QUESTIONNAIRE NUMBER				
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1999 FAMILY HEALTH SURVEY - BELIZE

INDIVIDUAL QUESTIONNAIRE

(For women aged 13 - 49 years)

Identification No.

GEO. CODE	E.D. NUMBER	HH SCHED. NO.

Interview Calls	1	2	3	Final Visit
Date of Interview				
Time Started				
Time Ended				
Duration				
Interview Status				
Interviewer's Name				
Supervisor's Name				
Next Visit: Date				
Time				
Time				
* Interview Status Codes:	5	Refusal by household		
Completed Individual interview	6	Total Refusal by response		
2 No eligible respondent	7	, ,	pondent	
3 Residents not at home4 Respondent not at home	8	Vacant Household		
4 Respondent not at home	9	Other (specify)		
FOR OFFICE USE ONLY				
Reviewed by:	Date:			
Edited by:	Date:			

HOUSING SECTION

H001	What is the main construction material used for the	
	1 Wood 2 Cement 3 Dirt	8 Other (specify) 9 Don't know/Not stated
H002	What type of lighting does the household use mo 1 Gas lamp 2 Kerosene lamp 3 Electricity from BEL	st? 4 Electricity from a private generator 8 Other (specify) 9 Don't know/Not stated
H003.	What type of fuel does this household use most for 1 Wood 2 Gas (Butane) 3 Kerosene	or cooking? 4 Electricity 8 Other (specify) 9 Don't know/Not stated
H004.	What is the main source of your drinking water su 01 Private, piped into dwelling 02 Private vat / drum / well not piped 03 Public piped into dwelling 04 Public piped into yard 05 Public standpipe or handpump	of Public well River, stream, creek, pond, spring Purified water Results Other (specify) Don't know/Not stated
H005.	What kind of toilet facility does this household hat 01 W.C. linked to WASA sewer system 02 W.C. linked to septic tank 03 Pit latrine, ventilated and elevated 04 Pit latrine, ventilated and not elevated 05 Pit latrine, ventilated compost	ve? 06 Pit latrine, non ventilated 07 None 88 Other (specify) 99 Don't know/Not stated
H006.	How many bedrooms are there in this dwelling un	it? No. of bedrooms
H007.	How many of the following items do members of to (a) Radio (b) Television set (c) Video recorder (d) Personal computer (e) Private vehicle (f) Refrigerator (g) Washing machine (h) Gas stove (i) Microwave	chis household own? [READ]
H008.	Is there a telephone service in this home? 1 Yes 2 No	9 Don't know/Not stated
H009.	How many people (including children) usually live This include all those who usually sleep and share	
	Total Males Females	

H010. INTERVIEWER: RECORD THE NAMES OF ALL WOMEN 13 TO 49 YEARS OF AGE WHO USUALLY LIVE IN THIS HOUSEHOLD? NUMBER ___ _

RECORD BELOW ALL WOMEN 13 - 49 YEARS

H011. Name	H012. Age
YOU SHOULD START WITH THE OLDEST	
1	
2	
3	
4	
5	
6	
7	
8	

SELECTION OF RESPONDENT

LAST DIGIT OF	NO. OF WOMEN 13 – 49 IN HOUSEHOLD									
QUESTIONNAIRE NUMBER	1	2	3	4	5	6	7	8		
0	1	1	1	3	4	3	3	1		
1	1	2	2	4	5	4	4	2		
2	1	1	3	1	1	5	5	3		
3	1	2	1	2	2	6	6	4		
4	1	1	2	3	3	1	7	5		
5	1	2	3	4	4	2	1	6		
6	1	1	1	1	5	3	2	7		
7	1	2	2	2	1	4	3	8		
8	1	1	3	3	2	5	4	1		
9	1	2	1	4	3	6	5	2		

H013.	Line number	of the eligible	woman selected	

SECTION 1 - RESPONDENT'S CHARACTERISTICS

100.	In what month and year were you born?						
			N	Month			Year
						99	Don't know/Not Stated
101.	How old are you presently?	years		99	Dor	n't kno	w/Not Stated
	RE 100 WITH 101 AND CORRECT IF INC SES OF 13 AND 49.	CONSISTENT. TE	RM	IINATE INTE	RVIE	W IF	THE RESPONDENT IS NOT BETWEEN
102.	In what country were you born?						_1
		99		Don't know/N	iot sta	ated	
103.	To which ethnic group do you belong?						
	01 Black/African			Maya Mopar	n		
	02 Caucasian/White			Mennonite			
	03 Chinese		-	Mestizo			
	04 Creole 05 East Indian			Yucatan May Spanish	ya		
	06 Garifuna			Other (speci	if\/\		
	07 Maya Ketchi	9	99	Don't know/N	Not S	tated	
	•						
104.	What is your religion/denomination? 01 Anglican	4	10	Nozorono			
	01 Anglican 02 Bahai Faith			Nazarene Pentecostal			
	03 Baptist			Roman Cath			
	04 Hindu			Salvation Ari			
	05 Jehovah Witness			Seventh Day		entist	
	06 Mennonite			None (SKIF			
	07 Methodist			Other (speci			
	08 Mormon					tated	(SKIP TO 106)
	09 Muslim						
105.	With what frequency do you attend religi	ous services?					
	1 At least once a week		4 3	Special occas	sions	only (weddings, etc.)
	2 At least once a month			Doesn't atten			- ,
	3 Less than once a month	9	9 [Don't know/No	ot Sta	ated	
106.	How well do you speak English?						
	1 Very well	3	3 E	Barely/Not at	all		
	2 Not so well	9	9 [Don't know/No	lot Sta	ated	
107.	How well do you speak Spanish?						
-	1 Very well	3	3 E	Barely/Not at	all		
	2 Not so well			Don't know/No		ated	
108.	Are you presently attending formal school	n12					
100.		No (SKIP TO Q1	110))	9 D	K/NS	(SKIP TO Q110)
400	la colo et atau de adificació de anos de adiciones la	1					
109.	In what standard/form/year and school le	evel are you prese	entiy	y ?			
	school level	standard/form/yea	ar				
	SKIP TO Q111						
440	Miles I was a the death of an death of an area			- 1 0			
110.	What was the last standard/form/year ar	ia schooi ievei yol	u co	ompietea?			
	school level	standard/form/yea	ar				
111.	What is the highest school level you hav						
	1 None			Sixth Form or	r Equi	valent	
	2 Primary			University	ot 0:	مدمدا	
	3 High School 4 BTTC/BCA/BNS	8	ອ L	Don't know/No	UL OLG	aleu	
	- DITO/DO//DINO						

RECORD ANSWER TO Q112 ---> GO TO 113

112.	Number of years beyond level comple	eted.	_ y	ears			
113.	Did you work during the past week? No carried out for pay, profit or family gain subsistence farming?						ework,
	1 Yes (SKIP TO Q116)	2 No			9	DK/NS	
114.	Have you ever worked? 1 Yes	2 No (SKIP TO Q	122	2)	9	DK/NS (SKII	P TO Q122)
115.	Why did you stop? 1 Had a child 2 Got married 3 Lost job/Business failed 4 Moved to live elsewhere		8		cify) _	nue studies tated	
116.	How old were you when you first bega	an to work?			_ Yeaı	rs 99 DK	/NS
	IF NOT CURRENTLY WORKING (Q1	113 = NO OR DK) S	SKI	P TO Q122			
117.	How many hours did you work during	the past week?			_ Hour	S	
118. 119.	Do you work outside the home? Are you self-employed?			Yes 1 1		No 2 2	DK/NS 9 9
120.	What is your occupation?	itle					-
	Description of duties				[C	ODE]
121.	Do you work in this same city/town/vil 1 Same city/town/village 2 Away from this city/town/village		3	way from thi Both Don't know	•	· ·	
122.	Do you regularly: [READ] A. Listen to the radio B. Watch television C. Read any national newspaper D. Read any paper local to your cor	n no contra		<u>Yes</u> 1 1 1		No 2 2 2 2	<u>DK/NS</u> 9 9 9

SECTION 2 - FERTILITY AND REPRODUCTIVE HISTORY

200.	Are you currently pregnant? 1 Yes	2 No (SKIP TO Q202)	9 Not sure (SKIP TC	Q202)
201.	Is this your first pregnancy? 1 Yes (SKIP TO Q221)	2 No (SKIP TO Q203)	9 Don't know/Not Sta	ated (SKIP TO Q203)
202.	Have you ever been pregnant? 1 Yes	2 No (SKIP TO Q220)	9 DK/NS (SKIP TO (Q220)
203.	How old where you when you first	became pregnant? yea	ars 99 DI	K/NS
204.	Do you have any sons or daughter 1 Yes	rs to whom you have given birth who 2 No (SKIP TO Q206)	are now living with you? 9 DK/NS (SKIP TO	Q206)
205.	How many sons live with you?	Sons at home	99 Don't know/	/Not stated
	How many daughters live with you	? Daughters at home	99 Don't know/Not stated	i
206.	Do you have any sons or daughter 1 Yes	rs to whom you have given birth who 2 No (SKIP TO Q208)	are alive, but do not live v 9 DK/NS (SKIP TO	
207.	How many sons are alive, but do r	not live with you?	Sons elsewhere	99 DK/NS
	How many daughters are alive, bu	t do not live with you?	Daughters elsewhere	99 DK/NS
208.	Have you ever given birth to a son 1 Yes	or daughter who was born alive but 2 No (SKIP TO Q210)		Q210)
209.	How many sons have died?	Sons dead	99 D	on't know/Not stated
	How many daughters have died?	Daughters dead	99 Don't know	/Not stated
210.	Have you ever had a still birth, that completing the sixth month of preg	t is, given birth to a boy or girl that w	vas born dead after	
	1 Yes	2 No (SKIP TO Q212)	9 DK/NS (SKIP TO	Q212)
211.	How many of your pregnancies ter	minated in stillbirths? 1	Number of stillbirths	99 DK/NS
212.	Have you ever had a miscarriage b 1 Yes	pefore completing your sixth month of 2 No (SKIP TO Q214)	of pregnancy? 9 DK/NS (SKIP TO	Q214)
213.	How many miscarriages have you	had before completing your sixth me	onth of pregnancy? ges 99 D	on't know/Not stated
214.	Have you ever had an abortion bet 1 Yes	fore completing your sixth month of 2 No (SKIP TO Q216)	pregnancy? 9 DK/NS (SKIP TO	Q216)
215.	How many abortions have you had	before completing your sixth month		on't know/Not stated

216.	RECORD THE	TOTALS FROM QU	IESTIONS 200, 205, 20	07, 209, 211, 213 AND 215.	
	A 200 B 205 C 207 D 209 E 211 F 213 G 215 H	TOTAL BOYS TOTAL BOYS TOTAL CHILD TOTAL STILLE TOTAL MISCA TOTAL ABORT	PREGNANT AND GIRLS AT HOME AND GIRLS LIVING EI REN BORN ALIVE THA BIRTHS RRIAGES TIONS AL NUMBER OF PRECAL NUMBER OF LIVEI	LSEWHERE	
	J ASK:	In total, you have	ve had preg	nancies, is that correct? 1 Yes (SKIP TO Q218)	2 No
217.	Have you had r	multiple births?	Number of multipl	e births	
		OF PREGNANCIES 215 AND PROBE AI		THIS IS NOT DUE TO MULTIPLE BIRTH	IS, RETURN TO
218.	When you beca 1 Yes (SKIP 2 No			become pregnant? d's will, fate, didn't think about it (SKIP TO n't know, not sure (SKIP TO Q220)	Q220)
219.		more children		vanted to wait longer before another pregnant of the wait longer before another pregnant was to wait longer before another was to wait longer before another was to wait longer before was the wait longer before was to wait longer before was the	ancy?
220.		y desire to become LY PREGNANT	4 Mer	nopausal n't know/Not Stated	
221.	B. RESPONDE C. RESPONDE	NT HAS NEVER BE NT PREGNANT FO	EEN PREGNANT> S R THE FIRST TIME	> CONTINUE (SEE Q205, Q207, Q209) SKIP TO Q290 (SEE Q202) > SKIP TO Q290 (SEE Q201) ARRIAGES AND/OR ABORTIONS> SI	KIP TO Q290 (SEE Q216)
222.	How old were y	ou when your first ch	nild was born?	years 99 DK/NS	
223.	Were you in sc 1 Yes	hool at the time that	your first child was born 2 No	n? 9 DK/NS	
224.	What school le	vel and standard/forr	m/year had you comple	eted at the time that your first child was bor	n?
	school level		standard/form/yea	ar	
	1 None 2 Primary 3 High Scho 4 BTTC/BCA	ool level completed ol VBNS	6 9	Sixth Form or Equivalent University Don't know/Not Stated	
	D INUMBER OF S	ears beyond level <u>c</u>	ompietea	Years	

Now I would like to talk to you about all of your live-births, whether alive today or not, starting with the last live-birth you had.

RECORD NAMES OF ALL BIRTHS IN THE FOLLOWING GRID. RECORD TWINS AND TRIPLETS ON SEPARATE LINES.

225.	226.	227.	228.	AND TRIPLETS ON SEPARAT 229.	230.
What name was given to your (last, next to last, etc.) baby?	Is (NAME) a boy or girl?	In what month and year was (NAME) born? (ASK PRESENT AGE	Is (NAME) still alive? (IF YES SKIP TO	IF DEAD: How old was (NAME) when he/she died? Record days if less than 1 month; months if less than 2 Yrs; else full	Does (NAME) live with you?
		IF MONTH AND/OR YEAR UNKNOWN)	Q230)	years (SKIP TO NEXT CHILD)	
	1 Boy	Month	1 Yes	1 Days	1 Yes
01	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
(name)	5 514110	Age	5 5.0.00	9 DK/NS	5 510110
	1 Boy	Month	1 Yes	1 Days	1 Yes
02	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
(Hallie)	3 DIVINO	Age	3 DIVINO	9 DK/NS	3 DIVINO
	1 Boy	Month	1 Yes	4.5	1 Yes
03	2 Girl	Year	2 No	1 Days 2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
(Hallie)	3 DIVINO	Age	3 DIVINO	9 DK/NS	3 DIVINO
	1 Boy	Month	1 Yes		1 Yes
04	2 Girl	Year	2 No	1 Days 2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	0.17	9 DK/NS
(Harrie)	3 010110	Age	3 010110	3 Years 9 DK/NS	3 010110
	1 Boy	Month	1 Yes	1 Days	1 Yes
05	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS		9 DK/NS
(Hairie)	3 DIVINO	Age	3 DIVINO	3 Years 9 DK/NS	3 DIVINO
	1 Boy	Month	1 Yes		1 Yes
06	2 Girl	Year	2 No	1 Days 2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	0.17	9 DK/NS
(Hairie)	J DIVINO	Age	JUNIO	3 Years 9 DK/NS	3 DIVINO
	1 Boy	Month	1 Yes		1 Yes
07	2 Girl	Year	2 No	1 Days 2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS		9 DK/NS
(Hairie)	3 DIVING	Age	a DIVINO	3 Years 9 DK/NS	3 DIVINO
	1 Boy	Month	1 Yes		1 Yes
08	2 Girl	Year	2 No	1 Days 2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS		9 DK/NS
(Hallie)	a DIVINO	Age	a DIVINO	3 Years 9 DK/NS	3 DIVING
	1 Pov		1 Yes		1 Yes
00	1 Boy	Month		1 Days	
09	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
		Age		9 DK/NS	

	1 Boy	Month	1 Yes	1 Days	1 Yes
10	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
		Age		9 DK/NS	
	1 Boy	Month	1 Yes	1 Days	1 Yes
11	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
, ,		Age		9 DK/NS	
	1 Boy	Month	1 Yes	1 Days	1 Yes
12	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
, ,		Age		9 DK/NS	
	1 Boy	Month	1 Yes	1 Days	1 Yes
13	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
, ,		Age		9 DK/NS	
	1 Boy	Month	1 Yes	1 Days	1 Yes
14	2 Girl	Year	2 No	2 Months	2 No
(name)	9 DK/NS	DK/NS 00	9 DK/NS	3 Years	9 DK/NS
		Age		9 DK/NS	

COMPARE THE SUM OF Q205, Q207 AND Q209 WITH THE NUMBER OF BIRTHS RECORDED IN HISTORY ABOVE. IF THE NUMBER ARE DIFFERENT, PROBE AND RECONCILE.

MAKE SURE THAT FOR EACH LIVE BIRTH, MONTH AND YEAR OF BIRTH IS RECORDED. SIMILARLY, FOR EACH CHILD THAT HAS DIED THAT THE AGE AT DEATH IS RECORDED.

Now, I would like to make a list of all the live births that you've had since September, 1994 whether they are still alive or not. We will start with your last live birth.

- RECORD THE NAME OF EACH LIVE BIRTH AT THE TOP OF EACH COLUMN BEGINNING WITH THE LAST LIVE BIRTH IN COLUMN 1 AND CONTINUE IN ORDER OF BIRTH FROM YOUNGEST TO OLDEST.
- IF THERE ARE MORE THAN FIVE BIRTHS, TERMINATE THE LIST IN COLUMN 5.
- IF THERE ARE MULTIPLE BIRTHS (TWINS, TRIPLETS) REGISTER THESE LIVEBIRTHS IN SEPARATE COLUMNS. DRAW A LINE CONNECTING LIVEBIRTHS FROM THE SAME PREGNANCIES.

	(1)	(2	2)	(;	3)	(4	.)	(5)
	Last	Birth	Next to L	ast Birth		from Last rth	Third from	Last Birth	Fourth fron	n Last Birth
NAME OF CHILD										
232. CHECK Q228 CHILD ALIVE OR DEAD?	1 Alive 2 Dead 9 DK/NS		1 Alive 2 Dead 9 DK/NS		1 Alive 2 Dead 9 DK/NS		1 Alive 2 Dead 9 DK/NS		1 Alive 2 Dead 9 DK/NS	
233. When you were pregnant with (NAME) did you see anyone for a check on this pregnancy? IF NO OR DK SKIP TO Q237	1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS	
234. Where did you go for most of this care? 1 Government Health Center/Clinic 2 Government Hospital 6 Abroad 3 Private Hospital 8 Other (specify)	1 2 3 4	6 8	1 2 3 4	6 8	1 2 3 4	6 8	1 2 3 4	6 8	1 2 3 4	6 8
4 Private Doctor/Clinic 9 DK/NS 5 Midwife/TBA	5	9	5	9	5	9	5	9	5	9
235. How many months were you pregnant when you made your first visit?	Number of pregnant _ DK = 99		Number of pregnant _ DK = 99		Number of pregnant _ DK = 99		Number of regnant DK = 99		Number of pregnant _ DK = 99	
236. How many visits did you make?		Times		ïmes	T	imes	Ti	mes		ïmes
237. When did you start on folic acid? 1 Before pregnancy 2 Once pregnant 9 DK/NS	1 2	3 9	1 2	3 9	1 2	3 9	1 2	3 9	1 2	3 9
238. When did you start on iron supplements?	1	4	1	4	1	4	1	4	1	4
1 Before pregnancy 4 Never 2 Once pregnant 9 DK/NS 3 After pregnancy	2 3	9	2 3	9	2 3	9	2 3	9	2 3	9
239. When did you start on vitamin A supplements? 1 Before pregnancy 2 Once pregnant 9 DK/NS 3 After pregnancy	1 2 3	4 9	1 2 3	4 9	1 2 3	4 9	1 2 3	4 9	1 2 3	4 9
240. When you were pregnant with (NAME) were <u>you</u> given two <u>TD</u> injections to prevent the baby from getting tetanus (lock jaw) and diphtheria?	1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS	

241. How many pounds and ounces did (NAME) weigh at birth? IF WEIGHT IS GIVEN, SKIP TO Q243, OTHERWISE CONTINUE	1 Kg/g 2 Lb/oz 99 Don't k		1 Kg/g 2 Lb/oz 100 Don't		1 Kg/g 2 Lb/oz 101 Don't		1 Kg/g 2 Lb/oz 102 Don't		1 Kg/g 2 Lb/oz 103 Don't	
242. Did (NAME) weigh more or less than five pounds four ounces (2 1/2 kilograms)?	1 More 2 Less 9 DK/NS		1 More 2 Less 9 DK/NS		1 More 2 Less 9 DK/NS		1 More 2 Less 9 DK/NS		1 More 2 Less 9 DK/NS	
243. Was (NAME) born in Belize?	1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS	
244. Where did you give birth to (NAME)?1 Government Hospital2 Private Hospital5 Home of relative or friend	1 2 3	5 8	1 2 3	5 8	1 2 3	5 8	1 2 3	5 8	1 2 3	5 8
3 Private Clinic 8 Other (specify) 4 Own Home 9 DK/NS	4 _	9	4	9	4	9	4	9	4	9
245. Who assisted with the delivery of (NAME)? 1 Doctor 5 No one 2 Nurse Midwife 8 Other (specify)	1 2 3	5 8	1 2 3	5 8	1 2 3	5 8	1 2 3	5 8	1 2 3	5 8
3 Midwife/TBA 9 DK/NS 4 Husband/Other relative 246. Was this a normal delivery (vaginal) or was it a	4 _	9	4	9	4	9	4	9	4	9
forceps/cesarean delivery? 1 Normal Delivery 2 Forceps Delivery 3 Cesarean Section 9 DK/NS	2	9	2	9	2	9	2	9	2	9
247. After the delivery of (NAME), did you have any of these? [READ EACH ONE]										
A. Did you receive a medical checkup, about 4 weeks after (NAME) was born?	1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS	
B. After (NAME) was born did you take him/her for a newborn medical check up within 21 days of his/her birth?	1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS		1 Yes 2 No 9 DK/NS	
248. At what age was (NAME) child registered?	1 Days 2 Months 3 Years 98 Not Regi 99 DK/NS	istered	1 Days _ 2 Months _ 3 Years _ 98 Not Rec 99 DK/NS	gistered	1 Days 2 Months 3 Years 98 Not Rec 99 DK/NS		1 Days 2 Months 3 Years 98 Not Re 99 DK/NS	gistered	1 Days 2 Months 3 Years 98 Not Re 99 DK/NS	gistered

249. When you became pregnant with (NAME) did you want	1 Yes		1 Yes		1 Yes		1 Yes		1 Yes	
to become pregnant?	2 No		2 No		2 No		2 No		2 No	
IF YES SKIP TO Q251	9 DK/NS		9 DK/NS		9 DK/NS		9 DK/NS		9 DK/NS	
250. Was it that you wanted no more children, or that you just		1		1	1			1		1
wanted to wait longer before another pregnancy?		2		2	2	2		2		2
1 Wanted no more children		9	9	9	9	9		9		9
2 Wanted to wait longer 9 DK/NS										
251. Did you ever breastfeed (NAME)?	1 Yes		1 Yes		1 Yes		1 Yes		1 Yes	
	2 No		2 No		2 No		2 No		2 No	
IF YES SKIP TO Q253	9 DK/NS		9 DK/NS		9 DK/NS		9 DK/NS		9 DK/NS	
252. Why did you not breastfeed (NAME)?	01	07	01	07	01	07	01	07	01	07
01 Mother ill/weak 06 Working	02	80	02	08	02	08	02	80	02	80
02 Child ill/weak 07 Child refused	03	09	03	09	03	09	03	09	03	09
03 Child died 08 Did not know how to	04	88	04	88	04	88	04	88	04	88
04 Nipple/Breast problem 09 Did not want to	05		05		05		05		05	
05 No milk 88 Other (specify)	06	99	06	99	06	99	06	99	06	99
99 DK/NS										
SKIP TO NEXT CHILD										
253. For how many months did you breastfeed (NAME)?	Months		Months		Months		Months		Months	
	00 < 1 mon	ith	00 < 1 mon	ıth	00 < 1 mon	th	00 < 1 mor	nth	00 < 1 mor	ıth
IF CHILD IS STILL BEING BREASTFED (=96) SKIP TO	95 Until die	d	95 Until die	d	95 Until die		95 Until die	ed	95 Until die	
NEXT CHILD OR TOP OF PAGE 13.	96 Still brea	astfeeding	96 Still brea	astfeeding	96 Still brea	astfeeding	96 Still bre	astfeeding	96 Still brea	astfeeding
254. Why did you stop breastfeeding (NAME)?	01	80	01	08	01	08	01	80	01	80
01 Mother ill/weak 07 Child refused	02	09	02	09	02	09	02	09	02	09
02 Child ill/weak 08 Weaning age	03	10	03	10	03	10	03	10	03	10
03 Child died 09 Became pregnant	04	88	04	88	04	88	04	88	04	88
04 Nipple/Breast problem	05		05		05		05		05	
05 No milk 10 Tired of breastfeeding	06		06		06		06		06	
06 Working 88 Other (specify)	07	99	07	99	07	99	07	99	07	99
99 DK/NS										

CONTINUE THE FOLLOWING QUESTIONS WITH THE YOUNGEST CHILD, THAT IS THE CHILD IN COLUMN 1

255.	CHECK IF CHILD WAS EVER BREASTFED (SEEQ25 1 Yes (SKIP TO Q257) 2 No	1, COLUMN 1)	9 DK/NS		
256.	If you had had a better understanding of how to breastfe (NAME)?	ed or were better	informed at	bout the benefits wo	ould you have breastfed
	1 Yes (SKIP TO Q267) 2 No (SKIP TO	Q267)	9 DK/NS	(SKIP TO Q267)	
257.	How long after birth did you first put (NAME) to the brea 000 Immediately 1 Hours 2 Day	st? ys	9 DI	K/NS	
258.	CHECK IF CHILD IS STILL BREASTFED (SEEQ253, 0 1 Yes 2 No (SKIP TO Q264) 3		TO Q264)	9 DK/NS	S (SKIP TO Q264)
259.	How many times did you breastfeed last night between Number of nighttime feedings	6 p.m. and 6 a.m. 99 DK/NS	?		
260.	How many times did you breastfeed yesterday between Number of daylight feedings	6 a.m. and 6 p.m. 99 DK/NS	.?		
261.	At any time yesterday or last night was (NAME) given a		?: [READ] Yes	<u>No</u> <u>DK</u>	(/NS
	1 Formula or milk other than breastmilk? 2 Water? 3 Juice? 4 Other liquids? 5 Any solid or mashed food?	=	1	2	9
262.	CHECK Q261 FOOD / LIQUID GIVEN YESTERDAY 1 Yes to one or all (SKIP TO Q264)	? No to all	9 DK/N	S to all	
263.	Has (NAME) ever been given any water, or something e 1 Yes 2 No (SKIP TO			breastmilk)? S (SKIP TO Q265)	
264.	How many months old was (NAME) when you started gi	•	Months	Novor/Not vo	et DK/NS
	1 Formula or milk other than breastmilk? 2 Water? 3 Juice? 4 Other liquids? 5 Any solid or mashed food? IF AGE OF CHILD WAS LESS THA		· · · · · · · · · · · · · · · · · ·	77 77 77 77	
265.	Where did you receive your information about breastfee	ding? 7 Other relative			
	02 Government Hospital 03 Private Hospital 04 Private Doctor 105 Midwife/TBA 8	17 Other relative 18 Friend 19 Breast is Best 0 Belize Family L 18 Other (specify) 19 DK/NS	_ife Associa	tion (BFLA)	
267.	Did anyone provide you with any information on pregnar With (NAME)? 1 Yes 2 No	ncy and family life (SKIP TO Q269)	while you w)	vere pregnant 9 DK/NS (SKI	IP TO Q269)

268.	Who?			
	1 Doctor		5 Friend	
	2 Mother		8 Other (specify)	
	3 Belize Family Life Association Office4 Nurse	r (BFLA)	9 DK/NS ' '	
269.	How many months after the birth of (NAN	ME) did your menstrual 96 Hasn't returned	period first return? 99 DK/NS	?
270.	Have you resumed sexual relations since	` ,	0 81/410	(0)(10 TO NOTE AFTER 0074)
	1 Yes 2 No (SKIP TO NOT	E AFTER Q271)	9 DK/NS	(SKIP TO NOTE AFTER Q271)
271.	How many weeks after the birth of (NAM weeks	E) did you resume sex	rual relations?	

NOW RETURN TO QUESTION 232 AND COUNT THE NUMBER OF CHILDREN. THEN SELECT ONE CHILD USING THE FOLLOWING GRID

SELECTION OF CHILD

LAST DIGIT OF		NO. OF CHILDREN									
QUESTIONNAIRE NUMBER	1	2	3	4	5						
0	1	2	2	4	3						
1	1	1	3	1	4						
2	1	2	1	2	5						
3	1	1	2	3	1						
4	1	2	3	4	2						
5	1	1	1	1	3						
6	1	2	2	2	4						
7	1	1	3	3	5						
8	1	2	1	4	1						
9	1	1	2	1	2						

	/	1	1	3	3	5
	8	1	2	1	4	1
	9	1	1	2	1	2
272.	Line number of child selected _				(NAME)	
272a.	CHILD ALIVE OR DEAD (SEE Q2 1 Alive 2 De	232) ead (SKIP TO Q	290)	9 DK/NS	(SKIP TO Q290))

273.	In the last two weeks has (NAME) had any of the following	owing symptom	ns <u>Yes</u>	<u>No</u>	DK	/NS
	01 Decreased sucking/loss of appetite		1	2		
	02 Cries become high pitched/nagging		1	2		
	03 Red/teary eyes		1	2		
	04 Stuffed/runny nose	•	1	2		
	05 Sneezing		1	2		
	06 Cough		1	2		
	07 High fever			2		
	08 Sore throat		1	2		
	09 Hoarseness		1 1	2		
	10 Difficulty awallowing		1	2		
	11 Egraphs (or cor scoretions)	•				
	11 Earache (or ear secretions)	•	1	2 2		
	12 Rapid, difficult and loud breathing		1 1	2		
	14 Plug or purple line	•	1			
	14 Blue or purple lips	•	1	2		
		•	1	2		9
	IF ALL ARE 2 AND/OR 9 SKIP TO Q279					
274.	How many days did the symptoms last?					
	days 00 Began to	day	99	DK/NS		
		,				
275.	Did you do anything to improve (NAME)'s condition?					
	1 Yes 2 No (SKIP 1		9 DK/N	S (SKIP TO Q	278)	
		,		- (-	/	
276.	Where did you seek advice or treatment?					
	Government Health Worker	6 Traditional	Healer			
	2 Government Health Center	7 Private Ph	armacv			
	3 Government Hospital		ecify)			
	4 Private Hospital	9 DK/NS				
	5 Private Doctor	0 214110				
	o i maio posto.					
277.	What type of treatment did the child receive? [READ	FACH ONE				
	This type of treatment and the office (table)			Yes	No	DK/NS
	01 Antibiotics				2	9
	Were these prescribed by the health cent			1	2	9
	02 Aspirin				2	9
	03 Antifebril (Tylenol, Panadol, etc.)				2	9
	04 Expectorant/Decongestant				2	9
	05 Pills, syrups, other unspecified treatment				2	9
	06 Home remedies (specify)				2	9
	07 Hospitalized for more than 24 hours				2	9
	08 Other (specify)			1	2	9
	oo outer (opcomy)					
SKIP TO	Q279					
278.	Why did you do nothing?					
	not necessary, was not serious	6 Went to th	ne health center	but they did r	ot see us:	it was closed
	aps should have, but didn't have time		h center is too fa	•		
	't know what to do or what to give the child	8 Other (sp		ii away or nan	2 10 got 10	
	no have any remedies to give the child	9 DK/NS				
	not have enough money	o Branco				
279.	Sometimes, children have diarrhea, that is to say at I	east one liquid	stool in a day.			
	Has (NAME) had diarrhea in the last two weeks?	•	•			
	1 Yes 2 No (SKIP 1	ΓO Q289)	9 DK/N	S (SKIP TO Q	289)	
280.	How many episodes of diarrhea did (NAME) suffer in			•	,	
	episodes 99 DK/NS					
281.	Was there any blood and/or mucous (cold) in the sto	ols?				
	1 Yes 2 No		9 DK/N	3		
282.	When (NAME) had diarrhea did she/he have? [REA	D]				
			<u>Yes</u>	<u>No</u>	DK/	<u>/NS</u>
	1 Constant thirst/ Drank lots of water		1	2	9	9
	2 Dry/wrinkled skin		1	2	9	9
	3 Sunken/dry eyes		1	2		9
	4 Sunken fontanel /Mole drop		1	2	9	
	5 Dry lips		1	2		

283.	Did you do anything to improve the child's con 1 Yes 2 No (DK/NS (SKIP TC	Q288)	
284.	Where did you go? 1 Government Health Worker 2 Government Health Center 3 Government Hospital 4 Private Hospital 5 Private Doctor	6 Traditional Healer 7 Private Pharmacy 8 Other (specify) 9 DK/NS			
285.	What type of treatment did the child receive?	[READ]			
	01 Antibiotics Were these prescribed by the heal 02 Antidiarrheals Were these prescribed by the heal 03 Remedies (over the counter syrup, tablets 04 ORS (Oral Rehydration Salts) 05 Homemade salt/sugar solution 06 Traditional remedies 07 IV (Intravenous treatment) 08 Health education (wash hands, etc.) 09 Hospitalized for more than 24 hours 10 Other (specify)	th center or doctor? th center or doctor? s, etc.)	Yes1111111111111	No	DK/NS
286.	During the time of the diarrhea, did you change 1 Gave normal diet		[READ] Yes1111	No 2 2 2 2	DK/NS99999
287.	During the time of the diarrhea did you change 1 Decreased liquids 2 Increased liquids 3 Only breastfed 4 Withheld breastmilk		re giving him/her?	[READ] No 2 2 2	<u>DK/NS</u> 9. 9. 9.
	5 Withheld formula/milk other than breastmill		1	2	9

ALL SKIP TO Q289

	2 Perhaps should have, but didn't have time 3 Didn't know what to do or what to give the child 4 Did no have any remedies to give the child 5 Did not have enough money 7 The health 8 Other (sp 9 DK/NS							Vent to the health center, but they did not see us; it was closed The health center is too far away or hard to get to Other (specify) DK/NS			
	289.						s vaccinations are written do	s. vn? IF YES, may I please see	it?		
THE INFORMATIC							Y. IF THE M G WITH THE	OTHER DOES NOT HAVE A MOTHER	VACCINATION CARD FOR		
				Code	Mont	h	Year				
	BCG?	?	BCG						Comments		
	POLIC	0 1?	P1								
	POLIC	0 2?	P2								
	POLIC	O 3?	P3								
	POLIC	ОВ	РВ								
	DPT [*]	1?	D1								
	DPT 2	2?	D2								
	DPT (3?	D3								
	DPT I	В?	DPTB								
	MEAS	SLES1	MEA1								
	MEAS	SLES2	MEA2								
	MMR		MMR								
	CODES:	1 HASI	OOSE ACCO 2 HAS DO 3 DOES N 9 DOESN"	SE ACCOF OT HAVE I	RDING DOSE	ТО МОТНЕ					
	Now, I wo	ould like to	ask you a fe	w more que	estions	about your	self?				
	290. Do you self-examine your breasts to check 1 Yes 2 No (SKIP TO 0							9 Don't know/Not stated (\$	SKIP TO Q292)		
	291.	How ofter 1 Every 2 Once	month					now and then know/Not Stated			

Do you have your breasts examined by a medical person?

1 Yes

2 No (SKIP TO Q294)

9 Don't know/Not stated (SKIP TO Q294)

292.

293. How often? 1 Once 4 Every now and then 9 Don't know/Not Stated 2 Every month 3 Oncé a year Have you ever had a pap smear? 294. 1 Yes 2 No (SKIP TO Q296) 9 Don't know/Not stated (SKIP TO Q296) How often? 295. 1 Once 4 Every two years 2 Every six months 9 Don't know/Not Stated 3 Once a year How old were you when you had your first menstrual period?

1 Not yet

2 Years (SKIP TO Q298) 296. 9 DK/NS (SKIP TO Q298) Have you received any information preparing you for your first menstrual period?

1 Yes (SKIP TO Q299)

2 No (SKIP TO SEC.3)

9 Don't known in the properties of the propertie 297. 9 Don't know/Not Stated (SKIP TO SEC.3) Prior to your first menstrual period, had you received information preparing you for that moment?

1 Yes
2 No (SKIP TO SEC. 3)
9 Don't remember (SKIP TO SEC.3) 298. Where, or from whom did you receive this information? 299. 1 Mother/Female guardian 6 Peer 2 Father/Male guardian 7 Book 8 Other (specify) 3 Older sister 4 Other relative 9 Don't know/Not Stated 5 School

SECTION 3 - CONTRACEPTIVE KNOWLEDGE AND USE

301. Now, I would like to talk about methods that people use to space or limit the number of children they have.

INTERVIEWER:

- A. FIRST ASK: Please tell me all the methods you have heard of to space or limit the number of children a person has.

 [INTERVIEWER: Circle Number "1" next to each method she mentions]
- B. THEN ASK: Have you ever heard of [Method]? [INTERVIEWER: Read each method not mentioned spontaneously and circle "2" or "3", as appropriate.]
- C. THEN ASK: Have you or your partner ever used [Method]? [INTERVIEWER: Read each method on the list that has a "1" or "2" and circle "4" or "5" as appropriate.]

	Α	Е	3	С		
METHOD	Spontaneous	Have you ev this m	ver heard of ethod	Have you o ever used t		
		<u>Yes</u>	<u>No</u>	<u>Yes</u>	<u>No</u>	
01 Pill/oral contraceptives	.1	2	3	4	5	
02 Injection	.1	2	3	4	5	
03 Inter-uterine device/coil	.1	2	3	4	5	
04 Condoms (male)	.1	2	3	4	5	
05 Condoms (female)	.1	2	3	4	5	
06 Diaphragm	.1	2	3	4	5	
07 Vaginal foaming tablets	.1	2	3	4	5	
08 Condom and foam	.1	2	3	4	5	
09 Diaphragm and foam	.1	2	3	4	5	
10 Vaginal Creams/jellies	.1	2	3	4	5	
11 Morning after pill/emergency contraception	on 1	2	3	4	5	
12 Rhythm/calendar method	.1	2	3	4	5	
13 Billings method	.1	2	3	4	5	
14 Withdrawal	.1	2	3	4	5	
15 Female sterilization/tubal ligation/tie off	.1	2	3	4	5	
16 Male sterilization/vasectomy	.1	2	3	4	5	
17 Lactation/amenorrhea/breastfeeding	.1	2	3	4	5	
88 Other (specify)	.1	2	3	4	5	

302.	Do you think you are able to get pregnant at the present time 1 Yes (SKIP TO Q304) 2 No	? 3 Already pregnant (SKIP TO Q304a) 9 DK/NS (SKIP TO Q304)
303.	which makes pregnancy impossible (her or her partner) 3 Has tried to get pregnant for at least	4 Sterile 5 Postpartum/breastfeeding 6 Using contraception 7 Not sexually active 8 Other (specify) 9 Don't know/Not Stated
304.	Would you like to become pregnant at this time? 1 Yes 2 No	9 DK/NS
304a.	RESPONDENT HAS NEVER USED A METHOD (NO 4'S AF	RE CIRCLED IN Q301)> SKIP TO Q329
305.	How old were you when you first used contraception? years 99 Don't I	know/Not Stated
306.	How many living children did you have when you first used co	
307.	Are you or a partner currently using a contraceptive method? 1 Yes (SKIP TO Q312) 2 No	9 DK/NS
02 Knev 03 Knev 04 Knev 05 Wani 06 Didn' 07 Partr 08 Knev 09 Had 10 Wani 11 Feard 12 Relig 13 Did n	Why are you or your partner not using a method? RRENTLY PREGNANT of methods but didn't know where to get them of method but couldn't afford it of method but too far from source ted to use a method but couldn't get it at that moment of know of any methods her was against using something of method but too embarrassed to get method method but too embarrassed to use method of to become pregnant ed side effects of contraceptive methods higher was any method	14 Fears side effects of method 15 Past method had bad side effects 16 Advanced age 17 Sexual intercourse not satisfying with last method 18 Past method not effective 19 Past method difficult to use 20 Health/medical reasons 21 Infertile 22 Myth/cultural belief (specify) 23 Not sexually active 77 Don't remember 88 Other (specify) 99 Don't know/Not Stated
309.	What was the month and year you\he stopped using a metho Month Year	id? 00 Don't know/Not Stated
310.	Why did you\he stop using that method? 01 Desire Pregnancy 02 Not Sexually Active 03 Fears Side Effects 04 Spouse Opposes 05 Religion 06 Had Bad Side Effects 07 Advanced Age 08 Lack of Knowledge 09 Far Distance to Source 10 Doesn't Like or Want to Use	11 Sexual Intercourse Not Satisfying 12 Method Not Effective 13 Method Difficult to Use 14 Lack of Money 15 Health/Medical Reasons 16 Infertile 17 Embarrassed to Use 18 Myth/Cultural Belief (specify) 89 Other (specify) 99 Don't know/Not Stated

311.		
	What was the method being used? 01 Pill/oral contraceptives 02 Injection 03 Inter-uterine device/coil 04 Condoms (male) 05 Condoms (female) 06 Diaphragm 07 Vaginal foaming tablets 08 Condom and foam 09 Diaphragm and foam 10 Vaginal Creams/jellies	11 Morning after pill 12 Rhythm/calendar method 13 Billings method 14 Withdrawal 15 Female sterilization/tubal ligation/tie off 16 Male Sterilization/vasectomy 17 Lactation/amenorrhea/breastfeeding 88 Other (specify) 99 Don't know/Not Stated
SKIP T	O SECTION Q329	
312.	What is the method being used? 01 Pill/oral contraceptives 02 Injection 03 Inter-uterine device/coil 04 Condoms (male) 05 Condoms (female) 06 Diaphragm 07 Vaginal foaming tablets 08 Condom and foam 09 Diaphragm and foam 10 Vaginal Creams/jellies	11 Morning after pill 12 Rhythm/calendar method 13 Billings method 14 Withdrawal 15 Female sterilization/tubal ligation/tie off 16 Male Sterilization/vasectomy 17 Lactation/amenorrhea/Breastfeeding 88 Other (specify) 99 Don't know/Not Stated
313.	Do you use this method to space pregnancie infections/HIV/AIDS, or for some other reaso 1 Space pregnancies 2 Want no more children 3 Prevent STIs/HIV/AIDS 4 Options 1 and 3	s, because you want no more children, to prevent sexually transmitted n? 5 Options 2 and 3 8 Other (specify) 9 Don't know/Not Stated
IF QUE	STION 312 HAS OPTIONS 15 OR 16 SKIP TO	SECTION 4
314.		get your contraceptive supplies/receive information about this method
	Local community Elsewhere in country	nunity, somewhere else in the country, or abroad? 3 Abroad 9 Don't know/Not Stated (SKIP TO NOTE AFTER Q315)
315.	Where exactly do you or your partner get the NOTE TO INTERVIEWER: IN CASE OF BII METHOD: Where did you or your partner reconstruction of Government clinic/health center of Private doctor/clinic of Government hospital of Private hospital of Belize Family Life Association (BFLA) of Pharmacy/drugstore	LINGS, CALENDAR/RHYTHM, WITHDRAWAL, OR LACTATION/AMENORRHEA
	or a manufacture	99 Don't know/Not Stated
IF QUE	STION 312 HAS OPTIONS 12, 13, 14 OR 17 S	
IF QUE 316.	STION 312 HAS OPTIONS 12, 13, 14 OR 17 S Who gets the supplies? 1 Myself 2 My partner	
	STION 312 HAS OPTIONS 12, 13, 14 OR 17 S Who gets the supplies? 1 Myself	KIP TO Q328
316.	Who gets the supplies? 1 Myself 2 My partner Can you get this method at any time? 1 Yes 2 No Is any special day or time convenient for you	Skip TO Q328 3 Both 9 Don't know/Not Stated 8 Other (specify) 9 Don't know/Not Stated
316. 317.	Who gets the supplies? 1 Myself 2 My partner Can you get this method at any time? 1 Yes 2 No Is any special day or time convenient for you	3 Both 9 Don't know/Not Stated 8 Other (specify) 9 Don't know/Not Stated ? (SKIP TO Q321) 9 DK/NS

	G. Sunday	1	2	9
320.	What time of the day is convenient t		.,	DI//NIO
	A. Early morning (before 10am) . B. Late morning (10am –12pm) . C. Early afternoon (12pm – 3pm) D. Late afternoon (3pm - 6pm) . E. Evenings	1 1 1	No 2 2 2 2	9 9 9
321.	What are your views on the usual le 1 Too long 2 Not too long		the place you go? Don't know/Not Stated	
322.	How long does it take you to get the	ere? minutes	99. Don't kn	ow/Not Stated
323.	Do you consider it too far away? 1 Yes	2 No	9 DK/NS	8
324.	Do you or your partner pay for the contract 1 Yes	ontraceptive method you	ou now use? 9 DK/NS	8
325.	At the same time, do you or your pa 1 Yes	ortner also use a secon 2 No (SKIP TO Q3		n? S (SKIP TO Q328)
326.	What is the method used? 01 Pill/oral contraceptives 02 Injection 03 Inter-uterine device/coil 04 Condoms (male) 05 Condoms (female) 06 Diaphragm 07 Vaginal foaming tablets 08 Condom and foam 09 Diaphragm and foam 10 Vaginal Creams/jellies		11 Morning after pill 12 Rhythm/calendar m 13 Billings method 14 Withdrawal 15 Female sterilization/u 16 Male Sterilization/v 17 Lactation/amenorrh 18 Other (specify) 19 Don't know/Not Sta	n/tubal ligation/tie off asectomy nea/breastfeeding

327.	Did you use this method to prevent pregnancy, because transmitted infections/HIV/AIDS, or for some other real 1 Prevent pregnancy 2 Wanted no more children 3 Prevent STIs/HIV/AIDS 4 Option 1 and 3	se you wanted no more children, to prevent sexually son? 5 Options 2 and 3 8 Other (specify) 9 Don't know/Not Stated
328.	Would you prefer to use a different method than the or 1 Yes (SKIP TO Q330) 2 No (SKIP TO	
329.	In the future, do you think you will want to use a metho 1 Yes 2 No (SKIP TO	od to prevent pregnancy? SEC. 4) 9 DK/NS (SKIP TO SEC. 4)
330.	What method would you like to use most? 01 Pill/oral contraceptives 02 Injection 03 Inter-uterine device/coil 04 Condoms (male) 05 Condoms (female) 06 Diaphragm 07 Vaginal foaming tablets 08 Condom and foam 09 Diaphragm and foam 10 Vaginal Creams/jellies/foams	11 Morning after pill 12 Rhythm/calendar method 13 Billings method 14 Withdrawal 15 Female sterilization/tubal ligation/tie off 16 Male Sterilization/vasectomy 17 Lactation/amenorrhea/breastfeeding 88 Other (specify) 99 Don't know/Not Stated
331.	Do you know where to obtain this method? 1 Yes 2 No (SKIP TO	9 DK/NS (SKIP TO SEC. 4)
332.	Would you or your partner get this method within your 1 Local community 2 Elsewhere in country	local community, somewhere else in the country, or abroad? 3 Abroad 9 Don't know/Not Stated (SKIP TO Q334)
333.	Where exactly would you or your partner get the methor 01 Government clinic/health center 02 Private doctor/clinic 03 Government hospital 04 Private hospital 05 Belize Family Life Association (BFLA) 06 Pharmacy/drugstore	od? 07 Church 08 Friend/Neighbour/Family member 09 Community health worker 10 Supermarket/Bar/Grocery store 88 Other (specify) 99 Don't know/Not Stated
02 Knew 03 Knew 04 Wan 05 Knew 06 Had 07 Fear 08 Relig	What is the most important reason why you or your pay of methods but didn't know where to get them of of method but couldn't afford it of work of method but too far from source ted to use a method but couldn't get it at that moment of method but too embarrassed to get method method but too embarrassed to use method ed side effects of contraceptive methods gious reasons is side effects of method	rtner are not using this preferred method? 10 Partner opposes 11 Advanced age 12 Health/medical reasons 13 Myth/cultural belief (specify) 14 Not sexually active 77 Don't remember 88 Other (specify) 99 Don't know/Not Stated

SECTION 4 - INTEREST IN STERILIZATION

	SECTION 4	INTEREST IN STERILIZATION
401.	INTERVIEWER: CIRCLE THE CORRECT STAT	US.
	1 RESPONDENT HAS HAD A STERILIZATION 2 RESPONDENT HAS LIVING CHILDREN>C 3 RESPONDENT DOES NOT HAVE LIVING CH	ONTINUE WITH Q402 (SEE Q216)
402.	Do you want to have anymore children? 1 Yes (SKIP TO Q408) 2 No	3 Fate, up to God (SKIP TO Q408) 9 Don't know/Not Stated (SKIP TO Q408)
403.	Would you be interested in an operation that would 1. Yes 2. No. (Sk	uld prevent you from having any more children? IIP TO Q407) 9 DK/NS (SKIP TO Q407)
404.	Do you know where to go for this operation or to 1 Yes 2 No (Sk	get information about it? IIP TO SEC. 6) 9 DK/NS (SKIP TO SEC. 6)
405.	Would you go for this operation within your local 1 Local community 2 Elsewhere in country	community, somewhere else in the country, or abroad? 3 Abroad 9 Don't know/Not Stated (SKIP TO Q406)
405a.	Where exactly would you go? 1 Government clinic/Health Center 2 Government Hospital 3 Private Hospital 4 Private doctor/clinic	7 Abroad 8 Other (specify) 9 Don't know/Not Stated
406.	Since you have all the children you want and you 01 Not Sexually Active 02 Difficult to Reverse 03 Spouse Opposes 04 Religion 05 Advanced Age 06 Lack of Knowledge 07 Far Distance to Source 08 Doesn't Like or Want to Use 09 Fear of Operation 10 Decrease sexual performance	know where to get this operation, why have you not had it? 11 Prefers Using Other Methods 12 Considers Self Too Young 13 May meet another partner in the future who wants children 14 Needs More Information 15 Lack of Money 16 Health/Medical Reasons 17 Infertile 88 Other (specify) 99 Don't know/Not Stated
SKIP TO	O SECTION 6	
407.	Why are you not interested in this operation? 01 Not Sexually Active 02 Difficult to Reverse 03 Spouse Opposes 04 Religion 05 Advanced Age 06 Lack of Knowledge 07 Far Distance to Source 08 Doesn't Like or Want to Use 09 Fear of Operation 10 Decrease sexual performance	11 Prefers Using Other Methods 12 Considers Self Too Young 13 May meet another partner in the future who wants children 14 Needs More Information 15 Lack of Money 16 Health/Medical Reasons 17 Infertile 88 Other (specify) 99 Don't know/Not Stated
	O SECTION 6	
408.	How many (more) children would you like to have children 66 As n	e? nany as possible 77 Fate, up to God 99 Don't know/Not Stated
409.	children?	ou be interested in a operation that would prevent you from having any (more)
	`	(IP TO Q412) 9 DK/NS (SKIP TO Q412)
410.	Do you know where to get this operation or inform 1 Yes 2 No (Sk	nation about it? (IP TO SEC. 6) 9 DK/NS (SKIP TO SEC. 6)
411.	Would you go for this operation within your local 1 Local community 2 Elsewhere in country	community, somewhere else in the country, or abroad? 3 Abroad 9 Don't know/Not Stated (SKIP TO SECTION 6)

Where could you get the operation?
1 Government clinic/Health Center 411a.

8 Other (specify) 2 Government Hospital 9 Don't know/Not Stated

3 Private Hospital

4 Private doctor/clinic

SKIP TO SECTION 6

412.

Why would you not be interested in this operation 01 Not Sexually Active 11 Prefers Using Other Methods
12 Considers Self Too Young
13 May meet another partner in the future who wants children 02 Difficult to Reverse

03 Spouse Opposes

7 Abroad

04 Religion 05 Advanced Age 14 Needs More Information 15 Lack of Money

16 Health/Medical Reasons

06 Lack of Knowledge 07 Far Distance to Source 17 Infertile

88 Other (specify) _____ 99 Don't know/Not Stated 08 Doesn't Like or Want to Use

09 Fear of Operation

10 Decrease sexual performance

SKIP TO SECTION 6

SECTION 5 - STERILIZATION

THIS SECTION IS FOR WOMEN WHO HAVE HAD A STERILIZATION (SEE Q301) ALL OTHER WOMEN SKIP TO SECTION $\boldsymbol{6}$

501.	What was the main reason why you 01 Economic reasons 02 Didn't want anymore children 03 To have more freedom in sexus 04 To avoid unwanted pregnancies 05 Other methods failed 06 Spouse/partner planned before 07 Because of complications in last Labour	al life s , my turn to plan	08 Partner 09 Health 10 Medica 11 It's effic 88 Other (s	r's side effects problems of partners I recommendation cient/very safe specify) now/Not Stated
502.	Where was your sterilization done? 1 Government clinic/Health Cente 2 Government Hospital 3 Private Hospital	8 O	rivate doctor/clinic ther (specify) on't know/Not Sta	
503.	In what country? 1 Belize 2 Guatemala 3 Mexico	4 El Salvador 5 Honduras 6 Nicaragua	8 O	nited States hther (specify) on't know/Not Stated
504.	How old were you when you had the Years	e operation? 99 Don't know/Not St	ated	
505.	Were you satisfied with having the of 1. Yes	operation? 2 No	9 D	K/NS
506.	Do you regret having had the surger 1 Yes	ry? 2 No (SKIP TO Q508)	9 D	K/NS (SKIP TO Q508)
507.	Why do you regret it? 01 Wish to have another child 02 Partner is not happy/wants ano 03 Have new husband/partner 04 Subsequent health problems 05 Religious issues/sense of culpa 06 Surgery has caused emotional	ability	08 Feels le 09 Reduce 88 Other (s	please husband/partner ess feminine es chances of getting a partner specify) now/Not Stated
508.	Would you recommend to another v 1 Yes	voman that she gets surge 2 No		ave more children? K/NS
509.	After the surgery, how do you feel p 1 Less feminine 2 More feminine 3 Same as before having surgery	eople see you? [READ]		care how people see her ow/Not Stated
510.	After having the sterilization, you fee 1 More satisfactory 2 Less satisfactory 3 Same as before having surgery	el your sexual relations are	4 Haven't t 5 Has no c	tried out yet opinion ow/Not Stated

SECTION 6 - RELATIONSHIP STATUS AND PARTNERSHIP HISTORY

	600. Are you in a relationship of the same sex, heterosexu 1 Same sex (SKIP TO Q602) 2 Heterosexual 3 Both					al, both or none? 4 None (SKIP TO Q602) 9 Don't know/Not Stated			
	601. IF Q601	1 Leg 2 Coi 3 Vis	s you current union gally married and liv mmon-law union iting sexual relation IN UNION) CONTII	ring with spouse	5 I 6 '	Legally married bu Legally separated Widowed and not	but not in union	7 Divorced and not in union8 Not in union9 Don't know/Not Stated	
	,				ommon-law union No (SKIP TO S		9 DK/NS (SKII	P TO SECTION 7)	
					ed or lived in a co	n a common-law union with a male? IF '00' TIMES SKIP TO SECTION			
		ti	mes	99	Don't know/Not	Stated			
604.			ory of all your marr and ending with th		on-law unions. C	ould you tell me a	about each one beginning	with the most recent	
Partner	605. In month year d	what and	606. What is your current union status	607. In what month and year did your	608. How old were you when you first	609. How old was Partner #X when you	610. What was your level of education when you first began	611. What was Partner #X level of education when you	

Partner	605. In what month and year did you first start living with Partner #X ?	your of union with F ? 1 Tog (SKIF Q608	arated	: : · #X	607. In what month and year did your union with Partner #X end?	608. How old were you when you first began living with Partner # X?	609. How old was Partner #X when you first began living with him?	610. What was your level of education when you first began living with Partner #X?	611. What was Partner #X level of education when you first began living with him?
1	M Y 19	1	2	9	M Y 19	Years	Years	Level Year	Level Year
2	M Y 19	1	2	9	M Y 19	Years	Years	Level Year	Level Year
3	M Y 19	1	2	9	M Y 19	Years	Years	Level Year	Level Year
4	M Y 19	1	2	9	M Y 19	Years	Years	Level Year	Level Year
5	MY	1	2	9	M Y 19	Years	Years	Level Year	Level Year
6	M Y 19	1	2	9	M Y 19	Years	Years	Level Year	Level Year

NOTE TO INTERVIEWER: For Q610 and Q611, on the first line write out the level of education which refers to None, Pre-school, Primary, High School, Sixth Form, BTTC/BCA/BNS, University, DK/NS, and on the second line write out the standard/form/year that the person was in or had completed at that time.

SECTION 7 - SEXUAL ACTIVITY

701.	At what age did you first have 77 Never had sexual interce	ve sexual intercourse? ourse (SKIP TO SECTION	Years 8)	99 Don't know/Not Stated
702.	Were you in school at the tin	me you first had sexual inte 2 No		9 DK/NS
703.	What standard/form/year an	nd school level had you con	npleted when you fire	st had sexual intercourse?
	school level	standard/form	n/year	
	RECORD BOTH A AND B A Highest school level com 1 None 2 Primary 3 High School 4 BTTC/BCA/BNS	npleted?	5 Sixth Form or 6 University 9 Don't know/No	•
	B Number of years beyond	l level <u>completed</u> .	Years	
704.	Was this first sexual interco 1 Yes	urse on a consensual basis 2 No		9 DK/NS
705.	What was your relationship 01 Husband/common-law 02 Visiting partner 03 Fiancé/boyfriend 04 Friend 05 Casual acquaintance 06 Mother's partner		you first had sexual 08 Incest (father 09 Incest (other 88 Other (specif 99 Don't know/N	/brother) relative) y)
706.	What was the age of the ma	ale at the time that you first 98 Don't remember		rse with him? Don't know/Not Stated
707.	Was he in school at the time 1 Yes	e you first had sexual interd 2 No		9 DK/NS (SKIP TO Q709)
708.	What standard/form/year an	nd school level had he com	pleted when you first	had sexual intercourse?
	school level	standard/form	n/year	
	RECORD BOTH A AND B A Highest academic level of 1 None 2 Primary 3 High School 4 BTTC/BCA/BNS	completed?	5 Sixth Form or 6 University 9 Don't know/No	·
	B Number of years beyond	l level <u>completed</u> .	Years	
709.	Now, I would like you to thin	k back to the first time you	had sexual intercou	rse with a man.
	Did you or your partner use	a contraceptive method du	ring this first sexual	intercourse?
	1 Yes	2 No (SKIP TO	Q714)	9 DK/NS (SKIP TO Q714)

710.	What was the method used? 01 Pill/oral contraceptives 02 Injection 03 Inter-uterine device/coil 04 Condoms (male) 05 Condoms (female) 06 Diaphragm 07 Vaginal foaming tablets 08 Condom and foam 09 Diaphragm and foam 10 Vaginal Creams/jellies/foams	11 Morning after pill 12 Rhythm/calendar method 13 Billings method 14 Withdrawal 15 Female sterilization/tubal ligation/tie off 16 Male Sterilization/vasectomy 17 Lactation/amenorrhea/breastfeeding 88 Other (specify) 99 Don't know/Not Stated
711.	Did you or your partner get that method, or informationabroad? 1 Local community 2 Elsewhere in country	on about it within your local community, somewhere else in the country, or 3 Abroad 9 Don't know/Not Stated (SKIP TO Q713)
712.	Where exactly did you or your partner get the method NOTE TO INTERVIEWER: IN CASE OF BILLINGS, Where did you or your partner receive orientation? 01 Government clinic/health center 02 Private doctor/clinic 03 Government hospital 04 Private hospital 05 Belize Family Life Association (BFLA) 06 Pharmacy/drugstore	l used during your first sexual intercourse? RHYTHM, WITHDRAWAL, OR LACTATION/AMENORRHEA METHOD: 07 Church 08 Friend/Neighbour/Family member 09 Community health worker 10 Supermarket/Bar/Grocery store 88 Other (specify) 99 Don't know/Not Stated
713.	Whose decision was it to use this method? You alone 1 My decision 2 Partner's decision 3 Decision made together	e, your partner alone, or was it made together? 7 Don't remember 9 Don't know/Not Stated
713a.	Did you use this method to prevent pregnancies, to p 1 Prevent pregnancies 2 Prevent STIs/HIV/AIDS 3 Both	revent sexually transmitted infections/HIV/AIDS, or for some other reason? 8 Other (specify) 9 Don't know/Not Stated
SKIP TO	QUESTION Q715	
714.	Why didn't you or your partner use a contraceptive m	ethod during this first sexual intercourse?
02 Kne 03 Kne 04 Kne 05 Wa 06 Did 07 Par	n't expect to have sexual relations at that time ew of methods but didn't know where to get them ew of method but couldn't afford it ew of method but too far from source nted to use a method but couldn't get it at that momen't know of any methods ther was against using something ew of method but too embarrassed to get method	09 Had method but too embarrassed to use method 10 Feared side effects of contraceptive methods 11 Religious reasons 12 Did not want to use any method 17 Doesn't remember 18 Other (specify) 19 Don't know/Not Stated
715.	Have you had sexual intercourse with a male in the la 1 Yes 2 No (SKIP T	· · · · · · · · · · · · · · · · · · ·

times	al intercourse with a ma	ale in the last 3	30 days?	
77 Don't remember – less than 30	79	Don't remem	nber	
78 Don't remember – more than 30	99	Don't know/N	Not Stated	
ΓΟ Q718				
Have you had sexual intercourse with 1 Yes			9 DK/NS	(SKIP TO Q719)
With how many males have you had	sexual intercourse in the	he last 3 mont	hs?	
Was your last sexual intercourse on 1 Yes	a consensual basis? 2 No		9 DK/NS	
What was your relationship to the las 01 Husband/common-law 02 Visiting partner 03 Fiancé/boyfriend 04 Friend 05 Casual acquaintance	06 88	Mother's pa Other (spec	rtner ify	
	times 77 Don't remember – less than 30 78 Don't remember – more than 30 FO Q718 Have you had sexual intercourse with 1 Yes With how many males have you had males 77 Don't remember – less than 10 78 Don't remember – more than 10 Was your last sexual intercourse on 1 1 Yes What was your relationship to the las 01 1 Husband/common-law 02 Visiting partner 03 Fiancé/boyfriend 04 Friend	times 77 Don't remember – less than 30 79 78 Don't remember – more than 30 99 FO Q718 Have you had sexual intercourse with a male in the last 3 m 1 Yes 2 No (SKIP TO Q77) With how many males have you had sexual intercourse in the last 3 m 1 Yes 2 No (SKIP TO Q77) With how many males have you had sexual intercourse in the last males 77 Don't remember – less than 10 79 78 Don't remember – more than 10 99 Was your last sexual intercourse on a consensual basis? 1 Yes 2 No What was your relationship to the last male with whom you 01 Husband/common-law 06 02 Visiting partner 88 03 Fiancé/boyfriend 99 04 Friend	times 77 Don't remember – less than 30 79 Don't remem 78 Don't remember – more than 30 99 Don't know/f TO Q718 Have you had sexual intercourse with a male in the last 3 months? 1 Yes 2 No (SKIP TO Q719) With how many males have you had sexual intercourse in the last 3 mont males 77 Don't remember – less than 10 79 Don't remem 78 Don't remember – more than 10 99 Don't know/f Was your last sexual intercourse on a consensual basis? 1 Yes 2 No What was your relationship to the last male with whom you had sexual int 01 Husband/common-law 06 Mother's pa 02 Visiting partner 88 Other (special contents) 03 Fiancé/boyfriend 99 Don't know/f 04 Friend	77 Don't remember – less than 30 79 Don't remember 78 Don't remember – more than 30 99 Don't know/Not Stated FO Q718 Have you had sexual intercourse with a male in the last 3 months? 1 Yes 2 No (SKIP TO Q719) 9 DK/NS With how many males have you had sexual intercourse in the last 3 months? — males 77 Don't remember – less than 10 79 Don't remember 78 Don't remember – more than 10 99 Don't know/Not Stated Was your last sexual intercourse on a consensual basis? 1 Yes 2 No 9 DK/NS What was your relationship to the last male with whom you had sexual intercourse? 01 Husband/common-law 06 Mother's partner 02 Visiting partner 88 Other (specify — 99 Don't know/Not Stated 04 Friend

SECTION 8 - HIV/AIDS

800.	Have you ever heard of HIV/AIDS? 1 Yes 2 No (SKIP TO	O SECT. 9) 9 DK/	NS (SKIP TO SECT. 9)
801.	Where did you first hear of HIV/AIDS? 01 Parents/guardians 02 Sisters/brothers 03 Belize Family Life Association (BFLA) 04 Teachers 05 Peers/friends 06 Media (specify) 07 Books/Publications 08 Internet	09 Religious leader 10 Health personnel 11 Alliance against AIDS 12 National AIDS Task Fo 13 Red Cross 88 Other (specify) 99 Don't know/Not Stated	orce
802.	In what ways do you think a person can get the HIV/AI [Prompt, but do not read]	IDS virus?	
		<u>Mentioned</u>	Not mentioned
	1 Shaking hands	1	2
	the HIV/AIDS virus	1	2
	3 Sharing personal items like dishes, toilets, etc.	1	2
	4 Sharing needles used for drugs	1	2
-	5 Sexual intercourse between men	1	2
	6 Sexual intercourse between women	1	2
	7 Sexual intercourse between a man and a woman	1	2
	8 Giving a blood donation	1	2
	Receiving a blood transfusion	1	2
_	someone with the AIDS virus	1	2
	1 Kissing, love bites/hickies/vamps	1	2
	2 Oral sex	1	2
	3 Tattoo/acupuncture	1	2
	4 From mother to child during pregnancy/childbirth	1	2
	5 From mother to child via breastfeeding	1	2
	6 Sharing shaving units	1	2
1	7 Sharing dental instruments/devices	1	2
8	8 Other (specify)	1	2
803.	What risk do you think there is of you getting HIV/AIDS Would you say that you have [READ] 1 A great risk (SKIP TO Q805)	S? 4 No risk at all	
			(SKID TO OSOS)
	2 Some risk (SKIP TO Q805) 3 Not much risk	9 Don't know/Not Stated	(SKIP TO GOOD)
804.	Why do you think you have little or no risk of getting A	IDS2 [Do not read]	
JU4.	01 Abstinence from sex (SKIP TO Q806)		blood transfusion
	02 Use of condoms		uses new needles
	03 Only one partner/fidelity	88 Other (s	
	04 Limited number of partners		now/Not Stated
	05 Partner has no other partner	33 2 011 Ki	ion, not oldiod
	06 Has no sexual contact with a homosexual/bisexual		
	TELLINE CONGRESSIONAL MINISTER MONICOONGRESSIONAL		

NOTE: SKIP TO Q806

805.	Why do you think you have a mode	0 0	<u>Yes</u>		<u>No</u>
	01 Doesn't use condoms		1		2
	02 Has more than one partner		1		2
	03 Partner has/may have another partner		1		2
	04 Has sexual contact with homosexual		1		2
	05 Gets blood transfusions		1		2
	06 Uses needles used by others		1		2
	07 Going to a barber		1		2
	08 Going to the dentist		1		2
	88 Other (specify)		1		2
806.	How can anyone avoid getting HIV/	AIDS.	naaaaaam/l		
	[NOTE TO INTERVIEWER: Do not	read but circle as many as	Yes Yes		<u>No</u>
	01 Be monogamous/Have only one sexu		1		2
	02 Reduce number of partners		1		2
	03 Abstinence		1		2
	04 Don't have oral sex		1		2
	05 Don't have anal sex		1		2
	06 Don't have sex with homosexuals		1		2
	07 Don't have sex with strangers		1		2
	08 Don't have sex with prostitutes		1		2
	09 Don't share needles for drugs/tattoos		1		2
	10 Don't have unsafe blood transfusion	acupuliciule	1		2
			1		2
	11 Use condoms				
	88 Other (specify)		1		2
	99 Don't know/Not Stated		1		2
807.	Have you in any way modified your			. (0)(15 =0.000	
	1 Yes	2 No (SKIP TO Q809)	9 DK/N	S (SKIP TO Q809)
808.	In what ways? [READ]				
		<u>Yes</u>	<u>No</u>	Already using	DK/
	01 Abstinence	1	2	3	9
	02 Condoms	1	2	3	9
	03 Diaphragm	1	2	3	9
	04 Spermicidal Jelly	1	2	3	9
	05 Foam or cream	1	2	3	9
	06 Sex without penetration	1	2	3	9
	07 Reduction in number of partners	1	2	3	9
	08 Monogamy/Fidelity	1	2	3	9
	88 Other (specify)	1	2	3	9
	99 Don't know/Not Stated	1	2	3	9
809.	Do you think a person can be infect 1 Yes	ted with the AIDS virus and 2 No	not show symptoms 9 DK/N		
810.	Suppose you had the AIDS virus, w	ould you tell your partner or	r partners?		
	1 Yes (SKIP TO Q812)	2 No	9 DK/N	S	
811.	Why not?				
	1 End of my sex life		5 Fear of I	osing job	
	2 Will be abused (beaten)		6 Fear of o	dying alone	
	2 Will be abased (beater)		8 Other (s	, ,	
	3 Will become an outcast		(-	. ,,	
	3 Will become an outcast		9 Don't kn	ow/Not Stated	
812.	3 Will become an outcast4 Fear of losing children		9 Don't kn	ow/Not Stated	
812.	3 Will become an outcast4 Fear of losing children	2 No	9 Don't kn 9 DK/N		
812. 813.	3 Will become an outcast 4 Fear of losing children Is there a cure for AIDS? 1 Yes		9 DK/N		
	3 Will become an outcast 4 Fear of losing children Is there a cure for AIDS?		9 DK/N	S	
813.	 3 Will become an outcast 4 Fear of losing children Is there a cure for AIDS? 1 Yes Do you personally know anyone wh 1 Yes 	o has HIV/AIDS or has died 2 No	9 DK/N d from AIDS? 9 DK/N	s s	
	3 Will become an outcast 4 Fear of losing children Is there a cure for AIDS? 1 Yes Do you personally know anyone wh 1 Yes How effective do you think condom	o has HIV/AIDS or has died 2 No	9 DK/N d from AIDS? 9 DK/N smission of AIDS? [R	S S EAD]	
813.	3 Will become an outcast 4 Fear of losing children Is there a cure for AIDS? 1 Yes Do you personally know anyone wh 1 Yes How effective do you think condom 1 Very effective	o has HIV/AIDS or has died 2 No	9 DK/N d from AIDS? 9 DK/N smission of AIDS? [R 4 Ineffecti	S S EAD] ve	
813.	3 Will become an outcast 4 Fear of losing children Is there a cure for AIDS? 1 Yes Do you personally know anyone wh 1 Yes How effective do you think condom	o has HIV/AIDS or has died 2 No	9 DK/N d from AIDS? 9 DK/N smission of AIDS? [R 4 Ineffecti 8 Other (s	S S EAD] ve	

SECTION 9 - CONDOMS

IF PERSON HAS NEVER HAD SEXUAL INTERCOURSE SKIP TO Q926 (SEE Q701)

900.	Has a male partner ever suggested to you that he use a con 1 Yes (SKIP TO Q902) 2 No	ndom? 9 DK/NS
901.	Would you allow a male partner to use a condom if he requ 1 Yes 2 No	ested that a condom be used? 9 DK/NS
SKIP T	O Q903	
902.	Did you allow him to use a condom? 1 Yes 2 No	9 DK/NS
903.	Have you ever suggested to a male partner that he use a confirmation 1. Yes 2. No (SKIP TO Q90)	
904.	Did he agree to use a condom? 1 Yes 2 No	9 DK/NS
905.	Are you presently using condoms with any male? 1 Yes 2 No (SKIP TO Q9)	9 DK/NS (SKIP TO Q918)
905a.	How old were you when you first used condoms?	Years 99 DK/NS
906.	How often do you use condoms when you have sexual inter 1 Always 2 Most of a the time 3 Seldom	course with a steady partner? [READ] 4 Never (SKIP TO Q908) 5 No steady partner (SKIP TO Q909) 9 Don't know/Not Stated (SKIP TO Q909)
907.	Why do you use condoms with a steady partner? (Don't re	,
	1 To prevent unwanted pregnancies 2 To prevent HIV/AIDS 3 To prevent STIs 4 To prevent infecting partner 5 Hygiene (e.g. during menstruation) 8 Other (specify) 9 Don't know/Not Stated	12 12
IF Q906	6 = 3 OR 4 CONTINUE, ELSE SKIP TO Q909	
908.	Why do you seldom or never use? 01 It's expensive 02 Rarely has sex 03 Use it only on fertile days 04 Use it only when partner is not using other method 05 Limits pleasure/not comfortable 06 Use it only in extra-marital affairs/different partner	07 Only have one partner/faithful 08 Use it only with strangers 09 It is not safe 10 Partner opposes 88 Other (specify) 99 Don't know/Not Stated
909.	How often do you use condoms when you have sexual inter 1 Always 2 Most of a the time 3 Seldom	course with a non-steady partner? [READ] 4 Never (SKIP TO Q911) 5 Never have sex with non-steady partner (SKIP TO Q912) 9 Don't know/Not Stated (SKIP TO Q912)

910.	Why do you use condoms with a non-steady partner?	(Don't read)	
		<u>Yes</u>	<u>No</u>
	1 To prevent unwanted pregnancies	1	2
	2 To prevent HIV/AIDS	1	2
	3 To prevent STIs	1	2
	4 To prevent infecting partner	1	2
	5 Hygiene (e.g. during menstruation)	1	2
	8 Other (specify)	1	2
	9 Don't know/Not Stated	1	2
IF Q90	99 = 3 OR 4 CONTINUE, ELSE SKIP TO Q912		
911.	Why do you seldom or never use?		
	01 It's expensive		
	02 Rarely has sex	08 Use it only v	with strangers
	03 Use it only on fertile days	09 It is not safe	9
	04 Use it only when partner is not using other method	88 Other (spec	ify)
	05 Limits pleasure/not comfortable	99 Don't know/	Not Stated
	06 Use it only in extra-marital affairs/different partner		
912.	Since you have been using condoms, have they caused y 1 Yes 2 No (SKIP TO Q		ence or discomfort? (SKIP TO Q914)
913.	What problem, inconvenience or discomfort have you or y	our partner had when you ι Mentione	
1	They irritate you/they feel hot/burn	1	-
2	? They irritate your partner	1	
	S Sensitivity is not the same	1	
	Interruption of sexual act when you put on the condom	1	
	Condoms break	1	
	It stayed inside me	1	
	Smell of the lubricant/condom	1	
	3 Other (specify)	1	
g	Don't know/Not Stated	1	
914.	What brand condoms do you use mostly?		
0	01 Magnum	10 Bareback	
	02 Rough Rider	11 Ramses	
	03 Guardián	12 Wet and Wi	ld
	04 Stimula	13 Nuda	
	05 Vive	14 Playboy	
	06 Innotex		lon't care about brand
	07 Generic (no color, no logo)	88 Other (spec	
	08 Erótica	99 Don't know/	
	09 Trojan		
915.	Most of the time, where do you or your partner get condor	ms?	
		07 Church	
		08 Friend/Neighbour/Family	member
		09 Community health worke	
		10 Supermarket/Bar/Grocer	
	05 Belize Family Life Association (BFLA)	88 Other (specify)	-
	06 Pharmacy/drugstore	99 Don't know/Not Stated	
916.	Do you or your partner normally keep condoms?		
-	1 Yes	3 Sometimes	
	2 No (SKIP TO Q927)	9 Don't know/Not State	ed (SKIP TO Q926)

917.	Where do you or you partner norm 1 Car 2 Wallet 3 Refrigerator 4 Cupboard/drawer	ally keep them?	5 Pocket 8 Other (sp 9 Don't kno	pecify) pw/Not Stated	d	
		SKIF	P TO Q926			
918.	Have you ever used condoms? 1 Yes	2 No (SKIP TO	Q925)	9 DK/NS	(SKIP TO C	Q925)
919.	How old were you when you first u	sed condoms?	Years	99 [OK/NS	
920.	Why did you use condoms?	(Don't read)	Ye	S	No	
	1 To prevent unwanted pregnancies 2 To prevent HIV/AIDS 3 To prevent STIs 4 To prevent infecting partner 5 Hygiene (e.g. during menstruation) 8 Other (specify) 9 Don't know/Not Stated		1 1 1 1		2 22 22 22	·· ·· ·· ··
921.	During the time that you used cond 1 Yes		e you any problen Q923)			
922.	What problem, inconvenience or d	liscomfort did you or y	our partner have	when using o		Not mentioned
	1 They irritate you/they feel hot/burn			1		2
	2 They irritate your partner			1		2
	3 Sensitivity is not the same			1		2
	4 Interruption of sexual act when you p			1		2
	5 Condoms break			1		2
	6 It stayed inside me			1		2
	7 Smell of the lubricant/condom			1		2
	8 Other (specify)			1		2
000						
923.	Most of the time, where did you or 01 Government clinic/health cent		oms? 07 Church			
	02 Private doctor/clinic	lei	08 Friend/Neigh	hour/Eamily	mombor	
	03 Government hospital		09 Community h			
	04 Private hospital		10 Supermarket			
	05 Belize Family Life Association	(BFLA)	88 Other (specif			
	06 Pharmacy/drugstore	. (3. 2.)	99 Don't know/N			_
924.	Why aren't you using condoms pre	esently?				
	01 Inconvenient to get	•	09 Partr	ner is faithful		
	02 They are expensive		10 Don't	like condom	IS	
	03 Only have one partner/faithful		11 Partr	ner doesn't lik	ce condoms	
	-		12 Not s	exually activ	е	
	05 Use another method			ts pregnancy		
	06 Reduces pleasure/it is uncom	fortable		r (specify) _		
	07 Aren't safe		99 Don't	know/Not St	tated	

SKIP TO Q926

09 Partner is faithful 10 Don't like condoms 11 Partner doesn't like condo 12 Not sexually active 13 Doesn't know how to obtai 14 Wants pregnancy 88 Other (specify) 99 Don't know/Not Stated	n them
Mantlemad	Network
	Not mentioned
1	2
1	2
1	2
1	2
1	2
ondoms? 9 DK/NS (SKIP To	O Q929)
rch nd/Neighbour/Family member munity health worker ermarket/Bar/Grocery store er (specify)	
t know/Not Stated	
oms. READ]	
<u>Agree</u>	Not agree DK/NS
1	2 9
1	2 9
	2 9
	2 9
11111188	10 Don't like condoms 11 Partner doesn't like condo 12 Not sexually active 13 Doesn't know how to obtai 14 Wants pregnancy 18 Other (specify) 19 Don't know/Not Stated Mentioned

SECTION 10 - FAMILY LIFE EDUCATION

1001.	Do you think that schools should teach co	Yes	No	DK/NS	
	A Human reproduction	1	2	9	
	B Contraception	1	2	9	
	C STIs/HIV/AIDS	1	2		
	0 0115,111,71120111111111111				
1002.	What do you think is the ideal age when A Human reproduction	Years	e taught the follow	ing topics: [READ]	
	B Contraception C STIs/HIV/AIDS	Years Years			
	C STIS/HIV/AIDS	_ Teals	99 = DK	/NS	
ONLY	OUNG WOMEN 13 - 34 SHOULD CONTI	NUE.			
1003.	Have you ever received any information f 1 Yes 2	rom your parents or No (SKIP TO Q100		regnancy and how it o K/NS (SKIP TO Q100	
1004.	How old were you when you first received years		99 Don't know/No	t Stated	
1005.	Have you ever received any information f	rom vour parents or	guardians about b	irth control methods?	
		No (SKIP TO Q100		K/NS (SKIP TO Q100	9)
1000		l this information O			
1006.	How old were you when you first received years		99 Don't know/No	t Stated	
	years		oo borr know, no	Clated	
1009.	Have you ever had a class or course abo				
	1 Yes 2	No (SKIP TO Q101	8) 9 D	K/NS (SKIP TO Q101	8)
1012.	How old were you when you had the first years of age	class or course?	99	Don't remember	
1013.	In what standard/form/year and school le	vel were vou when v	ou had this class o	or course?	
1010.					
	school level		standard/form/year	r	
	RECORD BOTH A AND B				
	A Highest academic level completed?				
	1 None	5	Sixth Form or Equi	valent	
	2 Primary		University	vaiciii	
	3 High School		Don't know/Not Sta	tod	
	4 BTTC/BCA/BNS	9	DOITE KHOW/NOE Sta	iteu	
	B Number of years beyond level comple	eted.	Years		
1014.	Who was the main person who taught thi	s first class or cours	se?		
	01 School teacher		Youth Officer (YM	CA. Scouts, etc.)	
	02 Counsellor or psychologist		Peers/friends	o. 1, 000 a.to, 010./	
	03 Physician/Nurse		Parent/guardian		
	04 Belize Family Life Association Office		Religious person		
	(BFLA))	
	05 COMPAR/Min. of Human		Other (specify)		_
	Development Personnel		Don't know/Not Sta	ated	
1016.	Did this first class or course in school inc				
1010.	Did this hist class of codisc in school hic	idde imorriation on	Yes	No	DK/NS
	A The human reproductive system		1		9
	B The woman's menstrual cycle or per		1		9
	C Pregnancy, and how it occurs		1		
	D Modern birth control methods such a		1		
	pill, IUD or injections		1	2	9
			1		
	E Condoms		1		
	G STIs/HIV/AIDS		1		
	H Parenting		1		
	I Values and Roles		1		9

1017.	Did the class or course include information on the follo			
	A. Osamas Para	Yes	No	DK/NS
	A Counseling		2	9
	C. Distribution of contracentives			9
	C Distribution of contraceptives	1	2	9
1018.	Have you ever had a formal class or course about fam 1 Yes 2 No (SKIP TO		here <u>outside of the</u> S (SKIP TO Q102	
1019.	Which organisation conducted the formal class or cour	·se?		
1015.	02 Doctor's office/clinic	07 Youth Group (YMCA,	Scouts etc.)	
	03 NOPCA	08 Peer Group	000010, 010.)	
	04 Belize Family Life Association (BFLA)	10 Church		
	05 COMPAR/Min. of Human	11 Volunteer (specify) _		
	Development Personnel	88 Other (specify)		_
	06 SHAPES	99 Don't know/Not Stated	t	
1020.	Who was the main person who taught this first class of	r course?		
.020.	01 School teacher	06 Youth Officer (YMCA,	Scouts, etc.)	
	02 Counsellor or psychologist	07 Peers/friends	, ,	
	03 Physician/Nurse	08 Parent/guardian		
	04 Belize Family Life Association Officer	09 Religious person		
	(BFLA)	10 Volunteer (specify) _		_
	05 COMPAR/Min. of Human	88 Other (specify)		
	Development Personnel	99 Don't know/Not Stated	d	
1021	Did this first class or course outside of school include i	nformation on any of the follo	owing? [READ]	
		Yes	No	DK/NS
	A The human reproductive system	1		9
	B The woman's menstrual cycle or period	1		9
	C Pregnancy, and how it occurs	1	2	9
	D Modern birth control methods such as the			
	pill, IUD or injections	1	2	
	E Condoms	1	2	
	F Diseases that can result from sexual contacts	1	2	
	G STIs/HIV/AIDS	1	2	9
	H Parenting	1	2	9
	I Values and Roles	1	2	9

1022.	Did the class or course include information on the following	Yes	No	DK/NS
	A Counseling	1	2	9
	B Clinic services	1	2	9
	C Distribution of contraceptives	1	2	9
1023.	Which is your preferred source of information about fa 01 Parents/guardians	amily life or sex education to 08 Books/Publications	opics?	
	02 Sisters/brothers	09 Internet		
	03 Belize Family Life Association (BFLA)	10 Religious leader		
	04 Teachers	11 Health personnel		
	05 Peers/friends	88 Other (specify)		
	06 Media (specify)	99 Don't know/Not State	ed	
	07 Counsellor			
1024.	Do you know where to go if you need to get informatic 1 Yes 2 No (SKIP TO		/NS (SKIP TO Q102	26)
1025.	Where?			
1025.	01 Government clinic/health center	08 Family member		
	02 Private doctor/clinic	09 Friend/Neighbour		
	03 Government hospital	10 Community health w	orkor	
	04 Private hospital	11 Supermarket/Bar/Gr	ocory ctoro	
			ocery store	
	05 Belize Family Life Association (BFLA) 06 Pharmacy/drugstore	88 Other (specify) 99 Don't know/Not State		
	07 Church	99 DOITE KNOW/NOT STATE	eu	
1006	Do you know where to go if you need information on a	annually transmitted infaction	no?	
1026.	Do you know where to go if you need information on s 1 Yes 2 No (SKIP TO	Q Q1028) 9 DK	/NS (SKIP TO Q102	28)
1027.	Where?			
	01 Government clinic/health center	08 Family member		
	02 Private doctor/clinic	09 Friend/Neighbour		
	03 Government hospital	10 Community health w	rorker	
	04 Private hospital	11 Supermarket/Bar/Gr		
	05 Belize Family Life Association (BFLA)	88 Other (specify)		
	06 Pharmacy/drugstore	99 Don't know/Not State	ed	
	07 Church			
1028.	Do you know where to go if you need information on h	HIV/AIDS?		
	1 Yes 2 No (SKIP TO SE		K/NS (SKIP TO SE	CTION 11)
1029.	Where?			
	01 Government clinic/health center	08 Family member		
	02 Private doctor/clinic	09 Friend/Neighbour		
	03 Government hospital	10 Community health w	orker	
	04 Private hospital	11 Supermarket/Bar/Gr		
	05 Belize Family Life Association (BFLA)	88 Other (specify)	oodly stole	
	06 Pharmacy/drugstore	99 Don't know/Not State		
	07 Church	33 Don't Know/140t State	Ju	
	or original			

SECTION 11 - ATTITUDES TOWARDS CHILDBEARING AND CONTRACEPTION

1101.	Over the past 6 months, have you se	Yes	No		DK/NS		
	A. On the radio?	. 1.	2.		9		
	B. On television?				9		
	C. In a local newspaper?		2.		9		
IF ALL I	NO SKIP TO Q1103						
1102.	Were any of these from the Belize F	amily Life Association	nn?				
1102.	1 Yes	2 No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	9 DK/NS			
				0 2.0.0			
1103.	What does the term "Family Plannin	g" mean to you? Cire	cle as many as	s necessary, do n	ot prompt.		
	1 Planning the number of children		Use of condor	m			
	2 Planning the time when to have child		Family health				
	3 Planning when to start a family		Infertility treat				
	4 Planning sexual life/relations		Family life edu				
	5 Planning the family budget/expenses			tion/sexual hygier			
	6 Preventing unwanted pregnancies 7 Preventing STIs			r)	nancy (prenatal care)		
	8 Preventing abortion		Don't know/No				
	9 Use of contraceptive methods	00	2011 (101017) 110	or Oracou			
1104.	In your opinion, what is the main rea	son a woman might	wish to limit th	ne number of child	dren that she has?		
	1 Financial 6 Child care problem						
	2 Work related		7 Health of c				
	3 Schooling	8 Other (specify)					
	4 Health of mother		9 Don't know	//Not Stated			
	5 Physical appearance						
1105.	Do you think that a woman always h	as the right to decide	e about her pre	egnancy, includin	g whether		
	or not to have an abortion?						
	1 Yes	2 No		9 DK/NS			
1106.	Under what circumstances do you th	ink it should be acco	eptable to term	ninate a pregnanc	ey, that is, have an abortion?	First circle	
	all mentioned spontaneously. Then I						
		<u> </u>	Spontaneous	<u>Yes</u>	<u>No</u>		
	01 If mother does not want child .		1				
	02 If father does not want child		1				
	03 If both parents do not want chil		1		3		
	04 For economic reasons	 or	1 1				
	04 For economic reasons		1				
	07 Pregnancy resulting from rape		1				
	08 Woman is not married		1				
	88 Other (specify)		1	2			
	99 Don't know/Not Stated		1	2	3		
1107.	In Belize, what is the earliest age a						
	years	77 There is no	legal age	99 Don't know/N	lot Stated		
1108.	How old do you think a woman shou	ld be before she has	sex for the fir	st time?			
	years	99 Don't know/		-			
	- ,						
1109.	How old do you think a man should			me?			
	vears	99 Don't know/	Not Stated				

1110.	in your opinion, at what age is a woman responsible enot years 99 Don't know/N	
1111.	In your opinion, at what time in her life is a woman respor 1 When she is in a stable union 2 After completing her education 3 One to two years after entering into a stable union 4 When she is economically stable	5 When she is mature enough 8 Other (specify)
1112.	In your opinion, at what age is a man responsible enough years 99 Don't know/N	
1113.	In your opinion, at what time in his life is a man responsibe 1. When he is in a stable union 2. After completing his education 3. One to two years after entering into a stable union 4. When he is economically stable	ole enough to have his first child? 5 When he is mature enough 8 Other (specify) 9 Don't know/Not Stated
1114.	Do you think a woman should breastfeed her child? 1 Yes 2 No (SKIP TO C	9 DK/NS (SKIP TO Q1117)
1115.	How old do you think a child should be before the mother months 77 As long as possible	stops breastfeeding him/her? 99 Don't know/Not Stated
1116.	How old do you think a child should be before the mother months 77 As long as possible	stops giving only breast milk to him/her? 99 Don't know/Not Stated
1117.	How many months do you think it is best for a child to be months 99 Don't know/Not Stated	before the mother gets pregnant again?
1118.	When a woman is breastfeeding, is she more likely, less than if she is not breastfeeding? 1 More likely to get pregnant 2 Less likely to get pregnant	likely or equally likely to become pregnant 3 Equally likely to get pregnant 9 Don't know/Not Stated
1119.	What do you think is the ideal number of children a man s	
1120.	What do you think is the ideal number of children a woma	an should have? 99 Don't know/Not Stated
1121.	Who do you think should decide how many children a cot 1 The woman 2 The man 3 Both partners 4 Mother-in-law 5 Nurse/doctor/mid-wife	uple should have? 6 Religious leader 7 Fate, up to God 8 Other (Specify) 9 Don't know/Not Stated
1122.	If you could choose exactly the number of children to hav children 55 Fate, up to God	e in your whole life, how many would that be? 99 Don't know/Not Stated
1123.	2 Right after her period has ended	that she will become pregnant? 5 At any time 8 Other (specify) 9 Don't know/Not Stated

- Who do you think should decide whether a couple should use contraception?

 1 The woman
 2 The man
 3 Both partners
 4 Mother-in-law
 5 Novement of the standard wife.

 1 The woman
 9 Don't know/Not Stated 1130. The worldThe manBoth partnersMother-in-lawNurse/doctor/mid-wife
- 1131.
- Who should decide on what type of contraceptive a couple should use?

 1 The woman
 2 The man
 7 Fate, up to God
 3 Both partners
 4 Mother-in-law
 9 Don't know/Not Stated The worldThe manBoth partnersMother-in-lawNurse/doctor/mid-wife

SECTION 12 - GENERAL ATTITUDES AND OPINIONS

Now I'd like to read some statements to you. Please tell me whether you think each one is true or untrue			
1201. If a woman doesn't have sex, she'll get sick	<u>True</u> 1	<u>Untrue</u> 2	<u>DK/NS</u> 9
1202. A girl can get pregnant only after she has seen her period for the first time	1	2	9
1203. A girl can avoid getting pregnant by having sex standing up	1	2	9
1204. A girl can avoid getting pregnant by drinking Pepsi or Coke after sexual Intercourse	1	2	9
1205. A girl can avoid getting pregnant by bathing in the sea after sexual intercourse .	1	2	9
1206. There is something wrong with a boy who has not had sex by the time he is 16	1	2	9
1207. If a boy masturbates, he will get sick	1	2	9
1208. If a boy has an erection he will get sick unless he discharges	1	2	9
1209. Family violence is a significant issue in our society	1	2	9
1210. Sexual harassment of women is a significant issue in our society	1	2	9
1211. You can get rid of STIs/HIV/AIDS by having sex with a virgin	1	2	9
1212. It is important for a woman to be a virgin when she marries	1	2	9
1213. A school girl who gets pregnant should be allowed to return to school after she has had the baby	1	2	9
1214. A school boy who gets a girl pregnant should be expelled from school	1	2	9
1215. Boys should go to prostitutes to become men	1	2	9
1216. It is okay for married men to have extra-marital affairs	1	2	9
1217. Female sterilization is less complicated than male sterilization	1	2	9
1218. Men who have had a vasectomy do not perform well sexually	1	2	9