

Pregnancy Outcome (English)

| Variable Name | Question Text | Saved Value | | | | | | | | | |
|-------------------------|----------------------------|---|--|-----|--------------|-----|----------------|-----|-------------|-----|----------|
| deviceId | Hidden from user | Device ID (IMEI, Wi-Fi MAC, Android ID) | | | | | | | | | |
| meta | Hidden from user | | | | | | | | | | |
| instanceID | Hidden from user | | | | | | | | | | |
| processedByMirth | Hidden from user | | | | | | | | | | |
| start | Hidden from user | | | | | | | | | | |
| motherId | Mother Id | User entered text | | | | | | | | | |
| fatherId | Father Id | User entered text | | | | | | | | | |
| visitId | Visit Id | User entered text | | | | | | | | | |
| fieldWorkerId | Field Worker Id | User entered text | | | | | | | | | |
| nboutcomes | Hidden from user | | | | | | | | | | |
| partialDate | Partial Date | <table><tr><td>1</td><td>Exact</td></tr><tr><td>2</td><td>Approximate</td></tr></table> | | 1 | Exact | 2 | Approximate | | | | |
| 1 | Exact | | | | | | | | | | |
| 2 | Approximate | | | | | | | | | | |
| outcomes | Hidden from user | | | | | | | | | | |
| outcomeType | Outcome Type | <table><tr><td>LBR</td><td>Live Birth</td></tr><tr><td>SBR</td><td>Still Birth</td></tr><tr><td>MIS</td><td>Miscarriage</td></tr><tr><td>ABT</td><td>Abortion</td></tr></table> | | LBR | Live Birth | SBR | Still Birth | MIS | Miscarriage | ABT | Abortion |
| LBR | Live Birth | | | | | | | | | | |
| SBR | Still Birth | | | | | | | | | | |
| MIS | Miscarriage | | | | | | | | | | |
| ABT | Abortion | | | | | | | | | | |
| childId | Child Id | User entered text | | | | | | | | | |
| socialGroupId | Social Group Id | User entered text | | | | | | | | | |
| firstName | First Name | User entered text | | | | | | | | | |
| middleName | Middle Name | User entered text | | | | | | | | | |
| lastName | Last Name | User entered text | | | | | | | | | |
| gender | Gender | <table><tr><td>M</td><td>Male</td></tr><tr><td>F</td><td>Female</td></tr></table> | | M | Male | F | Female | | | | |
| M | Male | | | | | | | | | | |
| F | Female | | | | | | | | | | |
| relationshipToGroupHead | Relationship to Group Head | <table><tr><td>2</td><td>Son/Daughter</td></tr><tr><td>3</td><td>Brother/Sister</td></tr><tr><td></td><td></td></tr></table> | | 2 | Son/Daughter | 3 | Brother/Sister | | | | |
| 2 | Son/Daughter | | | | | | | | | | |
| 3 | Brother/Sister | | | | | | | | | | |
| | | | | | | | | | | | |

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|------------------------------------|---|---|--------------|--------------|---------------------|---------------------|-----------|------------------|------|------------|-------|-------|
| | | <table> <tr> <td>5</td><td>Grandchild</td></tr> <tr> <td>6</td><td>Not Related</td></tr> <tr> <td>7</td><td>Other Relative</td></tr> <tr> <td>8</td><td>Don't Know</td></tr> </table> | 5 | Grandchild | 6 | Not Related | 7 | Other Relative | 8 | Don't Know | | |
| 5 | Grandchild | | | | | | | | | | | |
| 6 | Not Related | | | | | | | | | | | |
| 7 | Other Relative | | | | | | | | | | | |
| 8 | Don't Know | | | | | | | | | | | |
| ordinalPosition | What is the ordinal position of this child? | User entered integer | | | | | | | | | | |
| birthingPlace | Where did the birthing take place? | <table> <tr> <td>HOME</td><td>HOME</td></tr> <tr> <td>HOSPITAL</td><td>HOSPITAL</td></tr> <tr> <td>OTHER</td><td>OTHER</td></tr> </table> | HOME | HOME | HOSPITAL | HOSPITAL | OTHER | OTHER | | | | |
| HOME | HOME | | | | | | | | | | | |
| HOSPITAL | HOSPITAL | | | | | | | | | | | |
| OTHER | OTHER | | | | | | | | | | | |
| birthingPlaceOther | Where did the birthing take place (other)? | User entered text | | | | | | | | | | |
| birthingAssistant | Who assisted you in the birthing process? | <table> <tr> <td>NURSE/DOCTOR</td><td>Nurse/Doctor</td></tr> <tr> <td>TRADITIONAL_MIDWIFE</td><td>Traditional Midwife</td></tr> <tr> <td>NEIGHBOUR</td><td>Neighbour</td></tr> <tr> <td>NONE</td><td>No one</td></tr> <tr> <td>OTHER</td><td>Other</td></tr> </table> | NURSE/DOCTOR | Nurse/Doctor | TRADITIONAL_MIDWIFE | Traditional Midwife | NEIGHBOUR | Neighbour | NONE | No one | OTHER | Other |
| NURSE/DOCTOR | Nurse/Doctor | | | | | | | | | | | |
| TRADITIONAL_MIDWIFE | Traditional Midwife | | | | | | | | | | | |
| NEIGHBOUR | Neighbour | | | | | | | | | | | |
| NONE | No one | | | | | | | | | | | |
| OTHER | Other | | | | | | | | | | | |
| birthingAssistantOther | Who assisted you in the birthing process (other)? | User entered text | | | | | | | | | | |
| hoursOrDaysInHospital | Where you hospitalized for hours or a day/s? | <table> <tr> <td>HOURS</td><td>Hours</td></tr> <tr> <td>DAYS</td><td>Day/s</td></tr> </table> | HOURS | Hours | DAYS | Day/s | | | | | | |
| HOURS | Hours | | | | | | | | | | | |
| DAYS | Day/s | | | | | | | | | | | |
| hoursInHospital | How many hours after giving birth were you allowed back home? | User entered integer | | | | | | | | | | |
| daysInHospital | How many days after giving birth were you allowed back home? | User entered integer | | | | | | | | | | |
| hoursOrDaysBefore1stPostnatalVisit | Did it take hours or a day/days before taking your child/children for the first clinic visit? | <table> <tr> <td>HOURS</td><td>Hours</td></tr> <tr> <td>DAYS</td><td>Day/s</td></tr> <tr> <td>NOT_LBR</td><td>Not a live birth</td></tr> </table> | HOURS | Hours | DAYS | Day/s | NOT_LBR | Not a live birth | | | | |
| HOURS | Hours | | | | | | | | | | | |
| DAYS | Day/s | | | | | | | | | | | |
| NOT_LBR | Not a live birth | | | | | | | | | | | |
| hoursBefore1stPostnatalVisit | How many hours did it take before taking your child/children for their first clinic visit? | User entered integer | | | | | | | | | | |
| daysBefore1stPostnatalVisit | How many days did it take before taking your child/children for their first clinic visit? | User entered integer | | | | | | | | | | |
| | | <table> <tr> <td></td><td></td></tr> </table> | | | | | | | | | | |
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|--------------------------------|--|------------------------|-----------|
| caesarianOrNatural | Was it a caesarian or natural birth? | CAESARIAN | Caesarean |
| | | NATURAL | Natural |
| totalNumberChildrenStillLiving | Of all the children you have had, how many are still living? | User entered integer | |
| attendedANC | Did you attend ANC clinics during your pregnancy? | YES | Yes |
| | | NO | No |
| numberOfANCAAttendances | How many times did you attend ANC clinic? | User entered integer | |
| recordedDate | Outcome Date | User selected date | |
| end | Hidden from user | Timestamp of form save | |