Additional file 4: Interview questionnaire for women participants

Househol	lds	Iden	tifica	ıtion

Questionnaire code	Woreda/ Town Administration
Place of Usual residence: (1) Urban	(2) Rural
Kebele	House number

Instruction: – please circle the responses for questions with alternatives and write for open-ended questions on the space provided.

PHASE I - IDENTIFICATION OF STUDY PARTICIPANTS					
1. Sc	Socio-demographic and economic Information				
No	Questions	Choices	Code skip		
101	Age (In completed years)	Years	- Couc omp		
	- go (compressed years)	1. Above grade 12			
		2. Grade 11-12			
400	Educational level	3. Grade 7-10			
102		4. Grade 0-6			
		5. Able to read and write			
		6. Unable to read and write			
		1. Orthodox			
		2. Catholic			
103	Religion	3. Protestant			
		4. Muslim			
		5. If other, specify			
		1. Sidama 5. Gurage			
		2. Wolita 6. Amhara			
104	Ethnicity	3. Gedio 7. Oromo			
		4. Kembata 8. Tigray.			
		9. If other specify			
	Occupation type	House wife			
		2. Farmer			
105		Government employee			
		4. Privately owned business			
		5. NGO employee			
400		6. If other specify			
106	Age of your husband (In completed years)	Years			
	Education level of your husband	1. Above grade 12			
		2. Grade 11-12			
107		3. Grade 7-10			
107		4. Grade 0-6			
		5. Able to read and write			
		6. Unable to read and write			
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		1. Farmer
		2. Government employee
108	Occupation type of your husband	3. Privately owned business
		4. NGO employee
		5. If other specify
109	Household size	
110	How many Under 5 year children do you have, currently?	
111	How much is your monthly income? (in ETB)	

2.	Obstetric Information		
No	Questions	Choices	Remark
201	Number of deliveries? (Including those who died, if any)	Children/Child	
202	Have you ever had abortion or stillbirth? (Induced or non-induced	1. Yes	
202	abortion)	2. No→	204
203	If yes, how many?	Abortions/Stillbirths	
204	How old is your last child? (in months)		
205	When did you have your last normal menstrual period?	1/(dd/mm/yyyy)	
203		2. I don't know/Not sure	
206	How many months pregnant are you?	1 months	
200		2. I don't remember/Not sure	
207	Is the pregnancy planned?	1. Yes 2. No	
208	In your current pregnancy, did you receive ANC services?	1. Yes	
200		2. No	
3.	At nine months of pregnancy (G.A. of pregnancy)		
209	When was your first ANC visit?	DD/MM.	
210	How many ANC visits have you received? (in number)		
211	When you went for ANC visit, are you decided jointly with your	1. Yes	301
211	husband?	2. No	
212		1. Wife	
	If not, who made the last decision?	2. Husband	
		3. Other specify	

	PHASE II - INTERVIEW OF PREGNANT WOMEN, 3 TO 5 DAYS AFTER DELIVERY			
4. Women's utilization of and husbands involvement in ANC services				
301	During your ANC visits, have you get enough information about	1. Yes		
	delivery care and PNC services?	2. No		
302	Was your husband escort you to health facility during ANC visit?	1. Yes		
		2. No→	304	
303	Was he attend the health information with you at health facility?	1. Yes		
		2. No→	305	
304	If no for Q.No.302, what was the reason?			
305	If no for Q.No.303, what was the reason?			
306	Were you get regular ANC services? If not, what was the reason?			

5.	Husbands' involvement in delivery care		
401	When are you delivered your last child?	// (dd/mm/yyyy)	
402	Where are you gave birth your last child?	 Health facility→ Home Other specify 	403
403	Who was attend your birth?		
404	If at home; why?		
405	Were you made a joint decision for your delivery place?	Yes No I don't remember	406
406	If not, who made the final decision?	 Wife Husband Other specify 	
407	If you delivered at HF; was your husband escort you for labor and delivery to the health facility?	1. Yes 2. No→	409 & 410
408	If yes, was your husband enter and attend your labour and delivery in the room?	1. Yes→ 2. No	501
409	If 'no' for Q.No. 407, why?		410
410	If 'no' for Q.No. 406, why?		
411	Who escorted you during your labour and delivery to the health facility?	 My mother Relatives Neighbor Other specify 	

	PHASE III - INTERVIEW OF PREGNANT WOMEN, AT PNC PERIC	DDS (AT 6TH WKS AFTER DELIVERY)			
	5. Husbands' involvement in postnatal care				
501	Were you get PNC service in your last childbirth?	1. Yes 2. No	510		
502	If yes, when was your 1st PNC visit?	dd/mm/yyyy			
503	How many PNC visits are you received? (number/count)				
504	Was your husband escort you during PNC visit?	1. Yes 2. No→	507		
505	Was your husband attend PNC information with you in the health unit?	1. Yes→ 2. No	508		
506	If no, for 'Q.No.505', what was the reason?				
507	If no, for 'Q.No.504', what was the reason?				
508	Were you made a joint decision for your PNC services?	1. Yes→ 2. No	601		
509	If no, who made the final decision?	 Wife Husband Relatives Other specify 			
510	If 'no' for Q.No. 501, what was the reason?				