

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 PREPINTED KW ROSTER IN BOOK3A?	No..... 3→ KW03a Yes, panel with KW 3A preprinted 1
KW00b. When we interviewed you in 2007, we have the follwing 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. <input type="text"/>

KW02b. In the last 4 weeks, have you taken iron pills?	No 3 →KW02e Yes 1
KW02c. In the last 4 weeks, how many iron pills did you take?	<input type="text"/> 1 DON'T KNOW 8
KW02d. Where did you get these pills? CIRCLE ALL THAT APPLY	Posyandu A 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
KW02l. 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

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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
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
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

CODE KW02n:		CODE KW02o:	
01. None	12. Adult Education B	00. Didn't complete 1 st grade at that level	
02. Elementary School	13. Open University	01. 1	
03. Junior High General	14. Islamic School (<i>Pesantren</i>)	02. 2	
04. Junior High Vocational	15. Adult Education C	03. 3	
05. Senior High General	17. School for disabled	04. 4	
06. Senior High Vocational	72. Islamic Elementary School (<i>Madrasah Ibtidaiyah</i>)	05. 5	
60. College (D1, D2, D3)	73. Islamic Junior High (<i>Madrasah Tsanawiyah</i>)	06. 6	
61. University (BA)	74. Islamic Senior High (Madrasah Aliyah)	07. Graduated	
62. University (MA)	90. Kindergarten	96. Unschooled	
63. University (PhD)	98. DON'T KNOW	98. DON'T KNOW	
11. Adult Education A	95. Other		

<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</p> <p>01. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 04. Weeks</p> <p>05. Months</p> <p>06. Years</p> <p>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?</p> <p>CIRCLE ALL THAT APPLY.</p> <p>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</p> <p>Own Parents B</p> <p>Parents-In-Law C</p> <p>Biological Brother D</p> <p>Biological Sister E</p> <p>Brother-In-Law F</p> <p>Sister-In-Law G</p> <p>Other Family Members H</p> <p>Not Family-Related I</p> <p>Biological Child J</p>
<p>KW04. Who chose your husband (from your first marriage) ?</p>	<p>Parents 01</p> <p>Self 03</p> <p>Family 04</p> <p>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	1. ____ / ____ Month Year →KW11a 8. DON'T KNOW	1. ____ / ____ Month Year →KW11a 8. DON'T KNOW	1. ____ / ____ Month Year →KW11a 8. DON'T KNOW	1. ____ / ____ Month Year →KW11a 8. DON'T KNOW	1. ____ / ____ Month Year →KW11a 8. DON'T KNOW
KW11.	How old were you when your [...] marriage started?	____ Years	____ Years	____ Years	____ Years	____ Years	____ 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	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No	1 Yes 3. No
KW11b.	What was I status of your marriage	2 3 4 5 →KW20 6 7 8	2 3 4 5 →KW20 6 7 8	2 3 4 5 →KW20 6 7 8	2 3 4 5 →KW20 6 7 8	2 3 4 5 →KW20 6 7 8	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	1. ____ / ____ Month Year →KW20 8. DON'T KNOW	1. ____ / ____ Month Year →KW20 8. DON'T KNOW	1. ____ / ____ Month Year →KW20 8. DON'T KNOW	1. ____ / ____ Month Year →KW20 8. DON'T KNOW	1. ____ / ____ Month Year →KW20 8. DON'T KNOW
KW19.	How old were you when the [...] marriage ended/separation began?	____ Years	____ Years	____ Years	____ Years	____ Years	____ Years
KW20.	What was the highest education level attended by your husband/wife of the [...] marriage?	____	____	____	____	____	____
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.	3. →KW22b 1.	3. →KW22b 1.	3. →KW22b 1.	3. →KW22b 1.	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	KODE KW20				KODE KW21:
2. Cohabitation	01. None	61. University (BA)	15. Adult Education C	95. Other_____	00. Didn't complete 1 st gradeat that level
3. Married formal (KUA or civil registration)	02. Elementary School	62. University (MA)	17. School for disabled		01. 1
4. Married,formal according to religious law	03. Junior High General	63. University (PhD)	72. Islamic Elementary School (<i>Madrasah Ibtidaiyah</i>)		02. 2 06. 6
5. Married,formal according to adat law	04. Junior High Vocational	11. Adult Education A	73. Islamic Junior High (<i>Madrasah Tsanawiyah</i>)		03. 3 07. Graduated
6. Separated	05. Senior High General	12. Adult Education B	74. Islamic Senior High (Madrasah Aliyah)		04. 4 96. Unschooled
7. Divorced	06. Senior High Vocational	13. Open University	90. Kindergarten		05. 5 98. DON'T KNOW
8. Widow/widower	60. College (D1, D2, D3)	14. Islamic School (<i>Pesantren</i>)	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?	<div><div></div><div></div><div></div> Children01</div> <div>Up to God95</div>
KW23b. How old were you on your first menstruation?	<div>Never menstruated96 →KW24a</div> <div><div></div><div></div><div></div> Years.....01</div>
KW23c. CAPI CHECK COV3:	RESPONDENT'S AGE <35..... 1 →KW24a RESPONDENT'S AGE ≥ 35 3
KW23d. Do you now still have menstruation?	<div>Yes1 →KW24a</div> <div>No, because another reason (medication, contraception method, etc.).....2 →KW24a</div> <div>No (stop at all)3</div>
KW23e. How old were you when you stopped having menstruation?	<div><div></div><div></div><div></div> Years →SECTION BR</div>

KW24a. Are you and your spouse/partner physically able to conceive a child (again) without medical help?	<div>Yes 1</div> <div>No 3</div>
KW24b. Have you and your spouse/partner ever sought medical attention to help you conceive?	<div>Yes 1</div> <div>No 3</div>
KW25. Do you personally wish to have another child (besides the children you already have)?	<div>No 3→SECTION BR</div> <div>Yes 1</div>
KW26. How many (more) children do you wish to have?	<div><div></div><div></div><div></div> Children01</div> <div>Up to God95</div>
KW27. Among the children that you (still) wish to have, how many sons and daughters do you wish to have?	<div>01. a. <div><div></div><div></div><div></div> Sons</div></div> <div>b. <div><div></div><div></div><div></div> Daughters</div></div> <div>95. Up to God</div>

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?	<div><div></div><div></div><div></div></div> <div>Males</div>
BR04. How many biological daughters are now living with you?	<div><div></div><div></div><div></div></div> <div>Females</div>
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?	<div><div></div><div></div><div></div></div> <div>Males</div>
BR07. How many biological daughters are still alive, but do not live with you?	<div><div></div><div></div><div></div></div> <div>Females</div>
BR08. Have you ever given live birth to a son or daughter, even one who lived only for a short a while?	No 3 → BR11 Yes 1

BR09. How many sons were born alive but passed away later?	<div><div></div><div></div><div></div></div> <div>Males</div>
BR10. How many daughters were born alive but passed away later?	<div><div></div><div></div><div></div></div> <div>Females</div>
BR11. Have you ever had a pregnancy that resulted in a stillbirth?	No 3 → BR13 Yes 1
BR12. How many stillbirths have you had?	<div><div></div><div></div><div></div></div>
BR13. (Besides that) have you had any miscarriages?	No 3 → BR15 Yes 1
BR14. How many miscarriages have you had?	<div><div></div><div></div><div></div></div>
BR15. CAPI CHECK: ADD THE NUMBERS (BR03, BR04, BR06, BR07, BR09, AND BR10) AND ENTER AMOUNT HERE: To confirm your answers, you have had <div><div></div><div></div><div></div></div> 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 <div><div></div><div></div><div></div></div> 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 _____	<table><tr><td></td><td></td></tr></table>			_____ _____	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 _____	<table><tr><td></td><td></td></tr></table>			_____ _____	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 _____	<table><tr><td></td><td></td></tr></table>			_____ _____	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 _____	<table><tr><td></td><td></td></tr></table>			_____ _____	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 _____	<table><tr><td></td><td></td></tr></table>			_____ _____	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 _____	<table><tr><td></td><td></td></tr></table>			_____ _____	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-CORESIDENT CHILD ROSTER)

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

	BA63a.	BA63b.	BA87a.	BA88.	BA89a.	BA90.
		(NAMA)	In the past 12 months, did you provide assistance to [...] in the form of money, goods, or services?	What type of assistance did you provide to [...] and what is the value? (CIRCLE AND FILL ALL THAT APPLY)	In the past 12 months, did you receive assistance from [...] in the form of money, goods, or services?	What type of assistance did you receive to [...] and what is the value? (CIRCLE AND FILL ALL THAT APPLY)
			7 ➔BA89a 3 ➔BA89a 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.	7➔BA63b ROW 2 / BA90x/BF 3 ➔BA63b ROW 2 / BA90x/BF 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.
			7 ➔BA89a 3 ➔BA89a 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.	7➔BA63b ROW 3 / BA90x/BF 3 ➔BA63b ROW 3 / BA90x/BF 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.
			7 ➔BA89a 3 ➔BA89a 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.	7➔BA63b ROW 4 / BA90x/BF 3 ➔BA63b ROW 4 / BA90x/BF 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.
			7 ➔BA89a 3 ➔BA89a 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.	7➔BA63b ROW 5 / BA90x/BF 3 ➔BA63b ROW 5 / BA90x/BF 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.
			7 ➔BA89a 3 ➔BA89a 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp.	7➔BA63b SUPPLEMENT / BA90x/BF 3 ➔BA63b SUPPLEMENT / BA90x/BF 1	A. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. D. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Rp. G. <input type="text"/> <input type="text"/> 03. Days 05. Months H. <input type="text"/> <input type="text"/> 03. Days 05. Months V. _____ <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 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-CORESIDENT 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?
<div> </div>	01		<div>1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ↓</div>	<div> </div>		<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1 3 → ↓</div>	<div>1→BA66 8→BA66 3</div>	<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1. years 8. DK</div>	<div>3 1 → ↓</div>	<div> </div>	<div> </div>	<div> </div>	00→BA63b ROW 2 <div> </div>
<div> </div>	02		<div>1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ↓</div>	<div> </div>		<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1 3 → ↓</div>	<div>1→BA66 8→BA66 3</div>	<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1. years 8. DK</div>	<div>3 1 → ↓</div>	<div> </div>	<div> </div>	<div> </div>	00→BA63b ROW 2 <div> </div>
<div> </div>	03		<div>1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ↓</div>	<div> </div>		<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1 3 → ↓</div>	<div>1→BA66 8→BA66 3</div>	<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1. years 8. DK</div>	<div>3 1 → ↓</div>	<div> </div>	<div> </div>	<div> </div>	00→BA63b ROW 2 <div> </div>
<div> </div>	04		<div>1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ↓</div>	<div> </div>		<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1 3 → ↓</div>	<div>1→BA66 8→BA66 3</div>	<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1. years 8. DK</div>	<div>3 1 → ↓</div>	<div> </div>	<div> </div>	<div> </div>	00→BA63b ROW 2 <div> </div>
<div> </div>	05		<div>1 → 2 ↓ 3 ↓ 7 ↓ 8 ↓ 6 ↓</div>	<div> </div>		<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1 3 → ↓</div>	<div>1→BA66 8→BA66 3</div>	<div>1. / Month / Year 8. DON'T KNOW</div>	<div>1. years 8. DK</div>	<div>3 1 → ↓</div>	<div> </div>	<div> </div>	<div> </div>	00→BA63b ROW 2 <div> </div>

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 completer 1 st 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
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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. RiauIslands 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 065. North 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 Papua 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
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SECTION BA (NON-CORESIDENT CHILD ROSTER)

BF00. CAPI CHECK		
<div>PANEL RESPONDENT WITH CHILD LISTED AT CH00a IN CHILD ROSTER</div> <div>1 ↓ BF01</div>	<div>PANEL RESPONDENT WITH NO CHILD LISTED AT CH00a IN CHILD ROSTER</div> <div>2 ↓ BF09</div>	<div>NEW RESPONDENT</div> <div>3 ↓ BF09</div>

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

PANEL RESPONDENT WITH CHILD AT CH00a	
CH01a. 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"/>				
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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: 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"/> Years	<input type="text"/> Years	<input type="text"/> Years	<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"/>	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"/> Month05 Weeks04 →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
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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 legA Difficulty of vision during dayB Difficulty of vision during nightC Vaginal bleedingD FeverE Convulsion and faintingF Labor before 9 monthsG 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]
<div>CH15a. What is the name and location of the provider you visited?</div> <div>(IF MORE THAN 1, ASK ABOUT PROVIDER VISITED MOST FREQUENTLY.)</div> <div>3. Same as residence</div> <div>8. DON'T KNOW</div>	<div>□ (CODE CH15)</div> <div>Name 8. DON'T KNOW</div> <div>1. _____</div> <div>Address 8. DON'T KNOW</div> <div>1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. □ □ □ □ □ □ □ □</div>	<div>□ (CODE CH15)</div> <div>Name 8. DON'T KNOW</div> <div>1. _____</div> <div>Address 8. DON'T KNOW</div> <div>1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. □ □ □ □ □ □ □ □</div>	<div>□ (CODE CH15)</div> <div>Name 8. DON'T KNOW</div> <div>1. _____</div> <div>Address 8. DON'T KNOW</div> <div>1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. □ □ □ □ □ □ □ □</div>	<div>□ (CODE CH15)</div> <div>Name 8. DON'T KNOW</div> <div>1. _____</div> <div>Address 8. DON'T KNOW</div> <div>1. _____</div> <div>Loc. Note _____</div> <div>A. Vill: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>B. Kec: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>C. Kab: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>D. Prov: 1. _____</div> <div>3. Same 8. DON'T KNOW</div> <div>CODE COMFAS. □ □ □ □ □ □ □ □</div>

HHID: □ □ □ □ □ □ □ □ □ □ PID: □ □

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="text"/> Visits	1. <input type="text"/> Visits	1. <input type="text"/> Visits	1. <input type="text"/> 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="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
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="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
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	No3 ➔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="text"/> pills 8. DON'T KNOW	1. <input type="text"/> pills 8. DON'T KNOW	1. <input type="text"/> pills 8. DON'T KNOW	1. <input type="text"/> pills 8. DON'T KNOW
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]
CH19a. What is the name and location of the place you delivered [...]? 1. Specify 3. Same as residence 8. DON'T KNOW	Name 8. DON'T KNOW 1. _____ Address 8. DON'T KNOW 1. _____ Loc. Note _____ A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW CODE COMFAS. ____	Name 8. DON'T KNOW 1. _____ Address 8. DON'T KNOW 1. _____ Loc. Note _____ A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW CODE COMFAS. ____	Name 8. DON'T KNOW 1. _____ Address 8. DON'T KNOW 1. _____ Loc. Note _____ A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW CODE COMFAS. ____	Name 8. DON'T KNOW 1. _____ Address 8. DON'T KNOW 1. _____ Loc. Note _____ A. Vill: 1. _____ 3. Same 8. DON'T KNOW B. Kec: 1. _____ 3. Same 8. DON'T KNOW C. Kab: 1. _____ 3. Same 8. DON'T KNOW D. Prov: 1. _____ 3. Same 8. DON'T KNOW CODE COMFAS. ____
CH20. Who provided care during [...]’s birth? (CIRCLE ALL THAT APPLY)	NOBODY W→ CH20c Physician A Private midwife B Village midwife C Nurse D Traditional birth attendant E Family H Other V	NOBODY W→ CH20c Physician A Private midwife B Village midwife C Nurse D Traditional birth attendant E Family H Other V	NOBODY W→ CH20c Physician A Private midwife B Village midwife C Nurse D Traditional birth attendant E Family H Other V	NOBODY W→ CH20c Physician A Private midwife B Village midwife C Nurse D Traditional birth attendant E Family H Other V
CH20c. What factors led you to choose this delivery site/attendant? (CIRCLE ALL THAT APPLY)	Cheap A Nearby B Feel Safe C More Comfortable D Modern Service E Habit G Family reason H Few choices I Medical reasons (abnormality) K Too early delivery L Recommended by doctor/midwife M Other V	Cheap A Nearby B Feel Safe C More Comfortable D Modern Service E Habit G Family reason H Few choices I Medical reasons (abnormality) K Too early delivery L Recommended by doctor/midwife M Other V	Cheap A Nearby B Feel Safe C More Comfortable D Modern Service E Habit G Family reason H Few choices I Medical reasons (abnormality) K Too early delivery L Recommended by doctor/midwife M Other V	Cheap A Nearby B Feel Safe C More Comfortable D Modern Service E Habit G Family reason H Few choices I Medical reasons (abnormality) K Too early delivery L Recommended by doctor/midwife M Other V

HHID: PID:

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. <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
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 JKN.....09 Jampersal10 Other, mention95	Askes01 Jamsostek02 Employer provided health benefits..03 Private health insurance.....04 Savings related insurance.....05 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 JKN.....09 Jampersal10 Other, mention95	Askes01 Jamsostek02 Employer provided health benefits..03 Private health insurance.....04 Savings related insurance.....05 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. <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
CH20gd. Do you expect to get reimbursement from insurance?	3. No ➔ CH20h 1. Yes	3. No ➔ CH20h 1. Yes	3. No ➔ CH20h 1. Yes	3. No ➔ CH20h 1. Yes
CH20ge. How much do you expect to be reimbursed?	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW	1. <input type="text"/> , <input type="text"/> , <input type="text"/> Rp. 8. DON'T KNOW
CH20h. In the first 40 days after the baby was born, did you receive any follow-up care from the person who delivered the baby?	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?	<input type="text"/> . <input type="text"/> <input type="text"/> Kg	<input type="text"/> . <input type="text"/> <input type="text"/> Kg	<input type="text"/> . <input type="text"/> <input type="text"/> Kg	<input type="text"/> . <input type="text"/> <input type="text"/> 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. 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. 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. 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. 03. Days 04. Weels 05. Months 88. Died Before Ever Fed 96. Not Yet Fed	01. 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. Months 88. Died While Breastfeeding	96. Still Breastfeeding → CH25 05. Months 88. Died While Breastfeeding	96. Still Breastfeeding → CH25 05. Months 88. Died While Breastfeeding	96. Still Breastfeeding → CH25 05. 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	Yes 1 → CH27 No 3	Yes 1 → CH27 No 3	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?	<div><div></div><div></div><div></div></div> <div>Days 03</div> <div>weeks 04</div> <div>Months..... 05</div> <div>Years 06</div>	<div><div></div><div></div><div></div></div> <div>Days 03</div> <div>weeks 04</div> <div>Months 05</div> <div>Years..... 06</div>	<div><div></div><div></div><div></div></div> <div>Days 03</div> <div>weeks 04</div> <div>Months..... 05</div> <div>Years 06</div>	<div><div></div><div></div><div></div></div> <div>Days 03</div> <div>weeks 04</div> <div>Months 05</div> <div>Years..... 06</div>
CH27. CAPI CHECK: IS [...] LISTED IN THE HH ROSTER?				
1. YES, AR00 = <div><div></div><div></div><div></div></div> (PID).....	1 <div><div></div><div></div><div></div></div>	1 <div><div></div><div></div><div></div></div>	1 <div><div></div><div></div><div></div></div>	1 <div><div></div><div></div><div></div></div>
2. YES, BUT DIED OR NOT LIVE IN HOUSEHOLD, AR00.....	2 <div><div></div><div></div><div></div></div>	2 <div><div></div><div></div><div></div></div>	2 <div><div></div><div></div><div></div></div>	2 <div><div></div><div></div><div></div></div>
3. NO	3	3	3	3
CH27x. CAPI CHECK CH00:				
1. PANEL WITH CHILD ROSTER	1 ➔CH12 COLUMN 2 / CH42b	1 ➔CH12 COLUMN 3 / CH42b	1 ➔CH12 COLUMN 4 / CH42b	1 ➔CH12 SUPPLEMENT / CH42b
3. PANEL WITHOUT CHILD ROSTER OR NEW	3	3	3	3
CH27b. CAPI CHECK CH25 AND CH27:				
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
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	Yes 1 ➔ CH30a No 3	Yes 1 ➔ CH30a No 3	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	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]
CH31a. Highest education level attained by non-householder: 01. No school/Not yet in School 02. Elementary 03. Jr. Hi General 04. Jr. Hi Vocational 05. Sr. Hi General 06. Sr. Hi Vocational 60. College, D1, D2, D3 61. University (Bachelors) 62. University (Masters) 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 the Disabled 70. Madrasah, General 72. Islamic Elementary School (Madrasah Ibtidaiyah) 73. Islamic JuniorHigh School (Madrasah Tsanawiyah) 74. Islamic Senior High School (Madrasah Aliyah) 90. Kindergarten 98. DON'T KNOW 10. Other:	 01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____	 01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____	 01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____	 01 02 03 04 05 06 60 61 62 63 11 12 13 14 15 17 70 72 73 74 90 98 95 _____
CH32a. Highest grade completed by non-householder: 00. Did not complete 1st class..... 01. 1 02. 2 03. 3 04. 4 05. 5 06. 6 07. Graduated 96. NO SCHOOL 98. DON'T KNOW	 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
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 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
CH33a. Where does/did [...] live now/before his/her death?	00 → CH12 COLUMN 2 / CH42b _____	00 → CH12 COLUMN 3 / CH42b _____	00 → CH12 COLUMN4 / CH42b _____	00 → CH12 SUPPLEMENT / CH42b _____
CH34a. What is/was [...]’s primary activity now/before his/her death? 02. Job searching 03. Attending school 04. Housekeeping..... 05. Retired..... 06. Stay at home/unemployed 07. Sick/disabled 98. DON'T KNOW 01. Working/trying to get work/ helping to earn income 95. Other:	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a 01 95 _____ →CH37a	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a 01 95 _____ →CH37a	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a 01 95 _____ →CH37a	02 →CH37a 03 →CH37a 04 →CH37a 05 →CH37a 06 →CH37a 07 →CH37a 98 →CH37a 01 95 _____ →CH37a
CH35a. What is/was [...]’s work status now/before his/her death? 01. Self-employed 02. Self-employed assisted other family members/temporary employees 03. Self-employed with permanent employees 04. Government worker/employee 05. Private worker/employee 06. Unpaid family worker..... 98. DON'T KNOW	01 02 03 04 05 06 98	01 02 03 04 05 06 98	01 02 03 04 05 06 98	01 02 03 04 05 06 98

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. RiauIslands	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]
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]
CH39a. What type of help did you provide to [...] in the past 12 months and what is the value? A. Money, loan, tuition, health care costs D. Food stuffs or other goods G. Chores, child care, help when ill 03. Days 05. Months H Helping family business 03. Days 05. Months V. Other:	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____
CH40a. In the past 12 months, did you or your husband ever receive help from [...] in the form of money, goods, or services?	UNWILLING TO ANSWER..... 7→CH12 COLUMN 2 / CH42b No..... 3→CH12 COLUMN 2 / CH42b Yes 1	UNWILLING TO ANSWER..... 7→CH12 COLUMN 3 / CH42b No..... 3→CH12 COLUMN 3 / CH42b Yes 1	UNWILLING TO ANSWER..... 7→CH12 COLUMN 4 / CH42b No..... 3→CH12 COLUMN 4 / CH42b Yes 1	UNWILLING TO ANSWER . 7→CH12 SUPPLEMENT / CH42b No 3→CH12 SUPPLEMENT/ CH42b Yes 1
CH41a. What type of help did you provide to [...] in the past 12 months and what is the value? A. Money, loan, tuition, health care costs D. Food stuffs or other goods G. Chores, child care, help when ill 03. Days 05. Months H. Helping family business 03. Days 05. Months V. Other:	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____	(CIRCLE ALL THAT APPLY) Rupiah A. _____ D. _____ G. _____ 03. DAYS 05. MONTHS H. _____ 03. DAYS 05. MONTHS V. _____ _____,_____,_____

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?	No 3 →SECTION EP Yes, with preprinted BX 1 →INSERT PREPRINTED BX Yes, without preprinted BX 2
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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.	BX78.	BX79.	BX80.	BX81.	BX82a.	BX83a.	BX84.	BX84a.	BX84b.					
		(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?	INTERVIEWER CHECK BX65 AND BX65a: [...] 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 ➔BX83a 01 95 _____	<table><tr><td> </td><td> </td><td> </td></tr></table>				<table><tr><td>_____</td></tr><tr><td>_____</td></tr></table>	_____	_____	1 ➔ 3 ➔ 5 ↓ 8 ↓ BX90x / EP	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 _____	<table><tr><td> </td><td> </td><td> </td></tr></table>				<table><tr><td>_____</td></tr><tr><td>_____</td></tr></table>	_____	_____	1 ➔ 3 ➔ 5 ↓ 8 ↓ BX90x / EP	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 _____	<table><tr><td> </td><td> </td><td> </td></tr></table>				<table><tr><td>_____</td></tr><tr><td>_____</td></tr></table>	_____	_____	1 ➔ 3 ➔ 5 ↓ 8 ↓ BX90x / EP	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 _____	<table><tr><td> </td><td> </td><td> </td></tr></table>				<table><tr><td>_____</td></tr><tr><td>_____</td></tr></table>	_____	_____	1 ➔ 3 ➔ 5 ↓ 8 ↓ BX90x / EP	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 _____	<table><tr><td> </td><td> </td><td> </td></tr></table>				<table><tr><td>_____</td></tr><tr><td>_____</td></tr></table>	_____	_____	1 ➔ 3 ➔ 5 ↓ 8 ↓ BX90x / EP	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"/> Rp.	7➔BX63b ROW 2 / BX90x / EP 3 ➔BX63b ROW 2 / BX90x / 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 3 / BX90x / EP 3 ➔BX63b ROW 3 / BX90x / EPP 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 / BX90x / EP 3 ➔BX63b ROW 4 / BX90x / 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 / BX90x / EP 3 ➔BX63b ROW 5 / BX90x / 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 / BX90x / EP 3 ➔BX63b SUPPLEMENT / BX90x / 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.

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
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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?
<div></div>	01		<div>23→ 1↓7↓8↓ 6→↓</div>	<div></div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1→BX66 8→BX66 3</div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1. <div></div> years</div> <div>8. DK</div>	<div>1. Yes→ 3. No↓</div>	<div></div>	<div><div></div></div> <div></div>	<div><div></div></div> <div></div>	<div>00→BX63b ROW 2</div> <div><div></div></div> <div></div>
<div></div>	02		<div>23→ 1↓7↓8↓ 6→↓</div>	<div></div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1→BX66 8→BX66 3</div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1. <div></div> years</div> <div>8. DK</div>	<div>1. Yes→ 3. No↓</div>	<div></div>	<div><div></div></div> <div></div>	<div><div></div></div> <div></div>	<div>00→BX63b ROW 2</div> <div><div></div></div> <div></div>
<div></div>	03		<div>23→ 1↓7↓8↓ 6→↓</div>	<div></div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1→BX66 8→BX66 3</div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1. <div></div> years</div> <div>8. DK</div>	<div>1. Yes→ 3. No↓</div>	<div></div>	<div><div></div></div> <div></div>	<div><div></div></div> <div></div>	<div>00→BX63b ROW 2</div> <div><div></div></div> <div></div>
<div></div>	04		<div>23→ 1↓7↓8↓ 6→↓</div>	<div></div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1→BX66 8→BX66 3</div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1. <div></div> years</div> <div>8. DK</div>	<div>1. Yes→ 3. No↓</div>	<div></div>	<div><div></div></div> <div></div>	<div><div></div></div> <div></div>	<div>00→BX63b ROW 2</div> <div><div></div></div> <div></div>
<div></div>	05		<div>23→ 1↓7↓8↓ 6→↓</div>	<div></div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1→BX66 8→BX66 3</div>	<div>1.<div></div>/<div></div><div></div>Month / Year</div> <div>8. DON'T KNOW</div>	<div>1. <div></div> years</div> <div>8. DK</div>	<div>1. Yes→ 3. No↓</div>	<div></div>	<div><div></div></div> <div></div>	<div><div></div></div> <div></div>	<div>00→BX63b ROW 2</div> <div><div></div></div> <div></div>

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 completer 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. Riauislands
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?	YES1 →EP NO3
EP03. Do you have children (biological/non-biological children) that lives in or outside this household?	No3 →SECTION CX Yes1
EP04. How many children do you have?	<input type="text"/> <input type="text"/> → 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	<div></div> <div>.....</div>	<div></div> <div>_____</div>	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	<div></div> <div>.....</div>	<div></div> <div>_____</div>	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	<div></div> <div>.....</div>	<div></div> <div>_____</div>	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	<div></div> <div>.....</div>	<div></div> <div>_____</div>	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	<div></div> <div>.....</div>	<div></div> <div>_____</div>	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
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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 completer 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)

CX00. CAPI 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. Have you ever heard about [...] to prevent pregnancy?	CX02. Have you/has your husband ever used?	CX02A. When did you first use this method?	CX02B. How old were you when you first used this method?
A.	Contraceptive Pill A woman can take contraceptive pills every day	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr [][][][][] ↓ 8. DK	[][] Years
B.	IUD/AKDR/Spiral 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
C.	Contraceptive Injections 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
F.	Contraceptive Tubes/IMPLANT/NORPLANT 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
F1.	Intravag Kind of Tissue to kill spermatozoa inserted into vagina	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr [][][][][] ↓ 8. DK	[][] Years
F2.	Female Condom / Femidom A kind of condom designated for woman	3. No 1. Yes ↓	3. No 1. Yes ↓	1. Yr [][][][][] ↓ 8. DK	[][] Years
G.	Tubal Ligation/Female Sterilization A woman can undergo surgery to prevent pregnancy	3. No 1. Yes ↓	3. No 1. Yes ↓		
I.	Abortion 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
E.	Condom A man can wear a condom during intercourse	3. No 1. Yes ↓	3. No 1. Yes ↓		
H.	Vasectomy/Male Sterilization A man can undergo surgery to prevent having another child	3. No 1. Yes ↓ CX20	3. No 1. Yes ↓ →CX20		

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/paramedic11 Midwife12 Traditional midwife.....13 Friend/family14 Village midwife/Village Polyclinic16 DON'T KNOW98 Other95

CX21ba. Where is it located? 1. Sebutkan 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW	<div> (CODE CX21b)</div> <div>Name: 1. 8. DK</div> <div>Address: 1. 8. DK</div> <div>Loc. Note: 1. 8. DK</div> <div>Vill: 1. 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</div> <div>Kec: 1. 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</div> <div>Kab: 1. 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</div> <div>Prov: 1. 3. Sama dengan tempat tinggal sekarang 8. DON'T KNOW</div> <div>CODE COMFAS </div>
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?	Yes1 No3

HHID: PID:

SECTION CX (CONTRACEPTIVE USE)

CX22.	In your visits to the provider who provides the method you are currently using, has the provider ever:	
	a. Explained the possibility of side effects due to the use of the birth control device/method being used?	Ever 1 Never 3 DON'T KNOW 8
	b. Explained what has to be done or where to seek help if side effects occur?	Ever 1 Never 3 DON'T KNOW 8
	c. Asked about your health history before prescribing contraception?	Ever 1 Never 3 DON'T KNOW 8
CX22d.	Since you started using the current method for birth control, have you ever had health problems or side effects?"	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
CX22e.	Did you visit any medical faciltiy for these side effects?	No 3→CX22h Yes 1
CX22f.	When did you visit the medical facility? (Most recent visit)	month of ____ / year _____

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

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.....
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?	<div><div></div><div></div><div></div></div> Other _____
LANGOTHR. Other language used (if any):	<div><div></div><div></div><div></div></div> Other _____
CODES FOR LANGUAGE: <div><div>00. Indonesian01. Javanese02. Sundanese03. Balinese</div><div>04. Batak05. Bugis06. Chinese07. Maduranese</div><div>08. Sasak09. Minang10. Banjar11. Bima</div><div>12. Makassar13. Nias14. Palembang15. Sumbawa</div><div>16. Toraja17. Lahat18. Other South Sumatera19. Betawi</div><div>20. Lampung95. Other, _____96. NO OTHER</div></div>	

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

SECTION CP (INTERVIEW SESSION NOTES)

EVALUATION FORM FOR BOOK IV

CP1. WHO ELSE (OTHER PERSONS) BESIDES RESPONDENT WAS PRESENT DURING THE INTERVIEW?
ANSWER MAY BE MORE THAN ONE.

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

CP2. WHAT IS YOUR EVALUATION OF THE ACCURACY OF RESPONDENT'S ANSWERS?

1. EXCELLENT
2. GOOD
3. FAIR
4. NOT SO GOOD
5. VERY BAD

CP3. WHAT IS YOUR EVALUATION ON THE SERIOUSNESS AND ATTENTIVENESS OF THE RESPONDENT?

1. EXCELLENT
2. GOOD
3. FAIR
4. NOT SO GOOD
5. VERY BAD

NOTES:
