KenPHIA
KENYA POPULATION-BASED HIV IMPACT ASSESSMENT
wakati ni sasa

MINISTRY OF HEALTH

KENPHIA 2018
ADULT QUESTIONNAIRE

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KENYA POPULATION-BASED HIV IMPACT ASSESSMENT
wakati ni sasa
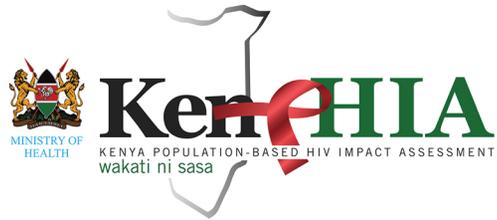
MINISTRY OF HEALTH

MINISTRY OF HEALTH

The
Council of Governors
48 Governments, 1 Nation

USA Marafiki

PEPFAR

CDC
CENTERS FOR DISEASE
CONTROL AND PREVENTION

ICAP
Columbia University
Mailman School
of Public Health

NASCOP

NATIONAL PUBLIC
HEALTH LABORATORY
SERVICES

KNBS
KENYA NATIONAL
BUREAU OF STATISTICS
Keeping you informed

NCPD

maisha!
National AIDS Control Council

The Global Fund

KEMRI

Westat

NEPHAK *say yes to life*

UNAIDS
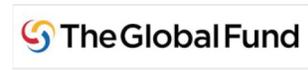
Note: Data from the Adult Questionnaire - Children Module is in the child individual interview file and data from the Adult Questionnaire - Reproductive Module is on both the adult individual interview file and the child individual interview files.

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
L1	Redacted	LANGUAGE OF QUESTIONNAIRE	ENGLISH	1		
			KISWAHILI	2		
			LUO	3		
			KIKUYU	4		
			LUHYA	5		
			KALENJIN	6		
			KISII	7		
			KAMBA	8		
			MAASAI	9		
			MIJI KENDA	10		
			MERU	11		
			EMBU	12		
			SOMALI	13		
			BORANA	14		
			TURKANA	15		
			POKOT	16		
L2	lngvint	LANGUAGE OF INTERVIEW	ENGLISH	1	IF item L2 != 96	item L3
			KISWAHILI	2		
			LUO	3		
			KIKUYU	4		
			LUHYA	5		
			KALENJIN	6		
			KISII	7		
			KAMBA	8		
			MAASAI	9		
			MIJI KENDA	10		
			MERU	11		
			EMBU	12		
			SOMALI	13		
			BORANA	14		
			TURKANA	15		
			POKOT	16		
			OTHER (SPECIFY)	96		
L2OTH	Redacted	SPECIFY OTHER LANGUAGE		text		
L3	lngvnat	NATIVE LANGUAGE OF PARTICIPANT	ENGLISH	1	IF item L3 != 96	item L4
			KISWAHILI	2		
			LUO	3		
			KIKUYU	4		
			LUHYA	5		
			KALENJIN	6		
			KISII	7		
			KAMBA	8		
			MAASAI	9		
			MIJI KENDA	10		
			MERU	11		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			EMBU	12		
			SOMALI	13		
			BORANA	14		
			TURKANA	15		
			POKOT	16		
			OTHER (SPECIFY)	96		
L3OTH	Redacted	SPECIFY OTHER LANGUAGE		text		
L4	trnsluse	TRANSLATION USED	YES	1		
			NO	2		
INSTR	Process variable removed from dataset	Thank you for agreeing to participate in this survey. The first set of questions is about your life in general. Afterwards, we will move on to other topics.				
MTITLE		**MODULE 1: RESPONDENT BACKGROUND**				
101	nationality	What is your current nationality?	KENYAN	1	IF item 101 != 96	item 102
			UGANDAN	2	IF item 101 = 96	item 101OTH
			TANZANIAN	3		
			ETHIOPIAN	4		
			SOMALI	5		
			SUDANESE	6		
			CONGOLESE	7		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
101OTH	Redacted	Specify other		text		
102	sixmnout	Have you been away from home for more than 3 days in the last 6 months?	YES	1	IF item 102 = 2, -8, -9	item 104
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
103	whyaway	What was the main reason for your time away from home?	TO JOIN/SEE FAMILY	1	IF item 103 =! 96	item 104
			FOR MARRIAGE	2		
			FOR WORK	3		
			TO GO TO SCHOOL	4		
			TO ESCAPE INSECURITY/CONFLICT	5		
			TO ESCAPE DROUGHT, FLOOD, ETC.	6		
			TO ESCAPE VIOLENCE IN HOUSEHOLD	7		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
103OTH	Redacted	Specify other:		text		
104	ethnic	What is your ethnic group/tribe?	EMBU	1	IF item 104 !=96	item 105
			KALENJIN	2		
			KAMBA	3		
			KIKUYU	4		
			KISII	5		
			LUHYA	6		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			LUO	7		
			MASAI	8		
			MERU	9		
			MIJIKENDA	10		
			SOMALI	11		
			TAITA TAVETA	12		
			SWAHILI	13		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
104OTH	Redacted	Specify other		text		
105	religion	What is your religion?	ROMAN CATHOLIC	1	IF item 105 != 96	item 106
			PROTESTANT/OTHER CHRISTIAN	2	IF item 105 = 96	item 105OTH
			MUSLIM	3		
			NO RELIGION	4		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
105OTH	Redacted	Specify other		text		
106	schlat	Have you ever attended school?	YES	1	IF item 106 = 2,-8,-9	item 115
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
107	schlcur	Are you currently enrolled in school?	YES	1	IF item 107 = -8, -9	item 115
			NO	2	IF AGE >20	item 111
			DON'T KNOW	-8		
			REFUSED	-9		
108	adltcurgrd	What class/form/year are you in now?	NURSERY PRESCHOOL	1	ALL	item 201
			PRIMARY Class 1	2		
			PRIMARY Class 2	3		
			PRIMARY Class 3	4		
			PRIMARY Class 4	5		
			PRIMARY Class 5	6		
			PRIMARY Class 6	7		
			PRIMARY Class 7	8		
			PRIMARY Class 8	9		
			SECONDARY Form 1	10		
			SECONDARY Form 2	11		
			SECONDARY Form 3	12		
			SECONDARY Form 4	13		
			A Level Form 5	14		
			A Level Form 6	15		
			Certificate Year 1	16		
			Diploma Year 1	17		
			Diploma Year 2	18		
			UNIVERSITY 1 st Year	19		
			UNIVERSITY 2 st Year	20		
			UNIVERSITY 3 st Year	21		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			UNIVERSITY 4 st Year and above	22		
			DON'T KNOW	-8		
			REFUSED	-9		
109	adltmisch	During the last school week, did you miss any school days for any reason?	YES	1	IF item 109 = 2, -8, -9	item 111
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
110	admisreas	Why did you miss school?	I HAVE BEEN SICK	1	IF item 110 != 96	item 111
			I DON'T FEEL SAFE TRAVELING TO SCHOOL	2		
			I DON'T FEEL SAFE WHILE IN SCHOOL	3		
			I DON'T LIKE SCHOOL	4		
			I HAVE TO LOOK AFTER MY FAMILY	5		
			THERE'S NOT ENOUGH MONEY TO SEND ME TO SCHOOL	6		
			SCHOOL IS TOO FAR AWAY	7		
			I HAVE TO WORK	8		
			I HAVE A CHILD OR I AM PREGNANT	9		
			I MISSED TOO MUCH SCHOOL BECAUSE OF MY PERIOD (MENSTRUATION)	10		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
110OTH	Redacted	Specify other		text		
111	schlhi	What is the highest level of school you attended?	NURSERY PRESCHOOL	1		
			PRIMARY Class 1	2		
			PRIMARY Class 2	3		
			PRIMARY Class 3	4		
			PRIMARY Class 4	5		
			PRIMARY Class 5	6		
			PRIMARY Class 6	7		
			PRIMARY Class 7	8		
			PRIMARY Class 8	9		
			SECONDARY Form 1	10		
			SECONDARY Form 2	11		
			SECONDARY Form 3	12		
			SECONDARY Form 4	13		
			A Level Form 5	14		
			A Level Form 6	15		
			Certificate Year 1	16		
			Diploma Year 1	17		
			Diploma Year 2	18		
			UNIVERSITY 1 st Year	19		
			UNIVERSITY 2 st Year	20		
			UNIVERSITY 3 st Year	21		
			UNIVERSITY 4 st Year and above	22		
			DON'T KNOW	-8		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			REFUSED	-9		
112	Redacted	What is the highest [class] you completed at that level?	CLASS	integer	IF item AGE >20	item 115
			DON'T KNOW	-8	IF item AGE =<20 AND item 107 != 2	item 115
			REFUSED	-9		
113	adlstregs	When was the last time you regularly attended school? Would you say it was less than a year ago or more than a year ago?	LESS THAN 1 YEAR	1		
			1 YEAR OR LONGER	2		
			DON'T KNOW	-8		
			REFUSED	-9		
114	adnosreas	Why do you NOT go to school?	I HAVE BEEN SICK	1	IF item 114 != 96	item 115
			I DON'T FEEL SAFE TRAVELING TO SCHOOL	2		
			I DON'T FEEL SAFE WHILE IN SCHOOL	3		
			I DON'T LIKE SCHOOL	4		
			I HAVE TO LOOK AFTER MY FAMILY	5		
			THERE'S NOT ENOUGH MONEY TO SEND ME TO SCHOOL	6		
			SCHOOL IS TOO FAR AWAY	7		
			I HAVE TO WORK	8		
			I HAVE A CHILD OR I AM PREGNANT	9		
			I MISSED TOO MUCH SCHOOL BECAUSE OF MY PERIOD (MENSTRUATION)	10		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
114OTH	Redacted	Specify other		text		
115	work12mo	Have you done any work in the last 12 months for which you received cash or a form of non-monetary payment?	YES	1	IF item 115 = 2, -8, -9	item 201
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
116	work7day	Have you done any work in the last seven days for which you received cash or a form of non-monetary payment?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	INDIVIDUAL REFUSAL OR WITHDRAWAL
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		MODULE 2: MARRIAGE				

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
INSTR2	Process variable removed from dataset	Now I would like to ask you about your current and previous relationships and/or marriages.				
201	evermar	Have you ever been married or lived together with a [man/woman] as if married?	YES	1	IF item 201 = 2, -8, -9	item 301
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
202	widow	Have you ever been widowed? That is, did a spouse ever pass away while you were still married or living with them?	YES	1	SKIP IF item 201 = 2, -8, -9	
			NO	2		
			DON'T KNOW	-8		
			REFUSE TO ANSWER	-9		
203	curmar	What is your marital status now: are you married, living together with someone as if married, widowed, divorced, or separated?	MARRIED	1	IF item CURMAR = 3, 4, 5, -8, -9	item 301
			LIVING TOGETHER	2		
			WIDOWED	3		
			DIVORCED	4		
			SEPARATED	5		
			DON'T KNOW	-8		
			REFUSED	-9		
INSTR	Process variable removed from dataset	The next several questions are about your current spouse or partner(s).			IF gender = 2	item 212
204	numwif	Altogether, how many wives or live-in partners do you have?	NUMBER OF WIVES OR LIVE-IN PARTNERS	integer	IF item 204 = -8, -9	item 301
	numwifdk	Please provide the reason this previous question was left blank: Altogether, how many wives or live-in partners do you have?	DON'T KNOW	-8		
			REFUSED	-9		
205	reviewwife	The Household Schedule listed [INSERT NUMBER OF REPORTED PARTNERS] household members as your wives/partners. Please review the list below. Are all of the listed household members your wives/partners who live in the household?	YES	1	IF item 205 = 1	item 208
		[DISPLAY QXA1205_LIST]	NO	2		
group start						
206	Redacted	Is [HHRNAME**] your wife/partner?	YES	1		
			NO	2		
207	Redacted	Does [HHRNAME**] live in the household?	YES	1		
			NO	2		
group end						
208	npyn	Do you have additional spouse(s)/partner(s) that live with you?	YES	1	IF item 208 = 2	item 211
			NO	2		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
209	npnum	How many additional spouse(s)/partners(s) live with you?		integer		
group start						
210	Redacted	Please enter the name of your spouse/partner that lives with you.		text		
			DON'T KNOW	-8		
			REFUSED	-9		
group end						
211	wifliveew	How many wives or live-in partners do you have who live elsewhere?		integer	ALL	item 301
	wifliveewdk	Please provide the reason this previous question was left blank: HOW MANY WIVES OR LIVE-IN PARTNERS DO YOU HAVE WHO LIVE ELSEWHERE?	DON'T KNOW	-8		
			REFUSED	-9		
212	huslivew	Is your husband or partner living with you now or is he staying elsewhere?	LIVING TOGETHER	1	IF item 212 = 2 AND COUNT OF item 205 = 0	item 217
			STAYING ELSEWHERE	2	IF item 212 = -8, -9	item 217
			DON'T KNOW	-8		
			REFUSE TO ANSWER	-9		
213	Process variable removed from dataset	The household schedule listed [QXA1205_LIST] as your husband/partner who is living here. Is that correct?	YES	1	IF item HHQXHUS2 = 1, -8, -9	item 217
			NO	2		
			DON'T KNOW	-8		
			REFUSE TO ANSWER	-9		
214	Redacted	What is the name of your spouse/partner that lives with you? SHOW PARTICIPANT LIST AND ASK THEM TO INDICATE PARTNER.	[LIST OF PERSONS on HH ROSTER]		IF item 214 != 96	item 217
			NOT LISTED IN HOUSEHOLD	96		
216	Redacted	Please enter the name of your spouse/partner that lives with you.		text		
			DON'T KNOW	-8		
			REFUSED	-9		
217	husotwif	Does your husband or partner have other wives or does he live with other women as if married?	YES	1	IF item 217 = 2, -8, -9	item 301
			NO	2		
			DON'T KNOW	-8		
			REFUSE TO ANSWER	-9		
218	husnwif	Including yourself, in total, how many wives or live-in partners does your husband or partner have?	NUMBER OF WIVES OR LIVE-IN PARTNERS	integer		
	husnwifdk	Please provide the reason this previous question was left blank: INCLUDING YOURSELF, IN TOTAL, HOW MANY WIVES OR LIVE-IN PARTNERS DOES YOUR HUSBAND OR PARTNER HAVE?	DON'T KNOW	-8		
			REFUSE TO ANSWER	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item =2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 3: REPRODUCTION**			IF gender = 1	item 345
INSTR	Process variable removed from dataset	Now I would like to ask you questions about your pregnancies and your children.				
301	pregnum	How many times have you been pregnant including a current pregnancy?	NUMBER OF TIME(S)	integer	IF item 301 = 0, -8, -9	item 344
		ENTER '0' IF NONE.		-8		
	pregnumdk	Please provide the reason this previous question was left blank: HOW MANY TIMES HAVE YOU BEEN PREGNANT INCLUDING A CURRENT PREGNANCY?	DON'T KNOW			
			REFUSED	-9		
302	liveb	Have you ever had a pregnancy that resulted in a live birth?	YES	1	IF item 302 = 2, -8, -9	item 344
		A live birth is when the baby shows signs of life, such as breathing, beating of the heart or movement.	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
303	childa2012	How many live births have you had since the 1st of January, 2014?	NUMBER OF LIVE BIRTHS	integer	IF item 302 = 2, -8, -9	item 344
		ENTER '0' IF NONE.				
	childa2012dk	Please provide the reason this previous question was left blank: HOW MANY LIVE BIRTHS HAVE YOU HAD SINCE THE 1ST OF JANUARY, 2014?	DON'T KNOW	-8		
			REFUSED	-9		
INSTR	Process variable removed from dataset	Now I would like to ask you some questions about the last pregnancy that resulted in a live birth since the 1st of January, 2014.				
304	prgtwin	Did your last pregnancy result in birth to twins or more?	YES	1	IF item 304 = 2, -8, -9	item 306
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
group start						
305	Redacted	What is the name of the [BIRTHORDER*] born child from your last pregnancy that resulted in a live birth? A live birth is when the baby shows signs of life, such as breathing, beating of the heart or movement.		text		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
		IF THE CHILD WAS NOT NAMED BEFORE DEATH, INPUT BIRTH AND THE BIRTH ORDER NUMBER. FOR EXAMPLE, "BIRTH 1".				
PRGTGP	Process variable removed from dataset	WAS THERE ANOTHER MULTIPLE BORN ALIVE?	YES	1	IF PRGTGP = 1	REPEAT item 305
			NO	2	IF PRGTGP= 2	item 307
group end						
306	Redacted	What is the name of the child from your last pregnancy that resulted in a live birth? A live birth is when the baby shows signs of life, such as breathing, beating of the heart or movement. IF THE CHILD WAS NOT NAMED BEFORE DEATH, INPUT BIRTH 1.	NAME	text		
307	prgcare	When you were pregnant with [CHILDLAST/PRGTWINNAME*], did you visit a health facility for antenatal care?	YES	1	IF item 307 = 2	item 309
			NO	2	IF item 307 = -8, -9	item 316
			DON'T KNOW	-8		
			REFUSED	-9		
308	prgnmvsts	When you were pregnant with [NAME], how many times did you visit a health facility for antenatal care?	NUMBER OF TIMES	integer	ALL	item 310
	pregnmvstsdkrf		DON'T KNOW	-8		
		RECORD THE NUMBER OF VISITS REPORTED	REFUSED	-9		
309	pregncr	What is the main reason you did not visit a clinic for antenatal care when you were pregnant with [CHILDLAST/PRGTWINNAME*]?	CLINIC WAS TOO FAR AWAY	1	IF item 309 != 96	item 316
			COULD NOT TAKE TIME OFF WORK/TOO BUSY	2		
			COULD NOT AFFORD TO PAY FOR THE VISIT	3		
			DID NOT TRUST THE CLINIC STAFF	4		
			RECEIVED CARE AT HOME	5		
			DID NOT WANT AN HIV TEST DONE	6		
			HUSBAND/FAMILY WOULD NOT LET ME GO	7		
			USED TRADITIONAL BIRTH ATTENDANT/HEALE	8		
			COST OF TRANSPORT	9		
			RELIGIOUS REASONS	10		
			DID NOT THINK IT WAS IMPORTANT	11		
			WAS TOO SICK TO ATTEND ANC	12		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
309OTH	Redacted	Specify other		text	ALL	item 316

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
INSTR3B	Process variable removed from dataset	I will now be asking you questions on HIV testing. Please remember that your responses will be kept confidential and will not be shared with anyone else.				
310	hivtsbp	Have you ever tested for HIV before your pregnancy with [CHILDLAST/PRGTWINNAME*]?	YES	1	IF item 310 = 2, -8, -9	item 313
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
311	hivpsbp	Did you test positive for HIV before your pregnancy with [CHILDLAST/PRGTWINNAME*]?	YES	1	IF item 311 = 2, -8, -9	item 313
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
312	Redacted	At the time of your first antenatal care visit when you were pregnant with [CHILDLAST/PRGTWINNAME*], were you taking ARVs, that is, antiretroviral medications, to treat HIV?	YES	1	IF item 312 = 1	item 322
			NO	2	IF item 312 = 2, -8, -9	item 320
			DON'T KNOW	-8		
			REFUSED	-9		
313	hivtopg	During any of your visits to the antenatal care clinic when you were pregnant with [CHILDLAST/PRGTWINNAME*], were you offered an HIV test?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
314	hivtprg	Were you tested for HIV during any of your antenatal care clinic visits when you were pregnant with [CHILDLAST/PRGTWINNAME*]?	YES	1	IF item 314 = 1	item 319
			NO	2	IF item 314 = -8, -9	item 322
			DON'T KNOW	-8		
			REFUSED	-9		
315	hivtsnr	What is the main reason you were not tested for HIV during antenatal care with [CHILDLAST/PRGTWINNAME*]?	DID NOT WANT AN HIV TEST DONE / DID NOT	1	IF item 315 != 96	item 316
			DID NOT RECEIVE PERMISSION FROM SPOUSE/	2		
			AFRAID OTHERS WOULD KNOW ABOUT TEST R	3		
			DID NOT NEED TEST/LOW RISK	4		
			TEST WAS NOT AVAILABLE	5		
			DID NOT HAVE MONEY	6		
			WAITING TIME TOO LONG	7		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
315OTH	Redacted	Specify other		text	ALL	item 322

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
316	hivtstout	Were you tested for HIV outside of an antenatal care visit when you were pregnant with [NAME]?	YES	1	IF item 316 = 2, -8, -9	item 318
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
317	hivtswr_a	Where were you tested for HIV during your pregnancy with [NAME]?	MATERNITY CLINIC	a	IF item 317 != 96	item 318
	hivtswr_b		CCC/PSC (HIV CLINIC)	b		
	hivtswr_c	SELECT ALL THAT APPLY	OTHER CLINIC	c		
	hivtswr_d		LABORATORY	d		
	hivtswr_e		VCT	e		
	hivtswr_f		OUTREACH	f		
	hivtswr_g		MOBILE CLINIC	g		
	hivtswr_h		COMMUNITY/HOMESTEAD	h		
	hivtswr_x		OTHER (SPECIFY)	x		
	hivtswr_y		DON'T KNOW	y		
	no one selected		REFUSED	z		
317OTH	Redacted	Specify other		text		
318	hivtsnum	How many times did you test for HIV during your pregnancy with [NAME]?	NUMBER OF TIMES	integer	ALL	item 310
	hivtsnumdk	Please provide the reason this previous question was left blank: HOW MANY TIMES DID YOU TEST FOR HIV DURING YOUR PREGNANCY WITH ${namedis}*?	DON'T KNOW	-8		
			REFUSED	-9		
319	hivrtpg	What was the result of your last HIV test during your pregnancy with [CHILDLAST/PRGTWINNAME*]?	POSITIVE	1	IF item 319 = 2, 3, 4, -8, -9	item 322
			NEGATIVE	2		
			INCONCLUSIVE	3		
			DID NOT RECEIVE RESULTS	4		
			DON'T KNOW	-8		
			REFUSED	-9		
320	Redacted	Did you take ARVs during your pregnancy with [NAME]?	YES	1	IF item 320 = 1, -8, -9	item 322
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
321	Redacted	What was the main reason you did not take ARVs while you were pregnant with [CHILDLAST/PRGTWINNAME*]?	WAS NOT PRESCRIBED	1	IF item 321 !=96	item 322
			I FELT HEALTHY/NOT SICK	2		
			COST OF MEDICATIONS	3		
			COST OF TRANSPORT	4		
			RELIGIOUS REASONS	5		
			WAS TAKING TRADITIONAL MEDICATIONS	6		
			MEDICATIONS OUT OF STOCK	7		
			DID NOT WANT PEOPLE TO KNOW HIV STATUS	8		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			DID NOT RECEIVE PERMISSION FROM SPOUSE,	9		
			FEAR OF SIDE EFFECTS	10		
			REFERRED TO ANOTHER FACILITY AND WAS UN	11		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
321OTH	Redacted	Specify other		text		
322	brthwhr	Where did you give birth to [CHILDLAST/PRGTWINNAME*]?	AT HOME	1	IF item 322 = 1, 3, -8, -9	item 329
			AT A HEALTH FACILITY	2	IF item 322 = 2	item 323
			IN TRANSIT	3		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
322OTH	Redacted	Specify other		text		
323	hivtobr	Were you offered an HIV test during labor?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
324	hivttlb	Did you test for HIV during labor?	YES	1	SKIP IF item 311 = 1 OR item 319 = 1	
			NO	2	IF item 324 = 2, -8, -9	item 329
			DON'T KNOW	-8		
			REFUSED	-9		
325	Redacted	What was the result of that test?	POSITIVE	1	SKIP IF item 311 = 1 OR item 319 = 1	
			NEGATIVE	2	IF item 325 = 2, 3, 4, -8, -9	item 329
			INCONCLUSIVE	3		
			DID NOT RECEIVE RESULTS	4		
			DON'T KNOW	-8		
			REFUSED	-9		
326	Redacted	During labor, were you offered ARVs to protect [NAME] against HIV? SHOW ARV GRAPHIC IF PARTICIPANT IS UNSURE	YES	1	SKIP IF item 312 = 1 OR item 320 = 1	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
327	Redacted	During labor, did you take ARVs to protect [CHILDLAST/PRGTWINNAME*] against HIV? SHOW ARV GRAPHIC IF PARTICIPANT IS UNSURE	YES	1	SKIP IF item 312 = 1 OR item 320 = 1	
			NO	2	IF item 327 = 2, -8, -9	item 329
			DON'T KNOW	-8		
			REFUSED	-9		
328	Redacted	Did you continue to take the ARVs after delivery?	YES	1	SKIP IF item 312 = 1	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
329	carepsntl	After delivery did you visit a facility for post-natal care? The post-natal period is six weeks after delivery.	YES	1		
			NO	2	IF item 329=2,-8,-9	item 332

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			DON'T KNOW	-8		
			REFUSED	-9		
330	hivtspntl	Were you offered an HIV test during any post-natal visit to facility?	YES	1		
		Post-natal visits would be those within the first 6 weeks following your delivery.	NO	2	IF item 330=2,-8,-9	item 332
			DON'T KNOW	-8		
			REFUSED	-9		
331	hivpsntlnm	How many times did you test for HIV after delivery during postnatal care?	NUMBER OF TIMES	integer	ALL	
	hivpsntlnmdkrf	RECORD THE NUMBER OF TIMES. IF NOT TESTED, RECORD '0'.	DON'T KNOW	-8		
			REFUSED	-9		
332	Redacted	When did you give birth to [CHILDLAST/PRGTWINNAME*]?	DAY	integer		
		PROMPT IF REQUIRED: "Please give your best guess."	DON'T KNOW DAY	98		
			REFUSED DAY	99		
	Redacted		MONTH	integer		
			DON'T KNOW MONTH	98		
			REFUSED MONTH	99		
	birthyr1		YEAR	integer		
	ch_birthyear		DON'T KNOW YEAR	9998		
			REFUSED YEAR	9999		
group start						
333	childlive1 ch_childlive	Is [CHILDLAST/PRGTWINNAME*] still alive?	YES	1	IF item 333* = 1, -8, -9	item 336
			NO	2		
			DON'T KNOW	-8		
			REFUSE	-9		
334	Redacted	How old was[CHILDLAST/PRGTWINNAME*] when he/she died?	YEARS _____		IF item 334 > 0, -8, -9	item 339
		KEY '0' IF CHILD WAS LESS THAN ONE YEAR OLD.	DON'T KNOW	-8		
			REFUSED	-9		
335	Redacted	How old was [CHILDLAST/PRGTWINNAME*] in months when he/she died?	MONTHS _____		ALL	item 339
		KEY '0' IF CHILD WAS LESS THAN ONE MONTH OLD.	DON'T KNOW	-8		
			REFUSED	-9		
336	childlivewith1 ch_childlivewith	Is [CHILDLAST/PRGTWINNAME*] living with you?	YES	1	IF item 336 = 2	item 339
			NO	2		
337	hhlnchild1	RECORD HOUSEHOLD LINE NUMBER OF CHILD RECORD '0' IF CHILD NOT LISTED IN HOUSEHOLD	HOUSEHOLD LINE NUMBER	integer		
338	Redacted	Did [NAME] take any ARVs to stop [him/her] from getting HIV infection? This would be before [NAME]'s first HIV test.	YES	1	SKIP IF item 311 !=1 AND item 319 !=1	
	ch_childarv		NO	2		
			DON'T KNOW	-8		
			REFUSE	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
339	childbrstfd1	Did you ever breastfeed [CHILDLAST/PRGTWINNAME*]?	YES	1	IF item 339 = 3, -8, -9	item 343
	ch_childbrstfd		NO, NEVER BREASTFED	2	IF item 339 = 2	item 341
			NO, CHILD NOT ALIVE	3		
			DON'T KNOW	-8		
			REFUSED	-9		
340	childbrstfddurw1	For how long did you breastfeed [CHILDLAST/PRGTWINNAME*]?	WEEKS	integer		
	ch_childbrstfddurw	DO NOT READ: ONLY ONE OPTION MAY BE SELECTED. FOR EXAMPLE, ANSWER ONLY IN WEEKS OR IN MONTHS.	MONTHS	integer		
		CODE '0" WEEKS IF LESS THAN 1 WEEK.	STILL BREASTFEEDING	96		
			DON'T KNOW	-8		
			REFUSED	-9		
341	childfeed1	How did you feed [CHILDLAST/PRGTWINNAME*] when they were 0-6 months?	EXCLUSIVE BREAST FEEDING	1	IF item 341 = 1, -8, -9	item 343
	ch_childfeed		BREAST FEEDING AND SUBSTITUTES	2	IF item 341 = 2, 3, 4, 5	item 342
			BREAST-MILK SUBSTITUTES	3		
			FAMILY DIET	4		
			COMPLEMENTARY FEEDS	5		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
341OTH	Redacted	Specify other		text		
342	childaltfood_a1	What are the reasons (NAME) was given food/drinks other than breast milk?	NOT ENOUGH BREAST MILK	a	IF item 342 != 96	item 343
	ch_childaltfood_a					
	childaltfood_b1	PROBE: "Anything else?"	BABY CRIED TOO MUCH	b		
	ch_childaltfood_b					
	childaltfood_c1	RECORD ALL MENTIONED	CULTURAL REASONS	c		
	ch_childaltfood_c					
	childaltfood_d1		WORK RELATED OBLIGATIONS	d		
	ch_childaltfood_d					
	Redacted		WEATHER TOO HOT	e		
	Redacted					
	Redacted		FIRST MILK NOT GOOD FOR BABIES	f		
	Redacted					
	Redacted		I WAS AFRAID OF INFECTING MY BABY WITH H	g		
	Redacted					
	childaltfood_x1		OTHER (SPECIFY)	x		
	ch_childaltfood_x					
	childaltfood_y1		DON'T KNOW	y		
	ch_childaltfood_y					
	childaltfood_z1		REFUSED	z		
	ch_childaltfood_z					
342OTH	Redacted	Specify other		text		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
343	Process variable removed from dataset	Thank you for the information regarding [CHILDLAST/PRGTWINNAME*].			IF item 304 = 1	RETURN TO item 333 FOR EACH VALUE OF item 305*
group end						
INSTR	Process variable removed from dataset	Now I would like to ask you about current pregnancies.				
344	pregnant	Are you currently pregnant?	YES	1	IF item 344 = 1	item 401
			NO	2		
			DON'T KNOW/UNSURE	-8		
			REFUSED	-9		
INSTR	Process variable removed	I will now ask you about family planning.				
345	Redacted	Would you like to have a/another child?	YES	1		
			NO	2		
			UNDECIDED/DON'T KNOW	-8		
			REFUSED	-9		
346	avoidpreg	Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?	YES	1	IF item 346 = -8, -9	item 401
			NO	2	IF item 346 = 2, 3	item 345
			NOT SEXUALLY ACTIVE	3		
			DON'T KNOW	-8		
			REFUSED	-9		
347	cmethod_a	Which methods are you or your partner using? SELECT ALL THAT APPLY.	FEMALE STERILIZATION	A	IF item 347 != X	item 401
	Redacted		MALE STERILIZATION	B		
	cmethod_c		PILL	C		
	cmethod_d		IUD/"COIL"	D		
	cmethod_e		INJECTIONS	E		
	cmethod_f		IMPLANT	F		
	cmethod_g		CONDOM	G		
	Redacted		FEMALE CONDOM	H		
	cmethod_i		RHYTHM/NATURAL METHODS	I		
	cmethod_j		WITHDRAWAL	J		
	cmethod_k		NOT HAVING SEX	K		
	cmethod_x		OTHER (SPECIFY)	X		
	cmethod_y		DON'T KNOW	Y		
	no one selected		REFUSED	Z		
336OTH	Redacted	Specify other		text		
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 4: CHILDREN**				

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
INSTR	Process variable removed from dataset	I am going to ask you a number of questions about your child/children regarding their health and where they get their health services. I will begin with your youngest child. LIST OF CHILDREN < 14 ASSIGNED TO [INNAME]				
group start						
INSTR	Process variable removed from dataset	Now I am going to ask you questions for [CHILD*].				
401	age	How old was [CHILD*] at his/her last birthday? IF [CHILD*] IS LESS THAN 1 YEAR OLD, KEY 0 HERE AND KEY AGE IN MONTHS ON NEXT SCREEN.	AGE IN YEARS	integer	IF item 401>=1 & item 401 <=5 IF item 401 = 0	item 402B item 402A
402A	agem	How old is [CHILD*] in months?	AGE IN MONTHS	integer	ALL	item 403
402B	Process variable removed from dataset	You said that [CHILD*] was [KIDAGEY*]. How many months over [KIDAGEY*] is [CHILD*]?	MONTHS OVER	integer	ALL	item 403
403	gender	Is [CHILD*] a boy or girl?	BOY GIRL DON'T KNOW REFUSED	1 2 -8 -9		
404	ch_kidenroll	Is [CHILD*] enrolled in school?	YES NO, CURRENTLY NOT IN SCHOOL NO, TOO YOUNG TO BE IN SCHOOL DON'T KNOW REFUSED	1 2 3 -8 -9	IF item 404 =3, -8, -9 IF item 404 =1	item 410 item 406
405	ch_kidnoschl	Why is [CHILD*] not in school?	CHILD WAS TOO SICK TO ATTEND SCHOOL IT IS NOT SAFE TO TRAVEL TO SCHOOL IT IS NOT SAFE IN SCHOOL CHILD DOES NOT LIKE/WANT TO GO TO SCHOOL HELPS TO LOOK AFTER FAMILY CHILD HAS TO WORK NO MONEY FOR SCHOOL FEES, AND TRANSPORT SCHOOL IS TOO FAR AWAY HAS A CHILD OR IS PREGNANT (GIRLS ONLY) OTHER (SPECIFY) DON'T KNOW REFUSED	1 2 3 4 5 6 7 8 9 96 -8 -9	IF item 405 != 96	item 406
405OTH	Redacted	Specify other		text		
406	ch_kidhighlvl	What is the highest level of school [NAME] has attended?	PRE PRIMARY PRIMARY DON'T KNOW REFUSED	1 2 -8 -9		
407	ch_kidclass	What class/grade is [CHILD*] in now?	CLASS/GRADE DON'T KNOW	integer -8	ALL	item 410

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			REFUSED	-9		
408	ch_kidenrlstyr	Did [CHILD*] attend school during the previous school year?	YES	1	IF item 408 = 2, -8, -9	item 410
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
409	ch_kidclasslstyr	What class/grade was [CHILD*] during the previous school year?	CLASS/FORM/YEAR	integer		
	ch_kidclasslstyrdk		DON'T KNOW	-8		
			REFUSED	-9		
410	ch_kidcrcm	Is [CHILD*] circumcised? Circumcision is the complete removal of the foreskin from the penis. If you feel comfortable, I can show you a picture of a completely circumcised penis.	YES	1	SKIP IF item 403 = 2	
			NO	2	IF item 410 = 2, -8, -9	item 412
			DON'T KNOW	-8		
			REFUSED	-9		
411	ch_kidcrcmprt	Who circumcised [CHILD*]?	HEALTH CARE WORKER	1	SKIP IF item 403 = 2	
			TRADITIONAL PRACTITIONER / CIRCUMCISER	2	IF item 411 != 96	item 412
			~~MIDWIFE~~	~~3~~		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSE TO ANSWER	-9		
411OTH	Redacted	Specify other		text		
412	ch_kidhivtestevr	Has [CHILD*] ever been tested for HIV?	YES	1	IF item 412 = 1	item 414
			NO	2	IF item 412 = -8, -9	item 436
			DON'T KNOW	-8		
			REFUSED	-9		
413	ch_kidhivwhynever_a	Why has [CHILD*] never been tested for HIV?	DID NOT PERCEIVE NEED	a	IF item 413 != 96	item 436
	ch_kidhivwhynever_b		DON'T KNOW WHERE TO TEST	b		
	ch_kidhivwhynever_c	SELECT ALL THAT APPLY.	TEST COSTS TOO MUCH	c		
	ch_kidhivwhynever_d		TRANSPORT COSTS TOO MUCH	d		
	ch_kidhivwhynever_e		TOO FAR AWAY	e		
	ch_kidhivwhynever_f		AFRAID OTHERS WILL KNOW ABOUT TEST RES|	f		
	ch_kidhivwhynever_g		DON'T NEED TEST/LOW RISK	g		
	ch_kidhivwhynever_h		DID NOT RECEIVE PERMISSION FROM SPOUSE|	h		
	Redacted		AFRAID SPOUSE/PARTNER/FAMILY WILL KNO|	i		
	ch_kidhivwhynever_j		DON'T WANT TO KNOW CHILD HAS HIV	j		
	Redacted		CANNOT GET TREATMENT FOR HIV	k		
	ch_kidhivwhynever_l		TEST KITS NOT AVAILABLE	l		
	ch_kidhivwhynever_m		RELIGIOUS REASONS	m		
	ch_kidhivwhynever_n		NEVER OFFERED	n		
	ch_kidhivwhynever_x		OTHER (SPECIFY)	x		
	ch_kidhivwhynever_y		DON'T KNOW	y		
	ch_kidhivwhynever_z		REFUSED	z		
413OTH	Redacted	Specify other		text	ALL	item 436
414	ch_kidhivtestm	What month and year was [CHILD*]'s last HIV test done?	MONTH	date		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
	ch_kidhivtesty		DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
			YEARS	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
415	ch_kidhivlastresult	What was [CHILD*]'s last HIV test result?	POSITIVE	1	IF item 415 = 2, 3, 4, -8, -9	item 436
			NEGATIVE	2		
			INCONCLUSIVE	3		
			DID NOT RECEIVE RESULTS	4		
			DON'T KNOW	-8		
			REFUSED	-9		
416	Redacted	What was the month and year of [CHILD*]'s first HIV positive test result?	MONTH	date		
		This will be the very first HIV positive test result that you have received.	DON'T KNOW MONTH	-8		
		PROBE TO VERIFY DATE.	REFUSED MONTH	-9		
	Redacted	PROMPT IF REQUIRED: "Please give your best guess."	YEARS	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
417	Redacted	Has [CHILD*] ever received HIV medical care from a health care worker?	YES	1	IF item 417= 2	item 420
			NO	2	IF item 417= -8, -9	item 424
			DON'T KNOW	-8		
			REFUSED	-9		
418	Redacted	Has [CHILD*] currently linked and enrolled to receive HIV care from a health facility?	YES - SHOWN PROOF	1	IF item 418 = 2, 3, -8, -9	item 421
		IF THE PARTICIPANT SAYS YES, ASK TO SEE THE CHILD'S HIV CLINIC CARD (CCC YELLOW CARD) OR BOTTLE OF ARV PILLS.	YES - NOT SHOWN PROOF	2		
			NO	3		
			DON'T KNOW	-8		
			REFUSED	-9		
419	Redacted	What is [CHILD*] current HIV Clinic Number (CCC Yellow Card Number)		text	ALL	item 421
			CCC YELLOW CARD NOT SHOWN	96		
			DON'T KNOW	-8		
			REFUSED	-9		
420	Redacted	What is the main reason why [CHILD*] has never seen a health care worker for HIV medical care?	FACILITY IS TOO FAR AWAY	1	IF item 420 != 96	item 424
			I DON'T KNOW WHERE TO GET HIV MEDICAL CARE FOR CHILD	2		
			COST OF CARE	3		
			COST OF TRANSPORT	4		
			I DON'T THINK CHILD NEEDS IT, HE/SHE IS NOT SICK	5		
			I FEAR PEOPLE WILL KNOW THAT CHILD HAS HIV IF I TAKE HIM/HER TO A CLINIC	6		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			RELIGIOUS REASONS	7		
			CHILD IS TAKING TRADITIONAL MEDICINE	8		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
420OTH	Redacted	Specify other		text		item 424
421	Redacted	What month and year did [CHILD*] first see a health care worker for HIV medical care?	MONTH	date		
		PROBE TO VERIFY DATE.	DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	Redacted		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED	-9		
422	Redacted	What month and year did [CHILD*] last see a health care worker for HIV medical care?	MONTH	date	IF CURRENT DATE - item 422 <7 MONTHS	item 424
			DON'T KNOW MONTH	-8	IF item 422 = -8, -9	item 424
			REFUSED MONTH	-9		
	Redacted		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED	-9		
423	Redacted	What is the main reason for [CHILD*] not seeing a health care worker for HIV medical care for more than 6 months?	FACILITY IS TOO FAR AWAY	1	IF item 423 != 96	item 424
			I DON'T KNOW WHERE TO GET HIV MEDICAL CARE FOR CHILD	2		
			COST OF CARE	3		
			COST OF TRANSPORT	4		
			I DON'T THINK CHILD NEEDS IT, HE/SHE IS NOT SICK	5		
			I FEAR PEOPLE WILL KNOW THAT CHILD HAS HIV IF I TAKE HIM/HER TO A CLINIC	6		
			RELIGIOUS REASONS	7		
			CHILD IS TAKING TRADITIONAL MEDICINE	8		
			NO APPOINTMENT SCHEDULED/DID NOT MISS MOST RECENT APPOINTMENT	9		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
423OTH	Redacted	Specify other		text		
424	ch_kidcd4	Has [CHILD*] ever had a CD4 count test?	YES	1	IF item 424 = 2, -8, -9 AND item 417= 1	item 423
		The CD4 count tells you how sick you are with HIV.	NO	2	IF item 424 = 2, -8, -9 AND item 417= 2, -8, -9	item 436
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
425	Redacted	What month and year was [CHILD*] last tested for his/her CD4 count?	MONTH	date	IF item 425 = -8, -9	item 436
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	Redacted		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
426	Redacted	Did [CHILD*] ever have a viral load test? This is a test that measures how much HIV is in your blood.	YES	1	SKIP IF item 417!= 1	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
427	Redacted	When did [CHILD*] last have a viral load test?	MONTH	date	SKIP IF item 426 != 1	
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	Redacted		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
428	Redacted	Were you told the result of [CHILD*]'s viral load test?	YES	1	SKIP IF item 426 != 1	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
423	ch_kidarvs	Has [CHILD*] ever taken ARVs, that is, antiretroviral medications, to treat his/her HIV infection? SHOW AID IF PARTICIPANT IS UNSURE	YES	1	IF item 423 = 1	item 431
			NO	2	IF item 423 = -8, -9	item 435
			DON'T KNOW	-8		
			REFUSED	-9		
430	Redacted	What is the main reason [CHILD*] has never taken ARVs?	CHILD IS NOT ELIGIBLE FOR TREATMENT	1	IF item 430 != 96	item 435
			HEALTH CARE PROVIDER DID NOT PRESCRIBE	2		
			HIV MEDICINES NOT AVAILABLE	3		
			DO NOT THINK [NAME] NEEDS IT, HE/SHE IS N(	4		
			COST OF MEDICATIONS	5		
			COST OF TRANSPORT	6		
			RELIGIOUS REASONS	7		
			CHILD IS TAKING TRADITIONAL MEDICATIONS	8		
			FEAR OF PEOPLE KNOWING	9		
			CHILD DID NOT LIKE TASTE OF MEDICINE	10		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
430OTH	Redacted	Specify other		text		
431	Redacted	What month and year did [CHILD*] first start taking ARVs? PROBE TO VERIFY DATE.	MONTH	date		
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
	Redacted		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
432	ch_kidarvsnow	Is [CHILD*] currently taking ARVs, that is, antiretroviral medications?	YES	1	IF item 432 = 1	item 434
		By currently, I mean that [CHILD*] may have missed some doses but [CHILD*] is still taking ARVs.	NO	2	IF item 432 = -8, -9	item 435
			DON'T KNOW	-8		
			REFUSED	-9		
433	Redacted	Can you tell me the main reason why [CHILD*] is not currently taking ARVs?	I HAVE TROUBLE GIVING CHILD A TABLET EVERYDAY	1	IF item 433 != 96	item 435
			CHILD HAD SIDE EFFECTS/RASH	2		
			FACILITY/PHARMACY TOO FAR AWAY TO GET MEDICATION REGULARLY	3		
			COST OF MEDICATIONS	4		
			COST OF TRANSPORT	5		
			CHILD IS HEALTHY, HE/SHE IS NOT SICK	6		
			FACILITY WAS OUT OF STOCK	7		
			RELIGIOUS REASONS	8		
			CHILD IS TAKING TRADITIONAL MEDICATIONS	9		
			MEDICINE BITTER	10		
			THERE ARE TOO MANY PILLS	11		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
433OTH	Redacted	Specify other		text		item 435
434	Redacted	People sometimes forget to take all of their ARVs every day. In the past 30 days, how many days has [CHILD*] missed taking any ARV pills?	DAYS	integer		
		CODE '0' FOR NONE.	DON'T KNOW	-8		
			REFUSED	-9		
435	Redacted	Is [CHILD*] currently taking Septrin, cotrimoxazole, or Dapsone?	YES	1		
		Septrin, cotrimoxazole, or Dapsone is a medicine recommended for people with HIV, even if they have not started treatment for HIV. It helps prevent certain infections but it is not treatment for HIV.	NO	2		
		By currently, I mean that [CHILD*] may have missed some doses but is still taking Septrin, cotrimoxazole, or Dapsone.	I DON'T KNOW WHAT IT IS	3		
		SHOW AID IF PARTICIPANT IS UNSURE	REFUSED	-9		
436	ch_kidvisttbclin	Has [CHILD*] ever visited a clinic for tuberculosis (TB) diagnosis or treatment?	YES	1		
			NO	2		
			DON'T KNOW	-8		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			REFUSED	-9		
437	ch_kiddiagtb	Have you ever been told by a health care worker that [CHILD*] had TB?	YES	1	IF item 437 = 2, -8, -9	item 441
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
438	Redacted	Was [CHILD*] ever treated for TB?	YES	1	IF item 438 = 2, -8, -9	item 441
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
439	Redacted	Is [CHILD*] currently on treatment for TB?	YES	1	IF item 439 = 2, -8, -9	item 441
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
440	Redacted	The last time [CHILD*] was treated for TB, did [CHILD*] complete at least 6 months of treatment?	YES	1	IF item 415 = 2, 3, 4, -8, -9 OR item 412 != 1	item 444
			NO, THE MEDICINE WAS STOPPED IN LESS THA	2		
			NO, [NAME] IS STILL ON TREATMENT	3		
			DON'T KNOW	-8		
			REFUSED	-9		
441	ch_kidiptever	Has [CHILD*] ever taken a medicine called Isoniazid, IPT or INH to prevent developing TB?	YES	1		
		Isoniazid is medication that prevents TB. It is given to people with HIV or people who are in contact with someone with TB.	NO	2		
		DO NOT READ: SHOW AID IF UNSURE.	DON'T KNOW	-8		
			REFUSED	-9		
442	Redacted	Is [CHILD*] currently taking INH?	YES	1	SKIP IF item 441 != 1	
		By currently, I mean that [CHILD*] may have missed some doses but is still taking INH.	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
443	Redacted	How many months has [CHILD*] taken INH?	NUMBER OF MONTHS	integer	SKIP IF item 441 != 1	
	Redacted	Please provide the reason this previous question was left blank: How many months has ${curchnm}* taken INH?	DON'T KNOW	-8		
			REFUSED	-9		
444	Process variable removed from dataset	Thank you for the information about [CHILD*].	YES	1	IF item 444 = 1	RETURN TO item 401
			NO	2		
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
group end						

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
MTITLE		**MODULE 5: MALE CIRCUMCISION**			SKIP IF gender = 2	
INSTR	Process variable removed from dataset	I will be asking a few questions about circumcision. Circumcision is the complete removal of the foreskin from the penis. If you feel comfortable, I can show you a picture of a completely circumcised penis. SHOW AID				
501	mcstatus	Some men are uncomfortable talking about circumcision but it is important for us to have this information. Some men are circumcised. Are you circumcised?	YES	1	IF item 501 = 1	item 503
			NO	2	IF item 501 = -8, -9	
			DON'T KNOW	-8		
			REFUSED	-9		
502	mcplans	Are you planning to get circumcised?	YES	1	ALL RESPONSES	M5CONT
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
503	mcage	How old were you when you were circumcised? IF LESS THAN ONE YEAR, CODE '0' PROMPT IF REQUIRED: "Please give your best guess."	AGE IN YEARS	integer		
	mcagedk	Please provide the reason this previous question was left blank: HOW OLD WERE YOU WHEN YOU WERE CIRCUMCISED?	DON'T KNOW	-8		
			REFUSED	-9		
504	mcwho	Who did the circumcision?	HEALTH CARE WORKER	1	IF item 504 != 96	item 601
			TRADITIONAL PRACTITIONER / CIRCUMCISER	2		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
504OTH	Redacted	Specify other		text		
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 6: SEXUAL ACTIVITY**				

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
INSTR	Process variable removed from dataset	In this part of the interview, I will be asking questions about your sexual relationships and practices. These questions will help us have a better understanding of how they may affect your life and risk for HIV. Let me assure you again that your answers are completely confidential and will not be shared with anyone. If there are questions that you do not want to answer, we can go to the next question.				
601	firstsxage	How old were you when you had vaginal sex for the very first time? Vaginal sex is when a penis enters a vagina	AGE IN YEARS	integer		
			NEVER HAD VAGINAL SEX	-7		
	firstsxagedk	Please provide the reason this previous question was left blank: How old were you when you had sex for the very first time?	DON'T KNOW	-8		
			REFUSED	-9		
602	vgnsx12mo	Have you had vaginal sex in the last 12 months?	Yes	1		
			No	2		
			DON't know	-8		
			REFUSED	-9		
603	vgnsxcon	Did you or your partner use a condom the last time you had vaginal sex?	Yes	1		
			No	2		
			DON't know	-8		
			REFUSED	-9		
604	analsxhrd	People have sex in different ways. Some have vaginal sex. Some have anal sex. Anal sex is when a penis enters a person's anus. Have you heard of anal sex?	Yes	1	IF item 604 != 1	item 606
			No	2		
			DON't know	-8		
			REFUSED	-9		
604a	analsxever	Have you ever had anal sex?	Yes	1	IF item != 1	item 606
			No	2		
			DON't know	-8		
			REFUSED	-9		
604b	analsx12mo	Have you had anal sex in the last 12 months?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
605	analsxcon	Did you or your partner use a condom the last time you had anal sex?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
606	lifetimesex	People often have sex with different people over their lifetime. In total, with how many different people have you had sex in your lifetime?	NUMBER OF SEXUAL PARTNERS IN LIFETIME	integer		
	lifetimesxdk	PROMPT IF REQUIRED: "Please give your best guess."	DON'T KNOW	-8		
		IF NUMBER OF SEXUAL PARTNERS IS GREATER THAN 100, ENTER '100'	REFUSED	-9		
607	part12monum	In total, with how many different people have you had sex in the last 12 months?	NUMBER OF SEXUAL PARTNERS IN LAST 12 MC	integer	IF item 607 = 0,-8,-9	item 701
	part12modkr	IF NONE CODE '0'.	DON'T KNOW	-8		
		IF NUMBER OF SEXUAL PARTNERS IS GREATER THAN 100, CODE '100'	REFUSED	-9		
group start						
INSTR		Now I would like to ask you some questions about the people you have had sex with in the last 12 months. Let me assure you again that your answers are completely confidential and will not be told to anyone. I will first ask you about the most recent person you had sex with.				
608	partlivew1-3	Does the person you had sex with live in this household?	YES	1	IF item 608 = 2	item 611
			NO	2		
610	Redacted	Please select the name below from the household membership list. Please identify the person you had sex with.	[LIST OF PERSONS on HH ROSTER]		IF item 610 != 96	item 612
			NOT LISTED IN HOUSEHOLD	96		
611	Process variable removed from dataset	I would like to ask you for the initials of this person so I can keep track. They do not have to be the actual initials of this person.	INITIALS	text		
612	partrelation1-3	What is your relationship with [INITIALS]?	HUSBAND/WIFE	1	IF item 612 != 96	item 613
			LIVE-IN PARTNER	2		
			PARTNER, NOT LIVING WITH RESPONDENT	3		
			EX-SPOUSE/PARTNER	4		
			FRIEND/ACQUAINTANCE	5		
			SEX WORKER	6		
			SEX WORKER CLIENT	7		
			STRANGER	8		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
612OTH	Redacted	Specify other		text		
613	partgend1-3	Is [INITIALS] male or female?	MALE	1		
			FEMALE	2		
			DON'T KNOW	-8		
			REFUSED	-9		
614	partage1-3	How old is [INITIALS]? PROMPT IF REQUIRED: "Please give your best guess."	AGE IN YEARS	integer		
	partagedk1-3	Please provide the reason this previous question was left blank: How old is [PARTNER'S NAME] ? Please give your best guess.	DON'T KNOW	-8		
			REFUSED	-9		
615	partlastcndm1-3	The last time you had sex with [INITIALS] was a condom used?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
616	partlastsup1-3	Did you enter into a sexual relationship with [INITIALS] because [INITIALS] provided you with or you expected that [INITIALS] would provide you gifts, help you to pay for things, or help you in other ways?	YES	1	SKIP IF item 612 = 6, 7	
			NO	2	IF item 616 = 2, -8, -9	item 619
			DON'T KNOW	-8		
			REFUSED	-9		
617	partlastsupwhat_a1-3	In the last 12 months, what have you received from [INITIALS]?	DID NOT RECEIVE ANYTHING	A	IF item 617 != 96	item 619
	partlastsupwhat_b1-3		MONEY	B		
	partlastsupwhat_c1-3		FOOD	C		
	Redacted		SCHOOL FEES	D		
	Redacted		EMPLOYMENT	E		
	partlastsupwhat_f1-3		GIFTS/FAVORS	F		
	Redacted		TRANSPORT	G		
	Redacted		SHELTER/RENT	H		
	Redacted		PROTECTION	I		
	partlastsupwhat_x1-3		OTHER (SPECIFY)	X		
	partlastsupwhat_y1-2		DON'T KNOW	Y		
	partlastsupwhat_z1-3		REFUSED	Z		
617OTH	Redacted	Specify other		text		
618	partlastetoh1-3	The last time you had sexual intercourse with [INITIALS] did either of you drink alcohol beforehand?	ONLY I WAS DRINKING	1		
			ONLY PARTNER WAS DRINKING	2		
			BOTH WERE DRINKING	3		
			NEITHER WAS DRINKING	4		
			DON'T KNOW	-8		
			REFUSED	-9		
619	partagain1-3	Do you expect to have sex with [INITIALS] again?	YES	1		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
620	parthivtest1-3	Have you ever taken an HIV test with(INITIALS) where you both received the test results together?	YES	1	IF item 620 = 1, -8, -9	item 622
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
621	parthivnotrsn1-3	What is the main reason you have never tested for HIV with [INITIALS] as a couple? READ RESPONSES ALOUD.	NOT A PARTNER/COUPLE	1	IF item 621 != 96	item 622
			NEVER DISCUSSED	2		
			WE ARE NOT AT RISK FOR HIV	3		
			PARTNER REFUSED	4		
			I REFUSED	5		
			WE KNOW OUR STATUS	6		
			FEAR	7		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
621OTH	Redacted	Specify other		text		
622	partknowhiv1-3	Does [INITIALS] know your HIV status? HIV status could mean you are HIV negative or HIV positive.	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
623	parthivsat	What is the HIV status of [INITIALS]? READ RESPONSES ALOUD.	THINK HE/SHE IS POSITIVE	1		
			HE/SHE TOLD ME HE/SHE IS POSITIVE	2		
			POSITIVE, TESTED TOGETHER	3		
			THINK HE/SHE IS NEGATIVE	4		
			HE/SHE TOLD ME HE/SHE IS NEGATIVE	5		
			NEGATIVE, TESTED TOGETHER	6		
			DON'T KNOW STATUS	7		
			REFUSED	-9		
624	Process variable removed from dataset	I will now ask you about the person you have had sex with previous to [INITIALS].				
group end						
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 7: SOCIAL NORMS, INTENTION TO ABSTAIN, SELF-EFFICACY AND ASSERTIVENESS**			IF age > 20	item 801
INSTR4	Process variable removed from dataset	Now I would like to ask you some questions about the future.				

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
701	adltsxbfmar	Will you have sex before you get married?	YES	1	SKIP IF item 601=1 or item 201=1	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
702	adltfrhvsx	Do you think all, many, some, a few or none of your friends are having sex?	ALL	1		
			MANY	2		
			SOME	3		
			A FEW	4		
			NONE	5		
			DON'T KNOW / DON'T KNOW WHAT SEX IS	-8		
			REFUSED	-9		
703	adltprfsxpart	Do you feel pressured by your boy/girl friend to have sex?	YES	1		
			NO	2		
			DON'T HAVE BOYFRIEND/GIRLFRIEND	3		
			DON'T KNOW	-8		
			REFUSED	-9		
704	adltnosx	Do you feel pressured by your friends to have sex?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
MTITLE		**MODULE 8: HIV/AIDS KNOWLEDGE AND ATTITUDES**				
INSTR	Process variable removed from dataset	Now I will ask you questions on your knowledge of HIV.				
801	onepartnr	Can the risk of HIV transmission be reduced by having sex with only one uninfected partner who has no other partners?	YES	1		
			NO	2		
			DON'T KNOW	3		
			REFUSED	-9		
802	mosquito	Can a person get HIV from mosquito bites?	YES	1		
			NO	2		
			DON'T KNOW	3		
			REFUSED	-9		
803	condoms	Can a person reduce their risk of getting HIV by using a condom every time they have sex?	YES	1		
			NO	2		
			DON'T KNOW	3		
			REFUSED	-9		
804	sharefood	Can a person get HIV by sharing food with someone who has HIV?	YES	1		
			NO	2		
			DON'T KNOW	3		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
805	healthyinf	Can a healthy-looking person have HIV?	YES	1		
			NO	2		
			DON'T KNOW	3		
			REFUSED	-9		
INSTR	Process variable removed from dataset	Now I would like to ask you some questions about people's attitudes towards people living with HIV.				
806	buyfood	Would you buy fresh vegetables from a shop keeper or vendor if you knew the person had HIV?	YES	1		
			NO	2		
			DON'T KNOW/NOT SURE/DEPENDS	-8		
			REFUSED	-9		
807	kidsschool	Do you think children living with HIV should be allowed to attend school with children who do not have HIV?	YES	1		
			NO	2		
			DON'T KNOW/NOT SURE/DEPENDS	-8		
			REFUSED	-9		
MTITLE		**MODULE 9: HIV PREVENTION INTERVENTIONS**			IF age > 25	
901	adlthrdhiv	Have you _**ever**_ heard of HIV?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
902	adthrhiv_a	From where have you heard about HIV?	SCHOOLS / TEACHERS	A	IF item 902 != X	item 903
	adthrhiv_b	PROBE: "Anywhere else?"	PARENTS / GUARDIAN / FAMILY	B		
	adthrhiv_c	RECORD ALL MENTIONED	FRIENDS	C		
	adthrhiv_d		RELIGIOUS LEADERS	D		
	adthrhiv_e		INTERNET	E		
	adthrhiv_f		MOBILE PHONE	F		
	adthrhiv_g		HEALTH PROVIDERS / DOCTORS / NURSES / CLINICAL OFFICERS	G		
	adthrhiv_h		TELEVISION / FILM	H		
	adthrhiv_i		RADIO	I		
	adthrhiv_j		COMMUNITY HEALTH WORKERS	J		
	adthrhiv_x		OTHER (SPECIFY)	X		
	adthrhiv_y		DON'T KNOW	Y		
	adthrhiv_z		REFUSED	Z		
902OTH	Redacted	Specify other		text		
903	adhivprv_a	Have you ever taken part in any of the program/activity where HIV prevention programs is taught?	NONE	A	IF item 903 = A, Y, Z	item 905
	adhivprv_b	SHOW PARTICIPANT LOGO FOR EACH PROGRAM	FAMILIES MATTER PROGRAM	B	IF item 903 != X	item 904
	adhivprv_c	SELECT ALL THAT APPLY	SISTER TO SISTER	C		
	adhivprv_d	READ RESPONSES ALOUD	YOUTH FOR YOU	D		
	adhivprv_e		YOUTH FOR REAL	E		
	adhivprv_f		POSITIVE TALK	F		
	adhivprv_g		AIDS ACTION CLUB	G		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
	adhivprv_h		TUSEME SCHOOL CLUB	H		
	Redacted		FEMINA-HIP YOUTH CLUBS	I		
	adhivprv_j		OTHER SCHOOL CLUBS	J		
	adhivprv_k		SHUGA RADIO LISTENING CLUB	K		
	Redacted		MABINTI TUSHIKE HATAMU	L		
	adhivprv_m		RIGHTS OF PASSAGE-ROPS	M		
	adhivprv_n		HOPES/MENTORSHIL	N		
	adhivprv_o		DREAMS	O		
	adhivprv_x		OTHER (SPECIFY)	X		
	adhivprv_y		DON'T KNOW	Y		
	adhivprv_z		REFUSED	Z		
903OTH	Redacted	Specify other		text		
904	wahivprv_a	Where did you take part in this/these program(s)?	SCHOOL	A		
	wahivprv_b		YOUTH CENTRE	B		
	wahivprv_c	SELECT ALL THAT APPLY	CLUB	C		
	wahivprv_d		CAMP	D		
	wahivprv_e		CHURCH	E		
	Redacted		MOSQUE	F		
	Redacted		TEMPLE	G		
	wahivprv_h		COMMUNITY ACTIVITY	H		
	wahivprv_x		OTHER (SPECIFY)	X		
	wahivprv_y		DON'T KNOW	Y		
	no one selected		REFUSED	Z		
904OTH	Redacted	Specify other		text		
905	adltishiv	Have you _ever_ discussed HIV with your parents or guardian?	YES	1	SKIP IF age > 18	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
MTITLE		**MODULE 10: HIV TESTING**				
INSTR	Process variable removed from dataset	I would now like to ask you some questions about HIV testing.				
1001	hivtstever	Have you ever **tested** for HIV?	YES	1	IF item 1001 = 1	item 1008
			NO	2	IF item 1001 = -8, -9	M6CONT
			DON'T KNOW	-8		
			REFUSED	-9		
1002	hivtstnors_a	Why have you never been tested for HIV?	DON'T KNOW WHERE TO TEST	A	IF item 1002 != X	item 1008
	hivtstnors_b	SELECT ALL THAT APPLY.	TEST COSTS TOO MUCH	B		
	hivtstnors_c		TRANSPORT COSTS TOO MUCH	C		
	hivtstnors_d		TOO FAR AWAY	D		
	hivtstnors_e		AFRAID OTHERS WILL KNOW ABOUT TEST RESI	E		
	hivtstnors_f		DON'T NEED TEST/LOW RISK	F		
	hivtstnors_g		DID NOT RECEIVE PERMISSION FROM SPOUSE/	G		
	hivtstnors_h		AFRAID SPOUSE/PARTNER/FAMILY WILL KNOV	H		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
	hivtstnors_i		DON'T WANT TO KNOW I HAVE HIV	I		
	hivtstnors_j		CANNOT GET TREATMENT FOR HIV	J		
	hivtstnors_k		TEST KITS NOT AVAILABLE	K		
	hivtstnors_l		RELIGIOUS REASONS	L		
	hivtstnors_x		OTHER (SPECIFY)	X		
	hivtstnors_y		DON'T KNOW	Y		
	hivtstnors_z		REFUSED	Z		
1002OTH	Redacted	Specify other		text		
1003	hflast12mo	Have you seen a health care worker in a health facility in the last 12 months?	YES	1	IF item 1003 = 2, -8, -9	
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1004	hfhivtstoffer	During any of your visits to the health facility in the last 12 months, did a health care worker offer you an HIV test?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1005	hivselftst	Have you ever tested yourself for HIV in private using a self-test kit? With a self-test kit you can test yourself for HIV at home. There are instructions on how to interpret the results.	YES	1	IF item 1005 != 1	item 1009
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1006	hivselftstrslt	What was the result of the last HIV self-test result that you conducted on yourself?	POSITIVE	1	IF item 1006 != 1	item 1009
			NEGATIVE	2		
			INCONCLUSIVE	3		
			DON'T KNOW	-8		
			REFUSED	-9		
1007	Redacted	Did you confirm this HIV-positive self-test result in a facility?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1008	hivtestm	What month and year was your last HIV test?	MONTH	integer		
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	hivtesty		YEARS	integer		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
1009	hivtstlocation	Where was the last test done?	VCT FACILITY	1		
			MOBILE VCT	2	IF item 1009 = 3, -8, -9	item 1013
			AT HOME	3	IF item 1009 != 96	item 1010
			HEALTH CLINIC / FACIITY	4		
			HOSPITAL OUTPATIENT CLINIC	5		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			TB CLINIC	6		
			STI CLINIC	7		
			HOSPITAL INPATIENT WARDS	8		
			BLOOD DONATING CENTER	9		
			ANC CLINIC	10		
			COMPREHENSIVE CARE CENTER (CCC)	11		
			MATERNAL CHILD HEALTH (MCH)	12		
			VMMC	13		
			VCT STAND ALONE FACILITY	14		
			OUTREACH	15		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
1009OTH	Redacted	Specify other		text	ALL	
1010	hivtspbpvt	Was the clinic or facility where your last test was done public or private?	PUBLIC	1		
			PRIVATE	2		
			FAITH-BASED HEALTH FACILITY	3		
			DON'T KNOW	-8		
			REFUSED	-9		
1011	hivtststcfy	During your last HIV test, were you satisfied with the services?	YES	1	IF item 1001 = 1, -8, -9	item 1013
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1012	hivtstnscfy_a	What are the reasons why you were dissatisfied with the services?	DELAY	A	IF item 1012 != X	item 1013
	hivtstnscfy_b	SELECT ALL THAT APPLY.	PROVIDER DID NOT EXPLAIN	B		
	hivtstnscfy_c		NO PRIVACY	C		
	hivtstnscfy_d		NOT COUNSELLED	D		
	hivtstnscfy_e		NOT GIVEN TIME TO ASK QUESTIONS	E		
	hivtstnscfy_x		OTHER (SPECIFY)	X		
	hivtstnscfy_y		DON'T KNOW	Y		
	hivtstnscfy_z		REFUSED	Z		
1012OTH	Redacted	Specify other		text		
1013	hivtstrslt	What was the result of your last HIV test?	POSITIVE	1	IF item 1013 = 1	item 1018
			NEGATIVE	2		
			INCONCLUSIVE	3		
			DID NOT RECEIVE THE RESULT	4		
			DON'T KNOW	-8		
			REFUSED	-9		
1014	hivcarelink	Are you currently linked and enrolled to receive HIV care from a health facility?	YES - SHOWN PROOF	1	IF item 1014 = 2, -8,-9	item 1016
		IF THE PARTICIPANT SAYS YES, Ask to see the client's HIV clinic card (CCC yellow card) or a bottle of ARV pills .	YES - NOT SHOWN PROOF	2		
			NO	3		
			DON'T KNOW	-8		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			REFUSED	-9		
1015	Redacted	What is your current HIV Clinic Number (CCC Yellow Card Number)	SPECIFY: _____			
			DON'T KNOW	-8		
			REFUSED	-9		
1016	hivtstfutloc	Where would you prefer to receive HIV testing services in the future?	VCT FACILITY	1	IF item 1016 != 96	item 1017
			MOBILE VCT	2		
			AT HOME	3		
			HEALTH CLINIC / FACIITY	4		
			HOSPITAL OUTPATIENT CLINIC	5		
			TB CLINIC	6		
			STI CLINIC	7		
			HOSPITAL INPATIENT WARDS	8		
			BLOOD DONATING CENTER	9		
			ANC CLINIC	10		
			COMPREHENSIVE CARE CENTER (CCC)	11		
			MATERNAL CHILD HEALTH (MCH)	12		
			VMMC	13		
			VCT STAND ALONE FACILITY	14		
			OUTREACH	15		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
1016OTH	Redacted	Specify other		text	ALL	
1017	hivpercatrisk	Do you think that your chances of getting HIV are no risk, small, moderate or great?	NO RISK AT ALL	1	ALL	item 1024
			SMALL	2		
			MODERATE	3		
			GREAT	4		
			DON'T KNOW	-8		
			REFUSED	-9		
1018	hivtfposm	What was the month and year of your first HIV positive test result?	MONTH	month		
		This will be the very first HIV positive test result that you have received	DON'T KNOW MONTH	-8		
		PROBE TO VERIFY DATE.	REFUSED MONTH	-9		
	hivtfposy	PROMPT IF REQUIRED: "Please give your best guess."	YEAR	year		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
1019	hivpostell_a	Of the following people, who have you told that you are HIV positive?	NO ONE	A	IF item 1019 != X	item 1021
	hivpostell_b	SELECT ALL THAT APPLY.	SPOUSE/SEX PARTNER	B		
	hivpostell_c		DOCTOR	C		
	hivpostell_d	READ RESPONSES ALOUD.	FRIEND	D		
	hivpostell_e		FAMILY MEMBER	E		
	hivpostell_x		OTHER (SPECIFY)	X		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
	hivpostell_y		DON'T KNOW	Y		
	no one selected		REFUSED	Z		
1019OTH	Redacted	Specify other		text		
1020	Redacted	What is the reason you have not disclosed your HIV status?	HAVE DISCLOSED TO EVERYONE	A	IF item 1019 != X	item 1021
	hivwnottold_b	SELECT ALL THAT APPLY	FEAR OF FAMILY REACTION	B		
	Redacted		FEARS OF SPOUSE REACTION	C		
	Redacted		FEAR OF WORK REACTION	D		
	Redacted		FEAR OF COMMUNITY REACTION	E		
	Redacted		FEAR OF NOT GETTING A PARTNER/SPOUSE	F		
	hivwnottold_x		OTHER (SPECIFY)	X		
	hivwnottold_y		DON'T KNOW	Y		
	hivwnottold_z		REFUSED	Z		
1020OTH	Redacted	Specify other		text		
INSTR	Process variable removed from dataset	I would now like to ask you about discrimination you may have experienced because you are HIV positive.				
1021	hivstathrs_a	In the last 12 months have you experienced any of the following because of your HIV status?	HEALTH CARE PROVIDER TALKING BADLY ABOUT YOU	A		
	hivstathrs_b	READ RESPONSES, SELECT ALL THAT APPLY	VERBALLY INSULTED HARASSED OR THREATENED	B		
	hivstathrs_c		PHYSICALLY ASSAULTED	C		
	hivstathrs_d		LOST YOUR JOB OR ANOTHER SOURCE OF INCOME	D		
	Redacted		DISMISSED OR PREVENTED FROM ATTENDING AN EDUCATIONAL INSTITUTION	E		
	Redacted		CHILD BEEN DISMISSED OR PREVENTED FROM ATTENDING AN EDUCATIONAL INSTITUTION	F		
	Redacted		BEEN FORCED TO CHANGE PLACE OF RESIDENCE/UNABLE TO RENT	G		
	hivstathrs_h		NONE OF THESE	H		
	hivstathrs_y		DON'T KNOW	Y		
	hivstathrs_z		REFUSED	Z		
INSTR	Process variable removed from dataset	Now I would like to ask you questions about your experiences with health care providers.				
1022	hivstathide	In the last 12 months, when you sought health care in a facility where your HIV status is not known, did you feel you needed to hide your HIV status?	YES	1		
			NO, NO NEED TO HIDE	2		
			NO, DID NOT ATTEND HEALTH FACILITY IN LAST 12 MONTHS	3		
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1023	Redacted	In the last 12 months, have you been denied health services including dental care, because of your HIV status?	YES	1		
			NO	2		
			NO ONE KNOWS MY STATUS	3		
			DON'T KNOW	-8		
			REFUSED	-9		
INSTR	Process variable removed from dataset	Now I would like to ask you some questions about PrEP, or pre-exposure prophylaxis.				
INSTR	Process variable removed from dataset	PARTICIPANT REPORTED BEING HIV POSITIVE. CLARIFY FOR HIM/HER THAT YOU WILL BE ASKING ABOUT DRUGS THAT MIGHT HAVE BEEN TAKEN BEFORE THEY WERE DIAGNOSED WITH HIV.			SKIP IF item 1013 != 1	
1024	prpevrhdr	"PrEP" or pre-exposure prophylaxis, is daily medicine that can reduce your chance of getting HIV.	YES	1	IF item 1024 = 2, -8, -9 AND item 1013= 1	item 1701
		Have you ever heard of PrEP before now?	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1025	prepcurnt	Have you ever taken PrEP?	YES	1	IF item 1025 = 2, -8, -9 AND item 1013= 1	item 1701
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1026	prepwhr	Where did you get the PrEP?	PUBLIC HEALTH FACILITY	1	IF item 1026 != 96	item 1027
			PRIVATE HEALTH FACILITY	2		
			PHARMACY	3		
			SEX PARTNER	4		
			FRIENDS	5		
			RESEARCH STUDY	6		
			INCLUDING FAITH-BASED HEALTH FACILITY	7		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
1026OTH	Redacted	Specify other		text		
1027	Redacted	People sometimes forget to take all of their drugs every day. In the last 30 days that you were on PrEP, how many days have you/did you miss taking any of your PrEP pills?	NUMBER OF DAYS	integer	IF item 1013= 1	item 1701
		ENTER '0' IF NONE.	STOPPED TAKING	88		
		Please provide the reason this previous question was left blank: People sometimes forget to take all of their drugs every day. In the last 30 days that you were on PrEP, how many days have you/did you miss taking any of your PrEP pills?	DON'T KNOW	-8		
			REFUSED	-9		
INSTR	Process variable removed from dataset	Now I would like to ask you some questions about PEP, or post-exposure prophylaxis.				

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1028	pepevrhdr	"PEP" or post-exposure prophylaxis, is daily medicine that can reduce your chance of getting HIV after exposure to someone of unknown HIV status, or exposure with someone who is HIV-infected.	YES	1	IF item 1028 = 2	item 1101
		Have you ever heard of PEP before now?	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1029	pepevr	Have you ever taken PEP?	YES	1	IF item 1029 = 2	item 1101
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1030	pepcurnt	Have you taken PEP within the last 3 months?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
CONT	Process variable removed from dataset	DO NOT READ: CONTINUE TO THE NEXT ITEM?	YES	1	IF item =2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 11: ATTITUDES TOWARD HIV DISCLOSURE**				
INSTR	Process variable removed from dataset	Now I would like to ask you how much you agree or disagree with the following questions.			SKIP MODULE IF NOT HIV POSITIVE	
1101	atdshrm	In general, disclosing HIV status to other people in my community can be helpful to me.	STRONGLY AGREE	1		
		Do you strongly agree, agree, disagree or strongly disagree?	AGREE	2		
			DISAGREE	3		
			STRONGLY DISAGREE	4		
			DON'T KNOW	-8		
			REFUSED	-9		
1102	atdsarv	Disclosing HIV status to others can be helpful to me for taking my ARVs regularly.	STRONGLY AGREE	1		
		Do you strongly agree, agree, disagree or strongly disagree?	AGREE	2		
			DISAGREE	3		
			STRONGLY DISAGREE	4		
			DON'T KNOW	-8		
			REFUSED	-9		
MTITLE		**MODULE 12: HIV STATUS, CARE AND TREATMENT**			IF item 1013= 2, 3, 4, -8, -9	item 1301
INSTR	Process variable removed from dataset	Now I'm going to ask you more about your experience with HIV support, care and treatment.				
1201	hivcare	After learning you had HIV, have you ever received HIV medical care from a health care worker?	YES	1	IF item 1201= 2	item 1204

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
		HIV medical care includes both drugs for OI, INH, and ARVs.	NO	2	IF item 1201= -8, -9	item 1220
			DON'T KNOW	-8		
			REFUSED	-9		
1204	Redacted	What is the <u>main</u> reason why you have never received HIV medical care from a health care worker?	FACILITY IS TOO FAR AWAY	1	IF item 1204 != 96	item 1208
			I DON'T KNOW WHERE TO GET HIV MEDICAL C	2		
			COST OF CARE	3		
			COST OF TRANSPORT	4		
			I DO NOT NEED IT/I FEEL HEALTHY/NOT SICK	5		
			I FEAR PEOPLE WILL KNOW THAT I HAVE HIV IF	6		
			RELIGIOUS REASONS	7		
			I'M TAKING TRADITIONAL MEDICINE	8		
			DO NOT TRUST THE STAFF/QUALITY OF CARE	9		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
1204OTH	Redacted	Specify other		text	ALL	item 1208
1205	hivcfm	What month and year did you <u>first</u> see a health care worker for HIV medical care? PROBE TO VERIFY DATE.	MONTH	date		
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	hivcfy		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
1206	hivclm	What month and year did you <u>last</u> see a health care worker for HIV medical care?	MONTH	date	IF [CURRENT DATE] - item 1206 <= 7 MONTHS OR item 1206 = -8, -9	item 1207
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	Redacted		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED	-9		
1207	hivcnot6mo	What is the <u>main</u> reason for not seeing a health care worker for HIV medical care for more than 3 months?	FACILITY IS TOO FAR AWAY	1	IF item 1207 != 96	item 1208
			I DON'T KNOW WHERE TO GET HIV MEDICAL C	2		
			COST OF CARE	3		
			COST OF TRANSPORT	4		
			I DO NOT NEED IT/I FEEL HEALTHY/NOT SICK	5		
			I FEAR PEOPLE WILL KNOW THAT I HAVE HIV IF	6		
			RELIGIOUS REASONS	7		
			I'M TAKING TRADITIONAL MEDICINE	8		
			NO APPOINTMENT SCHEDULED/DID NOT MISS	9		
			TRAVELING/AWAY FROM MY USUAL CLINIC	10		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1207OTH	Redacted	Specify other		text		
1208	cd4testever	Have you ever had a CD4 count test?	YES	1	IF item 1208 = 2, -8, -9 AND 1201= 1	item 1210
		The CD4 count tells you how sick you are with HIV	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1209	cd4ttm	What month and year were you last tested for your CD4 count?	MONTH	date	IF item 1201= 2, -8, -9	item 1220
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	cd4tty		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
1210	arvstakenev	Have you ever taken ARVs, that is, antiretroviral medications to treat HIV infection?	YES	1	IF item 1210 = 1	item 1212
			NO	2	IF item 1210 = -8, -9	item 1216
			DON'T KNOW	-8		
			REFUSED	-9		
1211	Redacted	What is the main reason you have never taken ARVs?	NOT ELIGIBLE FOR TREATMENT	1	IF item 1211 != 96	item 1216
			HEALTH CARE PROVIDER DID NOT PRESCRIBE	2		
			HIV MEDICINES NOT AVAILABLE	3		
			I FEEL HEALTHY/NOT SICK	3		
			COST OF MEDICATIONS	4		
			COST OF TRANSPORT	5		
			RELIGIOUS REASONS	6		
			TAKING TRADITIONAL MEDICATIONS	7		
			NOT ATTENDING HIV CLINIC	8		
			OTHER (SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
1211OTH	Redacted	Specify other		text	ALL	item 1216
1212	arvftm	What month and year did you first start taking ARVs?	MONTH	date		
		DO NOT READ: PROBE TO VERIFY DATE.	DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	arvfty		YEAR	date		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
1213	arvscurrent	Are you currently taking ARVs, that is, antiretroviral medications?	YES	1	IF item 1213 = 1	item 1215
		By currently, I mean that you may have missed some doses but you are still taking ARVs.	NO	2	IF item 1213 = -8, -9	item 1216
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1214	Redacted	Can you tell me the main reason why you are not currently taking ARVs?	I HAVE TROUBLE TAKING A TABLET EVERYDAY	1	IF item 1214 != 96	item 1216
			I HAD SIDE EFFECTS	2		
			FACILITY TOO FAR AWAY FOR ME TO GET MED	3		
			COST OF MEDICATIONS	4		
			COST OF TRANSPORT	5		
			I FEEL HEALTHY/NOT SICK	6		
			FACILITY WAS OUT OF STOCK	7		
			RELIGIOUS REASONS	8		
			TAKING TRADITIONAL MEDICATIONS	9		
			OTHER (SPECIFY)	96		
			DON' T KNOW	-8		
			REFUSED	-9		
1214OTH	Redacted	Specify other		text	ALL	item 1216
1215	arvsmissdays	People sometimes forget to take all of their ARVs every day. In the last 30 days, how many days have you missed taking any of your ARV pills ? CODE '0' IF NONE.	NUMBER OF DAYS	integer		
	arvsmissdaysdk	Please provide the reason this previous question was left blank: People sometimes forget to take all of their ARVs every day. In the last 30 days, how many days have you missed taking any of your ARV pills?	DON'T KNOW	-8		
			REFUSED	-9		
1216	vltest	Did you ever have a viral load test? This is a test that measures how much HIV is in your blood.	YES	1	IF item 1216 = 2, -8, -9	item 1219
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1217	vltltm	When did you last have a viral load test?	MONTH	integer		
			DON'T KNOW MONTH	-8		
			REFUSED MONTH	-9		
	vltlty		YEAR	integer		
			DON'T KNOW YEAR	-8		
			REFUSED YEAR	-9		
1218	vltresult	Were you told the result of your last viral load test?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1219	nextappt	When is your next clinic appointment for your HIV medical care?	1 MONTH OR LESS	1	IF item 1219 != 96	item 1220
			2-3 MONTHS	2		
			4-5 MONTHS	3		
			6 MONTHS OR MORE	4		
			NO FUTURE APPOINTMENT SCHEDULED	88		
			OTHER (SPECIFY)	96		
			DON' T KNOW	-8		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			REFUSED	-9		
1219OTH	Redacted	Specify other		text	ALL	
1220	sptgrgo	Have you ever attended a support group for people living with HIV?	YES	1	IF item 1220 = 2, -8, -9	item 1223
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1221	sptgrfreq	In the last 12 months, how many times did you attend a support group? CODE '0' IF NONE.	NUMBER OF TIMES	integer	IF item 1221 = 2,-8,-9	item 1223
	sptgrfreqdk	Please provide the reason this previous question was left blank: In the last 12 months, how many times did you attend a support group?	DON'T KNOW	-8		
			REFUSED	-9		
1222	sptgrrec_a	Which of the following do you receive from the support group related to your HIV infection?	NOTHING	A	IF item 1222 != X	item 1223
	sptgrrec_b	READ EACH RESPONSE.	COUNSELING/HEALTH LIVING MESSAGES	B		
	sptgrrec_c	SELECT ALL THAT APPLY.	REMINDED OF IMPORTANCE OF TAKING ARV REGULARLY	C		
	sptgrrec_d		REMINDED TO KEEP HIV APPOINTMENTS	D		
	sptgrrec_e		REFILLS OR PICKING UP OF ART MEDICATION	E		
	sptgrrec_f		PSYCHOSOCIAL SUPPORT	F		
	sptgrrec_g		LIVELIHOOD/MATERIAL SUPPORT	G		
	sptgrrec_x		OTHER (SPECIFY)	X		
	Redacted		DON'T KNOW	Y		
	sptgrrec_z		REFUSED	Z		
1222OTH	Redacted	Specify other		text		
INSTR	Process variable removed from dataset	Now I will ask you about HIV care and tuberculosis or TB.				
1223	tbsympas_a	At your last HIV medical care visit, were you asked if you had any of the following TB symptoms: cough, fever, night sweats and weight loss?	PERSISTENT COUGH	A		
	tbsympas_b	READ THE RESPONSES ALOUD.	FEVER	B		
	tbsympas_c	SELECT ALL THAT APPLY.	NIGHT SWEATS	C		
	tbsympas_d		WEIGHT LOSS	D		
	tbsympas_e		I WAS NOT ASKED	E		
	tbsympas_y		DON'T KNOW	Y		
	tbsympas_z		REFUSED	Z		
1224	tbsymp12mo	In the last 12 months, have you experienced any of the following TB symtpoms: cough, fever, night sweats and weight loss?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
CONT	Process variable removed from dataset	CONTINUE TO THE NEXT ITEM?	YES	1	IF item =2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 13: TUBERCULOSIS AND OTHER HEALTH ISSUES**				
INSTR	Process variable removed from dataset	Now I will ask you about tuberculosis or TB.			IF item 1013 = 2, 3, 4, -8, -9	item 1304
1301	medprvnttb	Have you ever taken a medicine called Isoniazid, IPT or INH to prevent developing TB?	YES	1	IF item 1301 = 2, -8, -9	item 1304
		Isoniazid is medication that prevents TB. It is given to people with HIV or people who are in contact with someone with TB.	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1302	medinhcur	Are you currently taking INH?	YES	1		
		By currently, I mean that you may have missed some doses but you are still taking INH.	NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1303	medinhmonths medinmonthsdk	How many months have you taken INH?	NUMBER OF MONTHS	Integer		
		Please provide the reason this previous question was left blank: HOW MANY MONTHS HAVE YOU TAKEN INH?	DON'T KNOW	-8		
			REFUSED	-9		
1304	tbclinvisit	Have you ever visited clinic for TB diagnosis or treatment?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1305	tbdiagn	Have you ever been told by a health care worker that you had TB?	YES	1	IF item 1305 = 2, -8, -9	item 1309
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1306	tbtreated	Were you ever treated for TB?	YES	1	IF item 1306 = 2, -8, -9	item 1309
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1307	tbttretcurr	Are you currently on treatment for TB?	YES	1	IF item 1307 = 2, -8, -9	item 1401
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1308	tbtreat6mofull	The last time you were treated for TB, did you complete at least 6 months of treatment?	YES	1		
			NO, MEDICINE WAS STOPPED IN LESS THAN 6	2		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			NO, BUT I AM STILL ON TREATMENT	3		
			DON'T KNOW	-8		
			REFUSED	-9		
INSTR	Process variable removed from dataset	Now I would like to ask you questions about sexual health.			IF gender = 1	item 1311
1309	vgdischarge	During the last 12 months, have you had an abnormal discharge from your vagina or experienced pelvic pain? This may include an unusual smell, color, or texture.	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1310	vgsore	During the last 12 months, have you had an ulcer or sore on or near your vagina?	YES	1	IF item 1309 != 1 AND item 1310 != 1	item 1401
			NO	2	IF item 1309 = 1 OR item 1310 = 1	item 1314
			DON'T KNOW	-8		
			REFUSED	-9		
1311	pndschrg	During the last 12 months, have you had an abnormal discharge from your penis?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1321	pnsore	During the last 12 months, have you had an ulcer or sore on or near your penis?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1313	painurin	During the last 12 months, have you had pain on urination?	YES	1	IF item 1311 != 1 AND item 1321 != 1 AND item 1313 != 1	item 1401
			NO	2	IF item 1311 = 1 OR item 1321 = 1 OR item 1313 = 1	item 1314
			DON'T KNOW	-8		
			REFUSED	-9		
1314	seekhp	Did you see a health care worker because of these problems?	YES	1	IF item 1314 = 2,	item 1318
			NO	2	IF item 1314 = -8, -9	item 1401
			DON'T KNOW	-8		
			REFUSED	-9		
1315	stddiag	In the last 12 months, did a health care worker tell you that you had a sexually transmitted disease, other than HIV?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1316	stdtrt	Did you get treatment for these problems?	YES	1	IF item 1316 = 1	item 1318
			NO	2	IF item 1316 = -8, -9	item 1401
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1317	stdnotrt_a	Why did you not get treatment for these problems?	SYMPTOMS WENT AWAY ON THEIR OWN	A		
	stdnotrt_b	SELECT ALL THAT APPLY.	I WAS EMBARRASSED	B		
	stdnotrt_c		I COULD NOT AFFORD TO PAY	C		
	stdnotrt_d		NO TREATMENT WAS AVAILABLE FOR MY PROBLEM	D		
	Redacted		HEALTHCARE WORKER REFUSED TO ASSIST ME	E		
	stdnotrt_x		OTHER (SPECIFY)	X		
	stdnotrt_y		DON'T KNOW	Y		
	stdnotrt_z		REFUSED	Z		
1317OTH	Redacted	Specify other		text		
1318	stdtrtpresc_a	Who prescribed the treatment?	HEALTH CARE WORKER	A	SKIP IF item 1316 != 1	
	stdtrtpresc_b	SELECT ALL THAT APPLY.	PHARMACIST	B		
	Redacted		SELF-PRESCRIBED	C		
	stdtrtpresc_x		OTHER (SPECIFY)	X		
	Redacted		DON'T KNOW	Y		
	Redacted		REFUSED	Z		
1318OTH	Redacted	Specify other		text		
CONT	Process variable removed from dataset	DO NOT READ: CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	INDIVIDUAL REFUSAL OR WITHDRAWAL
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
MTITLE		**MODULE 14: GENDER NORMS**			SKIP IF item 203 = 3, 4, 5, -8, -9	
INSTR	Process variable removed from dataset	Now I would like to ask you question on attitudes and decision-making in your home.				
1401	healthc	Who usually makes decisions about health care for yourself: you, your (spouse/partner), you and your (spouse/partner) together, or someone else?	I DO	1		
			SPOUSE/PARTNER	2		
			WE BOTH DO	3		
			SOMEONE ELSE	4		
			DON'T KNOW	-8		
			REFUSED	-9		
1402	money	Who generally decides about how the money you receive is spent: you, your (spouse/partner), you and your (spouse/partner) together, or someone else?	I DO	1		
			SPOUSE/PARTNER	2		
			WE BOTH DO	3		
			SOMEONE ELSE	4		
			DON'T KNOW	-8		
			REFUSED	-9		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
CONT	Process variable removed from dataset	DO NOT READ: CONTINUE TO THE NEXT ITEM?	YES	1	IF item = 2	**INDIVIDUAL REFUSAL OR WITHDRAWAL**
		SELECT 'NO' ONLY IF THE PARTICIPANT HAS EXPRESSED HE/SHE DOES NOT WISH TO CONTINUE ON WITH THE SURVEY.	NO	2		
TITLE		**MODULE 15: ALCOHOL USE**				
INSTR	Process variable removed from dataset	The next few questions will be on your use of alcohol and non-prescription drugs. Remember, all the answers you provide will be kept confidential.				
1501	alc12mo	In the last 12 months have you had a drink containing alcohol?	YES	1		
		SHOW ALCOHOL AID IF UNCERTAIN	NO	2	IF item 1501 =2,-8,-9	item 1507
			DON'T KNOW	-8		
			REFUSED	-9		
1502	alcfreq	How often do you have a drink containing alcohol?	RARELY	0	IF item 1502= 0, -8, -9	item 1506
		DO NOT READ: SHOW ALCOHOL AID UNCERTAIN	MONTHLY OR LESS	1		
			2-4 TIMES A MONTH	2		
			2-3 TIMES A WEEK	3		
			4 OR MORE TIMES A WEEK	4		
			DON'T KNOW	-8		
			REFUSED	-9		
1503	alcnumday	How many drinks (i.e. glasses) containing alcohol do you have on a typical day?	NONE OR LESS THAN 1	0	IF age >20	item 1506
			1 OR 2	1		
			3 OR 4	2		
			5 OR 6	3		
			7 TO 9	4		
			10 OR MORE	5		
			DON'T KNOW	-8		
			REFUSED	-9		
1504	adltaclwhr_a	Where have you gotten alcohol from?	HOME	A	SKIP IF AGE >= 20 or IF item 1504 =B, Y, Z	item 1506
	adltaclwhr_b		SOCIAL EVENT	B		
	adltaclwhr_c		PARTY	C		
	Redacted		SCHOOL FUNCTION	D		
	adltaclwhr_x		OTHER (SPECIFY)	X		
	Redacted		DON'T KNOW	Y		
	Redacted		REFUSED	Z		
1504OTH	Redacted	Specify other		text		
1505	adltaclwho_a	Who have you gotten alcohol from?	FRIENDS/PEERS	A		
	adltaclwho_b		RELATIVES/FAMILY	B		
	adltaclwho_x		OTHER (SPECIFY)	X		
	Redacted		DON'T KNOW	Y		
	adltaclwho_z		REFUSED	Z		
1505OTH	Redacted	Specify other		text		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1506	adlttrdrg	Have you ever used non-prescription drugs for recreation or pleasure purposes?	YES	1	IF item 1506 = 2, -8, -9	item 1511
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1507	recdrg12mo	In the past 12 months, have you used non-prescription drugs for recreation or pleasure purpose?	YES	1		
			NO	2	IF item 1507 =2,-8,-9	item 1511
			DON'T KNOW	-8		
			REFUSED	-9		
1508	recdrugevr_a	Which non-prescription drug have you ever consumed, even one time?	NONE	A	IF item 1508 = A	item 1601
	recdrugevr_b	DO NOT READ:	MARIJUANA	B	IF item 1508 = X	item 1508OTH
	Redacted	PROBE FOR MULTIPLE RESPONSES.	HEROIN	C		
	recdrugevr_d		KHAT	D		
	recdrugevr_x		OTHER (SPECIFY)	X		
	recdrugevr_y		DON'T KNOW	Y		
	recdrugevr_z		REFUSED	Z		
1508OTH	Redacted	Specify other		text		
1509	adltdrugwh_a	Where have you gotten drugs from?	HOME	A	IF item 1509 = B, X, Z	item 1510
	adltdrugwh_b		SOCIAL EVENT	B		
	Redacted		PARTY	C	SKIP IF age > 20	item 1511
	Redacted		SCHOOL FUNCTION	D		
	adltdrugwh_x		OTHER (SPECIFY)	X		
	Redacted		DON'T KNOW	Y		
	adltdrugwh_z		REFUSED	Z		
1509OTH	Redacted	Specify other		text		
1510	adltdrugwo_a	Who have you gotten drugs from?	FRIENDS/PEERS	A		
	Redacted		RELATIVES/FAMILY	B		
	adltdrugwo_x		OTHER (SPECIFY)	X	SKIP IF age >20	
	adltdrugwo_y		DON'T KNOW	Y		
	adltdrugwo_z		REFUSED	Z		
1510OTH	Redacted	Specify other		text		
1511	idever	Some people inject drugs with a needle and syringe for pleasure. Have you ever injected drugs for pleasure?	YES	1	IF item 1511 = 2, -8, -9	item 1601
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1512	Redacted	Have you injected drugs with a needle and syringe in the last 30 days?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1513	Redacted	When you have injected drugs during the last 30 days, have you shared the syringe or needle with other people?	YES	1		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
TITLE		**MODULE 16: BLOOD AND INJECTION SAFETY**				
1601	bldtrfnevr	Have you ever had a blood transfusion?	YES	1	IF item 1601 = 2, -8, -9	item 1603
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1602	Redacted	When was the last time you had a blood transfusion?	DAY	date		
			DON'T KNOW DAY			
			REFUSED DAY			
	bldtrfnlstm		MONTH	date		
			DON'T KNOW MONTH			
			REFUSED MONTH			
	bldtrfnlsty		YEAR	date		
			DON'T KNOW YEAR			
			REFUSED YEAR			
1603	blddntevr	Have you ever donated blood?	YES	1	IF item 1603= 2, -8, -9	item 1606
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1604	blddntnum	How many times did you donate blood in the last 12 months?	NUMBER OF TIMES	integer		
	blddntnumdk	Please provide the reason this previous question was left blank: How many times did you donate blood in the last 12 months?	DON'T KNOW	-8		
			REFUSED	-9		
1605	blddntwho	The last time you donated blood, were you asked to donate or did you donate voluntarily?	WAS ASKED TO DONATE FOR FAMILY/FRIEND	1		
			DONATED VOLUNTARILY	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1606	injnum	In the last 12 months, how many injections did you have?	NUMBER OF INJECTIONS	integer	IF item 1606 = -8, -9	item 1609
	injnumdk	IF PARTICIPANT GIVE A NON-NUMERIC ANSWER SUCH AS "I'VE HAD MANY", PROBE TO GET AN ANSWER. IF GREATER THAN 100, THEN RECORD 100.	DON'T KNOW	-8		
		IF NONE CODE "0"	REFUSED	-9		
1607	injadmin_a	Have you received an injection from any of these persons in the last 12 months?"	HEALTH CARE WORKER	A	IF item 1607 != A	item 1609
	injadmin_b	READ EACH OPTION, SELECT ALL THAT APPLY	TRADITIONAL PRACTITIONER OR HEALER	B		
	injadmin_c		SELF, PRESCRIBED BY HEALTH CARE WORKER	C		
	Redacted		SELF, NOT PRESCRIBED BY HEALTH CARE WORI	D		
	injadmin_y		DON'T KNOW	Y		
	Redacted		REFUSED	Z		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
1608	injstril	The last time you received an injection from a health care worker, did the health care worker take the syringe and needle from a new, unopened package?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1609	injpref	If you had a choice, would you like to receive medication as an injection or tablet/capsule?	INJECTION	1		
			TABLET/CAPSULE	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1610	injused	In the last 12 months, have you seen any used needles/syringes near your home or community?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
TITLE		MODULE 17: VIOLENCE				
INSTR	Process variable removed from dataset	You have been selected to be asked questions on other important aspects of a person's life. I know that some of these questions are very personal. However, your answers are important for helping to understand the condition of men and women in Kenya. Let me assure you that your answers are completely confidential and will not be told to anyone and no one in your household will know that you were asked these questions. By sex, I mean vaginal, anal, oral sex or the insertion of an object into your vagina or anus. Vaginal sex is when a penis enters a vagina. Anal sex is when a penis enters an anus (butt). Oral sex is when a partner puts his/her mouth on his/her partner's penis or vagina.				
1701	vlnc	Has anyone _ever_ done any of these things to you: - Punched, kicked, whipped, or beat you with an object - Choked smothered, tried to drown you, or burned you intentionally - Used or threatened you with a knife, gun or other weapon?	YES NO DON'T KNOW REFUSED	1 2 -8 -9		
1702	touchtimes	How many times has anyone ever touched you in a sexual way without your permission, but did not try and force you to have sex? Touching in a sexual way without permission includes fondling, pinching, grabbing, or touching you on or around your sexual body parts.	NUMBER OF TIMES	integer		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
	touchtimesdk	DO NOT READ: CODE '0' IF NONE. Please provide the reason this previous question was left blank: How many times has anyone ever touched you in a sexual way without your permission, but did not try and force you to have sex?	DON'T KNOW	-8		
			REFUSED	-9		
1703	cmplsxtimes	How many times in your life has anyone ever tried to make you have sex against your will but did not succeed? This includes someone using harassment, threats, tricks, or physical force. CODE "00" IF NONE	NUMBER OF TIMES_____	integer		
	cmplsxtimesdk	Please provide the reason this previous question was left blank: How many times in your life has anyone ever tried to make you have sex against your will but did not succeed? This includes someone using harassment, threats, tricks, or physical force.	DON'T KNOW	-8		
			REFUSED	-9		
1704	frcsxtimes	How many times in your life have you been physically forced to have sex? CODE "00" IF NONE	NUMBER OF TIMES_____	integer	IF item 1704 = 0, -8, -9	item 1711
	frcsxtimesdk	Please provide the reason this previous question was left blank: HOW MANY TIMES IN YOUR LIFE HAVE YOU BEEN PHYSICALLY FORCED TO HAVE SEX?	DON'T KNOW	-8		
			REFUSED	-9		
1705	frcsxage	How old were you the first time someone physically forced you to have sex?	NUMBER OF TIMES_____	integer		
	frcsxagedk	Please provide the reason this previous question was left blank: HOW OLD WERE YOU THE FIRST TIME SOMEONE PHYSICALLY FORCED YOU TO HAVE SEX?	DON'T KNOW	-8		
			REFUSED	-9		
1706	frcsxrelat	The first time someone physically forced you to have sex, what was that person's relationship to you?	BOYFRIEND/GIRLFRIEND/LIVE-IN PARTNER/SPOUSE	1		
			EX-BOYFRIEND/GIRLFRIEND/LIVE-IN PARTNER/	2		
			RELATIVE/FAMILYMEMBER	3		
			CLASSMATE/SCHOOLMATE	4		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			TEACHER	5		
			POLICE/SECURITY	6		
			EMPLOYER	7		
			NEIGHBOR	8		
			COMMUNITY/RELIGIOUS LEADER	9		
			FRIEND	10		
			STRANGER	11		
			OTHERS	96		
			DON'T KNOW	-8		
			REFUSED	-9		
	Redacted	Specify other		text		
1707	Redacted	Was this person whom you just indicated a male or a female?	MALE	1	SKIP IF item 1706 = -8, -9	
			FEMALE	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1708	frcsx12mo	In the last 12 months, did someone physically force you to have sex?	YES	1		
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1709	prssxtimes	How many times in your life has someone pressured you to have sex through harassment, threats, or tricks and did succeed?	NUMBER OF TIMES_____	integer	SKIP IF item 1709 = 0, -8, -9	END/REFERRAL
	prssxtimesdkref	Please provide the reason this previous question was left blank: HOW MANY TIMES IN YOUR LIFE HAS SOMEONE PRESSURED YOU TO HAVE SEX THROUGH HARASSMENT, THREATS, OR TRICKS AND DID SUCCEED?	DON'T KNOW	-8		
			REFUSED	-9		
1710	unwntseekevr	After any of these unwanted sexual experiences, did you try to seek professional help or services?	YES	1	SKIP IF item 1710 = 2, -8, -9	
			NO	2	IF item 1710 = 1	item 1711
			DON'T KNOW	-8	IF item 1710 = 2	item 1712
			REFUSED	-9	IF item 1710 = -8, -9	item 1713
1711	unwntseek	From whom did you try to seek professional help or services from any of the following? SELECT ALL THAT APPLY.	HEALTHCARE PROFESSIONAL	1		
			POLICE OR OTHER SECURITY PERSONNEL	2		
			SOCIAL WORKER, COUNSELOR OR NON-GOVERNMENTAL ORGANIZATION	3		
			RELIGIOUS LEADER	4		
			OTHER (SPECICY)	96		
			DON'T KNOW	-8		

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
			REFUSED	-9		
	Redacted	Specify other		text		
1712	unwntsxnoh	What was the main reason that you did not try to seek professional help or services?	DID NOT KNOW SERVICES WERE AVAILABLE	1		
			SERVICES NOT AVAILABLE	2		
			AFRAID OF GETTING IN TROUBLE	3		
			ASHAMED FOR SELF/FAMILY	4		
			COULD NOT AFFORD SERVICES	5		
			DID NOT THINK IT WAS A PROBLEM	6		
			FELT IT WAS MY FAULT	7		
			AFRAID OF BEING ABANDONED	8		
			DID NOT NEED/WANT SERVICES	9		
			AFRAID OF MAKING SITUATION WORSE	10		
			OTHER(SPECIFY)	96		
			DON'T KNOW	-8		
			REFUSED	-9		
	Redacted	Specify other		text		
1713	unwantsxtell	After any of these unwanted sexual experiences, did you tell anyone about it?	YES	1	IF item 1713 = 2, -8, -9	END
			NO	2		
			DON'T KNOW	-8		
			REFUSED	-9		
1714	unwnsxnohp_a	Which of the following describes who you told about any of these unwanted sexual experiences? READ OPTIONS OUT ALOUD	PARENT/GUARDIAN	A		
	unwnsxnohp_b	SELECT ALL THAT APPLY	SIBLING	B		
	unwnsxnohp_c		TEACHER	C		
	unwnsxnohp_d		FRIEND/CLASSMATE	D		
	unwnsxnohp_e		OTHER FAMILY MEMBER	E		
	Redacted		RELIGIOUS LEADER	F		
	unwnsxnohp_x		OTHER(SPECIFY)	X		
	unwnsxnohp_y		DON'T KNOW	Y		
	unwnsxnohp_z		REFUSED	Z		
	Redacted	Specify other		text		
END						
REFERAL	Process variable removed from dataset	Thank you for sharing your personal experiences with me. I know it may have been difficult for you to talk about your experiences with me. If you would like to talk further about these experiences, I can refer you to a place that can provide you with help.			SKIP IF (item 1702 = 0, -8, -9) AND (item 1703 = 0, -8, -9) AND (item 1708 = 2, -8, -9) AND (item 1709 = 0, -8, -9) AND (item 1701 = 2, -8, -9)	

NO.	Varname	QUESTIONS	CODING LABELS	CODING VALUES	SKIP PATTERNS	SKIP TO
		PROVIDE PARTICIPANT WITH LIST OF ORGANIZATIONS.			IF item 612 != 6 OR age >= 18	END
REFERAL	Process variable removed from dataset	You mentioned earlier that you have received money or other goods in exchange for having sex. Thank you for sharing your personal experiences with me. If you want to talk further about these experiences, I can refer you to a place that can provide you with help. DO NOT READ: FILL OUT REFERRAL FORM FOR CHILDREN IDENTIFIED AS TRAFFICKED MINORS. FILL OUT SUMMARY OF REFERRED TRAFFICKED MINORS. PROVIDE PARTICIPANT WITH LIST OF ORGANIZATIONS, IF NOT ALREADY GIVEN.			IF item 612 != 6 OR age>= 18	END
INSTR	Process variable removed from dataset	Thank you for taking the time to participate in this survey. Your responses will be very helpful to the Ministry of Health to better understand how to improve health programs in the country. DO NOT READ: PROVIDE PARTICIPANT WITH LIST OF ORGANIZATIONS, IF NOT ALREADY GIVEN.				**BIOMARKER CONSENT - ASSENT**
COMMENT	Process variable removed from dataset	DO NOT READ: COMMENTS FROM INTERVIEWER		text		**BIOMARKER CONSENT - ASSENT**