

## HOUSEHOLD QUESTIONNAIRE

Swaziland

HOUSEHOLD INFORMATION PANEL	нн					
HH1. Cluster number:	HH2. Household number:					
HH3. Interviewer's name and number:	HH4. Supervisor's name and number:					
Name	Name					
HH5. Day / Month / Year of interview:	Hhohho1					
HH6. Area:         Urban       1         Rural       2	Manzini 2 Shiselweni 3 Lubombo 4					
HH8. Is the household selected for Questionnaire for men? Yes1  No2						
WE ARE FROM <b>CENTRAL STATISTICAL OFFICE</b> . WE AF CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LINTERVIEW WILL TAKE ABOUT 45 MINUTES. ALL THE CONFIDENTIAL AND ANONYMOUS. MAY I START NO	IKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE EINFORMATION WE OBTAIN WILL REMAIN STRICTLY W?					
<ul> <li>Yes, permission is given ⇒ Go to HH18 to record the time and then begin the interview.</li> <li>No, permission is not given ⇒ Circle 04 in HH9. Discuss this result with your supervisor.</li> </ul>						
No household member or no competent resp Entire household absent for extended period RefusedDwelling vacant / Address not a dwelling Dwelling destroyed						
After the household questionnaire has been completed, fill in the following information:						
HH10. Respondent to Household  Questionnaire:						
Name						
HH11. Total number of household members:	After all questionnaires for the household have been completed, fill in the following information:					
HH12. Number of women age 15-49 years:	HH13. Number of women's questionnaires completed:					
HH13A. Number of men age 15-59 years:	HH13B. Number of men's guestionnaires completed:					

HH14. Number of children under age 5:	HH15. Number of under-5 questionnaires completed:
HH16. Field editor's name and number:	HH17. Main data entry clerk's name and number:
Name	Name

	LIST OF HOUSEHOLD MEMBERS
<b>HH18</b> . Record the time.	FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, STARTING WITH THE HEAD OF THE HOUSEHOLD.
Hour	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)
Minutes	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.

								For women age 15-49	For men age 15-59	For children age <b>0-4</b>	r	nemb	hold
HL1. Line no.	HL2. Name	HL3. WHAT IS THE RELATION- SHIP OF (name) TO THE HEAD OF HOUSE- HOLD?	IS (nam MALE FEMA)  1 Ma 2 Fem	e) OR LE?	WHAT IS	IL5. S (name)'S F BIRTH?	HL6. HOW OLD IS (name)? Record in completed years. If age is 95 or above, record '95'.	HL7.  Circle line no. if woman age 15-49.	Circle line no. if man age 15-59 and the household is selected for Questionnaire for Men.	HL7B.  Circle line no. if age 0-4.	HA (no BE SIC AT MC DU TH 12 MC	ame) EN V CK FC LEAS DNTH IRING E PA	PERY OR ST 3 IS
Line	Name	Relation*	М	F	Month	Year	Age	15-49	15-59	0-4	Υ		DK
01		0 1	1	2				01	01	01	1	2	8
02			1	2				02	02	02	1	2	8
03			1	2				03	03	03	1	2	8
04			1	2				04	04	04	1	2	8
05			1	2				05	05	05	1	2	8
06			1	2				06	06	06	1	2	8
07			1	2				07	07	07	1	2	8
08			1	2				08	08	08	1	2	8
09			1	2				09	09	09	1	2	8
10			1	2				10	10	10	1	2	8
11			1	2				11	11	11	1	2	8
12			1	2				12	12	12	1	2	8
13			1	2				13	13	13	1	2	8
14			1	2				14	14	14	1	2	8
15			1	2				15	15	15	1	2	8

Probe for additional household members.

Tick here if additional questionnaire used

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

Insert names of additional members in the household list and complete form accordingly.

Now for each woman age 15-49 years, write her name and line number and other identifying information in the information panel of a separate Individual Women's Questionnaire.

For each man age 15-59 years, write his name and line number and other identifying information in the information panel of a separate Individual Man's Questionnaire.

For each child under age 5, write his/her name and line number AND the line number of his/her mother or caretaker in the information panel of a separate Under-5 Questionnaire.

You should now have a separate questionnaire for each eligible woman, each eligible man, and each child under five in the household.

Codes for **HL3**: Relationship to head of household:

01 Head 02 Spouse / Partner 03 Son /

Daughter

04 Son-In-Law / Daughter-In-Law 05 Grandchild 06 Parent

07 Parent-In-Law 08 Brother / Sister 09 Brother-In-Law / Sister-In-Law

10 Uncle / Aunt 11 Niece / Stepchild Nephew 12 Other relative

96 Other 13 Adopted / Foster/ (Not related) 14 Servant (Live-in) 98 DK

									For	r chi	ildre	en age	2 <b>0-</b> 1	<b>17</b> y	ears									For children <b>0-14</b> years
HL1. Line no.	HL2 Name and Copy from and HI	d age 1 HL2	IS (nc NA MC AL)	_11.  _1me)'s TURA DTHEF IVE?  /es No 13 DK 13 13	۱L	HL12. DOES (name)'S NATURAL MOTHER LIVE IN THIS HOUSE-HOLD?  If "Yes", record line no. of mother and go to HL12B. If "No", record 00.	HL1 WHI DOB (nam NATU MOTI LIVE  1 In anoti house in thi coun 3 Out the c 8 DK	ERIS SIRAL HER PROPERTY THE PRO	E Id	MC MC BE SIC AT MC IN	ime) THE EN V CK F(	'S R ERY OR ST 3 IS	IS (n NA FA AL 11 2 HI 8 HI	ATUF ATUF ATHE LIVE? Yes NoS L 13 DKS L 13	)'S RAL R P	HL14. DOES (name)'S NATURAL FATHER LIVE IN THIS HOUSE-HOLD?  If "Yes", record line no. of father and go to HL14B. If "No", record 00.	V D (r N F L I an hair co 2 in co 3 th	VHE DOE name ATU ATHI VE? In noth ouse this ount Inst	e)'S RAL ER her ehold stry titution stry sside	d on	HA (na FAT BEE SIC AT I MO IN T PAS	me)' HER EN V K FC LEAS NTH	S ERY DR ST 3 S	HL15. Record line no. of mother from HL12 if indicated.  If HL12 is blank or ' 00' ask: WHO IS THE PRIMARY CARE- TAKER OF (name)?
Line	Name	Age	Υ	N D	K	Mother				Υ	N	DK	Υ	N	DK	Father					Υ	N	DK	Mother
01		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
02		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
03		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
04		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
05		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
06		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
07		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
80		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
09			1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
10		_	1	2	8		1 2	3	8	1	2	8	1		8		1	2	3	8	1	2	8	
11		_	1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	
12		_	1		8		1 2	3	8	1		8	1		8		1	2	3	8	1		8	
13			1		8		1 2		8		2	8	1		8			2	3	8	1		8	
14			1		8		1 2	3	8	1	2	8	1		8		1	2	3	8	1		8	
15			1	2	8		1 2	3	8	1	2	8	1	2	8		1	2	3	8	1	2	8	

CHILDREN ORPHANED & MADE VULNERABLI	E	OV
<b>OV1</b> . Check HL6: any children 0-17?		
☐ Yes		
☐ No ⇒ Next Module		
OV2. I WOULD LIKE YOU TO THINK BACK OVER THE	Yes1	
PAST 12 MONTHS. HAS ANY USUAL MEMBER OF THIS HOUSEHOLD DIED IN THE LAST 12	No2	2⇒Next
MONTHS?		Module
	Other (specify)6	6⇒Next
		Module
OV3. OF THOSE WHO DIED IN THE PAST 12 MONTHS,	Yes1	
WERE ANY OF THESE PEOPLE BETWEEN THE AGES OF 18 AND 59?	No2	2⇒ Next
		Module
OV4. OF THOSE WHO DIED IN THE PAST 12 MONTHS	Yes1	
AND WERE BETWEEN THE AGES OF 18 AND 59,	No2	
WERE ANY OF THESE PEOPLE SERIOUSLY ILL		
FOR 3 OF THE 12 MONTHS BEFORE THEY DIED?		

EDUCA	EDUCATION AND BASIC NEEDS	BASIC NE	EDS												ED & BN	Z
			For 1	For household members age	ers age		For ho.	usehold me	For household members age <b>5-24</b> years	4 years			For h	For households members	mbers	
				<b>3</b> and above					)	,				age 3-17 years		_
<u> </u>	ED2.		ED3.	ED4A.	ED4B.	ED5.	ED6.		ED7.		ED8.		BN1.	BN2.	BN3.	
Line	Name and age		HAS	WHAT IS THE	WHAT IS	During	DURING THIS SCHOOL YEAR,	OOL YEAR,	DURING THE	DURIN	DURING THAT PREVIOUS	sno	DOES (name)	Does	Does	
-unu			(name)	HIGHEST LEVEL	里	표	WHICH LEVEL AND GRADE IS	GRADE IS	PREVIOUS	SCHOO	SCHOOL YEAR, WHICH LEVEL	CH LEVEL	HAVE AT	(name)	(name) HAVE	4VE
ber	Copy from HL2 and		EVER		HIGHEST	CURRENT	(name) ATTENDING?	٠.	SCHOOL YEAR,	AND GF	AND GRADE DID (name)	ne)	LEAST ONE	HAVE A PAIR	ATLEAST	
	HLO.		ALLENDED	(name) HAS	GRADE (name)	SCHOOL VEAD THAT			IHA   S <b>2</b> 0  3,   DID ( <i>name</i> )	ALLEND			MEAL PER	OF SHOES ?	I WO SELS	.0
			OR PRE-		COMPLETE	IS 2014,			ATTEND						CLOTHING?	<i>ت</i> .
			SCHOOL?		D AT THIS	DID (name)			SCHOOL OR							
				Level:	LEVEL?	ATTEND	Level:		PRESCHOOL	l evel:						
				0 Preschool	Grade.	SCHOOL OR	0 Preschool		AT ANY TIME?	0 Preschool	chool					
			;	1 Primary	98 DK	PRESCHOO	1 Primary			1 Primary	ary					
			1 Yes	2 Secondary		L AT ANY	2 Secondary			2 Seco	Secondary					
			NO N	3 High 4 Tortion,	If the first	TIME	3 High	Grade:	, , ,	3 High		Grade:				
					grade at	1 Yes	4 Tertiary	38 UK	2 N 0	4 Tertiary	ary	98 DK	1 Yes			
				Š	this level	2 No 🕾	۷ 0		BN1	× Z			2 No	1 Yes	1 Yes	
				If level=0,	is not	ED7	If $level=0$ , $skip$ to		8 DK ☆	Iflowel	=0 or to		8 DK	2 - S	2 No	
				skip to ED5.	enter "00"		ED7.		BN1	BNI.	BNI.			8 DK	8 DK	
Line	Name	Age	Yes No	Level	Grade	Yes No	Level	Grade	Yes No DK		Level	Grade	Yes No DK	Yes No DK	Yes No DK	
5			1	0 1 2 3 4 8	'	1 2	0 1 2 3 4 8		1 2 8	0	2 3 4 8		1 2 8	1 2 8	1 2 8	<u></u>
02			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0 1	2 3 4 8		1 2 8	1 2 8	1 2 8	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		1 2 8	1 2 8	1 2 8	80
04			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0	2 3 4 8		1 2 8	1 2 8	1 2 8	80
02			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0	2 3 4 8		1 2 8	1 2 8	1 2 8	8
90			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0	2 3 4 8		1 2 8	1 2 8	1 2 8	ω
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		1 2 8	1 2 8	1 2 8	∞
80			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0 1	2 3 4 8		1 2 8	1 2 8	1 2 8	∞
60			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0 1	2 3 4 8		1 2 8	1 2 8	1 2 8	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		1 2 8	1 2 8	1 2 8	80
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		1 2 8	1 2 8	1 2 8	80
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		1 2 8	1 2 8	1 2 8	œ
13			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0	2 3 4 8		1 2 8	1 2 8	1 2 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		1 2 8	1 2 8	1 2 8	80
15			1 2	0 1 2 3 4 8		1 2	0 1 2 3 4 8		1 2 8	0	2 3 4 8		1 2 8	1 2 8	1 2 8	ω
																7

SELECTION OF C									SL		
SL1. Check HL6 in				write	Total numl	oer					
the total number of											
<b>SL2</b> . Check the nur	nber of child	dren age 1-1	14 years in SL	21:							
<b>□</b> Zero ⇒ Go to	HOUSEHOL	D CHARACTI	ERISTICS modu	ıle.							
☐ One ⇔ Go to	SL9 and red	cord the ran	k number as '	'1'. enter	· the line nur	nber. child's	name and a	19e.			
_				,		, , , , , , , , , ,					
☐ Two or more											
<b>SL2A</b> . List each of not include other ho											
for each child.	изенош те	moers ouisi	ue oj ine uge i	runge 1-	14 yeurs. Re	cora ine iine	number, ni	ime, sex, un	iu uge		
	[r										
	SL3. Rank	SL4. Line	SL! Name fro	~ -	SL( Sex fr	-	L7. e from				
	number	number	rume ji o	1122	HL	_	HL6				
	from HL1										
Rank Line Name				ne	М		\ge				
	1				1	2					
	2				1	2					
	3 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 i			number (HH2 <sub>,</sub>	() from th	ie cover pag	e. This is the	number of	the row you	l		
Ü			1 14	. 01.1	1 TT1 · ·	.1 1	C 1 1	1	1.1		
Check the toto to in the table		t children ag	ge 1-14 years	ın SL1 a	bove. This is	s the number	of the colur	nn you shoi	ild go		
Find the box v number (SL3)			olumn meet a	nd circle	the number	that appear.	s in the box.	This is the	rank		
					. 0			. 01.4)	ī		
Last Digit	of Househo	old .	otal Number				1				
	(from HH2	) 2	3	4	5	6	7	8+			
	<u>0</u> 1	1	3	1 1	3 4	6	5	5			
	2	2	1	2	5	2	7	6			
	3	1	2	3	1	3	1	7			
	5	1	3	1	3	5	3	8			
	6	2	2	2	4	6	4	2			
	<del>7</del> 8	1 2	3	3 4	5	1 2	5 6	3 4			
	9	1	2	1	2	3	7	5	•		
SL9. Record the ra				name	Rank num	ber					
(SL5) and age	(SL7) of the	selected chi	ild.		Line numb	er					
					Line numb	CI			_		
					Name				_		
					Age						

CHILD DISCIPLINE		CD
CD3. ADULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED. PLEASE TELL ME IF YOU OR ANYONE ELSE IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH (name) IN THE PAST MONTH.	Yes No	
[A] TOOK AWAY PRIVILEGES, FORBADE SOMETHING ( <i>name</i> ) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE THE HOUSE.	Took away privileges1 2	
[B] EXPLAINED WHY (name)'S BEHAVIOUR WAS WRONG.	Explained wrong behaviour1 2	
[C] SHOOK HIM/HER.	Shook him/her 1 2	
[D] SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.	Shouted, yelled, screamed	
[E] GAVE HIM/HER SOMETHING ELSE TO DO.	Gave something else to do 1 2	
[F] SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.	Spanked, hit, slapped on bottom with bare hand 1 2	
[G] HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING LIKE A BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT.	Hit with belt, hairbrush, stick, or other hard object	
[H] CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT.	Called dumb, lazy, or another name	
[I] HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.	Hit / slapped on the face, head or ears 1 2	
[J] HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG.	Hit / slapped on hand, arm or leg 1 2	
[K] BEAT HIM/HER UP, THAT IS HIT HIM/HER OVER AND OVER AS HARD AS ONE COULD.	Beat up, hit over and over as hard as one could 1 2	
CD4. DO YOU BELIEVE THAT IN ORDER TO BRING UP, RAISE, OR EDUCATE A CHILD PROPERLY,	Yes	
THE CHILD NEEDS TO BE PHYSICALLY PUNISHED?	DK / No opinion8	

HOUSEHOLD CHARACTERISTICS		нс
HC1A. WHAT IS THE RELIGION OF THE HEAD OF THIS HOUSEHOLD?	Christianity       01         Islam       02         Judaism       03         Hinduism       04         Buddhism       05         Traditionalist       06         No religion       07         Other religion (specify)       96	
HC2. HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?	Number of rooms	
HC3. Main material of the dwelling floor.  Record observation.	Natural floor       11         Earth / Sand       11         Dung       12         Rudimentary floor       21         Wood planks       21         Palm / Bamboo       22         Finished floor       31         Vinyl or asphalt strips       32         Ceramic tiles       33         Cement       34         Carpet       35         Other (specify)       96	
HC4. Main material of the roof.  Record observation.	Natural roofing       11         No Roof       12         Thatch / Palm leaf       12         Rudimentary roofing       21         Rustic mat       21         Palm / Bamboo       22         Wood planks       23         Cardboard       24         Finished roofing       31         Wood       32         Calamine / Corrugated iron       31         Wood       32         Calamine / Cement fibre       33         Ceramic tiles       34         Cement/ Concrete       35         Roofing shingles       36         Asbestos       37         Other (specify)       96	

HC5. Main material of the exterior walls.  Record observation.	Natural walls       11         No walls       12         Dirt       13         Rudimentary walls       12         Bamboo/ Stick with mud       21         Stone with mud       22         Uncovered adobe       23         Plywood       24         Cardboard       25         Reused wood       26         Finished walls       31         Stone with lime / cement       32         Bricks       33         Cement blocks       34         Wood planks / shingles       36         Mud blocks       37	
	Other ( <i>specify</i> ) 96	
HC6. What type of fuel does your household Mainly use for cooking?	Electricity       01         Liquefied Petroleum Gas (LPG)       02         Natural gas       03         Biogas       04         Kerosene/Paraffin       05         Coal / Lignite       06         Charcoal       07         Wood       08         Straw / Shrubs / Grass       09         Animal dung (Bulongo)       10         Agricultural crop residue       11         No food cooked in household       95	01⇒HC8 02⇒HC8 03⇒HC8 04⇒HC8 05⇒HC8
	Other (specify) 96	
HC7. IS THE COOKING USUALLY DONE IN THE HOUSE, IN A SEPARATE BUILDING, OR OUTDOORS?  If 'In the house', probe: IS IT DONE IN A SEPARATE ROOM USED AS A KITCHEN?	In the house In a separate room used as kitchen	

		,
HC8. Does your household have:	Yes No	
[A] ELECTRICITY?	Electricity1 2	
[B] A RADIO?	Radio1 2	
[C] A TELEVISION?	Television1 2	
[D] A NON-MOBILE TELEPHONE?	Non-mobile telephone1 2	
[E] A REFRIGERATOR?	Refrigerator 1 2	
[F] A BED?	Bed1 2	
[G] A STOVE?	Stove1 2	
[H] A TABLE?	Table 1 2	
[I] A CHAIR?	Chair 1 2	
[J] A CUPBOARD?	Cupboard 1 2	
HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD	Yes No	
OWN:	163 140	
[A] A WATCH?	Watch 2	
[B] A MOBILE TELEPHONE?	Mobile telephone	
[C] A BICYCLE?	Bicycle1 2	
[D] A MOTORCYCLE OR SCOOTER?	Motorcycle / Scooter 2	
[E] AN ANIMAL-DRAWN CART?	Animal-drawn cart	
[F] A CAR OR TRUCK?	Car / Truck 2	
[G] A BOAT WITH A MOTOR?	Boat with motor 2	
[H] A POT?	Pot1 2	
[I] A HOE?	Hoe 2	
[J] A SLEEPING MAT?	Sleeping mat	
[K] A TRACTOR?	Tractor1 2	
HC10. DO YOU OR SOMEONE LIVING IN THIS HOUSEHOLD OWN THIS DWELLING?	Own 1 Rent 2	
If "No", then ask: DO YOU RENT THIS DWELLING FROM SOMEONE NOT LIVING IN THIS HOUSEHOLD?	Other (specify) 6	
If "Rented from someone else", circle "2". For other responses, circle "6".		
HC11. DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes	2⇒HC13

HC12. HOW MANY HECTARES OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN?  If less than 1, record "00". If 95 or more, record "95". If unknown, record "98".	Hectares	
HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS, OR POULTRY?	Yes	2⇒HC15
HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD HAVE?		
[A] CATTLE, MILK COWS, OR BULLS?	Cattle, milk cows, or bulls	
[B] HORSES, DONKEYS, OR MULES?	Horses, donkeys, or mules	
[C] GOATS?	Goats	
[D] SHEEP?	Sheep	
[E] POULTRY?	Poultry (chickens, ducks)	
[F] Pigs?	Pigs	
If none, record "00". If 95 or more, record "95". If unknown, record "98".		
HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT?	Yes	

WATER AND SANITATION		WS
	Piped water	WS
WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR		11⇒WS6
	Piped into dwelling11 Piped into compound, yard or plot12	11⇒WS6
HOUSEHOLD?		
	Piped to neighbour	13⇒WS6
	Public tap / standpipe14	14⇒WS3
	Tube Well, Borehole21	21⇒WS3
	Dug well	
	Protected well31	31⇒WS3
	Unprotected well32	32⇒WS3
	Water from spring	
	Protected spring41	41⇒WS3
	Unprotected spring42	42⇒WS3
	Rainwater collection51	51⇒WS3
	Tanker-truck61	61⇒WS3
	Cart with small tank / drum71	71⇒WS3
	Surface water (river, stream, dam, lake,	1171100
	pond, canal, irrigation channel)81	81⇒WS3
	portu, cariai, irrigation chamilei)	017703
	Bottled water91	
	Other (specify) 96	96⇒WS3
WS2. WHAT IS THE MAIN SOURCE OF WATER	Piped water	
		11 -> W.C.C
USED BY YOUR HOUSEHOLD FOR OTHER	Piped into dwelling11	11⇒WS6
PURPOSES SUCH AS COOKING AND	Piped into compound, yard or plot12	12⇒WS6
HANDWASHING?	Piped to neighbour13	13 <b>⇒WS</b> 6
	Public tap / standpipe14	
	Tube Well, Borehole21	
	Dug well	
	Protected well31	
	Unprotected well32	
	Water from spring	
	Protected spring41	
	Unprotected spring42	
	Rainwater collection51	
	Tanker-truck 61	
	Cart with small tank / drum71	
	Surface water (river, stream, dam, lake,	
	pond, canal, irrigation channel)81	
	Other (specify) 96	
WS3. WHERE IS THAT WATER SOURCE	In own dwelling1	1⇒WS6
LOCATED?	In own yard / plot	2⇒WS6
LOCATED:	Elsewhere	2-7 11 30
	Eisewijeie	
WS4. How long does it take to go there,		
GET WATER, AND COME BACK?	Number of minutes	000⇒WS6
	DK998	
WS4A. HOW FAR IS THAT WATER SOURCE	Less than 200m1	
LOCATED FROM YOUR HOUSEHOLD?	200m – 500m	
LOCATED FROM YOUR HOUSEHOLD?		
	Above 500m3	
	DK8	
		1

WS5. WHO USUALLY GOES TO THIS SOURCE TO COLLECT THE WATER FOR YOUR HOUSEHOLD?  Probe:	Adult woman (age 15+ years)       1         Adult man (age 15+ years)       2         Female child (under 15)       3         Male child (under 15)       4	
Is this person under age 15? What sex?	DK8	
WS6. DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER TO DRINK?	Yes	2⇒WS8
	DK8	8⇒WS8
WS7. WHAT DO YOU USUALLY DO TO MAKE THE WATER SAFER TO DRINK?  Probe: ANYTHING ELSE?  Record all items mentioned.	Boil	
	Other ( <i>specify</i> ) X DK	
WS8. WHAT KIND OF TOILET FACILITY DO MEMBERS OF YOUR HOUSEHOLD USUALLY USE?  If "flush" or "pour flush", probe: WHERE DOES IT FLUSH TO?  If not possible to determine, ask permission to observe the facility.	Flush / Pour flush Flush to piped sewer system	95⇒Next Module
WS9. DO YOU SHARE THIS FACILITY WITH OTHERS WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?	Yes	2⇒Next Module
WS10. DO YOU SHARE THIS FACILITY ONLY WITH MEMBERS OF OTHER HOUSEHOLDS THAT YOU KNOW, OR IS THE FACILITY OPEN TO THE USE OF THE GENERAL PUBLIC?	Other households only (not public)	2⇒Next Module
WS11. HOW MANY HOUSEHOLDS IN TOTAL USE THIS TOILET FACILITY, INCLUDING YOUR OWN HOUSEHOLD?	Number of households (if less than 10) 0	
	Ten or more households	

HANDWASHING		HW
HW1. WE WOULD LIKE TO LEARN ABOUT THE	Observed 1	
PLACES THAT HOUSEHOLDS USE TO WASH THEIR HANDS.	Not observed	
0	Not in dwelling / plot / yard2	2 ⇒HW4
CAN YOU PLEASE SHOW ME WHERE MEMBERS OF YOUR HOUSEHOLD MOST	No permission to see	3 ⇒HW4
OFTEN WASH THEIR HANDS?	(specify)6	6 ⇒HW4
<b>HW2</b> . Observe presence of water at the place		
for handwashing.	Water is available1	
Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.	Water is not available2	
HW3A. Is soap, detergent or ash/mud/sand present at the place for handwashing?	Yes, present1	
present at the place for handwashing.		0 1 1 1 1 1 1
	No, not present2	2⇒HW4
HW3B. Record your observation.	Bar soapA	A⇒HH19
Circle all that apply.	·	
	Detergent (Powder / Liquid / Paste)B	B⇒HH19
	Liquid soapC	C⇒HH19
	Ash / Mud / SandD	D⇒HH19
HW4. DO YOU HAVE ANY SOAP OR DETERGENT SUCH AS BLUE SOAP	Yes1	
(LUGONGOLO) OR ASH/MUD/SAND IN		
YOUR HOUSE FOR WASHING HANDS?	No 2	2⇒HH19
HW5A. CAN YOU PLEASE SHOW IT TO ME?	Yes, shown 1	
		0 1111140
	No, not shown 2	2⇒HH19
HW5B. Record your observation.	Bar soapA	
Circle all that apply.	·	
	Detergent (Powder / Liquid / Paste)B	
	Liquid soapC	
	Ash / Mud / SandD	
HH19. Record the time.	Hour and minutes::	

SALT IODIZATION		SI
SI1. WE WOULD LIKE TO CHECK WHETHER THE SALT USED IN YOUR HOUSEHOLD IS IODIZED.  MAY I HAVE A SAMPLE OF THE SALT USED TO COOK MEALS IN YOUR HOUSEHOLD?	Not iodized - 0 PPM	
Once you have tested the salt, circle number that corresponds to test outcome.	No salt in the house	
SI2. I WOULD LIKE TO KNOW HOW THE SALT USED  TO COOK MEALS IN THE HOUSEHOLD IS  STORED	In a container with lid	
	Other (specify) 6	

<b>HH20</b> . Thank the respondent for his/her cooperation and check the List of Household Members:
☐ A separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN has been issued for each woman age 15-49 years in the List of Household Members (HL7).
Check HH8. If the household is selected for QUESTIONNAIRE FOR INDIVIDUAL MEN:
☐ A separate Questionnaire for Individual Men has been issued for each man age 15-59 years in the List of Household Members (HL7A).
☐ A separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE has been issued for each child under age 5 years in the List of Household Members (HL7B).
Return to the cover page and make sure that the result of the household interview (HH9), the name and line number of the respondent to the household questionnaire (HH10), and the number of eligible women (HH12), men (HH13A), and under-5s (HH14) are entered.
Make arrangements for the administration of the remaining questionnaire(s) in this household.

Interviewer's Observations	
Field Editor's Observations	
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Supervisor's Observations	
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