

Women's Health and Relationships Project in Ethiopia.



ABDUL LATIF JAMEEL
Poverty Action Lab



TRANSLATING RESEARCH INTO ACTION



Collaborative Study by
The School of Public Health, Addis Ababa University;
The Ethiopian Public Health Association
and
The Abdul Latif Jameel Poverty Action Lab

Men's Questionnaire የወንዶች መጠየቅ

Addis Ababa, Ethiopia

BASELINE SURVEY

Identity Number: :
Woreda Kebele House No L/S

Enumerator Information

1. Names and Codes of enumerators	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2. Name and codes of the supervisors	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Identification

3.	District (Woreda)	W01 Meskan W02 Mareko W03 Silte W04 Sodo	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4.	Village (Kebele), name and code		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
5.	Subvillage (Gote), name and code		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6.	Name of respondent	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Name Father's Name Grand name
7.	Name of spouse	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Name Father's Name Grand name
8.	Address (write down names of road, alley, house number) Given by supervisor (computer identity)	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Short/ Long <input type="text"/> <input type="text"/>
9.	Identity Number	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Woreda Kebele House No L/S
10.	Telephone/Cellphone Self... Spouse... Family... Neighbor... If no phone number put 000000	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1. Self 2. Spouse 3 Family 4. Neighbor 5. None

Results of Visits

11.		First Visit	Second Visit	Third Visit
12.	Date	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / 20 <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / 20 <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / 20 <input type="text"/> <input type="text"/> <input type="text"/>
13.	Time Interview Started	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
14.	Time interview completed	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> : <input type="text"/> <input type="text"/>
15.	Results of Visits	1. <input type="checkbox"/> Completed 2. <input type="checkbox"/> Partly Completed 3. <input type="checkbox"/> Respondent not at home 4. <input type="checkbox"/> Respondent Declined 5. <input type="checkbox"/> Respondent not available in the village 6. <input type="checkbox"/> Other (Specify) _____ Make appointment if 2 or 3 answered	1. <input type="checkbox"/> Completed 2. <input type="checkbox"/> Partly Completed 3. <input type="checkbox"/> Respondent not at home 4. <input type="checkbox"/> Respondent Declined 5. <input type="checkbox"/> Respondent not available in the village 6. <input type="checkbox"/> Other (Specify) _____ 1. Make appointment if 2 or 3 answered	1. <input type="checkbox"/> Completed 2. <input type="checkbox"/> Partly Completed 3. <input type="checkbox"/> Respondent not at home 4. <input type="checkbox"/> Respondent Declined 5. <input type="checkbox"/> Respondent not available in the village 6. <input type="checkbox"/> Other (Specify) _____

A. Background Info/Education/Community Participation/SES

A1.	In what day, month and year were you born? If he does not know his date of birth – write 01/01/year	____ / ____ / _____ Day month Year
A2.	How old were you at your last birthday?	____ Years
A3.	How many wives do you have?	____ wives
A4.	How old was your wife/ main partner on her last birthday? Compute with your age	____ Years

B. Wife's background information, Employment status, and man's economic and Employment status

B1.	How many times per week or per day you participate in a traditional coffee ceremony? If answered per week, enter 00 on the day If answered per day, enter 00 on the weeks	____ per day ____ per week
B2.	Who usually participates in the coffee ceremony with you? Tick all that apply	1. <input type="checkbox"/> wife/partner 2. <input type="checkbox"/> Family members 3. <input type="checkbox"/> Neighbors 4. <input type="checkbox"/> Village leader 5. <input type="checkbox"/> Religious leader 6. <input type="checkbox"/> Friends 7. <input type="checkbox"/> Other _____
B3.	What do you discuss with others during a coffee ceremony? Tick all that apply	1. <input type="checkbox"/> Family or personal issues 2. <input type="checkbox"/> Issues related to your community 3. <input type="checkbox"/> National or political news 4. <input type="checkbox"/> Health challenges 5. <input type="checkbox"/> Problems with farming or cattle 6. <input type="checkbox"/> Other (Specify) _____
B4.	Who usually prepares the coffee during the traditional coffee ceremony?	1. <input type="checkbox"/> Men 2. <input type="checkbox"/> Women 3. <input type="checkbox"/> Both men and women
B5.	Have you ever prepared the coffee during the traditional coffee ceremony?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
B6.	Would you be happy to participate in a coffee ceremony if a man prepared the coffee?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No
B7.	Now if you permit me, I will ask some more questions about your relationship with your wife. In the last twelve months, did you ever:	Yes No If Yes, how often?
		Often Someti mes Rarel y
	a) Expect that your wife ask permission to purchase large items?	1 2 1 2 3
b) Expect that your wife ask permission to purchase small items?	1 2 1 2 3	

	c) Taken her earnings or savings from her against her will?	1	2	1	2	3	
	d) Spent money she needed for rent, food or clothes on things for yourself?	1	2	1	2	3	
	e) Threaten to not give her money or take it away from her	1	2	1	2	3	
B8.	Who in your family usually has the final say in how you spend money on the following things?	Your self	Spouse	Yourself and spouse Jointly	Someone else	You and someone else jointly	
	a. Food and clothing	1	2	3	4	5	
	b. Large investments such as buying a car, or a house, or a household appliance	1	2	3	4	5	
	c. Regarding spending time with family friends or relatives	1	2	3	4	5	
B9.	In the last 12 months, how did you and your partner divide the following tasks: (Not applicable is coded as 0).	I do every thing	Usually me	Shared equally or done together	Usually partner	Partner does everything	Some-one else
	a) Washing clothes	1	2	3	4	5	6
	b) Repairing house	1	2	3	4	5	6
	c) Buying food	1	2	3	4	5	6
	d) Cleaning the house	1	2	3	4	5	6
	e) Cleaning the compound and toilet	1	2	3	4	5	6
	f) Preparing the food	1	2	3	4	5	6
	h) Daily care of the children	1	2	3	4	5	6
B10.	Are you satisfied with this division of tasks?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No					
B11.	Do you think your partner is satisfied with this division?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No					

B12.	How often have you drank alcohol (liquor, tej, beer) in the past 12 months? 1. Every day or nearly every day 2. Once or twice a week 3. 1-3 times a month 4. Occasionally, less than once a month 5. Never	1. <input type="checkbox"/> Every day or nearly every day 2. <input type="checkbox"/> Once or twice a week 3. <input type="checkbox"/> 2-3 times in a month 4. <input type="checkbox"/> Once a month 5. <input type="checkbox"/> Never >>>> SKIP TO B14
B13.	In the past 12 months how often have you been drunk? Would you say most days, weekly, once a month, less than once a month or never?	1. <input type="checkbox"/> Most days 2. <input type="checkbox"/> Weekly 3. <input type="checkbox"/> Once a month 4. <input type="checkbox"/> Very Rarely 5. <input type="checkbox"/> Never
B14.	In the past 12 months, have you experienced any of the following problems, related to your drinking? a. Money problems b. Health problems c. Conflict with family or friends d. Problems with authorities (police etc) e. Any other problems (specify)	a. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No b. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No c. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No d. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No e. Other(Specify)_____
B15.	How often do you chew khat? 1. Every day or nearly every day 2. Once or twice a week 3. 1-3 times a month 4. Occasionally, less than once a month 5. Never 6. Don't Know	1. <input type="checkbox"/> Every day or nearly every day 2. <input type="checkbox"/> Once or twice a week 3. <input type="checkbox"/> 1-3 times in a month 4. <input type="checkbox"/> Less than once a month 5. <input type="checkbox"/> Never >>> Skip to C1 6. <input type="checkbox"/> Don't know
B16.	In the past 12 months, have you experienced any of the following problems, related to your khat chewing? a. Money problems b. Health problems c. Conflict with family or friends d. Problems with authorities (police etc) e. Any other problems (specify)	a. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No b. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No c. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No d. 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No e. Other(Specify)_____

C. Fatherhood

Thank you for doing so, your answers are really important. The next questions are about you and the children you may have fathered or adopted or children who may live with you even if they are not legally or biologically yours.

C1.	How many biological children do you have? If no child enter 00	<input type="text"/> If no child,>>>>>> skip to C4
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C2.	How old is your youngest biological child? If the child died, fill near the age he/ she died 99	<input type="text"/> Years <input type="text"/> months (if age < 1 year, enter months) <input type="text"/> days (if age <1 month, enter days)
C3.	How old is your eldest biological child? If the child died, fill near the age he/ she died 99	<input type="text"/> Years <input type="text"/> months (if age <1 year, enter months) <input type="text"/> days (if age <1 month, enter days)
C4.	Did you accompany the mother of your youngest child to any prenatal visits during the last pregnancy?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No >>>>SKIP TO C6 3. <input type="checkbox"/> She didn't have ANC visits >>>SKIP TO C6 4. <input type="checkbox"/> She has never been pregnant >SKIP TO D1
C5	During the last antenatal care visit that you attended, did you:	1. <input type="checkbox"/> Drop your partner off at the entrance or wait for her outside 2. <input type="checkbox"/> Wait in the facility, but not participate in the ANC visit 3. <input type="checkbox"/> Join her for at least part of the visit with the health provider 4. <input type="checkbox"/> Don't know / Don't remember
C6.	Where were you during the birth of your last child?	1. Were you at the delivery or around 2. I was not in the area 3. I don't know, don't remember 4. Was delivered at home, skip to D1 5. Last child was not delivered, skip D1
C7.	Did you choose not to be present at the birth or did you want to be present but were prevented from doing so for some reason?	1. <input type="checkbox"/> Wanted to be present 2. <input type="checkbox"/> Didn't want to be present 3. <input type="checkbox"/> Don't know / don't remember

D. Gender and Domestic Violence

FO: Now I would like to ask for your opinion on some other important aspects of a woman's life. I know some of these questions are very personal. However, your answers are crucial for helping to understand the condition of women in Ethiopia. Let me assure you that your answers are completely confidential and will not be told to anyone and no one else will know that you were asked these questions.

D1.	Do you think violence against women is a major problem in your village?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know
D2.	Out of 10 women living in your village, how many do you think are experiencing any type of physical violence from their husbands?	<input type="text"/> women
D3.	Out of 10 women living in your village, how many do you think are experiencing any type of sexual violence from their husbands?	<input type="text"/> women

D4.	<p>What are some of the consequences of violence against women? Tick all that are mentioned. (Do not read options)</p>	<ol style="list-style-type: none"> 1. <input type="checkbox"/> Psychological outcomes 2. <input type="checkbox"/> Physical injuries 3. <input type="checkbox"/> Sexual and reproductive health problems 4. <input type="checkbox"/> Suicide or death 5. <input type="checkbox"/> Health or psychological risks for children 6. <input type="checkbox"/> HIV/ AIDS or STD transmission 7. <input type="checkbox"/> Other (specify) _____ 8. <input type="checkbox"/> Don't know
D5.	<p>How does violence against women increase their vulnerability to HIV/AIDS? Tick all that are mentioned. (Do not read options)</p>	<ol style="list-style-type: none"> 1. <input type="checkbox"/> Lack of the couple openness 2. <input type="checkbox"/> Lack of trust 3. <input type="checkbox"/> Restricting themselves from medical attention and knowledge 4. <input type="checkbox"/> Other (specify)
D6.	<p>If a woman in your village was experiencing violence from her husband, who could she go to for help? (Do not read options)</p>	<ol style="list-style-type: none"> 1. <input type="checkbox"/> Female relative/friend 2. <input type="checkbox"/> Male relative 3. <input type="checkbox"/> Police officer 4. <input type="checkbox"/> Health worker 5. <input type="checkbox"/> Religious leader 6. <input type="checkbox"/> Community leader 7. <input type="checkbox"/> Neighbor 8. <input type="checkbox"/> Other: _____
D7.	<p>What would you do if you saw a male friend use physical or sexual violence against a woman? Tick all that are mentioned. (Do not read options)</p>	<ol style="list-style-type: none"> 1. <input type="checkbox"/> Intervene during the episode 2. <input type="checkbox"/> Speak to him after the episode 3. <input type="checkbox"/> Avoid/shun him 4. <input type="checkbox"/> Call the police 5. <input type="checkbox"/> Do nothing, as it is their problem 6. <input type="checkbox"/> Mobilize neighbors or friends 7. <input type="checkbox"/> Contact village elders 8. <input type="checkbox"/> Other
D8.	<p>What would you do if you saw physical or sexual violence being carried out by a stranger (man) against a woman? Tick all that are mentioned. (Do not read options)</p>	<ol style="list-style-type: none"> 1. <input type="checkbox"/> Intervene during the episode 2. <input type="checkbox"/> Speak to him after the episode 3. <input type="checkbox"/> Avoid/shun him 4. <input type="checkbox"/> Call the police 5. <input type="checkbox"/> Do nothing, as it is their problem 6. <input type="checkbox"/> Mobilize neighbors or friends 7. <input type="checkbox"/> Contact village elders 8. <input type="checkbox"/> Other
<p>When two people marry or live together, they usually share both good and bad moments. I would now like to ask you some questions about your current and past relationships and how you treat your wife. If anyone interrupts us I will change the topic of conversation. I would again like to assure you that your answers will be kept secret, and that you do not have to answer any questions that you do not want to. May I continue?</p>		
D9.	<p>In general, do you and your partner discuss the following topics together:</p> <p style="padding-left: 40px;">a) Things that have happened to you in the day</p>	<p>a) 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No</p>

	b) Things that happened to her during the day	b) 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No				
	c) Your worries or feelings	c) 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No				
	d) Her worries or feelings	d) 1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No				
D10.	In the last 12 months of your relationship with your wife/partner, how often would you say that you quarreled? Would you say rarely, sometimes or often?	1. <input type="checkbox"/> Rarely 2. <input type="checkbox"/> Sometimes 3. <input type="checkbox"/> Often				
D11.	In the last 12 months, how are disagreements with your partner generally resolved?	1. <input type="checkbox"/> There are few disagreements 2. <input type="checkbox"/> Through discussion and communication 3. <input type="checkbox"/> By doing what I want 4. <input type="checkbox"/> By doing what my wife/partner wants 5. <input type="checkbox"/> Through intervention from other family members 6. <input type="checkbox"/> Through Insults/ force 7. <input type="checkbox"/> There are no disagreements. 8. <input type="checkbox"/> Other (specify) _____				
D12.	Now, I'd like to ask you some questions about how you interact with your wife. In the last twelve months , did you ever:	If YES , How often did this happen in the last 12 months : often, only sometimes or rarely				
	a) Insulte or make her feel bad about herself?	a) 1. Yes	2. No	aa) 1. Often	2. Sometimes	3. Rarely
	b) Belittle or humiliate her front of other people?	b) 1. Yes	2. No	bb) 1. Often	2. Sometimes	3. Rarely
	c) Do things to scare or intimidate her on purpose (eg by the way he looked at you, by yelling and smashing things)?	c) 1. Yes	2. No	cc) 1. Often	2. Sometimes	3. Rarely
	d) Threatened to hurt her or someone she cares about?	d) 1. Yes	2. No	cd) 1. Often	2. Sometimes	3. Rarely
D13.	In the last 12 months, have you ever any of the following things to your wife?	If NO, skip to next item		Would you say this has happened?		
	a) Slapped her or thrown something at her that could hurt you?	a) 1. Yes	2. No	aa) 1. many times	2. few times	3. once
	b) Pushed her or shoved her?	b) 1. Yes	2. No	bb) 1. many times	2. few times	3. once

This section will ask you about your knowledge of some laws and policies in your country.

D17.	According to the law, is a husband who forces his wife to have sex against her will committing a criminal act (That is, the husband can be fined or put in jail)?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Don't know
D18.	Are there any laws in your country about violence against women?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Don't know
NOTE TO ENUMERATOR: Read both questions to all respondents. Emphasize that we don't want to know WHICH SPECIFIC statements are true but rather HOW MANY statements are true. It might be helpful for the respondent to count the true statements on their fingers behind their back to keep it a secret.		
D19.	HOW MANY of the following statements truthfully describe your life in the last twelve months ? Please do not tell me which statements are true, just HOW MANY. 1. I became a father to a new baby. 2. I attended a wedding. 3. I received some health service at a hospital. 4. I purchased new clothing for myself.	<input type="text"/> statements
D20.	HOW MANY of the following statements truthfully describe your life in the last twelve months ? Please do not tell me which statements are true, just HOW MANY. 1. I became a father to a new baby. 2. I attended a wedding. 3. I received some health service at a hospital. 4. I purchased new clothing for myself. 5. I slapped my wife or threw something at her that could hurt her.	<input type="text"/> statements
D21.	Have you ever heard of any campaigns or activities in your community or workplace that talk about preventing violence against women?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Don't know
D22.	Have you ever seen an advertisement or public service announcement on television about violence against women?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Don't know
D23.	Have you ever participated in an activity (group session, rally, etc.) in your community or workplace on violence against women?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No 3. <input type="checkbox"/> Don't know
NOTE TO ENUMERATOR: For the next two questions – respondents should only be asked ONE question depending on their respondent ID number. Emphasize that we don't want to know WHICH SPECIFIC statements are true but rather HOW MANY statements are true. It might be helpful for the respondent to count the true statements on their fingers behind their back to keep it a secret. If the last digit of the respondent ID number is odd , then read questions D24 ONLY . If the last digit of the respondent ID number is even , then read question D25 ONLY .		

D24.	HOW MANY of the following statements truthfully describe your life in the last twelve months ? Please do not tell me which statements are true, just HOW MANY. 1. I have been to Addis. 2. My brother visited my home. 3. I listened to the radio almost every day. 4. I watched a football match.	<input type="text"/> statements
D25.	HOW MANY of the following statements truthfully describe your life in the last twelve months ? Please do not tell me which statements are true, just HOW MANY. 1. I have been to Addis. 2. My brother visited my home. 3. I listened to the radio almost every day. 4. I watched a football match. 5. I used physical violence such as hitting, slapping, pushing or threats of violence against my wife.	<input type="text"/> statements

Enumerator: Now, I am going to read you a list of statements. For each statement, I would like you to first tell me if you agree with this statement yourself, and next tell me if you think a majority (more than half) of your friends and family agree with this statement. For example, I could read the statement "It is beneficial for all children to attend primary school." First, you would say "Yes" if you agree with this statement yourself. Next, if you believe that the majority of your friends and families also agree, you would say "Yes" again.

		(a) Do you agree with this statement?	(b) Do your friends and family agree with this statement?
D26.	A man should have the final word on decisions in his home.	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree	1. <input type="checkbox"/> Yes, Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree 4. <input type="checkbox"/> Don't know
D27.	A woman should obey her husband in all things.	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree
D28.	It is alright for a man to beat his wife if she is unfaithful.	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree
D29.	A man can hit his wife if she won't have sex with him.	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree

D30.	A woman should not initiate sex.	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree
D31.	A man should be outraged if his wife asks him to use a condom.	1. <input type="checkbox"/> Agree 2. <input type="checkbox"/> Partially agree 3. <input type="checkbox"/> Do not agree

D32.	It is a woman's responsibility to avoid getting pregnant.	1. [] Agree 2. [] Partially agree 3. [] Do not agree
D33.	A woman who has sex before she marries does not deserve respect.	1. [] Agree 2. [] Partially agree 3. [] Do not agree

D34.	Women should not tolerate violence just in order to keep her family together.	1. [] Agree 2. [] Partially agree 3. [] Do not agree
D35.	There are times a woman deserves to be beaten.	1. [] Agree 2. [] Partially agree 3. [] Do not agree
D36.	A man using violence against his wife is a private matter that shouldn't be discussed outside the couple.	1. [] Agree 2. [] Partially agree 3. [] Do not agree
D37.	It disgusts me when I see a man acting like a woman.	1. [] Agree 2. [] Partially agree 3. [] Do not agree

FO: Now, some people may believe that a man has a good reason to hit his wife in certain situations. I am going to read you a list of situations. For each one, please tell me if you believe that a man has a good reason to hit his wife in this situation. Please also tell me if you think most of your friends and families agree that a man would have a good reason to hit his wife in this situation.

	(a) Do you agree a man would have a good reason to hit his wife in this situation?	
D38.	She disobeys him.	1. [] Yes 2. [] No
D39.	She answers back to him.	1. [] Yes 2. [] No
D40.	She neglects taking care of the children.	1. [] Yes 2. [] No
D41.	She burns the food.	1. [] Yes 2. [] No
D42.	She refuses to have sex with him.	1. [] Yes 2. [] No
D43.	She spends time gossiping with neighbors.	1. [] Yes 2. [] No
D44.	She ignores taking care of children.	1. [] Yes 2. [] No
D45.	She is not performing what husband is expecting.	1. [] Yes 2. [] No
D46.	She doesn't trust the husband and argues.	1. [] Yes

		2. [] No
D47.	She spreads the news about her husband to neighbors.	1. [] Yes 2. [] No
D48.	He is mad at his wife.	1. [] Yes 2. [] No
D49.	She is not making tasty food.	1. [] Yes 2. [] No
D50.	She leaves the house without the permission of her husband.	1. [] Yes 2. [] No

Section E.

a) Knowledge about HIV/AIDS

E1.	<p>Please mention all of the ways you believe a person can get infected with HIV/AIDS.</p> <p><i>Do NOT read the list, tick off all that are mentioned.</i></p>	<p>1. [] Sexual intercourse 2. [] Sharing needles (drug use) 3. [] Unclean medical equipment 4. [] Blood transfusions 5. [] During pregnancy 6. [] During birth 7. [] Through breast milk 8. [] Mosquito/insect bites 9. [] Contact with blood of infected person 10. [] Contact with infected person's toothbrush 11. [] Casual contact with infected person (i.e. sharing food, cup, glass, handshake, hugging, clothes) 12. [] Other (specify) _____ 13. [] Has not heard about HIV/AIDS 14. [] Don't know/Don't remember</p>
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E2.	<p>Can you tell me all the ways you know of that people can protect themselves from HIV?</p> <p><i>Tick all that are mentioned.</i></p>	<p>1. [] Abstinence 2. [] Being faithful 3. [] Using condoms 4. [] Using condoms correctly and consistently 5. [] Going for VCT before engaging in sex 6. [] Not sharing sharp objects 7. [] Avoiding drugs/alcohol/anything which hampers judgment 8. [] Avoiding bad company 9. [] Avoiding prostitution 10. [] Avoiding walking alone at night 11. [] Avoiding contact between bloody wounds and skin 12. [] Avoiding circumcision with unsafe tools 13. [] Avoiding wife-inheritance 14. [] Avoiding sugar daddies/mummies 15. [] Avoiding multiple sexual partners 16. [] Voluntary Male circumcision 17. [] Other (specify) _____ 18. [] Don't know/ Don't remember</p>
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E3.	Can people reduce their chance of getting the AIDS virus by having just one uninfected sex partner who has no other sex partners?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know
E4.	Can people get the AIDS virus from mosquito bites?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know
E5.	Can people reduce their chance of getting the AIDS virus by using a condom every time they have sex?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know
E6.	Can people get the AIDS virus because of witchcraft, God's curse, or other supernatural means?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO
E7.	Do you think that a healthy-looking person can have HIV?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know

b) Attitudes about HIV/AIDS

E8.	If a member of your family got infected with the AIDS virus, would you want it to remain a secret or not?	1. <input type="checkbox"/> YES, remain a secret 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know/not sure/depends
E9.	If a member of your family got infected with the AIDS virus, would you be willing to care for her or him in your own household?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know/not sure/depends

E10.	Would you buy fresh vegetables from a shopkeeper or vendor if you knew that the person had the AIDS virus?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know
E11.	In your opinion, if a female teacher has the AIDS virus but is not sick, should she be allowed to continue teaching in the school?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO 3. <input type="checkbox"/> Don't Know
E12.	I don't want to know the results, but have you ever had a blood test for HIV?	1. <input type="checkbox"/> YES 2. <input type="checkbox"/> NO

c) Behavior Questions

FO: Now I am going to ask you some more questions. These ones will be about some topics that may seem embarrassing. Again, this is totally confidential and I won't share this information with anyone else.

E13.	In your lifetime , how many sexual partners have you had? Adding the current spouse	_ _ partners
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E14.	In the last 12 months , how many sexual partners have you had? Adding the current spouse	_ _ partners
E15.	Have you ever used a condom?	1. [] YES 2. [] NO >>>>>>> skip to question E17
E16.	Did you use a condom last time you had sex ?	1. [] YES 2. [] NO 3. [] Not sure
E17.	How confident are you that you could convince your partner to use a condom if you wanted to use one?	1. [] Not at all confident 2. [] Somewhat confident 3. [] Confident 4. [] Very confident
E18.	How confident are you that you know how to correctly use a condom?	1. [] Not at all confident 2. [] A little confident 3. [] Somewhat confident 4. [] Confident 5. [] Very confident
E19.	In the last 12 months, have you ever discussed HIV risk behaviors with your partner?	1. [] YES 2. [] NO
E20.	In the last 12 months, have you ever discussed sex with your partner?	1. [] YES 2. [] NO

F. Program Questions

F1.	Do you remember the program “Unite for a Better Life,” a series of discussions and coffee ceremonies held in this community in 2015? If no- probe to make sure they don’t remember the program “Unite for Life is a program that brought people together in the community to discuss healthy relationships and gender issues”	1. [] Yes 2. [] No >>>>> SKIP TO G1
F2.	How many of these discussions did you attend?	_ _ Sessions
F3.	If attended less than 14 sessions, why did you not attend any/ more sessions?	1. [] Subject matter not interesting 2. [] Time not available (had other commitment) 3. [] Did not feel comfortable discussing those topics 4. [] Feared the disapproval of spouse 5. [] Feared the disapproval of other members of the community 6. [] Was not invited/selected for participation 7. [] Did not feel comfortable with the facilitator 8. [] Other

F4.	Did you attend the discussions alone or with your spouse?	1. <input type="checkbox"/> Always Alone 2. <input type="checkbox"/> Always with my spouse 3. <input type="checkbox"/> Sometimes with my spouse 4. <input type="checkbox"/> Didn't attend any sessions
F5.	How many sessions did your spouse attend?	<input type="text"/> Sessions
Enumerator: Check question F2 and copy response here: # of sessions attended by the respondent <input type="text"/> Sessions IF = 0 then SKIP TO F16		
F6.	If you did attend these discussions, would you say you remember most of what was discussed, some of what was discussed, only a little, or nothing at all?	1. <input type="checkbox"/> Most or nearly all of what was discussed 2. <input type="checkbox"/> Some of what was discussed 3. <input type="checkbox"/> Little of what was discussed 4. <input type="checkbox"/> Nothing at all [Skip to F12]
F7.	What was the most important information you discussed in these sessions?	<hr/> <hr/>
F8.	Did you share the information you obtained from this program with anyone?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No >>>>> SKIP to F12
F9.	If yes, who did you share the information with? Tick all that apply	1. <input type="checkbox"/> Spouse 2. <input type="checkbox"/> Relative 3. <input type="checkbox"/> Friend 4. <input type="checkbox"/> Neighbor 5. <input type="checkbox"/> My children 6. <input type="checkbox"/> Other (specify)
F10.	How many people in total did you share the information with?	<input type="text"/> people
F11.	On a scale of 1 to 5, how satisfied were you with the program?	1. <input type="checkbox"/> Not at all satisfied 2. <input type="checkbox"/> A little satisfied 3. <input type="checkbox"/> Somewhat satisfied 4. <input type="checkbox"/> Satisfied 5. <input type="checkbox"/> Very satisfied
F12.	Were there any negative consequences of participating in these sessions?	1. <input type="checkbox"/> Yes 2. <input type="checkbox"/> No >>>>>> SKIP to F14
F13.	If yes, what were the negative consequences of participating in these sessions? Tick all that apply.	1. <input type="checkbox"/> Lost wages 2. <input type="checkbox"/> No time to do household chores 3. <input type="checkbox"/> Angered spouse when I participated 4. <input type="checkbox"/> Spouse became violent when I participated 5. <input type="checkbox"/> Angered family members when I participated 6. <input type="checkbox"/> Family members became violent when I participated

		3. <input type="checkbox"/> In both 4. <input type="checkbox"/> Was not paid at all
G7.	In the last 12 months what was your average daily wage? If in kind paid, change to a monetary	_ _ _ Birr
G8.	Who usually decides how the money you earn will be used: mainly you, mainly your wife/ partner or you and your wife/partner jointly?	1. <input type="checkbox"/> Respondent 2. <input type="checkbox"/> Wife/partner 3. <input type="checkbox"/> Respondent and wife/ partner jointly 4. <input type="checkbox"/> Other_____
G9.	Would you say that the money that you earn is more than what your wife/partner earns, less than what she earns or about the same?	1. <input type="checkbox"/> More than her 2. <input type="checkbox"/> Less than her 3. <input type="checkbox"/> About the same 4. <input type="checkbox"/> wife/partner doesn't bring in money 5. <input type="checkbox"/> Don't know
G10.	Who usually decides how your wife's/ main partner's earnings will be used: you, your wife/partner, or you and your wife/partner jointly?	1. <input type="checkbox"/> Respondent 2. <input type="checkbox"/> wife/ partner 3. <input type="checkbox"/> Respondent and wife/partner jointly 4. <input type="checkbox"/> Other_____

H1. Anonymous picture technique

I would now like to give you a card with photos. On this card are two pictures, but no other message. The first picture is of a happy face, the second is of a sad face.

No matter what you have already told me, I would like you to put a mark next to the sad picture if you have committed any act of physical physical violence such as hitting, slapping, pushing or threats of violence or sexual violence against your wife in the last 12 months.. Please put a mark next to the happy face if this has never happened.

Once you have marked the card, please fold it over and put it in an envelope and then on this bag, along with many other responses from this village. This will ensure that I do not know your answer. Your response will remain completely anonymous and there is no way for anyone to know what your answer is. Your confidentiality will be protected, so please feel free to share the honestly without fear.

GIVE RESPONDENT CARD AND PEN. DO NOT LOOK AT RESPONSE. ONCE CARD IS FOLDED, ASK REPENDENT TO PUT IT IN AN ENVELOPE AND INTO A BAG THAT ALSO CONTAINS OTHER COMPLETED CARDS. DO NOT RECORD DETAILS OF QUESTIONNAIRE IDENTIFICATION ON CARD.

The End

Note:

Before leaving the participant

- **Check for consistency and completeness of each question**
- **Provide greetings and thank him.**