

Safety & Wellbeing Study: Screening Form for WOMEN

AFRICAN POPULATION & HEALTH RESEARCH CENTER
NAIROBI URBAN DEMOGRAPHIC SURVEILLANCE SYSTEM (NUHDSS)
SAFETY & WELLBEING PROJECT: Screening Form for WOMEN

Date of the Interview:

Day Month Year

Fieldworker Code

Location ID

Individual ID

Start Time (24 hour clock):

INTRODUCTION

Hello. My name is [Name] and I am part of a team from [APHRC] that is trying to understand the different forms of violence that occur in this community. We would like to ask you a number of questions on this issue, hoping that it will improve understanding of how to tackle problems associated with violence in slum communities, and of how to improve access to services for women that need them.

The risk associated with participating in this brief interview is minimal. Some of the questions we will be asking might be considered as sensitive issues affecting women in this community or you as an individual. Your decision to participate in this brief interview is completely voluntary. We will also refer you to a source of information on free services if you have further questions or if you are experiencing any problems relating to the issues we will be discussing. Remember, all the information you provide during the interview is strictly confidential. At a later stage, we also would like to recruit a few people to participate in a study that will give us a deeper understanding of what women and girls in [Name of Community] are experiencing with violence in this community.

SCREENING QUESTIONS [WOMEN AGED 15-49 YEARS]

1. a) How old are you? _____

Age in years:

b) Date of birth

Day: Month: Year:

[If below 15 years, terminate discussion, thanking the potential participant and explaining why the screening process cannot continue].

2. What is your ethnic group? _____

3. Would you be willing to participate in the interview?

Yes = 01, No = 02, 96=Other (Specify)

BACKGROUND INFORMATION

4. What is your religion? _____

5. Who is your household head? _____

6. What is his/her occupation? _____

7. What is your occupation? _____

8. What is your monthly household income? _____

9. What is the highest level of education you have attained? _____

10. When did you move into this community?

Month Year

[IF BORN AND ALWAYS LIVED IN KOROGOCHO, CODE 99 IN MONTH AND 9999 IN THE YEAR]

11. Where did you live before you moved into this community? _____

MARITAL HISTORY

12. What is your marital status? [01=Married, 02=Live-in partner, 03=Never Married, 04=Divorced, 05=Separated, 06=Widowed] ☐☐

IF NOT MARRIED, SKIP TO 18

13. [If married]: Do you have any co-wives? Yes = 01, No = 02 ☐☐
(If yes, record the number :) _____

14. [If ever married] How many times have you been married? _____

15. Would you describe your current marriage as arranged/a love marriage/both/other (specify) _____?

16. a) Have you been residing in this community since your marriage? Y= 01, N=02 ☐☐

b) [If NO]: Where were you staying earlier? _____

17. Who were you living with before you got married? _____

Warm Up

18. a) Are you aware of problems with the safety and security of women and girls in this community? [Ask for 2 examples] _____

b) Women and girls also go through violence in various forms. Do you know some of these forms of violence against women and girls?

Structural Violence

Because violence is so common in many women's lives and because we want to try and ensure there is help available for women experiencing violence, I would like to ask you and several other women in this community about violence:

19. What forms of violence exist in this community?

	Gang Violence?		Police Violence?		Formal Leaders' Violence on Community Members?		Informal Leaders' Violence on Community Members?		Employers		Neighbours		Men in the public space	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
<i>Tick appropriately</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
rape	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
assault	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
murder	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
groping/touching	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
verbal abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
acid	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
abduction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
forced marriage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
forced labor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
confinement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
sexual abuse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

20. We've now talked about several different kinds of violence in this community. In what ways have you personally been affected by any of these forms of violence you have mentioned so far? _____

21. Have you ever witnessed any form of gang violence in your community? **Y=01, N=02, [If No, skip to 25]** ☐☐

22. Which gang was involved? _____

23. Briefly describe what happened:

24. Have you ever been injured because of gang violence? **Y=01, N=02** ☐☐

25. Have you ever been in a gang? **Y=01, N=02 [If No, skip to 27]** ☐☐

26. Which gang? _____

27. Have you ever beat up someone else, because of a feud? **Y=01, N=02** ☐☐

- a) Who was it? _____
- b) Was the person male or female? _____
- c) What happened? _____

28. You have provided important information about issues in this community and some of your own experiences as a woman in this neighborhood. Now, if you were asked to list the reasons behind/causes of general violence in [**Korogocho**], what would those reasons/causes be? (**Do not read out the options**)

Tick all the relevant boxes:

- a) no jobs ☐
- b) lawlessness ☐
- c) police corruption ☐
- d) drugs being sold ☐
- e) alcohol being sold ☐
- f) leaders involved in crime ☐
- g) gang leaders and gang crime ☐
- h) political problems ☐
- i) rent/debt issues ☐
- j) other (specify) _____ ☐
- k) Don't Know ☐
- l) No answer ☐

Physical Violence

When people are related by blood or by marriage (whether they be spouses, in-laws, siblings, etc) and live in the same household, they usually share both good and bad moments. I would now like to ask you some questions about your current and past relationships and how you feel you are/have been treated by your husband/partner/boyfriend and/or household members. If anyone interrupts us, I will change the topic of conversation. I would again like to assure you that your answers will be kept secret, and that you do not have to answer any questions that you do not want to. May I continue? **Y=01, N=02 [If NO, skip to 46]** ☐☐

29. [**Check Question 12. If not married, ask**]: Have you ever had a boyfriend? **Y=01, N=02**
[**If NO, skip to 46**] ☐☐

30. I am now going to ask you about some situations that are true for many women. Thinking about your (current or most recent) husband/partner/boyfriend, would you say it is generally true that he: (**Y=01, N=02, No Answer=98, Don't Know=99**)

- a) Tries to keep you from seeing your friends? ☐☐
- b) Tries to restrict contact with your family of birth? ☐☐
- c) Insists on knowing where you are at all times? ☐☐
- d) Ignores you and treats you indifferently? ☐☐
- e) Gets angry if you speak with another man? ☐☐
- f) Is often suspicious that you are unfaithful? ☐☐
- g) Expects you to ask his permission before seeking health
Care for yourself? ☐☐

31. The next questions are about things that happen to many women, and that your husband/partner/boyfriend may have done to you. Has your husband/partner/boyfriend ever....

(Y = 01, N = 02, No answer = 98, don't know = 99)

- a) Insulted you or made you feel bad about yourself?

(Y = 01, N = 02, No answer = 98, Don't know = 99)

☐☐

i. If yes, what exactly did he say? _____

ii. Please list the local term(s) used in verbal insult _____

- b) Belittled or humiliated you in front of other people?

(Y = 01, N = 02, No answer = 98, Don't know = 99)

☐☐

- c) done things to scare or intimidate you on purpose (e.g. by the way he looked at you, by yelling and smashing things)?

(Y = 01, N = 02, No answer = 98, Don't know = 99)

☐☐

- d) Threatened to hurt you or someone you care about?

(Y = 01, N = 02, No answer = 98, Don't know = 99)

☐☐

32. Has your husband/partner/boyfriend ever ...

(Y = 01, N = 02, No answer = 98, Don't know = 99)

☐☐

- a) Slapped you or thrown something at you that could hurt you?
- b) Pushed you or shoved you or pulled your hair?
- c) Hit you with his fist or with something else that could hurt you?
- d) Kicked you, dragged you, or beat you up?
- e) Choked or burnt you on purpose?
- f) Threatened to use or actually used a gun, knife or other weapon against you?

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33. How often does he do this to you? (**once a day = 01, once a week = 02, monthly = 03, rarely = 04, No answer = 98, Don't know = 99**)

☐☐

34. Have you ever been pregnant? Yes = 01, No = 02 [**If NO, skip to 36**]

☐☐

35. Was there ever a time when you were slapped, hit, or beaten by (any of) your husband/partner/boyfriend(s) while you were still pregnant?

[Yes = 01, No = 02, No answer = 98]

☐☐

36. During the times that you were verbally abused by your husband/partner/boyfriend, did you ever verbally abuse him? **Yes = 01, No = 02, No answer = 98** ☐☐

37. During the times that you were verbally abused by your husband/partner/boyfriend, did you ever fight back physically or try to defend yourself? **Yes = 01, No = 02, No answer = 98**

38. During the times that you were hit by your husband/[partner/boyfriend, did you try to insult him? **Yes = 01, No = 02, No answer = 98**

39. During the times that you were hit by your husband/partner/boyfriend did you try to fight back?
Yes = 01, No = 02, No answer = 98 □□

40. Did you seek help/support concerning [name the type of emotional abuse or violence described in Q 30, 31 or 32]? Yes = 01, No = 02, No answer = 98 ☐☐

- a) Legal Aid organization
- b) Police
- c) Community leaders in slums
- d) CBOs/NGOs (specify)
- e) Religious leader
- f) Church/religious organization (specify) _____
- g) Health providers
- h) Landlady or landlord
- i) Women in the community
- j) Mother
- k) Father
- l) Mother-in-law
- m) Father-in-law
- n) Neighbors
- o) Husband/partner/boyfriend
- p) Husband/partner/boyfriend's friends
- q) Other (specify) _____

11

6

- [illegible]

11

- 11

[illegible]

7

- a) What kinds of things does he say?
- b) What kinds of things does he do?

48. I am now going to ask you about some situations that are true for many women living in extended households. Thinking about your household, would you say it is generally true that any of your household members (apart from your husband/partner/boyfriend) do the following, and if so, who?

[Prompt for the specific household member for each option]

(Y = 01, N = 02, No answer = 98, Don't know = 99)

- | | | [Whom?] |
|---|---|---------|
| a) Tries to keep you from seeing your friends? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| b) Tries to restrict contact with your family of birth? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| c) Insists on knowing where you are at all times? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| d) Ignores you and treats you indifferently? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| e) Is often suspicious that you are unfaithful? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| f) Expects you to ask his permission before seeking health care for yourself? | <input type="checkbox"/> <input type="checkbox"/> | _____ |

49. The next questions are about things that happen to many women, and that your household members (apart from your husband/partner/boyfriend) may have done to you. Have any of your household members ever....

[Prompt for the specific household member for each option]

(Y = 01, N = 02, No answer = 98, Don't know = 99)

[Whom?]

- | | | |
|--|---|-------|
| a) Insulted you or made you feel bad about yourself? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| i. If yes, what exactly did the person say? | | _____ |
| ii. Please list the local term(s) used in verbal insult: | | _____ |
| b) Belittled or humiliated you in front of other people? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| c) done things to scare or intimidate you on purpose (e.g. by the way they looked at you, by yelling and smashing things)? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| d) Threatened to hurt you or someone you care about? | <input type="checkbox"/> <input type="checkbox"/> | _____ |

50. Have any of your household members (apart from your husband/partner/boyfriend) ever ...

[Prompt for the specific household member for each option]

(Y = 01, N = 02, No answer = 98, Don't know = 99)

[Whom?]

- | | | |
|--|---|-------|
| a) Slapped you or thrown something at you that could hurt you? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| b) Pushed you or shoved you or pulled your hair? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| c) Hit you with their fist or with something else that could hurt you? | <input type="checkbox"/> <input type="checkbox"/> | _____ |
| d) Kicked you, dragged you, or beat you up? | <input type="checkbox"/> <input type="checkbox"/> | _____ |

- e) Choked or burnt you on purpose? ☐☐ _____
- f) Threatened to use or actually used a gun, knife? or other weapon against you? ☐☐ _____

If answered yes to any of Q 49-50, go to Q 51. If No, skip to Q55

51. During the times that you were verbally abused by any of the household members you've mentioned (apart from your husband/partner/boyfriend), did you ever insult him/her back?
Yes = 01, No = 02, No answer = 98, don't know = 99. ☐☐
52. During the times that you were verbally abused by any of the household members you've mentioned (apart from your husband/partner/boyfriend), did you ever fight him/her?
Yes = 01, No = 02, No answer = 98, don't know = 99. ☐☐
53. During the times that you were hit by any of the household members you've mentioned (apart from your husband/partner/boyfriend), did you ever insult him/her?
Yes = 01, No = 02, No answer = 98, don't know = 99. ☐☐
54. During the times that you were hit by any of the household members you've mentioned (apart from your husband/partner/boyfriend), did you ever fight him/her back or try to defend yourself?
Yes = 01, No = 02, No answer = 98, don't know = 99. ☐☐
55. Have you ever hit or physically mistreated any of your household members (apart from your husband/partner/boyfriend)?
(Yes = 01, No = 02, No answer = 98, don't know = 99) ☐☐
- a) If yes, how often does this happen and why? _____
- b) Has this ever occurred when they were not hitting or physically mistreating you?
(Yes = 01, No = 02, No answer = 98, don't know = 99) ☐☐
56. You have provided a lot of important information about your experiences, and it has really helped me understand the kinds of issues women face in this community. Now, if you were asked to list the reasons behind/causes of violence against women by their household members (apart from husbands/partners/boyfriends) in this community, what would those reasons be?
(Do not read out the options) **Tick all relevant boxes**
- | | |
|---|--------------------------|
| a) dowry/bride price | <input type="checkbox"/> |
| b) unemployment | <input type="checkbox"/> |
| c) poverty | <input type="checkbox"/> |
| d) husband drug/alcohol problems | <input type="checkbox"/> |
| e) pregnancy | <input type="checkbox"/> |
| f) no power (victim's own power) in the household | <input type="checkbox"/> |
| g) other (specify) _____ | <input type="checkbox"/> |
| h) Don't Know | <input type="checkbox"/> |
| i) No answer | <input type="checkbox"/> |

In their lives, many women experience forms of violence from other people that they know (besides relatives) and/or from strangers. If you don't mind, I would like to briefly ask you about some of these situations. Everything we say will be kept private. May I continue? (Yes = 01, No = 02) **[If no, skip to 63]** ☐☐

57. Since the age of 12, has any non-relative ever beaten or physically mistreated you in any way? (Yes = 01, No = 02, No answer = 98, don't know = 99) **[If No, skip to 63]** ☐☐

[IF YES:] I don't want to know their name, but how do you know the person who did this to you? Who did this to you? (PROBE)

- a) Teacher
- b) police/soldier
- c) male friend of family
- d) female friend of family
- e) landlord or landlady
- f) stranger
- g) someone at work
- h) pastor/priest/religious leader
- i) other (specify): _____
- j) No answer
- k) Don't Know

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58. Was this an isolated event or a regular occurrence? _____

59. I've asked you a lot of questions about whether you have experienced being harmed physically by others (apart from your husband/partner/boyfriend). Now, I would like to ask, during any of the times that you were physically mistreated by others, did you ever talk to someone about the abuse? Yes = 01, No = 02, no answer = 98, don't know = 99 **[If no, go to Q62]** ☐☐

60. Whom did you talk to about the abuse? **[Probe]**

Tick all relevant boxes:

Within family:

- a) Husband/partner
- b) Mother
- c) Father
- d) Mother-in-law
- e) Father-in-law
- f) Other relatives
- g) Husband/partner/boyfriend's friends

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Outside family:

- h) Boyfriend
- i) Female friend
- j) Male friend
- k) Neighbors
- l) Legal Aid organization
- m) Police
- n) Community leader in slums
- o) CBOs/NGOs (specify) _____
- p) Religious leader
- q) Church/religious organization (specify) _____
- r) Doctor/Health care provider
- s) Landlady or landlord
- t) Women in the community
- u) Other (specify) _____

<input type="checkbox"/>
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<input type="checkbox"/>
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<input type="checkbox"/>
<input type="checkbox"/>

61. Where or from whom did you seek support to stop the violence/abuse? **[Probe]**

Tick all relevant boxes:

Within family:

- a) Husband/partner
- b) Mother
- c) Father
- d) Mother-in-law
- e) Father-in-law
- f) Other relatives
- g) Husband/partner/boyfriend's friends

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
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<input type="checkbox"/>
<input type="checkbox"/>

Outside family:

- h) Boyfriend
- i) Female friend
- j) Male friend
- k) Neighbors
- l) Legal Aid organization
- m) Police
- n) Community leader in slums
- o) CBOs/NGOs (specify) _____
- p) Religious leader
- q) Church/religious organization (specify) _____
- r) Doctor/Health care provider
- s) Landlady or landlord
- t) Women in the community

<input type="checkbox"/>
<input type="checkbox"/>
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<input type="checkbox"/>

u) Other (specify) _____

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62. If you did not seek support from anyone or anywhere, please explain why:

63. You have provided a lot of important information about your experiences, and it has really helped me understand the kinds of issues women face in this community. Now, if you were asked to list the reasons behind/causes of violence against women, apart from violence from family, husbands/partners/boyfriends, in this community, what would those reasons be?

- a) dowry/bride price
- b) unemployment
- c) poverty
- d) drug/alcohol problems
- e) pregnancy
- f) no power (victim's own power) in the household
- g) politics
- h) crime
- i) other (specify) _____
- j) Don't Know
- k) No answer

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Again, we are talking about things that happen to many women, and that may have happened to you. What we will talk about will be kept secret. Can we continue?

Yes = 01, No = 02 [If no, skip to Q67.]

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[Check Question 29. If never had a boyfriend, skip to Question 67]

64. Did your current husband/partner/boyfriend or any other partner ever physically force you to have sexual intercourse when you did not want to?

(Yes = 01, No = 02, No answer = 98, Don't know = 99)

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65. Did you ever have sexual intercourse when you did not want to because you were afraid of what your husband/partner/boyfriend or any other partner might do?

(Yes = 01, No = 02, No answer = 98, Don't know = 99)

☐☐

66. Since the age of 15, has anyone [FOR WOMEN WITH CURRENT OR PAST PARTNER]: other than your partner/husband/boyfriend) ever forced you to have sex or to perform a sexual act when you did not want to?

(Yes = 01, No = 02, No answer = 98, Don't know = 99)

☐☐

IF YES: Who did this to you? **Without mentioning names, who did this to you?**
[Probe]

- a) Father
- b) step-father

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☐

- c) other male family member (specify) _____ ☐
- d) female family member (specify) _____ ☐
- e) male teacher ☐
- f) female teacher ☐
- g) police/soldier ☐
- h) male friend of family ☐
- i) female friend of family ☐
- j) leader in slum ☐
- k) gang members ☐
- l) stranger ☐
- m) someone at work ☐
- n) pastor/priest/religious leader ☐
- o) other (specify): _____ ☐

67. Here is a card with two faces; one showing a sad person and the other showing a happy person. I am going to ask you a question and I will ask you to answer by ticking the relevant box. Once you do that, you can fold the card and put in into this envelope and I assure you that I will not have a look at what you have marked.

The question is:

Has anyone ever forced you to have sexual intercourse with them when you didn't want to, either by threatening you or by using excessive force? Please tick the box with the sad face to agree or with the happy face to disagree.

SELF-DIRECTED VIOLENCE

Sometimes, people do or think about things that can hurt them. I would like to ask you about some of these things. Whatever we discuss will be kept secret. Can we continue?

(Yes = 01, No = 02) [If No skip to 69] ☐☐

68. Have you ever attempted suicide?
(Yes = 01, No = 02, No answer = 98, Don't know = 99) ☐☐

69. Have you ever done anything else to deliberately hurt or injure yourself?
(Yes = 01, No = 02, No answer = 98, Don't know = 99) ☐☐

SERVICES

70. You've told me about a number of problems that people face in this community, and that you have faced personally. Thinking of the different issues we've discussed, what form of protection or types of services are available for providing support to people in this community who experience these sorts of problems? (Do not read out the options.)

Tick all relevant boxes:

- a) health centers (specify) _____ ☐
- [Please name up to 5] _____ ☐
- b) CBOs/NGOs (specify) _____ ☐
- c) police protection ☐

- d) community leaders' protection
- e) protection from relatives
- f) Protection from the community
- g) other (specify) _____

☐
☐
☐
☐

71. Would you like us to refer you to a place in your community where you can be helped with some of the issues we discussed for free?

Yes = 01, No = 02 [If Yes, provide referral]

☐☐

CONCLUSION

Thank you very much for talking with me today. I have learned a lot from you. I might be back one more time to have a further discussion with you on these issues.

No one should experience any type of violence including emotional violence. **[Inform the respondent of her rights under the law].**

The aim of this study is to prevent violence against women and men and provide support services for people who have gone through violence in this community in future.

Would you be willing to participate in a more in-depth discussion on your personal experiences?
(Yes = 01, No= 02)

☐☐

Thanks so much once again.

Endtime

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