Nigeria Endline Codebook

Notes on the LEAP Nigeria Midline and Endline datasets

These datasets were broken into four sections. These sections are were presented to the user based on whether the participant reported still using the method.

#Section 1: Experiences with method	Relevant if still_using=1 (participant is still using the method)
#Section 2: Contraceptive use dynamics	Relevant if still_using=1 (participant is still using the method)
#Section 3: Experiences with method	Relevant if still_using=0 (participant is not still using the method)
#Section 4: Contraceptive use dynamics	Relevant if still_using=0 (participant is not still using the method)

Note that Section 1 and Section 3 presented very similar questions, worded slightly differently for continuers and discontinuers. For example:

Verision presented to continuers:	101. Can you rate your overall experience with your ${method}?
Version presented to discontinuers:	301. Can you rate your overall experience while you were using the ${method}?

For analysis purposes, these variables were merged. In the codebook and dataset you will find just one variable that captures the results of the above two questions, and other questions that were duplicated across sections in the data collection form.

Further, some questions in section 4 were repeated to present slightly different wording to participants who had their method removed rather than those whose method had been expelled. For example:

Version presented to participants who voluntarily had their method removed:	416. Have you been using any other contraceptive method since you had your ${method} removed?
Version presented to participants whose method came out unvoluntarily:	422. Have you been using any other contraceptive method since your ${method} came out?

Again, for analysis purposes, these variables were merged. In the codebook and dataset you will find just one variable that captures the results of the above two questions, and other questions that were duplicated.

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Variable name	Variable label/description	Variable type	Choices	Notes
id	Unique ID	integer		
interview_date	Date of interview	today		
start_time	Start time of survey	start		
end_time	End time of survey	end		
racode	004. Enter your RA code	integer		
state	005. Select the state	select_one	1=Abia 2=Benue 3=Cross River 4=Akwa Ibom 5=Edo 6=Enugu 7=Niger 8=FCT 9=Gombe 10=Taraba 11=Kaduna 12=Kano 13=Katsina 14=Lagos 15=Ogun 16=Oyo 17=Rivers	
facility	006. Select the facility	select_one	Numeric values representing facilities (labels removed for de-identification)	
method_log	007. Select method received from the endline contact log	select_one	LNG-IUS=L - LNG-IUS Copper-IUD=C - Copper IUD Implant=I - Implant	
outcome	Select the appropriate contact outcome	select_one	1=Reached within 5 attempts 2=Not reached after 5 attempts 3=Phone number invalid 4=Other	
outcome_other	Specify other contact outcome:	text		
consent	Did the participant consent to be interviewed?	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
method_confirmation	008. According to our information, you had received ${method_log} at the clinic when we first interviewed you for this study. Is that correct?	select_one	1=Confirm receiving LNG-IUS 2=Confirm receiving Copper IUD 3=Confirm receiving Implant 4=Not correct / does not match record	
method_recent	009. Which method did you receive?	select_one	1=LNG-IUS 2=Copper IUD 3=Implant 4=3-month injectable 5=Other	
method		calculated, string		
still_using	013. Are you still using the ${method}?	select_one	1=Yes 0=No 99=No Response	
method_rating	101. Can you rate your overall experience with your ${method}? Would you say that you are:	select_one	1=Very satisfied 2=Somewhat satisfied 3=Neither satisfied nor dissatisfied 4=Somewhat dissatisfied 5=Very dissatisfied 99=Do not read: No response	
positive_aspects_a	102.a. For you, what are the main positive aspects of the ${method}?: Nobody knows I am using it	select_one	1=Yes 0=No	
positive_aspects_b	102.b. For you, what are the main positive aspects of the ${method}?: Lasts long time	select_one	1=Yes 0=No	
positive_aspects_c	102.c. For you, what are the main positive aspects of the ${method}?: Highly / more effective /not worried about pregnancy	select_one	1=Yes 0=No	
positive_aspects_d	102.d. For you, what are the main positive aspects of the ${method}?: Convenient / don’t need to do anything on regular basis	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
positive_aspects_e	102.e. For you, what are the main positive aspects of the ${method}?: Continue having regular period	select_one	1=Yes 0=No	
positive_aspects_f	102.f. For you, what are the main positive aspects of the ${method}?: Lighter, shorter, or no period	select_one	1=Yes 0=No	
positive_aspects_g	102.g. For you, what are the main positive aspects of the ${method}?: Treats heavy or painful period	select_one	1=Yes 0=No	
positive_aspects_h	102.h. For you, what are the main positive aspects of the ${method}?: Side effects fewer / easier to cope with than other methods	select_one	1=Yes 0=No	
positive_aspects_i	102.i. For you, what are the main positive aspects of the ${method}?: Can get pregnant without problems after using	select_one	1=Yes 0=No	
positive_aspects_j	102.j. For you, what are the main positive aspects of the ${method}?: OK for use while breastfeeding	select_one	1=Yes 0=No	
positive_aspects_k	102.k. For you, what are the main positive aspects of the ${method}?: No drug in body /low or less hormones	select_one	1=Yes 0=No	
positive_aspects_l	102.l. For you, what are the main positive aspects of the ${method}?: Affordable	select_one	1=Yes 0=No	
positive_aspects_m	102.m. For you, what are the main positive aspects of the ${method}: Other	select_one	1=Yes 0=No	
positive_aspects_n	102.n. For you, what are the main positive aspects of the ${method}?: Not sure	select_one	1=Yes 0=No	
positive_aspects_o	102.o. For you, what are the main positive aspects of the ${method}?: Nothing positive	select_one	1=Yes 0=No	
positive_aspects_p	102.p. For you, what are the main positive aspects of the ${method}?: No response	select_one	1=Yes 0=No	
positive_aspects_other	102b. Specify the "other" positive aspects of the ${method}:	text		

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Variable name	Variable label/description	Variable type	Choices	Notes
negative_aspects_a	103.a. For you, what are the main negative aspects of the ${method}?: Insertion painful	select_one	1=Yes 0=No	
negative_aspects_b	103.b. For you, what are the main negative aspects of the ${method}?: Can feel strings during sex	select_one	1=Yes 0=No	
negative_aspects_c	103.c. For you, what are the main negative aspects of the ${method}?: Partner disapproves	select_one	1=Yes 0=No	
negative_aspects_d	103.d. For you, what are the main negative aspects of the ${method}?: Lasts too long	select_one	1=Yes 0=No	
negative_aspects_e	103.e. For you, what are the main negative aspects of the ${method}?: Not effective enough	select_one	1=Yes 0=No	
negative_aspects_f	103.f. For you, what are the main negative aspects of the ${method}?: Lighter or shorter periods	select_one	1=Yes 0=No	
negative_aspects_g	103.g. For you, what are the main negative aspects of the ${method}?: No period	select_one	1=Yes 0=No	
negative_aspects_h	103.h. For you, what are the main negative aspects of the ${method}?: Bleeding disturbances (spotting, change in frequency, irregular)	select_one	1=Yes 0=No	
negative_aspects_i	103.i. For you, what are the main negative aspects of the ${method}?: More bleeding during period or longer period	select_one	1=Yes 0=No	
negative_aspects_j	103.j. For you, what are the main negative aspects of the ${method}?: Ongoing pain / discomfort with method after inserted	select_one	1=Yes 0=No	
negative_aspects_k	103.k. For you, what are the main negative aspects of the ${method}?: Weight gain	select_one	1=Yes 0=No	
negative_aspects_l	103.l. For you, what are the main negative aspects of the ${method}?: Weight loss	select_one	1=Yes 0=No	
negative_aspects_m	103.m. For you, what are the main negative aspects of the ${method}?: Other side effects	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
negative_aspects_n	103.n. For you, what are the main negative aspects of the ${method}?: Drug in body / has hormones	select_one	1=Yes 0=No	
negative_aspects_o	103.o. For you, what are the main negative aspects of the ${method}?: Too expensive	select_one	1=Yes 0=No	
negative_aspects_p	103.p. For you, what are the main negative aspects of the ${method}?: Fear to become infertile / difficult to get pregnant after use	select_one	1=Yes 0=No	
negative_aspects_q	103.q. For you, what are the main negative aspects of the ${method}?: Other	select_one	1=Yes 0=No	
negative_aspects_r	103.r. For you, what are the main negative aspects of the ${method}?: Not sure	select_one	1=Yes 0=No	
negative_aspects_s	103.s. For you, what are the main negative aspects of the ${method}?: Nothing negative	select_one	1=Yes 0=No	
negative_aspects_t	103.t. For you, what are the main negative aspects of the ${method}?: No response	select_one	1=Yes 0=No	
negative_aspects_other	103b. Specify the "other" negative aspects of the ${method}:	text		
changes_yn	104. Have you experienced any changes in your period while using the ${method} since we first intervied you 12 months ago?	select_one	1=Yes 0=No 99=No Response	
changes_a	105.a. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Heavier period	select_one	1=Yes 0=No	
changes_b	105.b. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Lighter period	select_one	1=Yes 0=No	
changes_c	105.c. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Longer period	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
changes_d	105.d. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Shorter period	select_one	1=Yes 0=No	
changes_e	105.e. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Bleeding disturbances (spotting, change in frequency, irregular)	select_one	1=Yes 0=No	
changes_f	105.f. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Stopped having period	select_one	1=Yes 0=No	
changes_g	105.g. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Less pain during period	select_one	1=Yes 0=No	
changes_h	105.h. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: More pain during period	select_one	1=Yes 0=No	
changes_i	105.i. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: Other	select_one	1=Yes 0=No	
changes_j	105.j. What changes have you experienced in your period while using the ${method} since your last interview 12 months ago?: No response	select_one	1=Yes 0=No	
changes_other	105b. Specify other changes you have experienced:	text		

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Variable name	Variable label/description	Variable type	Choices	Notes
bleeding_rating	106. Overall, can you rate your experience with the bleeding pattern for your period while using the ${method} since we first intervied you 12 months ago? Would you say that you are:	select_one	1=Very happy with the way your period has been 2=Somewhat happy 3=Neither happy nor unhappy 4=Somewhat unhappy 5=Very unhappy 99=Do not read: No response	
product	107. What is the main type of menstrual product that you currently use to manage your period flow?	select_one	1=Menstrual cup 2=Reusable pads 3=Disposable pads 4=Tampons 5=Cloth 6=Free bleeding 7=No or light flow/ Do not need product 8=Other 99=No response	Only asked to people still using their method
product_other	107b. Specify type of menstrual product that you currently use	text		Only asked to people still using their method
product_usage	108. Overall, are you using more, less, or about the same amount of menstrual products to manage your period now compared to before you started using this method?	select_one	1=More products now than before 2=Same amount now as before 3=Less products now than before 4=Using different products than before 99=No response	Only asked to people still using their method
bleeding_impact_life	110. Overall, has less bleeding or not bleeding had a positive, negative, or no impact on your life?	select_one	1=Positive impact 2=Negative impact 3=No impact 99=No response	
bleeding_impact_home	111. Has less bleeding or not bleeding had a positive, negative, or no impact on your ability to complete your duties at home?	select_one	1=Positive impact 2=Negative impact 3=No impact 99=No response	

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Variable name	Variable label/description	Variable type	Choices	Notes
bleeding_impact_religion	112. Has less bleeding or not bleeding had a positive, negative, or no impact on your ability to practice your religion?	select_one	1=Positive impact 2=Negative impact 3=No impact 4=No religion 99=No response	
bleeding_impact_work	113. Has less bleeding or not bleeding had a positive, negative, or no impact on your ability to perform work outside of the home?	select_one	1=Positive impact 2=Negative impact 3=No impact 4=No work outside home 99=No response	
bleeding_impact_spouse	114. Has less bleeding or not bleeding had a positive, negative, or no impact on your relationship with your husband / partner?	select_one	1=Positive impact 2=Negative impact 3=No impact 4=No husband/partner 99=No response	
any_side_effects	115. Besides changes in your period, have you experienced any side effects while using the ${method} since we first interviewed you 12 months ago?	select_one	1=Yes 0=No 99=No Response	
side_effects_a	116.a. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Vaginal infections	select_one	1=Yes 0=No	
side_effects_b	116.b. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Pain during sex	select_one	1=Yes 0=No	
side_effects_c	116.c. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Lack of sexual desire	select_one	1=Yes 0=No	
side_effects_d	116.d. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Pelvic discomfort / pain	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
side_effects_e	116.e. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Expulsion (IUD coming out on own)	select_one	1=Yes 0=No	
side_effects_f	116.f. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Changes in skin	select_one	1=Yes 0=No	
side_effects_g	116.g. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Headaches	select_one	1=Yes 0=No	
side_effects_h	116.h. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Nausea / vomiting	select_one	1=Yes 0=No	
side_effects_i	116.i. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Abdominal pain	select_one	1=Yes 0=No	
side_effects_j	116.j. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Breast tenderness	select_one	1=Yes 0=No	
side_effects_k	116.k. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Mood changes	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
side_effects_l	116.l. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Weight gain	select_one	1=Yes 0=No	
side_effects_m	116.m. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Weight loss	select_one	1=Yes 0=No	
side_effects_n	116.n. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: Other	select_one	1=Yes 0=No	
side_effects_o	116.o. Besides changes in your period, what side effects have you experienced while using the ${method} since your last interview 12 months ago?: No response	select_one	1=Yes 0=No	
side_effects_other	116b. Specify other side effects you experienced:	text		
saw_provider	117. Have you gone to see a provider or called a provider about changes in your period, other side effects, or any other problem or concern with your ${method} since we first interviewed you 12 months ago?	select_one	1=Yes, during scheduled follow-up visit 2=Yes, at another time 3=No 99=No response	

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Variable name	Variable label/description	Variable type	Choices	Notes
main_problem	118. What is the main problem or concern that you discussed with a provider?	select_one	1=Heavier period 2=Lighter period 3=Longer period 4=Shorter period 5=Bleeding disturbances (spotting, change in frequency, irregular) 6=Stopped having period 7=Less pain during period 8=More pain during period 9=Vaginal infections 10=Pain during sex 11=Lack of sexual desire 12=Pelvic discomfort / pain 13=Expulsion (IUD coming out on own) 14=Changes in skin 15=Headaches 16=Nausea / vomiting 17=Abdominal pain 18=Breast tenderness 19=Mood changes 20=Weight gain 21=Weight loss 22=Other 99=No response	
other_main_problem	118b. Specify the main problem or concern that made you go see a provider	text		
provider_action	119. What did the provider do to help you with this problem or concern?	select_one	1=Nothing 2=Told normal / not sign of illness 3=Told temporary and would go away 4=Told me to observe it more and come back another time 5=Gave medication to manage 6=Told how to manage myself 7=Removed method 8=Other 99=No response	

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Variable name	Variable label/description	Variable type	Choices	Notes
other_provider_action	119b. Specify what the provider did to help you:	text		
provider_eval	120. What is your evaluation of how the provider addressed this problem or concern? Would you say that you were:	select_one	1=Very satisfied 2=Somewhat satisfied 3=Neither satisfied nor dissatisfied 4=Somewhat dissatisfied 5=Very dissatisfied 99=Do not read: No response	
still_problem	121. Are you still experiencing this problem or concern?	select_one	1=Yes 0=No 99=No Response	
recommended_method	122. Have you recommended the ${method} to a friend or someone you know?	select_one	1=Yes 0=No 99=No Response	
advised_friends	123. Have you advised any of your friends or anyone you know NOT to use the ${method} because of any problem with the method?	select_one	1=Yes 0=No 99=No Response	
went_back_removal	201. Since we first interviewed you 12 months ago, have you ever gone to a provider and asked to have your ${method} removed?	select_one	1=Yes 0=No 99=No Response	
wanted_method_removed	202. Since we first interviewed you 12 months ago, have you ever wanted to stop using your ${method} even if you did not actually go to a provider to have it removed?	select_one	1=Yes 0=No 99=No Response	
reasons_to_stop_a	203.a. Why did you want to stop using your ${method}?: Became pregnant while using	select_one	1=Yes 0=No	
reasons_to_stop_b	203.b. Why did you want to stop using your ${method}?: Wanted to become pregnant	select_one	1=Yes 0=No	
reasons_to_stop_c	203.c. Why did you want to stop using your ${method}?: Infrequent sex / partner away / lost partner	select_one	1=Yes 0=No	
reasons_to_stop_d	203.d. Why did you want to stop using your ${method}?: Partner says could feel strings during sex	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
reasons_to_stop_e	203.e. Why did you want to stop using your ${method}?: Partner disapproved	select_one	1=Yes 0=No	
reasons_to_stop_f	203.f. Why did you want to stop using your ${method}?: Wanted more effective method	select_one	1=Yes 0=No	
reasons_to_stop_g	203.g. Why did you want to stop using your ${method}?: Inconvenient / difficult to use	select_one	1=Yes 0=No	
reasons_to_stop_h	203.h. Why did you want to stop using your ${method}?: Lighter or shorter period	select_one	1=Yes 0=No	
reasons_to_stop_i	203.i. Why did you want to stop using your ${method}?: No period	select_one	1=Yes 0=No	
reasons_to_stop_j	203.j. Why did you want to stop using your ${method}?: Bleeding disturbances (spotting, change in frequency, irregular)	select_one	1=Yes 0=No	
reasons_to_stop_k	203.k. Why did you want to stop using your ${method}?: More bleeding during period or longer period	select_one	1=Yes 0=No	
reasons_to_stop_l	203.l. Why did you want to stop using your ${method}?: Pain / discomfort with method after inserted	select_one	1=Yes 0=No	
reasons_to_stop_m	203.m. Why did you want to stop using your ${method}?: Weight gain	select_one	1=Yes 0=No	
reasons_to_stop_n	203.n. Why did you want to stop using your ${method}?: Weight loss	select_one	1=Yes 0=No	
reasons_to_stop_o	203.o. Why did you want to stop using your ${method}?: Other side effects	select_one	1=Yes 0=No	
reasons_to_stop_p	203.p. Why did you want to stop using your ${method}?: Drug in body / had hormones	select_one	1=Yes 0=No	
reasons_to_stop_q	203.q. Why did you want to stop using your ${method}?: Difficult getting treatment for side effects (too expensive / far)	select_one	1=Yes 0=No	
reasons_to_stop_r	203.r. Why did you want to stop using your ${method}?: Fear to become infertile / difficult to get pregnant after use	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
reasons_to_stop_s	203.s. Why did you want to stop using your ${method}?: Other	select_one	1=Yes 0=No	
reasons_to_stop_t	203.t. Why did you want to stop using your ${method}?: Not sure	select_one	1=Yes 0=No	
reasons_to_stop_u	203.u. Why did you want to stop using your ${method}: No response	select_one	1=Yes 0=No	
reasons_to_stop_other	203b. Specify why you wanted to stop using your ${method}	text		
why_not_goback_a	205.a. Why did you not go to a provider to ask to have it removed?: Changed my mind / wanted to keep it	select_one	1=Yes 0=No	
why_not_goback_b	205.b. Why did you not go to a provider to ask to have it removed?: Husband / partner wanted me to keep it	select_one	1=Yes 0=No	
why_not_goback_c	205.c. Why did you not go to a provider to ask to have it removed?: Did not know place to get removal	select_one	1=Yes 0=No	
why_not_goback_d	205.d. Why did you not go to a provider to ask to have it removed?: No time to go / too busy	select_one	1=Yes 0=No	
why_not_goback_e	205.e. Why did you not go to a provider to ask to have it removed?: Too far	select_one	1=Yes 0=No	
why_not_goback_f	205.f. Why did you not go to a provider to ask to have it removed?: Too expensive	select_one	1=Yes 0=No	
why_not_goback_g	205.g. Why did you not go to a provider to ask to have it removed?: Services not available / schedule not convenient	select_one	1=Yes 0=No	
why_not_goback_h	205.h. Why did you not go to a provider to ask to have it removed?: Did not want to go because place unclean	select_one	1=Yes 0=No	
why_not_goback_i	205.i. Why did you not go to a provider to ask to have it removed?: Did not want to go because staff rude	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
why_not_goback_j	205.j. Why did you not go to a provider to ask to have it removed?: Did not want to go because don't trust that staff are knowledgeable	select_one	1=Yes 0=No	
why_not_goback_k	205.k. Why did you not go to a provider to ask to have it removed?: Side effects or bleeding changes reduced/ became better	select_one	1=Yes 0=No	
why_not_goback_l	205.l. Why did you not go to a provider to ask to have it removed?: Other	select_one	1=Yes 0=No	
why_not_goback_m	205.m. Why did you not go to a provider to ask to have it removed? Not sure	select_one	1=Yes 0=No	
why_not_goback_n	205.n. Why did you not go to a provider to ask to have it removed? No response	select_one	1=Yes 0=No	
why_not_goback_other	205b. Specify why you did not go to a provider to ask to have it removed	text		
times_remove	206. In total, how many times did you go to a provider about having your ${method} removed?	integer		
place_remove	207. Did you try to get it removed at the same place where you had it inserted or a different place?	select_one	1=Same place only 2=Different place only 3=Tried at same place AND at different place 88=Not sure 99=No response	
why_not_remove_a	208.a. Why did you not have your ${method} removed, even though you tried?: Facility not open	select_one	1=Yes 0=No	
why_not_remove_b	208.b. Why did you not have your ${method} removed, even though you tried?: Long line / long wait	select_one	1=Yes 0=No	
why_not_remove_c	208.c. Why did you not have your ${method} removed, even though you tried?: Told they do not perform removals	select_one	1=Yes 0=No	
why_not_remove_d	208.d. Why did you not have your ${method} removed, even though you tried?: Equipment / supplies not available	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
why_not_remove_e	208.e. Why did you not have your ${method} removed, even though you tried?: Too expensive / problem getting money	select_one	1=Yes 0=No	
why_not_remove_f	208.f. Why did you not have your ${method} removed, even though you tried?: Provider counselled me to keep it	select_one	1=Yes 0=No	
why_not_remove_g	208.g. Why did you not have your ${method} removed, even though you tried?: Provider refused	select_one	1=Yes 0=No	
why_not_remove_h	208.h. Why did you not have your ${method} removed, even though you tried?: Qualified provider not available	select_one	1=Yes 0=No	
why_not_remove_i	208.i. Why did you not have your ${method} removed, even though you tried?: Provider tried but could not remove	select_one	1=Yes 0=No	
why_not_remove_j	208.j. Why did you not have your ${method} removed, even though you tried?: Other	select_one	1=Yes 0=No	
why_not_remove_k	208.k. Why did you not have your ${method} removed, even though you tried?: No response	select_one	1=Yes 0=No	
why_not_remove_other	208b. Specify why you did not have your ${method} removed, even though you tried	text		
right_decision	209. Do you think that keeping your ${method} was the right decision for you?	select_one	1=Yes 0=No 99=No Response	
plan	210. Do you plan to continue using your ${method} until its expiration date, or will you try to have it removed earlier?	select_one	1=Will continue until expiration date 2=Will try to have it removed before expiration date 3=Do not plan to remove 88=Not sure 99=No response	
durationmonths	400. Approximately how long did you have your ${method} before you had it removed? Months	integer		
durationweeks	400. Approximately how long did you have your ${method} before you had it removed? Weeks	integer		

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Variable name	Variable label/description	Variable type	Choices	Notes
durationdays	400. Approximately how long did you have your ${method} before you had it removed? Days	integer		
sdreason_remove_a	401.a. What are the reasons why you had your ${method} removed?: Became pregnant while using	select_one	1=Yes 0=No	
sdreason_remove_b	401.b. What are the reasons why you had your ${method} removed?: Wanted to become pregnant	select_one	1=Yes 0=No	
sdreason_remove_c	401.c. What are the reasons why you had your ${method} removed?: Infrequent sex / partner away / lost partner	select_one	1=Yes 0=No	
sdreason_remove_d	401.d. What are the reasons why you had your ${method} removed?: Partner says could feel strings during sex	select_one	1=Yes 0=No	
sdreason_remove_e	401.e. What are the reasons why you had your ${method} removed?: Partner disapproved	select_one	1=Yes 0=No	
sdreason_remove_f	401.f. What are the reasons why you had your ${method} removed?: Wanted more effective method	select_one	1=Yes 0=No	
sdreason_remove_g	401.g. What are the reasons why you had your ${method} removed?: Inconvenient / difficult to use	select_one	1=Yes 0=No	
sdreason_remove_h	401.h. What are the reasons why you had your ${method} removed?: Lighter or shorter period	select_one	1=Yes 0=No	
sdreason_remove_i	401.i. What are the reasons why you had your ${method} removed?: No period	select_one	1=Yes 0=No	
sdreason_remove_j	401.j. What are the reasons why you had your ${method} removed?: Bleeding disturbances (spotting, change in frequency, irregular)	select_one	1=Yes 0=No	
sdreason_remove_k	401.k. What are the reasons why you had your ${method} removed?: More bleeding during period or longer period	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
sdreason_remove_l	401.l. What are the reasons why you had your ${method} removed?: Pain / discomfort with method after inserted	select_one	1=Yes 0=No	
sdreason_remove_m	401.m. What are the reasons why you had your ${method} removed?: Weight gain	select_one	1=Yes 0=No	
sdreason_remove_n	401.n. What are the reasons why you had your ${method} removed?: Weight loss	select_one	1=Yes 0=No	
sdreason_remove_o	401.o. What are the reasons why you had your ${method} removed?: Other side effects	select_one	1=Yes 0=No	
sdreason_remove_p	401.p. What are the reasons why you had your ${method} removed?: Drug in body / had hormones	select_one	1=Yes 0=No	
sdreason_remove_q	401.q. What are the reasons why you had your ${method} removed?: Difficult getting treatment for side effects (too expensive / far)	select_one	1=Yes 0=No	
sdreason_remove_r	401.r. What are the reasons why you had your ${method} removed?: Fear to become infertile / difficult to get pregnant after use	select_one	1=Yes 0=No	
sdreason_remove_s	401.s. What are the reasons why you had your ${method} removed?: Other	select_one	1=Yes 0=No	
sdreason_remove_t	401.t. What are the reasons why you had your ${method} removed?: Not sure	select_one	1=Yes 0=No	
sdreason_remove_u	401.u. What are the reasons why you had your ${method} removed?: No response	select_one	1=Yes 0=No	
sdreason_remove_other	401b. Specify reasons why you had your ${method} removed	text		
influenced_decision	402. Did you make the decision to remove your ${method} on your own or did anyone influence your decision to remove your ${method}?	select_one	1=Made decision alone 2=Influenced by someone 99=No response	

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Variable name	Variable label/description	Variable type	Choices	Notes
decision_influenced_by	403. Who influenced you the most to remove your ${method}?	select_one	1=Husband / partner 2=Friend / colleague / family member 3=Provider 4=Other 99=No response	
removed_place	404. Did you have your ${method} removed at the same place where you had it inserted or a different place?	select_one	1=Same place 2=Different place 88=Not sure 99=No response	
removed_first	405. Were you able to have your ${method} removed the first time you tried?	select_one	1=Yes 0=No 99=No Response	
times_tried	406. Counting the time when you had your ${method} removed, in total, how many times did you try to get your ${method} removed?	integer		
difficulties_a	407.a. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Facility not open	select_one	1=Yes 0=No	
difficulties_b	407.b. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Long line / long wait	select_one	1=Yes 0=No	
difficulties_c	407.c. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Told they do not perform removals	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
difficulties_d	407.d. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Equipment / supplies not available	select_one	1=Yes 0=No	
difficulties_e	407.e. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Too expensive / problem getting money	select_one	1=Yes 0=No	
difficulties_f	407.f. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Provider counselled me to keep it initially	select_one	1=Yes 0=No	
difficulties_g	407.g. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Provider refused initially	select_one	1=Yes 0=No	
difficulties_h	407.h. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Qualified provider not available	select_one	1=Yes 0=No	
difficulties_i	407.i. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Provider tried but could not remove	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
difficulties_j	407.j. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed?: Other	select_one	1=Yes 0=No	
difficulties_k	407.k. You said that you were not able to have your ${method} removed the first time you tried. What difficulties did you experience before you were able to get your ${method} removed? No response?	select_one	1=Yes 0=No	
difficulties_other	407b. Specify other difficulties you had:	text		
sdright_decision	408. Do you think that removing your ${method} was the right decision for you?	select_one	1=Yes 0=No 88=Not sure 99=No response	
price_on_removal	409. Not including transportation, how much did you approximately pay when you had your ${method} removed?	integer		
transport_price	410. Approximately how much did you pay for the round trip to the clinic when you had your ${method} removed?	integer		
problems_yn	411. Did you have any problems when the provider removed your ${method}?	select_one	1=Yes 0=No 99=No Response	
problems_a	412.a. What problem(s) did you have?: Temporary pain at time of removal	select_one	1=Yes 0=No	
problems_b	412.b. What problem(s) did you have?: Discomfort / pain that lasted a few days	select_one	1=Yes 0=No	
problems_c	412.c. What problem(s) did you have?: Continuing pain	select_one	1=Yes 0=No	
problems_d	412.d. What problem(s) did you have?: Infection / swelling	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
problems_e	412.e. What problem(s) did you have?: Scarring	select_one	1=Yes 0=No	
problems_f	412.f. What problem(s) did you have?: Other	select_one	1=Yes 0=No	
problems_g	412.g. What problem(s) did you have?: No response	select_one	1=Yes 0=No	
remove_exp	413. Overall, what was your experience getting your ${method} removed? Would you say that it was: a positive experience, a negative experience, or neither positive nor negative?	select_one	1=Positive 2=Negative 3=Neither positive nor negative 99=No response	
another_method	414. When you had your ${method} removed, did you start using another contraceptive method during the same visit?	select_one	1=Yes 0=No 99=No Response	
method_new	415. What method did you start using?	select_one	1=Female sterilization 2=Male sterilization 3=Copper IUD 4=LNG-IUS 5=IUD unspecified 6=1-rod implant/Implanon 7=2-rod implant/Jadelle 8=Implant – other/unknown 9=Injectables 10=Pills 11=Emergency contraception 12=Male condom only 13=Female condom 14=SDM / CycleBeads 99=No response	
used_other_methods	416. Have you been using any other contraceptive method since you had your ${method} removed?	select_one	1=Yes 0=No 99=No Response	
reason_not_a	417.a. Why have you not been using another contraceptive method?: Want to get pregnant	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices	Notes
reason_not_b	417.b. Why have you not been using another contraceptive method?: Afraid of side effects	select_one	1=Yes 0=No	
reason_not_c	417.c. Why have you not been using another contraceptive method?: Other health concerns	select_one	1=Yes 0=No	
reason_not_d	417.d. Why have you not been using another contraceptive method?: Inconvenient to use	select_one	1=Yes 0=No	
reason_not_e	417.e. Why have you not been using another contraceptive method?: Partner disapproves	select_one	1=Yes 0=No	
reason_not_f	417.f. Why have you not been using another contraceptive method?: Lost partner / partner away / infrequent sex	select_one	1=Yes 0=No	
reason_not_g	417.g. Why have you not been using another contraceptive method?: Too old / menopause / infecund	select_one	1=Yes 0=No	
reason_not_h	417.h. Why have you not been using another contraceptive method?: Provider refused to give method	select_one	1=Yes 0=No	
reason_not_i	417.i. Why have you not been using another contraceptive method?: Don’t like methods available / preferred method not available	select_one	1=Yes 0=No	
reason_not_j	417.j. Why have you not been using another contraceptive method?: Too expensive / problem getting money	select_one	1=Yes 0=No	
reason_not_k	417.k. Why have you not been using another contraceptive method?: Other	select_one	1=Yes 0=No	
reason_not_l	417.l. Why have you not been using another contraceptive method?: Not sure	select_one	1=Yes 0=No	
reason_not_m	417.m. Why have you not been using another contraceptive method?: No response	select_one	1=Yes 0=No	
reason_not_other	417b. Specify othe reasons you have not been using another contraceptive method:	text		

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Variable name	Variable label/description	Variable type	Choices	Notes
method_new2	418. What is the first method that you used after you got your ${method} removed?	select_one	1=Female sterilization 2=Male sterilization 3=Copper IUD 4=LNG-IUS 5=IUD unspecified 6=1-rod implant/Implanon 7=2-rod implant/Jadelle 8=Implant – other/unknown 9=Injectables 10=Pills 11=Emergency contraception 12=Male condom only 13=Female condom 14=SDM / CycleBeads 99=No response	
time_passedmonths	419. Approximately how much time went by between when you got your ${method} removed and when you started using this method? Months	integer		
time_passedweeks	419. Approximately how much time went by between when you got your ${method} removed and when you started using this method? Weeks	integer		
time_passeddays	419. Approximately how much time went by between when you got your ${method} removed and when you started using this method? Days	integer		
got_method_from	420. Did you get this method where you got your previous ${method} removed, or did you get it somewhere else?	select_one	1=Same place 2=Different place 88=Not sure 99=No response	
experience_new	421. Based on your experience with this method so far, would you say that you like it better than the ${method}, about the same as the ${method}, or less than the ${method}?	select_one	1=Like new method better than previous 2=Like new method same as previous 3=Like new method less than previous	