

**English version**

# **Urban Health Survey 2006**

## **Household Questionnaire**

**NATIONAL INSTITUTE OF POPULATION RESEARCH AND TRAINING (NIPORT)**  
Ministry of Health and Family Welfare, Azimpur, Dhaka

**ASSOCIATES FOR COMMUNITY AND POPULATION RESEARCH (ACPR)**  
3/10, Block A, Lalmatia, Dhaka-1207  
TELEPHONE: 9114784, 8117926, FAX: 8117926  
E-MAIL: [acpr@bangla.net](mailto:acpr@bangla.net)

**MEASURE *Evaluation***  
**USA**



INFORMED CONSENT

Hello. My name is \_\_\_\_\_ . We come from Associates for Community and Population Research, a private research organization, located in Dhaka. To assist in the implementation of socio-development programs in the country, we conduct different types of surveys. We are now conducting a survey about the health of urban residents. The survey is paid for by the United States Agency for International Development. The survey is being coordinate by National Institute of Population Research and Training (NIPORT). The data will be examined by NIPORT, ACPR in Bangladesh and by researchers at the University of North Carolina in Chapel Hill, North Carolina, USA. We would very much appreciate your participation in this survey. I would like to ask you about your household. This information will help us to understand the state and determinants of health in urban Bangladesh. If some questions cause you embarrassment or make you feel uncomfortable, you can refuse to answer them. The survey usually takes between 15 and 20 minutes to complete. Whatever information you provide will be kept strictly confidential. It will be used for research purposes and will be seen only by staff and researchers at the organizations mentioned.

Participation in this survey is voluntary and you can choose not to answer any individual question or all of the questions. However, we hope that you will participate in this survey since your views are important. If you wish to know more about your rights as a participant in this study you may write the Bangladesh Medical Research Council (BMRC), Mohakhali, Dhaka or Institutional Review Board (IRB) at the School of Public Health, CB # 7400, University of North Carolina at Chapel Hill, Chapel Hill, NC 27599-7400, U.S.A .If you have further questions regarding the nature of this study you may also contact ACPR 3/10, Block-A, Lalmatia, Dhaka-1207 or phone 8117926.

At this time, do you want to ask me anything about the survey?  
May I begin the interview now?

Signature of interviewer: \_\_\_\_\_ Date: \_\_\_\_\_

|   |  |
|---|--|
| RESPONDENT AGREES TO BE INTERVIEWED ....<br>↓ | RESPONDENT DOES NOT AGREE TO BE<br>INTERVIEWED .....2 →END |
|---|--|

**HOUSEHOLD CHARACTERISTICS**

Now we would like some information about the people who usually live in your household or who are staying with you now.

| LINE NO. | USUAL RESIDENTS AND VISITORS | RELATIONSHIP TO HEAD OF HOUSEHOLD | SEX                       | RESIDENCE                      |                                  | AGE                              | MARITAL STATUS                      | ELIGIBILITY (All USUAL RESIDENTS)                                    |  |  |   | EDUCATION IF AGE 5 YEARS OR OLDER  |   |                                  | EMPLOYMENT IF AGE 8 YEARS OR OLDER  |   |
|----------|------------------------------|-----------------------------------|---------------------------|--------------------------------|----------------------------------|----------------------------------|-------------------------------------|--|--|--|---|--|---|----------------------------------|---|---|
|          |                              |                                   |                           | Does (NAME) usually live here? | Did (NAME) stay here last night? |                                  |                                     | How old is (NAME)?<br><br><b>IF AGE IS LESS THAN 1 YEAR WRITE 00</b> | <b>FOR ALL AGED 10 OR ABOVE</b><br><br>What is the current marital status of (NAME)?<br>** | CIRCLE LINE NUMBER OF ALL EVER MARRIED WOMEN Q5=1, Q8=1 OR 2 AND AGE < 60 (Q7=<60) | CIRCLE LINE NUMBER OF ALL NEVER MARRIED WOMEN Q5=1, Q8=3 AND AGE 18-59 Q7=18-59 | CIRCLE LINE NUMBER OF ALL EVER MARRIED MEN Q5=1, Q8=1 OR 2 AND AGE < 60 (Q7=<60) | CIRCLE LINE NUMBER OF ALL NEVER MARRIED MEN Q5=1, Q8=3 AND AGE 18-59 Q7=18-59 | Has (NAME) ever attended school? | What is the level of schooling (NAME) has last attended?***<br>What is the highest class (NAME) completed at that schooling?*** | IF AGED LESS THAN 25 YEARS<br>Is (NAME) currently attending school? |
| (1)      | (2)                          | (3)                               | (4)                       | (5)                            | (6)                              | (7)                              | (8)                                 | (9)  | (10)   | (11)   | (12)  | (13)   | (14)  | (15)                             | (16)  | (17)  |
| 01       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 01   | 01   | 01   | 01  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |
| 02       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 02   | 02   | 02   | 02  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |
| 03       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 03   | 03   | 03   | 03  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |
| 04       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 04   | 04   | 04   | 04  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |
| 05       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 05   | 05   | 05   | 05  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |
| 06       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 06   | 06   | 06   | 06  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |
| 07       |                              | <input type="text"/>              | Male .....1<br>Female ..2 | Yes .....1<br>No.....2         | Yes.....1<br>No.....2            | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM .... 3 | 07   | 07   | 07   | 07  | Yes.....1<br>No .....2<br>Go to 16   | Level Grade<br><input type="text"/> <input type="text"/>                      | Yes.....1<br>No .....2           | Yes.....1<br>No .....2<br>Next line   | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4                     |

| (1) | (2) | (3)                  | (4)                       | (5)                    | (6)                   | (7)                              | (8)                                | (9) | (10) | (11) | (12) | (13)                               | (14)   | (15)                   | (16)                                | (17)  |
|-----|-----|----------------------|---------------------------|------------------------|-----------------------|----------------------------------|------------------------------------|-----|------|------|------|------------------------------------|--|------------------------|-------------------------------------|---|
| 08  |     | <input type="text"/> | Male .....1<br>Female ..2 | Yes .....1<br>No.....2 | Yes.....1<br>No.....2 | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM.... 3 | 08  | 08   | 08   | 08   | Yes.....1<br>No .....2<br>Go to 16 | Level Grade<br><input type="text"/> <input type="text"/> | Yes.....1<br>No .....2 | Yes.....1<br>No .....2<br>Next line | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4 |
| 09  |     | <input type="text"/> | Male .....1<br>Female ..2 | Yes .....1<br>No.....2 | Yes.....1<br>No.....2 | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM.... 3 | 09  | 09   | 09   | 09   | Yes.....1<br>No .....2<br>Go to 16 | Level Grade<br><input type="text"/> <input type="text"/> | Yes.....1<br>No .....2 | Yes.....1<br>No .....2<br>Next line | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4 |
| 10  |     | <input type="text"/> | Male .....1<br>Female ..2 | Yes .....1<br>No.....2 | Yes.....1<br>No.....2 | <input type="text"/><br>In years | CM .... 1<br>FM .... 2<br>NM.... 3 | 10  | 10   | 10   | 10   | Yes.....1<br>No .....2<br>Go to 16 | Level Grade<br><input type="text"/> <input type="text"/> | Yes.....1<br>No .....2 | Yes.....1<br>No .....2<br>Next line | Cash .. 1<br>Kind .. 2<br>Both... 3<br>None.. 4 |

TICK HERE IF CONTINUATION SHEET USED

Just to make sure that I have a complete listing:

- Are there any other persons such as small children or infants that we have not listed? Yes  → Enter each in table No
- In addition, are there any other people who may not be Members of your family, such as domestic servants, Lodgers or friends who usually live here? Yes  → Enter each in table No
- Are there any guests or temporary visitors staying here, or anyone else who slept here last night, who have not been listed? Yes  → Enter each in table No

- Total number of ever married women circled in column (9) (IF NONE WRITE 0 IN BOX)
- Total number of never married women circled in column (10) (IF NONE WRITE 0 IN BOX)
- Total number of ever married men circled in column (11) (IF NONE WRITE 0 IN BOX)
- Total number of never married men circled in column (12) (IF NONE WRITE 0 IN BOX)

| * CODES FOR Q.3                           |                             | ** CODE FOR Q. 8                          | *** CODE FOR Q. 14    |                               |
|---|-----------------------------|---|-----------------------|-------------------------------|
| <b>RELATIONSHIP TO HEAD OF HOUSEHOLD:</b> |                             | <b>MARITAL STATUS:</b>                    | <b>EDUCATION</b>      |                               |
|   |                             |   | <b>LEVEL SCHOOL</b>   | <b>GRADE</b>                  |
| Household head =01                        | Parent in law =07           | Currently married=1                       | Primary =1            | Less than 1 year completed=00 |
| Wife or husband =02                       | Brother or sister =08       | Formerly married =2                       | Secondary =2          |                               |
| Son or daughter =03                       | Other relative=09           | (Divorced/widowed/<br>separated/deserted) | College and higher =3 | Don't know =98                |
| Son-in law or daughter-in law=04          | Adopted/foster/stepchild=10 | Never married =3                          |                       |                               |
| Grandchild =05                            | Not related =11             |   |                       |                               |
| Parent =06                                |                             |   |                       |                               |

## Section 2. Basic Characteristics (BC)

| NO.                                   | QUESTIONS AND FILTERS  | CODING CATEGORIES   | SKIP   |
|---------------------------------------|--|---|--------|
| <b>LEGAL STATUS</b>                   |  |   |        |
| 201.                                  | Is this dwelling your owned or rented or others?   | Owned..... 1<br>Rented..... 2<br>From employer ..... 3<br>Relative's house..... 4<br>Other _____ ..... 6<br>(Specify)   |        |
| 201a.                                 | Who owns the land on which this dwelling is situated?  | Respondent or other resident..... 1<br>Government..... 2<br>Employer non Government ..... 3<br>Landlord..... 4<br>Relative ..... 5<br>Other _____ ..... 6<br>(Specify)<br>Don't know ..... 8  |        |
| <b>BASIC PHYSICAL CHARACTERISTICS</b> |  |   |        |
| 202.                                  | How much usable living space does your family have (ie the total area of rooms, kitchen, bathroom, toilet, hall, pantries)?<br><b>(Ask length and width and calculate the Square feet)</b> | Square feet. .... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>   |        |
| 203.                                  | Besides kitchen and bathroom, how many rooms are there in your dwelling?   | Rooms ..... <input type="text"/> <input type="text"/>   |        |
| 204.                                  | What is the material from which the roof of this dwelling is made?<br><b>(RECORD OBSERVATION)</b>  | Jhupri/polithin ..... 1<br>Bamboo/Thatch (Katcha) ..... 2<br>Tin ..... 3<br>Cement/ Concrete/Taly ..... 4   | → 205  |
| 204a.                                 | What is the material from which the floor of this dwelling is made?<br><b>(RECORD OBSERVATION)</b>   | Earth (Katcha) ..... 1<br>Wood..... 2<br>Cement/ Concrete/Tiles ..... 3   |        |
| 204b.                                 | What is the material from which the walls of this dwelling are made?<br><b>(RECORD OBSERVATION)</b>  | Jute/Bamboo/mud (Katcha) ..... 1<br>Wood..... 2<br>Brick/Cement ..... 3<br>Tin..... 4   |        |
| <b>WATER AND ELECTRICITY</b>          |  |   |        |
| 205.                                  | Does this household have electricity?  | Yes ..... 1<br>No ..... 2   |        |
| 206.                                  | What is the main source of drinking water for your household?  | <b>INSIDE DWELLING</b><br>Piped water ..... 01<br>Tube well ..... 02<br>Well ..... 03<br><b>OUTSIDE DWELLING</b><br>Piped water ..... 04<br>Tube well ..... 05<br>Well ..... 06<br><b>SURFACE WATER</b><br>Pond/river/stream ..... 07<br>Rainwater..... 08<br>Other _____ ..... 96<br>(Specify) |        |
| 207.                                  | Any other families share your family's main drinking water source?   | Yes ..... 1<br>No ..... 2   | → 207b |
| 207a.                                 | How many families share your family's main drinking water source?<br><b>(Interviewer: If cannot tell exactly the number of families, ask approximate range.)</b>                           | Families..... <input type="text"/> <input type="text"/> <input type="text"/><br>Families: _____ from _____  |        |

| NO.  | QUESTIONS AND FILTERS  | CODING CATEGORIES  | SKIP            |
|--|--|--|-----------------|
| 207b.                                      | <b>INTERVIEWER: CHECK Q.206 AND CIRCLE IN APPROPRIATE CODE..</b>   | Code 01 or 02 or 03 is circled ..... 1<br>Any one code is circled other than 01 or 02 or 03 ..... 2  | → 208           |
| 207c.                                      | How much time (including travel and waiting) does your household usually spend to get the water for daily household consumption? | Minutes ..... <input type="text"/> <input type="text"/> <input type="text"/>   |                 |
| <b>TOILET FACILITIES</b>                   |  |  |                 |
| 208.                                       | What kind of toilet facility does your household use?  | Septic tank/modern toilet ..... 1<br>Water sealed/slab latrine ..... 2<br>Pit toilet/latrine..... 3<br>Open latrine..... 4<br>Hanging latrine..... 5<br>No facility/bush/field ..... 6   |                 |
| 208a.                                      | Is it inside or outside your household?  | Inside household ..... 1<br>Outside household..... 2   |                 |
| 208b                                       | Any other families share this toilet?  | Yes ..... 1<br>No..... 2   | → 209           |
| 208c.                                      | How many families, including your own, is it shared?   | Families ..... <input type="text"/> <input type="text"/>   |                 |
| <b>SEWERAGE AND GARBAGE</b>                |  |  |                 |
| 209.                                       | What is the principal way you dispose of garbage?  | Collected from home ..... 01<br>Household disposes within premises.....02<br>Household disposes in a bin outside the house ..... 03<br>Household disposes in open spaces outside the house ..... 04<br>Burned..... 05<br>Buried..... 06<br>Other ..... 06<br>(Specify)                                       | → 209b<br>→ 210 |
| 209a.                                      | How frequently is garbage collected from your house?   | Everyday ..... 1<br>Several days a week ..... 2<br>1 to 3 times a month..... 3<br>Less than once a month..... 4<br>Other ..... 6<br>(Specify)  | → 210           |
| 209b.                                      | How frequently is garbage collected from the place where you dispose it?   | Everyday ..... 1<br>Several days a week ..... 2<br>1 to 3 times a month..... 3<br>Less than once a month ..... 4<br>Never collected ..... 5<br>Other ..... 6<br>(Specify)<br>Don't know..... 8   |                 |
| <b>REFRIGERATION, LIGHTING AND COOKING</b> |  |  |                 |
| 210.                                       | What type of fuel does your household use for cooking?   | Wood ..... A<br>Crop residue/grass ..... B<br>Dung cakes ..... C<br>Coal/coke/lignite..... D<br>Charcoal..... E<br>Kerosene ..... F<br>Electricity..... G<br>Liquid gas/gas..... H<br>Bio-gas..... I<br>Fabric scraps (as in from textile factory)..... J<br>Wood dust ..... K<br>Other ..... X<br>(Specify) |                 |

### Section 3. Consumption (CN)

| NO.   | QUESTIONS AND FILTERS  | CODING CATEGORIES                                       |  | SKIP      |
|-------|--|---|--|-----------|
| 301.  | <b>INTERVIEWER: Check Q. 201 and circle in appropriate code</b>                              | Owned .....   | 1  |           |
|       |  | Rented .....  | 2  | → 301b    |
|       |  | From employer .....                                     | 3  | → 301c    |
|       |  | Other .....   | 6  |           |
|       |  | (Specify)   |  |           |
| 301a. | If you rented your house, how much will be the rent?   | Taka .....  | <input type="text"/>   | → 302     |
| 301b  | How much the rent of this house?   | Taka .....  | <input type="text"/>   | → 302     |
| 301c. | Do you pay any money as rent ? <b>If yes</b> , how much?                                     | None .....  | 00000  |           |
|       |  | Taka .....  | <input type="text"/>   |           |
|       |  | Don't know .....  | 99998  |           |
| 302.  | What was the total household expenditure in the past month?<br><br><b>(READ OUT)</b>         | <b>Subjects</b>   | <b>Taka</b><br><b>(IF NONE WRITE 00000)</b>                    |           |
|       |  | A. Food .....   | <input type="text"/>   |           |
|       |  | B. Electricity/fuel for lighting.....                   | <input type="text"/><br>Included in the house rent ..... 99995 |           |
|       |  | C. Telephone/Mobile .....                               | <input type="text"/><br>No telephone/ Mobile .....99994        |           |
|       |  | D. Gas/cooking fuel.....                                | <input type="text"/><br>Included in the house rent .....99995  |           |
|       |  | E. Water and sewage                                     | <input type="text"/><br>Included in the house rent .....99995  |           |
|       |  | F. Transport  | <input type="text"/>   |           |
|       |  | G. Recreation/social obligations                        | <input type="text"/>   |           |
| 303.  | What was the total household expenditure in the last 1 year?<br><br><b>(READ OUT)</b>        | <b>Subjects</b>   | <b>Taka</b><br><b>(IF NONE WRITE 000000)</b>                   |           |
|       |  | A. Education .....                                      | <input type="text"/>   |           |
|       |  | B. Health and treatment.....                            | <input type="text"/>   |           |
|       |  | C. Clothing .....                                       | <input type="text"/>   |           |
| 304.  | In the last one year, have you had purchased any of the following ?<br><br><b>(READ OUT)</b> | <b>Subjects</b>   | <b>Yes</b>   | <b>No</b> |
|       |  | A. Land   | 1  | 2         |
|       |  | B. Home   | 1  | 2         |
|       |  | C. Ornament   | 1  | 2         |
|       |  | D. Valuable things such as TV, refreezarator, furniture | 1  | 2         |
|       |  | E. Motor cycle  | 1  | 2         |
|       |  | F. Car  | 1  | 2         |

| NO.   | QUESTIONS AND FILTERS   | CODING CATEGORIES  | SKIP         |
|-------|---|--|--------------|
| 305.  | Did your household save any money in the past year, <b>IF YES</b> , How much? <b>(IF NONE WRITE 000000)</b>   | Taka ..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |              |
| 306.  | Did your household borrow in the past year, <b>IF YES</b> , How much? <b>(IF NONE WRITE 000000)</b>   | Taka ..... <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |              |
| 307.  | In the last 1 year, how frequently has your household faced the situation where at least some of the members couldn't have 3 (breakfast, lunch and dinner) meals (rice/ruti) due to a shortage of food? | Whole year ..... 1<br>Special time ..... 2<br>(Specify English month's name)<br>Never ..... 3  | → <b>401</b> |
| 307a. | <b>(In the last 1 year)</b> How many days?<br><b>(Interviewer: If cannot tell exactly the number of days, ask approximate range.)</b>   | Days ..... <input type="text"/> <input type="text"/> <input type="text"/><br>Days: _____ from _____                                      |              |

## Section 4. Basic Durable Goods and Assets (BD)

| BASIC DURABLE GOODS AND ASSETS |   |   |            |           |
|--------------------------------|---|---|------------|-----------|
| 401.                           | Does your household own any [...]?  | <b>Goods and assets</b>                       | <b>Yes</b> | <b>No</b> |
|                                |   | A. Almirah/wardrobe .....                     | 1          | 2         |
|                                |   | B. Table.....                                 | 1          | 2         |
|                                |   | C. Chair .....                                | 1          | 2         |
|                                |   | D. Radio (working) .....                      | 1          | 2         |
|                                |   | E. Television (working) .....                 | 1          | 2         |
|                                |   | F. Motorcycle.....                            | 1          | 2         |
|                                |   | G. Telephone/mobile phone ..                  | 1          | 2         |
|                                |   | H. Computer.....                              | 1          | 2         |
|                                |   | I. Refrigerator.....                          | 1          | 2         |
|                                |   | J. Electric fan .....                         | 1          | 2         |
|                                |   | K. Automobile.....                            | 1          | 2         |
|                                |   | L. Tape player/CD Player /<br>DVD Player..... | 1          | 2         |
|                                |   | M. Air conditioner.....                       | 1          | 2         |
| 402.                           | Have you or someone in the household been victim of crime or violence in the last 6 months? | <b>Crime/violence</b>                         | <b>Yes</b> | <b>No</b> |
|                                |   | A. Street robbery .....                       | 1          | 2         |
|                                |   | B. Theft .....                                | 1          | 2         |
|                                |   | C Molest.....                                 | 1          | 2         |
|                                |   | D. Car theft.....                             | 1          | 2         |
|                                |   | E. Abduction/kidnapping ....                  | 1          | 2         |
|                                |   | F. Rape .....                                 | 1          | 2         |
|                                |   | G. Murder.....                                | 1          | 2         |

**Section 5. Blood pressure and Blood glucose measurement  
(Among 60 and above aged usual HH members)**

| NO.  | QUESTIONS AND FILTERS   | CODING CATEGORIES   |   |   | SKIP                      |
|--|---|---|---|---|---------------------------|
| 501.   | <b>INTERVIEWER: Check Column 5 and 7 in household roster and circle in appropriate code.</b>  | <b>Yes in Q. column 5 and age 60 and above ..... 1</b><br><b>No in Q. column 5 and age 60 and above ..... 2</b><br><b>All ages are &lt;60 ..... 3</b> |   |   | Go to individual Question |
| 502.   | <b>INTERVIEWER: Record total number of usual HH members aged 60 and above from household rosters.</b>   | Number ..... <input type="text"/>   |   |   |                           |
| <b>INTERVIEWER: ENTER IN THE TABLE THE LINE NUMBER AND NAME OF EACH USUAL HH MEMBER AGED 60 AND ABOVE FROM HOUSEHOLD ROASTERS. ASK FROM Q. 503 SEPARATLY TO EACH MEMBER.</b> |   |   |   |   |                           |
| 502a.  | Questions   | Line # <input type="text"/><br>Name: _____  | Line # <input type="text"/><br>Name: _____  | Line # <input type="text"/><br>Name: _____  |                           |
|  |   | 1   | 2   | 3   |                           |
| 503.   | Do you have high blood pressure?  | Yes ..... 1<br>No ..... 2 → 503c<br>Don't know .8   | Yes ..... 1<br>No ..... 2 → 503c<br>Don't know .8   | Yes ..... 1<br>No ..... 2 → 503c<br>Don't know .8   |                           |
| 503a   | Did you seek any treatment?   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   |                           |
| 503b   | Do you take any medication?   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   |                           |
| 503c   | <b>INTERVIEWER: CHECK THE BLOOD PRESSURE AND RECORD IN APPROPRIATE BOX.</b>   | Systolic .. <input type="text"/><br>Diastolic .. <input type="text"/>   | Systolic .. <input type="text"/><br>Diastolic .. <input type="text"/>                       | Systolic .. <input type="text"/><br>Diastolic .. <input type="text"/>                       |                           |
| 504.   | Do you have diabetes?   | Yes ..... 1<br>No ..... 2 → 504c<br>Don't know .8   | Yes ..... 1<br>No ..... 2 → 504c<br>Don't know .8   | Yes ..... 1<br>No ..... 2 → 504c<br>Don't know .8   |                           |
| 504a.  | Did you seek any treatment?   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   |                           |
| 504b   | Do you take any medication?   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   | Yes ..... 1<br>No ..... 2   |                           |
| 504c.  | Have you taken your breakfast?  | Yes ..... 1<br>No ..... 2 → 504e  | Yes ..... 1<br>No ..... 2 → 504e  | Yes ..... 1<br>No ..... 2 → 504e  |                           |
| 504d.  | <b>INTERVIEWER: IF THE RESPONDENT TOOK HER BREAKFAST, THEN REQUEST THE RESPONDENT TO REMAIN FASTING UNTIL YOU ARRIVE THERE IN THE NEXT MORNING FOR TAKING BLOOD SAMPLE.</b> |   |   |   |                           |
| 504e.  | <b>INTERVIEWER: ENSURE THAT THE RESPONDENT IS FASTING AND THEN COLLECT BLOOD SAMPLE FOR BLOOD GLUCOSE AND RECORD IN APPROPRIATE BOX.</b>                                    | MG/DL <input type="text"/>  | MG/DL <input type="text"/>  | MG/DL <input type="text"/>  |                           |
| 505.   | Result Code   | Completed ..... 1<br>Not available ..... 2<br>Refused ..... 3<br>Other ..... 6<br>(Specify)   | Completed ..... 1<br>Not available ..... 2<br>Refused ..... 3<br>Other ..... 6<br>(Specify) | Completed ..... 1<br>Not available ..... 2<br>Refused ..... 3<br>Other ..... 6<br>(Specify) |                           |