



THE ACT FRAMEWORK PACKAGE:

**MEASURING SOCIAL NORMS AROUND
FEMALE GENITAL MUTILATION**

ACT INSTRUMENTS

December 2020





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INTRODUCTION

The instruments in this document are intended for use with reference to the ACT Framework. The **ACT Framework Package** includes three core documents: the **ACT Framework**, the **ACT Instruments** (this document) and the **ACT Implementation Templates**.¹ *Figure 1* shows what 'ACT' stands for and outlines what is included in each of the three core ACT documents.

The ACT Framework Package was developed under the oversight of the UNFPA–UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change. It seeks to respond to the need for a macro-level monitoring and evaluation (M&E) framework for social norms change, specifically for female genital mutilation (FGM), which can be adapted to local country contexts.

ACT Framework	<ul style="list-style-type: none"> · Explains the framework · Describes the indicators included in the framework · Provides guidelines for implementation of the framework
ACT Instruments (this document)	<ul style="list-style-type: none"> · Contains the quantitative and qualitative data-collection tools: Structured Interview at Household Level, Focus Group Discussion Guide, and In-Depth Interview Guide · Includes notes on preparing the tools for use, pretesting questions and training data collectors
ACT Implementation Templates	<ul style="list-style-type: none"> · Offers adaptable templates that give additional support to researchers for implementing the framework · Specifically meant to accompany Section 3 of the ACT Framework ('Implementing the ACT Framework')

Figure 1: ACT framework package core documents²

A	<ul style="list-style-type: none"> ◦ Assess what people know, feel and do ◦ Ascertain 'normative' factors: descriptive norms, injunctive norms and outcome expectancies
B	<ul style="list-style-type: none"> ◦ Consider context, specifically gender and power ◦ Collect information on social networks and support
C	<ul style="list-style-type: none"> ◦ Track individual and social change over time ◦ Test and retest this framework

In addition to the three core documents, the ACT Framework Package contains supplementary materials that can be accessed for reference. These provide further relevant contextual information and explanation. These supplementary materials include:³

1. Social Norms Desk Review:

Outlines the results of a 2016 literature review of existing information on social norms and measurement of FGM, which was used to design the core documents of the ACT Framework Package.

2. ACT Global Validation Process Report:

Details the steps taken to develop and validate the ACT Framework and the ACT Instruments (measurement tools).

3. Summary of the ACT Framework:

Presents a four-page overview of the ACT Framework, published in February 2020. This document was published before the ACT Framework was finalized so it may contain some discrepancies with the final ACT Framework.

¹ All the documents in the ACT Framework Package are available online

² The four sections of the ACT Framework are: (1) Background; (2) ACT Framework Overview; (3) Implementing the ACT Framework; (4) The ACT Framework Indicators.

³ All the documents in the ACT Framework Package are available online



STRUCTURED INTERVIEW AT HOUSEHOLD LEVEL

This structured interview involves a one-on-one discussion with an individual, typically lasting between 60 to 90 minutes. It mainly consists of closed-ended (quantitative) questions with pre-coded response categories. Some of the closed-ended questions are accompanied by open-ended (qualitative) questions to allow for probing. In addition, visual props are used to enhance comprehension for specific questions. These household-level structured interviews will provide information relating to all the A–C–T elements of the ACT Framework (see *Figure 1*).

Note to the implementing organization

Before using this document for training data collectors, you will need to do the following:

1. The ‘Preparation & training instructions’ column in the table for each of the 12 interview sections includes notes for how to create your country-specific version of the tool, along with instructions that should be given to data collectors during training. It also includes guidance notes for inputting your version of the tool into a computer-assisted personal interviewing (CAPI) program.
2. There are additional boxes of ‘Notes to the implementing organization’ like this one throughout, to provide information specific to individual sections of the interview.
3. Throughout the interview instrument presented here, you will see blue highlighted, italicized text in capital letters *[LIKE THIS]*. This text indicates a place (a ‘field’) where you should fill in the specified information as appropriate to your organization/context/country.
4. Make sure that any changes made to the structured interview form are reflected in the IDI and FGD guides, presented later in this document.

This page can be deleted before printing copies for or sharing digital copies with the data collectors.

SECTION 1: INTERVIEW INFORMATION

No.	Question	Coding categories	Preparation & training instructions	
i.1	Name of supervisor	[SUPERVISOR NAME]	1	PREPARATION: Assign each supervisor a code and list these in the coding categories column. Add more rows as needed depending on the number of supervisors.
		[SUPERVISOR NAME]	2	
		[SUPERVISOR NAME]	3	
i.2	Name of data collector	[DATA COLLECTOR NAME]	1	PREPARATION: Assign each data collector a code and list these in the coding categories column. Add more rows as needed depending on the number of data collectors.
		[DATA COLLECTOR NAME]	2	
		[DATA COLLECTOR NAME]	3	
i.3	Name of lister	[LISTER NAME]	1	PREPARATION: Assign each lister a code and list these in the coding categories column. Add more rows as needed depending on the number of listers.
		[LISTER NAME]	2	
		[LISTER NAME]	3	
i.4	GPS coordinates: Accuracy	N __ __ __ __ . __ __ __ __ __ __	CAPI: If possible, have this automatically populated by your CAPI program.	
i.5	GPS coordinates: Longitude	E/W __ __ __ __ . __ __ __ __ __ __		
i.6	GPS coordinates: Latitude	N __ __ __ __ . __ __ __ __ __ __		
i.7	GPS coordinates: Altitude			
i.8	Region	[REGION 1]	1	PREPARATION: Create codes for each region in your study and list these in the coding categories column. If your country is not divided into regions as the main administrative division, change this to match your country's structure (e.g., state, territory, province, county, district). Add more rows as needed.
		[REGION 2]	2	
		[REGION 3]	3	

i.9	<i>[ADMINISTRATIVE UNIT WITHIN i.8]</i>	<i>[SUB-UNIT 1]</i>	1	PREPARATION: For i.9 to i.12, fill in the administrative sub-units appropriate to your context, with each subsequent question being a smaller subdivision. Add more rows as needed. You may not need some of the questions between i.9 and i.12. Delete those not necessary for your context.
		<i>[SUB-UNIT 2]</i>	2	
		<i>[SUB-UNIT 3]</i>	3	
i.10	<i>[ADMINISTRATIVE UNIT WITHIN i.9]</i>	<i>[SUB-SUB-UNIT 1]</i>	1	
		<i>[SUB-SUB-UNIT 2]</i>	2	
		<i>[SUB-SUB-UNIT 3]</i>	3	
i.11	<i>[ADMINISTRATIVE UNIT WITHIN i.10]</i>	<i>[SUB-SUB-SUB-UNIT 1]</i>	1	
		<i>[SUB-SUB-SUB-UNIT 2]</i>	2	
		<i>[SUB-SUB-SUB-UNIT 3]</i>	3	
i.12	<i>[ADMINISTRATIVE UNIT WITHIN i.11]</i>	<i>[SUB-SUB-SUB-SUB-UNIT 1]</i>	1	
		<i>[SUB-SUB-SUB-SUB-UNIT 2]</i>	2	
		<i>[SUB-SUB-SUB-SUB-UNIT 3]</i>	3	
i.13	Enumeration area code	<i>[EA CODE]</i>	1	PREPARATION: List the enumeration area codes that will be used for the household listing in the coding categories column. If you are using pre-designated enumeration areas, you may have your own specific area codes to use (rather than using 1, 2, 3, etc.). Add more rows as needed.
		<i>[EA CODE]</i>	2	
		<i>[EA CODE]</i>	3	
i.14	Unique household ID			Instructions for creating this are in the ACT Framework.
i.15	Unique respondent ID			Instructions for creating this are in the ACT Framework.

i.16	Major landmark near the house <i>· Multiple responses possible</i>	Hotel	1	TRAINING: This is to help the data collector locate the house after the listing has been completed. Include as many landmarks as necessary so that the data collector will be certain to visit the correct house.
		Restaurant	2	
		Church	3	
		Mosque	4	
		Marketplace	5	
		School/university	6	
		Body of water	7	
		Government office	8	
		Health centre	9	
		Other (specify)_____	777	
i.17	Designation of the guide leading researchers through community	NGO volunteers	1	TRAINING: In many situations, someone from the local community may help to identify houses or take the researchers throughout the area. Because this may lead to sampling bias, it is important for us to know who the guide was.
		NGO workers	2	
		Local guide	3	
		Health insurance workers	4	
		Government programme volunteers	5	
		Government programme workers	6	
		Other (specify)_____	777	

i.18	Type of residence (location)	Urban	1	PREPARATION: Adjust response categories based on your decision about who is in your sample.
		Rural	2	
		Peri-urban	3	
		Semi-rural	4	
i.19	Respondent type	Adolescent girl	1	
		Female caregiver	2	
		Male caregiver	3	
		Female influential	4	
		Male influential	5	
		Female social network	6	
		Male social network	7	



SECTION 2: INTRODUCTION

Hello, my name is _____ and I work for *[INSERT NAME OF ORGANIZATION OR RESEARCH AGENCY]*. Today, I am hoping to identify individuals to take part in a survey about female genital mutilation in *[ENTER NAME OF COUNTRY]*. I'd like to begin by asking an adult member of the household about the presence of adolescent girls aged 10–19 years who live in the household. Further, if selected for the survey, we may be interviewing one girl from each household and also selected caregivers, community leaders and social network contacts, if they consent to participate.

SECTION 3: HOUSEHOLD CHARACTERISTICS

Note to the implementing organization

Respondents often identify the adolescent girl's mother or other female when asked for the girl's primary caregiver. If it is important for your programme to have a large male sample, you should add listing questions to specifically ask for:

1. **The primary breadwinner**
2. **The primary decision maker in the house, or**
3. **The primary caregiver and secondary caregiver and then randomly select a male or a female caregiver for each girl.**



LISTING QUESTIONS

Please tell me how many adolescent girls between the ages of 10 and 19 are in this household?	Please give me the name of each adolescent girl aged 10–19.	How old is <i>[AG NAME]</i> ?	Would <i>[AG NAME]</i> be available sometime to participate in an interview?	What is the name of <i>[AG NAME]</i> 's primary caregiver (PCG)?	What is the gender of the PCG? <i>Note: If the PCG is the respondent, then do not ask, just circle.</i>	Would you or <i>[PCG name]</i> be available to participate sometime in an interview?
Enter total number of adolescent girls (AGs). If 0, thank them and move to the next house.	Enter first name only with each AG on a separate row.	Enter age in completed years at their last birthday.	0 = No 1 = Yes If No for ALL AGs, thank them and move to the next house. If there are multiple eligible AGs in the household (HH) then select the eldest one available to be interviewed.	Enter PCG's first name only. Enter this for each AG in the corresponding row.	0 = Male 1 = Female	0 = No 1 = Yes If No for ALL PCGs, thank them and move to the next house.

Is the household eligible? 0 = No, 1 = Yes

If the household is eligible, continue with the participant selection form (i.e., complete i.21–i.24 below).

If the household is not eligible, proceed to the next household.

If the household is eligible, ask for the contact number for at least one member of the household.

AG:

PCG:

HoH:⁴

Other:

⁴ Head of household

If the household is eligible: If the listing respondent is the PCG, state that you have a few more questions and continue with the interview. If the PCG is another adult, ask to speak with the PCG. If the PCG is available, proceed with the participant selection form (i.21–i.24).

i.21	Consent given	Refused	0	Proceed to next HH
		Yes	1	
i.22	Assent given	Refused	0	Proceed to next HH
		Yes	1	
		Not applicable	2	
i.23	Interview date	DD-MM-YY __ __ - __ __ - __ __		
i.24	Interview start time	HH:MM __ __ : __ __		

Uganda
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SECTION 4: SOCIOECONOMIC AND SOCIO-DEMOGRAPHIC VARIABLES

Note to the implementing organization

Some of the socioeconomic and demographic questions may not be relevant or appropriate to ask in your context. You should make your own decision about which questions to drop. Keep in mind that not asking a particular question (e.g., about ethnicity or religion) means that you will be unable to compare your data by that indicator.

No.	Question	Coding categories	Preparation & training instructions
A.1	Gender	Male	0
		Female	1
A.2	How long have you been living continuously in [INSERT NAME OF CURRENT RESIDENCE]?	MM:YY __ __ : __ __	CAPI: The name of the current residence should be automatically populated based on the responses to the listing questions (i.e., section 3: Household characteristics).
A.3	How old were you on your last birthday?	In completed years	
		Declined to respond	888
		Don't know	999
A.4	What is your current marital status? <i>· Can read response categories</i>	Married or living with partner	1
		Widowed	2
		Divorced or separated	3
		Single, never married or lived with partner	4
		Other (specify)_____	777
		Declined to respond	888

A.5	What is your ethnicity? <i>· Multiple responses possible</i>	[ETHNIC GROUP]	1	
		[ETHNIC GROUP]	2	
		[ETHNIC GROUP]	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
A.6	Religion	None	0	
		Orthodox	1	
		Muslim	2	
		Protestant	3	
		Catholic	4	
		Other (please specify _____)	777	
		Declined to respond	888	
A.7	Educational status	No formal education and cannot read nor write	1	
		No formal education but can read and write	2	
		Primary education incomplete	3	
		Primary education complete	4	
		Secondary education incomplete	5	
		Secondary education complete	6	
		Further education diploma/certificate/TVET	7	
		Bachelor's degree (BA/BSc)	8	
		Master's degree and above	9	
		Other (please specify) _____	777	
		Declined to respond	888	

A.8	Occupation	Unemployed	1	
		Agriculture (crop production)	2	
		Animal rearing	3	
		Government employee	4	
		Private sector employee	5	
		NGO employee	6	
		Religious organization employee	7	
		Daily labourer	8	
		Student	9	
		Housewife	10	
		Business owner	11	
		Other (please specify) _____	777	
		Declined to respond	888	

Egypt
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Note to the implementing organization

The questions below deal with socioeconomic status. You should decide which method you wish to use to determine socioeconomic status and then implement this by asking respondents only the questions labelled as B.1, B.2 or B.3 (choose one only):

- **B.1 questions: Combined net monthly household income/expenditure.**
Ask both questions.
- **B.2 questions: How often in the last 12 months the household could not pay particular types of bills.**
Ask all six questions.
- **B.3 questions: Description of water/energy sources and types of toilet/cookstove/flooring/roofing/walls.**
Choose a minimum of three of the eight sub-questions – select the ones that make the most sense in your context for assessing socioeconomic status.

No.	Question	Coding categories		Preparation & training instructions
B.1	B.1a What is the combined net monthly income of your household?	Insert amount in local currency		PREPARATION: Instead of asking for a specific amount, you could also have currency ranges. However, these should not be arbitrary intervals; only use this option if your country has predefined income intervals, such as for a census.
		Declined to respond	888	
		Don't know	999	
	B.1b What is the combined net monthly expenditure of your household?	Insert amount in local currency		
		Declined to respond	888	
		Don't know	999	

B.2 Has it happened during the last 12 months that your household could not pay one of the following types of bills/expenses?			
B.2 (answer sub-questions a–f)	B.2a Rent <i>· If yes, ask how many times</i>	Never	1
		Once	2
		Two or more	3
		Not applicable	4
		Declined to respond	888
		Don't know	999
	B.2b Bills for electricity, water or gas <i>· If yes, ask how many times</i>	Never	1
		Once	2
		Two or more	3
		Not applicable	4
		Declined to respond	888
		Don't know	999
	B.2c Health care expenses <i>· If yes, ask how many times</i>	Never	1
		Once	2
		Two or more	3
		Not applicable	4
		Declined to respond	888
		Don't know	999
	B.2d Food <i>· If yes, ask how many times</i>	Never	1
		Once	2
		Two or more	3
Not applicable		4	
Declined to respond		888	
Don't know		999	

B.2 (answer sub-questions a–f)	B.2e Clothing/shoes <i>· If yes, ask how many times</i>	Never	1	
		Once	2	
		Two or more	3	
		Not applicable	4	
		Declined to respond	888	
		Don't know	999	
	B.2f Education <i>· If yes, ask how many times</i>	Never	1	
		Once	2	
		Two or more	3	
		Not applicable	4	
		Declined to respond	888	
		Don't know	999	

B.3	<p>B.3a What is the main source of drinking-water for members of your household?</p> <p><i>· Do not read response categories</i></p>	Piped water piped into dwelling	1	<p>PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.</p>
		Piped water piped into yard/plot	2	
		Piped water piped to neighbour	3	
		Public tap/standpipe	4	
		Tube well or bore-hole	5	
		Protected dug well	6	
		Unprotected dug well	7	
		Protected spring	8	
		Unprotected spring	9	
		Rainwater	10	
		Tanker truck	11	
		Cart with small tank/fetched by donkey (jerry can)	12	
		Surface water (river/damn/lake/pond/stream/canal/ irrigation channel)	13	
		Bottled water	14	
	Other (please specify _____)	777		
	Declined to respond	888		
	Don't know	999		
	<p>B.3b What is the main source of water used by your household for other purposes such as cooking and handwashing?</p> <p><i>· Do not read response categories</i></p>	Piped water piped into dwelling	1	<p>PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.</p>
		Piped water piped into yard/plot	2	
		Piped water piped to neighbour	3	
Public tap/standpipe		4		
Tube well or bore-hole		5		
Protected dug well		6		
Unprotected dug well		7		
Protected spring		8		
Unprotected spring		9		
Rainwater		10		

		Tanker truck	11
		Cart with small tank/fetched by donkey (jerry can)	12
		Surface water (river/damn/lake/pond/stream/canal/ irrigation channel)	13
		Bottled water	14
		Other (please specify) _____	777
		Declined to respond	888
		Don't know	999

Egypt
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B.3	B.3c What kind of toilet facility do members of your household usually use? <i>· Do not read response categories</i>	Flush or pour flush toilet: flush to piped sewer system	1	PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.
		Flush or pour flush toilet: flush to septic tank	2	
		Flush or pour flush toilet: flush to pit latrine	3	
		Flush or pour flush toilet: flush to somewhere else (known)	4	
		Flush or pour flush toilet: don't know where it flushes to	5	
		Ventilated improved pit latrine	6	
		Pit latrine with slab	7	
		Pit latrine without slab/open pit	8	
		Composting toilet	9	
		Bucket toilet	10	
		Hanging toilet/hanging latrine	11	
		No facility/bush/ field	12	
		Other (please specify) _____	777	
	Declined to respond	888		
	Don't know	999		
	B.3d In your household, what type of cookstove is mainly used for cooking? <i>· Do not read response categories</i>	Electric stove	1	PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.
		Solar cooker	2	
		Liquefied petroleum gas (LPG)/ Cooking gas stove	3	
		Piped natural gas stove	4	
		Biogas stove	5	
Liquid fuel stove		6		
Manufactured solid fuel stove		7		
Traditional solid fuel stove		8		
Three stone stove/open fire		9		
Food is not cooked in household		10		

3.B		Other (please specify) _____	777		
		Declined to respond	888		
		Don't know	999		
	B.3e What is the main material of the floor of your house/dwelling? <i>· Do not read response categories</i>		Earth/sand	1	PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.
			Dung	2	
			Wood planks	3	
			Bamboo/palm	4	
			Parquet or polished wood	5	
			Vinyl/plastic or asphalt strips or tile	6	
			Ceramic tiles	7	
			Cement	8	
			Carpet	9	
			Other (please specify) _____	777	
			Declined to respond	888	
			Don't know	999	
	B.3f What is the main material of the roof of your house/dwelling? <i>· Do not read response categories</i>		No roof	1	PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.
			Thatch/palm leaf	2	
			Sod	3	
			Rustic mat	4	
			Palm/bamboo	5	
			Wood planks	6	
			Cardboard	7	
Metal			8		
Wood			9		
Calamine/cement fibre			10		
Ceramic tiles			11		

3.B		Cement	12		
		Roofing shingles	13		
		Other (please specify) _____	777		
		Declined to respond	888		
		Don't know	999		
	B.3g What is the main material of the exterior walls of your house/dwelling? <i>· Do not read response categories</i>		No walls	1	PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.
			Cane/palm/trunks	2	
			Dirt	3	
			Bamboo with mud	4	
			Stone with mud	5	
			Uncovered adobe	6	
			Plywood	7	
			Cardboard	8	
			Reused wood	9	
			Cement	10	
			Stone with lime/cement	11	
			Bricks	12	
			Cement blocks	13	
			Covered adobe	14	
			Wood planks/shingles	15	
	Other (please specify) _____	777			
	Declined to respond	888			
	Don't know	999			

3.B	B.3h What is the main source of energy in your house/dwelling? <i>· Do not read response categories</i>	Electricity lights	1	PREPARATION: These response categories come from the DHS questionnaire. Feel free to adjust the response categories to match your context.
		Solar lantern	2	
		Rechargeable torch (flashlight) or lantern	3	
		Battery-powered torch (flashlight) or lantern	4	
		Biogas lamp	5	
		Gasoline lamp	6	
		Kerosene or paraffin lamp	7	
		Charcoal	8	
		Wood	9	
		Straw/shrubs/grass	10	
		Agricultural crop	11	
		Animal dung/waste	12	
		Oil lamp	13	
		Candle	14	
		No lighting in household	15	
		Other (please specify) _____	777	
Declined to respond	888			
Don't know	999			

SECTION 5: KNOWLEDGE ABOUT FGM

Note to the implementing organization

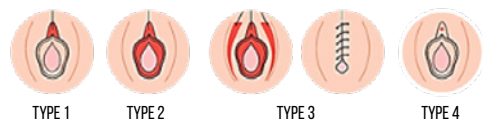
The questions below deal with knowledge about FGM. Questions C.1 and C.2 are used to assess knowledge. Additionally, C.1–C.4 are used to verify if an individual is eligible to participate in the survey. If a participant answers “no” or “don’t know” or if they declined to respond to all four questions, it is safe to assume they have no knowledge at all of FGM. Without any knowledge of the practice whatsoever, an individual will not be able to provide useful information. C.4 can also be used to calculate an indicator for promotion of specific knowledge about FGM relating to the four types of FGM (if this is a key message of your programme). Question C.5 tells the interviewer how best to refer to FGM for the remainder of the interview and provides useful information for programmatic messages. Thus, all questions in this section should be asked.

No.	Question	Coding categories	Preparation & training instructions	
C.1	<p>In some countries there are traditional practices that may be harmful for girls and women. Have you heard of any such traditional practices? What are they?</p> <p><i>· Do not read responses</i></p> <p><i>· Multiple responses possible</i></p>	No, I have not heard of any	1	CAPI: Code a skip to C.4 if response ‘FGM’ (2) is mentioned here
		Yes: FGM	2	
		Yes: Child marriage	3	
		Yes: Other (please specify) _____	777	
		Declined to respond	888	
C.2	<p>In some countries, there is a practice in which a girl may have part of her genitals cut. Have you ever heard about this practice?</p>	No	0	CAPI: Code a skip to C.4 if response is Yes (1)
		Yes	1	
		Declined to respond	888	
		Don’t know	999	
C.3	<p>This practice is often referred to as female genital mutilation or FGM. Have you ever heard of this term – FGM?</p>	No	0	
		Yes	1	
		Declined to respond	888	
		Don’t know	999	

INSTRUCTIONS: Say “We are going to show you some illustrations that portray the different ways that FGM might be done on a girl. Do I have your permission to show you these pictures?”

CAPI: If Yes > continue with C.4 / If No > skip C.4 and go to C.5

C.4	<p>Can you describe the different ways that FGM might be done on a girl? (use a diagram of external genitalia)</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p>	Partial or total removal of the clitoris and/or prepuce (Type I)	1	<p>PREPARATION & PRETESTING: You may choose to use a different diagram and should pretest it thoroughly.</p> <p>· The diagram should probably not show the types of instruments used (razor, scissors, etc.), as this may confuse participants about what is being asked.</p> <p>TRAINING: Make sure data collectors practice introducing the illustrations so that they are comfortable and feel confident that they can do it with sensitivity.</p>
		Partial or total removal of the clitoris and labia minora (Type II)	2	
		Infibulation: Excision of the clitoris and sewing the labia minora and/or labia majora shut to form a small opening (Type III)	3	
		Nicking and pricking: Cut without removal of flesh (Type IV)	4	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	




INSTRUCTIONS: If respondent says “No,” “Don’t know” or declines to respond to all of the above questions (C.1–C.4), the interview should be terminated.

C.5	<p>What are the local words that are used to refer to this practice (FGM)?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p> <p>· Probe twice, try to get multiple local words/terms used for different types of FGM</p>	Female genital mutilation	1	<p>PREPARATION & PRETESTING: Use your knowledge of FGM in your context as well as the pretest to generate additional (or alternative) response categories that can be pre-coded.</p>
		Eye covering	2	
		Sunna	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

SECTION 6: HOUSEHOLD AND COMMUNITY READINESS TO CHANGE


Note to the implementing organization

The questions below deal with household and community readiness to change. The social-ecological model (SEM) levels included in the questions below (i.e., you, your immediate family, your extended family, your friends and peers, community members, other individuals, society in general) are based on the results of validation of the questionnaire. Not all will apply to every context; therefore, you should decide the levels that are important to your programmes and your context. These questions are also used to construct indicators related to social norms, as they capture perceptions of the approval of others for FGM continuation or abandonment.

No.	Question	Coding categories	Preparation & training instructions
INSTRUCTIONS: Use the smiley face visual scale for questions D.1–D.7. (CHANGE THE QUESTION NUMBERS HERE IF THEY ARE CHANGED BELOW.)			
			
D	On a scale of 1 to 5, where 1 is completely oppose and 5 is completely support...		
D.1	... How would you rate your opposition to or support for the continuation of FGM?	Completely oppose Somewhat oppose Neither oppose nor support Somewhat support Completely support Declined to respond	1 2 3 4 5 888

D.2	... How would you rate the opposition to or support for the continuation of FGM among your immediate family members?	Completely oppose	1	TRAINING: It is not necessary to repeat the full scale with every question from D.2–D.7, but it is a good idea to repeat it a couple times to make sure that the respondent understands it. The number of times will vary by participant, so you should use your best judgement as a data collector.
		Somewhat oppose	2	
		Neither oppose nor support	3	
		Somewhat support	4	
		Completely support	5	
		Declined to respond	888	
D.3	... How would you rate the opposition to or support for the continuation of FGM among your extended family members?	Completely oppose	1	
		Somewhat oppose	2	
		Neither oppose nor support	3	
		Somewhat support	4	
		Completely support	5	
		Declined to respond	888	
D.4	... How would you rate the opposition to or support for the continuation of FGM among your friends and peers?	Completely oppose	1	
		Somewhat oppose	2	
		Neither oppose nor support	3	
		Somewhat support	4	
		Completely support	5	
		Declined to respond	888	

D.5	... How would you rate the opposition to or support for the continuation of FGM among your community members?	Completely oppose	1	PREPARATION & TRAINING: Community means different things in different countries and contexts. This question is using it as a geographical designation. Decide what word works best in your context: community, village, locality, neighbourhood, etc. Make the question wording reflects this choice and be sure the data collectors are aware of the intended meaning during the training. Use the same word in question E.3.
		Somewhat oppose	2	
		Neither oppose nor support	3	
		Somewhat support	4	
		Completely support	5	
		Declined to respond	888	
D.6	... How would you rate the opposition to or support for the continuation of FGM among other individuals whose opinion matters to you?	Completely oppose	1	
		Somewhat oppose	2	
		Neither oppose nor support	3	
		Somewhat support	4	
		Completely support	5	
		Declined to respond	888	
D.7	... How would you rate the opposition to or support for the continuation of FGM in society in general?	Completely oppose	1	
		Somewhat oppose	2	
		Neither oppose nor support	3	
		Somewhat support	4	
		Completely support	5	
		Declined to respond	888	

No.	Question	Coding categories	Preparation & training instructions																		
<p>INSTRUCTIONS: Show the social-ecological model (SEM) diagram as a visual aid for questions E.1–E.5. Point to the middle circle and say, “Here you are in the centre.”</p> 																					
<p>E.1</p>	<p>(Point to the second circle and say) This next circle represents your family. Who in your family do you talk to about FGM?</p> <p>· Ask for first name, relationship and contact information of the family member (F)</p> <p>· Probe for 3 individuals (F1–F3)</p>	<table border="1"> <tr> <td data-bbox="855 863 1424 927">F1. First name</td> <td data-bbox="1424 863 1529 927"></td> </tr> <tr> <td data-bbox="855 927 1424 983">F1. Relationship</td> <td data-bbox="1424 927 1529 983"></td> </tr> <tr> <td data-bbox="855 983 1424 1038">F1. Contact information</td> <td data-bbox="1424 983 1529 1038"></td> </tr> <tr> <td data-bbox="855 1038 1424 1094">F2. First name</td> <td data-bbox="1424 1038 1529 1094"></td> </tr> <tr> <td data-bbox="855 1094 1424 1150">F2. Relationship</td> <td data-bbox="1424 1094 1529 1150"></td> </tr> <tr> <td data-bbox="855 1150 1424 1206">F2. Contact information</td> <td data-bbox="1424 1150 1529 1206"></td> </tr> <tr> <td data-bbox="855 1206 1424 1262">F3. First name</td> <td data-bbox="1424 1206 1529 1262"></td> </tr> <tr> <td data-bbox="855 1262 1424 1318">F3. Relationship</td> <td data-bbox="1424 1262 1529 1318"></td> </tr> <tr> <td data-bbox="855 1318 1424 1358">F3. Contact information</td> <td data-bbox="1424 1318 1529 1358"></td> </tr> </table>	F1. First name		F1. Relationship		F1. Contact information		F2. First name		F2. Relationship		F2. Contact information		F3. First name		F3. Relationship		F3. Contact information		<p>PREPARATION: Drop ‘First name’ and ‘Contact information’ if the sampling does not involve interviewing these individuals.</p> <p>TRAINING: If a respondent says they don’t talk to anyone in their family about FGM, you can probe by asking, “If you did talk to someone in your family about FGM, who would it be?” You can also probe with, “Whose opinions on FGM do you care about, in your family?”</p> <p>CAPI: ‘First name’ and ‘Contact information’ should be removed from the final dataset for analysis, to remove identifying information.</p>
F1. First name																					
F1. Relationship																					
F1. Contact information																					
F2. First name																					
F2. Relationship																					
F2. Contact information																					
F3. First name																					
F3. Relationship																					
F3. Contact information																					

E.2	<p>(Point to the third circle and say) Next we have your friends and peers. Who among your friends and peers do you talk to about FGM?</p> <p>· Ask for name, relationship and contact information of the friend/peer (P)</p> <p>· Probe for 3 individuals (P1–P3)</p>	<p>P1. First name</p> <p>P1. Relationship</p> <p>P1. Contact information</p> <p>P2. First name</p> <p>P2. Relationship</p> <p>P2. Contact information</p> <p>P3. First name</p> <p>P3. Relationship</p> <p>P3. Contact information</p>	<p>PREPARATION: Drop ‘First name’ and ‘Contact information’ if the sampling does not involve interviewing these individuals.</p> <p>TRAINING: If a respondent says they don’t talk to any of their friends and peers about FGM, you can probe by asking “If you did talk to any of your friends or peers about FGM, who would it be?” You can also probe with “Whose opinions on FGM do you care about, among your friends and peers?”</p> <p>CAPI: ‘First name’ and ‘Contact information’ should be removed from the final dataset for analysis, remove identifying information.</p>
E.3	<p>(Point to the largest circle and say) Finally, we have your whole community. Who in the community do you talk to about FGM?</p> <p>· Ask for name, relationship and contact information of the community member (C)</p> <p>· Probe for 3 individuals (C1–C3)</p>	<p>C1. First name</p> <p>C1. Relationship</p> <p>C1. Contact information</p> <p>C2. First name</p> <p>C2. Relationship</p> <p>C2. Contact information</p> <p>C3. First name</p> <p>C3. Relationship</p> <p>C3. Contact information</p>	<p>PREPARATION: Drop ‘First name’ and ‘Contact information’ if the sampling does not involve interviewing these individuals. Whatever word for ‘community’ is selected in D.5 should also be used here.</p> <p>TRAINING: If a respondent says they don’t talk to anyone in their community about FGM, you can probe by asking “If you did talk to someone in your community about FGM, who would it be?” You can also probe with “Whose opinions on FGM do you care about, in your community?”</p> <p>CAPI: ‘First name’ and ‘Contact information’ should be removed from the final dataset for analysis, to remove identifying information.</p>

E.4	<p>Are there any other individuals, whose opinions matter to you, and whom you talk to about FGM?</p> <p>· Ask for name, relationship and contact information of the other person (O)</p> <p>· Probe for 3 individuals (O1–O3)</p>	O1. Contact information					<p>PREPARATION: Drop ‘First name’ and ‘Contact information’ if the sampling does not involve interviewing these individuals.</p> <p>TRAINING: There is no circle on the social network map for this, it is just a chance to find out if we have left anyone important out. If a respondent says “no one” for this question, you do not need to probe further.</p> <p>CAPI: ‘First name’ and ‘Contact information’ should be removed from the final dataset for analysis, to remove identifying information.</p>
		O2. First name					
		O2. Relationship					
		O2. Contact information					
		O3. First name					
		O3. Relationship					
		O3. Contact information					
E.5	<p>Who in the community do you consider to have influence when it comes to FGM?</p> <p>· Ask for name, role and contact information</p> <p>· Probe for three individuals</p> <p>· Can be informal or formal, male or female</p>	L1. First name					<p>PREPARATION: Drop ‘First name’ and ‘Contact information’ if the sampling does not involve interviewing these individuals. Whatever word for ‘community’ is selected in D.5 should also be used here.</p> <p>CAPI: ‘First name’ and ‘Contact information’ should be removed from the final dataset for analysis, to remove identifying information.</p>
		L1. Relationship					
		L1. Contact information					
		L2. First name					
		L2. Relationship					
		L2. Contact information					
		L3. First name					
		L3. Relationship					
		L3. Contact information					
E.6	<p>Do the people you have mentioned above approve or disapprove of the abandonment of FGM?</p> <p>· List the first names they’ve given you, and ask about their views one by one</p>		Disapprove	Approve	DK	DTR	<p>CAPI: Have the ‘First name’ (or ‘Relationship’ if not collecting first names) responses from E.1–E.5 populated here.</p> <p>TRAINING: Respondents may say that they do not know whether these people approve or disapprove of the abandonment of FGM. Tell them it’s okay if they do not know exactly, they should just make their best guess.</p>
		F1	0	1	888	999	
		F2	0	1	888	999	
		F3	0	1	888	999	
		P1	0	1	888	999	
		P2	0	1	888	999	
		P3	0	1	888	999	

	C1	0	1	888	999
	C2	0	1	888	999
	C3	0	1	888	999
	O1	0	1	888	999
	O2	0	1	888	999
	O3	0	1	888	999
	L1	0	1	888	999
	L2	0	1	888	999
	L3	0	1	888	999



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SECTION 8: ASSESS WHAT PEOPLE KNOW, FEEL AND DO

Note to the implementing organization

The questions below deal with knowledge of laws around FGM and knowledge of the risks associated with FGM (i.e., the 'know' component of 'know, feel and do').

- **Questions F.1–F.5 measure knowledge of laws around FGM and should be asked as a set.**
- **Questions F.6–F.8 measure knowledge of risks associated with FGM and should be asked as a set.**
- **Question F.9 helps to identify 'cultural markers' of FGM and can be used by researchers to triangulate data on the incidence of FGM.**

No.	Question	Coding categories	Preparation & training instructions
Knowledge of laws around FGM			
F.1	Are you aware of any laws about FGM?	No	0
		Yes	1
		Declined to respond	888
		Don't know	999
		CAPI: Code a skip to the section on 'Knowledge of risks associated with FGM' (F.6–F.8) if response is: No (0) Declined to respond (888) Don't know (999)	
F.2	What are the international, national or local/traditional laws about FGM that you are aware of? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)	1
		Universal Declaration of Human Rights	2
		International Covenant on Economic, Social and Cultural Rights	3
		Convention on the Rights of the Child (CRC)	4
		United Nations Declaration on the Elimination of Violence Against Women	5
		PREPARATION & PRETESTING: Use your knowledge of the context to add in response categories for national and local laws, amending the number of rows as needed. You should also use pretesting as an opportunity to identify additional response categories to pre-code. For example, in Ethiopia the local/traditional laws were identified as 'parents who commit FGM will be punished' and 'FGM practitioners will be punished if they perform FGM'. You may also need to adjust the international laws if your country is not a signatory/party to them.	

		African Charter on Human and People's Rights (the Banjul Charter)	6	<p>Local/traditional laws can include religious and customary laws. Pay attention in pretesting to make sure the wording is clear.</p> <p>TRAINING: Make sure data collectors are aware of what is meant by 'local/traditional laws' and that these are relevant to this question. Also make it clear that non-binding international agreements are also classified under this question (e.g., CEDAW).</p>
		African Charter on the Rights and Welfare of the Child (African Charter)	7	
		Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (2003) (The Maputo Protocol)	8	
		[NATIONAL LAW]	9	
		[NATIONAL LAW]	10	
		[NATIONAL LAW]	11	
		[LOCAL/TRADITIONAL LAW]	12	
		[LOCAL/TRADITIONAL LAW]	13	
		[LOCAL/TRADITIONAL LAW]	14	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
F.3	<p>What are the penalties for offenders (people who practise FGM)?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	None	0	<p>PREPARATION & PRETESTING: When preparing the tool, use your knowledge of the context to add in response categories for potential penalties. You should also use pretesting as an opportunity to identify additional response categories to pre-code.</p> <p>CAPI: Code a skip to the section on 'Knowledge of risks associated with FGM' (F6–F.8) if response is:</p> <p>None (0) Declined to respond (888) Don't know (999)</p>
		Monetary fines	1	
		Jail time	2	
		[PENALTY]	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

F.4	Are you aware of any individuals or families who have been punished by laws for practising FGM?	No	0	CAPI: Code a skip to the section on 'Knowledge of risks associated with FGM' (F.6–F.8) if response is No (0) Declined to respond (888) Don't know (999)
		Yes	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
F.5	Can you describe what happened? · Do not read response categories · Multiple responses possible · Probe twice	Nothing	0	PREPARATION & PRETESTING: When preparing the tool, use your knowledge of the context to add in response categories for potential penalties. You should also use pretesting as an opportunity to identify additional response categories to pre-code. Any response category added to F.3 should also be added here.
		Monetary fines	1	
		Jail time	2	
		[PENALTY]	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
Knowledge of risks associated with FGM				
F.6	What are the physical risks for girls and women associated with FGM? · Do not read response categories · Multiple responses possible · Probe twice	None	0	
		Haemorrhaging/excessive blood loss	1	
		Infection at the site of FGM	2	
		Pain	3	
		Shock	4	
		Death	5	
		Urine retention/inability to urinate	6	
		Genital ulcers/sores	7	
		Scarring	8	
		Urinary tract infection	9	
		Bladder infection	10	

		Prolonged labour	11	
		Obstetric tears/lacerations	12	
		Decreased sexual pleasure	13	
		Cysts	14	
		Infertility	15	
		HIV infection/transmission	16	
		Painful menstruation (dysmenorrhoea)	17	
		Obstetric fistula	18	
		Painful sexual intercourse	19	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
F.7	<p>What are the psychological risks associated with FGM?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	None	0	<p>PRETESTING & TRAINING: This question is sometimes difficult for the respondent to answer if they are not used to thinking about psychology or mental health. Pay special attention to the translation during pretesting to ensure that the wording is getting at the right concept. Also ensure that data collectors fully understand what is meant by a psychological risk.</p>
		Trauma (initial)	1	
		Post-traumatic stress disorder	2	
		Anxiety	3	
		Low self-esteem	4	
		Depression	5	
		Memory loss (of the event)	6	
		Sleep disorders	7	
		Suicidal ideation	8	
		Genito-pelvic pain/Penetration disorder (fear and anxiety associated with sexual intercourse)	9	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

F.8	<p>What are the social risks associated with NOT undergoing FGM?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p> <p>· Probe twice</p>	None	0	<p>PREPARATION & PRETESTING: Use your knowledge of the context to add in response categories for potential social risks. You should also use pretesting as an opportunity to identify additional response categories to pre-code.</p> <p>TRAINING: Make sure it is clear that this question is about the risks of NOT undergoing FGM, whereas the previous two risk questions were about undergoing FGM.</p>
		Ostracization	1	
		Lack of marriage prospects	2	
		Bad reputation for the girl	3	
		Bad reputation for the whole family including the girl	4	
		Incompatibility in sexual intercourse	5	
		Affect quality of relationship/affection with future partner	6	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
F.9	<p>How can you tell if a girl has undergone FGM just by looking at her?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p>	She is calm/not restless	1	<p>PREPARATION & PRETESTING: When preparing the tool, use your knowledge of the context to add in response categories for potential cultural markers. You can also use pretesting as an opportunity to identify additional response categories to pre-code.</p> <p>TRAINING: The purpose of this question is to get at 'cultural markers' of FGM. For example, some communities have a tradition of putting henna on the feet of a girl after she undergoes FGM. The ceremony takes place right before the start of the school year, so a way to identify if a girl of the typical age for FGM underwent FGM or not would be to check if she has henna on her feet when she returns to school.</p>
		She is not very fast	2	
		She is patient	3	
		She is weak	4	
		She doesn't break things/household utensils	5	
		She has no tendency or interest to mix and play with boys	6	
		From the way she walks	7	
		It is impossible to know	8	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

Note to the implementing organization

The questions below deal with several indicators of attitudes and beliefs about FGM (i.e., the 'feel' component of 'know, feel and do'), organized along five domains: Gender, power and control; Identity; Religion; Health; and Human rights. Choose the domains relevant to the context and objectives of your programme. For any domain selected, all of the questions in that domain should be used. A composite indicator combining domains can also be created for general beliefs about FGM.

- **Gender, power and control domains: ask questions G.1–G.10 (10 questions).**
- **Identity domain: ask questions G.11–G.13 (3 questions).**
- **Religion domain: ask questions G.14–G.19 (6 questions).**
- **Health domain: ask questions G.20–G.27 (8 questions).**
- **Human rights domain: ask questions G.28–G.30 (3 questions).**

No.	Question	Coding categories							Preparation & training instructions	
	Using a scale of 1 to 5 with 1 being strongly disagree and 5 strongly agree, to what extent do you agree or disagree with the following statements:	Strongly disagree	Somewhat disagree	Neutral	Somewhat agree	Strongly agree	Declined to respond	Do not know	CAPI: Randomize the order of all the questions for all of the domains you have selected; they should be asked as a single set of questions and should not be organized by the domains/subconstructs as they are currently. For example, if the implementing organization (IO) chooses to measure the 'Gender, power and control' domain and the 'Religion' domain, then all 16 relevant questions should be put in random order and administered in that order as a set.	
Gender, power, control – FGM and female agency										
G.1	FGM marks the transition of a girl from childhood to being identified as an adult.	1	2	3	4	5	888	999	PREPARATION & PRETESTING: Delete this subsection if you have not selected to measure the 'Gender, power and control' domain in your context. For G.10, you could say 'relationships' instead of 'sex' if there is too much discomfort or it is unacceptable in the context. TRAINING: In some languages, translation of cleanliness and purity can be challenging. If you need to differentiate, you can mean cleanliness to be about physical cleanliness (personal hygiene) whereas purity is more about moral or religious cleanliness.	
G.2	FGM teaches girls to be obedient.	1	2	3	4	5	888	999		
G.3	FGM ensures that girls/ women retain their cleanliness.	1	2	3	4	5	888	999		
G.4	FGM ensures that girls/ women remain pure before marriage.	1	2	3	4	5	888	999		
G.5	FGM ensures that girls/ women retain their femininity.	1	2	3	4	5	888	999		
G.6	Girls can be socialized even without undergoing FGM.	1	2	3	4	5	888	999		
G.7	FGM teaches girls to be respectful.	1	2	3	4	5	888	999		



G.8	FGM helps a girl/woman stay a virgin until she marries.	1	2	3	4	5	888	999	
G.9	FGM makes a girl/woman less promiscuous.	1	2	3	4	5	888	999	
G.10	Men enjoy sex more with women who have not undergone FGM.	1	2	3	4	5	888	999	
Identity – FGM and identity									
G.11	FGM has always been a part of our traditions.	1	2	3	4	5	888	999	PREPARATION & PRETESTING: Delete this subsection if you have not selected to measure the ‘Identity’ domain in your context. During pretesting, pay special attention to the local language translations for ‘tradition’, ‘culture’ and ‘identity’, as there may not be words for these with discrete meanings in all languages.
G.12	FGM is a part of our culture.	1	2	3	4	5	888	999	
G.13	FGM is part of our identity.	1	2	3	4	5	888	999	
Religion – FGM and religion									
G.14	It is a religious duty/requirement to perform FGM.	1	2	3	4	5	888	999	PREPARATION: Delete this subsection if you have not selected to measure the ‘Religion’ domain in your context.
G.15	The Bible contains verses that make FGM obligatory.	1	2	3	4	5	888	999	
G.16	The Bible contains verses that recommend FGM.	1	2	3	4	5	888	999	
G.17	The Qur’an provides hadiths that recommend FGM.	1	2	3	4	5	888	999	
G.18	The Qur’an provides hadiths that make FGM obligatory.	1	2	3	4	5	888	999	
G.19	Islam prohibits the infibulation type of FGM.	1	2	3	4	5	888	999	

Health – FGM and health									
G.20	FGM prepares girls for future childbirth.	1	2	3	4	5	888	999	PREPARATION: Delete this subsection if you have not selected to measure the 'Health' domain in your context.
G.21	FGM is a completely safe practice.	1	2	3	4	5	888	999	
G.22	FGM is very painful.	1	2	3	4	5	888	999	
G.23	FGM can cause a person to bleed too much.	1	2	3	4	5	888	999	
G.24	FGM can cause serious problems with childbirth.	1	2	3	4	5	888	999	
G.25	FGM is safe if done by a trained health-care professional.	1	2	3	4	5	888	999	
G.26	FGM can carry the risk of tetanus if performed with a rusted iron implement.	1	2	3	4	5	888	999	PREPARATION: These two 'health' questions are about disease-specific issues relating to FGM. These can be considered to be optional, depending on your programme.
G.27	FGM can spread HIV/AIDS.	1	2	3	4	5	888	999	
Human rights – FGM and human rights									
G.28	The law supports people who abandon FGM.	1	2	3	4	5	888	999	PREPARATION: Delete this subsection if you have not selected to measure the 'Human rights' domain in your context.
G.29	FGM is a violation of girls' human rights.	1	2	3	4	5	888	999	
G.30	FGM is a form of violence against women.	1	2	3	4	5	888	999	

Note to the implementing organization

The questions below deal with attitudes towards and perceptions of girls who have not had FGM, and communities that have abandoned FGM (i.e., the ‘feel’ component of ‘know, feel and do’). The questions must be asked about both girls who have and have NOT had FGM, and/or both communities where FGM is and is NOT practised. That is,

- **Questions H.1–H.10 should all be asked if you choose to measure attitudes towards girls who have not had FGM.**
- **Questions H.11–H.20 should all be asked if you choose to measure attitudes towards FGM-free communities.**

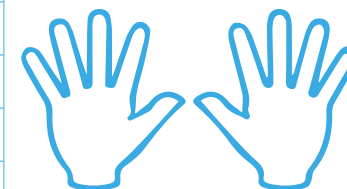
Attitudes towards girls who have had FGM and those who have not															
I'd like you to think of an average girl in your community who has had any form of FGM . Using a scale from 1 to 10, with 1 being not at all and 10 completely, what are her traits?															
H.1	Unhealthy	1	2	3	4	5	6	7	8	9	10	Healthy	888	999	
H.2	Unclean	1	2	3	4	5	6	7	8	9	10	Clean	888	999	
H.3	Impure	1	2	3	4	5	6	7	8	9	10	Pure	888	999	
H.4	Unequal	1	2	3	4	5	6	7	8	9	10	Equal	888	999	
H.5	Traditional	1	2	3	4	5	6	7	8	9	10	Modern	888	999	
Now I'd like you to think of an average girl in your community who has NOT had any form of FGM . Using a scale from 1 to 10, with 1 being not at all and 10 completely, what are her traits?															
H.6	Unhealthy	1	2	3	4	5	6	7	8	9	10	Healthy	888	999	
H.7	Unclean	1	2	3	4	5	6	7	8	9	10	Clean	888	999	
H.8	Impure	1	2	3	4	5	6	7	8	9	10	Pure	888	999	
H.9	Unequal	1	2	3	4	5	6	7	8	9	10	Equal	888	999	
H.10	Traditional	1	2	3	4	5	6	7	8	9	10	Modern	888	999	

Attitudes towards communities where FGM is and is not practised

I'd like you to think of a community where it is **common for girls to undergo FGM**. Using a scale from 1 to 10, with 1 being not at all and 10 completely, what does this community look like and what are this community's beliefs?

H.11	Unhealthy	1	2	3	4	5	6	7	8	9	10	Healthy	888	999
H.12	Unclean	1	2	3	4	5	6	7	8	9	10	Clean	888	999
H.13	Impure	1	2	3	4	5	6	7	8	9	10	Pure	888	999
H.14	Unequal	1	2	3	4	5	6	7	8	9	10	Equal	888	999
H.15	Traditional	1	2	3	4	5	6	7	8	9	10	Modern	888	999

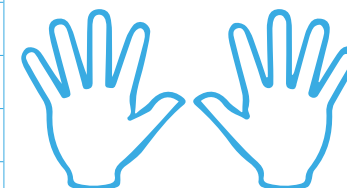
Show 10 fingers



I'd like you to describe a community where it is **NOT common for girls to undergo FGM**. Using a scale from 1 to 10, with 1 being not at all and 10 completely, what does this community look and like what are this community's beliefs?

H.16	Unhealthy	1	2	3	4	5	6	7	8	9	10	Healthy	888	999
H.17	Unclean	1	2	3	4	5	6	7	8	9	10	Clean	888	999
H.18	Impure	1	2	3	4	5	6	7	8	9	10	Pure	888	999
H.19	Unequal	1	2	3	4	5	6	7	8	9	10	Equal	888	999
H.20	Traditional	1	2	3	4	5	6	7	8	9	10	Modern	888	999

Show 10 fingers



Niger
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Note to the implementing organization


The questions below deal with personal support for abandonment of FGM. Question I.1 is required to calculate norms indicators, so must be asked if measuring norms.


No.	Question	Coding categories	Preparation & training instructions	
Support for abandonment of FGM				
I.1	Do you think that FGM should be continued or should it be abandoned?	Continued	0	CAPI: Code a skip to the section on 'Behavioural intent' (J.1–J.2) if response is
		Abandoned	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
I.2	Whose responsibility is it to stop FGM in your community? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	Myself	1	PREPARATION: The purpose of this question is to determine if the respondents who believe FGM should be abandoned have a sense of ownership and responsibility with regard to stopping FGM in their communities.
		Everyone in the community	2	
		Community leaders	3	
		Local government	4	
		Local NGOs	5	
		Foreign/International NGOs/United Nations agencies (e.g., UNICEF, UNFPA)	6	
		National/central government	7	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

Note to the implementing organization

The questions below deal with behavioural intent (i.e., the ‘do’ component of ‘know, feel and do’). Along with being indicators themselves, these questions can provide triangulation for data based on responses to other questions:


- **Question J.1 can be used as a proxy or to validate responses from question I.1.**
- **Question J.2 can be used to triangulate beliefs about social sanctions.**

No.	Question	Coding categories	Preparation & training instructions	
Behavioural intent				
J.1	<p>Imagine you have a daughter of age in your community at this moment who has not undergone FGM. Using a scale from 1 to 10, with 1 being not at all likely and 10 being very likely, what is the likelihood or chance that you will arrange for your daughter to undergo FGM?</p>	Enter number 1–10	<p>PRETESTING: If the phrase ‘of age’ is confusing it can be replaced with the typical age at which a girl customarily undergoes FGM in that community, or it can be removed. Another option is to train data collectors to explain what is meant by the phrase – that it means the girl is within the age range at which FGM normally takes place.</p> <p>Show 10 fingers</p> 	
		Declined to respond		888
		Don't know		999

J.2	Using a scale of 1 to10, where 1 is none and 10 is all, about how many men in your community do you think are willing to marry women who have not undergone FGM?	Enter number 1–10		Show 10 fingers 
		Declined to respond	888	
		Don't know	999	

Note to the implementing organization

The questions below deal with self-efficacy. The wording of these questions must be adapted based on the respondent’s answer to **Question I.1**: if they think FGM should be continued, use ‘continue’; if they think it should be abandoned, use ‘abandon’. These questions should be asked as a set to measure self-efficacy as it relates to choices around FGM.

No.	Question	Coding categories	Preparation & training instructions
Self-efficacy			
Instructions: Show the flower diagram to help respondents to answer these questions			
			

		Not at all confident	Somewhat un-confident	Neutral	Somewhat confident	Very confident	Decline to respond	Do not Know	CAPI: Phrase the question differently (i.e., use the word 'continue' or 'abandon'), based on the response to question, "Do you think that FGM should be continued, or should it be abandoned?" The correct word will differ among the questions.
K.1	How confident are you that you can continue/abandon FGM, even if your family opposes you?	1	2	3	4	5	888	999	
K.2	How confident are you that you can resist pressure from others to get you to continue/abandon FGM, if you try hard enough?	1	2	3	4	5	888	999	
K.3	How confident are you that you possess the coping abilities to remain calm when facing pressure to continue/abandon FGM?	1	2	3	4	5	888	999	
K.4	If you are in trouble because you want to continue/abandon FGM, how confident are you that you can find a solution?	1	2	3	4	5	888	999	
K.5	How confident do you feel to stand up to someone who is pressuring you to continue/abandon FGM?	1	2	3	4	5	888	999	

Note to the implementing organization

Questions L.1–L.10 below deal with FGM behaviours. If behaviour indicators are selected for inclusion, the entire set of 10 questions should be asked, as they cover different types of respondents.

- **Questions L.1 and L.2 should provide an estimate of prevalence of FGM among the female respondents.**
- **Questions L.3, L.5, L.7 and L.9 provide a measure of personal exposure to someone who has had FGM, which can be a proxy for prevalence.**
- **Questions L.4, L.6, L.8 and L.10 can provide useful information for programme and message development, while also providing a measure of female decision-making power.**

No.	Question	Coding categories	Preparation & training instructions	
Behaviours				
L.1	Have you undergone FGM?	No	0	CAPI: Code a skip pattern in so that this question is only asked to female respondents.
		Yes	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
L.2	Has your spouse undergone FGM?	No	0	CAPI: Code a skip pattern in so that this question is only asked to married male respondents.
		Yes	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

L.3	Has your eldest daughter undergone FGM?	No	0	CAPI: Code a skip pattern in so that this question is only asked to caregivers. Also, code a skip pattern to question L.5 (“Has your youngest daughter undergone FGM?”) if response is No (0) Other (please specify) (777) Declined to respond (888) Don’t know (999)
		Yes	1	
		Other (please specify)_____	777	
		Declined to respond	888	
		Don’t know	999	
L.4	In your house, who made the final decision for your eldest daughter to undergo FGM?	Mainly respondent	1	CAPI: Code a skip pattern in so that this question is only asked to caregivers who said “Yes” to question L.3 “Has your eldest daughter undergone FGM?”
		Mainly another family member	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don’t know	999	
L.5	Has your youngest daughter undergone FGM?	No	0	CAPI: Code a skip pattern in so that this question is only asked to caregivers. Also, code a skip pattern to question L.7 (“Has any female member in your immediate family undergone FGM?”) if response is No (0) Other (please specify) (777) Declined to respond (888) Don’t know (999)
		Yes	1	
		Other (please specify)_____	777	
		Declined to respond	888	
		Don’t know	999	

L.6	In your house, who made the final decision for your youngest daughter to undergo FGM?	Mainly respondent	1	CAPI: Code a skip pattern in so that this question is only asked to caregivers who answered “Yes” to the question “Has your youngest daughter undergone FGM?”
		Mainly another family member	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
L.7	Has any female member in your immediate family undergone FGM?	No	0	CAPI: Code a skip pattern in so that this question is only asked to adolescent girls, social network contacts and community leaders. Also, skip to question L.9 “Has any female member in your extended family undergone FGM?” if response is No (0) Other (please specify) (777) Declined to respond (888) Don't know (999)
		Yes	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
L.8	For that female in your immediate family, who made the final decision for her to undergo FGM?	Mainly respondent	1	CAPI: Code a skip pattern in so that this question is only asked to adolescent girls, social network contacts and community leaders who answered “Yes” to “Has any female member in your immediate family undergone FGM?”
		Mainly another family member	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

L.9	Has any female member in your extended family undergone FGM?	No	0	CAPI: Code a skip pattern in so that this question is only asked to adolescent girls, social network contacts and community leaders. Also, skip to next section (M.1–M.14) if the response is No (0) Other (please specify) (777) Declined to respond (888) Don't know (999)
		Yes	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
L.10	For that female in your extended family, who made the final decision for her to undergo FGM?	Mainly respondent	1	CAPI: Code a skip pattern in so that this question is only asked to adolescent girls, social network contacts and community leaders who answered “Yes” to “Has any female member in your extended family undergone FGM?”
		Mainly another family member	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	



SECTION 9: SOCIAL SUPPORT AND SOCIAL NETWORKS

Note to the implementing organization

The questions below deal with social support (both information/advice and instrumental support/help) and interpersonal communication.

- **Questions M.1–M.6 measure social support and should be asked as a set.**
- **Questions M.7–M.10 measure interpersonal communication and should be asked as a set.**
- **Questions M.11–M.14 measure spousal communication and should be asked as a set.**

No.	Question	Coding categories	Preparation & training instructions	
M.1	<p>Who do you turn to for advice about FGM?</p> <p><i>· Do not read response categories</i></p> <p><i>· Multiple responses possible</i></p> <p><i>· Probe twice</i></p>	No one	0	<p>PREPARATION & PRETESTING: This should be a comprehensive list of response categories but use pretesting as an opportunity to verify them. Whatever changes/additions are made here should also be made to M.2, M.4, M.5 and M.8.</p> <p>TRAINING: Make sure that data collectors understand the difference between informational support (advice) and instrumental support (help).</p>
		Mother	1	
		Father	2	
		Partner/spouse	3	
		Sister(s)	4	
		Brother(s)	5	
		Aunt(s)	6	
		Uncle(s)	7	
		Mother-in-law	8	
		Father-in-law	9	
		Grandmother	10	
		Grandfather	11	
		Neighbours	12	
Friends	13			

		Teachers	14	
		Community leaders	15	
		Elders	16	
		Community health workers	17	
		Doctors or nurses	18	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
M.2	<p>Who turns to you for advice about FGM?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Mother	1	<p>PREPARATION & PRETESTING: This should be a comprehensive list of response categories but use pretesting as an opportunity to verify them. Whatever changes/additions are made here should also be made to M.1, M.4, M.5 and M.8.</p>
		Father	2	
		Partner/spouse	3	
		Sister(s)	4	
		Brother(s)	5	
		Aunt(s)	6	
		Uncle(s)	7	
		Mother-in-law	8	
		Father-in-law	9	
		Grandmother	10	
		Grandfather	11	
		Neighbours	12	
		Friends	13	
		Teachers	14	
		Community leaders	15	
		Elders	16	
		Community health workers	17	

		Doctors or nurses	18	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
M.3	<p>What specific types of advice do you share about FGM?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Getting a good practitioner to conduct FGM	1	<p>PREPARATION & PRETESTING: Use your knowledge of the context to add in response categories for what types of advice might be shared. You should also use pretesting as an opportunity to identify additional response categories to pre-code.</p>
		Abandonment of FGM	2	
		Psychological problems caused by FGM	3	
		Physiological impacts of FGM	4	
		Diseases that can be transmitted by FGM	5	
		The process of FGM for a girl	6	
		The reasons for FGM for a girl	7	
		How to stop FGM	8	
		Deciding whether to arrange or reject FGM for my daughter	9	
		Services that provide information and advice on FGM	10	
		How to discuss FGM with others in the community	11	
		How to report perpetrators of FGM	12	
		How to overcome others' influence regarding FGM	13	
		How to help my daughter accept/be proud of being 'whole'/not having had FGM	14	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

M.4	<p>Who do you turn to for help (beyond advice, e.g., supplies, money, transport) relating to FGM?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p> <p>· Probe twice</p>	No one	0	<p>PREPARATION & PRETESTING: This should be a comprehensive list of response categories but use pretesting as an opportunity to verify them. Whatever changes/additions are made here should also be made to M.1, M.2, M.5 and M.8.</p> <p>TRAINING: Make sure that data collectors understand the difference between informational support (advice) and instrumental support (help).</p>
		Mother	1	
		Father	2	
		Partner/spouse	3	
		Sister(s)	4	
		Brother(s)	5	
		Aunt(s)	6	
		Uncle(s)	7	
		Mother-in-law	8	
		Father-in-law	9	
		Grandmother	10	
		Grandfather	11	
		Neighbours	12	
		Friends	13	
		Teachers	14	
		Community leaders	15	
		Elders	16	
		Community health workers	17	
		Doctors or nurses	18	
		Other (please specify) _____	777	
Declined to respond	888			
Don't know	999			

M.5	<p>Who turns to you for help (beyond advice, e.g., supplies, money, transport) relating to FGM?</p> <p><i>· Do not read response categories</i></p> <p><i>· Multiple responses possible</i></p> <p><i>· Probe twice</i></p>	No one	0	<p>PREPARATION & PRETESTING: This should be a comprehensive list of response categories but use pretesting as an opportunity to verify them. Whatever changes/additions are made here should also be made to M.1, M.2, M.4 and M.8.</p> <p>CAPI: Code a skip to the subsection 'Interpersonal communication' (M.7–M.10) if response is</p> <p>No one (0) for BOTH M.4 AND M.5</p>
		Mother	1	
		Father	2	
		Partner/spouse	3	
		Sister(s)	4	
		Brother(s)	5	
		Aunt(s)	6	
		Uncle(s)	7	
		Mother-in-law	8	
		Father-in-law	9	
		Grandmother	10	
		Grandfather	11	
		Neighbours	12	
		Friends	13	
		Teachers	14	
		Community leaders	15	
		Elders	16	
		Community health workers	17	
		Doctors or nurses	18	
		Other (please specify) _____	777	
Declined to respond	888			
Don't know	999			

M.6	<p>What specific types of help do you share, relating to FGM?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Money to pay for the procedure	1	<p>PREPARATION & PRETESTING: Use your knowledge of the context to add response categories on help that is shared. You should also use pretesting as an opportunity to verify these and identify additional response categories to pre-code.</p>
		Transportation to a health centre	2	
			3	
			4	
			5	
			6	
			7	
		I don't need any help relating to FGM	8	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
Interpersonal communication				
M.7	<p>Aside from this research, have you ever engaged in a conversation about FGM?</p>	No	0	<p>PREPARATION: If you have chosen to make the indicator time-bound, change “have you ever engaged...” to “have you engaged ... in the past [ENTER TIMEFRAME]?”</p> <p>CAPI: Code a skip to the section on ‘Spousal communication’ if response is</p> <p>No (0) Declined to respond (888) Don't know (999)</p> <p>TRAINING: Note that interpersonal communication (conversation) is not the same as getting help or advice from someone. Therefore, respondents should be asked this question even if they already indicated whether they do or do not share FGM advice and/or help with others, in M.1–M.6.</p>
		Yes	1	
		Declined to respond	888	
		Don't know	999	

M.8	<p>Who have you engaged in a conversation about FGM with?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p> <p>· Probe twice</p>	No one	0	<p>PREPARATION: These should match the response categories in questions M.1, M.2, M.4 and M.5.</p>
		Mother	1	
		Father	2	
		Partner/spouse	3	
		Sister(s)	4	
		Brother(s)	5	
		Aunt(s)	6	
		Uncle(s)	7	
		Mother-in-law	8	
		Father-in-law	9	
		Grandmother	10	
		Grandfather	11	
		Neighbours	12	
		Friends	13	
		Teachers	14	
		Community leaders	15	
		Elders	16	
		Community health workers	17	
		Doctors or nurses	18	
		Other (please specify) _____	777	
Declined to respond	888			
Don't know	999			

M.9	<p>What are the most common topics concerning FGM that you have discussed?</p> <p><i>· Do not read response categories</i></p> <p><i>· Multiple responses possible</i></p> <p><i>· Probe twice</i></p>	Don't know	999	<p>PREPARATION & PRETESTING: Use your knowledge of the context to add in response categories for potential discussion topics. You should also use pretesting as an opportunity to identify additional response categories to pre-code. The response categories in M.9 and M.14 should match.</p>
		Benefits of FGM	1	
		Sanctions of FGM	2	
		FGM abandonment/elimination	3	
		Personal experiences with FGM	4	
		Actions to encourage community-wide FGM abandonment	5	
		Information related to FGM programmes	6	
		Social norms around FGM	7	
		FGM and religion	8	
		Laws/policies relating to FGM	9	
		Decision to have FGM performed on a daughter or other girl(s) in your family	10	
		Other (please specify) _____	777	
		Declined to respond	888	
Don't know	999			
M.10	<p>Aside from this research, how often have you engaged in a conversation about FGM over the past 12 months?</p>	Once or twice	1	<p>PREPARATION: The wording “in the last 12 months” can be changed to match your intervention/programme timeline.</p>
		A few times	2	
		Monthly	3	
		Weekly	4	
		Daily	5	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

Spousal communication				
M.11	In your opinion, do husbands and wives in your community discuss FGM?	No	0	CAPI & TRAINING: This question should be asked to everyone regardless of whether or not they are married.
		Yes	1	
		Declined to respond	888	
		Don't know	999	
In CAPI : Skip the following three questions if the respondent is not and has never been married or lived with a partner				
M.12	Have you ever discussed FGM with your spouse/partner?	No	0	PREPARATION: The word 'spouse' can be replaced with 'husband' or 'wife', if appropriate, in question M.12 and M.13. CAPI: Code a skip to the next section if response is No (0) Declined to respond (888) Don't know (999)
		Yes	1	
		Declined to respond	888	
		Don't know	999	
M.13	Do you agree with your spouse/partner in relation to FGM?	No	0	PRETESTING: Pay special attention to potential discomfort of women expressing that they disagree with their husbands. If it seems to be an issue, you can instead ask, "Does your spouse/partner support abandonment or continuation of FGM?" and compare the answer with the respondent's own view expressed in question I.1.
		Yes	1	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

M.14	<p>What are the common topics concerning FGM that you have discussed?</p> <p><i>· Do not read response categories</i></p> <p><i>· Multiple responses possible</i></p> <p><i>· Probe twice</i></p>	Benefits of FGM	1	<p>PREPARATION & PRETESTING: The response categories here should match those used in question M.9.</p>
		Sanctions of FGM	2	
		FGM abandonment/elimination	3	
		Personal experiences with FGM	4	
		Actions to encourage community-wide FGM abandonment	5	
		Information related to FGM programmes	6	
		Social norms around FGM	7	
		FGM and religion	8	
		Laws/policies relating to FGM	9	
		Decision to have FGM performed on a daughter or other girl(s) in your family	10	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	




Uganda
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SECTION 10: ASCERTAIN NORMATIVE FACTORS

Note to the implementing organization

The questions below deal with descriptive norms (empirical expectations), injunctive norms (normative expectations), perceptions of trends in FGM practice and outcome expectancies (sanctions and benefits). To adequately measure social norms, all of these constructs should be measured.

- **Questions N.1–N.4 measure perceived prevalence of FGM and should be asked as a set; perceived prevalence is a proxy for descriptive norms. The other descriptive norms questions are D.1–D.7.**
- **Questions N.5–N.10 measure injunctive norms and should be asked as a set.**
- **Questions N.11–N.12 measure perceived changes over time (trends) in FGM practice. Either or both questions may be asked.**
- **Questions N.13–N.17 measure outcome expectancies and should be asked as a set.**

No.	Question	Coding categories	Preparation & training instructions	
Descriptive norms (Perceived prevalence of FGM, Empirical expectations)				
N.1	Using a scale from 1 to 10, where 1 is none and 10 is all, about how many girls aged 10–14 years in your community have had any form of FGM?	Enter number 0–10	Show 10 fingers 	
		Declined to respond		888
		Don't know		999
N.2	Using a scale from 1 to 10, where 1 is none and 10 is all, about how many girls aged 15–19 years in your community have had any form of FGM?	Enter number 0–10		
		Declined to respond		888
		Don't know		999
N.3	Using a scale from 1 to 10, where 1 is none and 10 is all, about how many adult women in your community have had any form of FGM?	Enter number 0–10		
		Declined to respond		888
		Don't know		999

N.4	Using a scale from 1 to 10, where 1 is none and 10 is all, about how many people do you personally know who have chosen not to have FGM done on their daughter, or other immediate female family member?	Enter number 0–10		
		Declined to respond	888	
		Don't know	999	
Injunctive norms (Normative expectations) Instructions: Show the social network map diagram.				PREPARATION: Make sure these questions match the decisions made in the D and E sets of questions, i.e., the same SEM levels used there should be used here.
				
N.5	Do you think your immediate family expects you to continue or abandon FGM?	Continue	0	TRAINING: In the focus group discussion (FGD) guide in this document, 'Activity 3: 2x2 Tables' has useful information to help data collectors better understand the questions in this section. Although the format for asking them is different, the intention is the same.
		Abandon	1	
		Declined to respond	888	
		Don't know	999	
N.6	Do you think your extended family expects you to continue or abandon FGM?	Continue	0	
		Abandon	1	
		Declined to respond	888	
		Don't know	999	

N.7	Do you think your friends and peers expect you to continue or abandon FGM?	Continue	0	
		Abandon	1	
		Declined to respond	888	
		Don't know	999	
N.8	Do you think your community expects you to continue or abandon FGM?	Continue	0	<p>PREPARATION & TRAINING: As before, you should choose how you are defining and translating 'community' given the context.</p> <p>Community means different things in different countries and contexts. This question is using it as a geographical designation. Decide what word works best in your context: community, village, locality, neighbourhood, etc. Make the question wording reflects this choice and be sure the data collectors are aware of the intended meaning during the training. Use the same word in question E.3.</p>
		Abandon	1	
		Declined to respond	888	
		Don't know	999	
N.9	Do you think other individuals whose opinions matter to you expect you to continue or abandon FGM?	Continue	0	
		Abandon	1	
		Declined to respond	888	
		Don't know	999	
N.10	Do you think society in general expects you to continue or abandon FGM?	Continue	0	
		Abandon	1	
		Declined to respond	888	
		Don't know	999	

Perceptions of trends			
N.11	Think about five years from now. Do you think the number of girls in your community who undergo FGM will be much less, a bit less, about the same, a bit more, or much more than now?	Much less	1
		A bit less	2
		About the same	3
		A bit more	4
		Much more	5
		Other (please specify) _____	777
		Declined to respond	888
		Don't know	999
N.12	How, if at all, have the opinions of people in your community changed on the practice of FGM over the past 12 months?	People are now a lot more supportive of FGM	1
		People are now a bit more supportive of FGM	2
		It's about the same	3
		People are now a bit less supportive of FGM	4
		People are now a lot less supportive of FGM	5
		Declined to respond	888
		Don't know	999

Outcome expectancies (Identifying sanctions and benefits)				
N.13	<p>In your opinion, what are the social sanctions (punishments) associated with abandoning FGM?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p> <p>· Probe twice</p>	None	0	<p>PRETESTING: Social sanctions can be called negative social effects, punishments or negative consequences. Pay special attention to the word choice during pretesting, especially when translating words to convey the ideas. Whatever word/phrase is used should be used throughout the three tools in this document (structured interview, FGD and IDI).</p> <p>TRAINING: If the respondent needs clarification, say, “For example, if a girl or her family refuses FGM, what are the negative outcomes for them, if any?”</p>
		Ostracization	1	
		Social exclusion	2	
		Loss of tradition	3	
		Bullying	4	
		Girl will not mature into a woman	5	
		Reduced marriage prospects	6	
		Negatively affects girl’s reputation	7	
		Negatively affects family’s reputation	8	
		Considered unclean/impure	9	
		Cannot pray (not ‘sunna’)	10	
		Violence	11	
		Loss of influence in the community	12	
		Loss of friends	13	
		Other (please specify) _____	777	
		Declined to respond	888	
Don’t know	999			

N.14	<p>In your opinion, what are the social benefits (rewards) associated with abandoning FGM?</p> <p><i>· Do not read response categories</i></p> <p><i>· Multiple responses possible</i></p> <p><i>· Probe twice</i></p>	None	0	<p>PRETESTING: Social benefits can also be called positive social effects, rewards or positive consequences. Pay special attention to the word choice during pretesting, especially when translating words to convey the ideas. Whatever word/phrase is used should be used throughout the three tools in this document (structured interview, FGD and IDI).</p> <p>TRAINING: If the respondent needs clarification, say, “For example, if a girl or her family refuses FGM, what are the positive outcomes for them, if any?”</p>
		No pain	1	
		Fewer health risks	2	
		Increased sexual pleasure	3	
		Protection of human rights	4	
		Setting a positive example for other community members	5	
		Following the law/avoid legal repercussions	6	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
N.15	<p>Would you publicly support someone who has decided NOT to accept FGM for their daughters or female family members?</p>	No	0	
		Yes	1	
		Declined to respond	888	
		Don't know	999	
N.16	<p>Have you publicly supported someone who has decided NOT to accept FGM for their daughters or female family members?</p>	No	0	<p>TRAINING: The difference between N.15 and N.16 is subtle, but N.16 gets at actual action, while N.15 assesses behavioural intent.</p>
		Yes	1	
		Declined to respond	888	
		Don't know	999	

N.17	Using a scale from 1 to 10, where 1 is very unlikely and 10 is very likely, how likely are you to sanction an individual who has decided to abandon FGM?	Enter number 1–10		PREPARATION: Whatever word for ‘sanction’ or ‘punishment’ is selected for N.13 should also be used here. TRAINING: People have different capabilities to impose sanctions/punishments; those with more social status might be able to impose more extreme punishments upon others. However, this question is about capturing the respondent’s likelihood of enacting only those social sanctions which they are capable of imposing on others.
		Declined to respond	888	
		Don’t know	999	
N.18	Using a scale from 1 to 10, where 1 is very unlikely and 10 is very likely, how likely are you to reward an individual who has decided to abandon FGM?	Enter number 1–10		PREPARATION: Whatever word for ‘benefit’ or ‘reward’ is selected for N.14 should also be used here. TRAINING: People have different capabilities to bestow benefits/rewards; those with more social status might be able to bestow better rewards upon others. However, this question is about capturing the respondent’s likelihood of offering only those social benefits which they are capable of bestowing on others.
		Declined to respond	888	
		Don’t know	999	
N.19	Using a scale from 1 to 10, where 1 is very unlikely and 10 is very likely, how likely are you to be sanctioned by others if you decided to abandon FGM?	Enter Number 1–10		PREPARATION: Whatever word for ‘sanction’ or ‘punishment’ is selected for N.13 should also be used here.
		Declined to respond	888	
		Don’t know	999	
N.20	Using a scale from 1 to 10, where 1 is very unlikely and 10 is very likely, how likely are you to be rewarded by others if you decided to abandon FGM?	Enter Number 1–10		PREPARATION: Whatever word for ‘benefit’ or ‘reward’ is selected for N.14 should also be used here.
		Declined to respond	888	
		Don’t know	999	

SECTION 11: CONSIDER THE CONTEXT, ESPECIALLY GENDER AND POWER

Note to the implementing organization

The questions below deal with restrictions on female mobility, economic autonomy, decision-making empowerment, tolerance of violence against women, and gender equality.

- **Questions O.1–O.5 measure restrictions on female mobility and should be asked as a set, only to female respondents.**
- **Questions O.6–O.7 measure female economic empowerment and should be asked as a set, only to female respondents.**
- **Questions O.8–O.14 measure female decision-making power and should be asked as a set, only to adults respondents.***
- **Question O.15 measures tolerance of violence against women.**
- **Questions O.16–O.23 measure gender equality and should be asked as a set.**

**Questions O.8–O.14 are based on decision-making questions from the DHS. They were revised during pretesting and pilot testing for validation. However, if it is preferred and feasible, these questions can be swapped for those directly from the DHS.*



No.	Question	Coding categories	Preparation & training instructions
Mobility			
O.1	Has anyone in your family ever stopped or restricted you from going outside of your house?	No	0
		Yes	1
		Declined to respond	888
O.2	Has anyone in your family ever stopped or restricted you from going outside of your house alone?	No	0
		Yes	1
		Declined to respond	888
O.3	Has anyone in your family ever stopped or restricted you from going outside of your community?	No	0
		Yes	1
		Declined to respond	888
		Don't know	999
O.4	Has anyone in your family ever stopped or restricted you from going outside of your community alone?	No	0
		Yes	1
		Declined to respond	888
O.5	Has anyone in your family ever stopped or restricted you from working outside of your house?	No	0
		Yes	1
		Declined to respond	888
Economic empowerment			
O.6	Do you have any cash savings?	No	0
		Yes	1
		Declined to respond	888
		Don't know	999

O.7	Has anyone in your family taken your money or possessions, even if you did not want them to?	No	0	
		Yes	1	
		Declined to respond	888	
Decision-making				
Who in your family usually has the final say on the following decisions?				
O.8	Making large household purchases?	Mainly another family member	1	PRETESTING: For questions O.8–O.14, the use of the word “final” may not encourage “jointly” as a response. Pay attention to this in pretesting. If necessary, you can convert each question into two: “Who are the decisions makers?” and “Who makes the final decision?” CAPI: Questions O.8–O.14 should only be asked to adult respondents.
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
O.9	Making household purchases for daily needs?	Mainly another family member	1	
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
O.10	Decisions about major family investments?	Mainly another family member	1	
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

0.11	Visits to family and/or relatives/friends?	Mainly another family member	1	
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
0.12	Your family's health care?	Mainly another family member	1	
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
0.13	Your own health care?	Mainly another family member	1	
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
0.14	Choices around family planning?	Mainly another family member	1	
		Mainly respondent	2	
		Respondent and family member(s) jointly	3	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	

On a scale of 1 to 5, with 1 being strongly disagree and 5 strongly agree, to what extent do you agree or disagree with the following statements?		Not at all confident	Somewhat un-confident	Neutral	Somewhat confident	Very confident	Decline to respond	Do not Know	
Tolerance towards violence									
O.15	Physical violence (such as hitting, beating, slapping, etc.) is sometimes the only way to solve a disagreement.	1	2	3	4	5	888	999	PRETESTING: If the phrase “solve a disagreement” seems not to be capturing the desired information, you may choose to replace the statement in O.15 with, “There are some situations at home where physical violence against a woman is acceptable.”
Gender roles and equality (girls/daughters)									
O.16	It is important that sons have more education than daughters.	1	2	3	4	5	888	999	
O.17	Daughters should be sent to school only if they are not needed to help at home.	1	2	3	4	5	888	999	
O.18	If there is a limited amount of money to pay for education, it should be spent on sons first.	1	2	3	4	5	888	999	
O.19	Daughters should have the same chance to work outside the home as sons.	1	2	3	4	5	888	999	
O.20	I would like my daughter to be able to work outside the home so she can support herself if necessary.	1	2	3	4	5	888	999	

Gender roles and equality (women)									
O.21	The only thing a woman can really rely on in her old age is her sons.	1	2	3	4	5	888	999	
O.22	A woman's most important role is to take care of the home and the children, and cook for the family.	1	2	3	4	5	888	999	
O.23	Men and women being equal is entirely compatible with my tradition and culture.	1	2	3	4	5	888	999	

Kenya
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SECTION 12: TRACK INDIVIDUAL AND SOCIAL CHANGE OVER TIME

Note to the implementing organization

The questions below deal with all the basic indicators designed to track the implementation of behaviour and social change interventions. It is presumed that the other indicators (i.e., all those assessed up to this point) will register change that is associated with frequency and depth of the intervention. This section includes generic ‘types’ of interventions. You must select indicators specific to your interventions.

When adapting these questions, add time frames relevant to each question, where appropriate. For example, “Have you **ever** encouraged anyone to abandon FGM?” can be changed to “Have you encouraged anyone to abandoned FGM **in the past 12 months?**”

No.	Question	Coding categories	Preparation & training instructions
Advocacy			
P.1	Have you ever encouraged anyone to abandon FGM?	No	0
		Yes	1
		Declined to respond	888
		Don't know	999
			PREPARATION: Adjust time frame as appropriate. CAPI: Code a skip to the subsection on ‘Community-based activities’ (P.4–P.8) if response is No (0) Declined to respond (888) Don't know (999)
P.2	Who did you encourage? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	Mother	1
		Father	2
		Partner/spouse	3
		Sister(s)	4
			PREPARATION: Any additions to the response categories in M.1, M.2, M.4, M.5 and M.8 should also be made here.

		Brother(s)	5	
		Aunt(s)	6	
		Uncle(s)	7	
		Mother-in-law	8	
		Father-in-law	9	
		Grandmother	10	
		Grandfather	11	
		Neighbours	12	
		Friends	13	
		Teachers	14	
		Community leaders	15	
		Elders	16	
		Community health workers	17	
		Doctors or nurses	18	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.3	<p>How did you do it?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Taught them about health risks	1	<p>PREPARATION: Adjust time frame as appropriate.</p> <p>PRETESTING: The phrase 'community-based' may have different meanings to different people. See if just 'community' should be used instead. Further, if needed, use pretesting to come up with a set of examples of community-based activities that all data collectors can use.</p>
		Told them my story	2	
		Told them stories of women I know/have heard of	3	
		Gave them programme materials	4	
		Taught them about laws against FGM	5	
		Invited them to the community dialogue	6	

		Invited them to join media (radio, TV, magazine, social media) listening/watching/reading group	7	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
Community-based activities				
P.4	Have you ever participated in community-based activities linked to FGM abandonment?	No	0	<p>PREPARATION: Adjust time frame as appropriate.</p> <p>PRETESTING: The phrase 'community-based' may have different meanings to different people. See if just 'community' should be used instead. Further, if needed, use pretesting to come up with a set of examples of community-based activities that all data collectors can use.</p> <p>CAPI: Code a skip to the subsection on 'Media (radio)' (P.9–P.12) if response is</p> <p>No (0) Declined to respond (888) Don't know (999)</p> <p>TRAINING: If an example is used, everyone should use the same example.</p>
		Yes	1	
		Declined to respond	888	
		Don't know	999	
P.5	What community-based activities linked to FGM abandonment did you participate in?	Meeting(s)	1	<p>PREPARATION: This is a generic list of community-based activities. You should rephrase, probe or add to the response categories based on your interventions.</p> <p>PRETESTING: The phrase 'community-based' may have different meanings to different people. See if just 'community' should be used instead.</p>
		Public declaration(s)	2	
		Community mobilization	3	
		School club/movement	4	
		Youth club/movement	5	
		Training on FGM	6	
		Mini media	7	
				<p><i>· Do not read response categories</i></p> <p><i>· Multiple responses possible</i></p> <p><i>· Probe twice</i></p>

		Community dialogue group	8	
		Radio listening group	9	
		Women's committee	10	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.6	<p>What did you do during the community-based activities linked to FGM abandonment?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Led the meeting	1	<p>PREPARATION: This is a generic list of roles and tasks within community-based activities. You should rephrase, probe or add to the response categories based on your interventions.</p> <p>PRETESTING: The phrase 'community-based' may have different meanings to different people. See if just 'community' should be used instead.</p>
		Led the community mobilization	2	
		Gave training	3	
		Received training	4	
		Facilitated the activities	5	
		Participated in the discussions	6	
		Shared my story	7	
		Passed information to my family	8	
		Passed information to community members	9	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.7	<p>What happened to you at a personal level as a result of participating in the community-based activities linked to FGM abandonment?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Increased awareness	1	<p>PREPARATION & PRETESTING: Use your knowledge of the context and your programmes to add in response categories for other potential results of the community-based activities. Also use pretesting as a way to generate additional response categories to pre-code.</p>
		Increased knowledge on FGM	2	
		Decreased practice of FGM	3	
		No change	4	
		Other (please specify) _____	777	

		Declined to respond	888	<p>The phrase ‘community-based’ may have different meanings to different people. See if just ‘community’ should be used instead. Also, be cautious about using the phrase “What happened?” You may instead need to ask, “What changes occurred?”</p> <p>TRAINING: To get at specific programme outcomes, P.7 may need to be broken into multiple steps. First ask the question without providing response categories, but then probe for specific outcomes if they don’t mention the ones the programme cares about, e.g., “Did you X? Did you Y? did you Z?”</p>
		Don’t know	999	
P.8	<p>What happened at a community level as a result of participating in the community-based activities linked to FGM abandonment?</p> <p>· Do not read response categories</p> <p>· Multiple responses possible</p> <p>· Probe twice</p>	Increased awareness	1	<p>PREPARATION & PRETESTING: Use your knowledge of the context and your programmes to add in response categories for other potential results of the community-based activities. Also use pretesting as a way to generate additional response categories to pre-code.</p> <p>The phrase ‘community-based’ may have different meanings to different people. See if just ‘community’ should be used instead. Also be cautious about using the phrase ‘What happened?’ You may instead need to ask, “What changes occurred?”</p> <p>TRAINING: To get at specific programme outcomes, P.8 may need to be broken into multiple steps. First ask the question without providing response categories, but then probe for specific outcomes if they don’t mention the ones the programme cares about, e.g., “Did you X? Did you Y? did you Z?”</p>
		Increased knowledge on FGM	2	
		Decreased practice of FGM	3	
		No change	4	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don’t know	999	

Media (Radio)				
P.9	Have you ever heard about abandoning FGM through the radio?	No	0	PREPARATION: Adjust time frame as appropriate. CAPI: Code a skip to the subsection on 'Media (TV)' (P.13–P.16) if response is No (0) Declined to respond (888) Don't know (999)
		Yes	1	
		Declined to respond	888	
		Don't know	999	
P.10	What kind of radio show was it? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	Advertisement or public service announcement (PSA)	1	PREPARATION: This is a generic list of types of radio shows/broadcasts. Rephrase, probe or add to specific response categories based on any known FGM interventions that use radio. Also add questions to probe about the duration and frequency of listening to/participating in specific radio activities.
		Talk show/call-in show	2	
		Drama	3	
		Radio spot (i.e., buy radio airtime and transmit message)	4	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.11	When was the last time you heard about abandoning FGM on the radio?	In the past week	1	
		2–3 weeks ago	2	
		3 weeks to 1 month ago	3	
		1–3 months ago	4	
		3–6 months ago	5	
		More than 6 months ago	6	
		Declined to respond	888	
		Don't know	999	

P.12	What were the specific messages about abandoning FGM you heard on the radio? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	The problems associated with FGM	1	PREPARATION: This is a generic list of messages. Add to or replace the response categories based on the messages used in your radio activities.
		Importance of stopping FGM	2	
		Difficulties during pregnancy and delivery	3	
		Exposure to disease transmission	4	
		HIV and FGM	5	
		That it's a harmful tradition	6	
		Other (please specify) _____	777	
		Declined to respond	888	
Don't know	999			
Media (TV)				
P.13	Have you ever heard or seen about abandoning FGM through the TV?	No	0	PREPARATION: Adjust time frame as appropriate. CAPI: Code a skip to the subsection on 'Media (Print publication)' (P.17–P.20) if response is No (0) Declined to respond (888) Don't know (999)
		Yes	1	
		Declined to respond	888	
		Don't know	999	



Ethiopia
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P.14	What kind of TV show was it? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	Sitcom	1	PREPARATION: This is a generic list of kinds of TV shows. Rephrase, probe or add to the response categories based on any interventions that use TV. Also add questions to probe about the duration and frequency of watching specific TV programmes.
		Advertisement or public service announcement (PSA)	2	
		News	3	
		Film	4	
		Talk show/call-in show	5	
		Drama series	6	
		Community discussion programme	7	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.15	When was the last time you heard about abandoning FGM through the TV?	In the past week	1	
		2–3 weeks ago	2	
		3 weeks to 1 month ago	3	
		1–3 months ago	4	
		3–6 months ago	5	
		More than 6 months ago	6	
		Declined to respond	888	
		Don't know	999	
P.16	What were the specific messages about abandoning FGM you saw on TV? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	The problems associated with FGM	1	PREPARATION: This is a generic list of messages. Add to or replace the response categories based on the messages used in your TV activities
		Importance of stopping FGM	2	
		Difficulties during pregnancy and delivery	3	
		Exposure to disease transmission	4	
		HIV and FGM	5	

		That it's a harmful tradition	6	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
Media (Print publication)				
P.17	Have you ever read about abandoning FGM through a printed publication?	No	0	PREPARATION: Adjust time frame as appropriate. CAPI: Code a skip to the subsection on 'Social media' (P.21–P.24) if response is No (0) Declined to respond (888) Don't know (999)
		Yes	1	
		Declined to respond	888	
		Don't know	999	
P.18	What kind of print publication was it? · Do not read response categories · Multiple responses possible · Probe twice	Newspaper	1	PREPARATION: This is a generic list of types of publications. Rephrase, probe or add to the response categories based on any interventions that use print publications. Also add questions to probe about the duration and frequency of reading specific print publications.
		Magazine	2	
		Book	3	
		Brochure/leaflet	4	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.19	When was the last time you read about abandoning FGM in a print publication?	In the past week	1	
		2–3 weeks ago	2	
		3 weeks to 1 month ago	3	
		1–3 months ago	4	
		3–6 months ago	5	
		More than 6 months ago	6	

		Declined to respond	888	
		Don't know	999	
P.20	<p>What were the specific messages about abandoning FGM you read in print?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	The problems associated with FGM	1	<p>PREPARATION: This is a generic list of messages. Add to or replace the response categories based on the messages used in your print publication activities.</p>
		Importance of stopping FGM	2	
		Difficulties during pregnancy and delivery	3	
		Exposure to disease transmission	4	
		HIV and FGM	5	
		That it's a harmful tradition	6	
		Other (please specify) _____	777	
		Don't know	999	
Social media				
P.21	<p>Have you ever seen, heard or read about abandoning FGM through social media?</p>	No	0	<p>PREPARATION: Adjust time frame as appropriate.</p> <p>CAPI: Code a skip to the subsection on 'Interpersonal counselling' (P.25–P.28) if response is</p> <p>No (0) Declined to respond (888) Don't know (999)</p>
		Yes	1	
		Declined to respond	888	
		Don't know	999	
P.22	<p>What kind of social media platform was it?</p> <ul style="list-style-type: none"> · Do not read response categories · Multiple responses possible · Probe twice 	Facebook	1	<p>PREPARATION: This is a generic list of platforms. Rephrase, probe or add to the response categories based on any interventions that use social media.</p> <p>Also add questions to probe about the duration and frequency of engaging with specific social media.</p>
		Instagram	2	
		Snapchat	3	
		Twitter	4	
		Telegram	5	
		WhatsApp	6	
		Viber	7	

		YouTube	8	
		Other (please specify) _____	777	
		Declined to respond	888	
		Don't know	999	
P.23	When was the last time you saw, heard or read about abandoning FGM on social media?	In the past week	1	
		2–3 weeks ago	2	
		3 weeks to 1 month ago	3	
		1–3 months ago	4	
		3–6 months ago	5	
		More than 6 months ago	6	
		Declined to respond	888	
		Don't know	999	
P.24	What were the specific messages about abandoning FGM you saw, heard or read on social media? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	The problems associated with FGM	1	PREPARATION: This is a generic list of messages. Add to the response categories based on the messages used in your social media activities.
		Importance of stopping FGM	2	
		Difficulties during pregnancy and delivery	3	
		Exposure to disease transmission	4	
		HIV and FGM	5	
		That it's a harmful tradition	6	
		Nothing	7	
		I don't remember	8	
		Other (please specify) _____	777	
		Don't know	999	

Interpersonal counselling				
P.25	Have you ever heard about abandoning FGM through interpersonal counselling?	No	0	<p>PREPARATION: Adjust time frame as appropriate.</p> <p>PRETESTING: Pay attention to the term 'interpersonal counselling' to ensure respondents understand what is being asked.</p> <p>CAPI: Code a skip to the end the interview here if response is</p> <p>No (0) Declined to respond (888) Don't know (999)</p>
		Yes	1	
		Declined to respond	888	
		Don't know	999	
P.26	Who counselled you? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	Health worker	1	
		Social worker	2	
		Religious leader	3	
		Peer	4	
		Community leader	5	
		Community elders	6	
		Community police	7	
		Other (please specify) _____	777	
		Declined to respond	888	
Don't know	999			
P.27	When was the last time you received counselling that included discussion of or information about abandoning FGM?	In the past week	1	
		2–3 weeks ago	2	
		3 weeks to 1 month ago	3	
		1–3 months ago	4	
		3–6 months ago	5	

		More than 6 months ago	6	
		Declined to respond	888	
		Don't know	999	
P.28	What was the specific information about abandoning FGM you received through counselling? <i>· Do not read response categories</i> <i>· Multiple responses possible</i> <i>· Probe twice</i>	The problems associated with FG M	1	
		Importance of stopping FGM	2	
		Difficulties during pregnancy and childbirth	3	
		Exposure to disease transmission	4	
		HIV and FGM	5	
		That it's a harmful tradition	6	
		Other (please specify) _____	777	
		Don't know	999	

Time end (HH:MM) |__|__| : |__|__|

THANK YOU FOR YOUR TIME.

DO YOU HAVE ANY QUESTIONS? IF NOT, WE HAVE FINISHED THE INTERVIEW.



FOCUS GROUP DISCUSSION GUIDE

Note to the implementing organization

Before using this document for training data collectors, you will need to do the following:

1. Make sure the discussion information in the introduction section matches the information you are collecting in the structured interview at household level. GPS coordinates and household location identifiers are not necessary for focus group discussions (FGDs).
2. If your participants cannot write, then ensure you have a note-taker who can help the participants with filling out the activity worksheets.
3. Make sure that any demographic information adjustments made in the structured interview questionnaire are reflected here. The FGD should collect the same demographic information as the structured questionnaire.
4. Any text highlighted and in brackets *[LIKE THIS]* indicates a place where context-specific information should be entered before using the tool. Conduct pretesting to verify whether the choices you made were appropriate or if they need revising.
5. The 'Preparation & pretesting' boxes at the end of each activity list additional steps that you need to take to prepare the tool for use, and identify elements for which pretesting is especially important.
6. The 'Training notes' boxes at the end of each activity contain information that will be helpful for training of facilitators and note-takers. Be sure to familiarize yourself with this information prior to pretesting the activities.
7. A copy of the tool without notes is provided in a separate file as part of the ACT Implementation Templates. This version is intended for pretesting and facilitator training purposes.

**You may delete this box before printing and sharing copies of this guide with the facilitators for training.*

Note to the facilitators

The overall purpose of this FGD is to gather data for triangulation of information on what people know, feel and do, to ascertain normative factors, to collect information on social networks and support, and to consider the context – especially gender and power elements of the ACT Framework. The FGD should last approximately 90 minutes and should be interactive, engaging and empowering. Ideally, given the length and content of the FGD, there should be 5–9 participants in each group.

The objectives of the FGD are to:

- 1. Assess participants' knowledge of the risks associated with FGM**
- 2. Ascertain reasons why FGM exists and persists**
- 3. Determine the extent to which reasons for the existence and persistence of FGM are related to legal, moral or religious factors, gender norms, or personal beliefs**
- 4. Identify benefits/rewards and sanctions/punishments for abandoning FGM**

5. Measure the extent to which FGM behaviours are governed by descriptive and injunctive social norms

6. Examine gender-related attitudes that drive harmful gender norms and uphold FGM.

Each activity begins by listing the purpose of the specific activity, the materials needed for the activity, and the approximate time that will be required to complete the activity. An image of the relevant worksheet is provided in a figure at the start of each activity, and full-size worksheet templates are attached at the end of the FGD guide. Any text you should say or questions you should ask are provided in **blue**. Each activity concludes with 'Training notes' that will help you understand and implement the activity. These notes may also include recommendations for adapting the questions for different contexts.



INTRODUCTION

Before beginning the FGD, record the following information:

	Discussion information
Name of supervisor	
Name of facilitator	
Name of note-taker	
Region	
[ADMINISTRATIVE SUBUNIT] ⁵	
Location of discussion (church, tree, school, etc.)	
Respondent type in this discussion	
Discussion date (DD-MM-YY)	
Discussion start time (HH:MM)	
Discussion end time (HH:MM)	
Unique FGD ID	

As participants arrive, have them sign in. Check your list to make sure you have received informed consent from each of these participants during the mapping/recruitment process. If anyone has not already consented/assented, make sure to obtain consent/assent prior to starting the discussion.

Begin the FGD by introducing yourself, reviewing the purpose of the FGD and reminding participants of the key points of the informed consent(which they should have already signed during recruitment). The text below can guide you.



- **Say:** Thank you for joining this focus group discussion today! My name is _____ and I will be leading our conversation today. I also have with me my colleague _____ who will assist by taking notes.
- **Say:** We'd like to talk with you about your thoughts about female genital mutilation or FGM. We will not ask you about your own behaviour or experiences, just your opinions. The information we gather from you and other community members will help us to better understand the practice of FGM in [ENTER REGION].

⁵ Add more rows as necessary for additional administrative subunit levels



- **Say:** When you were recruited for this activity, you signed a consent/assent form agreeing to participate. I want to remind you of a few things about that form. First of all, your participation is completely voluntary. You do not have to answer any question that you don't want to, and you can stop participating at any time. There will be no negative consequences if you decide to stop participating. We will be recording the discussion to help us capture your ideas, but when we transcribe the session we will remove anything you say that might identify you personally. To protect everyone's privacy, we ask that anything that is shared in this group today is not repeated after you leave. Do you have any questions?
- **Say:** Now, before we begin, let's review some ground rules for focus group discussions.

1. No comment is a silly comment!
2. There are no right or wrong answers.
3. Be respectful of other people's opinions and ideas.
4. One person, one voice: do not speak when others are speaking.

Does anyone have any additional rules they'd like to add?

Allow participants the time to share other rules with the group.

Then, ask the participants to introduce themselves briefly, one at a time.

Participant information							
No.	1	2	3	4	5	6	7
Gender (M/F)							
Age (in years)							
Marital status							
Ethnicity (multiple responses possible)							
Religion							
Education (highest level completed)							
Occupation							
Length of time at current residence (MM:YY)							
Informed consent (Y/N)							

Ensure you have participant information from each of the FGD participants.

ACTIVITY 1: BODY MAPPING

Purpose:

To illustrate participants' understanding of and perspectives on the physical and psychological risks associated with FGM

Materials:

Prepared image(s) of a typical girl (see *Figure 2* for examples from Guinea)

Suggested time:

20 minutes

Figure 2: Examples of typical girl images for body mapping



Display the image of the girl.

- **Say:** Now we are going to move from the example to a different story. I am going to tell you a story about a young *[ENTER REGION]* family making decisions around FGM and I would like you to help me fill in the details about what might happen based on a typical family in your community. As always, there are no right or wrong answers and you can skip any questions that you don't feel comfortable answering.
- **Say:** Now imagine that this girl is undergoing FGM. While she is undergoing FGM...
 - What do her eyes see?
 - What do her ears hear?
 - What does her nose smell?
 - What does her mouth say?
 - What does her mind think?
 - What does her heart feel?
 - What does her stomach feel?
 - What do her hands and feet do?

After you have asked about all the senses/parts of the body, probe for reasons why she sees/hears/smells/says/thinks/feels/does those things.



Kenya
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Preparation & Pretesting:

1. Data collectors will show participants an image of a 'typical' girl who is within the typical age range when local girls undergo FGM. The image can be a drawing or photo. Be sure to pretest the images that will be used to represent the girl. You should use your knowledge of the local context to choose the images of girls of an appropriate age for undergoing FGM to be used for pretesting. If there is great variation in how girls look or the typical age when FGM is done between regions where data are being collected, then it would be best to use different images appropriate for each region. See above for an example showing images from Guinea.
2. Not all senses/body parts may yield useful or unique responses in your context. Ask all of the senses/parts of the body during pretesting. Then use the results to determine whether or not you want to drop some of them. When deciding to drop a sense/body part, base the decision on the quality of data received, not the number of responses. A sense/part of the body may only generate a couple of answers, but those answers could still be important information.
3. Decide on any additional probes to help 'set the scene' for your respondents before asking the "What does she sense" questions. For example, you may ask, "Who made the decision for her to undergo FGM?"; "Who took her to undergo FGM?" or "Where is she when FGM is being performed on her?"



Training notes

1. This activity allows us to determine what participants know about the risks associated with FGM, both physical and psychological. It also allows us to gain a sense of how the procedure is performed in their community.
 - a. You will show the participants a prepared image, either a drawing or a photo, of a 'typical' girl from the local context. The images to be used may vary by region, if a typical girl looks different or if FGM typically occurs at different ages by region.
 - b. You will then have participants describe what the girl experiences while undergoing FGM, by referencing several different senses/parts of the body.
2. The preliminary questions about naming and describing the girl are important for setting the scene for the activity, but also for getting the group comfortable talking and interacting in the context of the FGD.
 - a. It is not necessary for everyone to agree on the specific name/age/etc., just get a consensus and move on.
 - b. Don't spend more than a couple of minutes on this preliminary process.
3. Start asking the questions about each sense/part of the body and be sure to allow ample time for participants to respond to each one before moving on to the next.
 - a. You can use a few probing questions to encourage more responses, such as, "What else does she see?" or "Anything else?"
4. Probing for why a girl senses what she does should happen after all of the senses have been asked and participants have had time to answer each one.
 - a. Be sure to probe for more in-depth reasons. For example, "Whose blood is it? Is there a lot of blood? What kind of a blade is it?"
5. If, in the community, girls undergo FGM as a baby, participants may not understand how to answer the questions. They may say something like, "She is too young and doesn't speak or think."
 - a. Probe the participants to respond by changing it to a hypothetical question; for example, "If she could speak, what do you think she would say?"
 - b. If that doesn't work, you may try, "If you were in her place, what would you say?"

ACTIVITY 2: SOCIAL NETWORK MAPPING

Purpose:

To understand the social networks of the participants, so that they are prepared to complete Activity 3 subsequently

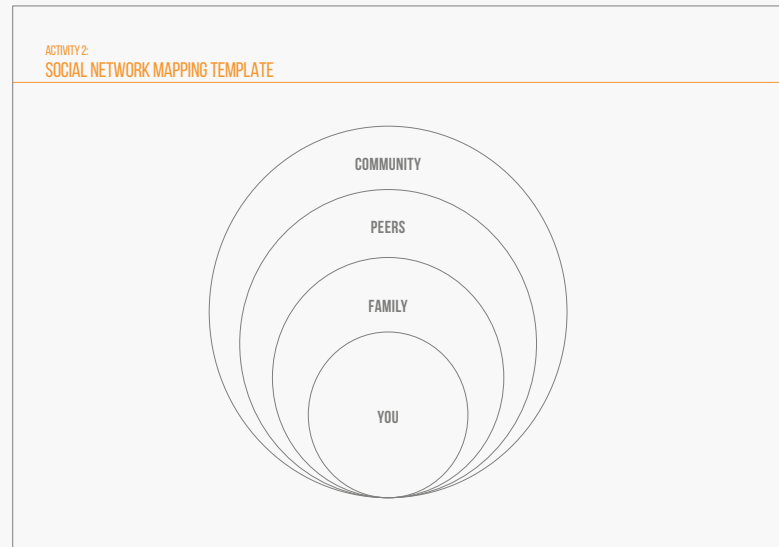
Materials:

Activity 2 template (shown in *Figure 3*; use the full-size template attached at the end of the FGD guide), a writing implement and some tape

Suggested time:

About 10 minutes

Figure 3: Image of activity 2 social network mapping template



Show the participants the prepared social network map template.

- **Say:** For our next activity, we'll start by listing the people whose thoughts and opinions regarding FGM matter to you. We will write the type of person in each of these circles on this paper. Please give us the type of person – such as 'mother' or 'friend' or 'nurse' – not their name.

Put the template somewhere that all the participants can see it, and decide who will write on it – the facilitator, note-taker or the respondents. If any participant cannot write, the facilitator or note-taker should be sure to write down their answers.

- **Say:** Here you are in the middle. The second circle represents the people in your family. Who are your immediate family members whose thoughts and opinions regarding FGM matter to you? Who are your immediate family members with whom you do (or would) discuss FGM?

Allow the participants time to respond and record their answers in the 'family' circle. If participants are only responding with immediate family members, probe

with "Who are your extended family members whose thoughts and opinions regarding FGM matter to you?" and "Who are your extended family members with whom you do (or would) discuss FGM?" Ask them to record these in the same 'family' circle.

- **Say:** The third circle represents your peers and friends. Who are the friends and peers whose thoughts and opinions regarding FGM matter to you? Who are the friends and peers with whom you do (or would) discuss FGM?

Allow the participants time to respond and record their answers in the 'peers' circle.

- **Say:** The fourth circle represents community members and local leaders. Whose thoughts and opinions regarding FGM in your community matter to you? Who are the community members and leaders with whom you do (or would) discuss FGM?

Allow the participants time to respond and record their answers in the 'community' circle. If necessary, explain that for this activity the word 'community' is used as a geographical designation. Decide what word works best in your context/language (use the same word selected for question E.3 of the structured interview).



Preparation & Pretesting:

1. Community means different things in different countries and contexts. Instructions in the structured interview questionnaire clarify that 'community' is being used as a geographical designation. The best word for 'community' in your context (such as community, village, locality, neighbourhood, etc.) should be used – whatever word was selected for use in the structured interview questionnaire should also be used here.
2. If it is important to your programme to identify who is involved in the decision to arrange for a girl to undergo FGM, you can add the following question after the fourth circle has been completed:
 - Of these people you've identified, which of them are directly involved in the decision to arrange for a girl to undergo FGM?



Training notes

1. In this activity, we want participants to create a visual depiction of their social networks as a group. You will ask them to list the individuals whose thoughts and opinions about FGM matter to them, at the different levels of the social ecological model (SEM): family, peer and friends, and community.
2. It is important to start with the self and then move through each level with increasing social distance.
3. As they list individuals, make sure they do not give names but the relationship with that individual.
 - For example: mother, sister, friend, neighbour, village chief, etc. If they give a name, ask what that person's relationship or position is and record it instead.
4. It is not necessary to go around one by one and ask every participant.
 - For example, if 'mother' is already written, there's no need to record that response again.
 - However, the note-taker should indicate if a response was given multiple times.
5. Make sure the FGD facilitators are aware of the intended meaning of 'community' so that they can make this clear to the participants, in order to include appropriate responses.
6. Make sure that the completed social network map is visible to the participants as they complete the next activity – Activity 3: 2x2 Tables.

ACTIVITY 3: 2×2 TABLES

Purpose:

To measure the extent to which FGM behaviours are governed by descriptive and/or injunctive social norms and what the outcome expectations for abandoning or continuing FGM are

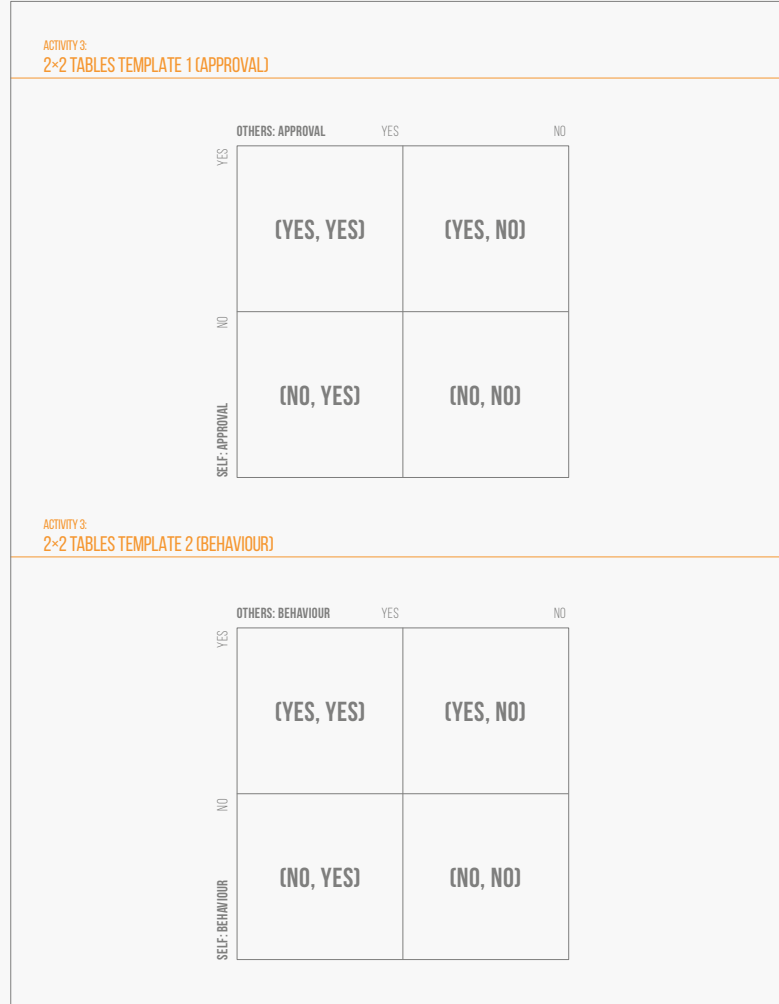
Materials:

Activity 3 templates (shown in *Figure 4*; use the full-size templates attached at the end of the FGD guide), writing implement and tape

Suggested time:

30 minutes

Figure 4: Image of activity 3 2×2 tables template 1 (approval) and template 2 (behaviour)



Djibouti
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Make sure the social network map from Activity 2 is visible to participants during this activity.

- **Say:** Now I'd like to know: In your community as a whole, out of 10 girls aged 10–14 years, how many do you believe have or will undergo FGM?
- **Say:** In your community as a whole, out of 10 girls aged 15–19 years, how many do you believe have or will undergo FGM?
- **Say:** In your community as a whole, out of 10 women aged 20 or over, how many do you believe have undergone FGM?
- **Say:** Next, I want to know what you think about the practice of FGM. I'm going to ask you two questions, but I don't want you to answer until I've asked both of the questions.
- **Say:** Do you personally approve of the continuation of FGM? Answer yes or no in your head.
- **Say:** Now I want you to think about the people whose thoughts and opinions about FGM matter to you, the people that we just identified in the social network map in the previous activity. Do you think that those people personally approve of the continuation of FGM? Yes or no?

Now go around to participants one by one and ask them to share their pair of answers (yes/yes; yes/no; no/yes; no/no). Tally their answers in the appropriate quadrant on the prepared 'approval' chart (see Figure 4, 2x2 Table – Template I).

- **Say:** Moving on, I want you to imagine that it is up to you to make a decision about FGM. Again, I'm going to ask you two questions, but don't share your answer with me until I've asked both questions. Do you think other people expect you to continue FGM? Yes or no?

- **Say:** Now, what about those people whose thoughts and opinions matter to you regarding FGM – the ones identified on the map? [Point to the map] Would those people choose to continue FGM? Yes or no?

Again, go one by one allowing participants to share their pair of answers and tally the responses in the appropriate quadrant of the prepared 'behaviour' chart (see Figure 4, 2x2 Table – Template II).

After each participant's responses have been recorded, count the number of responses in each quadrant on each chart. Display the two charts side by side.

Beginning with the quadrant containing the most responses on the behaviour table, ask for explanations of the differences between the two tables. For example, you might ask:

- There are X answers in this quadrant on the 'approval' table, but Y answers here on the 'behaviour' table. Why do you think the number of answers differs?
- Are your answers in the same quadrant in both charts? If not, why not?
- If a quadrant is empty, you can ask: Why do you think no one's answers are in this quadrant – [*enter quadrant description*]?
- **Say:** What are some of the [*SOCIAL BENEFITS*] associated with continuing FGM?
- **Say:** What are some of the [*SOCIAL SANCTIONS*] associated with continuing FGM?



Preparation & Pretesting:

1. Review the 2x2 Tables Training Guide⁶ for in-depth information on this activity, including what it measures, how it is conducted and alternative ways to implement it. Be sure to share the guide with facilitators during training.
2. This activity should be pretested thoroughly, and the option that works best during pretesting (from among the options described in the 2x2 Tables Training Guide) should be used in your context. Make sure to revise the above text to match the option chosen.
3. Special attention should be given to the word choice for 'social benefits' and 'social sanctions' during pretesting, especially when translating the words and conveying the ideas. Remember we are interested in social effects. Social benefits can also be called positive social effects, rewards or positive consequences. Social sanctions can also be called negative social effects, punishments or negative consequences. Whatever word/phrase was selected to use in the questions in the structured interview section on 'outcome expectancies' (questions N.13–N–20) should also be used here. The following phrases can be used/should be tested to see which brings the most clarity in your context. However, be consistent with the word choice used in the Structured Interview and the In-Depth Interview (IDI) Guide.
 - Social benefits, social rewards, positive social consequences, social advantages, social gain, social recognition, social accolades
 - Social sanctions, social punishments, negative social consequences, social disadvantages, social censure, social rebuke, social reprimand, social condemnation
4. An additional prompt that can elicit useful information is to have participants rank the social benefits and sanctions by their relative impact, by asking the following questions. Decide before pretesting if this information would be useful to your programme.
 - Of the **[SOCIAL BENEFITS]** you've listed, which do you think have the most impact on behaviour?
 - Of the **[SOCIAL SANCTIONS]** you've listed, which do you think have the most impact on behaviour?



Training notes

1. In this activity, you will ask participants about their own and others' approval and behaviour relating to FGM continuation. You will record the answers in the prepared tables (the Activity 3 templates are attached at the end of this guide). Then you will have participants think through the reasons for their answers in each quadrant – the rewards and punishments associated with continuing FGM.
2. When asking the three questions on the number of women out of 10 who have or will undergo FGM, we are interested in their specific community, not the country as a whole. Make sure the FGD facilitators are aware of the intended meaning of 'community' so that they can make this clear to the participants when answering these questions.
3. Each participant's combination of responses is recorded as a single tally mark. Therefore, the number of responses in the four quadrants together (per table) should be the same as the number of FGD participants (unless someone refused to participate in this activity).

⁶ Available at: [INSERT URL]

ACTIVITY 4: FREE LISTING

Purpose:

To identify why FGM exists and the extent to which these reasons are related to legal, moral or religious factors, gender norms, or personal beliefs

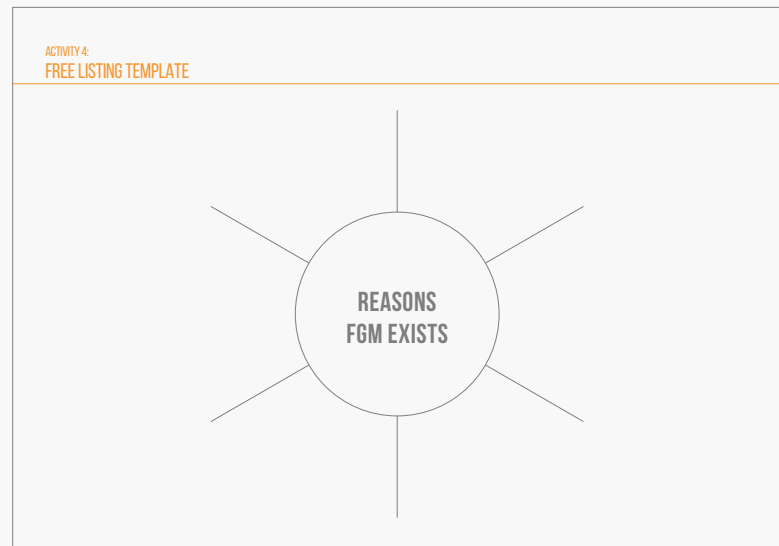
Materials:

Activity 4 worksheet (shown in *Figure 5*; use the full-size template attached at the end of the FGD guide) and different coloured markers including *[LIST COLOURS]*

Suggested time:

15 minutes

Figure 5: Image of activity 4 free listing template



- **Say:** In this activity, we are interested in learning your views on the reasons why FGM exists and why it continues to be practised. As I ask questions, the note-taker will record your responses on this large chart. [Show participants the prepared diagram, using the full-size template] There are no right or wrong answers and we want to get the first responses that come to your mind.
- **Say:** Why do you believe that FGM is practised?
- Using the *[ENTER COLOUR 1]* marker, record each response at the end of a line, adding more lines if necessary. Allow participants time to provide answers until no additional new responses are given.
- **Say:** Which of these reasons do you think are similar to one another?
- **Say:** Why did you group these reasons together? What is similar about them?
- **Say:** Out of all of the reasons you've given, what are the top 3 reasons why FGM exists?

Circle the three top reasons using the *[ENTER COLOUR 7]* marker.

- **Say:** Looking at these groups you've created, which one do you think is the most important group of reasons why FGM is practised?

Draw a star or asterisk next to this group using the *[ENTER COLOUR 8]* marker.

Underline the reasons that respondents think are similar using the *[ENTER COLOURS 2–6]* markers to indicate the groups. Allow reasons to be in more than one group. Probe the participants to come up with a minimum of three groups.



Preparation & Pretesting:

- The colours of the markers used is not important, but it is important that different markers are used for the different tasks. Make decisions about which colours are available and add in the instructions to match. You will need the following markers:
 - Colour 1: For recording answers
 - Colours 2–6: For underlining reasons that are similar to each other to create groups (one colour per group)
 - Colour 7: For circling the top three reasons
 - Colour 8: For drawing an asterisk next to the most important group



Training notes

- This activity involves identifying and categorizing the reasons why FGM exists. First, participants will list reasons and then you will have them group similar reasons together in ways that are meaningful to them.
- When grouping the reasons, the colour doesn't matter as long as you underline the similar responses using the same colour.
 - For example, if they say Reason 1 and Reason 4 are similar, you can underline both of these in blue. Then, if they say Reason 2 and Reason 3 are similar, underline these in red.
- It is perfectly fine for a reason to fall into more than one group.
 - Continuing with the previous example, if someone says Reason 5 is similar to Reasons 1 and 4, and someone else says it is similar to Reasons 2 and 3, you would underline Reason 5 in both blue and red.
- If participants are struggling to group reasons together, you can give them an example with two of the reasons.
 - You might say, "Reason 1 and Reason 4 both seem to be about religion to me, so I would group them together."
 - Make sure you only give them one example, one that's obvious.
 - Be sure to note any example that you provide.



ACTIVITY 5: GENDER BOXES

Purpose:

To examine attitudes around the gender roles that drive gender norms and, in turn, support the practice of FGM

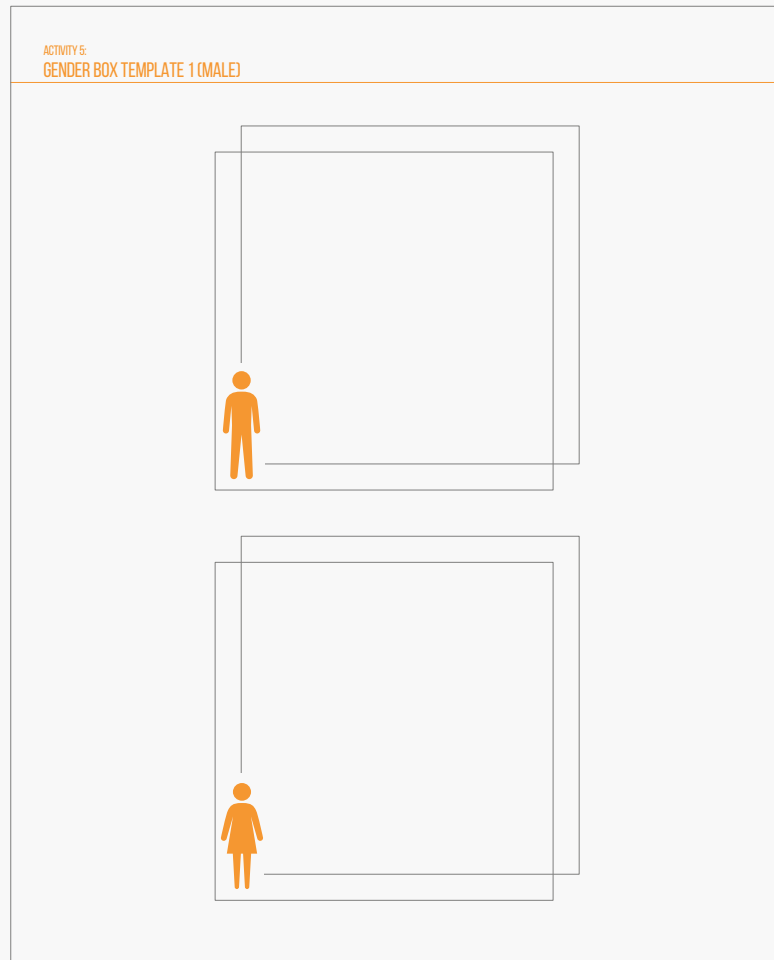
Materials:

Activity 5 worksheet (shown in *Figure 6*; use the full-size templates attached at the end of the FGD guide), writing implements and no tape

Suggested time:

20 minutes

Figure 6: Image of activity 5 gender boxes templates (male and female)





Start by dividing participants into two groups.
Distribute the two prepared chart papers and markers.

- **Say:** For our last activity, we are going to discuss the qualities, roles and behaviours expected of a 'typical' person by their community. To help our discussion, we will place these typical people in 'gender boxes'. Group 1, you will discuss a 'typical' woman, and Group 2, you will discuss a 'typical' man. Inside the boxes, draw or write the key points of your discussion.

Give the groups time to discuss and record their thoughts in the 'gender boxes'. If participants are illiterate, the facilitator and note-taker should each go to a group and transcribe the responses given for them.

- **Say:** Now, think about consequences when a woman or a man doesn't comply with (or does not match) society's expectations, which you've listed inside the boxes. Write these consequences on the outside of the box.

Give the groups time to discuss these consequences and record their thoughts outside the gender boxes. After the groups have recorded their answers, bring them back together and have them share their gender boxes with each other. Ask if the groups have any additions or changes to the other group's gender box.

- **Say:** Which of the gender roles you mentioned inside the boxes are related to FGM?

Circle or underline the answers they indicate.

- **Say:** Given these things outside the box (i.e., the consequences if one does not comply with or match society's expectations), why might someone choose to stay inside the box?
- **Say:** Given these things outside the box (i.e., the consequences if one does not comply with or match society's expectations), why might someone choose to step outside the box?



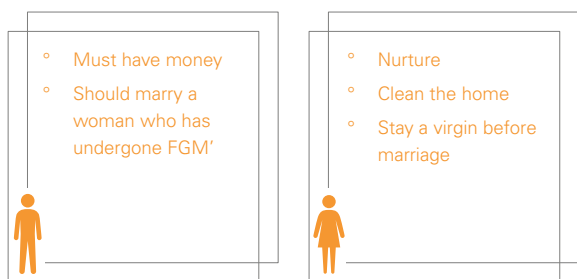
Preparation & Pretesting:

1. When pretesting, pay special attention to the word choice for 'typical' as the concept of a typical man or woman, as expressed in English, may not translate directly.
 - a. Use pretesting to decide on an example of a gender role for a typical man and for a typical woman.
 - b. Use pretesting to decide on an example of what happens (consequences) when a woman and a man each go outside their gender box.
 - c. These examples should be added to the guide and used consistently throughout all the FGDs conducted by your organization/for your programme.
2. During pretesting, determine the best way to describe 'gender roles' to the participants, if it is not a common concept in your context.

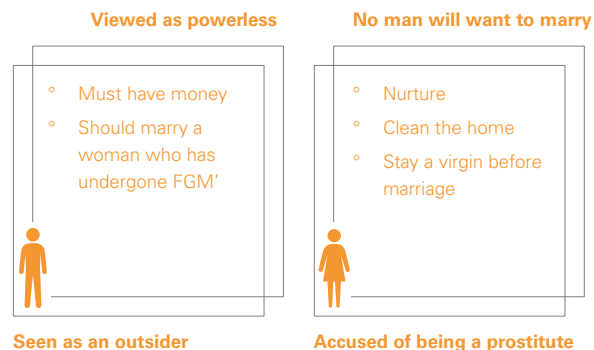


Training notes

- Participants should be divided into two groups: one that will complete the activity about a woman and the other about a man.
 - Divide the participants into two groups quickly, either by counting off as 1, 2, 1, 2... or splitting the room in the middle.
- The figure below shows an example of how the boxes should be filled in for listing gender roles. However, don't share this example with the participants.



- The figure below shows an example of how the consequences of not abiding by the gender roles should be recorded. However, don't share this example with the participants.



- Gender roles/expectations related to FGM can be a difficult concept to understand. There are the obvious ones, such as 'a woman should/should not have FGM', but the roles go beyond that.
 - For example, if a gender role is that a woman should stay a virgin until marriage, and it is believed that FGM helps a woman to stay a virgin until marriage, then remaining a virgin until marriage is a gender role related to FGM.

CLOSING

Purpose:

To allow participants to express any final thoughts and conclude the discussion

Materials:

None

Suggested time:

About 5 minutes



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- **Say:** Before we end this discussion, is there anything else that you want to tell me or any questions you want to ask? Is there anything that we should have talked about but didn't talk about?
- **Say:** Thank you very much for your participation today. I would like to remind you that the discussion will be kept confidential and that anything said in the discussion should not be talked about with other people outside of the group.



Preparation & Pretesting:

1. During pretesting, if there are any common questions or thoughts that come up, you can insert them as a standard question or statement in the closing for all FGDs.



Training notes

1. This is a chance for the participants to add any thoughts or feelings that may be lingering from the discussion or to ask questions.
2. After you've given them time to make any last comments or ask any questions, and you've discussed these, be sure to thank the participants and remind them that we will keep their responses confidential.
3. Make sure they know who to contact if they have any further questions (they should have the contact information postcard).
4. Be sure to take all of the charts/worksheets with you as documentation of the FGD.

FOCUS GROUP DISCUSSION

MATERIALS CHECKLIST

This is a checklist of all of the materials needed to facilitate and complete all FGD activities.

- Participant sign-in sheet
- Confirmation of consent/assent conducted during the mapping
- Extra consent forms
- Extra contact information postcards
- FGD facilitator's guides for facilitator and note-taker
- Prepared image of typical girl(s) for body mapping
- Prepared social network mapping template (Activity 2)
- Prepared 2×2 table for approval (Activity 3)
- Prepared 2×2 table for behaviour (Activity 3)
- Prepared free listing template (Activity 4)
- Prepared male gender box template (Activity 5)
- Prepared female gender box template (Activity 5)
- Extra flip chart paper
- Flip chart paper display stand
- Tape
- Markers for note-taking, at least eight different colours *[LIST THE COLOURS REQUIRED]*
- Recording device
- Extra batteries

Templates for use in the activities can be found on the following pages.

SOCIAL NETWORK MAPPING TEMPLATE



ACTIVITY 3: 2×2 TABLES TEMPLATE 1 (APPROVAL)

		OTHERS: APPROVAL	
		YES	NO
SELF: APPROVAL	YES	(YES, YES)	(YES, NO)
	NO	(NO, YES)	(NO, NO)

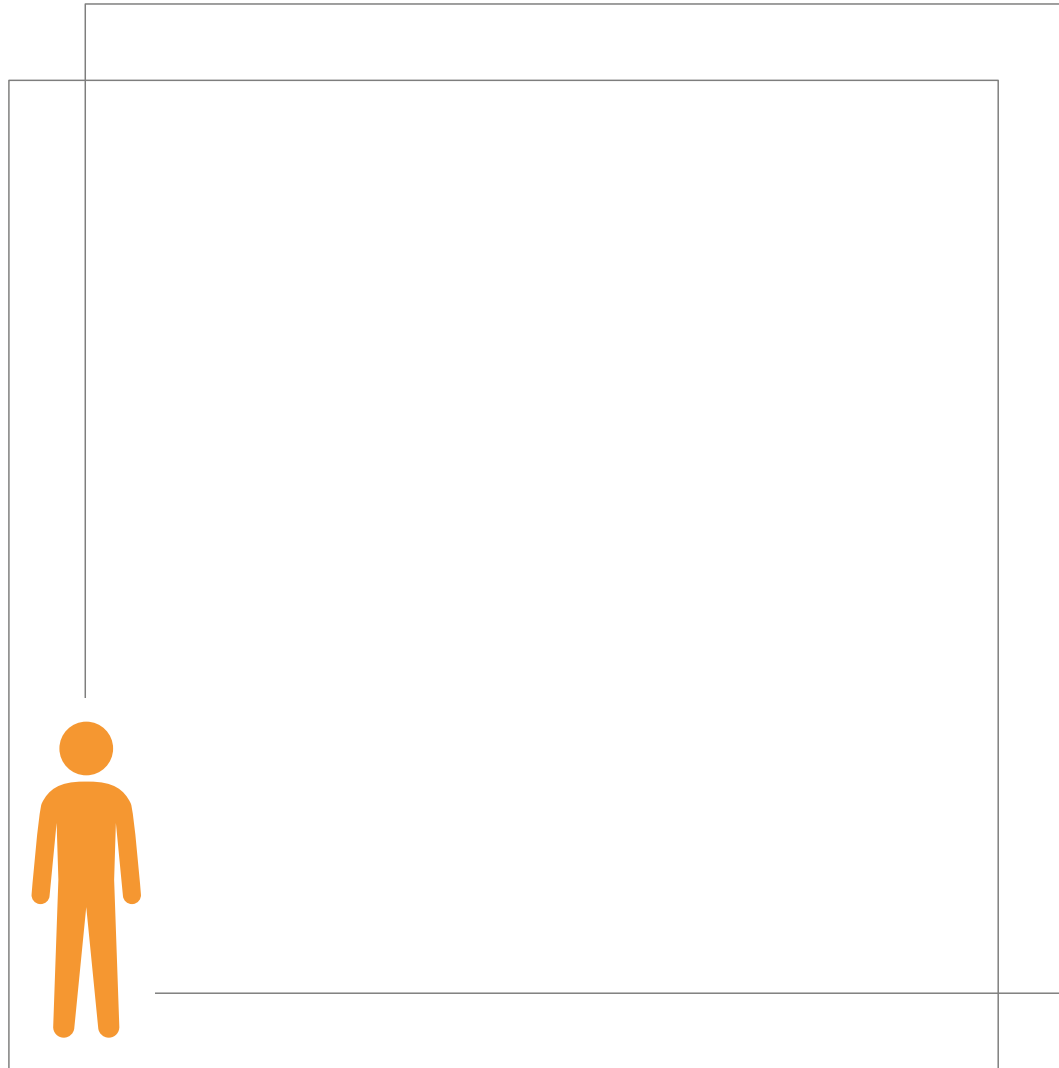
ACTIVITY 3:
2×2 TABLES TEMPLATE 2 (BEHAVIOUR)

		OTHERS: BEHAVIOUR	
		YES	NO
SELF: BEHAVIOUR	YES	(YES, YES)	(YES, NO)
	NO	(NO, YES)	(NO, NO)

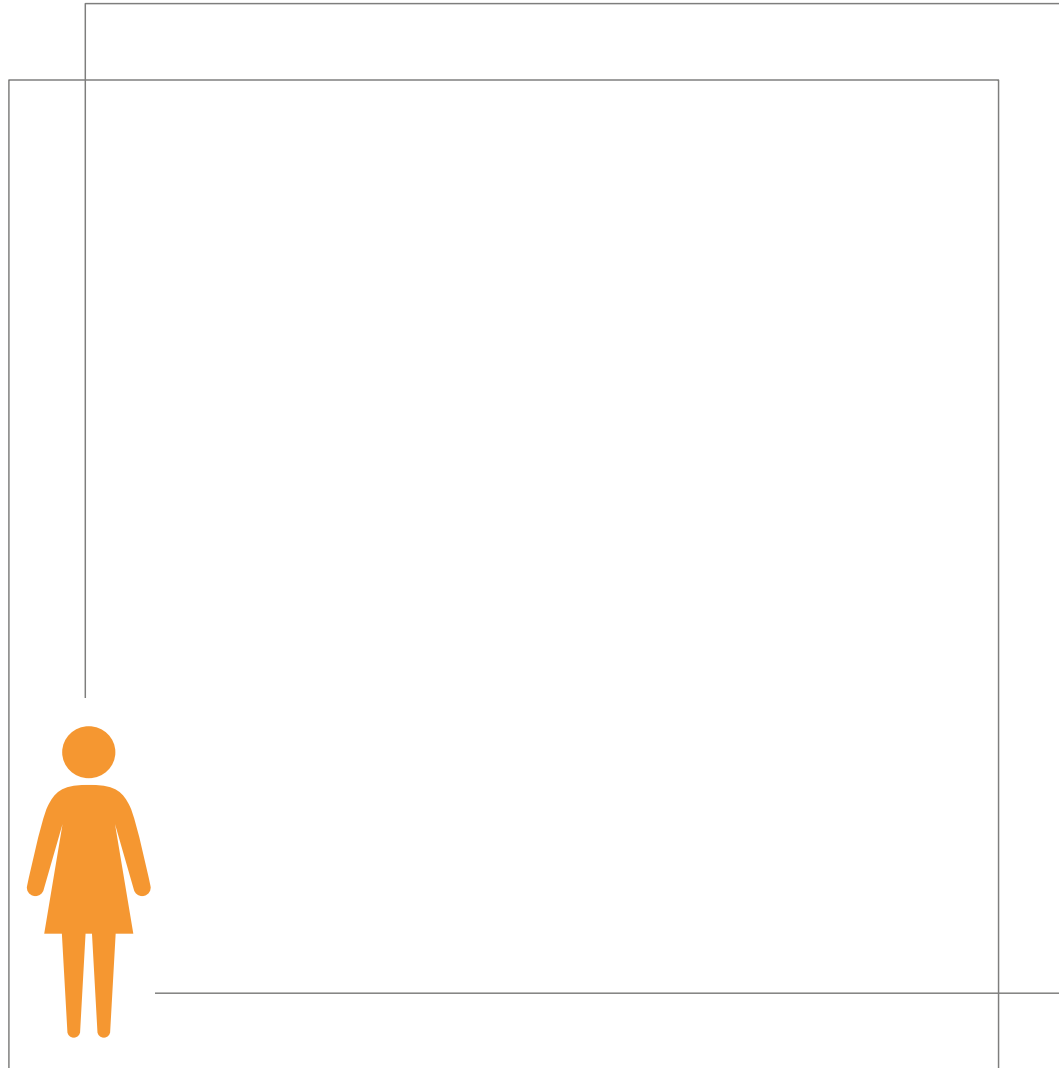
ACTIVITY 4: FREE LISTING TEMPLATE



ACTIVITY 5: GENDER BOX TEMPLATE 1 (MALE)



ACTIVITY 6: GENDER BOX TEMPLATE 2 (FEMALE)





IN-DEPTH INTERVIEW GUIDE

Note to the implementing organization

Before using this document for training data collectors (interviewers and note-takers), you will need to do the following:

1. Make sure the interview information in the introduction section below matches the information you are collecting in the structured interview at household level. GPS coordinates and household location identifiers are not necessary for in-depth interviews (IDIs).
2. If the respondent cannot write, ensure you have a note-taker who can help them with filling out the activity worksheets.
3. Make sure that any demographic information adjustments made in the structured interview questionnaire are reflected here. The IDI should collect the same demographic information as the structured questionnaire.
4. Any text highlighted and in brackets *[LIKE THIS]* indicates a place where context-specific information should be entered before using the tool. Conduct pretesting to verify whether the choices you made were appropriate or if they need revising.
5. The 'Preparation & pretesting' boxes at the end of each activity list additional steps that you need to take to prepare the tool for use, and also identify elements for which pretesting is especially important.
6. The 'Training notes' boxes at the end of each activity contain information that will be helpful for training of interviewers and note-takers. Be sure to familiarize yourself with this information prior to pretesting the activities.
7. A copy of the tool without notes is provided in a separate file. This version is intended for pretesting and facilitator training purposes.

You may delete this box before printing and sharing copies of this guide with the facilitators for training.

Note to the interviewers

The overall purpose of this IDI is to gather data for triangulation of information on what people know, feel and do, to ascertain normative factors, to collect information on social networks and support, and to consider the context – especially gender and power elements of the ACT Framework. The IDI should last approximately 60 minutes and should be interactive, engaging and empowering.

The objectives of the IDI are to:

1. Define the participant's beliefs about FGM
2. Determine the participant's support for or opposition to the continuation of FGM
3. Ascertain the participant's intent to arrange FGM for their own daughter
4. Identify perceived benefits and sanctions to participating in FGM
5. Assess the participant's agreement with the perceived consequences of FGM abandonment

6. Establish the participant's willingness to enact punishments or rewards on others for their abandonment of FGM

7. Explore the participant's sense of agency in making decisions around FGM.

Each activity begins by listing the purpose of the specific activity, the materials needed for the activity and the approximate time that will be required to complete the activity. An image of the relevant worksheet is provided in a figure at the start of the each activity, and full-size worksheet templates are attached at the end of the IDI guide. Any text you should say or questions you should ask are provided in **blue**. Each activity concludes with 'Training notes' that will help you understand and implement the activity. These notes may also include recommendations for adapting the questions for different contexts. implement the activity. These notes may also include recommendations for adapting the questions for different contexts.



INTRODUCTION

Before beginning the interview, record the following information:

	Discussion information
Name of supervisor	
Name of interviewer	
Name of note-taker	
Region	
[ADMINISTRATIVE SUBUNIT]*	
Enumeration area code	
Respondent type	
Interview date (DD-MM-YY)	
Interview start time (HH:MM)	
Interview end time (HH:MM)	
Unique respondent ID	
Informed consent (Y/N)?	



Begin the interview by introducing yourself, reviewing the purpose of the interview and reminding the participant of the key points of the informed consent (which they should have already signed during recruitment). The text below can guide you.

- **Say:** Thank you for joining this interview today! My name is _____ and I will be leading our conversation today. I also have with me my colleague _____ who will assist by taking notes.
- **Say:** We'd like to talk with you about your thoughts about female genital mutilation or FGM. We will not ask you about your own behaviour or experiences, just your opinions. The information we gather from you and other community members will help us to better understand the practice of FGM in [ENTER REGION].
- **Say:** When you were recruited for this activity, you signed a consent/assent form agreeing to participate. I want to remind you of a few things about that form. First of all, your participation is completely voluntary. You do not have to answer any question that you don't want to, and you can stop participating at any time. There will be no negative consequences if you decide to stop participating. We will be recording the discussion to help us capture your ideas but when we transcribe the session, we will remove anything you say that might identify you personally. Do you have any questions?
- **Say:** Before we begin, I need to collect a little bit of information about you.

Participant information	
No.	1
Gender (M/F)	
Age (in years)	
Marital status	
Ethnicity (multiple responses possible)	
Religion	
Education (highest level completed)	
Occupation	
Length of time at current residence (MM:YY)	



Preparation & Pretesting:

1. Make sure that any demographic information adjustments made in the structured interview questionnaire are reflected here. The IDI and FGD should collect the same demographic information as the structured questionnaire.

Somaliland
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ACTIVITY 1: “I AM...”

Purpose:

To build rapport between the interviewer and respondent and to assess the individual’s sense of agency

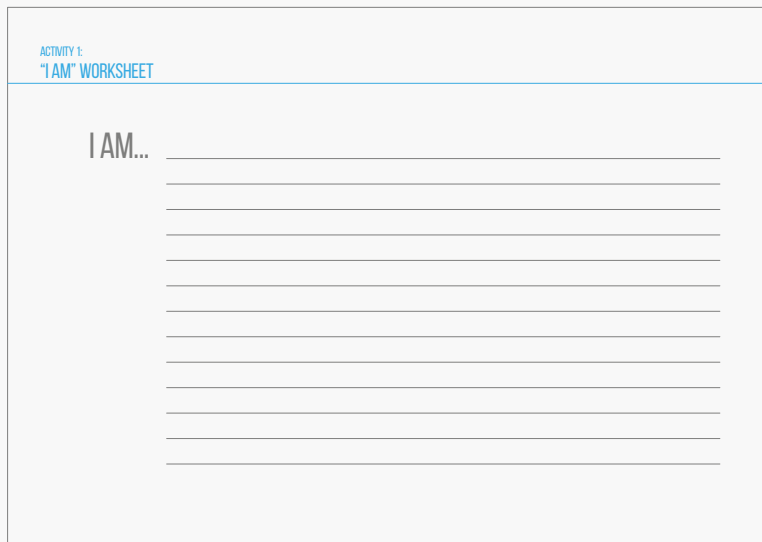
Materials:

Activity 1 worksheet (shown in *Figure 7*; use the full-size template attached at the end of the IDI guide) and writing implement

Suggested time:

About 10 minutes

Figure 7: Image of activity 1 “I am” worksheet



- **Say:** I want to start by having you describe yourself using the prompt “I am...” For example, you might say “I am funny” or “I am a student.” There are no right or wrong answers here, just tell me the first few things that come to mind.





Preparation & Pretesting:

1. Make sure the local language translation accurately reflects the phrase “I am” and allows participants to finish the sentence.
2. Depending on the context, respondents may find this activity hard to do, as not all cultures encourage self-description. Prepare some examples ahead of time that would work in your context and in the local language to illustrate this activity. Some ideas are:
 - If I were a rose, I might say: I am red, I am full of thorns, I am used as perfume, I am pretty.
 - If I were an orange, I might say: I am sweet, I am tart, I am juicy, I am full of vitamin C, I am orange in colour.
 - If I myself were filling out this activity, I would say [enter descriptive words for yourself]. If this type of example is used, be sure to make note of the words you suggested.



Training notes

1. In this activity, you will ask the individual to list words to describe themselves using the prompt “I am...” The words they choose can help us understand their sense of agency.
 - Agency is the capacity of individuals to act independently and to make their own free choices.
2. Try to have the respondent give at least five responses.
3. Encourage the respondent to keep the answers succinct (one or two words).
4. It does not matter if the responses are nouns or adjectives but ensure that the response starts with the phrase “I am...”
5. When giving examples, make sure to illustrate that both noun and adjective responses are acceptable.
 - For example, I am a student (noun) and I am funny (adjective)
6. If respondents are struggling and giving answers that start with “I like,” “I hate,” “I feel,” etc., try to guide them to use “I am” by asking them to rephrase their answer.
 - For example, if the respondent says, “I like football,” you could ask “So would you say, ‘I am a footballer’ or maybe ‘I am a football fan?’”
 - Be sure to note any responses that were prompted in this way.

ACTIVITY 2: LIFELINE

Purpose:

To learn about events and experiences that are important to the respondent, and how they are affected by FGM

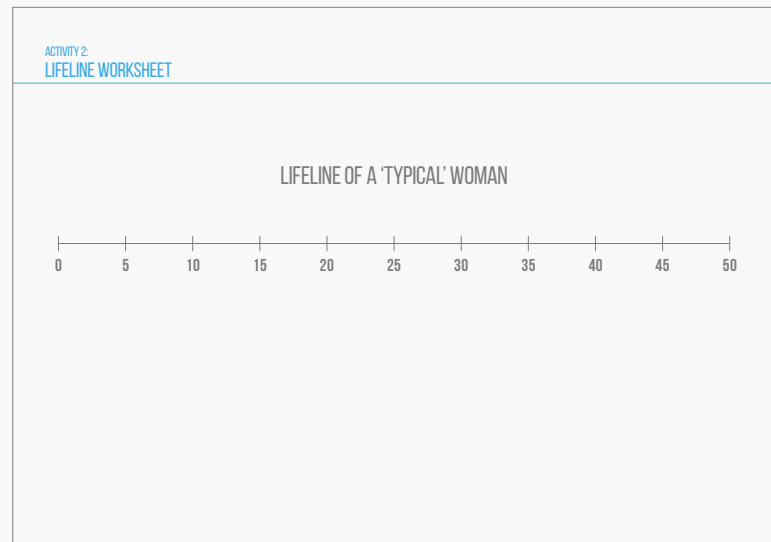
Materials:

Activity 2 worksheet (shown in *Figure 8*; use the full-size template attached at the end of the IDI guide) and a writing implement

Suggested time:

About 10 minutes

Figure 8: Image of activity 2 lifeline worksheet



- **Say:** I'd now like you to help me chart out the life of a 'typical' woman in *[ENTER REGION]*.
- **Say:** What important events or experiences does a typical woman in your community go through from birth until they reach the age of 50? These might be things that happen to her or things she does, such as achievements, interactions with people, or even a significant feeling or attitude experienced.

Allow the participant time to mark important life events on the lifeline. After the participant has listed several events across the lifeline, look to see if FGM is listed as an event, then continue with A or B accordingly.

A) If FGM has been listed, **circle** the word used for this.

- **Say:** Thinking about these events you just mentioned, would her life be different if she had not undergone FGM? How?

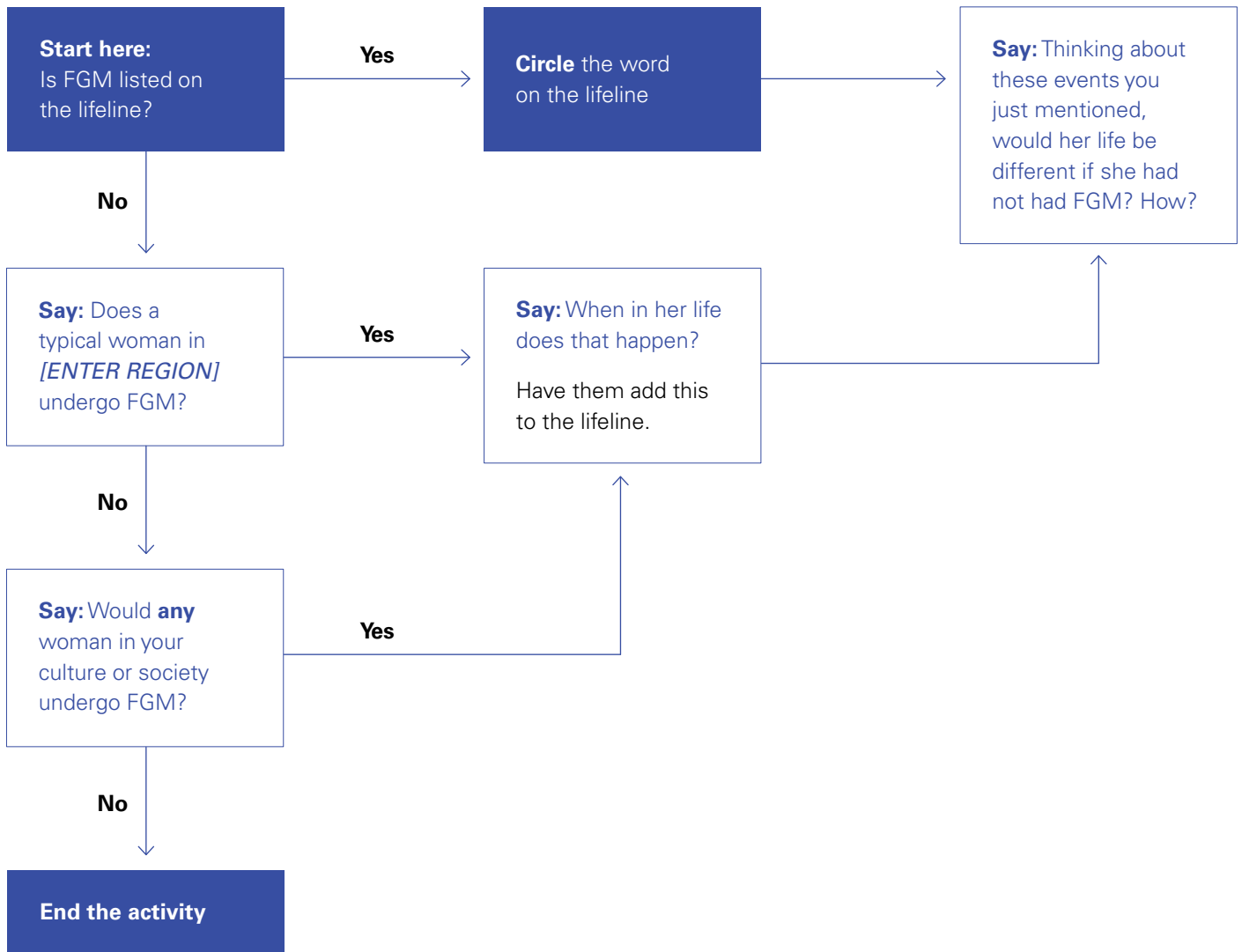
B) If FGM has NOT been listed, say: Does a typical woman in *[ENTER REGION]* undergo FGM? If Yes, **say:** When in her life does that happen?

- Have them add FGM to the lifeline at that point.
- **Say:** Thinking about these events you just mentioned, would her life be different if she had not undergone FGM? How?

If No, **say:** Would any woman in your culture or society undergo FGM?

- If No, end the activity.
- If Yes, **say:** When in her life does that happen?
 - Have them add FGM to the lifeline at that point.
- **Say:** Thinking about these events you just mentioned, would her life be different if she had not undergone FGM? How?

This flow chart illustrates the question skip pattern from the point that you check to see if the interviewee has listed FGM on the lifeline after your first question. Follow the arrows to see what to do through the end of the activity.



Egypt
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Preparation & Pretesting:

1. This activity was field-tested using a lifeline from birth until the age of 50 is reached; this was selected as the end point because age 49 (up to the 50th birthday) is the cut-off age for fertility calculations/reproductive age used by the Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Surveys (MICS). However, you can choose the age range that is most meaningful to your programme(s). For example, if FGM is not performed locally until adolescence, you may choose to start the timeline at 5 or 10 years.
2. Some 10- to 14-year-olds have found it difficult to name the age range in which important events occur. Use pretesting as an opportunity to see if respondents in this age group in your context struggle with this aspect. If so, use a blank piece of paper and let the adolescents list out the important events. Then ask which happens first, which happens next, etc., numbering the events as you go to create the lifeline. If this choice is made, be sure to train data collectors on this adaptation.
3. In pretesting, if there is difficulty understanding who is meant by “a typical woman in [ENTER REGION]” you can replace this with “a typical [ENTER NATIONALITY] woman”; e.g., “a typical Guinean woman.” However, the preference is to keep them thinking about a woman in their region or community, as opposed to the country as a whole.
4. If pretesting shows respondents don’t understand the question “Thinking about these events you just mentioned, would her life be different if she had not had FGM? How?,” then you can try rephrasing this, for example: “If we take FGM out of her life, would these other events be the same or different? How?”



Training notes

1. In this activity, you will ask the respondent to map out a lifeline of a ‘typical’ woman in their community from birth until she reaches the age of 50 years.
2. Encourage the respondent to include at least five significant events.
3. If the respondent cannot write, the note-taker should transcribe the answers for them.
4. If the respondent is having trouble coming up with ideas, you might suggest “starting school” or “getting married.”
 - Be sure to note any events that were suggested by you and not the spontaneous ideas of the respondent.
5. Use the flowchart to help guide you on the skip patterns for the probing questions.
 - Note, these questions are the same as those in the paragraph text preceding the flow chart.
6. Circling FGM on the lifeline is a way to indicate in the notes that the respondent included FGM spontaneously rather than after the prompts. Therefore, do NOT circle FGM if the respondent adds it to the lifeline after the prompting questions.
7. When asking how the woman’s life events would be different if she had not undergone FGM, many respondents answer how the woman herself would be different.
 - Make sure to also probe for how her life events would be different.
 - You can probe about specific events that they have mentioned on their lifeline, e.g., “Would she still get married?,” “Would she start school at the same time?” Be sure to note any events that were suggested by you and not the spontaneous ideas of the respondent.

ACTIVITY 3: SOCIAL NETWORK MAPPING

Purpose:

To understand the social networks of participants

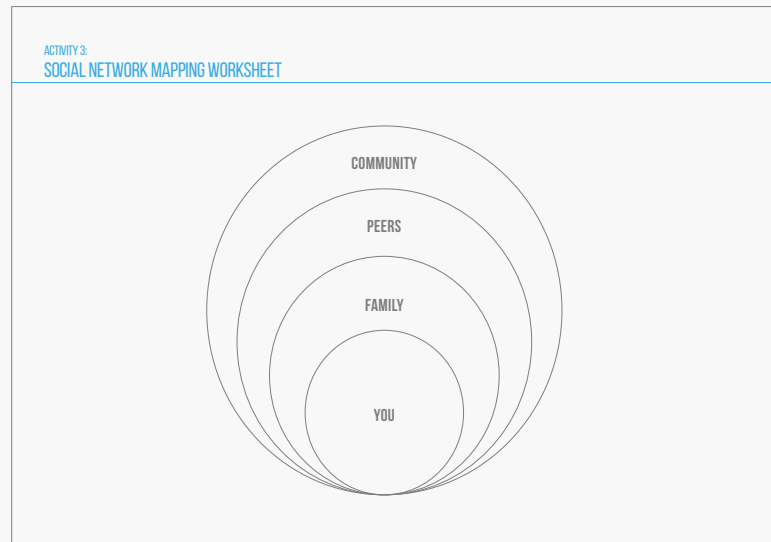
Materials:

Activity 3 worksheet (shown in *Figure 9*; use the template attached at the end of the IDI guide), a writing implement and two markers with different colours

Suggested time:

About 10 minutes

Figure 9: Image of activity 3 social network mapping worksheet



- **Say:** For our next activity, let's start by listing the people whose thoughts and opinions regarding FGM matter to you. We will write the type of person in each of these circles on this paper. Please give us the type of person – such as 'mother' or 'friend' or 'nurse' – not their name.

Give the respondent the social network map diagram and writing implement.

- **Say:** Here you are in the middle. The second circle represents the people in your family. Who are your immediate family members whose thoughts and opinions regarding FGM matter to you? Who are your immediate family members with whom you do (or would) discuss FGM?

Allow the respondent time to record their answers in the 'family' circle.

- **Say:** Who are your extended family members whose thoughts and opinions regarding FGM matter to you? Who are your extended family members with whom you do (or would) discuss FGM?

Allow the participant time to record their answers.

- **Say:** The third circle represents your peers and friends. Who are the friends and peers whose

thoughts and opinions regarding FGM matter to you? Who are your friends and peers with whom you do (or would) discuss FGM?

Allow the participant time to record their answers in the 'peers' circle.

- **Say:** The fourth circle represents your community members and local leaders. Whose thoughts and opinions regarding FGM in your community matter to you? Who are your community members and leaders with whom you do (or would) discuss FGM?

Allow the respondent time to record their answers in the 'community' circle. If necessary, explain that for this activity the word 'community' is used as a geographical designation. Decide what word works best in your context/language (use the same word selected for question E.3 of the structured interview).

Once the mapping is complete, hand the participant the two different coloured makers.

- **Say:** Let's circle in red all the people mentioned here who support FGM continuation and circle in green all the people mentioned here who support FGM abandonment.



Preparation & Pretesting:

1. Community means different things in different countries and contexts. Instructions in the structured interview questionnaire clarify that 'community' is being used as a geographical designation. The best word for 'community' in your context (such as community, village, locality, neighbourhood, etc.) should be used – whatever word was selected for use in the structured interview questionnaire should also be used here.
2. We used red markers to circle the people who support continuation and green markers to circle the people who support abandonment. The colour of the markers does not affect the activity, so pretest which colours to use to ensure that they are neutral colours without significant cultural associations.



Training notes

1. In this activity, we want respondents to create a visual of their own social networks. You will ask them to list the individuals whose thoughts and opinions about FGM matter to them at the different levels of the social ecological model (SEM): family, peers and friends, and community.
 2. It is important to start with the self and then move through each level with increasing social distance.
 3. As the respondent lists individuals, make sure they do not write names but the relationship with that individual.
 - For example: mother, sister, friend, neighbour, village chief, etc. If they give a name, ask what that person's relationship is and have them record it next to the name.
 4. Allow them to circle the supporters of FGM continuation in one colour and the supporters of FGM abandonment in another colour.
 5. Respondents may say that they do not know whether these people approve or disapprove of the abandonment of FGM. Tell them it's fine if they do not know for sure, they should just make their best guess.
 6. Make sure that the social network map is visible to the respondent as they complete the next activity – Activity 4: Vignettes/complete the story

ACTIVITY 4: VIGNETTES/COMPLETE THE STORY

Purpose:

To determine if a participant intends to have their daughter undergo FGM and if they support the continuation of FGM and to uncover some of the perceived sanctions and benefits of practising and not practising FGM

Materials:

Activity 4 worksheet (shown in *Figure 10*; use the full-size template attached at the end of the IDI guide) and a writing implement

Suggested time:

About 30 minutes

Figure 10: Image of activity 4 vignettes worksheet

Make sure the social network map completed in *Activity 3* is visible to the respondent, then start this activity with an example.



- **Say:** Next, we’re going to do an activity called ‘Complete the story’. I will tell you a little bit of the story and then you can help me expand the story by answering my questions. Just tell me the first thing that comes to your mind. Let’s start with an example. *[ENTER NAME]*, an employee at the local youth recreational centre, walked through the park and saw something glimmer. What happens next? What would *[ENTER NAME]* do? What would happen next? What would you do in this situation?
- **Say:** Now we are going to move from the example to a different story. I am going to tell you a story about a young *[ENTER REGION]* family making decisions around FGM and I would like you to help me fill in the details about what might happen based on a typical family in your community. As always, there are no right or wrong answers and you can skip any questions that you don’t feel comfortable answering.



STORY, PART ONE

- **Say:** *[ENTER NAME]*, a mother in *[ENTER REGION]*, and her husband, *[ENTER NAME]*, are deciding whether their *[ENTER TYPICAL AGE FOR FGM IN THE REGION]*-year-old daughter should undergo FGM. *[ENTER MOTHER'S NAME]* is not sure what to do. How do you think *[ENTER MOTHER'S NAME]* feels and why?

Respondent's answer: "She wants her daughter to undergo FGM"

Respondent's answer: "She does NOT want her daughter to undergo FGM"

Say: What if *[ENTER MOTHER'S NAME]* did not want her daughter to undergo FGM, how would she feel and why?

Say: What if *[ENTER MOTHER'S NAME]* wanted her daughter to undergo FGM, how would she feel and why?

- **Say:** Who will make the final decision in *[ENTER MOTHER'S NAME]*'s family?
- **Say:** How would you feel if you were in *[ENTER MOTHER'S NAME]*'s situation?
- **Say:** What advice would you give *[ENTER MOTHER'S NAME]*?
- **Say:** What advice would others give *[ENTER MOTHER'S NAME]*? Would they, for example, recommend that her daughter should have FGM or not?
 - **Probe:** What advice would family members (immediate and extended family) give?
 - **Probe:** What advice would peers, friends and neighbours give?
 - **Probe:** What advice would community leaders (religious leader, marriage registrar) give?



STORY, PART TWO

- **Say:** Let's suppose now that *[ENTER MOTHER'S NAME]* and *[ENTER FATHER'S NAME]* decide not to arrange for their daughter to undergo FGM, even though most people in their community practise FGM. People in their community have noticed.
- **Say:** What positive social effects (rewards, benefits) does *[ENTER MOTHER'S NAME]* and *[ENTER FATHER'S NAME]*'s decision not to arrange FGM for their daughter have on them and their daughter *[ENTER DAUGHTER'S NAME]*?
- **Say:** What negative social effects (sanctions, punishments) does *[ENTER MOTHER'S NAME]* and *[ENTER FATHER'S NAME]*'s decision not to arrange FGM for their daughter have on them and their daughter *[ENTER DAUGHTER'S NAME]*?
- **Say:** What would others do if *[ENTER MOTHER'S NAME]* and *[ENTER FATHER'S NAME]* decide not to arrange for their daughter to undergo FGM?
 - **Probe:** Family members (immediate and extended family)
 - **Probe:** Peers, friends, neighbours
 - **Probe:** Community leaders (religious leader, village chief, marriage registrar)

STORY, PART THREE

- **Say:** Now, I'd like you to picture in your mind that everyone in *[ENTER MOTHER'S NAME]* and *[ENTER FATHER'S NAME]*'s community has decided to abandon FGM. So, this has become a community where FGM is no longer practiced. I'm going to ask you a series of questions to describe this community. Take a moment to imagine this community and that you are in this community with *[ENTER MOTHER'S NAME]* and *[ENTER FATHER'S NAME]*. Feel free to close your eyes if that helps you imagine.
- Give the respondent the worksheet for Activity 4 so that they can record their answers.
- **Say:** What do you think about this community?
 - **Say:** What do others in the community think?
 - **Say:** How do you feel about this community?
 - **Say:** How do others in the community feel?
 - **Say:** What do you do in this community?
 - **Say:** What do others do in this community?
 - **Say:** Is there anything else about this community that you would like to describe to me?
 - **Say:** What do you think the challenges or obstacles are in your own community to creating such an FGM-free community?
 - **Say:** What are the things existing in your own community that can help make it FGM free?



Preparation & Pretesting:

1. The initial story example (the recreational centre employee) should be pretested for cultural relevance.
2. The name of the community needs to be determined and pretested prior to tool finalization.
3. Names of the fictional characters for the example (the employee at the recreational centre) and the vignettes (a mother, a father and daughter) should be decided and pretested to ensure they are not biased towards a specific religious or ethnic group.
4. The purpose of Part Three of this activity is to identify the respondent's knowledge, attitudes and practices (what they know, feel, do). Pay special attention to the way in which the questions are asked in Part Three to make sure they are capturing 'know, feel, do'. For example, you may need to ask, "What does your head tell you?" instead of just "What do you think?," and "What does your heart tell you?" instead of just "How do you feel?"
5. For Part Three of this activity, if respondents struggle with imagining a community, have them describe their own community and then explain how it is same and/or different from a community that has abandoned FGM or vice versa.

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Training notes

1. In this activity, you will read out a fictional story about a typical **[ENTER NATIONALITY]** family. You will start with a brief example. Then you will read out Part One and start a discussion using the questions provided. Next, you will read out Part Two of the story and continue the discussion using the questions provided. Finally, you will go through Part Three, which is a visualization activity.
 2. Give the respondent ample time to answer each question.
 3. The story should be read as many times as needed.
 4. The questions vary between open- and closed-ended, but both can be probed.
 - a. Probing questions include asking the respondent how they feels the character would or should act and whether the characters behave in an acceptable way.
 - b. Asking “Why?” as a follow up question to their responses can help respondents become more engaged with each scenario.
 5. The purpose of starting with an example is to help them understand the type of conversation. This has been shown to be helpful to respondents.
 - a. Keep the example to just a few minutes and make sure to clarify that you are moving from an example to a different story that you want them to think about. In past interviews, some participants thought the main story a continuation from the example and were trying to connect the two.
 6. It is not necessary to ‘finish’ the story or arrive at some final ending. The purpose is to get the respondent thinking about answering the questions, not to create a narrative that can be followed from start to finish.
 7. Throughout the activity, participants may struggle to extrapolate beyond their own family. In this case, provide specific examples of who you mean when you say community leaders (religious leader, village chief, marriage registrar, etc.) and refer them back to their social network map from Activity 3.
 8. In Part One, when asking, “What advice would others give the mother?” the probes are to guide the respondent.
 - a. The participant might say that different people would give different advice. So, you can point them back to their social network map and ask about the three levels separately.
 - b. If they answer generally, you can follow up with, would everyone give this advice? Would her family/friends/ community leaders give different advice? Refer them back to the social network map to help them think through their responses.
9. In Part Two, positive social effects can be worded as rewards, benefits or positive consequences; negative social effects can also be called sanctions, punishments or negative consequences. Pay special attention to the word choice during pretesting, especially when translating the words to convey the ideas. We are trying to get at social effects.
 - a. For example, a positive social effect may be that the mother is seen as a leader for change or treated with more respect.
 - b. A negative social effect might be that no one wants to marry the daughter because she has not undergone FGM, or maybe the family isn’t allowed to attend religious gatherings with their community any longer.
10. The challenges/obstacles or supporting/motivating factors to creating an FGM-free community can be physical things, characteristics of people, systems and structures, etc.
 - a. For example, a challenge might be that people don’t like to talk openly about FGM or maybe that there is a belief that girls can’t get married unless they have undergone FGM, or perhaps people in the community are generally resistant to change.
 - b. A supporting factor might be that the religious leaders in their community have spoken out against FGM or that there are a lot of community health workers who could be used to spread information or that most people have access to the Internet or a cell phone.
 - c. You can give examples if necessary, but let the respondent try for a while to come up with answers first. Also note if they give an answer that was one of the examples you provided.

CLOSING

Purpose:

To allow the participant to express any final thoughts and conclude the interview

Materials:

None

Suggested time:

About 5 minutes



- **Say:** : Before we end this interview, is there anything else that you want to tell me, or any questions you want to ask? Is there anything that we should have talked about but didn't talk about?
- **Say:** Thank you very much for your participation today. I would like to remind you that the discussion will be kept confidential.



Kenya
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Training notes

1. This is a chance for the participant to add any thoughts or feelings that may be lingering from the discussion or to ask questions.
2. After you've given them time to make any last comments, be sure to thank them and remind them that we will keep their responses confidential.
3. Make sure they know who to contact if they have any further questions (they should have the contact information postcard).
4. Be sure to collect and take the charts/worksheets (or photographs of them) with you as documentation of the interview.

IN-DEPTH INTERVIEW

MATERIALS CHECKLIST

This is a checklist of all of the materials needed to facilitate and complete all IDI activities.

- Participant sign-in sheet
- Confirmation of consent/assent conducted prior to Activity 1
- Extra consent forms
- Extra research information postcards
- IDI facilitator's guides for facilitator and note-taker
- "I am..." worksheet (Activity 1)
- Lifeline worksheet (Activity 2)
- Social network mapping worksheet (Activity 3)
- Vignettes worksheet (Activity 4)
- Writing implements for participant, note-taker and facilitator
- Extra paper
- Markers for activities, at least two different colours [LIST THE COLOURS REQUIRED]
- Recording device
- Extra batteries

Worksheets for use in the activities can be found on the following pages.



ACTIVITY 2: LIFELINE WORKSHEET

LIFELINE OF A 'TYPICAL' WOMAN



ACTIVITY 3: SOCIAL NETWORK MAPPING WORKSHEET



ACTIVITY 4: VIGNETTES WORKSHEET



YOU THINK



YOU FEEL



YOU DO

OTHERS THINK

OTHERS FEEL

OTHERS DO



