



HOUSEHOLD QUESTIONNAIRE

Jamaica, 2022



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: ____ / ____ / 20__		HH7. Parish: KINGSTON 11 ST. ANDREW 12 ST. THOMAS 13 PORTLAND 14 ST. MARY 15 ST. ANN 16 TRELAWNY 17 ST. JAMES 18 HANOVER 19 WESTMORELAND 20 ST. ELIZABETH 21 MANCHESTER 22 CLARENDON 23 ST. CATHERINE 24
HH6. Area:	GKMA 1 OUC 2 RURAL 3	
Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.		HH11. Record the time. HOURS : MINUTES ____ : ____
HH12. Hello, my name is (<i>your name</i>). We are conducting a survey about the situation of children, families and households in Jamaica, on behalf of the Planning Institute of Jamaica. I would like to talk to you about these subjects. This interview usually takes about 20 minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or if you wish to stop the interview, please let me know. For independent advice about this survey, you may contact the Chairman of the Advisory Panel on Ethics & Medico-Legal Affairs at the Ministry of Health and Wellness, Professor Archibald McDonald. May I start now?		
YES 1 NO / NOT ASKED 2		1 ⇨ LIST OF HOUSEHOLD MEMBERS 2 ⇨ HH46
HH46. Result of HOUSEHOLD QUESTIONNAIRE interview: Discuss any result not completed with Supervisor.	COMPLETED 01 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 02 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 03 REFUSED 04 DWELLING VACANT OR ADDRESS NOT A DWELLING 05 DWELLING DESTROYED 06 DWELLING NOT FOUND 07 OTHER (specify) 96	
HH47. Name and line number of the respondent to HOUSEHOLD QUESTIONNAIRE interview: NAME _____ HOUSEHOLD MEMBERS WOMEN AGE 15-49 CHILDREN UNDER AGE 5 CHILDREN AGE 5-17	To be filled after HOUSEHOLD QUESTIONNAIRE is completed TOTAL NUMBER HH48 _____ HH49 _____ HH51 _____ HH52 _____	To be filled after <u>all</u> the questionnaires are completed COMPLETED NUMBER HH53 _____ HH55 _____ HH56 ZERO 0 ONE 1

LIST OF HOUSEHOLD MEMBERS																	HL
First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, <u>make sure to probe</u> for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as household helpers, friends) but who usually live in the household. Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box: <input type="checkbox"/>																	
HL1. Line number	HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. Probe for additional household members.	HL3. What is the relationship of (name) to (name of the head of household)?	HL4. Is (name) male or female? 1 MALE 2 FEMALE	HL5. What is (name)'s date of birth? 98 DK 9998 DK	HL6. How old is (name)? Record in completed years. If age is 95 or above, record '95'.	HL8. Record line number if woman and age 15-49.	HL10. Record line number if age 0-4.	HL11. Age 0-17? 1 YES 2 NO \hookrightarrow Next Line	HL12. Is (name)'s natural mother alive? 1 YES 2 NO \hookrightarrow HL16 8 DK \hookrightarrow HL16	HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO \hookrightarrow HL15	HL14. Record the line number of mother and go to HL16.	HL15. Where does (name)'s natural mother live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME PARISH 3 IN ANOTHER HOUSEHOLD IN ANOTHER PARISH 4 INSTITUTION IN THIS COUNTRY 8 DK	HL16. Is (name)'s natural father alive? 1 YES 2 NO \hookrightarrow HL20 8 DK \hookrightarrow HL20	HL17. Does (name)'s natural father live in this household? 1 YES 2 NO \hookrightarrow HL19	HL18. Record the line number of father and go to HL20.	HL19. Where does (name)'s natural father live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME PARISH 3 IN ANOTHER HOUSEHOLD IN ANOTHER PARISH 4 INSTITUTION IN THIS COUNTRY 8 DK	HL20. Copy the line number of mother from HL14. If blank, ask: Who is the primary caretaker of (name)? If 'No one' for a child age 15-17, record '90'.
LINE	NAME	RELATION*	M F	MONTH YEAR	AGE	W 15-49	0-4	Y N	Y N DK	Y N	MOTHER		Y N DK	Y N	FATHER		
01		0 1	1 2				01	01	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
02			1 2				02	02	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
03			1 2				03	03	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
04			1 2				04	04	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
05			1 2				05	05	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
06			1 2				06	06	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
07			1 2				07	07	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
08			1 2				08	08	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
09			1 2				09	09	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
10			1 2				10	10	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
11			1 2				11	11	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
12			1 2				12	12	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
13			1 2				13	13	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
14			1 2				14	14	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 8
15			1 2				15	15	1 2	1 2 8	1 2		1 2 3 4 8	1 2 8	1 2		1 2 3 4 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			

EDUCATION 1											ED													
ED1. Line number	ED2. Name and age. Copy names and ages of <u>all</u> members of the household from HL2 and HL6 to below <u>and</u> to next page of the module.		ED3. Age 3 or above? 1 YES 2 NO ⚡ Next Line		ED4. Has (<i>name</i>) ever attended school or any Early Childhood Education programme? 1 YES 2 NO ⚡ Next Line		ED5. What is the highest level and grade or year of school (<i>name</i>) has ever <u>attended</u> ? LEVEL: 0 ECE ⚡ ED7 1 PRIMARY 2 LOWER SECONDARY 3 UPPER SECONDARY 4 HIGHER 5 SPECIAL EDUCATION ⚡ ED7 8 DK								GRADE/YEAR: 98 DK ⚡ ED7			ED6. Did (<i>name</i>) ever <u>complete</u> that (grade/year)? 1 YES 2 NO 8 DK			ED7. Age 3-24? 1 YES 2 NO ⚡ Next Line		ED8. Check ED4: Ever attended school or ECE? 1 YES 2 NO ⚡ Next Line	
LINE	NAME	AGE	YES	NO	YES	NO	LEVEL								GRADE/YEAR	Y	N	DK	YES	NO	YES	NO		
01		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
02		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
03		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
04		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
05		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
06		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
07		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
08		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
09		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
10		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
11		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
12		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
13		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
14		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			
15		___	1	2	1	2	0	1	2	3	4	5	8	___	1	2	8	1	2	1	2			

MICS6.HH. 3

EDUCATION 2												ED	
ED1. Line number	ED2. Name and age.	ED9. At any time during the current school year (2021/2022), did (name) attend school or any Early Childhood Education programme? 1 YES 2 NO <i>ED15</i>	ED10. During this current school year (2021/2022), which level and grade or year is (name) attending? LEVEL: 0 ECE <i>ED15</i> 1 PRIMARY 2 LOWER SEC. 3 UPPER SEC. 4 HIGHER 5 SPECIAL ED. <i>ED15</i> 8 DK	GRADE/YEAR: 98 DK	ED11. Is (he/she) attending a public school? <i>If "Yes", record '1'. If "No", probe to code who controls and manages the school.</i> 1 GOVT./ PUBLIC 2 RELIGIOUS/ FAITH ORG. 3 PRIVATE 6 OTHER 8 DK	ED12. In the current school year (2021/2022), has (name) received any school tuition support? <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i> 1 YES 2 NO <i>ED14</i> 8 DK <i>ED14</i>	ED13. Who provided the tuition support? <i>Record all mentioned.</i> A GOVT. / PUBLIC B RELIGIOUS/ FAITH ORG. C PRIVATE. X OTHER Z DK	ED14. For the current school year (2021/2022), has (name) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i> 1 YES 2 NO 8 DK	ED15. At any time during the previous school year (2020/2021), did (name) attend school or any Early Childhood Education programme? 1 YES 2 NO <i>Next Line</i> 8 DK <i>Next Line</i>	ED16. During that previous school year (2020/2021), which level and grade or year did (name) attend? LEVEL: 0 ECE <i>Next Line</i> 1 PRIMARY 2 LOWER SEC. 3 UPPER SEC. 4 HIGHER 5 SPECIAL ED. <i>Next Line</i> 8 DK	GRADE/YEAR: 98 DK		
LINE	NAME	AGE	YES NO	LEVEL	GRADE/YEAR	AUTHORITY	YES NO DK	TUITION	YES NO DK	YES NO DK	LEVEL	GRADE/YEAR	
01		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
02		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
03		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
04		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
05		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
06		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
07		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
08		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
09		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
10		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
11		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
12		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
13		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
14		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	
15		___	1 2	0 1 2 3 4 5 8	___	1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	0 1 2 3 4 5 8	___	

HOUSEHOLD CHARACTERISTICS		HC
HC1A. What is the religion of (<i>name of the head of the household from HL2</i>)?	ANGLICAN 11 BAHÁ'Í 12 BAPTIST 13 BRETHREN 14 CHURCH OF GOD IN JAMAICA 15 CHURCH OF GOD OF PROPHECY 16 HINDUISM 17 ISLAM 18 JEHOVAH'S WITNESS 19 JUDAISM 20 METHODIST 21 MORAVIAN 22 NEW TESTAMENT CHURCH OF GOD 23 OTHER CHURCH OF GOD 24 PENTACOSTAL 25 RASTAFARIAN 26 REVIVALIST 27 ROMAN CATHOLIC 28 SEVENTH DAY ADVENTIST 29 UNITED CHURCH 30	
	OTHER RELIGION/DENOMINATION (<i>specify</i>) 96	
	NO RELIGION 97	
HC2. To what ethnic group does (<i>name of the head of the household from HL2</i>) belong?	BLACK 1	
	CHINESE 2	
	EAST INDIAN 3	
	MIXED 4	
	WHITE 5	
	OTHER (<i>specify</i>) 6	
HC3. How many rooms do members of this household usually use for sleeping?	NUMBER OF ROOMS ____	
HC4. Main material of the dwelling floor. <i>Record observation.</i> <i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i>	NATURAL FLOOR EARTH / SAND 11 RUDIMENTARY FLOOR WOOD PLANKS 21 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL/LINOLEUM 32 CERAMIC/TERRAZZO TILES 33 CEMENT/CONCRETE 34 CARPET 35	
	OTHER (<i>specify</i>) 96	

<p>HC5. Main material of the roof.</p> <p><i>Record observation.</i></p>	<p>NO ROOF..... 11</p> <p>NATURAL ROOFING</p> <p>THATCH / PALM LEAF 12</p> <p>RUDIMENTARY ROOFING</p> <p>PALM / BAMBOO.....22</p> <p>WOOD PLANKS23</p> <p>CARDBOARD24</p> <p>FINISHED ROOFING</p> <p>METAL / TIN/ ZINC31</p> <p>WOOD.....32</p> <p>ROOFING TILES.....34</p> <p>CEMENT/CONCRETE.....35</p> <p>ROOFING SHINGLES36</p> <p>OTHER (<i>specify</i>)96</p>	
<p>HC6. Main material of the exterior walls.</p> <p><i>Record observation.</i></p>	<p>NATURAL WALLS</p> <p>CANE / PALM / TRUNKS 12</p> <p>DIRT 13</p> <p>RUDIMENTARY WALLS</p> <p>PLYWOOD24</p> <p>CARDBOARD25</p> <p>REUSED WOOD26</p> <p>WATTLE & DAUB27</p> <p>CONCRETE NOG.....28</p> <p>FINISHED WALLS</p> <p>CEMENT/CONCRETE/PREFAB.....31</p> <p>STONE AND BRICK.....32</p> <p>WOOD AND BRICK33</p> <p>CONCRETE AND BLOCKS34</p> <p>WOOD PLANKS / SHINGLES36</p> <p>WOOD AND CONCRETE37</p> <p>ZINC38</p> <p>OTHER (<i>specify</i>)96</p>	

MICS6.HH. 6

HC7. Does your household have:	YES	NO	
[A] A fixed telephone line?	FIXED TELEPHONE LINE 1	2	
[B] A radio?	RADIO 1	2	
[C] A chair?	CHAIR..... 1	2	
[E] A table?	TABLE 1	2	
[F] A sofa?	SOFA..... 1	2	
[G] A bed?	BED 1	2	
[H] A kitchen cupboard/cabinet?	KITCHEN CUPBOARD/CABINET 1	2	
[I] A water storage tank?	WATER STORAGE TANK..... 1	2	
[J] A water storage drum?	WATER STORAGE DRUM..... 1	2	
[K] A clothes closet/wardrobe?	CLOTHES CLOSET/WARDROBE 1	2	
HC8. Does your household have electricity?	YES, INTERCONNECTED GRID 1 YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM) 2 NO 3	3 ⇒ HC10	

MICS6.HH. 7

HC9. Does your household have:	YES	NO	
[A] A television?	TELEVISION..... 1	2	
[B] A refrigerator?	REFRIGERATOR..... 1	2	
[C] A gas or electric stove?	GAS OR ELECTRIC STOVE..... 1	2	
[D] A microwave oven?	MICROWAVE OVEN..... 1	2	
[E] An air conditioner?	AIR CONDITIONER..... 1	2	
[F] A fan	FAN..... 1	2	
[G] A washing machine	WASHING MACHINE..... 1	2	
[H] A clothes dryer	CLOTHES DRYER..... 1	2	
[I] A water pump	WATER PUMP..... 1	2	
[J] A water heater	WATER HEATER..... 1	2	
[K] A dishwasher	DISHWASHER..... 1	2	
[L] A generator	GENERATOR..... 1	2	
[M] Any electronic gaming equipment	ELECT. GAMING EQUIPMENT..... 1	2	
[N] Cable service	CABLE SERVICE..... 1	2	
HC10. Does any member of your household own:	YES	NO	
[A] A wristwatch?	WRISTWATCH..... 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, truck or van?	CAR / TRUCK / VAN..... 1	2	
[F] A boat with a motor?	BOAT WITH MOTOR..... 1	2	
[G] A boat without a motor/canoe?	BOAT WITHOUT MOTOR..... 1	2	
HC11. Does any member of your household have a computer or a tablet?	YES..... 1	NO..... 2	
HC12. Does any member of your household have a mobile telephone?	YES..... 1	NO..... 2	
HC13. Does your household have access to internet at home?	YES..... 1	NO..... 2	

<p>HC14. Do you or someone living in this household own this dwelling?</p> <p><i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i></p> <p><i>If 'Rented from someone else', record '2'. If 'living rent-free', record '3'. For other responses, record '6' and specify.</i></p>	<p>OWN 1</p> <p>RENT..... 2</p> <p>RENT-FREE..... 3</p> <p>OTHER (specify) 6</p>	
<p>HC15. Does any member of this household own any land that can be used for agriculture?</p>	<p>YES 1</p> <p>NO 2</p>	2 ⇒ HC17
<p>HC16. How many acres of agricultural land do members of this household own?</p> <p><i>If less than 1, record '00'.</i></p>	<p>ACRES ____</p> <p>95 OR MORE 95</p> <p>DK 98</p>	
<p>HC17. Does this household own any livestock, herds, other farm animals, or poultry?</p>	<p>YES 1</p> <p>NO 2</p>	2 ⇒ HC19
<p>HC18. How many of the following animals does this household have?</p> <p>[A] Milk cows or bulls?</p> <p>[B] Other cattle?</p> <p>[C] Horses, donkeys or mules?</p> <p>[D] Goats?</p> <p>[E] Sheep?</p> <p>[F] Chickens?</p> <p>[G] Pigs?</p> <p>[H] Rabbits?</p> <p><i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i></p>	<p>MILK COWS OR BULLS ____</p> <p>OTHER CATTLE..... ____</p> <p>HORSES, DONKEYS OR MULES..... ____</p> <p>GOATS..... ____</p> <p>SHEEP ____</p> <p>CHICKENS ____</p> <p>PIGS ____</p> <p>RABBITS ____</p>	
<p>HC19. Does any member of this household have a bank account?</p>	<p>YES 1</p> <p>NO 2</p>	

MICS6.HH. 9

SOCIAL TRANSFERS					ST
ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.					
	[A] SOCIAL PENSION FOR THE ELDERLY	[B] REHABILITATION ASSISTANCE GRANT	[C] COMPASSIONATE ASSISTANCE GRANT	[D] EDUCATION AND SOCIAL INTERVENTION (ESI) GRANT	[E] PATH
ST2. Are you aware of (<i>name of programme</i>)?	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>
	ST3	ST3	ST3	ST3	ST3
	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>
	[B]	[C]	[D]	[E]	[F]
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>	YES 1 <input type="radio"/>
	ST4	ST4	ST4	ST4	ST4
	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>	NO 2 <input type="radio"/>
	[B]	[C]	[D]	[E]	[F]
	DK 8 <input type="radio"/>	DK 8 <input type="radio"/>	DK 8 <input type="radio"/>	DK 8 <input type="radio"/>	DK 8 <input type="radio"/>
	[B]	[C]	[D]	[E]	[F]
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)?	MONTHS AGO... 1 ____ <input type="radio"/>	MONTHS AGO ... 1 ____ <input type="radio"/>	MONTHS AGO .. 1 ____ <input type="radio"/>	MONTHS AGO ... 1 ____ <input type="radio"/>	MONTHS AGO ... 1 ____ <input type="radio"/>
	[B]	[C]	[D]	[E]	[F]
	YEARS AGO 2 ____ <input type="radio"/>	YEARS AGO 2 ____ <input type="radio"/>	YEARS AGO 2 ____ <input type="radio"/>	YEARS AGO 2 ____ <input type="radio"/>	YEARS AGO 2 ____ <input type="radio"/>
	[B]	[C]	[D]	[E]	[F]
<i>If less than one month, record '1' and record '00' in Months.</i>	DK 998 <input type="radio"/>	DK 998 <input type="radio"/>	DK 998 <input type="radio"/>	DK 998 <input type="radio"/>	DK 998 <input type="radio"/>
<i>If less than 12 months, record '1' and record in Months.</i>	[B]	[C]	[D]	[E]	[F]
<i>If 1 year/12 months or more, record '2' and record in Years.</i>					

SOCIAL TRANSFERS						ST
ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.						
	[F] NATIONAL HEALTH FUND (NHF)	[G] COVID-19 GENERAL GRANT	[H] COVID-19 COMPASSIONATE GRANT	[I] SUPPORTING EMPLOYEES WITH THE TRANSFER OF CASH (SET CASH)	[J] COVID-19 PATH GRANT	
ST2. Are you aware of (<i>name of programme</i>)?	YES 1 ⚡ ST3	YES 1 ⚡ ST3	YES 1 ⚡ ST3	YES 1 ⚡ ST3	YES 1 ⚡ ST3	
	NO 2 ⚡ [G]	NO 2 ⚡ [H]	NO 2 ⚡ [I]	NO 2 ⚡ [J]	NO 2 ⚡ [K]	
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES 1 ⚡ ST4	YES 1 ⚡ ST4	YES 1 ⚡ ST4	YES 1 ⚡ ST4	YES 1 ⚡ ST4	
	NO 2 ⚡ [G]	NO 2 ⚡ [H]	NO 2 ⚡ [I]	NO 2 ⚡ [J]	NO 2 ⚡ [K]	
	DK 8 ⚡ [G]	DK 8 ⚡ [H]	DK 8 ⚡ [I]	DK 8 ⚡ [J]	DK 8 ⚡ [K]	
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)? <i>If less than one month, record '1' and record '00' in Months.</i> <i>If less than 12 months, record '1' and record in Months.</i> <i>If 1 year/12 months or more, record '2' and record in Years.</i>	MONTHS AGO... 1 ____ ⚡ [G]	MONTHS AGO... 1 ____ ⚡ [H]	MONTHS AGO... 1 ____ ⚡ [I]	MONTHS AGO... 1 ____ ⚡ [J]	MONTHS AGO... 1 ____ ⚡ [K]	
	YEARS AGO 2 ____ ⚡ [G]	YEARS AGO 2 ____ ⚡ [H]	YEARS AGO 2 ____ ⚡ [I]	YEARS AGO 2 ____ ⚡ [J]	YEARS AGO 2 ____ ⚡ [K]	
	DK 998 ⚡ [G]	DK 998 ⚡ [H]	DK 998 ⚡ [I]	DK 998 ⚡ [J]	DK 998 ⚡ [K]	

SOCIAL TRANSFERS						ST
ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.						
	[K] COVID-19 STUDENT LOAN RELIEF	[L] COVID-19 CARE PACKAGES FROM THE GOVERNMENT	[M] COVID-19 CARE PACKAGES FROM NGOS OR OTHER ORGANIZATIONS	[N] ANY RETIREMENT PENSION	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME	
ST2. Are you aware of (<i>name of programme</i>)?	YES 1 ☺ ST3	YES 1 ☺ ST3	YES 1 ☺ ST3	YES 1 ☺ ST3	YES (<i>specify</i>) 1 ☺ ST3	
	NO 2 ☺ [L]	NO 2 ☺ [M]	NO 2 ☺ [N]	NO 2 ☺ [X]	NO 2 ☺ End	
ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)?	YES 1 ☺ ST4	YES 1 ☺ ST4	YES 1 ☺ ST4	YES 1 ☺ ST4	YES 1 ☺ ST4	
	NO 2 ☺ [L]	NO 2 ☺ [M]	NO 2 ☺ [N]	NO 2 ☺ [X]	NO 2 ☺ End	
	DK 8 ☺ [L]	DK 8 ☺ [M]	DK 8 ☺ [N]	DK 8 ☺ [X]	DK 8 ☺ End	
ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)? <i>If less than one month, record '1' and record '00' in Months.</i> <i>If less than 12 months, record '1' and record in Months.</i> <i>If 1 year/12 months or more, record '2' and record in Years.</i>	MONTHS AGO... 1 ____ ☺ [L]	MONTHS AGO ... 1 ____ ☺ [M]	MONTHS AGO .. 1 ____ ☺ [N]	MONTHS AGO ... 1 ____ ☺ [X]	MONTHS AGO ... 1 ____ ☺ End	
	YEARS AGO 2 ____ ☺	YEARS AGO 2 ____ ☺	YEARS AGO 2 ____ ☺	YEARS AGO 2 ____ ☺	YEARS AGO 2 ____ ☺	
	DK 998 [L]	DK 998 [M]	DK 998 [N]	DK 998 [X]	DK 998 End	

HOUSEHOLD ENERGY USE		EU
EU1. In your household, what type of cookstove is <u>mainly</u> used for <u>cooking</u> ?	ELECTRIC STOVE 01	01 ⇒ EU5
	SOLAR COOKER..... 02	02 ⇒ EU5
	LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE 03	03 ⇒ EU5
	BIOGAS STOVE 05	05 ⇒ EU5
	LIQUID FUEL/KEROSENE STOVE..... 06	06 ⇒ EU4
	MANUFACTURED SOLID FUEL STOVE/COAL STOVE..... 07	
	TRADITIONAL SOLID FUEL STOVE/RIM 08	
	THREE STONE STOVE / OPEN FIRE/WOOD FIRE..... 09	09 ⇒ EU4
	OTHER (<i>specify</i>) 96	96 ⇒ EU4
EU2. Does it have a chimney?	NO FOOD COOKED IN HOUSEHOLD 97	97 ⇒ EU6
	YES..... 1	
	NO 2	
EU3. Does it have a fan?	DK 8	
	YES..... 1	
	NO 2	
EU4. What type of fuel or energy source is used in this cookstove? <i>If more than one, record the main energy source for this cookstove.</i>	DK 8	
	ALCOHOL / ETHANOL 01	
	GASOLINE / DIESEL..... 02	
	KEROSENE 03	
	COAL / LIGNITE..... 04	
	CHARCOAL 05	
	WOOD..... 06	
	CROP RESIDUE / GRASS / STRAW / SHRUBS..... 07	
	ANIMAL DUNG / WASTE 08	
	PROCESSED BIOMASS (PELLETS) OR WOODCHIPS..... 09	
	GARBAGE / PLASTIC..... 10	
	SAWDUST 11	
	OTHER (<i>specify</i>) 96	
EU5. Is the cooking usually done in the house, in a separate building, or outdoors? <i>If in main house, probe to determine if cooking is done in a separate room.</i> <i>If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.</i>	IN MAIN HOUSE NO SEPARATE ROOM..... 1	
	IN A SEPARATE ROOM 2	
	IN A SEPARATE BUILDING 3	
	OUTDOORS OPEN AIR 4	
	ON VERANDA OR COVERED PORCH..... 5	
	OTHER (<i>specify</i>) 6	

EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?	ELECTRICITY	01
	SOLAR LANTERN	02
	RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN	03
	BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN	04
	BIOGAS LAMP	05
	GASOLINE LAMP	06
	KEROSENE LAMP	07
	CHARCOAL	08
	WOOD	09
	CROP RESIDUE / GRASS / STRAW / SHRUBS	10
	ANIMAL DUNG / WASTE	11
	OIL LAMP	12
	CANDLE	13
	OTHER (<i>specify</i>)	96
	NO LIGHTING IN HOUSEHOLD	97

MICS6.HH. 14

WATER AND SANITATION		WS
<p>WS1. What is the <u>main</u> source of drinking water used by members of your household?</p> <p><i>If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).</i></p>	PIPED WATER	
	PIPED INTO DWELLING	11 ⇒ WS7
	PIPED TO YARD / PLOT	12 ⇒ WS7
	PIPED TO NEIGHBOUR	13 ⇒ WS3
	PUBLIC TAP / STANDPIPE.....	14 ⇒ WS3
	TUBE WELL / BOREHOLE	21 ⇒ WS3
	DUG WELL	
	PROTECTED WELL.....	31 ⇒ WS3
	UNPROTECTED WELL	32 ⇒ WS3
	SPRING	
	PROTECTED SPRING.....	41 ⇒ WS3
	UNPROTECTED SPRING	42 ⇒ WS3
	RAINWATER.....	51 ⇒ WS3
	TANKER-TRUCK.....	61 ⇒ WS4
	VEHICLE WITH SMALL TANK	71 ⇒ WS4
	WATER KIOSK	72 ⇒ WS4
	SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)	81 ⇒ WS3
	PACKAGED WATER	
	BOTTLED WATER	91
	SACHET WATER	92
	OTHER (specify).....	96 ⇒ WS3

MICS6.HH. 15

<p>WS2. What is the <u>main</u> source of water used by members of your household for other purposes such as cooking and handwashing?</p> <p><i>If unclear, probe to identify the place from which members of this household most often collect water for other purposes.</i></p>	<p>PIPED WATER</p> <p>PIPED INTO DWELLING11</p> <p>PIPED TO YARD / PLOT12</p> <p>PIPED TO NEIGHBOUR.....13</p> <p>PUBLIC TAP / STANDPIPE.....14</p> <p>TUBE WELL / BOREHOLE.....21</p> <p>DUG WELL</p> <p>PROTECTED WELL.....31</p> <p>UNPROTECTED WELL.....32</p> <p>SPRING</p> <p>PROTECTED SPRING.....41</p> <p>UNPROTECTED SPRING.....42</p> <p>RAINWATER.....51</p> <p>TANKER-TRUCK.....61</p> <p>VEHICLE WITH SMALL TANK71</p> <p>WATER KIOSK72</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)81</p> <p>OTHER (specify).....96</p>	<p>11 ⇨ WS7</p> <p>12 ⇨ WS7</p> <p>61 ⇨ WS4</p> <p>71 ⇨ WS4</p> <p>72 ⇨ WS4</p>
<p>WS3. Where is that water source located?</p>	<p>IN OWN DWELLING1</p> <p>IN OWN YARD / PLOT.....2</p> <p>ELSEWHERE.....3</p>	<p>1 ⇨ WS7</p> <p>2 ⇨ WS7</p>
<p>WS4. How long does it take for members of your household to go there, get water, and come back?</p>	<p>MEMBERS DO NOT COLLECT000</p> <p>NUMBER OF MINUTES.....__ __</p> <p>DK.....998</p>	<p>000 ⇨ WS7</p>
<p>WS5. Who usually goes to this source to collect the water for your household?</p> <p><i>Record the name of the person and copy the line number of this person from the LIST OF HOUSEHOLD MEMBERS Module.</i></p>	<p>NAME.....</p> <p>LINE NUMBER__ __</p>	
<p>WS6. Since last (<i>day of the week</i>), how many times has this person collected water?</p>	<p>NUMBER OF TIMES.....__ __</p> <p>DK.....98</p>	
<p>WS7. In the last month, has there been any time when your household did not have sufficient quantities of drinking water?</p>	<p>YES, AT LEAST ONCE.....1</p> <p>NO, ALWAYS SUFFICIENT2</p> <p>DK.....8</p>	<p>2 ⇨ WS9</p> <p>8 ⇨ WS9</p>
<p>WS8. What was the main reason that you were unable to access water in sufficient quantities when needed?</p>	<p>WATER NOT AVAILABLE FROM SOURCE....1</p> <p>WATER TOO EXPENSIVE.....2</p> <p>BLE3</p> <p>OTHER (specify).....6</p> <p>DK.....8</p>	

WS9. Do you or any other member of this household do anything to the water to make it safer to drink?	YES1 NO2 DK8	2 ⇒ <i>WS11</i> 8 ⇒ <i>WS11</i>
WS10. What do you usually do to make the water safer to drink? <i>Probe:</i> Anything else? <i>Record all methods mentioned.</i>	BOILA ADD BLEACH / CHLORINEB STRAIN IT THROUGH A CLOTHC USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.)D SOLAR DISINFECTIONE LET IT STAND AND SETTLEF OTHER (<i>specify</i>)X DKZ	
WS11. What kind of toilet facility do members of your household usually use? <i>If 'Flush' or 'Pour flush', probe:</i> Where does it flush to? <i>If not possible to determine, ask permission to observe the facility.</i>	FLUSH / POUR FLUSH FLUSH TO PIPED SEWER SYSTEM11 FLUSH TO SEPTIC TANK12 FLUSH TO PIT LATRINE13 FLUSH TO OPEN DRAIN14 FLUSH TO DK WHERE18 PIT LATRINE VENTILATED IMPROVED PIT LATRINE21 PIT LATRINE WITH SLAB22 PIT LATRINE WITHOUT SLAB / OPEN PIT23 COMPOSTING TOILET31 BUCKET41 HANGING TOILET / HANGING LATRINE51 NO FACILITY / BUSH / FIELD95 OTHER (<i>specify</i>)96	11 ⇒ <i>WS14</i> 14 ⇒ <i>WS14</i> 18 ⇒ <i>WS14</i> 41 ⇒ <i>WS14</i> 51 ⇒ <i>WS14</i> 95 ⇒ <i>End</i> 96 ⇒ <i>WS14</i>
WS12. Has your (<i>answer from WS11</i>) ever been emptied?	YES, EMPTIED1 NO, NEVER EMPTIED4 DK8	 4 ⇒ <i>WS14</i> 8 ⇒ <i>WS14</i>

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<p>WS13. The last time it was emptied, where were the contents emptied to?</p> <p><i>Probe:</i> Was it removed by a service provider?</p>	<p>REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT 1 BURIED IN A COVERED PIT 2 TO DON'T KNOW WHERE..... 3</p> <p>EMPTIED BY HOUSEHOLD BURIED IN A COVERED PIT 4 TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE..... 5</p> <p>OTHER (<i>specify</i>) 6</p> <p>DK..... 8</p>	
<p>WS14. Where is this toilet facility located?</p>	<p>IN OWN DWELLING 1 IN OWN YARD / PLOT..... 2 ELSEWHERE 3</p>	
<p>WS15. Do you share this facility with others who are not members of your household?</p>	<p>YES 1 NO 2</p>	<p>2⇒End</p>
<p>WS16. 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?</p>	<p>SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC)..... 1 SHARED WITH GENERAL PUBLIC..... 2</p>	<p>2⇒End</p>
<p>WS17. How many households in total use this toilet facility, including your own household?</p>	<p>NUMBER OF HOUSEHOLDS (IF LESS THAN 10) <u>0</u> ..</p> <p>TEN OR MORE HOUSEHOLDS 10</p> <p>DK..... 98</p>	

MICS6.HH. 18

HANDWASHING		HW
<p>HW1. We would like to learn about where members of this household wash their hands.</p> <p>Can you please show me where members of your household <u>most often</u> wash their hands?</p> <p><i>Record result and observation.</i></p>	<p>OBSERVED</p> <p>FIXED FACILITY OBSERVED (SINK / TAP)</p> <p>IN DWELLING1</p> <p>IN YARD / PLOT2</p> <p>MOBILE OBJECT OBSERVED (BUCKET / JUG / BASIN)3</p> <p>NOT OBSERVED</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>NO PERMISSION TO SEE5</p> <p>OTHER REASON (<i>specify</i>)6</p>	<p>4 ⇒ HW5</p> <p>5 ⇒ HW4</p> <p>6 ⇒ HW5</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 AVAILABLE1</p> <p>WATER IS NOT AVAILABLE2</p>	
<p>HW3. Is soap or detergent present at the place for handwashing?</p>	<p>YES, PRESENT1</p> <p>NO, NOT PRESENT2</p>	<p>1 ⇒ HW7</p> <p>2 ⇒ HW5</p>
<p>HW4. Where do you or other members of your household <u>most often</u> wash your hands?</p>	<p>FIXED FACILITY (SINK / TAP)</p> <p>IN DWELLING1</p> <p>IN YARD / PLOT2</p> <p>MOBILE OBJECT (BUCKET / JUG / BASIN)3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>OTHER (<i>specify</i>)6</p>	
<p>HW5. Do you have any soap or detergent in your house for washing hands?</p>	<p>YES1</p> <p>NO2</p>	<p>2 ⇒ End</p>
<p>HW6. Can you please show it to me?</p>	<p>YES, SHOWN1</p> <p>NO, NOT SHOWN2</p>	<p>2 ⇒ End</p>
<p>HW7. Record your observation.</p> <p><i>Record all that apply.</i></p>	<p>BAR OR LIQUID SOAPA</p> <p>DETERGENT (POWDER / LIQUID / PASTE)B</p>	

HH13. Record the time.	HOUR AND MINUTES : ..																																																													
HH14. Language of the Questionnaire.	ENGLISH 1																																																													
HH15. Language of the Interview.	ENGLISH 1																																																													
HH16. Native language of the Respondent.	ENGLISH 1 SPANISH 2 MANDARIN/CHINESE 3 OTHER LANGUAGE (specify) 6																																																													
HH17. Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE 1 YES, PART OF QUESTIONNAIRE 2 NO, NOT USED 3																																																													
HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:	NO CHILDREN 0 1 CHILD 1 2 OR MORE CHILDREN (NUMBER).....	0 ⇒ HH29 1 ⇒ HH27																																																												
HH19. List each of the children age 5-17 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 5-17 years. Record the line number, name, sex, and age for each child.																																																														
<table border="1"> <thead> <tr> <th>HH20. Rank number</th> <th>HH21. Line number from HL1</th> <th>HH22. Name from HL2</th> <th colspan="2">HH23. Sex from HL4</th> <th>HH24. Age from HL6</th> </tr> <tr> <th>RANK</th> <th>LINE</th> <th>NAME</th> <th>M</th> <th>F</th> <th>AGE</th> </tr> </thead> <tbody> <tr><td>1</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>2</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>3</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>4</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>5</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>6</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>7</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> <tr><td>8</td><td>___</td><td></td><td>1</td><td>2</td><td>___</td></tr> </tbody> </table>	HH20. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HH23. Sex from HL4		HH24. 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	___		
HH20. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HH23. Sex from HL4		HH24. Age from HL6																																																									
RANK	LINE	NAME	M	F	AGE																																																									
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6	___		1	2	___																																																									
7	___		1	2	___																																																									
8	___		1	2	___																																																									

HH25. Check the last digit of the household number (HH2) from the HOUSEHOLD INFORMATION PANEL. This is the number of the row you should go to in the table below.

Check the total number of children age 5-17 years in HH18 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 record the number that appears in the box. This is the rank number (HH20) of the selected child.

LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
	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

HH26. Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.

RANK NUMBER _ _

LINE NUMBER _ _

HH27. (When HH18=1 or when there is a single child age 5-17 in the household):
Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this child from the LIST OF HOUSEHOLD MEMBERS.

NAME

AGE _ _

HH28. Issue a QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the mother/caretaker of this child.

HH29. Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?

YES, AT LEAST ONE WOMAN AGE 15-49.....1
NO2

2⇒HH40

HH30. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.

HH31. Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?

YES, AT LEAST ONE GIRL AGE 15-171
NO2

2⇒HH40

HH32. Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?

YES, AT LEAST ONE GIRL AGE 15-17 WITH
HL20≠901
NO, HL20=90 FOR ALL GIRLS AGE 15-17.....2

2⇒HH40

HH33. As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.

For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (*name(s) of female member(s) age 15-17*) later?

☐ 'Yes' for all girls age 15-17 ⇒ Continue with HH40.

☐ 'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.

☐ 'No' for all girls age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.

HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE.....1 NO2	2⇒HH44A
HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.		

MICS PLUS CONSENT

HH44A. Check HC7[A] and HC12: Does this household have a fixed telephone line or does any member of the household own a mobile phone?	YES, HC7[A]=1 OR HC12=1 1	2 ⇒ HH45
	NO, HC7[A]=2 AND HC12=2 2	

HH44B. Thank you for your participation.

The Planning Institute of Jamaica will be conducting a phone survey about the situation of children, families and households in the future. We would like to invite you to participate in this survey. If you agree to participate, we will ask you to share a phone number we can reach you at and convenient times to contact you. The phone interview will take about 15 minutes, and we may call you a few times over a period of a few months. Participation in this phone survey is voluntary, and even if you agree to participate now, you may decide to withdraw from participation in the future. There will be no costs to you for participating in the phone survey. Please know that all the information you share during future phone interviews will remain strictly confidential, and your phone number will not be shared with anyone outside our team. Would you like to participate?

YES.....1	2 ⇒ HH45
NO.....2	

HH44C. Do you have a personal phone number or does your household have a communal number where you can be reached?	YES.....1	2 ⇒ HH45
	NO.....2	

HH44D. You may share your household communal number, but please, do not share any personal phone numbers that belong to individual members of your household. Please, tell me what is the best phone number to contact you on.

	[P1] BEST NUMBER	[P2] 2 ND NUMBER	[P3] 3 RD NUMBER
HH44E. Ask for and record phone number.	_____	_____	_____
HH44F. Just to confirm, the number is (<i>number from HH44E</i>)?	YES..... 1 NO2 ⇨ HH44E	YES 1 NO2 ⇨ HH44E	YES..... 1 NO.....2 ⇨ HH44E
<i>If no, return to HH44E and correct entry.</i>			
HH44G. Is this a fixed line or a mobile phone number?	FIXED LINE..... 1 MOBILE2	FIXED LINE 1 MOBILE 2	FIXED LINE..... 1 MOBILE2
HH44H. What is the best day of the week and time of the day to call you on this number?	WEEKDAYS MORNING A AFTERNOON B EVENING C OTHER (specify) D WEEKEND MORNING E AFTERNOON F EVENING G OTHER (specify) H OTHER (specify) X	WEEKDAYS MORNING A AFTERNOON B EVENING C OTHER (specify) D WEEKEND MORNING E AFTERNOON F EVENING G OTHER (specify) H OTHER (specify) X	WEEKDAYS MORNING A AFTERNOON B EVENING C OTHER (specify) D WEEKEND MORNING E AFTERNOON F EVENING G OTHER (specify) H OTHER (specify) X
<i>Probe: Any other day or time?</i>			
<i>Record all mentioned.</i>			

Tick here if additional questionnaire used: ☐

- Record '01' in question HH46 (Result of the HOUSEHOLD QUESTIONNAIRE interview),
- Record the name and the line number (from the LIST OF HOUSEHOLD MEMBERS) of the Respondent to the HOUSEHOLD QUESTIONNAIRE interview in HH47,
- Fill the questions HH48 – HH52,
- Thank the respondent for his/her cooperation and then
- Proceed with the administration of the remaining individual questionnaire(s) in this household.

If there is no individual questionnaire to be completed in this household thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

