HOUSEHOLD INFORMATION PANEL	HH

HH1. Cluster number: ___ ___ ___	**HH2**. Household number: ___ ___
HH3. Interviewer's name and number: Name _____ ___ ___	**HH4**. Supervisor's name and number: Name_____ ___ ___
HH5. Day / Month / Year of interview: ___ ___ /___ ___ / 2015	**HH7**. Region: Corozal .... 1 Orange Walk .... 2 Belize (Excluding Belize City South Side)........ 3 Belize City South Side.................................... 4 Cayo .... 5 Stann Creek .... 6 Toledo 7
HH6. Area: Urban ....1 Rural 2	

WE ARE FROM THE STATISTICAL INSTITUTE OF BELIZE. WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THIS INTERVIEW WILL TAKE ABOUT 25 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL.

MAY I START NOW?

☐ *Yes, permission is given ⇒ Go to HH18 to record the time and then begin the interview.*

☐ *No, permission is not given ⇒ Circle 04 in HH9. Discuss this result with your supervisor.*

HH9. Result of household interview:
Completed 01
No household member or no competent respondent at home at time of visit............................. 02
Entire household absent for extended period of time 03
Refused.. 04
Dwelling vacant / Address not a dwelling... 05
Dwelling destroyed.. 06
Dwelling not found 07
Other (*specify*) _____ 96

After the household questionnaire has been completed, fill in the following information:	
HH10. Respondent to Household Questionnaire: Name _____ Line No ___ ___	
HH11. Total number of household members: ___ ___	*After all questionnaires for the household have been completed, fill in the following information:*
HH12. Number of women age 15-49 years: ___ ___	**HH13**. Number of women's questionnaires completed: ___ ___
HH13A. Number of men age 15-49 years: ___ ___	**HH13B**. Number of men's questionnaires completed: ___ ___
HH14. Number of children under age 5: ___ ___	**HH15**. Number of under-5 questionnaires completed: ___ ___

<table>
<tr><td colspan="2">HH18.Record the time
Hour...............__ __
Minutes...........__ __
am/pm ....__ m</td><td colspan="16">LIST OF HOUSEHOLD MEMBERS
First, please tell me the name of each person who usually lives here, that is, persons who sleep at least 4 nights of the week and share at least 1 daily meal. Please start with the head of the household. List the head of the household in line 01. List all household members (HL2), their relationship to the household head (HL3), and their sex (HL4) Then ask: Are there any others who live here, even if they are not at home now? These may include children in school or adults at work. If yes, complete listing for questions HL2-HL4. Then, ask questions starting with HL5 for each person at a time.
Use an additional questionnaire if all rows in the List of Household Members have been used.</td><td>HL</td></tr>
</table>

							For women age 15-49	For men age 15-49	For children age 0-4	For children age 0-17 years						For Children age 0-14
HL1. Line no.	**HL2.** Name	**HL3.** What is the relationship of (name) to the head of household?	**HL4.** Is (name) male or female?		**HL5.** What is (name)'s date of birth?	**HL6.** How old is (name)?	**HL7.** Circle line no. if woman age 15-49	**HL7A.** Circle line no. if man age 15-49	**HL7B.** Circle line no. if child age 0-4	**HL11.** Is (name)'s natural mother alive?	**HL12.** Does (name)'s natural mother live in this house-hold?	**HL12A.** Where does (name)'s natural mother live?	**HL13.** Is (name)'s natural father alive?	**HL14.** Does (name)'s natural father live in this household?	**HL14A.** Where does (name)'s natural father live?	**HL15.** Record line no. of mother from HL12 if indicated.
					98 DK / 9998 DK	Record in completed years. If age is 95 or above, record '95'.				1 Yes 2 No ⇒HL13 8 DK ⇒HL13	If "Yes", record line no. of mother and go to HL13. If "No", record 00.	1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	1 Yes 2 No ⇒HL15 8 DK ⇒HL15	If "Yes", record line no. of father and go to HL15. If "No", record 00.	1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	If HL12 is blank or '00' ask: Who is the primary caretaker of (name)?
			1 Male	2 Female												
Line	Name	Relation*	M	F	Month / Year	Age	15-49	15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother
01		**0 1**	1	2	__ __ / __ __ __ __	__ __	01	01	01	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
02		__ __	1	2	__ __ / __ __ __ __	__ __	02	02	02	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
03		__ __	1	2	__ __ / __ __ __ __	__ __	03	03	03	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
04		__ __	1	2	__ __ / __ __ __ __	__ __	04	04	04	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
05		__ __	1	2	__ __ / __ __ __ __	__ __	05	05	05	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
06		__ __	1	2	__ __ / __ __ __ __	__ __	06	06	06	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
07		__ __	1	2	__ __ / __ __ __ __	__ __	07	07	07	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
08		__ __	1	2	__ __ / __ __ __ __	__ __	08	08	08	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
09		__ __	1	2	__ __ / __ __ __ __	__ __	09	09	09	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __

*Codes for **HL3**: Relationship to head of household:
01 Head
02 Spouse/Partner
03 Son / Daughter
04 Son-In-Law / Daughter-In-Law
05 Grandchild
06 Parent
07 Parent-In-Law
08 Brother / Sister
09 Brother-In-Law / Sister-In- Law
10 Uncle / Aunt
11 Niece/Nephew
12 Other relative
13 Adopted / Foster/ Stepchild
14 Household Helper (Live-in)
96 Other (Not related)
98 DK

MICS.HH.2

							For women age 15-49	*For men age 15-49*	*For children age 0-4*			*For children age 0-17 years*				*For Children age 0-14*

HL1. Line no.	**HL2.** Name	**HL3.** What is the Relationship of (name) to the head of household?	**HL4.** Is (name) male or female?	**HL5.** What is (name)'s date of birth?		**HL6.** How old is (name)?	**HL7.** Circle line no. if woman age 15-49.	**HL7A.** Circle line no. if Man age 15-49	**HL7B.** Circle line no. if child age 0-4.	**HL11.** Is(name)' Natural Mother alive?	**HL12.** Does (name)'s natural mother live in this household?	**HL12A.** Where does (name)'s natural mother live?	**HL13.** Is (name)'s natural father alive?	**HL14.** Does (name)'s natural father live in this household?	**HL14A.** Where does (name)'s natural father live?	**HL15.** Record line no. of mother from HL12 if indicated.
			1 Male 2Female	98 DK	9998 DK	*Record in completed years. If age is 95 or above, record '95'.*				1 Yes 2 No ⇨HL13 8 DK ⇨HL13	*If "Yes", record line no. of mother and go to HL13. If "No", record 00.*	1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	1 Yes 2 No ⇨HL15 8 DK ⇨HL15	*If "Yes", record line no. of father and go to HL15. If "No", record 00.*	1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	*If HL12 is blank or '00' ask: Who is the primary caretaker of (name)?*
Line	Name	Relation*	M	F	Month	Year	Age	15-49	15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother
10		__ __	1	2	__ __	__ __ __ __	__ __	13	13	13	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
11		__ __	1	2	__ __	__ __ __ __	__ __	11	11	11	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
12		__ __	1	2	__ __	__ __ __ __	__ __	12	12	12	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
13		__ __	1	2	__ __	__ __ __ __	__ __	13	13	13	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
14		__ __	1	2	__ __	__ __ __ __	__ __	14	14	14	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __
15		__ __	1	2	__ __	__ __ __ __	__ __	15	15	15	1 2 8	__ __	1 2 3 8	1 2 8	__ __	1 2 3 8	__ __

Tick here if additional questionnaire used

Probe for additional household members.
Probe especially for any infants or small children not listed, and others who may not be members of the family (such as servants, friends) but who usually live in the household.
Insert names of additional members in the household list and complete form accordingly.

Now for each woman age 15-49 years, write her name and line number and other identifying information in the information panel of a separate Individual Women's Questionnaire.
For each man age 15-49 years, write his name and line number and other identifying information in the information panel of a separate Individual Man's Questionnaire.
For each child under age 5, write his/her name and line number AND the line number of his/her mother or caretaker in the information panel of a separate Under-5 Questionnaire.
You should now have a separate questionnaire for each eligible woman, each eligible man, and each child under five in the household.

* Codes for **HL3**: Relationship to head of household:	01 Head 02 Spouse/Partner 03 Son / Daughter	04 Son-In-Law / Daughter-In-Law 05 Grandchild 06 Parent	07 Parent-In-Law 08 Brother / Sister 09 Brother-In-Law / Sister-In-Law	10 Uncle / Aunt 11 Niece / Nephew 12 Other relative	13 Adopted / Foster/ Stepchild 14 Household Helper (Live-in)	96 Other (Not related) 98 DK

MICS.HH.3

EDUCATION ED

For household members age 5 and above	For household members age 5-24 years

ED1. Line number

ED2. Name and age — Copy from HL2 and HL6.

ED3. Has (name) ever attended school or pre-school?
1 Yes
2 No ⇨Next Line

ED4A. What is the highest level of school (name) has attended?
Level:
00 Preschool
01 Infant
02 Primary
03 Secondary
04 Associates
05 BSc. & Higher
96 Other
98 DK
If level=00, skip to ED5.

ED4B. What is the highest standard/ form/ year (name) completed at this level?
Standard/ Form/ Year:
98 DK
If the first Std / Form/ Year at this level is not completed, enter "00".

ED5. During the current school year, did (name) attend school or preschool at any time?
1 Yes
2 No ⇨ED7

ED6. During this school year, which level and standard/ form/ year was (name) attending?
Level:
00 Preschool
01 Infant
02 Primary
03 Secondary
04 Associates
05 BSc. & Higher
96 Other
98 DK
If level=00, skip to ED7.
Standard/ Form / Year:
98 DK

ED7. During the previous school year, did (name) attend school or preschool at any time?
1 Yes
2 No ⇨ Next Line
8 DK ⇨ Next Line

ED8. During that school year, which level and standard/ form/ year did (name) attend?
Level:
00 Preschool
01 Infant
02 Primary
03 Secondary
04 Associates
05 BSc. & Higher
96 Other
98 DK
If level=00, go to next line.
Standard / Form / Year:
98 DK

Line	Name	Age	Yes	No	Level	Std/Form/ Year	Yes	No	Level	Std/Form/ Year	Y	N	DK	Level	Std/Form/ Year
01		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
02		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
03		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
04		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
05		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
06		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
07		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
08		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
09		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
10		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
11		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
12		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
13		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
14		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __
15		__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	00 01 02 03 04 05 96 98	__ __	1	2	8	00 01 02 03 04 05 96 98	__ __

MICS.HH.4

SELECTION OF ONE CHILD FOR CHILD DISCIPLINE   SL

SL1. Check HL6 in the List of Household Members and write the total number of children age 1-14 years.	Total number…………………………………..__ __

SL2. Check the number of children age 1-14 years in SL1:

    ☐ *Zero ⇨ Go to Household Characteristics module.*

    ☐ *One ⇨ Go to SL9 and record the rank number as '1', enter the line number, child's name and age.*

    ☐ *Two or more ⇨ Continue with SL2A.*

SL2A. List each of the children age 1-14 years below in the order they appear in the List of Household Members. Do not include other household members outside of the age range 1-14 years.
Record the line number, name, sex, and age for each child.

SL3. *Rank number*	**SL4**. *Line number From HL1*	**SL5**. *Name from HL2*	**SL6**. *Sex from HL4*		**SL7**. *Age from HL6*
Rank	Line	Name	M	F	Age
1	__ __		1	2	__ __
2	__ __		1	2	__ __
3	__ __		1	2	__ __
4	__ __		1	2	__ __
5	__ __		1	2	__ __
6	__ __		1	2	__ __
7	__ __		1	2	__ __
8	__ __		1	2	__ __

SL8. Check the last digit of the household number (HH2) from the cover page. This is the number of the row you should go to in the table below. Check the total number of children age 1-14years in SL1 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and circle the number that appears in the box. This is the rank number (SL3) of the selected child.

Last Digit of Household Number (from HH2)	*Total Number of Eligible Children in the Household (from SL1)*						
	2	*3*	*4*	*5*	*6*	*7*	*8+*
0	2	2	4	3	6	5	4
1	1	3	1	4	1	6	5
2	2	1	2	5	2	7	6
3	1	2	3	1	3	1	7
4	2	3	4	2	4	2	8
5	1	1	1	3	5	3	1
6	2	2	2	4	6	4	2
7	1	3	3	5	1	5	3
8	2	1	4	1	2	6	4
9	1	2	1	2	3	7	5

SL9. Record the rank number (SL3), line number (SL4), name (SL5) and age (SL7) of the selected child.	Rank number ....….__ Line number ....__ __ Name_____ Age ....__ __

CD2. Write the line number and name of the child from SL9.	Line number ....__ __ Name _____	

CD3. Adults use certain ways to teach children the right behaviour or to address a behaviour problem. I will read various methods that are used. Please tell me if you or anyone else in your household has used this method with (*NAME*) in the past month.		
		Yes No
[A] Took away privileges, forbade something (name) liked or did not allow him/her to leave the house.	Took away privileges............................1 2	
[B] Explained why (name)'s behaviour was wrong.	Explained wrong behaviour..................1 2	
[C] Shook him/her.	Shook him/her 1 2	
[D] Shouted, yelled at or screamed at him/her.	Shouted, yelled, screamed 1 2	
[E] Gave him/her something else to do.	Gave something else to do 1 2	
[F] Spanked, hit or slapped him/her on the bottom with bare hand.	Spanked, hit, slapped on bottom with bare hand 1 2	
[G] Hit him/her on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.	Hit with belt, hairbrush, stick, or other hard object 1 2	
[H] Called him/her dumb, lazy, or another name like that.	Called dumb, lazy, or another name 1 2	
[I] Hit or slapped him/her on the face, head or ears.	Hit/slapped on the face, head or ears 1 2	
[J] Hit or slapped him/her on the hand, arm, or leg.	Hit/slapped on hand, arm or leg 1 2	
[K] Beat him/her up, that is hit him/her over and over as hard as one could.	Beat up, hit over and over as hard as one could 1 2	

CD4. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished?	Yes ....1 No...2 DK / No opinion 8	

MICS.HH.6

HOUSEHOLD CHARACTERISTICS		HC
HC1A. What is the religion of the head of this household?	Anglican.......................................01 Baptist..02 Jehovah's Witness.......................03 Mennonite....................................04 Methodist......................................05 Nazarene.....................................06 Pentecostal...................................07 Roman Catholic............................08 Seventh-Day Adventist.................09 None..97 Other (*specify*) _____ 96 Don't Know....................................98	
HC1B. What is the first language of the head of this household?	Chinese/Taiwanese.....................01 Creole...02 English..03 German..04 Hindi..05 Maya ……… ……………...............06 Spanish...07 Garifuna..08 Other (*specify*) _____ 96	
HC1C. To what ethnic group does the head of this household belong?	Asian…………………………….......01 Caucasian....................................02 Creole...03 East Indian....................................04 Maya...05 Mennonite.....................................06 Mestizo/Spanish/Latino................07 Garifuna..08 Other (*specify*) _____ 96	
HC2. How many rooms in this household are used for sleeping?	Number of rooms .... __ __	

HC3. Main material of the dwelling floor.
 	
Record observation.
	Natural floor
	   Earth/ Sand 11
	
	Rudimentary floor
	   Wood planks 21
	   Plywood 23
	
	Finished floor
	   Parquet or polishedwood.........31
	   Vinyl or asphalt strips/marley.................32
	   Ceramic tiles/cement tiles 33
	   Cement/Concrete 34
	   Carpet 35
	
	Other (*specify*) _____ 96	

HC4. Main material of the roof.
 	
    Record observation.
	Natural roofing
	    Thatch/Palm leaf/Bayleaf.........................12
	
	Rudimentary Roofing
	    Cardboard 24
	    Rubber rye..25
	
	Finished roofing
	    Metal/Tin/corrugated zinc 31
	    Ceramic/Roofing tiles..............................34
	    Cement/Concrete....................................35
	    Roofing shingles.....................................36
	
	Other (*specify*) _____ 96	

HC5. Main material of the exterior walls.
 	
    Record observation.
	Natural walls
	    No walls 11
	    Palmetto/Wildcane/Sticks 14
	
	Rudimentary walls
	    Bamboo/Palmetto with mud/white lime .21
	    Stone with mud..22
	    Plywood 24
	    Carton/Cardboard 25
	    Reused wood...26
	
	Finished walls
	    Cement/Concrete....................................31
	    Stone with lime / concrete 32
	    Bricks 33
	    Cement blocks...34
	    Wood planks / shingles....……….........…36
	    Wood and concrete……………...………37
	    Stucco......................................…….......38
	    Plycem......................................……....…39
	    Metal/Tin/Corrugated/Zinc......................40
	
	Other(*specify*) _____ 96	

HC6. What type of fuel does your household mainly use for cooking?	Electricity ....01 Butane/Liquefied Petroleum Gas (LPG) ... 02 Biogas..04 Kerosene ....05 Charcoal ....07 Wood ....08 Agricultural crop residue...........................11 No food cooked in household ....95 Other(*specify*) _____ 96	01⇨HC8 02⇨HC8 04⇨HC8 05⇨HC8 95⇨HC8

HC7. Is the cooking usually done in the house,
    In a separate building, or outdoors?
 	
    *If 'In the house', probe: Is it done in
    a separate room used as a kitchen?*
	In the house
	    In a separate room used as kitchen........ 1
	    Elsewhere in the house 2
	In a separate building 3
	Outdoors...4
	Other(*specify*) _____ 6	

HC8. Does your household have:		Yes	No	
[A] Electricity?	Electricity	1	2	
[B] A radio?	Radio	1	2	
[C] A television?	Television..	1	2	
[D] A fixed line telephone?	Fixed line telephone.........................	1	2	
[E] A refridgerator?	Refridgerator....................................	1	2	
[F] A Fan?	Fan..	1	2	
[G] A Micro Wave Oven?	Micro Wave Oven	1	2	
[H] A Security Alarm System?	Security Alarm System	1	2	
[I] A Washing Machine?	Washing Machine	1	2	
[J] A DV D Player?	DVD Player	1	2	
[K] A Gas Bar-B-Q Grill?	Gas Bar-B-Q Grill.............................	1	2	
[L] An Air Conditioner?	Air Conditioner	1	2	
[M] A Water Cooler?	Water Cooler.....................................	1	2	
[N] A Sofa set?	Sofa set..	1	2	
[O] A Dining Room set?	Dining Room set	1	2	
[P] A Clothes Closet?	Clothes Closet	1	2	

HC9. Does any member of your household own:		Yes	No	
[A] A watch?	Watch...1		2	
[B] A Cellphone?	Cellphone..1		2	
[C] A bicycle?	Bicycle 1		2	
[D] A motorcycle or scooter?	Motorcycle/Scooter 1		2	
[E] An animal- drawn cart?	Animal-drawn cart.............................1		2	
[F] A car or truck?	Car/Truck 1		2	
[G] A boat with a motor?	Boat with motor.................................1		2	
[H] A tablet computer?	Tablet Computer 1		2	
[I] A Fishing Rod?	Fishing Rod..1		2	
[J]A Weight Training Machine?	Weight Training Machine 1		2	
[K] A computer	Computer…………………………1		2	
[L] Canoe/A boat without a motor?	Canoe/Boat without motor 1		2	

HC10. Do you or someone living in this household own this dwelling? *If "No", then ask: Do you rent this dwelling from someone not living in this household?* *If "Rented from someone else", circle "2". For other responses, circle "6"*	Own .... 1 Rent .... 2 Other (*specify*) _____ 6	

HC11. Does any member of this household own any land that can be used for agriculture?	Yes... 1 No 2	2⇒HC13

HC12. How many acres of agricultural land do members of this household own? *If less than 1, record "00". If 95 or more, record "95". If unknown, record "98"*	Acres... ___ ___	

HC13. Does this household own any livestock, herds, other farm animals, or poultry?	Yes... 1 No 2	2⇒HC15

HC14. How many of the following animals does this household have?		
[A] Cattle, milk cows, or bulls?	Cattle, milk cows, or bulls .... ___ ___	
[B] Horses, donkeys, or mules?	Horses, donkeys, or mules .... ___ ___	
[C] Goats?	Goats .... ___ ___	
[D] Sheep?	Sheep .... ___ ___	

[E] Chickens?	Chickens .... ___ ___	
[F] Pigs?	Pigs .... ___ ___	
[G] Turkeys, ducks?	Turkeys, ducks .... ___ ___	
If none, record "00". If 95 or more, record "95" *If unknown, record "98"*		
HC15. Does any member of this household have bank account, a bank book or credit union book?	Yes .... 1 No 2	

WATER AND SANITATION		WS

WS1. What is the main source of drinking water for members of your household?	Piped water
	    Piped into dwelling................................ 11
	    Piped into compound, yard or plot........ 12
	    Piped to neighbour 13
	    Public pipe / standpipe 14
	Tube Well, Borehole, Hand-pump 21
	Dug well
	    Protected well 31
	    Unprotected well................................... 32
	Water from spring
	    Protected spring 41
	    Unprotected spring 42
	Rainwater collection 51
	Tanker-truck 61
	Cart with small tank / drum 71
	Surface water (river, stream, dam, lake,
	    pond, canal, irrigation channel) 81
	
	Bottled water.. 91
	
	Other (*specify*) _____ 96
		11⇨WS6
		12⇨WS6
		13⇨WS6
		14⇨WS3
		21⇨WS3
		
		31⇨WS3
		32⇨WS3
		
		41⇨WS3
		42⇨WS3
		51⇨WS3
		61⇨WS3
		71⇨WS3
		
		81⇨WS3
		
		96⇨WS3

WS2. What is the main source of water used by your household for other purposes such as washing, bathing and handwashing?	Piped water
	    Piped into dwelling................................ 11
	    Piped into compound, yard or plot........ 12
	    Piped to neighbour 13
	    Public pipe / standpipe 14
	Tube Well, Borehole, Hand-pump 21
	Dug well
	    Protected well 31
	    Unprotected well................................... 32
	Water from spring
	    Protected spring 41
	    Unprotected spring 42
	Rainwater collection 51
	Tanker-truck 61
	Cart with small tank / drum 71
	Surface water (river, stream, dam, lake,
	    pond, canal, irrigation channel) 81
	
	Other (*specify*) _____ 96
		11⇨WS6
		12⇨WS6
		13⇨WS6

WS3. Where is that water source located?	In own dwelling .... 1 In own yard / plot .... 2 Elsewhere.. 3	1⇨WS6 2⇨WS6
WS4. How long does it take to go there, get water, and come back?	Number of minutes .... __ __ __ DK.. 998	

WS5. Who usually goes to this source to collect the water for your household? *Probe: Is this person under age 15? What sex?*	Adult woman (age 15+ years).................... 1 Adult man (age 15+ years) .... 2 Female child (under 15)............................. 3 Male child (under 15)................................. 4 DK... 8	
WS6. Do you do anything to the water to make it safer to drink?	Yes .... 1 No .... 2 DK... 8	2⇨WS8 8⇨WS8
WS7. What do you usually do to make the water safer to drink? *Probe: Anything else?* *Record all items mentioned.*	Boil...A Add bleach / chlorine ....B Strain it through a cloth..............................C Use water filter (ceramic, sand, composite, etc.).................D Solar disinfection ....E Let it stand and settle ....F Other (*specify*) _____ X DK...Z	

WS8. What kind of toilet facility do members of your household usually use?
 	
If "flush" or "pour flush", probe: Where does it flush to?
 	
If not possible to determine, ask permission to observe the facility.
	Flush / Pour flush
	   Flush to piped sewer system 11
	   Flush to septic tank.............................. 12
	   Flush to pit (latrine).............................. 13
	   Flush to somewhere else...................... 14
	   Flush to unknown place / Not sure /
	   DK where 15
	Pit latrine
	   Ventilated Improved Pit latrine (VIP) 21
	   Pit latrine with slab.............................. 22
	   Pit latrine without slab / Open pit 23
	
	Composting toilet...................................... 31
	Bucket.. 41
	Hanging toilet, Hanging latrine 51
	
	No facility, Bush, Field 95
	
	Other (*specify*) _____ 96
		95⇨Next Module

WS9. Do you share this facility with others who are not members of your household?	Yes .... 1 No 2	2⇨Next Module
WS10. Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?	Other households only (not public)............. 1 Public facility.. 2	2⇨Next Module
WS11. How many households in total use this toilet facility, including your own household?	Number of households (if less than 10) 0 __ Ten or more households........................... 10 DK... 98	

HANDWASHING		HW

HW1. We would like to learn about the places that households use to wash their hands.
 	
Can you please show me where members of your household most often wash their hands?
	Observed 1
	
	Not observed
	   Not in dwelling / plot / yard 2
	   No permission to see 3
	   Other reason
	(*specify*)_____6
		
		2 ⇨HW4
		3 ⇨HW4
		
		6 ⇨HW4

HW2. Observe presence of water at the place for handwashing. Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.	Water is available..1 Water is not available..................................2	
HW3A. Is soap, detergent or ash/sand present at the place for handwashing?	Yes, present..1 No, not present 2	 2⇨HW4
HW3B. Record your observation. *Circle all that apply*.	Bar soap... A Detergent (Powder / Liquid / Paste)........... B Liquid soap.. C Ash / Sand .... D	A⇨HH19 B⇨HH19 C⇨HH19 D⇨HH19
HW4. Do you have any bar soap, soap powder, liquid soap or sand in your house for washing hands?	Yes..1 No 2	 2⇨HH19
HW5A. Can you please show it to me?	Yes, shown ....1 No, not shown 2	 2⇨HH19
HW5B. Record your observation. *Circle all that apply*.	Bar soap... A Detergent (Powder / Liquid / Paste)........... B Liquid soap.. C Ash / Sand .... D	

HH19. Record the time.	Hour, minutes and am/pm .... __ __ : __ __	__ m

SALT IODIZATION   SI

SI1. We would like to check whether the salt used in your household is iodized. May I have a sample of the salt used to cook meals in your household? *Once you have tested the salt, circle number that corresponds to test outcome.*	Not iodized - 0 PPM .... 1 More than 0 PPM & less than 15 PPM .... 2 15 PPM or more .... 3 No salt in the house.................................... 4 Salt not tested (*specify reason*) _____ 5	

HH20. Thank the respondent for his/her cooperation and check the List of Household Members:

   ☐ *A separate Questionnaire for Individual Women has been issued for each woman age 15-49 years in The List of Household Members (HL7).*

   ☐ *A separate Questionnaire for Individual men has been issued for each man age 15-49 years in The List of Household Members (HL7A).*

   ☐ *A separate Questionnaire for Children Under Five has been issued for each child under age 5 years in The List of Household Members (HL7B).*

Return to the cover page and make sure that the result of the household interview (HH9), the name and line number of the respondent to the household questionnaire (HH10), and the number of eligible women (HH12), men (HH13A), and under-5s (HH14) are entered.

Make arrangements for the administration of the remaining questionnaire(s) in this household.