

Appendix F. Questionnaires



HOUSEHOLD QUESTIONNAIRE

Egypt Sub-national MICS

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: _____ / _____ / 201__	HH7. Governorate: Gharbia 1 Qalyubia 2 Minya 3 Asyut 4 Suhaj 5 Qena 6	
HH6. Area: Upper Egypt pilot 1 Upper Egypt expansion 2 Lower Egypt expansion 3		
<p>MY NAME IS, WE ARE IMPLEMENTING A SURVEY FOR THE MINISTRY OF HEALTH AND POPULATION. THE SURVEY ABOUT THE SITUATION OF CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT 15 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND ANONYMOUS. MAY I START NOW?</p> <p><input type="checkbox"/> Yes, permission is given ⇒ Go to HH18 to record the time and then begin the interview.</p> <p><input type="checkbox"/> No, permission is not given ⇒ Circle 04 in HH9. Discuss this result with your supervisor.</p>		
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 _____

HH11. Total number of

household members: _____

HH12. Number of Ever-married women

age 15-49 years: _____

HH14. Number of children

under age 5: _____

After all questionnaires for the household have been completed, fill in the following information:

HH13. Number of Ever-married women's

questionnaires completed: _____

HH15. Number of under-5
questionnaires completed: _____

HH16. Field editor's name and number:

Name _____

HH17. Main data entry clerk's name and number:

Name _____

HH18. Record the time.

Hour _ _

Minutes..... _ _

LIST OF HOUSEHOLD MEMBERS

HL

FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, STARTING 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?

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.

						Marital status For household members age 12 and older		For ever married women age 15-49 HL6B=1-4	For child ren age 0-4	For children age 0-17 years						For children age 0-4
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)?	HL6B WHAT IS (name)'S CURRENT MARITAL STATUS?	HL7. Circle line no. If woman age 15-49 And Ever-married	HL7B Circle line no. if age 0-4	HL11. IS (name)'S NATURAL MOTHER ALIVE?	HL12. DOES (name)'S NATURAL MOTHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of mother and go to HL13 Record 00 for "No"	HL12A. WHERE DOES (name)'S NATURAL MOTHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	HL13. IS (name)'S NATURAL FATHER ALIVE? FATHER ALIVE? 1 Yes 2 No HL15 8 DK HL15	HL14. DOES (name)'S NATURAL FATHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of father and go to HL15 Record 00 for "No"	HL14A. WHERE DOES (name)'S NATURAL FATHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	HL15. Record line no. of mother from HL12 if indicated. If HL12 is blank, or "00" ask: WHO IS THE PRIMARY CARETAKER OF (name)?
Line	Name	Relation*	M	F	month	year	AGE	15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother/ CARETAKER
01		01	1	2	---	-----	---	1 2 3 4 5	01	01	1 2 8	---	1 2 8	---	1 2 3 8	---
02		---	1	2	---	-----	---	1 2 3 4 5	02	02	1 2 8	---	1 2 8	---	1 2 3 8	---
03		---	1	2	---	-----	---	1 2 3 4 5	03	03	1 2 8	---	1 2 8	---	1 2 3 8	---
04		---	1	2	---	-----	---	1 2 3 4 5	04	04	1 2 8	---	1 2 8	---	1 2 3 8	---
05		---	1	2	---	-----	---	1 2 3 4 5	05	05	1 2 8	---	1 2 8	---	1 2 3 8	---
06		---	1	2	---	-----	---	1 2 3 4 5	06	06	1 2 8	---	1 2 8	---	1 2 3 8	---

								Marital status For household members age 12 and older	For ever married women age 15-49 HL6B=1-4	For child ren age 0-4	For children age 0-17 years					For children age 0-4
HL1. Line no.	HL2. Name	HL3. WHAT IS THE RELATIONSHIP OF (name) TO THE HEAD OF HOUSEHOLD?	HL4. IS (name) MALE OR FEMALE? 1 Male 2 Female	HL5. WHAT IS (name)'S DATE OF BIRTH? 98 DK DK 9998		HL6. HOW OLD IS (name)? Record in completed years. If age is 95 or above, record '95'	HL6B WHAT IS (name)'S CURRENT MARITAL STATUS? 1 Married 2 Widowed 3 Divorced 4 Separated 5 Never-married	HL7. Circle line no. If woman age 15-49 And Ever-married	HL7B Circle line no. if age 0-4	HL11. IS (name)'S NATURAL MOTHER ALIVE? 1 Yes 2 No HL13 8 DK HL13	HL12. DOES (name)'S NATURAL MOTHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of mother and go to HL13 Record 00 for "No"	HL12A. WHERE DOES (name)'S NATURAL MOTHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	HL13. IS (name)'S NATURAL FATHER ALIVE? 1 Yes 2 No HL15 8 DK HL15	HL14. DOES (name)'S NATURAL FATHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of father and go to HL15 Record 00 for "No"	HL14A. WHERE DOES (name)'S NATURAL FATHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	HL15. Record line no. of mother from HL12 if indicated. If HL12 is blank, or "00" ask: WHO IS THE PRIMARY CARETAKER OF (name)? Mother/ CARETAKER
Line	Name	Relation*	M	F	month	year	AGE	15-49	0-4	Y N DK	Mother		Y N DK	Father		
07		___	1	2	___	___	___	1 2 3 4 5	07	07	1 2 8	___	1 2 8	___	1 2 3 8	___
08		___	1	2	___	___	___	1 2 3 4 5	08	08	1 2 8	___	1 2 8	___	1 2 3 8	___
09		___	1	2	___	___	___	1 2 3 4 5	09	09	1 2 8	___	1 2 8	___	1 2 3 8	___
10		___	1	2	___	___	___	1 2 3 4 5	10	10	1 2 8	___	1 2 8	___	1 2 3 8	___
11		___	1	2	___	___	___	1 2 3 4 5	11	11	1 2 8	___	1 2 8	___	1 2 3 8	___
12		___	1	2	___	___	___	1 2 3 4 5	12	12	1 2 8	___	1 2 8	___	1 2 3 8	___

						Marital status For household members age 12 and older		For ever married women age 15-49 HL6B=1-4	For children age 0-4	For children age 0-17 years						For children age 0-4
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)?	HL6B WHAT IS (name)'S CURRENT MARITAL STATUS?	HL7. Circle line no. If woman age 15-49 And Ever-married	HL7B Circle line no. if age 0-4	HL11. IS (name)'S 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. If HL12 is blank, or "00" ask: WHO IS THE PRIMARY CARETAKER OF (name)?
			1 Male 2 Female	98 DK DK 9998		Record in completed years. If age is 95 or above, record '95'	1 Married 2 Widowed 3 Divorced 4 Separated 5 Never-married			1 Yes 2 No HL13 8 DK HL13	HOUSEHOLD? If "Yes" Record line no. of mother and go to HL13 Record 00 for "No"	1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	1 FATHER ALIVE? 2 No HL15 8 DK HL15	HOUSEHOLD? If "Yes" Record line no. of father and go to HL15 Record 00 for "No"	1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	
Line	Name	Relation*	M F	month	year	AGE		15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother/ CARETAKER
13		___	1 2	___	_____	___	1 2 3 4 5	13	13	1 2 8	___	1 2 3 8	1 2 8	___	1 2 3 8	___
14		___	1 2	___	_____	___	1 2 3 4 5	14	14	1 2 8	___	1 2 3 8	1 2 8	___	1 2 3 8	___
15		___	1 2	___	_____	___	1 2 3 4 5	15	15	1 2 8	___	1 2 3 8	1 2 8	___	1 2 3 8	___

PUT A SIGN IN THIS SQUARE IF YOU USED ANOTHER QUESTIONNAIRE

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 Ever-married 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 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 and each child under five in the household.

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

EDUCATION											ED										
			For household members age 5 and above						For household members age 5-24 years												
ED1.	ED2.		ED3.	ED4A.		ED4B.	ED5.		ED6.		ED7.		ED8.								
Line no.	Name and age Copy from HL2 and HL6		HAS (name) EVER ATTENDED SCHOOL OR PRE-SCHOOL?	WHAT IS THE HIGHEST LEVEL OF SCHOOL (name) HAS ATTENDED?		WHAT IS THE HIGHEST GRADE (name) COMPLETED AT THIS LEVEL?	DURING THE SCHOOL YEAR 2013-2014, DID (NAME) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?		DURING THIS SCHOOL YEAR (2013-2014), WHICH LEVEL AND GRADE IS/WAS (name) ATTENDING?		DURING THE PREVIOUS SCHOOL YEAR, THAT IS 2012-2013, DID (NAME) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?		DURING THAT PREVIOUS SCHOOL YEAR, WHICH LEVEL AND GRADE DID (name) ATTEND?								
			1 Yes 2 No ⇒ Next Line	0 Preschool 1 Primary 2 Preparatory 3 Secondary 4 Higher 8 DK		Grade: 8 DK <i>If less than 1 grade at this level, enter 0.</i>	1 Yes 2 No ⇒ ED7	Level: 0 Preschool 1 Primary 2 Preparatory 3 Secondary 4 Higher 8 DK	Grade: 8 DK	Level: 0 Preschool 1 Primary 2 Preparatory 3 Secondary 4 Higher 8 DK	Grade: 8 DK	1 Yes 2 No ⇒ Next Line 8 DK ⇒ Next Line	Level: 0 Preschool 1 Primary 2 Preparatory 3 Secondary 4 Higher 8 DK	Grade: 8 DK							
Line	Name	Age	Yes No	Level		Grade	Yes No	Level		Grade	Ye No DK		Level		Grade						
01		___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___							
02		___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___							

03		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
04		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
05		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
06		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
07		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
08		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
09		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
10		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
11		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
12		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
13		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
14		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___
15		___ ___	1 2	0 1 2 3 4 8	___	1 2	0 1 2 3 4 8	___	1 2 8	0 1 2 3 4 8	___

HOUSEHOLD CHARACTERISTICS

HC

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 planks21
- Finished floor
 - Parquet or polished wood.....31
 - Vinyl tiles.....32
 - Ceramic / Marble tiles.....33
 - Cement / Cement tiles34
 - Wall to wall carpet35
 - Other (*specify*) 96

HC4. *Main material of the roof.*

Record observation.

- Natural roofing
 - No Roof.....11
 - Thatch / Palm leaf.....12
 - Sod13
- Rudimentary roofing
 - Rustic mat.....21
 - Palm / Bamboo22
 - Wood planks23
 - Cardboard.....24
- Finished roofing
 - Metal / Tin31
 - Wood32
 - Calamine / Cement fibre.....33
 - Ceramic tiles34
 - Cement35

	Roofing shingles36	
	Other (<i>specify</i>) _____ 96	
HC5. Main material of the exterior walls.	Natural walls	
	No walls11	
	Cane / Palm / Trunks.....12	
	Dirt13	
	Rudimentary walls	
	Bamboo with mud.....21	
	Stone with mud.....22	
	Uncovered adobe23	
	Plywood24	
	Cardboard.....25	
	Reused wood.....26	
	Finished walls	
	Cement31	
	Stone with lime / cement32	
	Bricks.....33	
	Cement blocks.....34	
	Covered adobe35	
	Wood planks / shingles.....36	
	Other (<i>specify</i>) _____ 96	
<i>Record observation.</i>		

<p>HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD <u>MAINLY</u> USE FOR COOKING?</p>	<p>Electricity01</p> <p>Liquefied Petroleum Gas (LPG)02</p> <p>Natural gas03</p> <p>Biogas.....04</p> <p>Kerosene05</p> <p>Coal / Lignite.....06</p> <p>Charcoal07</p> <p>Wood08</p> <p>Straw / Shrubs / Grass09</p> <p>Animal dung.....10</p> <p>Agricultural crop residue.....11</p> <p>No food cooked in household.....95</p> <p>Other (<i>specify</i>) _____ 96</p>	<p>01⇒HC8</p> <p>02⇒HC8</p> <p>03⇒HC8</p> <p>04⇒HC8</p> <p>05⇒HC8</p> <p>95⇒HC8</p>																																																			
<p>HC7. IS THE COOKING USUALLY DONE IN THE HOUSE, IN A SEPARATE BUILDING, OR OUTDOORS?</p> <p><i>If 'In the house', probe: IS IT DONE IN A SEPARATE ROOM USED AS A KITCHEN?</i></p>	<p>In the house</p> <p style="padding-left: 40px;">In a separate room used as kitchen 1</p> <p style="padding-left: 40px;">Elsewhere in the house2</p> <p>In a separate building3</p> <p>Outdoors.....4</p> <p>Other (<i>specify</i>) _____ 6</p>																																																				
<p>HC8. DOES YOUR HOUSEHOLD HAVE:</p> <p>[A] ELECTRICITY?</p> <p>[B] A RADIO?</p> <p>[C] A TELEVISION?</p> <p>[D] A NON-MOBILE TELEPHONE?</p> <p>[E] A MOBILE TELEPHONE?</p> <p>[F] A VIDEO OR DVD PLAYER?</p> <p>[G] A PERSONAL HOME COMPUTER?</p> <p>[H] A SEWING MACHINE?</p> <p>[I] AN ELECTRIC FAN?</p> <p>[J] AN AIR CONDITIONER?</p> <p>[K] SATELLITE DISH OR CONNECTION?</p> <p>[L] A REFRIGERATOR?</p> <p>[M] A FREEZER?</p> <p>[N] A WATER HEATER?</p> <p>[O] A DISHWASHER?</p> <p>[P] AN AUTOMATIC WASHING MACHINE?</p>	<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">Yes</th> <th style="width: 10%; text-align: center;">no</th> </tr> </thead> <tbody> <tr><td>Electricity</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Radio</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Television</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Non-mobile telephone</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Mobile telephone</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Video or dvd player.....</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Personal home computer</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Sewing machine</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Electric fan</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Air conditioner.....</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Satellite dish or connection</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Refrigerator.....</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Freezer</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Water heater</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Dishwasher.....</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> <tr><td>Automatic washing machine.....</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td></tr> </tbody> </table>		Yes	no	Electricity	1	2	Radio	1	2	Television	1	2	Non-mobile telephone	1	2	Mobile telephone	1	2	Video or dvd player.....	1	2	Personal home computer	1	2	Sewing machine	1	2	Electric fan	1	2	Air conditioner.....	1	2	Satellite dish or connection	1	2	Refrigerator.....	1	2	Freezer	1	2	Water heater	1	2	Dishwasher.....	1	2	Automatic washing machine.....	1	2	
	Yes	no																																																			
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Dishwasher.....	1	2																																																			
Automatic washing machine.....	1	2																																																			

[Q] ANY OTHER WASHING MACHINE?	Other washing machine.....	1	2	
[R] A BED?	Bed	1	2	
[S] A SOFA?	Sofa	1	2	
[T] HANGING LAMP (YELLOW WITH NO COVER)?	Hanging lamp	1	2	
[U] A TABLE?	Table.....	1	2	
[V] A TABLIA (VERY LOW ROUND TABLE)?	Tablia (very low round table)	1	2	
[W] A CHAIR?	Chair	1	2	
[X] KOLLA/ZEER (A CONTAINER FOR RESERVING WATER)?	Kolla/zeer (a container for reserving water).....	1	2	

HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:				
			Yes	No
[A] A WATCH?	Watch	1		2
[B] A BICYCLE?	Bicycle	1		2
[C] A MOTORCYCLE OR SCOOTER?	Motorcycle / Scooter	1		2
[D] AN ANIMAL-DRAWN CART?	Animal drawn-cart.....	1		2
[E] A CAR OR TRUCK?	Car / Truck.....	1		2
HC10. DO YOU OR SOMEONE LIVING IN THIS HOUSEHOLD OWN THIS DWELLING OR IT IS RENTED FROM SOMEONE?	Own	1		
	Rent		2	2⇒ HC11
<i>If "No", then ask: DO YOU RENT THIS DWELLING FROM SOMEONE NOT LIVING IN THIS HOUSEHOLD?</i>	Other (specify) _____		6	6⇒ HC11
<i>If "Rented from someone else", circle "2". For other responses, circle "6".</i>				
HC10A. DID YOU OWN THIS DWELLING ALONE OR WITH SOMEONE ELSE	Own	1		
	Owned jointly		2	
HC11. DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes	1		
	No		2	2⇒ HC13

<p>HC12. HOW MANY FEDDANS OR KIRRATES OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN?</p> <p>Write in feddan and kirrat as mentioned and don't record the area in the shadowed space.</p>	<p>Record the area </p> <p>Feddan ____ Kirrat ____</p> <p>Don't know998</p>	
<p>HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS, OR POULTRY?</p>	<p>Yes1</p> <p>No2</p>	2⇒HC15
<p>HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD HAVE?</p> <p>[A] CATTLE, MILK COWS, OR BULLS?</p> <p>[B] HORSES, DONKEYS, OR MULES?</p> <p>[C] GOATS?</p> <p>[D] SHEEP?</p> <p>[E] POULTRY (CHICKEN, DUCKS, TURKEY,...)?</p> <p>[F] CAMELS?</p> <p><i>If none, record '00'. If 95 or more, record '95'.</i></p> <p><i>If unknown, record '98'.</i></p>	<p>Cattle, milk cows, or bulls ____ ____</p> <p>Horses, donkeys, or mules ____ ____</p> <p>Goats ____ ____</p> <p>Sheep ____ ____</p> <p>Poultry ____ ____</p> <p>Camels ____ ____</p>	
<p>HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT?</p>	<p>Yes1</p> <p>No2</p>	

WATER AND SANITATION

WS

<p>WS1. WHAT IS THE <u>MAIN</u> SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?</p>	<p>Piped water</p> <p style="padding-left: 20px;">Piped into dwelling 11</p> <p style="padding-left: 20px;">Piped into compound, yard or plot 12</p> <p style="padding-left: 20px;">Piped to neighbour 13</p> <p style="padding-left: 20px;">Public tap / standpipe 14</p> <p>Tube Well, Borehole 21</p> <p>Dug well</p> <p style="padding-left: 20px;">Protected well 31</p> <p style="padding-left: 20px;">Unprotected well 32</p> <p>Water from spring</p> <p style="padding-left: 20px;">Protected spring 41</p> <p style="padding-left: 20px;">Unprotected spring 42</p> <p>Rainwater collection 51</p> <p>Tanker-truck 61</p> <p>Cart with small tank / drum 71</p> <p>Surface water (river, stream, dam, lake, pond, canal, irrigation channel) 81</p> <p>Bottled water 91</p> <p>Other (<i>specify</i>) 96</p>	<p>11⇒WS6</p> <p>12⇒WS6</p> <p>13⇒WS6</p> <p>14⇒WS3</p> <p>21⇒WS3</p> <p>31⇒WS3</p> <p>32⇒WS3</p> <p>41⇒WS3</p> <p>42⇒WS3</p> <p>51⇒WS3</p> <p>61⇒WS3</p> <p>71⇒WS3</p> <p>81⇒WS3</p> <p>91</p> <p>96⇒WS3</p>
<p>WS2. WHAT IS THE <u>MAIN</u> SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS COOKING AND HANDWASHING?</p>	<p>Piped water</p> <p style="padding-left: 20px;">Piped into dwelling 11</p> <p style="padding-left: 20px;">Piped into compound, yard or plot 12</p> <p style="padding-left: 20px;">Piped to neighbour 13</p> <p style="padding-left: 20px;">Public tap / standpipe 14</p> <p>Tube Well, Borehole 21</p> <p>Dug well</p> <p style="padding-left: 20px;">Protected well 31</p>	<p>11⇒WS6</p> <p>12⇒WS6</p> <p>13⇒WS6</p> <p>14</p> <p>21</p> <p>31</p>

	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 (<i>specify</i>) 96	
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	

<p>WS5. WHO USUALLY GOES TO THIS SOURCE TO COLLECT THE WATER FOR YOUR HOUSEHOLD?</p> <p><i>Probe:</i></p> <p>IS THIS PERSON UNDER AGE 15?</p> <p>WHAT SEX?</p>	<p>Adult woman (age 15+ years)..... 1</p> <p>Adult man (age 15+ years) 2</p> <p>Female child (under 15)..... 3</p> <p>Male child (under 15) 4</p> <p>DK 8</p>	
<p>WS6. DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER TO DRINK?</p>	<p>Yes..... 1</p> <p>No..... 2</p> <p>DK 8</p>	<p>2⇒WS8</p> <p>8⇒WS8</p>
<p>WS7. WHAT DO YOU USUALLY DO TO MAKE THE WATER SAFER TO DRINK?</p> <p><i>Probe:</i></p> <p>ANYTHING ELSE?</p> <p><i>Record all items mentioned.</i></p>	<p>Boil A</p> <p>Add bleach / chlorine B</p> <p>Strain it through a cloth..... C</p> <p>Use water filter (ceramic, sand, composite, etc.) D</p> <p>Solar disinfection..... E</p> <p>Let it stand and settle..... F</p> <p>Other (<i>specify</i>) _____ X</p> <p>DK Z</p>	
<p>WS8. WHAT KIND OF TOILET FACILITY DO MEMBERS OF YOUR HOUSEHOLD USUALLY USE?</p> <p><i>If “flush” or “pour flush”, probe:</i></p> <p>WHERE DOES IT FLUSH TO?</p> <p><i>If not possible to determine, ask permission to observe the facility.</i></p>	<p>Flush / Pour flush</p> <p>Flush to piped sewer system 11</p> <p>Flush to septic tank 12</p> <p>Flush to pit latrine (bayara) 13</p> <p>Flush to somewhere else 14</p> <p>Flush to unknown place / Not sure / DK where 15</p> <p>Pit latrine</p> <p>Ventilated Improved Pit latrine (VIP) 21</p> <p>Pit latrine with slab 22</p> <p>Pit latrine without slab / Open pit 23</p>	

	Composting toilet 31 Bucket 41 No facility, Bush, Field 95 Other (<i>specify</i>) _____ 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
<p>HW1. WE WOULD LIKE TO LEARN ABOUT THE PLACES THAT HOUSEHOLDS USE TO WASH THEIR HANDS.</p> <p>CAN YOU PLEASE SHOW ME WHERE MEMBERS OF YOUR HOUSEHOLD <u>MOST OFTEN</u> WASH THEIR HANDS?</p>	<p>Observed..... 1</p> <p>Not observed</p> <p>Not in dwelling / plot / yard 2</p> <p>No permission to see 3</p> <p>Other reason</p> <p>(specify)_____ 6</p>	<p>2 ⇨HW4</p> <p>3 ⇨HW4</p> <p>6 ⇨HW4</p>
<p>HW2. Observe presence of water at the place for handwashing.</p> <p><i>Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.</i></p>	<p>Water is available..... 1</p> <p>Water is not available..... 2</p>	
<p>HW3A. Is soap, detergent or ash/mud/sand present at the place for handwashing?</p>	<p>Yes, present..... 1</p> <p>No, not present..... 2</p>	<p>2⇨HW4</p>
<p>HW3B. Record your observation.</p> <p>Circle all that apply.</p>	<p>Bar soap.....A</p> <p>Detergent (Powder / Liquid / Paste).....B</p> <p>Liquid soap.....C</p> <p>Ash / Mud / Sand.....D</p>	<p>A⇨HH19</p> <p>B⇨HH19</p> <p>C⇨HH19</p> <p>D⇨HH19</p>
<p>HW4. DO YOU HAVE ANY SOAP OR DETERGENT OR ASH/MUD/SAND IN YOUR HOUSE FOR WASHING HANDS?</p>	<p>Yes..... 1</p> <p>No..... 2</p>	<p>2⇨HH19</p>
<p>HW5A. CAN YOU PLEASE SHOW IT TO ME?</p>	<p>Yes, shown..... 1</p> <p>No, not shown 2</p>	<p>2⇨HH19</p>
<p>HW5B. Record your observation.</p> <p>Circle all that apply.</p>	<p>Bar soap.....A</p> <p>Detergent (Powder / Liquid / Paste).....B</p> <p>Liquid soap.....C</p> <p>Ash / Mud / Sand.....D</p>	
<p>HH19. Record the time.</p>		<p>Hour and minutes : ..</p>

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 Ever-married woman age 15-49 years in the List of Household Members (HL7)

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 all information is entered, including the number of eligible women (HH12) and under-5 (HH14)

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

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations