

QUESTIONNAIRE FOR INDIVIDUAL MEN

MAN'S INFORMATION PANEL		ME
<p><i>This questionnaire is to be administered to a man age 15 through 59, selected for Men's Individual Questionnaire (see Household Listing Form, line HH20BC Instruction for selection of a man for Men's Individual Questionnaire). A separate questionnaire should be used for eligible man.</i></p>		
ME1. Cluster number: _____	ME2. Household number: _____	
ME3. Man's name: Name.....	ME4. Man's line number: _____	
ME5. Interviewer name and number: Name.....	ME6. Day / Month / Year of interview: ____ / ____ / _____	
<p>Repeat greeting if not already read to this man:</p> <p>We are from Agency of Statistics, the Republic of Kazakhstan. We are working on a project concerned with family health, education, status of women and children. I would like to talk to you about these subjects. The interview will take about 10 minutes. All the information we obtain will remain strictly confidential and your answers will never be shared with anyone other than our project team.</p>	<p>If greeting at the beginning of the household questionnaire has already been read to this man, then read the following:</p> <p>Now I would like to talk to you more about your health and other topics. This interview will take about 10 minutes. Again, all the information we obtain will remain strictly confidential and your answers will never be shared with anyone other than our project team.</p>	
<p>May I start now?</p> <p><input type="checkbox"/> Yes, permission is given ⇒ Go to ME10 to record the time and then begin the interview.</p> <p><input type="checkbox"/> No, permission is not given ⇒ Complete ME7. Discuss this result with your supervisor.</p>		
ME7. Result of man's interview	<p>Completed01</p> <p>Not at home.....02</p> <p>Refused03</p> <p>Partly completed.....04</p> <p>Incapacitated.....05</p> <p>Other (specify)96</p>	
ME8. Field edited by (Name and number): Name _____	ME9. Data entry clerk (Name and number): Name _____	
ME10. Record the time.	Hour and minutes :	

MAN'S BACKGROUND		MB
MB1. In what month and year were you born?	Date of birth Month..... __ __ DK month..... 98 Year __ __ __ __ DK year..... 9998	
MB2. How old are you? <i>Probe: How old were you at your last birthday?</i> <i>Compare and correct MB1 and/or MB2 if inconsistent</i>	Age (in completed years)..... __ __	
MB3. Have you ever attended school or preschool?	Yes..... 1 No..... 2	2⇒MB7
MB4. What is the highest level of school you attended?	Preschool..... 0 Primary 1 Secondary 2 Higher 3	0⇒MB7
MB5. What is the highest grade you completed at that level? <i>If less than 1 grade, enter "00"</i>	Grade..... __ __	
MB6. Check MB4: <input type="checkbox"/> <i>Secondary, secondary-special or higher.</i> ⇒ <i>Go to Next Module</i> <input type="checkbox"/> <i>Primary</i> ⇒ <i>Continue with MB7</i>		
MB7. Now I would like you to read this sentence to me. <i>Show sentence on the card to the respondent.</i> <i>If respondent cannot read whole sentence, probe:</i> Can you read part of the sentence to me?	Cannot read at all 1 Able to read only parts of sentence 2 Able to read whole sentence 3 No sentence in required language _____ 4 <i>(specify language)</i> Blind / mute, visually / speech impaired 5	

ACCESS TO MASS MEDIA AND USE OF INFORMATION/ COMMUNICATION TECHNOLOGY

MMT

MMT1. Check MB7:

 Question left blank (Respondent has secondary, secondary-special or higher education) ⇒
Continue with MMT2

Able to read or no sentence in required language (codes 2, 3 or 4) ⇒ Continue with MMT2

Cannot read at all or blind (codes 1 or 5) ⇒ Go to MMT3

MMT2. How often do you read a newspaper or magazine: Almost every day, at least once a week, less than once a week or not at all?	Almost every day 1 At least once a week 2 Less than once a week..... 3 Not at all 4	
MMT3. Do you listen to the radio almost every day, at least once a week, less than once a week or not at all?	Almost every day 1 At least once a week 2 Less than once a week..... 3 Not at all 4	
MMT4. How often do you watch television: Would you say that you watch almost every day, at least once a week, less than once a week or not at all?	Almost every day 1 At least once a week 2 Less than once a week..... 3 Not at all 4	
MMT5. Check MB2: Age of respondent between 15 and 24?		
<input type="checkbox"/> Age 15-24 ⇒ Continue with MMT6 <input type="checkbox"/> Age 25-59 ⇒ Go to Next Module		
MMT6. Have you ever used a computer?	Yes..... 1 No 2	2⇒MMT9
MMT7. Have you used a computer from any location in the last 12 months?	Yes..... 1 No 2	2⇒MMT9
MMT8. During the last one month, how often did you use a computer? almost every day, at least once a week, less than once a week or not at all?	Almost every day 1 At least once a week 2 Less than once a week..... 3 Not at all 4	
MMT9. Have you ever used the internet?	Yes..... 1 No 2	2⇒Next Module
MMT10. In the last 12 months, have you used the internet? <i>If necessary, probe for use from any location, with any device.</i>	Yes..... 1 No 2	2⇒ Next Module
MMT11. During the last one month, how often did you use the internet? almost every day, at least once a week, less than once a week or not at all?	Almost every day 1 At least once a week 2 Less than once a week..... 3 Not at all 4	

CONTRACEPTION		MCP
MCP2. Couples use various ways or methods to delay or avoid a pregnancy. Are you or (any of) your partners currently doing something or using any method to delay or avoid getting pregnant?	Yes..... 1 No 2	2⇒Next Module
MCP3. What are you doing to delay or avoid a pregnancy? <i>Do not prompt. If more than one method is mentioned, circle each one.</i>	Female sterilization..... A Male sterilization..... B IUD C Injectables D Implants..... E Pill..... F Male condom..... G Female condom..... H Diaphragm..... I Foam / Jelly J Lactational amenorrhoea method (LAM)..... K Periodic abstinence / Rhythm..... L Withdrawal..... M Other (<i>specify</i>)..... X	

ATTITUDES TOWARD DOMESTIC VIOLENCE					MDV
MDV1. Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:		Yes	No	DK	
[A] If she goes out without telling him?	Goes out without telling	1	2	8	
[B] If she neglects the children?	Neglects children	1	2	8	
[C] If she argues with him?	Argues with him	1	2	8	
[D] If she refuses to have sex with him?	Refuses sex	1	2	8	
[E] If she burns the food?	Burns food	1	2	8	

MARRIAGE/UNION					MMA
MMA1. Are you currently married or living together with a woman as if married?	Yes, currently married..... 1 Yes, living with a man 2 No, not in union 3				3⇒MMA5
MMA2. How old is your wife/partner? <i>Probe: How old was your wife/partner on her last birthday?</i>	Age in years..... __ __ DK..... 98				3⇒MMA7 3⇒MMA7
MMA5. Have you ever been married or lived together with a woman as if married?	Yes, formerly married 1 Yes, formerly lived with a woman 2 No 3				3 ⇒Next Module

MMA6. What is your marital status now: are you widowed, divorced or separated?	Widowed 1 Divorced 2 Separated 3	
MMA7. Have you been married or lived with a woman only once or more than once?	Only once 1 More than once..... 2	
MMA8. In what month and year did you <u>first</u> marry or start living with a woman as if married?	Date of first marriage Month..... __ __ DK month..... 98 Year __ __ __ __ DK year..... 9998	⇒Next Module
MMA9. How old were you when you started living with your first wife/partner?	Age in years..... __ __	

SEXUAL BEHAVIOUR

MSB

MSB1A. Check MB2: Age of respondent from 15 to 24?

- Age 15-24** ⇒ Proceed with MSB1B
- Age 25-59** ⇒ Go to the next module

Check for the presence of others. Before continuing, ensure privacy.

MSB1B. Now I would like to ask you some questions about sexual activity in order to gain a better understanding of some important life issues. The information you supply will remain strictly confidential. How old were you when you had sexual intercourse for the very first time?	Never had intercourse 00 Age in years..... __ __ First time when started living with (first) wife/partner 95	00⇒Next Module
MSB2. The first time you had sexual intercourse, was a condom used?	Yes..... 1 No 2 DK / Don't remember..... 8	
MSB3. When was the last time you had sexual intercourse? <i>Record 'years ago' only if last intercourse was one or more years ago. If 12 months or more the answer must be recorded in years.</i>	Days ago 1 __ __ Weeks ago..... 2 __ __ Months ago..... 3 __ __ Years ago 4 __ __	4⇒MSB15
MSB4. The last time you had sexual intercourse, was a condom used?	Yes..... 1 No 2	

MSB5. What was your relationship to this person with whom you last had sexual intercourse? <i>Probe to ensure that the response refers to the relationship at the time of sexual intercourse</i> <i>If 'girlfriend', then ask: Were you living together as if married? If 'yes', circle '2'. If 'no', circle '3'.</i>	Wife 1 Cohabiting partner 2 Girlfriend 3 Casual acquaintance 4 Prostitute 5 Other (specify) _____ 6	3⇒MSB7 4⇒MSB7 5⇒MSB7 6⇒MSB7
MSB6. Check MMA1: <input type="checkbox"/> Currently married or living with a woman (MMA1 = 1 or 2) ⇒ Go to MSB8 <input type="checkbox"/> Not married / Not in union (MMA1 = 3) ⇒ Continue with MSB7		
MSB7. How old is this person? <i>If response is DK, probe: About how old is this person?</i>	Age of sexual partner __ __ DK..... 98	
MSB8. Have you had sexual intercourse with any other person in the last 12 months?	Yes..... 1 No..... 2	2⇒MSB15
MSB9. The last time you had sexual intercourse with this other person, was a condom used?	Yes..... 1 No..... 2	
MSB10. What was your relationship to this person? <i>Probe to ensure that the response refers to the relationship at the time of sexual intercourse</i> <i>If 'girlfriend' then ask: Were you living together as if married? If 'yes', circle '2'. If 'no', circle '3'.</i>	Wife 1 Cohabiting partner 2 Girlfriend 3 Casual acquaintance 4 Prostitute 5 Other (specify) _____ 6	3⇒MSB12 4⇒MSB12 5⇒MSB12 6⇒MSB12
MSB11. Check MMA1 and MMA7: <input type="checkbox"/> a) Currently married or living with a woman (MMA1 = 1 or 2) AND b) Married only once or lived with a woman only once (MMA7 = 1) ⇒ Go to MSB13 <input type="checkbox"/> Else ⇒ Continue with MSB12		
MSB12. How old is this person? <i>If response is DK, probe: About how old is this person?</i>	Age of sexual partner __ __ DK..... 98	
MSB13. Other than these two persons, have you had sexual intercourse with any other person in the last 12 months?	Yes..... 1 No..... 2	2⇒MSB15
MSB14. In total, with how many different people have you had sexual intercourse in the last 12 months?	Number of partners..... __ __	

<p>MSB15. In total, with how many different people have you had sexual intercourse in your lifetime?</p> <p><i>If a non-numeric answer is given, probe to get an estimate.</i></p> <p><i>If number of partners is 95 or more, write '95'.</i></p>	<p>Number of lifetime partners _ _</p> <p>DK..... 98</p>	
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HIV/AIDS				MHA
MHA1. Now I would like to talk with you about something else. Have you ever heard of an illness called HIV?	Yes..... 1 No..... 2			2⇒Next Module
MHA2. Can people reduce their chance of getting the HIV virus by having just one uninfected sex partner who has no other sex partners?	Yes..... 1 No..... 2 DK..... 8			
MHA3. Can people get the HIV virus because of witchcraft or other supernatural means?	Yes..... 1 No..... 2 DK..... 8			
MHA4. Can people reduce their chance of getting the HIV virus by using a condom every time they have sex?	Yes..... 1 No..... 2 DK..... 8			
MHA5. Can people get the HIV virus from mosquito bites?	Yes..... 1 No..... 2 DK..... 8			
MHA6. Can people get the HIV virus by sharing food with a person who has the AIDS virus?	Yes..... 1 No..... 2 DKM8			
MHA7. Is it possible for a healthy-looking person to have the HIV virus?	Yes..... 1 No..... 2 DK..... 8			
MHA8. Can the virus that causes HIV be transmitted from a mother to her baby:				
		Yes No DK		
[A] During pregnancy?	During pregnancy	1 2 8		
[B] During delivery?	During delivery	1 2 8		
[C] By breastfeeding?	By breastfeeding	1 2 8		
MHA9. In your opinion, if a female teacher has the AIDS virus but is not sick, should she be allowed to continue teaching in school?	Yes..... 1 No..... 2 DK / Not sure / Depends..... 8			
MHA10. Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had the HIV virus?	Yes..... 1 No..... 2 DK / Not sure / Depends..... 8			
MHA11. If a member of your family got infected with the HIV virus, would you want it to remain a secret?	Yes..... 1 No..... 2 DK / Not sure / Depends..... 8			
MHA12. If a member of your family became sick with HIV, would you be willing to care for her or him in your own household?	Yes..... 1 No..... 2 DK / Not sure / Depends..... 8			
MHA24. I don't want to know the results, but have you ever been tested to see if you have the HIV virus?	Yes..... 1 No..... 2			2⇒MHA27

MHA25. When was the most recent time you were tested?	Less than 12 months ago 1 12-23 months ago..... 2 2 or more years ago 3	
MHA26. I don't want to know the results, but did you get the results of the test?	Yes..... 1 No 2 DK..... 8	1⇒Next Module 2⇒ Next Module 8⇒Next Module
MHA27. Do you know of a place where people can go to get tested for the HIV virus?	Yes..... 1 No 2	

CIRCUMCISION		MMC
MMC1. Some men are circumcised, that is, the foreskin is completely removed from the penis. Are you circumcised?	Yes..... 1 No 2	2⇒Next Module
MMC2. How old were you when you got circumcised?	Age in years..... ____ DK..... 98	
MMC3. Who did the circumcision?	Health worker/Professional..... 1 Traditional practitioner/family/friend/mullah 2 Other (<i>specify</i>) _____ 6 DK..... 8	
MMC4. Where was it done?	Health facility 1 Home of a health worker/professional 2 Circumcision done at home 3 Ritual site..... 4 Other home/place (<i>specify</i>) _____ 6 DK..... 8	

TOBACCO AND ALCOHOL USE		MTA
MTA1. Have you ever tried cigarette smoking, even one or two puffs?	Yes..... 1 No 2	2⇒MTA6
MTA2. How old were you when you smoked a whole cigarette for the first time?	Never smoked a whole cigarette 00 Age	00⇒MTA6
MTA3. Do you currently smoke cigarettes?	Yes..... 1 No 2	2⇒MTA6
MTA4. In the last 24 hours, how many cigarettes did you smoke?	Number of cigarettes	
MTA5. During the last one month, on how many days did you smoke cigarettes? <i>If less than 10 days, record the number of days. If 10 days but less than a month, circle "10". If "everyday" or "almost every day", circle "30"</i>	Number of days 0 ____ 10 days or more, but less than a month ... 10 Everyday / Almost every day 30	
MTA6. Have you ever tried any smoked tobacco products other than cigarettes, such as cigars, water pipe, cigarillos or pipe?	Yes..... 1 No 2	2⇒MTA10
MTA7. During the last one month, did you use any smoked tobacco products?	Yes..... 1 No 2	2⇒MTA10

MTA8. What type of smoked tobacco product did you use or smoke? <i>Circle all mentioned.</i>	Cigars A Water pipe B Cigarillos..... C Pipe D Other (<i>specify</i>) X	
MTA9. During the last one month, on how many days did you use smoked tobacco products? <i>If less than 10 days, record the number of days. If 10 days or more, but less than a month circle "10". If "everyday" or "almost every day", circle "30"</i>	Number of days 0 ____ 10 days or more but less than a month 10 Everyday / Almost every day 30	
MTA10. Have you tried other types of tobacco products free of smoke, such as chewing tobacco, snuff and nasybai?	Yes..... 1 No..... 2	2⇒MTA14
MTA11. During the last one month, did you use any smokeless tobacco products?	Yes..... 1 No..... 2	2⇒MTA14
MTA12. What type of smokeless tobacco product did you use? <i>Circle all mentioned.</i>	Chewing tobacco..... A Snuff B Nasybai..... C Other (<i>specify</i>) X	
MTA13. During the last one month, on how many days did you use smokeless tobacco products? <i>If less than 10 days, record the number of days. If 10 days or more but less than a month, circle "10". If "everyday" or "almost every day", circle "30"</i>	Number of days 0 ____ 10 days or more but less than a month 10 Everyday / Almost every day 30	
MTA14. Now I would like to ask you some questions about drinking alcohol. Have you ever drunk alcohol?	Yes..... 1 No..... 2	2⇒Next Module
MTA15. We count one drink of alcohol as one can or bottle of beer, one glass of wine, or one shot of cognac, vodka, whiskey or rum. How old were you when you had your first drink of alcohol, other than a few sips?	Never had one drink of alcohol..... 00 Age ____ ____	00⇒Next Module
MTA16. During the last one month, on how many days did you have at least one drink of alcohol? <i>If respondent did not drink, circle "00". If less than 10 days, record the number of days. If 10 days or more, circle "10". If "everyday" or "almost every day", circle "30"</i>	Did not have one drink in last one month . 00 Number of days 0 ____ 10 days or more..... 10 Everyday / Almost every day 30	00⇒Next Module
MTA17. In the last one month, on the days that you drank alcohol, how many drinks did you usually have?	Number of drinks ____ ____	

ME11. Record the time.	Hour and minutes ____ : ____	
<i>End the interview with this respondent by thanking him for his cooperation.</i>		

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations