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APPENDICES

APPENDIX 1

INFORMED CONSENT FORM

I.....of Khuruthang / Kabesa / Limbukha of Punakha District have been fully explained of the purpose and the importance of this survey. I fully understand and have confidence that the information I give will be used only for the purpose of this study. I voluntary participate in this study.

1.Signature:

2.Thumb impression

(incase of illiterate women)

APPENDIX 2

QUESTIONNAIRE

Information Source on Contraceptives, and Utilization Among Married Women of Reproductive Age (15-49) Years Structured Questionnaires for Interview

Please tick ✓ in or fill in ID

Date of interview

1. What was your age on your last birthday? Age.....Years

2. What is your highest educational level completed? (Please tick in 1 the box only)

<input type="checkbox"/> 1.None	<input type="checkbox"/> 4.Secondary level completed
<input type="checkbox"/> 2.Non-formal	<input type="checkbox"/> 5.Higher secondary completed
<input type="checkbox"/> 3.Primary level completed	<input type="checkbox"/> 6.College/ University completed
<input type="checkbox"/> 7.Others (specify).....	

3. What is your main occupation? (Please tick in 1 box only)

<input type="checkbox"/> 1.Farming	<input type="checkbox"/> 4.Government servant
<input type="checkbox"/> 2.Housewife	<input type="checkbox"/> 5.Business
<input type="checkbox"/> 3.Day laborer	<input type="checkbox"/> 6.Others (specify).....

4. What is your religion?

<input type="checkbox"/> 1.Buddhism	<input type="checkbox"/> 3.Christian
<input type="checkbox"/> 2.Hinduism	<input type="checkbox"/> 4.Others (specify).....

5. What type of house do you have?

<input type="checkbox"/> 1.Hut - (10)
<input type="checkbox"/> 2.Traditional house single storied - (20)
<input type="checkbox"/> 3.Traditional house double storied - (30)
<input type="checkbox"/> 4.Concrete building - (40)

16. If yes what would you like to have?

1.Boy.

2. Girl

17. Who decides family planning for you? (Tick in one box only)

1.Self.

5.Peer

2.Husband

6.Health worker

4.Mother/mother in-law

7.Others (specify).....

18. Perception on methods and contraception :-

	Statements	Agree (3)	Disagree (1)	Don't know (2)
1	Non use of contraception leads to unwanted pregnancies			
2	Repeated pregnancies makes women's life risky			
3	Husband's approval is essential to use contraceptives			
4	Pill may be used throughout the reproductive age by most women			
5	Condom reduces men's feeling			
6	Oral pill and injection causes many problems			
7	Cu.T walks around in the body			
8	Tubal ligation makes women weak			
9	Vasectomy makes men weak			
10	Contraceptive is only for limiting children			
11	Small family is a happy family			
12	Family planning is women's responsibility			
13	Family planning is good for women's health			
14	Family planning is against nature and undermines women's health			
15	People should not interfere in God's doing			
16	Family planning is not good as long as there is no daughter			
17	Following tubal ligation and vasectomy men and women can work as before			

19. How long does it take for you to reach the health center?

1. Half an hour to one-hour 3. Three hours to five hour
 2. One hour to two hours

20. How long does it take for you to get the service?

1. Half an hour 3. One hour
 2. Two hours 4. More than two hours

21. Which of the following methods can be used for family planning? (Check all that apply, ask them to tell the methods of contraceptives)

[1.No 2.Yes 0.Don't Know]

	Yes	No	Don't Know
21.1 Oral pills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.2 Injection (DMPA)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.3 Intrauterine device (IUD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.4 Condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.5 Abstinence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.6 Withdrawal/coitus interruptus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
21.7 Sterilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

22. Which of the following contraceptives are for man and which are for women?

(Please check all that apply, ask them to tell the contraceptive method)

[1.Men 2.Women 0.Don't know]

	Men	Women	Don't Know
22.1 Oral pills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.2 Injection	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.3 Condom	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.4 Intrauterine device (IUD)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.5 Abstinence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.6 Withdrawal/coitus interruptus	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.7 Vasectomy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
22.8 Tubal ligation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

30. If no why?

- 1.It is out of stock
- 2.There is no trained personal to deliver the IUD insertion
- 3.There are only expired contraceptives
- 4.Others specify

31. What information about contraception do you need?

- 1.I want to get the information on different methods of contraceptive methods
- 2.I want to know what services are available
- 3.I want to know about the adverse effect of contraceptives
- 4.Other information's (specify).....

32. If no, what is your main reason for not using any contraceptives? (Please tick in 1 box only)

- 1.Opposed by husband
- 2.I want more children
- 3.Less sexual activity
- 4.I entered menopause
- 5.I am lactating mother
- 6.Afraid of adverse effect
- 7.I feel shy to obtain contraceptives
- 8.I had my uterus removed
- 9.Others (specify).....

33. Do you intend to use any contraception in future?

- 1.Yes
- 2.No

34. If yes what method would you like to use?

- 1.Oral pills
- 2.Injection
- 3.IUD
- 4.condom
- 5.Tubal ligation
- 6.Vasectomy
- 7.Abstinence
- 8.Withdrawal

Signature of interviewer.....

APPENDIX 3

ACTIVITY SCHEDULE

Activity	Jun 04	Jul	Aug	Sep	Oct	Nov	Dec	Jan 05	Feb	Mar	Apr	May
Preparation of thesis proposal			←————→									
Defense of thesis proposal								↔				
Data collection									↔			
Data analysis										↔		
Report writing											↔	
Submit for final defense											↔	
Thesis exam												↔
Revision												↔
Submit as final product												↔

APPENDIX 4

ESTIMATED BUDGET

SI. no	Activity	Unit cost Bhat	Total unit	Total amount Bhat
1	Air fare	10,000	2	20,000
2	Air port tax	800	2	800
3	Taxi fare	600	2	1,200
4	Training and hiring of interviewer		5	10,000
5	Stationeries			5,000
6	Photocopy			10,000
7	Refreshment			3,000
			Total	50,000 Bhat

CURRICULUM VITAE

Name : Chimmi Lhamu

Gender : Female

Date of birth : 10th Jan. 1968

Education : Graduated from Royal institute of health sciences in the year 1985 as General Nurse Midwife, and worked as head nurse of the maternal and child health unit in national referral hospital Thimphu

Training done

1995 may –1996 may : persuaded further studies in Critical Care Nursing in Vellore Christian Medical College and Hospital in India

1998sept-dec1998 : attended short course on safe motherhood in Changmai. Thailand

2001-2002 : Persuaded further education and received Bachelor Degree of nursing in 2003

1998 still this course started worked as head nurse of Punakha hospital

Current office : Punakha General Hospital

Address Office : Punakha Hospital P.O. Punakha Bhutan

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