

Appendix F. Palestinian MICS Questionnaires

Household questionnaires:



State of Palestine
Palestinian Central Bureau of Statistics



HOUSEHOLD QUESTIONNAIRE
Palestinian Multiple Indicator Cluster Survey, 2014

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: _____ / _____ / 2 014	HH7. GOVERNORATE name and code Name _____	
HH6. AREA: Urban1 Rural2 CAMP3		
<p>WE ARE FROM PALESTINIAN CENTRAL 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. THE INTERVIEW WILL TAKE ABOUT 25 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>		
<p>HH9. Result of household interview:</p> <p>Completed01 No household member or no competent respondent at home at time of visit02 Entire household absent for extended period of time03 Refused04 Dwelling vacant / Address not a dwelling05 Dwelling destroyed06 Dwelling not found07 Other (specify)96</p>		
<p><i>After the household questionnaire has been completed, fill in the following information:</i></p>		
<p>HH10. Respondent to Household Questionnaire: Name _____</p>		
<p>HH11. Total number of household members: _____</p>		
<p>HH12. Number of women age 15-49 years: _____</p>		
<p>HH14. Number of children under age 5: _____</p>		
<p><i>After all questionnaires for the household have been completed, fill in the following information:</i></p>		
<p>HH13. Number of women's questionnaires completed: _____</p>		
<p>HH15. Number of under-5 questionnaires completed: _____</p>		
<p>HH16. Field editor's name and number: Name _____</p>		<p>HH17. Main data entry clerk's name and number: Name _____</p>

HH18. Record the time.
 Hour.....
 Minutes.....

LIST OF HOUSEHOLD MEMBERS
 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.

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 9998 DK Month Year	HL6. HOW OLD IS (name)? Record in complete d years. If age is 95 or above, record '95'	HL7. For women age 15-49 Circle line no. if woman age 15-49	HL7B. For children age 0-4 Circle line no. if age 0-4	For children age 0-17 years						For children age 0-14				
								HL11. IS (name)'S NATURAL MOTHER ALIVE? 1 Yes 2 No 8 DK HL13	HL12. DOES (name)'S NATURAL MOTHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of mother and go to HL13 if "No" Record 00.	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 8 DK HL15	HL14. DOES (name)'S NATURAL FATHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of mother and go to HL15 if "No" Record 00	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)?			
01		01	1	2	Age	15-49	0-4	Y	N	DK	1	2	8	1	2	3	8	Mother
02			1	2		02	02	1	2	8	1	2	8	1	2	3	8	
03			1	2		03	03	1	2	8	1	2	8	1	2	3	8	
04			1	2		04	04	1	2	8	1	2	8	1	2	3	8	
05			1	2		05	05	1	2	8	1	2	8	1	2	3	8	
06			1	2		06	06	1	2	8	1	2	8	1	2	3	8	
07			1	2		07	07	1	2	8	1	2	8	1	2	3	8	
08			1	2		08	08	1	2	8	1	2	8	1	2	3	8	
09			1	2		09	09	1	2	8	1	2	8	1	2	3	8	

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	For women age 15-49		HL7. HL7B. Circle line no. if woman age 15-49 0-4 10 11 12 13 14 15	HL6. HOW OLD IS (name)? Record in complete years. If age is 95 or above, record '95'	For children age 0-17 years						For children age 0-14
				HL5. WHAT IS (name)'S DATE OF BIRTH? 98 DK 9998 DK	HL11. IS (name)'S NATURAL MOTHER ALIVE? 1 Yes 2 No 8 DK			HL12. DOES (name)'S NATURAL MOTHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of mother and go to HL13. If "No" Record 00.	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 8 DK	HL14. DOES (name)'S NATURAL FATHER LIVE IN THIS HOUSEHOLD? If "Yes" Record line no. of mother and go to HL15. If "No" Record 00	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	Y N DK	Mother	Y N DK	Y N DK	Father	Mother	Mother	
10			1 2				1 2 8		1 2 8	1 2 8			1 2 3 8	
11			1 2				1 2 8		1 2 3 8	1 2 8			1 2 3 8	
12			1 2				1 2 8		1 2 3 8	1 2 8			1 2 3 8	
13			1 2				1 2 8		1 2 3 8	1 2 8			1 2 3 8	
14			1 2				1 2 8		1 2 3 8	1 2 8			1 2 3 8	
15			1 2				1 2 8		1 2 3 8	1 2 8			1 2 3 8	

Tick here if additional questionnaire used

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

Now for each woman age 15-49 years, write her name and line number and other identifying information in the information panel of a separate Individual Women's Questionnaire.
 For each 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	07 Parent-In-Law
02 Spouse/Partner	08 Brother / Sister
03 Son / Daughter	09 Brother-In-Law / Sister-In-Law
04 Son-In-Law / Daughter-In-Law	10 Uncle / Aunt
05 Grandchild	11 Niece / Nephew
06 Parent	12 Other relative
	13 Adopted / Foster/ Stepchild
	14 Servant (Live-in)
	96 Other (Not related)
	98 DK

EDUCATION		ED									
		For household members age 5 and above					For household members age 5-24 years				
ED1. Line number	ED2. Name and age Copy from HL2 and HL6	ED3. HAS (name) EVER ATTENDED SCHOOL OR PRE- SCHOOL?	ED4A. WHAT IS THE HIGHEST LEVEL OF SCHOOL (name) HAS ATTENDED?	ED4B. WHAT IS THE HIGHEST GRADE (name) COMPLETED AT THIS LEVEL?	ED5. DURING THE CURRENT SCHOOL YEAR, THAT IS 2013- 2014, DID (name) ATTEND SCHOOL OR PRESCHOOL L AT ANY TIME?	ED6. DURING THIS SCHOOL YEAR, WHICH LEVEL AND GRADE IS/WAS (name) ATTENDING?	ED7. DURING THE PREVIOUS SCHOOL YEAR, THAT IS 2012- 2013, DID (name) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?	ED8. DURING THAT PREVIOUS SCHOOL YEAR, WHICH LEVEL AND GRADE DID (name) ATTEND?			
Line	Name	Yes No	Level	Grade	Ye No	Level	Grade	Yes 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	___	
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	___	
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	___	

SELECTION OF ONE CHILD FOR CHILD DISCIPLINE **SL**

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

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

Zero ⇒ Go to HOUSEHOLD CHARACTERISTICS module

One ⇒ Go to SL9 and record the rank number as '1', enter the line number, child's name and age

Two or more ⇒ Continue with SL2A

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

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

SL8. Check the last digit of the household number (HH2) from the cover page. This is the number of the row you should go to in the table below.

Check the total number of children age 1-14 years in SL1 above. This is the number of the column you should go to in the table below

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

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

SL9. Record the rank number (SL3), line number (SL4), name (SL5) and age (SL7) of the selected child

Rank number —

Line number — —

Name _____

Age — —

CHILD DISCIPLINE		CD
<p>CD2. Write the line number and name of the child from SL9.</p>	<p>Line number _ _</p> <p>Name _____</p>	
<p>CD3. ADULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED. PLEASE TELL ME IF YOU OR ANYONE ELSE IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH <i>(name)</i> IN THE PAST MONTH.</p>	<p>Yes No</p>	
<p>[A] TOOK AWAY PRIVILEGES, FORBADE SOMETHING <i>(name)</i> LIKED OR DID NOT ALLOW HIM/HER TO LEAVE THE HOUSE.</p>	<p>Took away privileges 1 2</p>	
<p>[B] EXPLAINED WHY <i>(name)</i>'S BEHAVIOUR WAS WRONG.</p>	<p>Explained wrong behaviour..... 1 2</p>	
<p>[C] SHOOK HIM/HER.</p>	<p>Shook him/her 1 2</p>	
<p>[D] SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.</p>	<p>Shouted, yelled, screamed 1 2</p>	
<p>[E] GAVE HIM/HER SOMETHING ELSE TO DO.</p>	<p>Gave something else to do 1 2</p>	
<p>[F] SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.</p>	<p>Spanked, hit, slapped on bottom with bare hand 1 2</p>	
<p>[G] HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING LIKE A BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT.</p>	<p>Hit with belt, hairbrush, stick, or other hard object 1 2</p>	
<p>[H] CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT.</p>	<p>Called dumb, lazy, or another name 1 2</p>	
<p>[I] HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.</p>	<p>Hit / slapped on the face, head or ears 1 2</p>	
<p>[J] HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG.</p>	<p>Hit / slapped on hand, arm or leg 1 2</p>	
<p>[K] BEAT HIM/HER UP, THAT IS HIT HIM/HER OVER AND OVER AS HARD AS ONE COULD.</p>	<p>Beat up, hit over and over as hard as one could..... 1 2</p>	
<p>CD4. DO YOU BELIEVE THAT IN ORDER TO BRING UP, RAISE, OR EDUCATE A CHILD PROPERLY, THE CHILD NEEDS TO BE PHYSICALLY PUNISHED?</p>	<p>Yes..... 1</p> <p>No 2</p> <p>DK / No opinion..... 8</p>	

HOUSEHOLD CHARACTERISTICS		HC
HC2. HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?	Number of rooms _ _	
HC2A. WHAT KIND OF DWELLING UNIT DOES THE FAMILY LIVE IN? <i>Record observation.</i>	Villa 11 House 12 Apartment 13 Separate Room 14 Tent 15 Marginal "Barrakeyah" 16 Other (<i>specify</i>) _____ 96	
HC3. <i>Main material of the dwelling floor.</i> <i>Record observation.</i>	Natural floor Earth / Sand 11 Finished floor Parquet or polished wood 31 Ceramic tiles 33 Cement 34 Carpet 35 Tiles (Balady) 36 Other (<i>specify</i>) _____ 96	
HC4. <i>Main material of the roof.</i> <i>Record observation.</i>	Natural roofing No Roof 11 Palm leaf 12 Finished roofing Metal / Tin 31 Wood 32 Calamine / Cement fibre 33 Cement 35 Other (<i>specify</i>) _____ 96	
HC5. <i>Main material of the exterior walls.</i> <i>Record observation.</i>	Natural walls No walls 11 Dirt 13 Rudimentary walls Stone with mud 22 Finished walls Cement 31 Stone with lime / cement 32 Bricks 33 Covered adobe 35 Other (<i>specify</i>) _____ 96	
HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD <u>MAINLY</u> USE FOR COOKING?	Electricity 01 Liquefied Petroleum Gas (LPG) 02 Kerosene 05 Wood 08 Straw / Shrubs / Grass 09 No food cooked in the household 95 Other (<i>specify</i>) _____ 96	01⇒HC8 02⇒HC8 05⇒HC8 95⇒HC8

<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 In a separate room used as kitchen..... 1 Elsewhere in the house 2 In a separate building 3 Outdoors 4 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 TUBE TELEVISION?</p> <p>[L] LCD /LED /3D TV?</p> <p>[D] A NON-MOBILE TELEPHONE?</p> <p>[E] A REFRIGERATOR?</p> <p>[F] CENTRAL HEATING?</p> <p>[G] CLOTHES DRYER ?</p> <p>[H] FREEZER?</p> <p>[I] DISH WASHER?</p> <p>[J] AIR CONDITION?</p> <p>[K] PLAY STATION/ XBOX?</p> <p>[M] SATELLITE DISH?</p> <p>[N] SOLAR HEATER?</p> <p>[O] VACUUM CLEANER?</p> <p>[P] CLOTH WASHER?</p>	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="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>Tube Television</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>LCD /LED /3D TV</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>Refrigerator.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Central heating</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Clothes dryer</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>Dishwasher.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Air condition.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Play station/ Xbox.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Satellite dish</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Solar heater</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Vacuum cleaner.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Cloth washer.....</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	Tube Television	1	2	LCD /LED /3D TV	1	2	Non-mobile telephone	1	2	Refrigerator.....	1	2	Central heating	1	2	Clothes dryer	1	2	Freezer	1	2	Dishwasher.....	1	2	Air condition.....	1	2	Play station/ Xbox.....	1	2	Satellite dish	1	2	Solar heater	1	2	Vacuum cleaner.....	1	2	Cloth washer.....	1	2	
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<p>HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:</p> <p>[H] IPAD /TABLET?</p> <p>[B] A SMART MOBILE TELEPHONE?</p> <p>[I] A LAPTOP?</p> <p>[E] ANIMAL-DRAWN CART?</p> <p>[F] A CAR OR TRUCK?</p>	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;">Yes</th> <th style="text-align: center;">No</th> </tr> </thead> <tbody> <tr> <td>iPad /Tablet</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Smart Mobile telephone.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Laptop.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Animal-drawn cart.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>Car / Truck.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>		Yes	No	iPad /Tablet	1	2	Smart Mobile telephone.....	1	2	Laptop.....	1	2	Animal-drawn cart.....	1	2	Car / Truck.....	1	2																																		
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<p>HC10. 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", circle "2". For other responses, circle "6".</i></p>	<p>Own 1 Rent..... 2 Other (<i>specify</i>) 6</p>																																																				

HC11. DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes 1 No 2	2⇒HC13
HC12. HOW MANY DONUM OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN? <i>If less than 1, record "00". If 95 or more, record '95'. If unknown, record '98'.</i>	Donum ____	
HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS, OR POULTRY?	Yes 1 No 2	2⇒HC15
HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD HAVE? [A] CATTLE, MILK COWS, OR BULLS? [B] HORSES, DONKEYS, OR MULES? [C] GOATS? [D] SHEEP? [E] CHICKENS? [G] CAMELS? <i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i>	Cattle, milk cows, or bulls ____ Horses, donkeys, or mules ____ Goats ____ Sheep ____ Chickens ____ Camels ____	
HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT?	Yes 1 No 2	

WATER AND SANITATION		WS
WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?	Piped water Piped into dwelling 11 Piped into compound, yard or plot 12 Public tap / standpipe..... 14 Tube Well, Borehole 21 Dug well Protected well 31 Unprotected well 32 Water from spring Protected spring 41 Unprotected spring..... 42 Rainwater collection 51 Tanker-truck..... 61 Cart with small tank / drum 71 Bottled water 91 Other (<i>specify</i>) _____ 96	11⇒WS6 12⇒WS6 14⇒WS3 21⇒WS3 31⇒WS3 32⇒WS3 41⇒WS3 42⇒WS3 51⇒WS3 61⇒WS3 71⇒WS3 96⇒WS3
WS2. WHAT IS THE MAIN SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS COOKING AND HANDWASHING?	Piped water Piped into dwelling 11 Piped into compound, yard or plot 12 Public tap / standpipe..... 14 Tube Well, Borehole 21 Dug well Protected well 31 Unprotected well 32 Water from spring Protected spring 41 Unprotected spring..... 42 Rainwater collection 51 Tanker-truck..... 61 Cart with small tank / drum 71 Other (<i>specify</i>) _____ 96	11⇒WS6 12⇒WS6
WS3. WHERE IS THAT WATER SOURCE LOCATED?	In own dwelling 1 In own yard / plot..... 2 Elsewhere 3	1⇒WS6 2⇒WS6
WS4. HOW LONG DOES IT TAKE TO GO THERE, GET WATER, AND COME BACK?	Number of minutes..... _ _ _ DK 998	

<p>WS5. WHO USUALLY GOES TO THIS SOURCE TO COLLECT THE WATER FOR YOUR HOUSEHOLD?</p> <p><i>Probe:</i> IS THIS PERSON UNDER AGE 15? WHAT SEX?</p>	<p>Adult woman (age 15+ years) 1 Adult man (age 15+ years) 2 Female child (under 15) 3 Male child (under 15) 4 DK 8</p>	
<p>WS6. DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER TO DRINK?</p>	<p>Yes 1 No 2 DK 8</p>	<p>2⇒WS8 8⇒WS8</p>
<p>WS7. WHAT DO YOU USUALLY DO TO MAKE THE WATER SAFER TO DRINK?</p> <p><i>Probe:</i> ANYTHING ELSE?</p> <p><i>Record all items mentioned.</i></p>	<p>Boil A Add bleach / chlorine B Strain it through a cloth C Use water filter (ceramic, sand, composite, etc.) D Other (<i>specify</i>) _____ X 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> 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 Flush to piped sewer system 11 Flush to septic tank 12 Flush to pit (latrine) 13 Flush to somewhere else 14 Flush to unknown place / Not sure / DK where 15 No facility, Bush, Field 95 Other (<i>specify</i>) _____ 96</p>	<p>95⇒WS12</p>
<p>WS9. DO YOU SHARE THIS FACILITY WITH OTHERS WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?</p>	<p>Yes 1 No 2</p>	<p>2⇒WS12</p>
<p>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?</p>	<p>Other households only (not public) 1 Public facility 2</p>	<p>2⇒WS12</p>
<p>WS11. HOW MANY HOUSEHOLDS IN TOTAL USE THIS TOILET FACILITY, INCLUDING YOUR OWN HOUSEHOLD?</p>	<p>Number of households (if less than 10) 0 __ Ten or more households 10 DK 98</p>	
<p>WS12. DOES YOUR HOUSEHOLD CONNECTED TO PIPED WATER NETWORK?</p>	<p>Yes 1 No 2</p>	

<p>HH19. Record the time.</p>	<p>Hour and minutes :</p>	
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SALT IODIZATION		SI
<p>SI1. WE WOULD LIKE TO CHECK WHETHER THE SALT USED IN YOUR HOUSEHOLD IS IODIZED. MAY I HAVE A SAMPLE OF THE SALT USED <u>TO COOK MEALS</u> IN YOUR HOUSEHOLD?</p> <p><i>Once you have tested the salt, circle number that corresponds to test outcome.</i></p>	<p>Not iodized - 0 PPM 1 More than 0 PPM & less than 15 PPM 2 15 PPM or more 3</p> <p>No salt in the house 4</p> <p>Salt not tested (specify reason) _____ 5</p>	

<p>HH20. Thank the respondent for his/her cooperation and check the List of Household Members:</p> <p><input type="checkbox"/> A separate Questionnaire for Individual Women has been issued for each woman age 15-49 years in the List of Household Members (HL7)</p> <p><input type="checkbox"/> A separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE has been issued for each child under age 5 years in the List of Household Members (HL7B)</p> <p><i>Return to the cover page and make sure that all information is entered, including the number of eligible women (HH12), and under-5s (HH14)</i></p> <p><i>Make arrangements for the administration of the remaining questionnaire(s) in this household.</i></p>

Interviewer's Observations

Field Editor's Observations

Supervisor's Observations