

Protocol:

Increasing access to PP contraception by linking family planning and infant vaccination services

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List of Abbreviations

ANM: auxiliary nurse midwives

AWC: *Anganwadi* Community Center (community center where vaccines are distributed)

FHW: frontline health workers

ICMR: India Council on Medical Research

IUD: intrauterine device

LARC: Long-acting reversible contraception (intrauterine devices and contraception implants)

PHC: Public Health Center (Indian Government Public Health Clinic, district level)

PIVoT: PP Integration of Vaccines and contraception through gender-Transformative programming

RCT: randomized controlled trial

VHND: Village Health and Nutrition Day

Synopsis:

Title: **Increasing access to PP contraception by linking family planning and infant vaccination services**

Study Description: This is a cluster randomized trial which aims to assess the implementation and preliminary effectiveness of a gender-transformative family planning program linked with infant vaccination services to improve postpartum contraceptive access and use.

Objectives: *Primary Objective:* utilization of a contraception at 6 months postpartum
Secondary Objectives: feasibility, acceptability and appropriateness of intervention

Endpoints: *Primary Endpoint:* self-reported use of contraception
Secondary Endpoints: score on the validated feasibility, acceptability and appropriateness scale

Study Population: Postpartum women within 12 weeks of delivery presenting with their infants for an infant vaccination visit in rural India

Phase: N/A, Implementation Science Outcomes Study (not drug or device)

Description of Sites/Facilities Village Health and Nutrition Days where infant vaccines are distributed in rural India

Enrolling

Participants: 293

Description of Study

Intervention: Gender-equity focused family planning counseling and delivery of approved and available contraceptives at the time of infant vaccination

Study Duration: 2 years

Participant

Duration: 6 months

1.0 Background / Introduction

Using effective PP contraception allows women to prevent short inter-pregnancy intervals (fewer than 24 months between births), which are associated with an increased risk of maternal and infant morbidity and mortality (1-9). India is the country with the highest number of women with an unmet need for contraception, and PP and rural women are those with the greatest need (10). Uptake of PP contraception among women in rural India is low; less than half of PP women use contraception within the first year after delivery, and 27% of births do not follow the recommended interval (11-13). Family planning care includes counseling about how to attain the desired number of pregnancies and spacing of pregnancies and provision of contraceptive methods if desired. There is an implementation gap because family planning is an *evidence-based* intervention, but it is not reaching all PP women in rural India.

Barriers to accessing and using family planning in rural India include gender-inequitable social norms that limit mobility of young women to reach health clinics (14, 15) and facilitate male control over reproductive decision-making (16). A promising intervention to address these barriers is to build on an existing successful health program, the infant vaccination program, by linking family planning services with infant vaccination. India's Ministry of Health has promoted community-based delivery of infant vaccinations, and monthly childhood vaccination services are offered at Village Health and Nutrition Days (VHNDs) typically held at *Anganwadi* Community Centers (AWCs). Six-week vaccination rates are high, around 85% (17), indicating that these services are routinely used by families of young infants, which provides an opportunity to reach PP women simultaneously. Gender-transformative interventions promote gender equality and the shared control of resources and decision-making. This programming addresses gender-inequitable social norms and has shown to facilitate more successful family planning interventions (18) but has not been studied among PP women. This study will adapt a gender-transformative family planning intervention, with input from multi-level stakeholder engagement, to support community-based delivery of family planning with infant vaccination; this intervention has the potential to increase family planning use among PP women with unmet need in low-resources and rural settings. Under India's public health system, a cadre of frontline health workers (FHWs), including nurses, provide community-based maternal and infant care. India's National Vaccination Program uses community-based delivery for rural populations via FHW nurses at monthly immunization camps incorporated into Village Health and Nutrition Days (VHNDs) (19). In India, approximately 85% of infants receive vaccines between 6 and 14 weeks of age (17). Prior research demonstrated that screening for interest in family planning services at VHNDs in India was associated with an increase in women later seeking family planning services through the public health system (20). Although community based-provision may address limited mobility as a key barrier to contraceptive uptake, it is unknown if receiving family planning care outside of the traditional healthcare centers would be feasible or acceptable to women in India or which strategies can be used to ensure successful implementation. This study is significant in its focus on understanding the feasibility, acceptability, and appropriateness of utilizing infant vaccination as an opportunity to reach PP women to provide family planning care through an integrated health care visit.

Rationale: Integration of family planning and vaccination services has been studied in a few settings with mixed results (Table 1) (21-25). Several studies have shown that contraceptive uptake increases (23-25), or short inter-pregnancy intervals decrease (21), after integrating family planning and vaccination services, but another study found no effect on contraceptive

uptake (22). Most studies were quasi-experimental and, therefore, limited by lack of a control group (21, 23, 25). The two studies utilizing a randomized design to assign the intervention did not follow the same women longitudinally, but instead administered the baseline and follow-up surveys to separate samples of women at the site before and after beginning the intervention (22, 24). While all interventions included family planning counseling, few attempted to provide the full spectrum of family planning care, including long-acting reversible contraception (LARC) methods, at the time of infant vaccination. No studies created successful strategies for IUD provision, evidenced by the fact that IUD use was 1% or less in any study reporting method use by type. Furthermore, no linked family planning and infant vaccination interventions have specifically been designed to address gender-based norms as barriers to family planning uptake. Additional rigorous high-quality research is needed to demonstrate the impact of providing family planning care, inclusive of LARC methods, at the time of infant vaccination that addresses gender-based norms as a barrier to care. Where there was no significant increase in contraceptive uptake following implementation of the linked care, process findings indicated that the model was not implemented as designed (22). Therefore, meaningful, multi-level stakeholder engagement is needed to guide successful implementation.

Table 1: Previous studies of linking family planning and infant vaccination care

Country (citation)	Provided any family planning method delivery	Provided LARC methods	LARC use (IUDs and implants) ^a	IUD use ^a	Implant use ^a	Randomized design
Bangladesh (21)	YES ^b	NO	2.6 %	***	***	NO
Ghana and Zambia (22)	YES	YES ^c	***	***	***	YES
Liberia (23)	YES	YES ^c	0.4 %	0.0%	0.4%	NO
Rwanda (24)	YES	YES ^c	5.3 %	1.1%	4.2%	YES
Togo (25)	NO	NO	***	***	***	NO
a) at study end b) initially intervention only included FAMILY PLANNING counseling. Community-based distribution of pills and condoms was added to meet participant demand mid-study (26) c) when available per the facilities standard services *** not described						

The main *hypothesis* is integration of community-based, gender-transformative family planning care inclusive of long-acting reversible contraceptives (LARCs) with the existing infant vaccination services will reach more PP women than siloed unlinked services and will improve access to the full range of PP contraception and the ability to use family planning.

The *objective* of this study is to pilot test the **PIVoT** intervention (**PP Integration of Vaccines and contraception through gender-Transformative programming**) during infant vaccination visits in rural India and to assess the implementation and preliminary effectiveness of this intervention on contraceptive method use and reproductive agency using a hybrid-effectiveness approach.

1.1 Specific Aims:

Aim 1 implementation outcomes: Assess the feasibility, acceptability, and appropriateness of the PIVoT intervention, linking provision of PP gender-transformative family planning and infant vaccination care, in rural India using a mixed-methods approach. Feasibility, acceptability, and appropriateness will be assessed via validated quantitative survey measures among (N=293) participants in a pilot trial of the PIVoT intervention and semi-structured interviews with a subsample of women, husbands, and nurses who participate in the pilot (N=40).

Aim 2 preliminary effectiveness outcomes: Assess the effect of the PIVoT intervention on contraceptive method use among (N=293) women in rural India using a pilot two-arm cluster randomized controlled trial. The PIVoT intervention, linked provision of gender-transformative family planning and vaccine services at intervention villages, will be compared to the standard of care at control villages (referring women to public health centers for family planning counseling and contraceptive provision). We will assess preliminary effectiveness via self-reported contraceptive use from surveys given during a 6-month PP follow-up visit.

1.2 Preliminary Research Our transdisciplinary research team includes experts in family planning (Dr. Averbach), implementation science (Dr. Rabin), gender-transformative interventions and qualitative research (Dr. Raj), biostatistics (Dr. Begum) and reproductive healthcare in India (Drs. Begum, Ghule and Battala). We have successfully completed multiple collaborative studies over 10 years, including qualitative, quantitative, and cluster RCT studies, to understand the reproductive health needs of women and couples in Maharashtra (16, 18, 27-30). This proposal builds on our prior research:

1) CHARM2 (Counseling Husbands and wives to Achieve Reproductive health and Marital equity): an R01-funded cluster RCT of 1200 young, married, couples in rural Maharashtra conducted from 09/2018-12/2020. The intervention included two gender-matched individual counseling sessions with both men and women and a third couples' session on gender-equity and family planning delivered in participants' homes and clinics. The study revealed:

a. Gender-transformative family planning counseling increases women's agency in decision-making and enhanced the quality of care provided: CHARM2 participants were more certain in their ability to use contraception if they desired (adjusted OR 2.6, 95% CI 1.2–5.7) (30) and reported higher Interpersonal Quality of family planning care scores (31) than women in the control group (3.3 vs 2.3, $p<0.01$) (range 1-5).

b. Gender-transformative family planning counseling increased the use of contraception, driven by condom use: 35% of CHARM2 participants reported condom use vs. 27% in the control group ($p<0.01$) at 9 months. There were no significant differences in IUD or pill use between the groups (9% vs. 10%, $p=0.67$) and (3% vs. 3%, $p=0.68$). We found a trend toward a decrease in unintended pregnancy in the CHARM2 group among women who expressed a desire to avoid pregnancy at baseline, but the absolute number of pregnancies was small, limiting power (19% of pregnancies were unintended in the CHARM2 vs. 47% in the control group, $p=0.07$). Improving uptake of more effective methods, like IUDs, could have a greater impact on decreasing unintended pregnancy over time (IUDs are the only LARC method currently available in the region) (30).

c. Barriers to IUD uptake among interested women included limited access to community-based family planning care. Qualitative in-depth interviews with CHARM2 women

participants (N=50) and providers (N=20) highlighted interest in IUDs but barriers to uptake including the need to travel to health centers for placement.

d. Postpartum women attend community-based infant vaccination visits and are interested in receiving family planning care at these visits. Among 1029 women who had at least one live birth, 97% reported attending an infant's first vaccination visit. Only 16% were offered family planning counseling at this visit, but 96% reported they would like to receive family planning counseling and 79% reported they would be interested in receiving a contraceptive method at the visit.

2) Feasibility and acceptability of PIVoT study: from 09/2021-11/2021 we conducted a qualitative assessment of the feasibility and acceptability of the PIVoT intervention including (N=60) in-depth interviews with PP women (N=20), married men (N=10), FHW nurses (N=20), and community leaders (N=10) (including stakeholders from the ministry of health, a district medical officer, *panchayat* members (local village leadership), and staff from NGOs working for family planning promotion in the region). This study, funded by the Bill and Melinda Gates Foundation, aimed to inform adaptation of the gender-transformative programming for women from CHARM2 for use by FHW workers among PP women at infant vaccination visits and to assess feasibility and acceptability of the PIVoT intervention. We found that there is interest in PIVoT and that couples and providers feel that PIVoT has potential to meet their needs. Nurses feel well trained to provide family planning services, including IUDs, in this setting. We gathered input from stakeholders on which components of the intervention need to be changed to fit with local resources, priorities, and processes and adapted our intervention based on the input received. We pilot tested the adapted counseling tools to assess their appropriateness with meaningful input from stakeholders.

1.3 Study Site: This study will be conducted in the rural subdistrict of Junnar in the Pune District of Maharashtra, India. Junnar is comprised of 184 villages (pop. 399,302). Most villages have an *Anganwadi* Community Center (AWC) or other village location where monthly vaccination camps are held during village health and nutrition days (VHNDs). We have ongoing research activities in Junnar including an NIH R01 study (27), so we have an active research infrastructure (research office, staff), government relationships, and approvals in place to facilitate timely and high quality study completion. We have demonstrated successful recruitment and high longitudinal retention (80-90%) even during the COVID-19 pandemic (18, 30).

2.0 Methodology

Study design: Cluster randomization control trial

Inclusion criteria: Women aged 18 and older residing in rural Maharashtra, who speak Marathi, delivered a baby within the past 12 weeks but did not undergo sterilization, hysterectomy or immediate PP IUD placement and do not have a new pregnancy will be invited to participate. All information will be self-reported. Medical records will not be accessed during this study at any time.

Exclusion criteria: If a woman is interested, meets inclusion criteria and consents, she will be enrolled and asked to complete a baseline questionnaire (Appendix 1).

Sample Size: Our primary outcome is utilization of a modern method of contraception at 6 months postpartum (PP). We anticipate that women randomized to the linked services will be more likely to receive any modern contraceptive method by the 6-month postpartum follow-up visit compared to women randomized to the control arm.

Randomization will occur at the geographic cluster (village) level rather than individual level to reduce risk for contamination that may occur if both treatment conditions were offered in the same village. We will further reduce contamination risk by not including adjacent villages in the study. Villages will be randomly assigned using computer generated block randomization at a 1:1 ratio. We propose that greater than or equal to a 15% difference in modern contraceptive use between the two groups at 6 months PP is meaningful. To detect this effect with 80% power, assuming a two-sided alpha of 0.05, and a 14% baseline rate of modern contraception use other than sterilization (28), we estimate that a total of 293 women will be needed after accounting for 10% loss to follow-up. We will enroll 24-25 women from each of the 12 study site villages. Assumptions for clustered effects for contraceptive use were derived from the CHARM2 study data. Our study team has made two preliminary field visits to VHNDs at AWCs in Junnar. Our preliminary data suggests that approximately 10-15 PP women present each month at each of the 12 selected AWCs (120 women per month). Approximately 60% are eligible for our study (72 total per month). We estimate that 65% of eligible women will agree to participate (46 women) in accordance with our previous work. Therefore, we plan to enroll approximately 33 women per month and will complete enrollment in approximately 9 months. Villages participating in the CHARM2 intervention arm will not be included to avoid the effect of a co-intervention.

Our primary outcome, the proportion of women using modern contraception at 6 months after delivery, will be compared between groups with an intention-to-treat approach. The primary comparison of the binary outcomes between intervention groups at 6-months will be compared using a mixed-effects logistic regression, with random effects for the geographical (village) clusters. No other covariates will be included in the primary analyses. Since the treatment assignment is at random this “unadjusted” analysis will provide a causal estimate of the effect of the intervention. However, we will also conduct secondary analyses, adjusting for potentially relevant covariates (e.g., age, number of living children, having a living son etc.) using backward model selection at the $\alpha=0.15$ threshold level. These secondary analyses may improve precision (power) of estimating the treatment effect and reduce any bias due to random imbalances between arms. We will conduct a secondary difference-in-differences logistic regression approach, including mixed-effects models with nested random effects if there are meaningful baseline differences in primary outcomes.

The primary analyses will use an intent-to-treat approach and analyze all subjects according to randomized group. Exploratory analyses using outcomes of contraception by type (e.g., LARC) may be conducted if numbers are sufficient.

Method of recruitment: Participants presenting to AWCs during VHND will be first screened for eligibility criteria by project staff. After obtaining the written informed consent from eligible women baseline information will be collected.

The PIVoT intervention: Participants presenting to AWCs to the PIVoT intervention will receive family planning counseling on-site by the ANM/nurses who administer vaccinations in a private room in the AWC.

We developed PIVoT as a gender-transformative, culturally and contextually tailored family planning intervention, including counseling and decision aid tools for use with women and couples, using Government of India resources and an adapted version of Population Council's Balanced Counseling Strategy (27). We borrowed gender-transformative approaches from two evidence-based FP counseling interventions which include a focus on both reproductive autonomy for women and inclusion of men (27, 32) but have not been applied to PP couples, specifically. The primary intervention is brief, approximately 30 minutes, but designed to support person-centered contraceptive choice through an information exchange that allows for selection of a method that meets the reproductive needs of the woman or couple, including choosing to use natural family planning or no method. It includes gender-equity and family planning curriculum flip charts covering basic family planning information as well as gender norms and son preference, family planning method index cards (detailing method characteristics, use, duration of action, efficacy, side effects, and contraindications for each method), and a provider training manual. The intervention encourages women to consider joint family planning decision-making with male partners, highlights the importance of male involvement in family planning, and explores the gender norms supporting male decision-making control, son preference, and pressure from in-laws to have more children, particularly sons. The tools also validate women's ability to exercise reproductive autonomy without disclosure to a partner if she chooses.

If a contraceptive method is desired, it will be provided by auxiliary nurse midwives (ANMs) who are trained according to government of India guidelines, are certified by the government to provide comprehensive family planning care, including IUDs, and have demonstrated competence to supervising study clinicians. The ANMs who provide vaccinations at the VHND routinely provide these same contraceptive methods at government public health centers (PHCs), so this is within their scope of practice. If a pelvic examination, for instance for IUD insertion, is deemed clinically necessary, privacy will be maintained by using a portable gynecologic table and privacy screen that was designed by mechanical engineers at UCSD for this purpose. All methods of reversible modern contraception that are appropriate for PP use, and already available free of charge from the government of India under standard government formulary, will be offered to women to initiate at VHND if they choose. Currently, available methods include condoms, progestin only and combined oral contraceptive pills, IUDs, and injectable contraception. Male and female surgical sterilization and lactational amenorrhea will also be discussed, and participants will be referred to PHCs if they desire sterilization. These contraceptives are FDA in the U.S. and approved for use in India. All procedures for contraceptive provision including instruments used for IUD insertion are standard of care.

ANMs providing the intervention will be incentivized with career enhancing workshops on sexual and reproductive health, equipment and supplies that support their work and a small monetary reimbursement for their time (100 Rupees/month or approximately \$1.50 USD per month) that is not tied to the number of participants seen or the number of methods delivered. This number was recommended by the local IRB. The quality of care provided by nurses

delivering PIVoT will be monitored by the supervising study staff clinicians including direct observation of a subset of intervention delivery.

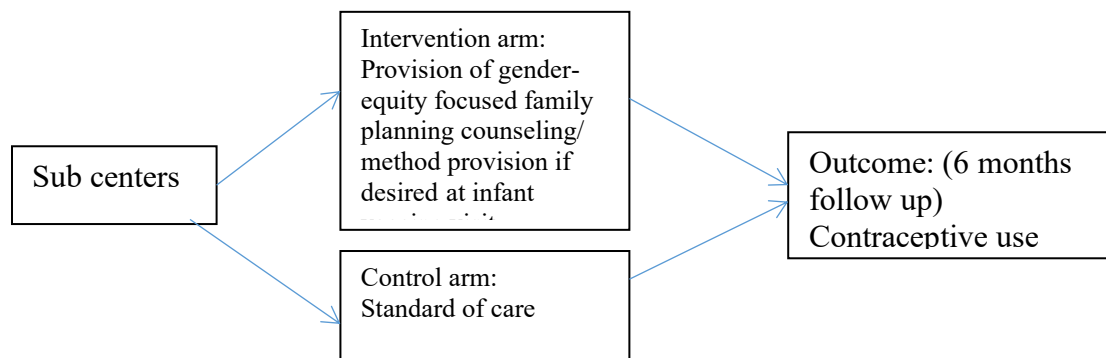
Training providers to deliver PIVoT: Identification and engagement of the ANM providers and the study nurse supervisor, will be led by the District Health Office under the supervision of Dr. Begum. Training the PIVoT theoretical framework and using PIVoT tools will be conducted by Drs. Ghule, Raj, and Averbach and the nurse supervisor. Family planning and LARC training for ANMs is standard government training conducted by the District Health Office. ANMs who participate will be required to have up to date governmental approvals to provide contraceptive care. In addition, ANMs will receive 4 half-day training sessions delivered over 5-6 weeks to become PIVoT providers including booster family planning and IUD trainings and PIVOT counseling, which focuses on family planning decision-making, discusses how women can communicate with their partner about sexual and fertility preferences, and engage their male partners in contraceptive decision-making. ANMs will be retrained on follow-up with clients with contraception concerns such as side effects and protecting patient privacy. Providers will be supported by consults from PHC physicians, under the direction of the District Health Office.

Control arms/clusters: Women presenting to AWCs randomized to the control arm will be provided standard of care treatment according to current practices. Our governmental implementing partners have informed us that sometimes standard government of India brochures and condoms are offered. However, there is no formal standardized contraceptive counseling or provision of contraceptives currently being conducted at VHNDs. If women express interest in family planning care, they are referred to the affiliated PHC/subcenter for care at a later time.

Study follow-up: At the time of the initial visit and after obtaining informed consent baseline information will be collected by research staff including participant's address and telephone number and make arrangements to conduct the follow-up survey at approximately 6-months PP at the AWC or her home (Appendix 2). Staff will make multiple attempts to call and/or visit the participant for follow-up. Using this approach, we have been able to achieve high (80-90%) at 6-9 months in longitudinal studies in the area (18, 27).

Quantitative data collection: All pilot participants will be asked if they are willing to be contacted to participate in a brief qualitative interview and if they would recommend their husbands for participation. A subset of women participants, their husbands, and nurses who participate in the intervention arm of the pilot and who give permission to contact them for participation in the qualitative interview (N=40) will be randomly selected to participate. Husbands will only be asked at the recommendation of their wives. Interview probes focus on the feasibility, acceptability and appropriateness of the intervention and suggestions for process improvement. After each interview has been recorded, transcribed, and translated, the transcript will be imported into ATLAS.ti®, software. A directed content analysis will be used to promote a structured analytical procedure for reviewing transcripts (33). Content will be sequentially analyzed throughout data collection to refine questions and follow-up on emerging themes. Themes and their intersections will be discussed to create a framework to understand the issues of focus; extensions of data collection may result in order to better support framework creation.

Figure 1. Study design / Schema



3.0 Project Timeline / Schedule of Activities

	1-3	4-6	7-9	10-12	13-15	16-18	19-21	22-24
Pre-intervention in depth Interviews and adaptations								
Pilot enrollment Baseline Survey and Intervention								
Follow-up Survey								
Post- intervention in depth Interviews								
Analysis, data presentation to stakeholders, manuscript								

Study duration: 2 years

4.0 Risk / Benefit Assessment

4.1 Potential Risks

Questions included in qualitative and quantitative assessments may be embarrassing or emotionally upsetting to participants as they discuss contraceptive behaviors. Embarrassment is reduced by the brevity of the research tools and the use of gender-matched and well-trained research interviewers. Prior to assessment, participants will be reminded that they are free not to answer a question and may terminate their participation at any point.

In addition, for providers participating in this study there are risks, as any criticism they provide can make them vulnerable to the public health system in which they may work. We compiled

questions that are more objective than opinion in nature, with regard to care provision, health care, government infrastructures and the implementation strategy to reduce this risk.

We also will assure confidentiality to participants. For anyone who is no longer comfortable participating in the study, they will be informed that they may withdraw from participation without penalty. FHWs who withdraw from the study will be informed that they lose no financial support from this discontinuation.

Community-based family planning counseling and provision may put women at risk for possible loss of privacy. In order to protect the privacy of women participating, all family planning counseling and care will be provided in a private space. Privacy will be maintained during pelvic examinations or IUD placements by using a portable gynecologic table and privacy screen which was designed by mechanical engineers at UCSD for this purpose which will be placed in a private room in the health center.

4.2. Adequacy of Protection Against Risks

Recruitment and Informed Consent

Recruitment and written consent will be implemented by trained Masters-level research staff for all phases of study. For every source of primary data collection written informed consent will be acquired prior to data collection. For RCT study participants, consent will be obtained prior to screening, survey, and contraceptive counseling and provision. For in-depth interview participants, written informed consent will again be provided prior to interviews.

Possible Loss of Confidentiality. Interactions with participants will take place within the privacy of a community center room. Names and telephone numbers will be collected but not disclosed to anyone outside the study team. All records are coded and kept in locked files in a locked office or password-protected electronic files. Access to these records is limited to the study investigators.

Participants will not have family members or others informed of their participation in the study unless they choose to tell them. Only unique identifiers will be used to label data collected in this study; only NIRRH staff and Co-Is will have access to the identifiable information linked with the unique identifiers. These research staff will be required to maintain the confidentiality of all research participants and will have signed a pledge to do so upon joining the research team.

4.3. Potential Benefits of the Proposed Research to Research Participants and Others

All study participants will receive referrals to, or information regarding, local family planning services of which they may have otherwise been unaware. Participants in the intervention group may benefit from knowledge about, and/or acquisition of family planning that they would have otherwise not received. Furthermore, awareness about, and linkage to, family planning services may improve their sexual and reproductive outcomes. Given that the potential benefits of the study would allow for the development of an intervention to improve maternal health and child survival, and that there are multiple mechanisms in place to manage potential risks from study and intervention involvement, we believe the benefits outweigh the risks for this proposed study.

4.4. Importance of the Knowledge to be Gained

Data collected from this project will be used to create programs that can be integrated into national rural health and family planning policies and initiatives, with the goal of improving access to family planning and reducing unintended pregnancy at an individual and population level.

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APPENDIX 1:

ICMR - NATIONAL INSTITUTE FOR RESEARCH IN REPRODUCTIVE HEALTH

आय. सी. एम. आर.- राष्ट्रीय प्रजनन आरोग्य संशोधन संस्था

Increasing access to postpartum contraception by linking family planning and infant vaccination services

कुटुंब नियोजन आणि अर्भक लसीकरण सेवांचा संबंध जोडून प्रसूतिपूर्व गर्भनिरोधक साधनाचा वापर वाढविणे

BASELINE QUESTIONNAIREमुलभूत सर्वेक्षण प्रश्नावली

PHC Name प्राथमिक आरोग्य केंद्र	Sub Centre Name उपकेंद्र	Name of the Village गावाचे नाव	Name of the AWC
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PHC Code- प्राथमिक आरोग्य केंद्राचा संकेतांक	Sub Centre Code उपकेंद्राचा संकेतांक	Screener ID पडताळणी ओळखक्रमांक	Code of the AWC
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Time of Interview
मुलाखतीचा कालवधी

Start time: End time.....
प्रारंभ वेळ समाप्ती वेळ

Status of Interview
मुलाखतीची स्थिती

Completed पूर्ण	1
Partially completed अपूर्ण	2
Refused नाकरले	3

Name of Investigator (संशोधनकर्त्याचे नाव):

Name of the supervisor (पर्यवेक्षकाचे नाव):

Signature of the investigator

Signature of the supervisor (पर्यवेक्षकाची

(संशोधनकर्त्याची सही)½

सही):

Date दिनांक :

Section 1. SOCIO-ECONOMIC AND DEMOGRAPHIC CHARACTERISTICS सामाजिक,आर्थिक
आणि लोकसंख्यात्मक पात्रता

No.	Question	Response Options	Skip
1.1	In what month and year were you born? तुम्ही कोणत्या महिन्यात व वर्षात जन्माला आलात?	Month: महिना: 1 January जानेवारी 2 February फेब्रुवारी 3 March मार्च 4 April एप्रिल 5 May मे 6 June जून 7 July जुलै 8 August ऑगस्ट 9 September सप्टेंबर 10 October ऑक्टोबर 11 November नोव्हेंबर 12 December डिसेंबर	
	Participant must be older than 18 सहभागी व्यक्तीचे वय 18		
1.2	How old were you at your last birthday? आपल्या गेल्या वाढदिवशी तुमचे वय किती होते?	99 Don't know month महिना माहित नाही Year [FILL IN #] वर्ष 9999 Don't know year वर्ष माहित नाही Age in completed years [FILL IN #] वय पूर्ण वर्षांमध्ये	
COMPARE AND CORRECT 1.1 AND/OR 1.2 IF INCONSISTENT			
	1.1 बरोबर 1.2 पडताळून पहा व विसंगती आढळ्यास त्या दूर करा		
1.3	Have you ever attended school? तुम्ही कधी शाळेत गेलेला आहात का?	1 Yes होय 2 No नाही	If no, skip to 1.5
1.4	What is the highest standard you have completed? तुमचे शिक्षण किती झाले आहे? In years. वर्षांमध्ये.	Standard इयत्ता [FILL IN #] 99 Can read and write but no schooling लिहता वाचता येते पण शाळेत गेली नाही	

1.5 What is your religion?
तुमचा धर्म कोणता आहे?

CHOOSE ONE RESPONSE
एक उत्तर निवडा

- 1 Hindu हिंदू
- 2 Islam इस्लाम
- 3 Christian ख्रिश्चन
- 4 Buddhist/Neo- Buddhist बौद्ध / नव बौद्ध
- 5 Jain जैन
- 6 Sikh सिख
- 98 Other (Specify) इतर (निर्दिष्ट करा)

1.6 Do you belong to a scheduled caste, a scheduled tribe, other backward class, or none of these?
आपण अनुसूचित जाती, अनुसूचित जमाती, अथवा इतर मागासवर्ग यांपैकी आहात किंवा यापैकी कोणी नाही आहात?

CHOOSE ONE RESPONSE
एक उत्तर निवडा

- 0 General / सर्वसाधारण
- 1 Scheduled caste अनुसूचित जाती
- 2 Scheduled tribe अनुसूचित जमाती
- 3 Other backward caste इतर मागासवर्गीय
- 4 Other इतर

1.7 Have you done any work in the last 12 months?
गेल्या 12 महिन्यात तुम्ही काही काम केले आहे काय?

- 1 Yes होय
- 2 No नाही

**If no
skip
to 1.9**

1.8 What is your occupation, that is, what kind of work do you mainly do?
तुमचा व्यवसाय काय आहे , म्हणजे, आपण कोणत्या प्रकारचे काम मुख्यत्वे करत आहात?

CHOOSE ONE एक निवडा

- 1 Agriculture/cultivator शेती / शेतकरी
- 2 Agriculture labor शेतमजूर
- 3 Domestic Servant घरगुती नोकर
- 4 Small or petty business लहान स्वरूपातील व्यवसाय
- 5 Daily wage laborer/Brick line worker रोजंदारी/ वीटभट्टी कामगार
- 6 Industry/company worker उद्योग / कंपनी कार्यकर्ता
- 7 Government job सरकारी नोकरी
- 98 Other [Specify] इतर [निर्दिष्ट करा]

1.9 What is you household's average monthly income? Please include income from all earning members from all sources.

- Rupees रुपये [FILL IN #]
- 0 No income उत्पन्न नाही

तुम्च्याघरातील सरासरी मासिक उत्पन्न किती? आपली
मासिक उत्पन्न काय आहे? कृपया घरातील कमवणारी सर्व
खोतामधून उत्पन्न समाविष्ट करा

- 1.10 Who lives in your household with you currently? (check all that aPPly)
- 1 husband
 - 2 child(ren)
 - 3 mother-in-law
 - 4 father-in-law
 - 5 husbands grandmother
 - 6 husbands grandfather
 - 7 husbands brother
 - 8 husbands sister
 - 9 your mother
 - 10 your father
 - 11 your brother
 - 12 your sister
-

Section 2. MARITAL HISTORY वैवाहिक इतिहास

No.	Question	Response Options	Skip
2.1	For how long have you and your husband been living together? IF LESS THAN 1 YEAR, RECORD MONTHS; OTHERWISE RECORD COMPLETED YEARS तुम्ही आणि तुमचे पती कधीपासून एकत्र रहात आहात? जर 1 वर्षापेक्षा कमी असेल तर महिन्यांत नोंद करा अथवा वर्षे लिहा	Months [FILL IN #] महिना Years [FILL IN #] वर्ष	
2.2	Besides yourself, does your husband have other wives? तुमच्या व्यतिरिक्त तुमच्या पतीला इतर बायका आहेत का?	1 Yes हो 2 No नाही	If no, skip to 2.4
2.3	Including yourself, in total, how many wives does he have? तुम्हाला धरून एकूण किती बायका त्यांना आहेत?	Number of wives [FILL IN #] पत्नींची संख्या 99 Don't know माहित नाही	
2.4	Have you been married once or more than once? तुमचे लग्न एकदाच झाले आहे कि एका पेक्षा जास्त वेळेस झाले आहे.	1 Only once एकदा 2 More than once एकापेक्षा जास्त	
2.5	In what month and year did you (first) get married? कोणत्या महिन्यात किती साली तुमचे (पहिले) लग्न झाले?	Month [FILL IN #] महिना 99 Don't know month माहित नाही Year [FILL IN #] वर्ष 9999 Don't know year वर्ष माहित नाही	
2.6	How old were you when you (first) got married? तुमचे पहिले लग्न झाले तेव्हा तुमचे वय किती होते?	Age in completed years पूर्ण वर्षांमध्ये वय [FILL IN #]	

Section 3. MENSTRUATION, PREGNANCY, DELIVERY, POSTNATAL CARE

मासिकपाळी, गरोदरपण, प्रसूती, प्रसूतीपूर्व काळजी

No.	Question	Response Options	Skip
	When did your last menstrual period start? तुम्हाला शेवटची मासिक पाळी केव्हा आली होती?		
3.1	IF LESS THAN 1 WEEK, RECORD DAYS; IF LESS THAN 1 MONTH, RECORD WEEKS; IF LESS THAN 1 YEAR, RECORD MONTHS. जर 1 आठवड्यापेक्षा कमी असेल तर, दिवसात नोंद करा; जर 1 महिन्याहून कमी असेल तर, आठवड्यात नोंद करा; जर 1 वर्षाहून कमी असेल, तर महिन्यांमध्ये नोंद करा	1 Days ago दिवस अगोदर [FILL IN #] 2 Weeks ago आठवडा अगोदर [FILL IN #] 3 Months ago महिने अगोदर [FILL IN #] 4 Years ago वर्षापूर्वी [FILL IN #] 5 Before last birth शेवटच्या जन्मानंतर	
3.2	Have you had any intercourse since your last delivery?	1) Yes 2) No	If no skip to 3.4
3.3	Did you use any contraception since your last delivery?	0) None 1) Condoms 2) Oral contraceptive pills 3) IUD 4) Male Sterilization 5) Female Sterilization 6) Withdrawal 7) Injectable contraception 8) Lactational amenorrhea 9) Other _____	If IUD or sterilization stop not eligible
3.4	Have you ever had a pregnancy? तुम्ही कधी गरोदर राहिल्या आहात का?	1 Yes हो 2 No नाही	IF NO, STOP. NOT ELIGIBLE
3.5	Have you ever given birth? तुम्ही आता पर्यंत माता झालात का?	1 Yes होय. 2 No नाही	IF NO, STOP. NOT ELIGIBLE
3.6	How many boys and girls have you ever given birth to (whether or not they are living)? किती मुलांना आणि किती मुलींना तुम्ही जन्म दिला आहे?	Number of Sons [FILL IN #] मुलगे (संख्या) Number of Daughters [FILL IN #] मुली (संख्या)	

3.7	Have any of the boys or girls who who were born alive but later died? तुम्ही अशा मुलाला अथवा मुलीला जन्म दिला आहे का की जो / जी जन्मताना जिवंत मात्र नंतर मरण पावला / पावली?	Number of Sons died [FILL IN #] मुलगे (संख्या) Number of Daughters died [FILL IN #] मुली (संख्या)	
	Answers in 3.7 not exceed those in 3.6.		
	3.7 मधील उत्तरे 3.6 पेक्षा अधिक नाहीत		
3.8	Have you ever had a pregnancy that miscarried, was aborted, or ended in a stillbirth? तुमची कोणती गर्भधारणा अशी होती का जिचा गर्भपात झाला, केला अथवा मृत बाल जन्माला आले?	1 Yes हो 2 No नाही	If no, skip to 3.12
3.9	Number of pregnancies that ended in stillbirth? जन्मजात मृत झालेल्या गरोदरपणाची संख्या	[FILL IN #]	
3.10	Number of pregnancies that were miscarried (spontaneous abortions)? आपोआप झालेला गर्भपात झालेल्या प्रसुतीची संख्या ?	Spontaneous [FILL IN #] गर्भपातांची संख्या (संख्या)	
3.11	Number of induced abortions? केलेल्या गर्भपातांची संख्या ?	Induced [FILL IN #] गर्भपातांची संख्या (संख्या) Of induced abortions: Medication abortion [fill in #] Surgical abortion [fill in #]	If no or don't know, skip to 3.14
3.12	Are you pregnant now? तुम्ही सध्या गरोदर आहात का?	1 Yes हो 2 No नाही 99 Don't know माहित नाही	
3.13	How many months pregnant are you? तुम्ही किती महिने गरोदर आहात?	Months [FILL IN #] महिना	
3.14	What was the date of your last delivery?	Day _____ Month _____ Year _____	
3.15	Was the delivery twins?	1 Yes हो 2 No नाही	
3.16	Is the child living? (first twin if twins)	1 Yes हो 2 No नाही	
3.16	Is the second child living? (second twin if twins)	1 Yes हो	Skip if no

		2 No नाही		to 3.15
3.17	Was the delivery a cesarean or vaginal delivery?	1 Cesarean 2 Vaginal (including forceps and vacuum assisted) 3 Twin delivery with one vaginal and one cesarean		
	Now I would like to record information about all your other births, whether girl or boy, still alive or not, starting with the last one you had.		Skip if 3.16 is no	
	आता मी तुम्ही दिलेल्या अपत्य जन्मांविषयी माहिती नोंद करू इच्छिते, मग ती मुलगी असो अथवा मुलगा, जी अजूनही जिवंत असेल अथवा नसेल, तुमच्या शेवटच्या मुलापासून सुरुवात करा.			
3.18				Number of children [FILL IN #]
	How many total children have you given birth to?			
	Should be equal to the number of sons and daughters in 3.6			मुलांची संख्या [उत्तर लिहा]
3.19	[RECORD VERBATIM] (शब्दशः नोंदवा)	1 Boy मुलगा 2 Girl मुलगी 1 Alive जिवंत 2 Dead मृत	d. If living child, what is the age of the child now? जर बाळ जिवंत असेल तर आता त्याचे वय काय आहे? Years [FILL IN #] वर्षे (संख्या) Months [FILL IN #] महिने (संख्या)	e. If deceased, at what age did he or she die? जर बाळ हयात नसेल तर कोणत्या वयात ते गेले?
	Last birth शेवटची प्रसूती			

Next
to last
birth
उपांत्य
प्रसूती
Second
from
last
birth
शेवटच्या
प्रसूतीच्या
अगोदर
दुसरी
प्रसूती

Third
from
last
birth

Fourth
from
last
birth

Fifth
from
last
birth

3.20a-e

Now I would like to ask you some questions about the health of all your children (we will talk about each child separately).

PLEASE COLLECT THE NAME, AND SURVIVAL STATUS ASK THE QUESTIONS ABOUT ALL OF THESE BIRTHS. BEGIN WITH THE LAST BIRTH.

a. When you got pregnant with (NAME), did you want to get pregnant at that time?
If yes, skip to 3.20d.
जेव्हा आपण _____ (नाव घ्या) च्या वेळेस गरोदर होतात, तेव्हा आपल्याला त्यावेळी गरोदर राहायचे होते का?

b. Did you want to get pregnant later on, or did you not want any (more) children?

If No, Skip to 3.20d

तुम्हाला नंतर गरोदर राहायचे होते की तुम्हाला (आणखी) मूल नको होते ?

c. how much longer did you want to wait?

जर हो तर,
3.20 d वर जा

1 Yes हो
2 No नाही

1 Later
नंतर
2 No
more
आणखी नको
होते

Months
[FILL IN
#] महिने
(संख्या)
Years
[FILL IN
#]
वर्षे (संख्या)
99 Don't
know माहित
नाही

d. Who assisted
with the
delivery of
(NAME)?
Anyone else?
**SELECT ALL
THAT
APPLY**
(नाव) च्या प्रसूती साठी
कोणी मदत केली ?
लागू असलेले सर्व
पर्याय निवडा

e. Where did you give
birth to (NAME)?
**CHOOSE ONE
IF UNABLE TO
DETERMINE IF A
HOSPITAL, HEALTH
CENTER, OR CLINIC
IS PUBLIC OR
PRIVATE HEALTH
SECTOR WRITE THE
NAME OF THE
PLACE.**

(NAME OF THE
FACILITY/PLACE)
तुम्ही (नाव) ला कुठे जन्म दिला ?
एक निवडा

जर हॉस्पिटल , आरोग्य केंद्र , किंवा
दवाखाना खाजगी होता की सरकारी
हे सांगणे जमत नसेल तर जन्म
स्थळाचे नाव लिहावे .

_____ (सेवाकेंद्राचे /

स्थळाचे नाव)

HOME

1 Your Home तुमच्या घरी
2 Parents' Home पालकांच्या
घरी

3 Other Home इतरांच्या घरी

**PUBLIC HEALTH
SECTOR**

सार्वजनिक आरोग्य विभाग

4 Govt./Munic Hospital
सरकारी / नगरपालिका हॉस्पिटल

5 Govt. Disp सरकारी दवाखाना

6 Urban Health Center/
Urban Health Post/ Urban
Family Welfare Center

Last
birth
शेवटची
प्रसूती

**HEALTH
PERSONNEL**
आरोग्य सेवादाता

1 Doctor डॉक्टर

2
ANM/Nurse/M
idwife
/LHV नर्स/
परिचारिका/

3 Other Health
Personnel इतर
सेवादाते

THERPERSON इतर
व्यक्ती

4

Dai/Traditional
Birth Attendant
दाई/ पारंपरिक पद्धतीने
प्रसूती करणारी सुईण

5 मैत्रिणी / नातेवाईक

6 कोणीही नाही

98 Other

[Specify]

इतर (स्पष्ट करा)

—

शहरी आरोग्य केंद्र / नागरी आरोग्य केंद्र
/ शहरी कुटुंब कल्याण केंद्र7 Community Health
Center/Rur.Hospital/Block Primary
Health Center कम्युनिटी हेल्थसेंटर / ग्रामीण रुग्णालय / तालूका
प्राथमिक आरोग्य केंद्र8 Primary Health Center/
SDD. Primary Health
Center

प्राथमिक आरोग्य केंद्र / एसडीडी.

प्राथमिक आरोग्य केंद्र

9 Sub-Center उप-केंद्र

10 Other Public Sector
Health Facility सार्वजनिक
क्षेत्रातील इतर आरोग्य सुविधा

11 NGO/Trust

Hospital/Clinic

एनजीओ / ट्रस्ट हॉस्पिटल / क्लिनिक

**PVT. HEALTH
SECTOR**

खाजगी आरोग्य क्षेत्र

12 Pvt.

Hospital/Maternity

Home/Clinic खाजगी रुग्णालय /

मातृत्व गृह / क्लिनिक

13 Other Pvt. Sector
Health Facility खाजगी

क्षेत्रातील इतर आरोग्य सुविधा

98 other

[Specify]_____

इतर (स्पष्ट करा)

LAST BIRTH ONLY 3.21-3.30

केवळ शेवटच्या प्रसूती बद्दल

Choose the statement that most applies to youIn the month that you became
pregnant:

3.21a

- 1) I/we were not using contraception
- 2) I/we were using contraception but
not on every occasion

- 3.21b In terms of becoming a mother (first time or again) I feel that my pregnancy haPPened at the:
- 3.21c Just before I became pregnant
- 3.21d Just before I became pregnant
- 3.21e Before I became pregnant
- 3.21f Before you became pregnant did you do anything to improve your health in preparation for pregnancy?
- 3) I/we always used contraception but knew that the method failed at least once (i.e. broke etc)
I/we always used contraception
- 1) Right time
- 2) My intentions kept changing
- 4) Wrong time
- 1) I intended to get pregnant
- 2) OK, but not quite right time
- 3) I did not intend to get pregnant
- 1) I wanted to have a baby
- 2) I had mixed feeling about having a baby
- 3) I did not want to have a baby
- 1) My partner and I agreed we would like me to become pregnant
- 2) My partner and I discussed having children together but hadn't agreed for me to get pregnant
- 3) We never discussed having children together
- Check all that aPPly:
- 1) Took folic acid
- 2) StoPPed or cut down on smoking
- 3) StoPPed or cut down drinking alcohol
- 4) Ate more healthily
- 5) Sought medical /health advice
- 6) Took some other action (describe) _____
- 3) I did not do any of the above before pregnancy

3.22 Did you see anyone for antenatal care for this pregnancy?

शेवटची प्रसूती: ह्या प्रसूतीच्या वेळी तुम्ही प्रसूतीपूर्व काळजीसाठी कोणाला भेटला होतात का?

3.23 Whom did you see? Anyone else?

PROBE TO IDENTIFY EACH TYPE OF PERSON. RECORD ALL MENTIONED SELECT ALL THAT APPLY LAST BIRTH ONLY

शेवटची प्रसूती: तुम्ही कोणाला भेटले ? इतर कोणी?

1 Yes हो

2 No नाही

7)

If no, skip to 3.24

HEALTH PERSONNEL आरोग्य सेवादाता

1 Doctor डॉक्टर

2 ANM/Nurse-Midwife/LHV नर्स/ परिचारिका/ स्थानिक आरोग्य सेवक

3 Other Health Personnel इतर सेवादाते

OTHER PERSON इतर व्यक्ती

4 Dai/Traditional Birth Attendant दाई/ पारंपरिक पद्धतीने प्रसूती करणारी सुईण

प्रत्येक पद्धतीच्याव्यक्तीबद्दल खासकरून विचारा
सांगितलेले सर्व नमूद करा
लागू असलेले सर्व पर्याय निवडा
केवळ शेवटच्या प्रसूतीबद्दल

5 Community/Village Health Worker
सामाजिक / ग्रामीण आरोग्य कार्यकर्ता
6 Anganwadi/ICDS Worker अंगणवाडी / आय
सी डी स कार्यकर्ता
7 ASHA आशा
98 Other [Specify] इतर (स्पष्ट करा)

- 3.24 Was this delivery premature? (less than 37 weeks)
ही प्रसूती अकाली (कमी दिवसाची) होती काय? (३७ आठवड्यापेक्षा कमी)
1 Yes हो
2 No नाही
99 Don't know माहित नाही
- 3.25 During this pregnancy, did you have convulsions not from fever?
शेवटची प्रसूती: ह्या गरोदरपणात, तुम्हाला तापाशिवाय आखडी किंवा फीट आली होती का?
1 Yes हो
2 No नाही
99 Don't know माहित नाही
- 3.26 During this pregnancy, did you have new high blood pressure?
1 Yes हो
2 No नाही
99 Don't know माहित नाही
- 3.27 Last birth: During delivery, did you experience excessive bleeding?
ह्या गरोदरपणात तुम्हाला जास्त रक्तस्राव झाला का?
1 Yes हो
2 No नाही
99 Don't know माहित नाही
- 3.28 During delivery or in the first two months after delivery, have you been diagnosed with a genital track infection including infected amniotic fluid?
1 Yes, I was treated with antibiotics
2 Yes, I was not treated with antibiotics
3 No
99 not sure
- 3.29 Now I have some questions about your contraceptive use after this birth.
1 Yes हो
2 No नाही
- Did you use any contraceptives after the birth of (NAME)?
आता मी तुम्हाला ह्या प्रसूतीनंतरच्या संततीनियमनाच्या साधनांविषयी विचारणार आहे.
शेवटची प्रसूती: तुम्ही (नाव) च्या जन्मानंतर संततीनियमनाच्या साधनांचा वापर केला का?
- 3.30 Last birth: What contraceptive method did you use after your last birth?
1 Female sterilization स्त्री नसबंदी
2 Male sterilization पुरुष नसबंदी
3 Pills गोळ्या

**If no,
Skip
to
3.32**

**SELECT ALL THAT APPLY
LAST BIRTH ONLY**

शेवटची प्रसूती: ह्या प्रसूतीनंतर संततीनियमनाचे कोणते
साधन तुम्ही वापरले?
लागू असेलेले सर्व पर्याय निवडा
केवळ शेवटच्या प्रसूती बदल

- 4 IUD or CoPPer T आय यू डी किंवा कॉपर टी/ तांबी
- 5 Injectable इंजेक्शन
- 6 Male condom or Nirodh पुरुष कोन्डोम किंवा निरोध
- 7 Female condom स्त्री कोन्डोम
- 8 Rhythm method खंडित संयम
- 9 Withdrawal method खंडित संभोग
- 98 (स्पष्ट करा) _____

**IF USING IUD OR STERILIZATION
ALREADY NOT ELIGIBLE FOR
STUDY**

- 3.31 Last birth: Where did you get
information about the
contraceptive?
**SELECT ALL THAT APPLY
LAST BIRTH ONLY**

शेवटची प्रसूती: तुम्हाला संततीनियमनाच्या
साधनांविषयी माहिती कुठे मिळाली ?
लागू असेलेले सर्व पर्याय निवडा
केवळ शेवटच्या प्रसूती बदल

- 1 Newspaper वृत्तपत्र
- 2 Poster in SC/PHC उपकेंद्र/ प्राथमिक आरोग्य
केंद्रातील पोस्टर
- 3 Poster in AWC
- 4 Radio रेडियो
- 5 Television टी व्ही
- 6 ANM at home
- 7 ANM at AWC
- 8 ASHA at home
- 9 ASHA at AWC
- 10 MPW बहुउद्देशिय कार्यकर्ता
- 11 Doctor/staff at PHC/SC ग्रामीण स्वास्थ्य
केंद्रातील किंवा उप केंद्रातील डॉक्टर/ कर्मचारी
- 12 Friends मित्र/ मैत्रिणी
- 13 Relatives नातेवाईक
- 14 Spouse जोडीदार
- 98 Others इतर

*I would like to ask you about your current thoughts and feelings about the idea of
becoming pregnant in the next 6 months and having a baby in the 18 months. People have
very different thoughts and feelings about pregnancy and having a baby that can change
over time. There are no right or wrong answers. For each statement, choose one response
that seems right at this point in your life.*

*The following statements have to do with your thoughts and feelings about the idea of
becoming PREGNANT in the next 3 months. Even if you do not think you can become
pregnant, please imagine how you would feel about becoming pregnant.*

- 3.32a I wouldn't mind if I became
pregnant in the next 6 months.
- 0 strongly agree
 - 1 agree
 - 2 neither agree nor disagree
 - 3 disagree

- पुढील 6 महिन्यांत मी गरोदर राहिले तर मला हरकत नाही 4 strongly disagree
- 3.32b It would be a good thing for me if I became pregnant in the next 6 months. 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree
पुढील 6 महिन्यांत मी गरोदर राहिले तर माझ्यासाठी चांगली गोष्ट होईल.. 4 strongly disagree
- 3.32c Thinking about becoming pregnant in the next 6 months makes me feel unhaPPy. 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree
पुढील 6 महिन्यांत गर्भवती होण्याबद्दलच्या विचाराने मला दुःख होते. 4 strongly disagree
- 3.32d Thinking about becoming pregnant in the next 6 months makes me feel excited. 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree
पुढील 6 महिन्यांत गर्भवती होण्याचा विचाराने माझा उत्साह वाढतो. 4 strongly disagree
- 3.32e Becoming pregnant in the next 6 months would bring me closer to my partner. 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree
पुढच्या 6 महिन्यांत गर्भवती झाल्याने मला माझ्या जोडीदाराच्या जवळ आणले जाईल. 4 strongly disagree
- The following statements have to do with your thoughts and feelings about the idea of having a BABY in the next 18 months. Even if you do not think you can have a baby, please imagine how you would feel about having a baby.*
- 3.32f I want to have a baby within the 18 months 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree
मला १८ महिन्यांच्या आत बाळ पाहिजे. 4 strongly disagree
- 3.32g If I had a baby in the next 18 months, it would be bad for my life. 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree
पुढच्या १८ महिन्यांत मला मूल झाले तर ते माझ्या आयुष्यासाठी वाईट आहे. 4 strongly disagree
- 3.32h It would be a positive addition to my life to have a baby in the next 18 months. 0 strongly agree
1 agree
2 neither agree nor disagree
3 disagree

	पुढच्या १८ महिन्यांत बाळ होणे माझ्या आयुष्यात एक सकारात्मक भर असेल.	4 strongly disagree	
3.32i	It would be the end of the world for me to have a baby in the next 18 months. पुढच्या १८ महिन्यांत मला मूल होणे हा जगाचा शेवट असेल.	0 strongly agree 1 agree 2 neither agree nor disagree 3 disagree 4 strongly disagree	
3.32j	Thinking about having a baby within the next 18 months makes me smile. पुढच्या १८ महिन्यांत मूल होण्याचा विचार केल्याने मला हसू येते.	0 strongly agree 1 agree 2 neither agree nor disagree 3 disagree 4 strongly disagree	
3.32h	Thinking about having a baby within the next 18 months makes me feel stressed out. पुढच्या १८ महिन्यांत मूल होण्याचा विचार केल्याने मला मानसिक ताणतणाव वाटतो.	0 strongly agree 1 agree 2 neither agree nor disagree 3 disagree 4 strongly disagree	
3.32i	I would feel a loss of freedom if I had a baby in the next 18 months. पुढील १८ महिन्यांत मला मूल झाल्यास माझ्या स्वातंत्र्यावर गदा येईल	0 strongly agree 1 agree 2 neither agree nor disagree 3 disagree 4 strongly disagree	
3.32j	If I had a baby in the next 18 months, it would be hard for me to manage raising the child. पुढच्या १८ महिन्यांत मला मूल झाले तर मुलाचे संगोपन करणे मला कठीण जाईल.	0 strongly agree 1 agree 2 neither agree nor disagree 3 disagree 4 strongly disagree	
3.32k	I would worry that having a baby in the next 18 months would make it harder for me to achieve other things in my life. १८ महिन्यांत मूल झाल्यास मला माझ्या आयुष्यातील इतर गोष्टी मिळवणे कठीण होईल.	0 strongly agree 1 agree 2 neither agree nor disagree 3 disagree 4 strongly disagree	
3.33	Now I have some questions about the future: Would you like to have (a/another) child, or would you prefer not to have any (more) children anytime in the future?	1 Have a/another child आणखी एखादे मुल 2 No more/none आणखी नाही 3 Can't get pregnant गर्भधारणा होऊ शकत नाही 99 Undecided/don't know अनिर्णीत/माहित नाही	If 2 or 3, skip to 3.35

आता मला भविष्याबद्दल काही प्रश्न आहेत:
तुम्ही आणखी (एक / दुसरे) मूल इच्छिता किंवा तुम्ही
भविष्यात कधीही (अधिक) मुले न होण्यास प्राधान्य
द्याल?

3.34 How long would you like to wait
from now (or after the birth of your
current child) before the birth of
another child?

तुम्हाला आता पासून किती काळ वाट पाहायला
आवडेल? (तुमच्या सध्याच्या मुलाच्या जन्मानंतर),
दुसऱ्या मुलाच्या जन्म अगोदर?

3.35 Are you currently breastfeeding?

1 Months महिन्यात [FILL IN #]

2 Years वर्ष [FILL IN #]

33 Soon/Now लगेच

1 I only feed my baby breastmilk

2 I feed my baby breastmilk mostly
breastmilk but also some formula or other
foods

3 I feed my baby both breastmilk and
formula and other foods in similar
amounts

4 I feed my baby mostly formula and
other foods but also some breastmilk

5 I feed my baby only formula and other
foods

Infant is deceased

**Skip
if**

Section 4: Family Planning कुटुंब नियोजन

Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.

आता मी तुम्हाला कुटुंब नियोजन पद्धती बदलचे ज्ञान व त्याच्या वापराबद्दल काही प्रश्न विचारणार आहे ज्याचा वापर

गर्भधारणा टाळण्यासाठी/ पाळणा लांबविण्यासाठी जोडपी करू शकतात.

4.1 What are the contraceptive methods you have heard of?

तुम्हाला कुटुंब नियोजनाच्या कोणत्या पद्धती माहिती आहेत?

SELECT ALL THAT APPLY

लागू असलेल्या सर्व पर्याय निवडा

Probe: Any other?

चौकशी: इतर कोणतीही?

Do not read options.

पर्याय वाचू नका

1 Female sterilization स्त्री नसबंदी

2 Male sterilization पुरुष नसबंदी

3 Pills गोळ्या

4 IUD or CoPPer T तांबी

5 PPIUD पी पी पी आय यू डी/ प्रसुतिपच्छात तांबी

6 Injectable इंजेक्शन

7 Male condom or Nirodh पुरुष निरोध

8 Female condom स्त्री निरोध

9 Rhythm method खंडित संयम

10 Withdrawal method खंडित संभोग

11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक

12 Lactational amenorrhoea method (LAM) लॅटेक्शनल आमेनरोहोआ पद्धत (लाम)

0 None काहीही नाही

4.2 What sources have you ever received information about contraception from?

तुम्हाला कुटुंब नियोजन पद्धतीबद्दल माहिती कुठून मिळाली?

SELECT ALL THAT APPLY

लागू असलेल्या सर्व पर्याय निवडा

Probe: Any other?.

चौकशी: इतर कोणतीही?

Do not read options

पर्याय वाचू नका

1 Newspaper वृत्तपत्र

2 Poster in SC/PHC उपकेंद्र/ प्राथमिक आरोग्य केंद्रातील पोस्टर

3 Poster in AWC

4 Radio रेडियो

5 Television टी व्ही

6 ANM at home

7 ANM at AWC

8 ASHA at home

9 ASHA at AWC

10 MPW बहुउद्देशिय कार्यकर्ता

11 Doctor/staff at PHC/SC ग्रामीण स्वास्थ्य केंद्रातील किंवा उप केंद्रातील डॉक्टर/ कर्मचारी

12 Friends मित्र/ मैत्रिणी

13 Relatives नातेवाईक

14 Spouse जोडीदार

98 Others इतर

4.3 Now I am going to ask you about your ever contraceptive use.

1 Yes होय

2 No नाही

If 0, skip to 4.3

If no, skip to 4.5

आता मी तुमच्या कधीही आपल्या गर्भनिरोधक वापराबद्दल विचारणार आहे.

Have you ever used any methods to delay or avoid pregnancy?

तुम्ही गर्भधारणा रोखण्यासाठी किंवा मुलांमधील अंतर वाढविण्यासाठी कधी कुटुंबनियोजन पद्धतीचा वापर केला आहे का?

4.4 Which methods have you ever used?

आत्तापर्यंत तुम्ही कधीही कुटुंब नियोजनाच्या कोणत्या पद्धती वापरल्या आहेत का?

SELECT ALL THAT APPLY
लागू असलेल्या सर्व पर्याय निवडा

Probe: Any other?

चौकशी: इतर कोणतीही?

Do not read options.

पर्याय वाचू नका

4.5 Reasons for not using contraception ever.

गर्भनिरोधक न वापरण्याचे कारण

SELECT ALL THAT APPLY
लागू असेलेले सर्व पर्याय निवडा

1 Female sterilization स्त्री नसबंदी

2 Male sterilization पुरुष नसबंदी

3 Pills गोळ्या

4 IUD or CoPPer T तांबी

5 PPIUD पी पी पी आय यू डी/ प्रसूतिपच्छात तांबी

6 Injectable इंजेक्शन

7 Male condom or Nirodh पुरुष निरोध

8 Female condom स्त्री निरोध

9 Rhythm method खंडित संयम

10 Withdrawal method खंडित संभोग

11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक

12 Lactational amenorrhoea method (LAM) लॅटेक्शनल आमेनरोहोआ पद्धत (लाम)

99 Don't know माहित नाही

Fertility-related reasons गर्भधारणे संबंधित कारणे

1 Not having sex संभोग नाही

2 Infrequent sex कधीतरी संभोग आहे

3 Menopause/hysterectomy गर्भपिशवी काढून टाकणे

4 Sub fecund/infecund वांझपणा

5 PP/amenorrheic प्रसूती पश्चात पाळी न येणे

6 Breastfeeding स्तनपान

7 Fatalist/ up to god दैवी विश्वास

8 Trying to get pregnant/want children/currently pregnant गरोदर राहण्यासाठी प्रयत्न करत आहे/मूल हवं आहे/सद्या गरोदर आहे

OPPosition to use वापरास विरोध

9 Self स्वतःचा

10 Husband पतीचा

11 Others इतरांचा

12 Religious Prohibition धार्मिक बंधन

Skip to 4.6

Lack of knowledge माहितीचा अभाव

13 Knows no method पद्धतीबद्दल माहिती नाही

14 Knows no source साधनपद्धतीबद्दलचा पुरवठा माहित नाही

Method-related reasons पद्धती संबंधी कारणे

15 Health concerns आरोग्य विषयक

16 Having side effects दुष्परिणाम होत आहेत

17 Lack of access to continue सुरू ठेवण्यासाठी साधन अभाव

18 Costs too much साधन महाग आहे

19 Inconvenient to use वापरास गैरसोयीचे

20 Interferes with body's normal processes शरीराच्या सामान्य प्रक्रियेत अडथळा निर्माण करते

21 Don't like existing methods प्रचलित साधने आवडत नाही

98 Other [Specify] इतर [निर्दिष्ट करा]

99 Don't know माहित नाही

It is difficult for women to access family planning for many different reasons making it difficult to use family planning. Have any of the following prevented you from using family planning? If you have **never** used family planning, have any of these prevented you from trying to use family planning? (for all women):

कुटुंब नियोजन करणे हे स्त्रियांना काही कारणांमुळे कठीण जाते.

पुढीलपैकी काही बाबींमुळे तुम्हाला कुटुंब नियोजन करणे कठीण गेले का?

जर तुम्ही कधीही कुटुंब नियोजन केलेच नसेल तर ह्यापैकी कशांमुळे कुटुंब नियोजन करण्यापासून तुम्ही परावृत्त झालात? (सर्व स्त्रियांना)

- | | | |
|-----|---|-----------------------|
| 4.6 | Getting permission from my husband to go to the health clinic.
आरोग्य केंद्रात जाण्यास पतीची परवानगी घेणे | 1 Yes हो
2 No नाही |
| 4.7 | Having the money I need to pay for family planning.
कुटुंब नियोजन करण्यास लागणारे पैसे असणे | 1 Yes हो
2 No नाही |
| 4.8 | Getting money from my husband that I need for family planning.
कुटुंब नियोजन करण्यास मला लागणारे पैसे पतीकडून घेणे | 1 Yes हो
2 No नाही |
| 4.9 | Distance to the family planning clinic.
कुटुंब नियोजन केंद्रापर्यंतचे अंतर | 1 Yes हो
2 No नाही |

4.10	Times the family planning clinic is open. कुटुंब नियोजन केंद्र चालू असण्याची वेळ	1 Yes हो 2 No नाही	
4.11	Concern that my husband will find out I went to the clinic for family planning. मी कुटुंब केंद्रात गेल्याचे पतीस कळेल ही काळजी	1 Yes हो 2 No नाही	
4.12	Lack of availability of a well-trained provider. प्रशिक्षित सेवादात्याचा अभाव	1 Yes हो 2 No नाही	
4.13	Now I am going to ask you about your <u>future</u> contraceptive use. आता मी तुम्हाला तुमच्या भविष्यातील गर्भनिरोधक वापराबद्दल विचारणार आहे. Will you use a contraceptive method or continue to use in the next 6 months to avoid or delay pregnancy? पुढील तीन महिन्यात गर्भधारणा रोखण्यासाठी तुम्ही गर्भनिरोधक साधनांचा वापर करणार आहात का?	1 Yes 2 No	If no, skip to 4.15
4.14	Which contraceptive method would you prefer to use? कोणती गर्भनिरोधक पद्धत वापरणे आपण पसंत कराल? SELECT ALL THAT APPLY (लागू असलेल्या सर्व पर्याय निवडा)	1 Female sterilization स्त्री नसबंदी 2 Male sterilization पुरुष नसबंदी 3 Pills गोळ्या 4 IUD or CoPPer T तांबी 5 Injectable इंजेक्शन 6 Male condom or Nirodh पुरुष निरोध 7 Female condom स्त्री निरोध 8 Rhythm method खंडित संयम 9 Withdrawal method खंडित संभोग 10 lactational amenorrhea 11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक 99 Don't know माहित नाही	
4.15	In your opinion, what is the ideal gap between two births? तुमच्या मते, दोन प्रसूतीमधील योग्य अंतर किती ?	Number of years [FILL IN #] एकूण वर्षे 66 As close as possible शक्य तितके कमी 99 Don't know माहित नाही	
4.16	If you could use family planning without your husband or mother-in-law knowing, would you use family planning? तुमच्या पती किंवा सासूच्या नकळत तुम्हाला कुटुंब नियोजन करायचे असते तर तुम्ही केले असते का?	1 Yes हो 2 No नाही 99 Don't know माहित नाही	If no, skip to 4.18

4.17 What would that method be?
मग ती कोणती पद्धत असती?
SELECT ALL THAT APPLY
लागू असलेले सर्व पर्याय निवडा

- 1 Female sterilization स्त्री नसबंदी
- 2 Male sterilization पुरुष नसबंदी
- 3 Pills गोळ्या
- 4 IUD or CoPPer T आय यू डी किंवा कॉपर टी/ तांबी
- 5 Injectable इंजेक्शन
- 6 Male condom or Nirodh पुरुष कोन्डोम किंवा निरोध
- 7 Female condom स्त्री कोन्डोम
- 8 Rhythm method खंडित संयम
- 9 Withdrawal method खंडित संभोग
- 10 lactational amenorrhea
- 11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या
- 99 Don't know माहित नाही

4.18 Has anyone ever given you a payment to accept a certain family planning method?
तुम्हाला विशिष्ट कुटुंब नियोजन पद्धती वापरण्यासाठी कधी कोणी पैसे दिले आहेत का?

- 1 Yes हो
- 2 No नाही

If no, skip to 5.1

4.19 If yes, how much and for which method?
जर हो तर, कोणत्या पद्धतीसाठी किती?

- 1 Female sterilization स्त्री नसबंदी
- 2 Male sterilization पुरुष नसबंदी
- 3 Pills गोळ्या
- 4 IUD or CoPPer T आय यू डी किंवा कॉपर टी/ तांबी
- 5 PPIUD पी पी पी आय यू डी/ प्रसुतिपच्छात तांबी
- 6 Injectable इंजेक्शन
- 7 Male condom or Nirodh पुरुष कोन्डोम किंवा निरोध
- 8 Female condom स्त्री कोन्डोम
- 9 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या

AMOUNT OF PAYMENT RECEIVED
IN Rs. _____ मिळालेली रक्कम (रु.)

4.20 Which aspect(s) of IUD use have you ever discussed with a family planning provider?

- 1 How well it works
- 2 How long it can be used
- 3 Side effects of IUD use
- 4 The process of insertion
- 5 where and how to have an IUD removed
- 6 None, I never discussed IUD use with a provider

Section 5. FEASIBILITY, ACCEPTABILITY and APPROPRIATENESS OF LINKED CARE

विभाग ५: संभाव्यता, योग्यता आणि दुवा साधलेल्या काळजीची मंजूरी

No.	Question	Response Options	Skip
	<p>Family planning counseling and methods are not typically provided at the same time as infant vaccination services. Researchers are considering whether healthcare providers could provide contraception directly in the community center at the same time as infant vaccination visits without requiring a visit to the clinic. This could include condoms, pills, injectable contraception and IUDs. <i>Regarding the linked provision of family planning during infant vaccination, this type of linked care:</i></p> <p>कुटुंब नियोजन समुपदेशन आणि पद्धती विशेषतः अर्भक लसीकरण सेवांच्या वेळेस पुरविल्या जात नाहीत. क्लिनिकला भेट न देता शिशु लसीकरणास भेट देण्याइतपतच आरोग्य सेवा प्रदाता थेट सामुदायिक केंद्रात गर्भनिरोधक प्रदान करू शकतात का याचा विचार संशोधक करीत आहेत. यात निरोध, गोळ्या, इंजेक्टेबल गर्भनिरोधक आणि कॉपर टी समाविष्ट असू शकतात. शिशु लसीकरण दरम्यान कुटुंब नियोजनाच्या जोडलेल्या तरतुदीविषयी, या प्रकारची जोडलेली काळजी:</p>		
5.1a	<p>Linked family planning and infant vaccination care is a model that meets my approval</p> <p>कुटुंब नियोजन जोडणी आणि शिशु लसीकरण काळजी हे एक मॉडेल आहे जे माझी मान्यता पूर्ण करते</p>	<p>1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree</p>	
5.1b	<p>Linked family planning and infant vaccination care is a model that is appealing to me</p> <p>कुटुंब नियोजन जोडणी आणि शिशु लसीकरण काळजी हे एक मॉडेल आहे जे मला आकर्षक वाटत आहे</p>	<p>1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree</p>	
5.1c	<p>I like the model of linked family planning and infant vaccination care</p> <p>कुटुंब नियोजन जोडणी आणि शिशु लसीकरण काळजी हे एक मॉडेल आहे जे मला आवडते</p>	<p>1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree</p>	
5.1d	<p>I welcome linked family planning and infant vaccination care in my community</p> <p>मी माझ्या समाजातील दुवा साधलेल्या कुटुंब नियोजन आणि अर्भक लसीकरण काळजीचे स्वागत करते</p>	<p>1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree</p>	
5.2a	<p>Linked family planning and infant vaccination care seems fitting to my community</p> <p>जोडलेली कुटुंब नियोजन आणि नवजात लसीकरण काळजी माझ्या समुदायाला शोभणारी वाटत आहे</p>	<p>1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree</p>	
5.2b	<p>Linked family planning and infant vaccination care seems suitable to my community</p>	<p>1) Completely agree 2) Agree 3) Neither agree nor disagree</p>	

	दुवा साधलेल्या कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समुदायासाठी योग्य आहे	4) Disagree 5) Completely disagree
5.2c	Linked family planning and infant vaccination care seems applicable to my community जोडलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समुदायाला लागू आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
5.2d	Linked family planning and infant vaccination care seems like a good match for my community जोडलेली कुटुंब नियोजन आणि नवजात लसीकरण काळजी माझ्या समुदायासाठी एक चांगली जुळवाजुळव दिसते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
5.3a	Linked family planning and infant vaccination care seems implementable in my community माझ्या कुटुंबात दुवा साधलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी अंमलबजावणी योग्य दिसते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
5.3b	Linked family planning and infant vaccination care seems possible in my community माझ्या कुटुंबात दुवा साधलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी शक्य आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
5.3c	Linked family planning and infant vaccination care seems doable in my community जोडलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समाजात घेणे शक्य आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
5.3d	Linked family planning and infant vaccination care seems easy to use for women in my community जोडलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समाजातील महिलांसाठी वापरणे सोपे वाटते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree

Section 6. GENDER-BASED ABUSE/CONTROL and IPV

विभाग ६: लिंग-आधारित गैरवापर / नियंत्रण आणि जोडीदारांतर्गत हिंसा

No.	Question	Response Options	Skip
6.1	Are you usually allowed to go to the following places alone, only with someone else, or not at all? To the market? तुम्हाला पुढील ठिकाणी एकटीस , फक्त कोणाबरोबर तरी जाण्याची परवानगी आहे का अजिबात नाही? बाजारात जाणे ? CHOOSE ONE एक निवडा	1 Alone एकटीस 2 With someone else only फक्त कोणाबरोबर तरी 3 Not at all अजिबात नाही	
6.2	To the health facility? आरोग्य सेवेसाठी जाणे ? CHOOSE ONE [एक निवडा]	1 Alone एकटीस 2 With someone else only फक्त कोणाबरोबर तरी 3 Not at all अजिबात नाही	
6.3	To places outside this (village/community)? (गावाबाहेरील/ वस्तीबाहेरील) ठिकाणास जाणे? CHOOSE ONE [एक निवडा]	1 Alone एकटीस 2 With someone else only फक्त कोणाबरोबर तरी 3 Not at all अजिबात नाही	
6.4	Now if you will permit me, I need to ask some more questions about your relationship with your (last) husband. In the last 12 months, Had your husband slaPPed you? तुमच्या पतीने तुम्हाला कधी थोबाडीत मारले आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही	
6.5	Has your husband twisted your arm or pulled your hair? तुमच्या पतीने तुमचा हात कधी मुरगळला आहे किंवा तुमचे केस ओढले आहेत का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही	
6.6	Has your husband pushed you, shook you or thrown something at you? तुमच्या पतीने तुम्हाला ढकलले आहे, हादरवले आहे किंवा तुमच्या कडे काही फेकले आहे?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही	
6.7	Has your husband kicked you, dragged you or beat you up?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही	

	तुमच्या पतीने तुम्हाला लाथ मारली आहे , तुम्हाला फरफटत नेले आहे किंवा तुम्हाला मारझोड केली आहे का?	4 Never in our relationship आमच्या नात्यात कधीच नाही
6.8	Has your husband choked you or tried to burn you on purpose? तुमच्या पतीने तुमचा हेतुपूर्वक गळा दाबण्याचा किंवा तुम्हाला जाळण्याचा प्रयत्न केला आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
6.9	Has your husband threatened to attack you with a knife, gun or any other weapon? तुमच्या पतीने तुम्हाला चाकूने, बंदूकीने किंवा कोणत्याही हत्याराने हल्ला करण्याची धमकी दिली आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
6.10	Has your husband physically forced you to have sexual intercourse with him? तुमच्या पतीने तुमच्याशी कधी बळजबरीने शारीरिक संबंध ठेवले आहेत काय?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
6.11	Has your husband forced you to perform any sexual acts when you did not want to? तुमच्या पतीने तुम्हाला तुमची इच्छा नसताना कोणताही लैंगिक प्रकार करण्यास जबरदस्ती केली आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
6.12	In the past 12 months, have you hit, slaPPed, kicked or done anything else to physically hurt your husband at times when he was not already beating or physically hurting you? गेल्या 12 महिन्यांत तुम्ही तुमच्या पतीला तो तुम्हाला मारत नसताना, किंवा शारीरिक इजा करीत नसतानाही तुम्ही त्यांना मारले आहे, थोबडवले आहे, लाथ मारली आहे, किंवा त्याला शारीरिक इजा केली आहे का?	1 Yes हो 2 No नाही

Section 7. REPRODUCTIVE AUTONOMY पुनरुत्पादन संबंधीची स्वायत्तता

These questions ask about who has the most say in different types of decisions. “Most say” means if there was a disagreement, the person who would have final say. If you have not had to make any of the following decisions, please think about who would have the most say in the decision. हे प्रश्न वेगवेगळ्या प्रकारच्या

निर्णयांमध्ये सर्वात जास्त म्हणणे कोणाचे असते याबद्दल विचारतात. “बहुतेक म्हणणे” याचा अर्थ मतभेद असल्यास, ज्याचे अंतिम मत असेल. आपल्याला पुढीलपैकी कोणताही निर्णय घ्यावा लागला नसेल तर, निर्णयात कोण सर्वात जास्त सांगेल याचा विचार करा.

No.	Question	Response Options	Skip
7.1	Who has the MOST say about whether you use a method to prevent pregnancy? तुम्ही गर्भधारणा रोखण्यासाठी पद्धत वापरली की नाही याबद्दल बहुतेक कोण ठरविते ?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
7.2	Who has the MOST say about whether you use a method to prevent pregnancy? तुम्ही गर्भधारणा रोखण्यासाठी कोणतीही पद्धत वापरली की नाही याबद्दल बहुतेक कोण ठरविते?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
7.3	Who has the MOST say about which method you would use to prevent pregnancy? गर्भधारणा रोखण्यासाठी तुम्ही पद्धतीचा वापर कराल याबद्दल बहुतेक ठरविते ?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
7.4	Who has the MOST say about when you have a baby in your life? तुमच्या आयुष्यात तुम्हाला मुल असताना सर्वात जास्त कुणी ठरविले?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
7.5	If you became pregnant but it was unplanned, who would have the MOST say about whether you would raise the child, seek adoptive parents, or have an abortion? तुम्ही गर्भवती झाल्यास परंतु ती नियोजनबद्ध राहिली नसेल, तर तुम्ही तुमच्या मुलाचे संगोपन कराल, दत्तक पालकाचा शोध घ्याल की गर्भपात कराल याबद्दल बहुतेक कोण ठरवू शकेल?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
7.6	My husband has stoPPed me from using a method to prevent pregnancy when I wanted to use one.	0 strongly agree 1 agree 2 disagree 3 strongly disagree	

- मला गर्भधारणा रोखण्यासाठी पद्धत वापरायची असताना,
माझ्या पतीने मला पद्धत वापरण्यास थांबविले आहे.
- 7.7 My husband has messed with or made it difficult to use a method to prevent pregnancy when I wanted to use one. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
मला एखादी पद्धत वापरायची होती तेव्हा माझ्या पतीने
गोंधळ केला किंवा गर्भधारणा रोखण्यासाठी मला एखादी
पद्धत वापरायची असल्यास ती वापरणे कठीण केले होते.
- 7.8 My husband has made me use a method to prevent pregnancy when I did not want to use one. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
जेव्हा मला एखादी पद्धत वापरायची नव्हती तेव्हा माझ्या
पतीने मला गर्भधारणा रोखण्यासाठी पद्धत वापरण्यास
भाग पाडले.
- 7.9 If I wanted to use a method to prevent pregnancy my husband would stop me. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
जर मला गर्भधारणा रोखण्यासाठी एखादी पद्धत
वापरायची असेल तर माझा नवरा मला थांबवू शकेल.
- 7.10 My husband has pressured me to become pregnant. माझ्या पतीने माझ्यावर
गर्भवती होण्यासाठी दबाव आणला आहे. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
- 7.11 My husband would support me if I wanted to use a method to prevent pregnancy. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
जर मला गर्भधारणा रोखण्यासाठी एखादी पद्धत
वापरायची असेल तर माझे पती मला साथ देतील.
- 7.12 It is easy to talk about sex with my husband. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
माझ्या पतीशी लैंगिक संबंधाबद्दल बोलणे सोपे आहे.
- 7.13 If I didn't want to have sex I could tell my husband. मला लैंगिक संबंध नको
असल्यास मी माझ्या नवऱ्याला सांगू शकते. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
- 7.14 If I was worried about being pregnant or not being pregnant I could talk to my husband about it. 0 strongly agree
1 agree
2 disagree
3 strongly disagree
जर मी गर्भवती आहे की नाही याबद्दल काळजी वाटत
असेल तर मी गर्भवती असल्याबद्दल माझ्या पतीशी बोलू
शकेन.

- 7.15 If I really did not want to become pregnant I could get my husband to agree with me.
जर मी खरोखरच गर्भवती होऊ इच्छित नसेल तर मी माझ्या पतीला माझ्याशी सहमत होण्यास तयार करेल.
- 0 strongly agree
1 agree
2 disagree
3 strongly disagree

APPENDIX 2

ICMR - NATIONAL INSTITUTE FOR RESEARCH IN REPRODUCTIVE HEALTH

आय. सी. एम. आर.- राष्ट्रीय प्रजनन आरोग्य संशोधन संस्था

Increasing access to postpartum contraception by linking family planning and infant vaccination services

कुटुंब नियोजन आणि अर्भक लसीकरण सेवांचा संबंध जोडून प्रसूतिपूर्व गर्भनिरोधक साधनाचा वापर वाढविणे

6-MONTH FOLLOW UP QUESTIONNAIRE**Section 1. MENSTRUATION, PREGNANCY, DELIVERY, POSTNATAL CARE**

मासिकपाळी, गरोदरपण, प्रसूती, प्रसूतीपूर्व काळजी

No.	Question	Response Options	Skip
1.1	When did your last menstrual period start? तुम्हाला शेवटची मासिक पाळी केव्हा आली होती?	1 Days ago दिवस अगोदर [FILL IN #] 2 Weeks ago आठवडा अगोदर [FILL IN #] 3 Months ago महिने अगोदर [FILL IN #] 4 Years ago वर्षापूर्वी [FILL IN #] 5 Before last birth शेवटच्या अपत्याच्या जन्मापूर्वी	
	IF LESS THAN 1 WEEK, RECORD DAYS; IF LESS THAN 1 MONTH, RECORD WEEKS; IF LESS THAN 1 YEAR, RECORD MONTHS. जर 1 आठवड्यापेक्षा कमी असेल तर, दिवसात नोंद करा; जर 1 महिन्याहून कमी असेल तर, आठवड्यात नोंद करा; जर 1 वर्षाहून कमी असेल, तर महिन्यांमध्ये नोंद करा		
1.2	Are you pregnant now? तुम्ही सध्या गरोदर आहात का?	1 Yes हो 2 No नाही 99 Don't know माहित नाही	If no or don't know, skip to 1.4
1.3	How many months pregnant are you? तुम्ही किती महिने गरोदर आहात?	Months [FILL IN #] महिना	
1.4	Have you had a pregnancy in the past 6 months? गेल्या ६ महिन्यात, तुम्ही कधी गरोदर राहिल्या आहात का?	1 Yes हो 2 No नाही	If No, skip to 1.6
1.5	What were the outcome of those pregnancies? त्या गर्भधारणेचे परिणाम काय?	1 Live birth----- जिवंत मूल [FILL IN #] 2 Still birth----- मृत मूल [FILL IN #] 3. Miscarriage (spontaneous abortion) गर्भपात (आपोआप गर्भपात) [FILL IN #] 4 Induced abortion--- प्रेरित गर्भपात [FILL IN #] 5 Not Yet Delivered - अजून प्रसूती झाली नाही [FILL IN #]	

- 1.6 Were you offered any family planning counseling at the time of your infant(s) first immunizations?
1 Yes होय
2 No नाही
3 I don't remember मला आठवत नाही
- 1.7 Were you ever offered any contraceptive methods at the time of your infant(s) first immunizations?
1 Yes होय
2 No नाही
3 I don't remember मला आठवत नाही
तुमच्या बाळाच्या प्रथम लसीकरणाच्या वेळी तुम्हाला कधीही गर्भनिरोधक पद्धती देण्याची तयारी दर्शविली होती का?
- 1.8 Now I have some questions about the future:
Would you like to have (a/another) child, or would you prefer not to have any (more) children?
1 Have a/another child आणखी एखादे मुल
2 No more/none आणखी नाही
3 Can't get pregnant गर्भधारणा होऊ शकत नाही
99 Undecided/don't know अनिर्णीत/माहित नाही
भविष्याविषयी काही प्रश्न विचारणार: तुम्हाला आणखी मुलं हवी आहे का? किंवा तुमची पसंती आता या पुढे मुलं नको अशी आहे का?
- CHOOSE ONE** एक निवडा
- 1.9 How long would you like to wait from now (or after the birth of your current child) before the birth of another child?
1 Months महिन्यात [FILL IN #]
2 Years वर्ष [FILL IN #]
33 Soon/Now लगेच
तुम्हाला आता पासून दुसऱ्या मुलाच्या जन्म अगोदर किती काळ वाट पाहायला आवडेल (तुमच्या सध्याच्या मुलाच्या जन्मानंतर),?
- 1.10 If you knew you would next have a boy child, how much would you like to get pregnant this time?
1 Very likely खूप आवडेल
2 Likely आवडेल
3 Somewhat likely काही प्रमाणात आवडेल
4 Not likely आवडणार नाही
5 Not at all likely अजिबात आवडणार नाही
तुम्हाला होणारे अपत्य हे मुलगा असेल तर तुम्हाला कितपत गरोदर होण्यास आवडेल?
- 1.11 If you knew you would next have a girl child, how much would you like to get pregnant at this time?
1 Very likely खूप आवडेल
2 Likely आवडेल
3 Somewhat likely काही प्रमाणात आवडेल
4 Not likely आवडणार नाही
5 Not at all likely अजिबात आवडणार नाही
तुम्हाला होणारे अपत्य हे मुलगी असेल तर तुम्हाला कितपत गरोदर होण्यास आवडेल?
- 1.12 How likely would you be to get an abortion if you became pregnant at this time?
1 Very likely खूप आवडेल
2 Likely आवडेल
3 Somewhat likely काही प्रमाणात आवडेल
4 Not likely आवडणार नाही
5 Not at all likely अजिबात आवडणार नाही
जर तुम्ही या वेळी गरोदर राहिलात तर तुम्हाला गर्भपात करण्याची कितपत इच्छा असेल?

If 2 or 3, skip to 1.10

- 1.13 How likely would you be to get an abortion if you became pregnant at this time and knew you were going to have a girl?
जर तुम्ही या वेळी गरोदर राहिलात आणि तुम्हाला मुलगी होणार आहे असे समजले तर तुम्हाला गर्भपात करण्याची कितपत इच्छा असेल?
- 1 Very likely खूप आवडेल
2 Likely आवडेल
3 Somewhat likely काही प्रमाणात आवडेल
4 Not likely आवडणार नाही
5 Not at all likely अजिबात आवडणार नाही
- 1.14 How likely would you be to get an abortion if you became pregnant at this time and knew you were going to have a boy?
जर तुम्ही या वेळी गरोदर राहिलात आणि तुम्हाला मुलगा होणार आहे असे समजले तर तुम्हाला गर्भपात करण्याची कितपत इच्छा असेल?
- 1 Very likely खूप आवडेल
2 Likely आवडेल
3 Somewhat likely काही प्रमाणात आवडेल
4 Not likely आवडणार नाही
5 Not at all likely अजिबात आवडणार नाही
- 1.15 Are you or your husband currently sterilized? तुम्ही किंवा तुमच्या पतीने सध्या कुटुंब नियोजन शस्त्रक्रिया केली आहे का?
- 1 Yes हो
2 No नाही
- 1.16 We would like to ask you about your current thoughts and feelings about the idea of becoming pregnant in the next 3 months and having a baby in the next year. Women have very different thoughts and feelings about pregnancy and having a baby that can change over time. There are no right or wrong answers. For each question, choose one answer that seems right at this point in your life. पुढील 3 महिन्यांत गर्भवती होण्यासाठी आणि पुढच्या वर्षी मुलाला जन्म देण्याच्या कल्पनेबद्दल आम्ही आपल्यास तुम्हाला वर्तमान विचारांबद्दल आणि भावनांबद्दल विचारू इच्छितो. गर्भधारणेबद्दल आणि बाळाला जन्म देण्याविषयी स्त्रियांकडे खूप भिन्न विचार आणि भावना असतात ज्या काळानुसार बदलू शकतात. येथे कोणतीही बरोबर किंवा चुकीची उत्तरे नाहीत. प्रत्येक प्रश्नासाठी, तुमच्या जीवनातील याक्षणी योग्य वाटणारे एक उत्तर निवडा.
- The following questions ask about your thoughts and feelings about the idea of becoming PREGNANT in the next 3 months. Even if you do not think you can become pregnant, please imagine how you would feel about becoming pregnant. खालील प्रश्न पुढील ३ महिन्यांत गर्भवती होण्याच्या विचारांबद्दल आणि भावनांबद्दल आहेत. आपण गर्भवती होऊ शकतो असे आपल्याला वाटत नसले तरीही, कृपया कल्पना करा की आपण गर्भवती झाल्यास कसे वाटते.
- Ask currently non-pregnant and non-sterilized women. Ask only if 1.2 is 2 No or 99 Dont know. Ask only if 1.15 is 2 No.
- a. I wouldn't mind it if I became pregnant in the next 3 months.
पुढील ३ महिन्यांत मी गरोदर राहिले तर मला हरकत नाही.
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत

- b. It would be a good thing for me if I became pregnant in the next 3 months.
पुढच्या ३ महिन्यांत मी गरोदर राहिले तर माझ्यासाठी चांगली गोष्ट होईल
- c. Thinking about becoming pregnant in the next 3 months makes me feel unhappy.
पुढील ३ महिन्यांत गर्भवती होण्याचा विचार केल्याने मला दुःख होते.
- d. Thinking about becoming pregnant in the next 3 months makes me feel excited.
पुढील ३ महिन्यांत गर्भवती होण्याचा विचार केल्याने मला उत्साह वाटतो.
- e. Becoming pregnant in the next 3 months would bring me closer to my husband.
पुढील ३ महिन्यांत गर्भवती होणे मला माझ्या पती जवळ आणते.
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत

- 1.17 The following questions ask about your thoughts and feelings about the idea of having a BABY in the next year. Even if you do not think you can have a baby, please imagine how you would feel about having a baby.
पुढील वर्षात बाळ होण्याच्या कल्पनेविषयी आपले विचार आणि भावना खालील प्रश्नात विचारलेले आहे. आपण गर्भवती होऊ शकतो असे आपल्याला वाटत नसले तरीही, कृपया कल्पना करा की आपल्याला मूल झाल्याबद्दल कसे वाटेल.

Ask only if 1.2 is 2 or 99 and 1.15 is 2

- a. I want to have a baby within the next year
मला पुढच्या वर्षाच्या आत बाळ पाहिजे आहे.
- b. If I had a baby in the next year, it would be bad for my life.
पुढच्या वर्षी मला मूल झाले तर ते माझ्या आयुष्यासाठी वाईट आहे.
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत

- c. It would be a positive addition to my life to have a baby in the next year.
पुढच्या वर्षी बाळाला जन्म देणे माझ्या आयुष्यात एक सकारात्मक भर असेल.
- d. It would be the end of the world for me to have a baby in the next year.
पुढच्या वर्षी मला मूल होणे ही माझ्यासाठी आयुष्याची समाप्ती असेल.
- e. Thinking about having a baby within the next year makes me smile.
पुढच्या वर्षाच्या आत बाळाचा विचार केल्याने मला हसू येते.
- f. Thinking about having a baby within the next year makes me feel makes me feel stressed out.
पुढच्या वर्षाच्या आत बाळाचा विचार केल्याने मला तणाव निर्माण होतो.
- g. I would feel a loss of freedom if I had a baby in the next year.
पुढच्या वर्षी मला मूल झाले तर माझे स्वातंत्र्य हरविल्यासारखे वाटेल.
- h. If I had a baby in the next year, it would be hard for me to manage raising the child.
पुढच्या वर्षी मला मूल झाले तर मुलाचे संगोपन करणे मला कठीण जाईल.
- i. I would worry that having a baby in the next year would make it harder for me to achieve other things in my life.
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत
- 0 Strongly agree जोरदार सहमत
1 Agree सहमत
2 Neither agree nor disagree सहमत नाही किंवा असहमतही नाही
3 Disagree असहमत
4 Strongly disagree जोरदारपणे असहमत

मला अशी भीती वाटेल की पुढच्या वर्षी
बाळाला जन्म देणे माझ्या आयुष्यातील इतर
गोष्टी मिळवणे अवघड करेल.

4 Strongly disagree जोरदारपणे असहमत

Section 2 FAMILY PLANNING कुटुंब नियोजन

No.	Question	Response Options	Skip
	Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy. आता मी तुम्हाला कुटुंब नियोजन पद्धती बदलचे ज्ञान व त्याच्या वापराबद्दल काही प्रश्न विचारणार आहे ज्याचा वापर गर्भधारणा टाळण्यासाठी/ पाळणा लांबविण्यासाठी जोडपी करू शकतात.		
2.1	What are the contraceptive measures you have heard of? Probe: Any other? Do not read responses aloud. तुम्हाला कुटुंब नियोजनाच्या कोणत्या पद्धती ऐकले आहे का? चौकशी: इतर कोणतीही? पर्याय वाचू नका	0 None काहीही नाही 1 Female sterilization स्त्री नसबंदी 2 Male sterilization पुरुष नसबंदी 3 Pills गोळ्या 4 IUD or CoPPER T तांबी/ कॉपर टी 5 PPIUD पी पी आय यू डी/ प्रसुतिपच्छात तांबी 6 Injectable इंजेक्शन 7 Male condom or Nirodh पुरुष निरोध 8 Female condom स्त्री निरोध 9 Rhythm method खंडित संयम 10 Withdrawal method खंडित संभोग 11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या 12 Lactational amenorrhoea method (LAM) लॅटेकेशनल आमेनरोहोआ पद्धत (लाम)	
	It is difficult for women to access family planning for many different reasons making it difficult to use family planning. Have any of the following prevented you from using family planning? If you have never used family planning, have any of these prevented you from trying to use family planning? (for all women): कुटुंब नियोजन करणे हे स्त्रियांना काही कारणांमुळे कठीण जाते. पुढीलपैकी काही बाबींमुळे तुम्हाला कुटुंब नियोजन करणे कठीण गेले का? जर तुम्ही कधीही कुटुंब नियोजन केलेच नसेल तर ह्यापैकी कशामुळे कुटुंब नियोजन करण्यापासून तुम्ही परावृत्त झालात?(सर्व स्त्रियांना)		
2.2	Getting permission from my husband to go to the health clinic. आरोग्य केंद्रात जाण्यास पतीची परवानगी घेणे	1 Yes हो 2 No नाही	
2.3	Having the money I need to pay for family planning. कुटुंब नियोजन करण्यास लागणारे पैसे असणे	1 Yes हो 2 No नाही	
2.4	Getting money from my husband that I need for family planning.	1 Yes हो 2 No नाही	

	कुटुंब नियोजन करण्यास मला लागणारे पैसे पतीकडून घेणे			
2.5	Distance to the family planning clinic.	1 Yes हो 2 No नाही		
	कुटुंब नियोजन केंद्रापर्यंतचे अंतर			
2.6	Times the family planning clinic is open.	1 Yes हो 2 No नाही		
	कुटुंब नियोजन केंद्र चालू असण्याची वेळ			
2.7	Concern that my husband will find out I went to the clinic for family planning.	1 Yes हो 2 No नाही		
	मी कुटुंब केंद्रात गेल्याचे पतीस कळेल ही काळजी			
2.8	Lack of availability of a well-trained provider.	1 Yes हो 2 No नाही		
	प्रशिक्षित सेवादात्याचा अभाव			
2.9	Now I am going to ask you about your <u>past 3 months</u> contraceptive use.	1 Yes हो 2 No नाही	If no, skip to 2.12	
	आता मी तुम्हाला तुमच्या मागील 3 महिन्यांच्या गर्भनिरोधक वापराबद्दल विचारणार आहे.			
	Did you do something or use any method to delay or avoid getting pregnant in the past 3 months?			
	गेल्या तीन महिन्यात गर्भधारणा थांबविण्यासाठी तुम्ही कुटुंबनियोजनाची कोणती पद्धत वापरली आहे का?			
2.10	What were the methods that you have used in the past 3 months to delay or avoid pregnancy?	1 Pills गोळ्या 2 IUD/Copper T तांबी 3 PPIUD पी पी आय यू डी/ प्रसूतिपच्छात तांबी 4 Injectable इंजेक्शन 5 Male condom or Nirodh पुरुष कंडोम किंवा निरोध 6 Female condom स्त्री कंडोम 7 Rhythm method खंडित संयम 8 Withdrawal method खंडित संभोग 9 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या 10 Female sterilization स्त्री नसबंदी 11 Male sterilization पुरुष नसबंदी 12 Lactational amenorrhoea method (LAM) स्तनपान पद्धत (लाम)		
	तीन महिन्यांपासून गर्भधारणा थांबविण्यासाठी किंवा अंतर वाढविण्यासाठी कुटुंबनियोजनाची कोणती पद्धत वापरली?			
	SELECT ALL THAT APPLY (लागू असलेल्या सर्व पर्याय निवडा)			
2.11	What method are you using <u>currently</u> ?	0 None 1 Pills गोळ्या 2 IUD/Copper T तांबी 3 PPIUD पी पी आय यू डी/ प्रसूतिपच्छात तांबी 4 Injectable इंजेक्शन	Skip to 2.13	
	SELECT ALL THAT APPLY (लागू असलेल्या सर्व पर्याय निवडा)			

- 5 Male condom or Nirodh पुरुष कंडोम किंवा निरोध
- 6 Female condom स्त्री कंडोम
- 7 Rhythm method खंडित संयम
- 8 Withdrawal method खंडित संभोग
- 9 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या
- 10 Female sterilization स्त्री नसबंदी
- 11 Male sterilization पुरुष नसबंदी
- 12 Lactational amenorrhoea method (LAM) स्तनपान पद्धत (लाम)

- 2.12 Reasons for not using contraception in past 3 months.
वापर बंद करण्याची (खंड पडण्याची) कारणे.

SELECT ALL THAT APPLY
(लागू असलेल्या सर्व पर्याय निवडा)

Fertility-related reasons गर्भधारणे संबंधित कारणे

- 1 Not having sex संभोग नाही
- 2 Infrequent sex कधीतरी संभोग आहे
- 3 Menopause/hysterectomy गर्भपिशवी काढून टाकणे
- 4 Sub fecund/infecund बांझपणा
- 5 PP/amenorrheic प्रसूती पश्चात पाळी न येणे
- 6 Breastfeeding स्तनपान
- 7 Fatalist/ up to god दैवी विश्वास
- 8 Trying to get pregnant/want more children/currently pregnant गर्भधारणेसाठी/ मूल होण्यासाठी प्रयत्न करित आहे वापरास विरोध/सद्या गरोदर आहे

OPPosition to use वापरास विरोध

- 9 Self स्वतःचा वापरास विरोध
- 10 Husband पतीचा वापरास विरोध
- 11 Others इतरांचा वापरास विरोध
- 12 Religious Prohibition धार्मिक बंधन

Lack of knowledge माहितीचा अभाव

- 13 Knows no method पद्धतीबद्दल माहिती नाही
- 14 Knows no source साधनपद्धतीबद्दलचा पुरवठा माहित नाही

Method-related reasons पद्धती संबंधी कारणे

- 15 Health concerns आरोग्य विषयक
- 16 Having side effects दुष्परिणाम होत आहेत
- 17 Lack of access to continue सुरू ठेवण्यासाठी साधन अभाव
- 18 Costs too much साधन महाग आहे
- 19 Inconvenient to use वापरास गैरसोयीचे
- 20 Interferes with body's normal processes शरीराच्या सामान्य प्रक्रियेत अडथळा निर्माण करते
- 21 Don't like existing methods प्रचलित साधने आवडत नाही
- 98 Other [Specify] इतर [निर्दिष्ट करा] _____
- 99 Don't know माहित नाही

2.13	Is the method you used in the last 3 months the one you wanted? गेल्या तीन महिन्यात तुम्ही वापरलेली कुटुंबनियोजनाची पद्धत तुमच्या आवडीची होती का?	1 Yes हो 2 No नाही	If Yes, skip to 2.16
2.14	Which method would you have used instead? ह्याऐवजी कुटुंबनियोजनाची कोणती पद्धत वापरली असती ? SELECT ONE एक निवडा	1 Female sterilization स्त्री नसबंदी 2 Male sterilization पुरुष नसबंदी 3 Pills गोळ्या 4 IUD or CoPPer T आय यू डी किंवा कॉपर टी/ तांबी 5 PPIUD पी पी आय यू डी/ प्रसुतिपच्छात तांबी 6 Injectable इंजेक्शन 7 Male condom or Nirodh पुरुष कंडोम किंवा निरोध 8 Female condom स्त्री कंडोम 9 Rhythm method खंडित संयम 10 Withdrawal method खंडित संभोग 11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या 12 Lactational amenorrhea 99 Don't know माहित नाही	
2.15	Why did you use this instead of opting for your choice of contraceptive? तुमच्या इच्छित कुटुंबनियोजनाच्या साधनाऐवजी हे साधन तुम्ही का वापरले? SELECT ALL THAT APPLY लागू असलेले सर्व पर्याय निवडा Probe: Any other reasons. विचारा : ह्या व्यतिरिक्त कारणे Do not read options. पर्याय वाचून दाखवू नका .	1 Method of choice was not available इच्छित साधन उपलब्ध नव्हते 2 Provider not trained to provide chosen method इच्छित साधन देण्यास सेवादाता प्रशिक्षित नव्हता 3 Provider recommended current method सेवादात्याने प्रस्तुत पद्धत सुचवली 4 Not eligible for preferred method इच्छित पद्धतीसाठी अपात्र 5 Too costly खूप महागडे 6 Husband disapproved पतीने मान्य केले नाही 7 In-laws disapproved सासरच्या मंडळींनी मान्य केले नाही 98 Other इतर 99 Don't know माहित नाही	
2.16	Was this method used at every sex in the past 3 months? (Instruction: Ask about the primary method used) गेल्या 3 महिन्यांमध्ये प्रत्येक सेक्समध्ये / लैंगिक संबंधात ही पद्धत वापरली होती का	0 I didn't use a method मी पद्धत वापरली नाही 1 Most of the time ब-याचदा 2 Some of the time काहीवेळेस 3 Regularly नियमितपणे	
2.17	Have you discontinued a method in the last 6 months? गेल्या ६ महिन्यांत तुम्ही कुटुंब नियोजनाच्या पद्धतीचा वापर थांबवला आहे का?	1 Yes हो 2 No नाही	If no, skip to 2.20
2.18	If yes, which method? जर हो तर, कोणती पद्धत?	1 Pills गोळ्या 2 IUD/CoPPer T आय यू डी/ तांबी	

SELECT ALL THAT APPLY
लागू असलेले सर्व पर्याय निवडा

- 2.19 a. What were the reasons for discontinuation? वापर बंद करण्याची (खंड पडण्याची) कारणे?

(Method पद्धत 1)

SELECT ALL THAT APPLY
(लागू असलेल्या सर्व पर्याय निवडा)

Fertility-related reasons
गर्भधारणे संबंधित कारणे

- 1 Not having sex संभोग नाही
- 2 Infrequent sex कधीतरी संभोग आहे
- 3 Menopause/hysterectomy गर्भपिशवी काढून टाकणे
- 4 Sub fecund/infecund वांझपणा
- 5 PP/amenorrheic प्रसूती पश्चात पाळी न येणे
- 6 Breastfeeding स्तनपान
- 7 Fatalist/ up to god दैवी विश्वास
- 8 Trying to get pregnant/want children गर्भधारणेसाठी/ मूल होण्यासाठी प्रयत्न करीत आहे

Opposition to use वापरास विरोध

- 9 Self स्वतःचा
- 10 Husband पतीचा
- 11 Others इतरांचा
- 12 Religious Prohibition धार्मिक बंधन

Lack of knowledge माहितीचा अभाव

- 13 Knows no method पद्धतीबद्दल माहिती नाही
- 14 Knows no source साधनपद्धतीबद्दलचा पुरवठा माहित नाही

Method-related reasons पद्धती संबंधी कारणे

- 15 Health concerns आरोग्य विषयक
- 16 Having side effects दुष्परिणाम होत आहेत

- 3 PPIUD पी पी आय यू डी/ प्रसूतिपच्छात तांबी

- 4 Injectable इंजेक्शन

- 5 Male condom or Nirodh पुरुष निरोध

- 6 Female condom स्त्री निरोध

- 7 Rhythm method खंडित संयम

- 8 Withdrawal method खंडित संभोग

- 9 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या

- b What were the reasons for discontinuation?

वापर बंद करण्याची (खंड पडण्याची) कारणे?

SELECT ALL THAT APPLY
(लागू असलेल्या सर्व पर्याय निवडा)

(Method पद्धत 2)

Fertility-related reasons
गर्भधारणे संबंधित कारणे

- 1 Not having sex संभोग नाही
- 2 Infrequent sex कधीतरी संभोग आहे
- 3 Menopause /hysterectomy गर्भपिशवी काढून टाकणे
- 4 Sub fecund/infecund वांझपणा
- 5 PP/ amenorrheic प्रसूती पश्चात पाळी न येणे
- 6 Breastfeeding स्तनपान
- 7 Fatalist/ up to god दैवी विश्वास
- 8 Trying to get pregnant/want children गर्भधारणेसाठी/ मूल होण्यासाठी प्रयत्न करीत आहे

Opposition to use
वापरास विरोध

- 9 Self स्वतःचा
- 10 Husband पतीचा
- 11 Others इतरांचा
- 12 Religious Prohibition धार्मिक बंधन

Lack of knowledge
माहितीचा अभाव

- 13 Knows no method पद्धतीबद्दल माहिती नाही

- c What were the reasons for discontinuation?

वापर बंद करण्याची (खंड पडण्याची) कारणे?

SELECT ALL THAT APPLY
(लागू असलेल्या सर्व पर्याय निवडा)

(Method पद्धत 3)

Fertility-related reasons
गर्भधारणे संबंधित कारणे

- 1 Not having sex संभोग नाही
- 2 Infrequent sex कधीतरी संभोग आहे
- 3 Menopause/ hysterectomy गर्भपिशवी काढून टाकणे
- 4 Sub fecund/infecund वांझपणा
- 5 PP/ amenorrheic प्रसूती पश्चात पाळी न येणे
- 6 Breastfeeding स्तनपान
- 7 Fatalist/ up to god दैवी विश्वास
- 8 Trying to get pregnant/want children गर्भधारणेसाठी/ मूल होण्यासाठी प्रयत्न करीत आहे

Opposition to use
वापरास विरोध

- 9 Self स्वतःचा
- 10 Husband पतीचा
- 11 Others इतरांचा
- 12 Religious Prohibition धार्मिक बंधन

- 17 Lack of access to continue
सुरू ठेवण्यासाठी साधन मिळण्याचा अभाव
- 18 Costs too much साधन महाग आहे
- 19 Inconvenient to use वापरास
गैरसोयीचे
- 20 Interferes with body's
normal processes शरीराच्या सामान्य
प्रक्रियेत अडथळा निर्माण करते
- 21 Don't like existing methods
प्रचलित साधने आवडत नाही
- 98 Other [Specify] इतर [निर्दिष्ट करा]
-
- 99 Don't know माहित नाही

- 14 Knows no source
साधनपद्धतीबद्दलचा पुरवठा माहित नाही
- Method-related reasons**
पद्धती संबंधी कारणे
- 15 Health concerns आरोग्य
विषयक
- 16 Having side effects
दुष्परिणाम होत आहेत
- 17 Lack of access to
continue सुरू ठेवण्यासाठी साधन
अभाव
- 18 Costs too much
साधन महाग आहे
- 19 Inconvenient to use
वापरास गैरसोयीचे
- 20 Interferes with body's
normal processes शरीराच्या
सामान्य प्रक्रियेत अडथळा निर्माण करते
- 21 Don't like existing
methods प्रचलित साधने आवडत
नाही
- 98 Other [Specify]
इतर [निर्दिष्ट करा] _____
- 99 Don't know माहित नाही

- Lack of knowledge**
माहितीचा अभाव
- 13 Knows no method
पद्धतीबद्दल माहिती नाही
- 14 Knows no source
साधनपद्धतीबद्दलचा पुरवठा माहित
नाही
- Method-related**
reasons पद्धती संबंधी कारणे
- 15 Health concerns
आरोग्य विषयक
- 16 Having side effects
दुष्परिणाम होत आहेत
- 17 Lack of access to
continue सुरू ठेवण्यासाठी
साधन अभाव
- 18 Costs too much
साधन महाग आहे
- 19 Inconvenient to use
वापरास गैरसोयीचे
- 20 Interferes with
body's normal
processes शरीराच्या सामान्य
प्रक्रियेत अडथळा निर्माण करते
- 21 Don't like existing
methods प्रचलित साधने
आवडत नाही
- 98 Other [Specify]
इतर [निर्दिष्ट करा] _____
- 99 Don't know माहित नाही

- 2.20 Where did you obtain the
contraception (most commonly
used during the past 3 months)
the last time?
तुम्हाला गर्भनिरोधक साधने (सामान्यतः मागील
3 महिन्यांमध्ये वापरली गेलेली) कुठे मिळाली?

CHOOSE ONE एक निवडा

PUBLIC MEDICAL SECTOR सार्वजनिक आरोग्य
सुविधा

- 1 Govt/municipal hospital सरकारी/ म.न.पा. दवाखाना
- 2 CHC/Rural hospital/PHC समुदाय आरोग्य केंद्र/ ग्रामीण
रुग्णालय/ प्राथमिक आरोग्य केंद्र.
- 3 Sub-center/ANM उपकेंद्र/ परिचारिका
- 4 Anganwadi/ICDS Center अंगणवाडी सेविका/ एकात्मिक बाल
विकास केंद्र
- 5 ASHA आशा
- 6 NGO or trust hospital/clinic स्वयंसेवी संस्था

PRIVATE MEDICAL SECTOR खाजगी आरोग्य
सुविधा

- 7 Private hospital खाजगी दवाखाना
- 8 Private doctor/clinic खाजगी वैद्य/ दवाखाना
- 9 Traditional healer पारंपारिक पद्धती द्वारे रोग बरा करणारे
- 10 Pharmacy drugstore औषधालय
- 11 Friend/relative मित्र/नातेवाईक

		98 Other [Specify] इतर (नमूद करा) _____	
2.21	Did you do something or use any other contraceptive method to delay or avoid getting pregnant since we last spoke (past 6 months), but not in the past 3 months? आपल्या शेवटच्या भेटीनंतर (गेल्या 6 महिन्यात), गर्भधारणा विलंबनासाठी किंवा गर्भधारणा टाळण्यासाठी इतर काही गर्भ निरोधक पद्धत वापरली आहे, परंतु मागील 3 महिन्यांत नाही?	1 Yes हो 2 No नाही	If ‘NO’ then Skip to 2.23
2.22	What were the methods that you have used since we last spoke (past 6 months) but not in the past 3 months, to delay or avoid pregnancy? आपल्या शेवटच्या भेटीनंतर (गेल्या 6 महिन्यात), गर्भधारणा विलंबनासाठी किंवा गर्भधारणा टाळण्यासाठी कोणती गर्भ निरोधक पद्धत वापरली आहे, परंतु मागील 3 महिन्यांत नाही? SELECT ALL THAT APPLY (लागू असलेल्या सर्व पर्याय निवडा)	1 Pills गोळ्या 2 IUD/Copper T तांबी 3 PPIUD पी पी आय यू डी/ प्रसुतिपच्छात तांबी 4 Injectable इंजेक्शन 5 Male condom or Nirodh पुरुष कंडोम किंवा निरोध 6 Female condom स्त्री कंडोम 7 Rhythm method खंडित संयम 8 Withdrawal method खंडित संभोग 9 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या	
2.23	Now I am going to ask you about your <u>future</u> contraceptive use. आता मी तुम्हाला तुमच्या भविष्यातील गर्भनिरोधक वापराबद्दल विचारणार आहे. Will you use a contraceptive method or continue to use in the next three months to avoid or delay pregnancy? पुढील तीन महिन्यात गर्भधारणा रोखण्यासाठी तुम्ही गर्भनिरोधक साधनांचा वापर करणार आहात का?	1 Yes होय 2 No नाही	If no, skip to 2.25
2.24	Which contraceptive method would you prefer to use? कोणती गर्भनिरोधक पद्धत वापरणे आपण पसंत कराल? SELECT ALL THAT APPLY (लागू असलेल्या सर्व पर्याय निवडा)	1 Female sterilization स्त्री नसबंदी 2 Male sterilization पुरुष नसबंदी 3 Pills गोळ्या 4 IUD or Copper T तांबी 5 PPIUD पी पी आय यू डी/ प्रसुतिपच्छात तांबी 6 Injectable इंजेक्शन 7 Male condom or Nirodh पुरुष निरोध 8 Female condom स्त्री निरोध 9 Rhythm method खंडित संयम 10 Withdrawal method खंडित संभोग	

- 11 Emergency contraceptive pill
आपत्कालीन गर्भनिरोधक गोळ्या
- 99 Don't know माहित नाही
- 2.25 In your opinion, what is the ideal gap between two births?
तुमच्या मते, दोन प्रसूतीमधील योग्य अंतर किती ?
Which of the following things has your husband or mother-in-law done to oppose your using family planning in the past 9 months:
तुमच्या पतीने किंवा तुमच्या सासूने गेल्या ९ महिन्यांत तुम्हाला कुटुंब नियोजनासाठी विरोध करण्यासाठी खालीलपैकी कोणत्या गोष्टी केल्या आहेत?
- 2.26 Stopped you from going to a clinic or community 'health day' (VHND) to obtain family planning?
तुम्हाला कुटुंब नियोजनासाठी दवाखाना किंवा सामाजिक 'आरोग्य दिन' (व्ही इच एन डी) जाण्यापासून थांबवले
- 1 Yes हो
2 No नाही
- 2.27 Destroyed, hidden, or taken away your family planning method (e.g. pills)?
कुटुंब नियोजनाचे साधन नष्ट केले, लपवून ठेवले, किंवा तुमच्यापासून काढून घेतले (जसे, गोळ्या)
- 1 Yes हो
2 No नाही
- 2.28 Insulted you, yelled at you, or made you feel badly for using or wanting to use family planning?
कुटुंब नियोजन केल्याबद्दल तुमचा अपमान केला, तुमच्यावर ओरडले, किंवा तुम्हाला वाईट वाटू दिले ?
- 1 Yes हो
2 No नाही
- 2.29 Tried to force or pressure you to become pregnant when you did not want to be pregnant?
तुमची इच्छा नसतानाही तुम्हाला गरोदर राहण्यास जबरदस्ती केली किंवा तुमच्यावर दबाव आणला?
- 1 Yes हो
2 No नाही
- 2.30 Told you he would leave you if you did not become pregnant?
जर तुम्ही गरोदर राहणार नसाल तर तुम्हाला सोडून देऊ असे सांगितले ?
- 1 Yes हो
2 No नाही
- 2.31 Told you he would have a baby with someone else if you didn't get pregnant?
जर तुम्ही गरोदर राहणार नसाल तर दुसरीकडून मूल प्राप्त करेन असे सांगितले?
- 1 Yes हो
2 No नाही
- 2.32 Threatened to hurt or beat you if you tried to prevent or delay getting pregnant?
- 1 Yes हो
2 No नाही

- जर तुम्ही गर्भधारणा टाळण्याचा किंवा पाळणा लांबवण्याचा प्रयत्न केला तर तुम्हाला इजा करण्याचा किंवा मारण्याची धमकी दिली ?
- 2.33 Told you that it was against your religion or culture to use family planning
कुटुंबनियोजन करणे हे आपल्या धर्माविरुद्ध किंवा परंपरेच्या विरुद्ध आहे असे तुम्हाला सांगितले
- 2.34 Told you that women who use family planning do this so that they can have sex with other men
तुम्हाला असे सांगितले की ज्या स्त्रिया असे करतात त्यांना इतर पुरुषांशी सेक्स/ लैंगिक संबंध ठेवायचे असतात ?
- 2.35 Told you that you could not use family planning because you did not have any or enough sons
एकही मुलगा किंवा पुरेसे मुलगे नसल्यामुळे तुम्हाला कुटुंब नियोजन करता येणार नाही असे सांगितले
- 2.36 Pressured you to end a pregnancy when you did not want to end it?
तुम्हाला इच्छा नसतानाही तुम्हाला गर्भपात करण्यास सांगितले?
- 2.37 Pressured you to keep a pregnancy that you wanted to end?
तुम्हाला नको असलेली गर्भधारणा कायम ठेवण्यासाठी तुमच्यावर दबाव आणला?
- 2.38 **Instruction:** If 'no' to all i.e. q2.32-2.43, then skip to 2.45 otherwise ask q2.44. **Overall across these behaviors**
सूचना: पैकी बव्हंशी गोष्टी 'नाही' असतील तर ४.६४ वगळा नाही तर ४.६३ विचारा
Who did or said these in the past 9 months?
गेल्या ९ महिन्यात, हे कोणी केल्या अथवा म्हटल्या?
CHOOSE ONE एक निवडा
- 2.39 If you could use family planning without your husband or mother-in-law knowing, would you use family planning?

1 Yes हो
2 No नाही

1 Yes हो
2 No नाही

1 Yes हो
2 No नाही

1 Yes हो
2 No नाही

1 Yes हो
2 No नाही

1 Husband पती
2 Mother-in-law सासू
3 Both दोघे
98 Other [Specify] इतर (स्पष्ट करा) _____

1 Yes हो
2 No नाही
99 Don't know माहित नाही

**If no
or
don't
know,**

	तुमच्या पती किंवा सासूच्या नकळत तुम्हाला कुटुंब नियोजन करायचे असते तर तुम्ही केले असते का?		
2.40	What would that method be? मग ती कोणती पद्धत असती? SELECT ALL THAT APPLY लागू असलेले सर्व पर्याय निवडा	1 Female sterilization स्त्री नसबंदी 2 Male sterilization पुरुष नसबंदी 3 Pills गोळ्या 4 IUD or CoPPer T आय यू डी किंवा कॉपर टी/ तांबी 5 PPIUD पी पी आय यू डी/ प्रसुतिपच्छात तांबी 6 Injectable इंजेक्शन 7 Male condom or Nirodh पुरुष कंडोम किंवा निरोध 8 Female condom स्त्री कंडोम 9 Rhythm method खंडित संयम 10 Withdrawal method खंडित संभोग 11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या 99 Don't know माहित नाही	skip to 2.41
2.41	In the last 9 months, has anyone given you a payment to accept a certain family planning method? मागील ९ महिन्यात, तुम्हाला विशिष्ट कुटुंब नियोजन पद्धती वापरण्यासाठी कधी कोणी पैसे दिले आहेत का?	1 Yes हो 2 No नाही	If no, skip to 2.44
2.42	If yes, how much and for which method? जर हो तर, कोणत्या पद्धतीसाठी किती?	1 Female sterilization स्त्री नसबंदी 2 Male sterilization पुरुष नसबंदी 3 Pills गोळ्या 4 IUD or CoPPer T आय यू डी किंवा कॉपर टी/ तांबी 5 PPIUD पी पी आय यू डी/ प्रसुतिपच्छात तांबी 6 Injectable इंजेक्शन 7 Male condom or Nirodh पुरुष कोन्डोम किंवा निरोध 8 Female condom स्त्री कोन्डोम 11 Emergency contraceptive pill आपत्कालीन गर्भनिरोधक गोळ्या AMOUNT OF PAYMENT RECEIVED IN Rs. _____ मिळालेली रक्कम (रु) _____	
2.43	Has this haPPened in the past 3 months? गेल्या ३ महिन्यांत असे घडले आहे का?	1 Yes हो 2 No नाही	
2.44	In the last 6 months, has a healthcare provider made you feel badly about not wanting to have any more children?	1 Yes हो 2 No नाही	

	मागील 6 महिन्यात, कधी कोणत्या आरोग्य सेवा दात्याने तुम्हास आणखी मूल होवू न देण्याच्या इच्छेबद्दल वाईट वाटू दिले आहे का?		
2.45	In the last 6 months has a healthcare provider made you feel pressure about using a modern family planning method such as: pill, condom, IUD, injectable, sterilization, or emergency contraceptive pill? मागील 6 महिन्यात, आधुनिक कुटुंब नियोजन पद्धती जसे गोळ्या, कन्डोम, तांबी, इंजेक्शन, नसबंदी, किंवा आपत्कालीन गर्भनिरोधक गोळ्या यांच्या वापरण्याबाबत कधी आरोग्य सेवा दात्याने तुमच्यावर दबाव आणला आहे का?	1 Yes हो 2 No नाही	
2.46	In the last 6 months has a healthcare provider made you feel badly about NOT using a FAMILY PLANNING method? मागील 6 महिन्यात, कधी कोणत्या आरोग्य सेवा दात्याने तुम्हास कुटुंब नियोजन पद्धत न वापरल्याबद्दल वाईट वाटू दिले आहे का?	1 Yes हो 2 No नाही	
2.47	In the last 6 months, has a healthcare provider refused to provide you or advised you against a family planning method? मागील 6 महिन्यात, सेवा दात्याने कधी कुटुंब नियोजन पद्धत देण्यास नकार दिला अथवा कुटुंब नियोजन पद्धतीविरोधात सल्ला दिला आहे का?	1 Yes हो 2 No नाही	
2.48	Did you see an FAMILY PLANNING provider in the last 6 months? कुटुंब नियोजन सेवा दात्यांना तुम्ही गेल्या 6 महिन्यांत भेटला आहात का?	1 Yes हो 2 No नाही	If no, skip to 3.1
2.49	Please rate the health care provider you saw most recently/last saw or met for family planning with respect to the following qualities: कृपया, अगदी हल्ली भेटलेल्या / शेवटचे पाहिलेल्या कुटुंब नियोजन सेवा दात्याचे पुढील गुणधर्मांच्या आधारे गुणांकन करा Respecting me as a person माणूस म्हणून मला दिलेला मान	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम	
2.50	Showing care and compassion माझ्याबद्दल दाखवलेली काळजी किंवा सद्भावना दाखवल्याबद्दल	1 Poor वाईट 2 Fair ठीक	

		3 Good छान
		4 Very Good फार छान
		5 Excellent उत्तम
2.51	Letting me say what mattered to me about my birth control method संतती नियमन पद्धतीबद्दल माझे काय म्हणणे आहे ते ऐकून घेतल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.52	Giving me an opportunity to ask questions मला प्रश्न विचारण्याची संधी दिल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.53	Taking my preference about my birth control seriously संतती नियमन पद्धतीबद्दल माझे प्राधान्य / आवड गांभीर्याने घेतल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.54	Considering my personal situation when advising me about family planning कुटुंब नियोजनाबद्दल सुचवताना माझ्या परिस्थितीचा विचार केल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.55	Working out a plan for my birth control with me माझ्याबरोबर संतती नियमनाचा आराखडा / योजना बनवण्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.56	Giving me enough information to make the best decision about my birth control method मला संतती नियमन पद्धतीबद्दल उत्तम निर्णय घेण्यासाठी पुरेशी सर्व माहिती देण्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.57	Telling me how to take or use my birth control method most effectively संतती नियमन पद्धत प्रभावीपणे कशी घ्यावी आणि वापरावी ह्याबद्दल मला सांगितल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
2.58	Telling me the side effects and benefits of the birth control method I chose मी निवडलेल्या संतती नियमन पद्धतीचे परिणाम आणि फायदे सांगितल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान

		5 Excellent उत्तम
2.59	Answering all my questions माझ्या सर्व प्रश्नांची उत्तरे दिल्याबद्दल	1 Poor वाईट 2 Fair ठीक 3 Good छान 4 Very Good फार छान 5 Excellent उत्तम
	How much do you agree or disagree with the following statements: तुम्ही खालील विधानांशी किती सहमत किंवा असहमत आहात	
2.60	During the contraception consultation, I was able to give my opinion about what I needed. गर्भनिरोधकांच्या सल्ल्या दरम्यान, मला कशाची गरज आहे याबद्दल माझे मत देण्यास मी सक्षम होते.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.61	I received complete information about my options for contraceptive methods. माझ्या पर्यायांबद्दल व गर्भनिरोधक पद्धतीबाबत मला पूर्ण माहिती मिळाली	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.62	The provider knew how to explain contraception clearly. गर्भनिरोधक स्पष्टपणे कसे स्पष्ट करावे हे प्रदात्यास माहित होते.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.63	I had the opportunity to participate in the selection of a method. मला एका पद्धतीच्या निवडीमध्ये भाग घेण्याची संधी मिळाली.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.64	I received information about how to protect myself from sexually transmitted infections. लैंगिक संबंधातून पसरणारे रोगापासून पासून कसे रक्षण करावे याबद्दल मला माहिती मिळाली	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.65	I received information about what to do if a method fails (e.g., broken condom, forget a pill, feel an IUD is poorly placed). कोणतीही पद्धत अयशस्वी झाल्यास काय करावे याबद्दल मला माहिती मिळाली (उदा. तुटलेला कंडोम, एक गोळी विसरणे, तांबी योग्य जागेवर बसविली नाही असे वाटणे).	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.66	I could understand how my body might react to using contraception. गर्भनिरोधक वापरल्यानंतर माझे शरीर काय प्रतिक्रिया देऊ शकते हे मला समजू शकते.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत

2.67	I could understand how to use the method(s) we talked about during the consultation. आम्ही सल्लामसलत दरम्यान ज्या पद्धतीविषयी बोललो त्या कशा वापरायच्या हे मला समजू शकले.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.68	I received information about what to do if I wanted to stop using a method. मला एखादी पद्धत वापरणे थांबवायचे असेल तर काय करावे याबद्दल माहिती मिळाली.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.69	The provider explained to me what to do if I had a reaction to a method (e.g., allergies, nausea, pains, menstrual changes). एखादी पद्धत वापरानंतर ((उदा. ऍलर्जी, मळमळ, वेदना, मासिक पाळीत होणारे बदल) तर काय करावे याबाबत प्रदात्याने मला समजावून सांगितले.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.70	I felt the information I shared with the provider was going to stay between us. प्रदात्यासह मी सामायिक केलेली माहिती आमच्यातच राहिली आहे असे मला वाटले.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.71	The provider gave me the time I needed to consider the contraceptive options we discussed. मला वाटले की आरोग्य सेवा प्रदात्यास गर्भनिरोधक पद्धतींबद्दल पुरेसे ज्ञान आहे.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.72	The provider was friendly during the contraception consultation. गर्भनिरोधक सल्लामसलत दरम्यान प्रदाता अनुकूल होता.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.73	I felt the health care provider had sufficient knowledge about contraceptive methods. आम्ही चर्चा केलेल्या गर्भनिरोधक पर्यायांचा विचार करण्यासाठी प्रदात्याने मला आवश्यक वेळ दिला.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत
2.74	The provider showed interest in my health while we talked about contraception. आम्ही गर्भनिरोधकाबद्दल बोलताना प्रदात्याने माझ्या आरोग्याबद्दल रस दर्शविला.	4 Completely Agree पूर्णपणे सहमत 3 Agree सहमत 2 Disagree असहमत 1 Completely Disagree पूर्णपणे असहमत

- 2.75 The provider was interested in my opinions.
प्रदात्याला माझ्या मतांमध्ये रस होता.
- 4 Completely Agree पूर्णपणे सहमत
3 Agree सहमत
2 Disagree असहमत
1 Completely Disagree पूर्णपणे असहमत
- 2.76 I felt listened to by the provider.
प्रदात्याने माझे म्हणणे ऐकून घेतले असे मला वाटले.
- 4 Completely Agree पूर्णपणे सहमत
3 Agree सहमत
2 Disagree असहमत
1 Completely Disagree पूर्णपणे असहमत
- Would you say yes, yes with doubts, no with doubts or no to the following statements:
आपण खालील प्रश्नांना होय, काही प्रश्नांसहित होय, काही प्रश्नांसहित नाही किंवा नाही असे म्हणाल काय?
- 2.77 The provider pressured me to use the method they wanted me to use.
प्रदात्याने त्यांना पाहिजे असलेली पद्धत वापरण्यासाठी माझ्यावर दबाव आणला.
1. Yes होय,
2. Yes with doubts काही शंकांसहित होय
3. No with doubts काही शंकांसहित नाही
4. No नाही
99. Not applicable लागू नाही
- 2.78 I felt the provider treated me poorly because they tend to judge people.
मला वाटले की प्रदात्याने माझ्याशी वाईट वागणूक दिली कारण ते लोकांचा न्याय करतात.
1. Yes होय,
2. Yes with doubts काही शंकांसहित होय
3. No with doubts काही शंकांसहित नाही
4. No नाही
99. Not applicable लागू नाही
- 2.79 I felt scolded because of my age.
माझ्या वयामुळे त्यांनी मला फटकारले असे वाटले.
1. Yes होय,
2. Yes with doubts काही शंकांसहित होय
3. No with doubts काही शंकांसहित नाही
4. No नाही
99. Not applicable लागू नाही
- 2.80 The provider made me feel uncomfortable because of my sex life (e.g., when I started having sex, my sexual preferences, the number of partners I have, the number of children I have).
माझ्या लैंगिक जीवनामुळे प्रदात्याने मला अस्वस्थ केले (उदा. जेव्हा मी समागम करणे सुरू केले, तेव्हा माझी लैंगिक पसंती, माझ्या भागीदारांची संख्या, माझ्या मुलाची संख्या इ.).
1. Yes होय,
2. Yes with doubts काही शंकांसहित होय
3. No with doubts काही शंकांसहित नाही
4. No नाही
99. Not applicable लागू नाही
- 2.81 The provider looked at me or touched me in a way that made me feel uncomfortable.
प्रदात्याने माझ्याकडे पाहिले किंवा मला अशा प्रकारे स्पर्श केला ज्यामुळे मला अस्वस्थ वाटले.
1. Yes होय
2. Yes with doubts काही शंकांसहित होय
3. No with doubts काही शंकांसहित नाही
4. No नाही
99. Not applicable लागू नाही
- 2.82 Which aspect(s) of IUD use did you discuss with the family planning provider?
- 1 How well it works
2 How long it can be used
3 Side effects of IUD use

- 4 The process of insertion
- 5 where and how to have an IUD removed
- 6 None, I never discussed IUD use with a provider

Section 3: New Pregnancy विभाग 3 : नवीन गर्भधारणा

- Ask only if 1.4 (1) Yes [new pregnancy]**
- 3.1a In the month that you became pregnant:
- b In terms of becoming a mother (first time or again) I feel that my pregnancy haPPened at the:
- c Just before I became pregnant
- D Just before I became pregnant
- E Before I became pregnant
- F Before you became pregnant did you do anything to improve your health in preparation for pregnancy?
- 3.2 Did you see anyone for antenatal care for this pregnancy?
शेवटची प्रसूती: ह्या प्रसूतीच्या वेळी तुम्ही प्रसूतीपूर्व काळजीसाठी कोणाला भेटला होतात का?
- 3.3 Whom did you see? Anyone else?

Choose the statement that most aPPlies to you

- 1) I/we were not using contraception
 - 2) I/we were using contraception but not on every occasion
 - 3) I/we always used contraception but knew that the method failed at least once (i.e. broke etc)
 - 4) I/we always used contraception
 - 1) Right time
 - 2) My intentions kept changing
 - 3) Wrong time
 - 1) I intended to get pregnant
 - 2) OK, but not quite right time
 - 3) I did not intend to get pregnant
 - 1) I wanted to have a baby
 - 2) I had mixed feeling about having a baby
 - 3) I did not want to have a baby
 - 1) My partner and I agreed we would like me to become pregnant
 - 2) My partner and I discussed having children together but hadn't agreed for me to get pregnant
 - 3) We never discussed having children together
- Check all that aPPly:
- 1) Took folic acid
 - 2) StoPPed or cut down on smoking
 - 3) StoPPed or cut down drinking alcohol
 - 4) Ate more healthily
 - 5) Sought medical /health advice
 - 6) Took some other action (describe)_____
 - 7) I did not do any of the above before pregnancy

1 Yes हो

2 No नाही

If no, skip to 4.1

PROBE TO IDENTIFY EACH TYPE OF PERSON. RECORD ALL MENTIONED SELECT ALL THAT APPLY LAST BIRTH ONLY

शेवटची प्रसूती: तुम्ही कोणाला भेटले ?

HEALTH PERSONNEL आरोग्य सेवादाता

1 Doctor डॉक्टर

2 ANM/Nurse-Midwife/LHV नर्स/ परिचारिका/ स्थानिक आरोग्य सेवक

3 Other Health Personnel इतर सेवादाते

OTHER PERSON इतर व्यक्ती

इतर कोणी?

प्रत्येक पद्धतीच्याव्यक्तीबद्दल खासकरून विचारा

सांगितलेले सर्व नमूद करा

लागू असलेले सर्व पर्याय निवडा

केवळ शेवटच्या प्रसूतीबद्दल

4 Dai/Traditional Birth Attendant दाई/ पारंपरिक
पद्धतीने प्रसूती करणारी सुईण

5 Community/Village Health Worker सामाजिक
/ ग्रामीण आरोग्य कार्यकर्ता

6 Anganwadi/ICDS Worker अंगणवाडी / आय सी डी
स कार्यकर्ता

7 ASHA आशा

98 Other [Specify] इतर (स्पष्ट करा)

Section 4. FEASIBILITY, ACCEPTABILITY and APPROPRIATENESS OF LINKED CARE

विभाग ४: संभाव्यता, योग्यता आणि दुवा साधलेल्या काळजीची मंजूरी

No.	Question	Response Options	Skip
	Family planning counseling and methods are not typically provided at the same time as infant vaccination services. Researchers are considering whether healthcare providers could provide contraception directly in the community center at the same time as infant vaccination visits without requiring a visit to the clinic. This could include condoms, pills, injectable contraception and IUDs. <i>Regarding the linked provision of family planning during infant vaccination, this type of linked care:</i> कुटुंब नियोजन समुपदेशन आणि पद्धती विशेषतः अर्भक लसीकरण सेवांच्या वेळेस पुरविल्या जात नाहीत. मुख्य दवाखान्याला भेट न देता शिशु लसीकरणास भेट देण्याइतपतच आरोग्य सेवा प्रदाता थेट सामुदायिक केंद्रात गर्भनिरोधक प्रदान करू शकतात का याचा विचार संशोधक करीत आहेत. यात कंडोम, गोळ्या, इंजेक्टेबल गर्भनिरोधक आणि कॉपर टी समाविष्ट असू शकतात. शिशु लसीकरण दरम्यान कुटुंब नियोजनाच्या जोडलेल्या तरतुदींविषयी, या प्रकारची जोडलेली काळजी:		
4.1a	Linked family planning and infant vaccination care is a model that meets my approval जोडलेले कुटुंब नियोजन आणि शिशु लसीकरण काळजी हे एक आदर्श आहे जे माझी मान्यता पूर्ण करते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree	
4.1b	Linked family planning and infant vaccination care is a model that is appealing to me जोडलेले कुटुंब नियोजन आणि शिशु लसीकरण काळजी हे एक आदर्श आहे जे मला आकर्षित करते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree	
4.1c	I like the model of linked family planning and infant vaccination care जोडलेले कुटुंब नियोजन आणि शिशु लसीकरण काळजी हे एक आदर्श आहे जे मला आवडते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree	
4.1d	I welcome linked family planning and infant vaccination care in my community मी माझ्या समुदायामध्ये जोडलेले कुटुंब नियोजन आणि शिशु लसीकरण काळजी चे स्वागत करतो	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree	
4.2a	Linked family planning and infant vaccination care seems fitting to my community जोडलेली कुटुंब नियोजन आणि नवजात लसीकरण काळजी माझ्या समुदायाला शोभणारी वाटत आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree	
4.2b	Linked family planning and infant vaccination care seems suitable to my community दुवा साधलेल्या कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समुदायासाठी योग्य आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree	
4.2c	Linked family planning and infant vaccination care seems applicable to my community	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree	

	जोडलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समुदायाला लागू आहे	5) Completely disagree
4.2d	Linked family planning and infant vaccination care seems like a good match for my community जोडलेली कौटुंबिक नियोजन आणि नवजात लसीकरण काळजी माझ्या समुदायासाठी एक चांगली जुळवाजुळव दिसते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
4.3a	Linked family planning and infant vaccination care seems implementable in my community माझ्या कुटुंबात दुवा साधलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी अंमलबजावणी योग्य दिसते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
4.3b	Linked family planning and infant vaccination care seems possible in my community माझ्या कुटुंबात दुवा साधलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी शक्य आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
4.3c	Linked family planning and infant vaccination care seems doable in my community जोडलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समाजात घेणे शक्य आहे	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree
4.3d	Linked family planning and infant vaccination care seems easy to use for women in my community जोडलेली कुटुंब नियोजन आणि बाल लसीकरण काळजी माझ्या समाजातील महिलांसाठी वापरणे सोपे वाटते	1) Completely agree 2) Agree 3) Neither agree nor disagree 4) Disagree 5) Completely disagree

Section 5. GENDER-BASED ABUSE/CONTROL and IPV

विभाग ५: लिंग-आधारित गैरवापर/नियंत्रण आणि जोडीदारांतर्गत हिंसा

No.	Question	Response Options	Skip
5.1	Are you usually allowed to go to the following places alone, only with someone else, or not at all? To the market? तुम्हाला पुढील ठिकाणी एकटीस , फक्त कोणाबरोबर तरी जाण्याची परवानगी आहे का अजिबात नाही? बाजारात जाणे ? CHOOSE ONE एक निवडा	1 Alone एकटीस 2 With someone else only फक्त कोणाबरोबर तरी 3 Not at all अजिबात नाही	
5.2	To the health facility? आरोग्य सेवेसाठी जाणे ?	1 Alone एकटीस 2 With someone else only फक्त कोणाबरोबर तरी	

CHOOSE ONE [एक निवडा]		3 Not at all अजिबात नाही
5.3	To places outside this (village/community)? (गावाबाहेरील/ वस्तीबाहेरील) ठिकाणास जाणे? CHOOSE ONE [एक निवडा]	1 Alone एकटीस 2 With someone else only फक्त कोणाबरोबर तरी 3 Not at all अजिबात नाही
5.4	Now if you will permit me, I need to ask some more questions about your relationship with your (last) husband. In the last 12 months, आता जर आपण मला परवानगी दिली तर मला आपल्या (शेवटच्या) पतीशी असलेल्या संबंधाबद्दल मला आणखी काही प्रश्न विचारण्याची आवश्यकता आहे. गेल्या १२ महिन्यांत, Had your husband slaPPed you? तुमच्या पतीने तुम्हाला कधी थोबाडीत मारले आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.5	Has your husband twisted your arm or pulled your hair? तुमच्या पतीने तुमचा हात कधी मुरगळला आहे किंवा तुमचे केस ओढले आहेत का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.6	Has your husband pushed you, shook you or thrown something at you? तुमच्या पतीने तुम्हाला ढकलले आहे, हादरवले आहे किंवा तुमच्या कडे काही फेकले आहे?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.7	Has your husband kicked you, dragged you or beat you up? तुमच्या पतीने तुम्हाला लाथ मारली आहे , तुम्हाला फरफटत नेले आहे किंवा तुम्हाला मारझोड केली आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.8	Has your husband choked you or tried to burn you on purpose? तुमच्या पतीने तुमचा हेतुपूर्वक गळा दाबण्याचा किंवा तुम्हाला जाळण्याचा प्रयत्न केला आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.9	Has your husband threatened to attack you with a knife, gun or any other weapon? तुमच्या पतीने तुम्हाला चाकूने, बंदूकीने किंवा कोणत्याही हत्याराने हल्ला करण्याची धमकी दिली आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.10	Has your husband physically forced you to have sexual intercourse with him? तुमच्या पतीने तुमच्याशी कधी बळजबरीने शारीरिक संबंध ठेवले आहेत काय?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही

		4 Never in our relationship आमच्या नात्यात कधीच नाही
5.11	Has your husband forced you to perform any sexual acts when you did not want to? तुमच्या पतीने तुम्हाला तुमची इच्छा नसताना कोणताही लैंगिक प्रकार करण्यास जबरदस्ती केली आहे का?	1 Often नेहेमीच 2 Sometimes कधी कधी 3 Not at all अजिबात नाही 4 Never in our relationship आमच्या नात्यात कधीच नाही
5.12	In the past 12 months, have you hit, slaPPed, kicked or done anything else to physically hurt your husband at times when he was not already beating or physically hurting you? गेल्या १२ महिन्यांत तुम्ही तुमच्या पतीला तो तुम्हाला मारत नसताना, किंवा शारीरिक इजा करीत नसतानाही तुम्ही त्यांना मारले आहे, थोबडवले आहे, लाथ मारली आहे, किंवा त्याला शारीरिक इजा केली आहे का?	1 Yes हो 2 No नाही

Section 6. REPRODUCTIVE AUTONOMY पुनरुत्पादन संबंधीची स्वायत्तता

These questions ask about who has the most say in different types of decisions. “Most say” means if there was a disagreement, the person who would have final say. If you have not had to make any of the following decisions, please think about who would have the most say in the decision.

No.	Question	Response Options	Skip
6.1	Who has the MOST say about whether you use a method to prevent pregnancy? तुम्ही गर्भधारणा रोखण्यासाठी पद्धत वापरली की नाही याबद्दल बहुतेक कोण ठरविते ?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
6.2	Who has the MOST say about whether you use a method to prevent pregnancy? तुम्ही गर्भधारणा रोखण्यासाठी कोणतीही पद्धत वापरली की नाही याबद्दल बहुतेक कोण ठरविते?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	
6.3	Who has the MOST say about which method you would use to prevent pregnancy? गर्भधारणा रोखण्यासाठी तुम्ही पद्धतीचा वापर कराल याबद्दल बहुतेक ठरविते ?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me	

6.4	Who has the MOST say about when you have a baby in your life? तुमच्या आयुष्यात तुम्हाला मुल असताना सर्वात जास्त कुणी ठरविले?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me
6.5	If you became pregnant but it was unplanned, who would have the MOST say about whether you would raise the child, seek adoptive parents, or have an abortion? तुम्ही गर्भवती झाल्यास परंतु ती नियोजनबद्ध राहिली नसेल, तर तुम्ही तुमच्या मुलाचे संगोपन कराल, दत्तक पालकाचा शोध घ्याल की गर्भपात कराल याबद्दल बहुतेक कोण ठरवू शकेल?	1 My Husband (or someone else such as mother-in-law) 2 Both me and my Husband (or someone else such as mother-in-law) 3 Me
6.6	My husband has stoPPed me from using a method to prevent pregnancy when I wanted to use one. मला गर्भधारणा रोखण्यासाठी पद्धत वापरायची असताना, माझ्या पतीने मला पद्धत वापरण्यास थांबविले आहे.	0 strongly agree 1 agree 2 disagree 3 strongly disagree
6.7	My husband has messed with or made it difficult to use a method to prevent pregnancy when I wanted to use one. मला एखादी पद्धत वापरायची होती तेव्हा माझ्या पतीने गोंधळ केला किंवा गर्भधारणा रोखण्यासाठी मला एखादी पद्धत वापरायची असल्यास ती वापरणे कठीण केले होते.	0 strongly agree 1 agree 2 disagree 3 strongly disagree
6.8	My husband has made me use a method to prevent pregnancy when I did not want to use one. जेव्हा मला एखादी पद्धत वापरायची नव्हती तेव्हा माझ्या पतीने मला गर्भधारणा रोखण्यासाठी पद्धत वापरण्यास भाग पाडले.	0 strongly agree 1 agree 2 disagree 3 strongly disagree
6.9	If I wanted to use a method to prevent pregnancy my husband would stop me. जर मला गर्भधारणा रोखण्यासाठी एखादी पद्धत वापरायची असेल तर माझा नवरा मला थांबवू शकेल.	0 strongly agree 1 agree 2 disagree 3 strongly disagree
6.10	My husband has pressured me to become pregnant. माझ्या पतीने माझ्यावर गर्भवती होण्यासाठी दबाव आणला आहे.	0 strongly agree 1 agree 2 disagree 3 strongly disagree
6.11	My husband would suPPort me if I wanted to use a method to prevent pregnancy. जर मला गर्भधारणा रोखण्यासाठी एखादी पद्धत वापरायची असेल तर माझे पती मला साथ देतील.	0 strongly agree 1 agree 2 disagree 3 strongly disagree
6.12	It is easy to talk about sex with my husband. माझ्या पतीशी लैंगिक संबंधाबद्दल बोलणे सोपे आहे.	0 strongly agree 1 agree 2 disagree 3 strongly disagree

- | | | |
|------|--|--|
| 6.13 | If I didn't want to have sex I could tell my husband. मला लैंगिक संबंध नको असल्यास मी माझ्या नवऱ्याला सांगू शकते. | 0 strongly agree
1 agree
2 disagree
3 strongly disagree |
| 6.14 | If I was worried about being pregnant or not being pregnant I could talk to my husband about it. जर मी गर्भवती आहे की नाही याबद्दल काळजी वाटत असेल तर मी गर्भवती असल्याबद्दल माझ्या पतीशी बोलू शकेन. | 0 strongly agree
1 agree
2 disagree
3 strongly disagree |
| 6.15 | If I really did not want to become pregnant I could get my husband to agree with me. जर मी खरोखरच गर्भवती होऊ इच्छित नसेल तर मी माझ्या पतीला माझ्याशी सहमत होण्यास तयार करेल. | 0 strongly agree
1 agree
2 disagree
3 strongly disagree |

APPENDIX 3 ICMR-NATIONAL INSTITUTE FOR RESEARCH IN REPRODUCTIVE HEALTH

Project Title: Increasing access to postpartum contraception by linking family planning and infant vaccination services

In-depth interview guideline WOMEN POST-INTERVENTION

Participant ID		Provider ID	
Participant Age		Village	

***Note:** Thank you for participating in the evaluation of PIVOT. We are interviewing women who participated in the PIVOT study to get their opinions after the pilot of the intervention, as well as your ideas on how to improve the program.*

We appreciate the time you are putting into this process and look forward to sharing the evaluation final products with you and/or your organization. Kindly note that, the information you provide will not be shared and will be kept confidential.

Do you have any questions before we begin? ...Thank you!

FAMILY PLANNING in your area

- Can you let us know your thoughts about the PIVOT program?
- What have you liked most about the Program? (probe: specific topic areas discussed, counselling sessions, convenience)
- What have you liked least about it?
- How has the program been helpful to you and your family? Why or why not?
- Is provision of family planning during infant vaccination visits at village health and nutrition day method acceptable to women like you in your community? (by this we mean agreeable, palatable, or satisfactory)
- Do you think this linked model of care is appropriate for women like you in this community? (by this we mean a good fit for the needs of the community) Probe: For all members of the community or only certain members?
- Do you think this linked model of care is feasible for women like you in this community? (by this we mean can the program be successfully used or implemented in this setting)
- Are there other places in the healthcare system where it might be feasible and acceptable to offer contraception for women who have recently had a baby?
- What could be role of men in family planning after delivery of a baby? How do men support or inhibit women from accepting family planning after a delivery? What are their roles? How can programs help them?

- What could be role of mothers-in-law in family planning for a couple after delivery of a baby? How do mothers-in-laws (or other family members that live in the home) support or inhibit women from accepting family planning after a delivery?
- The family planning program in India is focused on quality of counselling and person centered care. How do you think the current service is doing on this? Do you have any concerns about the way providers interact with women or give counselling? How do you think they can improve? Are there examples from areas of quality that you can describe?
- How have your beliefs changed on making family planning related decisions since participating in PIVOT? If so, how have your beliefs changed? (Probe: Who should make decisions related to family size, when to get pregnant, use of family planning methods etc.)
- Many families have a preference to have sons. What do you think about this? Has the program affected how you think about this? If so, in what ways? Has the program affected your decisions related to having sons? Why or why not?

Program improvement

- How do you think we can get this approach into your area/district? How could we implement this model in ways that will help your community?
- What are some of your suggestions about how we can improve the program? (Probes: timing of method delivery, method mix availability, program counselling materials)

प्रकल्पाचे नाव : कुटुंब नियोजन आणि अर्भक लसीकरण सेवांचा संबंध जोडून प्रसूतिपूर्व गर्भनिरोधक साधनाचा वापर वाढविणे

सखोल मुलाखतीच्या मार्गदर्शक सूचना: स्त्री सहभागीदाराची हस्तक्षेप पश्चात सखोल मुलाखत

सहभागीचा ओळख क्रमांक		प्रदात्याचा ओळख क्रमांक	
सहभागीदाराचे वय		गावाचे नाव	

टीप: मुख्य हस्तक्षेप मूल्यांकनात भाग घेतल्याबद्दल धन्यवाद. हस्तक्षेपाच्या मार्गदर्शक कार्यक्रमानंतर तुमची मते जाणून घेण्यासाठी तसेच कार्यक्रमात सुधारणा कशी करावी यावरील तुमच्या कल्पनांबद्दल आम्ही महिलांची मुलाखत घेत आहोत.

तुम्ही या प्रक्रियेमध्ये देत असलेल्या वेळेचे आम्ही कौतुक करतो आणि मूल्यांकन तुम्ही आणि/किंवा तुमची संस्था यांच्याबरोबर अंतिम निष्कर्ष सामायिक करण्यास उत्सुक आहोत. कृपया लक्षात ठेवा की, तुम्ही प्रदान केलेली माहिती सामायिक केली जाणार नाही आणि ती गोपनीय ठेवली जाईल.

आम्ही मुलाखत प्रारंभ करण्यापूर्वी तुमच्याकडे काही प्रश्न आहेत काय ? ...धन्यवाद!

तुमच्या विभागातील कुटुंब नियोजन:

- मुख्य कार्यक्रमाबद्दल तुमचे विचार आम्हाला सांगू शकता?
- या कार्यक्रमाबद्दल तुम्हाला सर्वात जास्त काय आवडले आहे? (चौकशी: विशिष्ट विषयावर चर्चा केलेली क्षेत्रे, समुपदेशन सत्रे, सोयीस्कर)
- तुम्हाला या कार्यक्रमाबद्दल कमीतकमी काय आवडले आहे?
- कार्यक्रम आपल्यासाठी आणि आपल्या कुटुंबासाठी कसा उपयुक्त ठरला आहे? का किंवा का नाही?
- ग्रामीण आरोग्य आणि पोषण दिवस पध्दतीवर शिशु लसी भेटीदरम्यान कुटुंब नियोजनाची तरतूद आपल्या समाजात मान्य आहे काय? (याचा अर्थ असा आहे की तुम्ही सहमत, मनाला रुचणारे किंवा समाधानकारक आहात)
- या समुदायामध्ये तुमच्यासारख्या स्त्रियांसाठी गुणवत्तापूर्वक जोडलेले हे नमुना(प्रतिकृती) योग्य आहे असे तुम्हाला वाटते का? (याचा अर्थ तुमच्यासाठी समुदायाच्या गरजेसाठी एक योग्य तंदुरुस्त आहे) चौकशी: समाजातील सर्व सदस्यांसाठी किंवा केवळ काही विशिष्ट सदस्यांसाठी?
- तुम्हाला असे वाटते की यशस्वीरित्या गुणवत्तापूर्वक जोडलेले हे मॉडेल या समाजात व्यवहार्य आहे? (याचा अर्थ असा आहे की हा कार्यक्रम अशा परिस्थितीत यशस्वीरित्या वापरला तर अंमलात येऊ शकतो).
- आरोग्य सेवा प्रणालीमध्ये अशी काही ठिकाणे आहेत का जेथे अलिकडेच बाळंत झालेल्या स्त्रियांना गर्भनिरोधक देणे योग्य व व्यवहार्य आहे?
- बाळाच्या जन्मानंतर कुटुंब नियोजनात पुरुषांची भूमिका काय असू शकते? प्रसूतिनंतर कुटुंब नियोजन स्वीकारण्यापासून पुरुष स्त्रियांना समर्थन कसे देतात किंवा प्रतिबंधित कसे करतात? त्यांच्या भूमिका काय आहेत? कार्यक्रम त्यांना कशी मदत करू शकतो?
- बाळाच्या जन्मानंतर जोडप्यासाठी कुटुंब नियोजन करण्यात सासू-सासरे यांची काय भूमिका असू शकते? प्रसूतीनंतर सासू (किंवा घरात राहणारे कुटुंबातील इतर सदस्य) कुटुंब नियोजन स्वीकारण्यास महिलांना कसे समर्थन देतात किंवा प्रतिबंधित करतात?
- भारतातील कुटुंब नियोजन कार्यक्रम समुपदेशनाची गुणवत्ता आणि व्यक्तीकेंद्रित काळजी यावर आधारित (केंद्रित) आहे. आपणास असे वाटते की सध्याची सेवा यावर काम करीत आहे? प्रदात्यांद्वारे स्त्रियांशी संवाद कसा साधला जातो किंवा समुपदेशन कश्याप्रकारे देतात

याबद्दल काही चिंता आहे का? आपणास असे कसे वाटते की ते सुधारू शकतात? अशा गुणवत्तेच्या क्षेत्रातील काही उदाहरणे आहेत ज्याचे तुम्ही वर्णन करू शकता?

- मुख्य कार्यक्रमात भाग घेतल्यापासून कुटुंब नियोजन संबंधित निर्णय घेण्यावर तुमचा विश्वास कसा बदलला आहे? असल्यास, आपल्या श्रद्धा कशा बदलल्या आहेत? (चौकशी: कुटुंबाच्या आकाराशी, गर्भवती कधी व्हावे, कुटुंब नियोजनाच्या पद्धतींचा वापर इत्यादी संबंधित निर्णय कोणी घ्यावेत या बाबतीत.)
- बऱ्याच कुटुंबांमध्ये मुलगा होण्याला प्राधान्य असते. तुमचे याबद्दलचे काय विचार आहेत? तुमच्या विचारावर कार्यक्रमाचा काही परिणाम झाला आहे का? असल्यास, कोणत्या प्रकारे? मुलगा हवाच या तुमच्या निर्णयावर या कार्यक्रमाचा काही परिणाम झाला आहे का? का किंवा का नाही?

कार्यक्रम सुधारणा

- तुमच्या क्षेत्रामध्ये जिल्ह्यात हि पद्धती/तुम्ही कशी प्राप्त करू शकतो याबाबत तुम्हाला काय वाटते? आपल्या समुदायास मदत होईल अशाप्रकारे आपण हि प्रतिकृती कशी अंमलात आणू शकतो?
- या कार्यक्रमांतर्गत आपण कश्याप्रकारे सुधारणा करू शकतो याविषयी तुम्हाला काही सूचना करावयाच्या आहेत का? (विचारा: कुटुंब नियोजन पद्धती वितरण, संमिश्र पद्धती उपलब्धता, कार्यक्रम समुपदेशन साहित्य)

ICMR-NATIONAL INSTITUTE FOR RESEARCH IN REPRODUCTIVE HEALTH

Project Title: Increasing access to postpartum contraception by linking family planning and infant vaccination services

In-depth interview guideline: STAKEHOLDERS/COMMUNITY LEADERS/HEALTH CARE WORKERS (POST-INTERVENTION)

Stakeholder name		Stakeholder designation	
Stakeholder affiliation		Stakeholder location	

Note: *Thank you for participating in the evaluation of PIVOT. We are interviewing key informants to get their opinions after the pilot of the intervention, as well as your ideas on how to improve the program.*

We aPPreciate the time you are putting into this process and look forward to sharing the evaluation final products with you and/or your organization. Kindly note that, the information you provide will not be shared and will be kept confidential.

Do you have any questions before we begin? ...Thank you!

FAMILY PLANNING in your area

- What are the methods mostly preferred in your community for women who have recently had a baby? Why? (probe for injectables- who injects, training received for injecting contraceptives, when, where?-do the women prefer injectables? Why do they prefer- explore incentives) (probe for IUD- who inserts? Where? Any incentives? Role of frontline workers, ASHA workers, institutional deliveries, providers bias). What extent has the PIVOT program helped women in accessing these methods? PROBE: Local delivery, LARC.
- The family planning program in India has historically focused on providing family planning in PHCs and Hospitals. What do you think about providing family planning during an infant vaccination visit at the village health and nutrition day? What do you think are the facilitators of adoption of contraception in this location and co-located with vaccination services? What do you think are the barriers?
- Is provision of family planning during infant vaccination visits at village health and nutrition day method acceptable in your community? (by this we mean agreeable, palatable, or satisfactory)

- Do you think this linked model of care is appropriate for this community? (by this we mean a good fit for the needs of the community) Probe: For all members of the community or only certain members?
- Do you think this linked model of care is feasible in this community? (by this we mean can the program be successfully used or implemented in this setting)
- What could be role of men in family planning after delivery of a baby? How do men support or inhibit women from accepting family planning after a delivery? What are their roles? How can programs help them?
- What could be role of mothers-in-law in family planning for a couple after delivery of a baby? How do mothers-in-laws (or other family members that live in the home) support or inhibit women from accepting family planning after a delivery?

FRONTLINE HEALTHCARE WORKERS AND COMMUNITY STAKEHOLDERS ONLY:

- What are the strengths of the current health system that can help with provision of family planning at village health and nutrition day? How can the health system be more prepared for providing family planning in this location / co-located with these services? What additional resources are needed to support this program? Probe: how does this differ for different types of FAMILY PLANNING: pill, condom, IUD, sterilization. training of providers, support, demand. What else can be done in operationalizing family planning delivery in this setting and co-located with these services? Probe: logistics, admin, time.
- Are there other places in the healthcare system where it might be feasible and acceptable to offer contraception?
- The family planning program in India is focused on quality of counselling and person centered care. How do you think the current service is doing on this? Do you have any concerns about the way providers interact with women or give counselling? How do you think they can improve? Are there examples from areas of quality that you can describe?
- How do you think we can get this approach into your area/district? How could we implement this model in ways that will help your community?
- What are some of your suggestions about how we can improve the program?

FOR HEALTHCARE WORKERS ONLY

- What are some of the major reasons why you think clients were interested in participating in the program? What are the major reasons clients may not have been interested in participating in the program? For ANMs: what extent you feel on this

new work load? Was it too much? How easily you could make this implementing with participants?

प्रकल्पाचे नाव : कुटुंब नियोजन आणि अर्भक लसीकरण सेवांचा संबंध जोडून प्रसूतिपूर्व गर्भनिरोधक साधनाचा वापर वाढविणे

सखोल मुलाखतीच्या मार्गदर्शक सूचना: भागधारक/ समुदाय नेते /आरोग्य कर्मचारी यांची हस्तक्षेप पश्चात सखोल मुलाखत

भागधारकाचे नाव		भागधारकाचे पद	
भागधारकाची सल्लग्नता		भागधारकाचे स्थान	

टीप : मुख्य हस्तक्षेप मूल्यांकनात भाग घेतल्याबद्दल धन्यवाद. हस्तक्षेपाच्या मार्गदर्शक कार्यक्रमानंतर त्यांची मते जाणून घेण्यासाठी तसेच कार्यक्रमात सुधारणा कशी करावी यावरील तुमच्या कल्पनांबद्दल आम्ही मुलाखत घेत आहोत.

तुम्ही या प्रक्रियेमध्ये देत असलेल्या वेळेचे आम्ही कौतुक करतो आणि मूल्यांकन तुम्ही आणि/किंवा तुमची संस्था यांच्याबरोबर अंतिम निष्कर्ष सामायिक करण्यास उत्सुक आहोत. कृपया लक्षात ठेवा की, तुम्ही प्रदान केलेली माहिती सामायिक केली जाणार नाही आणि ती गोपनीय ठेवली जाईल.

आम्ही मुलाखत प्रारंभ करण्यापूर्वी तुमच्याकडे काही प्रश्न आहेत काय ? ...धन्यवाद!

तुमच्या विभागातील कुटुंब नियोजन:

- अलीकडेच मूल झालेल्या महिलांसाठी तुमच्या समाजात कोणत्या कुटुंब नियोजन पद्धतीना प्राधान्य देत आहात? का? (इंजेक्शनबद्दल विचारा- इंजेक्शनस कोण देते, गर्भ निरोधक इंजेक्शन देण्याचे प्रशिक्षण मिळाले काय ? कधी? कुठे? महिला कधी इंजेक्टेबलला प्राधान्य देतात का? प्राधान्य का देतात -प्रवृत्त करणाऱ्या बाबींच शोध घ्या ?) (आययूडी (कॉपर टी) बाबत चौकशी करा- कोण समाविष्ट करते? कोठे? प्रोत्साहन? अग्रभागी कामगारांची भूमिका, आशा कामगार, संस्थात्मक बाळंतपण, प्रदाते पूर्वाग्रह). मुख्य हस्तक्षेप कार्यक्रमाने महिलांना या पद्धतींमध्ये प्रवेश करण्यास किती प्रमाणात मदत केली आहे? प्रोब: स्थानिक पातळीवर.
- भारतातील कुटुंब नियोजन कार्यक्रमाने ऐतिहासिकदृष्ट्या प्राथमिक आरोग्य केंद्र आणि रुग्णालयांमध्ये कुटुंब नियोजन सुविधा देण्यावर लक्ष केंद्रित केले आहे. गावोगावी आरोग्य व पोषण दिवसाच्या बाल-लसीकरणाच्या भेटी दरम्यान कुटुंब नियोजन सेवा सुविधा देण्याबद्दल आपले काय मत आहे? आपणास असे वाटते की या ठिकाणी गर्भनिरोधक स्विकारणारे आणि लसीकरण सेवा सहाय्यक (मदतनीस) याबाबत तुमचे मत काय आहे? यामध्ये कोणते अडथळे आहेत असे तुम्हाला वाटते?
- ग्रामीण आरोग्य आणि पोषण दिवस पध्दतीवर शिशु लसी भेटीदरम्यान कुटुंब नियोजनाची तरतूद आपल्या समाजात मान्य आहे काय? (याचा अर्थ असा आहे की तुम्ही सहमत, मनाला रुचणारे किंवा समाधानकारक आहात)
- तुम्हाला असे वाटते की यशस्वीरीत्या गुणवत्तापूर्वक जोडलेले हे मॉडेल या समुदायासाठी योग्य आहे? (याचा अर्थ आमच्यासाठी समुदायाच्या गरजेसाठी एक योग्य तंदुरुस्त आहे) चौकशी: समाजातील सर्व सदस्यांसाठी किंवा केवळ काही विशिष्ट सदस्यांसाठी?
- तुम्हाला असे वाटते की यशस्वीरीत्या गुणवत्तापूर्वक जोडलेले हे मॉडेल या समाजात व्यवहार्य आहे? (याचा अर्थ असा आहे की हा कार्यक्रम अशा परिस्थितीत यशस्वीरीत्या वापरला तर अंमलात येऊ शकतो).
- बाळाच्या जन्मानंतर कुटुंब नियोजनात पुरुषांची भूमिका काय असू शकते? प्रसूतिनंतर कुटुंब नियोजन स्वीकारण्यापासून पुरुष स्त्रियांना समर्थन कसे देतात किंवा प्रतिबंधित कसे करतात? त्यांच्या भूमिका काय आहेत? कार्यक्रम त्यांना कशी मदत करू शकतो?
- बाळाच्या जन्मानंतर जोडण्यासाठी कुटुंब नियोजन करण्यात सासू-सासरे यांची काय भूमिका असू शकते? प्रसूतीनंतर सासू (किंवा घरात राहणारे कुटुंबातील इतर सदस्य) कुटुंब नियोजन स्वीकारण्यास महिलांना कसे समर्थन देतात किंवा प्रतिबंधित करतात?

अग्रभागी असलेले आरोग्य कर्मचारी व समुदाय भागधारकासाठीच:

- सद्यस्थितीत आरोग्य यंत्रणेत कोणते सामर्थ्य आहे जे ग्रामीण आरोग्य व पोषण या दिवशी कुटुंब नियोजनाची तरतूद करण्यास मदत करू शकते? या सेवांसह/या ठिकाणी कुटुंब नियोजन प्रदान करण्यासाठी आरोग्य यंत्रणा अधिक सज्ज कशी असू शकते? या कार्यक्रमाला समर्थन देण्यासाठी कोणती अतिरिक्त संसाधने आवश्यक आहेत? चौकशी: कुटुंब नियोजनाच्या विविध प्रकारांमध्ये हे कसे वेगळे आहे: गोळी, निरोध, आंतरगर्भाशय साधन (कॉपर टी), नसबंदी. प्रदाते प्रशिक्षण, पुरवठा, मागणी. या सेवेमध्ये कुटुंब नियोजन वितरण कार्यान्वित करण्यासाठी आणि या सेवेसह स्थापित असलेल्या सेवांबाबत आणखी काय करता येईल? शोध: पुरवठा, रसद, प्रशासन, वेळ.
- आरोग्यसेवा यंत्रणेत अशी काही ठिकाणे आहेत का जिथे गर्भनिरोधक देणे शक्य आणि योग्य असेल?
- भारतातील कुटुंब नियोजन कार्यक्रम समुपदेशनाची गुणवत्ता आणि व्यक्तीकेंद्रित काळजी यावर केंद्रित आहे. तुम्हाला असे वाटते की सध्याची सेवा यावर काम करत आहे? प्रदात्यांद्वारे स्त्रियांशी संवाद कसा साधला जातो किंवा समुपदेशन कसे दिले जाते याबद्दल काही चिंता आहे का? तुमच्या मते ते कसे सुधारू शकतात? अशा गुणवत्तेच्या क्षेत्रातील काही उदाहरणे आहेत ज्याचे तुम्ही वर्णन करू शकता?
- तुमच्या क्षेत्रामध्ये/जिल्ह्यात हि पद्धती तुम्ही कशी प्राप्त करू शकतो याबाबत तुम्हाला काय वाटते? आपल्या समुदायास मदत होईल अशाप्रकारे आपण हि प्रतिकृती कशी अंमलात आणू शकतो?
- हा कार्यक्रम सुधारण्याच्या दृष्टीने तुमच्या काही सूचना आहेत काय

केवळ आरोग्य सेवा देणाऱ्या कर्मचाऱ्यांसाठी

ग्राहकांना (कुटुंब नियोजन पद्धतींचा वापरणाऱ्यांना) कार्यक्रमात भाग घेण्यात रस होता असे तुम्हाला वाटणारी काही प्रमुख कारणे कोणती आहेत? ग्राहकांना या कार्यक्रमात भाग घेण्यास आवड नसण्याची प्रमुख कारणे कोणती आहेत? परिचारिकेसाठी: या नवीन कामाच्या ओझ्याबद्दल (workload) तुम्हाला काय वाटते? हे खूप ज्यास्त होते? सहभागींबरोबर आपण ही अंमलबजावणी किती सहजपणे करू शकता?

ICMR-NATIONAL INSTITUTE FOR RESEARCH IN REPRODUCTIVE HEALTH

Project Title: Increasing access to PP contraception by linking family planning and infant vaccination services

In-depth interview guideline: MEN (HUSBANDS) POST-INTERVENTION

Stakeholder name		Stakeholder designation	
Stakeholder affiliation		Stakeholder location	

***Note:** Thank you for participating in the evaluation of PIVOT. We are interviewing key informants to get their opinions after the pilot of the intervention, as well as your ideas on how to improve the program.*

We aPPreciate the time you are putting into this process and look forward to sharing the evaluation final products with you and/or your organization. Kindly note that, the information you provide will not be shared and will be kept confidential.

Do you have any questions before we begin? ...Thank you!

FAMILY PLANNING in your area

- What are the methods mostly preferred in your community for women who have recently had a baby? Why? (probe for injectables- who injects, training received for injecting contraceptives, when, where?-do the women prefer injectables? Why do they prefer- explore incentives) (probe for IUD- who inserts? Where? Any incentives? Role of frontline workers, ASHA workers, institutional deliveries, providers bias). What extent has the PIVOT program helped women in accessing these methods? PROBE: Local delivery, LARC.
- The family planning program in India has historically focused on providing family planning in PHCs and Hospitals. What do you think about providing family planning during an infant vaccination visit at the village health and nutrition day? What do you think are the facilitators of adoption of contraception in this location and co-located with vaccination services? What do you think are the barriers?

- Is provision of family planning during infant vaccination visits at village health and nutrition day method acceptable in your community? (by this we mean agreeable, palatable, or satisfactory)
- Do you think this linked model of care is appropriate for this community? (by this we mean a good fit for the needs of the community) Probe: For all members of the community or only certain members?
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- What could be role of men in family planning after delivery of a baby? How do men support or inhibit women from accepting family planning after a delivery? What are their roles? How can programs help them?
- What could be role of mothers-in-law in family planning for a couple after delivery of a baby? How do mothers-in-laws (or other family members that live in the home) support or inhibit women from accepting family planning after a delivery?

प्रकल्पाचे नाव : कुटुंब नियोजन आणि अर्भक लसीकरण सेवांचा संबंध जोडून प्रसूतिपूर्व गर्भनिरोधक साधनाचा वापर वाढविणे

सखोल मुलाखतीच्या मार्गदर्शक सूचना: पुरुषांची (पतींची) हस्तक्षेप पश्चात सखोल मुलाखत

भागधाराकाचे नाव		भागधाराकाचे पद	
भागधाराकाची सल्लग्नता		भागधाराकाचे स्थान	

टीप : मुख्य हस्तक्षेप मूल्यांकनात भाग घेतल्याबद्दल धन्यवाद. हस्तक्षेपाच्या मार्गदर्शक कार्यक्रमानंतर त्यांची मते जाणून घेण्यासाठी तसेच कार्यक्रमात सुधारणा कशी करावी यावरील तुमच्या कल्पनांबद्दल आम्ही मुलाखत घेत आहोत.

तुम्ही या प्रक्रियेमध्ये देत असलेल्या वेळेचे आम्ही कौतुक करतो आणि मूल्यांकन तुम्ही आणि/किंवा तुमची संस्था यांच्याबरोबर अंतिम निष्कर्ष सामायिक करण्यास उत्सुक आहोत. कृपया लक्षात ठेवा की, तुम्ही प्रदान केलेली माहिती सामायिक केली जाणार नाही आणि ती गोपनीय ठेवली जाईल.

आम्ही मुलाखत प्रारंभ करण्यापूर्वी तुमच्याकडे काही प्रश्न आहेत काय ? ...धन्यवाद!

तुमच्या विभागातील कुटुंब नियोजन:

- अलीकडेच मूल झालेल्या महिलांसाठी तुमच्या समाजात कोणत्या कुटुंब नियोजन पद्धतीना प्राधान्य देत आहात? का? (इंजेक्शनबद्दल विचारा- इंजेक्शनस कोण देते, गर्भ निरोधक इंजेक्शन देण्याचे प्रशिक्षण मिळाले काय ? कधी? कुठे? महिला कधी इंजेक्टेबलला प्राधान्य देतात का? प्राधान्य का देतात -प्रवृत्त करणाऱ्या बाबींच शोध घ्या ?) (आययूडी (कॉपर टी) बाबत चौकशी करा- कोण समाविष्ट करते? कोठे? प्रोत्साहन? अग्रभागी कामगारांची भूमिका, आशा कामगार, संस्थात्मक बाळंतपण, प्रदाते पूर्वाग्रह). मुख्य हस्तक्षेप कार्यक्रमाने महिलांना या पद्धतींमध्ये प्रवेश करण्यास किती प्रमाणात मदत केली आहे? प्रोब: स्थानिक पातळीवर.
- भारतातील कुटुंब नियोजन कार्यक्रमाने ऐतिहासिकदृष्ट्या प्राथमिक आरोग्य केंद्र आणि रुग्णालयांमध्ये कुटुंब नियोजन सुविधा देण्यावर लक्ष केंद्रित केले आहे. गावोगावी आरोग्य व पोषण दिवसाच्या बाल-लसीकरणाच्या भेटी दरम्यान कुटुंब नियोजन सेवा सुविधा देण्याबद्दल आपले काय मत आहे? आपणास असे वाटते की या ठिकाणी गर्भनिरोधक स्विकारणारे आणि लसीकरण सेवा सहाय्यक (मदतनीस) याबाबत तुमचे मत काय आहे? यामध्ये कोणते अडथळे आहेत असे तुम्हाला वाटते?
- ग्रामीण आरोग्य आणि पोषण दिवस पध्दतीवर शिशु लसी भेटीदरम्यान कुटुंब नियोजनाची तरतूद आपल्या समाजात मान्य आहे काय? (याचा अर्थ असा आहे की तुम्ही सहमत, मनाला रुचणारे किंवा समाधानकारक आहात)
- तुम्हाला असे वाटते की यशस्वीरीत्या गुणवत्तापूर्वक जोडलेले हे मॉडेल या समुदायासाठी योग्य आहे? (याचा अर्थ आमच्यासाठी समुदायाच्या गरजेसाठी एक योग्य तंदुरुस्त आहे) चौकशी: समाजातील सर्व सदस्यांसाठी किंवा केवळ काही विशिष्ट सदस्यांसाठी?
- तुम्हाला असे वाटते की यशस्वीरीत्या गुणवत्तापूर्वक जोडलेले हे मॉडेल या समाजात व्यवहार्य आहे? (याचा अर्थ असा आहे की हा कार्यक्रम अशा परिस्थितीत यशस्वीरीत्या वापरला तर अंमलात येऊ शकतो).
- बाळाच्या जन्मानंतर कुटुंब नियोजनात पुरुषांची भूमिका काय असू शकते? प्रसूतिनंतर कुटुंब नियोजन स्वीकारण्यापासून पुरुष स्त्रियांना समर्थन कसे देतात किंवा प्रतिबंधित कसे करतात? त्यांच्या भूमिका काय आहेत? कार्यक्रम त्यांना कशी मदत करू शकतो?
- बाळाच्या जन्मानंतर जोडप्यासाठी कुटुंब नियोजन करण्यात सासू-सासरे यांची काय भूमिका असू शकते? प्रसूतीनंतर सासू (किंवा घरात राहणारे कुटुंबातील इतर सदस्य) कुटुंब नियोजन स्वीकारण्यास महिलांना कसे समर्थन देतात किंवा प्रतिबंधित करतात?

Appendix 4: Procedures for women who desire contraception

A urine pregnancy test will be performed prior to provision of contraception. If the urine pregnancy test is positive the participant will be referred to the health center for further assessment to determine if she has a new pregnancy or if she continues to have a positive urine pregnancy test from her recent pregnancy. Contraception will not be provided at this time. If the pregnancy test is negative and the patient desires an IUD the patient will be asked if she had unprotected intercourse in the past 14 days, she will be asked if she is exclusively breastfeeding. If she had unprotected intercourse 5-14 days prior and is not exclusively breastfeeding, she will not be given the IUD at this time, or if she had unprotected intercourse in the past 14 days prior and is not exclusively breastfeeding, she will not be given the injection at this time, because there is a chance she could have an early pregnancy that is not detected by a pregnancy test. She will be referred to the public health center to discuss the options for timing of initiation of IUDs with the supervising physician. Oral contraceptive pills may be started if the provider is reasonably certain that a participant is not pregnant but if there is any unprotected intercourse in the 14 days prior to initiation then a urine pregnancy test will be given to the participant to be taken in 14 days and study staff will follow up with her to request the result. If contraception is delayed, a repeat appointment will be scheduled for > 7 days after the initial visit and she will be instructed not to have intercourse until that visit.

For participants who desire an IUD, a bimanual and speculum exam will be performed. If a patient has evidence of vaginal discharge, a syndromic management algorithm will be employed to determine whether she has active cervicitis as is standard of care. If cervicitis is confirmed, or if pelvic inflammatory disease (PID) is suspected following bimanual exam in any patient, she will be immediately referred to the health center for treatment and the IUD will not be placed.

If active cervicitis is not diagnosed, and she is determined to not be pregnant, and she is still eligible for insertion of the Copper T 380A IUD, the IUD used provided free of charge by the Indian Family Planning Programme. The Copper T 380A will be placed according to the standard guidelines outlined by the Ministry of Health in India.

Analgesia: Oral analgesic with ibuprofen will be available to the participant before or after the insertion if desired by the participant or if continued cramping occurs after the insertion for women that deny allergy or contraindication to ibuprofen.

Cervical anesthesia and/or cervical dilation and ultrasound will not be used and are rarely needed for IUD placement, especially for postpartum women. If clinically indicated as determined by the provider inserting the Copper IUD, the participant will be referred to the health center for IUD placement by a physician.

All participants will be informed that the Copper T 380A IUD provided is effective for contraception immediately after placement. Women will be instructed on how to check for their strings.