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## **APPENDICES**

## APPENDIX A

### Questionnaire

**Topic : Contraceptive usage among Myanmar migrant women of reproductive age in Phang Nga Province**

Identity No:

Interviewer: -----

Instruction: Please fill color with pencil in  and fill in as appropriate.

#### Part I: Sociodemographic characteristics

1. How old are you now?  
----- Years.

2. Marital status

1.  married

2.  separated

3.  co-habit marriage

4.  divorced

5.  single

6.  widowed

7.  others (specify)-----

3. How did you get married?

1.  culturally marriage  
marriage

2.  officially marriage

3.  both officially and culturally

4. Age at first marriage or first sexual experience :  
----- Years

5. Religion

1.  Buddhist

2.  Muslim

3.  Christian

4.  Others (specify) -----

6. Education

1.  never go to school

2.  primary education (1-4 years of school)

3.  secondary education (5-8 years of school)

4.  high school level (9-10 years of school)

5.  higher education (university)

7. Occupation

1.  housewife

2.  rubber plantation worker

4.  fishery worker

5.  construction worker

3.  general worker                      6.  others (please specify) -----
8. Family income per month (Total family income per month)  
----- Baht/per month
9. How long have you been living in Thailand?  
----- Months/Years
10. Current migrant status in Thailand  
 Registered  
 Unregistered
11. What is your Thai language skill?  
1.  Can not communicate at all  
2.  Can communicate basically  
3.  Can speak Thai language fluently but can not read and write  
4.  Fluently in Thai language
12. Have you ever been pregnant before?  
1.  Yes, ----- times                      2.  No  
If yes, go to Q 13                                      If no, go to Part II
13. How many times have you got pregnant until now?  
----- times
14. Have you ever had an abortion?  
1.  Yes, ----- times                      2.  No
15. Have you ever had your children died?  
1.  Yes, ----- children                      2.  No
16. How many of your children are still alive now?  
----- children.
17. How old is your last child now?  
----- months/years
18. Are you breast feeding to your last child now?  
1.  Yes                                      2.  No  
If yes, 1.  exclusive breast feeding  
            2.  not exclusive breast feeding



26. What was the most important reason of not currently using contraception?

- |   |  |
|---|--|
| 1. <input type="checkbox"/> want more children  | 6. <input type="checkbox"/> husband away           |
| 2. <input type="checkbox"/> economic condition  | 7. <input type="checkbox"/> husband objects        |
| 3. <input type="checkbox"/> health reasons      | 8. <input type="checkbox"/> religious reason       |
| 4. <input type="checkbox"/> fear side effects   | 9. <input type="checkbox"/> others (specify) ----- |
| 5. <input type="checkbox"/> service unavailable |  |

27. Does your husband / partner discuss about family planning with you?

- |                                 |                                |
|---------------------------------|--------------------------------|
| 1. <input type="checkbox"/> Yes | 2. <input type="checkbox"/> No |
|---------------------------------|--------------------------------|

28. Who decide you to use contraception?

- |  |  |
|--|--|
| 1. <input type="checkbox"/> Yourself     | 3. <input type="checkbox"/> Your husband/partner |
| 2. <input type="checkbox"/> Both partner | 4. <input type="checkbox"/> Others -----         |

29. Who suggest you for thinking about to use contraceptives?

- |  |  |
|--|--|
| 1. <input type="checkbox"/> Your husband/partner | 4. <input type="checkbox"/> Family member        |
| 2. <input type="checkbox"/> Health worker        | 5. <input type="checkbox"/> Other (specify)----- |
| 3. <input type="checkbox"/> Friends              |  |

### Part III: Knowledge about contraceptive methods

30. Have you ever heard of any contraceptive methods?

- |   |  |
|---|--|
| 1. <input type="checkbox"/> Yes, go to Q 31 | 2. <input type="checkbox"/> No, go to Q 33 |
|---|--|

31. Which kind of contraceptive methods have you ever heard? It can be answer more than one.

(Please check in the following boxes by interviewer according to the answers from the respondents)

Methods	Yes	No
Injectables		
Oral pills		
Norplant implants		
IUD		
Male Condom		
Female condom		
Female sterilization		
Male sterilization		
Traditional methods such as withdrawal,		

abstinence, fertility awareness or calendar method		
--	--	--

## 32. Knowledge about each method.

No.	Statement	True	False	Not sure
1	Women can have a loop or coil (IUD) placed inside them to prevent pregnancy by doctor or nurse.			
2*	IUD method can protect against sexually transmitted diseases (STDs) including HIV/AIDS.			
3	If having IUD more than 3 years will cause cervical cancer.			
4	Women who take oral contraceptive (pill) should take a pill everyday to avoid becoming pregnant.			
5	Oral pill can cause dizziness and nausea.			
6*	Using oral contraceptive pill can protect against sexually transmitted diseases (STDs) including HIV/AIDS.			
7*	Oral pill gives more chance to have cervical cancer.			
8	Depo injection should be taken once in 3 months to prevent pregnancy.			
9*	Injection can cause cessation of breast milk.			
10*	Vomiting is the side effect of contraceptive injection.			
11	Women can have children again by stopping to take pill or injection.			
12	If the women do not want the children anymore, sterilization should be used.			
13	Using condom (male) properly can prevent the women becoming pregnant.			
14	Using condom properly can prevent from sexually transmitted diseases (STDs) including HIV/AIDS			
15	Condom can break during using.			
16*	Male sterilization can reduce sexual desire and it can cause weakness to men.			
17	Women can not get pregnancy when they have intercourse 7 days before and 7 days after their menstrual period.			
18	Using contraceptives can reduce unwanted pregnancy and unintended pregnancy.			

## 33. Where are the best place/ places to obtain information about contraceptive methods?

(You can select more than one)

1.  family planning clinics      5.  friends

2.  health center  
 3.  TV, news  
 4.  home, family member  
 6.  drug store  
 7.  others (specify) -----

#### Part IV: Accessibility to family planning services

34. Where did you usually get contraceptive at the time you are using?

1.  from drug store  
 2.  from government clinic  
 3.  from NGO  
 4.  from private clinic  
 5.  others (specify) -----

35. How do you go to family planning service?

1.  walking  
 2.  public vehicle  
 3.  private vehicle  
 4.  ask someone to buy  
 5.  other (specify)-----

36. Is it convenience for you to go to family planning service?

1.  Yes  
 2.  No  
 3.  Don't know

37. How far away from your home to family planning service?

1.  too far  
 2.  not too far  
 3.  near

38. How much does it cost of the contraceptive that you are currently using?

Methods	No cost	Cost (per month/per dose)
Injectable		
Oral pills		
Condoms (male)		
Diaphragm		
Male sterilization		
Female sterilization		
Norplant implant		
IUD		
Traditional methods (specify)----- -----		

39. How do you think about the cost?

1.  affordable  
 2.  not affordable





	some knowledge about using contraception.					
7. *	I believe that women should stop using Depo injection if she has no menstrual bleeding for a long time (amenorrhoea).					
8.	Discussion on using contraceptive is not ashamed among couples.					
9. *	IUD method disturbs sexual intercourse.					

“ Thank you very much for taking time to answer ”

**APPENDIX B**  
**Administration Cost**

No	Activities	Unit	Price (baht)	Unit (number)	Total Budget (Baht)
1.	Pre-testing - Photocopy - Stationery	Quest. Set	7 200/set	30 1	210 200
2	Data Collection - Photocopy Quest. - Souvenir for respondent - Interviewers per diem - Transportation cost - Data Processing	Quest. Set Person Trip/day Person	0.5/page 350/Set 300/p/d 300/p/d 200/p/d	7 x 350 10 2 pr x 14day 2 pr x 14day 2 pr x 14day	1,225 3,500 8,400 8,400 5,600
	DATA COLLECTING PROCESS			SUBTOTAL	27,535
3	Document Printing - Paper + Printing - Photocopy (exam+final submit) - Stationery - Binding Paper (exam) - Binding Paper (submit)	Page Page Set Set Set	5/page 0.5/page 200/set 150/set 200/set	800 pages 12 x 400 1 set 6 set 6 set	4,000 2,400 200 900 1,200
	THESIS DOCUMENT PROCESS			SUBTOTAL	8,700
				GRAND TOTAL	36,235

# APPENDIX C

## Time Schedule

	Activities	November				December				January				February				March				April				May			
		1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
1	Writing proposal																												
2	Submit first draft																												
3	Revise first draft																												
4	Submit for proposal exam																												
5	Proposal exam																												
6	Revise proposal																												
7	Pretest questionnaire																												
8	Revise questionnaire																												
9	Conduct structure interview																												
10	Data management																												
11	Data analysis																												
12	Report writing																												
13	Submit for final defense																												
14	Thesis exam																												
15	Revision																												
16	Submit final product																												

## **APPENDIX D**

### **Informed Consent Form**

I have been fully explained of the purpose and importance of this survey. I fully understand and have confidence that the information I give will be used only for the purpose of this study. I participate voluntarily in this study.

Signature

## CURRICULUM VITAE

Name : Ms. Htoo Htoo Kyaw Soe

Date of birth : 23<sup>rd</sup> June 1979

Education : M.B.B.S  
Graduated from Institute of Medicine 1, Yangon,  
Myanmar in the year 2005

Work Experience : November 2005 – October 2006  
- Worked in own private clinic at suburb in  
Yangon

October 2005 – March 2007  
- Worked in U Hla Din and Sons Co., Ltd.  
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