
Community-Based Distribution of DMPA in Tigray, Ethiopia

Baseline Survey Report

2011

Bixby Center

for Population, Health & Sustainability

UNIVERSITY OF CALIFORNIA, BERKELEY



Community-based distribution of DMPA

Baseline Survey Report

Contents

1. Introduction	3
2. Survey Implementation	4
2.1 Sampling Design	4
2.2 Questionnaire	4
2.3 Training of Interviewers	5
2.4 Fieldwork	5
2.5 Data Processing	5
3. Results	6
3.1 Sampling	6
3.2 Characteristics of the Respondents	6
3.3 Fertility	7
3.4 Fertility Preferences	8
3.5 Family Planning	10
3.6 Unmet Need	15
3.7 Family Planning Preferences	16
3.8 Family Planning Services	18
4. In Summary	20
5. Appendix	21
5.1 English Questionnaire	22
5.2 Field Work Personnel	41

1. Introduction

The UC Berkeley Bixby Center for Population, Health and Sustainability, in conjunction with Mekelle University, Women's Association of Tigray (WAT), and the Tigray Health Bureau, is scaling up community-based distribution (CBD) of the injectable contraceptive depot medroxyprogesterone acetate (DMPA), commonly known as Depo. Incorporating private sector strategies, such as social marketing, the project will ideally be a sustainable model that uses community-based reproductive health agents (CBRHAs) to distribute DMPA. Over three years, the intervention will be scaled to include CBRHAs from the 5 zones that comprise the Tigray region. Ultimately, findings will provide much needed evidence and proof of concept of how to scale up a model for increasing access to injectable contraceptives.

The specific aims of the project are to:

1. In a three-year funding period, bring to scale an intervention that harmonizes CBD of DMPA and SM strategies to increase access of DMPA in Tigray, Ethiopia.
2. Develop a monitoring system for predicting demand and delivering DMPA to rural CBRHAs that builds upon the current system utilized by DKT Ethiopia.
3. Assess feasibility of scaling up this intervention to expand access to DMPA in rural communities in Ethiopia through quarterly analyses of monthly program data.
4. Conduct baseline and endline data collection to assess feasibility and scalability from both demand and supply perspectives, while also measuring impact of the intervention on contraceptive prevalence and related fertility indicators in one zone of Tigray, Ethiopia.
5. Perform cost-effectiveness analyses to demonstrate the benefits and cost savings of merging CBD of DMPA and social marketing strategies.
6. Use findings from Tigray, Ethiopia to make recommendations for adapting and scaling intervention throughout Ethiopia and other sub-Saharan African countries.

The baseline survey allows us to assess characteristics of the population in the intervention sites prior to implementation and to make comparisons to the endline survey, which will be conducted at the end of the three year implementation period. Having information on the sociodemographics and contraceptive use of the target population for the intervention enables us to better understand their needs. The report that follows provides an overview of the results from the baseline survey. The data presented include descriptive statistics characterizing the target population.

The implementation of the baseline survey was conducted by the UC Berkeley Bixby Center for Population, Health and Sustainability in collaboration with Mekelle University of Tigray. Human subjects approval was provided by the Center for Protection of Human Subjects (CPHS) at the University of California Berkeley (CPHS Protocol ID 2011/07/3465).

2. Survey Implementation

2.1 Sampling Design

The sampling design was intended to provide data that was representative of the Central Zone in Tigray, which is the most populous zone in the region (according to the 2007 census) and the first zone where we planned to implement the project. We used a multi-stage, cluster random sampling design, starting with the random selection of three woredas (districts) in the zone; the total final sample consisted of 1490 women.

Following selection of the woredas, we entered a complete list of the kebeles (villages) in each woreda (minus those involved in a previous Depo pilot project we conducted in 2008) and their respective populations from the most recent Ethiopian census (2007) into STATA. We used the STATA command for generating a simple random sample of kebeles. The number of kebeles selected from each woreda was proportional to the population of that woreda and was determined based on the assumption that 40.4% of the female population in rural areas are women of reproductive age, that there are 5.2 people per household in rural areas on average, and that there will be 2 women of reproductive age per household on average; these assumptions were based on data from 2005 Demographic and Health Survey (DHS). As a result of these calculations, 7 kebeles were selected from Deguea Tembien, 7 from Kola Tembien, and 3 from Tanqua Abergele. Supervisors then went to the health post in each of the kebeles selected and requested a list of households. Based on the sample size calculations and the population of each kebele, 250 households in Deguea Tembien were selected, 296 in Kola Tembien, and 204 in Tanqua Abergele. The households were randomly selected by drawing numbers, each of which aligned with a specific household number on the list. A total of three visits were made to each selected household to complete the interview. If unsuccessful, the surveyors would randomly select another household from the list to replace it.

At the household level, we estimated that we would need to survey 500 women in Deguea Tembien, 591 in Kola Tembien, and 409 in Tanqua Abergele. All women of reproductive age (i.e. those between 15 and 49 years of age) were eligible to participate in the study. All eligible women present in the home were invited to participate.

2.2 Questionnaire

This survey drew heavily from the demographic, fertility, and family planning sections of the DHS questionnaire. Response options were adapted or added where appropriate, and additional questions on payment and willingness to pay were incorporated. The questionnaire was meant to collect information on the following topics:

- Background characteristics (age, education, residence, etc.)
- Reproduction
- Contraception knowledge and use
- DMPA knowledge and use
- Current and preferred source of family planning

- Marriage and sexual activity
- Fertility preferences and intentions

The questionnaire was developed in English and discussed among research partners in Ethiopia in English. The questionnaire was then translated into Tigrinya and back-translated into English; the back-translation is where most of the discussion and changes took place. Any changes or additions were made at this stage based on the feedback of our research partners. The questionnaire was pilot tested by interviewers; no issues requiring additional changes were encountered.

2.3 Training of Interviewers

The training for data collectors and supervisors was held October 5th thru 7th, 2011. Sixteen data collectors and three supervisors participated in the training, which familiarized them with the survey instrument, sampling and recruitment strategy, and informed consent/assent process. They were also trained on privacy, confidentiality, and interviewing etiquette, particularly for the many sensitive questions asked in the survey. Interviewers and supervisors then participated in the pilot testing of the questionnaire and met afterward for a debriefing on their experiences in the field.

2.4 Fieldwork

A total of sixteen interviewers and three supervisors were sent to the three woredas in teams of five to six interviewers and one supervisor. Each team was responsible for completing data collection in one of the kebeles selected. Data collection took a total of 15 days, at the end of which all completed surveys were brought to the Project Director.

2.5 Data Processing

All paper questionnaires were processed at UC Berkeley. Data from the 1490 surveys were entered into a database using Epi Info Version 3.5.3. All coding, labeling, and cleaning of the dataset took place at UC Berkeley. A native Tigrinya speaker in Berkeley assisted in the translation of additional response options. Data entry began in October, 2011 and ended in December, 2011.

3. Results

3.1 Sampling

In order to meet the sample size criteria, interviewers had to go to nearly twice as many households as estimated because the assumption that there would be on average two women of reproductive age per household was not accurate. As a result, interviewers went to 427 households in Deguea Tembien, 500 in Kola Tembien, and 408 in Tanqua Abergele.

As is the case in many low-resource, rural settings, the rates of refusal were very low. The response rate for this survey was 99%.

3.2 Characteristics of the Respondents

Table 2: Background characteristics among all women of reproductive age (N=1490)*

	%	N
Age		
15-19	19.3	288
20-24	17.1	254
25-29	17.9	267
30-34	15.7	234
35-39	13.4	200
40-44	8.3	123
45-49	7.5	112
Marital status		
Never married	13.6	202
Married/cohabiting	72.3	1077
Divorced/widowed	13.9	207
Education		
No education	53.6	798
1-4 years	13.2	196
5-9 years	22.4	334
Secondary or greater	10.6	158

*Percents include missing

Table 1: Numbers of households and women sampled by woreda*

	# of	
	households	# of women
Deguea Tembien	427	487
Kola Tembien	500	594
Tanqua Abergele	408	412

*1493 women were surveyed but three surveys were unaccounted for; the sample in our dataset is 1490

Table 2 presents the background characteristics of all women, age 15-49, who participated in the survey. The majority (54%) of the sample population is under thirty, and the size of the population generally declines with increasing age. Nearly three-quarters (72%) of women interviewed are married or cohabiting, with nearly equal proportions either never married, or divorce/widowed.

Over half of women (54%) had received no formal education, and only 11% had ever attended secondary school or greater.

3.3 Fertility

All women surveyed were asked to report information about their pregnancy history, including the total number of sons and daughters ever birthed, distinguishing between those who were still living and those who had died. As seen in Table 3, approximately 7% of respondents were currently pregnant at the time of the survey. The average number of living children among women in our sample population was between 3 and 4, but the average number of children ever born was 4. The number of women with no children, 1-2 children, 3-4 children, and 5 or more was fairly evenly distributed.

Regarding whether or not the last pregnancy was intended, 78% had wanted it then, 17% wanted it later, and 5% did not want it at all. Thus 22% of last pregnancies were mistimed or unwanted.

In Figure 1, we see that the number of children ever born increases with increasing age; women age 15-19 years have had on average less than 1 child whereas women age 45-49 have had on average nearly 7 children.

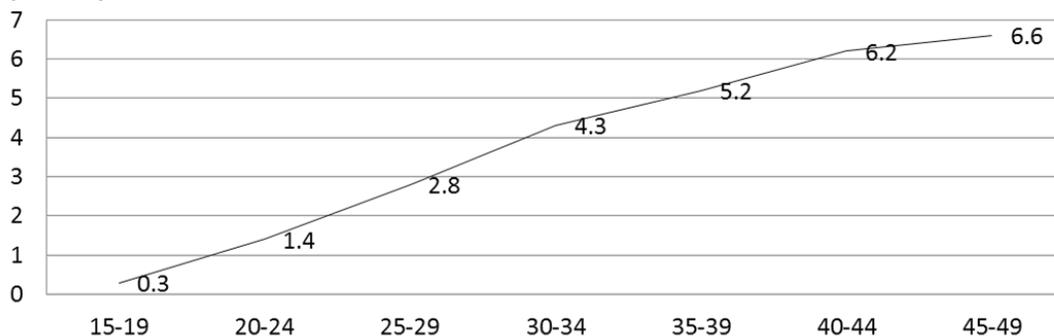
Table 3: Number of children ever born and living, intendness of last pregnancy, and whether currently pregnant among women of reproductive age (N=1490)*

	%	N
Number of children ever born		
Average		4.0
0	18.5	275
1-2	26.1	389
3-4	22.5	335
5+	31.0	462
Number of living children		
Average		3.6
0	20.7	309
1-2	28.7	428
3-4	24.4	362
5+	25.6	382
Intendness of last pregnancy		
Wanted then	63.3	943
Wanted later	13.6	202
Did not want	4.2	62
Currently pregnant	7.2	108

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*Percents include missing

Figure 1: Average number of children ever born by age category among women of reproductive age (N=1478)*



*There were 12 women with missing age data

3.4 Fertility Preferences

Fertility preferences can inform investigators about future demand for family planning. The majority of respondents (60%) did want a/another child, but the desire decreased steadily with the increasing number of living children (Table 4). Correspondingly, those who wanted no more children increased with increasing number of living children.

Table 4: Fertility preferences by number of living children among women of reproductive age (N=1445)*

Desire for children	Number of living children							Total	N
	0	1	2	3	4	5	6+		
	%								
Have a/another child	27.1	20.0	17.6	13.5	8.2	7.3	6.3	100.0	879
No more	(1.1)	(2.4)	9.6	14.6	14.9	22.8	34.7	100.0	377
Undecided	33.8	(10.6)	(14.8)	(11.3)	(17.6)	(4.9)	(7.0)	100.0	142
Says can't get pregnant	(6.4)	(8.5)	(14.9)	(6.4)	(21.3)	(17.0)	(25.5)	100.0	47

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*45 women did not respond to the question about desire for children and/or the question about number of living children

Table 5: Average desired number of children by background characteristics among women of reproductive age (N=1490)*

	Average	N
Total	4.1	1450
Age		
15-19	3.0	284
20-24	3.6	251
25-29	3.9	263
30-34	5.0	224
35-39	4.7	193
40-44	4.8	119
45-49	5.2	105
Marital status		
Never married	2.8	200
Married/cohabiting	4.4	1045
Divorced/widowed	3.9	201
Education		
No education	4.7	768
1-4 years	4.0	189
5-9 years	3.3	332
Secondary or greater	3.3	157
No response	N/A	40

*Some women did not answer all questions thus the N categories do not all add to 1490

education wanted the most children (4.7) and women with 5 years of education or greater wanted the least (3.3).

Most women (34%) who were undecided about having a/another child had no children. Among women who wanted a/another child, most wanted to get pregnant within the next year (data not shown). And the vast majority of those wanting to have another child after marriage were those who had had no children.

When asked how many children they would like to have/would have liked to have, women said 4.1 on average (Table 5). Overall, women wanted slightly more boys than girls when asked specifically about gender preferences (data not shown).

Looking at fertility preferences by background characteristics, we see that young women generally wanted fewer children than older women, ranging from 3 children for women 15-19 years old to more than 5 children for women 45-49 years old. Married women wanted the most children (4.4) compared to unmarried (2.8) and divorced/widowed women (3.9). And increased education was negatively associated with the number of children desired; women with no

3.5 Family Planning

Information on knowledge and ever use of family planning methods was first asked of all women. They were then asked whether they were currently using a method, which method they were using, and where they had obtained it.

In Table 6, we see that nearly all women had heard of the pill (92%) and injectable contraceptives (96%). Knowledge of implants (70%) and condoms (57%) were also relatively high. Among reporting of ever use, injectable contraceptives were the method most commonly used (46%); the next most commonly used method was the pill at 19%.

As seen in Table 7, only 30% were currently using contraception. Among all women, just under 30% were using a modern method (sterilization, pill, IUD, injectable contraceptives, implants, or condoms), 21% were using injectable contraceptives specifically, and less than 1% were using a traditional method (withdrawal, rhythm, or lactational amenorrhea method).

Table 6: Knowledge and ever use of contraceptive methods among women of reproductive age (N=1490)*

Method	Heard of	Ever Used
	%	
Female Sterilization	21.0	0.3
Male Sterilization	7.9	0.2
Pill	91.7	18.7
IUD	23.9	0.5
Injectables	96.1	46.2
Implants	69.8	8.7
Condom	57.1	2.2
Female Condom	16.5	0.0
Lactational Amenorrhea Method (LAM)	30.1	9.7
Rhythm Method	31.3	9.0
Withdrawal	12.6	3.7
Emergency Contraception	11.2	0.7

*Percentages do not add up to 100; women were asked about all methods

Table 7: Contraceptive use among women of reproductive age (N=1490)

	%	N
Currently using contraception	30.1	448
Currently using modern contraception	29.5	439
Currently using traditional contraception	(0.5)	8
Current method		
No method	69.9	1042
Injectables	20.6	307
Implants	6.2	92
Pill	2.3	34
Male condom	(0.2)	3
Female sterilization	(0.1)	2
IUD	(0.1)	1
Traditional	(0.5)	8
Other	(0.1)	1

() Percentage in parentheses indicates that estimate was based on less than 25 cases

Among contraceptive users, 69% were using injectable contraceptives (Figure 2); on average, injectable users had been using it for just over 2 years (data not shown). The second most common method of modern contraception was implants (20%).

Table 8 shows the current use of contraception by background characteristics; percents include missing and non-response. Women age 25-29 had the highest proportion of contraception use among all age categories, followed by ages 30-34 and 35-39; the same pattern was true of modern contraceptive use, specifically.

Marital status had the largest difference in proportion of contraception use among any background characteristic. Thirty seven percent of married women were using any method of

contraception, compared to 2% of never married women and 21% of divorced or widowed women.

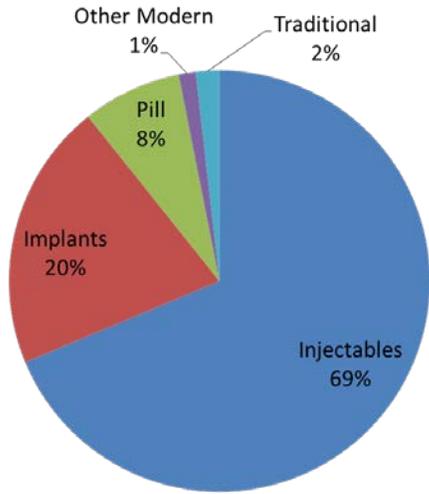
Table 8: Percent of current contraceptive use by background characteristics among women of reproductive age (N=1490)*

Background characteristic	%									Total	N
	Any method	Any modern method	Pill	Inject-ables	Implants	Other modern	Any tradi-tional method	Other	Not currently using		
Age											
15-19	9.7	9.4	(1.4)	(7.3)	(0.7)	(0.0)	(0.3)	(0.0)	85.8	100.0	288
20-24	29.9	29.9	(0.8)	21.3	(7.5)	(0.4)	(0.0)	(0.0)	57.5	100.0	254
25-29	47.2	46.1	(3.7)	34.1	(7.9)	(0.4)	(1.1)	(0.0)	42.3	100.0	267
30-34	39.7	38.5	(3.4)	26.1	(8.5)	(0.4)	(0.9)	(0.4)	50.0	100.0	234
35-39	38.0	37.0	(2.0)	24.0	(11.0)	(0.5)	(1.0)	(0.0)	56.5	100.0	200
40-44	28.5	28.5	(4.9)	(17.1)	(5.7)	(0.8)	(0.0)	(0.0)	71.5	100.0	123
45-49	(8.0)	(8.0)	(0.0)	(6.3)	(1.8)	(0.0)	(0.0)	(0.0)	(6.3)	100.0	112
Marital status											
Never married	(2.0)	(2.0)	(1.5)	(0.5)	(0.0)	(0.0)	(0.0)	(0.0)	98.0	100.0	202
Married/cohabiting	37.2	36.4	2.6	25.4	7.9	(0.5)	(0.7)	(0.1)	53.2	100.0	1077
Divorced/widowed	20.8	20.8	(1.4)	15.5	(3.4)	(0.5)	(0.0)	(0.0)	77.8	100.0	207
Education											
No education	29.7	29.2	(1.4)	21.2	6.5	(0.1)	(0.4)	(0.1)	63.8	100.0	798
1-4 years	31.1	30.1	(3.1)	21.4	(5.1)	(0.5)	(1.0)	(0.0)	58.7	100.0	196
5-9 years	28.1	27.5	(1.5)	17.7	(7.2)	(1.2)	(0.6)	(0.0)	63.8	100.0	334
Secondary or greater	34.2	33.5	(6.3)	23.4	(3.8)	(0.0)	(0.6)	(0.0)	60.1	100.0	158
Number of living children											
0	(6.8)	(6.4)	(1.9)	(4.2)	(0.3)	(0.0)	(0.3)	(0.0)	87.7	100.0	309
1-2	36.4	35.7	(1.4)	27.8	6.3	(0.2)	(0.5)	(0.2)	53.5	100.0	428
3-4	39.3	38.5	(2.2)	27.6	8.0	(0.8)	(0.8)	(0.0)	53.3	100.0	364
5+	33.2	32.7	(3.4)	19.6	9.2	(0.5)	(0.5)	(0.0)	62.3	100.0	382
Total	30.1	29.5	2.3	20.6	6.2	(0.5)	(0.6)	(0.1)	62.7	100.0	1490

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*Some women did not answer all questions thus the N categories do not all add to 1490

Figure 2: Percent distribution of contraceptive method among current users of contraception (N=448)



Percentage of contraceptive use and type of contraceptive use did not differ much by level of education. Between 28% and 34% of women was using contraception/modern contraception across all levels of education.

By parity, women who had between 1 and 4 children had the highest proportion of contraceptive use. Only 7% of nulliparous women were using contraception, then 36% of women with 1-2 children were using contraception, 39% of women with 3-4 children were using contraception, and 33% of women with 5 or more children were using contraception.

Table 9 illustrates the intention to use contraception by background characteristics. Overall, among women who are not currently using contraception, 67% thought they would use a contraceptive method to delay or avoid pregnancy at some time in the future.

Women age 20-24 and 25-29 were the most likely to intend to use contraception in the future (84% and 83%, respectively), followed by women aged 15-19 (77%). Divorced/widowed women were least likely to intend to use (32%). Women with secondary education or higher were the subgroup with the highest intention to use contraception (87%). However, slightly more than half of women with no education intended to use contraception even though they are the ones with the highest desired family size (average 5 children; Table 5).

In addition to the data shown in the tables, we also collected information regarding previous method prior to DMPA and current method if respondent had switched from DMPA. Among those who had ever used DMPA, 86% had switched from the pill. Among women who previously had used DMPA and switched, the majority (69%) had switched to implants (data not shown).

Regarding payment for contraception, we found that 93% of women had received their current method of contraception for free. Ninety-eight percent of women who had ever used DMPA had

Table 9: Intention to use contraception at any time in the future by background characteristics among women not currently using contraception (N=963)*

	%	N
Intention to use (total)	67.4	963
Age		
15-19	77.6	250
20-24	83.9	174
25-29	83.5	139
30-34	70.2	134
35-39	62.5	120
40-44	(24.6)	69
45-49	(5.7)	70
Marital status		
Never married	77.3	189
Married/cohabiting	72.4	633
Divorced/widowed	31.9	138
Education		
No education	58.3	499
1-4 years	71.3	129
5-9 years	76.9	234
Secondary or greater	85.9	99

() Percentage in parentheses indicates that estimate was based on less than 25 cases

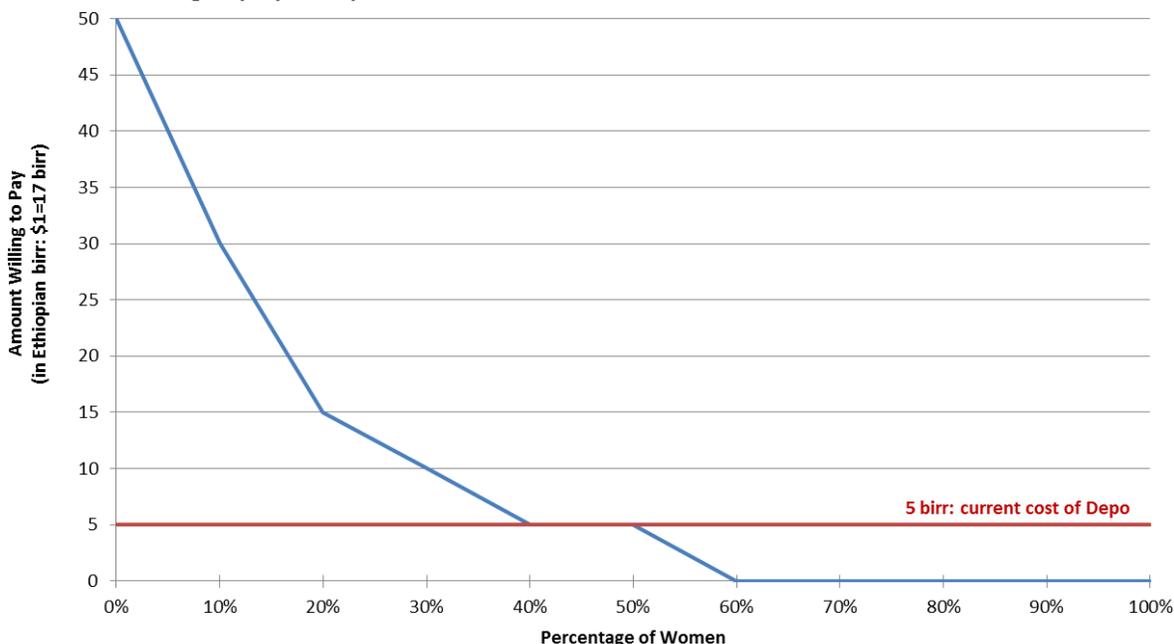
*There are 79 people for which we do not have information on intention to use contraception

*Some women did not answer all questions thus the N categories do not all add to 963

received their last injection for free. Despite this, 66% of respondents were willing to pay for the family planning method of their choice. Among women who are interested in using DMPA specifically, 68% were willing to pay (this includes ever users of DMPA and non-users of DMPA who are interested in using the method).

Of those women willing to pay, 63% were able to state a specific amount that they were willing to pay. Based on these responses, Figure 3 shows that only 10% of women interested in DMPA are willing to pay 35 birr or greater for an injection. More than half of women (52%) are willing to pay 5 birr, which is the current cost of one injection in project areas.

Figure 3: Willingness to pay for Depo among women of reproductive age who have ever used Depo or who are interested in using Depo (N=767)*



*Approximately 3% of women were willing to pay between 50 and 200 birr; we have only labeled up to 50 birr for visual purposes

In Table 10, we see women’s reasons for using contraception by background characteristics among women who are currently using a contraceptive method. In total, 79% of women currently using contraception were using it for spacing, 14% because they had completed their family size, 6% for economic reasons, less than 1% each for medical reasons, because it was the provider’s choice, or for other reasons.

For age categories up to 40 years old, the most common reason for current use of contraceptive method was spacing. For women age 40-44 and 45-49, the most common reasons were both spacing and completed family size, which were each around 45%.

By marital status, the few unmarried women currently using contraception were using it most commonly for spacing (75%). Married/cohabiting women and divorced/widowed women similarly were

using contraception for spacing (80% and 67%, respectively). Across all categories of education, the most common reason for using contraception was also spacing.

Table 10: Reasons for using contraceptive method by background characteristics among women of reproductive age who are currently using contraception (N=448)*

	%						Total	N
	Spacing	Completed family size	Economic reasons	Medical reasons	Provider's decision	Other		
Age								
15-19	89.3	(3.6)	(3.6)	(0.0)	(0.0)	(3.6)	100.0	28
20-24	89.3	(1.3)	(8.0)	(1.3)	(0.0)	(0.0)	100.0	75
25-29	88.0	(3.2)	(7.2)	(0.0)	(0.0)	(1.6)	100.0	125
30-34	80.7	(10.8)	(6.5)	(1.1)	(0.0)	(1.1)	100.0	93
35-39	67.6	(28.4)	(4.1)	(0.0)	(0.0)	(0.0)	100.0	74
40-44	(45.7)	(48.6)	(2.9)	(2.9)	(0.0)	(0.0)	100.0	35
45-49	(44.4)	(44.4)	(0.0)	(11.1)	(0.0)	(0.0)	100.0	9
Marital status								
Never married	(75.0)	(0.0)	(25.0)	(0.0)	(0.0)	(0.0)	100.0	4
Married/cohabiting	79.7	13.0	(5.5)	(0.8)	(0.3)	(0.8)	100.0	399
Divorced/widowed	66.7	(19.1)	(7.1)	(2.4)	(0.0)	(4.8)	100.0	41
Education								
No education	76.9	18.0	(3.9)	(1.3)	(0.0)	(0.0)	100.0	234
1-4 years	72.1	(18.0)	(8.2)	(0.0)	(0.0)	(1.6)	100.0	61
5-9 years	84.0	(5.3)	(6.4)	(1.1)	(1.1)	(2.1)	100.0	94
Secondary or greater	83.3	(3.7)	(11.1)	(0.0)	(0.0)	(1.9)	100.0	54
Total	78.6	13.5	5.9	(0.9)	(0.2)	(0.9)	100.0	448

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*Some women did not answer all questions thus the N categories do not all add to 448

3.6 Unmet Need

As defined by the DHS, women with an unmet need for contraception are those who are married, fecund, don't want a/another child or don't want one for at least 2 years but are not using contraception. Women whose current or last pregnancy was mistimed or unwanted are also categorized as having an unmet need for contraception.

As seen in Table 11, 16% of women surveyed had an unmet need for contraception. By comparison, the unmet need for the entire region, according to the 2011 DHS, is 22%. This difference is understandable given the proximity of the Central Zone to Mekelle, the biggest city in the region.

By age category we see that age is positively correlated with unmet need, with more than 50% of those in the highest age category having an unmet need. Among education categories, we again see a positive correlation: women with no education had the highest unmet need at 22% and those with secondary education or greater had the lower unmet need at 2%. Women with 5 or more children had by far the greatest level of unmet need (35%).

Among women who were currently pregnant, 5% had an unmet need for contraception, whereas 89% of those who want to get pregnant in 2 years or more had an unmet need. Fifty-one percent of women who want no/no more children had an unmet need. And 18% of women whose last pregnancy was unwanted or mistimed had an unmet need for contraception.

Based on the unmet need (16%) and the contraceptive prevalence (30%), we see that in total, 46% of women surveyed have a potential demand for family planning.

Table 11: Percent of married women with an unmet need for contraception by background characteristics (N=1077)*

	%	N
Total	16.4	1077
Age		
15-19	6.5	108
20-24	5.4	204
25-29	6.4	233
30-34	13.0	200
35-39	27.8	151
40-44	37.2	86
45-49	51.2	84
Education		
No education	22.2	648
1-4 years	11.1	153
5-9 years	7.4	189
Secondary or greater	2.4	84
Number of living children		
Average		5.2
0	4.0	99
1-2	4.8	331
3-4	8.2	292
5+	35.1	350
Pregnant	5.2	174
Want to get pregnant in 2 years or more	88.9	9
Wants no/no more children	50.9	322
Last pregnancy unwanted or mistimed	17.6	221

*Percents include missing

3.7 Family Planning Preferences

Family planning preferences help us to understand and meet demands related to specific types of contraception. In order to ascertain this information, we asked respondents, current users, and non-users of contraception specific questions about their preferred method, the reason they prefer this method, and why they are not using their preferred method, if applicable.

In Table 12, we present information about women’s preferred method of contraception. Over half of women surveyed prefer injectable contraceptives (55%). The next most commonly preferred method was implants (10%).

In Table 13, we see that 39% of women who prefer a modern method are using one, and that very few women prefer traditional methods of contraception. Overall, it is clear that the majority of women who preferred any type of method are not currently using it. It is also notable that there is a large proportion of “other” responses, which were largely due to misunderstandings; there is no word for “preference” in the Tigrinya language, thus many women had trouble answering the question about preferred method the way we intended.

Among modern methods (with the exception of the few women who preferred sterilization), we see in Table 14 that injectable contraceptives have the greatest proportion of women who prefer the method who are not currently using it; 66% of women who prefer injectable contraceptives are not currently using it. By comparison, 60% of women who prefer pills and 47% of women who prefer implants are not currently using it.

Table 12: Preferred method of contraception among women of reproductive age (N=1490)

Preferred method	%	N
Injectables	55.3	824
Implants	10.1	150
Pill	4.5	67
Female sterilization	(0.3)	5
Male sterilization	(0.1)	2
IUD	(0.1)	2
Male condom	(0.2)	3
Traditional	(1.5)	22
Other	14.3	213
No response	13.6	202

() Percentage in parentheses indicates that estimate was based on less than 25 cases

Table 13: Current versus preferred contraceptive method among women of reproductive age (N=1490)

	Current				Total	N
	Modern	Traditional	Other	None/no response		
Preferred						
Modern	38.7	(0.2)	(0.0)	61.2	100.0	1053
Traditional	(4.6)	(22.7)	(0.0)	(72.7)	100.0	22
Other	(1.4)	(0.0)	(0.5)	98.1	100.0	213
None/no response	13.9	(0.5)	(2.5)	85.6	100.0	202
Total	29.5	(0.5)	(0.1)	69.9	100.0	1490

() Percentage in parentheses indicates that estimate was based on less than 25 cases

Table 14: Preferred method of contraception by whether currently using or not among women of reproductive age (N=1075)*

Preferred method	%		Total	N
	Currently using	Not currently using		
Injectables	34.2	65.7	100.0	824
Pill	40.2	59.7	100.0	67
Implants	52.7	47.3	100.0	150
Other modern	(33.3)	(66.7)	100.0	12
Traditional method	(22.7)	(77.3)	100.0	22

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*Among women who responded to both questions and whose preferred method was not categorized as 'other'

Table 15: Reason why injectable is preferred method among women of reproductive age who prefer injectables (N=829)*

	%	N
Women who prefer injectable contraceptives*		
More convenient	37.0	300
Fewer side effects	10.4	84
Tried before	21.6	175
The only method I know	(2.6)	21
Partner allows it	(0.3)	2
Privacy	(1.9)	15
Long-acting preferred	16.9	137
Short-acting preferred	13.7	111
Other	17.1	138

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*Responses are not mutually exclusive

Among the reasons cited by women as to why they prefer injectable contraceptives (Table 15), the most common response was “more convenient” (37%). Previous use was the second most common response (22%).

3.8 Family Planning Services

Data we collected related to family planning services can inform us as to where women are currently receiving family planning and where they would prefer to receive family planning. We also collected data that offer insight into the quality of the family planning services currently being provided.

As seen in Table 16, less than half of women who are currently using contraception have been told about side effects (47%), and even fewer (44%) were told what to do if they experienced side effects. In addition, only 65% of women using contraception at the time of the survey had been told by their provider about other methods.

Table 17 illustrates women’s interactions with the healthcare system by background characteristics. Across all age groups, marital status, and levels of education, very high proportions of women surveyed knew of at least one source of family planning.

Table 16: Quality of family planning services provided among women of reproductive age who are currently using contraception (N=448)*

	%	N
Told about side effects	46.8	210
Told what to do if experience side effects	43.5	195
Told about other methods	65.4	293

*6-10 women who were using contraception did not answer one of these questions; total percentages include missing responses

Table 17: Interaction with healthcare system by background characteristics among women of reproductive age (N=1490)*

	%				Total	N
	Knows source of family planning	Visited by field worker and received FP info in last 12 months	Visited health facility for any reason in last 12 months	Received info about FP from health facility		
Age						
15-19	88.2	45.5	47.6	35.1	100.0	288
20-24	94.5	59.8	78.4	62.2	100.0	254
25-29	95.1	62.2	80.9	70.0	100.0	267
30-34	96.2	64.5	78.6	68.4	100.0	234
35-39	95.0	69.0	83.0	72.5	100.0	200
40-44	93.5	58.5	69.9	56.9	100.0	123
45-49	94.6	68.8	75.9	59.8	100.0	112
Marital status						
Never married	86.6	43.6	42.1	28.7	100.0	202
Married/cohabiting	94.5	63.8	79.1	65.8	100.0	1077
Divorced/widowed	93.7	54.6	65.7	58.5	100.0	207
Education						
No education	93.4	63.8	75.4	62.7	100.0	798
1-4 years	91.8	50.0	69.4	55.1	100.0	196
5-9 years	92.5	58.4	64.7	56.0	100.0	334
Secondary or greater	96.8	53.8	75.3	58.9	100.0	158
Total	93.4	59.7	72.3	59.9	100.0	1490

*Some women did not answer all questions thus the N categories do not all add to 1490

Looking at women who received family planning information from a visiting health worker in the last 12 months, we see differences in percentages across age categories. Women age 15-19 were least likely to have received family planning information (46%) and women age 35-39 were most likely (69%). By marital status, married women had the highest proportions (64%) and never married women had the lowest (44%). And by level of education, women with no education were most likely to have received information about family planning from a visiting field worker in the last 12 months (64%).

In the last 12 month, 72% of women surveyed had visited a health facility for any reason. Looking at the data by age categories, 25-29 year olds were most likely to have visited a facility (81%) whereas young women ages 15-19 were least likely (48%). Married women were most likely to have visited a facility (79%) and women with no education or secondary or greater levels of education had similarly high

proportions of women who had visited a health facility in the last 12 months (75%).

Among those women who had visited a facility for any reason in the last 12 months, 60% had received information about family planning at that time. Women ages 35-39 (73%), married women (66%), and women with no education (63%) were most likely to receive information about family planning at the time of their visit.

Regarding source of contraception (Table 18), most women who have used injectable contraceptives have received the injection from a government health center (60%). A similar proportion of women who are interested in injectable contraceptives but have never used it would prefer to receive it there as well. And among all women surveyed, the majority of women would prefer to receive their chosen method at a government health center (49%), followed by a government health post (36%).

Table 18: Current and preferred source of Depo among women of reproductive age*

Last source of Depo injection among women who have ever used Depo (N=662)		
	%	N
Government hospital	(1.1)	7
Government health center	59.8	390
Government health post	37.8	247
CBRHA	(0.8)	5
Other	(0.6)	4
Preferred source of Depo among women who have ever used Depo (N=662)		
Government hospital	(1.8)	12
Government health center	51.4	340
Government health post	39.9	264
CBRHA	(2.7)	18
Other	9.7	64
Preferred source of Depo among women who are interested in Depo but have never used it (N=466)		
Government hospital	(3.7)	17
Government health center	60.9	284
Government health post	42.3	197
CBRHA	5.4	25
Other	(2.6)	12
Preferred source of contraception among all women (N=1490)		
Government hospital	3.4	50
Government health center	48.9	729
Government health post	36.3	541
CBRHA	8.3	124
Other	10.2	152

() Percentage in parentheses indicates that estimate was based on less than 25 cases

*Responses not mutually exclusive

4. In Summary

The baseline survey produced important demographic, fertility, and contraceptive data about the target population. Descriptive statistics revealed that 30% of women of reproductive age in the Central Zone are currently using any method of contraception. The most commonly used method is injectable contraceptives, which is used by 21% of women of reproductive age. Injectable contraceptives are also the most commonly preferred method (55%) and are the method with the greatest number of women who prefer it but are not currently using it. In addition, approximately 16% of women in the Central Zone have an unmet need for contraception. Combined with the contraceptive prevalence, 46% of women in the Zone have a potential demand for contraception currently. These findings highlight the demand for contraceptive services in the region and the need for improved access to injectable contraceptives in particular.

5. Appendix

5.1 English Questionnaire

Ethiopia Community FP Survey
Questionnaire 2011

Question		Response			Code
A	Questionnaire ID #				/ / / / /
B	Woreda				/ / /
C	Kebele				/ / /
Researcher visit		1	2	3	
D	Date	__/__/__	__/__/__	__/__/__	
E	Researcher code	[][]	[][]	[][]	
F	Result	[]	[]	[]	
Result codes: 1=Completed 2=Refused 3=Postpone 4=Incomplete 5=Non residential 6=Non existent 7=Other					
RECORD THE TIME: START OF INTERVIEW			HOUR.....	<input type="text"/>	<input type="text"/>
			MINUTES	<input type="text"/>	<input type="text"/>
RECORD THE TIME: END OF INTERVIEW			HOUR.....	<input type="text"/>	<input type="text"/>
			MINUTES	<input type="text"/>	<input type="text"/>

SECTION 1: DEMOGRAPHIC INFORMATION

Number	Question	Coding Categories	Skip
101	How long have you been living continuously in (NAME OF CURRENT PLACE OF RESIDENCE)? IF LESS THAN ONE YEAR, RECORD '00' YEARS.	YEARS..... <input type="text"/> <input type="text"/> MONTHS..... <input type="text"/> <input type="text"/> ALWAYS.....95	→103
102	Just before you moved here, did you live a town or countryside?	Urban.....1 Rural.....2	
103	How long does it take you to get to the nearest health facility?	HOUR..... <input type="text"/> <input type="text"/> MINUTES..... <input type="text"/> <input type="text"/>	
104	How would you travel to the nearest health facility?	WALKING.....1 BICYCLE.....2 MOTORCYCLE.....3 CAR.....4 BUS.....5 TAXI.....6 HORSE/DONKEY.....7 OTHER.....8 (SPECIFY) _____	
105	How old were you at your last birthday?	YEARS..... <input type="text"/> <input type="text"/> DON'T KNOW..... 88	
106	Are you currently attending school?	YES.....1 NO.....2	→ 108
107	Have you ever attended school?	YES.....1 NO.....2	→ 109
108	What is the highest grade you have completed? IF NONE, WRITE '00'.	GRADE..... <input type="text"/> <input type="text"/> TECHNICAL/VOCATIONAL CERT.....13 UNIVERSITY/COLLEGE DIPLOMA.....14 HIGHER THAN UNIVERSITY/ COLLEGE DIPLOMA.....15	
109	Can you read?	YES.....1 NO.....2	
110			
111	What is your occupation, that is, what kind of work do you mainly do?	GOVT WORKER.....1 STUDENT.....2 HOUSEWIFE.....3 MERCHANT.....4 OTHER.....5 (SPECIFY) _____	
112	Were you paid in cash or kind for this work or are you not paid at all?	CASH ONLY.....1 CASH AND KIND.....2 IN KIND ONLY.....3 NOT PAID.....4	

SECTION 2. REPRODUCTION

Number	Question	Coding Categories	Skip
201	Now I would like to ask about all the live births and pregnancies you have had during your life. Have you ever been pregnant?	YES.....1 NO.....2	→301
202	Have you ever given birth?	YES.....1 NO.....2	→212
203	How old were you at the birth of your first child?	YEARS <input type="text"/> <input type="text"/> DON'T KNOW.....88	
204	Do you have any sons or daughters to whom you have given birth who are still alive?	YES.....1 NO.....2	→206
205	How many sons are alive? And how many daughters are alive? IF NONE, RECORD '00'.	SONS <input type="text"/> <input type="text"/> DAUGHTERS <input type="text"/> <input type="text"/>	
206	Sometimes it happens that children die. It may be painful to talk about and I am sorry to ask you about painful memories, but it is important to get correct information. Have you ever given birth to a son or daughter who was born alive but later died? IF NO, PROBE: Any baby who cried or showed signs of life but did not survive?	YES.....1 NO.....2	→208
207	How many boys have died? How many girls have died? IF NONE, RECORD '00'.	BOYS DIED <input type="text"/> <input type="text"/> GIRLS DIED <input type="text"/> <input type="text"/>	
208	SUM TOTALS FROM 205 AND 207 AND RECORD. IF NONE, RECORD '00'.	TOTAL..... <input type="text"/> <input type="text"/>	
209	CHECK 208: Just to make sure that I have this right: you have had in TOTAL _____ births during your life. Is that correct?	YES.....1 NO.....2	PROBE AND CORRECT 205-207 AS NECESSARY
210	What is the age of your youngest child?	YEARS..... <input type="text"/> <input type="text"/> MONTHS (If less than 1 year)..... <input type="text"/> <input type="text"/>	
211			
212	Are you pregnant now?	YES.....1 NO.....2 DON'T KNOW.....88	→214 →214
213	How many months pregnant are you? RECORD NUMBER OF COMPLETED MONTHS.	MONTHS..... <input type="text"/> <input type="text"/> LESS THAN 1 MONTH RECORD "00" DON'T KNOW.....88	
214	At the time your last pregnancy, did you want to become pregnant <u>then</u> , did you want to wait until <u>later</u> , or did you <u>not want</u> to have any (more) children at all?	THEN.....1 LATER.....2 NOT AT ALL.....3	→216 →216

215	How long did you want to wait to become pregnant?	YEARS..... MONTHS.....	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
216	Have you ever had a pregnancy that was not carried to term?	YES.....1 NO.....2	→222
217	How many pregnancies have not been carried to term?	NUMBER.....	<input type="text"/> <input type="text"/>
218	Did you or someone induce an abortion?	INDUCED.....1 DID NOT INDUCE.....2	→222
219	How many abortions did you induce?	NUMBER.....	<input type="text"/> <input type="text"/>
220	When was the last abortion induced?	YEAR	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
221	How many months pregnant were you when the pregnancy ended?	MONTHS..... LESS THAN 1 MO.....00 DON'T KNOW.....88	<input type="text"/> <input type="text"/>
222	Have you ever received any counseling related to family planning or contraception from a health worker after you gave birth, during a pregnancy or after pregnancy ended?	YES.....1 NO.....2	

SECTION 3. CONTRACEPTION

301	<p>Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.</p> <p>Which ways or methods have you heard about? FOR METHODS NOT MENTIONED SPONTANEOUSLY, ASK: Have you ever heard of (METHOD)?</p> <p>CIRCLE CODE 1 IN 301 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 301, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 1 IF METHOD IS RECOGNIZED, AND CODE 2 IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH CODE 1 CIRCLED IN 301, ASK 302.</p>		302 Have you ever used (METHOD)?
01	FEMALE STERILIZATION Women can have an operation to avoid having any more children.	YES1 NO2	Have you ever had an operation to avoid having any more children? YES1 NO2
02	MALE STERILIZATION Men can have an operation to avoid having any more children.	YES1 NO2	Have you ever had a partner who had an operation to avoid having any more children? YES1 NO2
03	PILL Women can take a pill every day to avoid becoming pregnant.	YES1 NO2	YES1 NO2
04	IUD Women can have a loop or coil placed inside them by a doctor or a nurse.	YES1 NO2	YES1 NO2
05	INJECTABLE CONTRACEPTIVES Women can have an injection by a health provider that stops them from becoming pregnant for one or more months.	YES1 NO2	YES1 NO2
06	IMPLANTS Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for one or more years.	YES1 NO2	YES1 NO2
07	CONDOM Men can put a rubber sheath on their penis before sexual intercourse.	YES1 NO2	YES1 NO2
08	FEMALE CONDOM Women can place a sheath in their vagina before sexual intercourse.	YES1 NO2	YES1 NO2
09	LACTATIONAL AMENORRHEA METHOD (LAM)	YES1 NO2	YES1 NO2
10	RHYTHM METHOD Every month that a woman is sexually active she can avoid pregnancy by not having sexual intercourse on the days of the month she is most likely to get pregnant.	YES1 NO2	YES1 NO2
11	WITHDRAWAL Men can be careful and pull out before climax.	YES1 NO2	YES1 NO2
12	EMERGENCY CONTRACEPTION As an emergency measure after unprotected sexual intercourse, women can take special pills at any time within five days to prevent pregnancy.	YES1 NO2	YES1 NO2

13	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	YES1 (SPECIFY) (SPECIFY) NO2	YES1 NO2 YES1 NO2
----	---	---	--

NUMBER	QUESTION	CODING CATEGORIES	SKIP
303	CHECK 302 (01):	WOMAN NOT STERILIZED WOMAN STERILIZED	→304 →313
304	Do you know of a place where you can obtain a method of family planning?	YES.....1 NO.....2	→306
305	Where is that? Any other place? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S). WRITE THE NAME OF THE PLACE IF MENTIONED _____ (NAME OF PLACE(S))	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 SHOP.....8 FRIEND/RELATIVE.....9 OTHER: _____10 (SPECIFY)	
306	In the last 12 months, were you visited by a fieldworker who talked to you about family planning?	YES.....1 NO.....2	
307	In the last 12 months, did you visit a health facility for any reason?	YES.....1 NO.....2	→309
308	Did you receive information about family planning when you visited the health facility?	YES.....1 NO.....2	
309	Would you like to receive information about family planning from a health facility?	YES.....1 NO.....2	
310	From where would you prefer to get family planning information?	GOVT HOSPITAL.....1 HEALTH CENTER.....2 HEALTH POST/HEW.....3 CBRHA/CHA.....4	

		PRIVATE CLINIC.....5 NGO FACILITY.....6 PHARMACY.....7 FRIEND/FAMILY MEMBER.....8 SCHOOL/TEACHER.....9 MAGAZINE/NEWSPAPER.....10 RADIO.....11 TELEVISION.....12 COMMUNITY/SPIRITUAL LEADER.....13 OTHER.....14 (SPECIFY)	
311	CHECK 212:	<p style="text-align: center;">NOT PREGNANT OR UNSURE PREGNANT</p>	<p style="text-align: center;">→312 →313</p>
312	Are you currently doing something or using any method to delay or avoid getting pregnant?	YES.....1 NO.....2	→401
313	NOT PREGNANT WOMAN: Which method are you currently using? CIRCLE ALL MENTIONED. IF MORE THAN ONE METHOD MENTIONED, FOLLOW SKIP INSTRUCTION FOR HIGHEST METHOD IN LIST. NOT PREGNANT WOMAN: Which method were you using before you became pregnant?	FEMALE STERILIZATION.....1 PILL.....2 IUD.....3 INJECTABLE CONTRACEPTIVES.....4 IMPLANTS.....5 CONDOM.....6 FEMALE CONDOM.....7 MALE STERILIZATION.....8 LACTATIONAL AMENORRHEA.....9 RHYTHM METHOD.....10 WITHDRAWAL.....11 OTHER.....12 (SPECIFY)	<p style="text-align: center;">→401 →401</p>
314	Where did you obtain (CURRENT/LAST METHOD) when you started using it? PROBE TO IDENTIFY THE TYPE OF SOURCE AND CIRCLE THE APPROPRIATE CODE(S). WRITE THE NAME OF THE PLACE IF MENTIONED _____ (NAME OF PLACE(S)) Where did you learn how to use the rhythm/lactational amenorrhea method?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 SHOP.....8 FRIEND/RELATIVE.....9	

		OTHER: _____10 (SPECIFY)						
315	Why are you using this (these) method(s)?	SPACING.....1 COMPLETED FAMILY SIZE.....2 ECONOMIC REASONS.....3 MEDICAL REASONS.....4 PROVIDER'S DECISION.....5 OTHER (SPECIFY).....6						
316	How much did you pay in total, including the cost of the method and any consultation for this method?	COST... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> FREE.....9995 DONT KNOW.....9998						
317	At the time you obtained this method, were you told about side effects or problems you might have with the method?	YES.....1 NO.....2						
318	Were you told what to do if you experienced side effects or problems?	YES.....1 NO.....2						
319	At that time you obtained this method, were you told about other methods of family planning that you could use?	YES.....1 NO.....2						

SECTION 4: DEPOPROVERA KNOWLEDGE AND USE

NUMBER	QUESTION	CODING CATEGORIES	SKIP
401	CHECK 302 (01):	WOMAN NOT STERILIZED WOMAN STERILIZED	→402 →501
402	CHECK 301 (5):	1 IS CIRCLED, MENTIONED INJECTABLE CONTRACEPTIVES 2 IS CIRCLED, DID NOT MENTION INJECTABLE CONTRACEPTIVES	→403 →427
403	Where have you heard about injectable contraceptives or Depo?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 SHOP.....8 FRIEND/RELATIVE.....9 MAGAZINE/NEWSPAPER.....10 RADIO.....11 TELEVISION.....12	

		OTHER: _____13 (SPECIFY)	
404	Where or from whom would you like to get information about Depo?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 SHOP.....8 FRIEND/RELATIVE.....9 MAGAZINE/NEWSPAPER.....10 RADIO.....11 TELEVISION.....12 OTHER: _____13 (SPECIFY)	
405	How long does Depo provide protection against pregnancy?	3 months, 12 weeks.....1 ANY OTHER ANSWER.....2 DON'T KNOW88	
406	Can you name some of the side effects women can have when using Depo? DON'T READ LIST. CIRCLE ALL MENTIONED. PROBE FOR MORE: "Any others?"	IRREGULAR BLEEDING.....1 HEAVY BLEEDING.....2 SPOTTING.....3 AMENORRHEA.....4 HEADACHE.....5 WEIGHT GAIN.....6 WEIGHT LOSS.....7 IRRITABILITY.....8 HAIR LOSS.....9 SKIN COLOR CHANGE.....10 OTHER (SPECIFY)_____11 DON'T KNOW88	
407	For what health problems, if any, do you think a woman using Depo should go to a clinic and talk to a nurse or doctor? DON'T READ LIST. CIRCLE ALL MENTIONED.	CHRONIC HEADACE.....1 VERY HEAVY BLEEDING.....2 PREGNANCY.....3 CHEST PAIN.....4 OTHER (SPECIFY)_____5 DON'T KNOW88	

408	CHECK 302 (5):	1 IS CIRCLED, USED INJECTABLE CONTRACEPTIVES 2 IS CIRCLED, NEVER USED INJECTABLE CONTRACEPTIVES	→409 →427				
409	Are you currently using Depo?	YES.....1 NO.....2	→413				
410	Why did you discontinue use of Depo?	SIDE EFFECTS.....1 FEAR OF SIDE EFFECTS.....2 DON'T KNOW WHEN TO GO.....3 TRYING TO GET PREGNANT.....4 COST.....5 GOT PREGNANT.....6 WANT TO USE OTHER METHOD.....7 OTHER (specify).....8	→413 →413				
411	Are you using a different method?	YES.....1 NO.....2	→413				
412	Which method?	FEMALE STERILIZATION.....1 PILL.....2 IUD.....3 IMPLANTS.....4 CONDOM.....5 FEMALE CONDOM.....6 MALE STERILIZATION.....7 LACTATIONAL AMENORREA.....8 RHYTHM METHOD.....9 WITHDRAWAL.....10 OTHER.....11 (SPECIFY)					
413	For how long have you been using Depo?	YEARS..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> MONTHS.....					
414	Were you using a different method before you started using Depo?	YES.....1 NO.....2	→418				
415	Which method did you switch from?	PILL.....1 IUD.....2 IMPLANTS.....3 CONDOM.....4 FEMALE CONDOM.....5 MALE STERILIZATION.....6 LACTATIONAL AMENORREA.....7					

		RHYTHM METHOD.....8 WITHDRAWAL.....9 OTHER.....10 (SPECIFY)	
416	Do you think you will get another injection of Depo?	YES.....1 NO.....2	→418
417	Why not?	SIDE EFFECTS.....1 FEAR SIDE EFFECTS.....2 DON'T KNOW WHEN TO GO.....3 TRYING TO GET PREGNANT.....4 I AM USING ANOTHER METHOD.....5 GOT PREGNANT.....6 COST.....7 OTHER (specify).....8	
418	When did you receive your last injection?	D M Y _/_/_/_/ DON'T KNOW.....88	
419	Where did you receive your last Depo injection?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 OTHER:.....8 (SPECIFY)	
420	Where would you prefer to receive Depo injections?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 OTHER:.....8 (SPECIFY)	
421	From whom did you receive the Depo injection?	HEW.....1 NURSE.....2 DOCTOR.....3 PHARMACIST.....4 CBRHA.....5 OTHER.....6 (SPECIFY)	

422	From whom would you like to receive the Depo injection?	HEW.....1 NURSE.....2 DOCTOR.....3 PHARMACIST.....4 CBRHA.....5 OTHER.....6 (SPECIFY)	
423	Did you pay for your last injection?	YES.....1 NO.....2	→425
424	How much did you pay for your last Depo injection?	COST..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> FREE.....9995 DON'T KNOW.....9998	
425	Would you be willing to pay or continue to pay for Depo injections?	YES.....1 NO.....2	→501
426	How much would you be willing to pay?	COST..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW.....9998	All RESPONSES →501
427	Would you like to receive information about Depo?	YES.....1 NO.....2	→429
428	Where would you like to get information about Depo?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 SHOP.....8 FRIEND/RELATIVE.....9 MAGAZINE/NEWSPAPER.....10 RADIO.....11 TELEVISION.....12 OTHER: _____13 (SPECIFY)	
429	Would you be interested in using Depo to prevent pregnancy?	YES.....1 NO.....2	→431
430	Why not?	NOT MARRIED.....1 INFREQUENT SEX/NO SEX.....2 MENOPAUSAL/HYSTERECTOMY.....3	→501 →501 →501

		SUBFECUND/INFECUND.....4 →501 WANTS AS MANY CHILDREN AS POSSIBLE.....5 →501 RESPONDENT OPPOSED.....6 →501 HUSBAND/PARTNER OPPOSED.....7 →501 OTHERS OPPOSED.....8 →501 RELIGIOUS PROHIBITION.....9 →501 KNOWS NO METHOD.....10 →501 KNOWS NO SOURCE.....11 →501 HEALTH CONCERNS.....12 →501 FEAR OF SIDE EFFECTS.....13 →501 LACK OF ACCESS/TOO FAR.....14 →501 COSTS TOO MUCH.....15 →501 NOT CONVENIENT TO USE.....16 →501 INTERFERES WITH BODY'S NORMAL PROCESSES.....17 →501 OTHER (SPECIFY).....18 →501 DON'T KNOW.....88 →501					
431	Where would you like to receive a Depo injection?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 OTHER:8 (SPECIFY)					
432	From whom would you like to receive a Depo injection?	HEW.....1 NURSE.....2 DOCTOR.....3 PHARMACIST.....4 CBRHA.....5 OTHER.....6 (SPECIFY)					
433	Would you be willing to pay for Depo?	YES.....1 NO.....2					
434	How much would you be willing to pay for Depo?	COST..... <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; height: 20px;"></td> </tr> </table> DON'T KNOW.....9998					

SECTION 5: MARRIAGE AND SEXUAL ACTIVITY

NUMBER	QUESTION	CODING CATEGORIES	
501	What is your current marital status?	NEVER MARRIED.....1 MARRIED/COHABITING2 DIVORCED/WIDOWED.....3	→503 →503
502	What is the age of your husband or partner?	AGE..... <input type="text"/> <input type="text"/> DON'T KNOW.....88	
503	How old were you when you first had sexual intercourse?	AGE..... <input type="text"/> <input type="text"/> NEVER HAD SEXUAL INTERCOURSE "00"	

SECTION 6: FERTILITY PREFERENCES

Number	Question	Coding Categories	Skip
601	CHECK 302 (01):	WOMAN NOT STERILIZED WOMAN STERILIZED	→602 →SURVEY COMPLETE
602	CHECK 212: NOT PREGNANT/UNSURE: 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? PREGNANT: 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 (A/ANOTHER) CHILD.....1 NO MORE/NONE.....2 SAYS SHE CAN'T GET PREGNANT.....3 UNDECIDED/DON'T KNOW AND PREGNANT.....4 UNDECIDED/DON'T KNOW AND NOT PREGNANT/UNSURE.....5	→604 →621 →609 →607a
603	CHECK 212: NOT PREGNANT/UNSURE: How long would you like to wait from now before the birth of (a/another) child? PREGNANT: After the birth of the child you are expecting now, how long would you like to wait before the birth of another child?	MONTHS1 <input type="text"/> <input type="text"/> YEARS.....2 <input type="text"/> <input type="text"/> SOON/NOW.....993 SAYS CAN'T GET PREGNANT.....994 AFTER MARRIAGE.....995 OTHER (SPECIFY).....996 DON'T KNOW.....998	→608 →621 →608 →608 →608
604	CHECK 212:	NOT PREGNANT OR UNSURE PREGNANT	→605 →609

605	CHECK 312: USING A CONTRACEPTIVE METHOD?	NOT CURRENTLY USING →607 CURRENTLY USING → 611
606		

Number	Question	Coding Categories	Skip
607	<p>CHECK 602:</p> <p>WANTS TO HAVE ANOTHER CHILD: You have said that you do not want (a/another) child soon, but you are not using any method to avoid pregnancy. Can you tell me why you are not using a method? Any other reason?</p> <p>WANTS NO MORE/NONE: You have said that you do not want any (more) children, but you are not using any method to avoid pregnancy. Can you tell me why you are not using a method? Any other reason?</p> <p>RECORD ALL REASONS MENTIONED.</p>	<p>NOT MARRIED.....1</p> <p>FERTILITY-RELATED:</p> <p>NOT HAVING SEX.....2</p> <p>INFREQUENT SEX.....3</p> <p>MENOPAUSAL/HYSTERECTOMY.....4</p> <p>SUBFECUND/INFECUND.....5</p> <p>POSTPARTUM AMENORRHEIC.....6</p> <p>BREASTFEEDING.....7</p> <p>FATALISTIC.....8</p> <p>RESPONDENT OPPOSED.....9</p> <p>HUSBAND/PARTNER OPPOSED.....10</p> <p>OTHERS OPPOSED.....11</p> <p>RELIGIOUS PROHIBITION.....12</p> <p>KNOWS NO METHOD.....13</p> <p>KNOWS NO SOURCE.....14</p> <p>FEAR OF SIDE EFFECTS.....15</p> <p>LACK OF ACCESS/TOO FAR.....16</p> <p>COSTS TOO MUCH.....17</p> <p>INCONVENIENT TO USE.....18</p> <p>INTERFERES WITH BODY'S NORMAL PROCESSES.....19</p> <p>HEALTH CONCERNS.....20</p> <p>OTHER (SPECIFY).....21</p> <p>DON'T KNOW.....88</p>	
607a	In the next few weeks, if you discovered that you were pregnant, would that be a big problem, a small problem, or no problem for you?	<p>BIG PROBLEM.....1</p> <p>SMALL PROBLEM.....2</p> <p>NO PROBLEM.....3</p> <p>SAYS SHE CAN'T GET PREGNANT/ NOT HAVING SEX.....4</p>	
608	CHECK 312: USING A CONTRACEPTIVE METHOD?	NOT CURRENTLY USING → 609 CURRENTLY USING → 611	

		RHYTHM METHOD.....10 WITHDRAWAL.....11 OTHER METHOD.....12	
613	Why are you not using your preferred method of contraception?	TOO EXPENSIVE.....1 I CAN'T GET.....2 PROVIDER CHOSE FOR ME.....3 OTHER (SPECIFY).....4	
614	Why do you prefer this method? CIRCLE ALL THAT APPLY.	MORE CONVENIENT.....1 FEWER SIDE EFFECTS.....2 TRIED BEFORE.....3 THE ONLY METHOD I KNOW.....4 PARTNER ALLOWS IT.....5 PRIVACY.....6 LONG-ACTING PREFERRED.....7 SHORT-ACTING PREFERRED.....8 OTHER (SPECIFY).....9	
615			
616	From where would you prefer to obtain contraceptives?	GOVT. HOSPITAL.....1 GOVT HEALTH CENTER.....2 GOVT HEALTH POST.....3 CBHRA/CBD.....4 NGO FACILITY.....5 PRIVATE HOSPITAL/CLINIC.....6 PHARMACY/CHEMIST.....7 SHOP.....8 FRIEND/RELATIVE.....9 OTHER: _____10 (SPECIFY)	
617a	In the last few months, have you heard about family planning on the radio?	YES.....1 NO.....2	
617b	In the last few months, have you heard about family planning on the television?	YES.....1 NO.....2	
617c	In the last few months have you heard about family planning in the magazine or newspaper?	YES.....1 NO.....2	
618	From what sources would you prefer to hear about family planning?	GOVT HOSPITAL.....1 HEALTH CENTER.....2 HEALTH POST/HEW.....3 CBRHA/CHA.....4 PRIVATE CLINIC.....5	

		NGO FACILITY.....6 PHARMACY.....7 FRIEND/FAMILY MEMBER.....8 SCHOOL/TEACHER.....9 MAGAZINE/NEWSPAPER.....10 RADIO.....11 TELEVISION.....12 COMMUNITY/SPIRITUAL LEADER.....13 OTHER.....14 (SPECIFY)							
619	Are you willing to pay for your contraceptive method of choice?	YES.....1 NO.....2	→621						
620	How much would you be willing to pay for your contraceptive method of choice?	Cost..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>							
621	CHECK 204: HAS LIVING CHILDREN: If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be? NO LIVING CHILDREN: If you could choose exactly the number of children to have in your whole life, how many would that be? PROBE FOR A NUMERIC RESPONSE.	NONE.....00 NUMBER..... <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>			→623				
622a 622b 622c	How many of these children would you like to be boys? How many would you like to be girls? How many would the sex not matter?	BOYS GIRLS EITHER	<table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>						
623	Did you/will you use any family planning methods to help you obtain your ideal family size?	YES.....1 NO.....2	→625						
624	Why did you not use any family planning methods to help you obtain your ideal family size?	HAD FEWER CHILDREN THAN IDEAL.....01 TOO EXPENSIVE.....02 NOT AVAILABLE.....03 PARTNER OPPOSED.....04 RESPONDENT OPPOSED.....05 OTHERS OPPOSED.....06 RELIGIOUS PROHIBITION.....07 KNOWS NO METHOD.....08 KNOWS NO SOURCE.....09 HEALTH CONCERNS.....10							

		FEAR OF SIDE EFFECTS.....11 INCONVENIENT TO USE.....12 INTERFERES WITH BODY'S NORMAL PROCESSES.....13 OTHER (SPECIFY).....14 DON'T KNOW.....88	
625	CHECK 312: USING A CONTRACEPTIVE METHOD?	NOT CURRENTLY USING →629 CURRENTLY USING →626	
626	CHECK 313/313a:	CODE 1,2,3,4 CIRCLED →627 10 CIRCLED →627 NO CODE CIRCLED →628 OTHER →627	
627	Does your husband/partner/boyfriend know that you are using a method of family planning?	YES.....1 NO.....2 DON'T KNOW.....88	
628	Would you say that using contraception is mainly your decision, mainly your husband's/partner's/boyfriend's decision, or did you both decide together?	MAINLY RESPONDENT.....1 MAINLY HUSBAND/PARTNER.....2 JOINT DECISION.....3 OTHER (SPECIFY).....4	
628A	Now I want to ask you about your husband's/partner's views on family planning. Do you think that your husband/partner/boyfriend approves or disapproves of couples using a method to avoid pregnancy?	APPROVES.....1 DISAPPROVES.....2 DOESN'T KNOW.....88	
628B	How often have you talked to your husband/partner/boyfriend about family planning in the past year?	NEVER.....1 ONCE OR TWICE.....2 MORE THAN 2.....3	
629	Does your husband/partner want the same number of children that you want, or does he want more or fewer than you want?	SAME NUMBER.....1 MORE CHILDREN.....2 FEWER CHILDREN.....3 DON'T KNOW.....88	

5.2 Field Work Personnel

The baseline survey was implemented by a team comprised of people from the UC Berkeley Bixby Center for Population, Health and Sustainability, Mekelle University, and local staff. The Principal Investigator, Dr. Ndola Prata, and the Co-Principal Investigator, Dr. Amanuel Gessesew, trained the field Supervisors and the surveyors, who worked together to conduct the 1490 in-depth interviews over two weeks.

The Supervisors include Temesqel W/Giorgis, Goitom Taddesse, Asefa Mihrete. The surveyors include Biniam Tewolde, Belainesh Debesay, Hareq Berhe, Sara Bahta, Debele Sebuba, Areqawi G/her, Marlin Fissaha, Abeba Berhe, Roman Alemayhu, Mulu Tadese, Gobezie Yimenu, Akberet G/hiwot, Adhanet G/hiwot, Goitom Berhane, Yirga Ebuy, Yosef Hailu.

Karen Weidert, the Project Director, oversaw the data collection and was responsible for collecting the completed surveys and bringing them back to UC Berkeley. Suzanne Bell, the Monitoring and Evaluation Manager, was responsible for data entry at UC Berkeley and data coding/cleaning.