

# Documenting the Effects of COVID-19 on Family Planning Access and Use with Standardized Questions

As the COVID-19 pandemic and recovery process unfold, access to voluntary family planning (FP) care has been and will continue to be disrupted. Yet meeting the family planning needs of women and couples remains essential. Generating comparable evidence from multiple countries and programmatic contexts is critical to advancing understanding of the effects of the pandemic and recovery process on FP access and use, supporting program adjustments and generating broader learnings to inform the response to future pandemics.

## PURPOSE

The USAID-funded R4S Project, with technical assistance from the USAID-funded *Envision FP* Project, has developed a series of survey questions that can be added to ongoing studies and activities to systematically capture the effects of the pandemic and recovery process on FP access and use.

## USE

The COVID-FP survey questions are presented as a menu of questions that can be integrated into existing data collection platforms or studies. It is assumed that some background information would be collected as part of the broader platform or study within which the module is being used. All or a subset of questions may be included depending on available resources and the specifics of the design (e.g. cross-sectional vs. longitudinal, target population), though we recommend that core questions (highlighted in blue) be systematically included.

### The question module will capture the following information:

- ✓ **Unintended pregnancies**
- ✓ **FP need and use**
- ✓ **Source of supply**
- ✓ **Method choice**
- ✓ **Method switching**
- ✓ **Barriers to obtaining methods**
- ✓ **Interest in self-care options**
- ✓ **Long-acting reversible contraception (LARC) removals**

## CONTACT US

If you are planning on using these COVID-FP questions, please email us at [R4Sinfo@fhi360.org](mailto:R4Sinfo@fhi360.org) and we can provide you with a Word version of the survey model. In addition to tracking use of these questions, we are interested in synthesizing results and making them publicly available in collaboration with partners.

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## COVID-FP Standard Questions

**Note:** questions highlighted in blue are core questions we recommend including in every survey

**Tailor these sentences to the specifics of each country:** The government of XXX declared a National State of Disaster /Emergency on XXX and has implemented social containment measures (lockdown, curfew and other social distancing efforts) designed to control the spread of the Coronavirus (COVID-19). We would like to ask you some questions about how this has affected your access to family planning services.

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	<b>Were you or your partner doing something or using any method to delay or avoid getting pregnant when the Coronavirus restrictions (COVID-19) began?</b>	Yes..... 1 No..... 0 No response ..... -99	→105 →105
102	<b>What method were you using when the Coronavirus (COVID-19) restrictions began?</b>	Female sterilization..... 1 Male sterilization ..... 2 Implant ..... 3 IUD ..... 4 Injectable - Intramuscular ..... 5 Injectable - Subcutaneous ..... 6 Pill..... 7 Emergency Contraception ..... 8 Male Condom..... 9 Female Condom .....10 Std. Days/Cycle beads.....11 LAM.....12 Rhythm method .....13 Withdrawal .....14  Other method .....15 No response ..... -99	→104 →104 →104 →104   →104 →104 →104 →104 →104 →104 →104 →104 →104 →104 →104 →104
103	<b>Who gave you the injection?</b>	Self-administered ..... 1 Friend/relative ..... 2 Health care provider..... 3 Pharmacist..... 4 Drug/chemical shop ..... 5 CHW ..... 6  Other ..... 7 No response ..... -99	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
104	<p><b>Where did you obtain the method?</b></p> <p><i>Probe to identify the type of source</i></p>	<p><b><u>PUBLIC SECTOR</u></b></p> <p>Govt. Hospital/polyclinic.....11</p> <p>Govt. Health center .....12</p> <p>Mobile clinic .....13</p> <p>CHW .....14</p> <p>Community event.....15</p> <p><b><u>PRIVATE MEDICAL SECTOR</u></b></p> <p>Private hospital/dinic..... 21</p> <p>Private doctor ..... 22</p> <p>Pharmacy ..... 23</p> <p>Chemical/drug store ..... 24</p> <p><b><u>OTHER SOURCE</u></b></p> <p>Shop/market..... 31</p> <p>Friend / relative ..... 32</p> <p><b><u>DIRECT TO CONSUMER</u></b></p> <p>Delivered to my home ..... 41</p> <p>Website ..... 42</p> <p>App ..... 43</p> <p>Phone service ..... 44</p> <p>Other .....96</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	
105	<b>Are you currently pregnant?</b>	<p>Yes..... 1</p> <p>No..... 0</p> <p>Unsure ..... 2</p> <p>No response ..... -99</p>	<p>→109</p> <p>→109</p> <p>→109</p>

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
106	<p><b><u>Depending on format of survey:</u></b></p> <p>OPTION 1</p> <p><b>When did you get pregnant?</b></p> <p>OPTION 2 (if format does not allow asking for a date):</p> <p><b>Did you get pregnant before or after the Coronavirus (COVID-19) restrictions began?</b></p>	<p><b>OPTION 1</b></p> <p>Select month [ ][ ]</p> <p>Select year [ ][ ][ ][ ]</p> <p><i>Program calculates based on date above</i></p> <p>Date is before COVID restrictions..... 1</p> <p>Date is after COVID restrictions..... 2</p> <p>Unsure ..... 3</p> <p>No response ..... -99</p> <p><b>OPTION 2 (if format does not allow asking for a date):</b></p> <p>Before ..... 1</p> <p>After..... 2</p> <p>Unsure ..... 3</p> <p>No response..... -99</p>	<p>→END</p> <p>→END</p> <p>→END</p> <p>→END</p>
107	<p><b>When learning that you were pregnant, did you plan to be pregnant at this time?</b></p> <p>Read response options</p>	<p>I/we planned this pregnancy at that time ... 1</p> <p>I/we planned a pregnancy, but I/we had planned to wait until later..... 2</p> <p>I/we did not plan to become pregnant at all 3</p> <p>No response ..... -99</p>	<p>→END</p>
108	<p><b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect your ability to avoid or delay pregnancy?</b></p>	<p>Yes..... 1</p> <p>No..... 0</p> <p>Unsure ..... 2</p> <p>No response ..... -99</p>	<p>All</p> <p>→143</p>
109	<p><b>Which of the following best describes your wishes for children in the future?</b></p> <p>Read response options</p>	<p>I want a child in the next two years ..... 1</p> <p>I want to wait at least two years before the birth of a child ..... 2</p> <p>I don't want any children/more children..... 3</p> <p>I want a child but I don't know when ..... 4</p> <p>I don't know if I want a child ..... 5</p> <p>No response ..... -99</p>	
110	<p><b>Are you or your partner currently doing something or using any method to delay or avoid getting pregnant?</b></p>	<p>Yes..... 1</p> <p>No..... 0</p> <p>No response ..... -99</p>	<p>→143</p> <p>→143</p>



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
111	<b>What method are you using?</b>	Female sterilization..... 1 Male sterilization ..... 2 Implant ..... 3 IUD ..... 4 Injectable - Intramuscular ..... 5 Injectable - Subcutaneous ..... 6 Pill..... 7 Emergency Contraception ..... 8 Male Condom..... 9 Female Condom ..... 10 Std. Days/Cycle beads..... 11 LAM..... 12 Rhythm method ..... 13 Withdrawal ..... 14  Other method ..... 15 No response ..... -99	→ 113 → 113 → 113 → 113  → 113 → 113 → 113 → 113 → 113 → 143 → 143  → 113 → 143
112	<b>Who gave you the injection?</b>	Self-administered ..... 1 Friend/relative ..... 2 Health care provider..... 3 Pharmacist/drug shop ..... 4 CHW ..... 5  Other ..... 6 No response ..... -99	
113	<p><b><u>Depending on format of survey:</u></b></p> <p><b>OPTION 1</b></p> <p><b>If Q111=1-10</b>  <b>When was the last time that you obtained your current [method from Q111]? /</b>  <b>If Q111=11</b>  <b>When did you start LAM?</b></p> <p><b>OPTION 2 (if format does not allow asking for a date):</b></p> <p><b>If Q111=1-10</b>  <b>Did you last obtain your current [method from Q111] before or after the Coronavirus (COVID-19) restrictions began?</b>  <b>If Q111=11</b>  <b>Did you start LAM before or after the Coronavirus (COVID-19) restrictions began?</b></p>	<p><b>OPTION 1</b></p> <p>Select month [ ][ ]            Select year [ ][ ][ ][ ]  <i>Program calculates based on date above</i>            Date is before COVID restrictions ..... 1            Date is after COVID restrictions..... 2              Unsure ..... 3            No response ..... -99</p> <p><b>OPTION 2 (if format does not allow asking for a date):</b></p> <p>Before ..... 1            After..... 2            Unsure ..... 3            No response ..... -99</p>	         → 129      → 129 → 129      → 129 → 129 → 129

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
114	<b>PROGRAMMING INSTRUCTIONS</b>	<u>Is using SDM</u> If Q111=11  <u>Is using injectables, pills, EC, or male or female condoms</u> If Q111 in (5,6,7,8,9,10)  <u>Is using another modern method excluding LAM</u> If Q111 in (1,2,3,4,15)  <u>Is using LAM</u> If Q111=12	→114A  →114B  →115  →119
114A	<b>Did you use a website, app or phone service to get information on the safe days for you to have sex without getting pregnant during your menstrual cycle?</b>	Yes..... 1 No..... 0 No response ..... -99	
114B	<b>Did you use a website, app or phone service to buy your current [method from Q111]?</b>	Yes..... 1 No..... 0 No response ..... -99	
115	<b>Did you use a website, app or phone service to schedule an appointment to get your current [method from Q111]?</b>	Yes..... 1 No..... 0 No response ..... -99	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
116	<p><b>Where did you or your partner last obtain your current [method from Q111]?</b></p> <p><i>Probe to identify the type of source</i></p>	<p><b><u>PUBLIC SECTOR</u></b></p> <p>Govt. Hospital/polyclinic.....11</p> <p>Govt. Health center .....12</p> <p>Mobile clinic .....13</p> <p>CHW .....14</p> <p>Community event.....15</p> <p><b><u>PRIVATE MEDICAL SECTOR</u></b></p> <p>Private hospital/dinic..... 21</p> <p>Private doctor ..... 22</p> <p>Pharmacy ..... 23</p> <p>Chemical/drug store ..... 24</p> <p><b><u>OTHER SOURCE</u></b></p> <p>Shop/market..... 31</p> <p>Friend / relative ..... 32</p> <p><b><u>DIRECT TO CONSUMER</u></b></p> <p>Delivered to my home ..... 41</p> <p>Website ..... 42</p> <p>App ..... 43</p> <p>Phone service ..... 44</p> <p>Other .....96</p> <p>Don't know ..... -88</p> <p>No Response..... -99</p>	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
117	<b>What is the main reason why you chose this location?</b>	<p><b><u>COVID REASONS</u></b></p> <p>Usual place/other places closed.....11  Usual place/other places not offering FP services or no available provider .....12  Have the method that I want.....13  Less/no risk of being infected with COVID than other places .....14  Afraid people would think I had COVID if they saw me going to usual/other places...15  Not able to go to other places due to COVID government restrictions.....16  Partner/family prevented me from going elsewhere due to worries about COVID .....17</p> <p><b><u>NON COVID REASONS</u></b></p> <p>It's where I usually go.....21  Close to home.....22  Discreet.....23  Providers have a good reputation.....24  Recommend by friend/relative .....25  Method available for low cost / free.....26</p> <p>Other .....96  Don't know ..... -88  No response ..... -99</p>	
118	<b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you chose this location?</b>	<p>Yes..... 1  No..... 0  Unsure ..... 2  No response ..... -99</p>	
119	<b>PROGRAMMING INSTRUCTIONS</b>	<p><u>Was using before COVID and is using now</u>  If Q101=1 and Q105 in (0,2,99) and Q110=1:</p> <p><u>Switched methods</u>  If Q102≠ Q111</p> <p><u>Using same method</u>  If Q102=Q111</p>	<p>→ 120</p> <p>→ 123</p>
120	<b>Was [method from Q111] the method you wanted?</b>	<p>Yes..... 1  No..... 0  Did not have a preference ..... 2  No response ..... -99</p>	→ 124



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
121	<b>You said you were using [method from Q102] before the Coronavirus (COVID-19) restrictions began and you are using [method from Q111] now. What is the main reason why you chose [method from Q111]?</b>	Can administer/manage myself ..... 1 No need to see a provider..... 2  Nobody will know I am using it ..... 3 Lasts long time/longer than other methods. 4 Effective/more effective than other methods ..... 5 Few side effects/fewer side effects than other methods ..... 6 Side effects manageable/easier to cope with than other methods..... 7  Recommend by partner .....10 Recommend by provider.....11 Recommend by friend/relative .....12 Method available for low cost / free.....13  Other .....96 Don't know ..... -88 No response ..... -99	
122	<b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you chose [method from Q111]?</b>	Yes..... 1 No..... 0 Unsure ..... 2 No response ..... -99	All →129
123	<b>You said you were using [method from Q111] before the Coronavirus (COVID-19) restrictions began and you are using it now. Have you wanted to switch methods?</b>	Yes..... 1 No..... 0 Did not have a preference ..... 2 No response ..... -99	→129 →129 →129
124	<b>What method did you want to use?</b>	Female sterilization..... 1 Male sterilization ..... 2 Implant ..... 3 IUD ..... 4 Injectable - Intramuscular ..... 5 Injectable - Subcutaneous ..... 6 Pill..... 7 Emergency Contraception ..... 8 Male Condom..... 9 Female Condom .....10 Std. Days/Cycle beads.....11 LAM.....12 Rhythm method .....13 Withdrawal .....14  Other method .....15 No response ..... -99	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
125	<b>What is the main reason why you wanted to use [method from Q124]?</b>	Can administer/manage myself ..... 1 No need to see a provider..... 2  Nobody will know I am using it ..... 3 Lasts long time/longer than other methods. 4 Effective/more effective than other methods ..... 5 Few side effects/fewer side effects than other methods ..... 6 Side effects manageable/easier to cope with than other methods..... 7  Recommend by partner .....10 Recommend by provider.....11 Recommend by friend/relative .....12 Method available for low cost / free.....13  Other .....96 Don't know ..... -88 No response ..... -99	
126	<b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you wanted to use [method from Q124]?</b>	Yes..... 1 No..... 0 Unsure ..... 2 No response ..... -99	
127	<b>What is the main reason why you did not obtain [method from Q124]?</b>	Method not available ..... 1 Method requires a prescription method..... 2 Provider did not have equipment or supplies to provide method..... 3 Provider not trained to provide the method I wanted..... 4 Provider recommended a different method . 5 Not eligible for method..... 6 Did not have enough money ..... 7 Provider thought I had COVID-19..... 8  Other .....96 Don't know ..... -88 No response ..... -99	
128	<b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you did not obtain [method from Q124]?</b>	Yes..... 1 No..... 0 Unsure ..... 2 No response ..... -99	
129	<b>PROGRAMMING INSTRUCTIONS: Determine if currently using implant or IUD for skip pattern</b>	<u>Using an implant or IUD</u> IF 110=1 AND (111=3 OR 111=4)  <u>Using any other method</u> IF 110 in (0,99) OR (109=1 AND 111 in (1,2,5,6,7,8,9,10,11,12,15))	→ 130  → 150

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
130	<b>Since the Coronavirus (COVID-19) restrictions began, have you wanted to get your current [method from Q111] removed?</b>	Yes..... 1 No..... 0 No response ..... -99	→150 →150
131	<b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you have wanted to get your method removed?</b>	Yes..... 1 No..... 0 Unsure ..... 2 No response..... -99	
132	<b>What is the main reason why you have wanted your [method from Q111] removed?</b>	<b><u>COVID REASONS</u></b> Concerned will be unable to remove later due to COVID government restrictions.....11  <b><u>PREGNANCY RELATED/EXPIRED</u></b> Wanted to get pregnant .....21 Method expired.....23  <b><u>SIDE EFFECTS</u></b> Amenorrhea .....31 Shorter or lighter period.....32 Longer or heavier period.....33 Irregular period, spotting .....34 Weight changes.....35 Menstrual pain/cramps.....36 Pain in other body parts.....37 Fear of side effects .....38 Other side effects .....39  <b><u>PARTNER/PROVIDER REASONS</u></b> Partner disapproved or did not like .....41 Lost partner/partner away/infrequent .....42 Too old/menopause/infecund .....43 Provider said to remove .....44  Other .....96 Don't know ..... -88 No response ..... -99	→137   →137   →137 →137 →137 →137 →137 →137 →137 →137 →137 →137 →137 →137   →137 →137 →137 →137  →137 →137 →137
133	<b>Has a provider counseled you to use another method until you are able to remove your [method from Q111] since your [method from Q111] is expired?</b>	Yes..... 1 No..... 0 No response ..... -99	
134	<b>Are you using another method in addition to your [method from Q111] since your [method from Q111] is expired?</b>	Yes..... 1 No..... 0 No response ..... -99	→136 →137

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
135	<b>Which method are you using in addition to your [method from Q111]?</b>	Implant ..... 1 IUD ..... 2 Injectable - Intramuscular ..... 3 Injectable - Subcutaneous ..... 4 Pill..... 5 Emergency Contraception ..... 6 Male Condom..... 7 Female Condom ..... 8 Std. Days/Cycle beads..... 9 Rhythm method .....10 Withdrawal .....11  Other method .....12 No response ..... -99	All →137
136	<b>What is the main reason why you are not using another method in addition to your [method from Q111]?</b>	Don't want to use another method ..... 1 Method I wanted not available ..... 2 Implant/IUD still effective so does not need other method..... 3 Fear of side effects ..... 4 Did not have enough money ..... 5 Partner disapproved or did not like ..... 6 Lost partner/partner away/infrequent sex .. 7 Too old/menopause/infecund ..... 8  Other .....96 Don't know ..... -88 No response ..... -99	
137	<b>Have you tried to have your [method from Q111] removed?</b>	Yes..... 1 No..... 0 No response ..... -99	→139  →142

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
138	<p><b>What is the main reason why you have not tried to have your [method from Q111] removed?</b></p>	<p><b><u>COVID REASONS</u></b>  Usual/other health facilities closed.....11  Usual/other health facilities not offering FP services or no available provider .....12  Afraid of being infected with COVID .....13  Afraid people would think I had COVID if they saw me going to usual/other health facilities .....14  Not able to go to health facility due to COVID government restrictions.....15  Partner/family prevented me from going due to worries about COVID.....16  Too sick to leave the house .....17  Looking after sick family member.....18  Too busy to leave the house .....19</p> <p><b><u>NON COVID REASONS</u></b>  Changed my mind .....21  Partner wanted me to keep.....22  Did not have enough money .....23</p> <p>Other .....96  Don't know ..... -88  No response ..... -99</p>	<p>All  → 142</p>
139	<p><b>Where did you go to remove your [method from Q111]?</b></p> <p><i>Probe to identify the type of source</i></p>	<p><u>Public sector</u>  Govt. Hospital/polyclinic..... 11  Govt. Health center ..... 12  Mobile clinic..... 13  CHW ..... 14  Community event..... 15</p> <p><u>Private medical sector</u>  Private hospital/clinic..... 21  Private doctor ..... 22  Pharmacy ..... 23  Chemical/drug store ..... 24</p> <p><u>Other source</u>  Shop/market..... 31  Friend / relative ..... 32</p> <p>Self ..... 40</p> <p>Other .....96  Don't know ..... -88  No response ..... -99</p>	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
140	What is the main reason why you were not able to have your [method from Q111] removed?	<p><b><u>COVID REASONS</u></b></p> <p>Usual/other health facilities closed.....11  Usual/other health facilities not offering FP services or no available provider .....12  Afraid of being infected with COVID .....13  Told that providers did not have enough protective equipment to see clients during COVID-19.....14  Provider thought I had COVID.....15</p> <p><b><u>NON COVID PROVIDER REASONS</u></b></p> <p>Provider did not have equipment or supplies to remove the method.....21  Provider advised to keep method .....22  Provider tried but was unable to remove method.....23</p> <p><b><u>NON COVID REASONS</u></b></p> <p>Changed my mind .....31  Partner wanted me to keep.....32  Did not have enough money .....33</p> <p>Other .....96  Don't know ..... -88  No response ..... -99</p>	
141	Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you have not had your [method from Q111] removed?	Yes..... 1 No..... 0 Unsure ..... 2 No response ..... -99	
142	Do you still want to get your [method from Q111] removed?	Yes..... 1 No..... 0 No response ..... -99	→ ALL 150
143	At any time since the Coronavirus (COVID-19) restrictions began, did you want to obtain a contraceptive method?	Yes..... 1 No..... 0 No response ..... -99	→ 150 → 150
144	Have you tried to obtain a method?	Yes..... 1 No..... 0 No response ..... -99	→ 146 → 149

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
145	<b>What is the main reason why you did not try to obtain a method?</b>	<p><b><u>COVID REASONS</u></b></p> <p>Usual/other places to get FP closed.....11  Usual/other places not offering FP services or no available provider .....12  Afraid of being infected with COVID .....13  Afraid people would think I had COVID if they saw me going.....14  Not able to go due to COVID government restrictions.....15  Partner/family prevented me from going due to worries about COVID.....16  Too sick to leave the house .....17  Looking after sick family member.....18  Too busy to leave the house .....19</p> <p><b><u>NON COVID REASONS</u></b></p> <p>Changed my mind .....21  Partner disapproved or did not like .....22  Lost partner/partner away/infrequent sex ..23  Too old/menopause/infecund .....24  Did not have enough money .....25  I became pregnant.....26</p> <p>Other .....96  Don't know ..... -88  No response ..... -99</p>	All →149

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
146	<p><b>Where did you go to obtain a method?</b></p> <p><i>Probe to identify the type of source</i></p>	<p><u>Public sector</u></p> <p>Govt. Hospital/polyclinic..... 11</p> <p>Govt. Health center ..... 12</p> <p>Mobile clinic ..... 13</p> <p>CHW ..... 14</p> <p>Community event..... 15</p> <p><u>Private medical sector</u></p> <p>Private hospital/clinic ..... 21</p> <p>Private doctor ..... 22</p> <p>Pharmacy ..... 23</p> <p>Chemical/drug store ..... 24</p> <p><u>Other source</u></p> <p>Shop/market..... 31</p> <p>Friend / relative ..... 32</p> <p>Delivered to my home ..... 40</p> <p>Other .....96</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	
147	<p><b>What is the main reason why you were not able to obtain a method?</b></p>	<p><b><u>COVID REASONS</u></b></p> <p>Not offering FP services or no available provider.....11</p> <p>Told that providers did not have enough protective equipment to see clients during COVID-19.....12</p> <p>Provider thought I had COVID-19.....13</p> <p><b><u>NON COVID PROVIDER REASONS</u></b></p> <p>Method not available .....21</p> <p>Method requires a prescription.....22</p> <p>Provider did not have equipment or supplies to provide method.....23</p> <p>Provider not trained to provide the method I wanted.....24</p> <p>Provider recommended a different method 25</p> <p>Not eligible for method.....26</p> <p><b><u>NON COVID REASONS</u></b></p> <p>Changed my mind .....31</p> <p>Did not have enough money .....32</p> <p>I became pregnant.....33</p> <p>Other .....96</p> <p>Don't know ..... -88</p> <p>No response ..... -99</p>	



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
148	<b>Did the Coronavirus (COVID-19) pandemic and the social restrictions affect why you have not obtained a method?</b>	Yes..... 1 No..... 0 Unsure ..... 2 No response ..... -99	
149	<b>Do you still want to obtain a contraceptive method?</b>	Yes..... 1 No..... 0 Currently pregnant..... 2 No response ..... -99	
150	<b>We would like to understand what family planning services women like you may be interested in using on their own without seeing a provider or a Community Health Worker in person. For each of the following, how interested would you be to get instructions and materials to use it yourself?</b>  Read items, one by one Read response options		
150A	<b>Pregnancy test</b> (Women can purchase a urine test to determine pregnancy from a pharmacy or drug shop or potentially online depending on the country)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150B	<b>Pregnancy checklist</b> (A series of questions to help confirm that you are not pregnant)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150C	<b>Lactational amenorrhea method or LAM</b> (Women who have just had a baby and meet three criteria are protected from pregnancy. Women must be exclusively breastfeeding, have not resumed menstruating, and are 6 months or less postpartum)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150D	<b>Condoms</b>	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
150E	<b>Pill</b> (Women can take a pill every day to avoid becoming pregnant. Pills may be purchased at a pharmacy, drug shop, or online depending on the country.)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150F	<b>Emergency contraception</b> (As an emergency measure after unprotected sexual intercourse women can take special pills at any time within three to five days to prevent pregnancy. Pills may be purchased at a pharmacy, drug shop, or online depending on the country.)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150G	<b>Subcutaneous Injectable</b> (A contraceptive injection administered via a small needle that you could give yourself after a provider or CHW shows you how to do it. This is a much smaller needle than ones you may be familiar with that are used for other types of injectable contraceptives.)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150H	<b>Standard days method (Cycle Beads)</b> (A woman can use a string of colored beads to know the days she can get pregnant. On the days she can get pregnant, she and her partner use a condom or do not have sexual intercourse)	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150I	<b>Sometimes women experience side effects like changes in weight, mild nausea, headaches or fatigue when they use a family planning method. How interested would you be in receiving information on what to do if you experience side effects without seeing a provider or a CHW?</b>	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	
150J	<b>Sometimes women experience changes in their period when they use a family planning method. How interested would you be in receiving information on what to do if you experience changes in your period without seeing a provider or a CHW?</b>	Very interested ..... 1 Fairly interested ..... 2 Neither interested nor disinterested..... 3 Fairly disinterested ..... 4 Very disinterested ..... 5 No response ..... -99	