| Date | 25-Sep | | |
|---|---|---|---|
| Version | v1.2 | | |
| Changes | During/After 2OiH coding | | |
| Code | Name | | |
| 1 | Type of CIMC | | |
| | a | Frequency (how often) | |
| | b | Predictability (how regularly) | |
| | c | Duration (how long) | |
| | d | Volume (how much) | |
| | e | Blood consistency /color/smell (how bleeding looks) | |
| | f | Other fluid/effluent | |
| | g | Cramps/menstrual pain/uterine pain | |
| | h | No bleeding | |
| | i | No change | |
| | j | Spotting | |
| | k | Other pain | |
| | l | Other symptom | |
| | m | Over time | |
| | n | No CIMCs at all | |
| 2 | Type of CIMC change | | |
| | a | Increase/more | |
| | b | Decrease/less | |
| | c | Other type of change | |
| 3 | Impacts of CIMCs | | |
| | a | How body feels | |
| | | i | |
| | | ii | |
| | | iii | |
| | | iv | |
| | | v | |
| | | vi | |
| | b | Impact on life/wellbeing | |
| | i | | Work/duties |
| | ii | | Partner relationship and sex life |
| | iii | | Other relationships (family, friends, community) |
| | iv | | Religion |
| | v | | Labor of managing menstruation |
| | vi | | Financial |
| | vii | | Broad enjoyment of life |
| | viii | | Other |
| | c | Other impacts | |
| 4 | Perspective on CIMCs | | |
| | a | Positive | |
| | b | Negative | |
| | c | Acceptable but not positive | |
| | d | Mixed | |
| | e | Comparison | |
| | f | Neutral/Unsure | |
| | g | Small | |
| | h | Large | |
| 5 | Influence on perspective of CIMCs | | |
| | a | Provider(s) | |
| | b | Partner(s) | |
| | c | Friend(s) | |
| | d | Family | |
| | e | Community | |
| | f | Work | |
| | g | Religion | |
| | h | Menstrual health management | |
| | i | Menstruation beliefs | |
| | j | Life stage/fertility intentions | |
| | k | Other | |
| 6 | Connection between CIMCs and other side effects/benefits | | |

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|---|---|---|---|
| | a | Menstrual disorders (HMB, fibroids, etc.) | |
| | b | Others | |
| 7 | Managing CIMCs | | |
| | a | OTC/self-care remedies | |
| | b | Other person non-provider | |
| | c | Provider/clinic/counseling | |
| | i | Got treatment | |
| | ii | No treatment | |
| | e | Internet/app/online | |
| | f | None | |
| | g | Other | |
| | h | Menstrual products/materials | |
| | i | Sanitation facilities, access water, cleaning/drying | |
| 8 | Tracking/monitoring cycle | | |
| | a | Via calendar/tracking apps/management system | |
| | b | Via symptoms before menstruation | |
| | c | Other | |
| 9 | Desired information on CIMCs | | |
| | a | Helpful | |
| | b | Not helpful | |
| | c | Most important | |
| | d | No information provided | |
| 10 | Questerview Q1 | | |
| | a | Light | |
| | b | Moderate | |
| | c | Heavy | |
| | d | Recall | |
| | e | Understanding of question | |
| 11 | Questerview Q2 | | |
| | a | Product count/use | |
| | b | Probe on different counts | |
| | c | Probe on materials/access | |
| | d | Probe on spotting | |
| | e | Different menstrual experiences | |
| | f | Understanding of question | |
| 12 | Extra Questerview Qs | | |
| 13 | Words/phrasing | | |
| | a | Menstruation or menstrual cycle | |
| | b | Spotting | |
| | c | Pain | |
| | d | Places on the body | |
| | e | Other | |
| 14 | Method | | |
| | a | Injectable | |
| | | i | DMPA |
| | | ii | NET-EN |
| | b | Pills | |
| | c | Implant(s) | |
| | d | IUD | |
| | | i | Hormonal IUD |
| | | ii | Nonhormonal IUD |
| | f | Hormonal rings | |
| | g | Hormonal patches | |
| | h | Other | |
| 15 | Body Mapping | | |
| | a | Pain | |
| | b | No pain/reduction in pain | |
| | c | Description of pain location | |
| | d | Treating pain | |
| 16 | Contraceptive dynamics | | |
| | a | Initiation of a method | |
| | b | Discontinuation of a method | |
| | c | Switching | |

| | | | |
|---|---|---|---|
| | d | Non-preferred method use | |
| | e | Discreet use | |
| | f | Pre-contraception | |
| 17 | Menstrual perceptions | | |
| | a | Stigma/shame/discretion | |
| | b | Empowerment/care | |
| | c | "Normal", "Natural" | |
| 18 | Life course | | |
| 19 | Menstrual health management | | |
| | a | Materials | |
| | b | Facilities | |
| | c | Services | |
| | d | Information | |
| | e | Treatment | |
| | f | Environment | |
| | g | Other | |
| A | Interesting quotation | | |
| B | Location | | |
| | 1 | Duban, South Africa | |
| | 2 | Santo Domingo, Dominican Republic | |
| | 3 | Oregon, USA | |
| C | Cogntive interview insights | | |
| D | SHINE study | | |
| E | Question for coding meeting | | |
| W | Questons for partners | | |
| X | Identifying information | | |
| Y | Transcription question | | |
| Z | Translation question | | |