

HOUSEHOLD QUESTIONNAIRE

Trinidad and Tobago 2022 MICS



HOUSEHOLD INFOR	MATION PANEL								
HH1. Cluster number:			НН2. Но	HH2. Household number:					
HH3. Interviewer's name and number: NAME			HH4. Sup NAME	HH4. Supervisor's name and number: NAME					
HH5. Day / Month / Year / / /				WEST RHA					
HH6. Area:		URBAN RURAL	1 EASTER SOUTH-	NORTH-CENTRAL RHA EASTERN RHA SOUTH-WEST RHA TOBAGO RHA					
HH9. Is the household se QUALITY TESTING?	elected for WATER	YES		the household for blank testing?			1		
Check that the responder	nt is a knowledgeable	member of the	household and a	t least 18 vears old	d	HH11. Record to	he time.		
before proceeding. You household or all adult r	ı may only interview a	child age 15-1	7 if there is no a	idult member of the	e	HOURS : 1	MINUTES		
HH12. Hello, my name is children, families and h Following this, I may a information we obtain a stop the interview, plea	nouseholds. I would like sk to conduct addition will remain strictly con	ke to talk to you al interviews winfidential and an	about these subjith you or other i	ects. This interview ndividual members	w us s of	sually takes abou your household.	t 30 minutes. All the		
YES NO / NOT ASKED				1 <i>⇒LIST OF HO</i> 2 <i>⇒HH46</i>	USI	EHOLD MEMBE	ERS		
Household Questionnaire interview: Discuss any result not completed with Supervisor.	NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT								
HH47. Name and line number of the respondent to				er the Household e is completed		To be filled after questionnaires completed	aires are		
NAME TO		TOTAL NUME	ral number		COMPLETED 1	NUMBER			
HOUSEHOLD MEMBERS		HH48							
WOMEN AGE 15-49			НН49			НН53			
CHILDREN UNDER AGE 5			HH51			НН55			
CHILDREN AGE 5-17			HH52			НН56	ZERO0 ONE1		

LIST OF HOUSEHOLD MEMBERS 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: HL3. HL4. HL5. HL6. HL6A. HL6B. HL7A. HL7B. HL8. HL10. HL11. HL12. HL13. Does HL14. HL15. HL16. HL17. HL18. HL19. HL20. First, please tell me the What is the In what country What is (name)'s To which Where does What is (name)'s date How old What is (name)'s Record Record Age 0-(name)'s Record Where does Does Record Copy the umber relationship of birth? name of each person (name) is (name)? was (name) born? religion? (name)'s natural the line the line country of ethnic group line (name)'s (name) (name)'s (name)'s who usually lives here of (name) to male or citizenship? does (name) number number natural mother live number natural s natural natural number natural father number o 11 ANGLICAN starting with the head 1 TRINIDAD & if age 0mother mother live? of father live? (name of the female? belong? in this housefather father live mother Record in voman 12 RAPTIST of the household completed TOBAGO A TRINIDAD & and age hold? head of alive? mother alive? in this 13 HINDUISM 11 AFRICAN 2 GUYANA TOBAGO household) 15-49. to HL20. HL14. If vears and go ABROAD house-ABROAD B GUYANA 3 ST. VINCENT 14 ISLAM 12 EAST Probe for additional to HL16 hold? 2 IN ANOTHER blank, ask C ST. VINCENT ANOTHER HOUSEHOLD IN THIS COUNTRY 15 JEHOVAH'S 4 U.S.A. INDIAN HOUSEHOLD household members. If age is IN THIS COUNTRY DUSA WITNESS 13 CHINESE 5 VENEZUELA YES 1 YES 1 YES 1 YES Who is the 1 MALE 95 or E VENEZUELA 16 METHODIST 14 SYRIAN 2 NO か NO S 1 YES 2 FEMALI 2 NO か 2 NO か above. INSTITUTION primary 6 OTHER 7 PENTECOSTAL /LEBANESE X OTHER HL15 HI 20 4 INSTITUTION record Next HI.16 2 NO 9 caretaker COUNTRY /EVANGELICAL 15 CAUCASIAN 8 DK № COUNTRY 8 DK ☆ IN THIS COUNTRY OUTSIDE T&T Line OUTSIDE T&T / FULL GOSPEL 16 MIXED-HL20 HL16 (name)? 18 PRESBYTERIAN AFRICAN 8 DK 8 DK K NO CITIZENSHIE 8 dk 9 ROMAN AND EAST If 'No one CATHOLIC INDIAN Y NOT T&T for a child 20 SEVENTH DAY 7 MIXED -CITIZEN, BUT age 15-17 ADVENTIST DK WHICH record COUNTRY 21 NO RELIGION 96 OTHER 98 DK 9998 DK Z DK IF T&T 96 OTHER CITIZEN OR 98 DK RELIGION ANOTHER 98 DK COB CITIZENSHIP RELIGION ETHNICITY Y N DK NAME RELATION* MONTH YEAR AGE W 15-49 0-4 Y N MOTHER LINE M F Y N Y N DK Y N FATHER 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 8 1 2 1 2 4 8 01 01 01 1 2 1 2 8 1 2 0 1 1 2 1 2 8 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 1 2 4 8 02 1 2 02 02 1 2 1 2 8 1 2 1 2 8 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 1 2 4 8 03 1 2 03 03 1 2 1 2 8 1 2 1 2 4 8 1 2 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 04 04 04 1 2 1 2 8 1 2 1 2 8 1 2 1 2 4 8 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 05 05 1 2 1 2 8 1 2 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 8 1 2 4 8 1 2 06 1 2 06 06 1 2 1 2 8 1 2 1 2 8 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 1 2 4 8 1 2 07 07 1 2 8 1 2 07 1 2 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 8 1 2 1 2 4 8 08 1 2 08 08 1 2 8 1 2 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 8 1 2 4 8 1 2 1 2 4 8 1 2 00 09 1 2 1 2 8 1 2 09 1 2 8 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 1 2 4 8 10 1 2 10 10 1 2 1 2 8 1 2 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 1 2 8 1 2 1 2 4 8 1 2 11 11 11 1 2 1 2 8 1 2 1 2 8 1 2 3 4 5 6 8 ABCDEXKYZ 1 2 4 8 1 2 1 2 4 8 1 2 8 12 1 2 12 12 1 2 1 2 1 2 8 2 3 4 5 6 8 ABCDEXKYZ 2 4 1 2 1 2 4 8 1 2 1 2 8 13 13 13 1 2 1 2 1 2 8 1 2 14 1 2 1 2 3 4 5 6 8 ABCDEXKYZ 14 14 1 2 8 1 2 4 1 2 4 8 1 2 1 2

307

15

15

14 SERVANT (LIVE-IN)

96 OTHER (NOT RELATED)

1 2

13 ADOPTED / FOSTER / STEPCHILD

1 2 8

1 2

1 2 3 4 5 6 8 ABCDEXKYZ

09 BROTHER-IN-LAW / SISTER-IN-LAW

10 UNCLE/AUNT

11 NIECE / NEPHEW

12 OTHER RELATIVE

05 GRANDCHILD

07 PARENT-IN-LAW

08 BROTHER / SISTER

06 PARENT

15

head of

household:

Codes for HL3:

Relationship to

01 HEAD

02 SPOUSE / PARTNER

04 SON-IN-LAW / DAUGHTER-IN-LAW

03 SON / DAUGHTER

1 2 8

1 2

1 2 4 8

1 2 4

EDUC	ATION 1														ED
ED1. Line number	ED2. Name and age. Copy names and ages of <u>all</u> members of the h from HL2 and HL6 to below <u>and</u> to next page module.		ED3. Age 3 of above? 1 YES 2 NO of Next	y	ED4. Has (name attended so any Early (Care and E (ECCE) programmed) 1 YES 2 NO \$\Delta\$	e) ever chool or Childhood ducation e? Next Line	ED5. What is the highest level and school (name) has ever attended attended attended at the level. LEVEL: 00 ECCE 01 PRIMARY 02 LOWER SECONDARY 03 UPPER SECONDARY 04 6 TH FORM 05 BACHELOR'S 06 MASTER'S/PH.D		eve	(<i>nam</i> r <u>com</u> r year? ES O	<u>plete</u>	ED7. Age 3- 1 YES 2 NO s Nex		ED8. Check I Ever att school of ECCE? 1 YES 2 NO & Ne.	tended or
							98 DK								
LINE 01	NAME	AGE	YES 1	NO 2	YES 1	NO	LEVEL	YEAR	Y	N	DK 8	YES 1	NO	YES	NO
02			1	2	1	2 2			1	2	8	1	2	1	2 2
03			1	2	1	2			1	2	8	1	2	1	2
03			1	2	1	2			1	2	8	1	2	1	2
05			1	2	1	2			1	2	8	1	2	1	2
06			1	2	1	2			1	2	8	1	2	1	2
07			1	2	1	2			1	2	8	1	2	1	2
08			1	2	1	2	<u> </u>		1	2	8	1	2	1	2
08			1	2	1	2			1	2	8	1	2	1	2
10			1	2	1	2			1	2	8	1	2	1	2
11			1	2	1	2			1	2	8	1	2	1	2
12			1	2	1	2			1	2	8	1	2	1	2
13			1	2	1	2			1	2	8	1	2	1	2
14			1	2	1	2			1	2	8	1	2	1	2
15			1	2	1	2	<u> </u>		1	2	8	1	2	1	2

EDUC	ATION 2											ED
ED1.	ED2.		ED9.	ED10.		ED11.	ED12.	ED13.	ED14.	ED15.	ED16.	
Line number	Name and age.		At any time during the 2021/2022 school year did (<i>name</i>) attend school or any Early Childhood Care and Education (ECCE) programme? 1 YES 2 NO \$\times_{ED15}\$	During the 2021/school year, which and year is (name attending? LEVEL: 00 ECCE 01 PRIMARY 02 LOWER SECONDARY 03 UPPER SECONDARY 04 6TH FORM 05 BACHELOR'S 06 MASTER'S/PH.D	h level	Is (he/she) attending a public school? If "Yes", record '1'. If "No", probe to code who controls and manages the school. 1 GOVT./PUBLIC 2 RELIGIOUS/FAITH ORG. 3 PRIVATE 6 OTHER 8 DK	In the 2021/2022 school year, has (name) received any school tuition support? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO \$\text{YES} \text{2 NO \$\text{5}}\$ \text{ED14}	Who provided the tuition support? Record all mentioned. A GOVT. / PUBLIC B RELIGIOUS/ FAITH ORG. C PRIVATE. X OTHER Z DK	For the 2021/2022 school year, has (name) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO 8 DK	At any time during the 2020/2021 school year did (name) attend school or any Early Childhood Care and Education programme (ECCE)? 1 YES 2 NO \$\text{y} Next Line} 8 DK \$\text{y} Next Line}	During the 2020/2 school year, whice and year did (namattend? LEVEL: 00 ECCE 01 PRIMARY 02 LOWER SECONDARY 03 UPPER SECONDARY 04 6TH FORM 05 BACHELOR'S 06 MASTER'S/PH.D	h level
LINE	NAME	AGE	YES NO	LEVEL	YEAR	AUTHORITY	YES NO DK	TUITION	YES NO DK	YES NO DK	LEVEL	YEAR
01			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
02			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
03			1 2			1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8		
04			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
05			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
06			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
07			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
08			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
09			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
10			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
11			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
12			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
13			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
14			1 2			1 2 3 6 8	1 2 8	ABCXZ	1 2 8	1 2 8		
15			1 2			1 2 3 6 8	1 2 8	A B C X Z	1 2 8	1 2 8		

HOUSEHOLD CHARACTERISTICS		НС
HC1B. What is the native language of (name of the head	ENGLISH1	
of the household from HL2)?	SPANISH2	
	MANDARIN	
	OTHER LANGUAGE	
	(specify)6	
HC3. How many rooms do members of this household		
usually use for sleeping?	NUMBER OF ROOMS	
HC4. Main material of the dwelling floor.	NATURAL FLOOR	
	EARTH / SAND / DIRT11	
Record observation.	DUNG / LEPAY12	
	RUDIMENTARY FLOOR	
If observation is not possible, ask the respondent to	WOOD PLANKS21	
determine the material of the dwelling floor.	PALM / BAMBOO22	
	FINISHED FLOOR	
	PARQUET OR POLISHED WOOD31 VINYL32	
	CERAMIC / PORCELAIN TILES	
	CEMENT	
	CARPET35	
	TERRAZZO/TERRAZZO TILES36	
	OTHER (specify)96	
HC5. Main material of the roof.	NO ROOF11	
	NATURAL ROOFING	
Record observation.	THATCH / PALM LEAF12	
	RUDIMENTARY ROOFING	
	WOOD PLANKS23	
	CARDBOARD24	
	FINISHED ROOFING	
	METAL / TIN	
	CERAMIC / ROOFING TILES	
	CEMENT / CONCRETE	
	ROOFING SHINGLES	
	OTHER (specify)96	

HC6. Main material of the exterior walls.	NO WALLS11	
	NATURAL WALLS	
Record observation.	CANE / PALM / TRUNKS12	
	WATTLE / ADOBE / TAPIA14	
	RUDIMENTARY WALLS	
	STONE WITH MUD22	
	PLYWOOD24	
	CARDBOARD25	
	REUSED WOOD26	
	FINISHED WALLS	
	CEMENT / CONCRETE31	
	BRICKS AND CONCRETE33	
	CEMENT BLOCKS34	
	WOOD PLANKS / SHINGLES36	
	OTHER (specify)96	
HC7. Does your household have:	YES NO	
[A] A fixed telephone line?	FIXED TELEPHONE LINE1 2	
[B] A radio?	RADIO 1 2	
[C] A water storage tank?	WATER STORAGE TANK1 2	
[D] A sofa/couch?	SOFA/COUCH1 2	
[E] A table?	TABLE 1 2	
[F] A bed?	BED 1 2	
[G] A wardrobe/clothes cupboard?	WARDROBE/	
•	CLOTHES CUPBOARD1 2	
HC8. Does your household have electricity?	YES, INTERCONNECTED GRID1	
======================================	YES, OFF-GRID (GENERATOR/ISOLATED	
	SYSTEM)2	
	,	HC10
		11010

HC9. Does your household have:	YES 1	NO
[A] A television?	TELEVISION1	2
[B] A refrigerator?	REFRIGERATOR1	2
[C] A washing machine?	WASHING MACHINE1	2
[D] An air conditioning unit?	AIR CONDITIONING UNIT1	2
[E] A water pump?	WATER PUMP1	2
[F] A clothes dryer?	CLOTHES DRYER1	2
[G] A stereo?	STEREO1	2
[H] A microwave?	MICROWAVE1	2
HC10. Does any member of your household own:	YES 1	NO
[A] A wristwatch?	WRISTWATCH1	2
[B] A bicycle?		2
[C] A motorcycle or scooter?	BICYCLE 1	2
[D] An animal-drawn cart?	MOTORCYCLE / SCOOTER 1	2
[E] A car, truck or van?	ANIMAL-DRAWN CART 1	2
[F] A boat with a motor?	CAR / TRUCK / VAN 1	2
HC11 Deep care member of your household have a	BOAT WITH MOTOR 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	
HC14. Do you or someone living in this household own this dwelling?	OWN	1
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	

HC16. How many acres of agricultural land do members of this household own? If less than 1, record '00'.	ACRES95 OR MORE95 DK98	
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	
[D] Goats?	GOATS	
[E] Sheep?	SHEEP	
[F] Chickens?	CHICKENS	
[G] Pigs?	PIGS	
[H] Fish ponds?	FISH PONDS	
[I] Rabbits?	RABBITS	
[J] Bee hives?	BEE HIVES	
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 or credit union account?	YES	

SOCIAL TRANSFERS

ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

	[A]	[B]	[C]	[D]	[E]	[X]
	PUBLIC	DISABILITY	TT (FOOD)	SENIOR	COVID19	ANY OTHER
	ASSISTANCE	ASSISTANCE	CARD	CITIZENS	SOCIAL	EXTERNAL
	GRANT	GRANT		PENSION	SUPPORT	ASSISTANCE
					ASSISTANCE	PROGRAMME
ST2. Are you aware of (<i>name of programme</i>)?	YES1 છ	YES1 છ		YES1 ώ	YES1 છ	YES
	ST3	ST3	ST3	ST3	ST3	(specify)1 ∆
	NO2 ∿	NO2 か	NO2 分	NO 2 分	NO 2 か	ST3
	[B]	[C]	[D]	[X]	[X]	NO2∿
						End
ST3. Has your household or anyone in your	YES1 Ώ	YES1 Ώ	YES1 Φ	YES 1 છ	YES1 ω	YES1 Φ
household received assistance through (name	ST4	ST4	ST4	ST4	ST4	ST4
of programme)?	NO2 ∿	NO2 か	NO2 分	NO 2 分	NO 2 か	NO2 か
	[B]	[C]	[D]	[X]	[X]	End
	DK8 分	DK8 公	DK8 公	DK 8 分	DK 8 か	DK8 か
	[B]	[C]	[D]	[X]	[X]	End
ST4. When was the <u>last time</u> your household	MONTHS	MONTHS	MONTHS	MONTHS AGO1	MONTHS	MONTHS
or anyone in your household received	AGO 1	AGO1	AGO1		AGO1	AGO1
assistance through (<i>name of programme</i>)?	∿	$\hat{\Sigma}$	$\hat{\Sigma}$	$\hat{\Sigma}$		$\hat{\Sigma}$
	[B]	[C]	[D]	[X]	[X]	End
If less than one month, record '1' and record	YEARS AGO 2	YEARS AGO 2	YEARS AGO2	YEARS	YEARS AGO 2	YEARS AGO 2
'00' in Months.				AGO2		
If less than 12 months, record '1' and record	∿	$ \dot{\Sigma} $	$\hat{\Sigma}$	$\hat{\Sigma}$	Σ	$\hat{\Sigma}$
in Months.	[B]	[C]	[D]	[X]	[X]	End
If 1 year/12 months or more, record '2' and	DK998	DK998	DK998	DK998	DK998	DK998
record in Years.	Σ		$\hat{\Sigma}$	$\hat{\Sigma}$	$ \dot{\Sigma} $	
	[B]	[C]	[D]	[X]	[X]	End

HOUGEHOLD EXERGY HOE		DIII
HOUSEHOLD ENERGY USE		EU
EU1 . In your household, what type of stove	ELECTRIC STOVE01	01 <i>⇒EU5</i>
is mainly used for cooking?	SOLAR COOKER02	02 <i>⇒EU5</i>
	LIQUEFIED PETROLEUM GAS (LPG)/	
	COOKING GAS STOVE03	03 <i>⇒EU5</i>
	PIPED NATURAL GAS STOVE04	04 <i>⇒EU5</i>
	LIQUID FUEL STOVE06	06 <i>⇔EU4</i>
	MANUFACTURED SOLID FUEL STOVE /	
	COALPOT07	
	TRADITIONAL SOLID FUEL STOVE/	
	CHULA	
	THREE STONE STOVE / OPEN FIRE /	09 <i>⇔EU4</i>
	FIRESIDE09	09-7E04
	OTHER (specify)96	96 <i>⇔EU4</i>
	offiliat (specify))0 /L0 /
	NO FOOD COOKED IN	
	HOUSEHOLD97	97 <i>⇒EU</i> 9
EU2. Does it have a chimney?	YES	
E02. Does it have a chimney:	1125	
	NO	
	DV.	
	DK 8	
EU3. Does it have a fan?	YES	
	NO	
	DK 8	
	DK 8	
EU4. What type of fuel or energy source is	ALCOHOL / ETHANOL01	
used in this stove?	GASOLINE / DIESEL02	
	KEROSENE / PARAFFIN03	
If more than one, record the main energy	COAL / LIGNITE04	
source for this stove.	CHARCOAL05	
	WOOD	
	CROP RESIDUE / GRASS /STRAW /	
	SHRUBS07	
	WASTE	
	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	
	OTHER (specify)96	
EU9. At night, what does your household mainly use to light the household?	ELECTRICITY	

WATER AND SANITATION		WS
WS1. What is the main source of drinking	PIPED WATER	
water used by members of your household?	PIPED INTO DWELLING11	11 <i>⇒WS7</i>
water used by members or your nousehold?	PIPED TO YARD / PLOT12	11 → WS7 12 ⇔ WS7
	PIPED TO NEIGHBOUR	12 \$\sigma WS 3
If an along probe to identify the place from	PUBLIC TAP / STANDPIPE	13 <i>> W</i> S 3
If unclear, probe to identify the place from	PUBLIC TAP / STANDPIPE14	14 4 W 33
which members of this household most often collect drinking water (collection	DUG WELL	
	PROTECTED WELL31	31 <i>⇒WS3</i>
point).	UNPROTECTED WELL 32	31 <i>> W</i> S 3 32 <i>⇒ W</i> S 3
	SPRING	3241133
	PROTECTED SPRING41	41 <i>⇒WS3</i>
	UNPROTECTED SPRING	
	UNPROTECTED SPRING42	42 <i>⇒WS3</i>
	RAINWATER51	51 <i>⇒WS3</i>
	TANKER-TRUCK61	61 <i>⇒WS4</i>
	SURFACE WATER (RIVER, DAM, LAKE,	
	POND, STREAM, CANAL, IRRIGATION	
	CHANNEL)81	81 <i>⇒WS3</i>
	D. CV. CPD W. TDD	
	PACKAGED WATER	
	BOTTLED WATER91	
	OTHER (specify)96	96 <i>⇒WS3</i>
WS2. What is the main source of water used	PIPED WATER	
by members of your household for other	PIPED INTO DWELLING11	11 <i>⇒WS7</i>
purposes such as cooking and	PIPED TO YARD / PLOT12	12 <i>⇒WS7</i>
handwashing?	PIPED TO NEIGHBOUR	
-	PUBLIC TAP / STANDPIPE14	
If unclear, probe to identify the place from		
which members of this household most	DUG WELL	
often collect water for other purposes.	PROTECTED WELL31	
	UNPROTECTED WELL32	
	SPRING	
	PROTECTED SPRING41	
	UNPROTECTED SPRING42	
	RAINWATER51	
	TANKER-TRUCK 61	61 <i>⇒WS4</i>
	SURFACE WATER (RIVER, DAM, LAKE,	0171134
	POND, STREAM, CANAL, IRRIGATION	
	CHANNEL)81	
	,	
	OTHER (specify)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 household to go there, get water, and come back?	MEMBERS DO NOT COLLECT000 NUMBER OF MINUTES	000 <i>⇔WS7</i>
WS5. Who usually goes to this source to collect the water for your household? Record the name of the person and copy the line number of this person from the	NAMELINE NUMBER	
LIST OF 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 when your household did not have sufficient quantities of drinking water?	YES, AT LEAST ONCE	2 <i>⇒WS</i> 9 8 <i>⇒WS</i> 9
WS8. What was the main reason that you were unable to access water in sufficient quantities when needed?	WATER NOT AVAILABLE FROM SOURCE 1 WATER TOO EXPENSIVE	
	OTHER (specify)	
WS9. Do you or any other member of this household do anything to the water to make it safer to drink?	YES	2 <i>⇒WS11</i>
it said to dillik!	DK8	8 <i>⇒WS11</i>

	T	1
WS10. What do you usually do to make the	BOILA	
water safer to drink?	ADD BLEACH / CHLORINE B	
	STRAIN IT THROUGH A CLOTHC	
Probe:	USE WATER FILTER (CERAMIC, SAND,	
Anything else?	COMPOSITE, ETC.)	
	LET IT STAND AND SETTLEF	
Record all methods mentioned.		
	OTHER (specify)X	
	DKZ	
WS11. What kind of toilet facility do	FLUSH / POUR FLUSH	
members of your household usually use?	FLUSH TO PIPED SEWER SYSTEM 11	11 <i>⇒WS14</i>
	FLUSH TO SEPTIC TANK 12	
If 'Flush' or 'Pour flush', probe:	FLUSH TO PIT LATRINE	
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	PIT LATRINE	
to observe the facility.	VENTILATED IMPROVED PIT	
	LATRINE21	
	PIT LATRINE WITH SLAB22	
	PIT LATRINE WITHOUT SLAB /	
	OPEN PIT	
	BUCKET41	41 <i>⇒WS14</i>
	NO FACILITY / BUSH / FIELD95	95 <i>⇒End</i>
	OTHER (specify)96	96 <i>⇒WS14</i>
WS12. Has your (answer from WS11) ever	YES	
been emptied?		
1	NO4	4 <i>⇒WS14</i>
	DK8	8 <i>⇔WS14</i>
	I .	1

WS13. The last time it was emptied, where	REMOVED BY SERVICE PROVIDER	
were the contents emptied to?	TO A TREATMENT PLANT	
	BURIED IN A COVERED PIT2	
Probe:	TO DON'T KNOW WHERE	
Was it removed by a service provider?		
······································	EMPTIED BY HOUSEHOLD	
	BURIED IN A COVERED PIT4	
	TO UNCOVERED PIT, OPEN GROUND,	
	WATER BODY OR ELSEWHERE5	
	OTHER () (C)	
	OTHER (specify)6	
	DK8	
WS14. Where is this toilet facility located?	IN OWN DWELLING1	
	IN OWN YARD / PLOT2	
	ELSEWHERE	
WS15. Do you share this facility with others	YES1	
who are not members of your household?	NO 2	2 <i>⇒End</i>
WS16. Do you share this facility only with	SHARED WITH KNOWN HOUSEHOLDS	
members of other households that you	(NOT PUBLIC)1	
know, or is the facility open to the use of	SHARED WITH GENERAL PUBLIC2	2 <i>⇒End</i>
the general public?		
WS17. How many households in total use	NUMBER OF HOUSEHOLDS	
this toilet facility, including your own	(IF LESS THAN 10) <u>0</u>	
household?		
	TEN OR MORE HOUSEHOLDS10	
	DK98	
	2.2	

HANDWASHING	HW	
HW1. We would like to learn about where	OBSERVED	
members of this household wash their hands.	FIXED FACILITY OBSERVED (SINK / TAP)	
	IN DWELLING1	
Can you please show me where members of	IN YARD /PLOT2	
your household <u>most often</u> wash their hands?	MOBILE OBJECT OBSERVED	
	(BUCKET / JUG / KETTLE)3	
Record result and observation.	NOT ORGEDIED	
	NOT OBSERVED	
	NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4	4 <i>⇒HW5</i>
	NO PERMISSION TO SEE	4 <i>→11W3</i> 5 <i>⇒HW4</i>
	NOTERWISSION TO SEE	3 -711 W 4
	OTHER REASON (specify)6	6 <i>⇒HW5</i>
HW2. Observe presence of water at the place	WATER IS AVAILABLE1	
for handwashing.		
	WATER IS NOT AVAILABLE2	
Verify by checking the tap/pump, or basin,		
bucket, water container or similar objects		
for presence of water.		
HW3. Is soap or detergent present at the	YES, PRESENT1	1 <i>⇒HW</i> 7
place for handwashing?	NO, NOT PRESENT2	2 <i>⇒HW5</i>
HW4. Where do you or other members of your	FIXED FACILITY (SINK / TAP)	
household most often wash your hands?	IN DWELLING1	
	IN YARD / PLOT2	
	MOBILE OBJECT	
	(BUCKET / JUG / KETTLE)3	
	,	
	NO HANDWASHING PLACE IN	
	DWELLING / YARD / PLOT4	
	OTHER (specify)6	
HW5. Do you have any soap or detergent in	YES1	
your house for washing hands?	NO2	2 <i>⇒End</i>
HW6. Can you please show it to me?	YES, SHOWN1	
	NO, NOT SHOWN2	2 <i>⇒End</i>
HW7. Record your observation.	BAR OR LIQUID SOAPA	
Record all that apply.	DETERGENT (POWDER / LIQUID / PASTE) B	

HH13. Record the time.	HOUR AND MINUTES : : :	
HH15. Language of the Interview.	ENGLISH 1 SPANISH 2	
HH16. Native language of the Respondent.	ENGLISH 1 SPANISH 2 MANDARIN 3 OTHER LANGUAGE 6	
HH17. Was a translator used for any parts of this questionnaire?	YES, ENTIRE QUESTIONNAIRE	
HH18. Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:	NO CHILDREN 0 1 CHILD 1 2 OR MORE CHILDREN (NUMBER)	0 <i>⇔HH29</i> 1 <i>⇔HH27</i>

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. Rank number	HH21. Line number from HL1	HH22. Name from HL2	HHZ Sex J HL4	from	HH24. Age from HL6
RANK	LINE	NAME	M	F	AGE
1			1	2	
2			1	2	
3			1	2	
4			1	2	
5			1	2	
6			1	2	
7			1	2	
8			1	2	

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	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 (HH26 and age (HH24) of the selected child	(HH22) RANK NUMBER LINE NUMBER.	_		
HH27. (When HH18=1 or when there household): Record the rank number (HL1), the name (HL2) and age (HL0 HOUSEHOLD MEMBERS.	ber NAME			
HH28. Issue a QUESTIONNAIRE FOR child.	R CHILDREN AGE 5-17 to be	administered to the mother/ca	retaker of this	
HH29. Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are ther women age 15-49?	e any	ONE WOMAN AGE 15-4912	2 <i>⇒HH40</i>	
HH30. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.				
HH31. Check HL6 and HL8 in the LIS HOUSEHOLD MEMBERS: Are ther age 15-17?	· · · · · · · · · · · · · · · · · · ·	ONE GIRL AGE 15-171	2 <i>⇔HH40</i>	

HH32. Check HL20 in the LIST OF	YES, AT LEAST ONE GIRL AGE 15-17	
HOUSEHOLD MEMBERS: Is consent	WITH HL20≠901	
required for interviewing at least one girl age	NO, HL20=90 FOR ALL GIRLS AGE 15-	
15-17?	172	2 <i>⇒HH40</i>
HH33. As part of the survey we are also interview permission. A female interviewer conducts these		terview for
For girls age 15-17 we must also get permission from interview them. As mentioned before, all the information anonymous.		
If the household questionnaire respondent is not a necessary arrangements to get her/their parent's c		-17) make
May we interview (name(s) of female member(s)	age 15-17) later?	
☐ 'Yes' for all girls age 15-17 ⇒ Continue wit	h HH40.	
	to at least one girl age 15-17 \$ Record '06' in ual questionnaires for those parental/adult conse	·
	n WM17 (also in UF17 and FS17, if applicable) ol/adult consent was not given. Then continue with	
HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4?	YES, AT LEAST ONE	2 <i>⇒HH42</i>
HH41. Issue a separate QUESTIONNAIRE FOR (CHILDREN UNDER FIVE for each child age 0-4	! years.
HH42. Check HH9 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for WATER QUALITY TESTING QUESTIONNAIRE?	YES, HH9=1	2 <i>⇔HH44A</i>
HH43. Issue a separate WATER QUALITY TESTI.	NG QUESTIONNAIRE for this household	
HH44. As part of the survey we are also looking at the quality of drinking water. We would like to do a simple test of your drinking water. A colleague will come and collect the water samples. May we do such a test? If the respondent requests to learn the results, explain that results will not be shared with individual households but will be made available to local authorities.	YES, PERMISSION IS GIVEN1 NO, PERMISSION IS NOT GIVEN2	2 ⇒ Record '02' in WQ31 on the WATER QUALITY TESTING QUESTI- ONNAIRE

MICS PLUS CONSENT		
HH44A. Check HC7[A] and HC12: Does this	YES, HC7[A]=1 OR HC12=11	
household have a fixed telephone line or		
does any member of the household own a	NO, HC7[A]=2 AND HC12=22	2 <i>⇒HH45</i>
mobile phone?		

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 15 minutes, and we may call you a few times over a period of a few months. Participation in this phone survey is voluntary, and even if you agree to participate now, you may decide to withdraw from participation in the future. There will be no costs to you for participating in the phone survey. Please know that all the information you share during future phone interviews will remain strictly confidential, and your phone number will not be shared with anyone outside our team. Would you like to participate?

YES	
NO	2 <i>⇒HH45</i>

HH44C. Do you have a personal phone number or does your household have a communal number where you can be reached?	YES	2 <i>⇔HH45</i>
--	-----	----------------

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

	[P1]	[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</i>	YES1	YES1	YES1
<i>HH44E</i>)?	NO2\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	NO2 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	NO2 ₩ <i>HH44E</i>
If no, return to HH44E and correct entry.			
HH44G . Is this a fixed line or a mobile phone number?	FIXED LINE1 MOBILE2	FIXED LINE1 MOBILE2	FIXED LINE 1 MOBILE 2
HH44H. What is the best day of	WEEKDAYS	WEEKDAYS	WEEKDAYS
the week and time of the day to	MORNINGA	MORNINGA	MORNING A
call you on this number?	AFTERNOON B	AFTERNOONB	AFTERNOONB
	EVENINGC	EVENINGC	EVENINGC
<i>Probe:</i> Any other day or time?	OTHER	OTHER	OTHER
	(specify)D	(<i>specify</i>) D	(specify) D
Record all mentioned.	WEEKEND	WEEKEND	WEEKEND
	MORNINGE	MORNINGE	MORNINGE
	AFTERNOONF	AFTERNOON F	AFTERNOON F
	EVENINGG	EVENINGG	EVENING G
	OTHER	OTHER	OTHER
	(specify)H OTHER	(specify) H OTHER	(specify) H OTHER
	(specify)X	(specify)X	(specify)X
HH44I. Remember, you may share your household communal	YES19	YES 1 \([P3] \)	YES19 [P4]
number, but please, do not share any personal phone numbers that	NO2分 <i>HH45</i>	NO2分 <i>HH45</i>	NO29 HH45
belong to individual members of your household. Do you have			
another personal or communal			
phone number where you can be reached?			
reached!			
			Tick here if additional

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	