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Variable name	Variable label/description	Variable type	Choices labels	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		
province	005. Select the province	select_one	1=Copperbelt 2=Muchinga	
facility	006. Select the facility	select_one	Numeric values representing facilities (labels removed for de-identification)	
location	008. Select the location of the interview.	select_one	1=Participant's home 2=Health center 3=Other location	
location_other	008a. Specify interview location:	text		
consent	009. Did the participant consent to be interviewed?	select_one	1=Yes 0=No	
age	010. How old were you at your last birthday?	integer		
agree_contact	015. In addition to the three times we will talk to you like I told you, we would like to contact some women again in a few weeks to ask more questions similar to the questions I will ask you today. This will be more like a conversation to help us better understand their experiences. May we contact you again in a few weeks for an in-person conversation?	select_one	1=Yes 0=No	
vermethod_spec	016. Which method did your recently receive?	select_one	1=LNG IUS 2=Copper IUD 3=1-rod implant/Implanon 4=2-rod implant/Jadelle 5=Implant – other/unknown 6=3-month injectable/Depo 7=Other	
method		string, calculated		

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Variable name	Variable label/description	Variable type	Choices labels	Notes
eligible		calculated	1=Yes 0=No	
education	101. What is the highest level of schooling you completed?	select_one	1=No education / no school 2=Some primary 3=Primary 4=Some secondary 5=Secondary 6=Higher 88=Not sure 99=No response	
religion	102. What is your religion?	select_one	1=Catholic 2=Protestant 3=Muslim 4=Traditional 5=No religion 6=Other 99=No response	
work	103. What is your current work situation?	select_one	1=Unemployed 2=Student 3=Housewife 4=Casual / part-time employment 5=Full-time employment: Government civil service 6=Full-time employment: Private enterprise 7=Self-employed: Own/family business 8=Other 99=No response	
work_other	103a. Specify current work situation	text		

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Variable name	Variable label/description	Variable type	Choices labels	Notes
occupation	104. What is your primary occupation?	select_one	1=Professional (doctor, lawyer, accountant, lecturer) 2=Highly skilled (nurse, teacher, School of Tech graduate) 3=Skilled (tailor, beautician, plumbing, hairdresser, carpentry, electrician) 4=Semi-skilled (farming, fishing, mining, forestry) 5=Unskilled (laborer, trader, shopkeeper, hawker, vendor etc.) 6=Other 99=No Response	
occupation_other	104a. Specify primary occupation	text		
marital_status	105. What is your marital status?	select_one	1=Single 2=Cohabitating 3=Married 4=Divorced/Separated/Widowed 99=No response	
cohabit	106. Is your husband/partner living with you now, or is he staying elsewhere?	select_one	1=Living with participant 2=Staying elsewhere permanently 3=Traveling/away but returning 99=No response	
birth	107. Have you ever given birth?	select_one	1=Yes 0=No 99=No Response	
birth_last	108. When did you last give birth?	select_one	1=0-5 months ago 2=6-11 months ago 3=12 or more months ago 99=No response	
birth_period	109. Have you had a period (menses) since you last gave birth?	select_one	1=Yes 0=No 99=No Response	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
children	110. How many children of your own do you have?	integer		
another_child	111. Would you like to have a / another child or would you prefer not to have any/ anymore children?	select_one	1=Have a / another child 2=No / no more children 88=Undecided 99=No response	
waitingaunit1	112. How long would you like to wait from now before the *birth* of a / another child? A. Enter unit of time the participant responds in	select_one	1=Days 2=Weeks 3=Months 4=Years 88=Not sure 99=No response	
waitingatime1	112. How long would you like to wait from now before the *birth* of a / another child? B. Enter amount of time, corresponding to unit previously selected	integer		
lng_ius	201. Before you received the ${method} at the clinic, had you ever used an LNG-IUS?	select_one	1=Yes 0=No 99=No Response	
copper_iud	202. Before you received the ${method} at the clinic, had you ever used a copper IUD?	select_one	1=Yes 0=No 99=No Response	
implant	203. Before you received the ${method} at the clinic, had you ever used a contraceptive implant?	select_one	1=Yes 0=No 99=No Response	
historyinj	205. Before you received the ${method} at the clinic, had you ever used: Injectables	select_one	1=Yes 0=No	
historypill	205. Before you received the ${method} at the clinic, had you ever used: Pills	select_one	1=Yes 0=No	
historyec	205. Before you received the ${method} at the clinic, had you ever used: Emergency contraception	select_one	1=Yes 0=No	
historymcondom	205. Before you received the ${method} at the clinic, had you ever used: Male condoms for contraception	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
historyfcondom	205. Before you received the ${method} at the clinic, had you ever used: Female condoms for contraception	select_one	1=Yes 0=No	
changes_yn	207.Did you ever experience changes in your period (menstrual bleeding) while using any of the contraceptive methods you just told me about? [ASKING ABOUT BLEEDING CHANGES EXPERIENCED WITH ALL METHODS USED BEFORE THE METHOD INSERTED AT THE CLINIC WHEN THE PARTICIPANT WAS TOLD ABOUT THE STUDY]	select_one	1=Yes 0=No 88=Not sure 99=No response	
changes_previous1	208.1. Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Heavier period	select_one	1=Yes 0=No	
changes_previous2	208.2. Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Lighter period	select_one	1=Yes 0=No	
changes_previous3	208.3.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Longer period	select_one	1=Yes 0=No	
changes_previous4	208.4.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Shorter period	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
changes_previous5	208.5.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Bleeding disturbances (periods less or more often, spotting, irregular)	select_one	1=Yes 0=No	
changes_previous6	208.6.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Stopped having period	select_one	1=Yes 0=No	
changes_previous7	208.7.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Other	select_one	1=Yes 0=No	
changes_previous8	208.8.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: Not sure	select_one	1=Yes 0=No	
changes_previous9	208.9.Which changes in your period (menstrual bleeding) have you experienced while using any of the contraceptive methods you just told me about?: No response	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
last_method	209. Of the methods you just told me about, which one did you use most recently, before you received your ${method} at the clinic?	select_one	1=Copper IUD 2=LNG-IUS 3=IUD-unspecified 4=1-rod implant/Implanon 5=2-rod implant/Jadelle 6=Implant-other/unknown 7=3-month injectable/Depo 8=2-month injectable/Noristerat 9=Injectable – other/unknown 10=Pills 11=Emergency contraception 12=Male condom only 13=Female condom only 14=SDM/CycleBeans 15=LAM 16=Diaphragm 17=Foam/Jelly 99=No response	
why_stop1	210.1. Why did you stop using that method?: Method reached duration of use	select_one	1=Yes 0=No	
why_stop2	210.2. Why did you stop using that method?: Became pregnant while using	select_one	1=Yes 0=No	
why_stop3	210.3. Why did you stop using that method?: Wanted to become pregnant	select_one	1=Yes 0=No	
why_stop4	210.4. Why did you stop using that method?: Infrequent sex/partner away/lost partner	select_one	1=Yes 0=No	
why_stop5	210.5. Why did you stop using that method?: Partner disapproved	select_one	1=Yes 0=No	
why_stop6	210.6. Why did you stop using that method?: Wanted more effective method	select_one	1=Yes 0=No	
why_stop7	210.7. Why did you stop using that method?: Wanted method lasting longer	select_one	1=Yes 0=No	
why_stop8	210.8. Why did you stop using that method?: Inconvenient / difficult to use	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
why_stop9	210.9. Why did you stop using that method?: Changes to period	select_one	1=Yes 0=No	
why_stop10	210.10. Why did you stop using that method?: Changes in sex drive	select_one	1=Yes 0=No	
why_stop11	210.11. Why did you stop using that method?: Other side effects	select_one	1=Yes 0=No	
why_stop12	210.12. Why did you stop using that method?: Did not want hormones	select_one	1=Yes 0=No	
why_stop13	210.13. Why did you stop using that method?: Difficulty getting method (too far / too expensive/ not available)	select_one	1=Yes 0=No	
why_stop14	210.14. Why did you stop using that method?: Fear of becoming infertile	select_one	1=Yes 0=No	
why_stop15	210.15. Why did you stop using that method?: Other	select_one	1=Yes 0=No	
why_stop16	210.16. Why did you stop using that method?: Not sure	select_one	1=Yes 0=No	
why_stop17	210.17. Why did you stop using that method?: No response	select_one	1=Yes 0=No	
why_stop_other	210a. Specific reason why you stopped using previous method	text		
betweenunit2	211. Approximately how much time went by between when you stopped using the previous method and the day that you recently received the ${method} at the clinic? A. Enter unit of time the participant responds in	select_one	1=Days 2=Weeks 3=Months 4=Years 88=Not sure 99=No response	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
betweentime2	211. Approximately how much time went by between when you stopped using the previous method and the day that you recently received the ${method} at the clinic? B. Enter amount of time, corresponding to unit previously selected.	integer		
reason1	303.1. What are the reasons you chose ${method} instead of another method?: Nobody will know I am using it	select_one	1=Yes 0=No	
reason2	303.2. What are the reasons you chose ${method} instead of another method?: Lasts long time	select_one	1=Yes 0=No	
reason3	303.3. What are the reasons you chose ${method} instead of another method?: Highly / more effective	select_one	1=Yes 0=No	
reason4	303.4. What are the reasons you chose ${method} instead of another method?: Convenient/don't need to do anything on a regular basis	select_one	1=Yes 0=No	
reason5	303.5. What are the reasons you chose ${method} instead of another method?: Used before	select_one	1=Yes 0=No	
reason6	303.6. What are the reasons you chose ${method} instead of another method?: "Right" for my body	select_one	1=Yes 0=No	
reason7	303.7. What are the reasons you chose ${method} instead of another method?: Continue having regular period	select_one	1=Yes 0=No	
reason8	303.8. What are the reasons you chose ${method} instead of another method?: Lighter, shorter, or no period	select_one	1=Yes 0=No	
reason9	303.9. What are the reasons you chose ${method} instead of another method?: Treats heavy or painful period	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
reason10	303.10. What are the reasons you chose ${method} instead of another method?: Few side effects/Fewer side effects than other methods	select_one	1=Yes 0=No	
reason11	303.11. What are the reasons you chose ${method} instead of another method?: Side effects manageable/easier to cope with than other methods	select_one	1=Yes 0=No	
reason12	303.12. What are the reasons you chose ${method} instead of another method?: Can get pregnant without problems after using	select_one	1=Yes 0=No	
reason13	303.13. What are the reasons you chose ${method} instead of another method?: OK for use while breastfeeding	select_one	1=Yes 0=No	
reason14	303.14. What are the reasons you chose ${method} instead of another method?: Low or less hormones	select_one	1=Yes 0=No	
reason15	303.15. What are the reasons you chose ${method} instead of another method?: Affordable	select_one	1=Yes 0=No	
reason16	303.16. What are the reasons you chose ${method} instead of another method?: Recommended by friend/colleague/family	select_one	1=Yes 0=No	
reason17	303.17. What are the reasons you chose ${method} instead of another method?: Recommended by partner	select_one	1=Yes 0=No	
reason18	303.18. What are the reasons you chose ${method} instead of another method?: Recommended by provider	select_one	1=Yes 0=No	
reason19	303.19. What are the reasons you chose ${method} instead of another method?: Other	select_one	1=Yes 0=No	
reason20	303.20. What are the reasons you chose ${method} instead of another method?: Not sure	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
reason21	303.21. What are the reasons you chose ${method} instead of another method?: No response	select_one	1=Yes 0=No	
reason_other	303a. Specify reason for choosing current method	text		
already_knew	304. Did you already know that you wanted the ${method} before you came to the clinic, or did you decide during your visit?	select_one	1=Already knew 2=Decided during visit 88=Not sure 99=No response	
decision	305. Did anyone influence your decision to use the ${method}?	select_one	1=Made decision on own 2=Influenced by someone 99=No response	
who_influence	306. Who influenced you the most to use the ${method}?	select_one	1=Husband/partner 2=Other family member 3=Friend/colleague 4=Provider 5=Other 99=No response	
partner_knows	307. Does your husband/partner know that you are using the ${method}?	select_one	1=Yes 0=No 99=No Response	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
alternate	308. If the ${method} had not been available during your visit, what method, if any, would you have chosen instead?	select_one	3=Copper IUD 4=LNG-IUS 5=IUD-unspecified 6=1-rod implant/Implanon 7=2-rod implant/Jadelle 8=Implant-other/unknown 9=3-month injectable/Depo 10=2-month injectable/Noristerat 11=Injectable – other/unknown 12=Pills 13=Emergency contraception 14=Male condom only 15=Female condom only 16=SDM/CycleBeans 17=LAM 18=Diaphragm 19=Foam/Jelly 20=Traditional (rhythm, withdrawal, abstinence) 21=No method 22=Gone elsewhere for same method 23=Other 88=Not sure 99=No response	
alternate_other	308a. Specify reason of alternative method	text		
heard_lng	310. Have you ever heard about the LNG-IUS?	select_one	1=Yes 0=No 88=Not sure 99=No response	
hear1	302.1. Where or how did you hear about the LNG-IUS?: From clinic staff during visit to get method	select_one	1=Yes 0=No	Same question asked to LNG users in 302 and non LNG users in 311- merged into one variable here.
hear2	302.2. Where or how did you hear about the LNG-IUS?: From clinic staff on another visit to clinic	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
hear3	302.3. Where or how did you hear about the LNG-IUS?: Referred by other health provider	select_one	1=Yes 0=No	
hear4	302.4. Where or how did you hear about the LNG-IUS?: Community workers	select_one	1=Yes 0=No	
hear5	302.5. Where or how did you hear about the LNG-IUS?: Friend / colleague / family member	select_one	1=Yes 0=No	
hear6	302.6. Where or how did you hear about the LNG-IUS?: Flyers	select_one	1=Yes 0=No	
hear7	302.7. Where or how did you hear about the LNG-IUS?: Radio	select_one	1=Yes 0=No	
hear8	302.8. Where or how did you hear about the LNG-IUS?: Other	select_one	1=Yes 0=No	
hear9	302.9. Where or how did you hear about the LNG-IUS?: Not sure	select_one	1=Yes 0=No	
interest_lng	312. Do you think you may be interested in using the LNG-IUS at any time in the future? I am not asking you to commit to using it, I just want to understand what you think about this method.	select_one	1=Yes 0=No 88=Not sure 99=No response	
no_interest1	313.1. Why are you not interested in using the LNG-IUS at any time in the future?: Fear of insertion procedure	select_one	1=Yes 0=No	
no_interest2	313.2. Why are you not interested in using the LNG-IUS at any time in the future?: Fear partner will find out or feel strings	select_one	1=Yes 0=No	
no_interest3	313.3. Why are you not interested in using the LNG-IUS at any time in the future?: Lasts too long	select_one	1=Yes 0=No	
no_interest4	313.4. Why are you not interested in using the LNG-IUS at any time in the future?: Not effective	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
no_interest5	313.5. Why are you not interested in using the LNG-IUS at any time in the future?: Concerns about lighter or shorter periods	select_one	1=Yes 0=No	
no_interest6	313.6. Why are you not interested in using the LNG-IUS at any time in the future?: No period	select_one	1=Yes 0=No	
no_interest7	313.7. Why are you not interested in using the LNG-IUS at any time in the future?: Bleeding disturbances (spotting, change in frequency, irregular)	select_one	1=Yes 0=No	
no_interest8	313.8. Why are you not interested in using the LNG-IUS at any time in the future?: Pain / discomfort with method after inserted	select_one	1=Yes 0=No	
no_interest9	313.9. Why are you not interested in using the LNG-IUS at any time in the future?: Weight gain	select_one	1=Yes 0=No	
no_interest10	313.10. Why are you not interested in using the LNG-IUS at any time in the future?: Other side effects	select_one	1=Yes 0=No	
no_interest11	313.11. Why are you not interested in using the LNG-IUS at any time in the future?: Has hormones	select_one	1=Yes 0=No	
no_interest12	313.12. Why are you not interested in using the LNG-IUS at any time in the future?: Too expensive	select_one	1=Yes 0=No	
no_interest13	313.13. Why are you not interested in using the LNG-IUS at any time in the future?: Fear to become infertile/difficult to get pregnant after use	select_one	1=Yes 0=No	
no_interest14	313.14. Why are you not interested in using the LNG-IUS at any time in the future?: Afraid will travel in body	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
no_interest15	313.15. Why are you not interested in using the LNG-IUS at any time in the future?: Other	select_one	1=Yes 0=No	
no_interest16	313.16. Why are you not interested in using the LNG-IUS at any time in the future?: Not sure	select_one	1=Yes 0=No	
no_interest17	313.17. Why are you not interested in using the LNG-IUS at any time in the future?: No response	select_one	1=Yes 0=No	
no_interest_other	313a. Specify why you are not interested in using the LNG-IUS?	text		
travel	401. By what means do you most commonly travel from your home to the clinic?	select_one	1=Walk 2=Bicycle 3=Motorcycle/ scooter 4=Personal vehicle 5=Taxi 6=Bus/public transport 7=Other 99=No response	
travel_other	401a. Specify transport	text		
travel_timeunit3	402. How long does it take to travel from your home to the clinic? A. Enter unit of time the participant responds in	select_one	1=Hours 2=Minutes 3=Days 88=Not sure 99=No response	
travel_timetime3	402. How long does it take to travel from your home to the clinic? B. Enter amount of time, corresponding to unit previously selected.	integer		
first_time	403. Did you receive your ${method} the first time you went to the clinic to ask for it?	select_one	1=Yes 0=No 99=No Response	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
first_time_reason	404. Why did you not get it the first time?	select_one	1=Long line/long wait 2=Method not available 3=Equipment/supplies not available 4=Not enough money 5=Not currently having menses 6=Needed partner approval 7=Provider not available 8=Provider would not give it to me 9=Just making inquiries the first time 10=Other 88=Not sure 99=No response	
method_price	405. Not including transportation to the clinic, how much did you pay for your ${method} (in Kwacha)?	integer		
transport_price	406. How much did you pay for transportation for the round trip to the clinic (in Kwacha)?	integer		
miscarriage	407. Did you receive the ${method} within two weeks of having an abortion or a miscarriage?	select_one	1=Yes 0=No 88=Not sure 99=No response	
other_methods	408. When you obtained your ${method}, did the provider tell you about other methods you could use?	select_one	1=Yes 0=No 88=Not sure 99=No response	
side_effects_yn	409. Did the provider talk to you about bleeding changes or other side effects that you may experience while using your ${method}?	select_one	1=Yes 0=No 88=Not sure 99=No response	
side_effects1	410.1. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Less bleeding than normal	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
side_effects2	410.2. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: No bleeding	select_one	1=Yes 0=No	
side_effects3	410.3. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: More bleeding than normal (heavier or longer)	select_one	1=Yes 0=No	
side_effects4	410.4. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Bleeding disturbances (spotting, change in frequency, irregular)	select_one	1=Yes 0=No	
side_effects5	410.5. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Less pain during period	select_one	1=Yes 0=No	
side_effects6	410.6. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Vaginal bacterial infections	select_one	1=Yes 0=No	
side_effects7	410.7. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Yeast infections	select_one	1=Yes 0=No	
side_effects8	410.8. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Pain during sex	select_one	1=Yes 0=No	
side_effects9	410.9. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Lack of sexual desire	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
side_effects10	410.10. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Pelvic discomfort / pain	select_one	1=Yes 0=No	
side_effects11	410.11. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Expulsion (IUD coming out on own)	select_one	1=Yes 0=No	
side_effects12	410.12. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Changes in skin	select_one	1=Yes 0=No	
side_effects13	410.13. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Headaches	select_one	1=Yes 0=No	
side_effects14	410.14. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Nausea / vomiting	select_one	1=Yes 0=No	
side_effects15	410.15. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Abdominal pain	select_one	1=Yes 0=No	
side_effects16	410.16. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Breast tenderness	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
side_effects17	410.17. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Mood changes	select_one	1=Yes 0=No	
side_effects18	410.18. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Weight gain	select_one	1=Yes 0=No	
side_effects19	410.19. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Delayed return to fertility	select_one	1=Yes 0=No	
side_effects20	410.20. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Other	select_one	1=Yes 0=No	
side_effects21	410.21. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: Not sure	select_one	1=Yes 0=No	
side_effects22	410.22. What possible bleeding changes or side effects did the provider say that you may experience while using your method?: No response	select_one	1=Yes 0=No	
side_effects_other	410a. Specify other side effects	text		
followup	413. Did the provider tell you to come back for follow-up visits for your ${method}?	select_one	1=Yes 2=No 3=Only if I have a problem 88=Not sure 99=No Response	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
years_in	415. How many years did the provider say your ${method} can remain in until it needs to be removed?	select_one	1=Less than 3 years 2=3 years 3=4 years 4=5 years 5=6-9 years 6=10-12 years 7=More than 12 years 8=Provider didn't say 88=Not sure 99=No response	
removed	416. Did the provider tell you that you can have your ${method} removed at any time you want?	select_one	1=Yes 0=No 88=Not sure 99=No response	
remove_location1	417.1. Where did the provider say that you could go when you wanted to have your ${method} removed?: At the same clinic where it was inserted	select_one	1=Yes 0=No	
remove_location2	417.2. Where did the provider say that you could go when you wanted to have your ${method} removed?: At a different clinic from where it was inserted	select_one	1=Yes 0=No	
remove_location3	417.3. Where did the provider say that you could go when you wanted to have your ${method} removed?: At any clinic	select_one	1=Yes 0=No	
remove_location4	417.4. Where did the provider say that you could go when you wanted to have your ${method} removed?: Provider did not say	select_one	1=Yes 0=No	
remove_location5	417.5. Where did the provider say that you could go when you wanted to have your ${method} removed?: Not sure	select_one	1=Yes 0=No	
remove_location6	417.6. Where did the provider say that you could go when you wanted to have your ${method} removed?: No response	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
injection_duration	418. How long did the provider tell you the injection would protect you against pregnancy?	select_one	1=3 months / 13 weeks 2=Any other duration 3=Provider didn't say 88=Not sure 99=No response	
privacy	419. Do you feel that you had enough privacy when the provider gave you your ${method}?	select_one	1=Yes 0=No 99=No Response	
problems_yn	422. Did you have any problems when the provider gave you your ${method}?	select_one	1=Yes 0=No 88=Not sure 99=No response	
problems1	423.1. What problem(s) did you have?: Temporary pain at time of insertion	select_one	1=Yes 0=No	
problems2	423.2. What problem(s) did you have?: Discomfort / pain that lasted a few days but then went away	select_one	1=Yes 0=No	
problems3	423.3. What problem(s) did you have?: Continuing pain that hasn't gone away	select_one	1=Yes 0=No	
problems4	423.4. What problem(s) did you have?: Cramping	select_one	1=Yes 0=No	
problems5	423.5. What problem(s) did you have?: Infection / swelling	select_one	1=Yes 0=No	
problems6	423.6. What problem(s) did you have?: Scarring	select_one	1=Yes 0=No	
problems7	423.7. What problem(s) did you have?: Other	select_one	1=Yes 0=No	
problems8	423.8. What problem(s) did you have?: No response	select_one	1=Yes 0=No	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
method_rating	425. Overall, can you rate your experience with your ${method} so far? Would you say you are… (READ RESPONSES)	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	
method_duration	427. How long do you plan to keep using your ${method}?	select_one	1=Less than 1 year 2=1-2 years 3=3-5 years 4=More than 5 years 5=Undecided 6=Until no longer effective 7=Until I can no longer get pregnant 8=Other 99=No response	
itemselectricity	501. Does your household have: Electricity	select_one	1=Yes 0=No	
itemstv	501. Does your household have: A television	select_one	1=Yes 0=No	
itemsfridge	501. Does your household have: A refrigerator	select_one	1=Yes 0=No	
itemssofa	501. Does your household have: A sofa	select_one	1=Yes 0=No	
itemsclock	501. Does your household have: A clock	select_one	1=Yes 0=No	
itemsfan	501. Does your household have: A fan	select_one	1=Yes 0=No	
itemsvcr	501. Does your household have: A VCR/DVD	select_one	1=Yes 0=No	
roof	502. What is the main material of the roof of your household's house?	select_one	1=No roof 2=Thatch / palm leaf 3=Iron sheets 4=Other 99=No response	

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Variable name	Variable label/description	Variable type	Choices labels	Notes
roof_other	502a. Specify roof material	text		
floor	503. What is the main material of your household's floor?	select_one	1=Earth / sand 2=Dung 3=Concrete cement 4=Other 99=No response	
floor_other	503a. Specify floor material	text		
fuel	504. What type of fuel does your household mainly use for cooking?	select_one	1=Electricity 2=Charcoal 3=Other 99=No response	
fuel_other	504a. Specify type of fuel used for cooking	text		
bank	505. Does any member of this household have a bank account?	select_one	1=Yes 0=No 99=No Response	