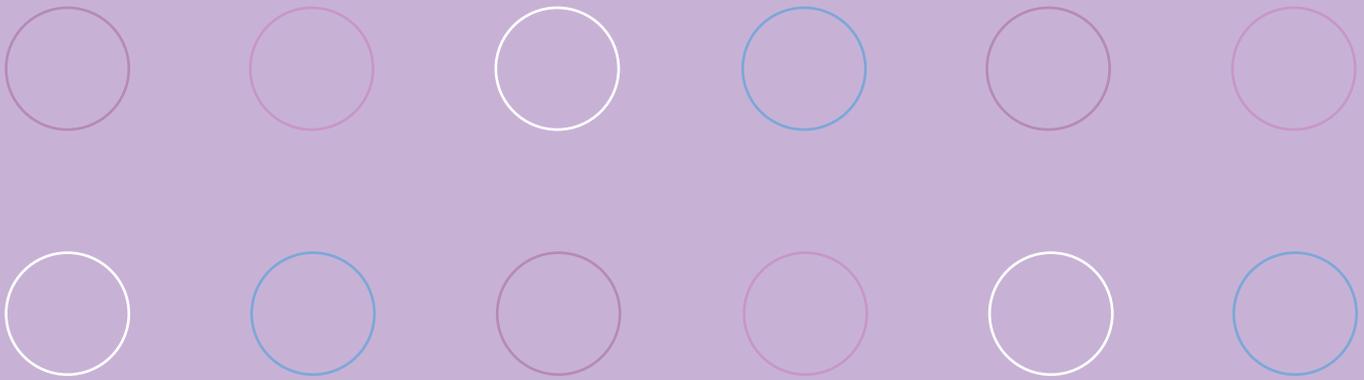


CARIBBEAN
EXPERIENCES
WITH COLLECTING
DATA ON
VIOLENCE
AGAINST WOMEN
AND GIRLS



CAROL WATSON WILLIAMS





Caribbean Development Bank

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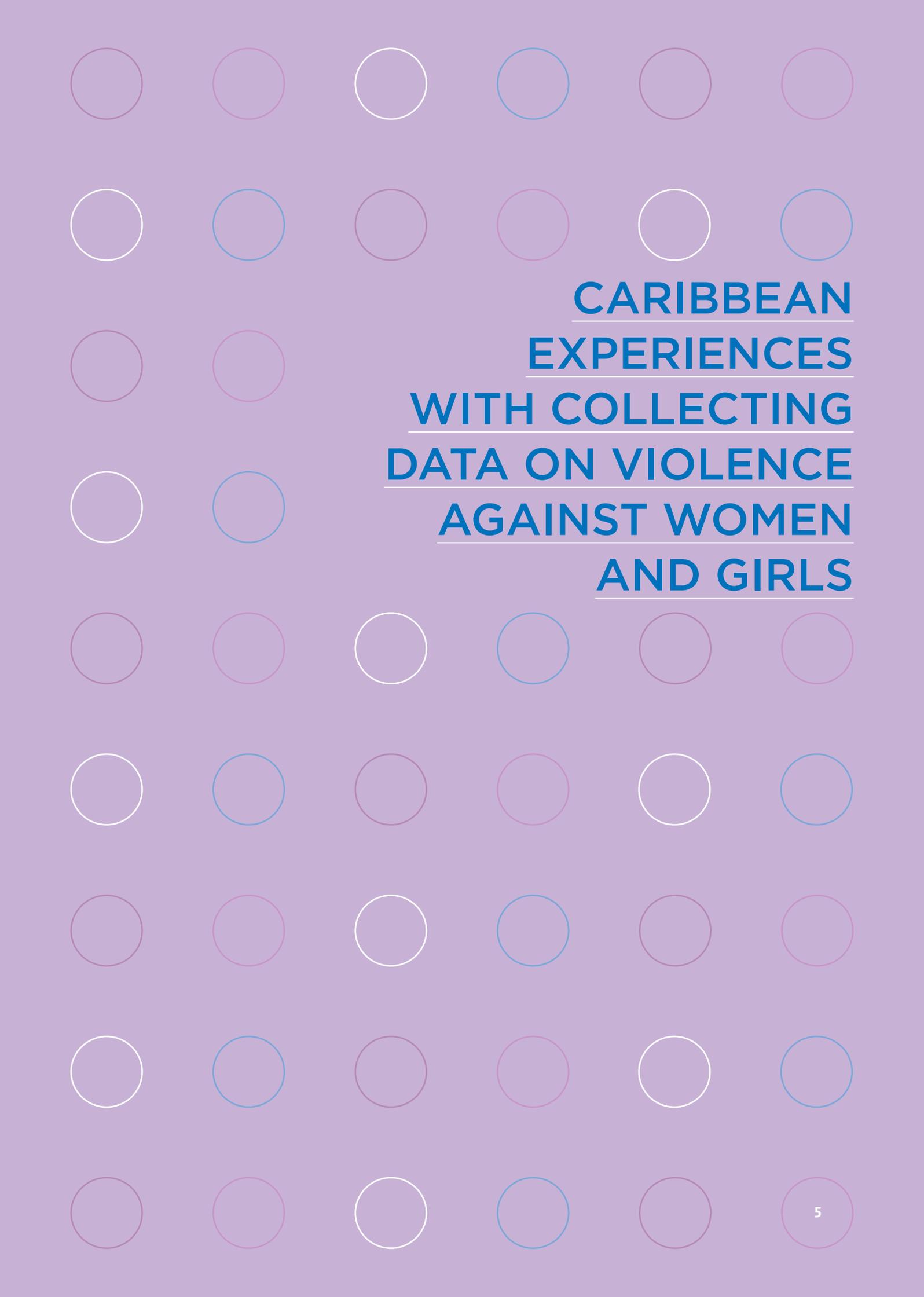
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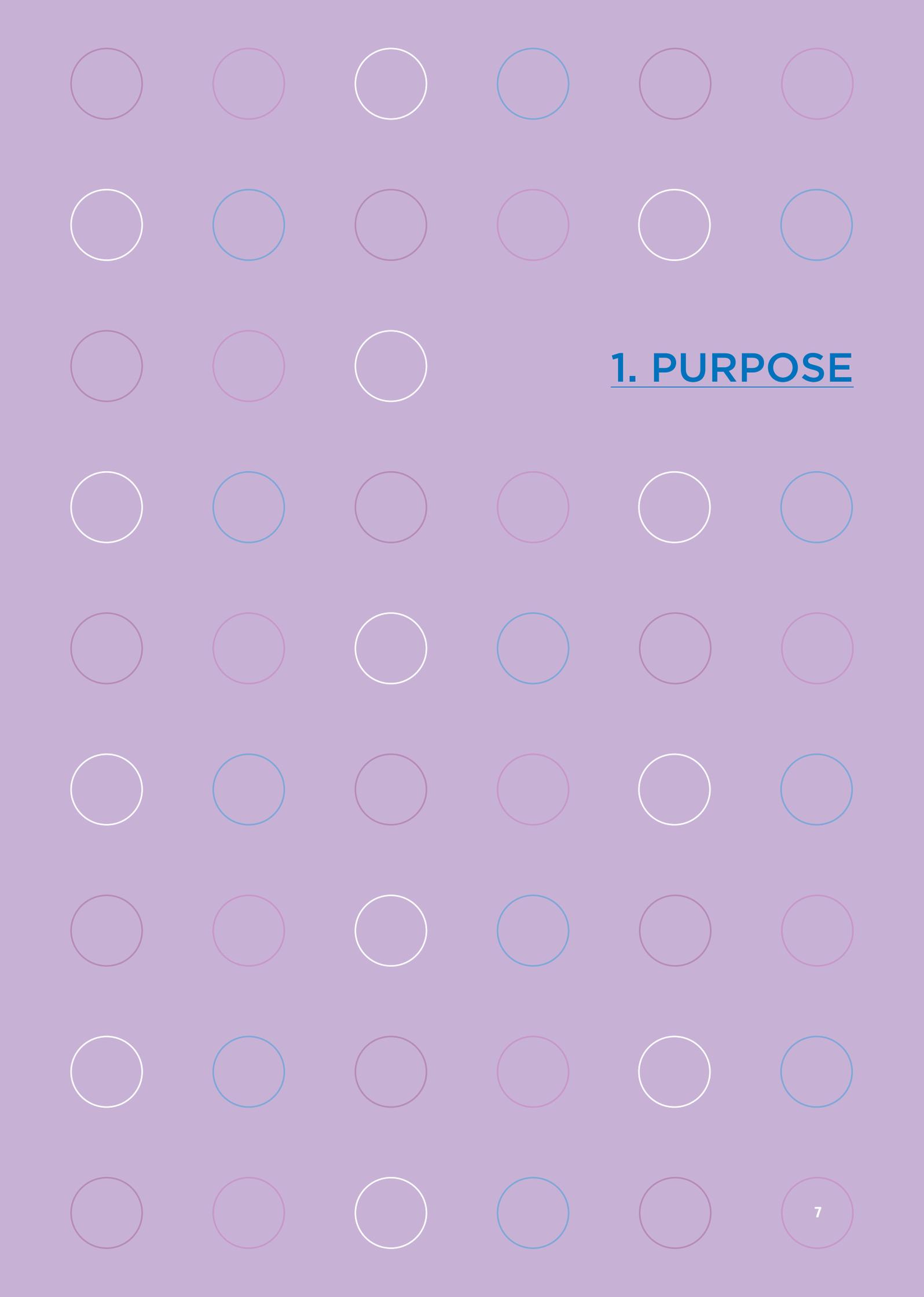
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**CARIBBEAN
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1. PURPOSE

Violence against women and girls (VAWG) is a clear barrier to sustainable development. The Sustainable Development Goals (SDGs) that drive the 2030 development agenda have identified the reduction of VAWG as a global development priority, as a catalytic factor for achieving the SDGs and as key to achieving peace, ensuring economic productivity, securing rights, promoting justice and fostering social cohesion (goals 5 and 16).¹

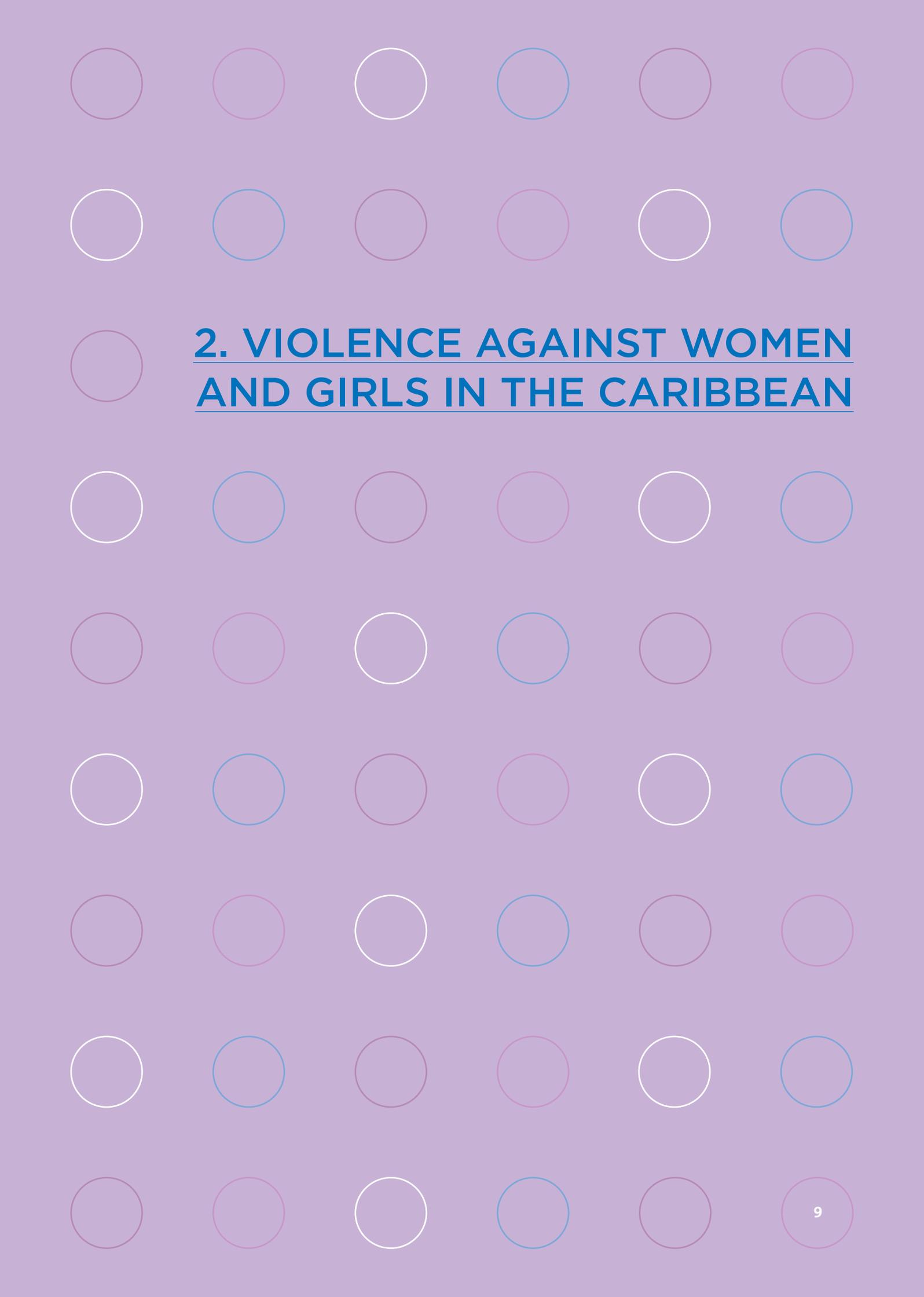
From 2016 to 2018, five CARICOM Member States² conducted National Prevalence Surveys on Gender-based Violence. This report examines the processes used to collect data in the region, highlights the key takeaways from survey implementation, captures context-specific experiences in collecting data on VAWG and presents the key lessons learned from the countries' experiences. Funded by UN Women, UNDP, USAID, the Inter-American Development Bank and the Caribbean Development Bank, the surveys utilized the methodology that the World Health Organization (WHO) developed to collect prevalence data on VAWG. By establishing the prevalence of VAWG and examining its causes and consequences, the surveys make important additions to the information available to the region and to efforts to end VAWG.

The main purpose of this report is to provide a resource from which countries in the region can draw good practices for future survey rounds. Used alongside the Technical Guidance Note,³

this document provides governments and NGOs with an important starting point in planning and implementing activities to improve what we know about VAWG in the Caribbean. The report also gives insights into how the WHO methodology for collecting data on VAWG was 'translated' in the region and insights into the challenges and successes of implementing the survey and qualitative study and the accompanying ethical protocols.

- 1 UNDP and UN Women (2017). From Commitment to Action: Policies to End Violence against Women in Latin America and the Caribbean; Regional Analysis document. Available at: <http://www.latinamerica.undp.org/content/dam/rblac/docs/Research%20and%20Publications/Empoderamiento%20de%20la%20Mujer/UNDP-RBLAC-ReportVCMEnglish.pdf>
- 2 Grenada, Guyana, Jamaica, Suriname and Trinidad and Tobago.
- 3 The Technical Guidance Note for the CARICOM National Prevalence Surveys on Gender-Based Violence examines the options available to CARICOM member states for collecting

prevalence data on VAWG; makes recommendations on the most effective avenues via which prevalence data on VAWG in the region can be collected; provides guidance to support the implementation of the qualitative study to complement the prevalence survey; and provides guidance to support the implementation of the CARICOM Model of the WHS in the Caribbean, guiding the systematic process of planning and executing the survey and disseminating the survey results.



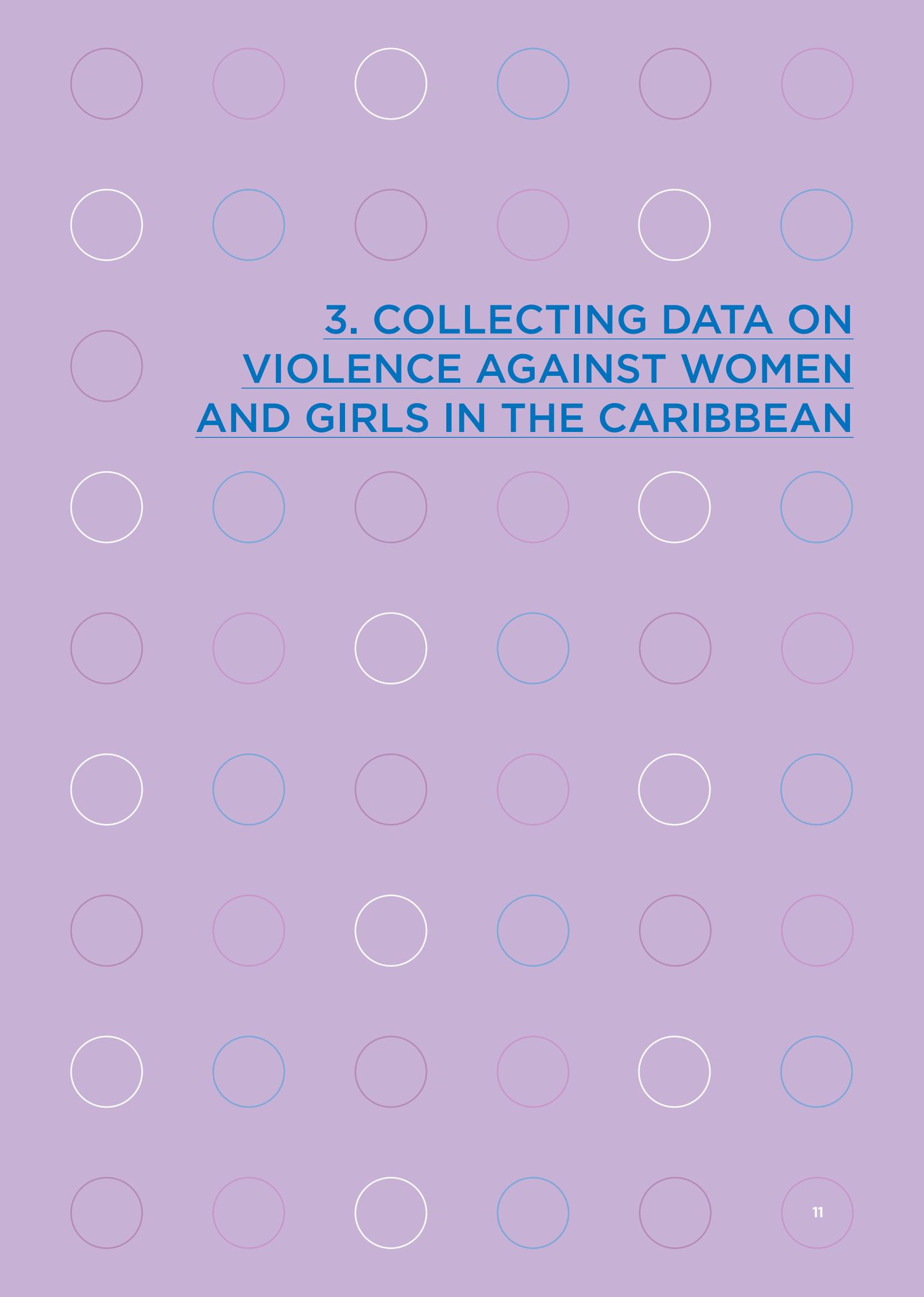
2. VIOLENCE AGAINST WOMEN AND GIRLS IN THE CARIBBEAN

The prevalence of VAWG in the Caribbean, one of the highest in the world, has a long history. This violence is so entrenched and normalized that both men and women have a high tolerance for its manifestations, particularly when perpetrated in the context of intimate partner relationships. Data from a variety of sources⁴ confirm that young people also hold these views, raising concerns about the intergenerational transmission of VAWG and pointing to the gaps that remain in transforming attitudes and practices in this area.

VAWG is driven by a complex intersection of cultural, economic, social and political factors. Consequently, addressing the issue requires a comprehensive understanding of the interplay of accepted norms and attitudes towards gender roles, what it means to be a woman or man in society, and the factors that shape this understanding. By reinforcing notions of female subordination and male domination, VAWG undermines women's position in Caribbean society and perpetuates dangerous stereotypes of manhood.

Notwithstanding several legislative and programmatic responses to VAWG, women across the region continue to face significant threats to life and well-being in their homes and in their intimate partner relationships.

4 Including Reproductive Health Surveys, the Women's Health Surveys, and the qualitative studies conducted as part of the Women's Health Survey process.



3. COLLECTING DATA ON VIOLENCE AGAINST WOMEN AND GIRLS IN THE CARIBBEAN

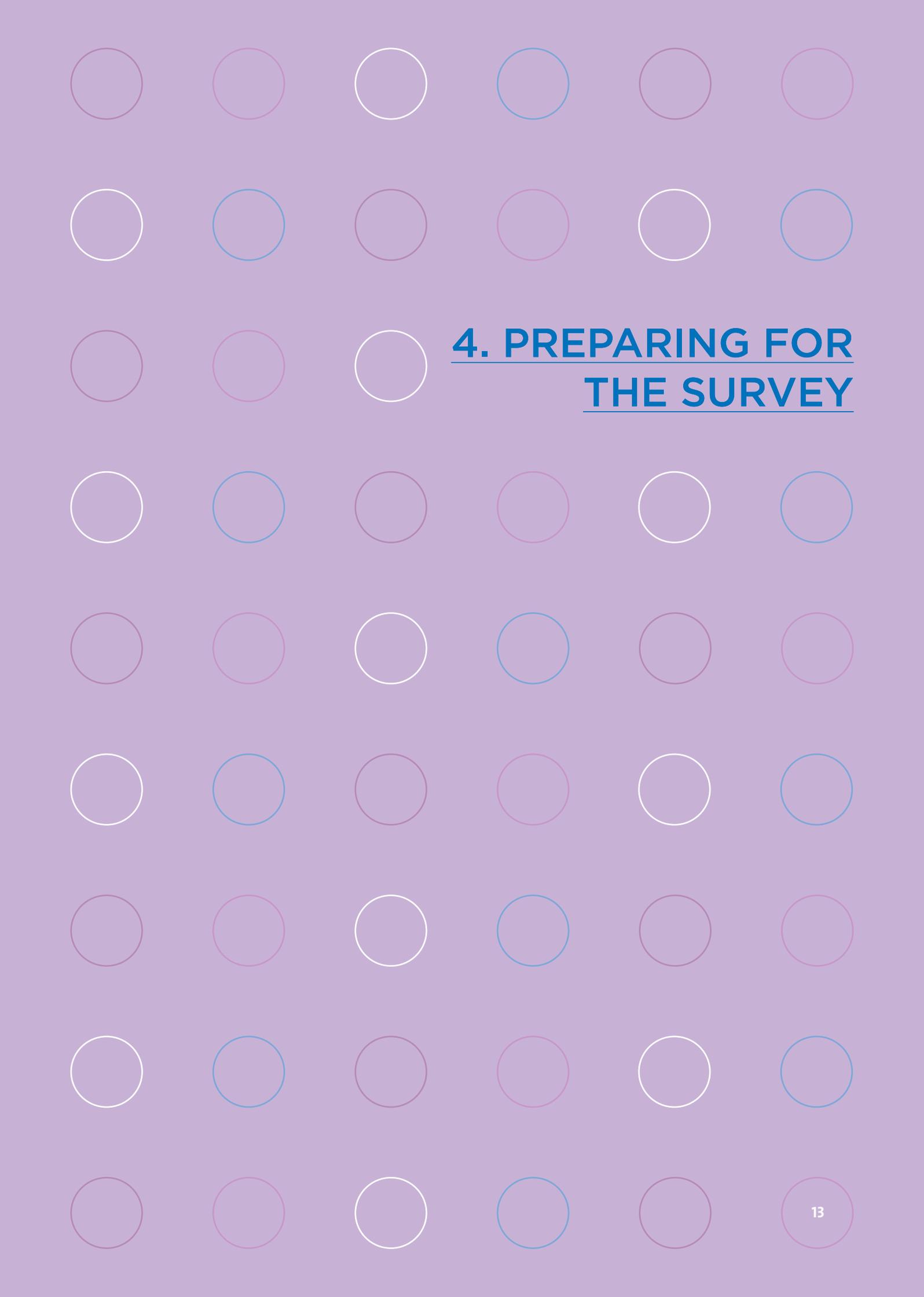
Although government agencies responsible for gender equality, health-sector surveillance units and the police have made efforts to record and track the incidence of gender-based violence (GBV) in the Caribbean, the lack of comprehensive, systematic, nationally-owned data remains a serious bottleneck (Jensen, and St. Bernard, 2014). Consequently, the region has been unable to assess its progress in meeting international and national commitments to ending VAWG. In addition, countries have been unable to fulfil their commitments under international treaties on ending GBV, which require that countries ensure the availability of: A) population-based data on the prevalence, incidence, type, nature and scope of the most common forms of GBV in the country; and B) administrative or service-based data on the sectoral responses and whether or not these responses are meeting the demands of those who have experienced violence (ibid.). Regional governments and civil society organizations have found this lack of data to be a source of concern.

Countries in the region have not conducted surveys specifically designed to collect data on VAWG in all its dimensions. Instead, data on VAWG has traditionally been collected via household surveys with a broader remit (e.g. reproductive health surveys, crime and victimization surveys and multiple indicators cluster surveys) and police statistics. Although household surveys have been used to assess the extent of VAWG, those surveys' focus on multiple issues inhibits the development of a comprehensive picture of the prevalence, manifestations, causes and consequences of VAWG.

Police statistics give only a partial picture of violence against women. The interplay of social acceptance, stigma and lack of trust in the willingness and ability of the police to act result in the majority of VAWG incidents not being reported to the police. Hence, to get more precise data on

prevalence rates, causes, women's experiences with violence and the consequences for them and their families, it is important to implement surveys that specifically focus on VAWG.

The data from these surveys provide critical information for the design of interventions to prevent VAWG, to protect those who have experienced violence and to prosecute perpetrators. Such data helps to challenge entrenched views of women's silence and acceptance of violence, to highlight the intergenerational nature of abuse and to shape our understanding of the consequences of violence and how women cope with abuse. Without this data, it is difficult to effectively target interventions that respond to the actual reality of women's experiences rather than perceptions of this reality.



4. PREPARING FOR THE SURVEY

In consultation with UN Women and other donor partners, CARICOM decided to undertake comprehensive studies of VAWG in the Caribbean because, despite the indicative statistics, no Member State has generated regular and comprehensive national data on the prevalence, nature and response to GBV (including sexual violence).

The United Nations supported CARICOM statistical experts' and governments' review of various models of assessing the prevalence of gender-based violence. The experts and governments agreed to pilot and adopt a CARICOM Model on National Prevalence Surveys on Gender-based Violence. The CARICOM Model was based on the original WHO global model for assessing the prevalence of intimate partner violence (with a specific focus on women as the most affected group). It was agreed that once adopted, countries should implement the CARICOM Model at a minimum of once every ten years.

To pilot the model in the region, a partnership was developed among some pilot country governments, UN Women, UNDP, USAID, the Inter-American Development Bank and the Caribbean Development Bank. Jamaica was selected to be the first nationally-led Prevalence Study on GBV in CARICOM. Pilot surveys were subsequently fielded in Trinidad and Tobago, Grenada, Guyana and Suriname.

Although administrative arrangements varied across countries, some features were present in each country and formed the core of the preparations for fielding the survey. These core features were:

1. The availability of external technical support;
2. The establishment of a national steering committee and a research subcommittee;

3. Recruitment of a national coordinator; and
4. Recruitment and training of interviewers.

Preparation for the surveys began almost 12 months before the actual fielding. This preparation was important because this was the first time that countries were conducting such a survey; although all countries had significant experience with fielding large-scale national surveys, none had ever conducted a survey focusing solely on VAWG. Further, this was the first time the WHO Methodology and instrument were being used in the region. Therefore, the logistical foundation had to be built from the ground. The following section outlines the processes employed and the lessons learned from survey implementation.

4.1 Availability of External Technical Assistance

An external organization, the Global Women's Institute of George Washington University, provided technical support to all countries that participated in piloting the surveys.⁵ Successfully implementing the WHO methodology required layers of expertise, not all of which was available in each pilot country. For example, the approach calls for expertise not only in fielding a survey, but also in gender analysis, the ethics and safety considerations in collecting data on VAWG, team building and calculating the prevalence figures for key VAWG indicators. Given the complexity of the WHO questionnaire, it was also very important to have guidance from persons who have worked extensively with the instrument in a variety of settings.

Because the activity was new to the region, there was no existing expertise in how to execute the WHO methodology, how to train interviewers in

⁵ The Global Women's Institute has extensive experience in fielding the WHO model of VAWG prevalence surveys in countries across the world.

the ethical protocols related to collecting data on VAWG, or how to analyse the data to provide accurate figures of key indicators of women's experiences with violence. Hence, international and regional development and donor partners supported access to technical expertise in these critical areas. This technical expertise was important in several ways. It provided the local teams with access to the experience of persons who had conducted similar surveys in several countries across the world; it facilitated the transfer of knowledge to local teams, building capacity for future rounds of the survey; and it ensured that the pilots met international standards and produced high-quality data that was internationally comparable.

In addition to using a team of consultants to advise on methodology and to train and support analysis, consultants were hired in areas in which the executing country may have had a particular expertise gap. In Guyana, for example, a consultant survey methodologist was hired to support the staff at the Bureau of Statistics to design the sample, program the tablets with the instrument used to collect the data, train the interviewers and supervisors to use the tablets to collect and upload the data, coordinate the survey and to finalize the dataset. This was important, as the Bureau of Statistics did not have the internal capacity nor staff to cover all of these activities within the required period. For countries such as Jamaica and Trinidad and Tobago, where such expertise was available locally, no external consultants were used in fielding the survey, in programming the tablets or in training interviewers to use the data collection software. In Jamaica, this was done by the Statistical Institute of Jamaica (STATIN); in Trinidad and Tobago, it was done by a national private research company.

This mix of local and external expertise enabled beneficial partnerships, through which local teams were able to build capacities and skills and external consultants were able to gain better understandings of local climates, strengthening their advice on strategies for the most effective execution of the surveys.

Lessons

1. A team of knowledgeable, experienced experts is critical to the smooth implementation of this complex survey, especially when it is first being fielded. A clear understanding of the questionnaire and survey ethics is needed to ensure that the methodology is not violated and that the data collected is of high quality.
2. Survey implementation is a multi-layered process that requires different types of expertise across several disciplines. Preparatory activities must include an assessment of the available local expertise and the gaps that need to be filled. Where these gaps exist, external consultants can be used to provide these services. Hence, the local absence of specific skills is not a hindrance to a country's ability to conduct the survey or to produce high-quality data.
3. Where external technical assistance is used, there should be a deliberate effort to assign local team members to the external consultants. This should be done both to facilitate knowledge transfer and to help the consultants to understand and interpret the local context of the survey. Without this partnership, local capacities will not be built and external consultants may not be able to provide advice and guidance appropriate to the local context.

4.2 The Establishment of a National Steering Committee and Research Subcommittee

The prevalence surveys were undertaken in the Caribbean region to provide national data on the levels of VAWG in each country. National steering committees are integral to the WHO process; they provide national oversight for the study and engender national ownership of survey results. In order for the resulting survey data to be recognized, accepted and used as official national statistics, each government had to endorse and identify with the survey. Where national statistics offices (NSOs) were collecting the data, positioning the results as official statistics was easy. However, in countries such as Suriname and Trinidad and Tobago, where the NSOs did not conduct the data collection, the inclusion of government ministries, departments and agencies on national steering committees was an important signifier of national ownership and data credibility.

National steering committees were constituted differently across the countries, often depending on where responsibilities lay for specific portfolio areas. However, all committees had members from ministries, departments and agencies with responsibility for gender equality, planning, health and statistics. In some countries, such as Jamaica, representatives from national security agencies were also members of the committee. The main function of the NSCs was advisory, providing guidance to technical teams on issues such as questionnaire modifications and the adequacy of the final report.

NSC meeting frequency varied, but in most countries there were at least two meetings over the life of the project. Committee size also varied, with some countries having large teams (such as Jamaica's 18-member NSC), and

others having small teams (such as Trinidad and Tobago's six-member NSC). Regardless of size, technical teams reported that the effectiveness of the NSC was determined by the quality of its leadership; where leadership demonstrated a strong commitment to the subject matter, the NSC was more invested in the process and provided more valuable guidance. In countries where the leadership was more tepid, the NSC did not assert as much ownership of the process and the technical team operated outside its direct influence. In the absence of regular meetings or a structured mechanism to engage members via regular updates, an NSC could become a formality rather than the important resource it is intended to be.

In all countries, research subcommittees (RSCs) supported the work of the NSCs. These subcommittees worked more closely with the technical team to give specific guidance on the adaptation of the standard WHO questionnaire,⁶ research methodology, the design of the qualitative study and on the technical accuracy of the final report. These subcommittees were chaired by persons from local universities and included members of civil society organizations, statistics offices and other local researchers. In some instances, the key external consultant also participated in both NSC and RSC meetings.

In all countries, the NSC and RSC were important to gaining national buy-in for the process and for the final results. The effectiveness of this approach is seen particularly in Trinidad and Tobago, where the survey was implemented entirely by a private

⁶ Among the adaptation on the questionnaire was the inclusion of questions on labour force activities that would normally be asked in the Labour Force Surveys in the region. This was done to ensure that the data on respondents' employment status was consistent with measures routinely used across the region. Other changes were made to reflect common cultural practices in the region, such as the inclusion of more context-relevant organizations from which women may seek help.

company contracted by an international partner. With this arrangement, there was a risk of the data not being embraced as ‘official’ statistics. However, because government agencies were integrally involved in decision-making and key areas, the survey results have been accepted as official national data.

Where civil society organization capacities permitted, NGOs working in areas of gender equality and social justice were invited to be part of NSCs and RSCs. In the case of Trinidad and Tobago, a separate Advisory Committee, comprised of actors from the NGO sector, was convened to provide a gender perspective grounded in activism and service delivery. The strategic involvement of these groups from the planning stage improved stakeholders’ knowledge of the data and increased the likelihood that they would use the data to shape their interventions and their provision of services for women who have experienced violence.

Lessons

1. A robust, multi-agency NSC is important to the credibility of the prevalence data generated from the survey and to endorsing its acceptance and use.
2. Both NSCs and RSCs provided critical inputs in adapting the standard WHO questionnaire to local contexts. Adaptations began with the questionnaire used in Jamaica, which was further tweaked for Trinidad and Tobago before moving on for use in Grenada and Guyana. Access to the expertise of persons who worked on the original WHO methodology was helpful for ensuring that none of the modifications affected the comparability or integrity of the data for the core VAWG indicators.

3. Leadership of these committees is determinative of their effectiveness. For the committees to be most effective and to maintain their commitment, they need to meet regularly and have mechanisms to update members, share information and garner feedback on key issues.

4.3 The National Coordinator

All countries recruited and utilized the skills of a national study coordinator. The coordinator provided support for the technical team throughout the survey process. The extent and scope of the support depended on the needs of the team and the strengths of the coordinator. In all instances, the coordinator brought specific technical skills to the project — some in statistics, some in gender analysis and others in project management. In all cases, the coordinator was responsible for writing and finalizing the national report.

In some countries, the relationship between the national study coordinator and the survey implementers was clear; the coordinator was directly assigned to the implementing agency and supported the agency’s work in recruiting and training enumerators, conducting the pre-implementation pilot, monitoring field work and debriefing exercises. The coordinator also had responsibility for data analysis and report writing (these activities were supported, to varying degrees, by external technical assistance). In some countries, once the data was collected, it was turned over to the external consultants to generate the statistical tables upon which the report would be based. In the case of Trinidad and Tobago, the local consulting team generated the tables, using the syntax written by the overseas consultants. In Grenada and Jamaica, external consultants collaborated with the NSO

to clean the data and produce the final tables. In all countries, the national coordinator wrote the report with guidance from the NSC and the RSC.

Overall, national coordinators were expected to ensure that all facets of study activities worked smoothly and were implemented on time and in accordance with the agreed study methodology. Where this position is not fully articulated within the existing structure of the implementing agency, it may be difficult for the coordinator to influence decisions that can affect the success of the project. Decisions such as the design of training delivery, lead time for recruiting interviewers, selection of interviewers, location of the training, frequency of quality checks by supervisors and adherence to the study's ethical protocols can affect the timeliness of the fieldwork and, ultimately, the quality of the data gathered. In most countries, the national coordinator was able to influence some of these decisions. In at least one instance, the NSO had a standard operating procedure for all surveys; it required significant persuasion for it to make some operational changes in order to conform to the requirements of this particular survey. This was possible because the coordinator had prior established relationships with NSO members (and had worked successfully with at least one key member of the team before) and was known to the institution's leadership.

Lessons

1. National coordinators, when selected, must have clear roles and authorities. If this role resides in the NSO, it must be at a senior decision-making level.
2. The national coordinator's technical skills in gender analysis, statistics and data analysis or project management are important to the survey's success.
3. National coordinators should have the ability to broker relationships in order to get things done on schedule and the flexibility to help the team make adjustments throughout the survey process.

4.4 Recruitment, Training and Selection of Interviewers

In studies such as this, factors such as the recruitment, training and selection of enumerators are central, as data quality depends on the quality of the interviewers.

In accordance with the WHO ethical protocols, all interviewers were women (in most countries, preference was given to more mature women). This was the first survey conducted in any of the pilot countries to use only women enumerators. The exact purpose of the survey was not revealed at the point of recruitment.

Women were recruited using a variety of strategies, including newspaper advertisements, personal referrals, referrals from persons in the wider team networks and selection from an existing pool of experienced interviewers who had previously worked for the survey organization. In Grenada, where the government would normally require the NSO to use unemployed persons as interviewers, the NSO petitioned the Cabinet to waive this condition given the complexity of the instrument and the sensitivity of the subject matter. The waiver was granted, allowing the team to recruit persons who were, *inter alia*, graduate students, teachers and social workers.

The recruitment period varied across countries. Some countries spent three months on the process; other countries spent two to three weeks. In Jamaica, the recruitment began later than planned, and as such, only two to three weeks were spent identifying the persons who were

eventually selected for training. Consequently, although the initial intention was to recruit and train 60 persons (with a view to selecting 50 interviewers), Jamaica was unable to recruit this target number for training. Eventually, about 50 persons were trained, 45 of which were selected to serve as enumerators. Enumerator selection was affected by the rushed recruitment, with recruiters selecting candidates who may not have been considered if there were more time or a wider pool of applicants.

Too-long a lead time also affected the final pool of enumerators. In Trinidad and Tobago, the survey agency began recruiting interviewers as much as three to four months before the survey. With delays in finalizing the instruments, selecting the sample and finally getting in the field, some persons moved on to other employment opportunities before the survey began. As a result of the attrition, the survey agency reports that even up to two weeks before the survey started, they were short of interviewers.

In Grenada, Guyana, Suriname and Trinidad and Tobago, some of the items on attitudes towards gender norms from the questionnaire were used to screen candidates. Candidates who had traditional, conservative attitudes were not selected; only those with neutral or progressive attitudes were chosen. This method was not used consistently in Jamaica.

The contract signed by selected candidates included a confidentiality agreement. This was particularly important because keeping the nature of the survey private was one of the methodology's ethical and safety requirements. Hence, even if not selected as enumerators, it was important to ensure that all persons trained would guard the confidentiality of the survey.

The personal and intimate nature of the questions and the length and complexity of

the survey was challenging for some recruits; some eventually opted out of the training or completed the training but decided not to serve as interviewers. In three to four cases, women who had themselves experienced violence felt re-traumatized by the questions and withdrew from the exercise. Where women revealed that they had experienced violence, counselling was provided, and the women were free to decide whether or not to continue training and to work on the survey. The survey implementers did not disqualify any woman because of her experience of violence; in all cases, the women were afforded the opportunity to decide if they wanted to stay.

Training and Selection

The WHO methodology includes an extensive three-week training of interviewers, which was done in all countries in the CARICOM pilot. The way this was accomplished, differed across countries. Jamaica opted for a three-week residential training programme. Grenada, Guyana, Suriname and Trinidad and Tobago had non-residential training for the same period of time. In Grenada, training was done in the afternoons, from 3:00pm to 8:00pm; Trinidad and Tobago had a full day of training, from 9:00am to 4:00pm each day, as did Guyana and Suriname. The choice of strategy was affected by the budget, country size and the best-fit for the team and interviewers.

Jamaica explored several options, including the possibility of training groups in different regions, before the team settled on residential training. There were several reasons for this choice, such as the need to maintain tight quality control over the training, to ensure that all interviewers were trained by the same team of experienced experts, the size of the island and the need to complete the training in a set time-frame. In Grenada, the team opted for evening sessions, as some of the

interviewers had full-time jobs and were only available after work. Trinidad held all-day sessions in a central location, although accommodations were provided for persons who were selected from Tobago. In all countries, interviewers were given a stipend during the training period. This stipend was used to cover travel (where applicable) and incidental personal expenses.

The team of external consultants set the training agenda in all countries, using the same materials and approach in each. This allowed for consistency across countries with respect to the ethical and safety guidelines, the gendered understanding of VAWG and the details of the questionnaire. Countries, however, used different approaches to training in the use of the tablet. In Jamaica, the NSO's team of information technology specialists led the training in that area.

Countries also took different approaches to the software used for data collection. Jamaica chose to write its own software for the questionnaire. Other countries chose to use either a proprietary software package (as was done in Trinidad and Tobago) or free, open-source software (as was done in Grenada, Guyana and Suriname). Grenada, Guyana and Suriname used external consultants to conduct the technology training. The technology team was present for most of the training in all countries. This presence was important to ensure that the technology team could respond on the spot to any concerns raised about the flow of the questionnaire or the accuracy of the software in capturing coding or skip patterns, etc. It also allowed the technical team and enumerators to better understand issues that could arise in practice with the software and tablets.

The selection of interviewers and supervisors was made at the end of the training. Persons were selected based on their mastery of the

material, particularly their understanding of the questionnaire and how to use the tablet. In some instances, participants were given written exercises, which contributed to the overall assessment of their performance. The trainers also assessed attitude and participation. Participants who displayed leadership, maturity and a high level of competence were selected to become supervisors. These persons received about a half-day's additional training in the basics of map reading (so they could assist interviewers to locate their assigned households) and data-quality monitoring techniques.

Each training activity ended with a short pilot exercise designed to provide practice for the interviewers, test the questionnaires and test the performance and use of the tablets during interviews. The size and scope of the pilot exercise depended on the time set aside for the exercise and the trainers' assessment on the extent of practice needed. In Guyana, the exercise covered about 250 households over three days. In Jamaica, there was a small exercise covering no more than 30 to 40 households, conducted one afternoon in two communities close to the training venue. Trinidad and Tobago's pilot exercise was conducted over two to three days in communities that were not included in the final survey.

Lessons

1. There has to be sufficient time to recruit interviewers so that the team can have a wide pool of qualified candidates from which to choose. Once the candidates are chosen, the team must be ready to begin implementation. Lags in implementation time will cause attrition and potentially further delays due to the need to recruit replacement candidates.

2. While it is important to adhere to the WHO protocols for training interviewers, countries must demonstrate flexibility and contextual awareness when making decisions regarding training logistics. Strategies that work in one country may not work in another, and the survey team must have the flexibility to adjust as required.
3. It is important that the training team includes persons who are experts both in survey methodology and in the use of the software and tablets. Training in the technology is a critical aspect of building interviewer capacities, as the efficiency and accuracy of the data relies not only on interviewers correctly asking the questions, but also on accurately recording answers.
4. Mapping enumeration district boundaries is critical, as it makes fieldwork more efficient and less frustrating for the interviewer. Hence, it is important for supervisors to support interviewers in this area. However, feedback indicates that this aspect of training did not always receive sufficient focus.
5. Sufficient time should be allocated for a robust pilot exercise and debriefing before the actual start of the survey. This is important to help prepare enumerators for the vagaries of data collection, to give the survey team some indications of possible problems with the technology and to reveal areas in which interviewer and supervisor training may need reinforcement.

BOX 1

Newspaper Advertisement Used in Jamaica for Recruiting Interviewers

STATISTICAL INSTITUTE OF JAMAICA

The Statistical Institute of Jamaica (STATIN) invites applications from suitably qualified persons as Data Collectors for one of its household surveys. Ideal candidates must have the qualifications and characteristics outlined below.

Job Summary

- Incumbents will visit and interview selected female household residents on their health and life experiences
- Record survey responses on Tablet computers
- Attend a residential training for five weeks (May 30 – June 24, 2016)
- Conduct fieldwork for a period of eight or more weeks

Qualifications/Experience

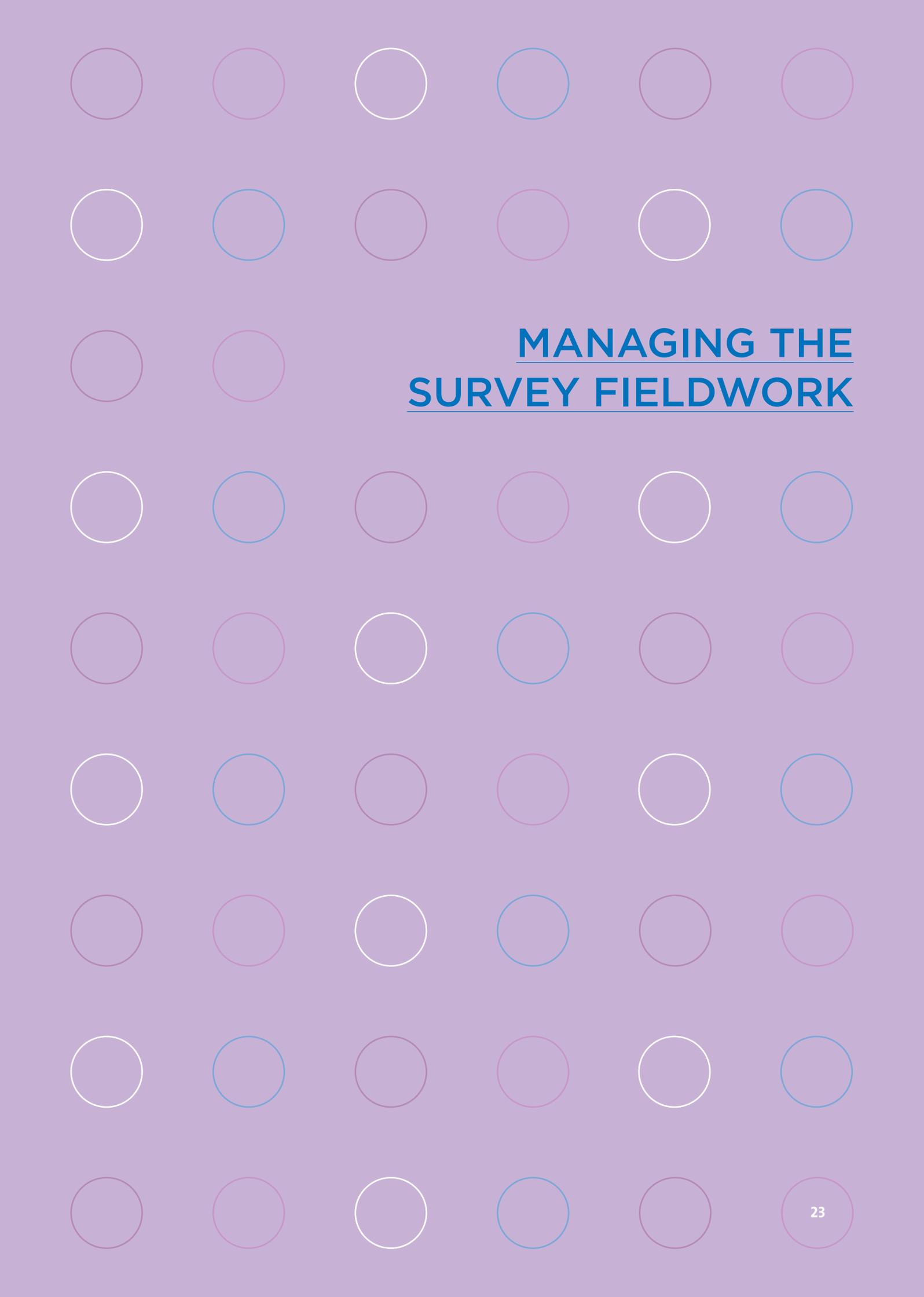
- At least 4 CXC/CSEC passes, including English Language. Preference will, however,

be given to candidates with post-secondary education

- Experience working on at least four (4) major surveys would be a distinct advantage
- Computer literate

The Ideal Candidate Must Possess

- High level of integrity, honesty and commitment
- Ability and willingness to traverse rural and urban geographic locations to conduct face-to-face interviews
- Excellent verbal and communication skills, including a clear speaking voice and ability to ask questions in an audible manner
- Demonstrable ability to discreetly handle sensitive and personal information on selected topics



MANAGING THE SURVEY FIELDWORK

Fieldwork began after the interviewers and supervisors were selected, the questionnaire was finalized and the survey sample was determined. Interviewers were organized in teams, each with a supervisor, and dispatched to collect the data within three to six weeks from the end of training.

Given the nature of the survey, no prior contact was made with communities or the public at large to alert them to the impending data collection (the only exceptions to this were in specific communities in Trinidad, where community liaisons were alerted for security reasons). This strategy was considered successful and necessary, as survey managers believed that had it been generally known that this was a survey about VAWG, it would have been difficult to secure respondent participation.

Data collection was long and complex throughout the region, often exceeding the planned time in the field. In Guyana, interviewers had difficulty getting permission to enter one region due to geographical exploration work being done by an investor group. As a result of this exploration, physical access to the area was limited, making it inaccessible to interviewers. This stalled fieldwork for two weeks, with the survey manager having to pull the team until they received permission to proceed. Violence interrupted the fieldwork in both Jamaica and Trinidad and Tobago. In Jamaica, the police asked the NSO to withdraw a team working in a violent urban area, and the survey manager took the decision to withdraw another team when violence flared on the western end of the island. In Trinidad, the survey managers nurtured a relationship with the Community Safety Programme, informing its representatives and the police that they would be collecting data in particular communities. By doing this, they ensured that the presence of the women in the communities would not raise any suspicion.

Fieldwork in Guyana and Suriname covered rugged terrain in some areas, requiring survey teams to traverse the jungle and to travel by boat to the hinterland to collect data. In Guyana, this also included going to areas manned by soldiers from neighbouring Venezuela as part of an ongoing border dispute between the two countries. The survey manager believed that given its vastness, Guyana needed more interviewers. Nonetheless, the team was able to collect the data in two months. In Suriname, the survey was managed by a local firm with extensive experience implementing surveys in that country. The team of enumerators was also experienced and multilingual, allowing for interviews to be conducted in any of the three major languages.

Several challenges were encountered in Grenada during the fieldwork. Data collection coincided with the annual Carnival, during which the field work was suspended. Further, a misunderstanding about which women should be asked questions about their experience with violence⁷ led to interviewers having to revisit approximately 120 households to complete interviews. This slowed data collection, as it meant that those supplemental interviews had to be completed using paper questionnaires, as the software being used did not allow electronic records to be amended once completed and assigned to the data set. There were also difficulties with household selection and interview assignments in Grenada, which slowed the fieldwork.

Despite challenges, the interviewers maintained focus and there was little attrition from the enumerator pool once fieldwork began. In Jamaica, one supervisor left. Grenada lost an interviewer, as

⁷ The team in Grenada explained that they understood, from the external consultants, that only women in current relationships should be asked questions about experiences of violence. They subsequently realized that this was an error, and had to return to the women to complete the survey. The success rate for this exercise was very low.

did Trinidad and Tobago. All countries reported that interviewer enthusiasm waned towards the end of the exercise, and survey managers and supervisors had to work “extra hard” to motivate their teams. Despite this generally positive performance, some interviewers reported that supervisor error and unhelpfulness caused delays. In Jamaica, there were concerns that some supervisors did not know how to do mapping, leaving interviewers to find boundaries on their own.

In some cases, supervisor misdirection caused difficulties in locating the assigned dwelling. Further, some time was lost due to supervisor tardiness in attending monitoring meetings. In contrast, some interviewers reported having very helpful supervisors who understood map reading, could provide clear direction when questions arose about any aspect of the fieldwork and fostered a camaraderie among team members. Where supervisors were most helpful, interviewers found the job relatively easy and the experience positive.

Quality checks by survey managers were an important feature of fieldwork management. These checks were done to monitor the quality of the data and to address any logistical or psychosocial issues interviewers and supervisors faced. In these sessions, interviewers were given an opportunity to share their experiences and to talk about the emotional impacts of their experiences. Professional counselling services were available to interviewers who felt overwhelmed or distressed in any way. In Trinidad and Tobago, these services were available through a service provider who had been contracted by the survey agency. Similarly, in Grenada, the Legal Aid and Counselling Clinic, an NGO, was contracted to provide counselling services to interviewers. Other countries did not appear to have a similarly formal structure but had ad hoc arrangements with a variety of

service providers on whom they could call when the need arose. In Jamaica, the team worked with the Victims Support Division of the Ministry of Justice, alerting them of the nature of the survey and the possible effect on interviewers and securing the Ministry’s commitment to provide counselling or referral services as needed.

In some countries, survey management encountered problems created by logistical issues such as the timing and receipt of payments, perceived inadequacies in travel allocations and the need for several repeat visits to households to interview eligible women. There were also difficulties related to the functioning of the tablets during data collection. In Guyana, supervisors reported difficulties with the GPS locator on rainy or heavily overcast days; the “blinking out” of one tablet, forcing the interviewer to complete a paper questionnaire; and a lack of Wi-Fi in some locations to upload the questionnaires once completed. Jamaica and Trinidad reported that interviewers occasionally used paper questionnaires if they felt the tablet made them a target for robbery.

Boxes 2 and 3 gives reasons interviewers and supervisors identified for the relatively low response rates experienced in Jamaica.

Lessons

1. Consideration should be given to extending the training for supervisors. This is typically done at the end of the overall training process and lasts no more than half a day. Interviewer feedback suggests that this may not be sufficient, and more care should be taken in preparing supervisors for their role.
2. The length of time and level of effort needed to conduct this complex survey should not be underestimated. Experience

shows that the survey ran beyond schedule in all countries. Adjustments to the number of interviewers may be necessary in some countries, while for others, the timing of fieldwork may need to be reviewed.

3. Countries must be careful not to unduly extend the fieldwork. Interviewers will experience burnout and motivation will wane, affecting the quality of data collected. There is also the risk that the longer the survey remains in the field, the more likely it is that persons will become aware of its purpose.
4. Field assignments must be comprehensive, allowing interviewers to locate households

efficiently because this affects the number of households each interviewer can visit and the pace of the survey.

5. The safety and well-being of interviewers are key factors in the success of the fieldwork. Hence, all efforts must be made to ensure that they have access to psychological support and that their safety and material well-being are safeguarded.
6. More time can be spent on technology training, as problems with the tablets absorbed a lot of time and slowed the process.

BOX 2

Interviewers' Feedback on the Main Reasons for Low Response Rates in Jamaica

- Sample selection was poor;
- There were too many households with single males;
- Stringent selection processes for eligible women;
- Transportation costs to conduct call-backs were too high;
- More time was needed to conduct call-backs; and
- There were difficulties in securing transportation to assigned enumerated districts.

Source: Notes of debriefing held on November 18, 2016

BOX 3

Supervisors' Feedback on the Main Reasons for Low Response Rates in Jamaica

- Sample selection was poor;
- There were too many households with single males;
- The lack of experienced interviewers;
- Interviewers had other sources of income and so were not fully invested in the activity; and
- Poor time management skills.

Source: Notes of debriefing held on November 18, 2016



THE QUALITATIVE
ENQUIRY

The qualitative study is expected to be guided by the themes covered in the survey and to adhere to the same strict ethical protocols for the protection of participants. In the four countries in which a qualitative study was conducted,⁸ it was based on key informant interviews and focus group discussions (the Jamaican study also included life histories), with a study population that broadly included survivors, perpetrators, service providers, state agencies, magistrates⁹ and police.

With RSC and NSC approval, researchers were free to adopt a best-fit conceptual framework for the study, as this is not specified in the WHO methodology. In Trinidad and Tobago, the research team grounded the study in an ecological approach.¹⁰ In Jamaica, the researcher used a relational approach¹¹ as the framework within which to locate the study. Though conceptually different approaches, research results in both countries identified similar issues as having an impact on the nature, consequences and responses to VAWG.

There was no one approach to the integration of the qualitative study with the survey. In Jamaica and Trinidad and Tobago, survey coordinators were able to comment on deliverables from the consultants who undertook the qualitative study. Though the coordinators had opportunities to provide guidance on the design of the qualitative study, there were no formal links between it and

the survey. There appeared to be better synergies in the other two countries that conducted qualitative studies. In Guyana, the qualitative consultant participated in meetings of the NSC and RSC. In both Grenada and Guyana, the Institutional Review Board (IRB) applications for the study included both components, creating a critical link between the two and establishing them as different components of the same study.

The WHO ethical protocols regarding privacy prohibit the disclosure of personal experiences with violence in focus group discussions. This posed challenges to the qualitative study in both Guyana and Jamaica. Researchers in both countries, though not eliciting information on women's experience with violence, found that some women openly shared their own experiences in group settings. This happened even where the facilitators made it clear that this was not allowed. In these instances, the external experts raised concerns about the acceptability of the data gathered under those circumstances, and they recommended that those data be excluded from the final report or the report not published.

This highlights an important issue about collecting data on VAWG in the Caribbean. In some contexts, women, particularly those who have survived past abuse, feel empowered and want to share their experiences with others. They want to have their stories heard and consider sharing a way of helping other women who may face similar situations. Sharing, in this context, is not re-traumatizing, but redemptive. In both Guyana and Jamaica, the researchers explained that the "prescriptive, acontextual" approach recommended by WHO feels "unnatural," especially in some regional contexts where experiences of intimate-partner violence are shared and openly discussed.

⁸ Suriname did not conduct a qualitative study.

⁹ Magistrates were interviewed in Guyana and Trinidad and Tobago, but not Jamaica.

¹⁰ The ecological approach is used frequently in WHO literature on violence. It proposes that violence is driven by factors at the individual, relational, community and societal levels (Hosein, 2018).

¹¹ The relational approach recognizes that people can become and remain disempowered because of the deliberate actions and inaction of others. Therefore, relational explanations focus on the processes and power relations that result in disempowerment of particular groups and individuals, specifically women and girls (Moncrieff, 2017).

An important objective of the qualitative enquiry is the presentation of women's experiences from their perspective. Hence, there is also the methodological consideration of the possible effect on the accurate representation of women's voices if the protocols are applied in such a way as to constrain participants' opportunities to tell their stories and to have those stories heard and respected. The protocols should acknowledge that women process intimate-partner violence in a variety of ways. While the protocols should not require directly asking women to share experiences, active or passive restrictions on women's sharing of their experiences — when they are comfortable doing so — may be inimical to good qualitative research practice and will deny women a safe space in which to share their experiences.

As of June 2019, only two country reports have been published (Jamaica and Trinidad and Tobago). The Jamaica quantitative report benefited from being able to use the findings from the qualitative report to contextualize survey findings; providing sociocultural context to the numbers is important to present a comprehensive discussion and understanding of the nature and manifestations of VAWG in the Caribbean. The Trinidad and Tobago quantitative report was unable to incorporate qualitative study findings because the qualitative study was not completed in time. The Guyana and Grenada reports will benefit from the qualitative study findings, as they were completed ahead of the survey.

Lessons

1. For maximum benefit, the qualitative and the quantitative aspects of the survey should be scheduled so that both aspects of the study can be fully aligned and

that all findings can be incorporated into a final study report.¹² Experience in the region suggests that there may be value in fielding the survey first and then using the preliminary findings as a tool for crafting instruments for the qualitative study. This will allow the qualitative data to delve into issues raised by the survey, providing a more comprehensive assessment of the situation of VAWG in the country.

2. The survey and the qualitative study should be treated as different methods to collect data for a single study on VAWG rather than as two independent studies on the same issue. This synergy is best demonstrated by the experience of Grenada and Guyana, which submitted both components as part of one study for ethical review at the same time.
3. If the national coordinator had responsibility for the oversight of the qualitative study as well, there would be better alignment between the two aspects of the research.¹³
4. Though the WHO protocols are internationally accepted, in the Caribbean, consideration has to be given to situations in which behaviours may run counter to the prescribed protocols — yet do not put women at risk or violate their rights.

¹² This inadvertently happened in Trinidad and Tobago; the qualitative research was able to draw on the findings of the survey in the final report.

¹³ In Guyana, the researcher was able to participate in NSC and RSC meetings and benefit from comments from the entire team, helping to bridge gaps between components.



ETHICAL CONSIDERATIONS

The WHO methodology establishes clear, strict protocols for survey implementation. This is necessary because researching this subject matter requires the consideration of several ethical and safety issues. In all activities, the safety of the women and the interviewers is paramount. Also critical is the respect for the rights of the respondents and their psychological well-being. Such considerations drive the requirements for informed consent, confidentiality, information on where to get help and adherence to strict rules regarding privacy during the interview. The protocols also recommend that research on VAWG only be undertaken when there is a clear commitment that the data will be used to influence interventions, policies and programmes for change.

A great deal of effort was focused on honouring these ethical protocols during the implementation of the surveys and qualitative studies. In all pilot countries, care was taken from the very beginning of the process to ensure that the protocols were maintained. Though not an explicit WHO requirement, at least three countries,¹⁴ in keeping with international best practices on collecting data from human subjects, submitted a proposal for the research to relevant ethical review boards for approval. Jamaica did not submit its research design to an ethics committee, as the NSO felt this to be unnecessary given the in-built ethical obligations in the provisions of the law that gave it authority to collect data for national purposes. Though not part of the WHO protocol, in Grenada and Guyana, persons recruited for the training and members of the NSC and RSC were asked to sign a non-disclosure agreement. Those who were selected to be enumerators were asked to sign a further confidentiality agreement.

¹⁴ Trinidad and Tobago, Grenada and Guyana.

The survey was never referred to as a prevalence survey on VAWG. Rather, it was deliberately given a 'safe' name. This was done to protect respondents and interviewers from the risk of men knowing the nature of the survey and objecting to women's participation. Survey teams have indicated that using a neutral name for the survey was an important safeguard that helped to improve response rates.

Though this strategy worked in the overwhelming majority of cases, in at least one case (in Grenada), an interviewer was threatened by someone who was upset merely because his partner was being interviewed (he did not know the purpose of the survey). Ultimately, the interviewer had to report her harasser, who was also a perpetrator of VAWG, to the police. Outlier incidents such as this reinforce the need to adhere to the protocols and demonstrate why they are important.

Reports from fieldworkers indicate that in some instances it was difficult to find a private place in the home to conduct the interview. However, enumerators had been trained to insist on privacy, even if the woman indicated that she was comfortable answering questions in the presence of someone else. There were no reports of this standard being violated, but in some instances interviewers had to end interviews where privacy was not possible. In Jamaica, for example, a supervisor reported that a respondent had given birth a few days before the visit. She and her partner shared a one-room dwelling. Because it was raining at the time the interviewer visited, the husband had to stay inside. The enumerator suspended the interview, completing it on another day when he was not at home. Also in Jamaica, parental refusal to allow daughters to participate without them being present led to the abandonment of a few interviews.

In all cases, fieldworkers were prohibited from providing advice or counselling to women in distress. In keeping with the WHO recommendations, interviewers in all countries had a leaflet with information on where a woman could find support if they had experienced — or were experiencing — violence. All respondents were given a copy regardless of whether they reported abuse. Ideally (but not always) the organizations listed were informed of the project beforehand and committed to providing services as needed. There was no feedback on whether women actually used these services.

Although counselling services were available to the entire fieldwork team, few persons utilized these services.

Lessons

1. Strict adherence to the WHO protocols is critical to the safety and well-being of respondents and interviewers. The few instances in which interviewers or respondents were at risk demonstrate the importance of these standards.
2. While the WHO protocols are also important to qualitative data collection, consideration must be given to situations in which women may view sharing their experiences with other women as important — and how constraints on this may affect the authenticity of the data collected.



DATA ANALYSIS

Data processing was done by the survey agency (in some cases with support from international consultants working with the local team). Each team decided on the most appropriate software to manage and process the data. Once the data set was prepared for analysis, most countries used the Statistical Package for Social Sciences (SPSS) to generate the prevalence rates and the tables used in writing the report.

In all countries, the organization that provided external assistance also provided either the syntax for data analysis or generated the analytical tables on behalf of the NSO.

Although the NSO staff in Jamaica was integrally involved in research design and developed the data collection software, the survey management team and the software development team were different from the data analysis team. This created a situation where the team designated to analyse the data had not participated in the training and was therefore unfamiliar with the questionnaire. Hence, although it was initially agreed that the NSO would generate the tables for the report, the external team was eventually asked to assume that role due to their familiarity with the questionnaire. Trinidad and Tobago avoided this problem, as the survey management team and the data analysis team were the same. Hence, persons tasked with generating the tables (using syntax written by the external consultants) knew the questionnaire and understood the nuances of the instrument. The external organization provided the tables for the report in Grenada, Guyana and Suriname.

the sampling, questionnaire adaptation and interviewer training and should acquire a clear understanding of the instrument. As with all multi-layered surveys, it is impossible to conduct an accurate analysis of the data without first understanding the questionnaire from which the data is generated. The training in the Caribbean did not touch at all on data management and analysis, leaving a capacity gap that needs to be addressed. With the exception of Trinidad and Tobago, the tables for all the national reports were generated externally. This means that none of the countries has demonstrated a capacity to independently execute this critical aspect of the study.

Lessons

1. Given the complexity of the questionnaire, it is important that persons responsible for data analysis are integrated into the project from the start. They should participate in



WRITING THE REPORT,
DISSEMINATION AND
IMPACT OF FINDINGS

As of June 2019, only the reports for Jamaica and Trinidad and Tobago have been published. The reports for Grenada, Guyana and Suriname are being prepared and are expected shortly.

The Jamaica and Trinidad and Tobago reports were finalized via a participatory process. The national coordinators had direct responsibility for drafting the report, but inputs were received from key stakeholders, particularly persons on the NSC and RSC. These inputs were invaluable in providing robust discussion and interpretation of the results and in suggesting ways in which the report could be improved. In Jamaica, the writer presented the main findings to the NSC and received feedback at that meeting. The draft report was then circulated to the RSC; members provided detailed comments in telephone conversations and in writing. A revised report was resubmitted and further comments were received, leading to a final report that was accepted for publication by the NSC and RSC. A similar review process was also undertaken in Trinidad and Tobago, with key inputs from all major stakeholders prior to finalization of the report.

Uncertainty about the role of the Cabinet in the process delayed the publication of the report in Jamaica. This uncertainty led to months of delay while negotiations about how to handle this final aspect of the project took place. Ultimately, it was decided that the report did not specifically have to be approved by the Cabinet before being made public. Any tabling to the Cabinet would be viewed as a courtesy, not an obligation.

The Jamaican report was eventually published and officially launched by the Minister of Culture, Gender, Entertainment and Sports (MCGES), and fully endorsed by the government. Similarly, in Trinidad and Tobago the research team presented the findings to government officials, including ministers of government. The report was launched with the participation of the Minister of State in

the Office of the Prime Minister, who holds the portfolios of Gender and Child Affairs, and it has been received and treated as official national statistics.

In Jamaica, the data has been widely reported on by several media outlets and has been the subject of discussion on several news programmes, with the Minister responsible for Gender Affairs leading and participating in several events in which the data was presented. The Bureau of Gender Affairs has launched a campaign against VAWG using the data to frame the issue. Additionally, the data was instrumental in strengthening the case to MCGES for funding two additional shelters for women fleeing abusive homes. Funding for these additional shelters was approved in the 2019/2020 budget, bringing to three the number of shelters now being funded by the Government of Jamaica.

In Trinidad and Tobago, the data has been used to support legislative actions in a draft Sexual Harassment Bill and by a local NGO in their comments on the draft bill. The data is also being used as the empirical basis for at least one symposium by the University of the West Indies¹⁵ on the issue of VAWG.

I find the data very disturbing, although I thought it was worst. I was expecting one in three and not one in four. I see the usefulness of the data, because it has been long in coming, and there is no other like it. It can impact our work in the Bureau of Gender Affairs... to guide our programmes, so I am happy that we have this data to work from.

Participant UPD, Sept. 13, 2018, Jamaica.

In order to promote the use of the data, Jamaica, with funding from UN Women, hosted a series of User-Producer Dialogues (UPD) on the study.

¹⁵ http://e-paper.guardian.co.tt/infinity/article_popover_share.aspx?guid=bc2ead57-cbob-4d8c-a194-7abe8e746b7f

The premise for the UPDs was that the collection of data is a significant investment, the returns on which are directly related to the utility of the data. For such investments to be justified, the data must be used, or can be used, to address the issues being investigated (See Box 4 for the main

objectives of the UPDs). The dialogues took place over five sessions, engaging 97 persons from key social sectors in the government and NGOs in discussions about the implications of the data and how the data can help shape organizations' responses to VAWG.

BOX 4

Objectives of User–Producer Dialogues in Jamaica

1. To share the findings of the survey report. This includes the data from the 2016 Survey and the qualitative investigation.
2. To share, with key technical groups, the methodology and ethical considerations that guided the study.
3. To discuss how the findings can be integrated into the work of the various stakeholder groups and used to guide policy and programme development towards the implementation of the National Strategic Action Plan-Gender Based Violence (NSAP-GBV).
4. To deepen understanding of the severity and complexity of violence against women in Jamaica and to help stakeholders better understand the different associations of violence, including risk and protective factors, that will help develop context-specific tailored advocacy, programmes and policies.
5. To collectively develop insights from the data that can inform further exploration of emergent issues, including identifying thematic areas for further secondary analysis.

In addition to being widely quoted and relatively reader-friendly, simple, easily accessible summaries of the reports have been compiled for both countries.¹⁶ The full reports and raw datasets are accessible online.

Lessons

1. Involving the NSC and RSC in the process strengthens report writing. It is important to provide opportunities for feedback

¹⁶ See: <http://caribbean.unwomen.org/en/materials/publications/2018/12/summary-womens-health-survey-2017-trinidad-and-tobago>

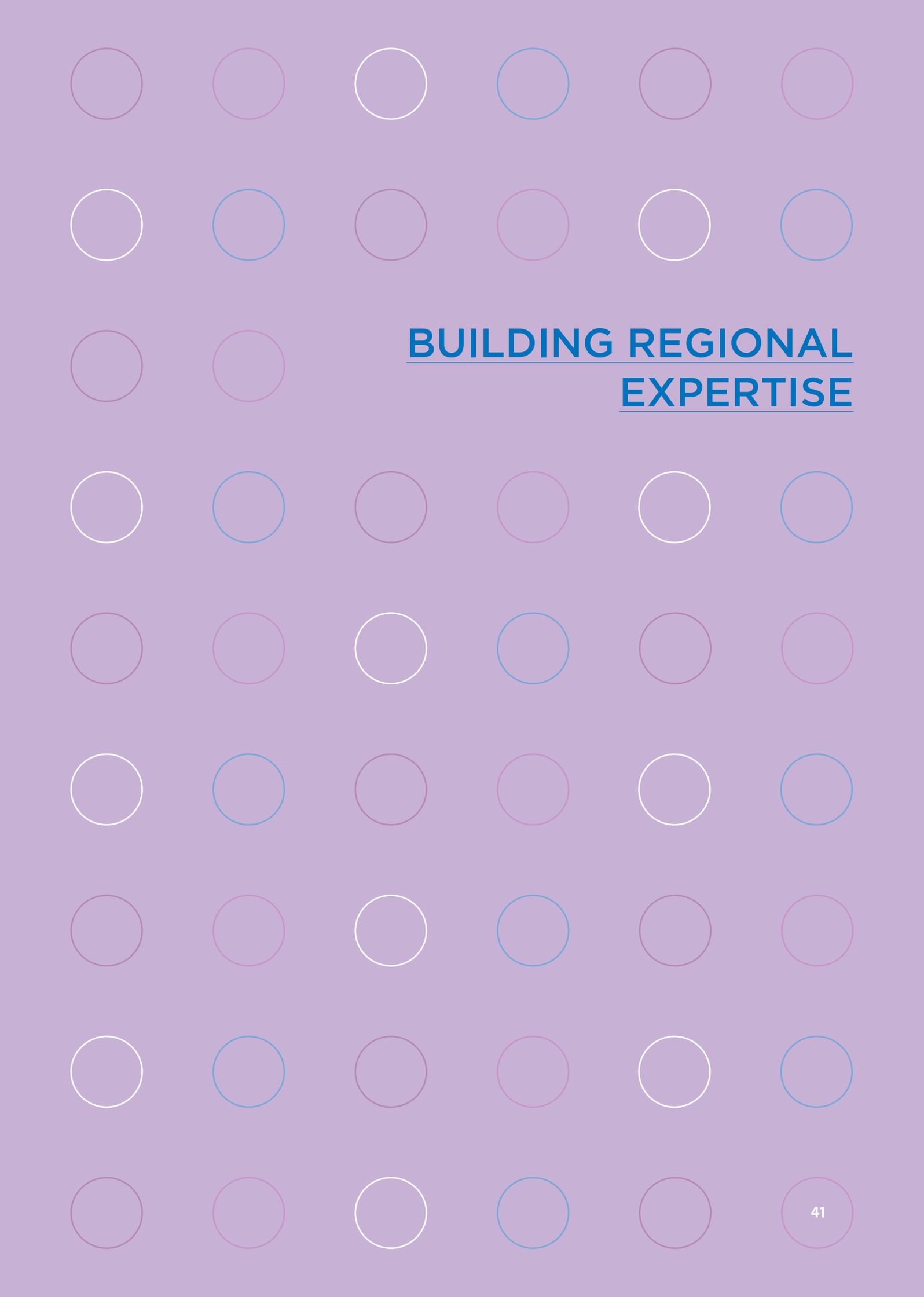
<http://caribbean.unwomen.org/en/materials/publications/2018/6/summary-womens-health-survey-2016-jamaica>

at different points of the report writing process and to maintain a dialogue with partners about data presentation and interpretation. This process leads to early understanding and endorsement of the results by government and key partners.

2. It is important to involve senior government officials in the launch of the report and dissemination of its findings. This will attract the media and wider public attention, providing avenues for discussions about the implication and importance of the data.
3. Where possible, it is a good idea to convene small group discussion sessions with

stakeholders about the usefulness of the data to their work. This will allow persons to ask questions about the study's detailed findings and not just focus on the headline data that is available through the media. These discussions provide opportunities for the team to explain the full potential of the data, pointing out other information that can be gleaned from further data analysis. This may encourage stakeholders to explore the data (themselves or through consultants) in order to get additional information that is directly relevant to their work.

4. Dissemination can be broadened and advocacy strengthened by the production of reader-friendly accessible summaries of the reports.



BUILDING REGIONAL
EXPERTISE

The lack of accurate data on VAWG has long been a weakness in CARICOM. Prior to the fielding of the prevalence surveys, data on the issue had been provided by ad hoc surveys and administrative sources. This has been a barrier to the region's ability to provide data to monitor the VAWG core indicators as recommended by the UN Statistics Commission.¹⁷ The data provided by these pilot prevalence surveys has brought the region closer to international best practice, as it now has internationally comparable data in UN key indicator areas such as:

- Total and age specific rate of ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner in the last 12 months by frequency;
- Total and age specific rate of ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner during lifetime by frequency;
- Total and age specific rate of ever-partnered women subjected to psychological/emotional violence in the past 12 months by the intimate partner; and
- Total and age specific rate of ever-partnered women subjected to economic violence in the past 12 months by the intimate partner.

Recognizing that much of the technical expertise for conducting the study came from sources outside the region, UN Women and the Caribbean Development Bank partnered to facilitate the training of a cadre of regional experts in survey methodology, protocols and implementation. Taking place in February 2018, the training workshop brought together persons from NSOs, NGOs and government agencies from across the region. The training was designed to expand “the

regional pool of technical expertise equipped with the knowledge and skills necessary to implement the CARICOM Model at national levels.”¹⁸

The workshop objective was to “deepen the understanding of the use of the data and information on VAWG for policy advocacy and evidence-based programming.” Specific emphasis was placed on data from prevalence surveys and how the data can support the monitoring of national and global policy commitments, particularly those in the SDGs, to eliminate VAWG. The three-day workshop also helped the pool of experts to better understand key aspects of research and programming on VAWG. Workshop topics included an overview of gender and VAWG; ethical and methodological considerations in VAWG research; quantitative and qualitative approaches to research and special considerations for utilizing these methods to capture VAWG; field methods and fieldworker training; data analysis; and dissemination of findings.

In addition to providing information on the critical technical aspects of the survey, the workshop also allowed the teams from Jamaica and Trinidad and Tobago, which had completed their surveys by then, to share experiences from the survey implementation and report preparation. The national coordinators in both countries were also workshop co-facilitators, along with the key external expert. Participant feedback from Grenada and Guyana indicated that they benefited from the lessons shared by Jamaica and Trinidad and Tobago and that this knowledge allowed them to adopt strategies to mitigate some of the challenges shared. In particular, the qualitative researcher on the Guyana study shared that being aware of the difficulty Jamaica faced in enlisting middle- and upper-middle-class women to participate in

17 https://unstats.un.org/unsd/gender/docs/guidelines_statistics_vaw.pdf

18 Regional Pool of Experts Capacity Development Workshops: National Prevalence Surveys on Violence Against Women and Girls: Agenda 20-23 February 2018, Grenada.

the qualitative study;¹⁹ she drew heavily on the NSC to facilitate her access to women in these socioeconomic groups. Consequently, she was able to interview several women whom she may not otherwise have had access to.

An important feature of the workshop is that it brought together the qualitative researchers and the survey teams, reinforcing the unitary nature of the study. It also allowed the qualitative researchers to understand the structure of the questionnaire, the issues covered, the specifics of calculating prevalence rates and what the statistics mean in the context of the study. Conversely, it provided an opportunity for the survey team to understand the themes being explored in the qualitative study and how researchers envisaged the synergies between both components, particularly in the design and structure of the final report.

The piloting of the prevalence surveys and the post-survey dissemination and capacity development activities have enhanced regional expertise in the execution of the particular survey. These activities have also improved CARICOM capacities to provide data to measure the prevalence of VAWG and to guide the design of strategies and programmes to address VAWG. Piloting the surveys has also strengthened the region's ability to monitor progress towards SGD Goal 5.

The use of a standard questionnaire and methodology to collect this data allows for comparability of data across all member states and is consistent with the efforts of the Regional Strategy for the Development of Statistics 2019-2030 (RSDS)²⁰ to “identify regional strategies and activities that would harmonize conceptual

frameworks, methods and tools for ensuring data comparability.” This approach responds to the following objectives of the regional statistical agenda:

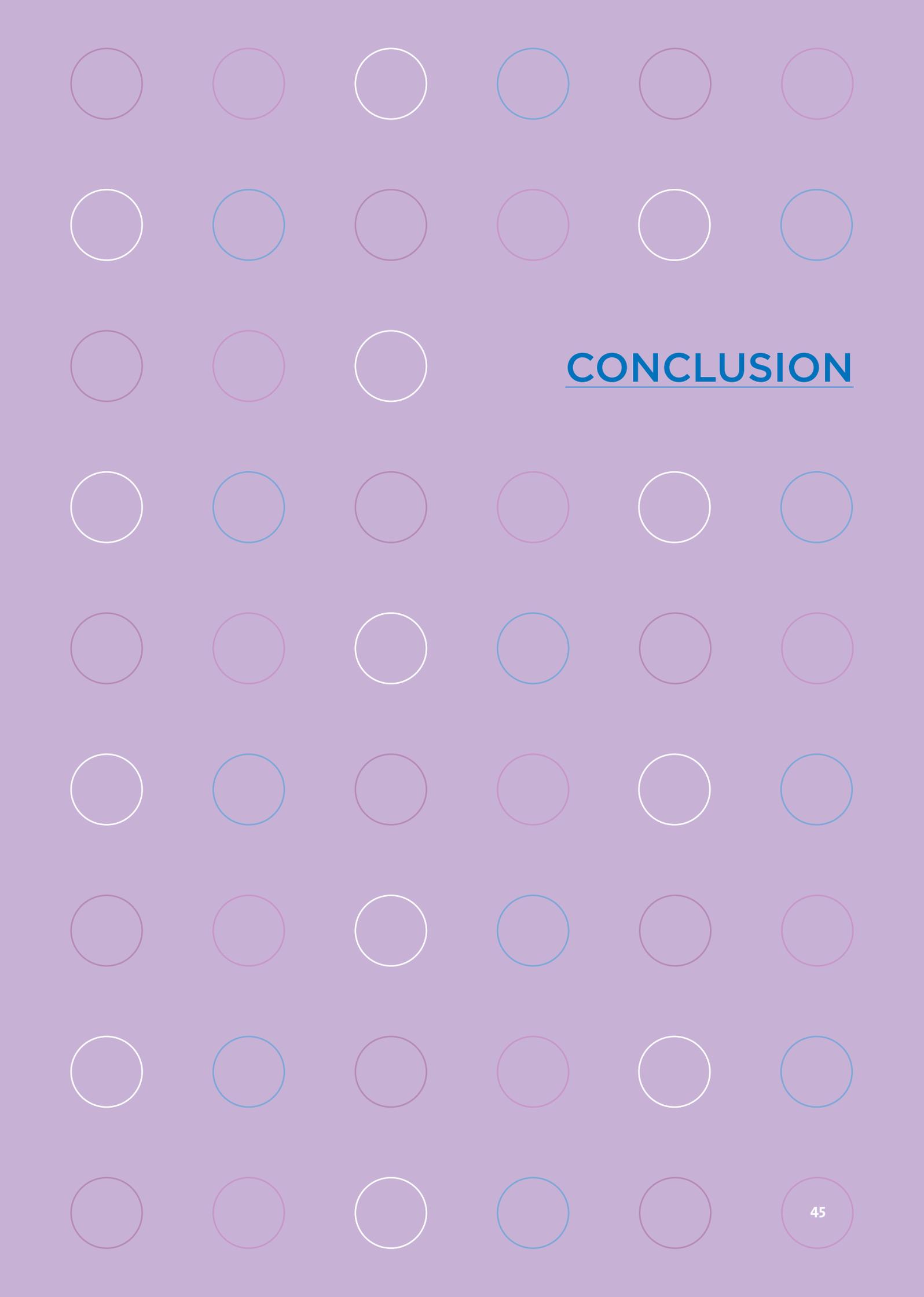
- Strengthening links and convergence between the regional and national levels and fostering close cooperation and collaboration among Member States.
- Pooling statistical skills, expertise and resources at the regional level. A critical part of the RSDS is the identification and pooling of human resources with the statistical skills and expertise needed in the region (e.g. demographers, national accountants, survey experts, gender specialists).
- Enabling the development of statistical tools and services at the regional level that is more cost-effective than at the national level. Likewise, it contributes to strengthening statistical capacities and promotes harmonization. The adaptation of the WHO questionnaire, the accompanying manuals and the development of the Technical Guidance Note for the study is an example of the regional-level cooperation envisaged by this objective of the RSDS.

Lesson

1. The process of piloting the prevalence studies in five CARICOM countries can be used as a test case for implementing key elements of the RSDS. The use of a common instrument, the common approach and the training of a cadre of interviewers, supervisors and survey managers can foster cooperation and collaboration among member states for the fielding of the next round of VAWG prevalence surveys in the region.

¹⁹ In Jamaica, middle- and upper-middle-income women were not willing to participate in focus group discussions, but a few (four) were willing to give individual interviews.

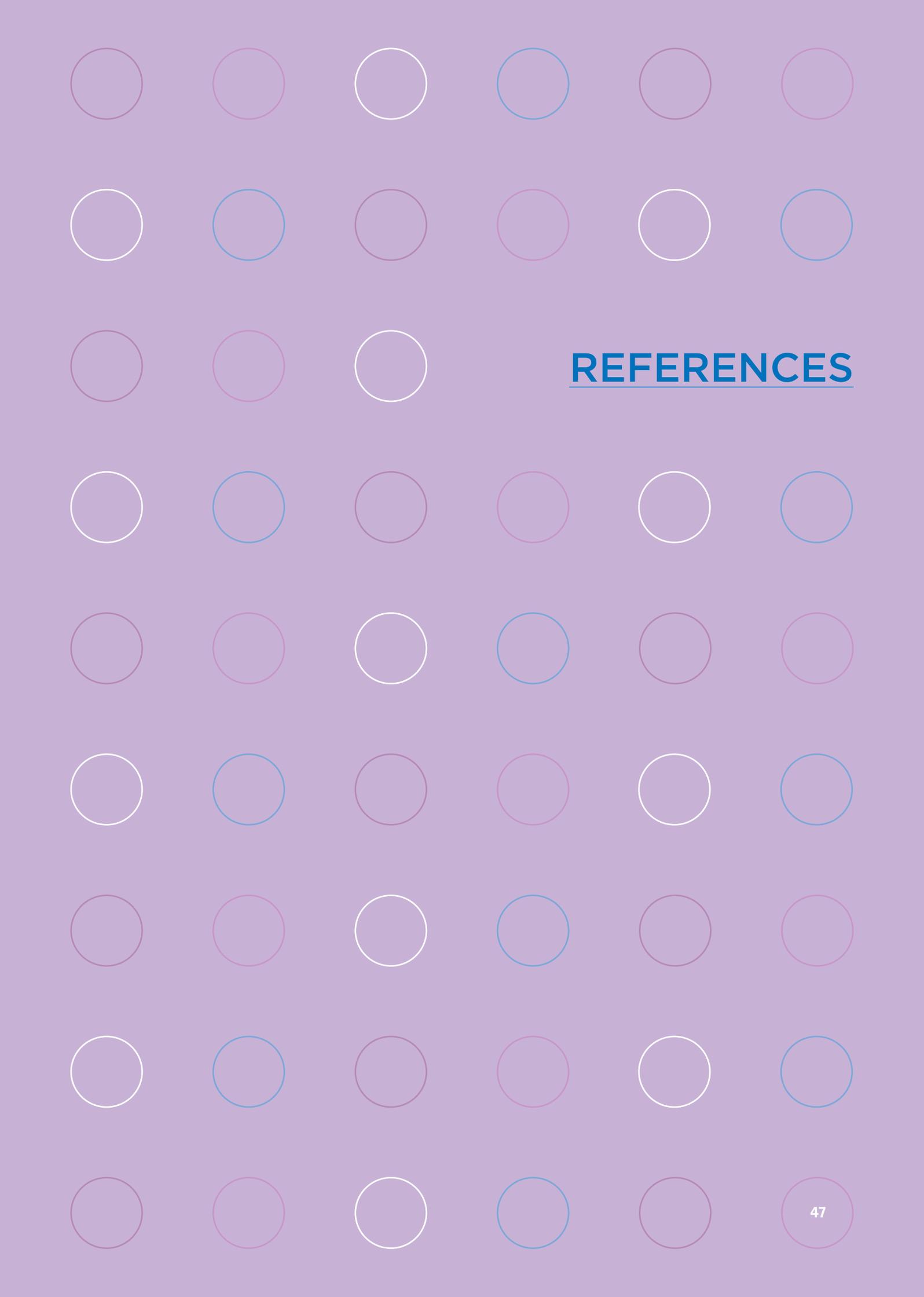
²⁰ Caribbean Community (CARICOM) Regional Strategy for the Development of Statistics (RSDS) – 2019-2030.



CONCLUSION

The piloting of the WHO model of collecting data on VAWG in the Caribbean has benefited the region in several ways. Both the data collected and the processes via which it was collected have helped to strengthen the capacity of CARICOM member countries to respond to VAWG and to implement future surveys to collect data on the internally agreed indicators on VAWG.

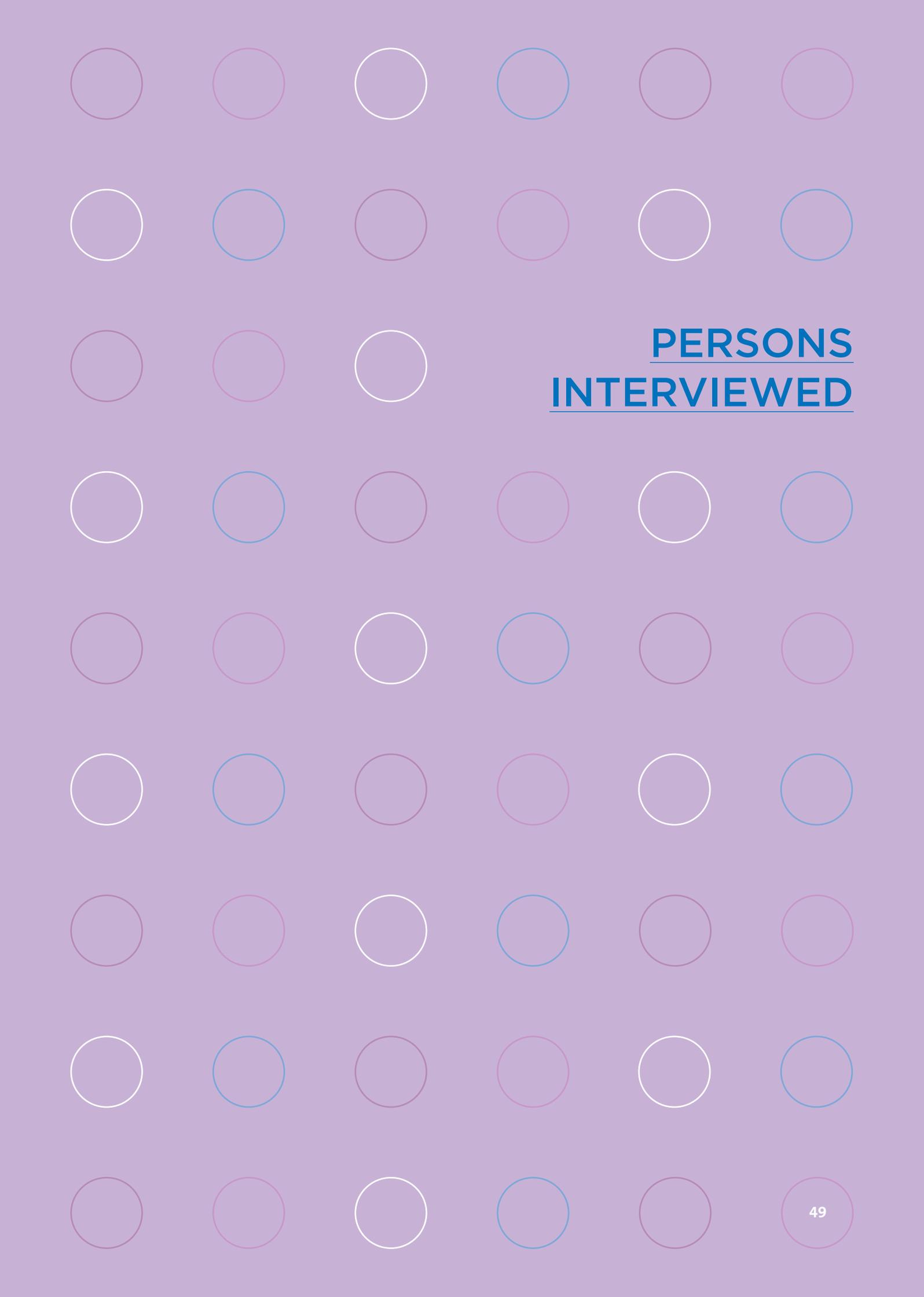
Though the NSOs were not involved in all five countries, where they were, their participation raised awareness of how this survey should be designed, implemented and managed. In countries where there was no NSO involvement, capacity has been built in private companies to, at the very least, provide consulting services to either train or implement the survey in the next round. The deliberate step to build regional expertise in implementing the study — both the qualitative and quantitative aspects — also means that there is now a regional pool of persons who are trained in the methodology and protocols and who understand how these can best be implemented in the region.



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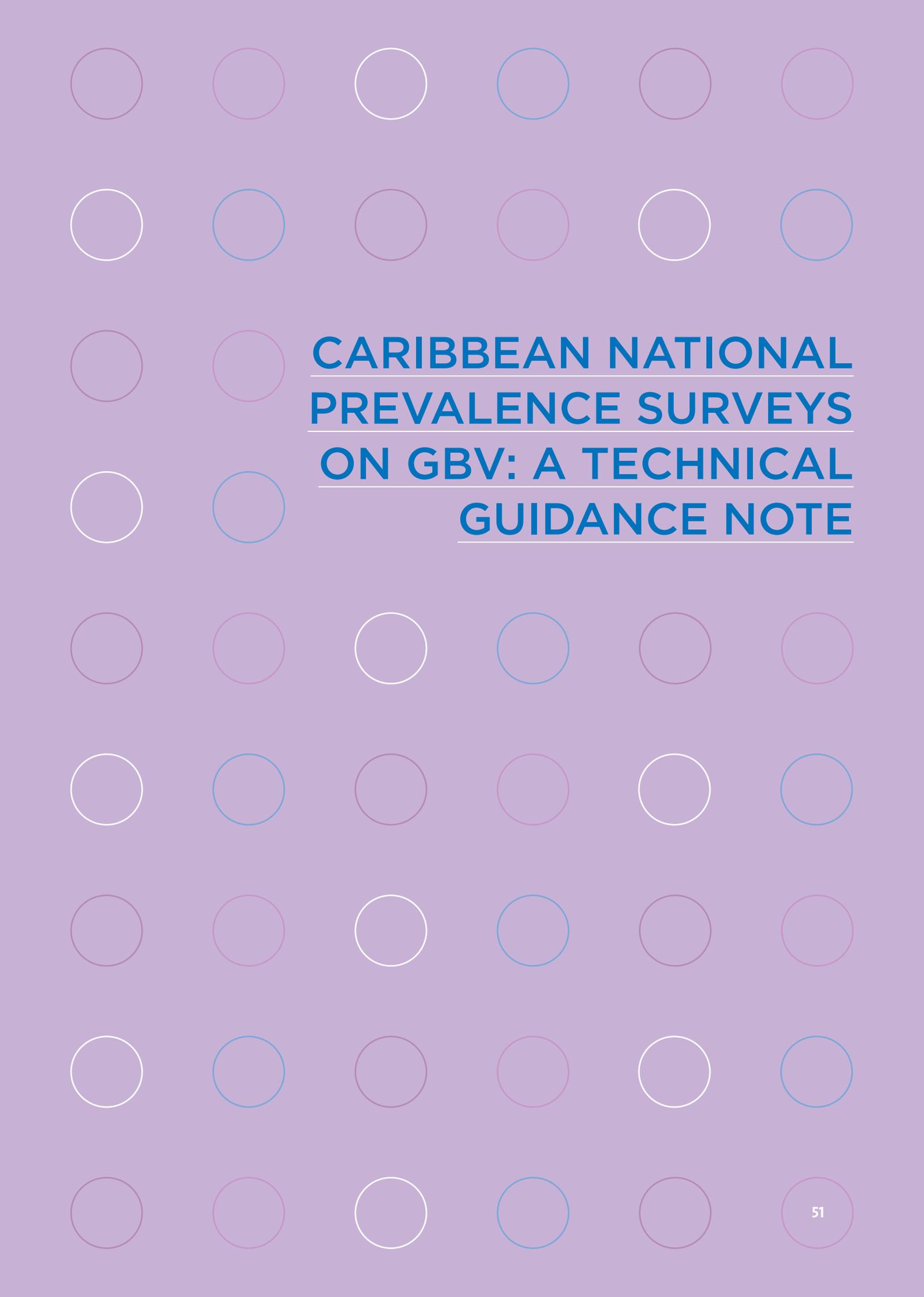
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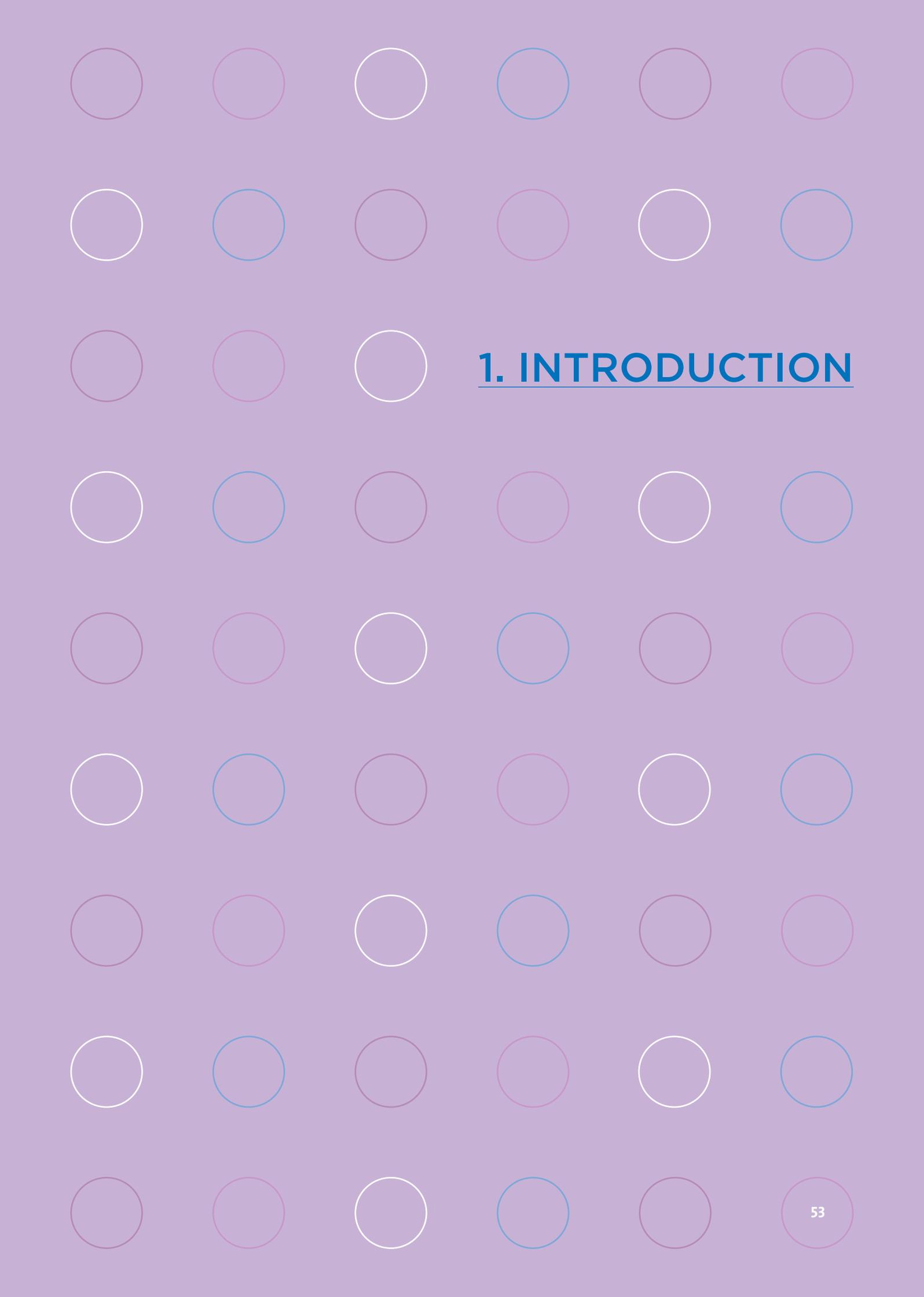
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**CARIBBEAN NATIONAL
PREVALENCE SURVEYS
ON GBV: A TECHNICAL
GUIDANCE NOTE**





1. INTRODUCTION

Women and girls' experience of violence is one of the most prevalent human rights violations in the Caribbean. Neither social nor economic status mitigates this experience; it has no boundaries. As noted by the World Health Organization (WHO), intimate partner violence occurs in all settings and among all religious, socioeconomic and cultural groups; however the burden is borne largely by women.¹ Article 1 of the United Nations Declaration on the Elimination of Violence against Women (CEDAW) defines violence against women as "any act of gender-based violence that results in, or is likely to result in, physical, sexual, psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life."² Women and girls in the Caribbean region experience both intimate partner and non-partner violence at rates in excess of many regions of the world.³ While intimate partner violence entails a mix of physical and sexual violence, non-partner violence is more frequently of a sexual nature and is most often perpetrated by someone the woman knows. Violence against women and girls (VAWG) has serious consequences, both for survivors and for society as a whole. Both physical and non-physical violence have direct and indirect impacts on women's physical and mental health. Violence indirectly affects women and girls through factors such as deteriorating physical and mental health brought on by prolonged stress and depressive disorders. Violence also affects women's productivity and security; the health, education and psychosocial outcomes of

their children; and the capacity of the health and justice systems to respond to cases of abuse.

VAWG is a clear barrier to sustainable development. The Sustainable Development Goals (SDGs) that drive the 2030 development agenda have identified the reduction of violence against women and girls as a global development priority and as a catalytic factor for achieving the SDGs in order to achieve peace, economic productivity, rights, justice and social cohesion (Goals 5 and 16).⁴ Research findings reveal that when direct and indirect costs are considered, domestic and intimate partner violence cause more deaths and entail much higher economic costs than homicides and civil wars.⁵ Data also indicates that the cost of VAWG could amount to 2 per cent of the global domestic product, equivalent to \$1.5 trillion.⁶ In light of the widespread prevalence and severe personal and national consequences of VAWG, accurate data is vital for understanding the nature of this violence, to assess and monitor its prevalence in the region and to design interventions to address the issue. In noting the economic and social harm caused by such violence, the 57th Session of the Commission of the Status of Women (CSW57) urged national governments to undertake multidisciplinary research and analysis on VAWG, not only to understand the phenomenon, but also to inform legislation and response strategies. Despite having indicative statistics, no CARICOM member state generates regular and comprehensive national data on the prevalence, nature and

1 WHO. Intimate Partner Violence: Understanding and Addressing Violence against Women. Available at: http://apps.who.int/iris/bitstream/handle/10665/77432/WHO_RHR_12.36_eng.pdf?sequence=1

2 www.unwomen.org/en/digital-library/...2015/.../infographic-violence-against-women

3 <http://caribbean.unwomen.org/en/our-work/ending-violence-against-women/advocacy-brief>

4 UNDP and UN Women (2017). From Commitment to Action: Policies to End Violence against Women in Latin America and the Caribbean; Regional Analysis document. Available at: <http://www.latinamerica.undp.org/content/dam/rblac/docs/Research%20and%20Publications/Empoderamiento%20de%20la%20Mujer/UNDP-RBLAC-ReportVCMEnglish.pdf>

5 www.unwomen.org/en/news/stories/2016/9/speech-by-lakshmi-puri-on-economic-costs-of-violence-against-women

6 Ibid.

response to VAWG, including sexual violence. Although the police and key ministries have made notable efforts to collect administrative data on VAWG, the “lack of comprehensive, systematic data remains a serious bottleneck.”⁷ In an effort to standardize the data gathered on VAWG, the UN Statistics Commission recommended the following as the core indicators for which data should be collected:

1. Total and age-specific rate of women subjected to physical violence in the last 12 months by severity of violence, relationship to the perpetrator and frequency;
2. Total and age-specific rate of women subjected to physical violence during lifetime by severity of violence, relationship to the perpetrator and frequency;
3. Total and age-specific rate of women subjected to sexual violence in the last 12 months by severity of violence, relationship to the perpetrator and frequency;
4. Total and age-specific rate of women subjected to sexual violence during lifetime by severity of violence, relationship to the perpetrator and frequency;
5. Total and age-specific rate of ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner in the last 12 months by frequency;
6. Total and age-specific rate of ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner during lifetime by frequency;
7. Total and age-specific rate of ever-partnered women subjected to psychological violence in the past 12 months by the intimate partner;

8. Total and age-specific rate of ever-partnered women subjected to economic violence in the past 12 months by the intimate partner; and

9. Total and age-specific rate of women subjected to female genital mutilation.

In addition, the SDGs have a specific target of eliminating violence against women and girls (Target 5.2), which also provides a set of indicators to be monitored globally to track progress in this area.

Prevalence surveys, one method of collecting data on VAWG, involve using a comprehensive questionnaire implemented by specially trained female interviewers to collect data from women in a sample of households. These surveys provide more reliable estimates of VAWG than administrative data that is collected from hospitals, the police or the courts. Administrative data depends on factors such as survivors of (or witnesses to) violence overcoming personal hesitations in reporting and the willingness of police/authorities to accept, file or make a report on violence. Because not every incidence of violence is recorded in an official report, such statistics are less reliable than prevalence surveys.

Understandings of the nature of VAWG can also be gleaned from qualitative studies, but these studies cannot provide prevalence data (although they are sometimes used in conjunction with prevalence surveys to provide more in-depth information on how women experience violence and the social norms and attitudes that perpetuate VAWG).

There are two major approaches to collecting population-based data on violence against women. The first includes questions or short modules on violence against women within large-scale surveys designed to generate information

⁷ UN Women (ud). Brief on Prevalence survey to measure GBV/VAWG – Jamaica Pilot. Unpublished memo.

on broader issues such as poverty, the status of women and children, crime or reproductive health. The second involves dedicated surveys that are specifically designed to gather detailed information on different forms of violence against women. This technical guidance note discusses these two options in the Caribbean context.

1.1 Purpose

The purposes of this technical guidance note are to:

- a. Examine the options available to CARICOM member states for collecting prevalence data on VAWG;
- b. Recommend the most effective avenue via which prevalence data on VAWG in the region can be collected;
- c. Provide guidance to support the implementation of the qualitative study to complement the prevalence survey; and
- d. Provide guidance to support the implementation of the CARICOM Model of the Women's Health Survey in the Caribbean, guiding the systematic process of planning and executing the survey and disseminating its results.

This technical guidance note is primarily aimed at policymakers and stakeholders working on issues related to the data collection and research that drive programmes regarding the elimination of VAWG. This includes technical staff in national statistical offices (NSOs), planning agencies and national women/gender machineries. As with all technical guidance notes, countries implementing the study should tailor the information provided to their context-specific needs.

Implementing a structured mechanism to collect relevant data will directly address the regional

paucity of data on intimate partner violence and will help shape effective responses. The goal is to ensure that member countries institute standardized mechanisms to collect data on the prevalence of VAWG for use in monitoring policies, programmes and interventions that address the issue.

This technical guidance note does not discuss the overall benefits of using prevalence (or other) surveys to collect data on VAWG in the region, as this was fully examined in a comprehensive background paper submitted to a CARICOM Expert Group in 2014.⁸ That paper's main recommendation was for CARICOM to adapt the *WHO Multi-country Study on Women's Health and Domestic Violence* for use in the region. Accepting that recommendation, the Expert Group approved the use of such surveys, particularly the WHO model, to collect data on VAWG across the region. This was confirmed by the Council for Human and Social Development of CARICOM in May 2014; it was agreed to pilot a CARICOM Model on National Prevalence Surveys on GBV, based on the WHO Model, across the region.

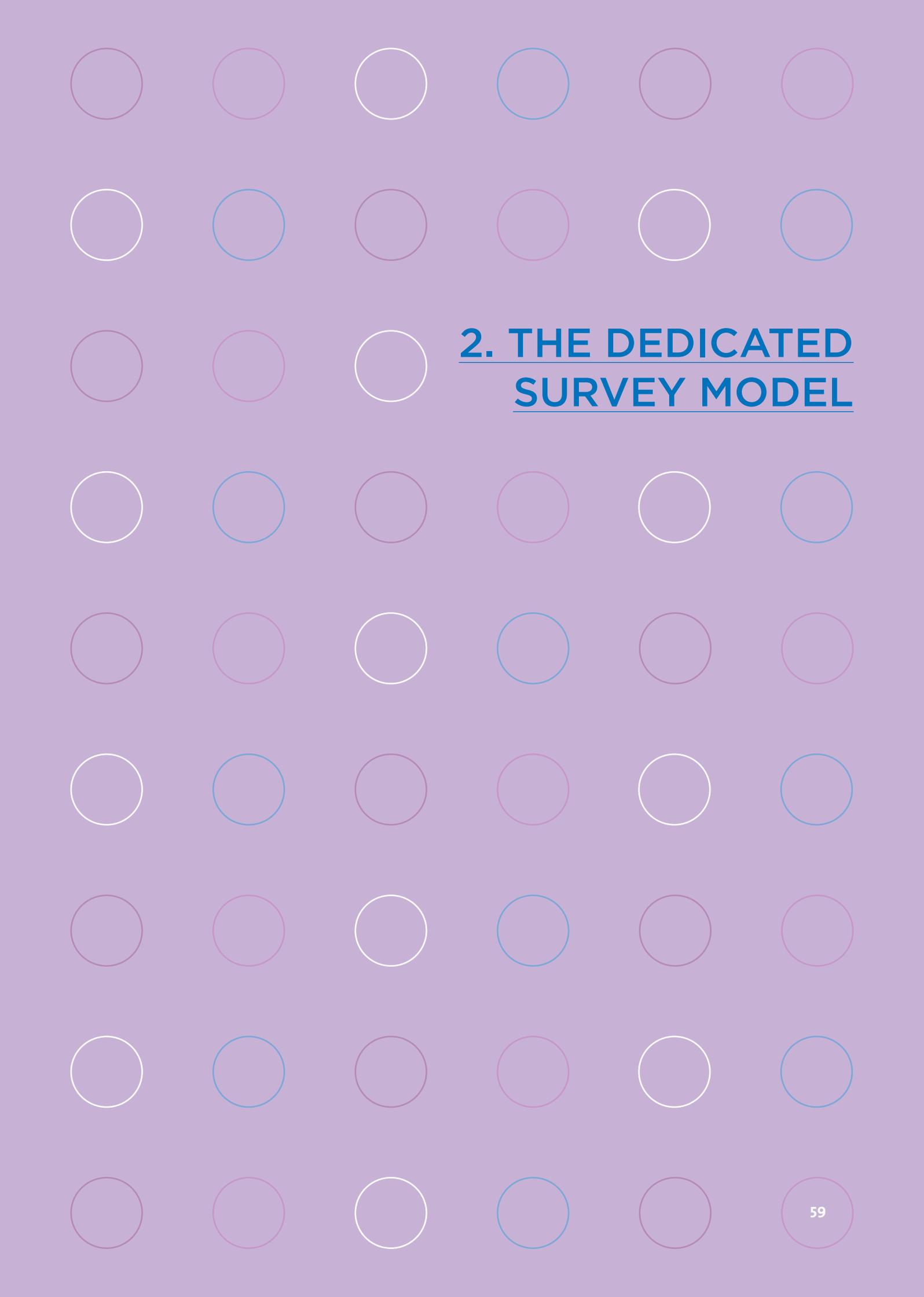
This document is organized as follows:

- Section 1 gives the **introduction and purpose** of the technical guidance note;
- Section 2 examines the **dedicated survey model** and provides a discussion of the WHO Model for collecting data on VAWG (including ethical issues and procedures). It also provides a summary of how this model has been implemented to pilot the survey in four Caribbean countries under partnerships between UN Women, the

⁸ See Jansen, H., and St. Bernard, G., (2014). Strategy Report – Supporting the Piloting of a Model for conducting National Prevalence Survey on Gender-Based and intimate partner violence in the Caribbean: Background document and proposed strategy. submitted to UN Women, MCO, 12 June 2014 (unpublished).

Inter-American Development Bank, USAID, UNDP and other development partners;

- Section 3 presents guidance on implementing the **qualitative study** and integrating the data into the final study report;
- Section 4 examines the '**short module approach**', specifically looking at the nature of the Living Standards Measurement Surveys, commonly referred to as the Survey of Living Conditions (SLC), and Poverty Assessments, that are routinely undertaken in the Caribbean. The section examines the appropriateness of those surveys as a vehicle through which prevalence data on VAWG can be collected. It also considers the appropriateness of the UNICEF-developed Multiple Indicators Cluster Surveys (MICS) to provide data on the situation of women and children across the world. MICS are occasionally conducted in the Caribbean for a module on studying VAWG prevalence;
- Section 5 provides **concluding comments**.



2. THE DEDICATED SURVEY MODEL

Although using a dedicated survey to collect data on VAWG may be the ideal strategy, for many countries—including those in the Caribbean—the cost of doing so may be prohibitive. The cost may also limit the frequency with which such surveys are conducted, weakening the effectiveness and the monitoring, policy and programme development impact of collecting such data. The UN Commission on Statistics has outlined the following issues associated with the use of stand-alone prevalence surveys to collect VAWG data:

- i. As a stand-alone survey, costs must be borne for all aspects of survey development and implementation. In addition to standard costs associated with any sample survey, there are additional costs associated with consulting stakeholders, testing the questionnaire, selecting and training interviewers and special considerations needed to meet ethical requirements.
- ii. Questionnaires are comprehensive and adaptable. This allows for fielding a wide range of questions that can help to better understand the complexities of women's experience with violence, and not just measure prevalence. These include detailed questions on issues such as experiences of violence (including frequency), consequences and help-seeking.
- iii. Sample design and sample size are tailored to the survey objectives. This can ensure that the sample size is sufficient to meet survey objectives and that the sample appropriately includes specific subgroups of interest. It also allows for the construction of a sample frame that increases the probability of higher response rates.
- iv. Interviewers are specially selected according to specific criteria. In these surveys, all interviewers are female.
- v. Interviewers are trained to implement specific measures to ensure the safe participation of respondents, to respond appropriately to any indication of emotional trauma on the part of participants and to recognize a similar response in themselves.
- vi. The wide range of questions on which data is collected allows for a comprehensive analysis of the data to examine the direct and indirect impacts of intimate partner and non-partner VAWG, partner characteristics and behaviour, risks associated with the socio-demographic characteristics of women and their partners and the severity of violence.

The United Nations Statistical Commission (UNSC) has concluded that estimates from dedicated surveys reflect the true prevalence of VAWG more accurately than larger-scale surveys. This is because dedicated surveys allow multiple opportunities for respondents to disclose their experiences of violence and because dedicated surveys are designed to enable interviewers to establish a rapport with respondents. As a result, dedicated surveys generally yield higher prevalence rates than a module of questions incorporated into large-scale surveys on broader topics.

There are several types of international stand-alone surveys⁹ that are designed to collect VAWG data. This technical guidance note discusses the WHO multi-country study model, as this was adapted for implementation in the Caribbean.

Surveys on violence against women are most effective when conducted as dedicated surveys, that is, surveys designed primarily,

9 Such as the International Violence against Women Survey. Available at: <https://www.heuni.fi/en/index/researchareas/violenceagainstwomen/internationalviolenceagainstwomensurveyivaws.html>

if not exclusively, to gather detailed information on the extent of different forms of violence against women. Such surveys have the potential to produce high-quality statistics, since they use interviewers who are trained specifically for that purpose and who are well equipped to deal with this sensitive topic.

UN Statistics Commission (2014:p.6). Guidelines for Producing Statistics on Violence against Women: Statistical Surveys.

2.1 The WHO Multi-Country Study Model

The WHO multi-country model on studying women's health and domestic violence was designed to provide reliable estimates of intimate partner and non-partner violence against women. First implemented in 1999, the model was developed to use surveys to collect data on VAWG prevalence, related factors and consequences. Other survey objectives include:

- Determining associations between intimate partner violence against women and a range of health and other outcomes;
- Identifying factors that may protect or put women at risk of intimate partner violence;
- Documenting how women cope with intimate partner violence, including the strategies and services used;
- Gaining an understanding of how social contexts and cultural norms drive intimate partner violence and other types of violence against women; and
- Making the data available for formulating policies, legislation and programmes of intervention to eradicate violence against women.

The survey questionnaire includes an individual consent form to be signed by the interviewer only, indicating that the interviewer has read the consent procedure to the respondent. In keeping with strict confidentiality protocols, the respondent is not asked to sign this form.

The questionnaire's twelve sections are designed to obtain a wide range of relevant details about the respondent, such as her community, her general and reproductive health, her financial autonomy, her children, her partner, her experiences of partner and non-partner violence, the impacts of partner violence on her life, and her coping mechanisms. Taken together, the responses from these sections provide a comprehensive picture of how violence affects women's lives and those of her family.

Specific protocols govern all aspect of the survey methodology, including designing the questionnaire, recruiting and training interviewers, recruiting respondents, conducting the interview and disseminating research findings. These protocols honour the experiences of the women who provide the data and ensure that participating in the research does not harm or put at risk respondents or interviewers.

In addition to the survey, the WHO model provides for the use of a qualitative enquiry to further explore some of the contextual issues that drive VAWG. The qualitative enquiry explores some of the more deeply entrenched cultural and social issues, with participants being able to fully articulate their beliefs and experiences on the matter. In tandem with the survey findings, the qualitative study provides a comprehensive assessment of the VAWG situation in each country. Though survey data is typically heavily emphasized, the qualitative data is critical to designing and implementing interventions to eliminate VAWG.

2.2 Piloting/Adapting the Model in the Caribbean

The WHO model has been piloted in five CARICOM countries: Grenada, Guyana, Jamaica, Suriname and Trinidad and Tobago. The process began in Jamaica and Trinidad and Tobago, which fielded their surveys first; implementations in Grenada, Guyana and Suriname then followed. Though the questionnaire used was almost identical in all countries, some modifications were made to reflect sociocultural nuances in each. The base WHO questionnaire was modified in Jamaica to include questions from the country's Labour Force Survey and the Jamaica Survey of Living Conditions. These questions captured data on household characteristics (e.g. access to basic amenities) and on respondents' employment and occupational status. This data was used to develop socioeconomic profiles of households and respondents. All other countries used the WHO questionnaire as modified for the Jamaica context as their starting point, making further modifications to some demographic and socioeconomic variables. The core questions in the woman's questionnaire were unchanged.

The CARICOM pilot studies drew heavily on the qualitative enquiry. With the exception of Suriname, all countries conducted a qualitative study in addition to implementing the survey. In Jamaica, the qualitative data was incorporated into the final report; this was not possible in Trinidad and Tobago due to a misalignment in timing of both activities. For Grenada and Guyana, the data was available for use in the final report.

2.2.1 Planning the Survey

Survey planning should begin at least six to nine months before expected fielding. Key considerations in planning survey execution include:

1. The organizational arrangements for survey administration;
2. Sample design;
3. Required pre-survey sampling activities;
4. Recruiting interviewers;
5. Training interviewers;
6. Collecting the data; and
7. The technical and organizational arrangements for conducting the qualitative study.

2.2.2 Organizational Arrangements for Survey Administration

Survey planners and implementing partners anticipated that the NSOs would be the vehicle for fielding the survey as per the recommendation from the UN Statistics Commission Guidelines on Collecting Data on Violence against Women and Girls (2014). However, some countries, such as Trinidad and Tobago, used private contractors.

The mechanism via which survey data is collected depends on several issues, including NSO budget and capacity to undertake the research. By taking ownership of this activity, NSOs invest in their country's long-term capacity to conduct these surveys. Further, an NSO's mandate typically emanates from legislation governing the collection and use of official statistics. These laws generally provide authority for the collection, analysis and publication of a wide range of household social and economic data and for confidentiality protections regarding the data gathered. This firm legislative framework provides the most protective and secure structure for collecting sensitive information about women's experiences with violence.

Ideally, once the legal basis has been established, surveys on violence against women should be

incorporated into the national statistical system's programme as a regular data collection activity. Surveys on violence against women should be conducted every five to ten years in order to allow for the tracking of trends (UNSC, 2014). This periodicity will depend on national statistical agency capacities.

Given the capacity of some NSOs in the region, not all countries are able to field this survey via an NSO. Nonetheless, NSOs should have a right of first refusal. Further, governments should have to give explicit permission for a private firm to be used, as was the case in both Suriname and Trinidad and Tobago. In cases where a private firm is conducting the survey, it is useful to include NSO representatives on the steering committee guiding the study, as was done in Trinidad and Tobago for the inaugural survey. Though not offering the level of capacity-building necessary to ensure the long-term ownership of the survey, NSO participation on the steering committees raises awareness about the associated survey methodology and procedures.

2.2.3 The National Steering Committee

Survey implementation is best overseen by a national steering committee (NSC) comprising representatives from key stakeholder agencies from governments, women's organizations, academia and, where applicable, international development partners. So constituted, an NSC also becomes a mechanism that improves collaborations among researchers, activists, policymakers, donors and other international development partners in the effort to eliminate VAWG.

The key responsibilities of the NSC include:

1. Guiding the overall implementation of the prevalence survey;

2. Ensuring alignment with the core methodologies, ethical principles and questionnaire as per the CARICOM Model of the WHO global methodology;
3. Determining the strategy for conducting the qualitative aspect of the study, including the primary target groups and thematic areas for the qualitative data collection;
4. Recommending the establishment of ad hoc advisory or expert subgroups¹⁰ to support the implementation of the prevalence survey;
5. Advising on how to overcome bottlenecks encountered in survey implementation;
6. Reviewing and approving the final report for public dissemination;
7. Guiding the launch of the final results;
8. Advising on strategies to ensure the effective use of the findings; and
9. Agreeing to and establishing protocols for sharing the survey dataset.

The NSC terms of reference should give the NSC the authority to organize subcommittees as it sees fit; these subcommittees should be ad hoc advisory groups that support study implementation. Subcommittees can include members of the core NSC and any other technical expertise that may be needed for specific purposes.

WHO strongly recommended that a research subcommittee be convened to focus on the technical details of the study. This subcommittee would provide more specialized attention to guide the quantitative and qualitative aspects of the study, including oversight for the application of study ethics and methodology — particularly

¹⁰ An NSC may have a Research Subcommittee, a Communications Subcommittee or a Consultative Subcommittee of NGOs or service providers.

the strategy for the conducting the study's qualitative aspects. The research subcommittee would provide guidance on these matters to the steering committee. Given the periodicity of the survey, the NSC can be convened at the start of the planning period and be in force until the completion of the survey (generally a period of between 12 and 18 months).

Given the sensitivity and seriousness of the topic and the necessity to protect the women who

will be interviewed, confidentiality is central to the governance of the steering committee. The nature of the survey requires that no public mention or disclosure of the study should be made prior to final approval by the steering committee and necessary government review of the final results. All information about the survey should be released at the end of the study.

BOX 1

Criteria Used in Jamaica for Nominated Non-Core NSC Members of the Research Subcommittee¹¹

Nominated members for the research subcommittee must have at least seven years of experience in at least four of the five criteria areas listed below:

1. Demonstrable research and publication experience, particularly in the areas of gender and development, social policy, health, criminology or related areas;
2. Demonstrable experience and knowledge of survey methodologies;
3. Demonstrable experience and knowledge in quantitative and qualitative research methodologies, especially focus group research and participatory research;
4. Postgraduate degree from an accredited university; and
5. Knowledge of research ethics and standards.

2.2.4 Ethical Review

Research involving human subjects must be approved by an appropriate ethics committee. In the region, the University of the West Indies and other universities have ethics review processes that are utilized by the universities themselves, other research organizations and individual researchers. Notwithstanding this mandate, Jamaica did not seek an ethics review and approval for the survey. In contrast, Grenada and Guyana (where NSOs led the surveys) and Suriname and Trinidad and Tobago did seek such a review (see Box 2).

Given the legal and ethical frameworks under which they operate, NSOs are generally not required to seek ethical review of their research projects. In addition to national legislation, NSOs are guided by the United Nations Fundamental Principles of Official Statistics (United Nations, 1994), which establishes clear professional and scientific standards for the collection and use of data. It notes “in order to retain trust in official statistics, the statistical agencies need to decide according to strictly professional considerations, including scientific principles and professional ethics, on the methods and procedures for the collection, processing, storage, and presentation

¹¹ National Steering Committee Jamaica Terms of Reference.

of statistical data” (Principle 2, UN Fundamental Principles of Official Statistics).

It is recommended that the study proposal be submitted to a recognized ethics review committee even if the survey is being led by the

NSO. Where the survey is being undertaken by a private firm that does not provide an established legal or ethical framework for the collection and use of data, such submission should be mandated.

BOX 2 Ethics Review

Any study involving human subjects must be held to the highest ethical standards. The Women’s Health Survey was no exception. Its ethical protocols were adapted from the guidelines developed by WHO for conducting research on VAWG. Ethical approval to conduct the study was sought from the Campus Ethics Committee of the University of the West Indies, and granted in January 2017.

For respondents, the main risks associated with participating in this survey were experiencing distress triggered by exposure to questions relating to sensitive personal experiences and/or experiencing violence as a result of their participation. Appropriate survey protocols were used to mitigate these risks. These included ensuring participant confidentiality throughout the study (from field visits through all stages of data handling); training field interviewers to minimize, recognize and respond to respondent distress; and providing support service information to all participants and referrals as necessary. Additional protocols included having no publicity about the study prior to or during field- work and referencing the survey discreetly as “the Women’s

Health Survey” in order to keep its full purpose private prior to the administration of the informed consent form. Protocols were also established to bolster the safety and well-being of field staff.

The Ethics Committee also granted permission to waive parental consent for minors ages 15 to 17. These minors were included because they are particularly vulnerable to VAWG. Currently, there are little to no data to inform policy and programming that impact the well-being of minors in Trinidad and Tobago. The waiver did not affect the rights or welfare of any of these participants, and they were duly informed that participation was voluntary, that any question could be skipped and that the interview could be terminated at any time. The waiver was requested to ensure the safety of eligible minor respondents who might be experiencing abuse in their homes and retain the confidentiality associated with their participation. It was felt that young women of this cohort were old enough to sufficiently understand the purpose, content and potential risks and benefits of the survey to give their informed consent.

12 National Women’s Health Report for Trinidad and Tobago, p. 15. Available at: <https://publications.iadb.org/en/national-womens-health-survey-trinidad-and-tobago-final-report>

2.3 Sample Design and Pre-Survey Sampling Activities

As per the consensus reached in CARICOM, the target population for the Women's Health Survey comprises women aged 15 to 64 years who are usual residents of the country. The survey sample excluded people living in non-private dwellings (e.g. group dwellings, military camps, mental institutions, hospitals and prisons). WHO and the UNSC recommended setting the minimum age at 15 years because including younger respondents may cause uncertainty about the nature of the violence experienced. Such uncertainty may arise from factors such as physical violence due to gender stereotyping and male control over female partners intermixing with corporal punishment by parents or guardians or by fighting among siblings and playmates. Lowering the age could also compound ethical challenges related to laws requiring mandatory reporting of knowledge of sexual and physical abuse of children.

The survey sample also excluded persons with disabilities that would make it difficult for them to respond confidentially to the questions, such as persons who have an intellectual disability or who are deaf. Additionally, only women involved in heterosexual relationships are included in the survey (stakeholders noted this exclusion after the publication of the country reports from the pilot). Only women were interviewed in the surveys, as the emphasis was on measuring the prevalence of intimate partner violence (of which women are overwhelmingly survivors) and understanding women's experience with violence. Other surveys, such as the International Men and Gender Equality Survey and the UN Multi-country Study on Men and Violence, collect data on men.¹³

¹³ The International Men and Gender Equality Survey is available at: <https://promundoglobal.org/programs/international-men-and-gender-equality-survey-images>. The UN Multi-country Study on Men and Violence is available

Though the concerns about excluding these important sub-populations are valid, resource constraints make it difficult to cover all important groups because the sample size would have to be enlarged to ensure adequate representation of the various populations.

2.3.1 Sample Design

The quality of the sample selected for the survey is dependent on the completeness of the sampling frame from which it is drawn. For the pilots, Jamaica, Grenada and Trinidad and Tobago used the latest population census as the master frame from which the sample was drawn (Guyana's master frame came from their recent STEP¹⁴ survey). Suriname used the data from the Electricity Board and the Living Conditions Surveys as the sample frame for the survey, as it did not have access to census data from the NSO.

The survey employed a multistage probability sampling strategy.

Stage 1: Primary Sampling Unit Selection: This is the selection of geographical areas ('enumeration districts') across all parishes and regions. An enumeration district is defined as an independent geographic area with a specified number of dwellings developed for the purpose of data collection. The size is determined by the dwelling count of enumeration districts obtained from the most recent population census.

Stage 2: Secondary Sampling Unit Selection: The list of households collected from each of the enumeration districts that were selected in the first stage became the secondary sampling frame. From this list, a number of households were selected for the survey using systematic sampling with a random start.

at: <https://www.svri.org/what-we-do/research-support/un-multi-country-study-men-and-violence>

¹⁴ The STEP survey looks at chronic diseases risk in a population.

Stage 3: Respondent Selection: This involves selecting women in the 15 to 64 years age group living in the selected dwellings. In this stage, all eligible women in the selected household were listed, and one was randomly chosen to be interviewed. Selection methods included the ‘next birthday’ method and the Kish Selection Grid.¹⁵

Implementing a household listing in existing primary sampling units prior to the survey has the advantages of obtaining up-to-date information for the sample design and ensures that households with eligible respondents are selected. The listing process involves sending out survey teams in the selected primary sampling units to locate the boundaries and prepare a list with the names of the head and the address or location of each household.

The household listing operation provides the sampling frame for the second stage of sampling, which is necessary for selecting households in the survey. The listing operation reduces coverage errors and improves sample weighting.

Low response rates from a particular group of persons will negatively affect sample representativeness. A large number of missing information for certain questions (item non-response) will affect the overall quality of the data. A key strategy used to increase response rates and to ensure high data quality is the proper

recruitment and training of interviewers and supervisors. Due to the nature of the survey, no large-scale public education will be done prior to the fielding of the survey; hence, all efforts to increase response rates should focus on early engagement of selected households.

2.4 Recruiting Interviewers

Given the sensitivity of the questions asked, survey protocols call for an all-female team of interviewers. When considering applicants for an interviewing position, the applicants’ basic skills and personality traits should be assessed. Only interviewers who have high levels of reading and computational skills and who are able to follow instructions should be considered.

Feedback suggests that respondents prefer to speak to older women who they perceive to be more sympathetic to their experiences. Hence, selected women are expected to be mature, able to convey a sense of confidentiality and capable of earning the confidence of the women being interviewed. Desirable personality traits include receptiveness to others’ ideas, open-mindedness, high motivation, an ability to interact across socioeconomic groups, good interpersonal skills at building rapport and experience in dealing with sensitive issues. In the Caribbean, recruitment and deployment must give special consideration to the candidates’ confidentiality, as in small societies there is an increased likelihood that enumerators may know the survey respondents.

Where NSOs do not have sufficient female staff to dedicate to the survey, additional interviewers must be recruited. Recruitment can take place via direct referrals and via traditional and social media advertisements. Care must be taken while recruiting to maintain the privacy of the survey. It is important, therefore, to ensure that posted advertisements contain only general information

¹⁵ The Kish Selection Grid is considered to be a true random procedure for choosing respondents in a selected household. Once a household is selected, the interviewer creates a listing (sampling frame) of all the persons in the household that are eligible to be interviewed. This listing includes the person’s name, sex, relationship to the head of the household and age. Once the listing is done, each eligible member is assigned a unique number. Then, using a randomized response table, a particular member is chosen for the interview. The use of Kish grid leads to a random sample of the household members and decreases bias in the survey. See Kumar, Rohit. (2014). Respondent Selection Methods in Household Surveys. *Jharkhand Journal of Development and Management Studies*. XII. 5701-5708.

about the nature of the survey that does not indicate that it is intended to collect data on VAWG.

Special consideration should be given to the candidates' availability to participate in the extensive training exercise that follows selection. Recruitment may also include screening via a brief questionnaire on gender attitudes drawn from the survey questionnaire. When this approach was used, only candidates with neutral or progressive gender attitudes were selected due to the nature of the survey.

Selection should be made by the persons who will be directly in charge of field operations for the survey, experienced fieldwork supervisors, or human resource specialists in the NSOs who have with experience in recruiting field personnel.

It is important to allow sufficient time to recruit interviewers before the scheduled beginning of training. If recruitment is done hastily, some important traits may be compromised in the interest of putting together a team in time for the survey. This can result in the hiring of a team of interviewers whose lack of skill, tact or persistence may affect response rates and data quality. Because the interviewers are the primary vehicle through which the survey is implemented, they must be well-equipped to support its success.

2.5 Training Interviewers

All field staff should undergo extensive field training. This training, generally lasting two to three weeks, should be facilitated by persons with prior experience in implementation surveys or who have received training in the survey methodology and protocols. The training should be designed to give field staff a comprehensive understanding of the study's theoretical and practical aspects. The training should prepare

the team to deal appropriately with respondents' potentially difficult personal stories and with their own emotional responses to the information shared by the women. Training methods can include lectures, open discussions and supervised role-plays in pairs and groups.

At a minimum, training should include:

- Background on the difference between sex and gender;
- An overview of VAWG at the international, regional and local scales;
- The causes and consequences of gender-based violence;
- The dynamics of abuse;
- Ethical considerations and safety protocols;
- Interviewing techniques;
- Use of a tablet for survey administration;
- Ensuring privacy and confidentiality;
- How to handle respondent trauma;
- Section-by-section and question-by-question review of the survey instrument in the paper and electronic versions;
- Practice in administering the questionnaire; and
- A pilot exercise that is debriefed and evaluated to inform field procedures.

For supervisors, the training should have additional components in:

- Map reading;
- Household selection;
- Quality-control mechanisms; and
- Signs of interviewer trauma and how to direct interviewers to seek further professional help.

In some instances, this training is conducted in a residential setting in which the trainees stay throughout the training, thus ensuring that interviewers are focused completely on the training. This is the most costly alternative, however, and may not be feasible in all situations. Options for administering training include non-residential, single-site training; multi-site training to facilitate interviewers from different areas; or one central training of trainers followed by a roll-out of interviewer training in multiple sites.

Some countries opted to conduct training in the evening, making allowances for persons who have full-time jobs or other responsibilities that make them unavailable for all-day sessions. The chosen strategy will depend on budget and availability of personnel.

Training design should recognize and address the potential that some interviewers may have experienced violence. A confidential process should be in place for affected interviewers to disclose prior experience with VAWG. The process should include the opportunity to share with a facilitation team member and the opportunity to access a professional therapist. All participants should be informed of this process at the start of the training period and should be fully aware that they can opt out of the process if they are unable to cope with the emotional effects of participation.

2.6 Collecting the Data

While the data for the pilot surveys were collected using Computer Assisted Personal Interview (CAPI), the survey can also be conducted using traditional paper-based methods. However, because using CAPI delivers clear accuracy and efficiency benefits, the paper-based approach is not recommended. CAPI applications have the following advantages:

- Data is captured in real time;
- Easier to administer complicated questionnaires;
- No need for additional data entry;
- No need to provide storage for paper questionnaires;
- Reduces cost and time in preparing data files for analysis; and
- Reduced data entry, editing and coding errors due to built-in error check.

When using CAPI, each country will determine which software will best meet their needs. In Jamaica, the NSO's IT Division chose to develop purpose-built software for the survey; other countries used off-the-shelf data collection software, including proprietary and open source packages.

Even when using CAPI, paper questionnaires should be made available to interviewers in the event of device malfunction or where security concerns make it ill-advised to publicly display electronics.

Privacy is a key element of the data collection process. The WHO methodology recommends that interviews should be conducted in a private place in the household, away from the children or the spouse/partner of the respondent. Where this is not possible, the interviewer can arrange, with the consent of the respondent, for the interview to be held in other places where they can speak in private. This could be in any place where the women can share her experiences confidentially (e.g. community centres, green spaces, under a tree or in health centres). Asking women to leave their homes for the interview can ensure the safety of the respondents and avoid unwanted interruptions. However, it may also raise the suspicion of a controlling spouse. All decisions

should be in the respondent's best interest, even if it results in her non-participation in the survey.

Ethical and Safety Issues

The WHO Researching Violence against Women and Girls; A Practical Guide for Researchers and Activists (Ellsberg and Heise, 2005) recognizes that participation in the survey can potentially re-traumatize women survivors of VAWG. Hence, awareness of respondent distress is a key aspect of the data collection procedures and study design.

As with all household surveys using this data collection method, safety is an important consideration during fieldwork. During the pilots, field staff had to be withdrawn from communities in Trinidad and Tobago and in Jamaica due to violence in the areas. In one instance in Trinidad, staff were threatened by a woman's partner who objected to her being included in the survey. Remaining alert to threats in the community and household is therefore an important element in the data collection process.

Responding to reports of child abuse is also an issue. The dilemma of how to comply with legal reporting requirements is particularly problematic when dealing with child abuse. There is no international consensus about how to handle cases of child abuse (Ellsberg and Heise, 2005). In Jamaica, it was decided that in order to comply with mandatory reporting requirements under the Child Care and Protection Act (CCPA), interviewers would report cases of child abuse to the supervisor, who would then pass the information on to the NSO to anonymously report the matter to the Office of the Children's Registry.¹⁶ Each country will decide, in accordance

with their laws, how information of child abuse will be treated.

Data Quality Checks

Taking steps to protect the quality of the data is an important part of data collection procedures. Many quality control responsibilities fall to supervisors who, inter alia, are required to:

- Monitor all aspects of the data collection process on a daily basis in order to ensure that errors are detected and corrected early in the process and ultimately minimized as much as possible;
- Conduct verification checks of at least two randomly selected households done by each interviewer to confirm that the household was visited by the interviewer; For this check, a short questionnaire with basic questions will be administered to the respondents to verify that the selection process and the information given are in accordance with the established procedures;
- Review all completed questionnaires on the tablet computer before they are uploaded to the main server. All major errors and inconsistencies should be corrected before the interviewer is allowed to move to another enumeration area; and
- Maintain close contact with the IT staff and statisticians on the survey team during the fieldwork to provide support and resolve any issues that may arise.

In addition to the data quality checks conducted by the supervisors, data checks can be done to monitor key study variables (e.g. intimate partner violence prevalence, union type). The variables can be monitored by enumeration districts, data collection teams or even individual interviewers. By enabling

¹⁶ The Office of the Children's Registry is the organization to which all reports of child abuse are made.

early identification of potential data problems during fieldwork, timely adjustments can be made to correct issues that are identified.

2.7 Data Analysis and Reporting

Both descriptive and inferential statistics should be reported. The key variables that should be covered in the reporting include:

- The lifetime and current prevalence of the different types of intimate partner violence. These percentages are calculated as the proportion of women who have experienced at least one act of the respective kind of violence either at some point in their lives (lifetime prevalence) or in the 12 months prior to the survey (current prevalence).
- The frequency of violence reported, which reflects how often acts of violence were experienced (categorized as “once,” “a few times” or “many”).
- The severity of violence measured for partner physical violence.¹⁷

In addition, cross-tabulations of prevalence rates by demographic and other factors (such as gender attitudes and childhood experiences with violence) were used to explore various associations. Inferential statistics such as chi-square tests were then used to determine if there were statistically significant associations between prevalence rates and these selected factors. The report also presents information on the consequences of violence, including how it affects women’s health, their children and how they cope. Also included is data on non-partner sexual violence and abuse suffered as a child.

The final report of the study, which should also include information from the qualitative study, should undergo peer review by members of the technical steering committee and any other institution or individual recommended by the NSC.

¹⁷ Severity is determined from the responses pertaining to specific acts of physical violence. The Question by Question Manual provides guidance on how to determine the ‘severity’ of an act.



3. THE QUALITATIVE STUDY

The overall purposes of the qualitative research study are to understand the nature and patterns of violent situations, to explore in what contexts violence occurs and to examine its meaning. The qualitative work should complement the quantitative work, providing a more in-depth understanding of the intersection of violence with demographic and socioeconomic factors. Further, the qualitative study allows for the exploration of details about emotions, preferences, motivations and gender dynamics and the roles these play in experiences of VAWG. The synchronized use of both methods allows for an increased understanding of the complexity of VAWG.

In addition to speaking with survivors and their family members (where safe and appropriate), the qualitative study may include the perspectives and insights of male and female community members. To obtain a complete understanding of VAWG and how it is regarded and addressed institutionally, the data collection can also include the perspectives of state agents, health care providers, police and magistrates, local authorities, community leaders, women's rights activists and other key stakeholders.

The qualitative study can be based on data gathered using the following methods:

- In-depth interviews with survivors of violence who have a range of experiences (in terms of types of violence) and characteristics (such as age, ethnicity and education);
- Semi-structured interviews with key informants, such as service providers, humanitarian personnel, police, judges, community leaders, representatives of women's organizations and perpetrators; and

- Participatory focus group discussions with groups of individuals representing key sectors of the population.

As with the quantitative survey, informed consent must be obtained from all participants prior to data collection. Care should always be taken to ensure that women do not feel pressured to share experiences of violence in group settings. In fact, the WHO standard bars the sharing of these experiences in focus group discussions, and requires that the facilitators make this clear to all participants (Ellsberg and Heise, 2005). In the Caribbean, there were difficulties adhering to this restriction. In focus groups discussions in Guyana and Jamaica, women spoke of their experiences with intimate partner violence, despite not being asked, and in fact being explicitly told that they were not required to share their stories of violence. While researchers should never solicit such experiences, women may be allowed to share their stories in the group discussions, which should be a safe space for all participants.

All interviews should be held in private rooms and, if possible, focus groups should also be held in private rooms or sparsely populated areas outside. Facilitators and note-takers should work to ensure confidentiality of responses through several mechanisms, including the anonymizing of notes and recordings.

3.1 Ethical Review

The qualitative study proposal must also be subject to review by a reputable ethical review committee/board prior to implementation. Ideally, the proposal for the qualitative study should be submitted with the proposal for the quantitative survey, as they are both components of the same comprehensive study on VAWG. This review is particularly critical to ensure that the focus group discussion protocols do not contain

questions/issue that may inadvertently elicit comments about women's personal experiences with violence.

3.2 Recruitment and Sampling

Various strategies can be used to recruit study participants, including direct referrals and non-discriminative snowball sampling. Referrals could be obtained through members of the NSC, survey fieldworkers, organizations that provide services to families/women or through other personal and professional networks. Given the sensitivity of the topic, it is important to make it clear that focus group discussions will include women's beliefs, perceptions and understandings of the causes and consequences of VAWG (intimate partner violence in particular). Women must be assured that they will not be asked or expected to share any personal experiences of violence in the group.

When recruiting participants for focus group discussions, be mindful of the fact that the dynamics of the group will heavily influence participation and the quality of the data provided. Hence, issues such as differences in education, occupation and union status may affect group cohesiveness. This should be considered when composing groups. Homogenous groups may help to create an environment in which participants are comfortable with each other and feel free to express their opinions.

Though not often given as much attention as in quantitative research, sampling is an important issue in qualitative data collection. There are several approaches via which samples can be drawn. Since generalizability is rarely the goal of qualitative inquiry (see Weiss, 1994), researchers often focus on a specific subgroup or population, not seeking to make the sample representative of the entire population.

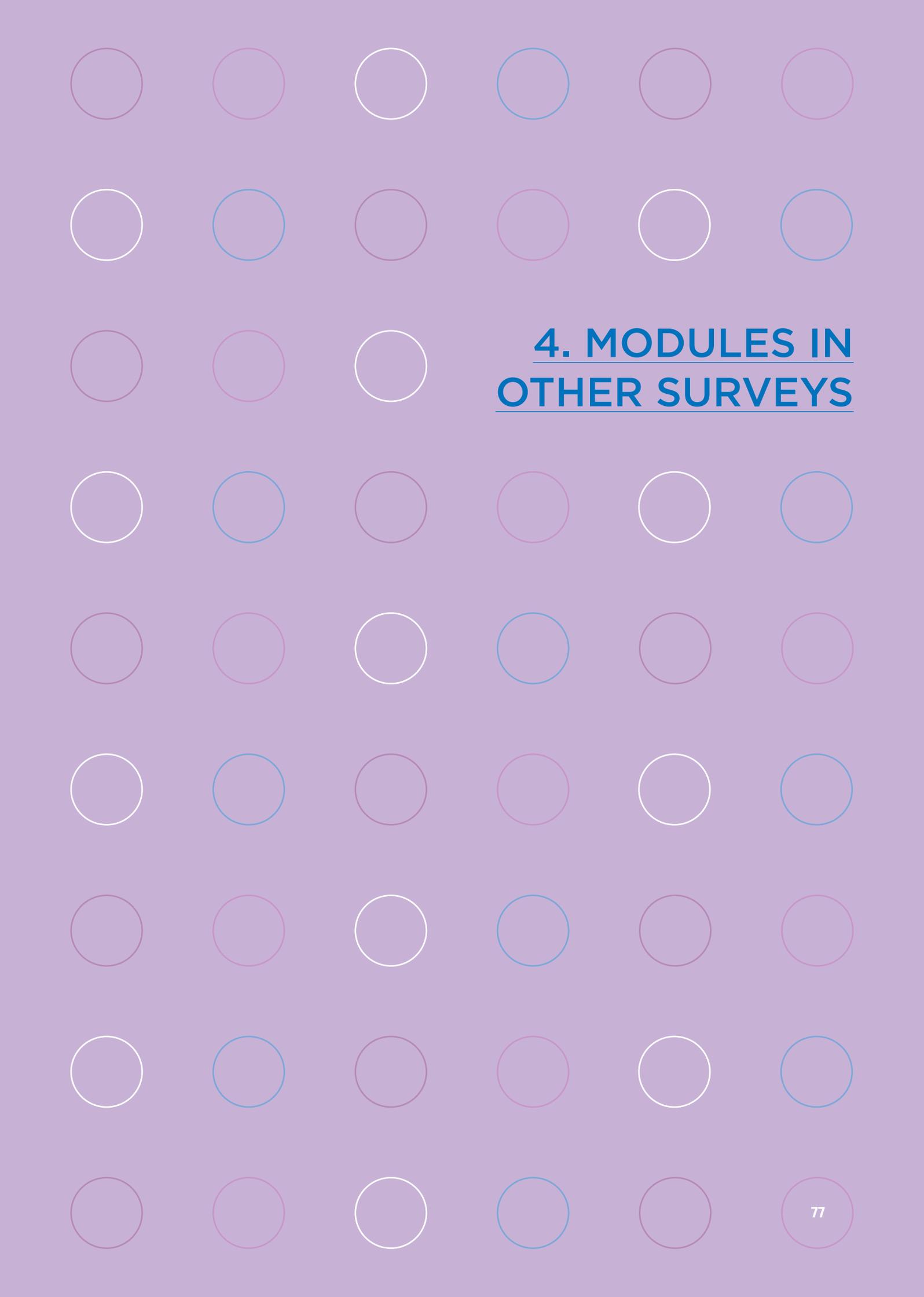
When collecting data for this study, attempts should be made to include participants from diverse socioeconomic groups (though, as noted above, not in a single group discussion). This requires the use of a stratified sampling approach, which establishes the sub-populations of interest and then selects women from within these groups, much like the approach used for the survey. While desirable, the experience of the pilots shows that this is not always possible.¹⁸

Focus group discussions should be kept small (a maximum of 10 persons per group). If possible, it is recommended that at least two group discussions be held with each target sub-population.

3.3 Reporting and Analysis

The qualitative data should be prepared as a stand-alone report in addition to being used in the final combined study report (which also reports the survey findings). Analysing qualitative data is an iterative process concerned with identifying recurring patterns, themes and concepts from the data, and then using those to build a cogent narrative around the issues being researched. This requires careful assessment, management and interpretation of the data collected from the interviews and group discussions. This may require multiple rounds of revisiting the data as additional issues emerge from the process. Data analysis may therefore be a multilevel process, ongoing until no new themes appear.

¹⁸ In some countries it was very difficult to secure middle-class participants for group discussions, as these women were reluctant to join in public discussion about VAWG.



4. MODULES IN OTHER SURVEYS

VAWG data can also be collected by including a specific module within a national household survey that covers other, preferably closely related, issues. While there are significant financial and logistical incentives to do this, the adjunct model approach is potentially problematic and can compromise the quality of the data collected. There are several key considerations to consider.

When determining the sample size and the design of the household survey for collecting VAWG prevalence data, care must be taken to ensure that the survey does not exclude any critical population groups (e.g. women of a particular age, union status or occupational group). The sample for the host survey must be sufficiently representative of the general population to ensure that an accurate national prevalence can be calculated.

The UNSC cautions that as a general rule, surveys of unrelated topics are poor host surveys for these modules. The most appropriate surveys are those that cover general or reproductive health, crime victimization or safety. Surveys that collect data on the status of women and children (such as the Multiple Indicators Cluster Survey), are also potential candidates.

Surveys that are designed to address a wide array of socioeconomic issues that affect the general population are the least appropriate, as they are often unable to accommodate the details (and protocols) needed to effectively collect data on VAWG. Surveys such as the Living Standards Measurement Surveys are in this category. These surveys are very lengthy, and there are certain drawbacks when a module on violence against women is inserted into an already lengthy questionnaire on other topics. For example, the UNSC notes that the question wording and order may not facilitate disclosures of violence. In addition, the fact that the VAWG module is only

administered to women in a particular age range may complicate the logistics of securing the appropriate respondent, as the household could potentially have more than one respondent to the survey (e.g. a household head who answers the 'regular' questions, and a female respondent to answer the women's questionnaire). Ultimately, it could be that the convenience – and cost savings of attaching the module to an existing multi-topic survey are lost.

Compared to a dedicated survey, the breadth of questions that can be included in a host survey may be limited due to factors such as the length of the existing survey or cost constraints. To get an accurate measurement and understanding of VAWG, detailed questions that speak to specific acts over different periods of time have to be included, not just general experiences. Limiting the number of questions or removing details can limit the opportunities respondents have to fully disclose their experiences (Ellsberg and Heise, 2005). Such details not only lengthen data collection time, but may require different interviewing skills from those needed to obtain answers to the general survey questions.

Interviewer training is a key component of VAWG data collection. When attached as a module, such training may be condensed or compromised. Less attention may be paid to critical elements such as establishing rapport with the respondent, the need for privacy and confidentiality or an awareness of the circumstances that may put the respondent at risk of further violence for participating in the research. Additionally, VAWG protocols require that interviews be conducted by a team of all-female interviewers; this may not be appropriate given the subject matter of the main survey. All of these factors can significantly affect the rate of response to highly personal questions.

Thus, one trade-off of using multi-purpose surveys to produce prevalence estimates on violence is the risk that violence will be significantly under-reported. Such under-reporting can dilute associations between potential risk factors and health outcomes, leading to results that are falsely negative. Underestimating the dimensions of violence could also prevent violence intervention programmes from receiving the priority they deserve in the allocation of resources.

Ellsberg and Heise, 2005 p.89

Although the cost of fielding a module is considerably less than the cost of a dedicated survey, care must be taken that the module is appropriately field-tested within the context of the host survey and that additional training of interviewers is conducted in order to meet ethical and safety standards.

Though not ideal, using well-designed and well-implemented modules can be a relatively inexpensive method to obtain fairly reasonable statistics on aspects of violence that would otherwise be unattainable (UNSC, 2014). It is imperative to carefully select the host survey in order to ensure alignment between overall objectives, principles, guidelines and the VAWG module.

The most appropriate surveys are National Crime Victimization Surveys¹⁹ that include special modules of questions on intimate partner and sexual violence. When a host survey is selected, the survey instruments and protocols should be significantly refined to incorporate many of the

¹⁹ Several CARICOM member states have conducted these surveys in partnership with the United Nations Office on Drugs and Crime and the Inter-American Development Bank since early 2000s. Jamaica has had four rounds (in 2006, 2009, 2013 and 2016). Bahamas, Barbados, Suriname and Trinidad and Tobago have also fielded National Crime Victimization Surveys.

fundamental principles established for dedicated surveys for safely and ethically interviewing women about their experiences of violence.

Caribbean countries that took part in the consultations to develop the CARICOM model of VAWG prevalence surveys were inclined to embrace the full questionnaire. However, if the full questionnaire needs to be shortened (e.g. for budgetary, logistic or other reasons), questions can be removed from most sections, as long as those in sections 7, 8 and 10 remain intact.²⁰

Modules on VAWG prevalence can be considered for inclusion in several surveys, including Demographic Health Surveys, Multiple Indicator Cluster Surveys and Living Standards Measuring Survey/Survey of Living Conditions.

4.1 Demographic Health Surveys

Demographic Health Surveys (DHS) are nationally representative statistical surveys that cover a broad range of topics, including reproductive health, maternal and child health, sexual behaviour and nutrition. The background paper recommending a final strategy for the collection of VAWG data in the Caribbean (Jansen and St. Bernard, 2014) examined the feasibility of including a module in the DHS carried out in the region. Though used in other countries to collect VAWG data, this survey is rarely fielded in the Caribbean; only the Dominican Republic, Guyana, Haiti and Trinidad and Tobago have conducted this survey. Further, there is no established schedule or expertise for executing these surveys.

The Dominican Republic conducted a DHS in 1986, 1991, 1996, 1999, 2002, 2007 and 2013. Various dimensions of gender-based violence have been

²⁰ Section 7 questions relate to the respondent and her husband/partner; Section 8 questions related to injuries as a result of VAWG; Section 10 questions relate to non-partner experiences with VAWG.

featured in its country reports since 1999 (Jansen and St. Bernard, 2014). Guyana's 2009 DHS collected no prevalence data; it only collected data related to attitudes towards wife-beating. Haiti conducted a series of DHSs (1994–1995, 2000, 2005–2006 and 2012), which includes prevalence data on VAWG. Because Trinidad and Tobago fielded its only DHS in 1987 — twelve years before the DHS first introduced a domestic violence module in its global methodology — it collected no data on VAWG.

4.2 Multiple Indicator Cluster Surveys (MICS)

The Multiple Indicator Cluster Survey (MICS) is an international household survey programme developed and supported by UNICEF. MICS is designed to collect estimates of key indicators that are used to assess the situation of children and women. The MICS monitors infant and child health and the reproductive health of mothers through face-to-face interviews in nationally representative samples of households. The survey is expansive; the latest version covers almost 200 indicators. Internationally, it is regarded as a key source of data on child protection, early childhood education and child health and nutrition. It has been conducted in over 100 countries across the world in the last twenty years, providing valuable data for monitoring global and national goals aimed at promoting the welfare of children.

The MICS has been conducted in Cuba (2006) and CARICOM member states Barbados (2012), Belize (2006, 2011), Guyana (2006–2007), Jamaica (2005, 2011), St. Lucia (2012), Suriname (2006, 2010) and Trinidad and Tobago (2006, 2011–2012).

Like the DHS, MICS data have been gathered pertaining to data on attitudes towards wife-beating, but does not currently ask any other

question related to VAWG. However, the MICS Women's questionnaire has similar questions as the Women's Health Survey in the area of attitudes towards domestic violence, the woman's partnering history, and the consequences of abuse, including age at which she first lived with a man, age of first sex, and alcohol, drug and tobacco use. It also asks questions about general victimization, but not specific to VAWG. Table 1 lists the various topics covered by the latest version of MICS.

TABLE 1
Modules Covered in the Women's Questionnaire by MICS²¹

- Woman's Information Panel
- Woman's Background
- Mass Media and information and communications technologies
- Fertility/Birth History
- Desire for Last Birth
- Maternal and Newborn Health
- Post-Natal Health Checks
- Contraception
- Unmet Needs
- Female Genital Mutilation/Cutting
- Attitudes toward Domestic Violence
- Victimization
- Marriage/Union
- Adult Functioning [18–49]
- Sexual Behaviour
- HIV/AIDS
- Maternal Mortality
- Tobacco and Alcohol Use
- Life Satisfaction

The MICS conducted in CARICOM have used a sample design similar to the Women's Health

²¹ <http://mics.unicef.org/about>

Survey. Like the Woman's Health Survey, MICS has a distinct women's questionnaire that is completed only by a female respondent in the household (the respondent must be within the reproductive age range of 15-49 years).

Although MICS is a potential vehicle for the relevant modules from the Women's Health Survey, integrating intimate partner violence questions will require significant restructuring of the MICS questionnaire and its recruitment and training of interviewers in order to ensure that the items from the Women's Health Survey are fully integrated without any duplication or inconsistency.

4.3 Living Standards Measuring Survey/Survey of Living Conditions

The overall objective of the Living Standards Measurement Survey/Survey of Living Conditions is to measure and study the determinants of living standards. These surveys, most frequently used in developing countries, are also used to generate poverty rate statistics. The concern with measuring and understanding the determinants of poverty means that these surveys collect data on broad aspects of living standards, including details on items consumed by households over a period of time. In some models of the Living Standards Measurement Surveys, several different questionnaires are used to collect data about household welfare and behaviour, including a household questionnaire, a pricing questionnaire, a community questionnaire, and in some instances, a facilities questionnaire that maps community assets (World Bank 2000).²²

These surveys have been conducted among CARICOM member states since 1988; Jamaica

was the first country in the region to undertake a Living Standards Measurement Survey to monitor its social policy agenda. Across CARICOM, these surveys have provided a key evidentiary basis for policy and programme development and for monitoring progress towards national goals.

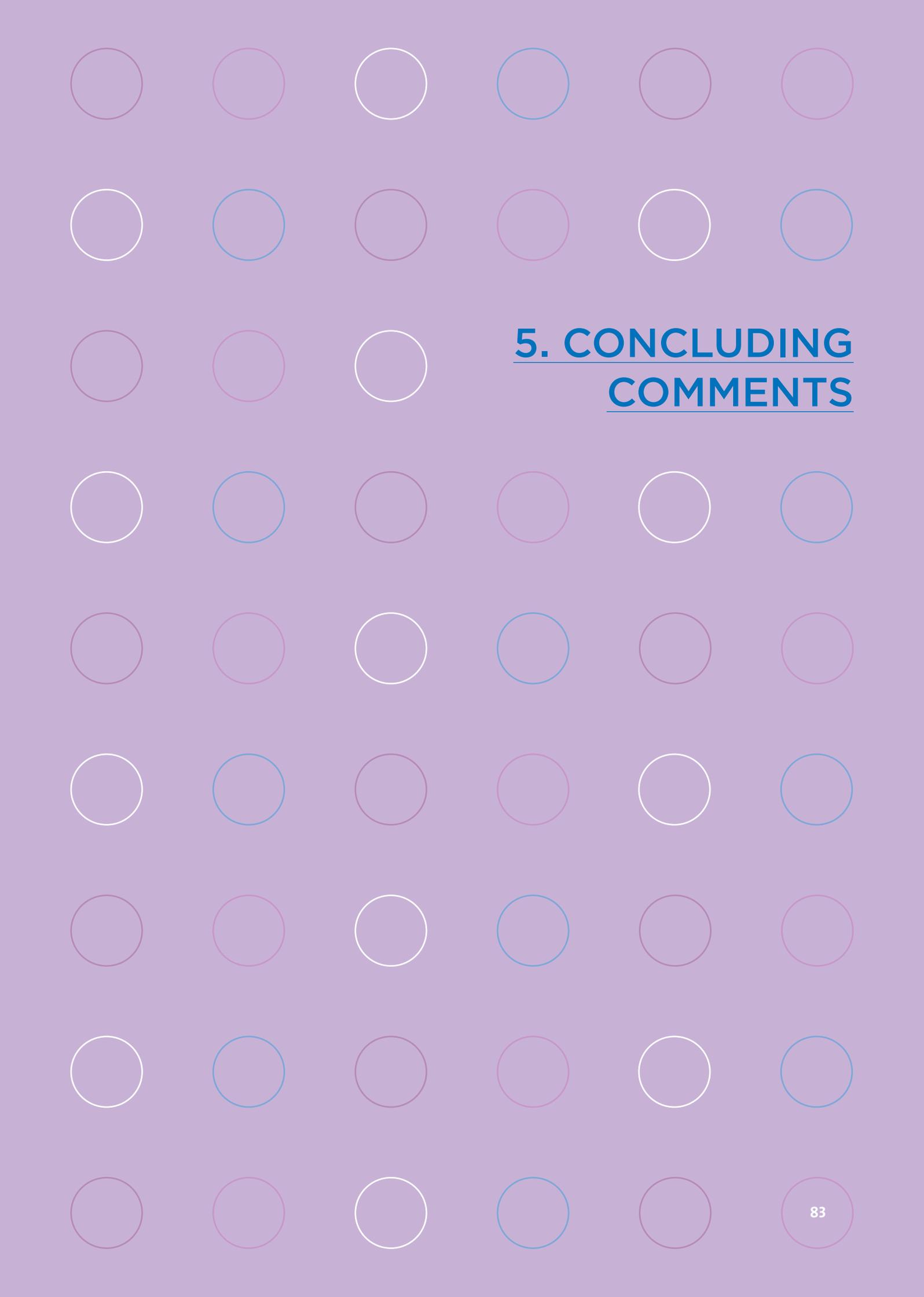
Typically, the surveys of living standards conducted in CARICOM countries collect information on household demographics; household consumption of various types of goods and services (used to calculate poverty prevalence); health status and health-seeking of all household members; education, including enrolment, attendance and education attainment of all household members; housing characteristics, including tenancy and access to amenities; and social protection, focusing on household members' participation in social protection programmes.

Some countries have added special modules to the core questionnaire. These modules have covered specific target populations, as was the case in 2001 when Jamaica included a youth module for respondents 17 to 29 years of age. In general, these modules have not included highly sensitive questions as found in sections of the Women's Health Survey. Further, they did not require recruitment and training of a specialized cohort of interviewers.

The Survey of Living Conditions is already in-depth and extensive. Respondents are asked to recall expenditure details on specific goods and services (including specific food items, children's lunch and transportation). Adding another, unrelated, set of questions to the instrument will lengthen — and potentially weaken — the effectiveness of the instrument in collecting the relevant data. In addition to the risk of respondent overload, this wide-ranging, lengthy questionnaire can lead to interviewer fatigue, which increases the likelihood of errors and incomplete disclosure

²² http://siteresources.worldbank.org/INTPOVRES/Resources/477227-1142020443961/2311843-1197996479165/part1_DesigningHHS.pdf

from respondents. Disclosure of experiences with violence has been shown to be greater when respondents are at ease with the interviewer and when the questions are asked in a conducive context and environment (Ellsberg and Heise, 2005).

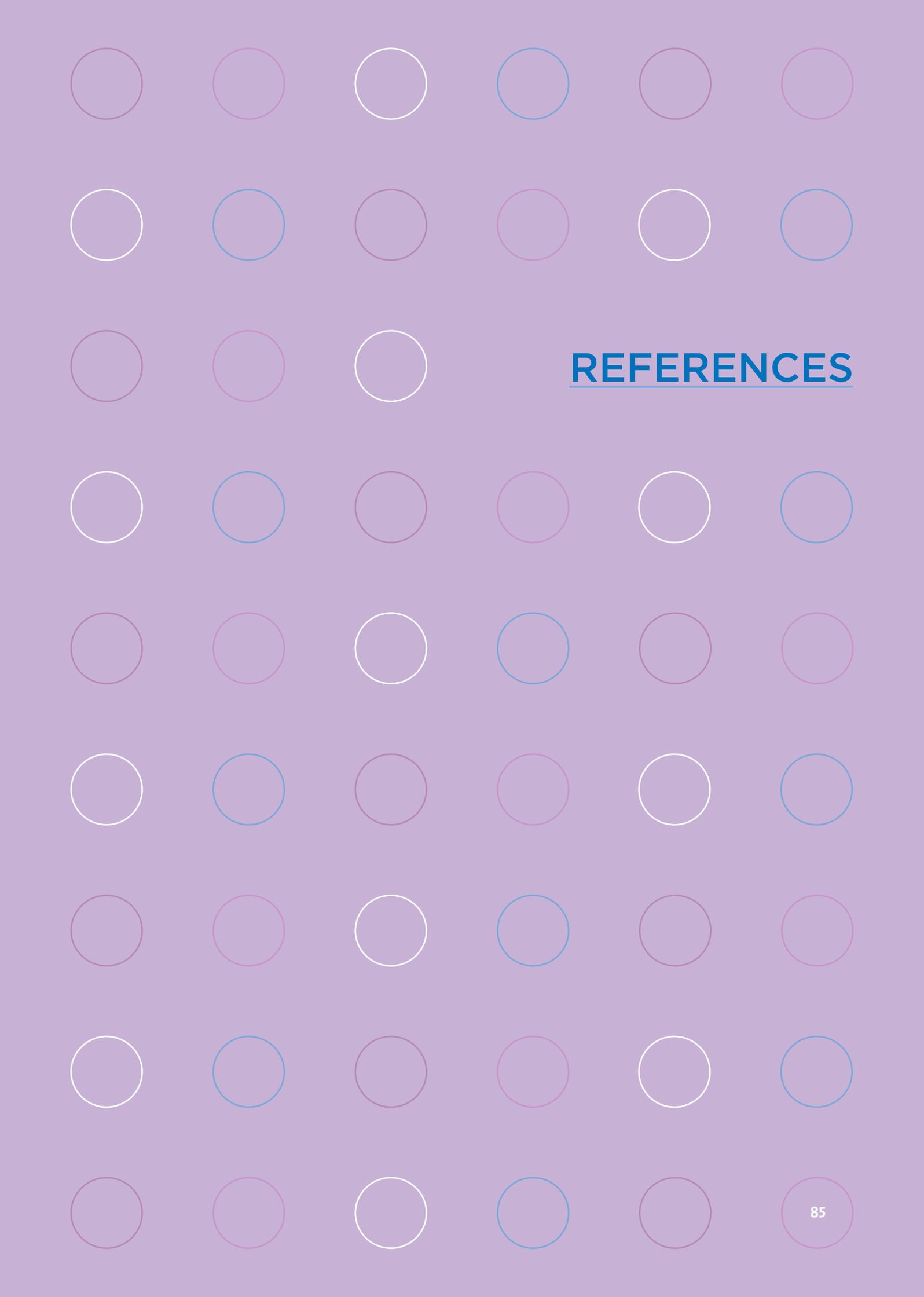


5. CONCLUDING COMMENTS

In the Caribbean, the pilots of the WHO Multi-country Study on VAWG as stand-alone surveys have shown the region's capacity to successfully collect comprehensive data on this issue. The mixed-methods approach, using both quantitative and qualitative data collection methods to examine the issue, has yielded not only necessary statistics such as prevalence, but also provides a sociocultural context within which the issue can be understood.

Though it can be financially prudent, using the adjunct module approach to collect comprehensive data on VAWG in the Caribbean has several downsides. In most countries, the surveys that would best accommodate the core modules on women's experience with violence from the WHO survey are only fielded intermittently (if at all). The caution from the 2014 Final Strategy paper (Jansen and St. Bernard, 2014) that "surveys designed to address a broad array of crime- or health-related or other issues cannot accommodate the broad range of questions needed to study violence against women in all its complexity" remains true. Chief among the shortcomings of the approach is the potential burden on both the respondent and interviewer of having to complete a lengthy questionnaire. This poses significant challenges to survey design: making sure that introductory statements, question wording and question order facilitates disclosure of violence; ensuring that enumerators are specially recruited and trained to engage women; and protecting the safety of enumerators and participants throughout the process. The safety of the women collecting and providing the data is paramount during these surveys. Add-on approaches may not focus as keenly on this issue, inadvertently putting women at risk of more violence by the non-observance of some critical precautions.

In order to satisfy the data requirements for the core indicators on VAWG recommended by the UN Statistics Commission, CARICOM members should adopt the WHO Multi-country Study on VAWG as the data collection standard instrument for the region. It is recommended that a full study — including both the in-depth survey and the qualitative study — be conducted every five years.



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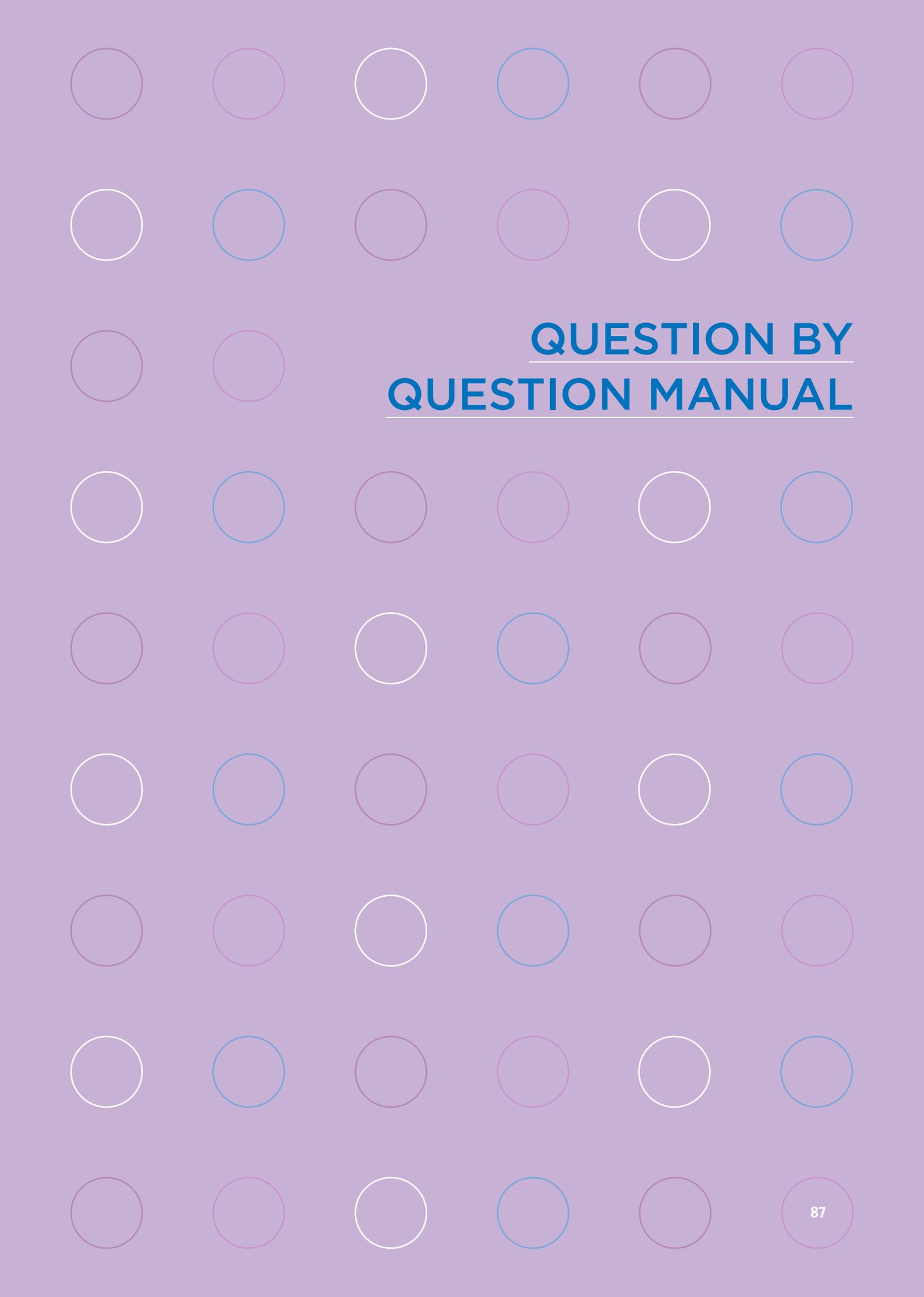
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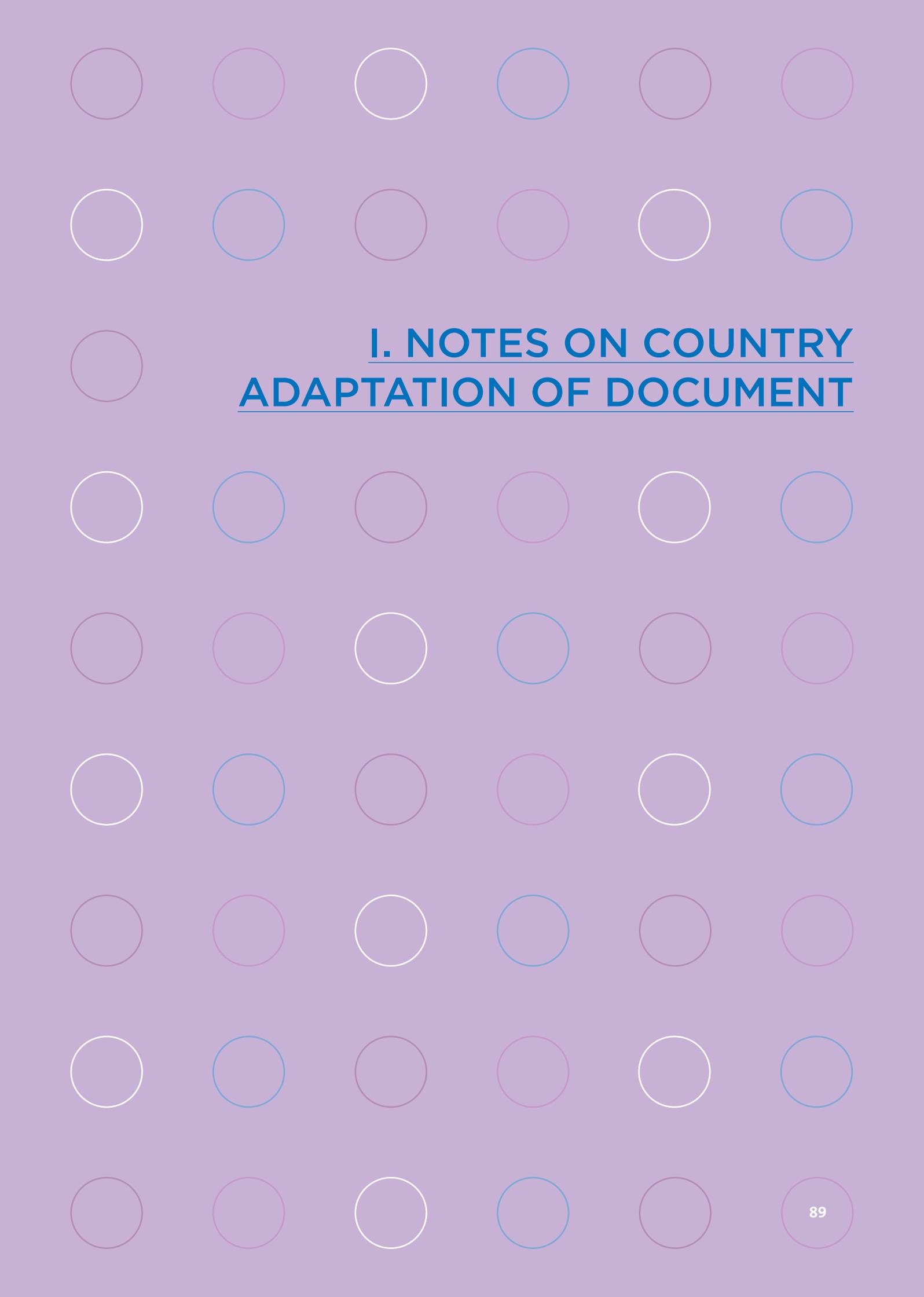
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QUESTION BY QUESTION MANUAL





I. NOTES ON COUNTRY ADAPTATION OF DOCUMENT

This document has been prepared and updated to accompany the CARICOM version of the questionnaire that was developed from the WHO Multi-country Study on Women’s Health and Life Experiences. It describes, question by question, how to read the questionnaire and gives details of the different terms used and the concepts underlying the questions and the response codes given. A more general description of issues, such as interviewer techniques, the notation used in the questionnaire, factors influencing responses and how to respond if someone becomes distressed, is provided in the accompanying interviewer manual.

This document will need some adaptations before it can be used as part of a country-specific study. In particular, explanations for any additional country-specific questions will need to be added, as will any additional response codes used with existing questions. The description of questions that are not relevant for a particular setting, will need to be deleted.

Those parts of this manual that are likely to require modification for use in a specific country — either to accommodate country-specific adaptations in the questionnaire or because they include dates that need to be changed depending on the year of the study — are indicated using square brackets [].

Although countries are discouraged from making too many changes in order to not jeopardize the comparability of data, it is often unavoidable that some adaptations will need to be made. Because variable names used in the code book and the analysis plan are based on question numbers, the following recommendations should be followed:

Insertion of new questions.

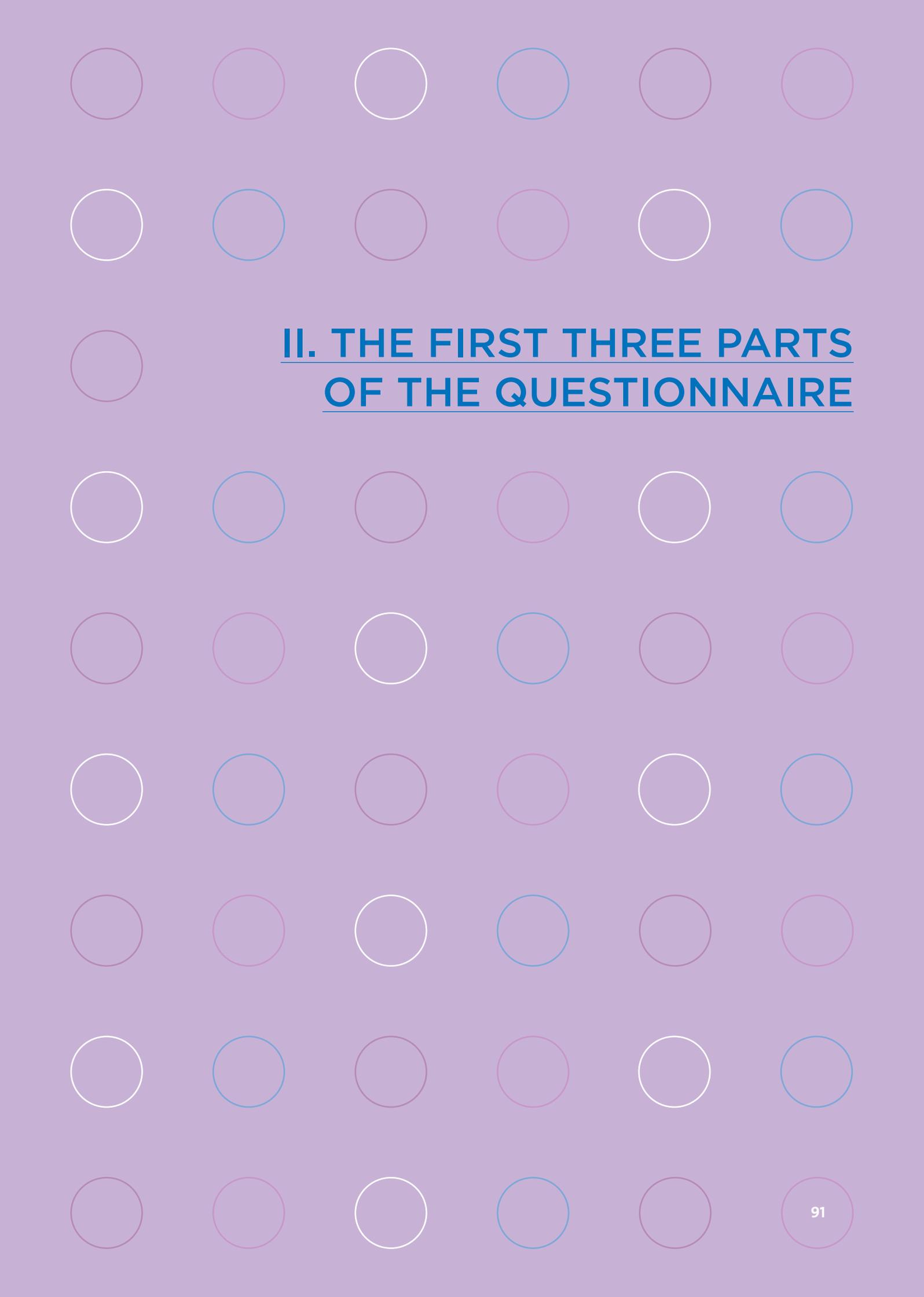
If a question needs to be inserted, it is important not to change the original numbering of the

existing questions. (E.g. if a question will be inserted between questions 39 and 40, it is recommended to number the new question 39.1 or 39a. Alternatively, in a multi-country study it could be suggested that country specific variable names may be distinguished from generic ones by designing variable names consisting of a combination of country code and question number).

Deletion of questions or answer options.

The question (or option) could be deleted but the original question numbering (or option numbering) should not be changed. Question numbering will, as a consequence of a deleted question, no longer be continuous. (E.g. if question 6 is deleted, the sequence of question numbers will no longer include number 6).

The document is written for use with a paper questionnaire, that is a Paper and Pencil Interviewing (PAPI) method of data collection. Therefore, countries will need to modify the document accordingly if the survey is done using a Computer Assisted Personal Interviewing (CAPI) method. The PAPI instructions throughout this manual will need to be adapted as consistency checks if CAPI technology is used to conduct interviews for the survey.



II. THE FIRST THREE PARTS OF THE QUESTIONNAIRE

The first three sections/parts of the questionnaire are the administration form, the household selection form and the household questionnaire. These sections are used to provide information on the general characteristics of the target population and their households.

The first part, the administration form, will be used for entering data about the location of the household, the date and outcome of the interview (the bottom part of the administration form, related to the processing of the questionnaire, will not be completed by the interviewer).

You will use the second part of the questionnaire, the household selection form, to identify women who are eligible (qualified) to be interviewed using the individual women's questionnaire and then select one woman from those who are eligible.

The third part, the household questionnaire is a short and relatively simple set of questions providing information on the household to which the selected woman belongs.

A. ADMINISTRATION FORM

IDENTIFICATION

Before you enter a household and begin an interview, fill in the identification information in the box at the top of the administration sheet. (The country code could be pre-printed, applying the code assigned for the specific country in the multi-country study.) The identification information is obtained from the sample household listing; it will be given to you by your supervisor and can be slightly different from the description that follows here.

Write the name of the place in which you are working. Record the codes for the region/province, the district/ward/village the cluster number/

enumeration area and the household number in the boxes in the right-hand column. If this is done correctly, the combination of these codes will result in a unique ID number identifying a particular questionnaire from all others in the study. Also write the name of the head of the household in which you are conducting the interview and whether the cluster to which this household belongs is considered rural (code 1) or urban (code 2). Your supervisor will give you all of this information.

INTERVIEWER VISITS

The middle part of the administration form will be completed after you have conducted the interview and have left the household, as follows:

AFTER you have visited the household, completed the household selection form, and in most cases also the household questionnaire and the women's questionnaire, you will need to write in the results of your visit. The spaces under the columns (1), (2) and (3) are for recording the results of the first visit and any return visits that you may have to make if you cannot contact the household on your first visit. Remember, you must make at least three separate visits to try to obtain an interview with a household.

There are four types of response codes according to the extent to which the questionnaire has been completed. Codes numbered from 11 to 18 refer to situations where it was not possible to complete the household selection form or the household questionnaire. The following are descriptions of the various result codes:

- Code 11. *Refused (specify)*. A household member refused to allow an interview to be conducted. If the individual with whom you first talk is unwilling to cooperate, ask to speak with another member of the

household, (e.g. the household head). Suggest that you can return at another time if it would be more convenient. If the individual still refuses to cooperate, enter Code 11 and report the problem to your supervisor. Note any reasons given for refusal.

- Code 12. *Dwelling vacant or address not a dwelling.* In some cases you may find that a structure number assigned to you is unoccupied, that is, it is empty with no furniture and is not being lived in. This is what we call “vacant” and you should enter Code 12. Alternatively you may find that a structure is not a residential unit, but is a shop, church, school, workshop or some other type of facility that is not used as a living area. After making sure there are no residential units at the back of or above the premises, enter Code 12 as the result for the visit. Be sure to report the situation to your supervisor.
- Code 13. *Dwelling destroyed.* If the dwelling has burned down or been demolished in some other manner, enter Code 13.
- Code 14. *Dwelling not found/ not accessible.* You should make a thorough search, asking people in the area if they are familiar with the address or the name of the household head. If you are still unable to locate the structure, you should enter Code 14 as the result for the visit to that household.
- Code 15. *Entire household absent for extended period.* This code is to be used **only** in cases in which no one is home and the neighbours say that no one will return for several days or weeks. In such cases, enter Code 15 as the result of that visit. Since the neighbours may be mistaken, you should make further visits to the household to

check that no one has returned. **In cases in which no one is home and you cannot find out whether they have gone for a few hours or a few weeks, enter Code 16.**

- Code 16. *No household member at home or no competent respondent at home at time of visit.* This code is to be used in cases where the dwelling is occupied, but no one is home. If no one is home when you visit, or if there is only a child or an adult member who is ill, deaf or mentally incompetent, enter Code 16 as the result of the visit. Try to find out from a neighbour or from the children when a competent adult will be present and include this information in the visit record. In all cases where Code 16 is recorded, you will need to return twice to try to find a household member.
- Code 17. *Household respondent postponed interview.* If you contact a household but for some reason it is not convenient for anyone to be interviewed then, schedule another time for the interview and enter Code 17 on the administration sheet as a result code for that visit. As a rule you should return so it is unlikely that Code 17 will be the result code of a final visit. Only if extreme circumstances mean that the interview is never conducted, would you enter Code 17 for the final result code.
- Code 18. *All household members speak a foreign language.* Even if in the planning of the survey it was decided to include foreigners as long as they speak the language of (one of) the questionnaire(s) that are used during the training, you may come across households where nobody speaks (one of) the local language(s). If so, you cannot conduct the interview in this household, even if there is an eligible

woman. Enter Code 18. There is no need to return.

Codes numbered from 21 to 26 refer to situations where the household selection form has been applied and, if eligible women were living in the household, a respondent has been selected, but you have not been able to start the face-to-face interview using the women's questionnaire (in most cases, however, the household questionnaire will have been completed). The following are descriptions of the various result codes:

- Code 21. *Refused*. The selected eligible female may decline to be interviewed. Methods for trying to address this problem are discussed in the interviewer manual. If the individual refuses to participate, enter Code 21 as the result code for that visit and note any reasons given for refusal. Report the problem to your supervisor. Your supervisor may return to the household to explain the study more fully and discuss with the respondent whether she would like to be interviewed by someone else, or at another time.
- Code 22. *No eligible woman in household*. In some instances when completing the household selection form, you may find that there are no eligible women in the household. In such cases, you should record Code 22 in the final result box.
- Code 23. *Selected woman not at home*. If you contact a household but for some reason the selected woman is not at home, schedule another time for the interview and enter Code 23 on the cover sheet as the result code for that visit. As a rule you should return, so it is unlikely that Code 23 will be the result code of a final visit. Only if extreme circumstances mean that the

interview is never conducted, would you enter Code 23 for the final result code.

- Code 24. *Selected woman postponed interview*. If you contact a household, but for some reason it is not convenient for the selected woman to be interviewed then, schedule another time for the interview and enter Code 24 on the cover sheet as the result code for that visit. You should return to the household. Only if extreme circumstances mean that the interview is never conducted, would you enter Code 24 for the final result code.
- Code 25. *Selected woman incompetent/incapacitated*. If the selected woman is deaf, mentally retarded or seriously ill and the female questionnaire cannot be administered, enter Code 25 for the final result. There is no need to return.
- Code 26. *Selected woman speaks only a foreign language*. When the selected woman does not speak (one of) the local language(s), you cannot conduct the interview. Enter Code 26 for the final results code. There is no need to return.

Codes numbered from 31 to 32 refer to situations where the women's questionnaire was only partly completed. The following are descriptions of the various result codes:

- Code 31. *The respondent does not want to continue*. In such instances you should note the reasons given by the respondent for terminating the interview before completion. Wherever possible, you should try to reschedule a time to complete the interview.
- Code 32. *Some of the interview has been postponed*. In such instances you will need to return to complete the interview.

Code 41 is used if the women's questionnaire has been completed until the end.

FINAL VISIT

Once you have paid your last visit to the household you will fill in the boxes under FINAL VISIT (right-hand column). The date on which you completed the women's questionnaire should be recorded in the DAY, MONTH and YEAR boxes. Write the day of the month in the DAY boxes. You need to convert the month into numbers: for this, January is '01', February is '02', March is '03', etc. Write [20XX] in the boxes labelled YEAR. For example, the last day in October [2015] would be DAY 31, MONTH 10, YEAR [2015]. Write your assigned interviewer number in the boxes labelled INTERVIEWER. Record '41' in the RESULT box for a completed interview. If the final visit did not result in a completed interview, record the result code that applies to the outcome of that visit. Add up the number of visits you made to this household enter the total in the box labelled TOTAL NUMBER OF VISITS.

OTHER CODES IN MIDDLE SECTION, LAST COLUMN

After you have completed the household selection form, you will record the total number of people listed in question 1 in the household selection form in the boxes labelled TOTAL IN HOUSEHOLD. In most cases this is straightforward and it should be the number of all persons in the selected household (men and/or women, boys and/or girls), regardless of whether or not an interview was conducted. If this information is not known (for visits with result codes 11–15), leave these cells blank. If you visited a dwelling with more than one household (and therefore completed more than one household selection form to select an eligible woman), the number entered here should

be the total number of people in the household to which the selected woman belongs.

You will also record (in the boxes labelled TOTAL ELIGIBLE WOMEN IN HH OF SELECTED WOMAN) the total number of women in the household who are eligible for interview with the female questionnaire (by adding up the total number of women on page 3, question 3, identified as being eligible for interview). You should also record the LINE NUMBER OF THE SELECTED FEMALE RESPONDENT. This is the number that should have been circled in the first column of question 3 in the household selection form. If there was no eligible woman in the household enter a ZERO (0) for line number.

In some cases, where the selected dwelling/ structure contained more than one household and where as a consequence more than one household selection form has been used in the process of identifying an eligible woman, the information on TOTAL IN HOUSEHOLD, TOTAL ELIGIBLE WOMEN and LINE NUMBER should be taken only from the household selection form that includes the selected woman. (If none of the households contained eligible women, you may take the information TOTAL IN HOUSEHOLD from the first household selection form.)

BOTTOM OF ADMINISTRATION PAGE

[Codes will need to be provided in advance, according to the languages in which the questionnaire is available, depending on whether only national languages or also other languages will be used in interviews.]

At the bottom of the administration page, the field supervisor or field editor will enter the codes for their names, and the date on which they received and checked the questionnaire. Office editing and data entry will only be done in the

main office; space is provided for the office editor and data entry person to record their names (or their codes).

B. HOUSEHOLD SELECTION FORM

In order to complete the household selection form you will need to find a suitable respondent. Any adult member of the household who is capable of providing the information needed to fill in the household selection form can be the respondent. If an adult is not available, do not interview a child, but instead, go on to the next household in your sample; revisit the first household later.

Once you have introduced yourself and explained the purpose of your visit, you are ready to begin the interview. Be sure to read the introductory sentence at the top of the questionnaire page before continuing with question 1.

Question 1: TOTAL NUMBER OF PEOPLE IN HOUSEHOLD

This question is used to ascertain how many people live in the household. A household is a person or group of persons that usually lives and eats together. This is not the same as a family. A family only includes people who are related; a household includes any people who live together, and usually share food, whether they are related or unrelated. For example, three unrelated men who live and cook meals together would not be considered as one family, but they would be considered as one household. A person living alone is also considered a household.

For the purposes of the study, a member of the household is any person who:

- usually lives in the household;
- who is visiting the household AND has been sleeping there for at least 4 weeks; or

- who is working as a domestic servant in the household AND usually sleeps there for at least 4 nights a week (*or period stipulated by the specific country*).

Note that the definition of household has been expanded compared to the definition used in most other surveys. This is to ensure that women who are currently not in their own home (i.e. those visiting for at least 4 weeks) or who work and stay most of the week in this household (i.e. domestic workers sleeping there at least 4 nights per week) will have a similar chance of being selected and included in the study as usual household members.

You should use the probes provided to check that the total that you record includes all people who live in the same household, irrespective of whether or not they are related. In this total, you should include children, lodgers, domestic workers and other people who fulfil the criteria specified above.

Question 2: HEAD OF HOUSEHOLD MALE OR FEMALE

This question asks about the sex of the head of household. This refers to the sex of the person who is generally considered responsible for the household, irrespective of whether she/he is currently present in the household (for example, the household head may be working away from home). It is up to the respondent to define who the head is. This person may be appointed on the basis of age (older), economic status (main provider) or some other reason. Generally, there should not be a problem with this. In some cases, a couple may share responsibilities equally, and will not want to specify one person over another. In such cases, you should mark "BOTH." If there is only one person living alone, record the sex of this person. The information from this question

will be used as a reference to which to relate the other members of the household (see below).

Question 3: LISTING FEMALE HOUSEHOLD MEMBERS

In this question you need to:

1. Document the first names of all females (women and girls) in the household, irrespective of their age or marital status (column 2)

For this you need to record the first name or initials of all females in the household (using the specific criteria for household that are set in this survey), irrespective of their age or marital status. As your respondent lists the names, write them down, one in each row in column 2 of the table. It is not necessary to have the full names of the females in the household as long as you are able to refer to each of them individually.

When you have written all of the names, you need to make sure that you have included everyone that should be listed before continuing with the rest of the questionnaire. After you have listed the females in the household, you should probe to make sure that you have not left anyone out.

2. Identify their relation to the head of the household (column 3)

After you have made a complete list of names, start with the person listed on line 01 and move **across** the page, asking each appropriate question. When you have completed the information for the person on line 01, move on to the person listed on line 02, and so on.

To record the relationship of the woman listed to the head of the household, you should use the codes listed at the bottom of the table. For example, if the third woman listed is the daughter-in-law of the head of the household, you should record code 05 on the third line in column 3. Be

particularly careful in doing this if the respondent is not the head of the household; make sure that you record the relationship of each person to the household head, **not** their relationship to the respondent. If the respondent has identified that both a man and a woman are joint heads of the household, write down the relationship of each female listed to the **male head of household**. If the head of the household is married to a woman who has a child from a previous marriage, that girl's relationship to the head of the household should be coded ADOPTED/FOSTER/STEP DAUGHTER (code 12). If there is only one man living alone, this list will be empty. Note that in such a case you will not have to complete the household questionnaire.

3. Document whether or not they usually live in the household (column 4)

We call someone who usually lives there a member of the household. You should follow the criteria that have been set for the study as mentioned above. If the person usually lives in the household, or if the person is a visitor who has stayed in the household during the last 4 weeks, or if the person is a domestic worker who sleeps in the household at least 4 nights a week, circle 1 under YES in the column headed "RESIDENCE."

Note that if you have properly followed the instructions and only listed those who usually live in the household, all the answers here should be YES. This question serves mainly to double check the household members against the criteria as set for this survey. If you find out at this stage that you have included persons who should not be in this list, follow the instructions below under ["MISTAKES IN COMPLETING THE LIST"].

4. Record their age in years (column 5)

You should obtain each person's age **in completed years**, that is, the age at the time of the last

birthday. If a girl is less than one year old (for example 9 months) record “o.” Remember, you **must** record an age, even if it is only your best estimate. If you have difficulty in obtaining the ages of household members, use the methods described in the individual questionnaire to probe for the correct age.

5. Assess whether the respondent is eligible to be interviewed using the female questionnaire (column 6)

Finally, using information from the columns headed RESIDENCE and AGE, record in column headed ELIGIBLE all women who are eligible for interview using the women’s questionnaire. These should only be women 15 to 64 years of age (that is, women who have celebrated their 15th birthday, but have not yet reached their 65th birthday) who have a “1” circled in column headed RESIDENCE. (Thus they must either normally live in the household; or be a domestic worker who sleeps for 4 days a week or more in the household; or be a visitor who has slept in the household for at least the past 4 weeks.).

It is very important that you do not miss an eligible respondent when you fill in the household list. In certain cases, you may find it difficult to decide whether or not a woman is eligible. Use these examples as a guide:

- A 25-year-old female visitor has been staying in the house for 1 week. She is not eligible for the women’s interview.
- A 20-year-old daughter of the head of the household spent the previous night at her sister’s house. She should be counted as a member of the household on the household schedule; she is eligible for the women’s interview.

- A 48-year-old wife of the male head of household has been away for 2 weeks. She is eligible for the women’s interview.
- A 17-year-old female friend of the household has been staying with the household for 5 weeks, but she is out buying food when you visit. She is eligible for the women’s interview.
- An unmarried, 30-year-old woman lives with her 50-year-old mother. She is eligible for the interview, even if she has never been married or been with a man.
- A 40-year-old female domestic worker lives in the household, but usually returns to see her family every alternate weekend (for 3 nights). She is eligible for interview because, on average, she sleeps for 4 or more nights a week at the household where she works.
- A 40-year-old female domestic worker, lives at the household but usually returns to see her family every weekend (for 2 nights). She is eligible for interview because she sleeps for 5 nights a week at the household where she works.

In some households, there will be no eligible respondents (i.e. there will be no usual household members or long-term visitors who are women between the ages of 15 and 64 years). For these households, you will complete the administration form and the household selection form only (you will not use the household questionnaire or the women’s questionnaire). See below at the end of this chapter.

6. Randomly select one woman for interview from the list of all eligible women.

For safety reasons, we are only interviewing one woman per household in order to ensure that the topic of interview does not become

widely known. In situations where there is more than one eligible respondent, one woman will be randomly selected for the interview. You should use a method that will ensure that the random nature of the selection will be apparent to household members. [This could be done by using a Kish table]. Another common way to do this is to write the line number of each of the eligible females on a separate piece of paper. Fold all of the pieces of paper up, and put them in a bag, hat or cup. Shake the container and then ask a member of the household to select one piece of paper. The person selected is the woman you should interview. In areas where this method is not suitable and where everybody's date of birth is known, an alternative method could be to select the eligible woman who will be the first to celebrate her birthday after the day of the interview. You should circle the line number of the person selected (even if there is only one eligible woman).

If the person selected is not available, do not select another person. Instead, make an appointment to return to conduct the interview. You will need to make at least two additional visits to try to conduct the interview. If the selected woman cannot be interviewed at all, you should indicate this on the questionnaire (administration form) by using the appropriate result code. You should **never** replace a selected eligible woman by another eligible woman once she has been selected.

SPECIAL SITUATIONS

MORE THAN 10 FEMALE HOUSEHOLD MEMBERS

If you interview a household that has more than 10 female members, indicate this at the bottom of the list of household members, take a fresh household selection form, fill in the same household identification code on the top of the page and write "CONTINUATION" at the top. Then

on the second household selection form, change the line number 01 to 11 and if necessary, change line 02 to 12, etc., and then write in the information on these additional female household members. Make sure that you include the eligible females on the second list when you randomly select one.

TWO OR MORE HOUSEHOLDS LIVING IN THE SAME CONSTRUCTION

If the listing shows only one household in the dwelling but, upon your arrival at that the dwelling you find that two or three households are living there, you should complete a **separate** household selection form for each of these households. The individual household selection forms could be numbered HH1, HH2, etc. On each form indicate, as explained above, the females and eligible women living in that particular household. After completion of the forms, select **one** respondent at random **from all** the eligible women in both/all households in the dwelling. To do this, the ballots (pieces of paper) containing the line numbers of eligible women should be marked with **both** the household number **and** the line number. (For example, if the eligible women in household 1 are those with line numbers 2 and 4, and in household 3 with line number 1, while household 2 has no eligible women, the ballots could be marked as follows: HH1-2, HH1-4 and HH3-1.)

After selecting one respondent, no other respondent will be selected from any of the remaining households within the dwelling even if they contained one or more eligible women. The household questionnaire is completed only for the household to which the selected female belongs. She is then interviewed with the women's questionnaire. Mark the individual forms clearly to avoid confusion; e.g. you should write on the household selection form for the second household "two households in same

house, female respondent selected from other.” You should inform your supervisor later.

MISTAKES IN COMPLETING THE LIST

If you make a mistake in completing the list of female household members (question 3) and you need to remove one or more people (for example when you discover that the list of people you entered included a man, or a female who does not belong to the household), you should cross out this person. It is important, however that you subsequently renumber the lines (numbers in the first column) so that they remain consecutive. For example: you have entered 5 persons, on lines 1, 2, 3, 4 and 5. You discover afterwards that number 2 is the son of the head of household. Since only female members of the household should be listed, you should cross out that person and then renumber persons 3, 4 and 5 so that they become 2, 3 and 4. The last number should always correspond with the total number of female household members entered in the list. When you later complete the administration sheet for the “line number of the selected female respondent,” you should enter the corrected line number.

NO ELIGIBLE WOMEN IN THE HOUSEHOLD

If you have convinced yourself that there are no eligible women in the household, explain to the person who provided you with the information for the household selection form that you can only continue if there is a female household member between 15 and 64 years old. Thank her/him for the assistance provided and finish the interview here. Inform your supervisor and proceed to the next household.

C. HOUSEHOLD QUESTIONNAIRE

After having asked the questions about all the female members of the household and after having selected one eligible women (household

selection form), you will ask questions 1–10 on the household questionnaire, which are about the household as a whole. The respondent for this questionnaire can be any responsible adult, male or female, and will in most cases be the person who assisted you when you completed the household selection form.

The household questionnaire must be completed for every household in which you have identified eligible women, even if the selected woman is not currently present or immediately available for a face-to-face interview. In the special situation of a structure with more than one household, this questionnaire will need to be completed only for the household to which the selected woman belongs.

Questions 1 – 7: COUNTRY SPECIFIC SOCIOECONOMIC VARIABLES

Questions 1–7 are designed to assess the socioeconomic status of the household and will vary from country to country, so these can be adapted for each country.

Question 1: HOUSEHOLD DRINKING WATER

The purpose of this question is to assess the source (and indirectly the cleanliness) of household drinking-water. If drinking-water is obtained from several sources, probe to determine the source from which the household obtains the majority of its drinking water. If the source varies by season, record the source used at the time of interview. Please see the definitions for each category below (*Categories can be made country-specific*):

Public Piped into Dwelling – refers to a water supply established and maintained by the government or a government-related agency, for example, the National Water Commission. Select this if the water supply is obtained in this way and

is carried by pipes into the dwelling. You are likely to encounter situations where pipes have been installed but because of a lack of water in the area, the householders are forced to use another method. It is this other method that must be identified.

Public Piped into Yard – applies to cases where the householder’s water is from a government or government-related agency and is carried by pipes into the yard only. You are likely to encounter situations where pipes have been installed but because of a lack of water in the area, the householders are forced to use another method. It is this other method which must be identified.

Private Piped into Dwelling – applies when the water for domestic use is obtained from a private (not government) method and it is piped into the dwelling. Examples of private methods are a private well or tank from which there are pipes that carry water into the dwelling.

Private Catchment, Not Piped – applies if the water supply is from a private catchment and is not piped into the dwelling. A private catchment could be a well or a tank.

Public Standpipe – relates to a public standpipe, usually located along roads or other public thoroughfares.

Public Catchment – is applicable if the main way in which water is obtained for domestic use is from a public tank or other catchment and is not piped into the premises.

River/Stream/Pond – is applicable if the main way in which domestic water is obtained is from a river, stream or pond. In these cases persons have to go to the river or stream.

Tanker/Truck/Water Vendor – is applicable if the regular supply of domestic water is trucked into

the area, whether purchased or free, delivered by private or public trucks, etc.

Other – Include here all other methods of water supply. Select this response if water is received from neighbours on a regular basis.

Question 2: TOILET FACILITIES

The purpose of this question is to obtain a measure of the sanitary provisions (waste disposal) in the household. A *flush* toilet is one in which water carries the waste down pipes, whether the water is piped into the toilet or poured in from a bucket. Note that you need to find out if the flush toilet is shared with any other households. A ventilated improved pit latrine is a pit latrine that has been improved by the addition of some kind of construction (usually a pipe) that provides a route for fumes to escape, other than the hole itself. A traditional pit latrine is not ventilated. If the respondent answers that they use the bush, the fields or a cleared corner of the compound record NONE and skip to Question 3. Please see the definitions for each category below (*Categories can be made country specific*):

WC Linked to Sewer – Select this if the toilet facility is a flush toilet or water closet that fills from a piped water supply and empties into a sewerage disposal system (commonly referred to as a sewer main).

WC Not Linked to Sewer – Select this if the toilet facility is a flush toilet or water closet that fills from a piped water supply and empties into a septic tank or an absorption pit (soak away). This pit is not to be confused with the pit latrine.

Pit – Select this if the toilet facility is a pit latrine. In instances where a toilet bowl has been placed over a pit latrine, it is still a pit latrine.

None – Select this if the respondent indicates that the household has no toilet facilities.

Other – Include here any form of sewage disposal that does not fit into any of the preceding categories.

Question 3: ROOF MATERIALS

This is not a question that you will have to ask the respondent since you will usually be able to see for yourself what kind of material is on the roof. However, if you are not sure or if you cannot see the roof, you should ask. If more than one kind of roofing material is used, record the main roofing material, the material that covers the largest amount of floor space. A “rudimentary” roof is a roof made from materials such as plastic or cardboard and this would be scored as ‘Other’. Please see the definitions for each category below (*Categories can be made country-specific*):

Metal Sheeting – This applies to zinc and aluminium sheeting.

Concrete – This is usually referred to as concrete slab.

Tile – Clay – This includes all types of clay tiles.

Tile – Other – This applies to tiles other than those made from clay and includes aluminium, rubber, metal, etc.

Shingle – Fibreglass – Include here all types of fibreglass shingles.

Shingle – Other – This applies to shingles other than that made from fibreglass and includes cedar (wooden), etc.

Other – include here all other types of roofing material (for example, thatch).

Question 4: HOUSEHOLD ITEMS

This question is about the availability in the household of certain items and is used to obtain a measure of the socioeconomic status of the

household. (It is not relevant whether the real owner of the particular item lives in the same household as long as the item is used by members of the household.) **Read out each item** and circle the answer given after each item. If the respondent reports that a household item such as a radio is broken, try to find out how long it has been broken, and if it will be fixed. If the item appears to be only temporarily out of use select 1 for YES. Otherwise, select 2 for NO. Be sure to circle either a 1 or a 2 for **each** item. Do not leave any blanks.

Question 5: OWNERSHIP OF TRANSPORTATION

As another rough measure of socioeconomic status, we ask whether any member of the household owns a bicycle, motorcycle or car. Follow the same procedure as in question 4 in asking about these items. If a car is broken down and *not* likely to be fixed, do not record this car. A small child’s bicycle is primarily a toy and should not be recorded here.

Question 6: OWNERSHIP OF LAND

As another rough measure of socioeconomic status, we also ask whether any member of the household owns any land. Only include land owned by a member of the household who is normally resident in the household.

Questions 4–6. In some countries these question are considered very sensitive or people may be afraid to answer out of fear of burglary. Interviewers should be able to respond to any questions put by the respondent as to why these questions are necessary in an interview on woman’s health. Possible explanations that you can use should be discussed in the training. They could include, for example, that we want to see how women’s health is connected with levels of income, or that we want to know about how their living situation is related to their health.

Question 7: NUMBER OF ROOMS USED FOR SLEEPING

This information gives a measure of household crowding. It also reflects the socioeconomic status of the household. A room in this case refers to a special area with a permanent partition that is used for sleeping. It is not necessarily the number of rooms in the household that are called “bedrooms,” but rather the number of rooms regularly used for sleeping. This may even be the kitchen. This implies for a 2-person household (a couple living by themselves) that if this couple sleeps together in one room, we record 01, regardless of whether the couple lives in a studio (i.e. a combined living–sleeping room) or in a 5-bedroom house. Similarly, if the two people sleep in separate rooms (regardless of the number of rooms in the house), we need to count this as two. When you analyse “crowding” you will not merely look at the number of people (sleeping) per room, but look at this in relation to household size.

Question 8: CONCERN ABOUT CRIME IN THE NEIGHBOURHOOD

This information will be used to obtain a measure of how many people in the community are concerned about crime (such as robberies or assaults) in their neighbourhood, irrespective of whether they have been a victim of crime or not. The answer to this question will enable us to test whether there is a relationship between the frequency of domestic violence and the frequency of other types of crimes.

Question 9: LEVELS OF CRIME IN THE NEIGHBOURHOOD

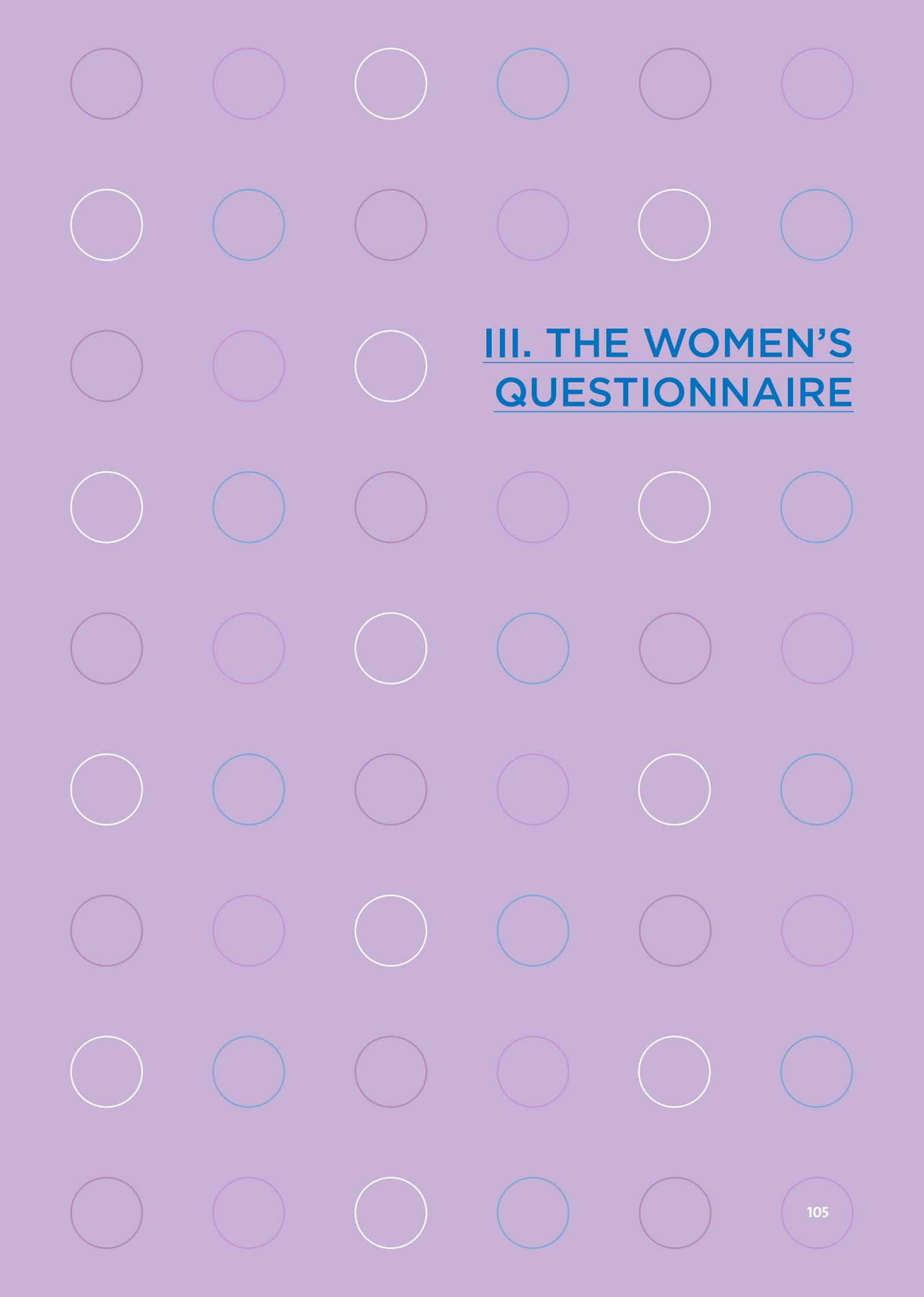
This information gives a measure of whether someone in the household has been the victim of

a crime in this neighbourhood (such as robbery or assault).

Question 10: SEX OF RESPONDENT

This is not a question that you will have to ask the respondent. Mark the sex of the respondent who answered the questions in this section, and then thank the person for her/his assistance.

After completing a household interview, ask if you can talk to the female respondent selected for the interview (this may or may not be the same person who assisted with this section of the questionnaire). If the selected woman is not available, fill in the cover sheet and make an appointment to return. Inform your supervisor about the time you have arranged to return.



III. THE WOMEN'S QUESTIONNAIRE

The women's questionnaire consists of the individual consent form and 12 sections as follows:

- Section 1. Respondent and her community
- Section 2. General health
- Section 3. Reproductive health
- Section 4. Children
- Section 5. Current or most recent partner
- Section 6. Attitudes
- Section 7. Respondent and her partner
- Section 8. Injuries
- Section 9. Impact and coping
- Section 10. Other experiences
- Section 11. Financial autonomy
- Section 12. Completion of interview

INDIVIDUAL CONSENT FORM

The individual consent form is a very important part of the study. All women who participate in the study should do so of their own free choice; they should not be forced or pressured in any way to do so. The individual consent procedure gives the potential respondent information about the study and provides her with opportunities to ask any questions and to decide whether or not she wants to be interviewed.

As part of the consent procedure, it is important that you carefully read out loud the exact wording printed in the individual consent form, inserting your name and the name of the organization that you work for in the appropriate places (marked *). You will practise this in your training. Once you have read this out loud, ask the woman if she has any questions and answer these as best you can.

Some examples of questions that maybe asked, and appropriate responses to them, are listed below (*Country can add or remove questions as they deem necessary*):

- Who is paying for the research?

This is a collaborative project, funded by the (*name of funding agencies*).

- How was I picked to be part of the survey/how did you get my name?

We do not have or need your full name. Your house was picked randomly from a list of all of the households in (*name of country*). We are then interviewing one woman aged 15 to 64 years old from each selected household.

IF MORE THAN ONE ELIGIBLE WOMAN WAS IN HOUSEHOLD, AND RESPONDENT DID NOT WITNESS HOUSEHOLD SAMPLING PROCEDURE: Your name was picked out by chance, from a list of all of the eligible women in your household.

- How do I know that this is private/confidential?

We do not have your full name, and will not write any full name on the questionnaire. We are interested only in combining the answers of the women from (*name of country*) who will be interviewed as part of the study. Individual responses will not be singled out. All of us working on this project have to follow strict guidelines not to disclose what people say to us during the interview.

All information provided to (*name of national statistical office/entity*) will be kept confidential and used only for statistical purposes. We do not release any information that could identify individuals or households.

- How will the results be used?

The information from the survey will be presented to policymakers in order to help them know and

understand the problems faced by women. They will also be used to argue for improved services for women.

- What is the purpose of this survey/study?

The study aims to learn more about the health and life experiences of women aged 15–64 years in (*name of country*).

- How long will this take?

The interview should about 45 minutes. You can end the interview at any time, but we hope that you will complete it.

WARNING:

Do not provide any information in addition to the standardized responses.

If there are questions that you cannot answer, or if your answer does not satisfy the respondent, call the supervisor.

Once you have answered any questions, ask the woman if she agrees to be part of the study.

If she does not want to be interviewed, thank her for her time, and make a record of her refusal (both on the individual consent form and on the administration sheet). Also write down any reasons that she gives for not wanting to be interviewed. It is very important that you do this so that we can understand why some women do not want to be interviewed and to see if this is likely to influence the study findings.

If she agrees to be interviewed, indicate this on the consent form.

Whether or not she agrees to be interviewed, you (the interviewer) should sign the consent form to certify that you have read the consent procedure to the participant. This is an important way to protect both yourself and your supervisors from

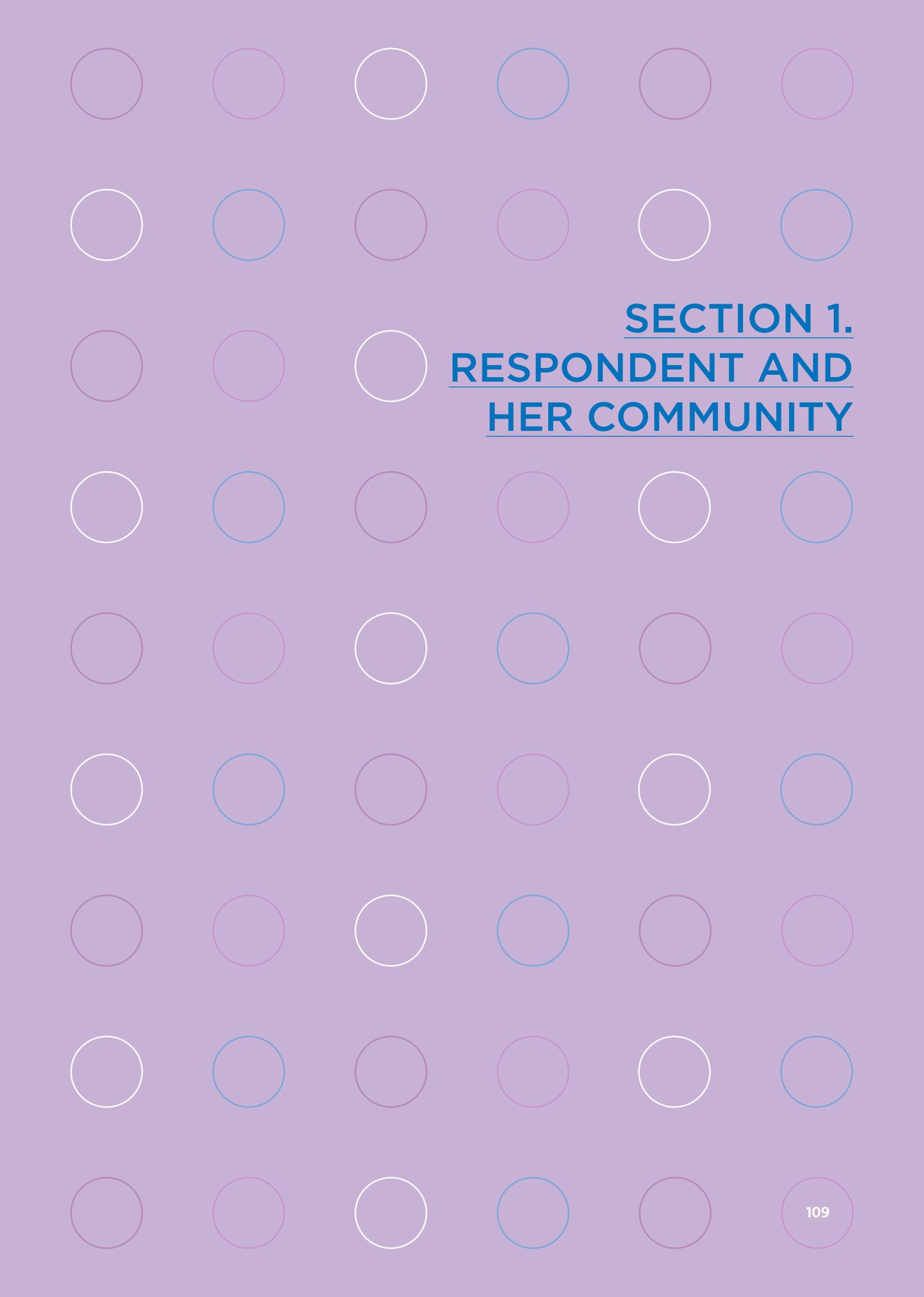
any potential allegations that the person was pressured to take part in the study.

Finding somewhere private to conduct the interview

If the woman agrees to be interviewed, ask her whether now is a good time to talk. Stress that it is important that you talk in private, and ask the respondent whether there is anywhere that she would like to go. If you cannot find a private place to conduct the interview, ask her if it would be better if you return later and schedule a time to meet her.

Do not start the interview unless you can find somewhere private to talk.

Finally, before you begin the individual interview, ask the respondent to collect any document that has a record of the birth date and birth weight of the youngest child that she has given birth to. You could also ask her to collect any document giving her own birth date (particularly relevant in countries where women often do not know their own birth date). It is important that you examine these documents, so assure the respondent that you have plenty of time to wait while she looks for them.



SECTION 1.
RESPONDENT AND
HER COMMUNITY

All sections have a ‘safe name’ describing the topic of the section; those sections that deal with violence will not reveal that topic. Even if ‘safe names’ have been used, as a rule you do not read the names of the sections out loud.

In this section we obtain some general background information about the respondent and her community. If she is a visitor who has been residing there for the past 4 weeks, or a domestic employee who usually sleeps at least 4 nights per week in the household, we would like to collect information about the place where she is currently staying.

DATE OF INTERVIEW

At the top of the first page you need to fill in the date of interview: day [][] month [][] year [][][][]. This information is used by the data entry system to check ages against dates of birth. If the female interview is taking place during more than one session, only the date of the first session needs to be entered. If no women’s interview has taken place at all (e.g. there is no eligible woman), no date should be entered.

Question 100: TIME

Enter the time of the day you start the individual interview. If the hour or minutes are less than 10, put a zero in the first box. Record the time in hours and minutes, using the 24-hour clock. So if it is 1:00 pm or later, you would add 12 to the current hour (e.g. 01:15 pm needs to be entered as 13:15). Examples:

Half past nine in the morning is:

Hour [0][9]
Minutes [3][0]

Twenty past four in the afternoon is:

Hour [1][6]
Minutes [2][0]

Start Section 1 by reading the introductory section before question 101. Insert the name of the community, district or neighbourhood in which you are working. If you are unsure about its name, say “in this community/district/area” as appropriate.

Questions 101-105: NEIGHBOURHOOD COHESIVENESS

Questions 101, 102 and 105 have been designed to assess how close and supportive people in the respondent’s neighbourhood are towards each other.

If the respondent is a visitor, we would still like to obtain her impressions of the community within which she is currently staying. We expect that as we are only including visitors who have been resident in the study location for more than 4 weeks, she will have enough knowledge of the community to be able to answer these questions.

Question 101: KNOW NEIGHBOURS

This question aims to find out whether people in the neighbourhood know each other well or not. We do not want to find out related information, such as whether the respondent thinks that this is a good thing or not.

Question 102: PEOPLE WILL INTERVENE

This question aims to assess how willing people are to intervene/become involved if they see someone getting hurt in the streets. Specifically, the question asks the respondent whether she thinks that members of her community would try to do something to stop a street fight or a brawl, should one occur in her neighbourhood. The key thing to note here is that we want to find out whether people would do *something* (such as intervene, call the police, or ask a

community leader to intervene), rather than ignore the fight and do nothing. It does not matter if the respondent has never heard of a fight in the area – she should use her knowledge of the community to guess what people would do if this did happen.

Question 105: HELP IN CASE OF SUDDEN ILLNESS OR ACCIDENT

This question explores whether the respondent feels that if she, or someone in the family, fell ill or had a sudden accident, her neighbours would offer to help – for example, by arranging transport to take the person to the hospital, by offering to look after the children, or by giving money or preparing food.

Question 106: DAY, MONTH AND YEAR OF BIRTH

Questions 106 and 107 must be asked independently of the information on the household selection form. Even if you already asked the respondent her age when you were completing the household selection form, you must ask again for her date of birth when filling in the women's questionnaire. Of course you should check later on if the information collected in answer to questions 106 and 107 is consistent with the information on the household selection form (see below).

If the respondent knows her date of birth, write it in the appropriate boxes for DAY, MONTH and YEAR. You will need to convert the day and month into numbers. To record the date, record the first day of the month as 01, the second as 02 etc. For months, January is 01, February is 02, March is 03, and so on.

If she does not know the exact day of the month that she was born, leave the space for the day code blank, and ask her whether she knows the month

in which she was born. Likewise, if she doesn't know her month of birth, leave the space for the month code blank and ask her for the year of her birth. If she knows the year, write in the YEAR – e.g. [1][9][6][3]. Try under all circumstances to obtain at least the year of birth. If the respondent is unable to provide this information, ask if she has any documentation such as an identification card or a birth or baptismal certificate that might give her date of birth. If she has no documentation for her date of birth you could prompt about known historical events. Only when it is absolutely impossible to even estimate the year of birth should you circle code 9998 for DON'T KNOW YEAR. [If your country uses a different type of calendar you may need a table to convert the dates.]

Question 107: AGE

This is one of the most important questions asked in the interview, since much of the analysis of the data depends on the respondent's age. For example, the two most important results of the survey, women's experiences of physical and sexual violence will be analysed according to the age of the woman.

The day on which you interview the respondent is used to calculate her age, as well as the age of other people (such as partner(s) and/or children) who may be mentioned during the interview. If the interview takes place during more than one session, the day of the first session using the female questionnaire is used in these calculations.

You must obtain the respondent's age in **completed** years, that is, her age at her last birthday. You **must** record an age for the woman and you will do this in one of four ways, depending on the type of information you get from the respondent.

a) *The woman **knows** her age.*

If the woman tells you her age, simply write it in the space provided. (In some countries registration documents may show a different date of birth from the real biological age, for example when a child was registered for the first time several years after the birth. In those cases, if a woman knows her age but her registration document shows a different age, use her biological age, but make sure to write an explanatory comment about the date of birth in the registration document next to your entry of this date in question 106 so that you are able to explain the inconsistency when the questionnaire is checked.)

b) *The woman **does not know** her age, but **year of birth is reported** in question 106.*

If the woman does not know her age, but she did report a year of birth in question 106, then you may calculate her age as follows. If the woman has already had her birthday in the current year, subtract the year of birth from the current year [2016]. If the woman has not yet had her birthday in the current year, subtract the year of birth from last year [2015]. If the woman does not keep track of the time within a year when her birthday falls, it is sufficient to subtract her year of birth from the current year [2016].

c) *The woman **does not know** her age, and **year of birth is not reported** in question 106.*

If the woman does not know her age and she could not report a year of birth, you will have to probe to try to estimate her age. Probing for ages is time-consuming and sometimes tedious; however, it is important that you take the time to try to get the best possible information. There are several ways to probe for age:

- Ask the respondent how old she was when she got married or had her first child, and then try to estimate how long ago she got married or had her first child. For example, if she says she was 19 years old when she had her first child, and that the child is now 12 years old, she is probably 31 years old.
- You might be able to relate her age to that of someone else in the household whose age is more reliably known.
- Try to determine how old she was at the time of an important event [e.g. war, flood, earthquake, change in political regime] and add her age at that time to the number of years that have elapsed since the event.
- Check what age was recorded on the household selection form and try to find out how this figure for her age has come about (there may have been another member of the household who knew her age).

d) *The woman **does not** know her age and probing did not help.*

If probing does not help in determining the respondent's age, and her date of birth was not recorded in question 106, you will have to **estimate** her age. Remember, this is a last resort to be used only when all your efforts at probing have failed.

Remember, you MUST fill in an answer to question 107.

CONSISTENCY CHECK: DATE OF BIRTH AND AGE

You must now check the consistency of the reported year of birth (question 106) and age (question 107). This can be done by using the fact that the woman's age plus her year of birth must equal the year in which she last had a birthday. There are two methods of checking whether the age and year of birth are consistent: an arithmetic

method and a chart method. You may use either method, but do not perform the check until **after** you have asked questions 106 and 107.

I. Arithmetic method

You will choose the procedure explained in 1a or 1b to do the arithmetic, depending on the type of information you have recorded in Question 106. Use the margins of the questionnaire to do the necessary arithmetic.

1a IF DAY, MONTH AND YEAR ARE RECORDED IN QUESTION 106. If the day and month of her birthday is **before or on** the day and month of interview (she has had her birthday this year), then her age plus her year of birth should equal [2016]. If the day and month of her birth is after the day and month of interview (she has not yet had her birthday this year), then her age plus her year of birth should equal [2015]. If the sum is incorrect, then either the year of birth or the age (or both) are incorrect and need to be corrected. If the sum is off by exactly one year, then it is also possible that the month of birth is incorrect and the other information is accurate. In such cases, the age and the month and year of birth all need to be reviewed to see where the error occurs. (*Note:* If the day of birth is not known and the space for DAY is left blank, you should take 01 as the day to do your consistency check.)

Example: If a respondent tells you that she was born on 18 January 1973, she is [43] years old, and you are interviewing her in July [2016], you would add 73 to [43]. If the information the respondent gave you is consistent, the sum should be [116], since July comes after January. If another respondent tells you that she was born in December 1986 and she is [29] years old, the sum should equal [115] since she will not become a full year older until December (July is before December).

1b IF ONLY THE YEAR OF BIRTH IS RECORDED IN QUESTION 105 AND THE RESPONDENT HAS NOT BEEN ABLE TO GIVE YOU AN INDICATION OF THE TIME OF THE YEAR IN WHICH SHE WAS BORN, you should leave the spaces for DAY and MONTH blank, but you should assume that she was born on the **first of January** and follow the procedures as described above.

2. HOW TO CORRECT INCONSISTENT ANSWERS. If the age plus the year of birth do not add up to [115] or [116], probe to get consistent information. For example, if the sum equals [114] and it should be [115], then you need to add 1 to either the age or the year of birth, after checking with the respondent to see which one is wrong. If the sum adds to [118] and it should be [116], you need to subtract 2 from either the age or the year of birth **or else** subtract 1 from both the age and the year of birth. It is important to understand that either or both the age and year of birth may be incorrect.

II. Chart method:

Use the Age–Birth Date Consistency Chart (see below) to check consistency. You will choose the procedure explained in 1a or 1b, depending on the type of information you have recorded in question 106.

1a IF DAY, MONTH AND YEAR ARE RECORDED IN QUESTION 106. Enter the chart at the age you recorded in question 106. If the day and month of the woman’s birthday is before or on the day and month of interview (i.e. she has already had her birthday this year), use the right-hand column to see what year of birth is consistent with that age. If the day and month of birth is after the day and month of interview (i.e. she has not yet had her birthday this year), use the left-hand column to see what year of birth is consistent with that age.

If the year of birth recorded in question 106 is not the same as the year of birth in the chart, then questions 106 and 107 are inconsistent and you will have to make a correction. (*Note:* If the day of birth is not known and the space for DAY is left blank, take 01 as the day to do your consistency check.)

1b IF ONLY YEAR OF BIRTH IS RECORDED IN QUESTION 106 AND THE RESPONDENT HAS NOT BEEN ABLE TO GIVE YOU AN INDICATION OF THE TIME OF THE YEAR IN WHICH SHE WAS BORN, you should leave the spaces for DAY and MONTH blank, but you should assume that she was born on the **first of January** and follow the procedures as described above (thus you assume that she has had her birthday in the year of the survey).

2 HOW TO CORRECT INCONSISTENT ANSWERS. If the recorded year of birth (question 106) is different from the year in the chart, you must correct the inconsistency. This is done by further probing and adjustment of either the age information, the date information, or both. It is important to understand that **either or both** of the two pieces of information may be incorrect. Do not always assume that an inconsistency means, for instance, that the date of birth was given correctly, and that the age is incorrect. It could be that the date or both the age and the date are incorrect.

[If desired, countries can be provided with a Microsoft Excel file in which only the date of the interview needs to be entered. The spreadsheet will give, based on the date of the interview, the ranges of possible dates for each AGE in years. Printouts can be prepared for each of the days of the survey. Alternatively, the first date of the survey may be used and on the consecutive days the spreadsheet can be adjusted by changing the DAY of the date in pencil.]

Finally, before moving on to the next question, verify that the respondent is indeed eligible to participate. If the woman is younger than 15 years or older than 64 years, you will have to terminate the interview. Do this tactfully by asking two or three more questions, and then thank the respondent for her cooperation; write “Not eligible” on the first page of the questionnaire, and correct the information for this woman on the Household Selection Form (this is the only time that you may change information on the household selection form). You also need to fill in the correct data for the number of eligible women in the administration sheet. **You should then go back to the household selection form and select another woman from the truly eligible women (if any).**

Question 108: LENGTH OF RESIDENCE

This question asks how long the woman has been living in her *current* place of residence, usually referring to her village, community or neighbourhood (when she is living in a town). Here, “living continuously” means without having moved away. For example, if the respondent has been away from her home only on visits, these periods should not count as having lived away. If she has always lived in her current place of residence (that is, she has never lived anywhere else), circle 95. If she is a visitor and does not usually live in the place where you are interviewing her, circle 96 for VISITOR. If either 95 or 96 is circled, leave the two code boxes blank. However, if she has lived in other places, ask her to count how many years she has been living continuously in her current place of residence (how many years have passed since she moved to this place). Record answers in completed years. If the answer is “three and a half years,” write 03. If the answer is less than one year, write 00.

Age–birth date consistency chart for survey in 2016

(Country will need to adjust year based on when the survey is being conducted)

Current Age	Year of birth	
	Has not had a birthday in 2016	Has already had a birthday in 2016
	Don't know	
0	2015	--
1	2014	2015
2	2013	2014
3	2012	2013
4	2011	2012
5	2010	2011
6	2009	2010
7	2008	2009
8	2007	2008
9	2006	2007
10	2005	2006
11	2004	2005
12	2003	2004
13	2002	2003
14	2001	2002
15	2000	2001
16	1999	2000
17	1998	1999
18	1997	1998
19	1996	1997
20	1995	1996
21	1994	1995
22	1993	1994
23	1992	1993
24	1991	1992
25	1990	1991
26	1989	1990
27	1988	1989
28	1987	1988
29	1986	1987
30	1985	1986
31	1984	1985
32	1983	1984

Current Age	Year of birth	
	Has not had a birthday in 2016	Has already had a birthday in 2016
	Don't know	
33	1982	1983
34	1981	1982
35	1980	1981
36	1979	1980
37	1978	1979
38	1977	1978
39	1976	1977
40	1975	1976
41	1974	1975
42	1973	1974
43	1972	1973
44	1971	1972
45	1970	1971
46	1969	1970
47	1968	1969
48	1967	1968
49	1966	1967
50	1965	1966
51	1964	1965
52	1963	1964
53	1962	1963
54	1961	1962
55	1960	1961
56	1959	1960
57	1958	1959
58	1957	1958
59	1956	1957
60	1955	1956
61	1954	1955
62	1953	1954
63	1952	1953
64	1951	1952

Question 108a: RELIGION

This is an optional question. However, in societies/countries with multiple religions it has been found that the information that this question provides is often very useful to present results by subgroups.

Question 108b: ETHNICITY

This is an optional question. However, in societies/countries with multiple ethnic groups or nationalities it has been found that the information that this question provides is often very useful to present results by subgroups. The interviewer must read the response categories to the respondent.

Question 110: EVER ATTENDED SCHOOL

The term 'school' means any kind of formal school, but does not include such things as Bible school or Koran school or short courses such as typing or sewing classes. However, it does include technical or vocational training beyond the primary-school level, such as long-term courses in mechanics, engineering and secretarial work.

Question 111a and 111b: HIGHEST GRADE/FORM/ YEAR ACHIEVED

In question 111a, record only the highest level (year) of education that the respondent successfully completed. For example, if a woman was attending Form/Year 3 of secondary school, and left school before completing that year, record 02 next to SECONDARY school. Although Form/Year 3 was the highest year she attended, she completed two years of secondary school. You can add the number of years in the level that you have marked to facilitate completing question 111b.

In question 111b, for the total number of years of schooling, each country will need to determine how this should be calculated. Note however, that if a respondent skipped a year, you should not subtract that year. Similarly, if a respondent had to repeat one or two years you should not add these extra years. What is relevant here is the highest level achieved rather than the real number of years spent at school.

Question 111c: MAIN DAILY OCCUPATION

The question on the main daily occupation tries to find out if and how the respondent earns income. Only one answer option can be marked. Thus, if multiple answers are given, ask for the main occupation that she has for earning money. In case she does not earn income, the answer option

that most closely matches how she spends most of her time should be marked.

Question 111d: TYPE OF WORK LAST DONE

The interviewer notes the response. Interviewer is to ask the respondent details of the work, requiring them to give a thorough description of the type of work so that it can be accurately classified. You are required to write in the name of the occupation in the space provided. Be as specific as possible in recording the occupation. Do not use vague terms such as a teacher (which could be a primary or a secondary school teacher) or a farmer (which could be a vegetable farmer or a dairy farmer) or a clerk (which could mean a store clerk or an office clerk) or a foreman (which could mean a foreman on many different types of activities). Write, for example, primary school teacher, vegetable farmer, store clerk or foreman at a building construction site. If the respondent has never worked, proceed to question 111g.

Question 111e: DESCRIPTION OF MAIN EMPLOYMENT

Interviewers are required to read the categories to the respondent and circle the number that applies.

Question 111f: SOURCE OF INCOME FOR HOUSEHOLD

This question seeks to find out the main source of income for the household as a whole.

Question 1101: OWNERSHIP

In this question we would like to find out whether the respondent has any assets (such as land, animals, crops or other valuables) that she either owns herself, or owns jointly with others. Read out the initial question, and then record the response given before moving on to b). Where necessary,

probe to find out whether the respondent owns the item(s) on her own, or co-owns the items with other people. These other people could be her partner, children, or other relatives. For parts e), f) and g), read the examples given – for example, for part d) the question would be read – “large animals, such as cows or horses.” When there are various pieces of a certain item, some of which are owned alone and others owned together, the first should receive priority (i.e. mark “own by self”). Note that in the questions regarding animals, we are enquiring about animals that have some value, and that can be bought and sold. In general, we do not count pets, such as cats and dogs, as assets.

Question 112: WHERE RESPONDENT GREW UP

Record the respondent’s answer about the type of place she lived in for most of the time as a young girl (before the age of 12 years). Note that we want to know about whether she grew up in the same village, area or part of town in which she currently lives, another area (rural or urban), or another country. If she tells you a name, probe to identify which response code to enter by reading out each of the possible responses as follows: “Was (NAME) this community (neighbourhood), another rural area or village, another town or city, another neighbourhood in this town, or another country?” Note that we are asking about the place that she lived in for most of the time. If she grew up in more than one place, this question refers to the place that she lived for the longest before the age of 12 years.

Question 113: ACCESS TO FAMILY

Questions 113–115 seek to find out about how easily the respondent can visit, talk to and obtain support from members of her family of birth. This includes both members of both close and extended

family. Question 113 aims to find out whether the respondent has access to her family of birth for her to visit them or see them easily. If the respondent lives with her family, you should mark 3 for LIVING WITH FAMILY and go to question 115.

Question 114: HOW OFTEN WOMAN SEES OR TALKS TO FAMILY

Question 114 aims to find out how often, in general, the respondent sees or talks to a member of her family (including both immediate and extended family members). Contact may be either in person or on the telephone and may be with one or more family members. Read out the frequency measures listed. Mark the response “DAILY/AT LEAST ONCE A WEEK” if the respondent sees or talks to any member of her family once a week or more. Mark “AT LEAST ONCE A MONTH” if the respondent does not see or talk to a member of her family weekly, but does see or talk to them at least once every month. Mark “AT LEAST ONCE A YEAR” if the respondent does not see or talk to them each month, but does see or talk to them at least once a year. Mark “NEVER/HARDLY EVER” if the respondent never sees or talks to any member of her family, or if she sees or talks to them less than once a year.

Question 115: COUNTING ON FAMILY MEMBERS FOR SUPPORT

Question 115 aims to find out whether the respondent can usually count on a member of her own family of birth for support if she has a problem. The family member may be a close family member or a more distant relative. The forms of support that they might offer could take many forms. For example, they could give or lend her money, help look after her children, arrange transport for her, take her side if she was having a disagreement with someone or provide her with

moral support. If she responds that “it depends,” ask her what usually happens.

Questions 115a-c: ACCESS TO INFORMATION

The questions measure the respondent’s general access to information from the media. If the respondent is unsure how often they access any of these media sources, ask them to give their best estimate.

Question 119: CURRENTLY MARRIED OR HAVING A MALE PARTNER

The word ‘partner’ in the context of this survey refers to any person with whom the respondent has had or currently has a ‘couple relationship’. It thus refers to current and former husbands, cohabiting partners, fiancés, dating partners, etc., whether or not there is or has been a sexual relationship. In most countries, the survey will only look at male partners (***though the questions can be adapted for same-sex relationships or relationships with persons of other sexual identities as desired. It should be noted, however, that such subgroups may be too small to allow meaningful statistical results for the subgroup.***

It is important to realize that the translation of the word ‘partner’ in another language often reflects a concept that does not include husbands, as it may be the word that is used for a business partner or for an extramarital lover. To avoid the risk of misunderstanding in the questionnaire, we use the term ‘husband/partner’ for any partner that the woman has or may have had. Because the concept of partner is central to the study the translation should take this into account and sometimes a description rather than a single word should be used.

The partnership concept does not express the same phenomenon everywhere due to

differences in settlements, region, culture, etc. In the more ‘westernized’ parts, women can have dating partners without being married (and thus can be at risk of partner violence without being married), while in the more traditional parts, women can be betrothed without even ever seeing or spending time alone with the man they are going to marry (and thus while they can be considered ‘partnered’, practically they cannot be at risk of partner violence until they are married). In the adaptation of the questionnaire, it is best to be as inclusive as possible to not miss out women who are at risk of partner violence.

FOR MOST COUNTRIES the options here are:

- currently married and living with her husband (option 1);
- currently married, not living with her husband (option 2);
- living with a man, not married (option 3);
- currently has a regular male partner (engaged or dating), not living together (option 4); and
- not currently married or living with a man (and not currently in a dating relationship) (option 5).

The question offers some prompts that can be read out for clarification. Record her status at the time of the interview. In the questionnaire and this manual, “marriage” refers to formal unions, and “partnership” to informal unions, such as living together arrangements. For this question it is more important that we follow the opinion of the woman than the precise official or legal marital status.

- **1. CURRENTLY MARRIED, LIVING TOGETHER WITH HUSBAND.** In most cases it is clear who is married and who is not. However, as we follow the opinion of the woman, a married woman who is separated from her partner will often not consider herself married, even if her marriage is officially not yet dissolved. You

should probe to find out what would be the most appropriate category. In some countries, a woman who is the mistress of a man who is married to another woman (thus the respondent is maintained by him and may have children by him) may consider herself married. In this case she should be included in option 1. If a woman reports that she is currently married, mark 1 and go to question 123.

- **2. CURRENTLY MARRIED, NOT LIVING TOGETHER.** In some countries, a large portion of many married men and women do not live together because one of them is a migratory worker. There may also be other reasons why a married couple may not live together. If the woman considers herself married but not living together, you should mark option 2 and go to question 123.
- **3. LIVING WITH A MAN; NOT MARRIED.** A woman who is “living together” with a man would be a woman in an informal union. This is also known as a common-law union. An informal union is one in which the man and woman live together for some time, intending to have a lasting relationship, but do not have a formal civil or religious ceremony. Include under the category “living together” those relationships in which a man often lives at the woman’s home, but is away a lot (for example, for his work). If a woman lives with her boyfriend and his family, and has stayed there for several years, they would be considered as “living together,” whether or not they have any children. On the other hand, if a woman has a boyfriend, but has never lived with him, she would not be considered as being in a union (and will be included under option 4). If she is not currently married, or living with a man or does not have a current boyfriend, she will be included under option 5. If a woman reports that she is currently in a union, go to question 123.

- **4. CURRENTLY HAS A REGULAR MALE PARTNER, NOT LIVING TOGETHER.** This option includes boyfriends. Usually the woman will have a sexual relationship with this partner, but this is not always the case for dating or engaged couples. It is more important that she considers it a “meaningful” couple’s relationship and that they regularly see each other. Do not include past relationships in this option and do not include casual sexual encounters. If a woman reports that she has a regular partner, go to question 123. [THIS OPTION MAY NOT BE APPLICABLE IN ALL COUNTRIES]
- **5. NOT CURRENTLY MARRIED OR LIVING WITH A MAN.** If she is not currently married or living with a man and is not involved in a relationship with a man, she will be included under option 5. Continue with question 120a.

Question 120a: EVER BEEN MARRIED OR LIVED WITH A PARTNER

For women who are not currently married or having a male partner, this question asks if they have *ever* been married or lived with a male partner. If the respondent has ever been married, mark 1 (even if she has also lived with a man without being married). If she has never been married but previously lived with a man, mark 3. For both 1 and 3, continue to question 121. If the woman says NO, circle 5 for NO and go to the next question, 120b. Note that we do not ask this question of women who are currently married or have a partner, even if they have been married previously.

Question 120b: EVER BEEN INVOLVED IN A RELATIONSHIP WITH A MAN

For women who have never been married or who have never lived with a partner, this question asks if they have *ever* had been involved in a relationship with a man without living together

(such as being engaged or dating), meaning to find out if she ever had a regular male partner. If the respondent says YES, mark 1 and continue with the next question. If she says NO, mark 2 and go to section 2. Note that we do not ask this question of women who have ever been married, ever lived together with a man or have a current regular partner.

Question 121: HOW DID THE LAST PARTNERSHIP END

This question is asked of women who report that they are not currently married or living with a man, but that they have been married or lived with a man in the past. “Divorced” refers to the official break-up of a formal union with/marriage to a man. For example, the divorce may have been obtained through the courts or been issued by a local religious or village leader. “Separated” refers to an unofficial break-up of a formal or informal union. For example, a married couple may have separated and so no longer live together, but have not obtained a divorce in court. “Widowed” relates to women in formal or informal unions whose partners have died. If a woman reports that she has been widowed, go to question 123.

Question 122: WHO INITIATED THE DIVORCE/ SEPARATION

This question is asked of women who are currently single, and whose last union ended in either a divorce or separation. It seeks to find out who initiated or suggested that they separate – either the respondent, her partner or both of them. If the respondent says that her partner left her, record that the separation was initiated by the partner. If she left her partner, record that the separation was initiated by her. If they both agreed to separate, record both. If someone else

initiated the separation, code 6 for OTHER, and specify the person stated.

Question 123: NUMBER OF TIMES MARRIED OR LIVED WITH A MAN AND AGE OF FIRST MARRIAGE/LIVING WITH A MAN.

This question is asked of all women who have ever been married or lived with a man (in countries where it is common for women to divorce and remarry the same man several times, the question refers to the number of different husbands rather than number of times married with the same man). The number given should include the current partner; thus if the woman reported ever having been married or in a partnership, this number cannot be zero. However, if the respondent reported a dating relationship (option 4 in 119), the response ZERO could apply for those women who have never lived with a man. In this case, skip the rest of this section and go to section 2.

Question 123a: Ask age at which first married.

Question 124: LIVING WITH CURRENT/LAST PARTNER’S PARENTS OR RELATIVES

Questions 124–132 are asked only of women who have ever been married or lived with a man. They are about the respondent’s current or most recent partnership, even if she has had more than one partner. For each of the questions, present and past tense verbs are given (with a / in between). The present tense should be used if the question relates to the respondent’s current partner. The past tense should be used if the respondent currently does not have a partner and the question therefore relates to her last partner. For example, in question 124, for a currently married respondent, the question would read: “do you live with your current partner’s parents or any of his relatives?” For a woman who is separated from

her partner, the question would read: “did you live with your last partner’s parents or any of his relatives?” This could include his parents, brothers and sisters, uncles and aunts. For a woman with a current partner, who initially lived with her in-laws when she got married, but now lives only with her husband, the response NO should be recorded. Likewise, if she and her husband have recently moved in with her partner’s relatives, YES should be recorded, even if for most of her marriage, she has not lived with them. Similarly, for a respondent with a past relationship, in cases where the situation changed during the period of living together, you should refer to the most recent years of the relationship.

Question 125: LIVING WITH OWN PARENTS OR RELATIVES

Question 125 is similar to question 124, but relates to the respondent’s parents or relatives only. This could include her parents, brothers and sisters, uncles and aunts, as long as they are living in the same house.

[NOTE: QUESTIONS 126–128 SHOULD ONLY BE USED IN COUNTRIES WHERE POLYGAMY IS COMMON. QUESTIONS 129-130 ASKED ABOUT THE TYPE OF CEREMONY AND THE YEAR IT WAS PERFORMED BUT WERE REMOVED.]

Question 131: CHOICE OF CURRENT/LAST HUSBAND

Family members may have an influence over whom a woman marries. This question seeks to find out who chose the respondent’s current or most recent partner. For respondents reporting that someone other than she or her partner made the choice, use the probe: “who chose your current/most recent partner for you?” If either the respondent chose on her own, or if she and her partner both chose, go to the filter that is before question 1103.

Question 132: RESPONDENT ASKED IF SHE WANTED TO MARRY HUSBAND

The question seeks to identify whether, during the preparation for the marriage (and not during the marriage ceremony), the respondent was asked whether or not she wanted to marry her partner. Question 132 is related to question 131, but is not the same. For example, a woman may not have chosen her husband, but may have been asked by her parents whether or not she wanted to marry him.

FILTER BEFORE QUESTION 1103

First part of filter:

- Review the reference sheet (box A) at the back of the questionnaire.
- If the respondent is currently married or currently living with a man (option **K**), tick 2nd cell and continue with the second part of the filter.
- If the respondent is not currently married/ not living with a man *or if the only kind of partner she ever had was male dating partner* (options **L, M or N**), tick 3rd cell and go directly to section 2.

Second part of filter:

- Review the answers in question 111c about income
- if the respondent is earning money according to the options marked in question 111c, continue with question 1103.
- If option marked in question 111c indicates she does not earn money go to question Section 2.

Questions 1103 and 1104 are designed to explore the extent to which a respondent has control over the money that she earns. Be aware that the respondent may feel that some of these questions are enquiring about very private or sensitive issues.

Question 1103: MONEY

This question seeks to identify whether the respondent has control over how the money that she herself earns is used or whether she has to give some or all of the money that she earns to her partner to use in whatever way he chooses. What is important about this question is whether she is obliged to give some or all of her money to her partner. If the respondent says that she has to give the money she earns to her partner, probe to find out whether she gives some or all of the money to him.

Question 1104: AMOUNTS THAT MEN AND WOMEN CONTRIBUTE

It may be that women who earn more money than their partners are more vulnerable to abuse. Alternatively, it may be that such women are not beaten, because they make an important financial contribution to the household. This question explores whether the money that the respondent contributes to the household expenses is more, less or about the same amount as her partner contributes. By household expenses we mean all non-luxury, day-to-day expenses that members of the household have. This includes things like food for the family, clothes, rent, water or electricity charges, school fees, uniforms and medical expenses. It does not include luxuries, such as alcohol, smoking or holidays. If a woman says that she does not know how much her partner earns, still encourage her to estimate whether she contributes more or less money to the household

expenses than he does. Only record DON'T KNOW if she is absolutely unable to estimate this.

BEFORE STARTING SECTION 2

Review the answers and mark the marital status of the respondent in box A of the reference sheet at the back of the questionnaire (a tab on the tablet application of the questionnaire).

Do this carefully.

REFERENCE SHEET

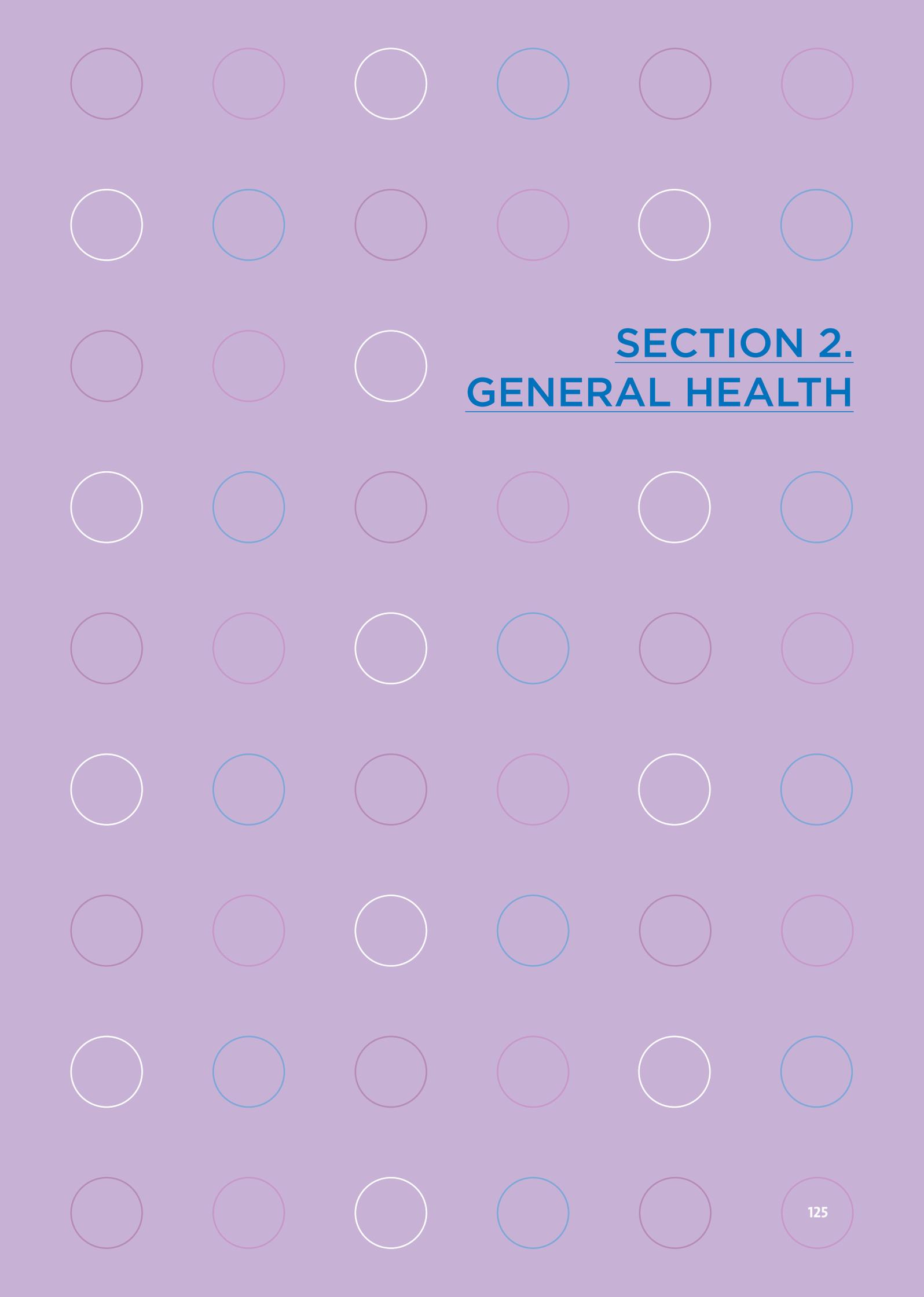
FILTERS USING INFORMATION FROM THE REFERENCE SHEET

The reference sheet is used during the interview to assist you to make the correct choices when applying filters in various places in the questionnaire. Follow the suggested checks carefully.

For example, in Box A of the reference sheet (for partnership status), only one option can be ticked even if more than one situation may be true for the respondent. The answers should be copied from those marked in Q119 and Q120 a and b. For instance, a respondent is considered currently partnered if she is currently married, living with a man or having a regular sexual relationship with a man. A woman who is currently in a dating relationship will, if you follow the arrows correctly, be given option L (Currently with regular sexual partner). Thus even, if she has also been previously married she will not be coded anything else but L for the purpose of the filters. She will thus not be considered “previously married/previously lived with man.”

As this example shows, the choice of partnership status should never be made “automatically”

from memory. Partnership status is the basis for analysis of most of the results that will be reported, thus errors in this information should be avoided at all costs. **Please also remember that all filters do need to be marked with ticks as well, for the purpose of data entry and consistency checking.**



SECTION 2. GENERAL HEALTH

The objective of this section is to obtain information related to the general health of the respondent. The topics include general health, mental health and use of health services. The focus is mainly on assessing the respondent's current health status. In the analysis, the responses will be used to assess whether there is likely to be an association between experiencing different forms of abuse either in the past or currently, and these different health outcomes.

Question 201: SELF-ASSESSMENT OF GENERAL HEALTH

This question aims to document the respondent's assessment of her own health. Read the whole question before allowing the respondent to reply, including the five answer options from which she has to choose the best answer that best describes her situation.

Questions 201a-f: DISABILITY ASSESSMENT

This series of question is based on the Washington Group's short set of disability questions. If the answer is yes to any question in the series, probe to see if it is with some difficulty or a lot difficulty.

Question 202–205: PROBLEMS IN THE PAST 4 WEEKS

Questions 202–205 ask about different aspects of a respondent's health in the past 4 weeks. (Note that "in the past 4 weeks" includes today – the day of the interview.) In each case, the respondent should choose from among the 5 options, the option that best reflects her overall experience over the past 4 weeks.

How would the woman describe her:

202: ability to walk around;

203: problems performing usual activities;

204: pain or discomfort; and

205: problems with memory or concentration.

Question 207: MEDICATION

This question aims to document whether the respondent has taken medication in the past 4 weeks either to help her calm down or sleep, to relieve pain or to help her not feel sad or depressed. In each case, read out the question. If she answers NO, circle 1 in the right-hand column. If she answers YES, read out the probe given below 207c. "Once or twice" means either one or two times altogether in the past 4 weeks. "A few times" means three or four times in the past 4 weeks. "Many times" means more than once a week (or five or more times) in the past 4 weeks. Check the corresponding response in the right-hand column (either 2, 3 or 4, respectively).

This question only seeks to identify whether the respondent has taken medication in the past 4 weeks for the reasons stated. The medication could have come from any source – including health workers, a pharmacy or from friends, and may or may not have been prescribed.

The question is not seeking to assess whether she has taken any medication **at all** in the past 4 weeks. We are only interested in her use of medication for the stated reasons in the past 4 weeks.

Question 208: CONSULT HEALTH WORKERS

This question aims to document whether the respondent has consulted with any form of health worker in the past 4 weeks because she was sick. Health workers include both those practising western medicine (such as doctors, pharmacists, midwives and village health workers) and traditional health workers (such as a traditional healer). The consultation may have taken place at

her house or elsewhere. You should not include any visits that she has made to a health worker to accompany someone else who was sick (such as a child or elderly relative). You should also not include routine pregnancy-related consultations.

If she answers NO to question 208, mark A in the right hand column. If she answers YES, ask who she consulted and mark the appropriate heading in the right-hand column. Probe, and ask whether she saw anyone else in the past 4 weeks. Notice that the codes here are letters rather than numbers to remind you to circle **all responses that apply**. Mark all of the health workers mentioned and record by X OTHER anyone mentioned who is not already listed.

If you are unsure about which response code to choose for a particular health worker mentioned, probe, and if necessary, write the full description of the person seen next to the question.

Question 209: PSYCHOLOGICAL PROBLEMS

This question is used to assess whether the respondent may be psychologically distressed. The question involves asking the respondent whether, in the past 2 weeks, she has experienced any of the 16 symptoms listed (Yes or No). The questions in this section make up two international scales measuring anxiety and depression and therefore should not be altered or skipped over. The Generalized Anxiety Disorder Assessment (GAD-7) questions are included in questions 209a-g. The Patient Health Questionnaire (PHQ-9), measuring depression, are questions 209h-p.

For this question, you are required to read the introduction to the question and then part a). Wait for the respondent's reply, and mark their response in the right-hand column. Then continue by reading question b) and so on. With practise, this question can be asked relatively quickly.

In each case, we want to document the respondent's assessment of whether or not she has experienced the problem in the past 2 weeks.

Please note: If the respondent says YES to question 209p, you should advise your supervisor after the interview.

Question 209q: PROBLEMS AFFECTING REGULAR LIFE

This question aims to understand if the problems noted in question 209 have affected the respondent's regular life including work, ability to take care of the house, and how they get along with other people.

Question 210: THOUGHTS OF ENDING LIFE

In part p of question 209, the respondent is asked whether, in the past 2 weeks, the thought of ending her life has been on her mind. Question 210 is similar to this, but relates to any point in the woman's life. The question should be asked whether or not the respondent said yes to part q of question 209. If she reports that she has never thought about ending her life, go to question 212. If she reports YES, enter code 1 and continue with question 211.

Question 211: TRIED TO END LIFE

This question aims to find out whether the respondent has ever actually tried to end her life. If the respondent says YES to question 211, enter code 1 and continue with the next question. If she says NO or refuses to answer, follow the skip pattern.

Question 211a: THOUGHT ABOUT ENDING LIFE IN THE PAST 12 MONTHS

This question is only asked if respondent says YES or NO to question 211. The reference period

for the question is the 12 months preceding the interview. If the respondent says YES to question 211a, verify if this was in the past 12 months and if so, enter code 1. In such cases, you should advise your supervisor after the interview.

Question 211b: TRIED TO END LIFE IN THE PAST 12 MONTHS

This question is only asked if respondent says YES to question 211a. The reference period for the question is the 12 months preceding the interview. If the respondent says YES to question 211b, verify if this was in the past 12 months and if so, enter code 1. In such cases, you should advise your supervisor after the interview.

Question 211c: MEDICAL CARE FOR SUICIDE ATTEMPT

This question aims to find out if the respondent required medical care or hospitalization for any suicide attempt that she may have done. After marking the answer, continue with the next question.

Question 212: OPERATION

The next two questions refer to the past 12 months (one year). Note that “in the past 12 months” includes today. When reading these questions, you should take care to ensure that the respondent understands that you are now referring to a different time-frame and are seeking to document her experience since the same time last year.

By “operation,” we mean any form of surgery under general or local anaesthesia. The operation may have been relatively minor or more major, and have been performed by either a public- or private-sector health worker. You should not record Caesarean sections.

Question 213: NIGHTS IN HOSPITAL

The answer to this question will be used to explore whether women who experience violence spend more nights in hospital than women who do not. If the respondent reports that she has not spent a night in hospital in the past 12 months, circle 00 (NONE). If she says that she has been in hospital because she is sick, read the probe given (How many nights in the past 12 months?). Record the number stated in the boxes given. Do not include nights spent in hospital associated with giving birth or caring for other family members (however, pregnancy-related problems should be included).

[Questions 214 AND 215 ON SMOKING SHOULD ONLY BE INCLUDED IN THE QUESTIONNAIRE IN COUNTRIES WHERE IT IS POSSIBLE TO GET RELATIVELY RELIABLE RESPONSES ABOUT WOMEN’S PATTERNS OF SMOKING.]

Question 214: CURRENTLY SMOKES

Question 214 refers to whether the respondent currently smokes. By “smoking,” we are referring to any form of tobacco consumption; it includes smoking cigars and/or hookahs as well as cigarettes. For this reason, you should also include the chewing and/or other uses of tobacco. “Daily” means at least once a day. “Occasionally” means smoking less than once a day. “Not at all” means that the respondent does not currently smoke or use tobacco in other ways.

Question 215: EVER SMOKED

This question enquires about whether the respondent has ever smoked (or consumed tobacco in other ways), and with what frequency. Mark “daily” if, at some time, the respondent did smoke tobacco at least once a day. Mark “occasionally” if, overall in her life, the respondent

has smoked more than 100 cigarettes (of any strength), but she has never smoked every day. Mark “not at all” if she has smoked less than 100 cigarettes in her lifetime or if she has never smoked.

[QUESTIONS 216–218 AIM TO DOCUMENT THE EXTENT TO WHICH THE RESPONDENT CONSUMES ALCOHOL. THEY SHOULD ONLY BE INCLUDED IN THE QUESTIONNAIRE IN SETTINGS WHERE A RELIABLE RESPONSE IS LIKELY.]

Question 216: ALCOHOL

Question 216 asks about the respondent’s current alcohol consumption. For this question, you need to read the question and all of the possible responses, and then pause to record the one that the respondent feels best describes her situation. The alcohol could be consumed at any location, including at home, with friends or in a bar. Likewise, the alcohol could be made at home, bought from an illegal source or bought from a licensed outlet. If her drinking pattern has not always been the same, refer to the current pattern of drinking. If the respondent states that she has never taken alcohol, skip to question 219.

Question 217: NUMBER OF ALCOHOLIC DRINKS

This question aims to document the number of drinks that the respondent usually consumed on the days when she did drink in the past four weeks – irrespective of the type of drink, the strength of the drink or the size of the unit of consumption (bottles, glasses, etc.). Accept the answer as given, without converting the portions. For example, if a woman only drinks during weekends, but then has about three drinks over the evening, you would record [0][3]. Record [0] [0] if the respondent has not had an alcoholic drink in the past 4 weeks, irrespective of whether or not she has taken alcohol before that. When

in doubt about how to record the answer, write down the exact words of the respondent.

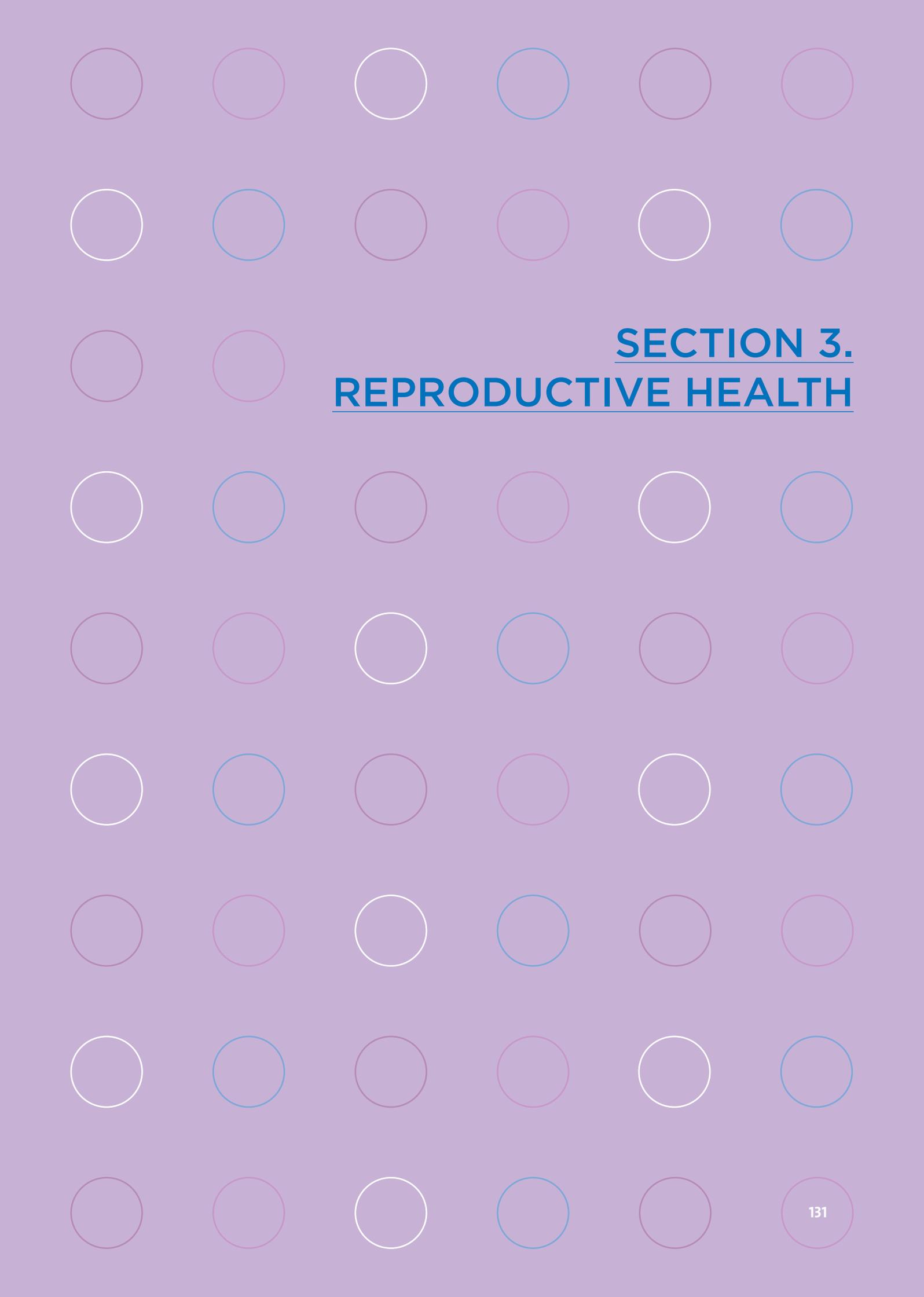
Question 218: PROBLEMS RELATED TO DRINKING

This question aims to document problems that may have been caused by the respondent’s purchase or consumption of alcohol. Read the question, and then part a). Wait for the respondent’s reply, and mark her response in the right-hand column. Then continue by reading question b) and so on. If the respondent reports any form of problem not already listed (x), write down the response in the space given in the right-hand column. If there is not enough room, continue writing the response in the margins of the questionnaire, or above section 3.

Questions 219 and 220: DRUGS

Question 219 asks about the respondent’s drug use, such as cocaine or heroin. You need to read the question and all of the possible responses, and then pause to record the one that the respondent feels best describes her situation. She may take these drugs in many ways, including by smoking, inhalation or injection. If she uses more than one type of drug, the question refers to her overall levels of use of drugs. This question is highly sensitive, and so you should ensure that you ask this question directly, in a manner that does not embarrass or frighten the respondent. If the respondent appears hesitant to answer, remind her that all of her responses will be kept secret. The drug use could be at any location – including at home, with friends or elsewhere. If her drug use pattern has not always been the same, refer to the current pattern (in the past year).

Question 220 asks about the respondent’s use of marijuana (also known as cannabis or weed).



SECTION 3. REPRODUCTIVE HEALTH

The questions in this section should be asked of all women. The questions can be divided into two main groups:

Questions 301–310: information about the total number of pregnancies, births and children (sons and daughters) that a woman has given birth to (no matter who the father is).

Questions 311–320: questions about a woman's use of contraception.

Question 301: EVER GIVEN BIRTH

This question is used to find out if the respondent has ever given birth to a baby that was alive, and to find out how many times she has done this.

It is important at the outset of this section that you understand which events to include when you ask about births. We want to record all the children that the respondent has given birth to, even if the child no longer stays in the household, and even if the child is no longer alive. Even newborns who survived for only a few minutes (and showed signs of life by crying, breathing or moving) should be recorded. Thus a pregnancy with twins could have resulted in 2, 1 or 0 live births, depending on the number of children born alive.

It is also important to understand what events should not be recorded. You must not record stillbirths (i.e. giving birth to a dead child), adopted children, or children of the husband to which another woman gave birth. The only question where stillbirths will be included is question 309, where this information is specifically requested.

If the respondent has given birth, mark the number of times, and go to question 302a. If the answer is NONE, circle 00 and continue to question 302.

Question 302: EVER PREGNANT AND AGE OF FIRST PREGNANCY

Women who report that they have never given birth to a live baby are asked whether they have ever been pregnant. Include current pregnancy if applicable. For those responding YES, mark 1 and go to question 302a. If the answer is NO, mark 2 and go to question 310. For those who answer maybe/not sure, mark 3 and go to question 310.

Question 302a: AGE OF FIRST PREGNANCY

This is the age the woman became pregnant for the **first time** in her life, regardless if this resulted in a live birth or not.

Question 303: CHILDREN CURRENTLY ALIVE

This question is asked of women who report that they have given birth. Record the number given. Include all children that the respondent has given birth to who are currently alive. Include all children, whether or not they live with her and irrespective of how old they are. *Do not* include children that she has not given birth to. If she had a child that was given up for adoption and whose whereabouts she does not know, count as a live child and make a note of this. This question should not be asked of women who answered 'None' at question 301 and 'Yes' at question 302.

Questions 304 AND 305: CHILDREN WHO DIED

These questions on children who have died are extremely important, but are among the most difficult on which to obtain accurate data. You must ask question 304 even if the respondent says that she has never given birth in answer to question 301, because she may have neglected to tell you about children who died very young. Also, because of this, if she answers NO to question 304, it is important that you probe by asking "Any baby

who cried or showed signs of life but survived for only a few hours or days?” The interviewer should make sure that the respondent realizes that this question is asking about children of ANY age who died (otherwise only young children will be considered). Some respondents may be reluctant to talk about this subject and may become sad or upset that you are asking these questions. Be sympathetic and tactful in such situations. Say that you know that the subject is painful, but that the information is important. If the response to question 304 is NO, circle 2 and go to question 306.

Question 305 asks about the numbers of sons and daughters that have died. Ask part a), and record the response before moving to part b. If none have died, ALWAYS record [o][o] in the spaces provided.

Question 306: CHILDREN’S FATHERS

This question is about the biological fathers of children born to the respondent, irrespective of whether these children are currently alive, or live with her or their father, or not. If the woman has only one child circle option 1 “ONE FATHER.” If she has not yet given birth to any children, but is currently pregnant, you should circle 7 “N/A” and go to question 308. Some respondents may find the question to be sensitive. If asked why you want to know this information, say that you need this information to learn more about women’s situation. If she is hesitant to answer any of these questions, reassure her that everything she says will be treated confidentially and that the same questions are being asked of all women in the study. If the child is the result of a rape, make a note of this by the question, and again in the interviewer comments at the end of the questionnaire.

Question 307: FINANCIAL SUPPORT FROM FATHER

This question collects information about whether men financially support their children. Refer to

the children that are currently alive. If there is one or more child(ren) and this child or all these children receive support, record “ALL.” This implies that in situations where there is a father who lives at home, together with his wife and children and who is providing for his household, the option ALL should be recorded. If there is more than one child and not all of the children are supported by their father (this may be because they do not have the same father), record “SOME.” This question refers to the current situation; therefore record N/A, for example, when the respondent answers that the father died, or that the children died, or that the children are already grown up and no longer need support. Also, if the woman is pregnant with her first child (i.e. does not have any children yet), or when she had been pregnant but never given birth to a live child (because of a miscarriage or abortion), record option 7 “N/A.”

Question 308: NUMBER OF PREGNANCIES

This question seeks to assess how many times the woman has been pregnant, including possible current pregnancy. If the woman has not had any multiple births, the number reported for the total number of pregnancies (question 308a) should be equal to or greater than the number given in response to question 301. In the case of multiple births we need to record the number of pregnancies with twins (question 308b) and the number of pregnancies with triplets (question 308c). Questions 308b and 308c refer to the number of pregnancies and not to the number of children or births. A pregnancy with twins where one child was born alive and one child died in the mother’s womb would also be recorded as [1] pregnancy with twins. The child born alive would need to be counted among the live births and the child that was miscarried or was born dead would be counted among the lost pregnancies (question 309). A number should be

entered in all cases. If there were no pregnancies, enter “0” in the spaces provided.

Question 309: LOST PREGNANCIES

We want to know whether the respondent had any pregnancies that did not result in a live birth, so we ask about each type of lost pregnancy. If a pregnancy ended pre-term and involuntarily, it was a miscarriage/spontaneous abortion. If a woman gave birth to a child that showed no signs of life, it was a stillbirth. If a woman ended a pregnancy by choice, it was an (induced) abortion. Read the question, and then one of the probes. Record the response, and then read the next probe. Enquiring about abortions is sensitive in all cultures, and may be particularly difficult to explore in countries where abortion is illegal. In this setting, the country research team will need to assess whether it is possible to ask about the number of abortions.

If the respondent answers “none” for any part of the question, code [00].

Question 310: CURRENT PREGNANCY

If the respondent does not know for certain whether or not she is pregnant, record MAYBE in answer to question 310. For the remainder of the interview you should consider her to not be pregnant. Therefore, in the reference sheet (Box B) you should record that she is *not* pregnant.

TOTAL PREGNANCIES AND CHECKING TOTAL WITH RESPONDENT

Depending on which answer was given to question 310, the interviewer should use either formula A or formula B to check the numbers of pregnancies against the number of children. The skip patterns in question 310 will make this clear. If the respondent is currently not pregnant (has

said NO or MAYBE to question 310) you should go to option B in the box. Add up the numbers in questions 301 and 309a, b and c. Check that they add up to the same figure as the total of question 308: $(308a) + (308b) + (2 \times 308c)$. (Note that 308c needs to be counted twice, because a pregnancy with triplets adds two extra children/births to the total.) If the respondent is currently pregnant, you should go to option A (Note that one extra pregnancy needs to be added.) If the figures do not match, ask the respondent if the total number of pregnancies is correct. If she says NO, first check your addition, and then go through the list to check with the respondent whether the information you have obtained is correct. For example, starting with question 301, you would ask “You have given birth four times. Is that correct?” Do the same for questions 308 and 309, and correct any mistakes identified.

GENERAL NOTES ABOUT QUESTIONS 311–319

Questions 311–319 collect information on the use of various contraceptive methods, and the respondent’s partner’s attitudes towards their use. There is also one additional question on the use of condoms (question 319). A respondent may consider this topic a personal issue, and she may feel embarrassed to talk about it. To overcome her embarrassment, you must show that you do not feel embarrassed or uncomfortable in any way. Ask these questions as if they were no different from any other questions in the questionnaire. If she is hesitant to answer any of these questions, reassure her that everything she says will be treated confidentially and that the same questions are being asked of all women in the study.

Question 311: EVER USE OF FAMILY PLANNING

The purpose of this question is to find out whether, at any time, the woman has used or

tried to use any method to delay or avoid getting pregnant. This may be while she was with her current partner or with any other sexual partner. If the woman reports that she has never had sexual intercourse, go to section 5. If the woman reports never having tried or used a contraceptive method, go to question 315. If you find out only later during the interview (e.g. when asking the subsequent questions on family planning) that the respondent has never had intercourse, return to correct this question.

Question 312: CURRENT USE OF FAMILY PLANNING

If the woman responds YES to question 311, ask question 312 to find out whether she is currently using contraception/family planning. Go to question 315 if she is not currently using any method to avoid or delay getting pregnant.

Question 313: METHOD CURRENTLY USED

This question is asked of women who report that they are currently doing something to prevent pregnancy. Ask the question and circle the most appropriate response. If you are not sure about what method the woman is using, probe to find out more about it. For example, say: "I am not familiar with this method. How do you use it?" Record any methods not listed on the "OTHER" line. In a few instances, women may report using more than one method of protection (such as the pill and condoms). In such cases, ask her which is the main method that she is using to prevent pregnancy; record this response.

The respondent may not always know the name of the contraception that she is using, or she may use a different term to the one that you are familiar with. For this reason, you need to have some knowledge of the different contraceptive methods yourself and must be familiar with the

names people use in referring to each method. Some additional information about selected methods is given below:

PILL/TABLETS

A pill or tablet that is normally taken daily to prevent pregnancy. A number of brands are available, for example, Yasmin, Yaz, Perle, Gynera and Novynette. (*Make the names country-specific*).

INJECTABLES

A shot (injection) that is normally given every 3 or 6 months and is also known as Depo-Provera or Noristerat.

IMPLANTS (NORPLANT)

Also called Norplant, these small rods are surgically implanted in a woman's upper arm. They usually protect a woman against pregnancy for 5 years.

IUD

A device (often T- or spiral-shaped) that is inserted into the uterus by a doctor or nurse; also called a "coil." It has strings attached to it that can be felt at the opening of the cervix, inside the vagina, so that the user can easily check to make sure it is in place.

DIAPHRAGM, FOAM, JELLY

Under this heading, we have grouped together a large number of methods of female contraception that are used in the vagina, including diaphragm, spermicidal foam and jelly, foaming tablets, etc.

CALENDER/MUCUS METHOD

This is also called the safe period, rhythm or the calendar method. The method is based on the principle that by not having sexual relations on certain days of her monthly cycle, a woman can avoid becoming pregnant. To be using this method, she has to report that she is avoiding sex at certain times of the month in order to avoid pregnancy.

Note that this is not the same as prolonged abstinence where the couple stops having sexual relations for months at a time to avoid pregnancy without regard to the woman's monthly cycle. Also, if a woman does not feel like having sex on particular days of her cycle, this does not mean that she is using the calendar method.

FEMALE STERILIZATION

There are several types of sterilization operations a woman can have, for example, "tube tie" (tubal ligation), or removal of the womb, uterus or ovaries. You should stress the phrase "an operation not to have any more children."

MALE STERILIZATION/VASECTOMY

This is a comparatively minor operation done on men for contraceptive purposes. It is also called a vasectomy.

WITHDRAWAL

For this method, a man withdraws his penis from the woman's vagina before he ejaculates in order to try to prevent pregnancy. It is also called *coitus interruptus*.

HERBS

Women may mention traditional methods such as certain herbs or medicines. If so, write the name of the method or methods used.

OTHER

Women may mention other methods. Write these down on the "other" line. If she mentions prolonged abstinence, breastfeeding or abortion, write these down, since she considers them methods of family planning.

At first you may feel embarrassed to talk about and describe these methods, but remember, if you are embarrassed, you may increase the embarrassment of the respondent. You should keep from smiling or giggling so that you

encourage her to be direct and to feel more comfortable talking with you about this subject.

Questions 315 and 319: PARTNER AND FAMILY PLANNING AND CONDOM USE

These questions aim to find out about the partner's attitudes towards family planning and the use of condoms. Note that the questions refer to the current or most recent partner.

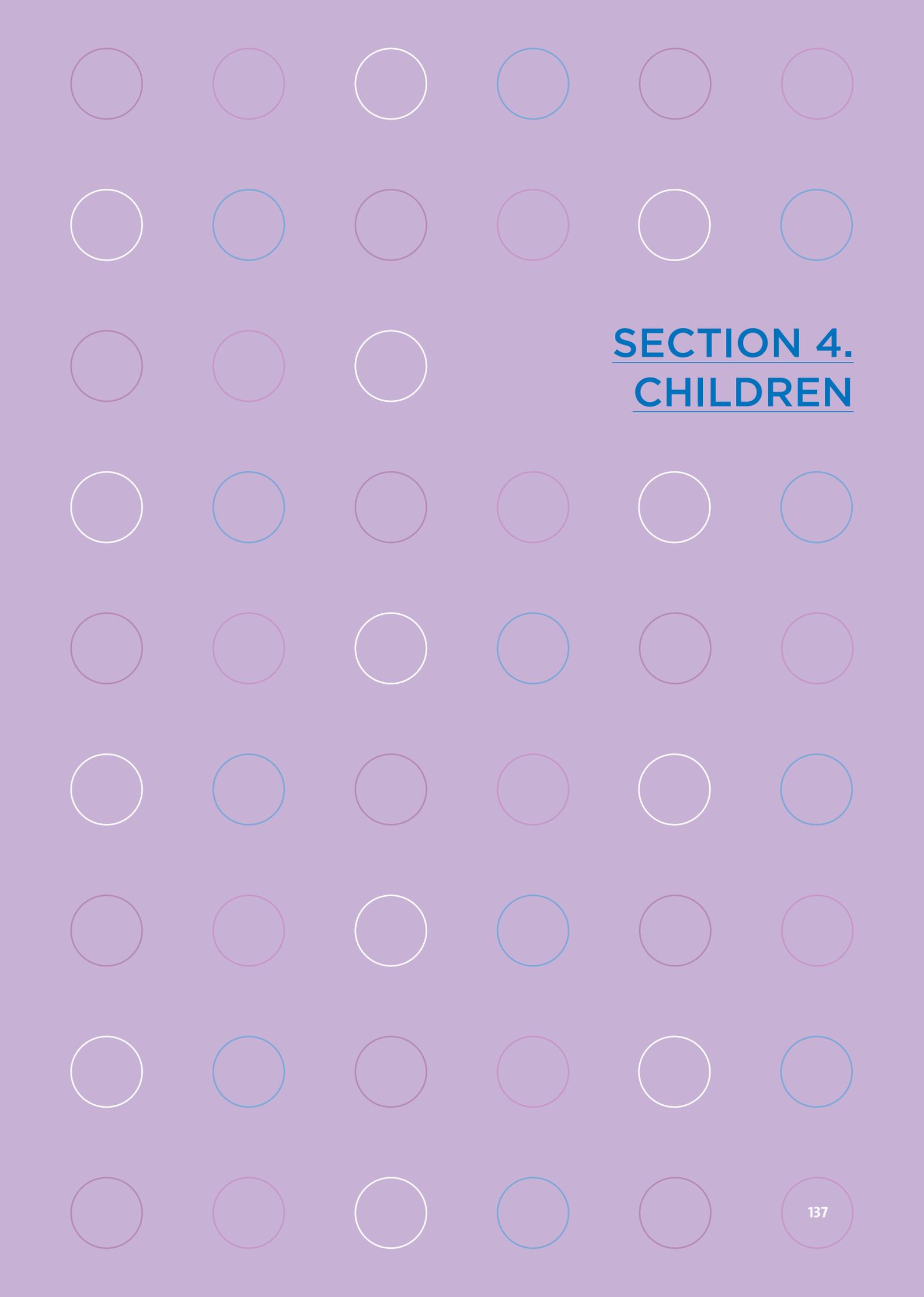
Question 315 seeks to find out whether the woman's current or most recent partner has ever tried to stop her from using a method to avoid getting pregnant or has himself refused to use a method to prevent pregnancy. We are only interested in whether he has tried to stop her from preventing a pregnancy or refused to use condoms. Do not include cases where he himself may have taken responsibility for family planning (such as by becoming sterilized), and so made it unnecessary for the respondent to use family planning methods. In some cases you may find that a woman may have responded that she had intercourse (and sometimes a child) but that she never had a partner. In that case, mark option 7 and go to Section 4.

Question 319 is asked to all respondents regardless of what she had previously mentioned on the methods she has used. The question seeks to find out whether their partner has ever refused to use a condom.

BEFORE STARTING SECTION 4

Review the answers and mark the reproductive history of the respondent in box B of the reference sheet at the back of the questionnaire.

Do this carefully.



SECTION 4.
CHILDREN

FILTER AT BEGINNING OF SECTION 4**REVIEW BOX B, POINT Q IN THE REFERENCE SHEET AT THE BACK OF THE QUESTIONNAIRE**

Mark one of the check boxes in filter above question 401:

- If any live births, tick 2nd cell in section 4 and continue.
- If no live births, tick 3rd cell in section 4 and go to section 5.

Question 401: LAST TIME GAVE BIRTH

Read the introduction, and ask for the date that the respondent last gave birth to a child that was alive at birth. (If you followed the skips correctly you will have noticed that this section will not be administered to a woman who has never had a live birth, even if she has been pregnant.) If possible, write the day, month and year of each birth, and whether or not the child is currently alive. If the last pregnancy ended in a twin birth, refer to the last child that was born. If she gives you a year of birth, but does not know the day and month of birth, leave the space for DAY blank, but probe to try to **estimate** the month. For example, if she says her daughter was born in 1987, but she doesn't know which month, ask her if she gave birth in the [possible probes: dry or wet season; if she remembers if she was pregnant at Christmas or Easter time; or some other significant event/season of the year] to try to determine the month of birth. Convert months to numbers, as before. If you cannot even estimate a month, leave the space for MONTH blank.

If the respondent cannot recall the year when the birth occurred, you need to probe carefully. Check the documents collected at the beginning

of the interview, such as the birth certificate or immunization record, to see if a date of birth has been recorded. Before entering a date from these items, check with the respondent to determine if she believes the date is accurate. If there is no birth certificate or other document for the child, see if the respondent knows a firm birth date for any other child in the household and relate to that. For example, if she has two children and she knows that her first child was born in 1985 and her last child was born one year later, enter 1986. *You should enter a year of birth for the child, even if it is just your best estimate.*

Question 402: NAME AND SEX

Ask for the first name of the respondent's last born child and write it down. Only record the first name so that you can use this as a way to refer to the child. If the baby never had a name, either because it is still very young or because it died very young, write "Baby" for the name. Use this name when you ask the respondent whether this child is a boy or a girl. Circle the code for the sex. Although you can usually tell the sex from the name, check with the respondent by saying, for example, "and Joyce is a girl?" Do not assume the sex of the child from the name.

Question 403: SURVIVAL STATUS

Circle the code for whether the child is still alive or not. If the child is alive, continue to question 404. If the child is dead, go to question 405. In this case, be sensitive to the respondent's loss. For example, you could say "I am sorry." (If the child has been given up for adoption and the respondent does not know if the child is alive, this question should not be completed, but the interviewer should write a comment next to this question to explain the situation.)

Question 404: AGE OF CHILD

Record the age of the child in completed years. For example, a child who will be 3 years old next week should be recorded as “02” years old today. A child aged less than 1 year will be recorded as age “00” years.

Sometimes a mother will not know the age of her child. In this case, you may rephrase the question to: “How many years ago was John born?” You can also use other available information. For example, you can relate John’s age to a child whose age she does know. For example, the mother may know that her oldest child was born 5 year ago, and that John was born 2 years after this, in which case John would be 3 years old now.

Question 405: AGE AT DEATH

If you are following the skip pattern correctly, you will only be asking this question of women who have reported that their last born child died. You must record information about the age at death even if the information is only a best estimate. For a child older than 1 year, record the age at which he or she died in completed years. For a child aged more than 1 month, but less than 1 year, record the age in months. For a child younger than 1 month old, record the age in days.

You should give the answer in completed units, i.e., if she says “four and a half months,” record MONTHS “04.” Note that if the respondent gives you an answer in weeks, you must convert the answer to days or months. If the answer is less than 1 month (less than 4 weeks), probe to find out the exact age at death in days. For example, if the answer is “3 weeks,” probe for the number of days. If the mother says 19 days, record DAYS “19.” If the answer is one or more months (4 weeks or more), you would convert the answer to months.

An answer of “7 weeks” would be recorded as MONTHS “01.”

Similarly, if the respondent answers “1 year,” you need to probe to find the exact number of months. We know that if a child died at the age of 10, 11, 12, 13 or 14 months, a woman is likely to round-off her answer when asked how old her child was when he or she died, because she does not know that we need the exact age. This means that she is likely to respond “1 year old” even if the child really was 10 months or 13 months old. Therefore, any time a woman responds “1 year” to this question, probe by asking “How many months old was (Name)?” If the child had completed 1 year, record YEAR “01” and do not record MONTHS. Only record MONTHS if the child died before he/or she had lived for one whole year.

As mentioned before, in this section we are collecting information about children who were born alive. If the respondent says that the baby was not alive when it was born, probe by saying: “Did it cry or show any sign of life when it was born?” If she says the baby was dead when it was born, return to question 401, and ask about the child that was born before this.

CONSISTENCY CHECK: DATE OF BIRTH AND AGE

You are not finished with question 404 or question 405 until you have checked the consistency between question 401 and question 404 or question 405. Check their consistency by using the procedures explained earlier (you can use either the arithmetic procedure or the Age–Birth Date Consistency Chart or any other conversion table).

Questions 401 and 404 (child is alive)

The arithmetic procedure is summarized here. Add the year of birth and the age. If the child has already had a birthday this year (day and month of birth is

before or on the day and month of interview), the sum should be [2016] (the last two digits of the year of interview). If the child has not yet had a birthday this year (day and month of birth is after day and month of interview), the sum should be [2015] (the last two digits of the previous year). The above implies that if the child's day and month of birth is the same as the day and month of the interview (thus the child has his or her birthday on the day of the interview), the sum should be [2016]. (As mentioned before: if only the month and year of birth are known and not the day of birth, you should leave the space for DAY blank, but use "01" for the consistency check. If day and month of birth are unknown and the month could not be estimated, both spaces should be left in blank, but 1 January should be used for the consistency check.)

If year of birth plus age do not add to [2015] or [2016] as appropriate, probe to get consistent information. For example, if the sum equals [2014] and it should be [2015], then you need to add 1 to either the age or the year of birth after checking with the respondent to see which one is wrong. If the sum adds to [2017] and it should be [2015], you need to subtract either 2 from "age" or "year of birth," or *alternatively* subtract 1 from both "age" and "year of birth."

Questions 401 and 405 (child died)

Carry out a consistency check as described above. Note that the age at death and year of birth should add to AT MOST [2015] or [2016], because if the child died before the day of the interview, the age at death could be the same or less than the age that the child would have reached on the day of the interview but never more.

Question 406: CHECK IF LAST BIRTH LESS THAN 5 YEARS AGO

The next group of questions refer only to the last live birth in the last 5 years. To assess whether

the respondent should be asked these questions, check question 401 to see if the birth date is more or less than 5 years ago. For an interview conducted in [2016], check to see if the year of birth was before [2011]. If the year of birth was before [2011], circle 1 and go to question 417. If the year of birth was [2011] check if day and month of birth were before or on the date of the interview; in that case circle 1, otherwise circle 2. If the year of birth was [2012] or more recent, circle 2 and continue to question 407.

[If desired, countries may be provided with a spreadsheet in which only the date of the interview needs to be entered. The spreadsheet will give, based on the date of the interview, the ranges of possible dates for each AGE in years. Printouts may be prepared for each of the days of the survey. Alternatively, the first date of the survey may be used and on the consecutive days the spreadsheet can be adjusted by changing the DAY of the date in pencil.]

Questions 407–416

Following the skip pattern, these questions will only be administered to women who have had one or more live births and whose youngest child was born *less* than 5 years ago (thus a child who was born less than 5 years ago but who is no longer alive will also be considered in these questions.)

Questions 407 and 408: DESIRED TIMING OF PREGNANCY

In each case, read the entire question to the respondent before accepting an answer, inserting the name of the youngest child (whether still alive or not). The woman may be currently pregnant and therefore thinking of her current pregnancy; in such cases, do remind the respondent that the question is about the pregnancy that resulted in

the last child that was born alive. If her answer is ambiguous, repeat the question to make sure she understands.

Question 409: ANTENATAL CHECK

This question refers to any antenatal care given by a health care provider during the respondent's pregnancy. Antenatal care is to specifically check the progress of her pregnancy, and not for other reasons. Antenatal care is usually given at a health care facility, but is sometimes provided in the pregnant woman's home. This is a two-part question because if the respondent answers YES, you must ask who she saw. Ask the woman if she saw more than one person and record all persons seen. Again, the codes here are letters rather than numbers to remind you to **circle all responses that apply**. If the respondent did not see anyone at all for a check on her pregnancy, circle only the code "A" for NO ONE. (*Note: in some countries auxiliary nurse is called nurse aid; and in some countries "prenatal" is better understood than "antenatal".*)

Questions 410 and 411: PARTNER'S ATTITUDES

For these two questions, read the entire question before accepting an answer. In these questions, the husband/partner refers to the father of the child.

[QUESTIONS 412–413 SHOULD ONLY BE INCLUDED IN THE QUESTIONNAIRE IN SETTINGS WHERE SOME WOMEN DRINK AND/OR CONSUME TOBACCO (AND THUS WHERE QUESTION 210 AND/OR QUESTION 213 WERE ALSO INCLUDED).]

Questions 412 and 413: CONSUMPTION OF ALCOHOL /TOBACCO

These questions refer to the pregnancy preceding the most recent birth. It is important that you ask these questions of all women who have given

birth, regardless of whether the child is still alive or not.

Question 414: CHECK-UP 6 WEEKS AFTER DELIVERY

This question also refers to the last time that the woman gave birth. By check-up we mean any form of postnatal examination to check on the respondent's health (rather than her baby's health). This may have been conducted by a range of people, including a nurse, midwife, doctor or traditional birth attendant, either at her own home or in a clinic or other location. If the child is not yet 6 weeks old, she could not have had this check-up yet and thus you should mark the appropriate option "3" for NO, CHILD NOT YET 6 WEEKS OLD.

Questions 415 and 416: WEIGHT AT BIRTH

If the baby was not weighed at birth, record NO in answer to question 415 and go to question 417. If the baby was weighed at birth, ask question 416 to find out how much the baby weighed. Mark DON'T KNOW if the woman is unsure and go to question 417.

Notice that in question 416 there are two sets of boxes for recording the birth weight; the first is KILOGRAMS FROM CARD, and the second is KILOGRAMS FROM RECALL. KILOGRAMS FROM CARD refers to a written record of the birth weight on a document, such as the vaccination card, the antenatal card, or the birth certificate. KILOGRAMS FROM RECALL refers to the mother's verbal report of her child's birth weight, which she is reporting from memory.

Fill in only one set of boxes and always record the birth weight from the card when possible. The only time you will fill in the boxes for KILOGRAMS FROM RECALL is if there is no card, or if there is

no birth weight recorded on the card. If there is no record of the weight available from a card and the respondent says she cannot remember the exact birth weight, ask her to give you her best estimate. Only record “8” for ‘DON’T KNOW’ if she cannot remember even an approximate weight. (Note that 1 kilogram = 2.20 pounds)

Questions 417– 424: CHILDREN AGED 5–12 YEARS

[THE AGE GROUP 5–12 YEARS IS TAKEN, ASSUMING THAT CHILDREN FROM AGE 5 ARE GOING TO (PRE) SCHOOL. IN COUNTRIES WHERE CHILDREN ENTER (PRE)SCHOOL AT A LATER AGE, THIS QUESTION AND SUBSEQUENT QUESTIONS MAY NEED TO BE ADAPTED ACCORDINGLY.]

Question 417: NUMBER OF CHILDREN AGED 5–12 YEARS

Ask the respondent whether she has any children aged 5–12 years. Include children who are 5 years of age (have had their fifth birthday) through children who are 12 years of age (have had their twelfth birthday but not yet had their 13th birthday). Question 417 is a two-part question – if the respondent answers YES, you must ask her how many children she has aged between 5 and 12 years. Only include children aged between 5 and 12 years that the respondent has given birth to. Include children that do not live at home with her. Do not include other children who may live with the respondent if she has not given birth to them, even if she looks after them. If the respondent answers NONE, you must record this and then go to section 5.

Question 418: BOYS AND GIRLS

This is a follow-on question for women who report that they have at least one child aged 5–12 years, to find out how many of these children are

boys and how many are girls. Record the number of boys and girls separately. If the respondent has only sons, write “0” in the boxes for daughters, and vice versa.

Question 419: BOYS AND GIRLS LIVING WITH RESPONDENT

This question refers to the respondent’s children aged 5–12 years. The sons and daughters being considered are those who live with her in her household (which will usually be the household in which the interview is being held, except for women who are visitors). If she has only daughters, write “0” in the boxes for sons, and vice versa. Remember that we are only interested in the respondent’s *own* children and not in foster children, children of her husband by another woman or children of another relative. If the answer to this question is NO, go to section 5. Check that the numbers given are not larger than the numbers given in answer to question 418.

Questions 420– 424: WELL-BEING OF CHILDREN

The objective of these questions is to obtain information related to the well-being of the respondent’s children. The topics include indicators of childhood distress, running away from home and problems at school. These questions refer only to the respondent’s children aged 5–12, who are currently living with her.

Question 420: INDICATORS OF CHILDHOOD DISTRESS

The objective of this question is to find out whether any of the woman’s children currently have any of the problems listed. For this question, read the introduction and then the problem given in a). Record the woman’s response (either YES or NO), and then move on and read the problem

given in b). Continue in this way through the question.

Q420a By “nightmares,” we mean bad or unpleasant dreams that may wake or distress the child.

Q420b [This option has been removed]

Q420c We refer here to children aged 5–12 years who often wet (urinate in) their bed at night.

Q420d Timid or withdrawn includes children aged 5–12 years who are very quiet and find it difficult to communicate or play with other children.

Q420e Here we are considering children aged 5–12 years who are often aggressive towards their mother, siblings or other children. This includes both physical and verbal aggression.

Question 421: EVER RUN AWAY FROM HOME

In this question, include children aged 5–12 years who have ever run away from home and then returned, either the same day, or later. This is a two-part question – if the respondent reports that one of her children has run away from home, find out how many of her boys and girls have done this.

Questions 422–424: CHILDREN IN SCHOOL

These questions refer to children in school. In question 422, by “going to,” we mean attending, either part time or full time, a school or other place of learning. Note that we are still only referring to her children aged 5–12 years. Check that the numbers given are not greater than the numbers given in question 419. If the woman reports that none of her children are enrolled in school enter code “00” and go to section 5.



SECTION 5.
CURRENT OR MOST
RECENT PARTNER

FILTER AT BEGINNING OF SECTION 5**REVIEW BOX A OF THE REFERENCE SHEET
AT THE BACK OF THE QUESTIONNAIRE**

Mark one of the check boxes in filter above question 501:

- If currently married, living with a man or *engaged or dating a male partner* (options **K** or **L**), tick 2nd cell and continue.
- If formerly married/living with a man or formerly *engaged or dating a male partner* (option **M**), tick 3rd cell and continue.
- If never married/never had male partner (option **N**), tick 4th cell and go to section 6.

In this section, take care to word the questions in the present or past tense according to whether the woman is currently in a union (married or living together with a man) or not. If she is currently married but has been married or lived with a man more than once, ask about her current husband or partner. If she is not currently married or living with someone, but was formerly married and/or has had a male relationship, refer to her most recent husband or partner.

Questions 501 and 502: PARTNER'S AGE

If you have difficulties obtaining the husband's age, use the same methods to probe for his age as described in question 107 for obtaining the respondent's age.

If the woman is divorced or separated, record her partner's current age. If the partner of the respondent is dead, also record the age he would have been if he were still alive. If this is difficult to find out, indicate only his year of birth, but make sure to calculate the corresponding age afterwards. It is recommended that you make a

note (write a comment) that the partner is dead in the space next to this question.

Before moving on to question 503, cross-check the responses to questions 501 and 502 in order to see that they are consistent, using the conversion calendar provided.

Question 502a: PARTNER'S COMMUNITY OF ORIGIN

This question attempts to find out if the partner is from the same community/town as the respondent.

Questions 503–505: PARTNER'S EDUCATION

These questions are identical to questions 110–111 that were asked of the respondent. Again, note that in question 505, you record the highest standard, form or year *completed* at that level. If the respondent does not know, record "8" for DON'T KNOW. The question also records the number of years spent in school.

Question 506: PARTNER UNEMPLOYED OR WORKING

When you are asking this question, be careful to read the different introductions to the question, depending upon whether the respondent is currently married or living with a man, or whether she was formerly married or living with a man. If he is/was working, go to question 508. If he is retired go to question 508. If he is a student, go to question 508. If he is either looking for work, unemployed, disabled or long-term sick, continue to question 507. If more than one response applies, and he is working and doing something else (for example, retired from a previous job or a student), record the working code and then go to question 508.

Question 507: PARTNER UNEMPLOYED

If you have followed the skip patterns correctly, this question should only be asked of women who

report that their partner is/was unemployed. Again, be careful to read the correct section of the question, according to whether your respondent is currently married/living with a man, or formerly married/living with a man.

Question 508: PARTNER'S CURRENT (OR MOST RECENT) TYPE OF WORK

Write the answer in the respondent's own words. Be specific. For example, if the respondent says, "He works for the Ministry of Planning," ask what he does there. Examples of occupations are: bank clerk, barber, taxi driver, teacher, lawyer, salesman, fisherman, coffee farmer, carpenter, etc. If you are not sure how to write the occupation, it is better to give a lot of detail rather than too little. (Refer to description of question 111d on page 31 of this manual.)

Care needs to be taken when recording occupations to make sure that you document the seniority of the position. For example, if the man manages a farm, it is not enough to record "farmer." You should instead record "farm manager." A person who works in a lower position in which they, say, plant crops, would be called a "farm labourer," or "agricultural worker."

Likewise, you should take care to record the main form of employment if the man has more than one job. If a man has one main source of employment, but does some other things to make money, you should record his main job. For example, if he grows just a few crops, but has another regular job, record the other regular job.

For this question, "not currently working" is not an acceptable response. If the man is unemployed, get a description of his most recent job. If he does more than one job, write down what he does most of the time.

Question 509: PARTNER'S USE OF ALCOHOL

Questions 509–511 refer to the husband's/partner's use of alcohol. When you ask question 509, read out the entire question, including the possible responses, before pausing to let the respondent answer. For a woman currently married/living with a man, the question refers to her partner's current levels of use of alcohol. For a woman formerly married/living with a man, the levels of alcohol use refer to his patterns of alcohol use while she was with him. "Every day or nearly every day" is four or more times a week. "Occasional" is less than once a month (for example only during weddings) but not NEVER. If his drinking pattern has not always been the same, refer to the current pattern (or to the most recent pattern while she was still with him). If a woman's partner never drinks (has never drunk), record 5 (NEVER), and go to question 512. If she does not know, record 8 (DON'T KNOW) and continue with question 510.

Question 510: SEEN PARTNER DRUNK

This question asks about how often the respondent has seen her partner drunk in the past 12 months (or, for respondents reporting about their most recent partner, in general, while they were together). If the respondent has been with her partner for less than 1 year, the question refers to the time that they have been together. "MOST DAYS" means four or more days a week. "WEEKLY" means one to three times a week. "MONTHLY" means one to three times a month. "LESS THAN ONCE A MONTH" is as stated. Mark "NEVER" if the respondent has not seen her partner drunk in the past 12 months – irrespective or not of whether she knows that he has been drunk during this time. Likewise, mark NEVER if she has not seen him drunk in the past 12 months, even if she has seen him drunk in previous years.

Question 511: PROBLEMS DUE TO ALCOHOL

This question seeks to identify whether the respondent herself has experienced problems associated with her partner's use of alcohol. When you ask this question, read the question and then part a). Record 1) or 2) in the right-hand column according to whether the respondent replies YES or NO, and then read part b). "Family problems" include quarrelling or fights. Part x) has two parts: read "any other problems?" If she says NO, record 2) and continue to question 512. If she says YES, probe if necessary, "what type of problem?" and record the response on the line provided.

Question 512 and 512a: PARTNER'S USE OF DRUGS

[NB: ONLY INCLUDE THIS QUESTION IN COUNTRIES WHERE IT IS POSSIBLE TO ASK ABOUT THE USE OF DRUGS.]

Questions 512 and 512a refers to the husband's/partner's use of drugs, such as cannabis, cocaine or heroin, and is comparable to question 509. He may take these drugs in many ways, including by smoking, inhalation or injection. If a man uses more than one type of drug, the question refers to his overall levels of drug use. This question is highly sensitive, and so you should ensure that you ask this question directly in a manner that does not embarrass or frighten the respondent. If the respondent appears hesitant to answer, remind her that all of her responses will be kept secret.

Question 513: PARTNER IN FIGHT

This question asks whether the respondent's partner has ever been in a fistfight with another man over the time that she has been with him (or other type of fight in which physical force was used). If she responds "NO" or "DON'T KNOW" go to question 515.

Question 514: FREQUENCY OF PARTNER'S FIGHTING

This question refers to the past 12 months. Record 1 (NEVER) if the man has not been in a fight with another man in the past 12 months. Record 2 (ONCE OR TWICE) if this has happened one or two times over the past year. Record 3 (A FEW TIMES) if this has happened three to five times over the year. Record 4 (MANY TIMES) if this has happened six or more times over the year. Record 8 "DON'T KNOW" if the woman does not know how many times her partner has been in a fight, but only record "DON'T KNOW" if the respondent can't even roughly estimate how many times that this has happened.

Question 515: OTHER PARTNERS

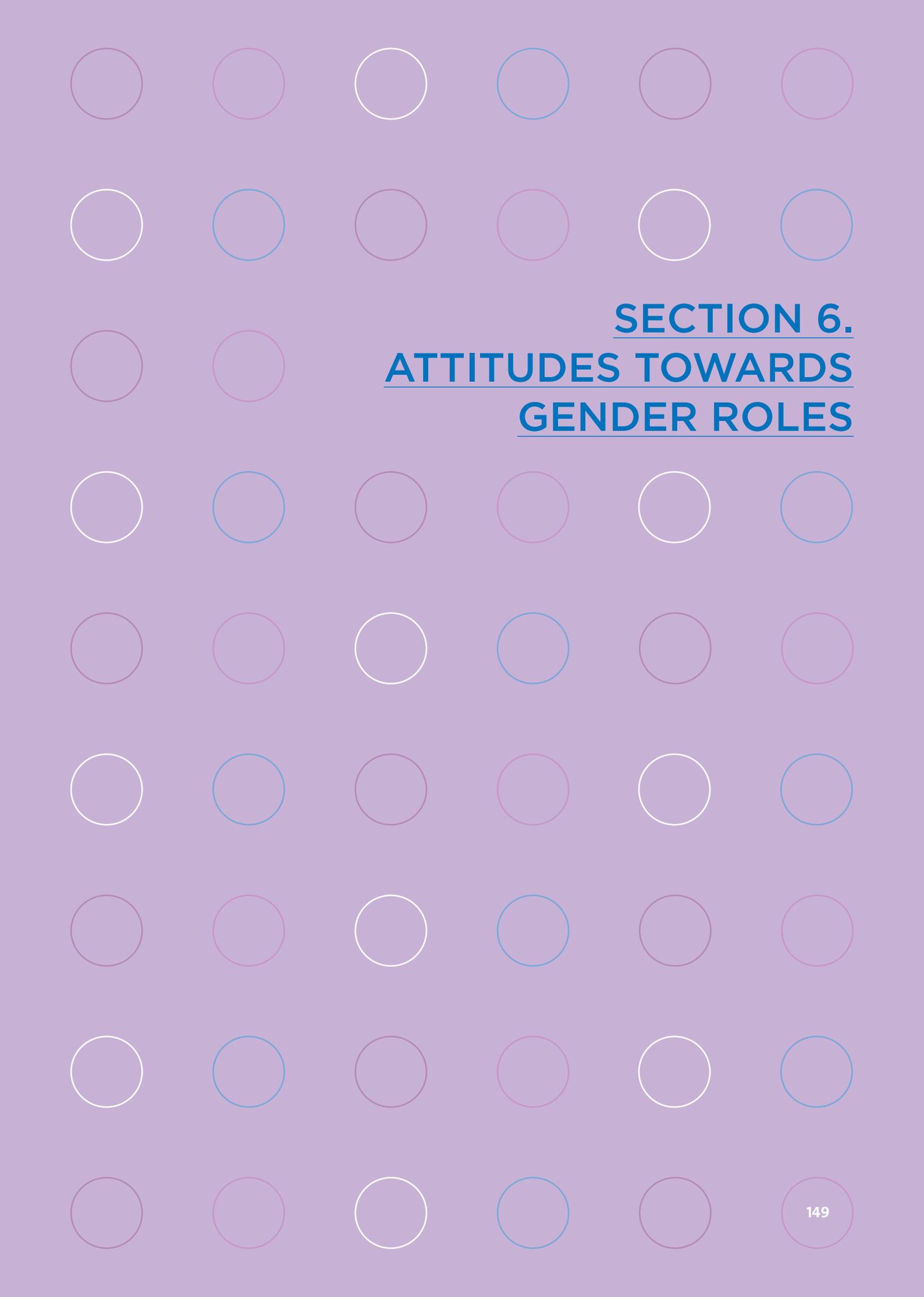
This question refers to whether the respondent's current or most recent partner has had a sexual relationship with other women while being with her. If the respondent is separated or divorced from her most recent partner, do not consider any women the partner may have had after the relationship with the respondent ended. Continue to question 516 if she responds YES or MAY HAVE. Otherwise go to section 6.

Question 516: CHILDREN WITH OTHER PARTNERS

Probe if necessary to check that any children reported were born to women not married to her partner, while respondent was married to or living with that husband/partner.

Questions 1008 and 1009: HUSBAND/PARTNER'S EXPOSURE TO VIOLENCE AS A CHILD

This question refers to whether the respondent's current or most recent partner was exposed to violence as a child. If the respondent does not know if her partner was exposed to violence, select "DON'T KNOW."



SECTION 6.
ATTITUDES TOWARDS
GENDER ROLES

This section is about a woman's attitudes towards appropriate roles for men and women. Before moving on to question 601, read out the introduction given. This will help you to introduce the topic, let the respondent know that you are now moving on to a new topic of discussion, and explain how to answer some of the questions. When reading this, stress that you want to know about her opinions (and not about behaviours or about other people's views), and that there are no right or wrong answers.

Questions 601a-f: STATEMENTS ABOUT GENDER ROLES

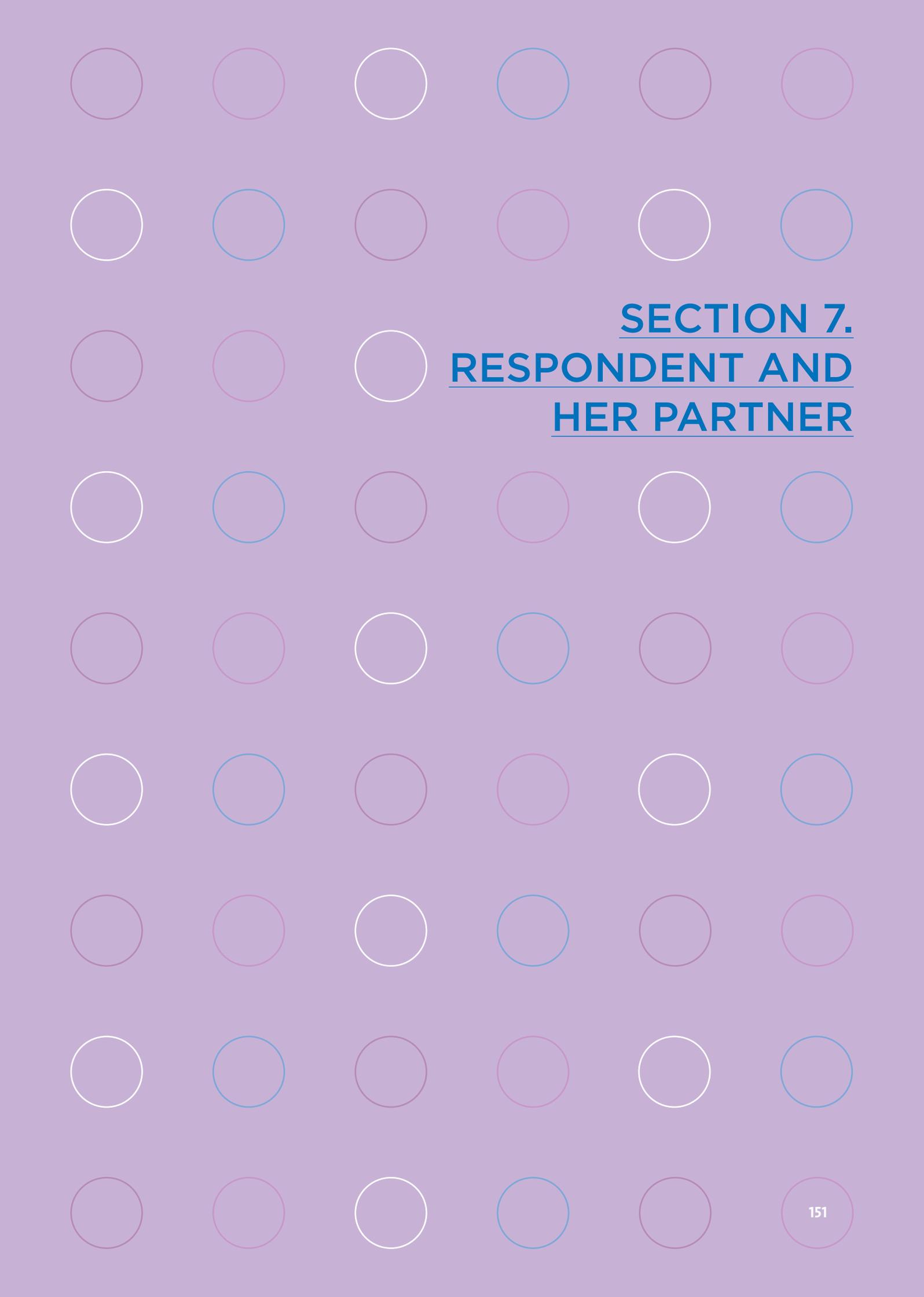
Questions 601a-f offers different statements about family relationships. For each of these, read out the question and then wait to see if the respondent says that she generally agrees or disagrees with the statement. Her response should be recorded in the right-hand column. The respondent can also state that she does not know or is unsure. However, try to encourage the respondent to say whether she *generally* agrees or not.

Questions 602a-e: STATEMENTS ABOUT THE NORMALIZATION/ACCEPTABILITY OF VIOLENCE

Questions 602a-e are different statements about violence between men and women. For each of these, read out the question, and then wait to see if the respondent says that she generally agrees or disagrees with the statement. Her response should be recorded in the right-hand column. The respondent can also state that she does not know, or is unsure. However, do try to encourage the respondent to say whether, *generally*, she agrees or not.

Questions 607: RELATIONSHIPS

Question 607 is similar to the previous questions in section 6, except that we now want to know about the respondent's opinion in relation to different situations. We want to know whether, in general, she agrees with the statement or not. Sometimes the respondent may think you are asking about her own situation. If so, you should clarify that it is not the case. When reading the question, read the first part of the question and then read section a). Record the respondent's answer (YES/AGREE, NO/DISAGREE OR DON'T KNOW), before moving on to section b) and so on. Encourage the respondent to answer either "yes" or "no," rather than responding "don't know."



SECTION 7.
RESPONDENT AND
HER PARTNER

FILTER AT BEGINNING OF SECTION 7**REVIEW BOX A OF THE REFERENCE SHEET
AT THE BACK OF THE QUESTIONNAIRE**

Mark one of the check boxes in filter above question 701:

- If ever married, lived with a man or with male partner (options **K, L** or **M**) tick 2nd cell and continue with section 7.
- If never married/never lived with a man or never with male partner (option **N**), tick 3rd cell in section 7 and go to section 10.

This section will explore a woman's experience of different forms of violence perpetrated by different partners. Before moving on to question 701, make sure that you read out the introduction given. This section not only introduces the subject, but is also used to highlight that all relationships have their good and bad moments. When reading this section, remember to:

- State that you will change the topic of conversation if anyone interrupts the interview;
- Stress that the woman's answers will be kept secret;
- Remind her that she does not have to answer any questions that she does not want to; and
- Ask the respondent whether you can continue.

If the respondent does not want to continue, thank her for her time, and end the interview. Return to the cover page, and make a note that the respondent stopped the interview at the start of section 7. If the respondent gives any reasons for why she wants to stop the interview, record these at the end of the questionnaire in the space provided for INTERVIEWER COMMENTS.

If she gives her permission to continue, move onto question 701.

This section of the questionnaire is particularly sensitive. For this reason, you will practise the section a lot in your training. During the interview, you will need to ensure that you ask these questions in a non-judgemental manner, and that you will be able to respond appropriately if the respondent becomes upset.

Question 701: COMMUNICATION BETWEEN PARTNERS

Questions 701–703 refer to the respondent and her current or most recent partner (***except for 703O, which includes any partner***). You will need to remember this and take care to ensure that you use the appropriate wording (do/did, and current/most recent partner) for each of these questions.

Question 701 seeks to find out whether, in general, the respondent and her partner (or most recent partner) talk to each other about things that have happened to him or her in the day, and about his or her worries or feelings. When you ask the question, read the main text and part a). Allow the respondent to reply before continuing to part b) and so on.

Question 702: QUARRELS WITH PARTNER

In all relationships, partners quarrel or argue at times. Question 702 seeks to identify how often the respondent and her current partner or most recent partner quarrel with each other. By "quarrel" we mean have an angry verbal dispute or argument.

Read the entire question before seeking a response from the woman. The frequency measure used will be somewhat subjective. If the respondent gives a number, or if she seeks clarification, use the following guidelines. By "rarely," we mean less

than once a month. By “sometimes” we mean once a month or more, but less than once a week. By “often” we mean once a week or more.

Question 703-706: CONTROLLING BEHAVIOUR AND PARTNER VIOLENCE

Question 703: PARTNER’S CONTROLLING BEHAVIOUR

The questions 703, 703N and 703O on controlling behaviours and acts that can be considered economic abusive are asked only about the current or most recent partner.

Question 703 explores whether the respondent’s current or most recent partner tried to control her. For this question, read the first part of the question and part a). Code the response in column A. If the answer is ‘no’, continue to part b) on the row below a). If the answer is ‘yes’ continue with column B asking if it happened in the past 12 months. Mark ‘yes’ or ‘no’ and then continue to part b). Most of the questions are self-explanatory. In b), by “restrict contact with your family of birth” we mean limiting contact with or preventing the woman from seeing her own family, such as her parents, brothers or sisters or uncles and aunts. In e), “is often suspicious that you are unfaithful” means that he often suspects or accuses her of having another sexual partner. Question f) “expects you to ask permission before seeking health care for yourself,” refers to her consulting any form of health care worker, such as a doctor, nurse or traditional health worker. Here we are interested in finding out whether, for example, if the respondent was very ill and urgently needed to see a doctor, her partner would expect her to get his permission before she went, even if she had the money herself to pay for the treatment.

Question 703N, items h, i and j aim to get an impression of economic abuse (which can be considered a type of controlling behaviour). Remember, as with the previous rows, that this question is asking only about the current or most recent partner. As there are no generally accepted questions on economic abuse that work across all settings, the questions scripted here could be adapted or replaced by others that work better locally: “He refuses to give you enough money for household expenses, even when he has money for other things?” is a question that generally works in most settings. If desirable, questions 703N can be replaced by other more suitable questions to collect more information on economic abuse, depending on the context. Some examples could be:

- “He prevents you from knowing about or having access to family income, even if you ask” (used in Canada).
- He does not allow you to work (used in Turkey).

Question 703O should only be asked of women who have had children. It seeks to determine whether **any of the respondent’s partners** ever tried to control her by refusing to pay child support.

Questions 704–706: ABUSIVE BEHAVIOUR

In contrast to questions 701–703, questions 704–706 refer to actions that may have been perpetrated by *any of the intimate partners that the respondent has had in her life*. This may be a current partner, or a former partner or a boyfriend.

The respondent will be presented with lists of specific actions. We not only ask for each act if it happened but also if it happened in the past 12 months of her life (not of the relationship) and before the past 12 months.

When asking each question, you are required to read out the first part of the question followed by item a). If the respondent says YES, check 1) in

column A and continue with the question given at the top of column B). If the response is NO (it has not happened), check 2 in column A and continue with the next item, part b) of the question.

If the response to the question in whether it happened in the past 12 months given in column B) is YES, check 1; continue with the question at the top of column C and D, asking about the frequency in the past 12 months (C) and the frequency before the past 12 months (D). Column D refers to any time before the past 12 months, regardless of how long ago. If the act has not happened before the past 12 months, check 0 in column D. Once this row has been completed, move to the next item b) of the question.

If the response to the question given in column B) is NO, check 2 (it has not happened in the past 12 months) and go to the question given in column D). Note that in the case that the act has not happened in the past 12 months and thus column C is skipped, the frequency before the past 12 month *cannot* be 0 and one of the options 1, 2 or 3 must be checked.

As you progress through the different parts of the question, you will move along the different questions listed in columns A) to D) and then continue with the next item of the question. This may appear complicated at first, but with practice the question will be relatively easy to complete.

Question 704 asks about a range of psychologically abusive behaviours.

- a) “Insulted you or made you feel bad about yourself” – means that the partner said nasty things about the respondent or said things that made her feel that she was no good, such as that she was worthless, a bad woman, ugly or stupid.
- b) “Belittled or humiliated you in front of other people” – by “belittle,” we mean that he

intentionally said or did something to make the respondent look unimportant or worthless. By “humiliate,” we mean that he intentionally said or did something to embarrass or reduce the dignity of the respondent.

- c) “Done things to scare or intimidate you on purpose” – by “intimidate” we mean severely frighten, or make the respondent fear for her safety. This could be, for example, by the way he looked at her, or by yelling and smashing things. For example, violent men often use intimidation to prevent their partners from leaving or to prevent them from telling others about their situation.
- d) “Verbally threatened to hurt you or someone you care about” – for example, by threatening to hurt the respondent’s children or parents.

Question 705 asks about a range of physically abusive behaviours. In this question we are not trying to document all physically abusive behaviours, but to ask about enough commonly occurring acts to be able to identify women who have been physically abused, and to estimate the severity of the physical violence that they report experiencing.

- a) “Slapped you or thrown something at you that could hurt you” – includes slaps and claps, but not more severe forms of physical violence.
- b) “Pushed you or shoved you or pulled your hair” – used physical force to push or shove the respondent, for example, against a wall, or onto the floor, or pulled her hair (but this is not as severe as dragging by the hair).
- c) “Hit you with his fist, or with something else that could hurt you” – this refers to physically violent acts that are more severe than slapping with an open hand, such as punches, that are likely to lead to external or internal injuries.

- d) “Kicked you, dragged you or beat you up” – this refers to severe physical violence, including kicks, being dragged along (for example, by the hair, legs or arms), or being beaten up, that is likely to lead to external or internal injuries.
- e) “Choked or burnt you on purpose” – this refers to strangling and choking (either with the hands, rope or other materials), or intentionally burning the respondent (including with cigarettes, on the stove or in the fire, or by setting light to her).
- f) “Threatened with or actually used a gun, knife or other weapon against her” – this refers to threats or actual use of a gun to shoot the respondent, or threats or actual use of any other form of weapon against her. By weapon, we include anything that could be used as a weapon, such as knives, scythes, pitchforks and hammers.

Question 706 asks about a range of sexually abusive behaviours. In this question we are not trying to document all sexually abusive behaviours, but instead to document the extent to which three extreme forms of behaviour occur.

- a) “Did your current husband/partner or any other partner ever force you to have sexual intercourse when you did not want to, for example by threatening you or holding you down” – means that he used threats or force (such as by holding her down) to have sexual intercourse with her.
- b) “Did you ever have sexual intercourse when you did not want to because you were afraid of what your partner or any other partner might do if you refused” – consequences that the respondent may have been frightened of include that her partner would beat her up, leave her, go to see a prostitute or get a girlfriend.

- c) “Did your partner or any other partner ever force you to do anything sexual that you did not want or that you found degrading or humiliating?” The force used could either be physical, or non-physical (such as threats, or making her afraid that he would leave her). The key issue is that he forced her to do a particular sexual act that she did not want, found unpleasant or degrading.

CHECK Question 704, 705, 706: FILTER FOR VIOLENT BEHAVIOUR

For (any) YES in Column A indicating that a violent act by any partner occurred, continue to the next question. If NO, follow the skip pattern.

704e, 705g, 706d: WHICH PARTNER VIOLENT

If one or more violent acts have been mentioned, with this question you need to identify who was the partner who manifested the violent behaviour. It is important to know if it was the current or the most recent partner (for whom we have information collected in Section 5), any earlier partner or, if more than one partner was violent, whether it included the current/most recent partner. If the latter is the case, mark “BOTH” (both partners could have inflicted the same act of violence or different acts – we do not need to know which partner inflicted which act). If you know that the respondent only had one partner and that all her answers refer to the same person, you would still need to mark the appropriate answer in this question.

Questions 707 and 708: REVIEW OF RESPONSES ON VIOLENCE

Questions 707 and 708 are included to ensure that you review the responses to questions 705 and 706, to see if the respondent has reported

experiencing either physical or sexual violence perpetrated by any intimate partner. This information will be used at later stages of the interview to guide the skip patterns – with certain questions only being asked of women who report experiencing physical and/or sexual violence.

Question 707: you need to look at the responses in column A) of question 705 to see if the respondent has answered YES to any part of the question (and so a “1” has been checked). If she has answered YES, she has experienced physical violence from a partner. If the responses to 705, column A) are all “2”s (all NO), she has not reported experiencing any form of physical violence. You should record the corresponding observation in the response code to Q707 **and in box C of the reference sheet.**

Question 708: Similarly to the previous question, you should review the responses given in column A) of question 706, to see if any question has been answered YES. Record the result in the response code, **and in box C of the reference sheet.**

Question 708a: EVER AFRAID OF PARTNER

Question 708a is being asked of all women regardless whether she reported any forms of violence or not. The question attempts to measure another aspect of severity and addresses whether the woman is ever afraid of her current or most recent husband/partner [an alternative question could be ‘fearing for her life’]. It is hypothesized that living in fear most of the time is a measure of her subjective experience of the severity of the violence she is experiencing. It should be clear from (the translation of) the question that the question is about fear/being afraid (e.g. fear for her life) and not about the type of ‘fear’ which reflects respect in some cultures. You should make sure that you refer to her situation nowadays, even if she is no longer with her most recent partner.

FILTER BEFORE QUESTION 709

REVIEW BOX B OF THE REFERENCE SHEET AT THE BACK OF THE QUESTIONNAIRE

Mark the checkboxes in the filter as follows:

- Check whether the respondent has ever been pregnant (option **P**), the number of pregnancies (option **t**) and if she is currently pregnant (option **S**).
- If she has ever been pregnant: tick cell 2, record the number of pregnancies and if she is currently pregnant “yes” or “no.”
- If she has never been pregnant, tick cell 3 and go Section 8.

Questions 709–711: VIOLENCE DURING PREGNANCY

Violence during pregnancy is a worldwide reality. Questions 709–711 are concerned with finding out whether women have experienced physical violence during pregnancy, in how many pregnancies this occurred, and whether any physical violence was directed towards her abdomen. We want to identify all physical violence experienced by the respondent during pregnancy by any partner she may have had. The perpetrator(s) may be the father of the child or any other partner of the woman.

Question 709: EVER EXPERIENCED VIOLENCE DURING PREGNANCY

Question 709 asks the respondent whether she was pushed, slapped, hit, kicked or beaten while she was pregnant by any of her partners (current or past). When you read this question, insert the

number of pregnancies that she has had in the line marked TOTAL. If she responds YES, circle code “1” and continue the question. If she responds NO, circle code “2” and go to Section 8. When in doubt about what is meant here, you may refer to all physical acts that she mentioned when responding to question 705, irrespective of whether or not they were directed towards the woman’s abdomen.

Question 710: NUMBER OF PREGNANCIES IN WHICH PHYSICAL VIOLENCE OCCURRED

This question aims to find out in how many pregnancies physical violence occurred. If the respondent had already answered YES to question 709 AND you have entered in the filter above question 709 that she has been pregnant only once, you do not need to ask this question and you could record [0][1].

If respondent answered YES to question 709 and had more than one pregnancy, read out the text in the left-hand column. The question is in two parts. Read the first sentence. If the woman reports that physical violence has occurred only in one pregnancy, record [0][1] in the spaces provided. If she reports that physical violence has occurred in more than one pregnancy, probe to find out how many pregnancies she was beaten in. Record the response in the space provided. For example, if she was beaten in three pregnancies, record [0][3].

For all these cases continue with question 710a.

Question 710a: VIOLENCE IN LAST PREGNANCY

For respondents who have been pregnant at least once and who report physical violence in one or more pregnancy, this question explores whether this happened in the last (most recent) pregnancy. If the respondent had been pregnant only once, this is considered the last pregnancy thus you should record YES by marking “1.”

Question 711: PHYSICAL VIOLENCE TOWARD ABDOMEN

In many cases, physical violence during pregnancy is directed towards the woman’s abdomen. This question seeks to identify whether the woman was ever punched or kicked (or physically assaulted in some way), while she was pregnant and the blows were directed towards her abdomen/stomach/belly.

Questions 712 – 715: PATTERNS OF VIOLENCE DURING PREGNANCY

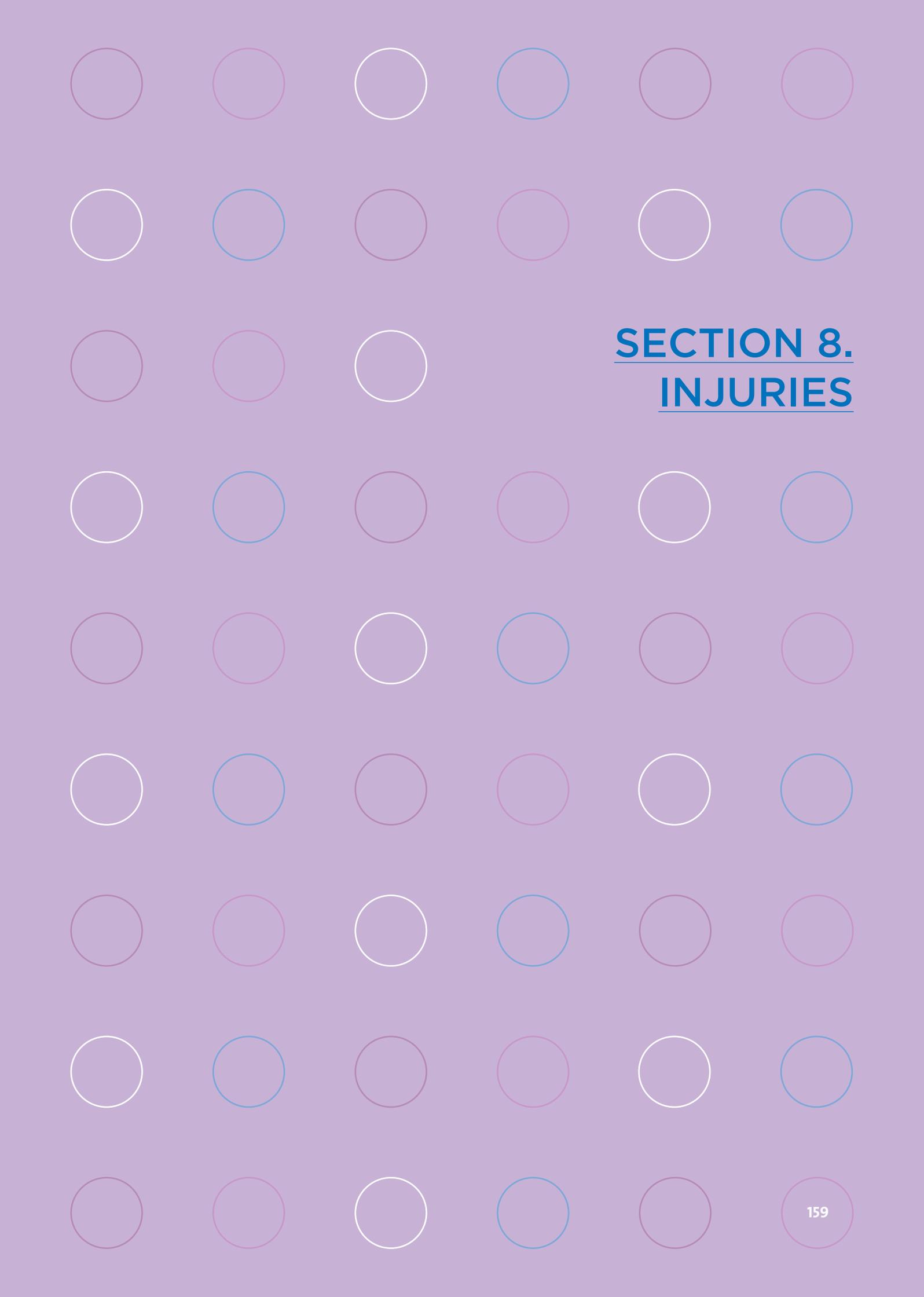
Questions 712–715 explore the patterns of physical violence occurring during pregnancy. In each case, they refer to most recent pregnancy in which the respondent experienced physical violence.

Question 712 explores whether the person who slapped, hit or beat her (or was physically violent in other ways) during pregnancy was the father of the child she was carrying.

Question 713 explores whether the man who did this was her current or most recent partner.

Question 714 explores whether the person who was physically violent during the pregnancy also beat her (or was physically violent towards her in other ways) before she was pregnant with this child. If she responds NO, record “2” and go to Section 8. If she responds YES, continue to question 715.

Question 715 explores whether the respondent feels that the physical violence got less, stayed about the same or got worse while she was pregnant. By “got less” we mean that the physical violence became less severe, and/or was less frequent. By “got worse” we mean that the physical violence became more severe, and/or was more frequent.



SECTION 8.
INJURIES

FILTER AT BEGINNING OF SECTION 8**REVIEW BOX C OF THE REFERENCE SHEET AT THE BACK OF THE QUESTIONNAIRE**

Mark one of the check boxes in filter above question 801:

- Check whether the respondent has experienced physical **or** sexual violence (Box c).
- If she experienced physical violence or sexual violence (either **yes** to options **U or** to option **V**) tick 2nd cell and continue to text.
- If she experienced **neither** physical violence **nor** sexual violence (**no** to **both options U and V**), tick 3rd cell and go directly to section 10.

Before moving to question 801, read the introductory text given in the second row. This explains that you now want to learn about any injuries resulting from violence perpetrated by (*any of*) her partners (refer to acts as mentioned in question 705 and/or 706). By injury, we mean any form of physical harm, including cuts, sprains, burns, broken bones or broken teeth.

Note that if the respondent has reported violence perpetrated by more than one partner, you need to choose the appropriate wording to use in questions 801 and 802.

Question 801: EVER INJURED.

Question 801 asks the respondent whether she has ever been injured as a result of violence by any of the husbands/partners she has had in her life. If she says NO, check 2 and go to question 804a. If she replies YES, continue to question 802a.

Question 802a and b: NUMBER OF TIMES INJURED

Question 802 is divided into parts a) and b). Part a) enquires about how frequently the respondent has been injured by her partner. Part b) asks whether this has happened in the past 12 months and this should always be asked after a) regardless of the answer given. It should be clarified that for both time-frames we are interested in injuries by any partner, not necessarily by the last/most recent partner (thus this is also the case for the question that asks about the past 12 months in the respondent's life).

Question 803a and b: TYPE OF INJURY

Question 803 is divided into parts a) and b). Part a) enquires about the types of injury received. Part b) asks, for each of the injuries that have been mentioned, whether that injury occurred in the past 12 months.

For part a), do not read out the types of injuries but simply record all of the forms of injury that the respondent mentions (by marking any or several of the letter codes A to I, X). A black eye should be considered as an EYE INJURY. If necessary, probe to see if any forms of injury have been missed. Again note that the alphabetical codes are used to highlight that multiple responses are acceptable.

Once you have a complete list of the forms of injury that the respondent has experienced, ask part b), concerning whether the injury occurred in the past 12 months for those injuries that were marked in the first column. Note that this question is only asked in relation to the injuries that the respondent reports.

Questions 805–807: NEED FOR AND USE OF HEALTH CARE

These questions ask about injuries that required health care – such as going to see a doctor, a dentist, a nurse or going to hospital.

Question 805a inquires solely about whether in her life the respondent was ever injured so badly by any of her partners that she needed health care — regardless of whether she actually sought or received care. If the respondent reports YES, probe to find out for how many incidents. Record the number given in the space provided [] []. If she has difficulty recalling how many times, encourage her to estimate the number. Probe if necessary to help her, such as by asking, “was it only a few times, or many times?”, “was it less or more than 10 times?”, “was it less or more than five times?” etc. It is preferable to record an estimated number than no number at all. Check “oo” if the woman has never been injured badly enough to need health care. In this case, go to section 9.

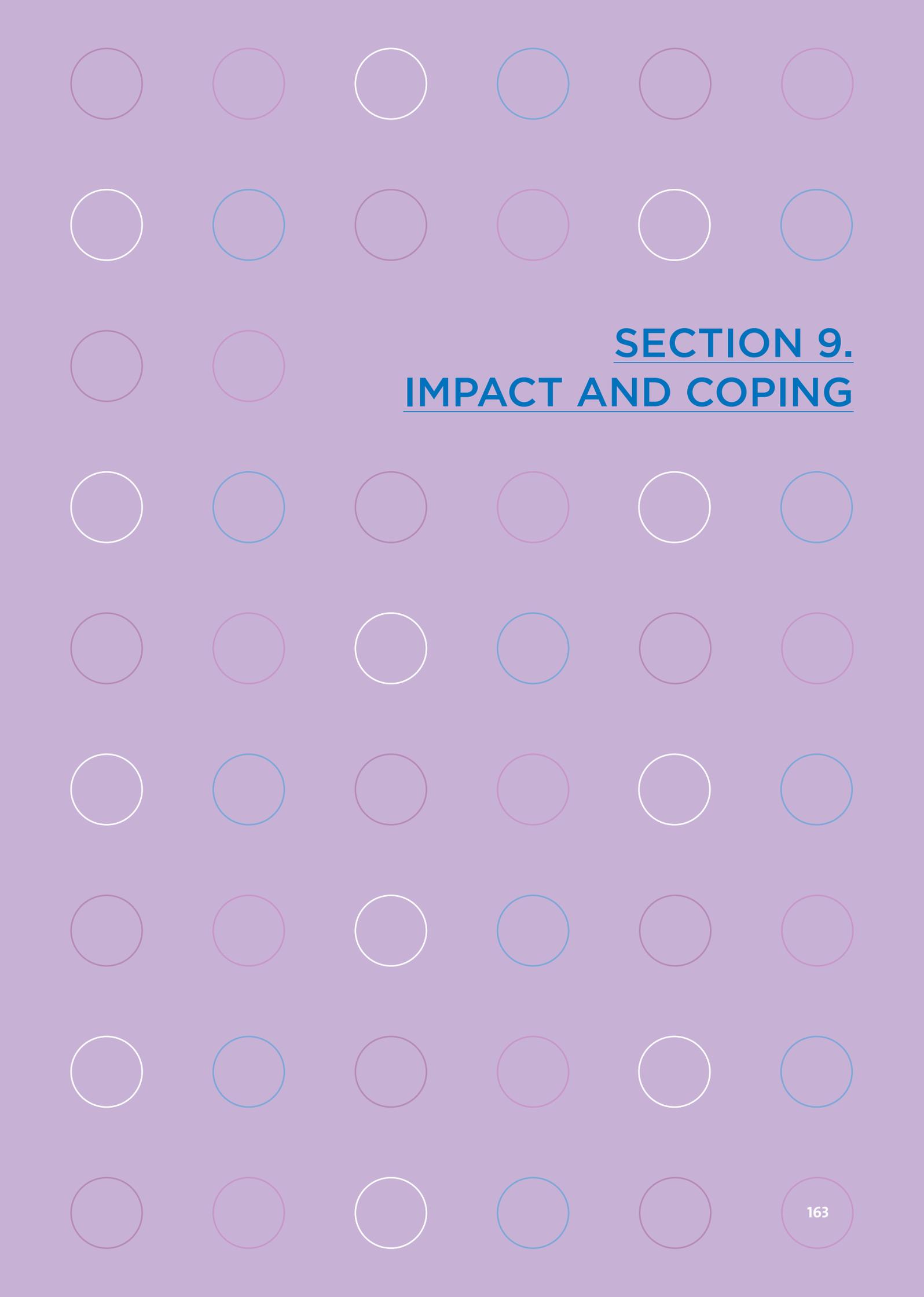
Question 805b enquires whether or not the respondent has needed health care in the past 12 months. Again, this is regardless of whether she actually sought or received care.

Question 806 then asks about whether in the woman’s life she ever did receive health care for her injury/injuries. If she responds NO (NEVER), circle 3 and go to section 9. If she responds YES, probe “was this all of the time, or sometimes?” We do not seek to find out exactly how many times. By “all of the time,” we mean that for all of the incidents mentioned in question 805, she received health care. By “sometimes” we mean she received health care for some (including only one), but not all, of these incidents.

Question 807 then asks whether in her life the respondent has had to spend any nights in hospital for her injury/injuries. If she responds YES, ask her how many nights, and record the number given. Here we are seeking to record the *total* number of nights that the woman has spent in hospital as a result of her injuries. Consequently, this number may be the total of several different episodes

after which she ended up in hospital (for example, if following the first injury episode she spent 4 nights in hospital and after the second, 2 nights, the total would be 6 nights). If she doesn’t know exactly, it is preferable to record an estimated number of nights instead of DON’T KNOW. If she responds NO, enter oo in the box.

Question 808 asks whether she told any of the health workers that she saw about the real cause of her injury — that is, that she was injured by her partner. If you have followed the skip patterns correctly, this question should only be asked of women who reported that they did receive health care for their injuries.



SECTION 9. IMPACT AND COPING

Section 9 collects information about how the respondent has coped with the violence that she is currently experiencing or that she has experienced in the past. If you have followed the skip patterns correctly, you should only be asking these questions of women who have reported experiencing physical or sexual violence perpetrated by a partner.

Before moving to the filter above question 901, make sure that you read out the introduction given. You are referring here to the husband/partner's "acts." Since you should not use the word "violence," you should go back to question 705 and 706 and remind her of the specific acts she herself has mentioned.

Note that if the respondent has reported that more than one partner has been violent towards her, you need to add that the questions in this section **ONLY** refer to the most recent partner who used physical and/or sexual violence.

FILTER BEFORE QUESTION 901

REVIEW BOX C OF THE REFERENCE SHEET AT THE BACK OF THE QUESTIONNAIRE

- Check whether the respondent has experienced physical or sexual violence.
- If she experienced physical violence (**yes** to option **U**) tick 2nd cell and continue to question 901.
- If she experienced sexual violence **only** (**no** to option **U** and **yes** to option **V**), tick 3rd cell and go directly to question 906.

Question 901: SITUATIONS WHEN PARTNER VIOLENT

This question will be asked of women whose husbands have been physically violent and

refers to physical violence only. In some violent relationships violence may occur at certain times (such as when the man is drunk or while a woman is pregnant). This question seeks to identify whether there are situations that tend to result in violence. Do not read out the list to her, but instead listen to what the respondent tells you and see if the answers given fit any of the options.

- A. NO REASON – there are no particular situations that seem to result in violence. Instead, violence occurs at various different times.
- B. WHEN THE MAN IS DRUNK – when her husband is drunk or has been using drugs.
- C. MONEY PROBLEMS – when they have money problems.
- D. DIFFICULTIES AT HIS WORK – when the husband/partner has some difficulty or problem at work.
- E. WHEN HE IS UNEMPLOYED – when he loses his job, or has no work.
- F. NO FOOD AT HOME – when there is not enough food for everyone.
- G. PROBLEMS WITH HIS OR HER FAMILY – when he or she has had a disagreement with their relatives or when they have had a problem with their children.
- H. SHE IS PREGNANT – while she is pregnant.
- I. HE IS JEALOUS OF HER – if he is jealous of her (for example, when he has seen her talking to a man, or seen a man looking at her) or suspects that she has been unfaithful.
- J. SHE REFUSES SEX – if she refuses to have sex with him.
- K. SHE IS DISOBEDIENT – if she has done something that he did not approve of, or if she did not do something that she was told to do.

L. HE WANTS TO TEACH HER A LESSON, EDUCATE OR DISCIPLINE HER

M. HE WANTS TO SHOW HE IS BOSS

X. OTHER – any other reason (write this down).

Note that alphabetical response codes are used to remind you to **record all situations** that she reports. If she gives a reason that is not listed, record what she says under OTHER. If you are unsure what code to use, write down what the respondent tells you.

FILTER BEFORE QUESTION 902

REVIEW BOX B OF THE REFERENCE SHEET AT THE BACK OF THE QUESTIONNAIRE

- Check box B option **R**.
- If respondent has children who are currently alive, tick second cell and continue to question 902.
- If respondent does not have any children who are currently alive, tick 3rd cell and go to question 906.

Question 902: CHILDREN SAW OR HEARD BEATINGS

Question 902 is only asked of women who have given birth to children that are currently alive. This question explores whether any of her children saw or heard what was happening, when the respondent's partner was beating her or being physically violent towards her in other ways. If the respondent says YES, ask "How often? Would you say once, several times, or most of the time?" and record the response given. If she replies "NO," check 1, for NEVER. If the violence occurred before the children were born, you should also check 1 for NEVER.

Questions 904 PHYSICAL VIOLENCE AGAINST A MALE PARTNER IN RETALIATION

Question 904 explores whether the respondent ever tried to fight back physically or to defend herself. If she responds YES, read the probe given: "How often? Would you say several times or most of the time?" and record the response. Continue to question 904b. If she responds NO (NEVER), record the response and go to question 905.

Question 904a explores the effect of her fighting back and focuses on the direct effect of her action, i.e. at the time that the violence took place. Read out the whole question plus the probe and record the response.

Question 905: PHYSICAL VIOLENCE AGAINST HER MALE PARTNER

This question (moved from section 9 to section 7) asks whether she has ever hit or beaten her partner when he was not hitting or beating her. This is asked to all women that have been ever partnered, whether she has disclosed violence or not. This question explores if she has initiated a fight rather than hit her partner in retaliation. If she responds YES, read the probe given "How often? Would you say once or twice, several times or many times?" and record the response.

Questions 906–907: IMPACT OF VIOLENCE ON WOMAN

From question 906 onwards, the question could be referring to physical and/or sexual violence. If necessary, refer to the acts that have been mentioned in section 7 (questions 705 and/or 706).

Questions 906 and 907 ask about the impact of the partner's violence on the woman's health and her ability to earn money.

Question 906 asks whether she feels that her husband/partner's behaviour (the physical and/or sexual violence) has had an impact on either her physical or mental/psychological health. Again, if necessary, refer to the specific acts that she had mentioned in section 7. Physical problems that she could experience include a range of injuries, general aches and pains, stomach problems, headaches and high blood pressure. Psychological problems that she may have experienced include a lack of confidence, difficulty concentrating, depression, difficulty sleeping and suicidal thoughts. We are seeking the woman's own assessment of whether the violence has been bad for her health, even if she has not sought any treatment or care for the symptoms. Read the probe: "Would you say that it has had no effect, a little effect or a large effect?" If she answers NO, circle 1 for NO EFFECT.

Question 907 asks about the ways in which her husband's/partner's (violent) behaviour has had an impact on her ability to work, or to earn money.

- A. N/A (NO WORK FOR MONEY) – the respondent does not work for money.
- B. NOT DISRUPTED – the physical violence did not have an effect on her job, or her ability to earn money in other ways.
- C. HUSBAND/PARTNER INTERRUPTED WORK – there were times when her partner interrupted or disrupted her work, for example, by coming to her workplace or by taking the things that she was trying to sell.
- D. UNABLE TO CONCENTRATE – there were times when she was not able to concentrate on earning money or on her job because of the problems that she had.
- E. UNABLE TO WORK/SICK LEAVE – there were times when she was not able to go to work or earn money because, for example, she was too

sick or because she did not want the people she worked with to see her injuries (such as a black eye).

- F. LOST CONFIDENCE IN OWN ABILITY – her work or ability to earn money suffered because she lost confidence in herself and her ability to work.
- X. OTHER – other reasons given by the respondent as to why the violence affected either her work or her ability to earn money. These should be recorded.

Do not read out the list to her, but instead see if the answers the respondent gives fit the different options. Alphabetical response codes are used to remind you to **record all issues that she discusses**. If she gives a reason that is not listed, or if you are unsure what to record, write down what she says under OTHER. If necessary, continue on the back of the questionnaire, making a note of the question number that you are referring to.

Question 908: WHO HAS SHE TOLD ABOUT VIOLENCE?

Asks the respondent whether she has told anyone about her husband/partner's behaviour. Again, we are referring to physical or sexual violence. Do not read out the list to her, but instead record all of the people that she mentions. The alphabetical codes are used to remind you to **record multiple entries**. After she has responded, probe to see if she has told anyone else, until you get a complete list. Most of the response categories are relatively self-explanatory. The ones that may be unclear are explained below:

- J. DOCTOR/HEALTH WORKER – includes any health care worker, including government, private and traditional health care providers.
- K. PASTOR/PRIEST/RELIGIOUS LEADER – means any religious leader, practising any religion.

L. COUNSELLOR – means anyone working in either a formal or informal capacity as a counsellor.

M. NGO/WOMAN’S ORGANIZATION – includes any organization that is primarily concerned with women’s issues. Many of these are non-governmental organizations, but the organization may also be a government or private sector body.

N. LOCAL LEADER – includes village leaders, elected leaders or representatives.

Circle the response code A for NO ONE if she has not discussed the violence with anyone.

If she mentions anyone who is not listed, record the person specified under OTHER. Do not record their names, but their relationship to her (for example, her teacher, her boss at work etc.).

Question 909: WHO TRIED TO HELP

The question is in two parts. The first part asks the respondent whether anyone ever tried to help her. If she replies NO, circle code A for NO ONE, and continue to question 910. If she replies YES, read “who helped you?” and record all of the people mentioned. Do not read out the list of possible responses to the woman, but instead record all of the people that she mentions. After she has responded, probe “anyone else?” until you get a complete list. The response codes are the same as in question 908.

Question 910a and b: ORGANIZATIONS THAT WOMAN WENT TO FOR HELP

This question is divided in two parts, a) and b).

Question 910a asks whether the respondent ever went to any organization for help. Read the initial question and then the organization given in a) (the police). Record whether she replies YES or

NO, and then continue with part b) and so on. [In part h), the question may be worded “women’s organization” or may use the name of specific organizations. Locally specific options may be also be added to this question.] Once you have completed the list given, read part x) “Anywhere else?” If she replies YES, ask her where. Record her response in the space provided. By the end of the question, each row of the response box should have either a YES or NO circled. Note that, if a respondent did not go to a particular organization because no such service exists, you should still record a NO response, rather than leaving the response to that part of the question blank.

Question 910b will only be asked only for the organizations that were marked with YES in question 910a. For each of the organizations mentioned, ask whether respondent was satisfied or not with the help given. Record whether she replies YES or NO.

FILTER BEFORE QUESTION 911

- Check responses to question 910a.
- If at least one “1” has been checked (at least one organization mentioned), tick 2nd cell and continue to question 911.
- If only “2”s have been checked (no organization mentioned), tick 3rd cell and go to question 912.

Question 911: REASONS FOR SEEKING HELP

This question is only asked of women who reported that they **did go** to an organization for help. Do not read the possible responses, but rather see if the reasons that the respondent gives matches with any of the possibilities listed. If she gives some other reason, or if you are unsure, circle X for “other,” and write down the reason

that she gives. The alphabetical codes are used to remind you to **record multiple entries**.

- A. ENCOURAGED BY FRIENDS/FAMILY – she was encouraged by her friends or family to go.
- B. COULD NOT ENDURE MORE – she felt that she had had enough, could not endure any more and decided to seek help.
- C. BADLY INJURED – he had badly injured her.
- D. HE THREATENED OR TRIED TO KILL HER – he had threatened or tried to kill her.
- E. HE THREATENED OR HIT CHILDREN – he had threatened, hit or hurt the children in some other way.
- F. SAW THAT CHILDREN SUFFERING – she saw that her children were very unhappy or that the violence was having a bad effect on her children.
- G. THROWN OUT OF THE HOME – he had thrown her out of the home.
- H. AFRAID THAT SHE WOULD KILL HIM – she was afraid that she may retaliate and end up killing him.
- I. AFRAID HE WOULD KILL HER – she was afraid that he would kill her.
- J. AFRAID HE WOULD HIT HER/MORE VIOLENCE
- X. OTHER – some other reason. Write down the reason given.

Once you have completed this question, go to question 913.

Question 912: WHY SHE DID NOT GO FOR HELP

This question is only asked of women who report that they **did not go** to any organization for help. Do not read the possible responses, but rather see if the reasons that the respondent gives match any of the reasons listed. If she gives some other

reason, or if you are unsure, circle X for “other” and write down the reason that she gives. The alphabetical codes are used to remind you to **record multiple responses**.

- A. DON'T KNOW – only record this answer if the woman cannot explain why she did not go to any of these organizations.
- B. FEAR OF THREATS/CONSEQUENCES/MORE VIOLENCE – she was afraid that if she did seek help it would make her problems worse, that it would have bad consequences or that it would make her partner even more violent towards her.
- C. VIOLENCE NORMAL/NOT SERIOUS – she feels or felt that the violence that she was experiencing was normal and/or that it was not serious.
- D. EMBARRASSED/ASHAMED/AFRAID WOULD NOT BE BELIEVED OR WOULD BE BLAMED – she was embarrassed to tell others about her problems or her private life; she was ashamed to tell others; she thought that people would not believe her story; or she thought that she would be blamed for the violence she was experiencing.
- E. BELIEVED WOULD NOT BE HELPED/KNOWS OF OTHER WOMEN NOT HELPED – she did not believe that it would do any good and/or she knows of other women who had not been helped when they sought help.
- F. AFRAID WOULD END RELATIONSHIP – she was afraid that this would end the relationship (for example, her partner would leave her or throw her out).
- G. AFRAID WOULD LOSE CHILDREN – she was afraid that she would have her children taken away from her (either by the organization, by her partner or his family).

- H. BRING BAD NAME TO FAMILY – she thought that it would bring a bad name to her, her family, her partner’s family and/or her children.
- I. DID NOT KNOW HER OPTIONS – she did not know where she could get help.
- X. OTHER – record any other reasons given (specify on the line provided).

Question 913: WHO DOES SHE WANT HELP FROM?

This question is asked of all women who have experienced violence perpetrated by their partner, irrespective of whether or not they turned to any organization for help. Mark all of the responses given.

[NOTE THAT COUNTRY-SPECIFIC OPTIONS NEED TO BE DEVELOPED AND EXPLAINED.]

- A. NO ONE MENTIONED
- B. HIS RELATIVES
- C. HER RELATIVES
- D. FRIENDS/NEIGHBOURS
- E. HEALTH CENTRE – a health worker from her local health centre
- F. POLICE
- G. PASTOR/PRIEST/RELIGIOUS LEADER
- I. SOCIAL WORKER
- X. OTHER – record any other reasons given.

Questions 914–919: LEAVING

The final set of questions in this section explores whether or not the respondent ever left the violent partner and the reasons for this.

Question 914 explores whether she left (including if she was thrown out), even if only for one night (overnight) because of the violence. The question is in two parts. If she replies YES, ask “how many

times?” Record the number given. Note that we want to find out how many times the respondent left her partner, rather than the number of nights that she has spent away. If she never left, circle 00 and go to question 919. If she did not live with the violent partner, or was not living with him at the time of the violence, circle “97” (NOT APPLICABLE). In this case only, the following questions do not apply; and you should skip the rest of this section and go to section 10.

Question 915 documents the reasons why she decided to leave. If she has left more than once, the codes refer to the last time that she left.

- A. NO PARTICULAR INCIDENT – there was not one particular incident that made her decide to leave.
- B. ENCOURAGED BY FRIENDS/FAMILY – she was encouraged by her friends or family to go.
- C. COULD NOT ENDURE MORE – she felt that she had had enough, could not endure any more and decided to seek help.
- D. BADLY INJURED – he had badly injured her.
- E. HE THREATENED OR TRIED TO KILL HER – he had threatened or tried to kill her.
- F. HE THREATENED OR HIT CHILDREN – he had threatened, hit or hurt the children in some other way.
- G. SAW THAT CHILDREN SUFFERING – she saw that her children were very unhappy or that the violence was having a bad effect on them.
- H. THROWN OUT OF THE HOME – he had thrown her out of the home.
- I. AFRAID THAT SHE WOULD KILL HIM – she was afraid that she may retaliate and end up killing him.
- J. ENCOURAGED BY ORGANIZATION – members of an organization that she turned to (such as a

woman's organization, counselling body or the police) encouraged her to leave her partner.

- K. AFRAID HE WOULD KILL HER – she was afraid that he would kill her.
- X. OTHER – record any other reasons given.

Question 916 enquires about where the respondent went to stay the last time she left her partner. The responses are relatively self-explanatory, but are nonetheless explained below. Only mark one response that indicates the main place that she went to last time.

1. HER RELATIVES – a relative from her family.
2. HIS RELATIVES – a relative of her partner.
3. HER FRIENDS/NEIGHBOURS – a friend's house, or a neighbour's house.
4. HOTEL/LODGINGS – a hotel, guest house or some other form of lodging for which she had to pay.
5. STREET – she did not have anywhere to go; she was homeless; she slept outside; or she slept on the street.
6. CHURCH/TEMPLE – she was housed by a temple/church/or some other religious organization.
7. SHELTER – she stayed at a shelter, either for women experiencing violence, for people who are homeless, or for people who have problems.
8. OTHER – record any other location specified.

Question 917 enquires about how long she stayed away, the last time she left.

The answer options are the following:

- [][] number of days (if less than one month 1
- [][] number of months (if one month or more) .. 2

left husband or partner/did not return/not with partner 3

Record the length of time spent away in the space provided. If this was less than a month, record the number of days (in 1, on the first line). If she left for less than 1 day, record 00 on the same line. If she left for 1 month or more, record the number of months (in 2, on the second line). Mark 3 if she left that partner or no longer lives with the partner and go to **section 10**.

Question 918 enquires about why the respondent returned. Do not read the possible responses, but rather see if the reasons that she gives match with any of the responses listed. If she gives some other reason or if you are unsure of the appropriate code, circle X for "other," and write down the reason that she gives. The alphabetical codes are used to remind you to **record multiple responses**.

- A. DIDN'T WANT TO LEAVE CHILDREN – she did not want to leave the children with him or his family.
- B. SANCTITY OF MARRIAGE – she believed in the importance of preserving relationships and the husband and wife relationship.
- C. FOR THE SAKE OF THE FAMILY/CHILDREN – because of the family and/or children.
- D. COULDN'T SUPPORT CHILDREN – she couldn't support her children if she left.
- E. LOVED HIM – she still loved him.
- F. HE ASKED HER TO GO BACK – her partner asked her to return.
- G. FAMILY SAID TO RETURN – his or her family asked her to return.
- H. FORGAVE HIM – she forgave him for being violent towards her.

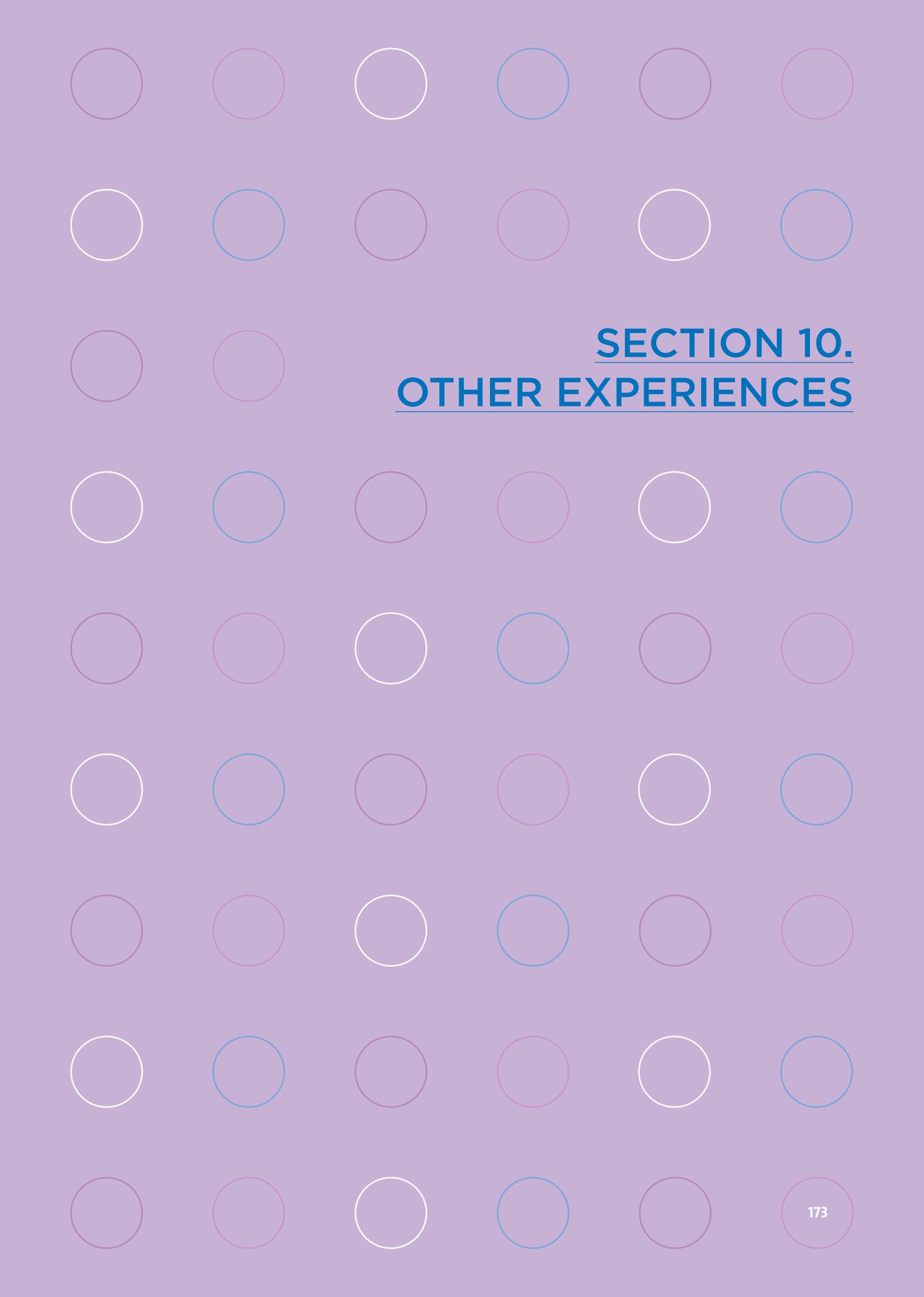
- I. THOUGHT HE WOULD CHANGE – she thought that her partner would change and cease being violent towards her.
- J. THREATENED HER/CHILDREN – he threatened to harm either her or her children.
- K. COULD NOT STAY THERE – she was told that she could no longer remain at the place where she had been staying (e.g. the shelter, with her family, with friends).
- L. VIOLENCE NORMAL/NOT SERIOUS – she did not consider the violence serious enough for her to need to stay away.
- M. THE CHILDREN NEED A FATHER/BOTH PARENTS
- X. OTHER

After finishing this question go to section 10

Question 919 should only be asked of women who *did not try to leave*. Read the question, and mark all of the reasons given. Do not read the possible responses, but rather see if the reasons that she gives match with any of those listed. If she gives some other reason or if you are unsure, circle X for OTHER, and write down the reason that she gives. The alphabetical codes are used to remind you to **record multiple responses**.

- A. DIDN'T WANT TO LEAVE CHILDREN – she did not want to leave the children with him or his family.
- B. SANCTITY OF MARRIAGE – she believed in the importance of preserving relationships and the husband and wife relationship.
- C. DIDN'T WANT TO BRING SHAME ON FAMILY – she did not want to shame the family by leaving her partner/husband.
- D. COULDN'T SUPPORT CHILDREN – she couldn't support her children if she left.
- E. LOVED HIM – she still loved him.

- F. DIDN'T WANT TO BE SINGLE – she didn't want to be single.
- G. FAMILY SAID TO STAY – his or her family encouraged or told her to stay.
- H. FORGAVE HIM – she forgave him for being violent towards her.
- I. THOUGHT HE WOULD CHANGE – she thought that her partner would change and stop being violent towards her.
- J. THREATENED HER/CHILDREN – he threatened to harm either her or her children if she left.
- K. NOWHERE TO GO – there was nowhere for her to go.
- L. VIOLENCE NORMAL/NOT SERIOUS – she did not consider the violence serious enough to make her leave.
- M. THE CHILDREN NEED A FATHER/BOTH PARENTS
- X. OTHER



SECTION 10. OTHER EXPERIENCES

Section 10 enquires about the respondent's experiences of violence from people other than their partners. The questions in this section are asked of every respondent, whether she had a partner or not.

No1: SETTING THE CONTEXT

[No1 is not a question that should be marked]. Before moving onto questions, read the scripted text at the beginning of this section to cue the woman that we are no longer talking about her partner(s), but that we are now focusing on all kind of other people, male and female, either known to the respondent or strangers. The script also reinforces that the information will be kept private. Further, the respondent will be pre-warned that the questions will be about experiences in her whole life and in the past 12 months before the interview. For women who have not been partnered, these will be the only questions on violence that they will be administered. For women who have been partnered and who already got questions, it will help to add that the questions are about people other than her husband/partner(s).

Questions No6 – Nog: SEXUAL VIOLENCE BY OTHERS THAN PARTNERS

Women are vulnerable to different forms of abuse from a range of different people. Questions No6-Nog aim to identify whether the respondent has ever experienced sexual violence from someone other than her current or former male partner. These are very important questions; it is important that you take time to ensure that you have asked and recorded them adequately.

The questions in this section are first on rape and then on other types of sexual violence. The approach in this module has the main focus on perpetrators. For the different types of violence

that happened over the course of her lifetime and any perpetrator mentioned, follow up questions ask about sex of perpetrator, followed by frequency of the behaviour in her lifetime and in the past 12 months. This is to be able to properly compute the VAW (Violence against Women) indicators.

Questions No6 – Nog: SEXUAL VIOLENCE IN LIFETIME

There are two sets of questions for sexual violence: one for rape (unwanted and forced sexual intercourse) and another for all other unwanted sexual acts.

NOTE: the module is not designed to measure childhood sexual abuse because this is not part of the indicators. If the country has special interest in this topic it might want to explore using the techniques as developed for the WHO study to ask about childhood experiences retrospectively from adult women.

No6: LIFETIME RAPE

This question is meant to enable the identification of rape (unwanted sexual intercourse out of force or fear). Note that the word "rape" is not mentioned anywhere in the question. This is because it is a loaded term and a woman may not identify what has happened to her when this term is used.

When reading the question, first read the introduction to remind the respondent this is about any person, man or woman (inserting the text "other than your partner/husband or boyfriend" if the respondent has a current or former partner), then read the rest of the question. The question specifies that this is about sexual intercourse when she did not want to, and describes several situations such as by threatening

her, holding her down or putting her in a situation that she could not say no. Remind her that at this point she should exclude attempts to force her (there is another question on attempts later). If necessary, you can add that sexual intercourse is defined as vaginal, oral or anal penetration. If the respondent says yes that she has ever experienced a type of violence in the list, continue on to ask if it has happened in the last 12 months. If it has, you will establish the frequency of this occurrence (How many times did this happen?, Once, a few times, or many times?). If it occurred before the previous 12 months, also record the frequency of the occurrence.

If YES with any in the a-c series, continue with No7.

If NO, skip to No8.

No7: PERPETRATOR OF RAPE

If YES to No6, read No7a) “Who did this to you?” Record the person/s who did the act/s to her, and then move on to part b): to indicate sex and c) Ask whether there was anyone else, using the probes given in the question (such as, “how about someone at school or work?”) to ensure that you have a complete list of perpetrators.

No7e-n: FORCED SEX – LAST INCIDENT

The set of questions explores when the last incident took place, whether it was reported (police or health sector), what happened next and how the response was.

No8: ANY OTHER SEXUAL ABUSE IN LIFETIME

No8 is asking about other unwanted sexual acts in their lifetime. Note that the three questions carefully describe what forms of sexual abuse we are considering here. The first question includes

“attempted but not succeeded to force you into engage in sexual intercourse” to capture incidents of attempted rape. The second question asks about “touched you sexually when you did not want to” and the third questions ask about “making you touch their private parts against your will.”

No9a-d & N10: OTHER SEXUAL ABUSE – SPECIFIC CIRCUMSTANCES

The first two questions explore other sexual abuse, such as sexual acts in return for a job or to pass an exam. The third question explores sexual harassment in public spaces and the last question asks about sexual harassment using modern media (Facebook, Instagram, cell phone, e-mail, etc.). Question N10 asks about experiences where the respondent engages in sex in order to receive support or gifts (or because she expects to receive a gift/support) in the past 12 months.

Question 1003, and 1003a-d: CHILDHOOD SEXUAL ABUSE

The questions explore any form of sexual contact or coercion before the age of 18 years. We do not go into further details about specific acts, as any form of sexual contact with girls aged under 16 years is often considered to be statutory rape, and any unauthorized sexual contact with girls over 16 years is considered an assault or rape (there is some variation between countries as to the age).

Question 1003 asks about who perpetrated these acts. It is important that you follow up with the probing questions enquiring about someone at school, a friend or neighbour or anyone else. This will help cue the memory of the respondent so that we do not miss any of the perpetrators. If the answer to all these probing questions is NO, then skip to Q 1004.

If the respondent answers YES to any of the probing questions in 1003, move to question 1003a, check the letter of the perpetrator mentioned and move to cell 3 to mark sex of perpetrator. Then part b) “how old were you when this happened with this person for the first time?” Then continue to part c), ask “how old was this person?” A rough estimate of the age is all that is needed. Finally, continue to part d) in order to enquire about how many times, overall this person did these things to her. It is important that you continue to use the probes in 1003a to enquire whether there was anyone else who did this to her, even when she has replied NO when the question was asked about a family member, and then ask parts b) to d) for each person reported. Code x) and give details of anyone else reported or if you are unsure how to code a response.

Question 1003e tries to identify whether any of the sexual abuse that happened before age 18 could be considered a rape by asking whether anybody had penetrated her vagina, anus or mouth.

Questions 1004 and 1005: FIRST SEXUAL EXPERIENCE

Questions 1004–1005 ask about the first time that the respondent had sex (these questions were originally in Section 10 and have been moved here).

Question 1004 seeks to identify how old she was when this happened. Circle code 95 if she reports that she has not had sex yet. In this case, go to question 1006. Note that for this question there is no DON'T KNOW response. Instead, you need to probe to estimate the age at which the respondent first had sex. In this question we do not give a specific definition of sex as we are seeking to record the event that the respondent perceives as her first sexual experience. However,

if she asks, you could say this is generally thought of as intercourse.

Question 1005 asks whether she wanted to have sex, she did not want to have sex but it happened anyway or she was forced to have sex. By forced, we include both the use of physical force and other possible means of coercion, such as threats of violence. Note that in this question we are seeking to record the respondent's perception about what happened. Read the full question before recording the respondent's reply.

Question 1005c asks whether this first experience was by her (current or past) husband or cohabiting partner (a male partner with whom she lived) or by another person. Mark husband/partner if she was married to this person or if she subsequently married or co-habitated with this man. It is not the purpose of this question to find out if she was married or living with this person when it happened but to find out if this person was then or subsequently became her regular partner rather than another person with whom she had a relationship. Depending on whether her first sexual experience was with a partner or not, this information will help us to understand the relationship between first sexual experience and partner violence. It can also be used in combination with results on non-partner sexual violence to corroborate the findings. When it was not the (future) husband/partner other answer options include “Someone else, more or less the same age” and “someone else who was older.”

Questions 1005a and 1005b: NUMBER OF SEXUAL PARTNERS

Questions 1005a and 1005b are optional. Countries that have a high HIV/AIDS risk may want to include these questions that explore high-risk sexual behaviour by asking about the number of sexual partners the respondent has had in her life and in

the past 12 months. If she does not remember the exact number, probe “more or less.” It is better that you enter an estimated number than “don’t know.”

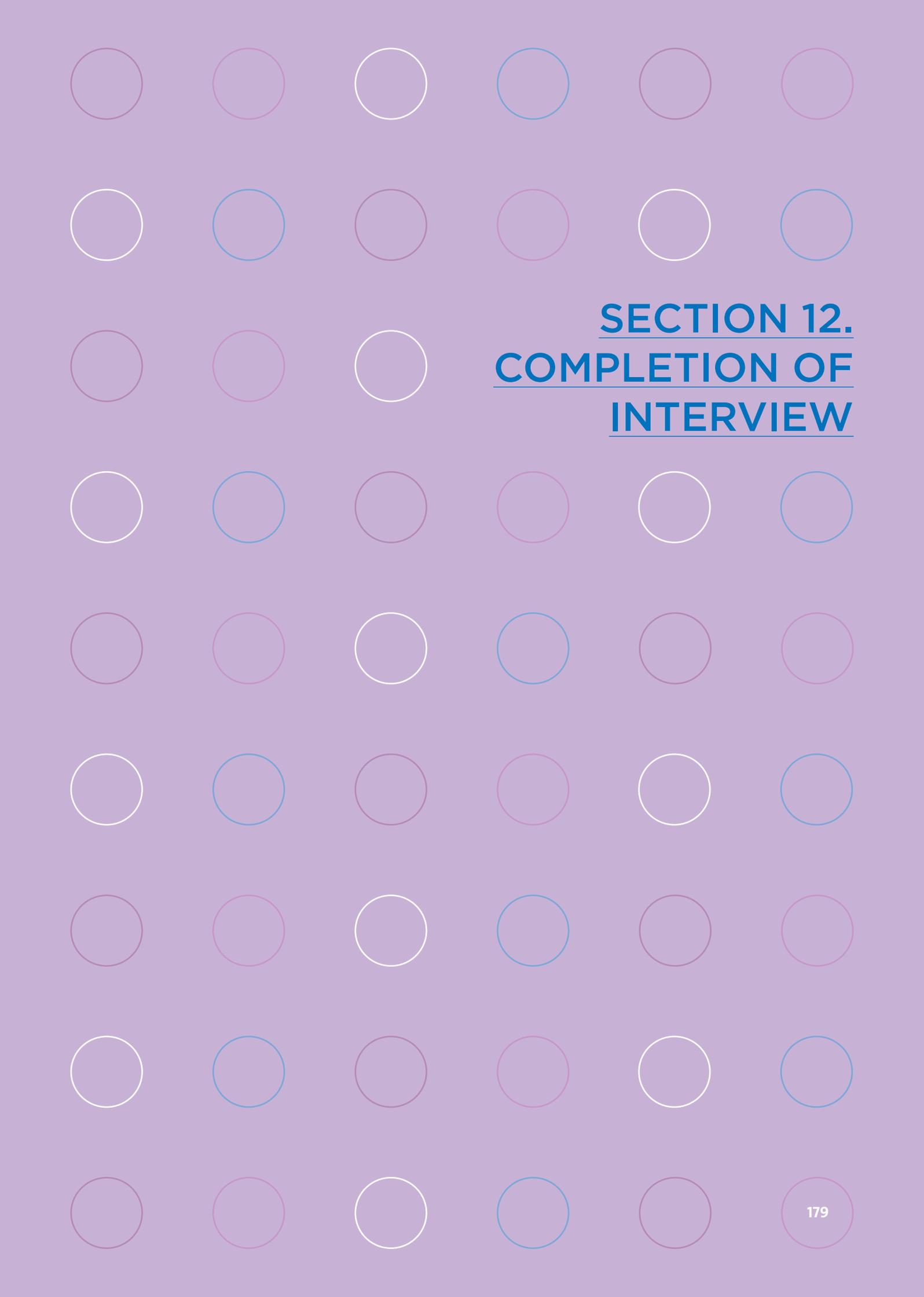
Questions 1006, 1006a and 1006b: THE CYCLE OF VIOLENCE

Questions 1006, 1006a and 1006b are being used to explore theories about the cycle of violence. This theory suggests that men who are violent are likely to come from families where their father was violent towards their mother. Likewise, the theory suggests that women who are in violent relationships come from families where their mother was abused by her partner.

Question 1006 asks about whether, when the respondent was a child, her mother was hit by her father (or husband or boyfriend). For women who have left the parental home this would refer to the time she was still living there. The focus of the question is whether the mother of the respondent experienced physical violence and not so much the age of the respondent when this occurred.

Question 1006a asks about whether, when the respondent was a child, she was beaten so hard that it left a mark.

Question 1006b asks about whether, when the respondent was a child, she was insulted or humiliated by someone in her family in front of other people.



SECTION 12.
COMPLETION OF
INTERVIEW

Question 1201: COMPLETION OF CARD

Much of what we ask about as part of this study is very sensitive. In some cases, the respondent may not have disclosed experiences that she has had in her life during the interview itself. If she is given another opportunity to disclose her experience without having to say it face-to-face to the interviewer, she may still do this. It has also been shown that if a question is asked a second time, a respondent may disclose an experience that she did not mention when the question was asked the first time.

Therefore, as a final exercise in the interview, we want to give the respondent the opportunity to disclose whether she was ever sexually abused as a child (before the age of 18 years), without even the interviewer knowing her response. To do this, you will need to give the respondent a card with a sad and a happy face on it.¹ You should then read the introduction to question 1201 and the question, which has the same wording as 1003. The respondent will then record her response on the card. You should then ask the respondent to fold up the card, and put it in an envelope and seal it before giving it back to you. In this way, it will be clear to the respondent that you will not be able to find out what her response was. Record “card given for completion” when respondent has been given the card for completion, even if you do not know whether or not she has marked anything on the card. [On leaving the interview securely attach the envelope to the questionnaire (or write the questionnaire code on the envelope).]

If, at this point, the respondent volunteers information on sexual abuse that she has not given before, you should go back to section 10 to correct

the information. Do this very carefully and in a delicate way, as this may be a very sensitive subject and she may never have talked about it before.

Question 1202: RESPONDENT'S COMMENTS

The respondent can make any comments about the interview, or discuss any topics that she thinks have been missed. You should take care to try to write down as much as possible of what she tells you. If possible, try to exactly record the main points that she is making, using the words that she uses.

Question 1202a: The respondent is asked to give any recommendations or suggestions that could help to stop domestic violence against women in this country. If possible, try to exactly record the main points that she is making, using the words that she uses.

Question 1203: HOW WOMAN FEELS AFTER INTERVIEW

This question asks about how the respondent feels after having had the opportunity to talk about these things. If she does not understand the question, you could prompt with the pre-coded answers given. Use the space provided here to record any specific response the respondent gives. If there is not enough space, you could use the remaining space at the end of the questionnaire.

GOOD/BETTER – she feels either good or better than before the interview.

BAD/WORSE – she feels bad or worse than before the interview.

SAME/NO DIFFERENCE – she does not feel any different from before the interview.

Question 1204: PERMISSION TO RETURN

This question is asked to obtain permission to conduct quality control checks and to ensure

¹ The card with the pictures should be locally and culturally appropriate and should be tested among the different population groups in the study area before its final use. The faces should have checkboxes under them, as for a voting ballot. An example of a picture card is attached as Annex I.

that, if a substantial problem is found, the interview team would be able to return and ask a few more questions for clarification. [You could specify here the time period within which your team plans to conduct quality control visits.] For the quality control checks, the supervisor will need to revisit randomly some household. Since the original agreement of confidentiality and anonymity cannot be compromised, during the quality control visit the supervisor will not verify or repeat questions from the original interview but will verify how well you did as an interviewer.

COMPLETION OF INTERVIEW

It is important that you end the interview appropriately. It may be that during the interview the respondent has talked about a number of difficult and distressing issues; it is important that you recognize this when you complete the interview. For this reason, we have scripted two finishes. Finish one is for a respondent who has reported experiencing any form of abuse. For such women it is important that you:

- Thank her for the time that she has spent with you.
- Stress that the information that she has provided is very important.
- Show that you recognize that she has had a number of difficulties.
- State that no one deserves to be treated in that way.
- Emphasize that you think that she is strong to have survived/been living through difficult times.
- Ask her whether she would like a list of organizations and services that may be of use to her.

Finish two is for a respondent who has not reported experiencing violence. In this case it is important that you:

- Thank her for the time that she has spent with you.
- Stress that the information that she has provided is very important.
- Ask her whether she would like a list of organizations and services that may be of use to either her, or her friends or relatives.

Both endings have been scripted. In your training and practice, try to learn these endings so that you can say them without having to refer closely to your questionnaire. This will help ensure that the respondent feels that what you say is genuine and is a response to her situation rather than a standard text that you repeat to everyone.

Question 1205: TIME INTERVIEW COMPLETED

Don't forget to write the time when you finished the interview, using the 24-hour system. If there was an extended break during the interview time, for example the respondent excused herself to care for a sick child and returned to complete the interview 45 minutes later, make a note to report how long of a break was taken.

Question 1206: ESTIMATED TIME OF DURATION OF INTERVIEW.

As a last question, ask the respondent how long she thinks the total interview lasted. This should be her subjective experience of the duration of the interview.

INTERVIEWER'S OBSERVATIONS

Once you have left the interview, check your questionnaire carefully. Make sure you have followed the skip patterns correctly and that

your marks are legible. If necessary, return to the household, e.g. if you find that you have missed a section, or if you are unclear about some of the responses.

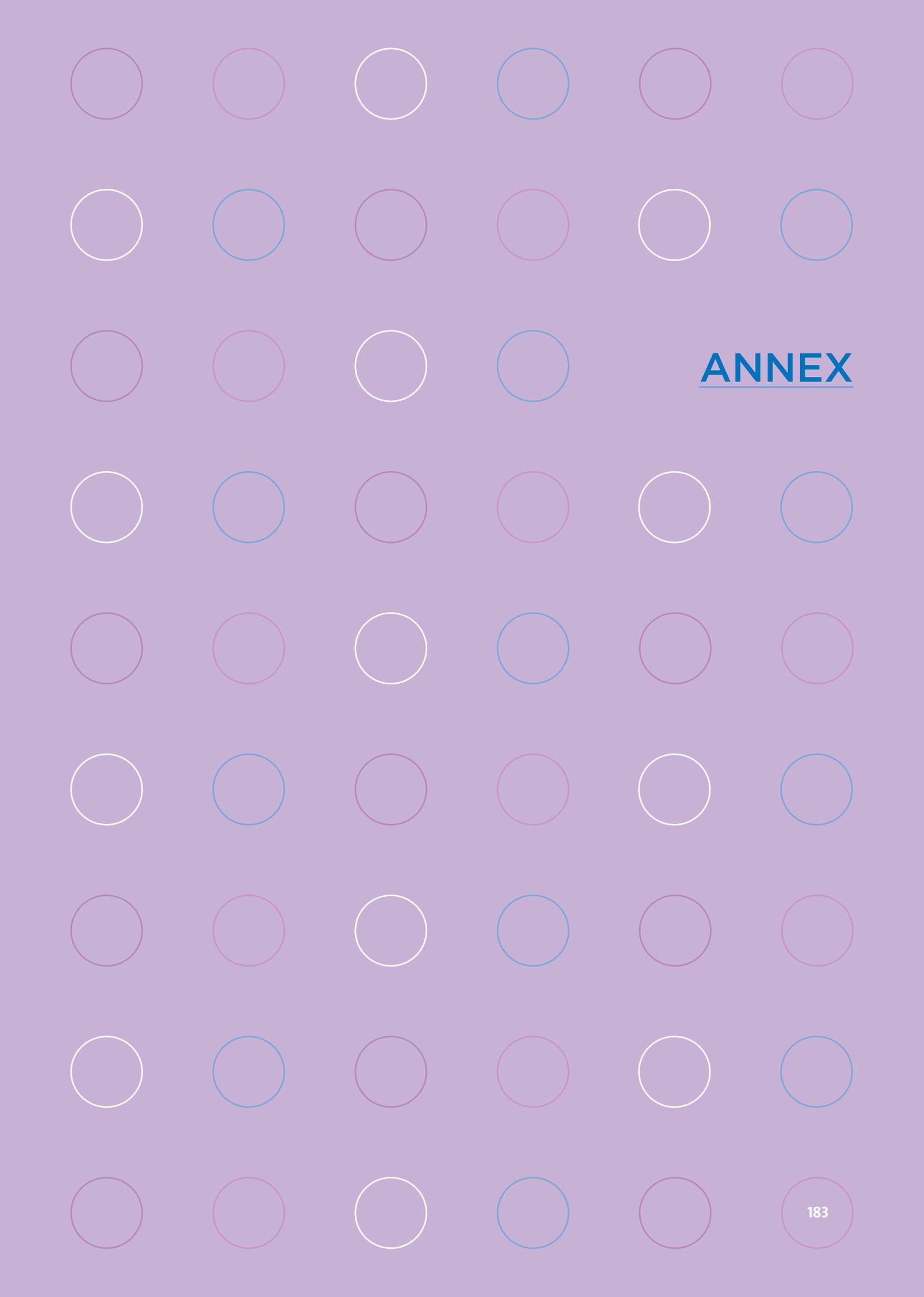
Then record any comments on the last page. You may make comments about the woman you interviewed, about specific questions on the questionnaire or about any other aspects of the interview. If anything about the interview was unusual or should be brought to the attention of the editor or supervisor, note it here. For example, if a respondent attended school in a different

country where there was a different system for dividing grades into primary and secondary, note that here. You may wish to explain why a result code (on the administration sheet) was other than a “41.” If any questions required further explanation, or modification use this space. These comments are extremely helpful to the editor, supervisor and data processing staff in interpreting the information in the questionnaire.

COMPLETE ANY REMAINING SECTIONS ON THE ADMINISTRATION SHEET.

DUMMY QUESTIONS

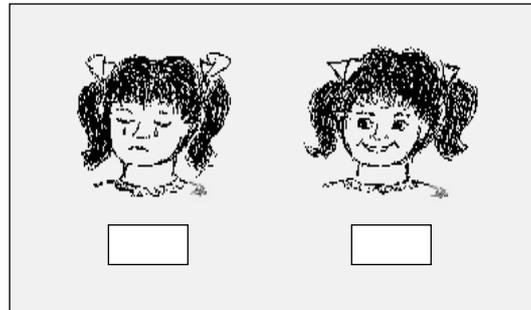
A set of dummy questions can be included at the back of the questionnaire (as a loose set). These questions can be drawn from the questionnaire and can be used if the interview is interrupted. If an interview is interrupted while sensitive issues are being discussed, the interviewer can either stop the interview or turn to these “dummy questions,” continuing with them until the person who has interrupted leaves.



ANNEX

ANNEX I. Example of Card With Faces for Measuring Childhood Sexual Abuse

FACE CARD



ANNEX II. The UN Indicators on Violence Against Women and the UNECE Survey Module

The United Nations Secretary-General has called for all countries to collect data on the prevalence of violence against women by 2015.

An initial set of statistical indicators for measuring violence against women, consisting of six interim indicators, was adopted by the United Nations Statistical Commission at its 40th session (24-27 February 2009). The Friends of the Chair (FoC) of the United Nations Statistical Commission on Statistical Indicators on Violence against Women have subsequently expanded the set to nine core indicators that should be collected through (preferably dedicated) population based surveys.

The core set of statistical indicators on VAW presented in 2011 to the UN Statistical Commission is as follows:

1. Total and age specific rate of women subjected to physical violence in the last 12 months by severity of violence, relationship to the perpetrator and frequency;
2. Total and age specific rate of women subjected to physical violence during lifetime by severity of violence, relationship to the perpetrator and frequency;
3. Total and age specific rate of women subjected to sexual violence in the last 12 months by severity of violence, relationship to the perpetrator and frequency;
4. Total and age specific rate of women subjected to sexual violence during lifetime by severity of violence, relationship to the perpetrator and frequency;
5. Total and age specific rate of ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner in the last 12 months by frequency;
6. Total and age specific rate of ever-partnered women subjected to sexual and/or physical violence by current or former intimate partner during lifetime by frequency ;
7. Total and age specific rate of ever-partnered women subjected to psychological violence in the past 12 months by the intimate partner;

8. Total and age specific rate of ever-partnered women subjected to economic violence in the past 12 months by the intimate partner; and
9. Total and age specific rate of women subjected to female genital mutilation.

When referring to physical and sexual violence by others than partners, these indicators will need to be estimated for events after the age of 15.¹

A review done in 2009 showed that the majority of surveys on violence against women conducted around the world so far did not estimate exactly above “new” indicators. Therefore, work was called for to develop a recommended set of questions that could be used to collect data on these core indicators. Having a recommended set of questions can prevent countries from diverging in their application of surveys on violence against women and facilitate international comparability of results.

Under the United Nations Development Account Project “*Enhancing capacities to eradicate violence against women through networking of local knowledge communities,*” the United Nations Economic Commission for Europe (UNECE) was assigned the development of a survey module to collect data to estimate the interim set of indicators on violence against women developed by the FoC. The UNECE VAW survey module and accompanying manuals can be found at <http://www1.unece.org/stat/platform/display/VAW/Survey+module+for+measuring+violence+against+women>

¹ Note that childhood physical and sexual abuse is not included in these indicators. It is strongly discouraged to collect data from children using the same survey methodology as for adults for methodological, ethical and safety reasons.



SURVEY
QUESTIONNAIRE

DATE OF INTERVIEW: day [][] month [][] year [][][][]		
100. RECORD THE START TIME OF THE WOMAN'S INTERVIEW (24H SYSTEM)	HH:MM [][]:[][] (00-24 h)	
SECTION 1 RESPONDENT AND HER COMMUNITY		
QUESTIONS & FILTERS	CODING CATEGORIES	SKIP TO
If you don't mind, I would like to start by asking you a little about this community.		
101	Do neighbours in this community generally tend to know each other well?	Yes.....1 No.....2 Don't Know.....8 Refused/No Answer.....9
102	If there were a street fight in this community would people generally do something to stop it?	Yes.....1 No.....2 Don't Know.....8 Refused/No Answer.....9
103	REMOVED	
104	REMOVED	
105	If someone in your family suddenly fell ill or had an accident, would your neighbours offer to help?	Yes.....1 No.....2 Don't Know.....8 Refused/No Answer.....9
106	I would now like to ask you some questions about yourself. What is your date of birth (day, month and year that you were born)?	Day[][] Month[][] Year [][][][] Don't Know Year9998 Refused/No Answer9999
107	How old are you (completed years)? (MORE OR LESS)	Age (Years)[][]
108	How long have you been living continuously in this community?	Number of Years [][] Less Than 1 Year 00 Lived All Her Life95 Visitor (At Least 4 Weeks In Household)96 Don't Know/Don't Remember98 Refused/No Answer99
108a	What is your religious affiliation or denomination? <i>USE COUNTRY-SPECIFIC RESPONSE CATEGORIES</i>	None.....01 Seventh Day Adventist.....02 Roman Catholic.....03 Anglican.....04 Baptist.....05 Church Of God.....06 Methodist.....07 Pentecostal.....08 Rastafarian.....09 Non-Christian.....10 Other :96 Don't Know/Don't Remember98 Refused/No Answer99

