

Ethiopia Round 6 SDP Questionnaire

	Always
001a. Your name: [NAME] Is this your name?	○Yes
	○ No
001b. Enter your name below. Please record your name	001a = 0
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002b. Record the correct date and time.	Day: Month: Year:
003a. Region	<pre></pre>
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	○ GAMO GOFA
	○ BENCH MAJI
	○ AMARO SPECIAL
	○ DAWURO
	○ SILTIE
	○ ALABA SPECIAL
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	○ AGNEWAK
	○ MEJENGER
	○ HARARI
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	O NOLI LINCINITO



	○ GULELE
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	O ALAMATA/TOWN/
	○ KAFTA HUMERA
	○ WELKAYIT
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	SEMEN MEKELE/TOWN/
	O DUBTI
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005. Facility number Please record the number of the facility from the listing form.	Always
006. Type of facility Please select the type of facility.	Always O Hospital / Polyclinic O Health center O Health post O Health clinic O Pharmacy O Retail outlet O Other
007. Managing authority Please select the managing authority for the facility.	Always O Government NGO Faith-based organization Private Other
008. Is a competent respondent present and available to be interviewed today?	Always ○ Yes ○ No
INFORMED CONSENT Find the competent respondent responsible for patient services (main administrator and family planning in-charge) who is present at the facility. Read the greeting on the next screen:	\${available} = 'yes'
Hello. My name is	<pre>\${available} = 'yes'</pre>



stop the interview at any time. Do you have any	
questions about the survey?	
009a. Provide a paper copy of the Consent Form to the respondent and explain it. Then, ask: May I begin the interview now?	\${available} = 'yes' O Yes O No
010. Interviewer's name Please record your name as a witness to the consent process. You previously entered "[NAME]"	009a = 1
011. Name of the facility Please record the name of the facility.	009a = 1
012. What is your position in this facility? Select the highest managerial qualification of the respondent.	009a = 1 ○ Owner ○ In-charge / manager ○ Staff ○ No response
013. When did you begin working at this facility? Select "2020" to indicate "Do not know" or "No Response."	009a = 1 Year:
014. Have you previously participated in the PMA2020 service delivery point survey at this facility?	009a = 1 ○ Yes ○ No ○ Do not know ○ No response

Section 1 – Information About Services Now I would like to ask about the services provided at this facility.			
101. What year did this facility first begin offering health services / products? Select "2020" to indicate "Do not know" or "No Response."	009a = 1 Year :		
102. How many days each week is the facility routinely open? Enter a number between 0 and 7. Enter 0 for less than 1 day per week. Enter -88 for do not know, -99 for no response.	009a = 1		
104. Now I have some questions about staffing for this facility. For the following questions, please tell me how many staff with this qualification are currently assigned to this facility. We want to know the highest technical qualification that any staff may hold regardless of the person's actual assignment or specialist studies.	009a = 1		
104. Total number of doctors Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${consent_obtained} and \${facility_with_consistent_staffing}		
104. Total number of nurses / midwives	\${consent_obtained} and		



Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${facility_with_consistent_staffing}		
104. Total number of health officers Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${consent_obtained} and \${facility_with_consistent_staffing}		
104. Total number of ambulance staff Enter -88 for do not know,-99 for no response. 0 is a possible answer.	<pre>\${consent_obtained} and \${facility_with_consistent_staffing}</pre>		
104. Total number of pharmacists Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${consent_obtained}		
104. Total number of health extension workers Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${consent_obtained}		
104. Total number of pharmacy technicians Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${consent_obtained}		
104. Total number of other medical staff Enter -88 for do not know,-99 for no response. 0 is a possible answer.	\${consent_obtained}		
105a. Do you have an estimate of the size of the current catchment population that this facility serves, that is, the target or total population living in the area served by this facility?	006 ≠ 5 ○ No catchment area ○ Yes, knows size of catchment area ○ Doesn't know size of catchment area ○ No response		
105b. What is the size of the catchment population? Record the number of people living in the area served by this facility.	105a = 2		
106. How many beds does the facility have? 0 is a possible answer. Enter -88 for do not know, -99 for no response.	006 ≠ 5		
107. When was the last time an owner / supervisor from outside this facility came here to visit?	O09a = 1 Never external supervision Within the past 6 months More than 6 months ago Don't know No response		
108a. Does this facility have electricity at this time? Select for running electricity only.	009a = 1 ○ Yes ○ No ○ No response		
108b. At any point today, has the electricity been out for two or more hours?	○ Yes ○ No ○ Do not know ○ No response		



109a. Does this facility have running water at this time? Select for running water only.	009a = 1 ○ Yes ○ No ○ No response
109b. At any point today, has running water been unavailable for two or more hours?	009a = 1 ○ Yes ○ No ○ Do not know ○ No response
110. How many handwashing facilities are available on site for staff to use? Enter -88 for do not know, -99 for no response.	006 ≠ 5
111. May I see a nearby handwashing facility that is used by staff? Handwashing facility must be accessible to most health workers in the facility. At the handwashing facility, OBSERVE: (select all that apply)	□ Soap is present □ Stored water is present □ Running water is present □ Handwashing area is near a sanitation facility □ None of the above □ Did not see the facility.
Section 2 – Family Now I would like to ask about family planning se provider who would be better able to answer m facility, I would appreciate if you coul	rvices provided at this facility. If there is another ny questions on family planning services in this
201. Do you usually offer family planning services / products?	009a = 1 ○ Yes ○ No ○ No response
GGR_201. Has this facility received any funding or other support in the past 12 months, such as training, technical assistance, or supplies from non-governmental organizations to support its family planning services?	\$\{fp_offered\} = 'yes' Yes No Do not know No response
GGR_202. Which non-governmental organizations provide this funding or other support? Probe: Any others? Reminder, "other support" can include training, technical assistance, or supplies. Do not read responses out loud. Select all that apply. Scroll down to see all response options.	\$\{\text{ngo_support_yn}\} = '\text{yes'} \[\text{Family Guidance Association of Ethiopia} \] (\(\text{FGAE} \) \[\text{Marie Stopes International (MSI)} \] \[\text{Pathfinder} \] \[\text{EngenderHealth} \] \[\text{IPAS} \] \[\text{Amref} \] \[\text{Other (specify)} \]



	□ Do not know □ No response
Specify "other" Which non-governmental organizations provide this funding?	<pre>selected(\${ngo_support}, 'other')</pre>
202. When did this facility first begin offering family planning services / products? The respondent reported that the facility opened in [yyyy-mm]. Select "2020" to indicate "Do not know" or "No Response."	201 = 1 Year:
203. How many days in a week are family planning services / products offered / sold here? Enter a number between 0 and 7. Enter 0 for less than 1 day per week. Enter -88 for do not know, -99 for no response. Number of days the facility is open: \${days_open}	201 = 1
205. Does this facility provide family planning supervision, support, or supplies to community health volunteers?	006 ≠ 5 ○ Yes ○ No ○ No response
206. How many community health volunteers are supported by this facility to provide family planning services? Record only CHVs who receive supervision, support, or supplies for family planning. If CHVs were recorded as employees in 104, please do not include them here as well. Enter -88 for do not know, -99 for no response.	205 = 1
207. Do the community health volunteers provide any of the following contraceptives:	205 = 1 □ Condoms □ Pills □ Injectables □ None of the above □ No response
GGR_203. Did any non-governmental organizations provide funding or other support to these community health volunteers? Reminder, "other support" can include training, technical assistance, or supplies.	selected(\${methods_offered},
GGR_204. Which non-governmental organizations provide this funding or other support? Probe: Any others? Reminder, "other support" can include training, technical assistance, or supplies. Do not read responses out loud. Select all that apply. Scroll down to see all response options.	\${chv_ngo_yn} = 'yes' Family Guidance Association of Ethiopia (FGAE) Marie Stopes International (MSI) Pathfinder EngenderHealth IPAS



	☐ Amref		
	☐ Other (specify)		
	☐ Do not know		
	□ No response		
	The response		
Specify "other" Which non-governmental organizations provide this funding? Probe: Any others?	<pre>selected(\${chv_ngo}, 'other')</pre>		
208. How many times in the last 12 months has a mobile outreach team visited your facility to deliver supplementary/additional family planning services? Enter -88 for do not know, -99 for no response. 0 is a possible answer.	201 = 1 AND 006 ≠ 5		
	<pre>\${mobile_outreach_12mo} > 0</pre>		
	☐ Female sterilization		
	☐ Male sterilization		
	☐ Implant		
	□IUD		
GGR_205. What contraceptive methods were offered	□ Injectables		
by these mobile outreach services in the past 12 months?	□ Pill		
Read all options out loud and select all that apply.	☐ Emergency contraception		
	☐ Male condom		
	☐ Female condom		
	□ Standard days / cycle beads		
	☐ None of the above		
	☐ No response		
GGR_206. Approximately how many family planning clients were served through these mobile outreach services in the past 12 months? Enter -88 for do not know, -99 for no response. 0 is a possible answer.	<pre>(\${mobile_methods_offered} != '') and (\${mobile_methods_offered} != '-</pre>		
	201 = 1		
	☐ Counsel for contraceptive methods		
209. Which of the following family planning services do you offer to unmarried adolescents?	☐ Provide contraceptive methods		
Read all options and select all that apply.	☐ Prescribe / refer for contraceptive methods		
	☐ None of the above		
	☐ No response		
Section 4: Provision of F	amily Planning Methods		
	201 = 1		
401a. For which of the following methods do providers	☐ Female sterilization		
at this facility counsel women about the characteristics	☐ Male sterilization		
of the method, its benefits, and its side effects?	☐ Implant		
Read all options out loud.			
	□ Injectables		



	☐ Male of Femal ☐ Standa ☐ LAM ☐ Rhythi ☐ Withdr	e condom ard days / cycle be m method awal of the above	
401b. Which of the following methods are provided to clients at this facility? Read all options out loud.	□ No response 201 = □ Female sterilization □ Male sterilization □ Implant □ IUD □ Injectables □ Pill □ Emergency contraception □ Male condom □ Female condom □ Standard days / cycle beads □ None of the above □ No response		
		0) and (\${	<pre>(count- fp_provided}) > fp_provided} != (\${fp_provided} != '-77')</pre>
401c. Are clients charged for obtaining any of the followmethods at this facility? Read all options out loud.	wing		
		Yes	No
Female sterilization		\circ	0
Male sterilization		\circ	0
Implant		\circ	0
IUD		0	0
Injectables		0	0
Pill		0	0
Emergency contraception		0	0
Male condom		0	0



Female condom	0		0	
Standard days / cycle beads		0	0	
Did the respondent answer the questions or give no res	sponse?	Respondent answered No response		
		\${mster_char \${impl_char	<pre>rged} = 'yes' or rged} = 'yes' or rged} = 'yes' or rs(iud_charged)</pre>	
402. How much do you charge for one unit of each met you provide? Enter all prices in Ethiopian Birr. Enter -88 for do not know, -99 for no response.	thod that			
Female sterilization (full cost of procedure)		\${fster_c	charged} = 'yes'	
Male sterilization (full cost of procedure)		\${mster_c	charged} = 'yes'	
Implants (full cost of the implant and insertion)		\${impl_c	charged} = 'yes'	
IUD (full cost of the IUD and insertion)		\${iud_charged} = 'yes'		
One shot of Injectables		\${inj_charged} = 'yes'		
One month supply of pills		<pre>\${pill_charged} = 'yes'</pre>		
A single dose of emergency contraception		\${ec_c	charged} = 'yes'	
One male condom		<pre>\${mc_charged} = 'yes'</pre>		
One female condom		<pre>\${fc_charged} = 'yes'</pre>		
Standard days / cycle beads		\${beads_charged} = 'yes'		
403. Do family planning clients need to pay any fees in order to be seen by a provider in this facility even if they do not obtain a method of contraception? These may be consultation or registration fees charged to everyone who is seen in this facility or may be specific to family planning clients. This does not include method-specific charges for obtaining a method of family planning.	YesNoNo res	_	offered} = 'yes'	
405. On days when you offer family planning services, does this facility have trained personnel able to insert implants?	<pre>selected(\${fp_provided},'impl') O Yes O No O No response</pre>			
406. On days when you offer family planning services, does this facility have trained personnel able to remove implants?	○ Yes ○ No ○ No res	_	rovided},'impl')	
407. On days when you offer family planning services, does this facility have trained personnel able to insert	S	selected(\${fp_	<pre>provided},'iud')</pre>	



	<u> </u>
IUDs?	○ Yes○ No
	○ No response
408. On days when you offer family planning services, does this facility have trained personnel able to remove IUDs?	<pre>selected(\${fp_provided},'iud') O Yes O No O No response</pre>
409. Does this facility have the following supplies needed to insert and/or remove implants: Read out all supplies and select all that apply. Supplies do not need to be observed. Supplies must be available on the day of the interview	selected (\$ { fp_provided }, 'impl') Clean Gloves Antiseptic Sterile Gauze Pad or Cotton Wool Local Anesthetic Sealed Implant Pack Surgical Blade None of the above No response
410. Does this facility have the following supplies needed to insert and/or remove IUDs: Read out all supplies and select all that apply. Supplies do not need to be observed. Supplies must be available on the day of the interview	selected (\$ { fp_provided } , 'iud') Sponge-holding forceps Speculums (large and medium) Tenaculum Uterine Sound None of the above No response
411a.i. May I see your family planning register from the last completed month? From family planning register, record: (1) the total number of family planning visits (new and continuing) in the last completed month, for each method. (2) the number of new clients who received family planning services in the last completed month, for each method.	<pre>(selected(\${fp_provided},'fster') or selected(\${fp_provided},'mster') or selected(\${fp_provided}, Yes No No response</pre>
411a. Total number of visits: Female Sterilization	<pre>selected(\${fp_provided}, 'fster')</pre>
	<pre>selected(\${fp provided},'mster')</pre>
	\${advanced_non_other_facility} and (\${rega_note} = 'yes') Enter for past completed month. Enter -88 for do not know, enter -99 for no response.



411a. Total number of visits: Male Sterilization	
The real number of viole. Male diefinzation	
	<pre>selected(\${fp_provided},'impl')</pre>
	\${advanced_non_other_facility}
	<pre>and (\${rega_note} = 'yes') Enter for past completed month. Enter -88 for</pre>
	do not know, enter -99 for no response.
411a. Total number of visits: Implants	
411a. Number of new clients: Implants	
	<pre>selected(\${fp_provided},'iud')</pre>
	and
	<pre>\${advanced_non_other_facility} and (\${rega note} = 'yes')</pre>
	Enter for past completed month. Enter -88 for do not know, enter -99 for no response.
411a. Total number of visits: IUD	
411a. Number of new clients: IUD	
	<pre>selected(\${fp_provided},'inj')</pre>
	<pre>\${advanced_non_other_facility} and (\${rega note} = 'yes')</pre>
	Enter for past completed month. Enter -88 for do not know, enter -99 for no response.
411a. Total number of visits: Injectables	
411a. Number of new clients: Injectables	
	<pre>selected(\${fp_provided},'pill')</pre>
	and \${advanced non other facility}
	and (\${rega_note} = 'yes')
	Enter for past completed month. Enter -88 for do not know, enter -99 for no response.
411a. Total number of visits: Pill	
411a. Number of new clients: Pill	
	<pre>selected(\${fp_provided},'ec')</pre>
	<pre>\${advanced_non_other_facility} and (\${rega note} = 'yes')</pre>
	Enter for past completed month. Enter -88 for do not know, enter -99 for no response.
411a. Total number of visits: Emergency contraception	



411a. Number of new clients: Emergency contraception	n	
		<pre>selected(\${fp_provided}, 'mc')</pre>
411a. Total number of visits: Male condom		
411a. Number of new clients: Male condom		
		<pre>selected(\${fp_provided},'fc')</pre>
411a. Total number of visits: Female condom		
411a. Number of new clients: Female condom		
		<pre>selected(\${fp_provided}, 'beads')</pre>
411a. Total number of visits: Standard days / cycle bea	ads	
411a. Number of new clients: Standard days / cycle be	ads	
411b.i. May I see your family planning record book from the last completed month? From family planning record book, record the total number of family planning products sold in the last completed month, for each method. Enter -88 for do not know. Enter -99 for no response.	01	<pre>(selected(\${fp_provided},'fster') selected(\${fp_provided},'mster') or selected(\${fp_provided}, Yes No No response</pre>
		<pre>\${regb_note} = 'yes'</pre>
411b. From family planning record book, record: The total number of family planning products sold in the last completed month, for each method.		
Number of units sold or provided: Implants	İ	<pre>selected(\${fp_provided},'impl')</pre>
Number of units sold or provided: IUD		selected(\${fp_provided},'iud')
Number of units sold or provided: Injectables		selected(\${fp_provided},'inj')
Number of units sold or provided: Pill		selected(\${fp_provided},'pill')



Number of units sold or provided: Emergency contraception		sele	cted(\${fp_pro	vided},'ec')
Number of units sold or provided: Male condom		sele	cted(\${fp_pro	<pre>vided},'mc')</pre>
Number of units sold or provided: Female condom		sele	cted(\${fp_pro	vided},'fc')
Number of units sold or provided: Standard days / cycl beads	e sel	.ecte	d(\${fp_provid	ed},'beads')
				201 = 1
412. In the past 12 months, have there been any meetings where service statistics (or inventory) for family planning are discussed with staff?	○ Yes○ No○ No re	espons	se	201 1
413. May I see any wall charts, graphs, written reports, minutes or other written materials produced with service data from the past 12 months? Select all relevant types of documentation observed. Posters or other information, education and communication (IEC) materials that do not contain service data should not be counted.	□ Obse	rved w rved w rved o	ervice_stats_; vall chart / graph vritten report / min ther means of rev served	utes
414a. May I see the room where examinations for family planning are conducted?	YesNoNo re	espons		1 AND 006 ≠ 5
			\${exam_room_p	ermission} = 'yes'
414b. For each of the following items, check to see wh is either in room where examinations are conducted or adjacent room.O: Observed; RU: Reported, Unseen; NA: Not Available	in an			414a = 1
	0	•	RU	NA
Running water (piped)	0		\circ	0
Other running water (bucket with tap or pour pitcher)	0		0	0
Water in bucket or basin (water reused)	0		0	\circ
Hand-washing soap	0		0	0
Single-use hand drying towels	0		0	0
Waste receptacle with lid and plastic liner			0	0
Sharps container	0		0	0
Disposable latex gloves			0	0

Disinfectant



Disposable needles and syringes	0	0	0
Auditory privacy	0	0	0
Visual privacy	\circ	\circ	0
Examination table	\circ	0	0
Client educational materials on FP	0	0	0
NOTE: Questions 416a-c will repeat for each of the methods provided at this SDP. Methods selected in 401b: [METHODS SELECTED]		\${methods_se	lected} != ''
416a. You mentioned that you typically provide Implants at this facility, can you show them to me?	○ In-stock an○ In-stock bu○ Out of stoc○ No respons	t not observed k	201 = 1
416b. How many days have Implants been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.			416a = 3
416c. Have Implants been out of stock at any time in the last 3 months?	○ Yes○ No○ Do not kno○ No respons	w	416a = 1 or 2
416a. You mentioned that you typically provide IUDs at this facility, can you show them to me?	○ In-stock an○ In-stock bu○ Out of stoc○ No response	t not observed k	201 = 1
416b. How many days have IUDs been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.			416a = 3
416c. Have IUDs been out of stock at any time in the last 3 months?	○ Yes○ No○ Do not kno○ No respons	w	416a = 1 or 2
416a. You mentioned that you typically provide Injectables at this facility, can you show them to me?	O In-stock an	d observed t not observed k	vided},'inj')



416b. How many days have Injectables been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response. [ዛሬ ብቻ ከሆነ 1 አስንቢ፡፡ አላውቅም ከሆነ -88 አስንቢ፡፡ ምልስ አልተሰጠም ከሆነ -99 አስንቢ፡፡]	(\${stock_injectables} = 'outstock')
416c. Have Injectables been out of stock at any time in the last 3 months?	<pre>(\${stock_injectables} =</pre>
416a. You mentioned that you typically provide Pills at this facility, can you show it to me?	201 = 1 ○ In-stock and observed ○ In-stock but not observed ○ Out of stock ○ No response
416b. How many days have Pills been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.	416a = 3
416c. Have Pills been out of stock at any time in the last 3 months?	416a = 1 or 2 ○ Yes ○ No ○ Do not know ○ No response
416a. You mentioned that you typically provide Emergency Contraception at this facility, can you show it to me?	201 = 1 ○ In-stock and observed ○ In-stock but not observed ○ Out of stock ○ No response
416b. How many days has Emergency Contraception been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.	416a = 3
416c. Has Emergency Contraception been out of stock at any time in the last 3 months?	416a = 1 or 2 ○ Yes ○ No ○ Do not know ○ No response
416a. You mentioned that you typically provide Male condoms at this facility, can you show it to me?	selected(\${fp_provided},'mc') O In-stock and observed O In-stock but not observed Out of stock



	○ No response
416b. How many days have Male condoms been out	
of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.	<pre>(\${stock_male_condoms} = 'outstock')</pre>
416c. Have Male condoms been out of stock at any time in the last 3 months?	<pre>(\${stock_male_condoms} =</pre>
416a. You mentioned that you typically provide Female condoms at this facility, can you show it to me?	selected(\${fp_provided},'fc') O In-stock and observed O In-stock but not observed O Out of stock No response
416b. How many days have Female condoms been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.	<pre>(\${stock_female_condoms} =</pre>
416c. Have Female condoms been out of stock at any time in the last 3 months?	<pre>(\${stock_female_condoms} =</pre>
416a. You mentioned that you typically provide Standard Days/Cycle Beads at this facility, can you show them to me?	selected(\${fp_provided}, 'beads') O In-stock and observed In-stock but not observed Out of stock No response
416b. How many days have Standard Days/Cycle Beads been out of stock? Enter 1 if only today. Enter -88 for do not know. Enter -99 for no response.	(\${stock_beads} = 'outstock')
416c. Have Standard Days/Cycle Beads been out of stock at any time in the last 3 months?	<pre>(\${stock_beads} = 'instock_obs') or (\${stock_beads} = 'instock_unobs')</pre>



	○ No res	sponse	
417a. May I see the room where contraceptive supplies are stored? If you are already in the room, select "yes."	○ Yes○ No○ No res	sponse	201 = 1
		\${storage	e_check} = 'yes'
417b. Observe the place where contraceptive supplies stored and report on the following condition.	are		417a = 1
		Yes	No
Are all the methods off the floor?		\circ	0
Are all the methods protected from water?		\circ	0
Are all the methods protected from the sun?		\circ	0
Is the room clean of evidence of rodents (bats, rats) or pests (roaches)?		0	0

Section 5: Family Planning Service Integration		
501. Which of the following services are provided at this facility?	009a = 1 AND 006 ≠ 5 □ Antenatal □ Delivery □ Postnatal	
Read all options and select all that apply.	□ Post-abortion□ None of the above□ No response	
502. Which of the following is discussed with the mother after delivery or during the first postnatal visit? Read all options and select all that apply. If your respondent is not involved in delivery or postnatal care, ask if they can refer you to someone at the facility who provides these services.	501: Delivery = 1 OR Postnatal = 1 Return to fertility Healthy timing and spacing of pregnancies Immediate and exclusive breastfeeding Family planning methods available to use while breastfeeding Lactational Amenorrhea Method and transition to other methods Long-acting method options None of the above No response	
503. Is the woman offered a method of family planning during the postnatal visit?	501: Postnatal = 1 AND 201 = 1 Yes No No response	
504. During post-abortion visits, which of the following	501: Postabortion = 1	



So all annual and a Maria Hara all and	Γ= =
is discussed with the client:	☐ Post-abortion mental health
Read all options and select all that apply.	☐ Return to fertility
	☐ Healthy timing and spacing of pregnancies
	☐ Long-acting method options
	☐ FP methods for birth spacing
	□ None of the above
	□ No response
	,
	501: Postabortion = 1 AND 201 = 1
505. Is the woman offered a method of family planning	○ Yes
during the post-abortion visit?	○ No
	○ No response
	009a = 1
506. Does this facility offer any service related to	○ Yes
diagnosis, treatment, or supportive services for HIV?	○ No
	○ No response
	· ·
508a. When a client comes in for HIV services, are	$506 = 1 \text{ AND } 006 \neq 5$
they offered condoms by the HIV service provider?	○ Yes
If your respondent is not involved in HIV service provision,	○ No
ask if they can refer you to someone at the facility who	O Do not know
provides these services.	○ No response
	506 = 1 AND 006 ≠ 5
	○ Yes
508b. Does the HIV service provider offer them any	○ No
other method of contraception besides condoms?	
	O Do not know
	○ No response
	$508b = 2 \text{ AND } 006 \neq 5$
TOO. And IIIV disease since information on whom they	○ Yes
508c. Are HIV clients given information on where they can obtain contraception elsewhere?	○ No
can obtain contraception elsewnere?	O Do not know
	○ No response
	$508c = 1 \text{ AND } 006 \neq 5$
	Within facility only
508d. Are HIV clients referred for family planning	Outside facility only
services within the facility, outside the facility, or both?	○ Both
	O Don't know
	○ No response
	1
SECTION 6: POST	-ABORTION CARE
This final section is on post-abortion care. If someone	\${consent_obtained} and
else is the most appropriate person to provide this	\${advanced_facility}
information, please introduce me to that person.	○ OK



Press OK to continue.	
For the next questions, we are referring to post- abortion care for spontaneous or induced abortions. Press OK to continue.	<pre>\${consent_obtained} and \${advanced_facility} OK</pre>
GGR_601. Does this facility provide post-abortion care to women with complications from either miscarriage or induced abortion?	\${consent_obtained} and \${advanced_facility} O Yes O No O Do not know No response
GGR_602. Has this facility treated at least 1 PAC patient in the last 12 months?	\${pac_capable} = 'yes' O Yes O No O Do not know O No response
The respondent answered 'do not know' to the previous question. Make sure this is the most knowedgable person about post-abortion care at this facility.	\${pac_patient_12m} = '-88'
GGR_603. Which of the following methods are used for treatment of post-abortion complications in this facility? Read all options out loud and select all that apply.	\${pac_capable} = 'yes' Misoprostol (not in combination with other methods) Mifepristone and misoprostol (not in combination with other methods) Manual vacuum aspiration (MVA) / electric vacuum aspiration (EVA) Dilation & evacuation (D&E) Dilation & curettage (D&C) Laparotomy Other (specify) None of the above Do not know No response
Specify "other" Which of the following methods are used for treatment of post-abortion complications in this facility?	<pre>selected(\${pac_methods}, 'other')</pre>
GGR_604. Can you show me the manual vacuum aspirator (MVA) equipment? Is it functional? GGR_605. Does this facility provide any of the	selected (\$ {pac_methods}, 'mva') ○ Functional and observed ○ Function and not observed ○ Not functional and observed ○ Not functional and not observed ○ Do not know ○ No response
following medicines? Anything else that a woman	<pre>\${consent_obtained} and</pre>



could use to bring back her period if she suspects that she is pregnant, or have an abortion? Read all options out loud and select all that apply. Specify "other"	((\${facility_type} = 'pharmacy') or (\${facility_type} = 'chemist')) ☐ Mifepristone ☐ Misoprostol ☐ Contraceptive pills for the purpose of bringing back one's period ☐ Other (specify) ☐ None of the above ☐ Do not know ☐ No response
Does this facility provide any of the following medicines? Anything else that a woman could use to bring back her period or have an abortion?	<pre>selected(\${pac_meds}, 'other')</pre>
GGR_606a. Can you show me this facility's current stock of mifepristone? If no, probe: is mifepristone out of stock?	selected(\${pac_methods},
GGR_606b. Can you show me this facility's current stock of misoprostol? If no, probe: is misoprostol out of stock?	selected(\${pac_methods}, 'miso') or
GGR_606c. Does this facility currently have misoprostol in stock? Can you show it to me? If no, probe: is misoprostol out of stock?	(\${miso_obs} = '') and (\${advanced_facility}) and (\${consent_obtained}) O In-stock and observed In-stock but not observed Out of stock Do not stock No response
GGR_607. In this facility, are post-abortion patients treated as outpatients only, inpatients only, or both? If respondent is unsure, you can remind them that outpatients are not admitted and inpatients are admitted. If the respondent answers, "don't know", PROBE: Is there someone else I should be asking about post abortion caseloads?	\${pac_patient_12m} = 'yes' O Inpatient only Outpatient only Both Do not know



	○ No response
For the next questions, please provide your responses from memory without referring to log books.	<pre>(\${inpatient_outpatient} != '') and (\${inpatient_outpatient} != '-99')</pre>
GGR_608. During an AVERAGE month, about how many post-abortion care patients would you estimate are treated as OUTPATIENTS in this facility as a whole? Please remember to include all patients treated for extremely serious or minor abortion complications, whether the abortions were spontaneous or induced. <i>0 is a possible answer. Enter -88 for do not know and -99 for no response</i>	<pre>(\${inpatient_outpatient} = 'out') or (\${inpatient_outpatient} = 'both')</pre>
GGR_609. In the LAST COMPLETED month, about how many post-abortion care patients would estimate are treated as OUTPATIENTS in this facility as a whole? 0 is a possible answer. Enter -88 for do not know and -99 for no response	<pre>(\${inpatient_outpatient} = 'out') or (\${inpatient_outpatient} = 'both')</pre>
GGR_610. During an AVERAGE month, about how many post-abortion care patients would you estimate are treated as INPATIENTS in this facility as a whole? Please remember to include all patients treated for extremely serious or minor abortion complications, whether the abortions were spontaneous or induced. 0 is a possible answer. Enter -88 for do not know and -99 for no response	<pre>(\${inpatient_outpatient} = 'in') or (\${inpatient_outpatient} = 'both')</pre>
GGR_611. In the LAST COMPLETED month, about how many post-abortion care patients would you estimate are treated as INPATIENTS in this facility as a whole? 0 is a possible answer. Enter -88 for do not know and -99 for no response	<pre>(\${inpatient_outpatient} = 'in') or (\${inpatient_outpatient} = 'both')</pre>
Just to confirm what you have told me, in an AVERAGE month, your facility treated \${outpatient_avg_m_disp} OUTPATIENTS and \${inpatient_avg_m_disp} INPATIENTS for abortion complications, for a total of \${patient_tot_avg_m_disp} cases. Is this correct?	<pre>(\${outpatient_avg_m} >= 0) or (\${inpatient_avg_m} >= 0) O Yes O No</pre>
And in the LAST COMPLETED month, your facility treated \${outpatient_last_m_disp} OUTPATIENTS and \${inpatient_last_m_disp} INPATIENTS for abortion complications, for a total of \${patient_tot_last_m_disp}. Is this correct?	<pre>(\${outpatient_last_m} >= 0) or</pre>
GGR_612. How many of the \${patient_tot_last_m_disp} post-abortion care patients treated in the last completed month had complications that included a perforated uterus or gut requiring laparotomy, intensive care unit admission, or organ failure? Please include cases whether or not the patient survived. 0 is a possible answer. Probe: If DK, ask for the approximate number of patients. Enter -88 for don't know and -99 for no response.	<pre>\${patient_tot_last_m_disp} > 0</pre>



GGR_613. How many of the \${patient_tot_last_m_disp} post-abortion care patients were referred to your facility after having been treated at another facility in the last completed month? 0 is a possible answer. Probe: If DK, ask for the approximate number of patients. Enter -88 for don't know and -99 for no response.	<pre>\${patient_tot_last_m_disp} > 0</pre>
GGR_614. How many of the \${patient_tot_last_m_disp} post-abortion care patients did you refer to another facility to complete treatment, after having treated them (either as inpatients or outpatients), in the last completed month? 0 is a possible answer. Probe: If DK, ask for the approximate number of patients. Enter -88 for don't know and -99 for no response.	<pre>\${patient_tot_last_m_disp} > 0</pre>
GGR_615. Which of the following services and drugs does this facility provide? Read all options aloud. Select all that apply.	\${consent_obtained} and \${advanced_facility} Antibiotics Analgesics Local anesthesia Intravenous replacement fluids Oxytocics Blood transfusion Laparotomy Do not know No response
GGR_615b. According to the facility records, in the last completed month how many post-abortion care patients were treated as inpatients in this facility as a whole? 0 is a possible answer. Enter -88 for don't know and -99 for no response	\${pac_capable} = 'yes'
We just asked you a number of questions about post- abortion care. This next section asks about safe abortion care at your facility. By safe abortion care, we mean care for women who are pregnant and who wish to intentionally induce an abortion at your facility.	<pre>\${consent_obtained} and \${advanced_facility}</pre>
GGR_616. Does this facility provide safe abortion care services?	\${consent_obtained} and \${advanced_facility} O Yes O No O Do not know O No response
GGR_617a. How many safe abortions are provided in an AVERAGE month? 0 is a possible answer. Enter -88 for don't know and -99 for no response	<pre>\${abt_provide_yn} = 'yes'</pre>
GGR_617b. How many safe abortions were provided	\${abt_provide_yn} = 'yes'



in the LAST COMPLETED month?	
0 is a possible answer.	
Enter -88 for don't know and -99 for no response	
GGR_618. How many of the \${abt_count_last_m} safe abortions provided in the last completed month were for pregnancies more than 12 weeks? 0 is a possible answer. Enter -88 for don't know and -99 for no response	\${abt_count_last_m} > 0
GGR_619. How many abortion clients were referred to your facility in the last completed month by Health Extension Workers?	
Note: This does not include referrals directly from Health Posts, but instead the referrals the HEW provide in the community.	<pre>\${abt_count_last_m} > 0</pre>
0 is a possible answer.	
Enter -88 for don't know and -99 for no response	
GGR_620. How many abortion clients were referred to your facility in the last completed month by public health facilities? 0 is a possible answer.	<pre>\${abt_count_last_m} > 0</pre>
Enter -88 for don't know and -99 for no response	
GGR_621. How many abortion clients were referred to your facility in the last completed month by NGOs? 0 is a possible answer. Enter -88 for don't know and -99 for no response	\${abt_count_last_m} > 0
GGR_622. How many abortion clients were referred to your facility in the last completed month by private health facilities? 0 is a possible answer. Enter -88 for don't know and -99 for no response	\${abt_count_last_m} > 0
GGR_626. How many safe abortion clients have you referred to a/another facility for an abortion in the last completed month? 0 is a possible answer. If 0, probe: is this because no clients needed a referral in the last completed month or because this facility does not provide outside referrals for abortion services? Enter -77 if facility does not provide referrals for abortion services. Enter -88 for don't know and -99 for no response	\${consent_obtained}
GGR_627. According to the facility records, in the last completed month how many safe abortion care patients were treated as inpatients in this facility as a whole? 0 is a possible answer. Enter -88 for don't know and -99 for no response	\${abt_provide_yn} = 'yes'

CRVS Questions

NOTE: I would like to ask you some questions related to the birth notification.



CRVS_001. Does this health post provide birth notification forms for babies born in the catchment area (Kebelle)? Please show the sample birth notification form to the respondent	<pre>\${facility_type} = 'health_post' Yes, all births Yes, some births No Do not know No response</pre>
CRVS_002. Why is this health post not providing birth notification forms to all babies born in the catchment area (Kebelle)? Multiple responses are possible.	(\${birth_notification} = 'some') or
CRVS_003. Does this facility provide birth notification forms for babies delivered at this facility? Hint: Please show the sample birth notification form to the respondent Exclude facilities which are not providing delivery services	selected(\${antenatal}, 'delivery') Yes, all births Yes, some births No Do not know No response
CRVS_004. Why is this facility not providing birth notification forms to all babies born in this facility? <i>Multiple responses are possible.</i>	(\${staff_birth_notify} = 'some') or
CRVS_005a. Has this facility been out of birth notification forms anytime in the past 12 months?	<pre>(\${staff_birth_notify} = 'some') or (\${staff_birth_notify} = 'all') O Yes O No O Do not know O No response</pre>
CRVS_005b. When was the last time this facility was out of birth notification forms?	\${birth_form_out_12m} = 'yes' O Less than 1 month ago O Between 1 and 6 months ago O More than 6 months ago



	O Do no			
	O No res	sponse		
	<pre>(\${birth_notification} = 'some') or (\${birth_notification} = 'all') or (\${staff_birth_notify} = 's</pre>			
CRVS_006a. In this facility who is responsible for providing the hirth notification forms to clients?	□ Head o	of the facility of the department		
providing the birth notification forms to clients? Multiple responses are possible.		☐ Either of the HEWs		
Manipo , osponess 2. o possess.		n who attended the birth		
	☐ Do not	e is responsible t know		
	□ No res			
CRVS_006b. Has anyone from this facility attended a training by the Vital Events Registration Agency (VERA)?	C	<pre>ted(\${birth_form_who}, 'head') or selected(\${birth_form_who}, w') or selected(\${birth_form</pre>		
· · · · ·	O Do no	ot know		
	O No res	sponse		
CRVS_006c. When is the last time this facility received a supervisory visit from VERA staff?	Less tBetweeMoreDo no			
	○ No res			
CRVS_007. Has this facility ever provided a report to VERA?	○ Yes○ No○ Do no	ot know sponse		
		<pre>\${vera_report_ever} = 'yes'</pre>		
CRVS_007a. When is the last time your facility reported the number of births having occurred at this facility to VERA? If respondent knows the year, but not month enter 'Do not know' for month Select 'Do not know' for month and '2020' for year to indicate 'No Response'.				
Month:				



Year:		 Miyazya Ginbot Sene Hamle Nehasa Pagumiene Do not know	Year:
			, -
CRVS_007b. How did you transmit this report to VERA?		know	ce
094. Ask permission to take a photo of the entrance of the facility. Did you get consent to take the photo?	○ Yes○ No		009a = 1
Thank the respondent for his / her time. The respondent is finished, but there are still more questions for you to complete outside the facility.		\${availab	le} = 'yes'
Location and Que	estionna	ire result	
095. Take a GPS point outside near the entrance to the facility. Record location when the accuracy is smaller than 6m.			094 = 1
096. Ensure that no people are in the photo.			Always
097. How many times have you visited this service delivery point for this interview?	1st time 2nd time 3rd time	ne	Always
098. In what language was this interview conducted?	EnglishAmhariOromiffTigringOther	c fa	009a = 1
099. Questionnaire Result Record the result of the questionnaire.	○ Comple○ Not at f		Always



OPostponed
○ Postponed○ Refused
O Partly completed
Partly completedOther