/her death?	What is/was [ ]'s type of work now/before his/her death?	How often do/did you meet with [ ] during the past year now/before his/her death?
		02, 03, 04, 05, 06, 07, 98 →BA84 01 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10 _____	1 2 3 4 5
		02, 03, 04, 05, 06, 07, 98 →BA84 01 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10 _____	1 2 3 4 5
		02, 03, 04, 05, 06, 07, 98 →BA84 01 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10 _____	1 2 3 4 5
		02, 03, 04, 05, 06, 07, 98 →BA84 01 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10 _____	1 2 3 4 5
		02, 03, 04, 05, 06, 07, 98 →BA84 01 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10 _____	1 2 3 4 5
		02, 03, 04, 05, 06, 07, 98 →BA84 01 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10 _____	1 2 3 4 5
		BA80 01. Working/trying to get work/helping to earn income 02. Job searching 03. Attending school 04. Housekeeping 05. Retired 06. Stay at home 07. Sick/Disabled 98. DON'T KNOW 08. Other, specify: _____	BA81 01. Self-employed 02. Self-employed assisted other family members/temporary employees 03. Self-employed with permanent employees 04. Government worker/employee 05. Private worker/employee 06. Unpaid family worker 98. DON'T KNOW	BA82 01. Professional or technical worker 02. Management or administrative worker 03. Clerical personnel and the like 04. Sales personnel 05. Service personnel 06. Farm, forestry, game hunting, fishery worker 07. Production Line Worker 08. Transportation vehicle operation 09. Blue collar worker 98. DON'T KNOW 10. Other, specify _____	BA84 1. Never 2. At least once a year 3. At least once a month 4. At least once a week 5. Everyday

SECTION BA (NON-CORESIDENT CHILD ROSTER)

(Note: Interviewers asked questions BA64-BA90 sequentially for one child before moving down a row to the next child listed in BA63b).

(BA63a)	(BA63b)	BA87a	BA88	BA89a	BA90
	(NAME)	In the past 12 months, did you provide assistance to [...] in the form of money, goods, or services?	What type of assistance did you provide and what is the value?	In the past 12 months, did you receive assistance from [...] in the form of money, goods, or services?	What type of assistance did you receive and what is the value?
		3. No→BA89a 7. UNWILLING TO ANSWER→BA89a 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____	3. No→ NEXT LINE/SECTION TF 7. UNWILLING TO ANSWER → NEXT LINE/SECTION TF 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____
		3. No→BA89a 7. UNWILLING TO ANSWER→BA89a 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____	3. No→ NEXT LINE/SECTION TF 7. UNWILLING TO ANSWER → NEXT LINE/SECTION TF 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____
		3. No→BA89a 7. UNWILLING TO ANSWER→BA89a 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____	3. No→ NEXT LINE/SECTION TF 7. UNWILLING TO ANSWER → NEXT LINE/SECTION TF 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____
		3. No→BA89a 7. UNWILLING TO ANSWER→BA89a 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____	3. No→ NEXT LINE/SECTION TF 7. UNWILLING TO ANSWER → NEXT LINE/SECTION TF 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____
		3. No→BA89a 7. UNWILLING TO ANSWER→BA89a 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____	3. No→ NEXT LINE/SECTION TF 7. UNWILLING TO ANSWER → NEXT LINE/SECTION TF 1. Yes	A. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. D. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. E. <input type="text"/> 03. days 05. months F. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. _____

BA88 & BA90

A. Money (loans, tuition, health care cost)

D. Food stuff or other goods

E. Chores, child care

F. Other\_\_\_\_\_

SECTION BF (BREASTFEEDING UPDATE)

BF00. INTERVIEWER CHECK		
<div>PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER</div> <div>↓ ↓ 1→ BF01</div>	<div>PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER</div> <div>↓ ↓ 2→ CH00</div>	<div>NEW RESPONDENT</div> <div>↓ ↓ 3→ CH00</div>

BF01.	Name of youngest child (from CH00a).	_____
BF02.	Age of youngest child.	____ Years
BF03	INTERVIEWER CHECK: IS CHILD GREATER THAN 8 YEARS?	Yes .....1→CH00 No .....3
BF04.	Did you ever breastfeed [...] even for a short period?	No .....3→CH00 Yes .....1
BF05.	How old was [...] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	____  03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE EVER FED 96. NOT YET FED
BF06.	What age was [...] when he/she was regularly (on a daily basis) fed other foods/beverages besides breast milk? ENTER "96" IF NOT FED REGULARLY YET	____  03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE FED REGULARLY 96. NOT YET FED REGULARLY
BF07.	For how many months did you breastfeed [...]?	____  96. STILL BREASTFEEDING→CH00 05. MONTHS 88. DIED WHILE BREASTFEEDING

BF08.	Why did you stop breastfeeding [...]?	
CIRCLE ALL THAT APPLY		
		A. MOTHER SICK/WEAK
		B. SORE NIPPLES
		C. WORK
		D. INCONVENIENCE
		E. TAKE CONTRACEPTIVE PILLS
		F. WANT TO GET PREGNANT
		G. WAS PREGNANT AGAIN
		H. INSUFFICIENT BREAST MILK
		I. CHILD'S DEATH
		J. CHILD'S SICKNESS
		K. CHILD IN INCUBATOR
		L. CHILD DID NOT DEVELOP
		M. CHILD DID NOT WANT
		N. CHILD LIVED SEPARATELY
		O. DR/NURSE'S RECOMMENDATIONS
		P. HUSBAND'S OBJECTIONS
		Q. CHILD'S INABILITY TO SUCK
		R. CHILD WAS BIG ENOUGH
		S. OTHER, SPECIFY _____

SECTION CH (PREGNANCY HISTORY)

CH00. INTERVIEWER CHECK		
<div>PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER</div> <div>1 ↓ ↓ CH01a.</div>	<div>PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER</div> <div>2 ↓ ↓ CH01b</div>	<div>NEW RESPONDENT</div> <div>3 ↓ ↓ CH01b</div>

PANEL RESPONDENT WITH CHILD AT CH00a	
CH01a. INSTRUCTION: FIND CH00a. ON PRE-PRINTED CHILDROSTER NAME OF YOUNGEST CHILD: _____	
a. Since the birth of [...] (NAME OF CHILD IN CH00a), have you been pregnant again?	No ..... 3 → CH42 Yes ..... 1
b. How many times have you been pregnant (including live births, still births, and abortions) since the birth of [...] (NAME OF YOUNGEST CHILD) (NOT INCLUDING THIS PREGNANCY)	____ IF = 0 → c IF > 0 ↓
d. After the birth of [YOUNGEST CHILD] how many live births do you have?	____
e. After the birth of [YOUNGEST CHILD] how many still births/miscarriages did you have?	____
c. Are you currently pregnant?	____ Yes..... 1 → (ENTER “1”) No..... 3 → (ENTER “0”)
CH02a. TOTAL OF PREGNANCIES (c + d + e)	____ IF > 0 → CH03 IF = 0 → CH42

NEW RESPONDENT OR PANEL RESPONDENT WITH NO CHILD AT CH00a		
CH01b.	INSTRUCTION: TRANSFER INFORMATION FROM SECTION BR: a. NUMBER OF LIVE BIRTHS (BR15) AND b. NUMBER OF STILL BIRTHS AND MISCARRIAGES (BR16)	
	a. NUMBER OF LIVE BIRTHS (BR15)	____
	b. NUMBER OF STILL BIRTHS AND MISCARRIAGES (BR16)	____
	c. Are you currently pregnant?	____ Yes ..... 1 → (ENTER “1”) No..... 3 → (ENTER “0”)
CH02b.	TOTAL OF PREGNANCIES (a+b+c)	____ IF > 0 → CH03 IF = 0 → CH42

SECTION CH (PREGNANCY HISTORY)

LIST ALL PREGNANCIES. FILL OUT ACCORDING TO EACH PREGNANCY'S OUTCOME. COMPLETE ALL COLUMNS IN CH05-CH17 BEFORE MOVING TO THE FIRST PREGNANCY AND CONTINUING.

CH03. TOTAL OF COLUMNS TO BE FILLED OUT FROM CH02a/CH02b :				
--	--	--	--	--

CH05. Chronological order of pregnancy's outcome	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
CH06. Classification of pregnancy's outcome	Is pregnant ..... 1 → CH17 Still birth..... 3 → CH09 Miscarriage..... 4 → CH09 Live birth..... 2	Is pregnant..... 1 → CH17 Still birth..... 3 → CH09 Miscarriage..... 4 → CH09 Live birth..... 2	Is pregnant..... 1 → CH17 Still birth..... 3 → CH09 Miscarriage..... 4 → CH09 Live birth..... 2	Is pregnant..... 1 → CH17 Still birth..... 3 → CH09 Miscarriage..... 4 → CH09 Live birth..... 2
CH06a. Did pregnancy end in multiple birth?	Yes ..... 1 No..... 3	Yes ..... 1 No..... 3	Yes ..... 1 No ..... 3	Yes..... 1 No ..... 3
CH07. Name of child:.....	_____	_____	_____	_____
CH08. Is [...] a male or female?	Male ..... 1 Female ..... 3	Male..... 1 Female ..... 3	Male..... 1 Female..... 3	Male..... 1 Female..... 3
CH09. What date was [...] born/you had a miscarriage? (DAY/MON/YR)	1.   /   /   →CH17 DAY / MONTH / YEAR 8. DON'T KNOW	1.   /   /   →CH17 DAY / MONTH / YEAR 8. DON'T KNOW	1.   /   /   →CH17 DAY / MONTH / YEAR 8. DON'T KNOW	1.   /   /   →CH17 DAY / MONTH / YEAR 8. DON'T KNOW
CH10a. How old were you when [...] was born/you had a miscarriage?	_____ Years	_____ Years	_____ Years	_____ Years
CH10b. USE AGE TO ESTIMATE CHILD'S YEAR OF BIRTH. (BIRTH YEAR OF MOTHER PLUS AGE AT CHILD'S BIRTH)	Year	Year	Year	Year
CH17. How far was/is the pregnancy when [...] was born/you had the miscarriage/now?	_____ Month .....05 Weeks .....04	_____ Month .....05 Weeks .....04	_____ Month..... 05 Weeks..... 04	_____ Month..... 05 Weeks..... 04

CH11. CHECK THE NUMBER OF COLUMNS FILLED OUT AGAINST CH03.	INCONSISTENT ..... 3 → CHECK AGAIN, UNTIL THE NUMBER OF COLUMNS = CH03 CONSISTENT ..... 1
--	--

SECTION CH (PREGNANCY HISTORY)

CH12. INTERVIEWER CHECK: CH09/CH10B 3. PREGNANCY ENDED AFTER 1994 1. PREGNANCY ENDED BEFORE 1995	3 ➔ CH14 1	3 ➔ CH14 1	3 ➔ CH14 1	3 ➔ CH14 1
CH13. INTERVIEWER'S NOTE: 3. CH06 = 1, 3, 4 1. CH06 = 2 (LIVE BIRTH)	3 ➔ CH12 KOLOM 2 /CH42 1 ➔ CH25	3 ➔ CH12 KOLOM 2 /CH42 1 ➔ CH25	3 ➔ CH12 KOLOM 2 /CH42 1 ➔ CH25	3 ➔ CH12 KOLOM 2 /CH42 1 ➔ CH25
CH14. During the pregnancy have/did you ever have a pregnancy check-up?	No ..... 3 ➔ CH18 Yes ..... 1	No ..... 3 ➔ CH18 Yes ..... 1	No ..... 3 ➔ CH18 Yes ..... 1	No ..... 3 ➔ CH18 Yes..... 1
CH15. Where do/did you go for pregnancy check-ups?  (CIRCLE ALL THAT APPLY)  A. Public hospital ..... B. Private hospital ..... C. Community health center (Puskesmas)..... D. Village Delivery Post (POLINDES) ..... E. Clinic/office of physician ..... F. Clinic/office of midwife ..... G. Office of traditional midwife ..... I. Posyandu ..... H. Other, specify _____	A B C D E F G I H _____	A B C D E F G I H _____	A B C D E F G I H _____	A B C D E F G I H _____
CH15a. What is the name and location of the provider you visited?  (IF MORE THAN 1, ASK ABOUT PROVIDER VISITED MOST FREQUENTLY.)  3. Same as residence 8. DON'T KNOW	<div>☐ (CODE CH15)</div> <div>Name 8. DON'T KNOW 1. _____</div> <div>Address 8. DON'T KNOW 1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____ 3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____ 3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____ 3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____ 3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. ☐☐☐☐☐☐☐☐</div>	<div>☐ (CODE CH15)</div> <div>Name 8. DON'T KNOW 1. _____</div> <div>Address 8. DON'T KNOW 1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____ 3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____ 3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____ 3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____ 3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. ☐☐☐☐☐☐☐☐</div>	<div>☐ (CODE CH15)</div> <div>Name 8. DON'T KNOW 1. _____</div> <div>Address 8. DON'T KNOW 1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____ 3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____ 3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____ 3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____ 3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. ☐☐☐☐☐☐☐☐</div>	<div>☐ (CODE CH15)</div> <div>Name 8. DON'T KNOW 1. _____</div> <div>Address 8. DON'T KNOW 1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____ 3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____ 3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____ 3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____ 3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. ☐☐☐☐☐☐☐☐</div>

SECTION CH (PREGNANCY HISTORY)

<div>CH15b.</div> <div>What is the name and location of the provider you visited?</div> <div>(IF MORE THAN 2, ASK ABOUT PROVIDER VISITED MOST FREQUENTLY.)</div> <div>3. Same as residence</div> <div>8. DON'T KNOW</div>	<div><div><div></div></div>(CODE CH15)</div> <div>Name<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Address<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Loc. Note<div></div></div> <div>A. Vill:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>B. Kec:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>C. Kab:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>D. Prov:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>CODE COMFAS. <div><div></div><div></div><div></div><div></div><div></div><div></div></div></div>	<div><div><div></div></div>(CODE CH15)</div> <div>Name<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Address<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Loc. Note<div></div></div> <div>A. Vill:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>B. Kec:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>C. Kab:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>D. Prov:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>CODE COMFAS. <div><div></div><div></div><div></div><div></div><div></div><div></div></div></div>	<div><div><div></div></div>(CODE CH15)</div> <div>Name<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Address<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Loc. Note<div></div></div> <div>A. Vill:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>B. Kec:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>C. Kab:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>D. Prov:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>CODE COMFAS. <div><div></div><div></div><div></div><div></div><div></div><div></div></div></div>	<div><div><div></div></div>(CODE CH15)</div> <div>Name<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Address<div>8. DON'T KNOW</div></div> <div>1.<div></div></div> <div>Loc. Note<div></div></div> <div>A. Vill:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>B. Kec:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>C. Kab:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>D. Prov:<div>1. <div></div></div><div>3. Same<div>8. DON'T KNOW</div></div></div> <div>CODE COMFAS. <div><div></div><div></div><div></div><div></div><div></div><div></div></div></div>
<div>CH16a.</div> <div>During the first 3 months of your pregnancy, how many visits did you make for prenatal care?</div>	<div>1. <div><div></div><div></div></div> Visits</div>	<div>1. <div><div></div><div></div></div> Visits</div>	<div>1. <div><div></div><div></div></div> Visits</div>	<div>1. <div><div></div><div></div></div> Visits</div>
<div>CH16b.</div> <div>During the second 3 months of your pregnancy, months 4 to 6, how many visits did you make for prenatal care?</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 2nd trimester</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 2nd trimester</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 2nd trimester</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 2nd trimester</div>
<div>CH16c.</div> <div>During the third 3 months of your pregnancy, months 7 to 9, how many visits did you make for prenatal care?</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 3rd trimester</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 3rd trimester</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 3rd trimester</div>	<div>1. <div><div></div><div></div></div> Visits</div> <div>6. Not yet in 3rd trimester</div>
<div>CH16d.</div> <div>At any time during your pregnancy, did you receive the following services?</div> <div>a. Weight.....</div> <div>b. Height.....</div> <div>c. Blood pressure.....</div> <div>d. Blood test for hemoglobin.....</div> <div>e. Measure of height of fetus.....</div> <div>f. Listen to fetal heartbeat.....</div> <div>g. Internal Exam.....</div> <div>h. Measurement of hips.....</div>	<div>1. Yes<div>3. No</div><div>8. DON'T KNOW</div></div> <div>a. 1.<div>3.</div><div>8.</div></div> <div>b. 1.<div>3.</div><div>8.</div></div> <div>c. 1.<div>3.</div><div>8.</div></div> <div>d. 1.<div>3.</div><div>8.</div></div> <div>e. 1.<div>3.</div><div>8.</div></div> <div>f. 1.<div>3.</div><div>8.</div></div> <div>g. 1.<div>3.</div><div>8.</div></div> <div>h. 1.<div>3.</div><div>8.</div></div>	<div>1. Yes<div>3. No</div><div>8. DON'T KNOW</div></div> <div>a. 1.<div>3.</div><div>8.</div></div> <div>b. 1.<div>3.</div><div>8.</div></div> <div>c. 1.<div>3.</div><div>8.</div></div> <div>d. 1.<div>3.</div><div>8.</div></div> <div>e. 1.<div>3.</div><div>8.</div></div> <div>f. 1.<div>3.</div><div>8.</div></div> <div>g. 1.<div>3.</div><div>8.</div></div> <div>h. 1.<div>3.</div><div>8.</div></div>	<div>1. Yes<div>3. No</div><div>8. DON'T KNOW</div></div> <div>a. 1.<div>3.</div><div>8.</div></div> <div>b. 1.<div>3.</div><div>8.</div></div> <div>c. 1.<div>3.</div><div>8.</div></div> <div>d. 1.<div>3.</div><div>8.</div></div> <div>e. 1.<div>3.</div><div>8.</div></div> <div>f. 1.<div>3.</div><div>8.</div></div> <div>g. 1.<div>3.</div><div>8.</div></div> <div>h. 1.<div>3.</div><div>8.</div></div>	<div>1. Yes<div>3. No</div><div>8. DON'T KNOW</div></div> <div>a. 1.<div>3.</div><div>8.</div></div> <div>b. 1.<div>3.</div><div>8.</div></div> <div>c. 1.<div>3.</div><div>8.</div></div> <div>d. 1.<div>3.</div><div>8.</div></div> <div>e. 1.<div>3.</div><div>8.</div></div> <div>f. 1.<div>3.</div><div>8.</div></div> <div>g. 1.<div>3.</div><div>8.</div></div> <div>h. 1.<div>3.</div><div>8.</div></div>

SECTION CH (PREGNANCY HISTORY)

<b>CH16e.</b> At any time in your pregnancy did you receive an injection of TT to keep the baby from getting tetanus or convulsions at birth?	Yes .....1 No .....3 DON'T KNOW .....8	Yes .....1 No .....3 DON'T KNOW .....8	Yes ..... 1 No ..... 3 DON'T KNOW..... 8	Yes ..... 1 No ..... 3 DON'T KNOW..... 8
<b>CH16f.</b> At any time during your pregnancy did you take iron pills?	No .....3 → <b>CH18</b> Yes .....1 DON'T KNOW .....8	No .....3 → <b>CH18</b> Yes .....1 DON'T KNOW .....8	No ..... 3 → <b>CH18</b> Yes ..... 1 DON'T KNOW..... 8	No ..... 3 → <b>CH18</b> Yes ..... 1 DON'T KNOW..... 8
<b>CH16g.</b> How many iron pills did you take during your pregnancy?	1. <input type="text"/> pills 8. DON'T KNOW	1. <input type="text"/> pills 8. DON'T KNOW	1. <input type="text"/> pills 8. DON'T KNOW	1. <input type="text"/> pills 8. DON'T KNOW
<b>CH18. INTERVIEWER NOTE :</b>  1. <b>CH06 = 1</b> ..... 3. <b>CH06 = 2 OR 3</b> ..... 2. <b>CH06 = 4</b> .....	1. → <b>CH12 COLOMN 2 / CH42</b> 3. → <b>CH18a</b> 2.	1. → <b>CH12 COLOMN 3 / CH42</b> 3. → <b>CH18a</b> 2.	1. → <b>CH12 COLOMN 4 / CH42</b> 3. → <b>CH18a</b> 2.	1. → <b>CH12 SUPPLEMENT / CH42</b> 3. → <b>CH18a</b> 2.
<b>CH18aa.</b> What were the reasons of your miscarriage?	1. Accident, fell, wrong drug 2. Aborted as doctor's recommended 3. Unwanted pregnancy 4. Sick 5. Other, specify..... 6. Too tired/too much work <b>CH12 COLOMN 2 / CH42</b>	1. Accident, fell, wrong drug 2. Aborted as doctor's recommended 3. Unwanted pregnancy 4. Sick 5. Other, specify..... 6. Too tired/too much work <b>CH12 COLOMN 3 / CH42</b>	1. Accident, fell, wrong drug 2. Aborted as doctor's recommended 3. Unwanted pregnancy 4. Sick 5. Other, specify..... 6. Too tired/too much work <b>CH12 COLOMN 4 / CH42</b>	1. Accident, fell, wrong drug 2. Aborted as doctor's recommended 3. Unwanted pregnancy 4. Sick 5. Other, specify..... 6. Too tired/too much work <b>CH12 SUPPLEMENT / CH42</b>
<b>CH18a.</b> At the time that you gave birth to [...], were you in labor for more than one day and night?	Yes .....1 No .....3 DON'T KNOW .....8	Yes .....1 No .....3 DON'T KNOW .....8	Yes ..... 1 No ..... 3 DON'T KNOW..... 8	Yes ..... 1 No ..... 3 DON'T KNOW..... 8
<b>CH19.</b> Where did you give birth to [...]?  09. Own house..... 10. Family Members House ..... 01. Public hospital ..... 02. Private hospital ..... 03. Delivery Hospital ..... 04. Community health center ..... 05. Village Delivery Post..... 06. Clinic/office of physician ..... 07. Clinic/office of midwife ..... 08. Office/house of trad. midwife .... 11. Other, specify.....	09 → <b>CH20</b> 10 → <b>CH20</b> 01 02 03 04 05 06 07 08 11 .....	09 → <b>CH20</b> 10 → <b>CH20</b> 01 02 03 04 05 06 07 08 11 .....	09 → <b>CH20</b> 10 → <b>CH20</b> 01 02 03 04 05 06 07 08 11 .....	09 → <b>CH20</b> 10 → <b>CH20</b> 01 02 03 04 05 06 07 08 11 .....



SECTION CH (PREGNANCY HISTORY)

<div>CH19a.</div> <div>What is the name and location of the place you delivered [...]?</div> <div>1. Specify</div> <div>3. Same as residence</div> <div>8. DON'T KNOW</div>	<div>Name8. DON'T KNOW</div> <div>1._____</div> <div>Address8. DON'T KNOW</div> <div>1._____</div> <div>Loc. Note_____</div> <div>A. Vill: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>CODE COMFAS. _ _ _ _ _</div>	<div>Name8. DON'T KNOW</div> <div>1._____</div> <div>Address8. DON'T KNOW</div> <div>1._____</div> <div>Loc. Note_____</div> <div>A. Vill: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>CODE COMFAS. _ _ _ _ _</div>	<div>Name8. DON'T KNOW</div> <div>1._____</div> <div>Address8. DON'T KNOW</div> <div>1._____</div> <div>Loc. Note_____</div> <div>A. Vill: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>CODE COMFAS. _ _ _ _ _</div>	<div>Name8. DON'T KNOW</div> <div>1._____</div> <div>Address8. DON'T KNOW</div> <div>1._____</div> <div>Loc. Note_____</div> <div>A. Vill: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same8. DON'T KNOW</div> <div>CODE COMFAS. _ _ _ _ _</div>
<div>CH20.</div> <div>Who provided care during [...]’s birth?</div> <div>(CIRCLE ALL THAT APPLY)</div>	<div>NOBODY ..... G→CH20c</div> <div>Physician ..... A</div> <div>Private midwife ..... B</div> <div>Village midwife ..... C</div> <div>Nurse ..... D</div> <div>Traditional birth attendant E</div> <div>Family ..... H</div> <div>Other _____ F</div>	<div>NOBODY ..... G→CH20c</div> <div>Physician ..... A</div> <div>Private midwife ..... B</div> <div>Village midwife ..... C</div> <div>Nurse ..... D</div> <div>Traditional birth attendant E</div> <div>Family ..... H</div> <div>Other _____ F</div>	<div>NOBODY ..... G→CH20c</div> <div>Physician ..... A</div> <div>Private midwife ..... B</div> <div>Village midwife ..... C</div> <div>Nurse ..... D</div> <div>Traditional birth attendant E</div> <div>Family ..... H</div> <div>Other _____ F</div>	<div>NOBODY ..... G→CH20c</div> <div>Physician ..... A</div> <div>Private midwife ..... B</div> <div>Village midwife ..... C</div> <div>Nurse ..... D</div> <div>Traditional birth attendant E</div> <div>Family ..... H</div> <div>Other _____ F</div>
<div>CH20a.</div> <div>What is the name of the person who provided care?</div> <div>(IF MORE THAN ONE ANSWER CIRCLED, ASK THE NAME OF THE MAIN ATTENDANT)</div>	<div>_ _ letter code, CH20</div> <div>_____</div>	<div>_ _ letter code, CH20</div> <div>_____</div>	<div>_ _ letter code, CH20</div> <div>_____</div>	<div>_ _ letter code, CH20</div> <div>_____</div>
<div>CH20c.</div> <div>What factors led you to choose this delivery site/attendant?</div> <div>(CIRCLE ALL THAT APPLY)</div>	<div>Cheap ..... A</div> <div>Nearby ..... B</div> <div>Feel Safe ..... C</div> <div>More Comfortable ..... D</div> <div>Modern Service ..... E</div> <div>Habit ..... G</div> <div>Family reason ..... H</div> <div>Few choices ..... I</div> <div>Medical reasons (abnormality) ... K</div> <div>Too early delivery ..... L</div> <div>Recommended by doctor/ mid-wife ..... M</div> <div>Other _____ F</div>	<div>Cheap ..... A</div> <div>Nearby ..... B</div> <div>Feel Safe ..... C</div> <div>More Comfortable ..... D</div> <div>Modern Service ..... E</div> <div>Habit ..... G</div> <div>Family reason ..... H</div> <div>Few choices ..... I</div> <div>Medical reasons (abnormality) .. K</div> <div>Too early delivery ..... L</div> <div>Recommended by doctor/ mid-wife ..... M</div> <div>Other _____ F</div>	<div>Cheap ..... A</div> <div>Nearby ..... B</div> <div>Feel Safe ..... C</div> <div>More Comfortable ..... D</div> <div>Modern Service ..... E</div> <div>Habit ..... G</div> <div>Family reason ..... H</div> <div>Few choices ..... I</div> <div>Medical reasons (abnormality) ... K</div> <div>Too early delivery ..... L</div> <div>Recommended by doctor/ mid-wife ..... M</div> <div>Other _____ F</div>	<div>Cheap ..... A</div> <div>Nearby ..... B</div> <div>Feel Safe ..... C</div> <div>More Comfortable ..... D</div> <div>Modern Service ..... E</div> <div>Habit ..... G</div> <div>Family reason ..... H</div> <div>Few choices ..... I</div> <div>Medical reasons (abnormality) .. K</div> <div>Too early delivery ..... L</div> <div>Recommended by doctor/ mid-wife ..... M</div> <div>Other _____ F</div>

SECTION CH (PREGNANCY HISTORY)

CH20g. How much did you spend on care during the delivery?	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW
CH20h. In the first 40 days after the baby was born, did you receive any follow-up care from the person who delivered the baby?	Yes ..... 1 No ..... 3	Yes ..... 1 No ..... 3	Yes ..... 1 No ..... 3	Yes ..... 1 No ..... 3
CH21. INTERVIEWER'S NOTE: 3. CH06 = 3 ..... 1. CH06 = 2 (LIVE BIRTH) .....	3 → CH12 COLUMN 2 /CH42 1	3 → CH12 COLUMN 3 /CH42 1	3 → CH12 COLUMN 4 /CH42 1	3 → CH12 SUPPLEMENT/CH42 1
CH22. In your opinion, compared with other infants, was [...] bigger, smaller or similar in size?	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW ..... 8	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW ..... 8	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW ..... 8	Much bigger ..... 1 Bigger ..... 2 Similar ..... 3 Smaller ..... 4 Much smaller ..... 5 DON'T KNOW ..... 8
CH23. Was [...] weighed right after birth?	No ..... 3 → CH24a Yes ..... 1	No ..... 3 → CH24a Yes ..... 1	No ..... 3 → CH24a Yes ..... 1	No ..... 3 → CH24a Yes ..... 1
CH24. To be exact, how many kilograms was [...]’s birth weight?	<input type="text"/> . <input type="text"/> Kg	<input type="text"/> . <input type="text"/> Kg	<input type="text"/> . <input type="text"/> Kg	<input type="text"/> . <input type="text"/> Kg
CH24a. Did you ever breastfeed [...] even for a short period?	No ..... 3 → CH25 Yes ..... 1	No ..... 3 → CH25 Yes ..... 1	No ..... 3 → CH25 Yes ..... 1	No ..... 3 → CH25 Yes ..... 1
CH24c. How old was [...] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	<input type="text"/> 03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE EVER FED 96. NOT YET FED	<input type="text"/> 03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE EVER FED 96. NOT YET FED	<input type="text"/> 03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE EVER FED 96. NOT YET FED	<input type="text"/> 03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE EVER FED 96. NOT YET FED

SECTION CH (PREGNANCY HISTORY)

<b>CH24d.</b> What age was [...] when he/she was regularly (on a daily basis) fed other foods/beverages besides breast milk?	<div><div></div><div></div><div></div></div> <div>03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE FED REGULARLY 96. NOT YET FED REGULARLY</div>	<div><div></div><div></div><div></div></div> <div>03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE FED REGULARLY 96. NOT YET FED REGULARLY</div>	<div><div></div><div></div><div></div></div> <div>03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE FED REGULARLY 96. NOT YET FED REGULARLY</div>	<div><div></div><div></div><div></div></div> <div>03. DAYS 04. WEEKS 05. MONTHS 88. DIED BEFORE FED REGULARLY 96. NOT YET FED REGULARLY</div>
<b>CH24e.</b> For how many months did you breastfeed [...]?	<div><div></div><div></div><div></div></div> <div>96. STILL BREASTFEEDING→ <b>CH25</b> 05. MONTHS 88. DIED WHILE BREASTFEEDING</div>	<div><div></div><div></div><div></div></div> <div>96. STILL BREASTFEEDING→ <b>CH25</b> 05. MONTHS 88. DIED WHILE BREASTFEEDING</div>	<div><div></div><div></div><div></div></div> <div>96. STILL BREASTFEEDING→ <b>CH25</b> 05. MONTHS 88. DIED WHILE BREASTFEEDING</div>	<div><div></div><div></div><div></div></div> <div>96. STILL BREASTFEEDING→ <b>CH25</b> 05. MONTHS 88. DIED WHILE BREASTFEEDING</div>
<b>CH24f.</b> Why did you stop breastfeeding [...]? <b>CIRCLE ALL THAT APPLY</b> A. Mother sick/weak..... B. Sore nipples ..... C. Work..... D. Inconvenience ..... E. Take contraceptive pills ..... F. Want to get pregnant..... G. Was pregnant again..... H. Insufficient breast milk..... I. Child's death..... J. Child's sickness..... K. Child in incubator..... L. Child did not develop..... M. Child did not want ..... N. Child lived separately ..... O. Dr/nurse's recommendations ..... P. Husband's objections ..... Q. Child's inability to suck ..... R. Child was big enough ..... S. Other, (specify) .....	<div>A B C D E F G H I J K L M N O P Q R</div> <div>S</div>	<div>A B C D E F G H I J K L M N O P Q R</div> <div>S</div>	<div>A B C D E F G H I J K L M N O P Q R</div> <div>S</div>	<div>A B C D E F G H I J K L M N O P Q R</div> <div>S</div>
<b>CH25.</b> Is [...] still alive?	Yes ..... 1 → <b>CH27</b> No ..... 3	Yes ..... 1 → <b>CH27</b> No ..... 3	Yes ..... 1 → <b>CH27</b> No ..... 3	Yes ..... 1 → <b>CH27</b> No ..... 3

SECTION CH (PREGNANCY HISTORY)

CH26. How old was [...] when he/she died?	<div><div></div><div></div><div></div></div> <div>Days .....03 weeks .....04 Months.....05 Years .....06</div>	<div><div></div><div></div><div></div></div> <div>Days .....03 weeks .....04 Months.....05 Years .....06</div>	<div><div></div><div></div><div></div></div> <div>Days .....03 weeks.....04 Months .....05 Years .....06</div>	<div><div></div><div></div><div></div></div> <div>Days .....03 weeks.....04 Months .....05 Years .....06</div>
CH27. INTERVIEWER CHECK: IS [...] LISTED IN THE HH ROSTER?  1. YES, AR00 = <div><div></div><div></div><div></div></div> (PID)..... 2. YES, BUT DIED OR NOT LIVE IN HOUSEHOLD, AR00 ..... 3. NO.....	<div>1 <div><div></div><div></div><div></div></div></div> <div>2 <div><div></div><div></div><div></div></div></div> <div>3</div>	<div>1 <div><div></div><div></div><div></div></div></div> <div>2 <div><div></div><div></div><div></div></div></div> <div>3</div>	<div>1 <div><div></div><div></div><div></div></div></div> <div>2 <div><div></div><div></div><div></div></div></div> <div>3</div>	<div>1 <div><div></div><div></div><div></div></div></div> <div>2 <div><div></div><div></div><div></div></div></div> <div>3</div>
CH27x. INTERVIEWER CHECK CH00:  1. PANEL WITH CHILD ROSTER 3. PANEL WITHOUT CHILD ROSTER OR NEW	<div>1 → CH12 COLOMN 2 / CH42</div> <div>3</div>	<div>1 → CH12 COLOMN 3 / CH42</div> <div>3</div>	<div>1 → CH12 COLOMN 4 / CH42</div> <div>3</div>	<div>1 → CH12 SUPPLEMENT / CH42</div> <div>3</div>
CH27b. INTERVIEWER CHECK CH25 AND CH27:  1. ALIVE, IN HH (CH27=1)..... 3. ALIVE NOT IN HH (CH27=2 OR 3 AND CH25=1) ..... 5. DEAD (CH25=3).....	<div>1 → CH12 COLOMN 2 / CH42</div> <div>3</div> <div>5</div>	<div>1 → CH12 COLOMN 3 / CH42</div> <div>3</div> <div>5</div>	<div>1 → CH12 COLOMN 4 / CH42</div> <div>3</div> <div>5</div>	<div>1 → CH12 SUPPLEMENT / CH42</div> <div>3</div> <div>5</div>
CH28a. Is/was [...] now/at the time [...] died 15 years old or older?	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 COLUMN 3 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 COLUMN 4 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 SUPPLEMENT / CH42</div> <div>Yes ..... 1</div>
CH28b. INTERVIEWER CHECK CH25 STILL ALIVE?	<div>Yes ..... 1 → CH30a</div> <div>No ..... 3</div>	<div>Yes ..... 1 → CH30a</div> <div>No ..... 3</div>	<div>Yes ..... 1 → CH30a</div> <div>No ..... 3</div>	<div>Yes ..... 1 → CH30a</div> <div>No ..... 3</div>
CH29a. Did [...] die within the last 12 months?	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 SUPPLEMENT / CH42</div> <div>Yes ..... 1</div>
CH29b. Was [...] living outside the HH at the time of death?	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 COLUMN 2 / CH42</div> <div>Yes ..... 1</div>	<div>No ..... 3→CH12 SUPPLEMENT / CH42</div> <div>Yes ..... 1</div>
CH30a. Marital status (now/at death):  01. Single..... 02. Married..... 03. Separated ..... 04. Divorced..... 05. Widow/widower ..... 08. DON'T KNOW.....	<div>01 02 03 04 05 08</div>	<div>01 02 03 04 05 08</div>	<div>01 02 03 04 05 08</div>	<div>01 02 03 04 05 08</div>

SECTION CH (PREGNANCY HISTORY)

CH31a.	Highest education level attained by non-householder:				
01.	No school/Not yet in School	01	01	01	01
02.	Elementary	02	02	02	02
03.	Jr. Hi General	03	03	03	03
04.	Jr. Hi Vocational	04	04	04	04
05.	Sr. Hi General	05	05	05	05
06.	Sr. Hi Vocational	06	06	06	06
60.	College, D1, D2, D3	60	60	60	60
61.	University (Bachelors)	61	61	61	61
62.	University (Masters)	62	62	62	62
63.	University (PhD)	63	63	63	63
11.	Adult Education A	11	11	11	11
12.	Adult Education B	12	12	12	12
13.	Open University	13	13	13	13
14.	Islamic School (Pesantren)	14	14	14	14
17.	School for the Disabled	17	17	17	17
70.	Madrasah, General	70	70	70	70
72.	Islamic Elementary School (Madrasah Ibtidaiyah)	72	72	72	72
73.	Islamic Junior/High School (Madrasah Tsanawiyah)	73	73	73	73
74.	Madrasah Senior High School	74	74	74	74
90.	Kindergarten	90	90	90	90
98.	DON'T KNOW	98	98	98	98
10.	Other, specify: _____	10 _____	10 _____	10 _____	10 _____
CH32a.	Highest grade completed by non-householder:				
00.	Did not complete 1st class .....	00	00	00	00
01.	1.....	01	01	01	01
02.	2.....	02	02	02	02
03.	3.....	03	03	03	03
04.	4.....	04	04	04	04
05.	5.....	05	05	05	05
06.	6.....	06	06	06	06
07.	Graduated.....	07	07	07	07
96.	NO SCHOOL .....	96	96	96	96
98.	DON'T KNOW .....	98	98	98	98

SECTION CH (PREGNANCY HISTORY)

CH33a. Where does/did [...] live now/before his/her death?	00 → CH12 COLOMN 2 / CH42 <div></div>	00 → CH12 COLOMN 2 / CH42 <div></div>	00 → CH12 COLOMN 2 / CH42 <div></div>	00 → CH12 SUPPLEMENT / CH42 <div></div>
CH34a. What is/was [...]’s primary activity now/before his/her death? 02. Job searching ..... 03. Attending school ..... 04. Housekeeping ..... 05. Retired ..... 06. Stay at home/unemployed ..... 07. Sick/disabled..... 98. DON’T KNOW ..... 01. Working/trying to get work/ helping to earn income..... 08. Other, specify:.....	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a  01 08 →CH37a	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a  01 08 →CH37a	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a  01 08 →CH37a	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a  01 08 →CH37a
CH35a. What is/was [...]’s work status now/before his/her death? 01. Self-employed ..... 02. Self-employed assisted other family members/temporary employees..... 03. Self-employed with permanent employees..... 04. Government worker/employee .. 05. Private worker/employee..... 06. Unpaid family worker..... 98. DON’T KNOW .....	01  02  03 04 05 06 98	01  02  03 04 05 06 98	01  02  03 04 05 06 98	01  02  03 04 05 06 98

CH33a					
00. In the household	11. Aceh	18. Lampung	52. West Nusa Tenggara	64. East Kalimantan	82. Irian Jaya
01. In the same village	12. North Sumatra	31. Jakarta	53. East Nusa Tenggara	70. Sulawesi	85. Malaysia
02. In the same subdistrict	13. West Sumatra	32. West Java	54. East Timor	71. North Sulawesi	86. Singapore
03. In the same district	14. Riau	33. Central Java	60. Kalimantan	72. Central Sulawesi	91. Saudi Arabia
04. In the same province	15. Jambi	34. Yogyakarta	61. West Kalimantan	73. South Sulawesi	98. DON’T KNOW
10. Sumatra	16. South Sumatra	35. East Java	62. Central Kalimantan	74. Southeast Sulawesi	95. Other, _____
	17. Bengkulu	51. Bali	63. South Kalimantan	81. Maluku	

SECTION CH (PREGNANCY HISTORY)

<b>CH36a.</b> What is/was [...]’s type of work now/before his/her death? 01. Professional or technical worker ..... 02. Management or administrative worker ..... 03. Clerical personnel and the like..... 04. Sales personnel ..... 05. Service personnel ..... 06. Farm, forestry, game hunting, fishery worker..... 07. Production Line Worker ..... 08. Transportation vehicle operation ..... 09. Blue collar worker ..... 10. Other, specify ..... 98. DON’T KNOW	01  02  03  04  05  06  07  08  09  10  98	01  02  03  04  05  06  07  08  09  10  98	01  02  03  04  05  06  07  08  09  10  98	01  02  03  04  05  06  07  08  09  10  98
<b>CH37a.</b> How often do/did you meet with [...] during the past year now/before his/her death? 1. Never ..... 2. At least once a year ..... 3. At least once a month ..... 4. At least once a week..... 5. Everyday.....	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
<b>CH38a.</b> In the past 12 months, did you or your husband ever provide help to [...] in the form of money, goods, or services?	UNWILLING TO ANSWER..... 7→ CH40a No ..... 3→ CH40a Yes ..... 1	UNWILLING TO ANSWER..... 7→ CH40a No ..... 3→ CH40a Yes ..... 1	UNWILLING TO ANSWER..... 7→ CH40a No ..... 3→ CH40a Yes..... 1	UNWILLING TO ANSWER..... 7→ CH40a No ..... 3→ CH40a Yes..... 1

SECTION CH (PREGNANCY HISTORY)

<b>CH39a.</b> What type of help did you provide to [...] in the past 12 months and what is the value?  A. Money, loan, tuition, health care costs  D. Food stuffs or other goods  E. Chores, child care, help when ill    03. Days    05. Months  F. Other, specify: _____	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    ,	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    ,	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    ,	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    ,
<b>CH40a.</b> In the past 12 months, did you or your husband ever receive help from [...] in the form of money, goods, or services?	UNWILLING TO ANSWER .....7→CH12 NEXT / CH42 No.....3→CH12 COLUMN 2 / CH42 Yes.....1	UNWILLING TO ANSWER..... 7→CH12 NEXT / CH42 No..... 3→CH12 COLUMN 3 / CH42 Yes ..... 1	UNWILLING TO ANSWER..... 7→CH12 NEXT / CH42 No ..... 3→CH12 COLUMN 4 / CH42 Yes..... 1	UNWILLING TO ANSWER ..7→CH12 NEXT / CH42 No .....3→CH12 SUPPLEMENT/ CH42 Yes.....1
<b>CH41a.</b> What type of help did you receive from [...] in the past 12 months and what is the value?  A. Money, loan, tuition, health care costs  D. Food stuffs or other goods  E. Chores, child care, help when ill    03. Days    05. Months  F. Other, specify: _____	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    , →CH12 COLUMN 2 / CH42	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    , →CH12 COLUMN 3 / CH42	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    , →CH12 COLUMN 4 / CH42	(CIRCLE ALL THAT APPLY)  Rupiah  A.    ,    ,  D.    ,    ,  E.       03. DY    05. MO  F. _____  ,    , →CH12 SUPPLEMENT / CH42

<b>CH42. INTERVIEWER CHECK:</b>  PANEL RESPONDENT WITH CHILDREN REGISTERED AT CH00a..... 1 → SECTION CX PANEL RESPONDENT WITHOUT CHILDREN REGISTERED AT CH00a ..... 2 NEW HOUSEHOLD ..... 3	
<b>CH42b.</b> Do you have any other adopted children over 15 years old that live outside the household, or that have died within the last 12 months and lived outside the household at the time of death?	No ..... 3 →SECTION CX Yes ..... 1



SECTION BX (NON-CO RESIDENT ADOPTED CHILD ROSTER)

Now I would like to know about all of your adopted children that live outside the household, including adopted children that have died in the last 12 months and lived outside the HH at the time of death.

BXAR00	BX63a	BX63b		BX64	BX64b		BX65	BX65a		BX66	BX67	BX68	BX69	BX70
NO. OF HHM		NAME		Sex	Birth Date Mo/Yr		Is [...] alive?	Death Date Month/Year		Current Age/Age when died Yrs	Marital Status	Highest education level attended by non-HHM	Highest grade completed by non-HHM	Where does [...] live now/before died?
<div></div>	01			<div></div>	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1→BX66 8→BX66 3	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> <div></div>	<div></div> <div></div>	00↓ <div></div> <div></div>
<div></div>	02			<div></div>	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1→BX66 8→BX66 3	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> <div></div>	<div></div> <div></div>	00↓ <div></div> <div></div>
<div></div>	03			<div></div>	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1→BX66 8→BX66 3	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> <div></div>	<div></div> <div></div>	00↓ <div></div> <div></div>
<div></div>	04			<div></div>	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1→BX66 8→BX66 3	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> <div></div>	<div></div> <div></div>	00↓ <div></div> <div></div>
<div></div>	05			<div></div>	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1→BX66 8→BX66 3	1. <div></div> / <div></div> Month / Year 8. DON'T KNOW		1. <div></div> years 8. DK	<div></div>	<div></div> <div></div>	<div></div> <div></div>	00↓ <div></div> <div></div>
BX64		BX65		BX67		BX68						BX69		
1. Male 3. Female		1. Yes 3. No 8. DON'T KNOW		1. Unmarried 2. Married 3. Separated/estranged 4. Divorced 5. Widow/widower 8. DON'T KNOW		01. No school/Not yet in School 02. Elementary 03. Junior High - General 04. Junior High - Vocational 05. Senior High - General 06. Senior High - Vocational 60. College, D1, D2, D3 61. University (Bachelor) 62. University (Master) 63. University (PhD) 09. University 10. Other, specify _____ 11. Adult Education A 12. Adult Education B 13. Open University 14. Islamic School (Pesantren) 17. School for the Disabled 70. Madrasah 72. Islamic Elementary School (Madrasah Ibtidaiyah) 73. Islamic Junior/High School (Madrasah Tsanawiyah) 90. Kindergarten 98. DON'T KNOW						00. Did not complete 1st grade at this level 01. 1 02. 2 03. 3 04. 4 05. 5 06. 6 07. Graduated 96. No school 98. DON'T KNOW		
BX70														
00. In this household 01. In the same village 02. In the same subdistrict 03. In the same district 04. In the same province		10. Sumatra 11. Aceh 12. North Sumatra 13. West Sumatra 14. Riau 15. Jambi 16. South Sumatra 17. Bengkulu 18. Lampung		31. Jakarta 32. West Java 33. Central Java 34. D.I. Yogyakarta 35. East Java 51. Bali 52. West Nusa Tenggara 53. East Nusa Tenggara 54. East Timor		60. Kalimantan 61. West Kalimantan 62. Central Kalimantan 63. South Kalimantan 64. East Kalimantan 70. Sulawesi 71. North Sulawesi 72. Central Sulawesi 73. South Sulawesi		74. South East Sulawesi 81. Maluku 82. Irian Jaya 85. Malaysia 86. Singapore 87. Argentina 88. Yemen 89. Taiwan 90. USA		91. Saudi Arabia 92. Australia 93. Holland 94. Brunei 95. Hong Kong 96. Japan 97. South Korea 95. Other _____ 98. DON'T KNOW				

SECTION BX (NON-CO RESIDENT ADOPTED CHILD ROSTER)

(Note: Interviewers asked questions BX64-BX90 sequentially for one child before moving down a row to the next child listed in BX63b).

	(BX63a)	(BX63b)	BX80	BX81	BX82	BX84
		(NAME)	What is/was [    ]'s primary activity now/before his/her death?	What is/was [    ]'s work status now/before his/her death?	What is/was [    ]'s type of work now/before his/her death?	How often do/did you meet with [    ] during the past year now/before his/her death?
			02, 03, 04, 05, 06, 07, 98 →BX84 01 _____ 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10	1 2 3 4 5
			02, 03, 04, 05, 06, 07, 98 →BX84 01 _____ 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10	1 2 3 4 5
			02, 03, 04, 05, 06, 07, 98 →BX84 01 _____ 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10	1 2 3 4 5
			02, 03, 04, 05, 06, 07, 98 →BX84 01 _____ 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10	1 2 3 4 5
			02, 03, 04, 05, 06, 07, 98 →BX84 01 _____ 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10	1 2 3 4 5
			02, 03, 04, 05, 06, 07, 98 →BX84 01 _____ 08 _____	01 02 03 04 05 06 98	01 02 03 04 05 06 07 08 09 10	1 2 3 4 5
			<b>BX80</b> 01. Working/trying to get work/helping to earn income 02. Job searching 03. Attending school 04. Housekeeping 05. Retired 06. Stay at home 07. Sick/Disabled 08. DON'T KNOW 08. Other, specify: _____	<b>BX81</b> 01. Self-employed 02. Self-employed assisted by other family members/temporary employees 03. Self-employed with permanent employees 04. Government worker/employee 05. Private worker/employee 06. Unpaid family worker 98. DON'T KNOW	<b>BX82</b> 01. Professional or technical worker 02. Management or administrative worker 03. Clerical personnel and the like 04. Sales personnel 05. Service personnel 06. Farm, forestry, game hunting, fishery worker 07. Production Line Worker 08. Transportation vehicle operation 09. Blue collar worker 10. Other _____ 98. DON'T KNOW	<b>BX84</b> 1. Never 2. At least once a year 3. At least once a month 4. At least once a week 5. Everyday

SECTION BX (NON-CO RESIDENT ADOPTED CHILD ROSTER)

(Note: Interviewers asked questions BX64-BX90 sequentially for one child before moving down a row to the next child listed in BX63b).

	(BX63a)	(BX63b)	BX87a	BX88	BX89a	BX90
		(NAME)	In the past 12 months, did you provide assistance to [    ] in the form of money, goods, or services?	What type of assistance did you provide and what is the value?	In the past 12 months, did you receive assistance from [    ] in the form of money, goods, or services?	What type of assistance did you receive and what is the value?
			3. No→BX89a 7. UNWILLING TO ANSWER→BX89a 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____	3. No→ NEXT LINE/SECTION CX 7. UNWILLING TO ANSWER → NEXT LINE/SECTION CX 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____
			3. No→BX89a 7. UNWILLING TO ANSWER→BX89a 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____	3. No→ NEXT LINE/SECTION CX 7. UNWILLING TO ANSWER → NEXT LINE/SECTION CX 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____
			3. No→BX89a 7. UNWILLING TO ANSWER→BX89a 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____	3. No→ NEXT LINE/SECTION CX 7. UNWILLING TO ANSWER → NEXT LINE/SECTION CX 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____
			3. No→BX89a 7. UNWILLING TO ANSWER→BX89a 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____	3. No→ NEXT LINE/SECTION CX 7. UNWILLING TO ANSWER → NEXT LINE/SECTION CX 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____
			3. No→BX89a 7. UNWILLING TO ANSWER→BX89a 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____	3. No→ NEXT LINE/SECTION CX 7. UNWILLING TO ANSWER → NEXT LINE/SECTION CX 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____
			3. No→BX89a 7. UNWILLING TO ANSWER→BX89a 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____	3. No→ NEXT LINE/SECTION CX 7. UNWILLING TO ANSWER → NEXT LINE/SECTION CX 1. Yes	A.   ,   ,    Rp. D.   ,   ,    Rp. E.    03. days 05. months F.   ,   ,    Rp. _____

BX88 & BX90

A. Money (loans, tuition, health care cost)  
D. Food stuff or other goods  
E. Chores, child care  
F. Other\_\_\_\_\_

SECTION CX (CONTRACEPTIVE USE)

Now we would like to ask about methods to postpone or prevent pregnancy.

	CX1TYPE	CX01	CX02	CX02A	CX02B
No.	BIRTH CONTROL DEVICE/METHOD	Have you ever heard about [...] to prevent pregnancy?	Have you/has your husband ever used?	When did you first use this method?	How old were you when you first used this method?
A.	<b>Contraceptive Pill</b> A woman can take contraceptive pills every day	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ↓ 8. DK	<input type="text"/> <input type="text"/> <input type="text"/> Years
B.	<b>IUD/AKDR/Spiral</b> A woman can have an intrauterine device inserted into her uterus by a doctor or midwife	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ↓ 8. DK	<input type="text"/> <input type="text"/> <input type="text"/> Years
C.	<b>Contraceptive Injections</b> A woman can be injected by a doctor or midwife to prevent pregnancy for a few months	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ↓ 8. DK	<input type="text"/> <input type="text"/> <input type="text"/> Years
F.	<b>Contraceptive Tubes/IMPLANT/NORPLANT</b> A woman can have small tubes implanted in her arm to prevent pregnancy	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ↓ 8. DK	<input type="text"/> <input type="text"/> <input type="text"/> Years
G.	<b>Tubal Ligation/Female Sterilization</b> A woman can undergo surgery to prevent pregnancy	3. No ↓ 1. Yes	3. No ↓ 1. Yes		
I.	<b>Abortion</b> A woman can do something or have someone do something to end a pregnancy	3. No ↓ 1. Yes			
E.	<b>Condom</b> A man can wear a condom during intercourse	3. No ↓ 1. Yes	3. No ↓ 1. Yes		
H.	<b>Vasectomy/Male Sterilization</b> A man can undergo surgery to prevent having another child	3. No ↓ 1. Yes CX19	3. No ↓ 1. Yes CX19 CX19		

SECTION CX (CONTRACEPTIVE USE)

<b>CX19.</b> INTERVIEWER CHECK:  BOOK 4 COVER	RESPONDENT NOT MARRIED (COV4=3,4 OR 5)..... 3 ➔SECTION KL  RESPONDENT MARRIED (COV4=2) ..... 1
<b>CX20.</b> Do you/does your husband now use a device/method to postpone or prevent a pregnancy?	No ..... 3 ➔ CX26 Yes ..... 1
<b>CX21.</b> Which birth control device/method do you/does your husband use now?	Rhythm/calendar .....11 ➔KL Coitus interruptus .....12 ➔KL Traditional Herbs .....13 ➔KL Traditional massage .....14 ➔KL Pill .....01 1 Mo. Injection .....02 2 Mo. Injection .....03 3 Mo. Injection .....04 Intravag .....05 Condom.....06 IUD/AKDR/Spiral .....07 Norplant/Implant .....08 Female Sterilization/Tubectomy ....09 Male Sterilization .....10 Other ..... 15 ➔KL
<b>CX21a.</b> When did you (last) receive this method?	1.    / Month       Year 8. DON'T KNOW

<b>CX21b.</b> What facility did you visit?	Public hospital..... 1 Private hospital ..... 2 Puskesmas, Pembantu ..... 3 Private clinic..... 4 Posyandu ..... 5 Birth control post/association ..... 6 Fieldworker (PLKB)..... 7 TKBK/TMK..... 8 Pharmacist/drugstore ..... 9 Private physician..... 10 Nurse/paramedic ..... 11 Midwife..... 12 Traditional midwife ..... 13 Friend/family ..... 14 Birth control safari ..... 15 Village midwife/Village Polyclinic .... 16 Other ..... 17 DON'T KNOW..... 98
<b>CX21c.</b> How much did it cost (including drugs, materials, services and other related costs)?	1.    ,    ,     Rp. 8. DON'T KNOW
<b>CX21d.</b> INTERVIEWER CHECK:  IS CX21=06 OR 10?	1. YES ➔ SECTION KL 3. NO
<b>CX21e.</b> Was your blood pressure measured before the contraception was prescribed?	Yes..... 1 No ..... 3
In your visits to the provider who provides the method you are currently using, has the provider ever:  <b>CX22B.</b> Explained the possibility of side effects due to the use of the birth control device/method being used?  <b>CX22C.</b> Explained what has to be done or where to seek help if side effects occur?  <b>CX22D.</b> Asked about your health history before prescribing contraception?	Ever ..... 1 Never ..... 3 DON'T KNOW..... 8  Ever ..... 1 Never ..... 3 DON'T KNOW..... 8  Ever ..... 1 Never ..... 3 DON'T KNOW..... 8  ➔SECTION KL

SECTION CX (CONTRACEPTIVE USE)

<b>CX26.</b> Why don't you/ your husband currently use any of the birth control devices/methods to prevent pregnancy?  <b>(CIRCLE ALL THAT APPLY)</b>	MENOPAUSE/HYSTERECTOMY .....P➔ <b>SECTION KL</b> IS PREGNANT .....A WANT TO HAVE A CHILD .....B LACK OF KNOWLEDGE .....C HUSBAND DISAPPROVES .....D HIGH COST .....E HEALTH REASONS .....F SIDE EFFECTS .....G ADVICE OF DR/NURSE/MIDWIFE .....H DIFFICULTY IN OBTAINING METHOD.....I RELIGION .....J RESPONDENT DISAPPROVES .....K FAMILY DISAPPROVES .....L DO NOT CARE/ INDIFFERENT.....M INFREQUENT INTERCOURSE .....N DIFFICULTY IN GETTING PREGNANT ....O INCONVENIENT .....Q HUSBAND'S ABSENCE.....R JUST GAVE BIRTH (PRE-MENSTRUAL)..S JUST GAVE BIRTH (NO SEX).....T BREASTFEEDING .....U KIDS GROWN .....W DON'T WANT TO USE.....X OTHER .....V
<b>CX27.</b> Do you/your husband plan to use a birth control device/method to postpone/prevent pregnancy in the future?	No..... 3 ➔ <b>SECTION KL</b> DON'T KNOW ..... 8 ➔ <b>SECTION KL</b> Yes..... 1

<b>CX28.</b> If some day you/your husband plans to use birth control, what method would you prefer?	Pill..... 01 1 Mo. Injection ..... 02 2 Mo. Injection ..... 03 3 Mo. Injection ..... 04 Intravag ..... 05 Condom ..... 06 IUD/AKDR/Spiral ..... 07 Norplant/ Implant ..... 08 Female Sterilization/Tubectomy..... 09 Male Sterilization ..... 10 Rhythm/calendar ..... 11 Coitus interruptus ..... 12 Traditional Herbs ..... 13 Traditional massage..... 14 DON'T KNOW..... 98 Other ..... 15
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SECTION KL: CONTRACEPTIVE CALENDAR

KL00b. INTERVIEWER CHECK:  KW10 OR KW11 FOR DATE OF FIRST MARRIAGE. WAS RESPONDENT MARRIED FOR THE FIRST TIME BEFORE JANUARY 1996?	YES ..... 1 ➔ FILL OUT THE CALENDAR BEGINNING IN JANUARY 1996 NO ..... 3 ➔ FILL OUT THE CALENDAR BEGINNING IN THE MONTH AND YEAR OF FIRST MARRIAGE
--	---

QUESTIONS TO BE ASKED

C. No menstruation "After [...]’s birth how many months until you menstruated?"
D. Abstinence "After [...]’s birth how many months until you had intercourse with your husband?"
E. Birth Control Device/Method "In the month [BEGINNING OF CALENDAR] did you use a birth control device/method?" "What birth control method/device did you use then?" "When did you stop using [DEVICE/METHOD]?" "Between the months of [WHEN STOPPED USING] and the month of [END OF MARRIAGE/BEGINNING OF PREGNANCY] had you ever used other birth control devices/ methods?" "What birth control devices/methods did you use then?" "When did you start using [DEVICE/METHOD]?" "When did you stop using [DEVICE/METHOD]?"
F. Reason for stopping "What was the reason you stopped using [DEVICE/METHOD]?"

ONLY ASKED FOR THE LAST TWO YEARS

G. Side Effects "Between the month of [...] and the month of [...], during which you used [DEVICE/METHOD], had you ever had health problems or side effects?" "What kind of health problems did you have then?" "In what month did you have the problem?"
H. Care Facility "Between the month of [...] and [...], during which you used [DEVICE/METHOD], did you ever visit a medical facility or birth control facility for initial application/ repeat application, consultation on side effects or to change methods of birth control? What facility did you visit then and in what month?
I. Reason for Visit "When you visited [CARE FACILITY] in the month of [...], what was the reason for your visit to the facility?"
J. Cost "How much did you spend to visit [...], including treatment cost, laboratory cost, consultation fee, but not including transportation cost?"

SECTION KL: CONTRACEPTIVE CALENDAR

MONTH-YEAR	96 JUL	AUG	SEP	OCT	NOV	DEC	97 JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	98 JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	99 JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	00 JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	01 JAN	FEB	
COLUMNS	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	
A. Marriage																																																									
B. Pregnancy																																																									
C. No menstruation																																																									
D. No intercourse																																																									
E. Birth control device																																																									
F. Reason-discontinue																																																									
G. Side effect																																																									
H. Care facility																																																									
I. Reason for visit																																																									
J. Cost (Rupiah)																																																									
COLUMNS	01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54	55	56	

A. MARRIAGE

K. Married  
S. Separated  
D. Divorced  
W. Widow

B. PREGNANCY OUTCOME

H. Live Birth  
M. Still Birth  
G. Miscarriage  
T. Still birth and live birth

E. BIRTH CONTROL DEVICE

A. Contraceptive Pills  
B. IUD/AKDR/Spiral  
C. 1-month injection  
D. 2-month injection  
E. 3-month injection  
F. Intravag/diaphragm  
G. Condom  
H. Contraceptive tubes/implant  
J. Female Sterilization  
K. Male Sterilization  
L. Rhythm method  
M. Coitus interruptus  
N. Traditional herbs  
O. Traditional massage  
P. Other

F. DISCONTINUATION REASONS

A. (Got) pregnant while using  
B. Wants to get pregnant  
C. Husband's objection  
D. Side effects  
E. Health problems  
F. Difficulty in getting pregnant  
G. Wants more effective methods  
H. Uncomfortable  
J. Husband was absent  
K. Too expensive  
L. Menopause  
M. Divorced/widow  
N. Detached (device)  
O. Too hard to use/tired of using  
Q. Alat KB tidak tersedia  
P. Other

G. SIDE EFFECTS

A. Gaining weight  
B. Losing weight  
C. Excessive bleeding on menstruation  
D. Irregular menstruation  
E. Flare-up of red facial rash  
F. Convulsions/cramps  
G. High blood pressure  
H. Headache

J. Nausea  
K. Fatigue  
L. Skin problems  
M. Other  
N. Stomach Ache

H. CARE FACILITY

A. Public hospital  
B. Private hospital  
C. Puskesmas, Pembantu  
D. Private clinic  
E. Posyandu  
F. Birth control post/association  
G. Fieldworker (PLKB)  
H. TKBK/TMK  
J. Pharmacist/Drugstore  
K. Private physician

L. Nurse/Paramedic  
M. Midwife  
N. Traditional midwife  
O. Friend/family  
P. Birth control safari  
Q. Bidan desa/Polindes  
R. Other

I. VISIT REASONS

A. Initial application  
B. Repeat application  
C. Side effects consultation  
D. Change of birth control method  
M. Other

KL00A. INTERVIEWER CHECK: CHECK THE LAST MONTH AND YEAR IN THE CALENDAR AGAINST CX21A

INCONSITENT .....3 ➔CHECK AGAIN  
CONSISTENT .....1



## SECTION KL: CONTRACEPTIVE CALENDAR

**INTERVIEWER NOTE: QUESTIONS 1-4 REFER TO THE CALENDAR JUST FILLED OUT.**

HHID:    PID:

<p><b>KL1. INTERVIEWER CHECK LINES H AND I IN THE CALENDAR. DID THE RESPONDENT VISIT A HEALTH FACILITY IN THE PAST TWO YEARS TO OBTAIN OR RESUPPLY A BIRTH CONTROL METHOD OR TO SWITCH METHODS, BUT NOT FOR SIDE EFFECTS?</b></p>	<p>NO ..... 3 ➔ <b>KL4</b></p> <p>YES ..... 1</p>
<p><b>KL1a.</b> You mentioned that you visited [MEDICAL FACILITY] for [REASON OF VISIT] in the month of ____/ year _____. What is the name of the medical facility and where is it located? <b>(Most recent visit).</b></p>	<p>Name: 1. _____ 8. DK</p> <p>Address: 1. _____ 8. DK</p> <p>Loc. Note: _____ 8. DK</p> <p>A. Vill: 1. _____ 3. Same 8. DK</p> <p>B. Kec: 1. _____ 3. Same 8. DK</p> <p>C. Kab: 1. _____ 3. Same 8. DK</p> <p>D. Prov: 1. _____ 3. Same 8. DK</p> <p><b>CODE COMFAS</b>    ____    ____    ____</p>
<p><b>KL2.</b> If you had a friend/relative who wanted to use a birth control device, would you take her to this facility?</p>	<p>YES ..... 1</p> <p>NO ..... 3</p>
<p><b>KL4 INTERVIEWER CHECK LINES H AND I IN THE CALENDAR. DID THE RESPONDENT VISIT A HEALTH FACILITY IN THE PAST TWO YEARS FOR SIDE EFFECTS?</b></p>	<p>NO ..... 3 ➔ <b>CP</b></p> <p>YES ..... 1</p>
<p><b>KL4a.</b> You mentioned that you visited [MEDICAL FACILITY] for consultation for side effects in the month of ____/ year _____. What is the name of the medical facility and where is it located? <b>(Most Recent Visit).</b></p>	<p>Name: 1. _____ 8. DK</p> <p>Address: 1. _____ 8. DK</p> <p>Loc. Note: _____ 8. DK</p> <p>A. Vill: 1. _____ 3. Same 8. DK</p> <p>B. Kec: 1. _____ 3. Same 8. DK</p> <p>C. Kab: 1. _____ 3. Same 8. DK</p> <p>D. Prov: 1. _____ 3. Same 8. DK</p> <p><b>CODE COMFAS</b>    ____    ____    ____</p>

SECTION CP (INTERVIEW SESSION NOTES)

FILL OUT THIS SECTION UPON THE COMPLETION OF THE QUESTIONNAIRE BOOK.

<p><b>CP1.</b> WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW? <b>ANSWER MAY BE MORE THAN ONE.</b></p> <p>A. NO ONE B. A CHILD 5 YEARS OLD OR UNDER C. A CHILD OLDER THAN 5 YEARS OLD D. HUSBAND/WIFE E. AN ADULT, A HOUSEHOLDER F. AN ADULT, NOT A HOUSEHOLDER</p>	<p><b>CP2.</b> WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS?</p> <p>1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD</p>	<p><b>CP3.</b> WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT?</p> <p>1. EXCELLENT 2. GOOD 3. FAIR 4. NOT SO GOOD 5. VERY BAD</p>
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<p><b>CP4.</b> WHAT QUESTIONS DID RESPONDENT FIND DIFFICULT, EMBARRASSING, OR CONFUSING?</p> <p>_____ _____ _____</p>	<p><b>CP5.</b> WHAT QUESTIONS DID INTERVIEWER FIND DIFFICULT, EMBARRASSING, OR CONFUSING?</p> <p>_____ _____ _____</p>	<p><b>CP6.</b> WHAT QUESTIONS DID RESPONDENT SEEM INTERESTED IN?</p> <p>_____ _____ _____</p>
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<p><b>NOTES:</b></p> <p>_____ _____ _____ _____ _____ _____ _____ _____</p>
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