

QUESTIONNAIRE SERIAL NO: [][][][][]

UNAIDS / MEASURE <i>Evaluation</i> HIV/AIDS Prevention Indicator Survey KNOWLEDGE, ATTITUDES, SEXUAL BEHAVIOUR, STIGMA FOR USE WITH ADULT GENERAL POPULATION AGED 15-49
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**Part B:
INDIVIDUAL QUESTIONNAIRE**

TITLE OF SURVEY - COUNTRY - YEAR CONDUCTED

Household identification

Individual line number on household roster [][][]

Q001 Place Name/code _____ [][][]

Q002 Urban = 1 [][]
 Rural = 2
 Roadside Settlement = 3

Q003 INTERVIEWER VISIT

	Visit 1	Visit 2	Visit 3
Date	Mo. ____ Day ____ Yr. ____	Mo. ____ Day ____ Yr. ____	Mo. ____ Day ____ Yr. ____
Interviewer name/code	_____	_____	_____
Result*	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

***RESULT CODES**

Completed	1	Postponed	5
This person not at home	2	Other (SPECIFY)	6
Refused	3		
This person away for duration of survey	4		

Supervisor _____ **Time Interview started:** _____

Date reviewed: _____

Section 1: Background characteristics

[BE SURE TO READ ALOUD THE INFORMED CONSENT FORM]

First, I would like to ask some questions about you and your household.

No.	Questions and filters	Coding categories	Skip to
Q101	CIRCLE SEX OF THE RESPONDENT	MALE 1 FEMALE..... 2	
Q102	In what month and year were you born?	MONTH..... [][] DON'T KNOW MONTH 98 YEAR [][][][] DON'T KNOW YEAR 99	
Q103	How old were you at your last birthday? (COMPARE RESPONSE AND CORRECT Q102 IF NECESSARY.)	AGE IN COMPLETED YEARS [][]	
Q104	Can you read and understand a letter or newspaper easily, with difficulty or not at all?	EASILY 1 WITH DIFFICULTY 2 NOT AT ALL..... 3	
Q105	Have you ever attended school?	YES..... 1 NO 2	→Q108
Q106	What is the highest level of school you attended: primary, secondary, or higher?	PRIMARY..... 1 SECONDARY 2 HIGHER 3	
Q107	How many years of education did you complete at that level?	YEARS COMPLETED [][]	
Q108	How long have you been living continuously in (NAME OF VILLAGE/TOWN/CITY)? (RECORD 00 IF LESS THAN 1 YEAR.)	YEARS..... [][]	
Q109	In the last <u>4 weeks</u> , how many nights in total have you slept in another location other than your home?	NUMBER OF NIGHTS SLEPT ELSEWHERE [][]	
Q110	In the last 12 months, have you been away from your home community for more than 1 month altogether?	YES..... 1 NO 2	
Q111	Have you ever drunk an alcohol-containing beverage?	YES..... 1 NO 2	→Q113
Q112	In the last 4 weeks, on how many days did you drink an alcohol-containing beverage?	NUMBER OF DAYS [][]	

No.	Questions and filters	Coding categories	Skip to
Q113	What is your current employment / source of income? (ENTER CURRENT EMPLOYMENT / SOURCE OF INCOME IN SPACE PROVIDED. NUMERICAL CODES WILL BE ASSIGNED.)	SPECIFY _____ CODE [][][]	

Q114-Q115 ARE OPTIONAL QUESTIONS

No.	Questions and filters	Coding categories	Skip to
Q114	What is your religion? (ENTER CURRENT RELIGION. NUMERICAL CODES WILL BE ASSIGNED.)	SPECIFY _____ CODE [][][]	
Q115	To which ethnic group do you belong? (ENTER CURRENT RELIGION. NUMERICAL CODES WILL BE ASSIGNED.)	SPECIFY _____ CODE [][][]	

Section 2: Marriage and Cohabiting Partnerships

Now I would like to ask you some general questions about marriage and live-in partnerships.

No.	Questions and filters	Coding categories	Skip to
Q201	Have you <i>ever</i> been married or lived with a man/woman as if you were married?	YES..... 1 NO 2	→Q301
Q202	How old were you when you <i>first</i> married/started living with a man/woman?	AGE IN YEARS..... [][]	
Q203	Are you <i>currently</i> married or living together with a man/woman as if you are married?	YES, MARRIED 1 YES, LIVING TOGETHER..... 2 NO 3	→Q205 →Q301
Q204	Does your husband/wife live with you or does he/she live somewhere else?	WITH RESPONDENT 1 SOMEWHERE ELSE 2	
Q205	For how many years have you been married or living together as if you were married? (RECORD 00 IF LESS THAN ONE YEAR.)	YEARS..... [][]	
Q206	MEN: Do you have more than one wife or other partners who live with you? WOMEN: Does your husband have other wives or does he live with other partners?	YES..... 1 NO 2	→Q301
Q207	MEN: Altogether, how many wives or other partners live with you? WOMEN: Including yourself, how many wives or other partners live with your husband?	NO. OF WIVES/PARTNERS [][]	

3. Sexual History and Behaviour

READ OUT:

I am going to ask some specific questions about sex and your sexual partners in the last 12 months. I know it may be difficult to remember exactly, but I would like you to answer the questions to the best of your knowledge, as this information is very important for the survey. Again, this information is all completely private and anonymous and cannot be linked to you or any partner in any way.

I will begin by asking about your most recent sexual partner and will ask only about the last three partners you have had in the past 12 months. This includes anyone you might have had sex with: husband, wife or wives, girlfriends, boyfriends, friends, casual partners, prostitutes, someone you may have met at a bar, a wedding, a special event, etc.

No.	Questions and filters	Coding categories	Skip to
Q301	Have you <i>ever</i> had sexual intercourse?	YES..... 1 NO 2	→Q401
Q302	At what age did you <i>first</i> have sex?	AGE IN YEARS..... [][]	
Q303	When was the <i>last time</i> you had sex? (Complete only one of the options.)	DAYS AGO 1 [][] WEEKS AGO 2 [][] MONTHS AGO..... 3 [][] YEARS AGO 4 [][]	→Q401

I would like for you to think about the last time you had sex, and I am going to ask you some questions about your sexual partners, beginning with the person with whom you had sex most recently. (ASK Q305-Q319, BEGINNING WITH MOST RECENT PARTNER.)

		Partner 1	Partner 2	Partner 3
Q304	<p>IF ANSWER IS 1 OR 2, CHECK Q. 203</p> <p>What is your relationship to this PARTNER (Partner 1- MOST RECENT PARTNER)</p> <p>(READ OUT)</p>	HUSBAND/WIFE1 LIVE-IN PARTNER2 GIRLFRIEND / BOYFRIEND NOT LIVING WITH YOU.. 3 SOMEONE WHOM YOU PAID OR WHO PAID YOU FOR SEX 4 CASUAL ACQUAINTANCE ... 5 OTHER (SPECIFY) 6 _____	HUSBAND/WIFE1 LIVE-IN PARTNER.....2 GIRLFRIEND / BOYFRIEND NOT LIVING WITH YOU.. 3 SOMEONE WHOM YOU PAID OR WHO PAID YOU FOR SEX 4 CASUAL ACQUAINTANCE... 5 OTHER (SPECIFY) 6 _____	HUSBAND/WIFE.....1 LIVE-IN PARTNER.....2 GIRLFRIEND / BOYFRIEND NOT LIVING WITH YOU.. 3 SOMEONE WHOM YOU PAID OR WHO PAID YOU FOR SEX 4 CASUAL ACQUAINTANCE... 5 OTHER (SPECIFY)..... 6 _____
Q305	How old is this partner?	AGE..... [][] DON'T KNOW 98	AGE[][] DON'T KNOW 98	AGE[][] DON'T KNOW98
Q306	At what place or event did you <i>first</i> talk to or get to know this partner?	OWN FRIEND'S HOUSE..... 1 CHURCH.....2 SCHOOL3 WORK4 WEDDING, FUNERAL/OTHER FAMILY EVENT5 SPORTING EVENT6 BAR/NIGHTCLUB7 BROTHEL8 OTHER (SPECIFY) 9 _____	OWN FRIEND'S HOUSE..... 1 CHURCH.....2 SCHOOL3 WORK4 WEDDING, FUNERAL/OTHER FAMILY EVENT5 SPORTING EVENT6 BAR/NIGHTCLUB7 BROTHEL8 OTHER (SPECIFY) 9 _____	OWN FRIEND'S HOUSE 1 CHURCH2 SCHOOL.....3 WORK.....4 WEDDING, FUNERAL/OTHER FAMILY EVENT.....5 SPORTING EVENT.....6 BAR/NIGHTCLUB7 BROTHEL8 OTHER (SPECIFY)..... 9 _____
Q307	Where does this partner live? PROBE: Does he/she live in: (READ OUT)	SAME VILLAGE OR NEIGHBORHOOD1 OTHER URBAN AREA.....2 OTHER RURAL AREA3 OTHER (SPECIFY) 4 _____ DON'T KNOW98	SAME VILLAGE OR NEIGHBORHOOD1 OTHER URBAN AREA.....2 OTHER RURAL AREA3 OTHER (SPECIFY) 4 _____ DON'T KNOW98	SAME VILLAGE OR NEIGHBORHOOD.....1 OTHER URBAN AREA2 OTHER RURAL AREA.....3 OTHER (SPECIFY).....4 _____ DON'T KNOW98
Q308	How long ago did you first have sex with this partner? (COMPLETE ONLY ONE OPTION.)	DAYS 1 [][] WEEKS 2 [][] MONTHS..... 3 [][] YEARS 4 [][]	DAYS1 [][] WEEKS2 [][] MONTHS.....3 [][] YEARS.....4 [][]	DAYS.....1 [][] WEEKS.....2 [][] MONTHS3 [][] YEARS.....4 [][]

		Partner 1	Partner 2	Partner 3
Q309	Did you use a condom the first time you had sex with this partner?	Yes..... 1 No..... 2 DON'T KNOW 98	Yes..... 1 No 2 DON'T KNOW 98	Yes 1 No 2 DON'T KNOW 98
Q310	How long ago did you have sex with this partner most recently? (COMPLETE ONLY ONE OPTION.)	DAYS AGO..... 1 [] [] WEEKS AGO 2 [] [] MONTHS AGO..... 3 [] [] YEARS AGO 4 [] [] WAS A ONE-TIME SEXUAL CONTACT 5	DAYS AGO1 [] [] WEEKS AGO2 [] [] MONTHS AGO.....3 [] [] YEARS AGO4 [] [] WAS A ONE-TIME SEXUAL CONTACT 5	DAYS AGO 1 [] [] WEEKS AGO2 [] [] MONTHS AGO..... 3 [] [] YEARS AGO.....4 [] [] WAS A ONE-TIME SEXUAL CONTACT 5
Q311	The last time you had sex with this partner, did you or this partner use a condom?	YES 1 NO..... 2 IF NO, SKIP TO Q313	YES..... 1 NO..... 2 IF NO, SKIP TO Q313	YES..... 1 NO 2 IF NO, SKIP TO Q313
Q312	From what place or person did you or this partner get that condom?	SHOP 1 PHARMACY 2 HOSPITAL/CLINIC 3 FAMILY PLANNING CENTRE 4 BAR/HOTEL 5 OTHER (SPECIFY) 6 DON'T KNOW 98	SHOP 1 PHARMACY 2 HOSPITAL/CLINIC 3 FAMILY PLANNING CENTRE 4 BAR/HOTEL 5 OTHER (SPECIFY) 6 DON'T KNOW 98	SHOP 1 PHARMACY 2 HOSPITAL/CLINIC 3 FAMILY PLANNING CENTRE 4 BAR/HOTEL 5 OTHER (SPECIFY) 6 DON'T KNOW 98
Q313	The last time you had sex, did you or this partner drink alcohol?	YES 1 NO..... 2 DON'T KNOW 98	YES..... 1 NO..... 2 DON'T KNOW 98	YES..... 1 NO 2 DON'T KNOW 98
Q314	The last time you had sex, did you or this partner do anything to delay or avoid getting pregnant?	YES..... 1 NO..... 2 DON'T KNOW 98 IF NO OR DON'T KNOW, SKIP TO Q316	YES..... 1 NO..... 2 DON'T KNOW 98 IF NO OR DON'T KNOW, SKIP TO Q316	YES..... 1 NO 2 DON'T KNOW 98 IF NO OR DON'T KNOW, SKIP TO Q316

		Partner 1	Partner 2	Partner 3
Q315	What did you do to avoid getting pregnant?	USED CONDOMS 1 PILL..... 2 IUD 3 INJECTION 4 WITHDRAWAL..... 5 SELF OR PARTNER IS STERILE..... 6 NOTHING..... 7 OTHER (SPECIFY) 8 _____	USED CONDOMS..... 1 PILL..... 2 IUD..... 3 INJECTION 4 WITHDRAWAL..... 5 SELF OR PARTNER IS STERILE..... 6 NOTHING..... 7 OTHER (SPECIFY) 8 _____	USED CONDOMS 1 PILL 2 IUD..... 3 INJECTION 4 WITHDRAWAL..... 5 SELF OR PARTNER IS STERILE 6 NOTHING 7 OTHER (SPECIFY)..... 8 _____
Q316	Do you think this partner has other partners?	YES..... 1 NO..... 2 DON'T KNOW 98	YES..... 1 NO..... 2 DON'T KNOW 98	YES..... 1 NO 2 DON'T KNOW98
Q317	Now think about the partner you had sex with before the partner we just talked about. Was this sexual contact within the past 12 months?	YES..... 1 (IF YES, GO BACK TO 304 AND ASK ABOUT NEXT PARTNER) NO..... 2 (IF NO, GO TO Q318)	YES..... 1 (IF YES, GO BACK TO 304 AND ASK ABOUT NEXT PARTNER) NO..... 2 (IF NO, GO TO Q318)	YES..... 1 (IF YES, GO BACK TO 304 AND ASK ABOUT NEXT PARTNER) NO 2 (IF NO, GO TO Q318)

**STOP! GO ON TO Q318 ONLY AFTER ASKING ABOUT ALL THREE OF THE PARTNERS
IN THE LAST 12 MONTHS.**

No.	Questions and Filters	Coding Categories	Skip to
Q318	In the last 12 months with how many people <u>overall</u> have you had sex (including these last partners we've discussed)?	NUMBER..... [][]	
Q319	In the last 12 months have you exchanged or received money for sex?	YES..... 1 NO..... 2	→Q401
Q320	The last time you had sex with someone and exchanged money, did you or this partner use a condom?	YES..... 1 NO..... 2	

Section 4: Sexually Transmitted Diseases

Now I would like to ask some questions relating to circumcision and sexually transmitted diseases.

No.	Questions and filters	Coding categories	Skip to
Q401	Some men or women have been circumcised. Have you been circumcised?	YES.....1 NO2	
Q402	Have you ever heard of diseases or infections that can be transmitted through sexual intercourse (STDs)?	YES.....1 NO2	→Q405
Q403	In a woman , what signs and symptoms would lead you to think that she has such a disease or infection? Any others? (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE. DO NOT READ OUT THE SYMPTOMS.)	ABDOMINAL PAIN A DISCHARGE FROM VAGINA B ITCHING IN GENITAL AREA C BURNING PAIN ON URINATION..... D PAIN DURING INTERCOURSE E GENITAL ULCERS/OPEN SORES F SWELLINGS IN GENITAL AREA G BLOOD IN URINE H FAILURE TO PASS URINE..... I LOSS OF WEIGHT J INABILITY TO CONCEIVE K NO SYMPTOMS L OTHER (SPECIFY) X _____ DON'T KNOW Z	
Q404	In a man , what signs and symptoms would lead you to think that he has such an infection? Any other symptom? (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE. DO NOT READ OUT THE SYMPTOMS.)	ABDOMINAL PAIN A DISCHARGE FROM PENIS B ITCHING IN GENITAL AREA C BURNING PAIN ON URINATION..... D PAIN DURING INTERCOURSE E GENITAL ULCERS/OPEN SORES F SWELLINGS IN GENITAL AREA G BLOOD IN URINE H FAILURE TO PASS URINE..... I LOSS OF WEIGHT J IMPOTENCE K NO SYMPTOMS L OTHER (SPECIFY) X _____ DON'T KNOW Z	
	CHECK Q301 HAS HAD SEXUAL INTERCOURSE <input type="checkbox"/> ↓	HAS NOT HAD SEXUAL INTERCOURSE <input type="checkbox"/> →	Q501
Q405	During the last 12 months, have you had a genital discharge or ulcer?	YES.....1 NO2	→Q501
Q406	When you had a genital discharge or ulcer during the last 12 months, did you seek any kind of advice or treatment?	YES.....1 NO2	→Q409

No.	Questions and filters	Coding categories	Skip to
Q407	<p>When you had a genital discharge or ulcer in the last 12 months, did you:</p> <p>READ OUT</p> <p>A. Seek advice or medicine from a health worker in a clinic or hospital?</p> <p>B. Seek advice or medicine from a traditional healer?</p> <p>C. Seek advice or buy medicines in a shop or pharmacy?</p> <p>D. Ask for advice from friends or relatives?</p>	<p>YES NO</p> <p> 1 2</p> <p> 1 2</p> <p> 1 2</p> <p> 1 2</p>	
Q408	<p>When you had a genital discharge or ulcer in the past 12 months, what was the <u>first thing you did</u> for either advice or treatment?</p> <p>(CHOOSE ONLY ONE ANSWER.)</p>	<p>SOUGHT ADVICE OR MEDICINE FROM A HEALTH WORKER IN A CLINIC OR HOSPITAL..... 1</p> <p>SOUGHT ADVICE OR MEDICINE FROM A TRADITIONAL HEALER2</p> <p>SOUGHT ADVICE OR BOUGHT MEDICINES IN A SHOP OR PHARMACY3</p> <p>ASKED FRIENDS OR RELATIVES FOR ADVICE4</p> <p>OTHER (SPECIFY)5</p> <p>_____</p> <p>DON'T KNOW 98</p>	
Q409	<p>When you had a genital discharge or ulcer in the last 12 months, did you:</p> <p>A. Tell your sexual partner(s) about the symptoms?</p> <p>B. Stop having sex when you had the symptoms?</p> <p>C. Use a condom when having sex when you had the symptoms?</p> <p>D. Take medicines when you had the symptoms?</p>	<p>YES NO</p> <p> 1 2</p> <p> 1 2</p> <p> 1 2</p> <p> 1 2</p>	

Section 5: Knowledge about HIV/AIDS and level of exposure to interventions

Now I would like to ask some questions about HIV, the virus that causes AIDS.

No.	Questions and filters	Coding categories	Skip to
Q501	Have you ever heard of the virus HIV or an illness called AIDS?	YES..... 1 NO 2 DON'T KNOW 98	→Q619 →Q619
Q502	In the past 4 weeks, have you heard or seen any information about the AIDS virus?	YES..... 1 NO 2	→Q504
Q503	From what source(s) did you receive this information about the AIDS virus? Any other source? (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.)	[LOCALLY SPECIFIC INTERVENTION] A [LOCALLY SPECIFIC INTERVENTION] B TELEVISION C RADIO..... D PARTNER..... E FRIEND..... F FAMILY MEMBER.....G HEALTH CARE WORKER H CO-WORKER I OTHER (SPECIFY) X _____ DON'T KNOW Z	
Q503 a	<i>LOCALLY SPECIFIC INTERVENTION</i> e.g. "Have you heard XXX radio program??"	YES..... 1 NO 2	
Q503 b	<i>LOCALLY SPECIFIC INTERVENTION</i> e.g. "Have you seen advertisements for XXXX condom?"	YES..... 1 NO 2	
Q504	During the past 4 weeks, have you discussed the AIDS virus with anyone?	YES..... 1 NO 2	→Q506
Q505	With whom have you discussed the AIDS virus during the past 4 weeks? Anyone else? (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.)	SEX PARTNER A FRIEND..... B FAMILY C HEALTH CARE WORKER D CO-WORKER E OTHER (SPECIFY) X _____	
Q506	Is there anything a person can do to avoid getting infected with HIV, the virus that causes AIDS?	YES..... 1 NO 2 DON'T KNOW 98	→Q508 →Q508

No.	Questions and filters	Coding categories	Skip to
Q507	<p>What ways can people protect themselves from getting infected with HIV?</p> <p>Any other ways?</p> <p>(CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE. DO NOT READ OUT THE WAYS.)</p>	<p>USE CONDOMS A</p> <p>HAVE FEWER PARTNERS B</p> <p>BOTH PARTNERS HAVE NO OTHER PARTNERS C</p> <p>NO CASUAL SEX D</p> <p>NO SEX AT ALL E</p> <p>NO COMMERCIAL SEX F</p> <p>AVOID INJECTIONS WITH CONTAMINATED NEEDLES G</p> <p>AVOID BLOOD TRANSFUSIONS H</p> <p>OTHER (SPECIFY) X</p> <p>_____</p> <p>DON'T KNOW ANY Z</p>	

Now I'm going to read out some questions about HIV, the virus that causes AIDS. Some of the questions have accurate information and others incorrect information. Don't worry about getting the right answer, just say what you think.

No.	Questions and filters	Coding categories	Skip to												
Q508	Can a person who looks healthy be infected with the AIDS virus? (CHECK Q507; IF CONDOM NOT MENTIONED, ASK Q.509.)	YES..... 1 NO 2 DON'T KNOW 98													
Q509	Can people reduce their chances of getting the AIDS virus by using a condom correctly every time they have sex?	YES..... 1 NO 2 DON'T KNOW 98													
Q510	<i>Locally specific misconception, e.g. "Do you think that a person can get infected with the AIDS virus through mosquito bites?"</i>	YES..... 1 NO 2 DON'T KNOW 98													
Q511	Can people reduce their chances of getting the AIDS virus by having only one sex partner who has no other partners?	YES..... 1 NO 2 DON'T KNOW 98													
Q512	Can a person get infected with the AIDS virus by sharing a meal with a person who has HIV or AIDS?	YES..... 1 NO 2 DON'T KNOW 98													
Q513	<i>Locally specific misconception, for example, Can people get AIDS because of witchcraft?</i>	YES..... 1 NO 2 DON'T KNOW 98													
Q514	Can the AIDS virus be transmitted from a mother to a child?	YES..... 1 NO 2 DON'T KNOW 98	→Q601												
Q515	Can the AIDS virus be transmitted from a mother to a child: During pregnancy or at delivery? Through breast milk?	<table border="0"> <tr> <td></td> <td>YES</td> <td>NO</td> <td>DON'T KNOW</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>98</td> </tr> <tr> <td></td> <td>1</td> <td>2</td> <td>98</td> </tr> </table>		YES	NO	DON'T KNOW		1	2	98		1	2	98	
	YES	NO	DON'T KNOW												
	1	2	98												
	1	2	98												
Q516	If a mother is infected with the AIDS virus, is there any way to avoid transmission to the baby?	YES..... 1 NO 2 DON'T KNOW 98	→Q601 →Q601												
Q517	What ways? (CIRCLE ALL RESPONSES GIVEN.)	ANTIRETROVIRAL THERAPY (DRUGS BEFORE BIRTH)A NOT BREASTFEEDING..... B CAESAREAN SECTION.C OTHER (SPECIFY)X _____ DON'T KNOW..... Z													

Section 6: Attitudes toward people living with HIV/AIDS, gender, counselling

No.	Questions and filters	Coding categories	Skip to
Q601	Do you personally know anyone who has HIV or has died from AIDS?	YES..... 1 NO 2 DON'T KNOW 98	
Q602	Have you ever shared a meal with a person you knew or suspected had HIV or AIDS?	YES..... 1 NO 2 DON'T KNOW 98	
Q603	If a member of your family became sick with the AIDS virus, would you be willing to care for him or her in your household?	YES..... 1 NO 2 DON'T KNOW 98	
Q604	If a female teacher has the AIDS virus but is not sick, should she be allowed to continue teaching in school?	YES..... 1 NO 2 DON'T KNOW 98	
Q605	If you knew that a shopkeeper or food seller had the AIDS virus, would you buy vegetables from them?	YES..... 1 NO 2 DON'T KNOW 98	
Q606	If a member of your family got infected with the AIDS virus, would you want it to remain a secret?	YES..... 1 NO 2 DON'T KNOW 98	
Q608	I don't want to know the results but have you ever <i>been tested</i> to see if you have HIV, the virus that causes AIDS?	YES..... 1 NO 2	→Q614
Q609	In the past 12 months have you been tested for HIV, the virus that causes that causes AIDS?	YES..... 1 NO 2	→Q614
Q610	I don't want you to tell me the results of the test, but have you been told the results?	YES..... 1 NO 2	→Q614
Q611	Did you tell anyone the results of the test?	YES..... 1 NO 2	→Q614
Q612	Whom did you tell? (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.)	SEX PARTNERA FRIENDB FAMILY MEMBER(S)..... C HEALTH CARE WORKER D CO-WORKERE OTHER (SPECIFY)X _____	
Q613	Would you ever want to be tested (again) for HIV?	YES..... 1 NO 2 DON'T KNOW 98	

No.	Questions and filters	Coding categories	Skip to																												
Q614	Do you know of a place where you can go to get an HIV test?	YES..... 1 NO 2	→Q616																												
Q615	If you wanted to be tested, where could you go for the test? (CIRCLE ALL THAT ARE MENTIONED. MORE THAN ONE ANSWER IS POSSIBLE.)	VCT CENTRE (HIV TESTING CENTRE)..... A HOSPITAL/CLINIC..... B PHARMACY..... C MOBILE CLINIC..... D FAMILY PLANNING CENTRE..... E FIELD WORKER.....F OTHER (SPECIFY).....X _____ DON'T KNOW.....Z																													
Q616	If you chose to be tested for HIV, the virus that causes AIDS, and were told after the test that you had HIV, would you tell anyone the results?	YES..... 1 NO 2 DON'T KNOW..... 98	→Q618 →Q618																												
Q617	With whom would you share this information? Would you tell your... READ OUT	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>SEX PARTNER</td> <td>1</td> <td>2</td> <td>98</td> </tr> <tr> <td>FAMILY MEMBER(S)</td> <td>1</td> <td>2</td> <td>98</td> </tr> <tr> <td>FRIENDS</td> <td>1</td> <td>2</td> <td>98</td> </tr> <tr> <td>HEALTH CARE WORKERS</td> <td>1</td> <td>2</td> <td>98</td> </tr> <tr> <td>CO-WORKERS</td> <td>1</td> <td>2</td> <td>98</td> </tr> <tr> <td>OTHER (SPECIFY)</td> <td>1</td> <td>2</td> <td>98</td> </tr> </tbody> </table>		YES	NO	DK	SEX PARTNER	1	2	98	FAMILY MEMBER(S)	1	2	98	FRIENDS	1	2	98	HEALTH CARE WORKERS	1	2	98	CO-WORKERS	1	2	98	OTHER (SPECIFY)	1	2	98	
	YES	NO	DK																												
SEX PARTNER	1	2	98																												
FAMILY MEMBER(S)	1	2	98																												
FRIENDS	1	2	98																												
HEALTH CARE WORKERS	1	2	98																												
CO-WORKERS	1	2	98																												
OTHER (SPECIFY)	1	2	98																												
Q618	Do you think that unmarried women should always be able to buy condoms?	YES..... 1 NO 2																													
Q619	Can a woman protect herself from getting an STD if her husband has an STD?	YES..... 1 NO 2 DON'T KNOW..... 98	→Q701 →Q701																												
Q620	What can she do to protect herself? Anything else? (MORE THAN ONE ANSWER IS POSSIBLE. CIRCLE ALL ANSWERS)	SHE CAN REFUSE SEX..... A SHE CAN INSIST ON USING CONDOMS..... B SHE CAN TAKE MEDICINES C OTHER (SPECIFY).....X _____ DON'T KNOW.....Z																													

IF RESPONDENT IS MALE, THANK HIM AND END THE INTERVIEW.

Section 7: Childbearing and Antenatal Care (WOMEN ONLY)

The following questions are about all the births you have had during your life and about your antenatal care visits.

No.	Questions and filters	Coding categories	Skip to
Q701	Have you ever given birth?	YES..... 1 NO 2	→END
Q702	How many times have you given birth?	NUMBER OF LIVE BIRTHS [][]	
Q703	When was the last time you gave birth?	MONTH..... [][] DON'T KNOW MONTH 98 YEAR [][] DON'T KNOW YEA 99	IF MORE THAN 2 YEARS AGO, SKIP TO Q705
Q704	Have you resumed sex since this birth?	YES..... 1 NO 2	
Q705	Did you attend an antenatal clinic during that last pregnancy?	YES..... 1 NO 2	→Q714
Q706	How many times during this last pregnancy did you visit the antenatal clinic?	NUMBER OF VISITS [][]	
Q707	At what point in your pregnancy did you visit the antenatal clinic? How many weeks pregnant were you?	WEEKS OF PREGNANCY [][]	
Q708	Was this a private, government, mission, or other kind of clinic?	PRIVATE..... 1 GOVERNMENT 2 MISSION..... 3 OTHER (SPECIFY) 4 DON'T KNOW 98	
Q709	When you attended the clinic, were you given any information or counselled about HIV?	YES..... 1 NO 2	
Q710	When you attended the clinic, were you given any information or counselled about STDs?	YES..... 1 NO 2	
Q711	Was HIV testing offered to you at any time during your visit(s)?	YES..... 1 NO 2	→Q714
Q712	Did you agree to be tested for HIV during any of these visits?	YES..... 1 NO 2	→Q714
Q713	Did you receive the results of the HIV test?	YES..... 1 NO 2	

No.	Questions and filters	Coding categories	Skip to
Q714	Are you pregnant now?	YES.....1 NO2	→END
Q715	Have you gone for antenatal care during this pregnancy?	YES.....1 NO2	→END

That ends the questionnaire. Thank you very much for taking the time to complete the interview.

Time interview ended: _____

(CHECK FOR COMPLETENESS. IMMEDIATELY STORE COMPLETED QUESTIONNAIRE IN ENVELOPE, SEPARATE FROM HOUSEHOLD QUESTIONNAIRES.)

IF NO MORE BROTHERS OR SISTERS, GO TO END. USE THIS PAGE IF MORE THAN 6 SIBLINGS.

NO.	QUESTIONS AND FILTERS																																					
801	Now I would like to ask you some questions about your brothers and sisters.. First of all, please tell me how many children your mother gave birth to, including you?							NUMBER OF BIRTHS TO NATURAL MOTHER.....																														
804	What was the name given to your oldest (next oldest) brother or sister?	[7] —	[8] —	[9] —	[10] —	[11] —	[12] —																															
805	Is (NAME) male or female?	MALE 1 FEMALE 2	MALE 1 FEMALE 2	MALE 1 FEMALE 2	MALE 1 FEMALE 2	MALE 1 FEMALE 2	MALE 1 FEMALE 2																															
806	Is (NAME) still alive?	YES 1 NO 2 ▶GO TO 808 DK 8 ▶GO TO [8]	YES 1 NO 2 ▶GO TO 808 DK 8 ▶GO TO [9]	YES 1 NO 2 ▶GO TO 808 DK 8 ▶GO TO [10]	YES 1 NO 2 ▶GO TO 808 DK 8 ▶GO TO [11]	YES 1 NO 2 ▶GO TO 808 DK 8 ▶GO TO [12]	YES 1 NO 2 ▶GO TO 808 DK 8 ▶GO TO [END]																															
807	How old is (NAME)?	GO TO [8]	GO TO [9]	GO TO [10]	GO TO [11]	GO TO [12]	GO TO [END]																															
808	In what year did (name) die?	<table border="1" data-bbox="464 678 709 719"> <tr><td></td><td></td><td></td><td></td></tr> </table> GO TO 810◀ DK 9998					<table border="1" data-bbox="709 678 953 719"> <tr><td></td><td></td><td></td><td></td></tr> </table> GO TO 810◀ DK 9998					<table border="1" data-bbox="953 678 1199 719"> <tr><td></td><td></td><td></td><td></td></tr> </table> GO TO 810◀ DK 9998					<table border="1" data-bbox="1199 678 1444 719"> <tr><td></td><td></td><td></td><td></td></tr> </table> GO TO 810◀ DK 9998					<table border="1" data-bbox="1444 678 1690 719"> <tr><td></td><td></td><td></td><td></td></tr> </table> GO TO 810◀ DK 9998					<table border="1" data-bbox="1690 678 1936 719"> <tr><td></td><td></td><td></td><td></td></tr> </table> GO TO 810◀ DK 9998											
809	How many years ago did (NAME) die?																																					
810	How old was (NAME) when he/she died?	DK 998	DK 998	DK 998	DK 998	DK 998	DK 998																															
811	IF AGE AT DEATH AT LEAST 15 YEARS, ASK: For how many months was [NAME] ill before he/she died?	DK 998	DK 998	DK 998	DK 998	DK 998	DK 998																															

812	From what cause did [NAME] die?	AIDS 1	AIDS..... 1	AIDS 1	AIDS..... 1	AIDS 1	AIDS..... 1
		TB 2	TB 2	TB 2	TB 2	TB 2	TB 2
		OTHER INFECTIOUS DISEASE 3	OTHER INFECTIOUS DISEASE.....3	OTHER INFECTIOUS DISEASE 3	OTHER INFECTIOUS DISEASE.....3	OTHER INFECTIOUS DISEASE 3	OTHER INFECTIOUS DISEASE.....3
		MALNUTRITION 4	MALNUTRITION.....4	MALNUTRITION 4	MALNUTRITION.....4	MALNUTRITION 4	MALNUTRITION 4
		MATERNAL DEATH..... 5	MATERNAL DEATH.....5	MATERNAL DEATH..... 5	MATERNAL DEATH.....5	MATERNAL DEATH 5	MATERNAL DEATH.....5
		VIOLENCE/ INJURIES 6	VIOLENCE/ INJURIES.....6	VIOLENCE/ INJURIES 6	VIOLENCE/ INJURIES.....6	VIOLENCE/ INJURIES 6	VIOLENCE/ INJURIES.....6
		HEARTDISEASE/ STROKE/CANCER 7	HEARTDISEASE/ STROKE/CANCER7	HEARTDISEASE/ STROKE/CANCER 7	HEARTDISEASE/ STROKE/CANCER7	HEARTDISEASE/ STROKE/CANCER 7	HEARTDISEASE/ STROKE/CANCER7
		OTHER 8	OTHER.....8	OTHER 8	OTHER.....8	OTHER 8	OTHER.....8
		DK..... 998	DK998	DK..... 998	DK.....998	DK 998	DK..... 998

IF NO MORE BROTHERS OR SISTERS, THANK RESPONDENT AND END THE INTERVIEW.

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