

URBANIZATION, POVERTY AND HEALTH DYNAMICS IN SUB-SAHARAN AFRICA

Transitions to Adulthood Questionnaire

Round 3: March 2010-May 2010

1.0 IDENTIFICATION INFORMATION and CONSENT

1.1 FIELD WORKER'S CODE

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1.2 DATE OF INTERVIEW (DD/MM/YYYY)

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1.3 RESPONDENT'S ID

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1.4a RESPONDENT'S DATE OF BIRTH (DD/MM/YYYY)

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1.4b RESPONDENT'S CURRENT AGE (AT DATE OF INTERVIEW) IN YEARS

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1.4c RESPONDENT'S AGE AT FIRST INTERVIEW

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1.5 RESPONDENT'S SEX (1=Male; 2=Female)

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1.6 RESPONDENT'S FULL NAME

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1.7 LOCATION ID (OF HHH)

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1.8 DATE OF FIRST (NOT INTERVIEWED IN WAVE 2) OR
SECOND (INTERVIEWED IN WAVE 2) INTERVIEW

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1.9 FINAL RESULT OF INTERVIEW

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FINAL RESULT CODE

1=COMPLETED

5=WHEREABOUTS UNKNOWN

2=NO COMPETENT RESPONDENT AT HOME

6=PARENT/GUARDIAN REFUSED

3=ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD

7=DEAD

4=REFUSED

8=OTHER (SPECIFY) _____

9=INCAPACITATED

OFFICE/FIELD CHECK DETAILS

1.10 FIELD SUPERVISOR'S/TEAM LEADER'S CODE

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1.11 DATA ENTRY CLERK'S CODE

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URBANIZATION, POVERTY AND HEALTH DYNAMICS IN SUB-SAHARAN AFRICA**Transitions to Adulthood Questionnaire****PARENTAL/GUARDIAN CONSENT FORM (ONLY FOR RESPONDENTS AGED 12-17 YEARS)**

Hello, my name is _____ and I work with the African Population and Health Research Center. We are conducting a survey to understand what happens as young people grow up in informal settlements and what their aspirations and concerns are as they grow into adulthood. We visited a while back in 2007/2008 and we asked your daughter/son a few questions. We would like to again ask [CHILD'S NAME] questions about her/his schooling, relationships, reproductive health, and other issues that s/he experiences as s/he grows up. The results of this study will be presented to institutions, including the government, that are involved in decision-making and provision of services targeted at younger people with the intention that they will use the information to improve the wellbeing of the youth. All the information provided by [CHILD'S NAME] will be confidential and will be used for the purposes of this study only. This interview is not expected to cause your child any harm or discomfort. However, if your child feels uncomfortable with certain questions s/he can choose not to answer them. We, however, hope [CHILD'S NAME] will participate in this survey since his/her views are very important. This interview will take about 1.5 hours of your child's time.

2.1 May [CHILD'S NAME] participate in the study?

(1=YES; 2=NO; IF 1 SKIP TO 2.3)

☐

2.2 IF THE PARENT/GUARDIAN DOES NOT ALLOW CHILD TO BE INTERVIEWED, ASK: To help better inform our work in the future, could you please tell me the main reason why you do not want [CHILD'S NAME] to participate in this study? _____

(FW: IF REASON IS RELATED TO TIME BEING INCONVENIENT FOR RESPONDENT, PLEASE MAKE APPOINTMENT TO COME BACK AND DO THE INTERVIEW).

OTHERWISE THANK PARENT FOR HIS/HER TIME AND END THE INTERVIEW AND RECORD THE FINAL STATUS ON THE COVER SHEET .

2.3 IF THE PARENT/GUARDIAN ALLOWS CHILD TO BE INTERVIEWED: Thank you for letting [CHILD'S NAME] participate in our study. Could you please sign here to show that you have accepted to participate in the study.

Respondent's Signature.....

0= REFUSES TO SIGN

1= SIGNS

2= WILLING BUT UNABLE TO SIGN

☐**CHECK APPROPRIATE BOX BELOW**

2.4 PARENT/GUARDIAN AGREES MINOR CAN BE INTERVIEWED

☐

↓
APPROACH ELIGIBLE MINOR
FOR INFORMED CONSENT

PARENT/GUARDIAN DOES NOT AGREE MINOR CAN BE INTERVIEWED

☐

↓
END INTERVIEW

URBANIZATION, POVERTY AND HEALTH DYNAMICS IN SUB-SAHARAN AFRICA

Transitions to Adulthood Questionnaire

RESPONDENT'S INTRODUCTION AND CONSENT (FOR ALL RESPONDENTS)

Hello, my name is _____ and I work with the African Population and Health Research Center.

We are conducting a survey to understand what happens as young people grow up in informal settlements and what their aspirations and concerns are as they grow into adulthood. We last visited you between October 2007 and May 2008 when we asked you some questions. I would again like to ask you questions about your schooling, relationships, reproductive health, and other issues that you experience as you grow up.

The results of this study will be presented to institutions, including the government, that are involved in decision making and provision of services targeted at younger people with the intention that they will use the information to improve the wellbeing of the youth. All the responses you provide are confidential and will be used for the purposes of this study only. This interview is not expected to cause you any harm or discomfort. However, if you feel uncomfortable with certain questions you can choose not to answer them. We, however, hope you will participate in this survey since your views are very important. This interview will take about 1.5 hours of your time.

3.1 Do you accept to participate in the study?

(1=YES; 2=NO; IF 1 SKIP TO 3.3)

☐

3.2 IF THE RESPONDENT DOES NOT ACCEPT TO BE INTERVIEWED ASK: To help better inform our work in the future, could you please tell me the main reason why you do not want to participate in this study?

(FW: IF REASON IS RELATED TO TIME BEING INCONVENIENT FOR RESPONDENT, PLEASE MAKE APPOINTMENT TO COME BACK AND DO THE INTERVIEW).

OTHERWISE THANK RESPONDENT FOR HIS/HER TIME AND END THE INTERVIEW AND RECORD THE FINAL STATUS OF THE INTERVIEW ON THE COVER SHEET

3.3 IF THE RESPONDENT ACCEPTS TO BE INTERVIEWED: Thank you for agreeing to participate in our study. Could you please sign here to show that you have accepted to participate in the study.

Respondent's Signature.....

0= REFUSES TO SIGN

1= SIGNS

2= WILLING BUT UNABLE TO SIGN

☐

3.4 We would also like to ask your permission to possibly contact you again for future research participation. Can we contact you again in future?

(1=YES; 2=NO; IF 2 SKIP TO Q101)


☐

3.5 Kindly provide us with a phone number where we can reach you

SECTION 1: SOCIODEMOGRAPHIC CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	RECORD THE START TIME (24 HR-FORMAT)	<div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div>	
101a	<p>Whom do you live with?</p> <p>PROBE TO FIND OUT WHETHER THE RESPONDENT LIVES WITH A PARENT OR GUARDIAN</p> <p>PROBE: IF LIVING WITH GUARDIAN; ASK: Are you related?</p>	<p>MOTHER01</p> <p>FATHER02</p> <p>BOTH PARENTS03</p> <p>RELATED GUARDIAN04</p> <p>NON-RELATED GUARDIAN05</p> <p>WITH FRIENDS06</p> <p>ALONE07</p> <p>SPOUSE08</p> <p>OTHERS96</p> <p style="text-align: center;">(SPECIFY)</p>	
102	<p>How many people usually live with you in your residence or household?</p> <p>[IF RESPONDENT LIVES ALONE RECORD 00]</p>	<div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div>	
103	<p>INDEPENDENT HOUSING</p> <p>INDEPENDENT HOUSING AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 106]</p> <p>Since our last visit on (DATE IN Q1.8), have you owned/rented your own residence such as a structure or house??</p>	<div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; background-color: #cccccc; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div>	→ 106
104	<p>In what month and year did you first own or rent your own house?</p>	<p>MONTH <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div><div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div></p> <p>DON'T KNOW MONTH 98</p> <p>YEAR <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div><div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div><div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div><div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div></p> <p>DON'T KNOW YEAR 9998</p>	
105	<p>How old were you when you first owned or started renting your own house?</p>	<p>AGE IN YEARS <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; margin-right: 5px;"></div><div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div></p> <p>DON'T KNOW 98</p>	
106	<p>IF RESPONDENT HAS NEVER RENTED/OWNED A HOUSE INDICATE SO IN THE CALENDAR</p> <p>INTERVIEWER INSTRUCTION: SO, WE'VE TOUCHED ON THE ISSUE OF HOUSING A LITTLE BIT. NOW, I WOULD LIKE TO GET MORE DETAILS. GO TO CALENDAR!</p>		
107	<p>SCHOOLING</p> <p>The next set of questions I would like to ask have to do with schooling.</p> <p>EVER ATTENDED SCHOOL AS OF SURVEY 1 OR 2 [IF 1 SKIP TO 110]</p> <p>Since our last visit on (DATE IN Q1.8), have you been enrolled in school? By this I mean formal school. (PRIMARY, SECONDARY, TERTIARY SCHOOL)</p>	<div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px; background-color: #cccccc; margin-right: 5px;"></div> <div style="border: 1px solid black; display: inline-block; width: 40px; height: 20px;"></div>	→ 113

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES							SKIP
112b	[FW: FOR Q112b & q112e: ASK IN PAST TENSE IF INDIVIDUAL IS NO LONGER IN SCHOOL]								
	Think about how you are/were doing in school. How important is/was to you to (READ STATEMENT)	Very Important		Pretty Important		Not Too Important		Not Important At All	
	1. Be considered a bright student by your teachers?	1	2	3	4				
	2. Come out near the top of your exams?	1	2	3	4				
	3. Have good enough grades to get into secondary school/college?	1	2	3	4				
112c	Would you say you (READ CHOICES) That (READ STATEMENT)?	Strongly Agree	Somewhat Agree	Neither Disagree nor Agree		Somewhat Disagree	Strongly Disagree		
	a. In general you like/liked school	1	2	3		4	5		
	b. You get/got along well with your teachers	1	2	3		4	5		
	c. You try/tried your best in school	1	2	3		4	5		
	d. Doing well in school is/was important for your future	1	2	3		4	5		
112d	Here are some things children have said about their school would you say you: (READ CHOICES) That (READ STATEMENT)?	Strongly Agree	Somewhat Agree	Neither Disagree nor Agree		Somewhat Disagree	Strongly Disagree		
	a. You can/could do almost anything without being punished	1	2	3		4	5		
	b. Fighting between students is/was a big problem	1	2	3		4	5		
	c. The teachers in my school spend/spent extra time to help pupils/students do their best	1	2	3		4	5		
	d. In my school most students respect/respected their teachers	1	2	3		4	5		
	e. My teachers don't/didn't understand that I have/had a lot of responsibilities at home	1	2	3		4	5		
	f. I worry/worried about getting harassed by fellow pupils at school	1	2	3		4	5		
	g. Drinking and drug use is/was a problem at my school	1	2	3		4	5		
	h. Most students at my school don't/didn't care about learning or getting good marks	1	2	3		4	5		
	i. Teachers in my school try/tried to have sex with pupils and sometimes have/had sex with them	1	2	3		4	5		
112e	How many of your friends: (READ STATEMENT)? Would you say: (READ CHOICES)	None of them	Some of them	Most of them	All of them	DK	NA		
	a. Get/got good marks in school?	1	2	3	4	8	9		
	b. Want/wanted to go secondary school/university/college?	1	2	3	4	8	9		
	c. Attended religious services regularly?	1	2	3	4	8	9		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKIP
113	<p>IF RESPONDENT HAS NEVER ATTENDED SCHOOL (Q107) INDICATE SO ON THE CALENDAR</p> <p>INTERVIEWER INSTRUCTION: SO, WE'VE TOUCHED ON SCHOOLING A LITTLE BIT. NOW, I WOULD LIKE TO GET MORE DETAILS. GO TO CALENDAR!</p>						
121	<p>PEER INFLUENCES</p> <p>How many of your friends do/did the following: (READ STATEMENT)? Would you say (READ CHOICES)</p> <p>a. Drink alcohol</p> <p>b. Run away from home</p> <p>c. Get into trouble with the police</p> <p>d. Have sexual intercourse</p> <p>e. Get/Got into trouble at school (e.g. disciplinary action, get into fights, etc.)</p> <p>f. Use drugs like bhang, khat, glue</p>	None of them	Some of them	Most of them	All of them	DK	
		1	2	3	4	8	
		1	2	3	4	8	
		1	2	3	4	8	
		1	2	3	4	8	
		1	2	3	4	8	
		1	2	3	4	8	
122	<p>LIVELIHOODS AND EMPLOYMENT</p> <p>EVER BEEN INVOLVED IN ANY INCOME GENERATING ACTIVITY AS OF SURVEY 2</p> <p>[IF 1 SKIP TO 124]</p> <p>INTERVIEWED IN WAVE 2: Since our last visit on (DATE IN Q1.8), have you been involved in an income generating activity</p> <p>NOT INTERVIEWED IN WAVE 2: Have you ever been involved in an income generating activity?</p>	<div style="text-align: right;">  </div> <p>YES 1</p> <p>NO 2</p>					→ 127a
123	In what month and year did you first engage in any income generating activity?	<p>MONTH <div style="display: inline-block; width: 40px; height: 20px; border: 1px solid black; vertical-align: middle;"></div></p> <p>DON'T KNOW MONTH 98</p> <p>YEAR <div style="display: inline-block; width: 80px; height: 20px; border: 1px solid black; vertical-align: middle;"></div></p> <p>DON'T KNOW YEAR 9998</p>					
124	Did you engage in any income generating activity in the last month?	<p>YES 1</p> <p>NO 2</p>					→ 127a
125	<p>What activity have you been engaged in during the last month?</p> <p>RECORD RESPONSE</p> <p>.....</p> <p>.....</p>	<p>UNESTABLISHED OWN BUSINESS01</p> <p>ESTABLISHED OWN BUSINESS 02</p> <p>INFORMAL CASUAL03</p> <p>INFORMAL SALARIED04</p> <p>FORMAL SALARIED05</p> <p>FORMAL CASUAL06</p> <p>RURAL AGRICULTURE07</p> <p>URBAN AGRICULTURE08</p> <p>OTHERS 96</p> <p style="text-align: center;">[SPECIFY]</p>					

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																										
125a	On average, how many days did you work each week in the last month?	<div style="text-align: right;"> <input type="text"/> <input type="text"/> </div> DON'T KNOW 98																											
125b	On average, how many hours per day did you do this activity?	<div style="text-align: right;"> <input type="text"/> <input type="text"/> </div> DON'T KNOW98																											
126	Approximately how much money have you made in the last month?	KSHS <div style="text-align: right;"> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> </div> PAID IN KIND99995 REFUSED TO ANSWER99997 DON'T KNOW99998	→ 127a																										
127	What did you use the money for? MULTIPLE RESPONSES ALLOWED	TO SUPPORT MY FAMILY A TO PAY RENT B TO BUY CIGARETTES C TO PAY SCHOOL FEES D TO BUY ALCOHOL E TO BUY FOOD F TO BUY CLOTHES G SAVINGS H OTHER X																											
127a	IF RESPONDENT HAS NEVER BEEN IN EMPLOYMENT (Q122) INDICATE SO ON THE CALENDAR INTERVIEWER INSTRUCTION: SO, WE'VE TOUCHED ON EMPLOYMENT A LITTLE BIT. NOW, I WOULD LIKE TO GET MORE DETAILS. GO TO CALENDAR!																												
128	Now I am going to read several statements that people usually make about the food situation in their houses. Please tell me whether each of these statements was often true, sometimes true, or never true [READ STATEMENT] would you say this was often true, sometimes true, or never true? a. During the past 30 days the food in your household got finished and you didn't have money to get more. b. During the past 30 days, children in your household failed to eat for a whole day/slept hungry because there wasn't enough money for food c. During the past 30 days, you or other adult(s) in your household failed to eat for a whole day because there wasn't enough food. d. In our household, we always struggle to have enough food	<table border="1"> <thead> <tr> <th></th><th>Often TRUE</th><th>Sometimes TRUE</th><th>Never TRUE</th><th>Refused</th><th>DON'T KNOW</th></tr> </thead> <tbody> <tr> <td>1</td><td>2</td><td>3</td><td>7</td><td>8</td></tr> <tr> <td>1</td><td>2</td><td>3</td><td>7</td><td>8</td></tr> <tr> <td>1</td><td>2</td><td>3</td><td>7</td><td>8</td></tr> <tr> <td>1</td><td>2</td><td>3</td><td>7</td><td>8</td></tr> </tbody> </table>		Often TRUE	Sometimes TRUE	Never TRUE	Refused	DON'T KNOW	1	2	3	7	8	1	2	3	7	8	1	2	3	7	8	1	2	3	7	8	
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129	Do you own a cell phone?	YES 1 NO 2																											



SECTION 2: PARENT-CHILD RELATIONSHIP

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP																																							
201	<p>CHECK 101a IF CURRENTLY LIVING WITH PARENT OR GUARDIAN? (TICK APPROPRIATE BOX)</p> <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="checkbox"/> YES ↓ </div> <div style="text-align: center;"> <input type="checkbox"/> NO </div> </div>					→ 217																																							
204a	<p>I would like to ask you a few questions about the relationship with your parents/guardians and how you get along.</p> <p>(READ STATEMENT) Would you say (READ CHOICES)?</p> <div style="display: flex;"> <div style="flex: 1;"> <p>1 How often do your parents/guardians encourage you to do what you are interested in doing and show an interest in those things themselves?</p> <p>2 How often are your parents interested in what you think and feel?</p> <p>3 How often do your parents try to find activities that you would enjoy doing after school or weekends?</p> <p>4 When you have problems, how often can you talk them over with your parents?</p> </div> <table border="1" style="flex: 1;"> <thead> <tr> <th>Never</th><th>Some times</th><th>Most of the time</th><th>All the time</th></tr> </thead> <tbody> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> </tbody> </table> </div>	Never	Some times	Most of the time	All the time		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4																							
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217	<p>ATTITUDINAL INTOLERANCE OF DEVIANCE</p> <p>How wrong do you think it is to do the following things?</p> <p>How wrong is it (READ STATEMENT) would you say (READ CHOICES)</p> <div style="display: flex;"> <div style="flex: 1;"> <p>a. To cheat on tests or homework?</p> <p>b. To shoplift from a store?</p> <p>c. To damage or mark up public or private property on purpose?</p> <p>d. To lie to a teacher about something you did?</p> <p>e. To take something of value that doesn't belong to you?</p> <p>f. To stay out all night without permission?</p> <p>g. To lie to your parents about where you have been or who you were with?</p> <p>h. To hit another student because you didn't like what he or she did?</p> <p>i. To carry a weapon, like a knife or gun, at school?</p> <p>j. To make fun of or pick on other kids because they are different or not part of your group?</p> </div> <table border="1" style="flex: 1;"> <thead> <tr> <th>Not Wrong</th><th>A little Wrong</th><th>Wrong</th><th>Very Wrong</th></tr> </thead> <tbody> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> <tr><td align="center">1</td><td align="center">2</td><td align="center">3</td><td align="center">4</td></tr> </tbody> </table> </div>	Not Wrong	A little Wrong	Wrong	Very Wrong	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4				
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SECTION 4: DOMESTIC TURBULENCE AND SEXUAL ABUSE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP								
401	<p>IS THERE PRIVACY? [IF THERE IS NO PRIVACY, MOVE AWAY FROM OTHER PEOPLE; ONLY SKIP IF IT IS IMPOSSIBLE TO DO SO] (REMEMBER TO LOWER YOUR VOICE) (TICK APPROPRIATE BOX)</p> <p>NO ONE OVER 3 YEARS PRESENT OR LISTENING <input type="checkbox"/> OTHERS PRESENT OR LISTENING <input type="checkbox"/></p> <p>↓</p>													
						→ 504								
	ASK EACH ITEM ON THE LIST. FOR ANY YES, ASK "At what age did this happen?" How many times has this happened? FOR Q403B, ASK Did you or the other person use a condom?													
403	<p>(REMEMBER TO LOWER YOUR VOICE)</p> <p>Here are some other events that could have happened at any time in your life. Please tell me if any of these things have happened to you since the last time we visited on (DATE IN Q1.8).</p> <p>a. Sometimes people do things to us we do not want. Has anyone ever touched you in an unwanted sexual way, such as kissing, grabbing or fondling?</p>	<p>[GO TO NEXT ITEM IF ANSWER IS NO]</p> <table border="1"> <thead> <tr> <th>Yes/No</th><th>Age when this last happened</th><th>Freq</th><th>Condom use</th></tr> </thead> <tbody> <tr> <td>CIRCLE ONE YES 1 NO 2</td><td><input type="text"/><input type="text"/> Don't know 98</td><td><input type="text"/><input type="text"/></td><td></td></tr> </tbody> </table>				Yes/No	Age when this last happened	Freq	Condom use	CIRCLE ONE YES 1 NO 2	<input type="text"/> <input type="text"/> Don't know 98	<input type="text"/> <input type="text"/>		
Yes/No	Age when this last happened	Freq	Condom use											
CIRCLE ONE YES 1 NO 2	<input type="text"/> <input type="text"/> Don't know 98	<input type="text"/> <input type="text"/>												
	<p>b. Have you ever had sex because someone physically forced, hurt or threatened you into having sexual intercourse?</p>	<p>YES 1 NO 2</p>	<p><input type="text"/><input type="text"/> Don't know 98</p>	<p><input type="text"/><input type="text"/></p>	<p>YES 1 NO 2</p>									
	<p>c. Have you ever been physically forced, hurt, or threatened to have sex but you did not end up actually having sex?</p>	<p>YES 1 NO 2</p>	<p><input type="text"/><input type="text"/> Don't know. 98</p>	<p><input type="text"/><input type="text"/></p>										

SECTION 5: DELINQUENT BEHAVIOR

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
504	<p>I'd like to know how many times you have done any of the following things . Remember, your answers are confidential and no one will know how you answered these questions</p> <p>EVER SMOKED A CIGARETTE AS OF SURVEY 2</p> <p>[IF 1 SKIP TO 506]</p> <p>INTERVIEWED IN WAVE 2: Since our visit in (DATE IN Q1.8), have you smoked a cigarette (not just a few puffs)?</p> <p>NOT INTERVIEWED IN WAVE 2 Have you ever smoked a cigarette (not just a few puffs)?</p>	<div style="text-align: right;">  </div> NO, NEVER 1 YES, BUT ONLY ONCE 2 A FEW TIMES 3 MORE THAN A FEW TIMES 4	→ 509
505	How old were you when you first smoked a cigarette?	AGE IN YEARS <div style="display: inline-block; border: 1px solid black; width: 40px; height: 20px; vertical-align: middle;"></div> DON'T KNOW 98	
506	During the past four months how often did you smoke cigarettes? Would you say [READ THE CHOICES]	NO 1 ONCE OR TWICE 2 A FEW TIMES 3 MORE THAN A FEW TIMES 4	→ 509
507	During the past month, how many cigarettes have you smoked on an average day?	NONE AT ALL 01 LESS THAN ONE CIGARETTE A DAY 02 BETWEEN 1 AND 3 CIGARETTES A DAY 03 BETWEEN 4 AND 8 CIGARETTES A DAY 04 ABOUT HALF A PACK A DAY 05 ABOUT A PACK A DAY 06 ABOUT 1½ PACKS A DAY 07 ABOUT 2 PACKS OR MORE A DAY 08	
508	Are you thinking or planning to quit smoking?	YES 1 NO 2	
509	<p>EVER DRUNK ALCOHOL AS OF SURVEY 2</p> <p>[IF 1 SKIP TO 511]</p> <p>INTERVIEWED IN SURVEY 2 Since our visit in (DATE IN Q1.8), Have you had a drink of beer, wine, changaa, kumi kumi, muratina, busaa etc, more than two or three times in your life? not just a sip or taste of someone else drink?</p> <p>NOT INTERVIEWED IN SURVEY 2 Have you ever had a drink of beer, wine, changaa, kumi kumi, muratina, busaa etc, more than two or three times in your life? not just a sip or taste of someone else drink?</p>	<div style="text-align: right;">  </div> YES 1 NO 2	→ 515
510	How old were you when you first drank beer, wine, changaa, kumi kumi, muratina or busaa?	AGE IN YEARS <div style="display: inline-block; border: 1px solid black; width: 40px; height: 20px; vertical-align: middle;"></div> DON'T KNOW 98	
511	During the past four months how often did you drink alcohol? Would you say [READ THE CHOICES]	NOT AT ALL 01 ONCE OR TWICE IN THE PAST 4 MONTHS 02 ABOUT ONCE A MONTH 03 TWO OR THREE DAYS A MONTH 04 ONCE A WEEK 05 TWO OR THREE DAYS A WEEK 06 FOUR OR FIVE DAYS A WEEK 07 EVERY DAY 09	→ 515

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKIP																					
512	Over the past four months how many times did you drink four or more drinks of beer, wine, changaa, kumi kumi, muratina or busaa at one time or on the same occasion? Would you say [READ THE CHOICES]	NEVER01 ONCE02 2-3 TIMES03 ONCE A MONTH04 2 or 3 DAYS A MONTH05 ONCE A WEEK06 TWICE A WEEK07 MORE THAN TWICE A WEEK08																										
513	How often have you gotten drunk or very high from drinking alcohol in the last four months? Would you say [READ THE CHOICES]	NEVER01 ONCE02 2-3 TIMES03 4-5 TIMES04 ONCE A MONTH05 2 or 3 DAYS A MONTH06 ONCE A WEEK07 TWICE A WEEK08 MORE THAN TWICE A WEEK09																										
514	Are you thinking or planning to quit drinking alcohol?	YES1 NO2																										
515	In the past six months , how much stress or pressure have you felt, like not being able to meet all the demands on you or not being able to get everything done that you needed to? (READ STATEMENT) Would you say (READ CHOICES) (CHECK Q110 IF NOT IN SCHOOL CIRCLE '9' FOR 515a) a. At school? b. At home? c. In your personal social life?	<table border="1"> <thead> <tr> <th></th> <th>A Lot</th> <th>A Fair Amount</th> <th>Only a Little</th> <th>None at All</th> <th>NA</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>9</td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>9</td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>9</td> </tr> </tbody> </table>						A Lot	A Fair Amount	Only a Little	None at All	NA	1	2	3	4	9	1	2	3	4	9	1	2	3	4	9	
	A Lot	A Fair Amount	Only a Little	None at All	NA																							
1	2	3	4	9																								
1	2	3	4	9																								
1	2	3	4	9																								
516	I would like to know how you have been feeling in the past six months. In the past six months have you: (READ STATEMENT) Would you say (READ CHOICES) a. Just really felt down about things? b. Felt pretty hopeless about the future? c. Just felt depressed about life in general?	<table border="1"> <thead> <tr> <th></th> <th>A Lot</th> <th>A Fair Amount</th> <th>Only a Little</th> <th>None at All</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> </tbody> </table>						A Lot	A Fair Amount	Only a Little	None at All	1	2	3	4	1	2	3	4	1	2	3	4					
	A Lot	A Fair Amount	Only a Little	None at All																								
1	2	3	4																									
1	2	3	4																									
1	2	3	4																									
517	During the past year, have you used (NAME ITEM) to get high? a. Pills b. Bhang c. Miraa d. Cocaine e. Petrol f. Glue g. Kuber h. Other _____ (Specify)	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> <tr> <td>1</td> <td>2</td> </tr> </tbody> </table>						Yes	No	1	2	1	2	1	2	1	2	1	2	1	2	1	2	1	2			
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SECTION 7: CIRCUMCISION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
701	<p>In some communities, young people participate in various rites, such as circumcision (TICK APPROPRIATE BOX)</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>FEMALE <input type="checkbox"/></p> <p>↓</p> <p>SKIP TO 705</p> </div> <div style="text-align: center;"> <p>MALE <input type="checkbox"/></p> <p>↓</p> <p>Have you heard of male circumcision?</p> </div> </div>	<p>[HEARD OF MALE CIRCUMCISION IN SURVEY 1 OR SURVEY 2]</p> <div style="text-align: center; border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> <p>[IF 1 SKIP TO 702 AND CHECK PREPRINT BOX]</p> <p>YES 1</p> <p>NO 2</p>	<p>→ 801</p>
702	<p>[CIRCUMCISION STATUS AS OF SURVEY 1 OR SURVEY 2] [IF 1 SKIP TO 801]</p> <p>Since our last visit on (SEE DATE IN Q1.8); did you get circumcised?</p>	<div style="text-align: center; border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> <p>YES 1</p> <p>NO 2</p>	<p>→ 801</p>
705	<p>[FEMALE CIRCUMCISION PRACTISED AS OF SURVEY 1 OR SURVEY 2] [IF 1 SKIP TO 706 AND CHECK PREPRINT BOX] [IF 2 SKIP TO 801]</p> <p>I want to discuss with you the circumcision of girls. In your ethnic group, is female circumcision practiced?</p>	<div style="text-align: center; border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> <p>YES 1</p> <p>NO 2</p>	<p>→ 801</p>
706	<p>RESPONDENT'S CIRCUMCISION STATUS AT SURVEY 1 OR SURVEY 2 [IF 1 GO TO NEXT SECTION]</p> <p>Since our last visit on (DATE IN Q1.8); did you get circumcised?</p>	<div style="text-align: center; border: 1px solid black; width: 60px; height: 20px; margin: 0 auto;"></div> <p>YES 1</p> <p>NO 2</p>	

SECTION 8: MARRIAGE AND DATING

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
801	EVER MARRIED/LIVED TOGETHER AS OF SURVEY 1 OR 2 [IF 1 SKIP TO 802] Since our last visit on (DATE in Q1.8); did you get married /start living with a man/woman as if married?	<div style="text-align: right;"> <input type="checkbox"/> </div> YES 1 NO 2	→ 806
802	Are you currently married or living together with a man/woman as if married?	YES 1 NO 2	
803	How many times have you been married or lived with a man/woman? Only once or more than once?	NUMBER OF TIMES <input type="text"/>	
804	MONTH AND YEAR FIRST MARRIED/LIVING TOGETHER AS OF SURVEY 1 OR 2 [SKIP TO 806 IF MONTH & YEAR ARE PREPRINTED] <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> MARRIED ONLY ONCE <input type="checkbox"/> In what month and year did you get married or start living with your partner? </div> <div style="width: 45%;"> MARRIED MORE THAN ONCE <input type="checkbox"/> Now I would like to ask you when you married or began living with a man/woman as if married for the first time. In what month and year did you first marry or start living with a man/woman as if married? </div> </div>	MONTH <input type="text"/> YEAR <input type="text"/> MONTH <input type="text"/> DON'T KNOW MONTH 98 YEAR <input type="text"/> DON'T KNOW YEAR 9998	
805	How old were you when you first got married or first started living with your partner? PROBE TO GET APPROXIMATE AGE IF RESPONDENT DOES NOT KNOW AGE	AGE IN YEARS <input type="text"/> DON'T KNOW 98	
806	IF RESPONDENT HAS NEVER (BEEN) MARRIED OR LIVED TOGETHER WITH A PARTNER INDICATE SO IN CALENDAR INTERVIEWER INSTRUCTION: SO, WE'VE TALKED ABOUT MARITAL RELATIONSHIPS A LITTLE BIT. NOW, I WOULD LIKE TO GET MORE DETAILS. GO TO CALENDAR!		
806a	CHECK 802 IS THE RESPONDENT CURRENTLY MARRIED? (TICK APPROPRIATE BOX) <div style="display: flex; align-items: center;"> <input type="checkbox"/> NO <input type="checkbox"/> YES </div>		→ 911
807	EVER HAD BOY/GIRLFRIEND AS OF SURVEY 1 OR 2 [IF 1 SKIP TO 807a] Since our last visit on (DATE IN Q1.8) have you had a boyfriend/girlfriend?	<div style="text-align: right;"> <input type="checkbox"/> </div> YES 1 NO 2 REFUSED 7	→ 901
807a	How many boy/girlfriends have you had in the past one year?	DON'T KNOW <input type="text"/> 98	
808	Do you have a boyfriend/girlfriend now?	YES 1 NO 2 REFUSED 7	→ 901

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIP
809	Please indicate whether you agree or disagree with the following statements (READ STATEMENT) Would you say (READ CHOICES)	Strongly agree	Agree	Disagree	Strongly disagree	
	b. Your girlfriend/boyfriend always takes the time to talk over your problems with you	1	2	3	4	
	d. No matter what happens, you know that your girlfriend/boyfriend will always be there for you.	1	2	3	4	
	e. You know that your girlfriend /boyfriend has confidence in you.	1	2	3	4	
	f. Your girlfriend /boyfriend /partner often lets you know that he/she thinks you are a worthwhile person	1	2	3	4	

SECTION 9: SEXUAL BEHAVIOR, CONTRACEPTIVE USE, CHILDBEARING, AND CHILDBEARING ASPIRATIONS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
901	<p>CHECK 1.4b (COVER SHEET) (TICK APPROPRIATE BOX)</p> <p>13-17 YEARS OLD <input type="checkbox"/> 18+ YEARS OLD <input type="checkbox"/></p>		911
902	<p>CHECK 801 BOTH PREPRINTED BOX AND CURRENT CODE (TICK APPROPRIATE CASE)</p> <p>NEVER MARRIED OR LIVED TOGETHER (CODE '2' CIRCLED) <input type="checkbox"/> EVER MARRIED OR LIVED TOGETHER (CODE '1' CIRCLED) <input type="checkbox"/></p>		911
904	Do you know of any close friends who have kissed or been kissed?	<p>YES 1</p> <p>NO 2</p>	
905	<p>EVER KISSED/BEEN KISSED AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 906]</p> <p>Have you ever kissed or been kissed?</p>	<p>YES 1</p> <p>NO 2</p>	
907	Do you know of any close friends who have fondled or been fondled?	<p>YES 1</p> <p>NO 2</p>	
908	<p>EVER FONDLED/BEEN FONDLED AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 909]</p> <p>Have you ever fondled or been fondled?</p>	<p>YES 1</p> <p>NO 2</p>	
909	<p>EVER HEARD OF SEXUAL INTERCOURSE AS OF SURVEY 1 OR 2 [IF 1 SKIP TO 911]</p> <p>Have you ever heard of sexual intercourse? By this I mean a penis in a vagina.</p>	<p>YES 1</p> <p>NO 2</p>	920
910	Do you know of any close friends who have had sexual intercourse?	<p>YES 1</p> <p>NO 2</p>	
911	<p>EVER HAD SEXUAL INTERCOURSE AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 914]</p> <p>Have you ever had sexual intercourse? IF RESPONDENT SAYS NO, PROBE. I want to make certain that I have the correct information. You've never had sex even against your will, or as a one night stand?</p>	<p>YES 1</p> <p>NO 2</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIPS
915o	<p>During the first 4 weeks of your relationship, what was this person's relationship to you at that time?</p> <p>IF RESPONDENT SAYS 'BOYFRIEND /GIRLFRIEND', ASK: Were you living together as if married? [IF ANSWER IS YES CIRCLE CODE 2]</p>	HUSBAND/WIFE LIVE-IN PARTNER BOYFRIEND/GIRLFRIEND NOT LIVING WITH RESPONDENT CASUAL ACQUAINTANCE COMMERCIAL SEX WORKER OTHER	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	
915p	<p>In the first 4 weeks of the relationship, Where was ____ living (relative to where you were living)</p>	WITHIN SAME DSA SLUM OTHER DSA SLUM NON-DSA NAIROBI SLUM NAIROBI NON-SLUM OTHER URBAN AREA OTHER RURAL AREA OTHER	01 02 03 04 05 06 96	01 02 03 04 05 06 96	01 02 03 04 05 06 96	
915q	<p>During the first 4 weeks of your relationship did you want to or plan to marry ____?</p>	YES NO NEVER CONSIDERED IT	1 2 3	1 2 3	1 2 3	
915r	<p>What was the main reason you first had sexual intercourse with ____?</p>	MARRIED/ UPON MARRIAGE NATURAL FEELINGS/ FELT LIKE IT PARTNER INSISTED/ WANTED SEX INFLUENCE FROM FRIENDS EXPECTATION OF GIFTS/MONEY WANTED TO GET PREGNANT/ HAVE BABY WAS FORCED OTHER DON'T KNOW	01 02 03 04 05 06 07 96 98	01 02 03 04 05 06 07 96 98	01 02 03 04 05 06 07 96 98	
915s	<p>Were you ever concerned that you might catch AIDS or another sexually transmitted disease from NAME? IF YES Very or somewhat?</p>	VERY CONCERNED SOMEWHAT CONCERNED NOT CONCERNED	1 2 3	1 2 3	1 2 3	
915t	<p>In the first 4 weeks that you had sex, how many times did you and ____ have sex? PROBE FOR APPROXIMATION</p>	<p>WRITE IN NUMBER OF TIMES</p> DON'T KNOW	98	98	98	
915u	<p>Thinking about the first 4 weeks you had sex with ____, how often did you use male condoms? Would you say [READ CHOICES]</p>	NEVER LESS THAN HALF THE TIME HALF THE TIME MORE THAN HALF OF THE TIME EVERY TIME	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	
915v	<p>The <u>first</u> 4 weeks you had sexual intercourse, were any OTHER methods used to prevent pregnancy or sexually transmitted infections?</p>	YES NO REFUSED TO ANSWER DON'T KNOW	1 2 7 8	1 2 7 8	1 2 7 8	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES				SKIPS
915w	What other method or methods were used? PROBE: Anything else? RECORD ALL MENTIONED.	PILL INJECTABLES FEMALE CONDOM FOAM/JELLY RHYTHM/PERIODIC ABSTINENCE WITHDRAWAL EMERGENCY CONTRACEPTIO FEMALE STERILIZATION MALE STERILIZATION IUD/COIL IMPLANTS OTHER	A B C D E F G H I J K X	A B C D E F G H I J K X	A B C D E F G H I J K X	
915x	Thinking about the first time you had sexual intercourse with ____ would you say you were very willing, somewhat willing or not willing at all?	VERY WILLING SOMEWHAT WILLING NOT WILLING AT ALL	1 2 3	1 2 3	1 2 3	
915y	IF RELATIONSHIP LASTED ONE MONTH OR LESS, SKIP TO 920 Now I would like to ask you some questions about the last or most recent month of your relationship with ____. In what month and year did you last have sexual intercourse with ____? CIRCLE 98 IF MONTH NOT KNOWN CIRCLE 9998 IF YEAR NOT KNOWN	WRITE IN MONTH AND YEAR MONTH DON'T KNOW MONTH YEAR DON'T KNOW YEAR	 98 9998	 98 9998	 98 9998	
915z	In the last 4 weeks that you had sex, how many times did you and ____ have sex?	WRITE IN NUMBER OF TIMES DON'T KNOW	 98	 98	 98	
915aa	Thinking about the last 4 weeks you had sex with ____, how often did you use male condoms? Would you say [READ CHOICES]	NEVER LESS THAN HALF THE TIME HALF THE TIME MORE THAN HALF OF THE TIME EVERY TIME	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5	
915ab	The <u>last</u> 4 weeks you had sexual intercourse, were any OTHER methods used to prevent pregnancy or sexually transmitted infections?	YES NO REFUSED TO ANSWER DON'T KNOW	1 2 7 8	1 2 7 8	1 2 7 8	
915ac	What other method or methods were used? PROBE: Anything else? RECORD ALL MENTIONED.	PILL INJECTABLES FEMALE CONDOM FOAM/JELLY RHYTHM/PERIODIC ABSTINENCE WITHDRAWAL EMERGENCY CONTRACEPTION FEMALE STERILIZATION MALE STERILIZATION IUD/COIL IMPLANTS OTHER	A B C D E F G H I J K X	A B C D E F G H I J K X	A B C D E F G H I J K X	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
920	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p style="text-align: center;">FEMALE</p> <p>As girls grow into women, changes happen in their bodies, such as the start of menstrual periods.</p> <p>At what age did you have your first menstrual period, or have you not had one yet?</p> </div> <div style="width: 45%; border-left: 1px dashed black; padding-left: 10px;"> <p style="text-align: center;">MALE</p> <p>As boys grow into men, certain changes happen to their bodies, such as growing pubic hair,</p> <p>voices get deeper, or sometimes they have "wet dreams."</p> <p>At what age did you first notice any of these changes happening in your body, or have none happened yet?</p> </div> </div>	<p>AGE HAD CHANGE/PERIODS AS OF SURVEY 1 OR SURVEY 2</p> <div style="text-align: right;"><input type="checkbox"/></div> <p>FEMALES IF AGE IS PREPRINTED SKIP TO 920d IF RESPONDENT INTERVIEWED IN SURVEY 2</p> <p>AGE IN YEARS <input style="width: 30px;" type="text"/><input style="width: 30px;" type="text"/></p> <p>NO CHANGE YET/NOT MENSTRUATING</p> <p>YET 96</p> <p>DON'T KNOW AGE 98</p>	
920a	<p style="text-align: center;">(TICK APPROPRIATE BOX)</p> <div style="display: flex; justify-content: space-around;"> <div>FEMALE <input style="width: 20px; height: 20px;" type="checkbox"/></div> <div>MALE <input style="width: 20px; height: 20px;" type="checkbox"/></div> </div>		→ 921a
920b	<p>FW: Q920a-Q920e ARE FOR FEMALES ONLY</p> <p>Did anyone talk to you about your periods before your first period?</p>	<p>YES 1</p> <p>NO 2</p>	→ 920c
920c	<p>What is your relationship to this person ? [USE RELATIONSHIP CODES ON CODE SHEET A²] [SPECIFY IF RELATIONSHIP IS OTH]</p>	<input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/>	
920d	<p>CHECK 107 PREPRINTED OR CURRENT CODE:</p> <div style="display: flex; justify-content: space-around;"> <div>EVER ATTENDED SCHOOL <input style="width: 20px; height: 20px;" type="checkbox"/></div> <div>NEVER ATTENDED SCHOOL <input style="width: 20px; height: 20px;" type="checkbox"/></div> </div> <p>Have you ever missed school because of your period?</p>	<p>YES 1</p> <p>NO 2</p>	→ 921a → 921a
920e	<p>What was the reason you missed school during your periods? (MULTIPLE RESPONSES ALLOWED)</p>	<p>PAINS (ABDOMINAL AND STOMACH) A</p> <p>LACK OF SANITARY PADS B</p> <p>UNEXPECTED PERIODS C</p> <p>FEAR/ ASHAMED D</p> <p>OTHER X</p> <p style="text-align: center;">(SPECIFY)</p>	
920f	<p>What is the main reason among these, which made you miss school? [ENTER THE APPROPRIATE CODE FROM 920e]</p>	<input style="width: 30px; height: 20px;" type="text"/>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
921a	<p>Now I'd like to ask you some questions about pregnancy.</p> <p>From one menstrual period to the next, are there certain days when a woman is more likely to become pregnant if she has sexual intercourse?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	921c
921b	<p>Is this the time just before her period begins, during her period, right after her period, or halfway between two periods?</p>	<p>JUST BEFORE HER PERIOD BEGINS 1</p> <p>DURING HER PERIOD 2</p> <p>RIGHT AFTER HER PERIOD HAS ENDED 3</p> <p>HALFWAY BETWEEN TWO PERIODS 4</p> <p>OTHER 6</p> <p>(SPECIFY)</p> <p>DON'T KNOW 8</p>	
921c	<p>Can a girl get pregnant the very first time she has sexual intercourse?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
921d	<p>Can a girl get pregnant if a boy withdraws before ejaculating or coming?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
921e	<p>Can a girl get pregnant if she has sex standing up?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	
921f	<p>Can a girl get pregnant if she washes herself thoroughly immediately after sex?</p>	<p>YES 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p>	


NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS				
921g	<p>[CHECK 911 IN PREPRINTED BOX AND CURRENT CODE]</p> <p>HAS THE RESPONDENT EVER HAD SEX? (TICK APPROPRIATE BOX)</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>		→ 928				
921	<table border="0"> <tr> <td style="text-align: center;">FEMALE</td> <td style="text-align: center;">MALE</td> </tr> <tr> <td>Since our last visit on (DATE IN Q1.8), have you been pregnant?</td> <td>Since our last visit on (DATE IN Q1.8), have you made someone pregnant?</td> </tr> </table>	FEMALE	MALE	Since our last visit on (DATE IN Q1.8), have you been pregnant?	Since our last visit on (DATE IN Q1.8), have you made someone pregnant?	<p>BEEN/MADE A GIRL PREGNANT AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 921h]</p> <p>YES 1</p> <p>NO 2</p>	→ 928
FEMALE	MALE						
Since our last visit on (DATE IN Q1.8), have you been pregnant?	Since our last visit on (DATE IN Q1.8), have you made someone pregnant?						
921h	<table border="0"> <tr> <td style="text-align: center;">FEMALE</td> <td style="text-align: center;">MALE</td> </tr> <tr> <td>At the time you first became pregnant did you want to become pregnant then, did you want to wait until later, or did you not want to have any children at all?</td> <td>At the time you first fathered a child, did you want the child then, did you want to wait until later, or did you not want to have any children at all?</td> </tr> </table>	FEMALE	MALE	At the time you first became pregnant did you want to become pregnant then, did you want to wait until later, or did you not want to have any children at all?	At the time you first fathered a child, did you want the child then, did you want to wait until later, or did you not want to have any children at all?	<p>THEN 1</p> <p>LATER 2</p> <p>NOT AT ALL 3</p>	<p>→ 922</p> <p>→ 922</p>
FEMALE	MALE						
At the time you first became pregnant did you want to become pregnant then, did you want to wait until later, or did you not want to have any children at all?	At the time you first fathered a child, did you want the child then, did you want to wait until later, or did you not want to have any children at all?						
921i	How much longer would you like to have waited?	<p>MONTHS 1</p> <p>YEARS 2</p> <p>WHEN I GET MARRIED 91</p> <p>DO NOT EXPECT TO HAVE CHILDREN 92</p> <p>DON'T KNOW 98</p>					
922	<p>MONTH AND YEAR FIRST PREGNANT AS OF SURVEY 1 OR 2</p> <p>[SKIP TO 923a IF MONTH & YEAR ARE PREPRINTED]</p> <table border="0"> <tr> <td style="text-align: center;">FEMALE</td> <td style="text-align: center;">MALE</td> </tr> <tr> <td>In what month and year was your first pregnancy?</td> <td>In what month and year did you first make someone pregnant?</td> </tr> </table>	FEMALE	MALE	In what month and year was your first pregnancy?	In what month and year did you first make someone pregnant?	<p>MONTH <input type="text"/> YEAR <input type="text"/></p> <p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW MONTH 98</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW YEAR 9998</p>	
FEMALE	MALE						
In what month and year was your first pregnancy?	In what month and year did you first make someone pregnant?						
923	<table border="0"> <tr> <td>How old were you the first time you got pregnant?</td> <td>How old were you when you first made someone pregnant?</td> </tr> </table>	How old were you the first time you got pregnant?	How old were you when you first made someone pregnant?	<p>AGE IN YEARS <input type="text"/> <input type="text"/></p> <p>CURRENTLY PREGNANT 97</p> <p>DON'T KNOW 98</p>	→ 923b		
How old were you the first time you got pregnant?	How old were you when you first made someone pregnant?						
923a	<table border="0"> <tr> <td>Are you currently pregnant?</td> <td>Is any woman/women that you made pregnant currently pregnant?</td> </tr> </table>	Are you currently pregnant?	Is any woman/women that you made pregnant currently pregnant?	<p>YES 1</p> <p>NO 2</p>			
Are you currently pregnant?	Is any woman/women that you made pregnant currently pregnant?						

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
923b	<p>FOR FEMALE: How many pregnancies have you had in your lifetime?</p> <p>FOR MALES: In your lifetime, how many times have you made someone pregnant?</p>	<p>NUMBER <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p> <p>REFUSED TO ANSWER 97</p>	
924	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Now I would like to ask you about any babies you may have had, including babies who were born alive but later died, even shortly after birth. Since our last visit on (DATE IN Q1.8), have you given birth?</p> </div> <div style="width: 45%;"> <p>Now I would like to ask you about any babies you may have fathered, including babies who were born alive but later died, even shortly after birth. Since our last visit on (DATE IN Q1.8), have you fathered a child?</p> </div> </div>	<p>EVER GIVEN BIRTH/FATHERED A CHILD AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 927]</p> <p>YES 1</p> <p>NO 2</p>	→ 928
925	<p>MONTH AND YEAR FIRST HAD A CHILD AS OF SURVEY 1 OR 2</p> <p>[SKIP TO 927 IF MONTH & YEAR ARE PREPRINTED]</p> <p>In what month and year did you have your first child?</p>	<p>MONTH <input type="text"/> YEAR <input type="text"/></p> <p>MONTH <input type="text"/> <input type="text"/></p> <p>DON'T KNOW MONTH 98</p> <p>YEAR <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>DON'T KNOW YEAR 9998</p>	
926	How old were you when you had your first child?	<p>AGE IN YEARS <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p>	
927	How many children have you had, including babies who were born alive but later died, even shortly after birth?	<p>RECORD NUMBER OF CHILDREN <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p>	
927a	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>FEMALE <input type="checkbox"/></p> <p>Have you ever tried to end a pregnancy?</p> </div> <div style="width: 45%;"> <p>MALE <input type="checkbox"/></p> <p>Has someone you made pregnant ever tried to end the pregnancy?</p> </div> </div>	<p>YES 1</p> <p>NO 2</p> <p>REFUSED TO ANSWER 7</p> <p>DON'T KNOW 8</p>	→ 928
927b	<p>FOR FEMALES: Did you succeed in ending the pregnancy?</p> <p>FOR MALES: Did the girl(s) you made pregnant succeed in ending a pregnancy?</p>	<p>YES 1</p> <p>NO 2</p> <p>REFUSED TO ANSWER 7</p> <p>DON'T KNOW 8</p>	→ 928
927c	<p>FOR FEMALES: In your lifetime, how many pregnancies did you successfully end?</p> <p>FOR MALES: In your lifetime, how many pregnancies that were from you were successfully ended?</p> <p>CHECK 927: HER NUMBER OF ABORTIONS CANNOT BE GREATER THAN HER NUMBER OF PREGNANCIES (923b) IF SO, PLEASE CLARIFY WITH THE RESPONDENT</p>	<p>NUMBER <input type="text"/> <input type="text"/></p> <p>DON'T KNOW 98</p> <p>REFUSED TO ANSWER 97</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
928	<p>IF RESPONDENT HAS NEVER HAD SEX (Q911) OR HAS HAD SEX BUT NEVER BEEN/MADE SOMEONE PREGNANT (Q921) INDICATE SO ON THE CALENDAR AND GO TO Q931</p> <p>INTERVIEWER INSTRUCTION: WE'VE TOUCHED ON PREGNANCY. NOW I WOULD LIKE TO GET SOME MORE DETAILS.</p> <p>GO TO CALENDAR!</p>		
929	<p style="text-align: center;">CHECK 923B: IF RESPONSE IS "01"</p> <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> <p>FEMALE</p> <p>CHECK 923 OR 923a</p> <p><input type="checkbox"/></p> <p>IF NOT CURRENTLY PREGNANT</p> <p>At the time you became pregnant the last time did you want to become pregnant then, did you want to wait until later, or did you not want to have any (more) children at all?</p> <p><input type="checkbox"/></p> <p>IF CURRENTLY PREGNANT</p> <p>For your current pregnancy did you want to become pregnant, did you want to wait until later, or did you not want to have any (more) children at all?</p> </div> <div style="text-align: center;"> <p>MALE</p> <p>At the time you last fathered a child, did you want the child then, did you want to wait until later, or did you not want to have any (more) children at all?</p> </div> </div>	<p>THEN 1 → 932</p> <p>LATER 2</p> <p>NOT AT ALL 3 → 932</p>	932
930	How much longer would you like to have waited?	<p>MONTHS 1 <input type="text"/></p> <p>YEARS 2 <input type="text"/></p> <p>WHEN I GET MARRIED 91</p> <p>DO NOT EXPECT TO HAVE CHILDREN 92</p> <p>DON'T KNOW 98</p>	932
931	At what age do you expect or want to have your first child?	<p>AGE IN YEARS <input type="text"/></p> <p>WHEN I GET MARRIED 91</p> <p>DO NOT EXPECT TO HAVE CHILDREN 92</p> <p>WHEN GOD WILLS 93</p> <p>DON'T KNOW 98</p>	
932	<p>CHECK 924 (TICK APPROPRIATE BOX)</p> <p>HAS HAD CHILDREN <input type="checkbox"/></p> <p>NO CHILDREN <input type="checkbox"/></p>		
933	<p>If you could go back to the time you did not have any children and could choose exactly the number of children to have in your whole life, how many would that be?</p> <p>If you could choose exactly the number of children to have in your whole life, how many would that be?</p>	<p>NUMBER <input type="text"/></p> <p>OTHER 96</p> <p>(SPECIFY)</p> <p>DON'T KNOW 98</p> <p>[IF NONE CODE 00 IN THE BOXES]</p>	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIPS
934	Do you think you will use a method to delay or avoid pregnancy at any time in the future?	YES 1 NO 2 DON'T KNOW ANY METHOD 3 DON'T KNOW 8	→ 936 → 1005
935	Which method would you prefer to use? CIRCLE ONLY ONE RESPONSE, THE MOST PREFERRED	FEMALE STERILISATION 01 MALE STERILISATION 02 PILL 03 IUD 04 INJECTIONS 05 IMPLANTS 06 CONDOM 07 FEMALE CONDOM 08 RHYTHM, PERIODIC ABSTINENCE 09 WITHDRAWAL 10 OTHER 96 (SPECIFY) UNSURE 98	→ 1005
935a	What is your most important reason for choosing the method? CIRCLE ONLY ONE RESPONSE, THE MOST IMPORTANT REASON	AFFORDABILITY 01 EASE/CONVENIENCE OF USE 02 FEW/NO SIDE EFFECTS 03 ACCEPTABLE TO PARTNER 04 HIGHLY EFFECTIVE / TRUST METHOD 05 PROVIDES DUAL PROTECTION 06 PERMANENCE / LONG LASTING 07 ACCORDS PRIVACY/SECURITY OF USE 08 OTHER 96 (SPECIFY)	→ 1005
936	What is the main reason that you think you will not use a method at any time in the future? CIRCLE ONLY ONE RESPONSE	FERTILITY-RELATED REASONS INFREQUENT SEX/NO SEX 21 INFERTILE 23 WANTS CHILDREN 24 OPPOSITION TO USE RESPONDENT OPPOSED 31 HUSBAND/WIFE/PARTNER OPPOSED 32 OTHERS OPPOSED 33 RELIGIOUS PROHIBITION 34 LACK OF KNOWLEDGE KNOWS NO METHOD 41 KNOWS NO SOURCE 42 METHOD-RELATED REASONS HEALTH CONCERNS 51 FEAR OF SIDE EFFECTS 52 LACK OF ACCESS/TOO FAR 53 COST TOO MUCH 54 INCONVENIENT TO USE 55 INTERFERES WITH BODY'S NORMAL PROCESSES 56 OTHER 96 (SPECIFY) DOES NOT KNOW 98	

SECTION 10: HIV/AIDS-RELATED KNOWLEDGE AND HIV TESTING

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1005	<p>EVER BEEN TESTED FOR HIV AS OF SURVEY 1 OR SURVEY 2 [IF 1 SKIP TO 1101]</p> <p>I don't want to know the results, but have you ever been tested to see if you have the AIDS virus?</p>	<div style="text-align: right;">  </div> <p>YES 1</p> <p>NO 2</p> <p>REFUSED TO ANSWER 7</p>	<p>→ 1014</p> <p>→ 1103</p>
1006	<p>The last time you had the test, did you yourself ask for the test, was it offered to you and you accepted or was it required?</p>	<p>RESPONDENT ASKED FOR THE TEST 1</p> <p>OFFERED AND ACCEPTED 2</p> <p>REQUIRED 3</p>	
1007	<p>What was the main reason you got tested the last time?</p>	<p>TO KNOW STATUS 01</p> <p>PREGNANT/ PRENATAL 02</p> <p>I'M SEXUALLY ACTIVE 03</p> <p>ENCOURAGED BY COUNSELOR 04</p> <p>ENCOURAGED BY PEER EDUCATOR 05</p> <p>ENCOURAGED BY PARENTS OR FAMILY 06</p> <p>ENCOURAGED BY PEERS 07</p> <p>TO GET MARRIED 08</p> <p>PARTNER TOLD ME TO DO SO 09</p> <p>CONCERN ABOUT A PARTNER 10</p> <p>REQUIRED TO GET A JOB 11</p> <p>OTHER 96</p> <p align="center">(SPECIFY)</p>	
1008	<p>Where did you go for the test the last time?</p>	<p>GOVERNMENT CLINIC/HOSPITAL 01</p> <p>PRIVATE CLINIC/HOSPITAL/DOCTOR 02</p> <p>NGO CLINIC 03</p> <p>DRUG SHOP/PHARMACY 04</p> <p>MOBILE CLINIC 05</p> <p>VCT CENTER 06</p> <p>PART OF A RESEARCH STUDY 07</p> <p>OTHER 96</p> <p align="center">(SPECIFY)</p>	
1009	<p>At any time during that last test, did you get any counseling about ways of protecting yourself or your partner from AIDS?</p>	<p>YES 1</p> <p>NO 2</p>	
1010	<p>I don't want to know the results, but did you get the results of that test?</p>	<p>YES 1</p> <p>NO 2</p> <p>REFUSED TO ANSWER 7</p>	<p>→ 1103</p> <p>→ 1103</p>
1012	<p>What is the main reason you did not get the results?</p>	<p>I'M NOT AT RISK 01</p> <p>SCARED TO KNOW STATUS 02</p> <p>SOMEONE MIGHT SEE ME 03</p> <p>JUST DON'T WANT TO KNOW 04</p> <p>INDIFFERENT/DON'T CARE 05</p> <p>OTHER 96</p> <p align="center">(SPECIFY)</p>	<p>→ 1103</p>

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
1014	What is the main reason you have not been tested yet?	NEVER HAD SEX 00 NOT SEXUALLY ACTIVE 01 NOT AT RISK FOR OTHER REASONS 02 DO NOT KNOW WHERE TO GO 03 COSTS TOO MUCH 04 CAN GET INFECTION FROM TEST 05 DON'T WANT TO KNOW STATUS 06 SOMEONE MIGHT SEE ME 07 TRUST MYSELF 08 AFRAID TO KNOW STATUS 09 OTHER 96 (SPECIFY)	
1015	Would you want to be tested for the AIDS virus?	YES 1 NO 2 DON'T KNOW 8	

SECTION 11: ATTITUDES TOWARDS SEX AND CONTRACEPTIVE USE

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES					SKIP
		Strongly Agree	Agree	Disagree	Strongly Disagree	DK	
1103	<p>These next questions are about condoms. Please tell me whether you agree or disagree with them, even if you have never used a condom?</p> <p>a. A male condom should always be put on <u>before</u> sexual intercourse starts</p> <p>b. A male condom should be put on the penis only if the penis is fully erect or stiff</p> <p>c. A male condom can be used more than once</p> <p>d. Using a male condom reduces sexual pleasure</p> <p>e. Using a male condom is a sign of not trusting your partner</p> <p>f. It is embarrassing to buy or ask for male condoms</p>	1	2	3	4	8	
1102	c. It's a good idea to use condoms to protect against getting AIDS.	1	2	3	4	8	

SECTION 12: CIVIC PARTICIPATION

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																
	<p>Thank you for answering these questions, we are almost done with the interview</p> <p>Now I would like to ask you some questions on participation in any social groups or clubs.</p>																		
1201a	Do you currently belong to any group?	YES 1 NO 2	→ 1203																
1201	Do you belong to a [GROUP] a. Religious group c. Drama group/Dance group/Choir d. Anti-AIDS club e. Anti-drugs club f. Girl guides/boy scouts g. Wildlife society h. Self-help group i. Other _____ (SPECIFY)	<table border="1"> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> <tr> <td>YES 1</td> <td>NO 2</td> </tr> </table>	YES 1	NO 2	YES 1	NO 2	YES 1	NO 2	YES 1	NO 2	YES 1	NO 2	YES 1	NO 2	YES 1	NO 2	YES 1	NO 2	
YES 1	NO 2																		
YES 1	NO 2																		
YES 1	NO 2																		
YES 1	NO 2																		
YES 1	NO 2																		
YES 1	NO 2																		
YES 1	NO 2																		
YES 1	NO 2																		
1202	Do you hold an office or leadership position in any of the groups or clubs you belong to?	YES 1 NO 2 NOT APPLICABLE 9																	
1203	Do you do any unpaid volunteer work in the community; for example, cleaning the neighborhood?	YES 1 NO 2	→ 1205																
1204	What is the main unpaid volunteer work that you do?	PEER EDUCATOR 1 TUITION 2 VISITING SICK PEOPLE 3 COMMUNITY CLEANING 4 OTHER 6 (SPECIFY)																	
1205	<p>RECORD THE END TIME (24 HR-FORMAT)</p> <p>END THE INTERVIEW BY THANKING THE RESPONDENT</p>	<div style="border: 1px solid black; width: 100px; height: 30px; margin: 0 auto;"></div> <p>REMEMBER TO FILL IN THE FINAL STATUS OF THE INTERVIEW ON THE COVER SHEET</p>																	

INTERVIEWER ASSESSMENT					
INTERVIEWER, PLEASE COMPLETE THE QUESTIONS BELOW BASED ON YOUR OWN OBSERVATION AND ASSESSMENT OF THE ENTIRE INTERVIEW PROCESS AND OF THE RESPONDENT					
1301	What is your assessment of the respondent's cooperation? 1=Very good 2=Good 3=Moderate 4=Bad 5=Very bad				<input type="checkbox"/>
1302	What is your evaluation of the accuracy and completeness of the respondent's answers? 1=Very high 2=High 3=Average 4=Low 5=Very low				<input type="checkbox"/>
1303	What is your assessment of the respondent's comprehension of issues discussed? 1=Very good 2=Good 3=Moderate 4=Bad 5=Very bad				<input type="checkbox"/>
1304	What is your assessment of the respondent's concentration and attentiveness during the interview? 1=Very good 2=Good 3=Moderate 4=Bad 5=Very bad				<input type="checkbox"/>
1305	What is your assessment on the extent of the respondent digressing during the interview ? 1=To a very great extent; 2=To a great extent; 3=Neither great nor small extent 4=To a small extent; 5=To a very small extent				<input type="checkbox"/>
1310	INTERVIEWER NOTES <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>				

² Relationship	Independent housing	Marital status
AUN= Aunt; BIL=Brother-in-law; BRO= Brother; CHD = Child; COU=Cousin; CWF = Co-wife; DIL = Daughter-in-law; GCH = Grand child; GDP = Grand parent; HHH=Household head; HUS = Husband; NEP= Nephew; NIE=Niece; NRL = Not related; PAR = Parent; PIL = Parent-in-Law; SIL=Sister-in-law; SIS=Sister; SOL= Son-in-law; STC=Step child; STP=Step parent; UNC=Uncle; UNK = Unknown relation; WIF = Wife; OTH = Other (specify)	0=Not own/rent a house 1=Own/renting a house Schooling 0=Not in school 1=Standard 1 2=Standard 2 3=Standard 3 4=Standard 4 5=Standard 5 6=Standard 6 7=Standard 7 8=Standard 8 9=Form 1 10=Form 2 11=Form 3 12=Form 4 13=Vocational 14=College (leads to a 15=University 96=Other	0=Not married 1=Married 2=Living together but not married 3=Divorced/separated 4=Widowed First sex 1=First sex Employment 0=Not Employed 1=Employed Pregnancy [EVERY PREGNANCY MUST HAVE AN 0=Not pregnant 1=Pregnant 2=Live birth 3=Miscarriage 4=Still birth 5=Abortion

Suggested questions for filling the calendar

Housing: When did you first start living on your own? Are you still living alone/with others/ Is there a period when you were not living independently?

Schooling: When did you first join standard one? Did you stop attending school at any point? Did you skip/repeat a class?

Marriage: When did you get married the first time? Are you still married? Have you ever divorced?

Sex: When did you first have sex?

Pregnancy: When were you pregnant for the first time? When did your partner get pregnant? How did this pregnancy end?

Income generating activity (IGA): When did you first start an IGA? Are you still involved in this IGA? Are there months you did not get involved in any IGA?

TRANSITION CALENDAR

IF RESPONDENT HAS NEVER EXPERIENCED AN EVENT MARK A ZERO IN THE BOX BELOW THE EVENT

Never owned/rented

Never attended school

Never married

Never had sex

No income generating activity

YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT
1986	01 JAN						
	02 FEB						
	03 MAR						
	04 APR						
	05 MAY						
	06 JUN						
	07 JUL						
	08 AUG						
	09 SEP						
	10 OCT						
	11 NOV						
	12 DEC						
1987	01 JAN						
	02 FEB						
	03 MAR						
	04 APR						
	05 MAY						
	06 JUN						
	07 JUL						
	08 AUG						
	09 SEP						
	10 OCT						
	11 NOV						
	12 DEC						
1988	01 JAN						
	02 FEB						
	03 MAR						
	04 APR						
	05 MAY						
	06 JUN						
	07 JUL						
	08 AUG						
	09 SEP						
	10 OCT						
	11 NOV						
	12 DEC						
1989	01 JAN						
	02 FEB						
	03 MAR						
	04 APR						
	05 MAY						
	06 JUN						
	07 JUL						
	08 AUG						
	09 SEP						
	10 OCT						
	11 NOV						
	12 DEC						

YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT	YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT
1 9 9 0	01 JAN							1 9 9 3	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						
1 9 9 1	01 JAN							1 9 9 4	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						
1 9 9 2	01 JAN							1 9 9 5	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						

YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT	YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT
1 9 9 6	01 JAN							1 9 9 9	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						
1 9 9 7	01 JAN							2 0 0 0	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						
1 9 9 8	01 JAN							2 0 0 1	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						

YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT	YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT
2002	01 JAN							2005	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						
2003	01 JAN							2006	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						
2004	01 JAN							2007	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						

YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT	YEAR	MONTH	HOUSING	SCHOOLING	MARRIAGE	SEX	PREGNANCY	EMPLOYMENT
2008	01 JAN							2009	01 JAN						
	02 FEB								02 FEB						
	03 MAR								03 MAR						
	04 APR								04 APR						
	05 MAY								05 MAY						
	06 JUN								06 JUN						
	07 JUL								07 JUL						
	08 AUG								08 AUG						
	09 SEP								09 SEP						
	10 OCT								10 OCT						
	11 NOV								11 NOV						
	12 DEC								12 DEC						