



		· r · · · ·			, , , , ,			THING AND			
HOUSEHOLD INF	ORMATION PAN	EL						нн			
HH1. Cluster numbe	r:			HH2. H	ousehold numbe	er:					
HH3. Interviewer's n	ame and number:			HH4. Supervisor's name and number: NAME							
HH5. Day / Month /	•	/) 2 1	HH7 . Region: 1 HHOHHO							
HH6 . Area:	/	URBAN. RURAL	1	MANZINI							
HH8. Is the household Questionnaire for M	· ·	YES NO		1							
HH9. Is the household Water Quality Testi		YES NO			s the household d for blank testi			1			
Check that the response							HH11. Reco	ord start			
adult member of the interview a child un	household or all ac						<u> </u>	MINUTES			
HH12 . Hello, my name is (<i>your name</i>). We are from Central Statistical Office. 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 35 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?											
YES NO / NOT ASKED						НО	USEHOLD MI	EMBERS			
HH46. Result of Household Questionnaire interview: Discuss any result not completed with Supervisor.	COMPLETED NO HOUSEHOLI RESPONDENT ENTIRE HOUSEH REFUSED DWELLING VAC DWELLING DES DWELLING NOT	O MEMBER AT HOME HOLD ABS CANT OR A TROYED .	R AT H AT TI SENT F ADDRI	IOME OR ME OF V FOR EXTE	NO COMPETE ISIT ENDED PERIO A DWELLING	ENT	F TIME				
	OTHER (specify)_							96			
HH47. Name and lin to Household Quest	•	oondent	H is	completed	Questionnaire l		To be filled after <u>all</u> the questionnaires are completed				
NAME			ТО	TAL NUN	MBER		COMPLETE	O NUMBER			
HOUSEHOLD MEM				HH48							
WOMEN AGE 15-49]	НН49			НН53				
If household is selected for Questionnaire for Men: MEN AGE 15-49				НН50			НН54				
CHILDREN UNDER	AGE 5]	НН51			HH55				
CHILDREN AGE 5-	17			HH52			НН56	ZERO0			

LIST OF HOUSEHOLD MEMBERS

HIL

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:

COUNTRY 8 DK COUNTRY	COUNTRY 8 dk					9998 DK	98 DK	2 FEMALE		additional household members.	
GE W 15-49 M 15-49 0-4 Y N Y N DK Y N MOTHER Y N DK Y N FATHER	N DK Y N MOTHER Y N DK Y N F	Y N	9 0-4	W 15-49 M 15-49	AGE	H YEAR	MONTH	M F	RELATION*	NAME	LINE
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	28 1 2 1 2 3 4 8 1 2 8 1 2	1 2	01	01 01				1 2	<u>0</u> <u>1</u>		01
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	28 1 2 1 2 3 4 8 1 2 8 1 2	1 2	02	02 02				1 2			02
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	28 1 2 1 2 3 4 8 1 2 8 1 2 .	1 2	03	03 03				1 2			03
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	28 1 2 1 2 3 4 8 1 2 8 1 2	1 2	04	04 04				1 2			04
05	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	05	05 05				1 2			05
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	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	06	06 06				1 2			06
07	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	07	07 07				1 2			07
08	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	08	08 08				1 2			08
09	2 8 1 2 1 2 3 4 8 1 2 8 1 2 .	1 2	09	09 09				1 2			09
10	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	10	10 10				1 2			10
	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	11	11 11				1 2			11
12	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	12	12 12				1 2			12
13	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	13	13 13				1 2			13
14	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	14	14 14				1 2			14
	2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2	15	15 15				1 2			15
	2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2 2 8 1 2 1 2 3 4 8 1 2 8 1 2	1 2 1 2 1 2 1 2 1 2 1 2	09 10 11 12 13 14	09 09 10 10 11 11 12 12 13 13 14 14				1 2 1 2 1 2 1 2 1 2 1 2			09 10 11 12 13 14

* Codes for **HL3**: Relationship to

household:

01 HEAD

head of

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

EDUCATI	ION 1										ED
ED1.	ED2.	ED3.	ED4.	ED5.		ED6 .	ED6A.	ED6B.	ED6C.	ED7 .	ED8 .
Line	Name and age.	Age 3 or	Has (name)	What is the highest		Did (name)	Check	Before going to vocational school	Did (name)	Age 3-24?	Check
number		above?		form or year of school ever attended?	ool (<i>name</i>) has	ever complete	ED5: Highest	what was the highest level and grade or form or year of school	ever		ED4: Ever attended
	Copy names and ages of <u>all</u>		Early	ever attended?		that	level of	(name) attended?	complete that (grade/	1 YES 2 NO ☆	school or
	members of the household	1 YES	Childhood			(grade/form/	school ever	(Marie) <u>accorded</u> .	form/year)?	Next Line	ECES
	from HL2 and HL6 to below	2 NO か	Education	LEVEL:	GRADE/FORM/	year)?	attended:	LEVEL: GRADE/FORM/		ivexi Line	
	and to the next 2 pages of		programme?	LEVEL.	YEAR:		vocational?	YEAR:	1 YES		1 YES
	the module, i.e. Education 2	Line	1 3750	0 ECE ☆	00 54	1 YES 2 NO	1.7700	1 PRIMARY	2 NO 8 DK		2 NO \(\Delta \) Next Line
	& Education 3.		1 YES 2 NO ☆	ED7 1 PRIMARY	98 DK ☆ <i>ED7</i>	8 DK	1 YES	2 SECONDARY 98 DK ⅓ 3 HIGHER ED7			
			Next Line	2 SECONDARY	22,		2 NO か ED7	6 OTHER			
				3 HIGHER 4 VOCATIONAL			ED/	8 DK			
				8 DK							
LINE	NAME AGE	YES NO	YES NO	LEVEL	GRADE/YEAR	Y N DK	YES NO	LEVEL GRADE/YEAR	Y N DK	YES NO	YES NO
01		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
02		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
03		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
04		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
05		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
06		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
07		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
08		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
09		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
10		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
11		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
12		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
13		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
14		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2
15		1 2	1 2	0 1 2 3 4 8		1 2 8	1 2	1 2 6 8	1 2 8	1 2	1 2

EDUCA' ED1.	TION 2 ED2.		ED9.	ED10.		ED10C.	ED10D.	ED10E. In	ED10F W	hat is the name	of the	ED11.	ED12.	ED13.	ED14.	ED14A.	ED15.	ED16.	ED
Line	Name and age.	<u>.</u>	At any	During this cu		In which	Check	which region	school tha	nat (<i>name</i>) is cur		Is (he/she)	In the	Who provided the	For the current	Who provided	At any time	During that previ	
number			time during the	school year, w and grade or y		country is (name)	ED10: Currently	is (<i>name</i>) currently	attending	•	(- 1 ₀ 24	attending a public or	current school year,	tuition support?	school year, has (name)	the material support or cash	during the previous	year, which level or year did (<i>nam</i>	
			current	(name) attend		attending	attending	attending	Probe: In will located?	vhich Inkhundla	. 1S 1t	government		Record all	received any	to buy shoes,	school year	or year ara (man)	ne) aucha.
			school			school?	primary	school?	locate			school?	received any school	mentioned.	material	exercise books, notebooks.	did (name)		
			year did (name)			1 ESWATINI	or secondary	1 ННОННО		•	•	If "Yes",	tuition	A GOVT. /	support or cash to buy shoes,	notebooks, school	attend school or		
			attend	LEVEL:	GRADE/	2 SOUTH	school?	2 MANZINI	INKHU-	NAME OF		record '1'.	support?	PUBLIC	exercise books,	uniforms or	any Early	LEVEL:	GRADE/
			school or any Early	0 ECE \(\triangle \) ED15	YEAR: 98 DK	AFRICA ☆ ED11	1 YES,	3 SHISE- LWENI	NDLA	SCHOOL Remind the	CODE	If "No", probe to	If "Yes",	B RELIGIOUS/ FAITH ORG.	notebooks, school	other school supplies??	Child-hood Education	0 ECE か Next Line	YEAR: 98 DK
			Childhood	1		6 ELSE-	(ED10 = 1)	4 LUBO-		respondent	If school	code who	probe to	C PRIVATE.	uniforms or	1.	pro-	1 PRIMARY	
			Education pro-	PRIMARY 2 SECO-		WHERE か ED11	0R 2) 2 NO ☆	MBO		that this information	not found on the list	controls and manages the		D NGO. X OTHER	other school supplies?	Record all mentioned.	gramme?	2 SECOND- ARY	
			gramme?	NDARY			ED11			will not be	please	school.	not received	Z DK			1 YES	3 HIGHER	
			1 YES	3 HIGHER 4						shared with anyone else		1 GOVT./ PUBLIC	from family, other		If "Yes", probe to ensure that	A GOVT. / PUBLIC	2 NO \(\Delta \) Next Line	4 VOCATIO- NAL	
			2 NO છ	VOCATIO-						other than	000.	2 MISSION	relatives,		support was	В	8 DK ☆	8 DK	
			ED15	NAL 8 DK						for the purposes of		3 PRIVATE 6 OTHER	friends or neighbours.		not received from family,	RELIGIOUS/ FAITH ORG.	Next Line		
			Current	0 DK						the survey,		8 DK	neignbours.		other relatives,	C PRIVATE.	Previous		
			refers to "2021"	'						especially if they seem			1 YES 2 NO ☆		friends or	D NGO.	refers to		
			for							uneasy with	,		2 NO \(\Omega\) ED14		neighbours.	X OTHER Z DK	"2020" for Primary/		
			Primary/	'						the			8 DK ☆		1 YES		Secondary		
			Secondary and							question.			ED14		2 NO か ED15		and "2019- 2020" for		
			"2020-												8 DK		Tertiary		
			2021" for Tertiary																
			<u> </u>	 '	GRADE/				INKHU-	SCHOOL		AUTHO-	YES NO				YES NO	<u> </u>	GRADE/
LINE	NAME	AGE	YES NO	LEVEL	YEAR	SZ SA ELSE	YES NO	REGION	NDLA	NAME	CODE	RITY	DK	TUITION	YES NO DK	MATERIAL	DK	LEVEL	YEAR
01			1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4	 		 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
02			1 2	0 1 2 3 8		1 2 6	1 2	1 2 3 4	 		 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
03			1 2	0 1 2 3 8		1 2 6	1 2	1 2 3 4	<u> </u>		 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
04			1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4	<u> </u>		 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
05			1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4	 	-	 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
06	\longrightarrow		1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4			1	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
07	\longrightarrow		1 2	0 1 2 3 8	_	1 2 6	1 2	1 2 3 4			1	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
08	\longrightarrow		1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4				1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
09	\longrightarrow		1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4			 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
10	\longrightarrow		1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4			1	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
11	\longrightarrow		1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4			1	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
12			1 2	0 1 2 3 8		1 2 6	1 2	1 2 3 4			 	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
13			1 2	0 1 2 3 8	 	1 2 6	1 2	1 2 3 4				1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
14			1 2	0 1 2 3 8		1 2 6	1 2	1 2 3 4				1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	
			1 2	0 1 2 3 8	1	1 2 6	1 2	1 2 3 4	1	i	1	1 2 3 6 8	1 2 8	ABCDXZ	1 2 8	ABCDXZ	1 2 8	0 1 2 3 8	1 1

EDI EDI	ED17A	ED17A. Check HH8: Is the household selected for Questionnaire for Men?									YES						
EDZ Check Bellow Check Bellow Check Bellow Check Bellow Check Bellow Check Check Bellow Check	ED17.	Now I would like to ta	alk to you ab	oout some of the	e experience	s that children a	ttending school might	have had during t'	he period schoo								
LINE NAME AGE YES NO YES NO	ED1. Line	ED2. Name and age.	III to you to	ED18. Check ED16: Previously attended primary or secondary school? 1 YES, (ED16=1 OR 2) 2 NO &	ED19. Before schools were closed in March 2020 due to the Covid-19 outbreak, did (name) participate in the school feeding program?	ED20. During the period when schools were closed due to Covid-19 from March to December 2020, did (name) receive any free meals outside your home?	ED21. Where did (name) mainly receive (his/her) free meals from? 1 NEIGHBOR- HOOD CARE POINTS (NCPs) 2 FAITH-BASED ORGANISATIONS 3 RELATIVE 4 FRIEND/ NEIGHBOR 6 OTHER (specify)	ED22. At any time during the period schools were closed from March to December 2020 due to Covid-19, was (name) forced to skip a meal in the day because there was not enough food at home or elsewhere?	ED23. During the school closure due to Covid-19 from March to December 2020, did (name) participate in any learning activities at home? 1 YES 2 NO S	ED24. Did (name's) school provide learning activities for (him/her) to complete at home during the period of school closure?	ED25. What were the learning activities provided by (name's) school? A ASSIGNMENTS USING PRINTED MATERIAL SENT HOME BY THE SCHOOL/TEACHER. B ASSIGNMENTS USING MATERIAL SENT BY SCHOOL/TEACHER(S) THROUGH ONLINE TOOLS/APPS (EMAIL, WHATSAPP, ETC). C VIRTUAL INTERACTIVE SESSIONS WITH TEACHER(S) AND/OR LEARNERS THROUGH DIGITAL ONLINE PLATFORMS/APPS (GOOGLE CLASSROOM, ZOOM, SKYPE, ETC). D FACE TO FACE LESSONS WITH THE TEACHER X OTHER (specify) Z DK	ED26. Did (name) use any educational materials or programs available on TV, radio, newspapers or internet?	ED27. What educational materials or programs did (name) use? A ESWATINI RADIO SCHOOL LESSONS B SA RADIO SCHOOL LESSONS C OTHER RADIO SCHOOL LESSONS D ESWATINI TV SCHOOL LESSONS E SA TV SCHOOL LESSONS F OTHER TV SCHOOL LESSONS F OTHER TV SCHOOL LESSONS G ESWATINI NEWSPAPER SCHOOL LESSONS G ESWATINI NEWSPAPER SCHOOL LESSONS H LESSONS THROUGH DIGITAL/ ONLINE PLATFORMS/APPS (GOOGLE, YOUTUBE, WHATSAPP, ETC) X OTHER (specify) Probe: Anything else? Record	Check ED10: Currently attending primary or secondary school? 1 YES, (ED10=1 OR 2) \(\triangle \) Next Line	What is the main reason why (name) has not returned to school? 1 UNABLE TO AFFORD SCHOOL FEES 2 UNABLE TO AFFORD SCHOOL UNIFORM OR SCHOOL BOOKS 3 STARTED WORK 4 FELL PREGNANT 5 FALLEN ILL 6 FEARS OF GETTING EXPOSED TO VIRUS 7 MARRIED 8 CLASS NOT YET RESUMED/ SCHOOL NOT YET OPEN 9 COMPLETED CLASS/ LEVEL/ SCHOOL IO UNABLE TO SECURE PLACE TO ENROLL		
1	LINE	NAME	AGE	VEC NO	VES NO	VES NO	OTHER MEALS	VES NO DV		VEC NO DV		VES NO	MATERIALS ON MASS		DEASON		
1 2		NAME	AGE												1 2 3 4 5 6 7 8 96		
04	02			1 2	1 2								ABCDEFGHX	1 2	1 2 3 4 5 6 7 8 96		
1 2	03			1 2	1 2	1 2	1 2 3 4 5 6 8	1 2 8	1 2 8	1 2 8	A B C D X Z	1 2	ABCDEFGHX	1 2	1 2 3 4 5 6 7 8 96		
06	04			1 2	1 2	1 2	1 2 3 4 5 6 8	1 2 8	1 2 8	1 2 8	A B C D XZ	1 2	ABCDEFGHX	1 2	1 2 3 4 5 6 7 8 96		
07	05			1 2	1 2	1 2	1 2 3 4 5 6 8	1 2 8	1 2 8	1 2 8	ABCDXZ	1 2	ABCDEFGHX	1 2	1 2 3 4 5 6 7 8 96		
08	06					1 2	1 2 3 4 5 6 8	1 2 8	1 2 8	1 2 8	A B C D X Z		ABCDEFGHX	1 2	1 2 3 4 5 6 7 8 96		
09															1 2 3 4 5 6 7 8 96		
10 1 2 1 2 1 2 1 2 3 4 5 6 8 1 2 8 1 2 8 1 2 8 ABCDXZ 1 2 ABCDEFGHX 1 2 1 2 3 4 5 6 7 8 9 11									İ						1 2 3 4 5 6 7 8 96		
11 1 2 1 2 1 2 1 2 1 2 3 4 5 6 8 1 2 8 1 2 8 1 2 8 ABCDXZ 1 2 ABCDEFGHX 1 2 1 2 3 4 5 6 7 8 9 12															1 2 3 4 5 6 7 8 96		
12 1 2 1 2 1 2 1 2 1 2 3 4 5 6 8 1 2 8 1 2 8 1 2 8 ABCDXZ 1 2 ABCDEFGHX 1 2 1 2 3 4 5 6 7 8 9 13 1 2 1 2 1 2 1 2 1 2 3 4 5 6 8 1 2 8 1 2 8 1 2 8 ABCDXZ 1 2 ABCDEFGHX 1 2 1 2 3 4 5 6 7 8 9 13 4 5 6 7 8 9 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16															1 2 3 4 5 6 7 8 96		
13 1 2 1 2 1 2 1 2 3 4 5 6 8 1 2 8 1 2 8 1 2 8 ABCDXZ 1 2 ABCDEFGHX 1 2 1 2 3 4 5 6 7 8 9																	
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15 1 2 1 2 1 2 1 2 3 4 5 6 8 1 2 8 1 2 8 1 2 8 ABCDXZ 1 2 ABCDEFGHX 1 2 1 2 3 4 5 6 7 8 9															1 2 3 4 5 6 7 8 96		

ED

EDUCATION 3

HOUSEHOLD CHARACTERISTIC	CS	НС
HC1A. What is the religion of (name	CHRISTIANITY01	
of the head of the household from	TRADITIONALIST	
HL2)?	ISLAM	
1112):	BAHA'I FAITH	
	JUDAISM, HINDUISM, BUDDHISM 05	
	JODAISM, IIINDOISM, BODDIIISM 02	,
	OTHER RELIGION	
	(specify)06	5
	(1 33)	
	NO RELIGION07	7
HC1B. What is the mother	SISWATI	
tongue/native language of (<i>name of</i>	ENGLISH2	
the head of the household from		
<i>HL2</i>)?	OTHER LANGUAGE	
	(specify)06	5
HC3. How many rooms do members		
of this household usually use for	NUMBER OF ROOMS	
sleeping?		_
HC4. Main material of the dwelling	NATURAL FLOOR	
floor.	EARTH / SAND11	
jioor.	DUNG	
Record observation.	RUDIMENTARY FLOOR	
1.0001.00000.0000.0000.0000.0000.0000.00000.0000	WOOD PLANKS21	
If observation is not possible, ask	FINISHED FLOOR	
the respondent to determine the	PARQUET OR POLISHED WOOD 31	
material of the dwelling floor.	VINYL TILES OR ASPHALT STRIPS 32	2
	CERAMIC TILES33	3
	CEMENT	1
	CARPET35	5
	OTHER ('C)	-
	OTHER (specify) 96	
HC5. Main material of the roof.	NO ROOF11	
	NATURAL ROOFING	
Record observation.	THATCH / GRASS	2
	RUDIMENTARY ROOFING	
	RUSTIC MAT	
	WOOD PLANKS	
	FINISHED ROOFING	•
	METAL / TIN (CORRUGATED IRON) 31	
	WOOD32	
	CALAMINE / CEMENT FIBRE	
	CERAMIC / CEMENT TILES	
	CEMENT / CONCRETE	
	ROOFING SHINGLES	
	ASBESTOS	
	OTHER (specify)96	5

HCC Main water 1 - f. 1	NO WALLS	11
HC6 . Main material of the exterior walls.	NO WALLS NATURAL WALLS	11
wans.	CANE / PALM / TRUNKS	12
Record observation.	SOD / MUD / DUNG	
	RUDIMENTARY WALLS	
	BAMBOO/ STICK WITH MUD	21
	STONE WITH MUD	22
	UNCOVERED ADOBE	23
	PLYWOOD	24
	CARDBOARD	
	REUSED WOOD	
	MUD BLOCKS WITHOUT CEMENT	
	METAL / TIN (CORRUGATED IRON)	28
	FINISHED WALLS	21
	STONE WITH LIME / CEMENT	
	BRICKS	
	CEMENT BLOCKS	
	WOOD PLANKS / SHINGLES	
	MUD BLOCKS WITH CEMENT	
	OTHER (specify)	96
HC7. Does your household have:	YES NO)
,		
[A] A fixed telephone line?	FIXED TELEPHONE LINE1	2
[B] A radio?	RADIO1	2
[C] A table?	TABLE1	2
[D] A chair?	CHAIR1	2
[E] A wardrobe?	WARDROPE1	2
[F] A bed?	BED1	2
[G] A sofa?	SOFA1	2
[H] A cupboard (Likhabethe)?	CUPBOARD1	2
[I] A manual grinding machine (Ibhetali)?	MANUAL GRINDING MACHINE 1	2
[J] A non-electric iron (Umbhaceko/yemalahle)?	IRON1	2
[K] A paraffin stove?	PARAFFIN STOVE1	2
[L] A cooking stand (Lidelefudi)?	COOKING STAND1	2
[M]A bush knife?	BUSH KNIFE1	2
[N] A sleeping mat (Licansi)?	SLEEPING MAT1	2

HC8. Does your household have electricity? If yes probe: Is it connected to the grid or not?	YES, INTERCONNECTED GRID	3 <i>⇔</i> HC10
HC9. Does your household have:	YES NO	
[A] A television?	TELEVISION 2	
[B] An electric refrigerator?	REFRIGERATOR1 2	
[C] An electric stove?	ELECTRIC STOVE 2	
[D] A geyser?	GEYSER 2	
[E] A fan?	FAN 2	
[F] A food blender?	FOOD BLENDER 2	
[G] An electric kettle?	ELECTRIC KETTLE 2	
[H] An electric iron?	ELECTRIC IRON 2	
[I] A hot plate?	HOT PLATE 2	
[J] A water heater element/ bucket?	WATER HEATER ELEMENT 2	
HC10. Does any member of your household own:	YES NO	
[A] A wristwatch?	WRISTWATCH1 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 1 2	
[F] A boat with a motor?	BOAT WITH A MOTOR 1 2	
[G] A tractor?	TRACTOR 1 2	
[H] An animal drawn plough?	ANIMAL DRAWN PLOUGH 1 2	
[I] A wheelbarrow?	WHEELBARROW 1 2	
[J] A hoe?	HOE 1 2	
HC11 . Does any member of your household have a computer or a tablet?	YES	

HC12. Does any member of your household have a mobile telephone?	YES	
HC13. Does your household have access to internet at home?	YES	
HC13A. Check HC7B: Does the household own a radio?	YES, HC7B=1	2 <i>⇒HC13C</i>
HC13B. How is the signal coverage for Eswatini Broadcasting and Information Services (EBIS) radio station here at your place?	GOOD 1 WEAK/VARIABLE 2 ESWATINI RADIO SIGNAL NOT AVAILABLE AT ALL 3 DK 8	
HC13C. Does anyone in your household listen to the Eswatini Broadcasting and Information Services (EBIS) radio station from any location?	YES 1 NO 2 DK 8	
HC13D. Check HC9A: Does the household own a television?	YES, HC9A=1	2 <i>⇒HC13F</i>
HC13E. How is the signal coverage for Eswatini TV here at your place?	GOOD 1 WEAK/VARIABLE 2 ESWATINI TV SIGNAL NOT AVAILABLE AT ALL 3 DK 8	
HC13F. Does anyone in your household watch Eswatini TV from any location?	YES	
HC14. Do you or someone living in this household own this dwelling?	OWN	
If 'No', then ask: Do you rent this dwelling from someone not living in this household?	OTHER (specify)6	
If 'Rented from someone else', record '2'. For other responses, record '6' and specify.		
HC15. Does any member of this household own any land that can be used for agriculture?	YES	2 <i>⇒HC17</i>
HC16. How many hectares of agricultural land do members of this household own? If less than 1, record '00'.	HECTARES	
HC17. Does this household own any livestock, herds, other farm animals, or poultry?	YES	2 <i>⇒</i> HC19

HC18. How many of the following animals does this household have?	
[A] Milk cows or bulls?	MILK COWS OR BULLS
[B] Other cattle	OTHER CATTLE
[C] Horses, donkeys, or mules?	HORSES, DONKEYS, OR MULES GOATS
[D] Goats?	SHEEP
[E] Sheep? [F] Chickens?	CHICKENS
[G] Pigs?	PIGS
[H] Ducks, geese, or turkeys?	DUCKS, GEESE, OR TURKEYS
If none, record "00". If 95 or more, record "95". If unknown, record "98".	
HC19. Does any member of this household have a bank account?	YES

SOCIAL TRANSFERS COVID-19		ST
ST1A . Check HH8: Is the household selected for Questionnaire for Men?	YES 1 NO 2	2 ⇔ End

ST1. I would like to ask you about various external economic assistance programmes provided to households during the outbreak of Covid-19. This refers to the assistance that has been offered to households during the Covid-19 outbreak period specifically to help cushion households from the economic impact. 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 support was introduced after the declaration of the national state of emergency in March 2020. This excludes support from family, other relatives, friends or neighbours.

	[A] CASH-BASED TRANSFERS/ FOOD RATIONS PROGRAMME	[B] BLANKET DISTIBUTION PROGRAMME	[C] NEIGHBORHOOD CARE POINT FEEDING PROGRAMME	[X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME FOR COVID-19 OUTBREAK
ST2. Are you aware of (name of	YES1 か	YES 1 છ	YES1 Δ	YES (<i>specify</i>)1 \(\text{\ti}\text{\texi{\text{\tex{\tex
programme)?	ST3	ST3	ST3	ST3
	NO2 ك	NO 2 か	NO2 \(\Delta \)	NO2☆
	[B]	[C]	[X]	End
ST3. Has your household or	YES1 છ	YES1 ώ	YES1 ω	YES1 છ
anyone in your household	ST4	ST4	ST4	ST4
received assistance through	NO2 છ	NO 2 ώ	NO2 分	NO2 分
(name of programme)?	[B]	[C]	[X]	End
	DK8 ∿	DK 8 ☆	DK8 か	DK8 か
	[B]	[C]	[X]	End

ST4. When was the <u>last time</u> your	MONTHS AGO1	MONTHS AGO1	MONTHS AGO1	MONTHS AGO1
household or anyone in your	Σ	Σ		Σ
household received assistance	[B]	[C]	[X]	End
through (name of programme)?	YEARS AGO2	YEARS AGO2	YEARS AGO2	YEARS AGO2
	Σ	Σ	☆	$\dot{\Sigma}$
If less than one month, record '1'	[B]	[C]	[X]	End
and record '00' in Months.	DK998	DK 998	DK998	DK998
If less than 12 months, record '1'	$\dot{\Sigma}$	Σ		Σ
and record in Months.	[B]	[C]	[X]	End
If 1 year/12 months or more,				
record '2' and record in Years.				

HOUSEHOLD ENERGY USE		EU
EU0. Check HH8: Is the household selected for	YES	1 ⇒End
Questionnaire for Men?	NO2	
EU1. In your household, what type of cook stove	ELECTRIC STOVE01	01 <i>⇒EU5</i>
is mainly used for cooking?	SOLAR COOKER	02 <i>⇒EU5</i>
	LIQUEFIED PETROLEUM GAS (LPG)/	
	COOKING GAS STOVE	03 <i>⇒EU5</i>
	BIOGAS STOVE	05 <i>⇒EU5</i>
	LIQUID FUEL STOVE	06 <i>⇔EU4</i>
	MANUFACTURED SOLID FUEL STOVE 07	
	TRADITIONAL SOLID FUEL STOVE 08	
	THREE STONE STOVE / OPEN FIRE 09	09 <i>⇒EU4</i>
	OTHER (<i>specify</i>)96	96 <i>⇔EU4</i>
	NO FOOD COOKED IN	
	HOUSEHOLD97	97 <i>⇒EU6</i>
EU2. Does it have a chimney?	YES1	
·	NO2	
	DK8	
EU3. Does it have a fan?	YES 1	
	NO2	
	DK8	
EU4 . What type of fuel or energy source is used	KEROSENE / PARAFFIN03	
in this cookstove?	COAL / LIGNITE04	
	CHARCOAL05	
If more than one, record the main energy source	WOOD	
for this cookstove.	CROP RESIDUE / GRASS /	
	STRAW / SHRUBS07	
	ANIMAL DUNG / WASTE	
	GARBAGE / PLASTIC	
	SAWDUST11	
	OTHER (specify)96	

EU5. Is the cooking usually done in the house, in a separate building, or outdoors? If in main house, probe to determine if cooking is done in a separate room. If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.	IN MAIN HOUSE NO SEPARATE ROOM	
EU6. What does your household mainly use for space heating when needed?	CENTRAL HEATING	01 <i>⇒EU8</i> 06 <i>⇒EU8</i> 96 <i>⇒EU8</i> 97 <i>⇒EU9</i>
EU7. Does it have a chimney?	YES	

EU8 . What type of fuel and energy source is used	ELECTRICITY02	
in this heater?	LIQUEFIED PETROLEUM GAS (LPG)/	
	COOKING GAS04	
If more than one, record the main energy source	BIOGAS 05	
for this heater.	KEROSENE / PARAFFIN08	
	COAL / LIGNITE	
	CHARCOAL10	
	WOOD11	
	CROP RESIDUE / GRASS /	
	STRAW / SHRUBS12	
	ANIMAL DUNG / WASTE13	
	PROCESSED BIOMASS (PELLETS) OR	
	WOODCHIPS14	
	GARBAGE / PLASTIC15	
	SAWDUST16	
	OTHER (<i>specify</i>)96	
	DK98	
EU9. At night, what does your household mainly	ELECTRICITY01	
use to <u>light</u> the household?	SOLAR LANTERN02	
	RECHARGEABLE FLASHLIGHT,	
	TORCH OR LANTERN	
	BATTERY POWERED FLASHLIGHT,	
	TORCH OR LANTERN04	
	KEROSENE OR PARAFFIN LAMP 07	
	CROP RESIDUE / GRASS /	
	STRAW / SHRUBS09	
	ANIMAL DUNG / WASTE 10	
	OIL LAMP 12	
	CANDLE	
	DIESEL GENERATOR14	
	OTHER (<i>specify</i>)96	
	NO LIGHTING IN HOUSEHOLD97	

WATER AND SANITATION		WS
WS1. What is the <u>main</u> source of drinking water	PIPED WATER	
used by members of your household?	PIPED INTO DWELLING11	11 <i>⇒WS7</i>
	PIPED TO YARD / PLOT12	12 <i>⇒WS7</i>
	PIPED TO NEIGHBOUR13	13 <i>⇔WS3</i>
If unclear, probe to identify the place from which members of this household most often	PUBLIC TAP / STANDPIPE14	14 <i>⇒WS3</i>
collect drinking water (collection point).	TUBE WELL / BOREHOLE / HANDPUMP	21 <i>⇒WS3</i>
	21	
	DUG WELL	31 <i>⇔WS3</i>
	PROTECTED WELL31	32 <i>⇒WS3</i>
	UNPROTECTED WELL32	
	SPRING	41 <i>⇒WS3</i>
	PROTECTED SPRING41	42 <i>⇒WS3</i>
	UNPROTECTED SPRING42	
		51 <i>⇒WS3</i>
	RAINWATER51	61 <i>⇔WS4</i>
	TANKER-TRUCK61	71 <i>⇒WS4</i>
	CART WITH SMALL TANK71	72 <i>⇒WS4</i>
	WATER KIOSK72	
	SURFACE WATER (RIVER, DAM, LAKE,	
	POND, STREAM, CANAL, IRRIGATION	81 <i>⇒WS3</i>
	CHANNEL)81	
	PACKAGED WATER	
	BOTTLED WATER91	
	SACHET WATER92	
		96 <i>⇔WS3</i>
	OTHER (<i>specify</i>) 96	

WC2 What is the main source of water used by	DIDED WATED	
WS2 . What is the <u>main</u> source of water used by	PIPED WATER PIPED INTO DWELLING11	11 -411/07
members of your household for other purposes		11 <i>⇒WS7</i>
such as cooking and handwashing?	PIPED TO YARD / PLOT12	12 <i>⇒WS7</i>
	PIPED TO NEIGHBOUR13	
If unclear, probe to identify the place from which members of this household most often	PUBLIC TAP / STANDPIPE14	
collect water for other purposes.	TUBE WELL / BOREHOLE / HANDPUMP	
	DUG WELL	
	PROTECTED WELL31	
	UNPROTECTED WELL32	
	SPRING	
	PROTECTED SPRING41	
	UNPROTECTED SPRING42	
	RAINWATER51	61 <i>⇔WS4</i>
	TANKER-TRUCK61	71 <i>⇒WS4</i>
	CART WITH SMALL TANK71	72 <i>⇒WS4</i>
	WATER KIOSK72	
	SURFACE WATER (RIVER, DAM, LAKE,	
	POND, STREAM, CANAL, IRRIGATION	
	CHANNEL)81	
	CITATI (EE)	
	OTHER (<i>specify</i>) 96	
WS3 . Where is that water source located?	IN OWN DWELLING1	1 <i>⇒WS7</i>
	IN OWN YARD / PLOT2	2 <i>⇒WS7</i>
	ELSEWHERE3	
WS4. How long does it take for members of your	MEMBERS DO NOT COLLECT000	000 <i>⇒WS7</i>
household to go there, get water, and come back?	NUMBER OF MINUTES	
	DK998	
WS5 . Who usually goes to this source to collect the water for your household?	NAME	
the material your nearestand.		
Record the name of the person and copy the line number of this person from the LIST OF	LINE NUMBER	
HOUSEHOLD MEMBERS Module.		
WS6 . Since last (<i>day of the week</i>), how many times has this person collected water?	NUMBER OF TIMES	
	DK98	
WS7. In the last month, has there been any time	YES, AT LEAST ONCE1	
when your household did not have sufficient	NO, ALWAYS SUFFICIENT2	2 <i>⇒</i> WS9
quantities of drinking water?	NO, ALWA IS SUITICIEN I	2 → W D 7
quantities of drinking water:	DK8	8 <i>⇒</i> WS9

WS8. What was the main reason that you were	WATER NOT AVAILABLE FROM	
unable to access water in sufficient quantities	SOURCE1	
when needed?	WATER TOO EXPENSIVE2	
	SOURCE NOT ACCESSIBLE3	
	OTHER (specify)6	
	DK8	
WS9. Do you or any other member of this	YES	
household do anything to the water to make it safer to drink?	NO2	2 <i>⇒WS10A</i>
	DK8	8 <i>⇔WS10A</i>
WS10. What do you usually do to make the water	BOILA	
safer to drink?	ADD JIK/ BLEACH / CHLORINE B	
	STRAIN IT THROUGH A CLOTHC	
Probe:	USE WATER FILTER (CERAMIC, SAND,	
Anything else?	COMPOSITE, ETC.)D	
Anything cise:	SOLAR DISINFECTION E	
Record all methods mentioned.	LET IT STAND AND SETTLEF	
Recora au metnoas mentionea.	LET IT STAND AND SETTLEF	
	OTHER (specify)X	
	DKZ	
WS10A. On average, how much water does your		
household consume per day for all household purposes?	NUMBER OF LITRES	
• •	DK98	
Household purposes should include drinking, cooking, washing, bathing, etc.		
WS11. What kind of toilet facility do members of	FLUSH / POUR FLUSH	
your household usually use?	FLUSH TO PIPED SEWER SYSTEM11	11 <i>⇒WS14</i>
	FLUSH TO SEPTIC TANK12	
If 'Flush' or 'Pour flush', probe:	FLUSH TO PIT LATRINE13	
Where does it flush to?	FLUSH TO OPEN DRAIN14	14 <i>⇒WS14</i>
	FLUSH TO DK WHERE18	18 <i>⇒WS14</i>
If not possible to determine, ask permission to	PIT LATRINE	
observe the facility.	VENTILATED IMPROVED PIT	
	LATRINE21	
	PIT LATRINE WITH SLAB/ SEAT22	
	PIT LATRINE WITHOUT SLAB /	
	OPEN PIT23	
	COMPOSTING TOILET31	
	BUCKET LATRINE41	41 <i>⇒WS14</i>
	NO FACILITY / BUSH / FIELD95	95 <i>⇒End</i>
	OTHER (<i>specify</i>)96	96 <i>⇔WS14</i>

WS12 . Has your (<i>answer from WS11</i>) ever been emptied?	YES, EMPTIED1	
empueu:	NO, NEVER EMPTIED4	4 <i>⇒</i> WS14
	DK8	8 <i>⇔WS14</i>
WS13. The last time it was emptied, where were the contents emptied to? Probe: Was it removed by a service provider?	REMOVED BY SERVICE PROVIDER TO A TREATMENT PLANT	
	OTHER (<i>specify</i>) 6 DK8	
WS14. Where is this toilet facility located?	IN OWN DWELLING	
WS15 . Do you share this facility with others who are not members of your household?	YES	2 <i>⇒</i> End
WS16. Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?	SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC)	2 <i>⇔</i> End
WS17. How many households in total use this toilet facility, including your own household?	NUMBER OF HOUSEHOLDS (IF LESS THAN 10)0 TEN OR MORE HOUSEHOLDS10	
	DK98	

HANDWASHING		HW
HW0. Check HH8: Is the household selected for	YES 1	1 ⇒ End
Questionnaire for Men?	NO2	
HW1. We would like to learn about where members of this household wash their hands. Can you please show me where members of your household most often wash their hands? Record result and observation.	OBSERVED FIXED FACILITY OBSERVED (SINK / TAP/ TIPPY TAP) IN DWELLING	4 <i>⇒</i> HW5 5 <i>⇒</i> HW4
	OTHER REASON (specify)6	6 <i>⇒HW5</i>
HW2. Observe presence of water at the place for handwashing. Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.	WATER IS AVAILABLE	
HW3. Is soap or detergent or ash/mud/sand present at the place for handwashing?	YES, PRESENT	1 <i>⇒HW7</i> 2 <i>⇒HW5</i>
HW4. Where do you or other members of your household most often wash your hands?	FIXED FACILITY (SINK / TAP / TIPPY TAP) IN DWELLING	
HW5 . Do you have any soap or detergent or ash in your house for washing hands?	YES	2 <i>⇒HW8</i>
HW6 . Can you please show it to me?	YES, SHOWN	2 <i>⇒ HW8</i>
HW7. Record your observation. Record all that apply.	BAR OR LIQUID SOAPA DETERGENT (POWDER / LIQUID / PASTE)B	
	ASH/MUD/SAND	

HW8 . In the last month, has there been any time when your household did not have sufficient	YES, AT LEAST ONCE1 NO, ALWAYS SUFFICIENT WATER2	2 <i>⇒ HW10</i>
quantities of water to wash hands when needed?	DK8	8 <i>⇒ HW10</i>
HW9 . What was the <u>main</u> reason your household did not have sufficient quantities of water to wash hands when needed?	WATER NOT AVAILABLE FROM SOURCE	
HW10. In the last month, has there been any time when your household did not have sufficient soap to wash hands when needed?	YES, AT LEAST ONCE	2⇒ End 8 ⇒ End
HW11. What was the main reason your household did not have sufficient soap to wash hands when needed?	SOAP NOT AVAILABLE IN THE HOUSE1 SOAP TOO EXPENSIVE	

SNAKEBITE		HS
HS1. In the last five years, that is since (month of interview) (year of interview minus 5), how many members of the household have been bitten by a snake? Please include individuals who may have left the household or who may have died. If none, record "00". If 95 or more, record "95". If unknown, record "98".	NUMBER	00 ⇒ End
HS2. Who was the last household member to be bitten by a snake? If necessary, probe: Does (name) still reside in the household?	NAME	
Record the name and line number of the snakebite victim. If victim no longer part of the household or died record 00.		
HS3 . Check HS2: Is the snakebite victim no longer part of the household or dead?	NOT IN HOUSEHOLD OR DEAD, HS2=001 STILL HOUSEHOLD MEMBER, HS2≠00 2	2 <i>⇒</i> HS6
HS4 . Is (<i>name mentioned in HS2</i>) still alive?	YES	1 <i>⇒HS6</i> 8 <i>⇒HS6</i>
HS5 . Did (<i>name mentioned in HS2</i>) die as a consequence of the snakebite?	YES, DIED AS A CONSEQUENCE OF SNAKEBITE	All ⇔ HS7
HS6. Does (<i>name mentioned in HS2</i>) have a permanent disability as a consequence of the snakebite? Probat Permanent physical disabilities may	YES, HAS DISABILITY AS A CONSEQUENCE OF SNAKEBITE	
Probe: Permanent physical disabilities may include reduced functions of a body part, amputation, chronic pain or skin ulcer.	CAUSES /DOES NOT HAVE DISABILITY2 DK8	
HS7. Did (<i>name mentioned in HS2</i>) ever receive treatment at the time of the snakebite?	YES 1 NO 2 DK 8	2 ⇒End 8 ⇒End

HS8. Where did (name mentioned in HS2)	PUBLIC MEDICAL SECTOR	
receive treatment at the time of the snakebite?	GOVERNMENT HOSPITALA	
	GOVERNMENT HEALTH CENTREB	
<i>Probe:</i> Anywhere else?	GOVERNMENT CLINIC/PHUC	
	MOBILE/ OUTREACH CLINICD	
Record all providers mentioned, but do not	RURAL HEALTH MOTIVATORE	
prompt	OTHER PUBLIC MEDICAL (specify) F	
with any suggestions.		
	PRIVATE MEDICAL SECTOR	
Probe to identify each type of provider.	PRIVATE HOSPITAL / CLINICG	
	PRIVATE PHYSICIANH	
If unable to determine if public, private, mission	PRIVATE PHARMACYI	
or	MOBILE/ OUTREACH CLINICJ	
NGO sector, write the name of the place and then	OTHER PRIVATE MEDICAL (specify)_K	
temporarily record 'X' until you learn the	MISSION MEDICAL SECTOR	
appropriate category for the response.	HOSPITALL	
	CLINICM	
	OUTREACH SITEN	
	OTHER MISSION MEDICAL (specify)O	
(Name of place)		
·	NGO MEDICAL SECTOR	
	CLINICP	
	OUTREACH SITEQ	
	OTHER NGO MEDICAL (specify)R	
	DK PUBLIC, PRIVATE, MISSION OR NGO	
	S	
	OTHER SOURCE	
	RELATIVE / FRIEND / NEIGHBOUR /	
	OWN HOMET	
	SHOP / MARKET / STREETU	
	TRADITIONAL PRACTITIONERV	
	SPIRITUAL HEALERW	
	OTHER (masife)	
	OTHER (specify) X	
	DK/ DON'T REMEMBERZ	

SALT IODISATION		SA
SA0 . Check HH8: Is the household selected for Questionnaire for Men?	YES	1 ⇒End
SA1 . We would like to check whether the salt used in your household is iodised. Could you please bring the container or packet of salt which is used to <u>cook meals</u> in your household?	SALT TESTED NO REACTION	5 <i>⇒</i> SA3
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 NOT TESTED NO SALT IN THE HOUSE	4 <i>⇒End</i> 6 <i>⇒End</i>
SA2 . I would like to perform one more test. Please be patient and wait for the results before you can take back the salt.	SALT TESTED NO REACTION	
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 NOT TESTED OTHER REASON (specify)6	
SA3. Observe the packaging or container in which the salt is stored and record the appropriate code.	IN A CONTAINER WITH LID	

		г
HH13. Record the time.	HOUR AND MINUTES ::	
HH14. Language of the Questionnaire.	ENGLISH 1 SISWATI 2	
HH15. Language of the Interview.	ENGLISH 1 SISWATI 2	
	OTHER LANGUAGE (specify)6	
HH16. Native language of the Respondent.	ENGLISH 1 SISWATI 2	
	OTHER LANGUAGE (specify)6	
HH17 . Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE 1 YES, PART OF QUESTIONNAIRE 2 NO, NOT USED	
HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:	NO CHILDREN	
	2 OR MORE CHILDREN (NUMBER) —	

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.

HH20.	HH21.	HH22.	HH23.		HH24.
Rank	Line	Name from HL2	Sex	from	Age from
number	number		H	L4	HL6
	from				
	HL1				
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 <u>record</u> the number that appears in the box. This is the rank number (HH20) of the selected child.

	TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18)						
LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	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)	RANK NUMBER
and age (HH24) of the selected child.	
	LINE NUMBER
HH27. (When HH18=1 or when there is a single child age 5-17 in the	
household): Record the rank number as '1' and record the line number (HL1),	NAME
the name (HL2) and age (HL6) of this child from the LIST OF HOUSEHOLD	
MEMBERS.	AGE

HH28 . Issue a QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the mother/caretaker of this child.							
HH29A. Check HL8	in the LIS	T OF HOU	JSEHOLD	NO WOM	MEN	0	0 <i>⇒HH34</i>
MEMBERS and ind	icate the t	otal numbe	er of women age				
<i>15-49</i> :				1 WOMA	.N	1	1 <i>⇒HH30H</i>
				2 OR MO	RE WOMEN (NUMBE	R)	
HH30. Issue a separa	ate QUES	TIONNAIR	E FOR INDIVIDU	JAL WOM	EN for each woman age	15-49 y	ears.
HH30A . List each of the women age 15-49 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 15-49 years. Record the line number, name and age for each woman.							
	НН30В .	НН30С .	HH30D		НН30 Е.		
	Rank	Line	Name from	HL2	Age from		
	number	number			HL6		
		from					
		HL1					
	RANK	LINE	NAME		AGE		
	1						
	2						
	3						
	4						
	5						
	6						

HH30F. 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 women age 15-49 years in HH29A 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 \underline{record} the number that appears in the box. This is the rank number (HH30A) of the selected woman.

	TOTAL NUMBER OF ELIGIBLE WOMEN IN THE HOUSEHOLD (FROM HH29A)						
LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2)	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

	O		1		7	0	-		
	7	1	3	3	5	1	5	3	
	8	2	1	4	1	2	6	4	
	9	1	2	1	2	3	7	5	
HH30G. Record the rank number (HH30B), line number (HH30C), name (HH30D) and age (HH30E) of the selected woman. HH30H. (When HH29A=1 or when there is a single woman age 15-49 in the household): Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this woman from the LIST OF HOUSEHOLD MEMBERS.									
	This woman has been select OMEN AGE 15-49. Record 131.								
	heck HL6 and HL8 in the I HOLD MEMBERS: Are th		rls age 15	- 17.	, AT LEAS			1 2	.⇔НН34
HH32 . Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?					, AT LEAS WITH HL HL20=90 17	20≠90 FOR ALL	GIRLS A	1 GE	.⇔НН34

HH33 . As part of the survey we are also interviewing women permission. A female interviewer conducts these interview		view for
For girls age 15-17 we must also get permission from an ad information we obtain will remain strictly confidential and		, all the
May we interview (name(s) of female member(s) age 15-12	7) later?	
☐ 'Yes' for all girls age 15-17 ⇒ Continue with HH34.		
☐ 'No' for at least one girl age 15-17 and 'Yes' to at lea	ast one girl age 15-17 ⇔ Record '06' in WA	117 (also in
UF17 and FS17, if applicable) on individual question	naires for those adult consent was not give	n. Then
continue with HH34.		
☐ 'No' for all girls age 15-17 ⇒ Record '06' in WM17 ((also in UF17 and FS17, if applicable) on a	ıll individual
questionnaires for whom adult consent was not given.	Then continue with HH34.	
HH34. Check HH8 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for Questionnaire for Men?	YES, HH8=1	2 <i>⇒</i> HH40
HH35. Check HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any men age 15-49?	YES, AT LEAST ONE MAN AGE 15-49	2 <i>⇒</i> HH40
HH36. Issue a separate QUESTIONNAIRE FOR INDIVID		
HH37 . 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	2 <i>⇒HH4</i> 0
HH38. 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	2 <i>⇒</i> HH40
HH39 . As part of the survey we are also interviewing men a permission. A male interviewer conducts these interviews		w for
For boys age 15-17 we must also get permission from an ad information we obtain will remain strictly confidential and		e, all the
May we interview (name(s) of male member(s) age 15-17)	later?	
☐ 'Yes' for all boys age 15-17 ⇒ Continue with HH40.		
□ 'No' for at least one boy age 15-17 and 'Yes' to at least in UF17 and FS17, if applicable) on individual questic continue with HH40.	, ,	`
☐ 'No' for all boys age 15-17 ⇒ Record '06' in MWM17 auestionnaires for whom adult consent was not given.		all individual

HH40 . Check HL10 in the LIST OF HO MEMBERS: Are there any children a			S, AT LEAST ONE					
HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.								
HH42. Check HH9 in the HOUSEHOL INFORMATION PANEL: Is the house Water Quality Testing Questionnaire	.D ehold selected for	YES	S, HH9=1 , HH9=2	1				
HH43. Issue a separate WATER QUAL	LITY TESTING QUE	STIO	NNAIRE for this househol	'd	•			
HH44. As part of the survey we are als quality of drinking water. We would be test of your drinking water. A colleag collect the water samples. May we do that respondent requests to learn the a that results will not be shared with inchouseholds but will be made available.	like to do a simple ue will come and such a test? results, explain dividual		S, PERMISSION IS GIVE , PERMISSION IS NOT (2⇔Record '02' in WQ31 on the WATER QUALITY TESTING QUESTION -NAIRE and then continue with HH44A			
HH44A. Check HC7[A] and HC12: Do have a fixed telephone line or does an household own a mobile phone?			S, HC7[A]=1 OR HC12=1 , HC7[A]=2 AND HC12=		2 <i>⇔НН45</i>			
HH44B. Thank you for your participation. The Central Statistical Office 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 30 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								
HH44C. Do you have a personal phone your household have a communal nur			S		2 <i>⇒HH45</i>			
can be reached? 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.								
	ГР11		[P2]		[P3]			

	[P1]	[P2]	[P3]
	BEST NUMBER	2 ND NUMBER	3 RD NUMBER
HH44E . Ask for and record phone number.			

HH44F . Just to confirm, the number is (<i>number from HH44E</i>)?	YES1	YES1	YES1
If no, return to HH44E and correct entry.	NO2\(\triangle \text{HH44E}\)	NO2 ₩ <i>HH44E</i>	NO2 ₩ <i>HH44E</i>
HH44G. Is this a fixed line or a mobile phone number?	FIXED LINE1 MOBILE2	FIXED LINE 1 MOBILE 2	FIXED LINE 1 MOBILE 2
HH44H. What is the best day of the week and time of the day to call you on this number? Probe: Any other day or time? Record all mentioned.	WEEKDAYS MORNING	WEEKDAYS MORNING	WEEKDAYS MORNING
HH44I. 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	YES	YES
			Tick here if additional questionnaire used:□

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 and no WATER QUALITY TESTING 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	