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Measuring unmet need for family planning among wives husbands & couples

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Acronyms

MOH	-----	Ministry of health
C.P	-----	Contraceptives
F.P	-----	Family planning
FGAE	-----	Family guidance association of Ethiopia
MCH	-----	Mother and child health
DHS	-----	Demographic and health survey
KAP	-----	Knowledge, attitude and practice
MPH	-----	Master of public health
DCH	-----	Department of community health
DHS	-----	Demographic and health survey
AAU	-----	Addis Ababa university
MF	-----	Medical faculty
NGO	-----	Non governmental organization

Abstract

Since husbands & wives differ in fertility desire and intention to use contraception which implies spouses individually & as couple have different level of need regarding contraception. To estimate unmet need level for contraception of couples data from both spouses are required; so community based cross sectional study was conducted between Jan 3-Jan 17, 2005 in six kebeles of Harar city, eastern Ethiopia. After 19 Kebeles of the city was stratified into three strata based on socio-economic factors, two Kebeles from each of the three strata was selected by simple random sampling. 1/6th of sample size was selected from each of the 6 kebeles by systematic sampling. The study units were married couples with wives age ranges 15-49 year. Four hundred sixty couples were interviewed using pre tested questionnaires. Data were collected from both spouses regarding fertility desire & its timing; wanted-ness and timing of pregnant/lactating women at the time were used to determine level of un-met need among husbands, wives & couples and also to assess factors associated with un-met need. A minimum estimate of unmet need for contraception of couples not practicing contraceptives is produced when both partners have unmet need & a maximum estimate of unmet need for contraception of couples not practicing contraceptives occurs if either spouse having unmet need defines unmet need. Husbands are found to have more children and sooner than wives and wives have more desire to limit and intend to use contraceptives than husbands. Unmet need estimate level for wives', husbands' and couples' (minimum) were found to be 15.3%, 16.5% and 4.7% respectively. All figures are (below expectation) very low in comparison to other study results. For example when compared with 36% unmet level for married women by the DHS Ethiopia survey with the one obtained from this study it is very low (15.3%). This is probably due to the constellation of the following factors. The presence of two hospitals, FGAE clinic & other facility in the city of harar, 86% of all couples in the study have alive

children & out of them 58% have at least two children; more than 78% of couples reported usage of a method in the past, only 19% of wives and 10% of husbands are illiterates, mean time to reach the service point was is only 30 minutes, more than 82% of couples approve contraceptive use, 60% of couples have discussed contraceptive issue in the last six months, more than 90% of couples heard and knew about contraceptives, 67% of couples have both T.V and radio; resulting in higher contraceptive prevalence which is 69% for wives and 66% for husbands. Amongst the factors considered to be associated with unmet need like age, education, number of alive children, knowledge & attitude towards contraceptives and so on; only perceived approval of contraceptives use by spouses and discussion about contraceptives between spouses are found to be associated significantly ($p=.00$) (table8 ,9). This warrants promotion and promotion activity to enhance communication between spouses. Incorporating reproductive health need of male in the over all reproductive health planning and service delivery and to make them male friendly is very important.(3) Endeavour to enhance prevalence of permanent contraceptive methods including vasectomy, which is very low at the moment, for limiters. Studies on family planning should include both women and men to enhance successful family planning service delivery that targets couples.

INTRODUCTION

Family planning was adopted in Ethiopia since 1966 by concerned volunteers who established family guidance association of Ethiopia (FGAE). Ministry of health (MOH) integrated family planning with the mother & child health (MCH) services during early 1980. In spite of long history & effort the population increased from 42.6 million in 1984 to 53.5 million in 1994 (1, 2). In any community with low contraceptive prevalence there is high level of unmet need, which is defined as not using contraceptives despite expressed demand for limiting or spacing a child. Demographic and health survey Ethiopia (3) revealed unmet need for modern contraceptives to be 36 % for married women. Traditionally research activities & services for family planning are focused on women. But unmet need is not the issue confined to married women only; other subgroups of population such as unmarried women, men, couples, all have unmet need with varying magnitude. A mix of factors that determine unmet need development are by and large similar; but the weight each factor contributes for its development is different which entails studying its magnitude and most important factors. Over the past two decades the goals of official family planning policies of many countries have shifted from an emphasis on increasing contraceptive prevalence (& reducing fertility) to satisfying unmet need (and reducing Unintended fertility) (4). Because unmet need focuses on those who are motivated to practice contraceptives, it offers a relatively realistic indication of the unsatisfied demand for family planning. Therefore, strong justification remains for programs placing a high priority on serving those with unmet need. Many studies attested the importance of involvement of men for sharing responsibility of family planning. Although many contraceptive methods are used by individuals, any contraceptive use can be considered a couple's phenomenon when the couple agrees on fertility preference, intention to use contraception. In Ethiopia studies to determine magnitude of unmet need of men, of couples, & discordance between spouses regarding fertility preference & intention to use contraception barely exist.

LITRATURE REVIEW

The concept of unmet need dates from 1960s when knowledge attitude & practice (KAP) surveys was being conducted when KAP gap between the reproductive intentions of women & their contraceptive behavior were measured. The contraceptive prevalence surveys refined the concept by adding questions about women's interest in postponing or spacing next births, thus making it possible to measure those who want to space their births & those who want to limit them (5). Worldwide twenty percent of married women have unmet need for modern contraceptives. It was estimated that if all those with unmet need in developing countries were able to space or limit births as desired, the total fertility would decline by 10-15 % and would move 30-50 % of the way to ward replacement fertility(6). The most commonly recognized reasons for non use of family planning are inconvenient or unsatisfactory services, lack of information, fears of contraceptive side effects, low perception of fecundability, ambivalence about future child bearing & opposition from husband & community (5).

Women's unmet need

The Ethiopia DHS survey 2000 indicates that among currently married women unmet need is 36 % (22% for spacing, 14 % for limiting). Met need is 8% (4 % for spacing & 4 % for limiting) thus the total demand is 44 %. Unmet need for spacing is higher among young women, while for limiting is higher among older women (3, 10). The total demand for family planning is 40 % among those who have no education and 74% among those with secondary or higher education.

Women with unmet need have very limited knowledge about family planning, most have never used a method, have few discussion with their partner & they are powerless (1). More than 70 % of women with unmet need approve family planning while only 17 % disapprove. Eight one of women with unmet need report they would find it a big problem if they become pregnant with in a few weeks (3). Approval of family planning by the husband & approval of family planning by woman herself are additive predictors of contraceptive use.

Two third of women with unmet need have intention to use a method in the future and this intention is higher for limiters than for spacer. The reasons given for not intending to use a method among women with unmet need are, 21 % fear of side effect (health concern), 16 % lack of knowledge or source about family planning, 15 % opposition by respondents &/or their spouses,& 25 % want more child (3,4).

Men's unmet need

In Ethiopia where women have very little decision making power and the decision to use contraception is strongly influenced by men, it is crucial to consider involving men in family planning program to meet unmet need. The goal of promoting positive male involvement in reproductive health can be addressed from three perspectives (5).

1. Changing the social norms that govern male behavior in sexual relations & parenthood.
2. Incorporating male involvement in to the overall planning of the reproductive health.
3. Adapting service delivery programs to make them more male friendly (5).

Involving men increases access to contraceptive methods that men can use, thereby expanding a couple's range of options. It also improves men's support for women's use of a method & shared reproductive decision-making and prevents STD/HIV transmission.

Couple's unmet need

Couples are said to have unmet need when at least one spouse reports non-contracepting despite expressed demand for spacing or limiting. Annexed figure1 helps in consideration of unmet need for any categories like married women, husbands and couples. Couple's unmet need estimate has relatively better utility in monitoring fertility trend of a population since vast majority of births in the world occurs within monogamous couples. Studies focused on magnitude & determining factors of couple's unmet need are very few in general & non-existent in Ethiopia. Study done in Zambia showed couple's unmet need to be 7.8 % (minimum estimate) & 29.3 % (maximum estimate) (6). In only 69 % of couples did spouses agree on desire to limit or space births.

There is greater dissimilarity between husbands & wives with regard to intention to practice contraception than there is regarding childbearing intention, which is an indication of lack of agreement or lack of discussion about reproductive intention or contraceptive use. When husband is pronatalist, a usual case, women's unmet need is certainly not the couple's. In many instances her desires may only be satisfied by hidden use of contraceptives. A study in Zambia also found that it was twice as common for women as for men to report wanting to space or limit birth & to intend to use contraceptives when spouse didn't. That is why the minimum estimate of couple's unmet need prevalence for family planning, as regularly done, based on women's unmet need prevalence exaggerated, for example, by 106 % in Bangladesh & by 246 % in Zambia (6).

OBJECTIVE

General: **To determine the magnitude of husbands', wives' and couples' unmet need**

level for family planning.

- Specific:**
- a. to assess knowledge & attitudes of husbands & wives towards modern C.P .
 - b. to determine unmet need prevalence for modern C.P of husbands, wives and couples
 - c. to analyze discordance between husbands & wives with regard to report of fertility preference & intention to use modern contraceptives.
 - d. to determine factors associated with unmet need.

Design of the study

Design of the study is cross sectional survey.

Study area

Harar is an ancient historical city located in southeastern Ethiopia about 525 Km from Addis Ababa. The region is surrounded by oromia region. It is situated on the plateau between 1,600 & 2000 meter above sea level; the climate is labeled as 'wainadega' temperate zone. The temperature ranges between 12.6 C° & 26 C°. Administratively the city is divided in to 19 kebeles. According to a projection made from 1994 census the total population of Harar city is 85,403. The major ethnic groups in the city are Oromo, Amhara, Harari, Somale, and Tigraye & Gurage. Most of economically active people are engaged in small-scale trade & civil service. The child bearing age (15-49 year) group of female comprises 44 % of total female population. Population density of Harar city is 3417 per square km. Literacy of male is 60 % & of female 50 %. There are 2 government Hospitals, one TB sanitariums hospital, health post in each kebeles & there are also few private clinics & NGOs cilinic like FGAE.

Sampling procedure

Multi stage sampling was used to select the study population.

Stage 1: After 19 Kebeles of the city were stratified in to three strata based on socio-economic factors, two Kebeles from each of the three strata were selected by simple random sampling.

Stage 2: 1/6th of sample size was selected from each of the 6 kebeles by systematic sampling.

When greater than one eligible in the house were found, lottery method was used to choose one eligible. Since each stratum was made to be homogeneous, the design effect was considered minimal.

Study population: All (couple) husband & wife whose age is 15-49 year.

Study unit : Husband & wife whose age is 15-49 year.

Formula for sample size is that used for measuring one variable. i.e. proportion.

$$n = \frac{(Z_{\alpha/2})^2 * p (1-p)}{d^2}$$

p= percentage d= marginal error α= confidence level

If P is assumed to be 50 % unmet need prevalence for contraception of couples, with 95% confidence interval and with 20% for contingency total sample size became 460 couples.

The 20% non-response rate was considered because the interview would be undertaken only if both husband & wife volunteered.

Tools for data collection

The survey questionnaires were adopted from literature developed for similar purposes by different authors. It was then reviewed to suit the local condition. The questionnaire was

translated in to Amharic language & back to English to ensure its consistency. The survey questionnaire was pre-tested & corrections were made to standardize & to ensure its validity.

Method of data collection

Using the questionnaire, eligible couples was interviewed from house to house by trained data collectors & supervision was conducted on the process of the data collection. Six paired female and male students who completed 12th grade collected the data & three nurses were recruited for supervision of data collectors. All were trained for three days and all speaks at least Amharic & Oromiffa. The training was focused on the following points; the purpose & scope of the study, how to approach the respondents, how to conduct the interview, how to handle the reluctant respondents, they were told comfort respondents by informing that his/her participation was on voluntary bases, if he/she didn't want to participate he/she caould discontinue any time and that all responses would be kept confidential & would be used for the research purpose only. There was also practical sessions like role plays.

Variables

Dependent variable: Unmet need for modern C.P.

Independent variable : a, socio-economic& demographic factors.

b, ambivalence about future child bearing.

c, low perception of fecundebility.

d, husband opposition

e,inconvenience or unsatistisfactory services.

f ,fear of C.P side effects

g ,knowledge & attitude about C.P.

Data quality

Before embarking upon data collection, pretest was conducted in adjacent kebele to ensure the validity of the survey tool & to standardize the questionnaire. Supervisors & the principal

investigator made frequent checks on the data collection process to ensure the completeness & consistency of the gathered information, errors found during the process were corrected.

Operational definition

Couple: male & female who are in marital relationship.

Men's unmet need: Not using contraceptives in spite of desire for limiting or spacing a child for more than two years.

Women's unmet need: A married women is said to have unmet need for contraception if she is not in one of the following groups.

- a. current users of contraception
- b. currently pregnant or post partal amenorrheic women who were using a contraception at conception.
- c. currently pregnant or post partal amenorrheic whose pregnancy was reported as intentional.
- d. an in fecund women.
- e. fecund woman who wants a child in < 2 years.

Couple's unmet need: If at least one spouse report not using contraceptives in spite of expressed demand for spacing (>2yr) or for limiting a child. *Minimum* couple's unmet need estimate is based on couples report in which both spouses reported not practicing contraceptives in spite of desire to limit or space child birth.

Maximum couple's unmet need estimate is based on couples report in which at least one spouse reported not practicing contraceptives in spite of desire to limit or space child birth.

Knowledge of contraceptives: awareness for at least one method of C.P.

Exclusion criteria: Given 7% (3) of polygamy prevalence in the general population and < 7% for urban population, more over only Muslim community practice it which would be half the

study subjects further curtails polygamy number. Therefore the information gleaned would surmised to be minimal.

Data analysis

After ensuring completeness of each questionnaire, using epi-info version 6, data were entered and exported to SPSS. Frequency of different variables were determined followed by cross tabulations to compare the frequencies. The chi-square result from cross-tab revealed significant association between unmet need estimate and two underlying factors considered; and therefore bivariate regression analysis was done for these factors.

Ethical considerations

Ethical clearance was secured from the ethical clearance committees of the DCH FM AAU. The harary health bureau and the kebele administrators were informed. The purpose, objective, importance of the study was explained & informed consent was secured from each participant. Confidentiality was maintained at all levels of the study, for example, study units names were not written on the questionnaires. Participants were told their involvement in the study would be on voluntary bases, if were unwilling to participate in the study & wished to quit from the study at any juncture could do so with out any restriction.

RESULT

I. Overall Description of the Study Population of married couples.

A total of 460 couples were included in the study, information gathered from all were included in the analysis. The age range for wives was from 18 to 46 years with mean of 28.8 and for husband was from 19 to 60 years with mean of 36.6. This mean age difference is due to the fact that only women with age range of 15-49 were included in the study and also usually women married husband elder than themselves. Majority of the wives were relatively young, (74.8%) younger than 34 years of age, while only 45% of husbands were below this age. Religious distributions were similar for both spouses, (57%) were Islam & 39% were orthodox Christians. (37%) Thirty seven percent of the study population among wives and (38.5%) among husbands were amharas, (24.3%) among wives and 25.2 among husbands were Oromos, (20.2%) among wives and (19%) among husbands were harary. (42%) of wives completed 7-12 grades while (85%) of husbands did so; (19%) of wives completed 1-6 grade while (33%) of husbands did so and (19%) of wives are illiterate while only (10%) of husbands are illiterate. Only (37.6%) of wives had gainful occupation while (88%) of husbands did so. Majority of wives (62%) are house wives while only (7%) of husbands were jobless; only (24%) of wives are government employee while (40%) of husbands are so. Twelve percent of wives were merchants while (22%) of husbands were so. Of those who reported as having income & willing to tell their income, mean monthly income was (148 wives & 323 husbands), 441 birr/month for wives & 510 birr/month for husbands. The range was nearly similar for both (1440 birr) (Table1).

Table 1. Socio demographic characteristics of couples from 6 kebeles of harar city, eastern Ethiopia January 2005.

Back ground characteristics		husband		wife		
		no	%	no	%	
Age	15-19	1	.2	21	4.6	For wives Mean age=28.8 max=46 mini=18 for husband mean age=35.6 max=60 mini=19
	20-24	29	6.4	90	19.6	
	25-29	70	15.4	132	28.7	
	30-34	105	23.1	101	22	
	35-39	85	18.7	76	16.5	
	40-44	95	20.9	29	6.3	
	45-49	47	10.3	6	2.4	
	>49 (for husband only)	23	5.1	–	–	
	Total	455	100	455	100	
Religion	Islam	256	55.7	262	57	
	Orthodox	186	40.4	180	39.1	
	Protestant	17	3.7	16	3.5	
	Catholic	1	.2	2	.4	
	Total	460	100	460	100	
Ethnicity	amara	177	38.5	170	37	
	oromo	116	25.2	112	24.3	
	harari	87	19	93	20.3	
	Tigrea	57	12.4	13	2.8	
	Guragea	18	3.9	63	13.7	
	other	5	1.1	9	2	
	total	460	100	460	100	

education	Illiterate	46	10	89	19.4	
	Read & Wright	32	7	74	16.1	
	Completed1-6	75	16	88	19.2	
	Completed7-12	237	51.5	194	42.2	
	Higher education	70	15	14	3.1	
	Total	460	100	459	100	
occupation	Government employee	182	39.6	109	23.7	
	House maid/daily laborer	126	27	4	.9	
	merchant	100	21.7	55	12	
	House wife/jobless	32	7	287	62.4	
	Other	20	4.3	5	1.1	
	total	460	100	460	100	
Income/month	50-300	109	32	47	31.8	For wife & husband respectively mean=440.98 birr mean=510 birr S.D =232 S.D=279 mini=50 birr mini=60 birr
	301-500	95	29	67	45.3	max=1535 birr max=1500
	501-1000	114	35	31	20.9	61% of wives & 51% of husbands consider their income as medium,24.8% of wives
	>1000	11	3.4	3	2	& 31% of husbands consider their income as poor/very poor,10.4% of wives & 10 %
		323	100	148	100	of husbands consider their income as reach.

II Reproductive history

Nearly one third (36.4%) of women were married at ages less than 20 years, while only 6% men did so. The minimum age at marriage reported for women was 13 years & for men 16 years. The mean age at marriage was 20.86 & 27 for women & men respectively.

The minimum age at first pregnancy was 14 & the mean is 21.59; 31.5 % of them got pregnancy at age <20. Minimum age at birth of first child was 15 & 18 for women & men respectively; the mean is 22.16 & 29 respectively for women & men. A quarter of women gave birth to their first child at age <20 while only 2.5% of men did their first child born to them at age <20.

For both spouses, mean number of alive children were 2.6. While 74% of couples have at least one daughter and 79 % of them have at least one son. The mean number of children wished when couples were childless was 3.8. Among those yet to have a child, mean ideal no of child they wish to have was 3.36, minimum was 1 for both spouses & maximum was 10 (12 for men). Among wives included in the study, 48(10.4%) & 26(5.7%) of them were pregnant & lactating respectively; but 50 husbands reported pregnancy of their wives & 25 husbands reported their wives as lactating.

Only 4(8.3%) of currently pregnant wives & 2 of their husbands as well described the pregnancy as unwanted. Among lactating mother none of the couples described recent birth as untimed/unwanted. Two couples failed to avoid the pregnancy due to lack of awareness about contraceptives, two wives attributed to fear of side effect of contraceptives & little perceived risk of pregnancy. Thirty women who were either pregnant or lactating reported their pregnancy/recent birth were for the first time, while 32 of their spouses did so. Among those who were pregnant/lactating not for the first time (41), only 33 of them & 30 of their husbands remembered the time gap between current pregnancy/recent birth & previous pregnancy. The mean time gap was 30 months (32.6 months for husband) with standard deviation of 12 (13 for husband). Only 14 % (64) wives & 12% (59) of their husbands reported history of abortion & its

frequency was, once by 53 (82.8%) of wives & by 47(80%) of husbands; twice by 9 (14%) of wives & 9(15%) of husbands (see table 2).

Table2. Summary of reproductive history of couples from 6 kebeles of harar city; eastern Ethiopia, January 2005.

Age of first marriage	husband		Wives		For wives	for husbands		
	no	%	no	%				
20-24	113	26.7	185	43.7	mean=20.8 median=20 SD=3.7 R=22	mean=27 SD=6 R=3		
13-19	25	6	154	36.4				
25-29	146	34.4	72	17				
30-34	93	22	11	2.6				
35-39	29	7	0	0				
40-49	18	4.2	0	0				
total	424	100	423	100				
Age of first pregnancy	husband		Wives					
20-24			168	46	Mean=21.6 SD=3.8 R=20			
14-19			115	31.5				
25-29			69	19				
30-34			13	3.6				
total			365	100				
Age at birth of first child birth.	husband		Wives		For wives	for husbands		
20-24	69	19	179	49.4				
15-19	9	2.5	91	25			Mean=22	mean=28.7
25-29	131	36	73	20			SD=3.7	SD=5.6
30-34	99	27	19	5			R=19	R=30
35-39	39	10.7	0	0				

40-44	14	4	0	0	
>=45	2	.6	0	0	
Total	336	100	362	100	
Number of alive children					
1-2	232	58.4	232	58.4	Same for both spouses. Mean=2.6 R=9
3-4	104	26	104	26	
5-6	47	11.8	46	11	
> 6	15	3.8	15	3.3	
total	397	100	397	100	
Ideal child <u>no</u> for childless.					
3-4	22	41.5	29	52.7	For wives For husbands
1-2	20	37.7	18	32.7	Mean =3.4 Mean =3.4
5-6	9	17	7	12.7	SD=1.5 S.D=1.8
>=7	2	3.8	1	1.8	R=9 R=11
total	53	100	55	100	
Current reproductive status.					
Pregnant	50	10.9	48	10.4	
Lactating	25	5.4	26	5.7	
None of the above	385	83.7	386	84	
total	460	100	460	100	

III. Practice of modern contraceptives.

Prevalence of C.P use was found to be (318) 69% for wives & (303) 66.5% for husbands (table 3); 208 (45.4%) of wives & 205 (44.7%) of husbands had desire to have more child after two or more years (spacers); 11% of wives & 12.6% of husbands wanted to have more child in less than two years which shows 15% higher demand to have child <2 years among husbands. Twenty eight percent of wives & 26% of husbands did not need any more child (limiters) which shows 8% higher demand for limiting by wives than by husbands (see table 4). Among non-contracepting limiters/spacer (80 wives & 86 husbands), 35(45%) of wives & 32(37%) of husbands had intention to use modern contraceptives within 12 months which shows 24% higher intention to use contraception among wives than among husbands. Discordance between husbands and wives was higher with respect to intention to use contraception within the next 12 months than fertility desire as attested by index of dissimilarity (table 4). In consistent with other studies (7) the reasons given by those wives & husbands not intending contraceptive use in the next 12 months (45 wives & 54 husbands) were, 47% of wives & 31.5% of husbands due to fear of C.P side effect, 20% of wives & 33% of husbands to religious factor, 6.6% of wives & 9% of husbands to lack of awareness about contraception, 7.4% of husbands due to wife disapproval. Most favored contraceptive methods by both spouses were pills & injection.

Table3. Percentage distribution of husbands & wives within couples & of couples by C.P use status, from 6 kebeles of harar city, eastern Ethiopia, January 2005.

status	wives	husbands	both
<i>Using contraceptives</i>	319 (70 %)	303 (66.5 %)	68.25 %
<i>Not Using contraceptives</i>			
a, desire to limit/space birth	80 (17.5 %)	86 (19 %)	18.25 %
b, other (those who want to have more child in <2 years or have no desire to limit/space	58 (12.5 %)	70 (15 %)	13.75 %
Total	457 (100%)	459 (100%)	100 %
missing	3	1	
Total study subjects	460	460	

Table 4. Percentage distribution of wives & husbands, by reported desire for more children and percentage distribution of wives & husbands not practicing contraceptive, by intention to use contraceptives, & index of dissimilarity from 6 kebeles of harar city, eastern Ethiopia, January 2005.

Measure	Wives	Husband
<i>Desire for children</i>		
a, wants in<2 years	50 (11%)	58 (12.6%)
b, wants but after 2 years	208 (45.5%)	205 (44.7%)
c, unsure of timing/undecided about desire	71 (15.5%)	76 (16.6%)
d, wants no more	128 (28%)	120 (26%)
Total	457 (100%)	459(100%)
<i>Index of dissimilarity</i>	2.8	
<i>Intention to use contraceptives</i>		
a, intend to use within 12 months	35 (44%)	32 (37%)
b, do not intend/unsure	45 (56%)	54 (63%)
Total	80 (100%)	86 (100%)
<i>Index of dissimilarity</i>	7	

Three hundred sixty seven, 367 (80%) of wives & 358 (77.8%) had reported ever use of contraceptives & the type of methods used most were injection and pills. At the moment the study was conducted, more than 183 (60.6%) of couples were using injections & 106(33.3%) of couples were using pills. Nearly equal proportions of both spouses were using the contraception for similar purpose, 70% & 30% for spacing & for limiting respectively. The reason given (45 wives & 52 husbands), for the discontinuation of contraceptive were, 25 (55.6%) of wives & 26 (50%) of husbands to have more child, 12 (26.7%) of wives & 5(9.6%) of husbands due to other medical problem. Of all couples participated in the study, 388 (84%) of wives & 396(86%) of husbands reported the decision regarding contraceptive use to be the matter of both spouses (table 5) Among current C.P user, mean time to reach the dispensary point was 30 minute, minimum 5 & maximum 70 minutes.

When all wives are stratified according to contraceptive need status, only 283 (61.5%) had need (113 limiters & 170 spacers) & the rest 177(38.4%) had no need, either due to pregnancy/recent birth, lack of decision about timing/desire of child or lack of desire to limit or space child birth. Of 283 wives with contraceptive need, 243 (86%) were using a method which can be called as met need, & the remaining none user 40 plus 4 pregnant ladies that described their pregnancy as unwanted (15.5%) constitute what is called unmet need for contraceptives (table 6). Of 271 husbands with contraceptive need 228 (84%) reported using contraceptives at the moment (met need), the remaining none user plus 2 husbands that described their wives pregnancy as un-timed together constitute unmet need which is 15.8%.

Table 5 Summary of contraceptive practices of both spouses.

<i>Ever use of contraceptives</i>	wife		husband	
	<u>N</u>	%	<u>N</u>	%
Yes	367	79.8	358	77.8
no	93	20.2	101	22
Missing	0	0	1	.2
total	460	100	460	100
<i>Types of contraceptives ever used</i>				
injection	229	49.8	202	43.9
pills	175	38	176	38.3
condom	18	3.9	112	24.3
other	30	6.5	34	7.4
total	452	98.2	524	113.9
<i>Current contraceptive use</i>				
yes	318	69.1	303	65.8
no	142	30.8	156	33.9
missing	0	0	1	0.2
total	460	100	460	100

<i>Types of contraceptives currently being used</i>				
Injections	198	43	181	39.3
Pills	100	21.7	95	20.6
condom	9	2	44	9.6
Other	17	3.7	17	3.7
total	324	70.4	337	73.2
<i>Factors for discontinuation of contraceptives</i>				
To have child	25	26.7	26	50
Medical problem	12	26.7	5	9.6
Religion	4	8.9	5	9.6
Fear of contraceptive side effect	4	8.9	10	19.2
Total	45	100	52	100
<i>Who decide contraceptive use</i>				
Both spouses jointly	388	84.3	396	86.1
wife	44	9.6	13	2.8
Husband	12	2.6	38	8.3
No response	16	3.5	13	2.8
total	460	100	460	100

Table 6. Percentage distribution of married women & married couples by contraceptive need status & according to type of measures, from 6 kebeles of harar city, eastern Ethiopia, January 2005.

Need status	Married women	couples	
		minimum	Maximum
Unmet need	(40+4) 15%	(80+2) 14.7%	(83+4)15.6%
Met need	(243) 86%	(456) 82.3%	(471) 85%
total	283+4=287 (101 %)	(536+2) 97%	(554+4) 100.6%
% change in unmet estimate.	referent	-4% %	-0.4 %

IV. Knowledge, attitude & practice of modern Contraceptives.

Nearly all of the study couples heard (99.6%) & knew (98.4%) some kind of contraceptives. Majority of couples, 382 (83%) of all wives & 358 (77.8%) of all husbands wants to know more about contraceptives; more than 82% of couples approve contraceptive usage by other couples. The main reason given by those disapproving contraceptive use were; religious factor (71% by wives & 73.5% by husbands), fear of side effect of contraceptives (23.6% by wives & 25% by husbands) & to have more child (11% by wives & by husbands4.4%). Fifty nine percent all wives & 61% of all husbands reported discussion about contraceptives within the last six months. The mean number of discussion was two. More than three quarter (78%) of all wives reported that they had permission by their husbands to use a method and 94% of all wives believed that their husbands were aware of their wives contraceptive usage. The two most known methods by both spouses were pills & injections. Ninety nine percent of all couples agreed on the possibility of obtaining contraceptives & the sources mentioned most were, hospital (90%), FGEA clinic (62%). Mentioned benefits

that could be attained through contraceptive usage were prevention of unwanted pregnancy (by 80% of wives & 84% of husbands), limiting number of child (by 60% of wives & 66% of husbands), prevention of un-timed pregnancy (by 41% of wives & 50% of husbands). Majority (82-84%) of wives & 67-69% of husbands knew correctly how pills & injections are taken; 88% of wives & 83% of husbands recommend modern contraceptives to avoid unwanted/un-timed pregnancy for all candidate couples. Sources of information about contraceptives were, health professionals (by 80.5% of wives & 54% of husbands), radio (by 72% of wives & 87% of husbands), TV (34% by wives & 46% of husbands). Two third of couples (66% of wives & 68.5% of husbands) reported to have T.V, while 34% of wives & 26% of husbands reported to have only radio (table 7).

Table 7. Summary of knowledge, attitude & practice of modern Contraceptives from 6 kebeles of harar city, eastern Etiopia, january 2005.

Wants to know more about C.Ps	wives		husbands		
	no	%	no	%	
yes	382	83	358	78	
no	77	16.7	102	22	
total	459	100	460	100	
approve C.P use by others					
yes	396	86	377	82	
no	58	12.6	68	15	
No response	6	1.3	15	3.3	
total	460	100	460	100	
Number of discussion in the last 6/12.					
1-2 times	91	33.5	91	32.5	Only 272(59%) of All wives & 280(61%) of husbands has reporteddiscussion about C.Ps.
>=3 times	124	45.6	146	52.1	
do not remember	57	21	42	15	
total	272	100	280	100	
Type of C.Ps known by study units					
pills	415	91	393	87	

injections	405	89	382	85
condom	119	26	235	52
Sources of C.Ps				
hospital	408	88.7	420	91.7
FGAE	286	62	339	74
Health center	227	49	277	60.5
Benefits of C.Ps				
Prevention of unwanted pregnancy (yes)	362	79.7	380	84
Limiting number of child	270	59.5	301	66.4
Prevention of un-timed pregnancy	188	41.4	225	49.7
Comparing pills & pregnancy				
Do not know	279	61	297	65.3
Pills are less harmful	99	21.6	71	15.6
Pills are more harmful	58	12.7	39	8.6
Pills are equally harmful	17	3.7	37	8
other	7	1.5	16	3.5
Source of information about C.Ps (yes)				
Health professionals	368	80.5	248	54
radio	329	72	400	87
TV	155	34	213	46

V. Factors associated with unmet need for contraception.

Amongst factors considered to affect unmet need to modern contraception, perceived approval of contraceptive use by each spouses and discussion about contraception are associated significantly (table 8, 9). The other didn't revealed statistically significance association, probably due to the fact that only 14% of wives & 16% of husbands have unmet need and the higher contraceptive prevalence that makes detecting significant level of association difficult. Large proportion of women in the age range of 25-34 have higher met as well as unmet need 63.6% and 50% respectively; while husbands in the age range of 35-44 have higher proportion, 41.9% and 40% met and unmet need level respectively; but there is no significant association was detected between age of the spouses and contraceptive need status. Since more spouses that completed >6 grade express their need to space or limit child birth, they represent higher proportion in both need status. Among couples with unmet need, large proportion of them perceived their spouses not approving contraceptive use & they didn't discuss about contraception in last 6 months (table 8, 9).

Table 8. Wives' age, education, ethnicity, no of alive children, religion, perceived approval of C.P use by husband & discussion about C.P in the last 6 months; versus their current contraceptive need status from 6 kebeles of harar city, eastern Ethiopia January 2005.

variables	Contraceptive need status		total no(%)	X ² value (d.f)	p value*	OR	C.I
	unmet need no(%)	met need no(%)					
Age				1.9(2)	.386		
15-24	8(30.8)	44(21.1)	52(22.1)				
25-34	13(50)	133(63.6)	146(62)				
>34	5(19.2)	32(15.3)	37(15.7)				
total	26(100)	209(100)	235(100)				
education				3.685(2)	.158		
illiterates	3(7.5)	48(19.8)	51(18)				
Coplted up to6 grde	14(35)	81(33.3)	95(33.6)				
Copleted >6 grde	23(57.5)	114(46.9)	137(48.4)				
Total	40(100)	243(100)	283(100)				
Ethnicity				1.189(3)	.756		
oromo	8(20)	52(21.4)	60(21.2)				

harary	7(17.5)	53(21.8)	60(21)				
amara	19(47.5)	94(38.7)	113(39.9)				
other	6(15)	44(18)	50(17.7)				
total	40(100)	243(100)	283(100)				
No of alive children				Fisher's e. test (1)	.25 (1 sided)		
1-3	24(68.6)	177(75.3)	201(74.4)				
>3	11(31.4)	58(24.7)	69(25.6)				
total	35(100)	235(100)	270(100)				
Religion				1.3 (1)	.252		
Islam	18(45)	135(54.7)	151(53.4)				
Christian	22(55)	110(45.3)	132(46.6)				
total	40(100)	243(100)	283(100)				
Wife's perceived approval of C.P use by her husband				137.7(1)	.000	.02	(.1, .4)
Approve	10(25)	232(95.5)	242(85.5)				
Do not approve	30(75)	11(4.5)	41(14.5)				
total	40(100)	243(100)	283(100)				
Couples discussion about C.P with in last 6/12				48.0(1)	.00	.08	(.3, .19)
Yes	7(17.5)	179(73.7)	186(65.7)				
No	33(82.5)	64(26.3)	97(34.3)				

	40(100)	243(100)	283(100)				
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*significance

Table 9. Husbands' age, education, ethnicity, no of alive children, perceived approval of C.P use by husband & discussion about C.P in the last 6 months; religion, perceived approval of C.P use by wives' & discussion about C.P in the last 6 months; versus their current contraceptive need status from 6 kebeles of harar city, eastern Ethiopia January 2005.

variables	Contraceptive need status		Total no(%)	X ² value (d.f)	P value*	OR	C.I
	no (%)	no (%)					
Age	unmet need	met need		7(3)	.072		
15-24	4(9.3)	12(5.3)	16(61)				
25-34	9(20.9)	87(38.7)	96(35.8)				
35-44	18(41.9)	90(40)	108(40.3)				
>44	12(27.9)	36(16)	48(17.9)				
total	43(100)	225(100)	268(100)				
education				.895(2)	.639		
illiterates	3(7)	20(8.8)	23(8.5)				
Completed 1- 6 grade	8(18.6)	55(24.1)	63(23.2)				
completed>6 grade	32(74.4)	153(67.1)	185(68.3)				
total	43(100)	228(100)	271(100)				

Ethnicity				.54(3)	.91		
Oromo	8(18.6)	53(23.25)	61(22.5)				
Harary	9(20.95)	44(19.3)	53(19.6)				
Amara	19(44.2)	92(40.4)	111(41)				
other	7(16.3)	39(17.1)	46(17)				
Total	43(100)	228(100)	271(100)				
No of alive children				1.657(1)	.198		
1-3	25(65.8)	165(75.7)	190(74.2)				
>3	13(34.2)	53(24.3)	66(25.8)				
total	38(100)	218(100)	256(100)				
Religion				.19(1)	.663		
Islam	24(55.8)	119(52.2)	143(52.8)				
Christian	19(44.2)	109(47.8)	128(47.2)				
total	43(100)	228(100)	271(100)				
husband's perceived approval of C.P use by his wife				159.1(1)	.00	.01	(.0, .3)
Approve	12(27.9)	224(98.2)	236(87.1)				
Do not approve	31(72.1)	4(1.8)	35(12.9)				
Total	43(100)	228(100)	271(100)				
Couples discussion About C.P within the last 6 months				54.6(1)	.00	.07	(.3, .17)
Yes	8(18.6)	174(76.3)	182(67.2)				

No	35(81.3)	54(23.7)	89(32.8)				
Total	43(100)	228(100)	271(100)				

*significance

DISCUSSION

This community based study used information gathered from all 460 couples involved in the study to estimate prevalence of unmet need for contraception of both spouses' and of couples as well as determinant factors that affect its magnitude. Data regarding desire of couples to limit or to space a child and amongst pregnant and lactating mother wanted-ness or timing of current pregnancy or recent birth was used to estimate prevalence of unmet need. An individual is said to have unmet need for contraceptives if one has desire to limit or space child birth in more than two years, but not using contraceptives and pregnant and lactating mothers who reported the current pregnancy or recent birth as unwanted or mistimed. In line with this assumption out of all study units only 283 wives and 271 husbands are found to have need for contraceptives. Forty of these wives were not contracepting at the moment & four of pregnant wives reported the pregnancy as un-timed that makes unmet need level for married women to be 15.3%; constituted by 6.6% for spacing and 8.7% for limiting. With the same token 43 of 271 husbands reported not using contraceptives at the moment plus two of husbands reported the current pregnancy of their wives unwanted which makes husband's

unmet need level to be 16.5%; composed of 9.8% for spacing and 6.6% for limiting. Similar to other study results (3, 10), this study revealed women with age rang >34 constitutes 70.8% of wives with unmet need for spacing while only 6.7% constituted by women with the same age range among women with unmet need for spacing, and 57% of wives (36% husbands) with unmet need approve contraceptive use and only 44% of wives (37% husbands) intend to use contraceptives in following 12 months. Large proportion of couples with unmet need (82%) did not discuss about contraceptives. Only 8.5% of total demand for contraception is made by illiterates, the rest made by those with any level of formal education. The reproductive and intention to use modern contraceptives of spouses differ in some degree. Therefore estimating couples unmet need based solely on wives' reports will necessarily overestimate couples' unmet need; if one defines a couples' unmet need as one in which both spouses agree on their fertility desire and its timing. Relative to estimates of couples' unmet need based on couples in agreement (i.e. minimum couple's unmet need) the estimates calculated using women's response alone is higher and closer to the maximum estimate of couples' unmet need. Form the above figures minimum and maximum couples' estimate was found to be 14.7% &15.6%. In many developing countries husbands are pronatalists, in line with this norms (3) as can be seen from table 4, husbands need more child and sooner than wives and also has less intention to use contraceptives in the following 12 months than wives. Eleven percent of wives want to have more child in less than two years while 12.6% husbands do so which shows 15% higher demand to have child <2 years among husbands. Twenty eight percent (28%) of wives want to limit child while 26% of husbands want to limit child, which shows 8% higher demand for limiting among wives than among husbands; this difference which is statistically insignificant (X^2 value 0.31, & $p=0.579$) is very much lower than the 39% difference observed in Zambia (7). Discordance between husbands and wives is higher

with respect to intention to use contraception within the next 12 months than fertility desire as attested by index of dissimilarity (table 4). Among limiters/spacer that were not using contraception at the moment (80 wives & 86 husbands), 35(45%) of wives & 32(37%) of husbands had intention to use modern contraceptives within 12 months which shows 24% higher intention to use contraception within 12 months among wives than among husbands. The reasons given by those wives & husbands not intending to use C.P in the next 12 months (45 wives & 54 husbands) were, to 47% of wives & 31.5% of husbands due to fear of C.P side effect, 20% of wives & 33% of husbands to religious factor, 6.6% of wives & 9% of husbands to lack of awareness about contraception. 7.4% of husbands due to wife disapproval, similar to other studies (5). Most favored methods by intender of both spouses were pills & injection. When compared with 36% unmet level for married women by the DHS Ethiopia survey with the one obtained from this study it is very low (15.3%). This is probably due to the constellation of the following factors. The presence of two hospitals, FGAE clinic & other facility in the city of harar, 86% of all couples in the study have alive children & out of them 58% have at least two children; more than 78% of couples reported usage of a method in the past, only 19% of wives and 10% of husbands are illiterates, mean time to reach the service point was is only 30 minutes, more than 82% of couples approve contraceptive use, 60% of couples have discussed contraceptive issue in the last six months, more than 90% of couples heard and knew about contraceptives, 67% of couples have both T.V and radio; resulting in higher contraceptive prevalence which is 69% for wives and 66% for husbands. Amongst the factors considered to be associated with unmet need like age, education, number of alive children, knowledge & attitude towards contraceptives and so on; only perceived approval of contraceptives by spouses and discussion about contraceptives are found to be associated significantly ($p=.00$) (table8 ,9).

CONCLUSION

Like other study results this study showed difference in spouse's fertility desire and contraceptive intention. Husbands are more pronatalist and less intends to use contraceptives. However their contraceptive demand (met need + unmet need) is not low as widely perceived in the past, so it would be erroneous to ignore considering men in any reproductive health services. Couples unmet estimates also found to less than estimate of married women. Even though discordance found between spouses and the difference between unmet estimates of couples and married women are small and statistically insignificant when compared to study done in Zambia (7) due to factors peculiar to the study area mentioned in the discussion part that resulted in high contraceptive prevalence, couple's unmet estimate and associated factors would have better utility in planning and delivery of family planning service since majority of birth occurs in monogamous couples. Amongst the factors considered to be associated with unmet need like age, education, number of alive children, knowledge & attitude towards contraceptives and so on; only perceived approval of contraceptives by spouses and discussion about contraceptives are found to be associated significantly ($p=.00$) (table8 ,9). This warrants promotion and encouragement activity to enhance communication between spouses. Since study involved only couples with wives age age only 15-49 yr it is erroneous to make generalization.

RECOMMENDATION

1. Incorporating reproductive health need of male in the over all reproductive health planning and service delivery and to make them male friendly, like incorporating family planning service in the general medical services so that male patients would not be embarrassed to get reproductive health services.

2. Advocacy to enhance communication between spouses.
3. Endeavour to enhance prevalence permanent contraceptive methods including vasectomy which very low for limiters.
4. Conducting prospective study to determine what proportion of couples eventually practice contraception among those in which the husband, wife or both are considered to have unmet need, has intention to use contraceptive in the next 12 months and approve contraceptive use. This may disclose the joint predictive validity of intention to use contraceptives and approval attitude towards contraceptives eventual contraceptive practice.
5. Studies on family planning should include both women and men to enhance successful family planning service delivery that targets couples.

REFERENCES

1. Sita S. Assessment of the magnitude & determination of unmet need for family planning among currently married women in urban & Periurban community in Awasa south Ethiopia MPH thesis DCH FM - AAU 2003.
2. Alano A. Identifying factors associated with the difference between sidamo development project program & family guidance association of Ethiopia supported CBD programs in contraceptive prevalence rate sedamo zone, SNNPR MPH thesis DCH-FM AAU 2003.
3. DHS Ethiopia 2000.

- 4 John B. Fatma EZ & laila O. EZ: unmet need & unintended fertility: longitudinal evidence from upper Egypt. *International family planning perspectives*. 2003 29(4): page: 158-166.
5. Ahmed Jelaludin-Evaluation of program options to meet unmet need for family planning in Ethiopia Addis Ababa CSA 2002.
6. Stan B. Measuring unmet need: wives, Husband or couples. *International family planning perspective*.
7. Stan B. Couples & reproductive health: A review of couple studies. *Studies in family planning* 1996 27 (6): page 291-30
8. Wesileh P.N: men's Knowledge of & attitudes to ward birth spacing & contraceptive use in Jordan. *International family planning perspective* 1999,25 (4): page 181-185.
9. Mona A.: Attitudes of urban Sudanese men to ward family planning: *Studies in family planning* 1988; 19(4), Page 236-243.
10. John B Aurora E. & Ann E: factors underlying unmet need for family planning in the Philippines *studies in family planning* 1997, 28 (3): page 173-191.
11. Pierre N. Men's unmet need for family planning: Implications for Africa fertility transition. *Studies in family planning* 1997, 28 (3): 192-202..
12. Sarah K. & Elisa w. Involving men. *Outlook* 1997 14(3). <http://www.hsph.harvard.edu/organization/healthnet/HIV/docs/sea-aids/gend71.txt.31/6/2004>
13. John A. & William L Contraceptive, use intention to use & unmet need during the extended postpartum period. *International family planning perspectives* 2001, 27 (1):p20-27.
14. Tefera A. Modern contraceptive initiation: does involving men make a difference? MPH thesis DCH-FM AAU 1991.

Annexes

Annex1. The data collection instrument, English version.

Id no. _____.

Visit 1. _____.

Visit 2. _____

Faculty of medicine, department of community health, Addis Ababa University.

Survey questionnaire to determine magnitude of unmet need for family planning among couples, husbands & wives in Harar city.

Consent Form

My name is _____. I am working with Dr.Kerimudin Mubarik who is doing a research as partial fulfillment for the requirement of Master in Public Health at Addis Ababa University, Department of Community Health. We are interviewing married couples to know their unmet need in family planning. I am going to ask you some questions that are very important for the programmers in family planning to plan improved intervention. Your name will not be written in this form and the information you give are kept confidential. If you do not want to answer all or some of the questions, you do have the right to do so. However your willingness to answer all of the questions would be appreciated.

Would you participate in responding to the questions in this questionnaire?

-----Yes

-----No

Name and Signature of the data collector who sought the consent_____

Date of interview_____

Name and signature of the supervisor _____

Date_____

Couples who are family planning user, ever user otherwise never user, are asked. You should circle the right answer among the multiple choices or write the code.

Questionnaires I.for wives.

Part i, demographic & socio-economic characteristics.

Ques no	Question	Choice of answers
101	address	Write the code....
102	age	1. _____ yr 2. i don't know exactly 3. no response
103	sex	f
104	religion	1. islam 2. orthodox 3. protestant 4. catholic 5. others(specify)
105	ethnicity	1. oromo 2. harari 3. amhara 4. tigre 5. guragea 6. others(specify)
106	educational status	1. don't write & read. 2. read & right 3. completed 1-6 grade 4. completed 7-12 grade 5. higher education
107	occupation	1. house wife. 2. merchant 3. daily laborer 4. house maid 5. govern. employee 6. jobless 7. others(specify)
108	monthly income (of wife only)	1. ____birr in month 2. i don't know exactly 3. unwilling to respond
109	If you compare your monthly income with your	1. very poor 4. reach

	neighbours where you put your economic status	2. poor 3. medium	5. I can't say 6. no response
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Part ii, reproductive history.

	Questions	Choice of answer	Skip to ques
201	at what age did you first married?	1. at the age of _____ 3. no response 2. i don't remember	
202	have you ever been pregnant?	1. yes 2. no..... 3. i don't remember 4. no response208 ..204 ..204
203	if answer to ques no 202 is yes, how old were you when you first got pregnant	1. _____year 2. i don't remember 3. no response	
204	have you ever gave birth to a child?	1. yes 2. no..... 3. no response.....	.208 ..209
205	how old were you when your first child was born?	1. _____yr 2. i don't remember 3. no response	
206	how many live children do you have?	1. enter no _____ a. sons..... b. daughter . ____ 2. i don't know axactly 3. no response	
207	if you could go back to the time you don't have children & could choose exactly the number of children to have in your life, how many children could that be?	1. enter no..... 2. i don't know 3. no response	
208	how many children would you like to have in your life (for those don't have children)?	1. enter no..... 2. not yet decided 3. no response	
209	are you currently pregnant?	1. yes. 2. no 3. i am not sure..... 4. no response.....	.211 ..211 ..211
210	if answer to ques no 209 is yes, is the pregnancy.....?	1. wanted now..... 2. wanted later..... 3. not wanted at all..... 4. no response.214 ..213 ..213 ..215
211	did you give birth within the last six months?	1. yes. 2. no..... 3. no response.....	.224 ..224 ..224

	Questions	Choice of answer	Skip to qus
214	Time since previous birth (for those currently pregnant or gave birth since 6 month)?	1. _____ months 3. no response 2. i don't remember	
215	After the child you are expecting now, would you like to have another child or not to have any more children? (for pregnant women)	1. have a child..... 2. have no more children..... 3. not yet decided..... 4. no response.....	..217 ..219 ..219 ..219
216	After the birth that occurred within the last six months, would you like to have another child or not to have any more children? (for women that gave birth within the last six months)	1. have a child..... 2. have no more children..... 3. not yet decided..... 4. no response.....	..218 ..220 ..220 ..220
217	if the answer to question 215 is choice <u>1</u> , (preferred to have another child) how long would you like to wait before the birth of another child?	1. ≤ 2 2>2yr..... 3. not yet decided..... 4. no response.....	..219 ..219 ..219
218	if the answer to question 216 is choice <u>1</u> , (preferred to have another child) how long would you like to wait before the birth of another child?	1. ≤ 2 2. >2yr..... 3. not yet decided..... 4. no response.....	..220 ..220 ..220
219	within a year after the birth of the child you are expecting now, will you use modern contraception? (for pregnant women)	1. yes..... 2. no..... 3. not sure 4. no response	..221 ..227
220	do you intend to use modern family planning within a period of 12 months starting from the birth that occurred within the last six months? (for women who gave birth within the last six months.)	1. yes..... 2. no..... 3. not yet decided 4. no response	..221 ..226
221	if the answer to question no 219 was yes, would you like to use the method for limiting or for spacing?	1. for spacing..... 2. for limiting 3. don't know..... 4. no response.....	..228 ..228 ..228 ..228
222	if the answer to question no 220 was yes, would you like to use the method for limiting or for spacing?	1. for spacing 2. for limiting..... 3. don't know..... 4. no response.....	..228 ..228 ..228 ..228

	Questions	Choice of answer	Skip to ques
223	if you are not currently pregnant or didn't give birth since 6 months or unwilling to respond if you are currently pregnant or gave birth within the last 6 months, would you like to have another child or not to have any more children?	1. have another child 2. no more children..... 3. not yet decided..... 4. no response.....	..225 ..225 ..225
224	if the answer to ques no 223 is choice <u>1</u> , how long would you like to wait from now before the birth of another child?	1. ≤ 2 yr 2. > 2 yr..... 3. not yet decided..... 4. no response.....	..225 ..225 ..225
225	would you intend to use modern contraceptive within 12 months from now?	1. yes..... 2. no 3. not yet decided 4. no response.....	..227 ..226 ..229 ..229
226	if you are not going to use modern contraceptives, would you tell me the main reasons? Tick all mentioned.	1. fear of side effect 5. to have more children 2. not aware of contraceptive l 3. no preferred method 4. little pregnancy risk(H or /& W) 5. to have more children 6. husband disapproval 7. other	229
227	for what purpose would you like to use the modern contraceptives, for limiting or for spacing?	1. for spacing. 2. for limiting 3. don't know 4. no response	
228	which method would you like to use? tick all mentioned.	1. pill 2. implant [norplant] 3. injectables 4. IUCD 6. female sterilization 7. male sterilization 8. spermicidal (foaming tabs, jelly) 9. natural method	

		(abstinence, withdrawal) 5. condom 10. other	
229	have you ever experienced a pregnancy terminated with abortion?	1. yes 3. i don't remember 2. no 4. no response	
230	if the answer to question no 229 is yes, how many times?	1. wright the no _____ 3. no response 2. i don't remember	

Part iii. Practice of modern C.P

ques no	Questions	Choice of answer	
301	have you ever used modern contraceptives?	1. yes 2. no	3. i don't remember 4. no response
302	if the answer to ques 301 is yes, what are the methods you used? Tick all mentioned.	1. pill 2. implant (norplnt) 3. injectables 4. IUCD 5. condom	6. female sterilization 7. male sterilization 8. spermicidal 9.natural method 10. other specify
303	if the answer to ques 301 is yes, are you currently using a method?	1. yes 2. no	3. don't know 4. no response
304	if the answer to ques 303 is yes, which method are you using? tick all the mentioned methods.	1. pill 2. implant(norplnt) 3. injectables 4. IUCD 5. condom	6. female sterilization 7. male sterilization 8. spermicidal 9.natural method 10. other specify
305	if the answer to ques to 303 is yes, for what purpose you are using the method?	1. spacing birth 2. limiting	3. do not know 4. other specify
306	if the answer to ques 301 is yes & to ques 303 is no, what was the main reasons that you stopped using contraceptive method? tick all mentioned.	1. fear of side effect 2. fear of infertility 3. medical problem 4. preferred method is not available	5. desire to have more children 6. little risk of pregnancy 7. unacceptable in my culture 8. religion prohibition 9. other specify...
307	would you say that using contraception is mainly your decision, or your wif's decision, or did you both decide together?	1. mainly respondent's 3. joint decision	2. manly wife's 4. other
308	time taken to travel to the source of contraceptive methods?	1. _____ minutes 3. no response	2. i don't know

Parti v. attitudes towards contraceptives

Part v. Knowledge about contraceptives

ques no	question	Choice of answer
501	have you ever heard of family planning	1. yes 2. no 3. i don't remember 4. no response
502	do you know any way or methods that women and men can use to delay or avoid pregnancy?	1. yes 2. no 3. no response
503	if the answer to question no 502 is yes, which of the following contraceptive methods do you know about?[read and thick all mentioned methods]	a. pill b. IUCD c. injectables d. implant [norplant] e. condom f. female sterilization g. male sterilization h. spermicidal i. natural method j. other specify
504	do you think it is possible to obtain this method?	1. yes 2. no 3. i don't know 4. no response
505	where is the main places that you or other women are able to get modern contraceptives from?(thick all mentioned)	1. hospital 2. health center 3. health station 4. shop 5. FGAE cilinic 6. pharmacy/drug vender 7. private cilinic 8. other specify
506	which advantage of contraceptive methods do you know of?(thick all mentioned)	1. avoid unwanted pregnancy 2. to delay mistimed pregnancy 3. regulation of period 4. to limit family size 5. to prevent STI 6. other specify
507	how do you think oral contraceptive pills should be taken to prevent unintended pregnancy?	1. one pill daily from one menstrual cycle to the next 2. one pill every other day 3. one pill following intercourse 4. don't know
508	how, do you think, inject-able contraceptive Should be taken to prevent unintended pregnancy?	1. one injection every three months during menstruation 2. one injection every 6 months 3. one injection following sexual intercourse 4. don't know

509	suppose we compare usage of pills and pregnancy, do you think pills usage is more harmful to women's health than pregnancy, equally harmful, or less harmful?	1. pills are more harmful 2. equally harmful	3. pills less harmful 4. don't know 5. no response
510	which is the best way, do you think, for married couples in the reproductive age to prevent unwanted or mistimed pregnancy?	1. usage of modern contraceptives 2. use natural methods [periodic abstinence. withdrawal]	3. don't know 4. no response
511	what is the your source of information about family planning? tick all mentioned	1. Health workers 2. Radio 3. TV	4. friends 5. news papers 6. other specify...
512	Do you have radio or TV in your house?	1. Radio 2. TV only	3. both Radio and TV 4. none

End of the interview.

Thank you very much.

Questionnaires II For husbands.Part i, demographic & socio-economic characteristics

Ques no	Question	Choice of answers
101	address	write the code...
102	age	1. _____yr 2. i don't know exactly 3. no respons
103	sex	m
104	Religion	1. islam 2. orthodox 3. protestant 4. catolic 5. others(specify)
105	ethnicity	1. oromo 2. harari 3. amhara 4. tigreia 5. guragea 6. others(specify)
106	educational status	1. don't write & read 2. read & right 3. completed grade 1-6 4. completed grade 7-12 5. higher education
107	occupation	1. merchant 2. daily laborer 3. govern employee 4. jobless 5. others(specify)
108	monthly income (of husband only)	1. ___ birr in month 2. i don't know exactly 3. un willing to respond
109	if you compare your monthly income with your neighbors, where you put your economic status	1. very poor 2. poor 3. medium 4. rich 5. i can't say 6. no response

Part ii. Reproductive history

	Questions	Choice of answer	Skip to ques
201	at what age did you first married?	1. at the age of _____ 3. no response 2. i don't remember	
202	have ever child born to you?	1. yes 3. no response 2. no.....	..206
203	if answer to ques no_202 is yes, how old were you when the first child born to you?	1. _____yr 3. no response 2. i don't remember	
204	if answer to ques no_202 is yes, how many live children do you have?	1. enter no _____ a. sons _____ b. daughters _____ 2. i don't know exactly 3. no response	
205	if you could go back to the time you don't have children & could choose exactly the number of children to have in your life, how many children could that be?	1. enter no. _____ 2. i don't know 3. no response	
206	how many children would you like to have in your life? (for those who do not have children)	1. enter no. _____ 2. not yet decided 3. no response	
207	is your wife currently pregnant?	1. yes. 2. no..... 3. i am not sure..... 4. no response.....	..209 ..209 ..209
208	if the answer to ques no_207 is yes, is the pregnancy.....?	1. wanted now 2. wanted later..... 3. not wanted at all..... 4. no response.....	..212 ..211 ..211 ..213
209	did your wife give birth within the last six months?	1. yes. 2. no..... 3. no response.....	..222 ..222
210	if the answer to ques 209 is yes, did the birth that occurred within the last six months..... ?	1. wanted then..... 2. wanted later..... 3. not wanted at all... 4. no response.....	..212 ..211 ..211 ..214
211	if your wife has been pregnant or gave birth within the last six month, when you (and your wife) do not want to, what were the main reasons that she could not avoid becoming pregnant? tick all mentioned.	1. lack of awareness about contraceptive methods. 2. poor access to contraceptives 3. wife disapproval. 4. contraceptive failure 5. little perceived risk of pregnancy 6. religion prohibition	

212	time since the birth of your last child (for husbands whose wife is currently pregnant or gave birth within the last six months and reported that current pregnancy or birth that occurred within the last 6 months is wanted)	1. _____ months 2.i don't remember 3. no response	
213	after the birth of the child your wife is expecting now, would you like to have another child or not to have any more children?	1. have a child..... 2. have no more children..... 3. not yet decided..... 4. no response.....	..215 ..217 ..217 ..217
214	after the birth that occurred within the last 6 months would you like to have another child or not to have any more children?	1. have a child..... 2. have no more children..... 3. not yet decided..... 4. no response.....	..216 ..218 ..218 ..218
15	if you preferred to have another child, how long would you like to wait before the birth of another child?	1. ≤ 2 yr. 2. > 2 yr. 3. not yet decided..... 4. no response.....	..217 ..217 ..217
216	if you preferred to have another child, how long would you like to wait before the birth of another child?	1. ≤ 2 yr. 2. > 2 yr. 3. not yet decided..... 4. no response.....	..218 ..218 ..218
217	with in a year after the birth of the child your wife is expecting now, will you use modern contraceptive? (for husband whose wife is pregnant)	1. yes..... .2. no..... 3. not yet decided 4. no response	..219 ..224
218	with in a year after the birth of your child that occurred within the last six months, will you use modern contraceptive? (for husband whose wife gave birth within the last six months)	1. yes..... 2. no..... 3. no yet decided 4. no response	..220 ..224
219	if the answer ques no 217 was yes, for what purpose	1. for spacing226

	would you like to use the contraceptive method?	2. for limiting.....	..226
		3. i don't know.....	..226
		4. no response.....	..226
220	if the answer ques no 218 was yes, for what purpose	1. for spacing.....	..226
	would you like to use the contraceptive method?	2. for limiting226
		3. i don't know.....	..226
		4. no response.....	..226

qus no	Questions	Choice of answer	Skip to qus
221	if your wife is not currently pregnant or didn't give birth within the last six months or failed to respond if your wife is currently pregnant or gave birth since 6 months, would you like to have another child or not to have any more children?	1. have another child 2. have no more children..... 3. no yet decided..... 4. no response.....	..223 ..223 ..223
222	if the answer to ques no 221 is choice 1, how long would you like to wait from now before the birth of another child?	1. ≤ 2 yr 2. > 2 yr 3. not yet decided..... 4. no response.....	..223 ..223 ..223
223	would you intend to use modern contraceptive within 12 months from now?	1. yes..... 2. no..... 3. not yet decided..... 4. no response.....	..225 ..224 ..227 ..227
224	if you are not going to use modern contraceptives would you tell the main reasons? Tick all mentioned.	1. fear of side effect 2. not aware of contraceptive 3. no preferred method 4. little pregnancy risk(H or /& W) 5. to have more children 6. wife disapproval 7. other	227
225	if the answer ques no 223 was yes, for what purpose would you like to use the contraceptive method?	1. for spacing 2. for limiting..... 3. i don't know..... 4. no response.....	
226	which method would you like to use? tick all mentioned	1. pill 2. implant(norplnt) 3. injectables 4. IUCD 5. condom 6. female sterilization 7. male sterilization 8. spermicidal 9.natural method 10. other specify	
227	have your wife ever experienced a pregnancy terminated with abortion?	1. yes 2. no 3. other	
228	if the answer to question no 227 is yes, how many times?	1. wright the no _____ 2. i don't remember 3. no response	

Part iii practice of C.P

Ques no	Questions	Choice of answer
301	have you ever used modern contraceptives?	1. yes 2. no 3. i don't remember 4. no response
302	if the answer to ques 301 is yes, what are the methods you used? Tick all mentioned.	1. pill 2. implant(norplnt) 3. injectables 4. IUCD 5. condom 6. female sterilization 7. male sterilization 8. spermicidal (foaming tabs, jelly) 9.natural method (abstinence,withdrawal) 10. other specify
303	if the answer to ques 301 is yes, are you currently using a method?	1. yes 2. no 3. don't know 4. no response
304	if the answer to ques 303 is yes, which method are you using? tick all the mentioned methods.	1. pill 2. implant(norplnt) 3. injectables 4. IUCD 5. condom 6. female sterilization 7. male sterilization 8. spermicidal (foaming tabs, jelly) 9.natural method (abstinence,withdrawal) 10. other specify
305	if the answer to ques to 303 is yes, for what purpose you are using the method?	1. spacing birth 2. limiting 3. do not know 4. other specify
306	if the answer to ques 301 is yes & to ques 303 is no, what was the main reasons that you stopped using contraceptive method? tick all mentioned.	1. fear of side effect 2. fear of infertility 3. medical problem 4. preferred method is not available 5. desire to have more children 6. little risk of pregnancy 7. unacceptable in my culture 8. religion prohibition 9. other specify...
307	would you say that using contraception is mainly your decision, or your wif's decision, or did you both decide together?	1. mainly respondent's 2. manly wife's 3. joint decision 4. other
308	time taken to travel to the source of contraceptive methods?	1. ____ minutes 2. i don't know 3. no response

Part iv, attitude to wards modern contraceptives.

Ques no	questions	Choice of answer	Skip to ques no
401	would you like to know more about contraceptive methods?	1. yes 2. no 3. other	
402	do your self approve or disapprove of couples using methods of family planning?	1. approve..... 2. disapprove. 3. no response.....404404
403	if the answer to question no 402 is choice 2, why? tick all mentioned.	1. religious prohibition 2. culture do not allow 3. fear of side effect 4. medical problem 5. desire for more children 5. other specify....	
404	have you discussed about contraception with your wife within the last one-year?	1. yes 2. no 3. don't remember 4. other	
405	if the answer to ques no 404 is yes, how many times have you discussed within the last six months?	1. once 4. more than three times 2. twice 5. don't remember exact no 3. three times 6. no response	
406	what is your wife's attitude to wards contraceptive methods?	1. approve 2. disapprove 3. no response 4. do not know	
407	do you know if your wife is using or not using any modern contraceptive currently?	1. yes 2. no 3. i am not sure 4. other	
408	does your wife know if you are using or not using any modern contraceptives?	1. yes 2. no 3. i am not sure 4. other	

part v, knowledge about modern contraceptives.

Qus no	question	Choice of answer
501	have you ever heard of family planning	1. yes 2. no 3. i don't remember 4. no response
502	do you know any ways or methods that women and men can use to delay or avoid pregnancy?	1. yes 2. no 3. no response
503	if the answer to question no_502 is yes, which of the following contraceptive methods do you know about?[read and thick all mentioned methods]	a. pill b. IUCD c. injectables d. implant [norplant] e. condom f. female sterilization g. male sterilization h. spermicidal i. natural method (abstinence, withdrawal) j. other specify
504	do you think it is possible to obtain this method?	1. yes 2. no 3. i don't know 4. no response
505	where is the main places that you or other women are able to get modern contraceptives from?(thick all mentioned)	1. hospital 2. health center 3. health station 4. shop 5. FGAE cilinic 6. pharmacy/drug vender 7. private cilinic 8. other specify
506	which advantage of contraceptive methods do you know of?(thick all mentioned)	1. to avoid unwanted pregnancy 2. to delay mistimed pregnancy 3. regulation of period 4. to limit family size 5. to prevent STI 6. other specify
507	how do you think oral contraceptive pills should be taken to prevent unintended pregnancy?	1. one pill daily from one intercourse menstrual cycle to the next 2. one pill every other day 3. one pill following 4. don't know 5. other specify

508	how, do you think, inject-able contraceptive Should be taken to prevent unintended pregnancy?	1. one injection every three months during menstruation 2. one injection every 6 months	3. one injection sexual intercourse 4. don't know 5. other
509	suppose we compare usage of pills and pregnancy, do you think pills usage is more harmful to women's health than pregnancy, equally harmful, or less harmful?	1. pills are more harmful 2. equally harmful	3. pills less harmful 4. don't know 5. no response
510	which one is the best way, do you think, for married couples in the reproductive age to prevent unwanted or mistimed pregnancy?	1. usage of modern contraceptives 2. use natural methods [periodic abstinence. withdrawal]	3. don't know 4. no response
511	what is the your source of information about family planning? tick all mentioned	1. Health workers 2. Radio 3. TV	4. friends 5. news papers 6. other specify...
512	Do you have radio or TV in your house?	1. Radio 2. TV only	3. both Radio and TV 4. none 5. unwilling to respond

End of the interview.

Thank you very much.

Annex 2. The data collection instrument. Amharic version.

በአዲስ አበባ ዩኒቨርሲቲ

ህክምና ፋኩሊቲ የህብረተሰብ ጤና ክፍል

ይህ መጠይቅ በሀረር ከተማ ያለውን የቤተሰብ ምጣኔና የወሊድ መቆጣጠሪያ ዘዴ አገልግሎት ፍላጎት እጥረት መጠንን በጥንድ ባለትዳሮች፣ እድሜአቸው ከ15-49 ባሉ ሚስቶችና፣ በባሎች ውስጥ(መከከል) ያለውን ለማውቅና ለመወሰን የተዘጋጀ ጥናት ነው።

መለያ

ቀበሌ ----- የቤት ቁጥር----- የመጠይቁ መለያ ቁጥር-----

ቃል መጠይቁ ከመካሄዱ በፊት የተሳታፊዎች ፍቃደኝነትን መጠየቂያ ቅጽ:

ሰላምታ: እንደምን አሉ? እኔ አቶ/ወሮ/ወራት-----እባላለሁ:አዚህ የመጣሁት

ይህንን ጥናት የሚያከሂዱት በአዲስ አበባ ዩኒቨርሲቲ የህብረተሰብ ጤና ክፍል ቡድን አባል ሆኜ ነው።

ከዚህ በመቀጠል የቤተሰብ ምጣኔና የወሊድ መቆጣጠሪያ ዘዴ አገልግሎትን በተመለከተ የተወሰኑ ጥያቄዎችን

ልጠይቅ እወዳለሁ: ከእርስዎ የሚገኘው መልስ የቤተሰብ ምጣኔና የወሊድ መቆጣጠሪያ ዘዴ አገልግሎት

ጥራትና የስርጭቱን ሽፋን ለማሻሻል ከፍተኛ እገዛ ይኖረዋል።

ከእርስዎ የምናገኘውን ማንኛውንም መልስ በሚስጠኑ እንጠብቃለን: ከዚህ ጥናት ጋር በተያያዘ በማናቸውም

ቦታና ጊዜ ስምዎ እንደማይመዘገብና እንደማይጠቀስ ልንገልጽልዎ እንወዳለን: በጥናቱ የምናሳትፎት የርስዎን

ሙሉ ፍቃደኝነት ስናገኝ ብቻ ነው: በመጠይቁ ላለመሳተፍ ወይም በመጠይቁ ሂደት ሊመልሱት የማይፈልጉትን

ጥቂዎች ያለመመለስ መብትዎ የተጠበቀ ነው።

በመጠይቁ ለመሳተፍ ፍቃደኛ ናት?

1. አዎን: ፍቃደኛ ነኝ: ፊርማ----- መጠይቁ ይቀጥላል:

2. የለም: ፍቃደኛ አይደለሁም: ወደ ሌላ ተሳታፊ ቤት መሸጋገር

የመረጃ(ዳታ) ሰብሳቢው ስም----- ፊርማ-----

መጠይቁ የተሞላበት ቀን-----

የተቆጣጣሪው ስም----- ፊርማ-----

ይህ መጠይቅ በጥንድ ባለትዳሮች(ሚስት እድሜዎ 15-49 አመት መካከል ብቻ) ና ከዚህ በፊት የወሊድ መቆጣጠሪያ ዘዴን ያልተጠቀሙ የተጠቀሙ ወይም እየተጠቀሙ ላሉ የቀረበ ነው። ከተሰጠው አማራጭ መልሶች ትክክለኛው መልስ ይከበብ ወይም ትክክለኛው መልስ ይሞላ።

ለሴት ባለትዳሮች የቀረበ መጠይቅ:

ክፍል አንድ: ማህበራዊ ስነምግባርና ኢኮኖሚያዊ ገጽታዎችን በሚመለከት

ተ.ቁ	ጥያቄ	አማራጭ መልሶች
101	እድራሻዎ የት ነው?	ኮድ ከነ ቀበሌው.....
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222	ለጥያቄ ቁጥር 220 መልሱ ምርጫ 1 ከሆነ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ሊጠቀሙ ያሰቡት አራርቆ ለመውለድ ነው ወይስ የቤተሰብ ቁጥርን ለመወሰን ነው?	1. ልጄን አራርቆ ለመውለድ..... 2. የቤተሰብ ቁጥርን ለመወሰን..... 3. አላውቀውም..... 4. ለመመለስ ፍቃደኛ አይደለሁም.....	...228 ...228 ...228 ...228

	ነው?		
223	በአሁኑ ጊዜ እርጉዝ ከልሆኑ ወይም ባለፈው 6 ወር ውስጥ አራስ ከልነበሩ ወይም ይህንን ገዳዮች ለመግለጽ ፍቃደኛ ከልሆኑ፤ ተጨማሪ ልጅ እንዲኖራት ይፈልጋሉ ወይስ ይበቃዎታል?	1. ሌላ ልጅ መውለድ እፈልጋለሁ..... 2. ይበቃኛል..... 3. ገና አልወሰንኩም..... 4. ለመመለስ ፍቃደኛ አይደለሁም.....	...224 ...225 ...225 ...225
224	ምን ያህል ጊዜ መቆየት ይፈልጋሉ የሚቀጥለውን ልጅ ከመውለድ በፊት?	1. ከሁለት አመት ያነሰ..... 2. ከሁለት አመት በላይ..... 3. ገና አልወሰንኩም..... 4. ለመመለስ ፍቃደኛ አይደለሁም.....	...229 ...225 ...225 ...225
225	ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ከአሁን ጀምሮ በሚቀጥለው 12 ወር ውስጥ ይጠቀማሉ?	1. አዎ..... 2. አልጠቀምም..... 3. ገና አልወሰንኩም..... 4. ለመመለስ ፍቃደኛ አይደለሁም.....	...227 ...226 ...229 ...229
226	ዘመናዊ የወሊድ መቆጣጠሪያ አልጠቀምም ከሉ ምክንያቶቹን ይነግሩኛል? (እንደምክንያት የተጠቀሱ ሁሉ ይከበቡ)	1. ስለ ሁኔታው ግንዛቤ ስለሌለኝ 2. የጤና ችግር ያስከትላል 3. ሌላ የጤና ችግር ስላለብኝ 4. የምፈልገውን አይነት የመከላከያ ዘዴ ባለማግኘጥ	5. ተጨማሪ ልጆችን 6. የባለቤተ (229) 7. መውለድ ስለማልችል 8. ሌላ ከለ ይጠቀስ
227	ለጥያቄ ቁጥር 225 መልሱ ምርጫ 1 ከሆነ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን የሚጠቀሙት አራርቆ ለመውለድ ነው ወይስ የቤተሰብ ቁጥርን ለመወሰን ነው?	1. ልጄን አራርቆ ለመውለድ 2. የቤተሰቤን ቁጥር ለመወሰን 3. አላውቀውም 4. ለመመለስ ፍቃደኛ አይደለሁም	
228	ከዘመናዊ የወሊድ መቆጣጠሪያ ዘዴዎች የትኛውን መጠቀም ይፈልጋሉ? (የተጠቀሱ ሁሉ ይከበቡ)	1. በአፍ የሚዋጥ ኪኒን ማስቆረጥ 2. በመሀጸን የሚቀመጥ ቧንቧን 3. በመርፌ ጠሚሰጥ 4. በክንድ የሚቀበር	6. የሴት መሀጸን አሽንዳ 7. የወንድ ዘር መተላለፊያ ማስቆረጥ 8. አረፋማ ኪኒን 9. ተፈጥሯዊ የወሊድ ቁጥጥር

		ዘዴ 5. ኮንዶም 10. ሌላ ክል ይጠቀስ.....	
229	ከዚህ በፊት ፅንሰ አስወርዶት ያውቃል?	1. አዎ አላስታውሰውም 2. አላጋጠመኝም አይደለም	3. በርግጠኝነት 4. ለመመለስ ፍቃደኛ
230	ለ ጥያቄ 229 መልሱ ምርጫ 1 ከሆነ ስንት ጊዜ ነው ያስወረደት?	1.ጊዜ አይደለም 2. አላስታውሰውም	3. . ለመመለስ ፍቃደኛ

ክፍል ሶስት: ዘመናዊ የወሊድ መቆጣጠሪያን አጠቃቀምን በተመለከተ

ተ ቁ	ጥያቄ	አማራጭ መልሶች
301	ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ተጠቅመው ያውቃሉ?	1. አዎ አውቃለው 2. ተጠቅሜ አላውቅም 3. አላስታውስም 4. ለመመለስ ፍቃደኛ አይደለም
302	የጥያቄ ቁጥር 301 መልሱ ምርጫ 1 ከሆነ የትኞቹን የወሊድ መቆጣጠሪያ ዘዴዎችን ነው የተጠቀሙት? (የተጠቀሱት ሁሉ ይከበቡ)	1. በአፍ የሚዋጥ ኪኒን 2. በመሀጸን የሚቀመጥ 4. በመርፌ የሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም 6. የሴት መሀጸን አሸንዳ ማስቆረጥ 7. የወንድ ዘር መተላለፊያ ቧንቧን ማስቆረ 8. አረፋማ ኪኒን 9. ተፈጥሯዊ የወሊድ ቁጥጥር ዘዴ 10. ሌላ ክል ይጠቀስ.....
303	በአሁኑ ጊዜ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን እየተጠቀሙ ነው?	1. አዎ እየተጠቀምኩ ነው 2. ዬለም እየተጠቀምኩ አይደለም 3. ለመመለስ ፍቃደኛ አይደለም
304	የጥያቄ ቁጥር 303 መልሱ ምርጫ 1 ከሆነ የትኞቹን የወሊድ መቆጣጠሪያ ዘዴዎችን ነው እየተጠቀሙ ያሉት? (የተጠቀሱት ሁሉ ይከበቡ)	1. በአፍ የሚዋጥ ኪኒን 2. በመሀጸን የሚቀመጥ 4. በመርፌ የሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም 6. የሴት መሀጸን አሸንዳ ማስቆረጥ 7. የወንድ ዘር መተላለፊያ ቧንቧን ማስቆረ 8. አረፋማ ኪኒን 9. ተፈጥሯዊ የወሊድ ቁጥጥር ዘዴ 10. ሌላ ክል ይጠቀስ.....
305	የጥያቄ ቁጥር 303 መልሱ ምርጫ 1 ከሆነ ለምን አላማ ነው እየተጠቀሙበት ያሉት?	1. ልጅን አራርቆ ለመውለድ 3. አላውቀውም 2. የቤተሰቤን ቁጥር ለመወሰን 4. ለመመለስ ፍቃደኛ አይደለም
306	የጥያቄ ቁጥር 301 መልሱ ምርጫ 1 ከሆነና የ ጥያቄ ቁጥር 303 መልሱ ምርጫ 2 ከሆነ ዘመናዊውን የወሊድ መቆጣጠሪያ ዘዴን መጠቀም ያቆሙበት ምክንያቶቹ ምንድን ናቸው? (የተጠቀሱት ሁሉ ይከበቡ)	1. መከላከያው ችግር ያስከትላል በሚል ፍራቻ 2. መከን እንዳያደርግ ፍራቻ 3. በጤና ችግር ምክንያት 4. የምፈልገው አይነት የወሊድ መቆጣጠሪያ ዘዴ ባለመኖሩ 5. ልጅ ለመውለድ 6. ማርገዝ ስለማልችል 7. ባህሌ ስለማይፈቅድልኝ 8. ሀይማኖተ ስለማይፈቅድል 9. ሌላ ክል ይጠቀስ
307	የዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን	1. የራሴ 2. የባለቤተ

	መጠቀም ወይም አለመጠቀም ውሳኔ የማን ነው? የርሶ፣ የባለቤቱ ወይስ የጋራዎ?	3. የጋራችን	4. መልስ ይለም
308	የወሊድ መከላከያ ዘዴን በአሁኑ ጊዜ እየተጠቀሙ ከሆነ ከቦታው ለማምጣት ምን ያህል ጊዜ ይፈጅቦታል?	1.ደቂቃ 3. ለመመለስ ፍቃደኛ አይደለሁም	2. አላውቀውም

ክፍል አራት: ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ዝንባሌን በተመለከተ

ተ.ቁ	ጥያቄ	አማራጭ መልሶች	ወደጥያቄ ቁ ይለፉ
401	ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ የበለጠ ማወቅ ይፈልጋሉ?	1. አዎ 2. አልፈልግም 3. ለመመለስ ፍቃደኛ አይደለሁም	
402	እርሶ ሌሎች ጥንድ ባለትዳሮች ዘመናዊ የወሊድ መቆጣጠሪያ መጠቀማቸውን ይደግፋሉ?	1. አዎ? 2. ይላም አልደግፍም 3. ለመመለስ ፍቃደኛ አይደለሁም404404
403	የጥያቄ ቁጥር 402 መልሱ ምርጫ 2 ከሆነ ምክንያቶቹ ምንድናቸው? የተጠቀሱት ሁሉ ይከበቡ	1. ሀይማኖት ስለማይፈቅድ 2. በጤና ላይ ችግር ስለሚያስከትል 3. ሌላ የጤና ችግር ከለባቸው 4. ተጨማሪ ልጅ እንዲወልዱ 5. ሌላ ከለ ይጠቀስ	
404	ባለፉት ስድስት ወራት ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ከባለቤቱ ጋር ተወያይተው ያውቃሉ?	1. አዎ 2. ይላም አልተወያየንም 3. አላስታውስም 4. ለመመለስ ፍቃደኛ አይደለሁም	
405	ለጥያቄ ቁጥር 404 መልሱ አዎ ከሆነ ስንት ጊዜ ነው የተወያየችሁት?	1. አንድ ጊዜ 2. ሁለት ጊዜ 3. ሶስት ጊዜ 4. ከሶስት ጊዜ በላይ 5. አላስታውስም 6 ለመመለስ ፍቃደኛ አይደለሁም	
406	ባለቤቱ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ መጠቀምን ይደግፋሉ?	1. ይደግፋል 2. አይደግፍም 3. አላውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም	

407	ባሎ የርሶን ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ መጠቀሙን ወይም አለመጠቀሙን ያውቃሉ?	1. አዎን ያውቃል 3. አላውቅም	2. ዬሰም አያውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም	
408	ባሎ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ መጠቀማቸውን ወይም አለመጠቀማቸውን እርሶ ያውቃሉ?	1. አዎን አውቃለሁ 3. አላውቅም	2. ዬሰም አላውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም	

ክፍል አምስት: ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ግንዛቤን በተመለከተ

ተ.ቁ	ጥያቄ	አማራጭ መልሶች	
501	ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ስምተው ያውቃሉ?	1 አዎ 2. ስምቼ አላውቅም	3. አላስታውሰውም 4. ለመመለስ ፍቃደኛ አይደለሁም
502	አንድም አይነት ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ያውቃሉ?	1 አዎ 2. ዬሰም አላውቅም	3. ለመመለስ ፍቃደኛ አይደለሁም
503	የጥያቄ ቁጥር 502 መልሱ አዎ ከሆነ የትኞቹን ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴዎችን ያውቃሉ? (የተጠቀሱትን ሁሉ ይከበቡ)	1. በአፍ የሚዋጥ ኪኒን 2. በመሀጸን የሚቀመጥ 4. በመርፌ ጠሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም	6. የሴት መሀጸን አሸንፎ ማስቆረጥ 7. የወንድ ዘር መተላለፊያ ቧንቧን ማስቆረጥ 8. አረፋማ ኪኒን 9. ሌላ ከለ ይጠቀስ.....
504	ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ለማግኘት ይቻላል ብለው ያስባሉ?	1 አዎ ይቻላል 3. አላውቅም	2. አይቻልም 4. ለመመለስ ፍቃደኛ አይደለሁም
505	የዘመናዊ ወሊድ መቆጣጠሪያን እርሶም ሆኑ ሌሎች እንደ እርሶ ያሉ ከየት ነው የሚያገኙት? (የተጠቀሱትን ሁሉ ይከበቡ)	1. ሆስፒታል 2. ጤና ጣቢያ 3. ጤና ኬላ 4. መደብር	5. ቤተሰብ መምሪያ ኪ.ሲ.ኒክ 6. ፋርማሲ 7. የግል ኪ.ሲ.ኒክ 8. ሌላ ከለ ይጠቀስ
506	ምን አይነት ጥቅሞች ከዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ እንደሚገኝ ያውቃሉ?	1. ያልተፈለገ እርግዝናን ለመከላከል 2. ባልተፈለገ ጊዜ የሚመጣን	4. የቤተሰብ ቁጥርን ለመወሰን 5. የአባላዎች በሽታን ለመከላከል

	(የተጠቀሱትን ሁሉ ይክበቡ)	እርግዝናን ለማዘግየት 3. የወር አበባን ለመቆጣጠር	6. ሌላ ክለ ይጠቀስ.....
507	ያልታቀደ እርግዝናን ለመከላከል በአፍ የሚዋጠው የወሊድ መቆጣጠሪያ ኪኒን እንዴት መወሰድ አለበት ብለው ያስባሉ?	1. አንድ ኪኒን በየቀኑ ከአንድ የወር አበባ ኡደት እስከ ሚቀጥለው የወር አበባ ኡደት 2. አንድ ኪኒን በየሁለት-ቀኑ	3. አንድ ኪኒን ከገብግረ ስጋ ግኑኝነት በኋላ 4. አላውቅም 5. ሌላ ክለ ይጠቀስ.....
508	ያልታቀደ እርግዝናን ለመከላከል በመርፌ የማሰጠው የወሊድ መቆጣጠሪያ እንዴት መወሰድ አለበት ብለው ያስባሉ?	1. አንድ መርፌ በየ ሰባት ወሩ በወር አበባ ጊዜ 2. አንድ መርፌ በየ 6 ወሩ	3. አንድ መርፌ ከገብግረ ስጋ ግኑኝነት በኋላ 4. አላውቀውም 5. ሌላ ክለ ይጠቀስ.....
509	በአፍ የሚወሰደው ኪኒንን ከእርግዝና ጋር ሲወዳደር የበለጠ እኩል ወይስ ያነሰ ጎጂ ነው ብለው ያስባሉ?	1. ኪኒኑ የበለጠ ጎጂ ነው 2. ኪኒኑ እኩል ጎጂ ነው 5. ለመመለስ ፍቃደኛ አይደለሁም	3. ኪኒኑ ያነሰ ጎጂ ነው 4. አላውቅም
510	ለጥንድ ባለትዳሮች ያልተፈለገ ወይም ያለጊዜው የሚመጣ እርግዝናን ለመከላከል የትኛው መንገድ የበለጠ ጥሩ ነው ብለው የሚያስቡት?	1. ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ 2. ተፈጥሮአዊ የወሊድ መቆጣጠሪያ ዘዴ	3. አላውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም
511	ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ የሰሙት ክፍት ነው?(የተጠቀሱትን ሁሉ ይክበቡ)	1. ከጤና ባለሙያ 2. ከራዲዮ 3. ከ ቲ.ቪ	4. ከጓደኛ 5. ከጋዜጣ 6. ሌላ ክለ ይጠቀስ.....
512	በቤቶ ውስጥ ራድዮ ወይም ቲ.ቪ አሉት?	1. ራዲዮ አለኝ 2. ቲ.ቪ አለኝ 5. ለመናገር ፍቃደኛ አይደለሁም	3. ራዲዮም ቲ.ቪም አለኝ 4. አንዱም ይሉኝም

የመጠይቁ መጨረሻ

በጣም አመሰግናታለሁ

ይህ መጠይቅ በጥንድ ባለትዳሮች(ሚስት እድሜዋ 15-49 አመት መካከል ብቻ) ና ከዚህ በፊት የወሊድ መቆጣጠሪያ ዘዴን ያልተጠቀሙ የተጠቀሙ ወይም እየተጠቀሙ ላሉ የቀረበ ነው። ከተሰጠው አማራጭ መልሶች ትክክለኛው መልስ ይከበብ ወይም ትክክለኛው መልስ ይሞላ።

ለ ወንድ ባለትዳሮች የቀረበ መጠይቅ:

ክፍል አንድ: ማህበራዊ ስነምግባርና ኢኮኖሚያዊ ገጽታዎችን በሚመለከት

ተ.ቁ	ጥያቄ	አማራጭ መልሶች
101	አድራሻዎ የት ነው?	የመለያው ኮድ.....
102	እድሜዎ ስንት ነው?	1.አመት 2. በትክክል አላውቀውም 3. ለመግለጽ ፍቃደኛ አይደለሁም
103	ጾታ	ወንድ
104	የትኛው ሀይማኖት ተከታይ ኖት?	1. ኢስላም 2. ኦርቶዶክስ 3. ፕሮተስታንት 4. ናቶሊክ 5. ሌላ ከለ ይጠቀስ.....
105	የትኛው ብሄር/ብሄረሰብ ተወላጅ ኖት?	1. ኦሮሞ 2. ሀረሪ 3. አማራ 4. ቲግራይ 5. ጉራገ 6. ሌሎች ከሉ ይጠቀስ.....
106	የትምህርት ደረጃዎን ይገልጹልኛል?	1. መፃፍና ማንበብ የማይችል 2. መፃፍና ማንበብ ብቻ የሚችል 3. ከ1-6 ክፍልን ያጠናቀቀ 4. ከ7-12 ክፍልን ያጠናቀቀ 5. ከፍተኛ ትምህርት ያጠናቀቀ

	እንድኖርት ይፈልጉ ነበር	3. ለመልሱ ፍቃደኛ አይደለሁም	
206	በሀይወቶ ስንት ልጆች እንድኖርት ይፈልጋሉ? (ምንም ልጅ ስለላቸው)	1. ቁጥሩን የጻፉ..... 2. ገና አልወሰንኩም 3. ለመግለጽ አልፈልግም	
207	አሁን ባለቤቱ ነፍሱ ጠር ናቸው?	1. አዎን 2. አይደለችም..... 3. እርግጠኛ አይደለሁም..... 4. ለመግለጽ ፍቃደኛ አይደለሁም.....	...209 ...209 ...209
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225	ዘመናዊ የወሊድ መቆጣጠሪያን የሚጠቀሙት ኣራርቆ ለመውለድ ነው ወይስ የቤተሰብን ቁጥር ለመወሰን ነው?	1. ልጅን ኣራርቆ ለመውለድ..... 2. የቤተሰብን ቁጥር ለመወሰን..... 3. ኣላውቀውም..... 4. ለመልሱ ፍቃደኛ ኣይደለሁም.....	...226 ...226 ...226 ...226
226	ከዘመናዊ የወሊድ መቆጣጠሪያ ዘዴዎች የትኛውን መጠቀም ይፈልጋሉ? (የተጠቀሰው ሁሉ ይክበብ)	1. በኣፍ የሚዋጥ ኪኒን 2. በመሀጸን የሚቀመጥ 4. በመርፌ ጠሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም 6. የሴት መሀጸን ኣሸንዳ ማስቆረጥ 7. የወንድ ዘር መተላለፊያ ቧንቧን ማስቆረጥ: 8. ኣረፋማ ኪኒን 9. ተፈጥሯዊ የወሊድ ቁጥጥር ዘዴ 10. ሌላ ክስ ይጠቀሱ.....	
227	ከዚህ በፊት ባለቤቱን ፅንስ ኣስወርዶኣቸው ያውቃል?	1. ኣዎ 2. ኣላጋጠማትም 3. በርግጠኝነት ኣላስታውሰውም 4. ለመመለስ ፍቃደኛ ኣይደለሁም	
228	ለ ጥያቄ 227 መልሱ ምርጫ 1 ከሆነ ስንት ጊዜ ነው ያስወረደቸው?	1.ጊዜ 2. ኣላስታውስም 3. ለመመለስ ፍቃደኛ ኣይደለሁም	

ክፍል ሶስት: ዘመናዊ የወሊድ መቆጣጠሪያን ኣጠቃቀምን በተመለከተ

ተ.ቁ	ጥያቄ	አማራጭ መልሶች
301	ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ተጠቅመው ያውቃሉ?	1. ኣዎ 2. የለም ተጠቅሜ ኣላውቅም 3. ኣላስታውስም 4. ለመመለስ ፍቃደኛ ኣይደለሁም
302	የጥያቄ ቁጥር 301 መልሱ ኣዎ ከሆነ የትኛውን የወሊድ መቆጣጠሪያ ዘዴዎችን ነው የተጠቀሙት? (የተጠቀሱትን ሁሉ ይክበቡ)	1. በኣፍ የሚዋጥ ኪኒን 2. በመሀጸን የሚቀመጥ 4. በመርፌ የሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም 6. የሴት መሀጸን ኣሸንዳ ማስቆረጥ 7. የወንድዘር መተላለፊያ ቧንቧን ማስቆረጥ 8. ኣረፋማ ኪኒን 9. ተፈጥሯዊ የወሊድ ቁጥጥር ዘ 10. ሌላ ክስ ይጠቀሱ.....
303	በኣሁኑ ጊዜ ዘመናዊ የወሊድ መቆጣጠሪያ	1. ኣዎ እየተጠቀምኩ ነው 2. የለም እየተጠቀምኩ ኣይደለሁ!

	ዘዴን እየተጠቀሙ ነው?	3. ለመልሱ ፍቃደኛ አይደለህም
304	የጥያቄ ቁጥር 303 መልሱ ምርጫ 1 ከሆነ የትኛውን ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴዎችን ነው እርሶም ሆኑ ባለቤቶች እየተጠቀሙ ያሉት? (የተጠቀሱትን ሁሉ ይከበቡ)	1. በአፍ የሚሞጥ ኪኒን 2. በመሀጸን የሚቀመጥ 7.የወንድ ዘር መተላለፊያ ቧንቧን ማስቆራ 4. በመርፌ የሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም 6. የሴት መሀጸን አሽንዳ ማስቆራ 8. አረፋማ ኪኒን 9. ተፈጥሯዊ የወሊድ ቁጥጥር ዘ 10. ሌላ ከለ ይጠቀስ.....
305	የጥያቄ ቁጥር 303 መልሱ ምርጫ 1 ከሆነ ለምን አላማ ነው እርሶም ሆኑ ባለቤቶች እየተጠቀሙበት ያሉት?	1. ልጅን አራርቆ ለመውለድ 2. የቤተሰቤን ቁጥር ለመወሰን 3. አላውቀውም 4. ለመመለስ ፍቃደኛ አይደለህም!
306	የጥያቄ ቁጥር 301 መልሱ አዎ ከሆነና የጥያቄ ቁጥር 303 መልሱ ምርጫ 2 ከሆነ ዘመናዊውን የወሊድ መቆጣጠሪያ ዘዴን መጠቀም ያቆሙበት ምክንያቶቹ ምንድን ናቸው? (የተጠቀሱት ሁሉ ይከበቡ)	1. መከላከያው ችግር ያስከትላል በሚል ፍራቻ 2. መከን እንዳያደርግ ፍራቻ 3. በጤና ችግር ምክንያት 4. የምፈልገው አይነት የወሊድ መቆጣጠሪያ ዘዴ ባለመኖሩ 5. ልጅ ለመውለድ 6. መውለድ ስለማልችል 7. ባህሌ ስለማይፈቅድል? 8. ሀይማኖተ ስለማይፈቅድል 9. ሌላ ከለ ይጠቀስ
307	የወሊድ መቆጣጠሪያ ዘዴን መጠቀም ወይም አለመጠቀም ውሳኔ የማን ነው? የርሶ፣የባለቤቶ ወይስ የጋራዎ?	1. የራሴ 2. የባለቤተ 3. የጋራችን 4. ለመመለስ ፍቃደኛ አይደለህም!
308	የወሊድ መከላከያ ዘዴን በአሁኑ ገዜ እየተጠቀሙ ከሆነ ከቦታው ለማምጣት ምን ያህል ጊዜ ይፈጅቦታል?	1.ደቂቃ 2. አላውቀውም 3. ጥያቄውን ለመመለስ ፍቃደኛ አይደለህም

ክፍል አራት: ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ዝንባሌን በተመለከተ

ተ.ቁ	ጥያቄ	አማራጭ መልሶች	ወደጥያቄ ቁ ይለፉ
401	ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ የበለጠ ማወቅ ይፈልጋሉ?	1. አዎ አልፈልግም 3. ለመልሱ ፍቃደኛ አይደለህም	2. ዩሉም
402	ሌሎች ጥንድ ባለትዳሮች ዘመናዊ የወሊድ መቆጣጠሪያ መጠቀማቸውን ይደግፋሉ?	1. አዎን..... 2.አልደግፍም አይደለህም.....	3.ለመመለስ ፍቃደኛ ...404 ...404

403	የጥያቄ ቁጥር 402 መልሱ ምርጫ 2 ከሆነ ምክንያቶቹ ምንድናቸው? የተጠቀሱት ሁሉ ይክበቡ	1. ሀይማኖት ስለማይፈቅድ 2. በጤና ላይ ችግር ስለሚያስከትል 3. ሌላ የጤና ችግር ከለባቸው 4. ተጨማሪ ልጅ እንዲወልዱ 5. ሌላ ከለ ይጠቀስ	
404	ባለፉት ስድስት ወራት ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ከባለቤቶ ጋር ተወያይተው ያውቃሉ?	1. አዎ 2. ዬስም አልተወያየንም 3. አላስታውስም 4. ለመልሱ ፍቃደኛ አይደለሁም	
405	ለጥያቄ ቁጥር 404 መልሱ አዎ ከሆነ ስንት ጊዜ ነው የተወያየችሁት?	1. አንድ ጊዜ 2. ሁለት ጊዜ 3. ሶስት ጊዜ 4. ከሶስት ጊዜ በላይ 5. አላስታውስም	
406	ሚስቱ የዘመናዊ ወሊድ መቆጣጠሪያ ዘዴ መጠቀምን ይደግፋሉ?	1. አዎን 2. ዬስም አትደግፍም 3. አላውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም	
407	ሚስቱ የርሶን ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ መጠቀምን ወይም አለመጠቀምን ያውቃሉ?	1. አዎን 2. ዬስም አታውቅም 3. እርግጠኛ አይደለሁም	
408	ሚስቱ ዘመናዊ የወሊድ መቆጣጠሪያ መጠቀማቸውን ወይም አለመጠቀማቸውን እርሶ ያውቃሉ?	1. አዎን 2. ዬስም አላውቅም 3. እርግጠኛ አይደለሁም 4. ለመመለስ ፍቃደኛ አይደለሁም	

ክፍል: አምስት ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ግንዛቤን በተመለከተ

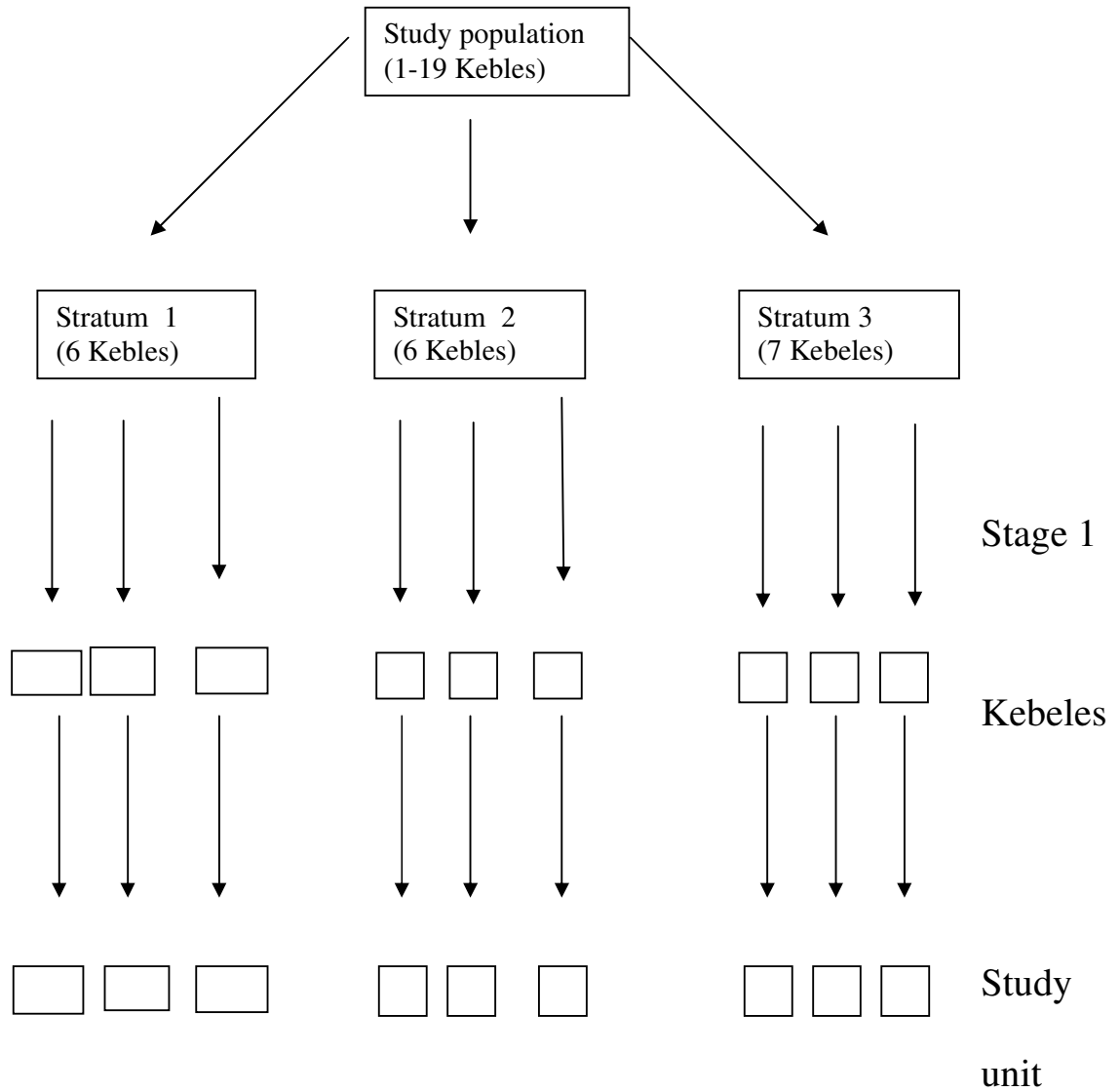
ተ.ቁ	ጥያቄ	አማራጭ መልሶች
501	ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ ሰምተው ያውቃሉ?	1 አዎ 2. ዩሌም አልሰማሁም 3. አላስታውስም 4. ለመልሱ ፍቃደኛ አይደለሁኝ
502	አንድም አይነት ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ያውቃሉ?	1 አዎ 2. ዩሌም አላውቅም 3. ለመልሱ ፍቃደኛ አይደለሁም
503	የጥያቄ ቁጥር 502 መልሱ አዎ ከሆነ የትኛውን ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ያውቃሉ? (የተጠቀሱትን ሁሉ ይከበቡ)	1. በአፍ የሚሞጥ ኪኒን 2. በመሀጸን የሚቀመጥ 4. በመርፌ ጠሚሰጥ 4. በክንድ የሚቀበር 5. ኮንዶም 6. የሴት መሀጸን አሸንጻ ማስቆረጥ 7. የወንድ ዘር መተላለፊያ ቧንቧን ማስቆረጥ 8. አረፋማ ኪኒን 9. ሌላ ከለ ይጠቀስ.....
504	ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴን ማግኘት ይቻላል ብለው ያስባሉ?	1 አዎ ይቻላል 2. አይቻልም 3. አላውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም
505	የዘመናዊ ወሊድ መቆጣጠሪያን እርሶም ሆኑ ወይም ሌሎች ጥንድ ባለትዳሮች ከየት ነው የሚያገኙት? (የተጠቀሱትን ሁሉ ይከበቡ)	1. ሆስፒታል 2. ጤና ጣቢያ 3. ጤና ኤላ 4. መደብር 5. ቤተሰብ መምሪያ ኪሊኒክ 6. ፋርማሲ 7. የግል ኪሊኒክ 8. ሌላ ከለ ይጠቀስ
506	ምን አይነት ጥቅሞች ከዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ እንደሚገኝ ያውቃሉ?(የተጠቀሱትን ሁሉ ይከበቡ)	1. ያልተፈለገ እርግዝናን ለመከላከል 2. ባልተፈለገ ጊዜ የሚመጣን እርግዝናን ለማዘግየት 3. የወር አበባን ለመቆጣጠር 4. የቤተሰብ ቁጥርን ለመወሰን 5. የአባላዘር በሽታን ለመከላከል 6. ሌላ ከለ ይጠቀስ.....
507	ያልታቀደ እርግዝናን ለመከላከል በአፍ የሚሞጠው የወሊድ መቆጣጠሪያ ኪኒን እንዴት መወሰድ አለበት ብለው ያስባሉ?	1. አንድ ኪኒን በየቀኑ ከአንድ የወር አበባ ኡደት እስከ ሚቀጥለው የወር አበባ ኡደት 2. አንድ ኪኒን በየሁለት ቀን 3. አንድ ኪኒን ከገብግረ ስጋ ግንኙነት በኋላ 4. አላውቅም 5. ሌላ ከለ ይጠቀስ.....
508	ያልታቀደ እርግዝናን ለመከላከል በመርፌ የማሰጠው የወሊድ መቆጣጠሪያ እንዴት መወሰድ አለበት ብለው ያስባሉ?	1. አንድ መርፌ በየ ሶስት ወሩ በወር አበባ ጊዜ 2. አንድ መርፌ በየ 6 ወሩ 3. አንድ መርፌ ከገብግረ ስጋ ግንኙነት በኋላ 4. አላውቀውም 5. ሌላ ከለ ይጠቀስ.....
509	በአፍ የሚወሰደው ኪኒንን ከእርግዝና ጋር ሲወዳደር የበለጠ እኩል ወይስ	1. ኪኒን የበለጠ ጎጂ ነው 2. ኪኒን እኩል ጎጂ ነው 3. ኪኒን ያነሰ ጎጂ ነው 4. አላውቅም

	ያነሰ ጎጂ ነው ብለው ያስባሉ?		5. ለመመለስ ፍቃደኛ አይደለሁም
510	ለጥንድ ባለትዳሮች ያልተፈለገ ወይም ያሰገዘው የሚመጣ እርግዝናን ለመከላከል የትኛው መንገድ የበለጠ ጥሩ ነው ብለው የሚያስቡት?	1. ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ 2. ተፈጥሮአዊ የወሊድ መቆጣጠሪያ ዘዴ	3. አላውቅም 4. ለመመለስ ፍቃደኛ አይደለሁም
511	ስለ ዘመናዊ የወሊድ መቆጣጠሪያ ዘዴ የሰሙት ክየት ነው?(የተጠቀሱትን ሁሉ ይከበቡ)	1. ክጥናት ባለሙያ 2. ከሬዲዮ 3. ከ ቲ.ቪ	4. ከጓደኛ 5. ከጋዜጣ 6. ሌላ ከለ ይጠቀስ.....
512	በቤቱ ውስጥ ሬድዮ ወይም ቲ.ቪ አሉት?	1. ሬዲዮ አለኝ 2. ቲ.ቪ አለኝ 5. ለመመለስ ፍቃደኛ አይደለሁም	3. ሬዲዮም ቲ.ቪም አለኝ 4. አንዱም ይሉኝም

የመጠይቁ መጨረሻ

በጣም አመሰግናታለሁ

Schematic presentation of the sampling procedure.



Conceptual frame work, for factors of unmet need development.

