

<b>COMMUNITY FOLLOW-UP QUESTIONNAIRE</b>		
<b>COVERSHEET</b>		
	Interviewer Name	
	District	
	Type of health facility where woman delivered	1 Hospital 2 Health facility 3 Dispensary
	Name of health facility where woman delivered	1 Bungu 2 Magoma 3 Magunga Hospital 4 Mombo 5 Bulwa 6 Mkuzi 7 Teule Hospital 8 Tongwe
	ID number	
	Start time and end time	AUTOMATIC STAMP
<b>ELIGIBILITY</b>		
1.	Are you the person named on the community follow-up form? (Interviewer to ask woman's name and match it to community follow-up information)	1 Yes → GOTO Q2 2 No → terminate survey
2.	Can you confirm that you delivered at (insert name of facility) on (insert date of delivery)?	1 Yes → GOTO Q3 2 No → terminate survey
<b>CONSENT</b>		
	I am going to read you a document that explains this study. Please stop me at any point and ask questions if anything is unclear. When I finish reading, I am going to ask you to sign your name to show you understand the study and agree to participate.	
	[READ CONSENT FORM AND CONDUCT CONSENT PROCESS]	
3.	Has the respondent agreed to participate?	1 Yes → GOTO Q4 2 No → terminate survey
	Thank you. We will now begin the survey.	
<b>A.</b>	<b>Postpartum Care - Mother</b>	
	I would like to ask you some questions about you and your baby's health care experiences in the last month.	
4.	Overall, in the last month, how would you rate your health?	1 Very good 2 Good 3 Moderate 4 Bad 5 Very Bad 88 DK 99 NR/RF

5.	I would like to talk to you about checks on your health after delivery, for example, someone asking questions about your health or examining you. Did anyone check on your health in the last month?	1 Yes 2 No → GOTO Q9 88 DK 99 NR/RF
6.	Who checked on your health at that time?	1 Doctor 2 Nurse/midwife 3 TBA 4 Community health worker 5 Traditional healer 96 Other (specify) 88 DK 99 NR/RF
7.	Where did this first check take place?	1 Your home 2 Other's home 3 Health facility (specify name: _____) 96 Other (specify) 88 DK 99 NR/RF
8.	What did the (person given in Q6) do during that visit to check on your health?	1 Examined body 2 Checked breasts 3 Counseled on danger signs for newborns 4 Counseled on danger signs for mothers 5 Counseled on breastfeeding 6 Counseled on nutrition 7 Counseled on family planning 96 Other (specify) 88 DK 99 NR/RF
9.	Within the first month after your baby was born, did you experience any illness?	1 Yes 2 No → GOTO Q16 88 DK 99 NR/RF
10.	What type of illness was it?	1 Breathing 2 Stomach problems/diarrhea 3 Vaginal bleeding 4 Fever/infection 5 Headaches 6 Depression 96 Other complications (specify)
11.	<i>[If experienced at least one complication]</i> Did you receive any kind of care for your illness?	1 Yes → GOTO Q13 2 No 88 DK

		99 NR/RF
12.	<i>[Ask only if respondent answered “no” to Q11]</i> Why didn't you seek care for your illness at a health facility?	1 Cost 2 Distance/transport 3 Didn't know where to go 4 Illness was not serious 5 Discouragement from partner/family 6 Traditional to treat in home or community 7 Negative prior experience seeking advice or treatment 96 Other (specify) 88 DK 99 NR/RF
13.	Where did you go for care for yourself?	1 Your home 2 Other's home 3 Health facility (specify name: _____) 4 Pharmacy 96 Other (specify) 88 DK 99 NR/RF
14.	Who provided this care?	1 Doctor 2 Nurse/midwife 3 TBA 4 Community health worker 5 Traditional healer 6 Pharmacist/staff at pharmacy 96 Other (specify) 88 DK 99 NR/RF
15.	Why did you decide to seek that care? SELECT ALL THAT APPLY	1 Cost 2 Availability of drugs 3 Convenient location 4 Quality of care 5 Attitude of provider 6 Illness was serious 7 Preference of partner/family 8 Tradition 96 Other (specify) 88 DK 99 NR/RF
16.	Since your delivery, did you receive a vitamin A dose?	1 Yes 2 No 88 DK 99 NR/RF

17.	Did you ever breastfeed your newborn baby?	1 Yes 2 No → GO TO Q20 88 DK 99 NR/RF
18.	How soon after delivery did you start breastfeeding your baby?  [If less than 1 hour, record '00'. If less than 24 hours, record hours. Otherwise, record days.]	NUMBER – HOURS NUMBER – DAYS 88 DK 99 NR/RF
19.	Are you still breastfeeding your newborn baby?	1 Yes → GOTO Q21 2 No 88 DK 99 NR/RF
20.	Why did you stop or never start breastfeeding your newborn baby?	1 Mother ill/weak 2 Child ill/weak 3 Nipple/breast problem 4 Not enough milk 5 Mother working 6 Child refused 7 Mother worried about physical appearance 8 Health worker recommendation 96 Other (specify) 88 DK 99 NR/RF
As you have recently had a baby, we would like to know how you are feeling. Please choose the answer that comes closest to how you have felt <b>in the past 7 days</b> , not just how you feel today.		
21.	In the past 7 days, I have been able to laugh and see the funny side of things.	1 As much as I always could 2 Not quite so much now 3 Definitely not so much now 4 Not at all 88 DK 99 NR/RF
22.	In the past 7 days, I have looked forward with enjoyment to things.	1 As much as I ever did 2 Rather less than I used to 3 Definitely less than I used to 4 Hardly at all 88 DK 99 NR/RF
23.	In the past 7 days, I have blamed myself unnecessarily when things went wrong.	1 Yes, most of the time 2 Yes, some of the time 3 Not very often 4 No, never 88 DK 99 NR/RF

24.	In the past 7 days, I have been anxious or worried for no good reason.	1 No, not at all 2 Hardly ever 3 Yes, sometimes 4 Yes, very often 88 DK 99 NR/RF
25.	In the past 7 days, I have felt scared or panicky for no very good reason.	1 Yes, quite a lot 2 Yes, sometimes 3 No, not much 4 No, not at all 88 DK 99 NR/RF
26.	In the past 7 days, things have been getting on top of me.	1 Yes, most of the time I haven't been able to cope at all 2 Yes, sometimes I haven't been coping as well as usual 3 No, most of the time I have coped quite well 4 No, I have been coping as well as ever 88 DK 99 NR/RF
27.	In the past 7 days, I have been so unhappy that I have had difficulty sleeping (not because of the baby).	1 Yes, most of the time 2 Yes, sometimes 3 Not very often 4 No, not at all 88 DK 99 NR/RF
28.	In the past 7 days, I have felt sad or miserable.	1 Yes, most of the time 2 Yes, quite often 3 Not very often 4 No, not at all 88 DK 99 NR/RF
29.	In the past 7 days, I have been so unhappy that I have been crying.	1 Yes, most of the time 2 Yes, quite often 3 Only occasionally 4 No, never 88 DK 99 NR/RF
30.	In the past 7 days, the thought of harming myself has occurred to me.	1 Yes, quite often 2 Sometimes 3 Hardly ever 4 Never 88 DK 99 NR/RF

31.	I know some of the questions I just asked may have been upsetting. We are almost finished with this survey. Would you like to take a short break from answering questions? <i>[If yes, wait a few minutes]</i> Is it alright if we continue with the survey?	1 Yes → GOTO Q32 2 No → Terminate the survey
<b>B.</b>	<b>Postpartum Care - Baby</b>	
32.	How many weeks old is your baby?	NUMERIC (weeks) 88 DK 99 NR/RF
33.	Within the first month after your baby was born, did someone check on his/her health?	1 Yes 2 No → GOTO Q37 88 DK 99 NR/RF
34.	Who checked on his/her health at that time?	1 Doctor 2 Nurse/midwife 3 TBA 4 Community health worker 5 Traditional healer 96 Other (specify) 88 DK 99 NR/RF
35.	Where did this first check take place?	1 Your home 2 Other's home 3 Health facility (specify name: _____) 96 Other (specify) 88 DK 99 NR/RF
36.	What did the (person given in Q33) do during that visit to check on your newborn baby's health?	1 Examined body 2 Weighed baby 3 Checked cord 4 Counseled on breastfeeding 5 Counseled on skin to skin contact/warmth 6 Checked baby for danger signs 7 Immunizations 96 Other (specify) 88 DK 99 NR/RF
37.	How many visits to a health facility did you and/or your newborn baby make in the first 1 month after delivery?	NUMERIC (IF '00' GOTO Q39) 88 DK 99 NR/RF
38.	In the last month, the last time you went to a health facility for your newborn baby, where did you go?	OPEN FIELD 98 DK 99 NR/RF

39.	Have you ever wanted to go for a check-up for your newborn baby but experienced difficulties?	1 Yes 2 No → GOTO Q41 88 DK 99 NR/RF
40.	What were those difficulties?	1 Cost 2 Distance 3 Transport 4 Didn't know where to go 5 Opposition of partner/family 6 Against local norms 96 Other (specify) 88 DK 99 NR/RF
41.	Did your baby have the polio vaccine, that is, drops in the mouth?	1 Yes 2 No → GOTO Q45 88 DK 99 NR/RF
42.	How many times did your baby receive the polio vaccine?	1 One time 2 Two times 3 Three times 96 Other (specify) 88 DK 99 NR/RF
43.	When did your baby have the polio vaccine? SELECT ALL THAT APPLY	1 At birth 2 Within first week after birth 3 Within first 2 weeks after birth 4 After the first 2 weeks 96 Other (specify) 88 DK 99 NR/RF
44.	Where did your baby receive the polio vaccine? (SELECT/NAME ALL THAT APPLY)	1 Health facility (specify name: _____) 2 Outreach in community 96 Other (specify) 88 DK 99 NR/RF
45.	Did your baby receive the BCG vaccine against tuberculosis, that is, an injection in the arm or shoulder that usually causes a scar?	1 Yes 2 No → GOTO Q48 88 DK 99 NR/RF
46.	When did your baby receive the BCG vaccine?	1 Within 24 hours after birth 2 Within first week after birth 3 Within first 2 weeks after birth 4 After the first 2 weeks 96 Other (specify) 88 DK

		99 NR/RF
47.	Where did your baby receive the BCG vaccine?	1 Health facility (specify name: _____) 2 Outreach in community 96 Other (specify) 88 DK 99 NR/RF
48.	Did your baby receive the DPT vaccine, that is, an injection in the thigh or buttocks, sometimes at the same time as the polio vaccine?	1 Yes 2 No → GOTO Q50 88 DK 99 NR/RF
49.	Where did your baby receive the DPT vaccine?	1 Health facility (specify name: _____) 2 Outreach in community 96 Other (specify) 88 DK 99 NR/RF
50.	Did your newborn baby experience any episodes of illness (fever, diarrhea, vomiting, coughing) in the last two weeks?	1 Yes 2 No → GOTO Q59 88 DK 99 NR/RF
51.	Did your newborn baby receive any type of care for this episode of illness?	1 Yes → GOTO Q54 2 No 88 DK 99 NR/RF
52.	<i>[Ask only if respondent answered “no” to Q51]</i> Why didn’t you seek care for your newborn baby at a health facility?	1 Cost 2 Distance/transport 3 Didn’t know where to go 4 Illness was not serious 5 Discouragement from partner/family 6 Traditional to treat in home or community 7 Negative prior experience seeking advice or treatment 96 Other (specify) 88 DK 99 NR/RF
53.	<i>[Ask only if respondent answered “no” to Q51]</i> Who made this decision? [For all responses, skip to Q58] SELECT ALL THAT APPLY	1 Respondent 2 Husband/partner 3 Respondent and husband/partner 4 In-laws 5 Parents 96 Other (specify) 88 DK 99 NR/RF



54.	Where did you go for care for your newborn baby?	1 Your home 2 Other's home 3 Health facility (specify name: _____) 4 Pharmacy 96 Other (specify) 88 DK 99 NR/RF
55.	Who provided this care?	1 Doctor 2 Nurse/midwife 3 TBA 4 Community health worker 5 Traditional healer 6 Pharmacist/staff at pharmacy 96 Other (specify) 88 DK 99 NR/RF
56.	Who made this decision to provide your newborn baby this care? SELECT ALL THAT APPLY	1 Respondent 2 Husband/partner 3 Respondent and husband/partner 4 In-laws 5 Parents 96 Other (specify) 88 DK 99 NR/RF
57.	Why did (decision maker) decide to seek that care?	1 Cost 2 Availability of drugs 3 Convenient location 4 Quality of care 5 Attitude of provider 6 Illness was serious 7 Preference of partner/family 8 Tradition 96 Other (specify) 88 DK 99 NR/RF
58.	How many children do you have under 5 years of age, not including your newborn baby?	NUMERIC (If '00' GOTO Q67) 88 DK 99 NR/RF
59.	In the last two weeks, did any of your children mentioned experience illness (fever, diarrhea, vomiting, coughing)?	1 Yes 2 No → GOTO Q67 88 DK 99 NR/RF
60.	For the most recent incident of illness, did your child receive any type of care for this episode of illness?	1 Yes → GOTO Q63 2 No 88 DK

		99 NR/RF
61.	<i>[Ask only if respondent answered “no” to Q60]</i> For the most recent incident of illness, why didn’t you seek care for your child at a health facility?	1 Lack of money 2 Lack of transport 3 Health facility too far 4 Illness was not serious 96 Other (specify) 88 DK 99 NR/RF
62.	<i>[Ask only if respondent answered “no” to Q60]</i> Who made this decision? [For all responses, skip to Q67]	1 Respondent 2 Husband/partner 3 Respondent and husband/partner 4 In-laws 5 Parents 96 Other (specify) 88 DK 99 NR/RF
63.	Where did you go for care for your children?	1 Your home 2 Other’s home 3 Health facility (specify name: _____) 4 Pharmacy 96 Other (specify) 88 DK 99 NR/RF
64.	Who provided this care?	1 Doctor 2 Nurse/midwife 3 TBA 4 Community health worker 5 Traditional healer 96 Other (specify) 88 DK 99 NR/RF
65.	Who made this decision to provide your child this care? SELECT ALL THAT APPLY	1 Respondent 2 Husband/partner 3 Respondent and husband/partner 4 In-laws 5 Parents 96 Other (specify) 88 DK 99 NR/RF
66.	Why did (decision maker) decide to seek that care?	1 Cost 2 Availability of drugs 3 Convenient location 4 Quality of care 5 Attitude of provider 6 Illness was serious

		7 Preference of partner/family 8 Tradition 96 Other (specify) 88 DK 99 NR/RF
	<b>Perceived Quality and Satisfaction</b>	
	I would like to ask you some more questions about how satisfied you were with your experience in the health facility where you delivered. Please remember that nothing you tell us will be shared with the health facility, and your responses will not affect health care for you or your children in the future.	
67.	Overall, how satisfied were you with your experience during your most recent delivery?	1 Very satisfied 2 Somewhat satisfied 3 Somewhat dissatisfied 4 Very dissatisfied 88 DK 99 NR/RF
68.	How would you rate the knowledge and competence of health workers at (insert name of facility) for your delivery?	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor 88 DK 99 NR/RF
69.	How would you rate the respect the providers showed you at (insert name of facility) for your delivery? By respect I mean being treated with the care and attention you deserve.	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor 88 DK 99 NR/RF
70.	How would you rate the availability of drugs, supplies, and medical equipment at (insert name of facility) for your delivery?	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor 88 DK 99 NR/RF
71.	How would you rate the communication skills of the providers at (insert name of facility)? By this, I mean, how well did they explain things to you during your labor and delivery.	1 Excellent 2 Very good 3 Good 4 Fair 5 Poor 88 DK 99 NR/RF
72.	Overall, taking everything into account, how would	1 Excellent

	you rate the quality of care you received at (insert name of facility) for your delivery?	2 Very good 3 Good 4 Fair 5 Poor 88 DK 99 NR/RF
<b>Experience of Disrespect and Abuse</b>		
	Some women tell us that when they give birth they are treated poorly or with disrespect. We would like to know how common this problem is, so we would like to ask you about your own experiences with childbirth. There are no right or wrong answers to these questions. It is only important to us that we understand your experiences. Nothing you tell us will be linked to your name, your children's names, or the ability of you or your family members to access health care in the future. Some of these questions may be upsetting or stressful. As I said before, you can skip any question you are not comfortable answering, and you can stop the interview at any point.	
73.	At any point during your stay in (insert facility name) for your delivery were you treated in a way that made you feel disrespected?	1 Yes 2 No → GOTO 75 88 DK 99 NR/RF
74.	What exactly happened?	_____ _____ _____ _____
	Now I'm going to read you a list of things that sometimes happen to women who have given birth in a facility. For each of these things, please tell me if you have 1) experienced it during your recent delivery at (insert facility name), 2) witnessed it done to other women delivering in (insert facility name), 3) heard about it done to other women delivering in any facility, or 4) none of the above. Please keep in mind we are talking about your <b>most recent</b> delivery and not your past deliveries.	
<b>Non-confidential care</b>		
75.	Health providers discussed patient's private health information in a way that others could hear  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
76.	Health providers shared patient's private health information with others without patient's consent  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
77.	Patient's physical privacy was violated (for example, patient was uncovered during delivery)	1 Experienced 2 Witnessed

	SELECT ALL THAT APPLY	3 Heard about 4 None of the above 88 DK 99 NR/RF
<b>Non-dignified care</b>		
78.	Health providers shouting at or scolding patient  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
79.	Health providers suggesting or asking for a bribe or informal payment for better care SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
80.	Health providers threatening to withhold treatment because patient could not pay or did not have supplies (including delivery kit)  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
81.	Health providers threatening patient for any other reason  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 R/RF
82.	Health providers making negative or disparaging comments about the patient  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
83.	Health providers ignoring or abandoning patient when in need or when she called for help  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
84.	Delivered without any assistance  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK

		99 NR/RF
<b>Non-consented care</b>		
85.	Tubal ligation (tying of the fallopian tubes) without her permission  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
86.	Caesarean section without patient or her relatives' permission SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
87.	Hysterectomy (getting your uterus removed) without patient or her relatives' permission  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
<b>Physical Abuse</b>		
88.	Hitting, slapping, pushing, pinching or otherwise beating patient  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
89.	Health providers sexually harassing patients or making sexual advances (for example, inappropriate touching or sexual comments that make you feel uncomfortable)	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
90.	Rape. By rape I mean being forced to have intercourse or perform any other sexual acts against your will by someone other than your husband.  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
91.	Not providing anesthesia for the stitching of episiotomy (cutting to widen the birth canal)  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
<b>Discrimination</b>		

92.	Patients treated poorly because of social class, poverty  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
93.	Patients treated poorly because of ethnicity, religion, tribe  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
94.	Patients treated poorly because of age, marital status, health status  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
95.	(If answered 1-3 for #s 92-94) What happened?	_____ _____ _____ _____
<b>Detention</b>		
96.	Woman or baby not allowed to leave the hospital due to failure to pay  SELECT ALL THAT APPLY	1 Experienced 2 Witnessed 3 Heard about 4 None of the above 88 DK 99 NR/RF
<b>Other</b>		
97.	Did anything else disrespectful happen to you that we didn't ask about?	1 Yes 2 No →GOTO Q99 88 DK 99 NR/RF
98.	What exactly happened?	_____ _____ _____ _____
<b>Reaction to abuse</b>		
<b>FOR QUESTIONS 99-101, ASK ONLY IF RESPONDENT EXPERIENCED 1 OR MORE ABUSE EVENT [RESPONSE IS 1 FOR ANY OF THE FOLLOWING QUESTIONS: 73, 75-94, 96-97] IF NONE, SKIP TO 102.</b>		
99.	For the majority of your experiences of disrespect that you told us about, was the abuser male or	1 Male 2 Female

	female?	3 Both male and female 88 DK 99 NR/RF
100.	Now for your experiences we talked about above, I would like to know how you reacted. Did you or anyone on your behalf: take no action, complain to the nurse/doctor in charge or other staff person, or formally file a complaint? SELECT ALL THAT APPLY	1 Took no action 2 Complained to the nurse/doctor in charge or other staff person 3 Formally filed a complaint 96 Other (specify) 88 DK 99 NR/RF
101.	Now, I would like to know how severe the abuse that you experienced was. Can you tell me how severe the experiences that we talked about were to you?	1 Mild 2 Moderate 3 Severe 4 Extreme 88 DK 99 NR/RF
102.	I know some of the questions I just asked may have been upsetting. We are almost finished with this survey. Would you like to take a short break from answering questions? <i>[If yes, wait a few minutes]</i> Is it alright if we continue with the survey?	1 Yes → GOTO Q103 2 No → Terminate the survey
<b>I.</b>	<b>Looking Forward</b>	
	Thank you. Now I would like to ask you about your plans to choose health care facilities in the future.	
103.	Do you plan to have more children?	1 Yes 2 No → GOTO Q108 88 DK 99 NR/RF
104.	Where do you plan to deliver your next child?	1 Same facility → GOTO Q106 2 Another facility (specify) 3 Your Home 4 Other Home 96 Other (specify) 88 DK → GOTO Q106 99 NR/RF → GOTO Q106
105.	Why do you <b>not</b> want to deliver your next child at the facility where you recently delivered?	OPEN FIELD 88 DK 99 NR/RF
106.	Now I am going to read you a list of things that might influence your decision about where to deliver your next child. Please tell me which is the most important to you.	1 Short waiting time to see doctor 2 Short distance to facility 3 Facility is clean 4 Being treated with respect 5 Provider is competent/knowledgeable 6 Confidentiality/privacy



		<p>7 Good supply of medicines</p> <p>8 Affordable cost of treatment</p> <p>9 Being able to choose health care provider</p> <p>96 Other (specify)</p> <p>88 DK</p> <p>99 NR/RF</p>
107.	How much did your experiences during your most delivery influence your decision on where to deliver in the future?	<p>1 A lot</p> <p>2 Somewhat</p> <p>3 Very little</p> <p>4 Not at all</p> <p>88 DK</p> <p>99 NR/RF</p>
108.	How likely are you to recommend (insert facility name) to other women for delivery?	<p>1 Very likely</p> <p>2 Somewhat likely</p> <p>3 Somewhat unlikely</p> <p>4 Not at all likely</p> <p>88 DK</p> <p>99 NR/RF</p>
109.	How likely are you to recommend (insert facility name) to others for general health services?	<p>1 Very likely</p> <p>2 Somewhat likely</p> <p>3 Somewhat unlikely</p> <p>4 Not at all likely</p> <p>88 DK</p> <p>99 NR/RF</p>
110.	How likely are you to bring your child/children to (insert facility name) for health care in the future?	<p>1 Very likely</p> <p>2 Somewhat likely</p> <p>3 Somewhat unlikely</p> <p>4 Not at all likely</p> <p>88 DK</p> <p>99 NR/RF</p>
111.	If you were a manager and could choose to do one thing to improve the care women get in (insert facility name) for childbirth, what would it be?	<p>1 Shorten waiting time to see doctor</p> <p>2 Improve skills of doctors/nurses</p> <p>3 Clean facility</p> <p>4 Improve respect of doctors/nurses toward patients</p> <p>5 Improve confidentiality/privacy</p> <p>6 Improve supply of medicines</p> <p>7 Reduce cost of treatment</p> <p>8 Improve women's ability to choose a health care provider</p> <p>96 Other (specify)</p> <p>88 DK</p> <p>99 NR/RF</p>