

EDITOR: \_\_\_\_\_

**CONFIDENTIAL**

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

INTERVIEWER: \_\_\_\_\_

**INDONESIA FAMILY LIFE SURVEY 2007**

**BOOK IV**

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

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

**TO BE FILLED OUT BY INTERVIEWER WHO COMPLETED ROSTER AR:**

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

**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
  - 95. Other

# INTERVIEW SESSIONS OF BOOK IV: \_\_\_\_\_ (NUMVIS)

INTERVIEW	1	2	3
<b>DATE:</b>	____/____/____ DAY/MONTH/YEAR	____/____/____ DAY/MONTH/YEAR	____/____/____ DAY/MONTH/YEAR
<b>TIME STARTED:</b>	____/____ HOUR MINUTE	____/____ HOUR MINUTE	____/____ HOUR MINUTE
<b>TIME FINISHED:</b>	____/____ 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_CK REVIEW BY EDITOR	SUP. LOCAL SUPERVISOR MONITORING												
1. Completed → EDIT_CK 2. Partially completed 3. Not completed	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: _____	<table style="width: 100%; border: none;"> <tr> <td></td> <td style="text-align: right;">Yes</td> <td style="text-align: right;">No</td> </tr> <tr> <td>a. Observed by local supervisor .....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">3</td> </tr> <tr> <td>b. Edited by local supervisor .....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">3</td> </tr> <tr> <td>c. Verified by local supervisor.....</td> <td style="text-align: right;">1</td> <td style="text-align: right;">3</td> </tr> </table>		Yes	No	a. Observed by local supervisor .....	1	3	b. Edited by local supervisor .....	1	3	c. Verified by local supervisor.....	1	3
	Yes	No													
a. Observed by local supervisor .....	1	3													
b. Edited by local supervisor .....	1	3													
c. Verified by local supervisor.....	1	3													

**SECTION KW (MARITAL HISTORY)**

Now we would like to ask about your marital history.

<b>KW03a.</b> What is your marital status?	Cohabitation..... 2 → <b>KW02i</b> Married formal (KUA or civil registration)..... 3 Married, formal according to religious law .... 4 Married, formal according to adat law..... 5 Separated ..... 6 Divorced..... 7 Widow/widower ..... 8
<b>KW03.</b> How many times have you been married ?	___ Times
<b>KW02a.</b> What is the name of your current/latest spouse?	_____
<b>KW02g.</b> 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. ___ 2. ___ 3. _____
<b>KW02b.</b> In the last 4 weeks, have you taken iron pills?	No ..... 3 → <b>KW02e</b> Yes ..... 1
<b>KW02c.</b> In the last 4 weeks, how many iron pills did you take?	___ ..... 1 DON'T KNOW ..... 8
<b>KW02d.</b> Where did you get these pills?  <b>CIRCLE ALL THAT APPLY</b>	Posyandu..... A Health Center ..... B Place of work ..... C Midwife ..... D Pharmacy ..... F Private doctor ..... G Hospital..... H Paramedic ..... I Other..... V
<b>KW02e.</b> 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
<b>KW02h.</b> INTERVIEWER CHECK (COV2) Respondent is panel respondent (AR01h=1)	NO ..... 3 → <b>KW12a</b> YES ..... 1
<b>KW02i.</b> What was the date of your current/most recent marriage?	1. ___ / ____ Month Year 8. DON'T KNOW

<b>KW02j.</b> INTERVIEWER CHECK KW02i: Is the year at KW02i before 2000?	YES ..... 1 → <b>KW08</b> NO ..... 3 → <b>KW12a</b>
<b>KW02i.</b> When did you start living together with your spouse ?	1. ___ / ____ Month Year 8. DON'T KNOW
<b>KW02m.</b> What was the value of the assets you owned just prior to of your living together with your spouse?	_____, _____, _____ Rp. .... 1 DON'T KNOW ..... 8
<b>KW02n.</b> What was the highest education level attended by your spouse of the [...] marriage?	___
<b>KW02o.</b> What was the highest grade completed by your spouse ?	00 01 02 03 04 05 06 07 96 98 → <b>KW23a</b>
<b>KW12a.</b> What was the dowry for your current/ most recent marriage?  <b>CIRCLE ALL THAT APPLY</b>	NOTHING ..... W → <b>KW13a</b> 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..... V
<b>KW12b.</b> What was the value of the dowry of your current/most recent marriage at the time of the marriage?	_____, _____, _____ Rp. .... 1 _____, _____, _____ Other currency ..... 2 DON'T KNOW ..... 8

**KODE KW02n:**

- |                            |  |
|----------------------------|--|
| 01. None                   | 12. Adult Education B  |
| 02. Elementary School      | 13. Open University  |
| 03. Junior High General    | 14. Islamic School ( <i>Pesantren</i> )                      |
| 04. Junior High Vocational | 15. Adult Education C  |
| 05. Senior High General    | 17. School for disabled                                      |
| 06. Senior High Vocational | 72. Islamic Elementary School ( <i>Madrasah Ibtidaiyah</i> ) |
| 60. College (D1, D2, D3)   | 73. Islamic Junior High ( <i>Madrasah Tsanawiyah</i> )       |
| 61. University (BA)        | 74. Islamic Senior High (Madrasah Aliyah)                    |
| 62. University (MA)        | 90. Kindergarten   |
| 63. University (PhD)       | 98. DON'T KNOW   |
| 11. Adult Education A      | 95. Other  |

**KODE KW02o:**

- |   |
|---|
| 00. Didn't complete 1 <sup>st</sup> grade at that level |
| 01. 1   |
| 02. 2   |
| 03. 3   |
| 04. 4   |
| 05. 5   |
| 06. 6   |
| 07. Graduated   |
| 96. Unschoolled   |
| 98. DON'T KNOW  |

**SECTION KW (MARITAL HISTORY)**

<p><b>KW13a.</b> What did you receive as a gift, not a dowry, at the time of your current/most recent marriage, that was not consumed for the wedding party?</p> <p><b>CIRCLE ALL THAT APPLY</b></p>	<p>NOTHING ..... W → 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 ..... V</p>
<p><b>KW13b.</b> What was the value of the gift?</p>	<p>_____, _____, _____ Rp. .... 1                  _____, _____, _____                  Other currency ..... 2                  DON'T KNOW ..... 8</p>
<p><b>KW14.</b> What was the value of the assets you owned just prior to the wedding of your current/latest marriage?</p>	<p>_____, _____, _____ Rp. .... 1                  DON'T KNOW ..... 8</p>
<p><b>KW14a.</b> Right after the wedding ceremony of your current/latest marriage, did you move?</p>	<p>NO, lived at the same place ..... 3 → KW14c                  YES, moved within the same village/town ..... 2 → KW14c                  YES, moved to another village/town ..... 1</p>
<p><b>KW14b.</b> What is the [...] name at the place you moved at that time?</p>	<p>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</p>
<p><b>KW14c.</b> How long did you reside at your first residence after the wedding?</p>	<p>01. _____ 04. Weeks                  05. Months                  06. Years                  96. Still live there                  98. DON'T KOW</p>
<p><b>KW14d.</b> At the time you married your current/latest husband, did your husband change residence?</p>	<p>Yes ..... 1                  No ..... 3</p>

<p><b>KW14d1.</b> Because of <i>adat</i> and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest partner live together before the wedding?</p>	<p>No ..... 3 → KW14e                  Yes ..... 1</p>
<p><b>KW14d2.</b> How long did you live together before the wedding?</p>	<p>01. _____ 04. Weeks                  05. Monts                  06. Years                  98. DON'T KNOW</p>
<p><b>KW14e.</b> Did you and your current/latest husband start to live together right after the wedding?</p>	<p>Yes ..... 1 → KW14g                  No ..... 3</p>
<p><b>KW14f.</b> How long after the wedding took place did you start to live together with your husband?</p>	<p>96. Not yet living together → KW04                  01. _____                  04. Weeks                  05. Months                  06. Years                  98. DON'T KNOW</p>
<p><b>KW14g.</b> At the time you lived together with your current/latest husband for the first time, who else lived in the house?</p> <p><b>CIRCLE ALL THAT APPLY.</b></p> <p><b>IN THIS CASE THE WEDDING LOCATION IS NOT REGARDED AS A JOINT RESIDENCE (REFER TO ANSWER KW14e = 1 (YES)) AND RESIDENCE REGISTERED IN KW14b.</b></p>	<p>Nobody Else ..... W                  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                  Biological Child ..... J</p>
<p><b>KW04.</b> Who chose your husband (from your first marriage) ?</p>	<p>Parents ..... 01                  Self ..... 03                  Family ..... 04                  Other: ..... 95</p>
<p><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>(WHEN ASKING KW08 PAY ATTENTION TO KW03)</b></p>	<p><b>WRITE DOWN NAMES IN KW09</b></p>

**SECTION KW (MARITAL HISTORY)**

**FILL OUT NAMES AND DATES STARTING WITH CURRENT/LATEST MARRIAGE**

<b>KWN: NUMBER OF MARRIAGE</b> .....	<b>Latest / Current</b>	<b>Second Latest</b>	<b>Third Latest</b>	<b>Fourth Latest</b>	<b>Fifth Latest</b>	<b>Sixth Latest</b>
<b>KW09.</b> Name of husband:.....	_____	_____	_____	_____	_____	_____
<b>KW10.</b> What (month/year) did you get married?	1. ____/____ Month Year → KW11a 8. DON'T KNOW					
<b>KW11.</b> How old were you when your [...] marriage started?	____ Years					
<b>KW11a.</b> Because of adat and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest partner live together before the wedding?	1 Yes 3. No					
<b>KW11b.</b> What was I status of your marriage	2 3 4 5 →KW20 6 7 8					
<b>KW18.</b> When (month/year) did the marriage end/separation begin?	1. ____/____ Month Year → KW20 8. DON'T KNOW					
<b>KW19.</b> How old were you when the [...] marriage ended/separation began?	____ Years					
<b>KW20.</b> What was the highest education level attended by your husband/wife of the [...] marriage?	____ .....	____ .....	____ .....	____ .....	____ .....	____ .....
<b>KW21.</b> What was the highest grade completed by your husband/wife of the [...] marriage?	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98	00 01 02 03 04 05 06 07 96 98
<b>KW22x.</b> INTERVIEWER CHECK: IS RESPONDENT: 3. NEW →KW22b 1. PANEL	3. →KW22b 1.					
<b>KW22a.</b> INTERVIEWER'S NOTE: CHECK KW10 FOR PANEL: 3. NO OTHER MARRIAGE..... 2. MARRIAGE BEGAN BEFORE 2000 ..... 1. MARRIAGE BEGAN AFTER 1999.....	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.→KW09 SUPPLEMENT
<b>KW22b.</b> 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.→KW09 SUPPLEMENT

<b>KODE KW11b</b> 2. Cohabitation 3. Married formal (KUA or civil registration) 4. Married, formal according to religious law 5. Married, formal according to adat law 6. Separated 7. Divorced 8. Widow/widower	<b>KODE KW20</b> 01. None 02. Elementary School 03. Junior High General 04. Junior High Vocational 05. Senior High General 06. Senior High Vocational 60. College (D1, D2, D3) 61. University (BA) 62. University (MA) 63. University (PhD) 11. Adult Education A 12. Adult Education B 13. Open University 14. Islamic School ( <i>Pesantren</i> )	15. Adult Education C 17. School for disabled 72. Islamic Elementary School ( <i>Madrasah Ibtidaiyah</i> ) 73. Islamic Junior High ( <i>Madrasah Tsanawiyah</i> ) 74. Islamic Senior High ( <i>Madrasah Aliyah</i> ) 90. Kindergarten 98. DON'T KNOW	95. Other	<b>KODE KW21:</b> 00. Didn't complete 1 <sup>st</sup> grade at that level 01. 1 02. 2 03. 3 04. 4 05. 5 06. 6 07. Graduated 96. Unschooling 98. DON'T KNOW
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**SECTION KW (MARITAL HISTORY)**

<b>KW23a.</b> If you could choose exactly the number of children to have in your whole life, how many would that be?	<input type="text"/> Children ..... 01 Up to God..... 95
<b>KW23b.</b> How old were you on your first menstruation?	Never menstruated..... 96 →KW24a <input type="text"/> Years..... 01
<b>KW23c. INTERVIEWER'S CHECK COV3:</b>	<b>RESPONDENT'S AGE &lt;35</b> ..... 1 →KW24a <b>RESPONDENT'S AGE ≥ 35</b> ..... 3
<b>KW23d.</b> Do you now still have menstruation?	Yes ..... 1 →KW24a No, because another reason (medication, contraception method, etc.) ..... 2 →KW24a No (stop at all)..... 3
<b>KW23e.</b> How old were you when you stopped having menstruation?	<input type="text"/> Years → SECTION BR

<b>KW24.</b> Are you and your wife physically able to conceive a child (again) without medical help?	Yes ..... 1 →KW25 No..... 3
<b>KW24a.</b> Have you and your wife ever sought medical attention to help you conceive?	Yes ..... 1 No..... 3 →KW25
<b>KW25.</b> Do you personally wish to have another child (besides the children you already have)?	No..... 3 →SECTION BR Yes ..... 1
<b>KW26.</b> How many (more) children do you wish to have?	<input type="text"/> Children ..... 01 Up to God..... 95
<b>KW27.</b> Among the children that you (still) wish to have, how many sons and daughters do you wish to have?	01. a. <input type="text"/> Sons b. <input type="text"/> Daughters 95. Up to God

**SECTION BR (PREGNANCY SUMMARY)**

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

<b>BR00x. INTERVIEWER CHECK:</b>	<b>NEW RESPONDENT</b> ..... 3 → <b>BR01</b> <b>PANEL RESPONDENT</b> ..... 1
<b>BR00a. INSTRUCTION FOR INTERVIEW:</b>	<b>HAS CHILD ROSTER AND A CHILD LISTED AT CH00a</b> ..... 1 → <b>BA00a</b> <b>HAS CHILD ROSTER AND NO CHILD LISTED AT CH00a</b> ..... 2 <b>HAS NO CHILD ROSTER</b> ..... 3
<b>BR01.</b> Now I would like to ask you about all children that you have so far. Have you ever given birth?	<b>No</b> .....3 → <b>BR08</b> <b>Yes</b> ..... 1
<b>BR02.</b> Do you have biological sons or daughters who are now living with you?	<b>No</b> .....3 → <b>BR05</b> <b>Yes</b> ..... 1
<b>BR03.</b> How many biological sons are now living with you?	<input type="text"/> <input type="text"/> Males
<b>BR04.</b> How many biological daughters are now living with you?	<input type="text"/> <input type="text"/> Females
<b>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).</b>	
<b>BR05.</b> Do you have biological sons or daughters, who are still alive, but do not live with you?	<b>No</b> ..... 3 → <b>BR08</b> <b>Yes</b> ..... 1
<b>BR06.</b> How many biological sons are still alive, but do not live with you?	<input type="text"/> <input type="text"/> Males
<b>BR07.</b> How many biological daughters are still alive, but do not live with you?	<input type="text"/> <input type="text"/> Females
<b>BR08.</b> Have you ever given live birth to a son or daughter, even one who lived only for a short a while?	<b>No</b> ..... 3 → <b>BR11</b> <b>Yes</b> ..... 1

<b>BR09.</b> How many sons were born alive but passed away later?	<input type="text"/> <input type="text"/> Males
<b>BR10.</b> How many daughters were born alive but passed away later?	<input type="text"/> <input type="text"/> Females
<b>BR11.</b> Have you ever had a pregnancy that resulted in a stillbirth?	<b>No</b> ..... 3 → <b>BR13</b> <b>Yes</b> ..... 1
<b>BR12.</b> How many stillbirths have you had?	<input type="text"/> <input type="text"/>
<b>BR13.</b> (Besides that) have you had any miscarriages?	<b>No</b> ..... 3 → <b>BR15</b> <b>Yes</b> ..... 1
<b>BR14.</b> How many miscarriages have you had?	<input type="text"/> <input type="text"/>
<b>BR15. INTERVIEWER GUIDELINE:</b>  <b>ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE:</b> To confirm your answers, you have had <input type="text"/> livebirths, is it correct ?	<b>No</b> ..... 3 → <b>REVISE BR01-BR10</b> <b>Yes</b> ..... 1
<b>BR16. INTERVIEWER GUIDELINE:</b>  <b>ADD THE NUMBERS (BR12 AND BR14) AND ENTER AMOUNT HERE:</b> Again, to confirm your answers, you have had <input type="text"/> stillbirths and miscarriages, is it correct?	<b>No</b> ..... 3 → <b>REVISE BR12 and BR14</b> <b>Yes</b> ..... 1
<b>BR16a. INTERVIEWER CHECK BR00a.</b>	<b>HAVE ROSTER</b> ..... 2 → <b>BA00a</b> <b>NO ROSTER</b> ..... 3 → <b>BF00</b>

### 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



BF00

**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.  (NAME)	BA78. When [...] twelve years old, you and your husband married?	BA79. When [...] twelve years old, with whom did [...] live?	BA80. What is/was [ ]'s primary activity now/before his/her death?	BA81. What is/was [...]s work status now/before his/her death?	BA82a. What is/was [ ]'s type of work now/before his/her death?	BA83a. INTERVIEWER CHECK BA65 AND BA65a: [...] STILL ALIVE?	BA84. How often do/did you meet with [ ] during the past year now/before his/her death?	BA84a. How often do/did you have contact with [ ] by telephone during the past year now/before his/her death?	BA84b. How often do/did you have contact with [ ] by mail, sms, email/chatting during the past year now/before his/her death?
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BA83a 01 95.....	_____ _____ _____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BA83a 01 95.....	_____ _____ _____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BA83a 01 95.....	_____ _____ _____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BA83a 01 95.....	_____ _____ _____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BA83a 01 95.....	_____ _____ _____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BA83a 01 95.....	_____ _____ _____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5

**CODES FOR BA79:**  
 1. With Father and mother  
 2. With Father only  
 3. With Mother only  
 4. Not with father and mother

**CODES FOR 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  
 95. Other:

**CODES FOR 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  
 07. Casual worker in agriculture  
 08. Casual worker in non-agriculture  
 98. DON'T KNOW

**CODES FOR BA83a:**  
 1. Still Alive  
 3. Has died in the last 12 months  
 5. Has died more than 12 months ago  
 8. DON'T KNOW

**CODES FOR BA84, BA84a, BA84b:**  
 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.  (NAMA)	BA87a. In the past 12 months, did you provide assistance to [...] in the form of money, goods, or services?	BA88. What type of assistance did you provide to [...] and what is the value? (CIRCLE AND FILL ALL THAT APPLY)	BA89a. In the past 12 months, did you receive assistance from [...] in the form of money, goods, or services?	BA90. What type of assistance did you receive to [...] and what is the value? (CIRCLE AND FILL ALL THAT APPLY)
		7 →BA89a 3 →BA89a 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.	7 →BA63b ROW 2 / SECTION BF 3 →BA63b ROW 2 / SECTION BF 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.
		7 →BA89a 3 →BA89a 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.	7 →BA63b ROW 3 / SECTION BF 3 →BA63b ROW 3 / SECTION BF 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.
		7 →BA89a 3 →BA89a 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.	7 →BA63b ROW 4 / SECTION BF 3 →BA63b ROW 4 / SECTION BF 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.
		7 →BA89a 3 →BA89a 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.	7 →BA63b ROW 5 / SECTION BF 3 →BA63b ROW 5 / SECTION BF 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.
		7 →BA89a 3 →BA89a 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.	7 →BA63b SUPPLEMENT / SECTION BF 3 →BA63b SUPPLEMENT / SECTION BF 1	A. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. D. [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp. G. [ ] [ ] 03. Days 05. Months H. [ ] [ ] 03. Days 05. Months V. .... [ ] [ ] [ ] [ ] . [ ] [ ] [ ] [ ] [ ] [ ] Rp.

**CODE BA87a AND BA89a:**  
1. Yes  
3. No  
7. UNWILLING TO ANSWER

**CODE BA88 AND BA90:**  
A. Money (loans, tuition, health care cost)  
D. Food stuff or other goods  
G. Chores, child care  
H. Help with family business  
V. Other

**SECTION BA (NON-CO-RESIDENT CHILD ROSTER)**

**NON-CO RESIDENT (BA) CHILD ROSTER FOR NEW RESPONDENT/PANEL RESPONDENT WITHOUT PREPRINTED CHILD ROSTER.**

Now we would like to ask about all of your biological children with aged 15 years old or more that live outside the household, including biological children that have died in the last 12 months and lived outside the HH at the time of death.

AR00.	BA63a.	BA63b.	BA63c.	BA64.	BA64a.	BA64b.	BA64c.	BA65.	BA65a.	BA66.	BA66a	BA67.	BA68.	BA69.	BA70.
NO. OF HHM		NAME	Is [...] you're your biological child?	Sex	Age in 2000?	Birth Date Month/Year	Is [...] in this HH in 2000?	Is [...] still alive?	Death Date Month/Year	Current Age/Age when died Yrs	USIA ≥ 15?	Marital Status	Highest education level attended by [...]?	Highest grade completed by [...]?	Where does [...] live now/before died?
___	01		1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ___ ↓	___		1. ___ / ___ Month / Year 8. DON'T KNOW		1 → BA66 8 → BA66 3	1. ___ / ___ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	3 1 → ↓	___	___ .....	___ .....	00 → BA63b ROW 2 _____ .....
___	02		1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ___ ↓	___		1. ___ / ___ Month / Year 8. DON'T KNOW		1 → BA66 8 → BA66 3	1. ___ / ___ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	3 1 → ↓	___	___ .....	___ .....	00 → BA63b ROW 2 _____ .....
___	03		1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ___ ↓	___		1. ___ / ___ Month / Year 8. DON'T KNOW		1 → BA66 8 → BA66 3	1. ___ / ___ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	3 1 → ↓	___	___ .....	___ .....	00 → BA63b ROW 2 _____ .....
___	04		1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ___ ↓	___		1. ___ / ___ Month / Year 8. DON'T KNOW		1 → BA66 8 → BA66 3	1. ___ / ___ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	3 1 → ↓	___	___ .....	___ .....	00 → BA63b ROW 2 _____ .....
___	05		1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ___ ↓	___		1. ___ / ___ Month / Year 8. DON'T KNOW		1 → BA66 8 → BA66 3	1. ___ / ___ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	3 1 → ↓	___	___ .....	___ .....	00 → BA63b ROW 2 _____ .....

**CODE AR00:**  
96. Not Registered at the Roster

**CODE BA63c:**  
1. Yes  
2. Stepchild  
3. Adopted  
6. Duplicate  
7. Not a child  
8. DON'T KNOW

**CODE BA65:**  
1. Yes  
3. No  
8. DON'T KNOW

**CODE BA67:**  
1. Unmarried  
2. Married  
3. Separated/  
Estranged  
4. Divorced  
5. Widow/ widower  
8. DON'T KNOW

**CODE 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)  
11. Adult Education A  
12. Adult Education B  
13. Open University  
14. Islamic School (Pesantren)

15. Adult Education C  
17. School for disabled  
72. Islamic Elementary School (Madrasah Ibtidaiyah)  
73. Islamic Junior High School (Madrasah Tsanawiyah)  
74. Islamic Senior High School (Madrasah Aliyah)  
90. Kindergarten  
98. DON'T KNOW  
95. Other

**CODE BA69:**  
00. Did not complete 1<sup>st</sup> 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

**CODE BA70:**  
000. In this household  
001. In the same village  
002. In the same subdistrict  
003. In the same district  
004. In the same province  
010. Sumatera  
011. Nanggroe Aceh Darussalam  
012. North Sumatra  
013. West Sumatra  
014. Riau  
015. Jambi  
016. South Sumatra  
017. Bengkulu

018. Lampung  
019. Bangka Belitung  
020. Riau Islands  
030. Java  
031. DKI Jakarta  
032. West Java  
033. Central Java  
034. D.I. Yogyakarta  
035. East Java  
036. Banten  
051. Bali  
052. West Nusa Tenggara  
053. East Nusa Tenggara

060. Kalimantan  
061. West Kalimantan  
062. Central Kalimantan  
063. South Kalimantan  
064. East Kalimantan  
070. Sulawesi  
071. North Sulawesi  
072. Central Sulawesi  
073. South Sulawesi  
074. Southeast Sulawesi  
075. Gorontalo  
076. West Sulawesi

081. Maluku  
082. North Maluku  
090. Irian  
091. West Irian Jaya  
094. Papua  
101. Malaysia  
102. Singapore  
103. Brunei Darussalam  
104. Hongkong  
105. Japan  
106. South Korea  
107. Taiwan  
108. Timor Leste

121. Yaman  
122. Saudi Arabia  
123. Kuwait  
124. United Arab Emirates  
131. Argentina  
132. USA  
141. Australia  
151. Holland  
152. England  
998. DON'T KNOW  
995. Other



**SECTION CH (PREGNANCY HISTORY)**

CH00. INTERVIEWER CHECK		
<p><b>PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER</b></p> <p style="text-align: center; margin-top: 20px;">1 ↓ ↓ CH01a</p>		<p><b>PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER</b></p> <p style="text-align: center; margin-top: 20px;">2 ↓ ↓ CH01b</p> <p style="text-align: right; margin-top: 20px;">3 ↓ ↓ CH01b</p>

PANEL RESPONDENT WITH CHILD AT CH00a	
<p><b>CH01a. INSTRUCTION: FIND CH00a. ON PRE-PRINTED CHILDROSTER</b>  <b>NAME OF YOUNGEST CHILD: _____</b></p>	
<p>a. Since the birth of [...] (NAME OF CHILD IN CH00a), have you been pregnant again?</p>	<p>No ..... 3 → CH42b                  Yes ..... 1</p>
<p>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)</p>	<p>___      <b>IF = 0 → c</b>  <b>IF &gt; 0 ↓</b></p>
<p>d. After the birth of [YOUNGEST CHILD] how many live births do you have?</p>	<p>___</p>
<p>e. After the birth of [YOUNGEST CHILD] how many still births/miscarriages did you have?</p>	<p>___</p>
<p>c. Are you currently pregnant?</p>	<p>___                  Yes..... 1 → (ENTER "1")                  No..... 3 → (ENTER "0")</p>
<p><b>CH02a. TOTAL OF PREGNANCIES (c + d + e)</b></p>	<p>___      <b>IF &gt; 0 → CH03</b>  <b>IF = 0 → CH42b</b></p>

NEW RESPONDENT OR PANEL RESPONDENT WITH NO CHILD AT CH00a		
<b>CH01b.</b>	<p><b>INSTRUCTION: TRANSFER INFORMATION FROM SECTION BR:</b>  <b>a. NUMBER OF LIVE BIRTHS (BR15) AND</b>  <b>b. NUMBER OF STILL BIRTHS AND MISCARRIAGES (BR16)</b></p>	
	<p>a. NUMBER OF LIVE BIRTHS (BR15)</p>	<p>___</p>
	<p>b. NUMBER OF STILL BIRTHS AND MISCARRIAGES (BR16)</p>	<p>___</p>
	<p>c. Are you currently pregnant?</p>	<p>___                  Yes..... 1 → (ENTER "1")                  No ..... 3 → (ENTER "0")</p>
<b>CH02b.</b>	<p><b>TOTAL OF PREGNANCIES (a+b+c)</b></p>	<p>___      <b>IF &gt; 0 → CH03</b>  <b>IF = 0 → CH42b</b></p>

**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: .....	<input type="text"/>	<input type="text"/> →CH06 COLUMN 3/CH11	<input type="text"/> →CH06 COLUMN 4/CH11	<input type="text"/> →CH06 SUPPLEMENT/CH11
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. <input type="text"/> / <input type="text"/> / <input type="text"/> →CH17 DAY / MONTH / YEAR 8. DON'T KNOW	1. <input type="text"/> / <input type="text"/> / <input type="text"/> →CH17 DAY / MONTH / YEAR 8. DON'T KNOW	1. <input type="text"/> / <input type="text"/> / <input type="text"/> →CH17 DAY / MONTH / YEAR 8. DON'T KNOW	1. <input type="text"/> / <input type="text"/> / <input type="text"/> →CH17 DAY / MONTH / YEAR 8. DON'T KNOW
CH10a. How old were you when [...] was born/you had a miscarriage?	<input type="text"/> Years	<input type="text"/> Years	<input type="text"/> Years	<input type="text"/> Years
CH10b. USE AGE TO ESTIMATE CHILD'S YEAR OF BIRTH. (BIRTH YEAR OF MOTHER PLUS AGE AT CHILD'S BIRTH/MISCARRIAGE)	Year <input type="text"/>	Year <input type="text"/>	Year <input type="text"/>	Year <input type="text"/>
CH17. How far was/is the pregnancy when [...] was born/you had the miscarriage/now?	<input type="text"/> Month..... 05 Weeks..... 04 →CH06 COLUMN 2 / CH11	<input type="text"/> Month..... 05 Weeks..... 04 →CH06 COLUMN 3 / CH11	<input type="text"/> Month..... 05 Weeks..... 04 →CH06 COLUMN 4 / CH11	<input type="text"/> Month..... 05 Weeks..... 04 →CH06 SUPPLEMENT / CH11

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)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH12. INTERVIEWER CHECK: CH09/CH10B</b> 3. PREGNANCY ENDED AFTER 2001 1. PREGNANCY ENDED BEFORE 2002	3 → CH14 1	3 → CH14 1	3 → CH14 1	3 → CH14 1
<b>CH13. INTERVIEWER'S NOTE:</b> 3. CH06 = 1, 3, 4 1. CH06 = 2 (LIVE BIRTH)	3 → CH12 KOLOM 2 /CH42 1 → CH25	3 → CH12 KOLOM 3 /CH42 1 → CH25	3 → CH12 KOLOM 4 /CH42 1 → CH25	3 → CH12 SUPPLEMENT /CH42 1 → CH25
<b>CH14.</b> During the pregnancy have/did you ever have a pregnancy check-up?	No ..... 3 → CH18 Yes..... 1			
<b>CH14a.</b> During the pregnancy, what if any complications you experienced?	Swelling of the feet or leg .....A Difficulty of vision during day .....B Difficulty of vision during night .....C Vaginal bleeding .....D Fever.....E Convulsion and fainting .....F Labor before 9 months.....G NO COMPLICATIONS.....W	Swelling of the feet or leg .....A Difficulty of vision during day .....B Difficulty of vision during night .....C Vaginal bleeding .....D Fever.....E Convulsion and fainting .....F Labor before 9 months.....G NO COMPLICATIONS.....W	Swelling of the feet or leg .....A Difficulty of vision during day .....B Difficulty of vision during night .....C Vaginal bleeding .....D Fever.....E Convulsion and fainting .....F Labor before 9 months.....G NO COMPLICATIONS.....W	Swelling of the feet or leg .....A Difficulty of vision during day .....B Difficulty of vision during night .....C Vaginal bleeding .....D Fever.....E Convulsion and fainting .....F Labor before 9 months.....G NO COMPLICATIONS.....W
<b>CH15.</b> Where do/did you go for pregnancy check-ups? <b>(CIRCLE ALL THAT APPLY)</b> 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..... J. Specialist ..... V. Other.....	A B C D E F G I J V .....	A B C D E F G I J V .....	A B C D E F G I J V .....	A B C D E F G I J V .....



**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH16a.</b> During the first 3 months of your pregnancy, how many visits did you make for prenatal care?	1. <input type="text"/> Visits			
<b>CH16b.</b> During the second 3 months of your pregnancy, months 4 to 6, how many visits did you make for prenatal care?	1. <input type="text"/> Visits 6. Not yet in 2nd trimester	1. <input type="text"/> Visits 6. Not yet in 2nd trimester	1. <input type="text"/> Visits 6. Not yet in 2nd trimester	1. <input type="text"/> Visits 6. Not yet in 2nd trimester
<b>CH16c.</b> During the third 3 months of your pregnancy, months 7 to 9, how many visits did you make for prenatal care?	1. <input type="text"/> Visits 6. Not yet in 3rd trimester	1. <input type="text"/> Visits 6. Not yet in 3rd trimester	1. <input type="text"/> Visits 6. Not yet in 3rd trimester	1. <input type="text"/> Visits 6. Not yet in 3rd trimester
<b>CH16d.</b> At any time during your pregnancy, did you receive the following services?	1. Yes 3. No 8. DON'T KNOW			
a. Weight .....	a. 1. 3. 8.			
b. Height .....	b. 1. 3. 8.			
c. Blood pressure.....	c. 1. 3. 8.			
d. Blood test for hemoglobin.....	d. 1. 3. 8.			
e. Measure of height of fetus.....	e. 1. 3. 8.			
f. Listen to fetal heartbeat.....	f. 1. 3. 8.			
g. Internal Exam .....	g. 1. 3. 8.			
h. Measurement of hips.....	h. 1. 3. 8.			
<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			
<b>CH16f.</b> At any time during your pregnancy did you take iron pills?	No.....3 → CH18 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			
<b>CH18. INTERVIEWER NOTE :</b>				
1. CH06 = 1 (STILL PREGNANT) .....	1. → CH12 COLUMN 2 / CH42b	1. → CH12 COLUMN 3 / CH42b	1. → CH12 COLUMN 4 / CH42b	1. → CH12 SUPPLEMENT / CH42b
3. CH06 = 2 OR 3 .....	3. → CH18a	3. → CH18a	3. → CH18a	3. → CH18a
2. CH06 = 4 .....	2.	2.	2.	2.
<b>CH18aa.</b> What were the reasons of your miscarriage?	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other .....	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other .....	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other .....	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other .....
	<b>CH12 COLUMN 2 / CH42b</b>	<b>CH12 COLUMN 3 / CH42b</b>	<b>CH12 COLUMN 4 / CH42b</b>	<b>CH12 SUPPLEMENT / CH42b</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			

**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH18b.</b> At the time that you gave birth to [...] were you experiencing above normal bleeding?	Yes .....1 No .....3	Yes ..... 1 No ..... 3	Yes .....1 No .....3	Yes ..... 1 No ..... 3
<b>CH18c.</b> At the time that you gave birth to [...] were you experiencing high fever?	Yes .....1 No .....3	Yes ..... 1 No ..... 3	Yes .....1 No .....3	Yes ..... 1 No ..... 3
<b>CH19.</b> Where did you give birth to [...]?				
09. Own house .....	09 → CH20	09 → CH20	09 → CH20	09 → CH20
10. Family Members House.....	10 → CH20	10 → CH20	10 → CH20	10 → CH20
01. Public hospital .....	01	01	01	01
02. Private hospital .....	02	02	02	02
03. Delivery Hospital.....	03	03	03	03
04. Community health center .....	04	04	04	04
05. Village Delivery Post.....	05	05	05	05
06. Clinic/office of physician .....	06	06	06	06
07. Clinic/office of midwife .....	07	07	07	07
08. Office/house of trad. midwife ....	08	08	08	08
95. Other .....	95.....	95.....	95.....	95.....



**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH20g.</b> 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
<b>CH20h.</b> 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
<b>CH21. INTERVIEWER'S NOTE:</b> 3. CH06 = 3 ..... 1. CH06 = 2 (LIVE BIRTH) .....	<b>3 → CH12 COLUMN 2 /CH42b</b> 1	<b>3 → CH12 COLUMN 3 /CH42b</b> 1	<b>3 → CH12 COLUMN 4 /CH42b</b> 1	<b>3 → CH12 SUPPLEMENT/CH42b</b> 1
<b>CH22.</b> 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
<b>CH23.</b> 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
<b>CH24.</b> To be exact, how many kilograms was [...]’s birth weight?	<input type="text"/> . <input type="text"/> Kg			
<b>CH24a.</b> 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
<b>CH24c.</b> How old was [...] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	01. <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed

**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH24d.</b> What age was [...] when he/she was regularly (on a daily basis) fed other foods/beverages besides breast milk?	01. <input type="text"/> <input type="text"/> <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. <input type="text"/> <input type="text"/> <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. <input type="text"/> <input type="text"/> <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. <input type="text"/> <input type="text"/> <input type="text"/> 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed
<b>CH24e.</b> For how many months did you breastfeed [...]?	96. Still Breastfeeding → <b>CH25</b> 05. <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding	96. Still Breastfeeding → <b>CH25</b> 05. <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding	96. Still Breastfeeding → <b>CH25</b> 05. <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding	96. Still Breastfeeding → <b>CH25</b> 05. <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding
<b>CH24f.</b> Why did you stop breastfeeding [...]? <b>CIRCLE ALL THAT APPLY</b>				
A. Mother sick/weak .....	A	A	A	A
B. Sore nipples .....	B	B	B	B
C. Work .....	C	C	C	C
D. Inconvenience.....	D	D	D	D
E. Take contraceptive pills .....	E	E	E	E
F. Want to get pregnant.....	F	F	F	F
G. Was pregnant again.....	G	G	G	G
H. Insufficient breast milk .....	H	H	H	H
I. Child's death .....	I	I	I	I
J. Child's sickness .....	J	J	J	J
K. Child in incubator .....	K	K	K	K
L. Child did not develop .....	L	L	L	L
M. Child did not want .....	M	M	M	M
N. Child lived separately .....	N	N	N	N
O. Dr/nurse's recommendations.....	O	O	O	O
P. Husband's objections .....	P	P	P	P
Q. Child's inability to suck .....	Q	Q	Q	Q
R. Child was big enough .....	R	R	R	R
S. Other.....	S .....	S.....	S .....	S.....
<b>CH25.</b> Is [...] still alive?	Yes ..... 1 → <b>CH27</b> No..... 3			

**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH26.</b> How old was [...] when he/she died?	<p style="text-align: center;">[ ][ ]</p> Days ..... 03 weeks ..... 04 Months ..... 05 Years ..... 06	<p style="text-align: center;">[ ][ ]</p> Days ..... 03 weeks ..... 04 Months ..... 05 Years ..... 06	<p style="text-align: center;">[ ][ ]</p> Days ..... 03 weeks ..... 04 Months ..... 05 Years ..... 06	<p style="text-align: center;">[ ][ ]</p> Days ..... 03 weeks ..... 04 Months ..... 05 Years ..... 06
<b>CH27. INTERVIEWER CHECK: IS [...] LISTED IN THE HH ROSTER?</b>				
1. YES, AR00 = [ ][ ] (PID) .....	1 [ ][ ]	1 [ ][ ]	1 [ ][ ]	1 [ ][ ]
2. YES, BUT DIED OR NOT LIVE IN HOUSEHOLD, AR00 .....	2 [ ][ ]	2 [ ][ ]	2 [ ][ ]	2 [ ][ ]
3. NO .....	3	3	3	3
<b>CH27x. INTERVIEWER CHECK CH00:</b>				
1. PANEL WITH CHILD ROSTER 3. PANEL WITHOUT CHILD ROSTER OR NEW	1 → CH12 COLUMN 2 / CH42b 3	1 → CH12 COLUMN 3 / CH42b 3	1 → CH12 COLUMN 4 / CH42b 3	1 → CH12 SUPPLEMENT / CH42b 3
<b>CH27b. INTERVIEWER CHECK CH25 AND CH27:</b>				
1. ALIVE, IN HH (CH27=1) .....	1 → CH12 COLUMN 2 / CH42b	1 → CH12 COLUMN 3 / CH42b	1 → CH12 COLUMN 4 / CH42b	1 → CH12 SUPPLEMENT / CH42b
3. ALIVE NOT IN HH (CH27=2 OR 3 AND CH25=1) .....	3	3	3	3
5. DEAD (CH25=3) .....	5	5	5	5
<b>CH28a.</b> Is/was [...] now/at the time [...] died 15 years old or older?	No ..... 3 → CH12 COLUMN 2 / CH42b Yes ..... 1	No ..... 3 → CH12 COLUMN 3 / CH42b Yes ..... 1	No ..... 3 → CH12 COLUMN 4 / CH42b Yes ..... 1	No ..... 3 → CH12 SUPPLEMENT / CH42b Yes ..... 1
<b>CH28b. INTERVIEWER CHECK CH25 STILL ALIVE?</b>	Yes ..... 1 → CH30a No ..... 3			
<b>CH29a.</b> Did [...] die within the last 12 months?	No ..... 3 → CH12 COLUMN 2 / CH42b Yes ..... 1	No ..... 3 → CH12 COLUMN 3 / CH42b Yes ..... 1	No ..... 3 → CH12 COLUMN 4 / CH42b Yes ..... 1	No ..... 3 → CH12 SUPPLEMENT / CH42b Yes ..... 1
<b>CH29b.</b> Was [...] living outside the HH at the time of death?	No ..... 3 → CH12 COLUMN 2 / CH42b Yes ..... 1	No ..... 3 → CH12 COLUMN 3 / CH42b Yes ..... 1	No ..... 3 → CH12 COLUMN 4 / CH42b Yes ..... 1	No ..... 3 → CH12 SUPPLEMENT / CH42b Yes ..... 1
<b>CH30a.</b> Marital status (now/at death):				
01. Single .....	01	01	01	01
02. Married .....	02	02	02	02
03. Separated .....	03	03	03	03
04. Divorced .....	04	04	04	04
05. Widow/widower .....	05	05	05	05
98. DON'T KNOW .....	98	98	98	98

**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH31a.</b> 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
15. Adult Education C	15	15	15	15
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. Islamic Senior High School (Madrasah Aliyah)	74	74	74	74
90. Kindergarten	90	90	90	90
98. DON'T KNOW	98	98	98	98
10. Other: .....	95 .....	95 .....	95 .....	95 .....
<b>CH32a.</b> 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
<b>CH32b.</b> When [...] were twelve years old were you and your spouse married?	1. Yes 3. No 6. NA			
<b>CH32c.</b> Were [...] living with you when [...] were twelve ?	1. Yes 3. No 6. NA			

**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH32d.</b> What was your primary activity when [...] was 12 years old ? 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 ..... 95. Other:.....	02 03 04 05 06 07 98 01 95 ..... →CH37a	02 03 04 05 06 07 98 01 95 ..... →CH37a	02 03 04 05 06 07 98 01 95 ..... →CH37a	02 03 04 05 06 07 98 01 95 ..... →CH37a
<b>CH33a.</b> Where does/did [...] live now/before his/her death? _____ _____	<b>00 → CH12 COLUMN 2 / CH42b</b> _____ _____	<b>00 → CH12 COLUMN 3 / CH42b</b> _____ _____	<b>00 → CH12 COLUMN 4 / CH42b</b> _____ _____	<b>00 → CH12 SUPPLEMENT / CH42b</b> _____ _____
<b>CH34a.</b> 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 ..... 95. Other:.....	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
<b>CH35a.</b> 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

**CODE CH33a:**

000. In this household	018. Lampung	060. Kalimantan	081. Maluku	121. Yaman
001. In the same village	019. Bangka Belitung	061. West Kalimantan	082. North Maluku	122. Saudi Arabia
002. In the same subdistrict	020. Riau Islands	062. Central Kalimantan	090. Irian	123. Kuwait
003. In the same district	030. Java	063. South Kalimantan	091. West Irian Jaya	124. United Arab Emirates
004. In the same province	031. DKI Jakarta	064. East Kalimantan	094. Papua	131. Argentina
010. Sumatera	032. West Java	070. Sulawesi	101. Malaysia	132. USA
011. Nanggroe Aceh Darussalam	033. Central Java	071. North Sulawesi	102. Singapore	141. Australia
012. North Sumatra	034. D.I. Yogyakarta	072. Central Sulawesi	103. Brunei Darussalam	151. Holland
013. West Sumatra	035. East Java	073. South Sulawesi	104. Hongkong	152. England
014. Riau	036. Banten	074. Southeast Sulawesi	105. Japan	998. DON'T KNOW
015. Jambi	051. Bali	075. Gorontalo	106. South Korea	995. Other
016. South Sumatra	052. West Nusa Tenggara	076. West Sulawesi	107. Taiwan	
017. Bengkulu	053. East Nusa Tenggara		108. Timor Leste	

**SECTION CH (PREGNANCY HISTORY)**

	[ 0 1 ]	[ 0 2 ]	[ 0 3 ]	[ 0 4 ]
<b>CH36b.</b> What is/was [...]’s primary duty now/before his/her death?	_____	_____	_____	_____
<b>CH37a.</b> How often do/did you meet with [...] during the past year now/before his/her death? 5. Everyday ..... 4. At least once a week ..... 3. At least once a month ..... 2. At least once a year ..... 1. Never .....	5 → CH38a 4 3 2 1	5 → CH38a 4 3 2 1	5 → CH38a 4 3 2 1	5 → CH38a 4 3 2 1
<b>CH37b.</b> How often do/did you have a telephone contact with [...] during the past year now/before his/her death? 5. Everyday ..... 4. At least once a week ..... 3. At least once a month ..... 2. At least once a year ..... 1. Never .....	5 → CH38a 4 3 2 1	5 → CH38a 4 3 2 1	5 → CH38a 4 3 2 1	5 → CH38a 4 3 2 1
<b>CH37c.</b> How often do/did you have a contact with [...] through email and text messages 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>[ 0 1 ]</b>	<b>[ 0 2 ]</b>	<b>[ 0 3 ]</b>	<b>[ 0 4 ]</b>
<p><b>CH39a.</b> What type of help did you provide to [...] in the past 12 months and what is the value?</p> <p>A. Money, loan, tuition, health care costs</p> <p>D. Food stuffs or other goods</p> <p>G. Chores, child care, help when ill 03. Days 05. Months</p> <p>H Helping family business 03. Days 05. Months</p> <p>V. Other: .....</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>
<p><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?</p>	<p>UNWILLING TO ANSWER..... 7→CH12 COLUMN 2 / CH42b</p> <p>No..... 3→CH12 COLUMN 2 / CH42b</p> <p>Yes ..... 1</p>	<p>UNWILLING TO ANSWER..... 7→CH12 COLUMN 3 / CH42b</p> <p>No..... 3→CH12 COLUMN 3 / CH42b</p> <p>Yes ..... 1</p>	<p>UNWILLING TO ANSWER .... 7→CH12 COLUMN 4 / CH42b</p> <p>No..... 3→CH12 COLUMN 4 / CH42b</p> <p>Yes ..... 1</p>	<p>UNWILLING TO ANSWER . 7→CH12 SUPPLEMENT / CH42b</p> <p>No..... 3→CH12 SUPPLEMENT/ CH42b</p> <p>Yes ..... 1</p>
<p><b>CH41a.</b> What type of help did you provide to [...] in the past 12 months and what is the value?</p> <p>A. Money, loan, tuition, health care costs</p> <p>D. Food stuffs or other goods</p> <p>G. Chores, child care, help when ill 03. Days 05. Months</p> <p>H. Helping family business 03. Days 05. Months</p> <p>V. Other: .....</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>	<p>(CIRCLE ALL THAT APPLY)</p> <p>Rupiah</p> <p>A. _____, _____, _____</p> <p>D. _____, _____, _____</p> <p>G. ____ 03. DAYS 05. MONTHS</p> <p>H. ____ 03. DAYS 05. MONTHS</p> <p>V. ....</p> <p>_____, _____, _____</p>

<p><b>CH42b.</b> Do you have adopted/step 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?</p>	<p>No ..... 3 →SECTION EP</p> <p>Yes, with preprinted BX ..... 1 →INSERT PREPRINTED BX</p> <p>Yes, without preprinted BX ..... 2</p>
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**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.  (NAME)	BX78. When [...] twelve years old, you and your husband married?	BX79. When [...] twelve years old, with whom did [...] live?	BX80. What is/was [ ]'s primary activity now/before his/her death?	BX81. What is/was [...]’s work status now/before his/her death?	BX82a. What is/was [ ]’s type of work now/before his/her death?	BX83a. <b>INTERVIEWER CHECK BX65 AND BX65a: [...] STILL ALIVE?</b>	BX84. How often do/did you meet with [ ] during the past year now/before his/her death?	BX84a. How often do/did you have contact with [ ] by telephone during the past year now/before his/her death?	BX84b. How often do/did you have contact with [ ] by mail, sms, email/chatting during the past year now/before his/her death?
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BX83a 01 95.....	____ ____ ____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BX87a 1 2 3 4	5→BX87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BX83a 01 95.....	____ ____ ____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BX87a 1 2 3 4	5→BX87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BX83a 01 95.....	____ ____ ____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BX87a 1 2 3 4	5→BX87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BX83a 01 95.....	____ ____ ____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BX87a 1 2 3 4	5→BX87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BX83a 01 95.....	____ ____ ____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BX87a 1 2 3 4	5→BX87a 1 2 3 4	1 2 3 4 5
		1. Yes 3. No 6. NA	1 2 3 4	02 03 04 05 06 07 98 →BX83a 01 95.....	____ ____ ____	_____ _____ _____	1 → 3 → 5 ↓ 8 ↓	5→BX87a 1 2 3 4	5→BX87a 1 2 3 4	1 2 3 4 5

**CODES FOR BX79:**  
1. With Father and mother  
2. With Father only  
3. With Mother only  
4. Not with father and mother

**CODES FOR BX80:**  
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  
95. Other:

**CODES FOR BX81:**  
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  
07. Casual worker in agriculture  
08. Casual worker in non-agriculture  
98. DON'T KNOW

**CODES FOR BX83a:**  
1. Still Alive  
3. Has died in the last 12 months  
5. Has died more than 12 months ago  
8. DON'T KNOW

**CODES FOR BX84, BX84a, BX84b:**  
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.  (NAME)	BX87a.  In the past 12 months, did you provide assistance to [...] in the form of money, goods, or services?	BX88.  What type of assistance did you provide to [...] and what is the value? (CIRCLE AND FILL ALL THAT APPLY)	BX89a.  In the past 12 months, did you receive assistance from [...] in the form of money, goods, or services?	BX90.  What type of assistance did you receive to [...] and what is the value? (CIRCLE AND FILL ALL THAT APPLY)
		7 →BX89a 3 →BX89a 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.	7 →BX63b ROW 2 / SECTION EP 3 →BX63b ROW 2 / SECTION EP 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.
		7 →BX89a 3 →BX89a 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.	7 →BX63b ROW 3 / SECTION EP 3 →BX63b ROW 3 / SECTION EP 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.
		7 →BX89a 3 →BX89a 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.	7 →BX63b ROW 4 / SECTION EP 3 →BX63b ROW 4 / SECTION EP 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.
		7 →BX89a 3 →BX89a 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.	7 →BX63b ROW 5 / SECTION EP 3 →BX63b ROW 5 / SECTION EP 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.
		7 →BX89a 3 →BX89a 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.	7 →BX63b SUPPLEMENT / SECTION EP 3 →BX63b SUPPLEMENT / SECTION EP 1	A. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. D. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> . <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. G. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months H. <input type="checkbox"/> <input type="checkbox"/> 03. Days 05. Months V. .... <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp.

**CODE BX87a AND BX89a:**  
 1. Yes  
 3. No  
 7. UNWILLING TO ANSWER

**CODE BX88 AND BX90:**  
 A. Money (loans, tuition, health care cost)  
 D. Food stuff or other goods  
 G. Chores, child care  
 H. Help with family business  
 V. Other

**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.	BX63c.	BX64.	BX64b.	BX65.	BX65a.	BX66.	BX66a.	BX67.	BX68.	BX69.	BX70.
NO. OF HHM		NAME	Is [...] your step or adopted child?	Sex	Birth Date Month/Year	Is [...] still alive?	Death Date Month/Year	Current Age/Age when died Yrs	AGE >=15?	Marital Status	Highest education level attended by [...]?	Highest grade completed by [...]?	Where does [...] live now/before died?
___	01		2 3 → 1 ↓ 7 ↓ 8 ↓ 6 ___ ↓	□	1. ___/____ Month / Year 8. DON'T KNOW	1 → BX66 8 → BX66 3	1. ___/____ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	1. Yes → 3. No ↓	□	___ .....	___ .....	00 → BX63b ROW 2 _____ .....
___	02		2 3 → 1 ↓ 7 ↓ 8 ↓ 6 ___ ↓	□	1. ___/____ Month / Year 8. DON'T KNOW	1 → BX66 8 → BX66 3	1. ___/____ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	1. Yes → 3. No ↓	□	___ .....	___ .....	00 → BX63b ROW 2 _____ .....
___	03		2 3 → 1 ↓ 7 ↓ 8 ↓ 6 ___ ↓	□	1. ___/____ Month / Year 8. DON'T KNOW	1 → BX66 8 → BX66 3	1. ___/____ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	1. Yes → 3. No ↓	□	___ .....	___ .....	00 → BX63b ROW 2 _____ .....
___	04		2 3 → 1 ↓ 7 ↓ 8 ↓ 6 ___ ↓	□	1. ___/____ Month / Year 8. DON'T KNOW	1 → BX66 8 → BX66 3	1. ___/____ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	1. Yes → 3. No ↓	□	___ .....	___ .....	00 → BX63b ROW 2 _____ .....
___	05		2 3 → 1 ↓ 7 ↓ 8 ↓ 6 ___ ↓	□	1. ___/____ Month / Year 8. DON'T KNOW	1 → BX66 8 → BX66 3	1. ___/____ Month / Year 8. DON'T KNOW	1. ___ years 8. DK	1. Yes → 3. No ↓	□	___ .....	___ .....	00 → BX63b ROW 2 _____ .....

**CODE BXAR00:**  
96. Not Registered at the Roster

**CODE BX64:**  
1. Male  
3. Female

**CODE BX63c:**  
1. Biological child  
2. Step child  
3. Adopted child  
6. Duplicate  
7. Not a child  
8. DON'T KNOW

**CODE BX65:**  
1. Yes  
3. No  
8. DON'T KNOW

**CODE BX67:**  
1. Unmarried  
2. Married  
3. Separated/  
Estranged  
4. Divorced  
5. Widow/ widower  
8. DON'T KNOW

**CODE BX68:**  
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)  
11. Adult Education A  
12. Adult Education B  
13. Open University  
14. Islamic School (Pesantren)  
15. Adult Education C  
17. School for disabled  
72. Islamic Elementary School (Madrasah Ibtidaiyah)  
73. Islamic Junior High School (Madrasah Tsanawiyah)  
74. Islamic Senior High School (Madrasah Aliyah)  
90. Kindergarten  
98. DON'T KNOW  
95. Other

**CODE BX69:**  
00. Did not complete 1<sup>st</sup> 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

**CODE BX70:**

000. In this household	018. Lampung	060. Kalimantan	081. Maluku	121. Yaman
001. In the same village	019. Bangka Belitung	061. West Kalimantan	082. North Maluku	122. Saudi Arabia
002. In the same subdistrict	020. Riau Islands	062. Central Kalimantan	090. Irian	123. Kuwait
003. In the same district	030. Java	063. South Kalimantan	091. West Irian Jaya	124. United Arab Emirates
004. In the same province	031. DKI Jakarta	064. East Kalimantan	094. Papua	131. Argentina
010. Sumatera	032. West Java	070. Sulawesi	101. Malaysia	132. USA
011. Nanggroe Aceh Darussalam	033. Central Java	071. North Sulawesi	102. Singapore	141. Australia
012. North Sumatra	034. D.I. Yogyakarta	072. Central Sulawesi	103. Brunei Darussalam	151. Holland
013. West Sumatra	035. East Java	073. South Sulawesi	104. Hongkong	152. England
014. Riau	036. Banten	074. Southeast Sulawesi	105. Japan	998. DON'T KNOW
015. Jambi	051. Bali	075. Gorontalo	106. South Korea	995. Other
016. South Sumatra	052. West Nusa Tenggara	076. West Sulawesi	107. Taiwan	
017. Bengkulu	053. East Nusa Tenggara		108. Timor Leste	

**SEKSI EP (EXPECTATION)**

<b>EP02. INTERVIEWER CHECK: IS RESPONDENT HAVE PREPRINTED ROSTER EP?</b>	<b>YES ..... 1 →PREPRINTED ROSTER EP</b> <b>NO .....3</b>
<b>EP03. Do you have children (biological/non-biological children) that lives in or outside this household?</b>	No .....3 → <b>SECTION CX</b> Yes .....1
<b>EP04. How many children do you have?</b>	<input type="text"/> → <b>ROSTER EP</b>

**SEKSI EP (EXPECTATION)**

**INTERVIEWER CHECK:** FILL WITH THE NAME OF ALL CHILDREN AGE 7-24 WHO LIVES IN THIS HOUSEHOLD (AR00) AND THE NAME OF ALL CHILDREN WHO DOESN'T LIVE IN THIS HOUSEHOLD (SECTION BA AND BA). ALSO FILL THE NAME OF ALL CHILDREN AGE 7-24 FROM SECTION CH.

Now we would like to ask about your expectation about your children's education, health, and life status in the future.

EP05.	EP06.	EP07.	EP07a.	EP08.	EP09.	EP10.	EP11.	EP12.	EP13.	EP14.	EP15.	EP16.	EP17.	EP18.	EP19.
	NO. OF HHM (AR00)	NO. OF SECTION BA (BA63a)	NO. OF SECTION BX (BX63a)	NAME	Child status	Sex	Age	Is [...] still alive?	INTERVIEWER CHECK EP11: IS [...] AGED 7-24 ?	Is [...] live in this HH?	Is [...] currently attending school, will attend school, or will continuing school in the future?	What his/her highest education level do you expect?	What his/her highest class level do you expect?	When [...] at your age now, according to you, how is [...]’s health status comparing your health status now?	When [...] at your age now, according to you, how is [...]’s live status comparing your live status now?
01	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6
02	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6
03	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6
04	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6
05	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6
06	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6
07	___	___	___		1 2 3 → 7 ↓ 8 ↓ 6 ___ ↓	___	___	1 → 3 ↓ 8 ↓	1. YES → 3. NO ↓	1. Yes 3. No	3. No → EP18 1. Yes	___ .....	___ .....	1 2 3 4 5 6	1 2 3 4 5 6

**CODE EP06, EP07, AND EP07a:**  
96. Not Registered at the Roster

**KODE EP10:**  
1. Male  
3. Female

**CODE EP09:**  
1. Biological child  
2. Step child  
3. Adopted child  
6. Duplicate  
7. Not a child  
8. DON'T KNOW

**CODE EP12:**  
1. Yes  
3. No  
8. DON'T KNOW

**CODE EP16:**  
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)  
11. Adult Education A  
12. Adult Education B  
13. Open University  
14. Islamic School (Pesantren)  
15. Adult Education C  
17. School for disabled  
72. Islamic Elementary School (Madrasah Ibtidaiyah)  
73. Islamic Junior High School (Madrasah Tsanawiyah)  
74. Islamic Senior High School (Madrasah Aliyah)  
90. Kindergarten  
98. DON'T KNOW  
95. Other

**CODE EP17:**  
00. Did not complete 1<sup>st</sup> 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

**CODE EP18, EP19:**  
1. Much better  
2. Better  
3. Same  
4. Worst  
5. Much worst  
6. NOT APPLICABLE

**SECTION CX (CONTRACEPTIVE USE)**

**CX00. INTERVIEWER CHECK COV3: AGE OF THE RESPONDENT ≥ 50?**

**AGE OF THE RESPONDENT ≥ 50..... 1 →SECTION CP**  
**AGE OF THE RESPONDENT < 50..... 3**

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

	BIRTH CONTROL DEVICE/METHOD (CX1TYPE)	CX01.	CX02.	CX02A.	CX02B.
		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?
<b>A.</b>	<b>Contraceptive Pill</b> A woman can take contraceptive pills every day	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>B.</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 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>C.</b>	<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 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>F.</b>	<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 [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>F1.</b>	<b>Intravag</b> Kind of Tissue to kill spermatozoa inserted into vagina	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>F2.</b>	<b>Female Condom / Femidom</b> A kind of condom designated for woman	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>G.</b>	<b>Tubal Ligation/Female Sterilization</b> A woman can undergo surgery to prevent pregnancy	3. No ↓ 1. Yes	3. No ↓ 1. Yes		
<b>I.</b>	<b>Abortion</b> A woman can do something or have someone do something to end a pregnancy	3. No ↓ 1. Yes	3. No ↓ 1. Yes	1. Yr [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] ↓ 8. DK	[ ] [ ] Years
<b>E.</b>	<b>Condom</b> A man can wear a condom during intercourse	3. No ↓ 1. Yes	3. No ↓ 1. Yes		
<b>H.</b>	<b>Vasectomy/Male Sterilization</b> A man can undergo surgery to prevent having another child	3. No ↓ 1. Yes <b>CX20</b>	3. No ↓ 1. Yes <b>→CX20</b>		

**SECTION CX (CONTRACEPTIVE USE)**

<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 → CP Coitus interruptus ..... 12 → CP Traditional Herbs ..... 13 → CP Traditional massage ..... 14 → CP Other ..... 95 → CP 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 Female condom/Femidom ..... 15
<b>CX21aa.</b> When did you first receive this method?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Month Year 8. DON'T KNOW
<b>CX21a.</b> When did you (last) receive this method?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> / <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 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 Village midwife/Village Polyclinic .....16 DON'T KNOW .....98 Other .....95

<b>CX21ba.</b> Where is it located?	<p style="text-align: right;"><input type="checkbox"/> (CODE CX21b)</p> <p>1. Sebutkan 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</p> <p><b>Name:</b> 1. _____ 8. DK _____</p> <p><b>Address:</b> 1. _____ 8. DK _____ _____ _____</p> <p><b>Loc. Note:</b> 1. _____ 8. DK _____ _____ _____</p> <p><b>Vill:</b> 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</p> <p><b>Kec:</b> 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</p> <p><b>Kab:</b> 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</p> <p><b>Prov:</b> 1. _____ 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</p> <p style="text-align: right;"><b>CODE COMFAS</b> <input type="checkbox"/><input type="checkbox"/></p>
<b>CX21c.</b> How much did it cost (including drugs, materials, services and other related costs)?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> , <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Rp. 8. DON'T KNOW
<b>CX21d.</b> INTERVIEWER CHECK: IS CX21=06 OR 10?	<b>YES, CX21=6 (CONDOM)..... 1→CX27</b> <b>YES, CX21=10 (MALE STERILIZATION)..... 2→SECTION CP</b> <b>NO..... 3</b>
<b>CX21e.</b> Was your blood pressure measured before the contraception was prescribed?	Yes ..... 1 No ..... 3

<b>HHID:</b> <input type="checkbox"/>	<b>PID:</b> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
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**SEKSI EP (EXPECTATION)**

<p><b>CX22.</b> In your visits to the provider who provides the method you are currently using, has the provider ever:</p> <p>a. Explained the possibility of side effects due to the use of the birth control device/method being used?</p> <p>b. Explained what has to be done or where to seek help if side effects occur?</p> <p>c. Asked about your health history before prescribing contraception?</p>	<p>Ever .....1 Never.....3 DON'T KNOW .....8</p> <p>Ever .....1 Never.....3 DON'T KNOW .....8</p> <p>Ever .....1 Never.....3 DON'T KNOW .....8</p>
<p><b>CX22d.</b> Since you started using the current method for birth control, have you ever had health problems or side effects?"</p>	<p>NO SIDE EFFECT ..... W → CX22h</p> <p>Gaining weight ..... A</p> <p>Losing weight ..... B</p> <p>Excessive bleeding on menstruation ..... C</p> <p>Irregular menstruation ..... D</p> <p>Flare-up of red facial rash ..... E</p> <p>Convulsions/cramps ..... F</p> <p>High blood pressure ..... G</p> <p>Headache ..... H</p> <p>Nausea ..... I</p> <p>Fatigue ..... J</p> <p>Skin problems ..... K</p> <p>Stomachache ..... L</p> <p>Not menstruating ..... M</p> <p>Other ..... V</p>
<p><b>CX22e.</b> Did you visit any medical facility for these side effects?</p>	<p>No ..... 3 → CX22h Yes ..... 1</p>
<p><b>CX22f.</b> When did you visit the medical facility? (<b>Most recent visit</b>)</p>	<p>month of ____ / year _____</p>

<p><b>CX22g.</b> Where is it located?</p> <p>1. Sebutkan</p> <p>3. Sama dengan tempat tinggal sekarang</p> <p>8. DON'T KNOW</p>	<p style="text-align: right;">____ (CODE CX21b)</p> <p><b>Name:</b> 1. _____ 8. DK</p> <p><b>Address:</b> 1. _____ 8. DK</p> <p>_____</p> <p>_____</p> <p><b>Loc. Note:</b> 1. _____ 8. DK</p> <p>_____</p> <p>_____</p> <p><b>Vill:</b> 1. _____</p> <p>3. Sama dengan tempat tinggal sekarang</p> <p>8. DON'T KNOW</p> <p><b>Kec:</b> 1. _____</p> <p>3. Sama dengan tempat tinggal sekarang</p> <p>8. DON'T KNOW</p> <p><b>Kab:</b> 1. _____</p> <p>3. Sama dengan tempat tinggal sekarang</p> <p>8. DON'T KNOW</p> <p><b>Prov:</b> 1. _____</p> <p>3. Sama dengan tempat tinggal sekarang</p> <p>8. DON'T KNOW</p> <p style="text-align: right;"><b>CODE COMFAS</b> _____</p>
<p><b>CX22h.</b> Before you/your husband use the current method, did you use any other birth control method?</p>	<p>No ..... 3 → CX27 Yes ..... 1</p>



**SECTION CP (INTERVIEW SESSION NOTES)**

**EVALUATION FORM FOR BOOK IV**

<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>_____</p> <p>_____</p>	<p><b>CP5.</b> WHAT QUESTIONS DID INTERVIEWER FIND DIFFICULT, EMBARRASSING, OR CONFUSING?</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><b>CP6.</b> WHAT QUESTIONS DID RESPONDENT SEEM INTERESTED IN?</p> <p>_____</p> <p>_____</p> <p>_____</p>
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**NOTES:**

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