Attachment H5. Women's Health Needs Study Questionnaire (Amharic translations)

Section	Question	English Items	Amharic Translation
Full Questionnaire			
Tun Questionnuire	Cover	Public reporting burden of this collection of information is estimated to average 45 minute per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-xxxx).	000 000 000 000 000 000 0000 0000 0000 0000
	OMB notice	Form Approved	
		OMB Number:	OMB [[[
		Expiration Date:	
	Survey Title	Women's Health Needs Study	
SECTION B. BACKGROUND CHARACTERISTICS			
	Intro	Interview Start Time Hour Minute	000-0000 00000 000 000 000
	Intro	Now we can begin. I am going to start by asking you some basic questions about your background. Your answers will not be shared with anyone outside of the research team.	000 0000 000000 00 000000 00000 00000 0000 000 00 0000 00000
	Q1	What language do you speak most often at home?	000 0000 000000 000 0000 00?

Q2	What language(s) do you speak	0000 0000 00 0000 000000
	most often with your closest	000(00) 0000 000(00000 000000
	friends? [INTERVIEWER NOTE:	000 00000 00000 0000)
	Allow for two languages to be	
	given]	
Q3	In what country does your mother	0000 000 00000 00 000 00?
`	live now?	
	Mother passed away [GO TO Q5]	• 000 0000(00 000 5 000)
	• Don't Know [GO TO Q5]	
	• Prefer not to answer [GO TO Q5]	• 00000 00000 (00 000 5 000)
24		
Q4	How often do you speak with your mother?	
	• Daily	• 0000
	• 2-3 times a week	• 2-3 🔲 🔲 🖂
	Once a week	•00000000000
	 Once/twice a month 	• 000 00/000 000
	 Less than once a month 	• 000 000 00 000
	• Never	• 000 00000
	• Don't Know	• 0000
	 Prefer not to answer 	•00000000000
Q 5	How many times have you	0000000 0000 00 000 00 00000?
	traveled to each of the following	
	countries? [ENTER 0 IF	
	RESPONDENT HAS NEVER	
	TRAVELED TO COUNTRY]	
	Burkina Faso	• 0000 00
	• Egypt	• 000
	• Eritrea	• 000
	• Ethiopia	• 0000
	• Gambia	• 000
	• Guinea	• 🗆
	• Mali	• 🗓
	Mauritania	• 0000
	Sierra Leone	• ППППП
	• Somalia	• 0000
	• Sudan	• 000
Q6	How long ago did you move to the	
	United States? [INTERVIEWER	0000 00000? (0000 00000: 0000
	NOTE: Select best option based on	000 000 0000 000000 0000
	answer for the most recent time]	
	Within the last year	• 0000 000 000
	• 1-5 years ago	• 🛘 1-5 🔲 🗎 🗎
	• 6-10 years ago	• 0 6-10 0000 000
	Over 10 years ago	• 🛮 10 🖂 🖂 🖂
	• Born in the U.S. [GO TO SECTION	• 0000 000 000000 (00 000 0
	C]	
	Don't Know	• 0000
	Prefer not to answer	• 000000 00000

	Q7	How old were you when you	00 0000 0000 0000 000 000?
	\ \frac{1}{2}.	moved to the United States?	
		• 0-6 years old	• 🛮 0-6 🖺 🗎
		• 7-12 years old	• 🛮 7-12 🔲 🖂
		• 13-17 years old	• 🛮 13-17 🔲 🗎
		• 18 years or older	• 18 0000 000
		Don't Know	• 0000
		Prefer not to answer	• 000000 00000
SECTION C.		- Trefer flot to driswer	
MARRIAGE AND			
HOUSEHOLD			
Intro		Next, I am going to ask you	
Intro		questions about your marital	
		status and living arrangements.	
	Q8	Including yourself, how many	
	٩٥	people live in your household	
		now? Please count children and	
		elders. Do NOT count people	
		staying in the home for less than	
		one month.	
		Don't Know	
		Prefer not to answer	• 00000 • 00000 000000
		• Freier not to answer	
	Q9	Which of the following describes	
		your current marital status? Are	000 0000 000000? 0000000
		you married, living with a partner,	0000 00 0000 000 0000
		widowed, divorced, separated, or	
		have you never been married?	
		Married	• ППП
		Widowed	
		Divorced	
		Separated	• 0000
		Not married, but living with a	• 0000
		partner	• 0000
		Never married/lived with	• 000 0000 (00 000 14 000)
		partner [GO TO Q14]	• 00000 000000 [00 000 14 000]
		• Prefer not to answer [GO TO	
		Q14]	
	Q10	How old were you when you first	00000 0000 0000 000 000?
	\	got married or started living with a	
		partner?	
		partitor.	

		• Under 18 years	• [] 18 [] [] [] []
		• 18-24 years	• 18-24 [][]
		• 25-29 years	• 25-29 🔲 🗆
		• 30-39 years	• 30-39 🔲 🗆
		• 40-49 years	● 40-49 □□□
		Over 49 years	• 🛮 49 🔲 🗎 🖂
		Don't Know	• 0000
		Prefer not to answer	
	Q11	How old was your	000000 00 0000 000 / 0000 000
		husband/partner when you first	
		got married or started living	
		together?	
		Under 18 years	• 🛮 18 🔲 🗎 🖂
		• 18-24 years	● 18-24 □□□
		• 25-29 years	● 25-29 □□□
		• 30-39 years	● 30-39 □□□
		• 40-49 years	● 40-49 □□□
		• Over 49 years	• [] 49 [] [] []
		• Don't Know	• 00000
		Prefer not to answer	
		• Prefer not to answer	• 0000 00000
	Q12	In what country did your first	00000 0000 000000 00 000
		marriage/partnership take place?	
	Q13	In what country was your	000/000000000000000000
		husband/partner born?	
SECTION D.			
COMMUNITY			
ACTIVITIES			
Intro		I am now going to ask you some	
		questions about your participation	
		in community activities such as	
		neighborhood organizations or	
		groups.	
	Q14	Are you a member of any club,	
	,	association, or religious	
		organization for people from your	
		family's home country or	
		ethnic/cultural background?	
		• Yes	• 🗆
		• No	
		Not sure	
		Prefer not to answer	
		- Freier not to answer	
	Q15	When you invite people to your	
	`	home, are they	
		Mostly people <u>from</u> my home	• 000000 00 00000 000 000 000 /
		• Mostry beoble Holli III Hollie	

		country or ethnic/cultural background • Mostly people NOT from my	• 0000 00000 000 000 • 00000 00 00000 000
		home country or ethnic/cultural background • A mix of people from AND not from my home country or ethnic/cultural background • I never invite people to my home • Prefer not to answer	• 0000 000 000 000 000 • 000 000 000 00 000 • 000000 00000
	Q16	Have you done any work outside of the home for pay in the past 30 days?	00000 00 00000?
		YesNoDon't KnowPrefer not to answer	• 00 • 00000 • 00000 000000
SECTION E. HEALTH-SEEKING BEHAVIOR AND PROVIDER EXPERIENCE			
		Now I am going to ask you some questions about your overall health and experiences with health care, services, and providers.	000 000000 000 00 000 0000000000 00 000000
	Q17	In general, how would you describe your health? Is it excellent, very good, good, fair, or poor?	00000000000 0000 0000000 000 000 00 0 000 000000
		 Excellent Very good Good Fair Poor Not sure Prefer not to answer 	• 000 000 00 • 000 00 • 000 • 000 000 00
	Q18	How many times have you gone to a clinic or hospital for health care for yourself in the past 12 months?	0000 12 000 0000 00 000000 00 0000 000 00000 000 00

T		
	• Not at all	• 000 00000
	• Once	
	• Twice	• 1111 111
	• 3-5 times	• 3-5 🔲
	More than 5 times	• 🛮 5 🗓 🗎 🗎
	Don't Know	• 0000
	 Prefer not to answer 	• 0000 00000
Q19	When visiting your healthcare	
'	provider, would you like to have	
	someone present to interpret?	
	• Yes	• 🗆
	• No [GO TO Q22]	• 00 (00 000 22 000)
	Do not have a healthcare	
	provider [GO TO Q22]	22 [[[]]
	• Don't Know [GO TO Q22]	• 0000 [00 000 22 000]
	• Prefer not to answer [GO TO	• 000000 00000 (00 000 22
	Q22]	
	(42)	
Q20	During your last visit, was an	
420	interpreter offered to you?	
	<u>'</u>	
	• Yes	• 🗓
	• No	• 0000
	• Don't Know	• 0000
	Prefer not to answer	• 0000 00000
004	NATION OF THE CONTRACT OF THE	
Q21	Who usually serves as an	
	interpreter for you?	
	My health provider	• 000 00000
	Professional interpreter	
	• A staff person	
	A female friend or relative	• 000 000 000
	My husband/partner, or other	• 0000/0000 000 00 000 000
	male relative	• 000 0000 0000
	Other, please specify:	
Q22	Are you currently covered by any	000 00 000000 0000 000 00000
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	of the following types of health	
	insurance?	
	A plan purchased through an	
	employer or union (includes plans	• 000 000 00000(000 00 000 nnnn nnn nnn nnnn) nnn
	purchased through another	
	person's employer)	• 0000 000 00 00000 000 000
	A plan that you or a family The street of the st	
	member buys on their own	• Medicaid [][] [][] [][][] [][][]
	Medicaid or other state or	
	federal program	• 00 0000000 00000
	federal program • Some other source, please	• 00 0000000 00000 • 000 00 0000 000
	federal program	• 00 0000000 00000

	I	Τ.	
		insuranceDon't KnowPrefer not to answer	
	Q23	During the past 12 months, was there any time when you needed medical care but didn't get it because you couldn't afford it?	0000 12 000000000 000000 000000 00 00000 000 0
		YesNoDon't KnowPrefer not to answer	• 00 • 00000 • 00000 000000
SECTION F. WOMEN'S HEALTH AND PREGNANCY OUTCOMES			
		I am now going to ask you questions about family planning and your sexual health.	000 00 0000 0000 00 0000 00000 00000 000000
	Q24	Have you ever used any contraceptives or birth control methods to avoid or delay getting pregnant?	00000 00000 000 00000 00000 0000 0000
		 Yes No [GO TO Q26] Don't Know [GO TO Q26] Prefer not to answer [GO TO Q26] 	• □□ • □□ [□□ □□□ 26 □□□] • □□□□□ □□ □□□ 26 □□□] • □□□□□□ □□□□□ [□□ □□□ 26 □□□]
	Q25	Which method(s) have you ever used? Have you used this method in the past 30 days?	
		Ever Used?	
		Used in past 30 days?	
		Female sterilization (tubes tied)	
		Male sterilization	
		Contraceptive implant (Nexplanon, Jadelle, Sino, Implant, Implanon)	□□□□□□ □□□□□ □□□□(Nexplanon,Jadelle□Sino□Impla nt□Implanon)
		IUD (for example, Paragard, Mirena, Skyla, Liletta)	IUD(
		Shots/Injections (for example, Depo-Provera)	□□□/□□□□(□□□□□ Depo-Provera)
		Birth control pills (daily pills, any kind)	0000 0000 000(0000 000000000 00000
		Contraceptive patch (Ortho Evra, Xulane)	□□□□□□ □□□□ □□(Ortho Evra□Xulane)

	Contraceptive ring (NuvaRing)	(NuvaRing)
	Male condoms	
	Diaphragm	
	Female condoms	
	Foam, jelly, or cream	
	Emergency contraception	
	(morning after pill)	
	Not having sex at certain times	
	(rhythm or natural family	
	planning)	
	Withdrawal (pulling out)	
	Other, please specify:	
Q26	In the past 12 months, have you	
,	had trouble getting the	
	contraceptives or birth control	
	methods you wanted?	
	• Yes	• 🗆
	• No	• 0000
	• I did not need a birth control	• 0000
	method	• 00000 00000
	• Don't Know	
	Prefer not to answer	
Q27	When was your last pelvic exam	
	and/or pap smear?	00000 000 00000 00 000?
	Within past year	• 0000 000 000
	• 2-3 years ago	• 2-3 🔲 🗎
	• 3 to 5 years ago	• 3 000 5 000 000
	More than 5 years ago	• 🛮 5 🗆 🗆 🗆 🗎
	• Never	• 0000 00000
	• Don't Know	• 0000
	Prefer not to answer	• 00000 000000
Q28	How old were you when you had	
325	sexual intercourse for the first	
	time?	
	[READ IF NECESSARY: Do not	
	count oral sex, anal sex, heavy	
	petting, or other forms of sexual	
	activity that do not involve vaginal	
	penetration. Do not count sex	
	with a female partner].	
	• Under 18 years	• 🛮 18 🔲 🖂 🖂
	• 18-24	● 18-24
	• 25-29 years	● 25-29 □□□
	• 30-39 years	• 30-39 🔲
	• 40-49 years	• 40-49 🔲 🗎
	Over 49 years	• 🛮 40 🔲 🗎 🗎
	Never had sexual intercourse	• 0000 00 00000 0000 00000
	<u> </u>	

		[60 10 027]	
		[GO TO Q37] • Prefer not to answer	
		• Prefer flot to answer	• 0000 0000
SECTION G. WOMEN'S HEALTH AND PREGNANCY OUTCOMES			
	Intro	To finish up our questions about health and health care, we have a few questions for you about pregnancy and prenatal care. Prenatal care is when you get checkups from a doctor, nurse, or midwife while you are pregnant.	0000 00 000 000000 0000 00000 000000 0000 00
	Q29	Are you pregnant now?	
		 Yes No [GO TO Q31] Don't Know [GO TO Q31] Prefer not to answer [GO TO Q31] 	• 00 • 000000[00 000 31 000] • 00000 [00 000 31 000] • 00000 000000 [00 000 31 000]
	Q30	Have you had prenatal care for this pregnancy?	000 00000 0000 000 000000 0000000
		YesNoPrefer not to answer	• 00 • 00000 • 00000 000000
		Now we have some questions about your children.	000 000000 000 00000 0000
	Q31	How many children have you given birth to that were born alive?	00000 00000 000 000 0000
		Now I will ask a few questions about each child you had beginning with the oldest one.	000 000 000000 00000000 000 000 000000 000000
		Child	
		1 2 3 4 5	1 2 3 4 5
		6 7 8 9	6 7 8 9
		10 11 12 13 14	10 11 12 13 14

		15	15
	Q32	In what month and year was this	
	Q02	child born?	
		Month:	
		Year:	
		Prefer not to answer	
	Q33	Is this child still alive?	
		Yes	
		No	
		Prefer not to answer	
	Q34	Was this child born in the U.S.?	
		Yes	
		No	
		Prefer not to answer	
	Q35	How many weeks (or months)	
		pregnant were you at the time of	
		your first prenatal care visit?	
		Weeks	
		Months	
		No Prenatal Care	
		Don't Know	
		Prefer not to answer	
	Q36	Was this baby delivered by	00 000 000 0000 (0-0000) 00
		caesarean section (c-section)?	
		Yes	
		No	
		Prefer not to answer	
SECTION H. FGM/C			
Intro		In a number of countries, there is	
		a practice called circumcision in	
		which a girl or young woman may	
		have part of her genitals cut. Now	
		I would like to ask you some	
		questions about your knowledge	
		and experiences with female	
		circumcision.	
	Q37	Do you come from a family that	
		has practiced the tradition of	
		female circumcision?	
		• Yes	• 🗓
		• No	• 00000
		Don't Know Prefer net to anguer	• 0000
	020	Prefer not to answer Page Your bushend (norther come)	
	Q38	Does your husband/partner come	000/0000 0000 0000 0000
		from a family that has practiced	
		the tradition of female	
		circumcision?	

• Yes			
Do not have husband/partner Don't Know Prefer not to answer Dolling Dolling			
Don't Know Prefer not to answer Prefer			• 🗆
Prefer not to answer			• 00/000 0000
Q39			
• Yes			• 000000 00000
No [GO TO QS0] Ont't Know GO TO QS0] Optic Know Prefer not to answer GO TO QS0] Optic Know Prefer not to answer Optic Know Opti	Q39	Have you ever been circumcised?	
Don't Know [GO TO Q50] Prefer not to answer [GO TO Q50] Prefer not to answer [GO TO Q50] □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□		• Yes	• 🗆
Opn't Know GO TO Q50 Prefer not to answer GO TO Q50 Prefer not to answer GO TO Q50 Opto How old were you when first circumcised? Opto How old Ho		• No [GO TO Q50]	
Prefer not to answer [GO TO Q50]		Don't Know [GO TO Q50]	
Q40		Prefer not to answer [GO TO	
circumcised?		Q50]	
circumcised?			
Less than 1 year old	Q40		
1-4 years old 5-9 years old 5-9 years old 5-9 years old 10-14 years old 15-19 years old		circumcised?	
5-9 years old 10-14 years old 15-19 jeans			
10-14 years old 15-19 year		-	
• 15-19 years old • More than 19 years old • Too young to remember • Don't Know • Prefer not to answer • □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□			
More than 19 years old Too young to remember Don't Know Prefer not to answer Don't Know Prefer not to answer Don't Know Don't Know Don't Know Don't Know Prefer not to answer Don't Know Don't Know Don't Know Don't Know Prefer not to answer Don't Know Don'			
■ Too young to remember ■ Don't Know ■ Prefer not to answer Q41 Now I would like to ask you some more questions about your circumcision. Was any flesh removed from the genital area? ● Yes [GO TO Q43] ● No ● Don't Know ● Prefer not to answer Q42 Was the genital area nicked without removing any flesh? ● Yes ● No ● Don't Know ● Prefer not to answer Q43 Was your genital area sewn closed? Q44 What kind of circumcision do you have? Q44 Type 1 ● Type 1 ● Type 1 ● Type 1 ● Type 2 ● DON't Snow ● Prefer not to answer ● DON't Snow ● Prefer not to answer ● DON't Snow ● DON't Sno		-	
Don't Know Prefer not to answer Prefer not to answer □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□		More than 19 years old	• 🛮 19 🔲 🗎 🖂
Prefer not to answer •		Too young to remember	• 000000 000 000 0000
Q41 Now I would like to ask you some more questions about your circumcision. Was any flesh removed from the genital area? Yes [GO TO Q43] Ono't Know On		Don't Know	• 0000
more questions about your circumcision. Was any flesh removed from the genital area? • Yes [GO TO Q43] • No • Don't Know • Prefer not to answer • Don't Know • Don't Kn		 Prefer not to answer 	• 00000 000000
more questions about your circumcision. Was any flesh removed from the genital area? • Yes [GO TO Q43] • No • Don't Know • Prefer not to answer • Don't Know • Don't Kn			
circumcision. Was any flesh removed from the genital area? Yes [GO TO Q43]	Q41	Now I would like to ask you some	
removed from the genital area? • Yes [GO TO Q43] • No • Don't Know • Prefer not to answer Q42 Was the genital area nicked without removing any flesh? • Yes • No • Don't Know • Prefer not to answer Q43 Was your genital area sewn closed? • Yes • No • Don't Know • Prefer not to answer Q44 What kind of circumcision do you have? • Type 1 • Type 2 • ODD 1 ODD 1 ODD ODD		more questions about your	
Yes [GO TO Q43] No Don't Know Prefer not to answer Q42 Was the genital area nicked without removing any flesh? No Don't Know Prefer not to answer No Don't Know Prefer not to answer Q43 Was your genital area sewn closed? Yes No Don't Know Prefer not to answer Q44 What kind of circumcision do you have? Type 1 Type 2 Type 1 Type 2		circumcision. Was any flesh	
No Don't Know Prefer not to answer Q42 Was the genital area nicked without removing any flesh? Yes No Don't Know Prefer not to answer Q43 Was your genital area sewn closed? Yes No Prefer not to answer Q44 What kind of circumcision do you have? Type 1 Type 2 Prefer not to answer Old Indicate the property of the prope		removed from the genital area?	
Don't Know Prefer not to answer Q42 Was the genital area nicked without removing any flesh? Yes No Don't Know Prefer not to answer Q43 Was your genital area sewn closed? Yes No Prefer not to answer Q44 What kind of circumcision do you have? Type 1 Type 2 Vas the genital area nicked		• Yes [GO TO Q43]	• 🔲 [🔲 🔲 43 🔠]
■ Prefer not to answer Q42 Was the genital area nicked without removing any flesh? ■ Yes ■ No ■ Don't Know ■ Prefer not to answer Q43 Was your genital area sewn closed? ■ Yes ■ No ■ Don't Know ■ Prefer not to answer Q44 What kind of circumcision do you have? ■ Type 1 ■ Type 2 ■ Output Don't to answer ■ Output Don't Know ■ Don't Know		• No	•0000
Q42 Was the genital area nicked without removing any flesh?		Don't Know	• 0000
without removing any flesh? □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□		 Prefer not to answer 	•0000 00000
without removing any flesh? □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□	042	Was the genital area nicked	
	~ .=	_	
■ Don't Know ■ Prefer not to answer Q43 Was your genital area sewn closed? ■ Yes ■ No ■ Don't Know ■ Don't Know ■ Prefer not to answer Q44 What kind of circumcision do you have? ■ Type 1 ■ Type 2 ■ □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□			
Q43 Was your genital area sewn closed? □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□			
Closed?	042		
	Q43	, ,	
No Don't Know Prefer not to answer Q44 What kind of circumcision do you have? Type 1 Type 2 Type 2 Type 2 Type 2 Type 1 Type 2			
On't Know Prefer not to answer What kind of circumcision do you have? Type 1 Type 2 Type 2 On't Know O□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□			
Q44 What kind of circumcision do you have? □□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□□			
have? • Type 1 • Type 2 • □□□□ 1 • □□□□ 2			
• Type 1 • Type 2 • □□□□ 1 • □□□□ 2	Q44	•	
• Type 2 • □□□□ 2			
● Type 3 ● □□□□ 3			
		• Type 3	• 000 3

1	T	,
	Don't Know Design net to answer	• 00000
	Prefer not to answer	• 000000 00000
Q45	Have you ever had any problems related to your circumcision?	000000 00 00000 000 000 00000 00000
	• Yes	• 🗆
	• No [GO TO Q47]	• 00000 00000 (00 000 47 000)
	• Don't Know [GO TO Q47]	• 0000 (00 000 47 000)
	• Prefer not to answer [GO TO	• NONDO (100 000 17 000)
	Q47]	
Q46	Please describe what problems	
	occurred. [INTERVIEWER NOTE:	
	DO NOT READ RESPONSES OUT	
	LOUD. SELECT ALL OPTIONS	
	RESPONDENT MENTIONS OR	
	SELECT OTHER AND WRITE IN	
	OPEN ENDED BOX].	
	Difficulty passing menstrual	• 000 000 00 00 0000 0000
	blood	• 0000 0000
	Difficulty passing urine	• 0000 000 000
	Pain with urination	• 00000 0000 000 000000
	Recurrent Urinary Tract	• 0000 00 000
	Infections	
	Pain with sex	• ∏∏∏∏ C-section
	Bleeding with sex	
	Emergency C-section	
	Postpartum Hemorrhage	
	Extensive vaginal tears from	
	childbirth	
	Other, please specify:	
	Other, please specify.	• 0000 00000
	Don't Know	
	Prefer not to answer	
Q47	Would you feel comfortable	000 000000 00 00 0000000
	discussing your circumcision with	
	a health care provider?	
	• Yes	• 🗆
	• No	• 0000
	Don't Know	• 0000
	Prefer not to answer	•0000 00000
Q48	Have you ever talked with a health	000 000000 00 00 00 000000
	care provider about your	
	circumcision?	
	• Yes	• 🗆
	• No [GO TO Q50]	• 0000 [00 000 50 000]
	Don't Know [GO TO Q50]	• 0000 [00 000 50 000]
	Prefer not to answer [GO TO	• 0000 00000 [00 000 50 000]
	Q50]	
Q49	Who started the conversation	 000000 00000 00000 00 000
Q 4 7		I DUU UUU UUU UUUUU UUUU
	about your circumcision, you or	

	1	the health care provider?	
		• You	• 000
		• The health care provider	
		• Don't Know	
		Prefer not to answer	• 00000 00000
		• Freier not to answer	
		Have you ever experienced any of	
		these health issues or conditions?	
		Is this an ongoing problem?	
		• Yes	• 🗆
		• No	• 0000
		Don't Know	• 0000
		Did you seek professional health	
		care for this?	• 🗆
		• Yes	• 000000
		• No	• 0000 00000 00000
		Not treatable by a doctor	• 0000
		• Don't know	
		Were you satisfied with how the	000 00000 000 0000 0000000•
		problem was addressed?	
		• Yes	• 0000
		• No	• 0000
		Don't Know	
	Q50	Have you ever had?	00000 000 0000 000 00000 00000 00000
	a.	Difficulty passing menstrual blood	
	b.	Difficulty passing urine	
	c.	Pain with urination	
	d.	Recurrent Urinary Tract Infections	
	Q51	Have you ever?	
	-	,	
	a.	Felt sad for many weeks at a time	
	Q52	Have you ever had?	00000 000 0000 000 00000
	a.	Pain with sex	
	b.	Bleeding with sex	
	Q53	Have you ever had?	
	a.	Emergency C-section	□□□□ C-section
	b.	Postpartum hemorrhage	0000 000 0000 00 0000
	c.	Extensive vaginal tears from	
		childbirth	
SECTION I. FGC BELIEFS			
		I am now going to ask you some	
		questions about your beliefs and	
		opinions about female	
		circumcision.	
L	-	!	!

Q54	Which of the following best	
	describes your views about female	000000 0000 0000 0000000 000
	circumcision? Would you say	
	It should be stopped	• 000 0000
	It should continue as is	
	Depends on the family	
	I have mixed feelings about it	• 000 0000000 000 00 000
	Other, please specify:	• 000 0000 00000
	• Don't Know	• 0000
0.55	Prefer not to answer	• 00000 000000
Q55	Has your opinion about female	
	circumcision changed in any way	
	since you moved to the U.S.?	
	• Yes	• []
	• No [GO TO 57]	• 000000 (00 000 57 000)
	• Not applicable, born in the U.S.	• 00000 0000 0 0000 0000
	[GO TO 57]	
	Not applicable, did not have	• 0000 000000 00 U.S. 00000 000
	opinion before moving to U.S. [GO	
	TO 57]	• 00000 [00 000 57 000]
	• Don't Know [GO TO 57]	• 00000 000000 (00 000 57 000)
05/	Prefer not to answer [GO TO 57]	
Q56	How has your opinion changed?	
	Would you say your opinion is	00000 00 0000
	More accepting of female	• 000 00 00000 00000 0000
	circumcision	• 000 00 00000 00000 0000
	Less accepting of female	• 00000
	circumcision	• 00000 000000
	• Don't Know	
0.57	Prefer not to answer	
Q57	Do you believe that female	
	circumcision is required by your	
	religion?	
	• Yes	• 🗓
	• No	• 0000
	No Religion Don't Know	• 0000 000
	Don't KnowPrefer not to answer	
050		
Q58	In your opinion, can female	0000 0000000 000 00 0000 000
	circumcision cause any health problems for women later on (for	UU UUUUUU UUUU UUU UU UUUU MAAAAAA UUUUU UU UUUU
	example during pregnancy and	
	delivery)?	
	• Yes	• 🗆
	• Yes	
	• Don't Know	55555
	Prefer not to answer	• UUUUU • NOOOO NOOOOO
Q59	What are your husband/partner's	
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	views about female circumcision?	000 / 0000 0000 00 00 00 00 0000 NO NONNO NON? NONNO NON
	Do you think he would say	

SECTION J. EDUCATION		 It should be stopped It should continue as is Depends on the family He has mixed feelings about it Other, please specify: Do not have husband/partner Don't Know Prefer not to answer 	• 000 0000 • 0000 0000 0000 • 000 0000000 000 00 000 • 00/000 0000 • 000 0000 00000
	Q60	What is the highest level of schooling you have completed?	00000 0000 00000 000 000 000
		 No formal school [END OF SURVEY] Less than a high school diploma High school diploma or GED Some college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree or higher (for example: BA, BS, MA, MS, MD, PhD, etc) Don't Know Prefer not to answer 	ODD DDDD DDDDDDDDDDDDDDDDDDDDDDDDD
	Q61	Have you ever attended school in the U.S.?	U.S. 000 00000 00 000000
		YesNo [END OF SURVEY]Prefer not to answer	• 00 • 00000 000000
	Q62	Are you attending school now?	000 00000 00000 000
		YesNoPrefer not to answer	• 00 • 00000 • 00000 000000
	N/A	Interview End Time Hour Minute	0000 0000 000 000 000