Beyond Bias Endline Provider Survey

Administrative Section

Facility ID_____

Facility name _____

Facility locality _____

***Provider ID*_____**

Enumerator Name _____

Date _____

Consent obtained (Y) (N)

Language of interview _____

Provider gender (M) (F)

Intro for provider:
"Thanks so much for making time to speak to me. I'd like to start by asking some questions about who you are"

Number	Type	Question (Eng)	Answer (Eng)	Skip Pattern
1.	Single select	Are you currently employed as a health care provider?	1. Yes 2. No	If no, end survey
2.	Multiple select	What type of health services have you provided in the past 12 months? *[Enumerator: read responses]*	1. General outpatient consultations 2. Family planning consultations: counseling 3. Family planning consultations: method provision 5. Family planning consultations: method removals 6. Post-abortion care 7. Antenatal care 8. Postnatal care for women 9. Labor and delivery 10. Newborn care	If do not provide 2 OR 3, end survey
3.	Single select	What is the highest level of education you have completed?	TZ: Primary school + MCHH Training Form four or form six Nursing school certificate Nursing school Diploma Nursing school advanced diploma Nursing school advanced degree Clinical officer Assistant medical officer Medical officer Specialist	

			Other (Specify) _
4.	Single select	What is your medical qualification?	PK: Primary school + MCHH Training Nursing School/Midwifery school diploma (Diploma in nursing) Nursing School/Midwifery school diploma (Nurse midwife diploma) Nursing School/Midwifery school diploma (Community midwife diploma) Nursing School/Midwifery school diploma (Licensed practice nurse) Nursing School/Midwifery school diploma (Other) Nursing School Degree (Bachelor of Nursing) Nursing School Degree (Post RN BSN) Nursing School Degree (Other) Medical Training for doctor, medical officer, clinical officer (MBBS) Medical Training for doctor, medical officer, clinical officer (MBBS+MCPS) Medical Training for doctor, medical officer, clinical officer (MBBS+FCPS) Medical Training for doctor, medical officer, clinical officer (Other) Assistant Medical Officer Homeopathic diploma Other (Specify) _____ BF: Without diploma Primary School Certificate Professional Aptitude Certificate Brevet (1st cycle) Baccaluaréat University DEUG University License University Master's University DESS University Doctorat Other (Specify) ____ TZ: 1. Midwife 2. Nurse-midwife 3. Doctor 4. Nurse 5. Auxiliary midwife 6. Other (Specify) _____ PK: 1. Midwife 2. Nurse-midwife 3. Doctor

			4. Nurse 5. Auxiliary midwife/lady health worker 6.Community midwife 7. Lady health visitor 8. Other (Specify) _____ BF: 1. Traveling health officer 2. Auxiliary midwife 3. Midwife with brevet 4. Nurse with brevet 5. Nurse with state diploma 6. Midwife or birth attendant (man) 7. Health Attachment in Obstetric and Gynecological Care 8. Nursing and Obstetrical Health Attachment 09. General practioner 10. OB-GYN 11. Other (Specify) _____	
5.	Single select	Are you the owner of the facility?	1. Yes 2. No	Only display if country=PK
6.	Entry	What year did you start working as a [INSERT MEDICAL QUALIFICATION FROM Q4]?	____ [year]	
7.	Entry	What year did you start providing FP consultations? [*Enumerator: probe for when the provider started providing FP consultations regardless of whether this was at the facility they are currently working for*]	___ [year]	
8.	Entry	How long have you been working at this facility? [*Enumerator: do not duplicate information in the years and months fields*]	____ [number of years] ____ [number of months]	
9.	Single select	Do you currently provide family planning consultations at any other facilities? *[Interview: FP consultations can include counseling, method provision, and method removal]*	1. Yes 2. No	If No, skip to 11

10.	Entry	At which other facility do you currently provide family planning services?	Facility Name_____	
11.	Single select	In the last 12 months did you provide family planning services at any other facilities?	1. Yes 2. No	If No, skip to 14
12.	Entry	At how many other facilities did you provide family planning services in the last 12 months?	Enter Number____	
13.	Entry	At which other facilities did you provide family services in the last 12 months?	Facility Name_____	This should loop over each facility
14.	Entry	What year was your facility first affiliated with GreenStar?	___[year]	If country=PK
15.	Single select	When was the last family planning training that you participated in, if any? *[Enumerator: do not read responses]*	• Has not participated in FP training • Less than 6 months ago • 6 months to a 1 year ago • More than 1 year ago to 2 years ago • More than 2 years ago • Can't remember • Refused to answer	
16.	Multiple select	What were the topics of this most recent FP training? *[Enumerator: do not read responses]*	• Interval IUD • Post Partum IUD • IUD removal • Implant insertion • Implant removal • Short acting methods • Self injection • Permanent methods • HIV and FP • Youth friendly services • Informed choice • Contraceptive Counseling • Other specify _____ • Cannot remember	If youth friendly services skip Q17
17.	Single select	Have you ever participated in a training which covered provision of family planning services to youth?	1. Yes 2. No	If no skip to 19
18.	Numeric entry	What year did this training on FP services for youth take place?	_____ [Year]	

19.	Multiple select	Which family planning methods are you trained to provide counseling on?	2. Male condom 3. Female condom 4. Combined oral contraceptive pill (COC) 5. Progestin-only oral contraceptive pill (POP) 6. Injectable 7. Implants 8. IUD 9. Tubal ligation 10.Vasectomy 11. Cycle beads (Standard days method) 14. Emergency contraception 99. Refused to answer	
20.	Single select	Have you ever received training on how to remove implants?	1. Yes 2. No	Skip to Q22 if No
21.	Numeric select	When was the last time you received training on removals of implants?	____ [Year]	
22.	Single select	Have you ever received training on how to remove IUDs?	1. Yes 2. No	Skip to Q24 if No
23.	Numeric select	When was the last time you received training on removals of IUDs?	____ [Year]	

Attitudes and beliefs

Great, thank you very much for your answers so far. Now I'd like to ask your opinion on a few things about female clients seeking family planning. I'm going to read you some opinions that people have, and ask for your opinion too. This isn't a test, there are no right or wrong answers. When I do not specify a specific client type in the question, please answer the question about your opinion of women of all types. When I specify young clients, think about clients under age 25. There are five ways that you can respond: strongly disagree, disagree, neutral, agree, or strongly agree. Please choose one response for each statement that shows your opinion.

Let's start with a practice question: Simba/EFO/Karachi Kings is your favorite football team. Can you tell me your opinion about that statement? Great. There are five different ways you could have responded. Someone who doesn't care about football would say neutral. Someone who likes Yanga would say "strongly disagree" or "disagree." Someone who likes Simba could say "Agree" or "Strongly Agree."

		Strongly disagree	Disagree	Neutral	Agree	Strongly agree
24.	You know a young woman under 25 who had a serious health problem after a pregnancy					

25.	You have seen young women harmed by unwanted pregnancies in the past					
26.	At times it can be embarrassing for you to discuss sex with younger clients					
27.	Young women today have no modesty when they talk about sex					
28.	Young women take longer to counsel on contraceptives than older clients.					
29.	According to your religious beliefs, it is okay for one to limit how many children they have					
30.	As a provider, you have a responsibility to teach younger women how to behave					
31.	Your religion considers it a sin for unmarried women to use contraception					
32.	Young couples should have children as soon as possible after getting married					
33.	It is okay for young clients who are unmarried to use contraception					
34.	Providing contraceptives for unmarried young women may make them more promiscuous					
35.	Young married clients and young unmarried clients should have the same family planning options					
36.	Unmarried youth clients require consent from their parents before contraceptives are provided					
37.	Young married clients require the consent of the husband before contraceptives are provided					
38.	Married women who do not have any children should not be using contraception					
39.	If a poor girl can avoid pregnancy before she turns 19, she'll be able to get a well-paying job later on.					
40.	Unwanted pregnancy is worse for young girls who are in school than for young girls who are not in school					

41.	When a young woman comes to the clinic with no money, it's impossible for you to provide FP services					
42.	Young women under age 20 have the capacity to make health care decisions for themselves, including about contraception.					
43.	You enjoy working with young clients in general					
44.	Sex is part of a healthy life for young women					
45.	Contraceptives are more appropriate for women at least 20 years old					
46.	Contraceptives are more appropriate for married women than for unmarried women					
47.	It is important for women who have not yet been pregnant to first prove their fertility before using some FP methods					

Professional environment

Thank you so much for your opinions. Now, I'd like to ask you a few questions related to your work as a health care provider. If you work at multiple clinics, answer based on your experience at _____ (Clinic name on file).

48.	Single select	How would you describe the economic status of most of the youth clients you treat? *[Enumerator: read out responses]*	TZ: • Well-off background (10,000 plus shillings per day) • Middle class background (5,000-10,000/day) • Poor background (1000-5000 shillings/day) • Vulnerable or extremely poor background (0-1000 shillings/day) • A mix, with no clear majority • I don't know PK: • Well-off background (Above 3300 PKR per day) • Middle class background (1000 to 3300 PKR per day) • Poor background (650 to 999 PKR per day) • Vulnerable or extremely poor background (less than 650 PKR per day) • A mix, with no clear majority

			• I don't know BF: • Well-off background (5000 plus per day) • Middle class background (1000-5000/day) • Poor background (500 FCFA-1000 CFA/day) • Vulnerable or extremely poor background (0-500 CFA/day) • A mix, with no clear majority • I don't know
49.	Single Select	In general (not just for family planning), how would you describe your workload? *[Enumerator: read out responses]*	• Reasonable; I have a full schedule but I can spend as much time as needed with each client • Overloaded; I have more clients or patients to see than my schedule allows • Underbooked; I often have open time in my day when I could be attending clients/patients
50.	Numeric entry	Currently, besides you, about how many other providers in your clinic provide family planning consultations (this can include providers who only sometimes provide family planning services)?	_____ (0 for none)
51.	Numeric entry	How many days per week do you provide FP services in a typical week?	_____ (>0-7)
52.	Numeric entry	About how many hours each day do you spend with family planning clients on days you provide family planning services?	0-2 hours 3-5 hours >5 hours
53.	Multiple select	Which of the following methods do you provide in your facility?	1.Male condom 2.Female condom 3.Combined oral contraceptive pill (COC) 4.Progestin-only oral contraceptive pill (POP) 4.Injectable 5. Implants 6. IUD 7. Tubal ligation 8.Vasectomy

			9. Cycle beads (Standard days method) 11. Emergency contraception 12. Other (please specify other methods) 13. None (Exclusive option)		

For each of the following methods, what is the total duration in days you have had stock outages in the last 30 days? **(Read only the methods out loud and select the option that best describes the provider's response)**

		More than 15 days	5-15 days	Less than 5 days	Never
54.	Male condom				
55.	Female condom				
56.	Combined oral contraceptive pill (COC)				
57.	Progestin-only oral contraceptive pill (POP)				
58.	Injectable				
59.	Implants				
60.	IUD				
61.	Cycle beads (Standard days method)				
62.	Emergency Contraception				
63.	Other (please specify method(s) _____				

64.	Multi select	Were any of these stock outages related to COVID-19? [*Enumerator: Select the methods stocked out due to COVID-19*]	1.Male condom 2.Female condom 3.Combined oral contraceptive pill (COC) 4.Progestin-only oral contraceptive pill (POP) 5.Injectable 6.Implants 7.IUD 8.Cycle beads (Standard days method) 9.Emergency contraception 10. None were related to COVID-19 (mutually exclusive option) 11. Other (please specify method(s) _____	Skip if no stockouts Carry forward responses from previous question
65.	Ranked	Which methods do you make the most money from? Please select the top three methods and rank them according to which makes the most money (Enter rank next to method)	___Male condom ___Female condom ___Combined oral contraceptive pill (COC) ___Progestin-only oral contraceptive pill (POP) ___Injectable ___Implants ___IUD	PK ONLY

			__ Tubal ligation ___ Vasectomy ___Cycle beads (Standard days method) ___ Withdrawal ___Emergency contraception ___Other (please specify other methods) ___ None (Exclusive option)	
66.	Select one	How often do you counsel clients on family planning?	Never Rarely, once a week or less Sometimes, several times a week Often, at least once per day	Skip to DCE if Never
67.	Select one	How often do you counsel young women aged under 20 on family planning	Never Rarely, once a week or less Sometimes, several times a week Often, at least once per day	
68.	Select one	How often do you counsel young women aged 20-24 on family planning?	Never Rarely, once a week or less Sometimes, several times a week Often, at least once per day	
69.	Select one	How often do you counsel unmarried women on family planning?	Never Rarely, once a week or less Sometimes, several times a week Often, at least once per day	
70.	Select one	How often do you counsel women without children on family planning?	Never Rarely, once a week or less Sometimes, several times a week Often, at least once per day	

Next we want to you to imagine the following client comes to you at the facility for a FP consultation. Scenario 1: **[example, repeat for a total of 2 profiles here and 2 profiles after next section]** This client is [15/20/25] years old and [unmarried/married]. She has [No children/One child]. *Let us talk about what it might be like if she came in today to ask for services*				
DCE1.		This client is interested in learning more about FP and the different methods available. What is the next step before you begin any FP consultation? [do not read responses]	01. Decline counseling FP isn't appropriate for this client. [skip to next profile/section] 02. Ask some questions to the client first before agreeing to provide FP consultation 03. Offer FP counseling, no need to ask any questions. [skip to DCE3]	
DCE2.	Multiselect	What additional information would you need to know before you agree to provide any FP consultation? *[Enumerator :do not read responses, record spontaneous answer]*	01. how many children the client has 02. how many sons she has 03. how many children she would like to have in the future 07. If she wishes to have children in the future 04. If her partner consents to her using FP 05. If her parents consent to her using FP 06. If she's pregnant 08. If she has given birth in last 48 hours. 09. If she is breastfeeding 10. If she has medical conditions. 11. If she has had poor reactions to a FP method in the past. 12. Any preferences she might have for a FP method 13. HIV Status 14. Client's religion 15. If she has had an abortion 16. If she is in school 17. If she has a method in mind 18. Other, please specify_____	Ask only if they responded 02 to DCE1
DCE3.	Single select	Based only on what you know, would it be appropriate to provide a modern method of family planning to this client, such as injectables, pill, implant? *[Enumerator: do not read out responses]*	01. Yes [skip to DCE6] 02. No [skip to DCE5] 03. I would need additional information	

DCE4.	Multiselect	What would you need to know before you could provide a method? *[Enumerator: do not read, capture spontaneous responses]*	01. how many children the client has 02. how many sons she has 03. how many children she would like to have in the future 07. If she wishes to have children in the future 04. If her partner consents to her using FP 05. If her parents consent to her using FP 06. If she's pregnant 08. If she has given birth in last 48 hours. 09. If she is breastfeeding 10. If she has medical conditions. 11. If she has had poor reactions to an FP method in the past. 12. Any preferences she might have for a FP method 13. HIV Status 14. Client's religion 15. If she has had an abortion 16. If she is in school 17. If she has a method in mind 18. Other, please specify_____ [skip to DCE6]	
DCE5.	Multiselect	If no, why not? *[Enumerator: do not read responses, select all that apply]*	01.She's too young [skip to DCE10] 02.She's too old [skip to DCE10] 03. Not sure if her parents consent [skip to DCE10] 04. Not sure if her partner / husband consents [skip to DCE10] 05. She doesn't have enough children [skip to DCE10] 06. She already has children [skip to DCE 10] 07. She doesn't have enough sons [skip to DCE10] 08. She's not married [skip to DCE10] 09. She's already married [skip to DCE10] 10. other, please specify _____ [skip to DCE10]	
DCE6.	Multi select	Based on what you know, which FP methods would you offer as options for this client? [*select all that apply, do not read out responses*]	00. abstinence 01. male condom 02 the pill (COP) 03. The pill (POP) 04. injectable 05. implants 06. IUD 07. tubal ligation 08. vasectomy 09. CycleBeads (Standard Days Method) 10. Other Calendar or Rhythm Methods 11. Withdrawal 12. Emergency contraception 13. Lactational Amenorrhea Method (LAM) 14. Breastfeeding 15. Other: please specify method(s)	

DCE7.		Based on what you know, are there methods that you would recommend as the best option for this client?	1. No, they are all equally good [skip to DCE9] 2. No, I would let the client choose [skip to DCE9] 3. Yes	
DCE8.	Multi select	Which method(s) would you recommend?	00. abstinence 01. male condom 02 the pill (COP) 03. The pill (POP) 04. injectable 05. implants 06. IUD 07. tubal ligation 08. vasectomy 09. CycleBeads (Standard Days Method) 10. Other Calendar or Rhythm Methods 11. Withdrawal 12. Emergency contraception 13. Lactational Amenorrhea Method (LAM) 14. Breastfeeding 15. Other: please specify method(s)	Methods shown should be those selected in DCE6
DCE9.	Multi select	Based on what you know, which FP methods would be inappropriate? *[Enumerator: do not read responses]*	00. abstinence 01. male condom 02. the pill (COP) 03. The pill (POP) 04. injectable 05. implants 06. IUD 07. tubal ligation 08. vasectomy 09. CycleBeads (Standard Days Method) 10. Other Calendar or Rhythm Methods 11. Withdrawal 12. Emergency contraception 13. Lactational Amenorrhea Method (LAM) 14. Breastfeeding 15. Other: please specify method(s) 16. No method is inappropriate	
DCE10.		Would you recommend abstinence for this client?	00.Yes 01.No	
DCE11.		For this particular client [repeat profile characteristics] - would you have any hesitations about counseling on a modern method of FP (like injectables, pills, implants)?	01. yes 02. no [skip to next profile/section]	
DCE12.	Multi select	If yes, why? *[Enumerator: do not read responses]*	01. She's too young 02. She's too old 03. Not sure if her parents consent 04. Not sure if her partner / husband consents 05. She doesn't have enough children 06. She already has children 07. She's not married 08. She's already married 09. Hormones aren't good for her body 10. Not enough sons 11. other, please specify _____	

Repeat for next profile or continue on to next section if all profiles are completed

Now, I'd like to read you some opinions again, like I did earlier. Could you tell me if you agree or disagree with the following? We will use the same five choices from before: strongly disagree, disagree, neutral, agree or strongly agree. When I mention clients, I am talking about women coming in for family planning services.

		Strongly disagree	Disagree	Neutral	Agree	Strongly agree
71.	For a family planning consultation, it's important to know if the client is married or unmarried					
72.	You feel comfortable providing contraception to an unmarried client under 20 years old					
73.	Most of your colleagues feel comfortable providing contraception to an unmarried client under 20 years old					
74.	You feel comfortable providing contraception to a married client who has not yet had a child					
75.	Most of your colleagues feel comfortable providing contraception to a married client who has not yet had a child					
76.	You are always confident that you have the necessary clinical skills to provide contraceptives safely to your young, unmarried clients					
77.	Providing the appropriate contraceptives to your young, unmarried clients is completely in your control					
78.	If a newly married couple with no children is having money problems, it’s best if they delay pregnancy					
79.	If the client hasn’t yet had a child, she should avoid using injections					
80.	If the client hasn’t yet had a child, she should avoid using an IUD					
81.	If the client hasn’t yet had a child, she should avoid using an implant					
82.	If the client hasn’t yet had a child, she should avoid using pills					
83.	Your colleagues have expressed their disapproval to you about the consultations you provide to young girls about FP					
84.	People in your community have expressed their disapproval to you about the consultations you provide to young girls about FP					
85.	Your colleagues and you have different opinions about what					

	advice should be given to young clients about FP					
86.	You try to provide contraceptive services to young clients in the same way you see your colleagues/role models doing it					
87.	Providing contraception to young unmarried girls makes you fearful of regulatory backlash against you					
88.	You usually know what a young client under age 20 needs for family planning as soon as they come in					
89.	You usually decide what family planning method young clients under aged 20 should use					
90.	It's important for you to help youth clients understand when their actions are immoral or irresponsible					
91.	Young family planning clients may need to be punished for bad behavior					
92.	It is irresponsible for young women to have sex before they are married					
93.	Your [supervisor/boss/administration (TZ/BF)] / [Green Star (PK)] supports you in providing any/all methods to youth under 25.					
94.	Providing contraceptives to youth under 25 makes you worry about your clinic's reputation in the community					
95.	It is okay for young women to have sex before they are married					
96.	Hormonal methods are safe for youth's growing bodies (under 20)					
97.	You prefer not to provide an FP method to an unmarried client if they will not first take an HIV test					
98.	Providing young unmarried clients with a method of family planning makes you worry about the spread of HIV					
99.	Young women without children should not use any product that might cause a delay in fertility once stopped					
100.	It's okay for other clients to come into the room while you're giving an FP consultation					

101.	You prefer to provide contraceptive methods that are quicker and easier to administer					
102.	It's okay for another medical professional to come into the room when you're giving an FP consultation					
103.	If a client wants an IUD or implant removed before the method has expired, you feel comfortable removing it					
104.	In general, it's more difficult to work with young clients under 20 than with older clients					
105.	You're paid fairly for the work that you do					
106.	In your workplace the policy about providing FP services to youth under 25 is sometimes unclear					
107.	Young clients (under 20) are not capable of choosing the method that is best for them					
108.	Sometimes you worry that if you provide a young client with FP, her reputation in the community will damaged					
109.	A client with just one daughter will have different family planning needs than a client with just one son					
110.	You feel comfortable removing a client's IUD or implant at the client's request, even if you think she shouldn't have it removed					
111.	You would provide family planning services to a client even if you thought they were too young to be using contraception					
112.	You worry about your family planning clients or their families blaming you for future fertility problems					
113.	You usually counsel unmarried clients under age 20 to practice abstinence					

Consider your role as a Family Planning provider. How often do the following statements apply to you, never, a few times a year or less, a few times a month, once a week, a few times a week, or every day?

		Never	A few times a year or less	Once a month or less	A few times a month	Once a week	A few times a week	Every day
114.	You can easily understand how your young clients feel about things							
115.	You feel you treat some young clients as if they were impersonal objects							
116.	You deal very effectively with the problems of your young clients							
117.	You feel you are positively influencing other young people's lives through your work							
118.	You've become less sensitive and caring toward young people's lives through your work							
119.	You worry that this job is hardening you emotionally							
120.	you feel very energetic							
121.	You don't really care what happens to some young clients							
122.	You can easily create a relaxed atmosphere							

	with your young clients							
123.	You feel happy after working closely with young clients							
124.	You have accomplished many worthwhile things in this job							
125.	In your work, you deal with emotional problems very calmly							
126.	You feel young clients blame you for some of their problems							
127.	You feel like you are recognized for the good work that you do for your young clients							

128.	Single select	Are there any methods that you would not offer to a client because she is **too young**?	1. Yes 2. No	If No, skip to Q131
129.	Multi select	Which methods would you not offer to a client that is **too young**? [DO NOT READ OPTIONS]	Abstinence Male condom Female condom The combined pill (COC) Progestin-only pill/mini-pill (POP) Injectable Implants IUD Tubal ligation Vasectomy CycleBeads (Standard days method) Other calendar or rhythm methods Withdrawal Emergency contraception Other (Specify:____)	

130.	Multi select	Why would you not offer [INSERT METHOD] to a client who is **too young**? *[Enumerator: do not read responses]*	Unsafe side effects Bad for future fertility Bad for developing bodies Not easy to stop or remove Lasts too long Immoral/irresponsible Won't use correctly Doesn't protect against STIs Encourages risky sex Hard to hide Too expensive Other (Specify)	Loop this for each method selected above
131.	Single select	Are there any methods that you would not offer a young client because she is **not married**?	1. Yes 2. No	If No, skip to Q134
132.	Multi select	Which methods would you not offer to a young client who is **not married**?	Abstinence Male condom Female condom The combined pill (COC) Progestin-only pill/mini-pill (POP) Injectable Implants IUD Tubal ligation Vasectomy CycleBeads (Standard days method) Other calendar or rhythm methods Withdrawal Emergency contraception Other (Specify:____)	
133.	Multi select	Why would you not offer [INSERT METHOD] to a young client who is **not married**?	Unsafe side effects Bad for future fertility Bad for developing bodies Not easy to stop or remove Lasts too long Immoral/irresponsible Won't use correctly Doesn't protect against STIs Encourages risky sex Hard to hide Too expensive Other (Specify)	Loop this for each method selected above
134.	Single select	Are there any methods that you would not offer a young client because she does **not yet have any children**?	1. Yes 2. No	If No, skip to Q137

135.	Multi select	Which methods would you not offer to a young client who does **not yet have children**?	Abstinence Male condom Female condom The combined pill (COC) Progestin-only pill/mini-pill (POP) Injectable Implants IUD Tubal ligation Vasectomy CycleBeads (Standard days method) Other calendar or rhythm methods Withdrawal Emergency contraception Other (Specify:____)	
136.	Multi select	Why would you not offer [INSERT METHOD] to a young client who does **not yet have children**	Unsafe side effects Bad for future fertility Bad for developing bodies Not easy to stop or remove Lasts too long Immoral/irresponsible Won't use correctly Doesn't protect against STIs Encourages risky sex Hard to hide Too expensive Other (Specify)	Loop this for each method selected above
137.	Numeric entry	To consider providing an IUD or implant does a client have be above a certain age? If yes, what age?	_____ [Enter 0 if No]	
138.	Numeric entry	To consider providing an injection does a client have be above a certain age? If yes, what age?	_____ [Enter 0 if No]	
139.	Numeric entry	To consider providing pills does a client have be above a certain age? If yes, what age?	_____ [Enter 0 if No]	

[REPEAT DCE SECTION WITH 2 MORE SCENARIOS]

Now we are going to do two more examples of women coming in to the clinic

Intervention section: Now I am going to ask you some questions about a program that works with FP providers to reduce provider bias towards youth clients called Beyond Bias. This program is implemented by Pathfinder International

Section applicable to facilities that are part of the control group

140.	Single select	Have you heard of a program that works with providers to reduce provider bias towards youth clients called Beyond Bias?	1. Yes 2. No	If no, skip to sensitive questions
141.	Text entry	How did you hear about the beyond bias intervention?	Enter Text_____	skip to sensitive questions

Section applicable if facility is part of the intervention group

142.	Single select	Have you heard of a program that works with providers to reduce provider bias towards youth clients called Beyond Bias? [*Enumerator*: *If no probe to make sure they have actually have not heard of it*]	1. Yes 2. No	If no, skip to sensitive questions
143.	Single select	Did you participate in any of the Beyond Bias activities? [*Probe for: Summit, Connect, Rewards*]	1. Yes 2. No	If Yes, skip to Q145
144.	Text entry	Why did you not participate in any Beyond Bias activities?	Free Text_____	skip to sensitive questions
145.	Single select	Did you attend the Summit	1. Yes 2. No	
146.	Numeric entry	How many in person connect sessions did you attend? [If they say “all sessions” enter number of total sessions (21)]	Enter number_____	TZ and BF only
147.	Single select	How frequently did you read messages or content posted on the Connect WhatsApp group?	1. Never 2. A few times 3. About once a week 4. Several times per week	PK and TZ only
148.	Single select	How many rewards ceremonies did you attend? [This should be a number between 0 an 3]	Enter Number_____	

149.	Multiple select	Did participating in the Beyond Bias activities influence how you provide services in any way? If so, how? *[Enumerator: do not read responses]*	1. No, I did not change anything 2. Yes, I tried to be nicer to young clients 3. Yes, I tried to pay more attention to clients' preferences 4. Yes, I started offering a wider range of methods to younger clients 5. Yes, I tried not to express less judgement 6. Yes, I started making sure my younger clients had more privacy 7. Other____(specify)
150.	Single select	What BB activity did you like the most? *[Enumerator: read responses]*	1. Summit 2. Connect 3. Rewards 4. I liked them all equally 5. I did not like any of them 6. I did not participate in any of the activities
151.	Single select	What BB activity did you like the least? *[Enumerator: read responses]*	1. Summit 2. Connect 3. Rewards 4. I liked them all equally 5. I did not like any of them 6. I did not participate in any of the activities

Sensitive questions

I have just a few remaining questions, some of which cover potentially sensitive topics. Please feel free to let me know if you would prefer not to answer any of these questions.

152.	Numeric entry	May I ask how old you are? [*Enter 99 if provider does not wish to say*]	
153.	Single select	What is your current relationship status?	1. Single, never married 2. Married

			3. Not married, living with partner 4. Divorced or widowed 5. Refuse to answer
154.	Numeric entry	Do you have any children? If so, how many?	_____ [Enter 0 for no children and 99 for refuse to respond]
155.	Single select	Have you used any methods of family planning either currently or in the past?	1. Yes 2. No 3. Prefer not to answer
156.	Multiple select	Which methods have you yourself used?	1. Abstinence 2.Male condom 3.Female condom 4.Combined oral contraceptive pill (COC) 5.Progestin-only oral contraceptive pill (POP) 6.Injectable 7. Implants 8. IUD 9. Tubal ligation 10.Vasectomy 11. Cycle beads (Standard days method) 12. Withdrawal 13. Emergency contraception 14. Lactational Amenorrhea Method (LAM) 16. Other (please specify other methods) 99. Refused to answer

Closing

I don't have any more questions. Thank you very much for participating in this survey. I would like to remind you as well that your answers today are completely confidential and anonymous. You may be contacted for an interview at a later time.

Surveyor to complete

157.	Select all that apply	Were there any special circumstances to note regarding this interview?	1. Yes, respondent was distressed 2. Yes, respondent was distracted 3. Yes, other people could potentially hear this interview 4. Yes, other specify _____ 5. No, no special circumstances