Questions and Filters for Unmet Need Definition

Note that question text has been modified slightly from the DHS questionnaire to reflect the information needed for the definition of unmet need and avoid extraneous questions. Skip patterns have been modified to reflect the flow of questions in this set of questions. For the original questions and skip patterns, please see the DHS Model Questionnaire (Phase 6) (http://www.measuredhs.com/publications/publication-DHSQ6-DHS-Questionnaires-and-Manuals.cfm)

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
226	Are you pregnant now?	YES	238
		7	1
228	When you got pregnant, did you want to get pregnant at that time?	YES	→ 238
229	Did you want to have a baby later on or did you not want any (more) children?	LATER	
238	When did your last menstrual period start?		
200	Whom and your last monotious poriod diant.	DAYS AGO 1	
		WEEKS AGO 2	
		MONTHS AGO 3	
	(DATE, IF GIVEN)	YEARS AGO 4	
		IN MENOPAUSE/ HAS HAD HYSTERECTOMY 994	
		BEFORE LAST BIRTH 995	
		NEVER MENSTRUATED 996	
302	CHECK 226:		
	NOT PREGNANT PREGNANT OR UNSURE		→313
303	Are you currently doing something or using any method to delay or avoid getting pregnant?	YES	
	T	T	
313	Have you ever used anything or tried in any way to delay or avoid getting pregnant?	YES	
212	What name was given to your (last) baby?		
	RECORD NAME	NAME	
215	In what month and year was (NAME) born?		
	PROBE:	MONTH	
	When is his/her birthday?	l — — —	
	ĺ	YEAR	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
401	CHECK 215: BIRTH IN 2006 OR LATER BIRTH 200	RE L	→ 601
405	When you got pregnant with (NAME), did you want to get pregnant at that time?	YES	447
406	Did you want to have a baby later on, or did you not want any (more) children?	LATER	
447	Has your menstrual period returned since the birth of (NAME)?	YES	
601	Are you currently married or living together with a man as if married?	YES, CURRENTLY MARRIED 1 YES, LIVING WITH A MAN 2 NO, NOT IN UNION 3	
610	Now I would like to ask about your (first) (husband/partner). In what month and year did you start living with him?	MONTH	
		YEAR	
615	When was the <u>last</u> time you had sexual intercourse? IF LESS THAN 12 MONTHS, ANSWER MUST BE RECORDED IN DAYS, WEEKS OR MONTHS. IF 12 MONTHS (ONE YEAR) OR MORE, ANSWER MUST BE RECORDED IN YEARS.	DAYS AGO	
			•
703	Now I have some questions about the future. After the child you are expecting now, would you like to have another child, or would you prefer not to have any more children?	HAVE ANOTHER CHILD 1 NO MORE 2 UNDECIDED/DON'T KNOW 8	705 END
704	Now I have some questions about the future. Would you like to have (a/another) child, or would you prefer not to have any (more) children?	HAVE (A/ANOTHER) CHILD 1 NO MORE/NONE 2 SAYS SHE CAN'T GET PREGNANT 3 UNDECIDED/DON'T KNOW 8	707 END
705	CHECK 226: NOT PREGNANT OR UNSURE How long would you like to wait from now before the birth of (a/another) child? After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?	MONTHS	→ END → END → END

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
706	CHECK 226:		
	NOT PREGNANT PREGNANT OR UNSURE		→ END
	OR UNSURE -		END
707	CHECK 303: USING A CONTRACEPTIVE METHOD?		
	NOT CURRENTLY		
	CURRENTLY USING USING USING		→ END
708	CHECK 705:		
	NOT 24 OR MORE MONTHS	00-23 MONTHS	
	ASKED OR 02 OR MORE YEARS	OR 00-01 YEAR	→ END
		Г	
709	CHECK 704:	NOT MARRIED A	
	WANTS TO HAVE WANTS NO MORE/	FERTILITY-RELATED REASONS	
	A/ANOTHER CHILD NONE	NOT HAVING SEX B	
	+ +	INFREQUENT SEX	
	You have said that you do You have said that you do not	MENOPAUSAL/HYSTERECTOMY D CAN'T GET PREGNANT E	
	not want (a/another) child want any (more) children.	NOT MENSTRUATED SINCE	
	soon.	LAST BIRTH F	
	Can you tell me why you are Can you tell me why you are not	BREASTFEEDING G	
	not using a method to using a method to prevent	UP TO GOD/FATALISTIC H	
	prevent pregnancy? pregnancy?	000000000000000	
	Any other reason? Any other reason?	OPPOSITION TO USE RESPONDENT OPPOSED	
	Any other reason:	HUSBAND/PARTNER OPPOSED J	
		OTHERS OPPOSED K	
		RELIGIOUS PROHIBITION L	
	RECORD ALL REASONS MENTIONED.	LACK OF KNOWLEDGE	
		KNOWS NO METHOD M	
		KNOWS NO SOURCE N	
		METHOD-RELATED REASONS	
		SIDE EFFECTS/HEALTH	
		CONCERNS O	
		LACK OF ACCESS/TOO FAR P	
		COSTS TOO MUCH Q	
		PREFERRED METHOD	
		NOT AVAILABLE R NO METHOD AVAILABLE S	
		INCONVENIENT TO USE T	
		INTERFERES WITH BODY'S	
		NORMAL PROCESSES U	
		OTHER X	
		(SPECIFY)	
		DON'T KNOW Z	