

CONFIDENTIAL

INTERVIEWER: _____ [][] [][]

HHID : [][][][] [][][][] [][][][] [][][][]

PROXY: 1. Yes 3.No

INDONESIA FAMILY LIFE SURVEY 2014

BOOK IV

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

RESVIS.	RESPONDENT INTERVIEWED ?	1. Yes 3. No → C1
----------------	---------------------------------	----------------------

**Respondent is an ever-married woman age 15-49 years and respondent who was interviewed for Book IV and aged 50 maximum in 2007
(in 2014 will be 57 years old maximum)**

<p>COMPLETED FROM ROSTER</p> <p align="right">PID</p> <p>HOUSEHOLDER: _____ [][]</p> <p>PANEL(COV2) HOUSEHOLDER IS A:</p> <p>Panel Respondent (AR01h=1)..... 1</p> <p>New Respondent (AR01h=3)..... 3</p>	<p>TO BE FILLED OUT BY INTERVIEWER FOR BOOK IV</p> <p>AGE. How old are you? [][] years</p> <p>MARSTAT. What is your marital status? Married 2 Separated 3 Divorced 4 Widow 4 Cohabitate 5</p> <p>DOB. Date of birth..... [][] / [][] / [][][][] DAY MONTH YEAR</p>
---	---

SECTION KW (MARITAL HISTORY)

Now we would like to ask about your marital history.

KW00a. CAPI CHECK COV2: IS RESPONDENT A PANEL RESPONDENT FOR BOOK III (AR01g=1) WITH PREPRINTED KW ROSTER IN BOOK3A?	No..... 3→ KW03a Yes, panel with KW 3A preprinted 1
KW00b. When we interviewed you in 2007, we have the following information about your marital status at that time: INTERVIEWER: READ THE INFORMATION LISTED IN THE KW PREPRINTED ROSTER	1. Marital status : _____ 2. Name of last spouse/spouse in 2007 : _____ 3. PID of spouse : <input type="text"/>
KW00c. INTERVIEWER CHECK: IS THE INFORMATION IN KW00B CORRECT?	No..... 3→ KW03a Yes 1
KW00d. Since the 2007 interview have you had any changes in your marriage status?	No..... 3→ KW23a Yes 1

KW03a. What is your marital status?	Cohabitation 2 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
KW03. How many times have you been married ?	<input type="text"/> Times
KW02a. What is the name of your current/latest spouse/partner/partner?	_____
KW02a1 Do you have a marriage certificate with [...]?	Yes 1 →KW02g No 3
KW02a2 Reason not have a marriage certificate	<input type="text"/>
KW02g. CAPI CHECK: 1. IF SPOUSE/PARTNER LIVES IN THE HOUSEHOLD, FILL IN AR00 2. IF SPOUSE/PARTNER DIED/DOES NOT LIVE IN HOUSEHOLD, BUT REGISTERED IN ROSTER, FILL IN AR00 3. SPOUSE/PARTNER IS NOT REGISTERED IN ROSTER	1. <input type="text"/> 2. <input type="text"/> 3.

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 HealthCenter B Place of work C Midwife D Pharmacy F Private doctor G Hospital H Paramedic I Other V
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
KW02x. CAPI CHECK : KW03a=2 (COHABITATION?)	Yes 1 → KW02I No 3
KW02h. CAPI CHECK (COV2) 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. CAPI CHECK KW02i: Is the year at KW02i before 2007?	YES 1 →KW23a NO 3→KW12a
KW02i. When did you start living together with your spouse/partner ?	1. <input type="text"/> / <input type="text"/> Month Year 8. DON'T KNOW
KW02m. What was the value of the assets you owned just prior to of your living together with your spouse/partner?	<input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 1 DON'T KNOW 8
KW02n. What was the highest education level attended by your spouse/partner of the [...] marriage?	<input type="text"/>
KW02o. What was the highest grade completed by your spouse/partner ?	00 01 02 03 04 05 06 07 96 98 → KW23a

SECTION KW (MARITAL HISTORY)

KW12a. What was the dowry for your current/ most recent marriage? CIRCLE ALL THAT APPLY	NOTHING W→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 V
	_____ , _____ , _____ Rp. 1 _____ , _____ , _____ Other currency 2 DON'T KNOW 8
KW12b. 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

KW13a. 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? CIRCLE ALL THAT APPLY	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
	_____ , _____ , _____ Rp. 1 _____ , _____ , _____ Other currency 2 DON'T KNOW 8
KW13b. What was the value of the gift?	_____ , _____ , _____ Rp. 1 _____ , _____ , _____ 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?	_____ , _____ , _____ Rp. 1 DON'T KNOW 8
KW14a. Right after the wedding ceremony of your current/latest marriage, did you move?	NO, lived at the same place 3→KW14c YES, moved within the same village/town 2→KW14c YES, moved to another village/town 1
KW14b. 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
KW14c. How long did you reside at your first residence after the wedding?	01. _____ 04. Weeks 05. Months 06. Years 96. Still live there 98. DON'T KOW

KW14d. At the time you married your current/latest husband, did your spouse/partner change residence?	Yes 1 No 3
KW14d1. 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?	No 3 →KW14e Yes 1
KW14d2. How long did you live together before the wedding?	01. _____ 04. Weeks 05. Months 06. Years 98. DON'T KOW
KW14e. Did you and your current/latest spouse/partner start to live together right after the wedding?	No 3 →KW14g Yes 1

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 (<i>Madrasah Aliyah</i>) |
| 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 st 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>KW14f. 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. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 04. Weeks 05. Months 06. Years 98. DON'T KOW</p>
<p>KW14g. At the time you lived together with your current/latest spouse/partner for the first time, who else lived in the house? CIRCLE ALL THAT APPLY. IN THIS CASE THE WEDDING LOCATION IS NOT REGARDED AS A JOINT RESIDENCE (REFER TO ANSWER KW14e = 1 (YES)) AND RESIDENCE REGISTERED IN KW14b.</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>KW04. Who chose your husband (from your first marriage) ?</p>	<p>Parents 01 Self 03 Family 04 Other: 95</p>
<p>KW08. Please mention the names of all your husbands/partners, (starting with whom you are married now or the latest marriage, then the previous marriage and so forth). CAPI CHECK : KW08 REFER TO KW03 FOR PANEL RESPONDENT RECORD ONLY MARRIAGE IN 2007 AND AFTER .</p>	<p>WRITE DOWN NAMES IN KW09</p>

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 spouse/partner:	_____	_____	_____	_____	_____	_____
KW10.	What (month/year) did you get married?	1. ____ / ____ Month Year →KW11a 8. DON'T KNOW					
KW11.	How old were you when your [...] marriage started?	____ Years					
KW11a.	Because of adat and the high cost of wedding, many couples choose to live together before the wedding. Did you and your current/latest spouse/partner live together before the wedding?	1 Yes 3. No					
KW11b.	What was I status of your marriage	2 3 4 5 →KW20 6 7 8					
KW18.	When (month/year) did the marriage end/separation begin?	1. ____ / ____ Month Year →KW20 8. DON'T KNOW					
KW19.	How old were you when the [...] marriage ended/separation began?	____ Years					
KW20.	What was the highest education level attended by your husband/wife of the [...] marriage?	____	____	____	____	____	____
KW21.	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
KW22x.	CAPI CHECK: IS RESPONDENT: 3. NEW →KW22b 1. PANEL	3. →KW22b 1.					
KW22a.	CAPI CHECK KW10 FOR PANEL: 3. NO OTHER MARRIAGE 2. MARRIAGE BEGAN BEFORE 2007 1. MARRIAGE BEGAN AFTER 2006.....	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
KW22b.	CAPI CHECK: NUMBER OF MARRIAGESFOR 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

KODE KW11b 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	KODE KW20 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 _____	KODE KW21: 00. Didn't complete 1 st grade 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)

KW23a. If you could choose exactly the number of children to have in your whole life, how many would that be?	<input type="text"/> <input type="text"/> Children01 Up to God95
KW23b. How old were you on your first menstruation?	Never menstruated96 →KW24a <input type="text"/> <input type="text"/> Years01
KW23c. CAPI CHECK COV3:	RESPONDENT'S AGE <35 1 →KW24a RESPONDENT'S AGE ≥ 35 3
KW23d. Do you now still have menstruation?	Yes1 →KW24a No, because another reason (medication, contraception method, etc.).....2 →KW24a No (stop at all)3
KW23e. How old were you when you stopped having menstruation?	<input type="text"/> <input type="text"/> Years →SECTION BR

KW24a. Are you and your spouse/partner physically able to conceive a child (again) without medical help?	Yes 1 No 3
KW24b. Have you and your spouse/partner ever sought medical attention to help you conceive?	Yes 1 No 3
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?	<input type="text"/> <input type="text"/> Children01 Up to God95
KW27. Among the children that you (still) wish to have, how many sons and daughters do you wish to have?	01. a. <input type="text"/> <input type="text"/> Sons b. <input type="text"/> <input type="text"/> Daughters 95. Up to God

SECTION BR (PREGNANCY SUMMARY)

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

BR00x. CAPI CHECK:	NEW RESPONDENT 3 → BR01 PANEL RESPONDENT 1
BR00a. CAPI CHECK:	HAS CHILD ROSTER AND A CHILD LISTED AT CH00a 1 → BA00a HAS CHILD ROSTER AND NO CHILD LISTED AT CH00a 2 HAS NO CHILD ROSTER 3
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?	_ _ Males
BR04. How many biological daughters are now living with you?	_ _ Females
CAPI CHECK: 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?	_ _ Males
BR07. How many biological daughters are still alive, but do not live with you?	_ _ Females
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?	_ _ Males
BR10. How many daughters were born alive but passed away later?	_ _ Females
BR11. Have you ever had a pregnancy that resulted in a stillbirth?	No 3 → BR13 Yes 1
BR12. How many stillbirths have you had?	_ _
BR13. (Besides that) have you had any miscarriages?	No 3 → BR15 Yes 1
BR14. How many miscarriages have you had?	_ _
BR15. CAPI CHECK: ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE: To confirm your answers, you have had _ _ livebirths, is it correct ?	_ _ No 3 → REVISE BR01-BR10 Yes 1
BR16. CAPI CHECK: ADD THE NUMBERS (BR12 AND BR14) AND ENTER AMOUNT HERE: Again, to confirm your answers, you have had _ _ stillbirths and miscarriages, is it correct?	_ _ No 3 → REVISE BR12 and BR14 Yes 1
BR16a. CAPI CHECK BR00a.	HAVE ROSTER 2 → BA00a NO ROSTER 3 → BF00

CHILD ROSTER

BA00a. CAPI 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.	BA78.	BA79.	BA80.	BA81.	BA82a.	BA83a.	BA84.	BA84a.	BA84b.
	(NAME)	When [...] twelve years old, you and your husband married?	When [...] twelve years old, with whom did [...] live?	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?	CAPI CHECK BA65 AND BA65a: [...] STILL ALIVE?	How often do/did you meet with [] during the past year now/before his/her death?	How often do/did you have contact with [] by telephone during the past year now/before his/her death?	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 ↓ BA90x/BF	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 ↓ BA90x/BF	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 ↓ BA90x/BF	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 ↓ BA90x/BF	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 ↓ BA90x/BF	5→BA87a 1 2 3 4	5→BA87a 1 2 3 4	1 2 3 4 5

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

CODESFOR 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 _____

CODESFOR 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

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

CODESFOR 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-CO-RESIDENT 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 / BA90x/BF 3 → BA63b ROW 2 / BA90x/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 / BA90x/BF 3 → BA63b ROW 3 / BA90x/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 / BA90x/BF 3 → BA63b ROW 4 / BA90x/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 / BA90x/BF 3 → BA63b ROW 5 / BA90x/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 / BA90x/BF 3 → BA63b SUPPLEMENT / BA90x/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) CHILDROSTER 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 2007?	Birth Date Month/Year	Is [...] in this HH ?	Is [...] still alive?	Death Date Month/Year	Current Age/Age when died Yrs	CAPI CHECK: Age ≥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 ↓ 3 →	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 ↓ 3 →	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 ↓ 3 →	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 ↓ 3 →	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 ↓ 3 →	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 BA64C:
1. Yes
3. No

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 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

CODE BA70:

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 Papua	124. United Arab Emirates
004. In the same province	031. DKI Jakarta	064. East Kalimantan	094. Papua	131. Argentina
010. Sumatera	032. West Java	065. North Kalimantan	101. Malaysia	132. USA
011. Nanggroe Aceh Darussalam	033. Central Java	070. Sulawesi	102. Singapore	141. Australia
012. North Sumatra	034. D.I. Yogyakarta	071. North Sulawesi	103. Brunei Darussalam	151. Holland
013. West Sumatra	035. East Java	072. Central Sulawesi	104. Hongkong	152. England
014. Riau	036. Banten	073. South Sulawesi	105. Japan	998. DON'T KNOW
015. Jambi	051. Bali	074. Southeast Sulawesi	106. South Korea	995. Other
016. South Sumatra	052. West Nusa Tenggara	075. Gorontalo	107. Taiwan	
017. Bengkulu	053. East Nusa Tenggara	076. West Sulawesi	108. Timor Leste	

SECTION BA (NON-CO-RESIDENT CHILD ROSTER)

BF00. CAPI CHECK

PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER

1
↓
BF01

PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER

2
↓
BF09

NEW RESPONDENT

3
↓
BF09

BF01.	CAPI CHECK: NAME OF YOUNGEST CHILD (FROM CH00a).	_____
BF02.	Age of youngest child.	Years
BF03	CAPI CHECK: IS CHILD GREATER THAN 12 YEARS?	Yes 1 → BF09 No 3
BF04.	Did you ever breastfeed [...] even for a short period?	No 3 → BF09 Yes 1
BF05.	How old was [...] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	01. 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	01. 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 → BF09 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 V. OTHER _____
BF09	We want to ask you about your knowledge on breastfeeding. Until what age do you think a newborn should be breastfed exclusively?	 03. DAYS 04. WEEKS 05. MONTHS → CH00

SECTION CH (PREGNANCY HISTORY)

CH00. CAPI CHECK

PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER

1
↓
CH01a

PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER



2
CH01b

NEW RESPONDENT



3
CH01b

PANEL RESPONDENT WITH CHILD AT CH00a

**CH01a. CAPI CHECK: 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 → CH42b
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. CAPI CHECK: TOTAL OF PREGNANCIES (c + d + e)
 IF > 0 → CH03
IF = 0 → CH42b

NEW RESPONDENT OR PANEL RESPONDENT WITH NO CHILD AT CH00a

CH01b. CAPI CHECK: 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. CAPI CHECK: TOTAL OF PREGNANCIES (a+b+c)
 IF > 0 → CH03
IF = 0 → CH42b

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. CAPI CHECK: TOTAL OF COLUMNS TO BE FILLED OUT FROM CH02a/CH02b : <input type="text"/>
--

	[0 1]	[0 2]	[0 3]	[0 4]
CH05. Chronological order of pregnancy's outcome				
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: FILL 51 IF CHILD'S NAME ISN'T ON THE LIST FILL 52 IF CHILD HAS DIED.	_____ <input type="text"/>	_____ <input type="text"/>	_____ <input type="text"/>	_____ <input type="text"/>
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"/> <input type="text"/> Years			
CH10b. CAPI CHECK: USE AGE TO ESTIMATE CHILD'S YEAR OF BIRTH. (BIRTH YEAR OF MOTHER PLUS AGE AT CHILD'S BIRTH/MISCARRIAGE)	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
CH17. How far was/is the pregnancy when [...] was born/you had the miscarriage/now?	<input type="text"/> <input type="text"/> Month..... 05 Weeks..... 04 →CH06 COLUMN 2 / CH11	<input type="text"/> <input type="text"/> Month..... 05 Weeks..... 04 →CH06 COLUMN 3 / CH11	<input type="text"/> <input type="text"/> Month..... 05 Weeks..... 04 →CH06 COLUMN 4 / CH11	<input type="text"/> <input type="text"/> Month..... 05 Weeks..... 04 →CH06 SUPPLEMENT / CH11

CH11. CAPI 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]
CH12. CAPI CHECK: CH09/CH10B 3. PREGNANCY ENDED AFTER 2008 1. PREGNANCY ENDED BEFORE 2009	3 →CH14a 1	3 →CH14a 1	3 →CH14a 1	3 →CH14a 1
CH13. CAPI CHECK: 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
CH14a. 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
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..... 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]
CH16a. During the first 3 months of your pregnancy, how many visits did you make for prenatal care?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits
CH16b. During the second 3 months of your pregnancy, months 4 to 6, how many visits did you make for prenatal care?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 2nd trimester	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 2nd trimester	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 2nd trimester	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 2nd trimester
CH16c. During the third 3 months of your pregnancy, months 7 to 9, how many visits did you make for prenatal care?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 3rd trimester	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 3rd trimester	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 3rd trimester	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Visits 6. Not yet in 3rd trimester
CH16d. At any time during your pregnancy, did you receive the following services? a. Weight..... b. Height..... c. Blood pressure..... d. Blood test for hemoglobin..... e. Measure of height of fetus..... f. Listen to fetal heartbeat..... g. Internal Exam..... h. Measurement of hips.....	1. Yes 3. No 8. DON'T KNOW a. 1. 3. 8. b. 1. 3. 8. c. 1. 3. 8. d. 1. 3. 8. e. 1. 3. 8. f. 1. 3. 8. g. 1. 3. 8. h. 1. 3. 8.	1. Yes 3. No 8. DON'T KNOW a. 1. 3. 8. b. 1. 3. 8. c. 1. 3. 8. d. 1. 3. 8. e. 1. 3. 8. f. 1. 3. 8. g. 1. 3. 8. h. 1. 3. 8.	1. Yes 3. No 8. DON'T KNOW a. 1. 3. 8. b. 1. 3. 8. c. 1. 3. 8. d. 1. 3. 8. e. 1. 3. 8. f. 1. 3. 8. g. 1. 3. 8. h. 1. 3. 8.	1. Yes 3. No 8. DON'T KNOW a. 1. 3. 8. b. 1. 3. 8. c. 1. 3. 8. d. 1. 3. 8. e. 1. 3. 8. f. 1. 3. 8. g. 1. 3. 8. h. 1. 3. 8.
CH16e. At any time in your pregnancy did you receive an injection of TT to keep the baby from getting tetanus or convulsions at birth?	Yes1 No3 DON'T KNOW8	Yes 1 No 3 DON'T KNOW 8	Yes1 No3 DON'T KNOW8	Yes 1 No 3 DON'T KNOW 8
CH16f. At any time during your pregnancy did you take iron pills?	No.....3 →CH18 Yes1 DON'T KNOW8	No 3 →CH18 Yes 1 DON'T KNOW 8	No.....3 →CH18 Yes1 DON'T KNOW8	No 3 →CH18 Yes 1 DON'T KNOW 8
CH16g. How many iron pills did you take during your pregnancy?	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> pills 8. DON'T KNOW	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> pills 8. DON'T KNOW	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> pills 8. DON'T KNOW	1. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> pills 8. DON'T KNOW
CH18. CAPI CHECK : 1. CH06 = 1 (STILL PREGNANT)..... 3. CH06 = 2 OR 3 2. CH06 = 4	1. →CH12 COLUMN 2 / CH42b 3. → CH18a 2.	1. →CH12 COLUMN 3 / CH42b 3. → CH18a 2.	1. →CH12 COLUMN 4 / CH42b 3. → CH18a 2.	1. →CH12 SUPPLEMENT / CH42b 3. → CH18a 2.
CH18aa. 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..... CH12 COLUMN 2 / CH42b	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... CH12 COLUMN3 / CH42b	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... CH12 COLUMN4 / CH42b	01. Accident, fell, wrong drug 02. Aborted as doctor's recommended 03. Unwanted pregnancy 04. Sick 06. Too tired/too much work 95. Other..... CH12 SUPPLEMENT / CH42b
CH18a. At the time that you gave birth to [...], were you in labor for more than one day and night?	Yes1 No3 DON'T KNOW8	Yes 1 No 3 DON'T KNOW 8	Yes1 No3 DON'T KNOW8	Yes 1 No 3 DON'T KNOW 8

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
CH18b. At the time that you gave birth to [...] were you experiencing above normal bleeding?	Yes1 No3	Yes 1 No 3	Yes1 No3	Yes 1 No 3
CH18c. At the time that you gave birth to [...] were you experiencing high fever?	Yes1 No3	Yes 1 No 3	Yes1 No3	Yes 1 No 3
CH19. 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. DeliveryHospital.....	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]
CH20g. How much did you spend on care during the delivery? (out of pocket)	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW
CH20ga. Did you use insurance to pay for all or some of this visit?	No3 →CH20h Yes1	No 3 →CH20h Yes..... 1	No3 →CH20h Yes1	No 3 →CH20h Yes..... 1
CH20gb. What insurance did you use?	Askes01 Jamsostek02 Employer provided health benefits ..03 Private health insurance04 Savings related insurance05 SKTM.....06 Jamkesmas07 Jamkesda08 JKN09 Jampersal10 Other, mention95	Askes01 Jamsostek02 Employer provided health benefits ..03 Private health insurance04 Savings related insurance05 SKTM.....06 Jamkesmas07 Jamkesda08 JKN09 Jampersal10 Other, mention95	Askes01 Jamsostek02 Employer provided health benefits ..03 Private health insurance04 Savings related insurance05 SKTM.....06 Jamkesmas07 Jamkesda08 JKN09 Jampersal10 Other, mention95	Askes01 Jamsostek02 Employer provided health benefits ..03 Private health insurance04 Savings related insurance05 SKTM.....06 Jamkesmas07 Jamkesda08 JKN09 Jampersal10 Other, mention95
CH20gc. How much is the total cost of delivery, including those that will be paid or have already been paid by insurance??	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW
CH20gd. Do you expect to get reimbursement from insurance?	3. No → CH20h 1. Yes			
CH20ge. How much do you expect to be reimbursed?	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW	1.,, Rp. 8. DON'T KNOW	1.,, 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?	Yes1 No3	Yes 1 No 3	Yes1 No3	Yes 1 No 3
CH21. CAPI CHECK: 3. CH06 = 3 1. CH06 = 2 (LIVE BIRTH).....	3 → CH12 COLUMN 2 /CH42b 1	3 → CH12 COLUMN 3 /CH42b 1	3 → CH12 COLUMN 4 /CH42b 1	3 → CH12 SUPPLEMENT/CH42b 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?	No3 →CH24a Yes1	No 3 →CH24a Yes..... 1	No3 →CH24a Yes1	No 3 →CH24a Yes..... 1
CH24. To be exact, how many kilograms was [...]’s birth weight? Kg			
CH24a. Did you ever breastfeed [...] even for a short period?	No3 →CH25 Yes1	No 3 →CH25 Yes..... 1	No3 →CH25 Yes1	No 3 →CH25 Yes..... 1

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
CH24c. How old was [...] when he/she was first fed water (plain, sugared, honey, ice water, tea)?	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
CH24d. 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
CH24e. For how many months did you breastfeed [...]?	96. Still Breastfeeding → CH25 05. <input type="text"/> <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding	96. Still Breastfeeding → CH25 05. <input type="text"/> <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding	96. Still Breastfeeding → CH25 05. <input type="text"/> <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding	96. Still Breastfeeding → CH25 05. <input type="text"/> <input type="text"/> <input type="text"/> Months 88. Died While Breastfeeding
CH24f. Why did you stop breastfeeding [...]? CIRCLE ALL THAT APPLY				
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
V. Other.....	V _____	V _____	V _____	V _____
CH25. Is [...] still alive?	Yes 1 → CH27 No 3			

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
CH26. How old was [...] when he/she died? Days 03 weeks 04 Months 05 Years 06	 Days 03 weeks 04 Months 05 Years 06	 Days 03 weeks 04 Months 05 Years 06	 Days 03 weeks 04 Months 05 Years 06	 Days 03 weeks 04 Months 05 Years 06
CH27. CAPI CHECK: IS [...] LISTED IN THE HH ROSTER? 1. YES, AR00 = [...] (PID)..... 2. YES, BUT DIED OR NOT LIVE IN HOUSEHOLD, AR00..... 3. NO	1 2 3	1 2 3	1 2 3	1 2 3
CH27x. CAPI CHECK CH00: 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
CH27b. CAPI 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).....	1 →CH12 COLUMN 2 / CH42b 3 5	1 →CH12 COLUMN 3 / CH42b 3 5	1 →CH12 COLUMN 4 / CH42b 3 5	1 →CH12 SUPPLEMENT / CH42b 3 5
CH28a. 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
CH28b. CAPI CHECK CH25 STILL ALIVE?	Yes 1 → CH30a No 3			
CH29a. 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
CH29b. 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
CH30a. Marital status (now/at death): 01. Single 02. Married 03. Separated..... 04. Divorced 05. Widow/widower 98. DON'T KNOW	01 02 03 04 05 98	01 02 03 04 05 98	01 02 03 04 05 98	01 02 03 04 05 98

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
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
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 JuniorHigh 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 _____
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
CH32b. When [...] were twelve years old were you and your spouse/partner married?	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA
CH32c. Were [...] living with you when [...] were twelve ?	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA	1. Yes 3. No 6.NA

SECTION CH (PREGNANCY HISTORY)

	[0 1]	[0 2]	[0 3]	[0 4]
CH32d. What was your primary activity when [...] was 12 years old ? 02. Job searching 02 03. Attending school 03 04. Housekeeping 04 05. Retired 05 06. Stay at home/unemployed 06 07. Sick/disabled 07 98. DON'T KNOW 98 01. Working/trying to get work/ helping to earn income 01 95. Other: 95 →CH37a				
CH33a. Where does/did [...] live now/before his/her death? _____ [] [] [] []	00 → CH12 COLUMN 2 / CH42b _____ [] [] [] []	00 → CH12 COLUMN 3 / CH42b _____ [] [] [] []	00 → CH12 COLUMN 4 / CH42b _____ [] [] [] []	00 → CH12 SUPPLEMENT / CH42b _____ [] [] [] []
CH34a. What is/was [...]’s primary activity now/before his/her death? 02. Job searching 02 →CH37a 03. Attending school 03 →CH37a 04. Housekeeping 04 →CH37a 05. Retired 05 →CH37a 06. Stay at home/unemployed 06 →CH37a 07. Sick/disabled 07 →CH37a 98. DON'T KNOW 98 →CH37a 01. Working/trying to get work/ helping to earn income 01 95. Other: 95 →CH37a				
CH35a. What is/was [...]’s work status now/before his/her death? 01. Self-employed 01 02. Self-employed assisted other family members/temporary employees 02 03. Self-employed with permanent employees 03 04. Government worker/employee 04 05. Private worker/employee 05 06. Unpaid family worker 06 98. DON'T KNOW 98				

CODE CH33a:			
000. In this household	018. Lampung	060. Kalimantan	081. Maluku
001. In the same village	019. Bangka Belitung	061. West Kalimantan	082. North Maluku
002. In the same subdistrict	020. RiauIslands	062. Central Kalimantan	090. Irian
003. In the same district	030. Java	063. South Kalimantan	091. West Irian Jaya
004. In the same province	031. DKI Jakarta	064. East Kalimantan	094. Papua
010. Sumatera	032. West Java	070. Sulawesi	101. Malaysia
011. Nanggroe Aceh Darussalam	033. Central Java	071. North Sulawesi	102. Singapore
012. North Sumatra	034. D.I. Yogyakarta	072. Central Sulawesi	103. Brunei Darussalam
013. West Sumatra	035. East Java	073. South Sulawesi	104. Hongkong
014. Riau	036. Banten	074. Southeast Sulawesi	105. Japan
015. Jambi	051. Bali	075. Gorontalo	106. South Korea
016. South Sumatra	052. West Nusa Tenggara	076. West Sulawesi	107. Taiwan
017. Bengkulu	053. East Nusa Tenggara		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)

	[0 1]	[0 2]	[0 3]	[0 4]
CH36b. What is/was [...]’s primary duty now/before his/her death?	_____	_____	_____	_____
CH37a. 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
CH37b. 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
CH37c. 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
CH38a. 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)

	[0 1]	[0 2]	[0 3]	[0 4]
<p>CH39a. 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>CH40a. 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>CH41a. 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>CH42b. 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>
---	--

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. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.	7 → BX63b ROW 2 / BX90x / EP 3 → BX63b ROW 2 / BX90x / EP 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.
		7 → BX89a 3 → BX89a 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.	7 → BX63b ROW 3 / BX90x / EP 3 → BX63b ROW 3 / BX90x / EPP 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.
		7 → BX89a 3 → BX89a 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.	7 → BX63b ROW 4 / BX90x / EP 3 → BX63b ROW 4 / BX90x / EP 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.
		7 → BX89a 3 → BX89a 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.	7 → BX63b ROW 5 / BX90x / EP 3 → BX63b ROW 5 / BX90x / EP 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.
		7 → BX89a 3 → BX89a 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.	7 → BX63b SUPPLEMENT / BX90x / EP 3 → BX63b SUPPLEMENT / BX90x / EP 1	A. [] [] [] [] . [] [] [] [] Rp. D. [] [] [] [] . [] [] [] [] Rp. G. [] [] 03. Days 05. Months H. [] [] 03. Days 05. Months V. [] [] [] [] . [] [] [] [] Rp.

BX90x	Is there any other child age 7 or above, biological or non-biological, co-residing or non-coresiding, who is not on the list?	1. Yes → ADD THE CHILD TO BX63b 3. No → SECTION TF
--------------	---	---

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 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

CODE BX70:
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 EP (EXPECTATION)

EP02. CAPI CHECK: PANEL RESPONDENT FOR BOOK IV?	YES 1 → EP NO 3
EP03. Do you have children (biological/non-biological children) that lives in or outside this household?	No 3 → SECTION CX Yes 1
EP04. How many children do you have?	□□□ → EP05

SECTION EP (EXPECTATION)

CAPI 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?	CAPI 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

EP 19X. Is there any child (biological or non-biological) aged 7-24 that is not listed?
 1. Yes → EP 04
 3. No → SECTION CX

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 completter 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

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

SECTION CX (CONTRACEPTIVE USE)

CX20. Do you/does your husband now use a device/method to postpone or prevent a pregnancy?	No 3 → CX26 Yes 1
CX21. 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
CX21aa. When did you first receive this method?	1. / Month Year 8. DON'T KNOW
CX21a. When did you (last) receive this method?	1. / Month Year 8. DON'T KNOW
CX21b. 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

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

HHID: □ □ □ □ □ □ □ □ □ □	PID: □ □
----------------------------------	-----------------

SECTION CX (CONTRACEPTIVE USE)

<p>CX22. 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>CX22d. 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 Gaining weight A Losing weight B Excessive bleeding on menstruation C Irregular menstruation D Flare-up of red facial rash E Convulsions/cramps F High blood pressure G Headache H Nausea I Fatigue J Skin problems K Stomachache L Not menstruating M Other V</p>
<p>CX22e. Did you visit any medical facility for these side effects?</p>	<p>No 3 → CX22h Yes 1</p>
<p>CX22f. When did you visit the medical facility? (Most recent visit)</p>	<p>month of ____ / year _____</p>

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

HHID: _____	PID: _____
--------------------	-------------------

SECTION CX (CONTRACEPTIVE USE)

CX22i. What was the method you/your husband using before?	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
	Female Condom (Femidom).....	15
	DON'T KNOW.....	98
Other.....	95	
CX22j. What was the reason you stopped using the method?	(Got) pregnant while using.....	A
	Wants to get pregnant	B
	Husband's objection.....	C
	Side effects.....	D
	Health problems.....	E
	Difficulty in getting pregnant	F
	Wants more effective methods	G
	Uncomfortable	H
	Husband was absent	I
	Too expensive	J
	Menopause.....	K
	Divorced/widow.....	L
	Detached (device).....	M
	Too hard to use/tired of using	N
	Method not available.....	O
Other.....	V	

→CX27

CX26. Why don't you/ your husband currently use any of the birth control devices/methods to prevent pregnancy? (CIRCLE ALL THAT APPLY)	MENOPAUSE/HYSTERECTOMY	P	→SECTION CP
	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		
DIVORCEE/WIDOW	P		
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		
CX27. Do you/your husband plan to use a birth control device/method to postpone/prevent pregnancy in the future?	No.....	3	→SECTION CP
	DON'T KNOW.....	8	→SECTION CP
	Yes.....	1	
CX28. 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	
	Female Condom (Femidom).....	15	
DON'T KNOW.....	98		
Other.....	95		

SECTION CP (INTERVIEW SESSION NOTES)

LANGMAIN. Interview was entirely/mostly conducted in what language?	<input type="checkbox"/> Other _____				
LANGOTHR. Other language used (if any):	<input type="checkbox"/> Other _____				
CODES FOR LANGUAGE:					
00. Indonesian	04. Batak	08. Sasak	12. Makassar	16. Toraja	20. Lampung
01. Javanese	05. Bugis	09. Minang	13. Nias	17. Lahat	95. Other, _____
02. Sundanese	06. Chinese	10. Banjar	14. Palembang	18. Other South Sumatera	96. NO OTHER
03. Balinese	07. Maduranese	11. Bima	15. Sumbawa	19. Betawi	

C1. RESULT OF INTERVIEW OF BOOK IV	C2. REASON	C3. REVIEW BY EDITOR	C4. LOCAL SUPERVISOR MONITORING	
1. Completed → C3 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: _____	Yes	No
			a. Observed by local supervisor 1	3
			b. Edited by local supervisor 1	3
			c. Verified by local supervisor 1	3

