



**HOUSEHOLD QUESTIONNAIRE**  
Nigeria Multiple Indicator Cluster Survey, 2021



HOUSEHOLD INFORMATION PANEL		HH
<b>HH1.</b> Cluster number: _____	<b>HH2.</b> Household number: _____	
<b>HH3.</b> Interviewer's name and number: NAME _____	<b>HH4.</b> Supervisor's name and number: NAME _____	
<b>HH5.</b> Day / Month / Year of interview: _____ / _____ / 2 0 2 1	<b>HH6.</b> Area:	URBAN ..... 1 RURAL ..... 2
<b>HH7.</b> State name and code: NAME _____	<b>HH8.</b> Is the household selected for Questionnaire for Men?	YES ..... 1 NO ..... 2
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.		<b>HH11.</b> Record the time. HOURS : MINUTES ____ : ____
<p><b>HH12.</b> Hello, my name is (<b>your name</b>). We are from the National Bureau of Statistics. 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 usually takes about <b>45</b> 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 stop the interview, please let me know. May I start now?</p>		
YES ..... 1		1 ⇨ LIST OF HOUSEHOLD MEMBERS
NO / NOT ASKED ..... 2		2 ⇨ HH46
<b>HH46.</b> 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	
<b>HH47.</b> Name and line number of the respondent to Household Questionnaire interview:  NAME _____	<i>To be filled after the Household Questionnaire is completed</i>	<i>To be filled after all the questionnaires are completed</i>
HOUSEHOLD MEMBERS	TOTAL NUMBER	COMPLETED NUMBER
WOMEN AGE 15-49	<b>HH48</b> _____	<b>HH53</b> _____
If household is selected for Questionnaire for Men: MEN AGE 15-49	<b>HH49</b> _____	<b>HH54</b> _____
CHILDREN UNDER AGE 5	<b>HH50</b> _____	<b>HH55</b> _____
CHILDREN AGE 5-17	<b>HH51</b> _____	<b>HH56</b> ZERO ..... 0 ONE ..... 1
	<b>HH52</b> _____	

**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, make sure to probe 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 servants, 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: .....

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?	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.	HL9. Record line number if man, age 15-49 and HH8 is yes.	HL10. Record line number if age 0-4.	HL11. Age 0-17?	HL12. Is (name)'s natural mother alive?	HL13. Does (name)'s natural mother live in this household?	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 STATE 3 IN ANOTHER HOUSEHOLD IN ANOTHER STATE 4 INSTITUTION IN THIS COUNTRY 8 DK	HL16. Is (name)'s natural father alive?  1 YES 2 NO <input type="checkbox"/> 8 DK <input type="checkbox"/> HL20	HL17. Does (name)'s natural father live in this household?  1 YES 2 NO <input type="checkbox"/> 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 STATE 3 IN ANOTHER HOUSEHOLD IN ANOTHER STATE 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	M 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	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	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	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	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	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	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	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	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	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	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	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	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	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	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	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: 01 HEAD  
 Relationship to head of household: 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 SERVANT (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, to next page of the module (Education 2), <u>and</u> to the following Non-formal Education module.		ED3. Age 3 or above?  1 YES 2 NO ∅ Next Line		ED4. Has ( <i>name</i> ) ever attended <u>formal</u> school or any Early Childhood Education programme?  1 YES ∅ 2 NO ED5 Next Line		ED4A. Has ( <i>name</i> ) ever attended <u>non-formal</u> education, such as Qur'anic/Madrasa/Islamic school, trade apprenticeship, basic education/literacy course, or similar organised learning?  1 YES ∅ 2 NO ∅ Next Line 8 DK ∅ Next Line			ED5. What is the highest level and grade or year of <u>formal</u> school ( <i>name</i> ) has ever <u>attended</u> ?  LEVEL: 00 ECCDE ∅ ED7 11 PRIMARY 21 JUNIOR SECONDARY 22 VEI/IEI 31 SENIOR SECONDARY 32 SECONDARY TECHNICAL 41 HIGHER/TERTIARY 98 DK ∅ ED7						ED6. Did ( <i>name</i> ) ever <u>complete</u> that (grade/year)?  1 YES 2 NO 8 DK ED7			ED7. Age 3-24?  1 YES 2 NO ∅ Next Line		ED8. Check ED4: Ever attended <u>formal</u> school or ECE?  1 YES 2 NO ∅ Next Line					
LINE	NAME	AGE	YES	NO	YES	NO	YES	NO	DK	LEVEL						GRADE/YEAR	Y	N	DK	Y	N	Y	N			
01		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
02		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
03		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
04		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
05		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
06		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
07		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
08		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
09		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
10		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
11		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2
12		_____	1	2	1	2	1	2	8	00	11	21	22	31	32	41	98	___	___	1	2	8	1	2	1	2

**Codes for grade/year in ED5, ED10 and ED16**

Primary	Junior Secondary	Vocational enterprise institutions programmes/Innovation Enterprise Institution	Senior Secondary	Secondary Technical	Higher/Tertiary
Primary 1 .....01	JSS 1 .....01	VEI/IEI 1 .....01	SS1 .....01	ST1 .....01	NCE .....01
Primary 2 .....02	JSS 2 .....02	VEI/IEI 2 .....02	SS2 .....02	ST2 .....02	AL/OND .....02
Primary 3 .....03	JSS 3 .....03	VEI/IEI 3 .....03	SS3 .....03	ST3 .....03	Higher Technical/TTC .....03
Primary 4 .....04					HND .....04
Primary 5 .....05					BSc .....05
Primary 6 .....06					Post Graduate .....06

**EDUCATION 2** **ED**

ED1. <i>Line number</i>	ED2. <i>Name and age.</i>		ED9. At any time during the current (2020-2021) school year did ( <i>name</i> ) attend <u>formal</u> school or any Early Childhood Education programme?	ED10. During the current (2020-2021) school year, which level and grade or year of <u>formal</u> school is ( <i>name</i> ) <u>attending</u> ?	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>	ED12. In the current (2020-2021) school year, has ( <i>name</i> ) received any school tuition support?  <i>If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours.</i>	ED13. Who provided the tuition support?  <i>Record all mentioned.</i>	ED14. For the current (2020-2021) school year, has ( <i>name</i> ) 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>	ED15. At any time during the previous (2019-2020) school year did ( <i>name</i> ) attend <u>formal</u> school or any Early Childhood Education programme?	ED16. During that previous (2019-2020) school year a year ago, which level and grade or year did ( <i>name</i> ) <u>attend</u> ?		
			1 YES 2 NO ∅ <i>ED15</i>	LEVEL: 00 ECCDE ∅ <i>ED15</i> 11 PRIMARY 21 JUNIOR SECONDARY 22 VEI/IEI 31 SENIOR SECONDARY 32 SECONDARY TECHNICAL 41 HIGHER/ TERTIARY  98 DK	GRADE/ YEAR: 98 DK	1 YES, PUBLIC (FEDERAL, STATE, LG) 2 NO, RELIGIOUS/ FAITH ORG. 3 NO, PRIVATE 6 NO, OTHER  8 DK	1 YES 2 NO ∅ <i>ED14</i> 8 DK ∅ <i>ED14</i>	A GOVT. / PUBLIC (FEDERAL, STATE, LG) B RELIGIOUS/ FAITH ORG. C PRIVATE. X OTHER Z DK	1 YES 2 NO 8 DK	1 YES 2 NO ∅ <i>Next Line</i> 8 DK ∅ <i>Next Line</i>	LEVEL: 00 ECCDE ∅ <i>Next line</i> 11 PRIMARY 21 JUNIOR SECONDARY 22 VEI/IEI 31 SENIOR SECONDARY 32 SECONDARY TECHNICAL 41 HIGHER/ TERTIARY  98 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	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
02			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
03			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
04			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
05			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
06			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
07			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
08			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
09			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
10			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
11			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	
12			1 2	00 11 21 22 31 32 41 98		1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8	00 11 21 22 31 32 41 98	

**Codes for grade/year in ED5, ED10 and ED16**

Primary	Junior Secondary	Vocational enterprise institutions programmes/Innovation Enterprise Institution	Senior Secondary	Secondary Technical	Higher/Tertiary
Primary 1 .....01	JSS 1 .....01	VEI/IEI 1 .....01	SS1.....01	ST1.....01	NCE ..... 01
Primary 2 .....02	JSS 2 .....02	VEI/IEI 2 .....02	SS2.....02	ST2.....02	AL/OND ..... 02
Primary 3 .....03	JSS 3 .....03	VEI/IEI 3 .....03	SS3.....03	ST3.....03	Higher Technical/TTC..... 03
Primary 4 .....04					HND..... 04
Primary 5 .....05					BSc..... 05
Primary 6 .....06					Post Graduate ..... 06

**NON-FORMAL EDUCATION**

**NF**

NF1. Line number	NF2. Name and age.	NF3. Age 3-18? 1 YES 2 NO ☺ Next Line	NF4. Check ED9: Currently attending formal education? 1 YES ☺ Next Line 2 NO OR BLANK	NF5. Check ED4A: Ever attended non-formal education? 1 YES OR BLANK 2 NO ☺ Next Line 8 DK ☺ Next Line	NF6. At any time since September did (name) attend any non-formal education, such as Qur'anic/Madrassa/Islamic school, trade apprenticeship, basic education/literacy course, or similar organised learning? 1 YES 2 NO ☺ Next Line	NF7. Since September, what type of non-formal education has (name) attended? A QUR'ANIC/MADRASA/ISLAMIC SCHOOL B TRADE/CRAFT APPRENTICESHIP C BASIC EDUCATION/LITERACY COURSE X OTHER Z DK		
LINE	NAME	AGE	YES NO	YES NO	YES NO	YES NO	YES NO	TYPE
01		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
02		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
03		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
04		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
05		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
06		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
07		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
08		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
09		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
10		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
11		___	1 2	1 2	1 2	1 2	1 2	A B C X Z
12		___	1 2	1 2	1 2	1 2	1 2	A B C X Z

**HOUSEHOLD CHARACTERISTICS**

**HC**

<p><b>HC1A.</b> What is the religion of (<i>name of the head of the household from HL2</i>)?</p>	<p>CHRISTIANITY ..... 1                  ISLAM ..... 2                  TRADITIONAL ..... 3</p> <p>OTHER RELIGION                  (<i>specify</i>) ..... 6</p> <p>NO RELIGION..... 7</p>	
<p><b>HC1B.</b> What is the mother tongue or native language of (<i>name of the head of the household from HL2</i>)?</p>	<p>HAUSA ..... 11                  IGBO ..... 12                  YORUBA ..... 13                  FULANI ..... 14                  KANURI ..... 15                  IJAW ..... 16                  TIV ..... 17                  IBIBIO..... 18                  EDO ..... 19</p> <p>OTHER LANGUAGE                  (<i>specify</i>) ..... 96</p>	
<p><b>HC2.</b> To what ethnic group does (<i>name of the head of the household from HL2</i>) belong?</p>	<p>HAUSA ..... 11                  IGBO ..... 12                  YORUBA ..... 13                  FULANI ..... 14                  KANURI ..... 15                  IJAW ..... 16                  TIV ..... 17                  IBIBIO..... 18                  EDO ..... 19</p> <p>OTHER LANGUAGE                  (<i>specify</i>) ..... 96</p>	
<p><b>HC3.</b> How many rooms do members of this household usually use for sleeping?</p>	<p>NUMBER OF ROOMS ..... __ __</p>	
<p><b>HC4.</b> Main material of the dwelling floor.</p> <p><i>Record observation.</i></p> <p><i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i></p>	<p><b>NATURAL FLOOR</b>                  EARTH / SAND ..... 11                  DUNG ..... 12</p> <p><b>RUDIMENTARY FLOOR</b>                  WOOD PLANKS ..... 21                  PALM / BAMBOO ..... 22</p> <p><b>FINISHED FLOOR</b>                  PARQUET OR POLISHED WOOD ..... 31                  VINYL OR ASPHALT STRIPS ..... 32                  CERAMIC TILES..... 33                  CEMENT ..... 34                  CARPET (WALL-TO-WALL) ..... 35</p> <p>OTHER (<i>specify</i>) ..... 96</p>	

<p><b>HC5. Main material of the roof.</b></p> <p><i>Record observation.</i></p>	<p>NO ROOF..... 11</p> <p><b>NATURAL ROOFING</b></p> <p>THATCH / PALM LEAF..... 12</p> <p><b>RUDIMENTARY ROOFING</b></p> <p>RUSTIC MAT ..... 21</p> <p>PALM / BAMBOO ..... 22</p> <p>WOOD PLANKS..... 23</p> <p>CARDBOARD ..... 24</p> <p><b>FINISHED ROOFING</b></p> <p>METAL / TIN..... 31</p> <p>WOOD..... 32</p> <p>CALAMINE / CEMENT FIBRE..... 33</p> <p>CERAMIC TILES..... 34</p> <p>CEMENT..... 35</p> <p>ROOFING SHINGLES ..... 36</p> <p>OTHER (<i>specify</i>) _____ 96</p>	
<p><b>HC6. Main material of the exterior walls.</b></p> <p><i>Record observation.</i></p>	<p>NO WALLS..... 11</p> <p><b>NATURAL WALLS</b></p> <p>CANE / PALM / TRUNKS ..... 12</p> <p>DIRT..... 13</p> <p><b>RUDIMENTARY WALLS</b></p> <p>BAMBOO WITH MUD..... 21</p> <p>STONE WITH MUD ..... 22</p> <p>UNCOVERED ADOBE..... 23</p> <p>PLYWOOD ..... 24</p> <p>CARDBOARD ..... 25</p> <p>REUSED WOOD..... 26</p> <p><b>FINISHED WALLS</b></p> <p>CEMENT..... 31</p> <p>STONE WITH LIME / CEMENT ..... 32</p> <p>BRICKS..... 33</p> <p>CEMENT BLOCKS..... 34</p> <p>COVERED ADOBE ..... 35</p> <p>WOOD PLANKS / SHINGLES ..... 36</p> <p>OTHER (<i>specify</i>) _____ 96</p>	

<p><b>HC7.</b> Does your household have:</p> <p>[A] Non-mobile telephone?</p> <p>[B] A radio?</p> <p>[C] A sewing machine?</p> <p>[D] A clock?</p> <p>[E] Generator?</p> <p>[F] A manufactured bed?</p> <p>[G] A cushioned chair?</p> <p>[H] Bed?</p> <p>[I] Cupboard?</p>	<p style="text-align: right;">YES NO</p> <p>NON-MOBILE TELEPHONE..... 1 2</p> <p>RADIO ..... 1 2</p> <p>A SEWING MACHINE..... 1 2</p> <p>A CLOCK..... 1 2</p> <p>GENERATOR ..... 1 2</p> <p>A MANUFACTURED BED..... 1 2</p> <p>A CUSHIONED CHAIR ..... 1 2</p> <p>BED..... 1 2</p> <p>CUPBOARD ..... 1 2</p>	
<p><b>HC8.</b> Does your household have electricity?</p> <p><i>If yes, probe on what is the <u>main</u> source of electricity.</i></p>	<p>YES, INTERCONNECTED GRID ..... 1</p> <p>YES, OFF-GRID (GENERATOR/INVERTER/SOLAR) ..... 2</p> <p>NO..... 3</p>	<p>3 ⇒ HC10</p>
<p><b>HC9.</b> Does your household have the following items that run on electricity?</p> <p>[A] A television?</p> <p>[B] A refrigerator?</p> <p>[C] Air conditioner?</p> <p>[D] A fan?</p> <p>[E] A water heater?</p> <p>[F] VCR, VCD, DVD?</p> <p>[G] A blender, mixer or food processor?</p> <p>[H] Electric iron?</p>	<p style="text-align: right;">YES NO</p> <p>TELEVISION ..... 1 2</p> <p>REFRIGERATOR ..... 1 2</p> <p>AIR CONDITIONER ..... 1 2</p> <p>A FAN..... 1 2</p> <p>A WATER HEATER..... 1 2</p> <p>VCR, VCD, DVD ..... 1 2</p> <p>A BLENDER/MIXER ..... 1 2</p> <p>ELECTRIC IRON..... 1 2</p>	



	YES	NO	
<b>HC10.</b> Does any member of your household own:			
[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 tricycle (KEKE-NAPEP)?	TRICYCLE (KEKE-NAPEP) ..... 1	2	
<b>HC11.</b> Does any member of your household have a computer or a tablet?	YES ..... 1	NO..... 2	
<b>HC12.</b> Does any member of your household have a mobile telephone?	YES ..... 1	NO..... 2	
<b>HC13.</b> Does your household have access to internet at home?	YES ..... 1	NO..... 2	
<b>HC14.</b> Do you or someone living in this household own this dwelling?  <i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i>  <i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i>	OWN ..... 1 RENT ..... 2  OTHER ( <i>specify</i> ) ..... 6		
<b>HC15.</b> Does any member of this household own any land that can be used for agriculture?	YES ..... 1 NO..... 2		2⇒HC17
<b>HC16.</b> How many plots, acres or hectares of agricultural land do members of this household own?  <i>First record the unit of measurement. If size is less than 1, record '00'. If 95 or more, record '95'. If unknown, record '998'.</i>	PLOTS.....1 ___ ___ ACRES .....2 ___ ___ HECTARES .....3 ___ ___ DK..... 998		
<b>HC17.</b> Does this household own any livestock, herds, other farm animals, or poultry?	YES ..... 1 NO..... 2		2⇒HC19

<p><b>HC18.</b> 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] Camels?</p> <p>[I] Ducks?</p> <p>[K] Cultured fish?</p> <p>[L] Rabbits</p> <p>[M] Grass cutters?</p> <p>[N] Quails?</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>CAMELS..... __ __</p> <p>DUCKS ..... __ __</p> <p>CULTURED FISH ..... __ __</p> <p>RABBIT ..... __ __</p> <p>GRASS CUTTER..... __ __</p> <p>QUAIL ..... __ __</p>	
<p><b>HC19.</b> Does any member of this household have a bank account?</p>	<p>YES ..... 1</p> <p>NO..... 2</p>	

**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] N-POWER CONDITIONAL CASH TRANSFER	[B] HOUSEHOLD UPLIFTING PROGRAMME (HUP) – “BETA DON COME”	[C] ANY RETIREMENT PENSION	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME
<b>ST2.</b> Are you aware of ( <i>name of programme</i> )?	YES..... 1 ☺ ST3 NO ..... 2 ☺ [B]	YES ..... 1 ☺ ST3 NO ..... 2 ☺ [C]	YES ..... 1 ☺ ST3 NO..... 2 ☺ [X]	YES ..... 1 ☺ ST3 NO ..... 2 ☺ [END]
<b>ST3.</b> Has your household or anyone in your household received assistance through ( <i>name of programme</i> )?	YES..... 1 ☺ ST4 NO ..... 2 ☺ [B] DK ..... 8 ☺ [B]	YES ..... 1 ☺ ST4 NO ..... 2 ☺ [C] DK ..... 8 ☺ [C]	YES ..... 1 ☺ ST4 NO..... 2 ☺ [X] DK..... 8 ☺ [X]	YES ..... 1 ☺ ST4 NO ..... 2 ☺ [END] DK ..... 8 ☺ [END]
<b>ST4.</b> 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 ___ ☺ [B] YEARS AGO ..... 2 ___ ☺ [B] DK ..... 998 ☺ [B]	MONTHS AGO .... 1 ___ ☺ [C] YEARS AGO ..... 2 ___ ☺ [C] DK ..... 998 ☺ [C]	MONTHS AGO .... 1 ___ ☺ [X] YEARS AGO ..... 2 ___ ☺ [X] DK ..... 998 ☺ [X]	MONTHS AGO .... 1 ___ ☺ [END] YEARS AGO ..... 2 ___ ☺ [END] DK ..... 998 ☺ [END]

**HOUSEHOLD ENERGY USE**
**EU**

<p><b>EU1.</b> In your household, what type of cookstove is <u>mainly</u> used for <u>cooking</u>?</p>	<p>ELECTRIC STOVE..... 01  SOLAR COOKER ..... 02  LIQUEFIED PETROLEUM GAS (LPG)/  COOKING GAS STOVE ..... 03  PIPED NATURAL GAS STOVE..... 04  BIOGAS STOVE ..... 05  LIQUID FUEL STOVE ..... 06  MANUFACTURED SOLID FUEL STOVE ..... 07  TRADITIONAL SOLID FUEL STOVE ..... 08  THREE STONE STOVE / OPEN FIRE ..... 09    OTHER (<i>specify</i>) _____ 96    NO FOOD COOKED IN  HOUSEHOLD ..... 97</p>	<p>01 ⇒EU5  02 ⇒EU5  03 ⇒EU5  04 ⇒EU5  05 ⇒EU5  06 ⇒EU4  09 ⇒EU4  96 ⇒EU4  97 ⇒EU9</p>
<p><b>EU2.</b> Does it have a chimney?</p>	<p>YES ..... 1  NO ..... 2    DK ..... 8</p>	
<p><b>EU3.</b> Does it have a fan?</p>	<p>YES ..... 1  NO ..... 2    DK ..... 8</p>	<p>⇒EU4</p>
<p><b>EU4.</b> 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></p>	<p>GASOLINE / DIESEL ..... 02  KEROSENE / PARAFFIN ..... 03  COAL / LIGNITE ..... 04  CHARCOAL ..... 05  WOOD..... 06  CROP RESIDUE / GRASS /  STRAW / SHRUBS ..... 07  ANIMAL DUNG / WASTE..... 08  PROCESSED BIOMASS (PELLETS) OR  WOODCHIPS ..... 09  SAWDUST ..... 11    OTHER (<i>specify</i>) _____ 96</p>	
<p><b>EU5.</b> 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></p>	<p>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</p>	

<p><b>EU9.</b> At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p>	<p>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 OR PARAFFIN 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</p>	
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**FOOD INSECURITY EXPERIENCE (COVID-19 VERSION/1 MONTH VERSION)**

**FE**

<p><b>FE1.</b> Now I would like to ask you some questions about food. During the last 1 year, was there a time when you or others in your household worried about not having enough food to eat because of a lack of money or other resources?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	<p>2⇒FE2</p>
<p><b>FE1A.</b> Was this specifically due to the COVID-19 crisis?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	
<p><b>FE1B.</b> Did this happen in the last 1 month?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	
<p><b>FE2.</b> During the last 1 year, was there a time when you or others in your household were unable to eat healthy and nutritious food because of a lack of money or other resources?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	<p>2⇒FE3</p>
<p><b>FE2A.</b> Was this specifically due to the COVID-19 crisis?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	
<p><b>FE2B.</b> Did this happen in the last 1 month?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	
<p><b>FE3.</b> During the last 1 year, was there a time when you or others in your household ate only a few kinds of foods because of a lack of money or other resources?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	<p>2⇒FE4</p>
<p><b>FE3A.</b> Was this specifically due to the COVID-19 crisis?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	
<p><b>FE3B.</b> Did this happen in the last 1 month?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	
<p><b>FE4.</b> During the last 1 year, was there a time when you or others in your household had to skip a meal because there was not enough money or other resources to get food?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	<p>2⇒FE5</p>
<p><b>FE4A.</b> Was this specifically due to the COVID-19 crisis?</p>	<p>YES ..... 1                  NO..... 2                  DK..... 8</p>	

<b>FE4B.</b> Did this happen in the last 1 month?	YES ..... 1 NO..... 2  DK..... 8	
<b>FE5.</b> During the last 1 year, was there a time when you or others in your household ate less than you thought you should because of a lack of money or other resources?	YES ..... 1 NO..... 2  DK..... 8	2⇒FE6
<b>FE5A.</b> Was this specifically due to the COVID-19 crisis?	YES ..... 1 NO..... 2  DK..... 8	
<b>FE5B.</b> Did this happen in the last 1 month?	YES ..... 1 NO..... 2  DK..... 8	
<b>FE6.</b> During the last 1 year, was there a time when your household ran out of food because of a lack of money or other resources?	YES ..... 1 NO..... 2  DK..... 8	2⇒FE7
<b>FE6A.</b> Was this specifically due to the COVID-19 crisis?	YES ..... 1 NO..... 2  DK..... 8	
<b>FE6B.</b> Did this happen in the last 1 month?	YES ..... 1 NO..... 2  DK..... 8	2⇒FE7  8⇒FE7
<b>FE6C.</b> How often did this happen during the last 1 month? Would you say: rarely, sometimes or often?  <i>Probe:</i> Would you say 1-2 times, 3-10 times or more than 10 times during the last 1 month?	RARELY (1 OR 2 TIMES)..... 1 SOMETIMES (3-10 TIMES)..... 2 OFTEN (MORE THAN 10 TIMES) ..... 3	
<b>FE7.</b> During the last 1 year, was there a time when you or others in your household were hungry but did not eat because there was not enough money or other resources for food?	YES ..... 1 NO..... 2  DK..... 8	2⇒FE8
<b>FE7A.</b> Was this specifically due to the COVID-19 crisis?	YES ..... 1 NO..... 2  DK..... 8	
<b>FE7B.</b> Did this happen in the last 1 month?	YES ..... 1 NO..... 2  DK..... 8	2⇒FE8  8⇒FE8
<b>FE7C.</b> How often did this happen during the last 1 month? Would you say: rarely, sometimes or often?  <i>Probe:</i> Would you say 1-2 times, 3-10 times or more than 10 times during the last 1 month?	RARELY (1 OR 2 TIMES)..... 1 SOMETIMES (3-10 TIMES) ..... 2 OFTEN (MORE THAN 10 TIMES) ..... 3	

<b>FE8.</b> During the last 1 year, was there a time when you or others in your household went without eating for a whole day because of a lack of money or other resources?	YES ..... 1 NO..... 2  DK..... 8	2⇒End
<b>FE8A.</b> Was this specifically due to the COVID-19 crisis?	YES ..... 1 NO..... 2  DK..... 8	
<b>FE8B.</b> Did this happen in the last 1 month?	YES ..... 1 NO..... 2  DK..... 8	2⇒End  8⇒End
<b>FE8C.</b> How often did this happen during the last 1 month? Would you say: rarely, sometimes or often?  <i>Probe:</i> Would you say 1-2 times, 3-10 times or more than 10 times during the last 1 month?	RARELY (1 OR 2 TIMES)..... 1 SOMETIMES (3-10 TIMES) ..... 2 OFTEN (MORE THAN 10 TIMES) ..... 3	



**WS1.** What is the main source of drinking water used by members of your household?

*If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).*

<b>PIPED WATER</b>		
PIPED INTO DWELLING .....	11	11 ⇨WS7
PIPED TO YARD / PLOT .....	12	12 ⇨WS7
PIPED TO NEIGHBOUR.....	13	13 ⇨WS3
PUBLIC TAP / STANDPIPE .....	14	14 ⇨WS3
TUBE WELL / BOREHOLE.....	21	21 ⇨WS3
<b>DUG WELL</b>		
PROTECTED WELL .....	31	31 ⇨WS3
UNPROTECTED WELL.....	32	32 ⇨WS3
<b>SPRING</b>		
PROTECTED SPRING .....	41	41 ⇨WS3
UNPROTECTED SPRING.....	42	42 ⇨WS3
RAINWATER.....	51	51 ⇨WS3
TANKER-TRUCK .....	61	61 ⇨WS4
CART WITH SMALL TANK .....	71	71 ⇨WS4
WATER KIOSK .....	72	72 ⇨WS4
SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL) .....	81	81 ⇨WS3
<b>PACKAGED WATER</b>		
BOTTLED WATER.....	91	
SACHET WATER .....	92	
OTHER ( <i>specify</i> ) .....	96	96 ⇨WS3

<p><b>WS2.</b> 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><b>PIPED WATER</b></p> <p>PIPED INTO DWELLING ..... 11</p> <p>PIPED TO YARD / PLOT ..... 12</p> <p>PIPED TO NEIGHBOUR..... 13</p> <p>PUBLIC TAP / STANDPIPE ..... 14</p> <p>TUBE WELL / BOREHOLE..... 21</p> <p><b>DUG WELL</b></p> <p>PROTECTED WELL ..... 31</p> <p>UNPROTECTED WELL..... 32</p> <p><b>SPRING</b></p> <p>PROTECTED SPRING ..... 41</p> <p>UNPROTECTED SPRING..... 42</p> <p>RAINWATER..... 51</p> <p>TANKER-TRUCK ..... 61</p> <p>CART WITH SMALL TANK ..... 71</p> <p>WATER KIOSK ..... 72</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL) ..... 81</p> <p>OTHER (<i>specify</i>) _____ 96</p>	<p>11 ⇒WS7</p> <p>12 ⇒WS7</p> <p>61 ⇒WS4</p> <p>71 ⇒WS4</p> <p>72 ⇒WS4</p>
<p><b>WS3.</b> Where is that water source located?</p>	<p>IN OWN DWELLING ..... 1</p> <p>IN OWN YARD / PLOT ..... 2</p> <p>ELSEWHERE ..... 3</p>	<p>1 ⇒WS7</p> <p>2 ⇒WS7</p>
<p><b>WS4.</b> How long does it take for members of your household to go there, get water, and come back?</p>	<p>MEMBERS DO NOT COLLECT ..... 000</p> <p>NUMBER OF MINUTES ..... _ _ _</p> <p>DK ..... 998</p>	<p>000 ⇒WS7</p>
<p><b>WS5.</b> 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><b>WS6.</b> 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><b>WS7.</b> 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 SUFFICIENT ..... 2</p> <p>DK ..... 8</p>	<p>2 ⇒WS9</p> <p>8 ⇒WS9</p>

<p><b>WS8.</b> 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  WATER TOO EXPENSIVE ..... 2  SOURCE NOT ACCESSIBLE..... 3   OTHER (<i>specify</i>) ..... 6   DK ..... 8</p>	
<p><b>WS9.</b> Do you or any other member of this household do anything to the water to make it safer to drink?</p>	<p>YES..... 1  NO ..... 2   DK ..... 8</p>	<p>2 ⇒ WS11   8 ⇒ WS11</p>
<p><b>WS10.</b> What do you usually do to make the water safer to drink?</p> <p><i>Probe:</i>  Anything else?</p> <p><i>Record all methods mentioned.</i></p>	<p>BOIL ..... A  ADD BLEACH / CHLORINE/WATER GUARD B  STRAIN IT THROUGH A CLOTH ..... C  USE WATER FILTER (CERAMIC, SAND,  COMPOSITE, ETC.)..... D  SOLAR DISINFECTION ..... E  LET IT STAND AND SETTLE ..... F  ADD ALUM ..... G   OTHER (<i>specify</i>) ..... X   DK ..... Z</p>	
<p><b>WS11.</b> What kind of toilet facility do members of your household usually use?</p> <p><i>If 'Flush' or 'Pour flush', probe:</i>  Where does it flush to?</p> <p><i>If not possible to determine, ask permission to observe the facility.</i></p>	<p><b>FLUSH / POUR FLUSH</b>  FLUSH TO PIPED SEWER SYSTEM ..... 11  FLUSH TO SEPTIC TANK ..... 12  FLUSH TO PIT LATRINE..... 13  FLUSH TO OPEN DRAIN..... 14  FLUSH TO DK WHERE..... 18   <b>PIT LATRINE</b>  VENTILATED IMPROVED PIT  LATRINE..... 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 (<i>specify</i>) ..... 96</p>	<p>11 ⇒ WS14   14 ⇒ WS14  18 ⇒ WS14   41 ⇒ WS14  51 ⇒ WS14   95 ⇒ End  96 ⇒ WS14</p>
<p><b>WS12.</b> Has your (<i>answer from WS11</i>) ever been emptied?</p>	<p>YES, EMPTIED ..... 1   NO, NEVER EMPTIED ..... 4   DK ..... 8</p>	<p>4 ⇒ WS14   8 ⇒ WS14</p>

<p><b>WS13.</b> 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><b>REMOVED BY SERVICE PROVIDER</b>  TO A TREATMENT PLANT..... 1  BURIED IN A COVERED PIT .....2  TO DON'T KNOW WHERE .....3</p> <p><b>EMPTIED BY HOUSEHOLD</b>  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><b>WS14.</b> Where is this toilet facility located?</p>	<p>IN OWN DWELLING ..... 1  IN OWN YARD / PLOT .....2  ELSEWHERE..... 3</p>	
<p><b>WS15.</b> Do you share this facility with others who are not members of your household?</p>	<p>YES..... 1  NO .....2</p>	2 ⇒ End
<p><b>WS16.</b> 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>	2 ⇒ End
<p><b>WS17.</b> How many households in total use this toilet facility, including your own household?</p>	<p>NUMBER OF HOUSEHOLDS  (IF LESS THAN 10).....0</p> <p>TEN OR MORE HOUSEHOLDS ..... 10</p> <p>DK .....98</p>	

**HANDWASHING**

**HW**

<p><b>HW1.</b> 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><b>OBSERVED</b></p> <p>FIXED FACILITY OBSERVED (SINK / TAP)</p> <p>IN DWELLING .....1</p> <p>IN YARD /PLOT .....2</p> <p>MOBILE OBJECT OBSERVED (BUCKET / JUG / KETTLE).....3</p> <p><b>NOT OBSERVED</b></p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT .....4</p> <p>NO PERMISSION TO SEE .....5</p> <p>OTHER REASON (<i>specify</i>) ..... 6</p>	<p>4 ⇨HW5</p> <p>5 ⇨HW4</p> <p>6 ⇨HW5</p>
<p><b>HW2.</b> 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><b>HW3.</b> Is soap or detergent or ash/mud/sand present at the place for handwashing?</p>	<p>YES, PRESENT.....1</p> <p>NO, NOT PRESENT .....2</p>	<p>1 ⇨HW7</p> <p>2 ⇨HW5</p>
<p><b>HW4.</b> 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 DWELLING .....1</p> <p>IN YARD / PLOT .....2</p> <p>MOBILE OBJECT (BUCKET / JUG / KETTLE).....3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT .....4</p> <p>OTHER (<i>specify</i>)..... 6</p>	
<p><b>HW5.</b> Do you have any soap or detergent or ash, mud or sand in your house for washing hands?</p>	<p>YES .....1</p> <p>NO .....2</p>	<p>2 ⇨End</p>
<p><b>HW6.</b> Can you please show it to me?</p>	<p>YES, SHOWN .....1</p> <p>NO, NOT SHOWN .....2</p>	<p>2 ⇨End</p>
<p><b>HW7.</b> Record your observation.</p> <p><i>Record all that apply.</i></p>	<p>BAR OR LIQUID SOAP .....A</p> <p>DETERGENT (POWDER / LIQUID / PASTE)..... B</p> <p>ASH / MUD / SAND ..... C</p>	

**SALT IODISATION**

**SA**

**SA1.** We would like to check whether the salt used in your household is iodised. May I have a sample of the salt used to cook meals in your household?

*Apply 2 drops of test solution, observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1 or 5) that corresponds to test outcome.*

**SALT TESTED**  
 0 PPM (NO REACTION)..... 1  
 REACTION (SALT CHANGES COLOUR) ..... 5

5 ⇨ HH13

**SALT NOT TESTED**  
 NO SALT IN THE HOUSE ..... 4  
 OTHER REASON  
 (specify)\_\_\_\_\_ 6

4 ⇨ HH13

6 ⇨ HH13

**SA2.** I would like to perform one more test. May I have another sample of the same salt?

*Apply 5 drops of recheck solution. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1 or 5) that corresponds to test outcome.*

**SALT TESTED**  
 0 PPM (NO REACTION)..... 1  
 REACTION (SALT CHANGES COLOUR) ..... 5

**SALT NOT TESTED**  
 OTHER REASON  
 (specify)\_\_\_\_\_ 6

<b>HH13.</b> Record the time.	HOUR AND MINUTES ..... _ _ : _ _	
<b>HH14.</b> Language of the Questionnaire.	ENGLISH..... 11 HAUSA ..... 12 IGBO ..... 13 YORUBA ..... 14 FULANI ..... 15 PIDGIN ..... 16	
<b>HH15.</b> Language of the Interview.	ENGLISH..... 11 HAUSA ..... 12 IGBO ..... 13 YORUBA ..... 14 FULANI ..... 15 PIDGIN ..... 16  OTHER LANGUAGE (specify) ..... 96	
<b>HH16.</b> Native language of the Respondent.	HAUSA ..... 11 IGBO ..... 12 YORUBA ..... 13 FULANI ..... 14 KANURI ..... 15 IJAW ..... 16 TIV ..... 17 IBIBIO..... 18 EDO ..... 19  OTHER LANGUAGE (specify) ..... 96	
<b>HH17.</b> Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE..... 1 YES, PART OF QUESTIONNAIRE ..... 2 NO, NOT USED..... 3	
<b>HH18.</b> 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.

<b>HH20.</b> Rank number	<b>HH21.</b> Line number from HL1	<b>HH22.</b> Name from HL2	<b>HH23.</b> Sex from HL4		<b>HH24.</b> 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	__ __

**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 ..... \_\_

**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*.

LINE NUMBER ..... \_\_ \_\_

NAME \_\_\_\_\_

AGE ..... \_\_ \_\_

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



<b>HH29.</b> Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?	YES, AT LEAST ONE WOMAN AGE 15-49 ..... 1 NO ..... 2	2 ⇒ HH34
<b>HH30.</b> Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.		
<b>HH31.</b> Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?	YES, AT LEAST ONE GIRL AGE 15-17 ..... 1 NO ..... 2	2 ⇒ HH34
<b>HH32.</b> 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≠90 ..... 1 NO, HL20=90 FOR ALL GIRLS AGE 15-17 ..... 2	2 ⇒ HH34
<p><b>HH33.</b> 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.</p> <p>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.</p> <p>May we interview (<i>name(s) of female member(s) age 15-17</i>) later?</p> <p><input type="checkbox"/> 'Yes' for all girls age 15-17 ⇒ Continue with HH34.</p> <p><input type="checkbox"/> '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 HH34.</p> <p><input type="checkbox"/> '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 HH34.</p>		
<b>HH34.</b> Check HH8 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for Questionnaire for Men?	YES, HH8=1 ..... 1 NO, HH8=2 ..... 2	2 ⇒ HH40
<b>HH35.</b> Check HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any men age 15-49?	YES, AT LEAST ONE-MAN AGE 15-49 ..... 1 NO ..... 2	2 ⇒ HH40
<b>HH36.</b> Issue a separate QUESTIONNAIRE FOR INDIVIDUAL MEN for each man age 15-49 years.		
<b>HH37.</b> Check HL6 and HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any boys age 15-17?	YES, AT LEAST ONE BOY AGE 15-17 ..... 1 NO ..... 2	2 ⇒ HH40
<b>HH38.</b> Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one boy age 15-17?	YES, AT LEAST ONE BOY AGE 15-17 WITH HL20≠90 ..... 1 NO, HL20=90 FOR ALL BOYS AGE 15-17 ..... 2	2 ⇒ HH40
<p><b>HH39.</b> As part of the survey we are also interviewing men age 15-49. We ask each person we interview for permission. A male interviewer conducts these interviews.</p> <p>For boys 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.</p> <p>May we interview (<i>name(s) of male member(s) age 15-17</i>) later?</p> <p><input type="checkbox"/> 'Yes' for all boys age 15-17 ⇒ Continue with HH40.</p> <p><input type="checkbox"/> 'No' for at least one boy age 15-17 and 'Yes' to at least one boy age 15-17 ⇒ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.</p> <p><input type="checkbox"/> 'No' for all boys age 15-17 ⇒ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.</p>		

<b>HH40.</b> Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE.....1 NO .....2	2⇒HH44A
<b>HH41.</b> Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.		

**MICS PLUS CONSENT**

<b>HH44A.</b> 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 National Bureau of Statistics 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 10 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	

<b>HH44C.</b> 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 <sup>ND</sup> NUMBER	[P3] 3 <sup>RD</sup> NUMBER
<b>HH44E.</b> Ask for and record phone number.	-----	-----	-----
<b>HH44F.</b> Just to confirm, the number is ( <i>number from HH44E</i> )?  <i>If no, return to HH44E and correct entry.</i>	YES..... 1 NO ..... 2☒ <i>HH44E</i>	YES..... 1 NO ..... 2☒ <i>HH44E</i>	YES..... 1 NO ..... 2☒ <i>HH44E</i>
<b>HH44G.</b> Is this a non-mobile telephone or a mobile phone number?	NON-MOBILE..... 1 MOBILE ..... 2	NON-MOBILE ..... 1 MOBILE ..... 2	NON-MOBILE ..... 1 MOBILE ..... 2
<b>HH44H.</b> What is the best day of the week and time of the day to call you on this number?  <i>Probe: Any other day or time?</i>  <i>Record all mentioned.</i>	<b>WEEKDAYS</b> MORNING..... A AFTERNOON..... B EVENING ..... C OTHER (specify) ..... D <b>WEEKEND</b> MORNING.....E AFTERNOON.....F EVENING ..... G OTHER (specify) ..... H <b>OTHER</b> (specify) ..... X	<b>WEEKDAYS</b> MORNING..... A AFTERNOON.....B EVENING .....C OTHER (specify) ..... D <b>WEEKEND</b> MORNING.....E AFTERNOON.....F EVENING ..... G OTHER (specify) ..... H <b>OTHER</b> (specify)..... X	<b>WEEKDAYS</b> MORNING..... A AFTERNOON.....B EVENING .....C OTHER (specify) ..... D <b>WEEKEND</b> MORNING.....E AFTERNOON.....F EVENING ..... G OTHER (specify) ..... H <b>OTHER</b> (specify)..... X
<b>HH44I.</b> Remember, you may share your household communal number, but please, do not share any personal phone numbers that belong to individual members of your household. Do you have another personal or communal phone number where you can be reached?	YES..... 1☒ [P2] NO ..... 2☒ <i>HH45</i>	YES..... 1☒ [P3] NO ..... 2☒ <i>HH45</i>	YES..... 1☒ [P4] NO ..... 2☒ <i>HH45</i>
			<i>Tick here if additional questionnaire used: ..... <input type="checkbox"/></i>

**HH45.** Now return to the HOUSEHOLD INFORMATION PANEL and,

- 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**