

# INSTRUCTIONS FOR INTERVIEWERS

**SURVEY COORDINATORS:** CUSTOMIZE THESE INSTRUCTIONS BASED ON YOUR QUESTIONNAIRE, ENSURING THAT THE INFORMATION IN THIS CHAPTER IS APPROPRIATE TO YOUR SURVEY.

SOME COUNTRIES MAY NEED TO PROVIDE SLIGHTLY DIFFERENT INSTRUCTIONS, DEPENDING ON THEIR QUESTIONNAIRES.

DELETE INSTRUCTIONS ON MODULES NOT USED IN YOUR COUNTRY.

ORDER THE INSTRUCTIONS IN ACCORDANCE WITH YOUR QUESTIONNAIRE.

DELETE ALL THE BOXES FOR 'SURVEY COORDINATORS' AFTER THE CUSTOMIZATIONS ARE COMPLETED.

THEN TRANSLATE THIS CHAPTER INTO THE INTERVIEWERS' LOCAL LANGUAGE(S), IF NECESSARY.

USE THESE INSTRUCTIONS DURING THE TRAINING OF THE FIELDWORK PERSONNEL AND PROVIDE A COPY TO EACH TRAINING PARTICIPANT

## Notes:

**INTERVIEWER QUESTIONS APPEAR IN SMALL CAPITAL LETTERS AND BOLD PRINT;** Instructions to interviewers appear in regular fonts; **AND NOTES TO SURVEY COORDINATORS APPEAR IN SMALL CAPITAL LETTERS IN BOXED PARAGRAPHS.**

## MICS4 QUESTIONNAIRES AND ELIGIBLE RESPONDENTS

In each sampled household you visit, you should begin by interviewing a knowledgeable adult member of the household to fill in the Household Questionnaire. All modules of the Household Questionnaire will be administered to this person, referred to as the **Household Respondent**, including the module in the questionnaire where the information collected is about other household members (i.e., the educational attainment).

For the purposes of this questionnaire, an adult is defined as someone age 15 and over. However, young adults (below age 18) may not be the most ideal members to interview. Therefore, in cases when there is another older household member (for instance, the parent of the 15 year-old) available to interview, you should prefer to interview this person who is likely to be more knowledgeable about the household. Interviewing the household head is not a must and you are not required to ask for the household head to do the interview.

It is also true that it can be an advantage if you begin the Household Questionnaire with a mother or primary caretaker, since many of the questions/modules are about children, and mothers/caretaker provide more accurate responses to such questions better than anybody else. While you should not make a specific effort to ensure this, you will indeed start the interview with such persons in many cases, since, in practice, these persons are more likely to be at home than, say, male household heads.

There should only be one respondent to the Household Questionnaire and the other members of the household should not respond to any part of the questionnaire. Ideally, the respondent is also not expected to consult any other members that may be available in the household for some factual questions he or she may not be certain (i.e., age or education of household members). However, if you think that this may seriously affect the flow of the questionnaire(s) you may allow the respondent to ask other members in order to get more correct information (such as age information which may affect the eligibility of some members for individual questionnaires or modules where age checks are important (i.e., education or child labour module)).

When you have completed the Household Questionnaire, you will have identified women (age 15-49 years), men (age 15-49) and mothers or primary caretakers of children under five to whom you will administer the individual questionnaires.

- You should interview separately all women age 15 through 49 who reside in the household to fill in the Questionnaire for Individual Women.
- You should interview separately all men age 15 through 49 who reside in the household to fill in the Questionnaire for Individual Men.
- You should administer the Questionnaire for Children Under Five to mothers of children under 5 years of age who are residing in the household. Only if the mother is not listed in the Household Listing Form, then the person who is acknowledged as the primary caretaker should be the respondent to the Questionnaire for Children Under Five.

You will identify these individuals by completing the Household Listing Form in the Household Questionnaire.

If you visit a household with no members eligible for the individual questionnaires (Questionnaire for Individual Women, Questionnaire for Individual Men and Questionnaire for Children Under Five), you must still ask questions about the household to a knowledgeable adult member and complete the Household Questionnaire.

Your supervisor will give you a list or tell you how to find the households to visit. You must visit all these households and not replace these households with another household that is not selected for interview in that cluster.

If no one is at home when you go to interview the household, ask the neighbours whether the house is inhabited. If it is occupied, ask the neighbours when the household members will return. Arrange with your supervisor to go back to the dwelling when it will be occupied or at the end of the day. Note those plans on your cluster control sheet and note the time you are to return on the first page of the questionnaire (Household Information Panel).

If no adult is at home, arrange to come back at another time. Do not interview a temporary caretaker of the children, such as a babysitter; do not interview anyone who does not usually live in the household.

Each household in the sample has to be visited at least three times before you can mark the household as 'Not at home', unless otherwise instructed by your supervisor. There may be cases when you learn that the household will be away for an extended period, and will definitely not return within the fieldwork period. In such cases, three visits to the household may not be necessary. However, even in such cases, the ultimate decision will have to be taken by your supervisor.

If an eligible woman or man is not available for interview or not at home, ask a family member or neighbour when she/he will return. Note this on the Woman's or Man's Information Panel, follow your supervisor's instructions, and return to interview her/him at that time. Do not take responses for the women's or men's questionnaire from anyone other than the eligible person her/himself.

The person to be interviewed for the Questionnaire for Children Under Five should be the mother or the primary adult caretaker (if the mother is not residing in the household or is deceased). Only if the mother of the child is not alive or if she is alive but not listed in the household (living elsewhere) then you should interview the primary caretaker of the child in that household. If the mother/primary caretaker is not available for interview or not at home, try to find out when she/he will be available and return later. If the person will not be available or will not return home at a time later that day when it is feasible to interview her/him, follow the instructions of your supervisor about the number of times you should attempt the interview.

If a child under five is not available, but the mother/primary caretaker is, complete the questionnaire for the child but do not complete the last module (Anthropometry). If the child is still not available after the call-back visit(s), record the result in question AN2 as 'Child not present'.

Ask your supervisor if you are in doubt about what to do when you cannot locate a household, or you cannot complete an interview. Always keep a record on the cluster control sheet of the households you visited where nobody was at home. If it is not possible to interview an eligible woman or man, record this on the Woman's or Man's Information Panel of the questionnaire. If it is not possible to interview a

mother or primary caretaker, record this on the Under Five Child Information Panel of the Questionnaire for Children Under Five.

## GENERAL CHARACTERISTICS OF MICS QUESTIONNAIRES

### Character formatting:

*A standard coding and formatting system has been used throughout the questionnaires. These conventions can be summarized as follows, as covered in your training:*

SMALL CAPS	- used for questions you will use to ask to respondents
<i>Italics</i>	- instructions to the interviewer and cover page questions
Lower case letters	- response codes
<i>(italics enclosed in parentheses)</i>	- words to be replaced by the interviewer, as appropriate

### Skip Instructions:

Skip instructions are given in the questionnaires to ensure that you do not ask irrelevant questions to a respondent. For example, in question WS9, you are required to ask whether the toilet facility is shared with other household. If the response is “No”, the skip instruction is to move to the next module, so that WS10 and WS11 are not asked to the respondent (on whether the toilet is shared with other households and whether it is a public toilet and the number of households using the toilet).

Skips are very important, since a failure to take a skip into account may result in (1) asking an inappropriate question to the respondent, (2) incorrectly skipping a whole section which might otherwise be administered.

### Question styles:

- Some ‘questions’ are in the form of filters. These are in fact not questions to be asked to respondents. They include checks that the interviewer uses to skip certain questions.
- Areas with light grey background indicate those questions and filters that should not be verbalized by interviewers, but should be coded, based on previous responses or observations.
- Letters are used to indicate response categories in questions where multiple responses can be accepted and coded. Numbers are used to indicate response categories in questions where only one response will be coded. These constitute the majority of questions.
- DK is used to abbreviate ‘Doesn’t Know’.
- For numeric response codes, ‘8’, ‘98’, ‘998’ and ‘9998’ are used throughout to indicate ‘DK’ responses; ‘6’, ‘96’, ‘996’ and ‘9996’ are used to indicate ‘Other’ responses.
- In questions where letters are used for response categories, ‘X’ is used for ‘Other’, ‘Y’ is used for ‘None’, and ‘Z’ is used for ‘DK’.
- Rosters: These are lists that involve the collection of information on the same subject for multiple persons. For example, the education module is in the form of a roster, where educational level and attainment information is collected for all members of the household above age 5.
- Skip instructions are provided to the right of the response categories (with the exception of rosters), normally in a skip column, and indicate the number of the question that the interviewer should skip to (11⇒WS6).
- Probes are used to ask further questions to the respondent, and are either indicated as “*Probe:*” or with a question such as “ANYTHING ELSE?”
- Prompts are used to explicitly remind the respondent of an answer expected on a selected topic. For

example, in the case of household assets, respondent is not asked to simply list all household assets in the household, but rather, each of the assets the questionnaire is intended to collect is verbalized as a question, such as “ELECTRICITY?”.

- There are occurrences when a word is either in bold characters or underlined. These are intended to emphasize a point, or make sure that you do not forget what the question is intended to capture. For instance, in question WS1, the word “**MAIN**” is underlined to emphasize that only one source of drinking water should be circled.
- “Other” response codes are almost always followed by (*specify*), which indicate that once the “other” option is circled, you are expected to write the exact answer.

## HOW TO HANDLE AN INTERVIEW

The interviewer and the respondents are strangers to each other and therefore one of the main tasks of the interviewer is to establish rapport with the respondent. The respondent’s first impression of you will influence her/his willingness to participate in the survey. Make sure that your appearance is neat and you also appear friendly as you introduce yourself.

On meeting the respondent, the first thing you do is to introduce yourself, stating your name, organization you are working for, the objectives of the survey, and what you want the respondent to do for you. The interviewer is advised to avoid long discussions on issues which are not related to the survey and which may consume a lot of her time.

After building rapport with the respondent, ask questions slowly and clearly to ensure the respondent understands what he/she is being asked. After you have asked a question, pause and give the respondent time to think. If the respondent feels hurried or is not allowed to form his/her opinion, he/she may respond with “I don’t know” or give an inaccurate answer.

Specifically, the following guidelines will guide you on how to handle interviews:

- Ensure that you understand the exact purpose of the survey and each question. This will help you to know if the responses you are receiving are adequate.
- Remember the survey schedule, and remember that you are part of a team. Do not stay and talk for too long, but do not rush the interview either.
- Ask the questions exactly as they are written. Even small changes in wording can alter the meaning of a question.
- Ask the questions in the same order as they are given on the questionnaires. Do not change the sequence of the questions.
- Ask all the questions, even if the respondent answers two questions at once. You can explain that you must ask each question individually, or say “Just so that I am sure...” or “Just to refresh my memory...,” and then ask the question.
- Help your respondents feel comfortable, but make sure you do not suggest answers to your questions. For example, do not ‘help’ a woman remember various contraceptive methods.

- Do not leave a question unanswered unless you have been instructed to skip it. Questions left blank are difficult to deal with later. In the office it may look as though you forgot to ask the question. Always write in 0 when a zero answer is given. For some questions, the code ‘Doesn’t know’ will already be provided, and after you are sure that the respondent is unable to provide you with an answer, you will be able to circle this response. In questions where a ‘Doesn’t know’ response is not printed on the questionnaire, you must make sure that the respondent comes up with an answer. In exceptional cases where this may not be possible, indicate this on the questionnaire with a note.
- Record answers immediately when the respondent gives you the responses. Never rely on writing answers in a notebook for transfer to the questionnaire later.
- Check the whole questionnaire before you leave the household to be sure it is completed correctly.
- Thank the respondent for her (or his) cooperation and giving you time to interview her/him. Leave the way open to future interviews. Avoid over-staying in the respondent’s household even if he/she is very friendly and welcoming.

## **GENERAL POINTS**

### **Make a good first impression**

The first impression a respondent has of you is formed through your appearance. The way you dress may affect whether your interview is successful or not. Dress neatly and simply.

When first approaching the respondent, do your best to make her/him feel at ease. With a few well-chosen words, you can put the respondent in the right frame of mind for the interview. Open the interview with a smile and greetings and then proceed with your introduction as specified on your questionnaire.

If and when necessary, tell the respondent that the survey will help the Government to develop plans for children and women and that his/her cooperation will be highly appreciated.

### **Gain rapport with the respondent**

Try not to arrive at a respondent’s house at an inconvenient time of day, such as mealtimes. Try to arrive when the respondent will not be too busy to answer questions.

Introduce yourself by name and show your identification. Explain the survey and why you want to interview the women in the household, exactly as your introduction tells you to.

Be prepared to explain what is meant by confidentiality and to convince respondents to participate if they are reluctant.

If the respondent refuses to be interviewed, note the reasons on the questionnaire, if possible.

Remain calm and polite at all times.

### **Always have a positive approach**

Never adopt an apologetic manner, and do not use words such as “Are you too busy?”. Such questions will obviously invite refusal before you start. Rather, tell the respondent, “I would like to ask you a few questions”.

**Stress confidentiality of information collected**

Always stress confidentiality of the information you obtain from the respondent. Explain to the respondent that the information you collect will remain confidential and that no individual names will be used for any purposes, and that all information will be grouped together and depersonalized when writing the report. Never mention other interviews or read the questionnaire with other interviewers or supervisor in front of a respondent or any other person. This will automatically erode the confidence the respondent has in you.

**Probe for adequate responses**

The interviewer should phrase the question as it is in the questionnaire. If the interviewer realizes that an answer is not consistent with other responses, then she should seek clarification through asking indirect questions or some additional questions so as to obtain a complete answer to the original question. This process is called probing. Questions, while probing, should be worded so that they are neutral and do not lead the respondent to answer in a particular direction. Ensure the meaning of the original question is not changed.

Pause and wait if the respondent is trying to remember difficult items.

Ask the respondent to clarify her/his answer if necessary. You may have misunderstood the response.

Check for consistency between the answers a respondent gives. Treat the questionnaires as tools that you are using to converse with the respondent. Try to understand and remember the responses, and if there is an inconsistency, ask the questions again.

**Answering questions from respondent**

The respondent may ask you some questions about the survey or how he/she was selected to be interviewed or how the survey is going to help her/him, before agreeing to be interviewed. Be direct and pleasant when you answer. The respondent may also be concerned about the length of the interview. Please be frank to tell him/her how long you are likely to take to administer the questionnaire.

**Interview the respondent alone**

The presence of a third person during the interview can prevent you from getting frank and honest answers from the respondent. It is, therefore, very important that the interviews are conducted privately and that all the questions are answered by the respondent only. This is especially important in the case of the Woman's and Men's Questionnaires, which include several topics that respondents will consider to be "personal" or "private". If other people are present, explain to the respondent that some of the questions are private and request to talk to her/him while alone.

**Handling hesitant respondents**

There may be situations where the respondent simply says, "I don't know," or gives an irrelevant answer or acts in a manner suggesting he/she is bored or contradicts earlier answers. In all these cases, try your best to make him/her get interested in the question. Spend a few moments talking about things unrelated to the interview (e.g. his/her town or village, the weather, his/her daily activities etc.)

## **THE ROLE OF INTERVIEWERS**

Interviewers play a central role in the collection of data and the ultimate outcome of the exercise depends on how they conduct the interviews. Success, therefore, depends on the quality of the interviewers' work. It is, therefore, important for the interviewer to be consistent in the way he/she puts the questions to the respondent.

In case a response is not clear, the interviewer should probe further.

In general, the responsibilities of the interviewer will include:

- Locating the structure and households in the sample that are assigned to them, and administering the questionnaires.
- Identifying all the eligible respondents
- Interviewing all the eligible respondents in the households assigned to them.
- Checking completed interviews to be sure that all questions were asked
- Making call-backs to interview respondents who could not be interviewed during their first or second visit due to various reasons.
- Ensuring that the information given is correct by keeping the respondent focused to the questions.
- Preparing the debriefing notes in the notebook for the field editor and supervisor on the problems encountered.

## **HOW TO FILL IN THE HOUSEHOLD QUESTIONNAIRE**

The purpose of the Household Questionnaire is to provide information on general characteristics of the population and the households. You will use it to collect important information on a number of MICS4 indicators and to identify women and men who are eligible (qualified) to be interviewed for the Questionnaire for Individual Women and Individual Men and the mothers or primary caretakers of children under five who will be interviewed for the Questionnaire for Children Under Five.

### **HOUSEHOLD INFORMATION PANEL**

The Household Information Panel consists of an upper (HH1 to HH7) and a lower (HH8 to HH17) panel. The upper panel should normally be filled in before you approach the household. Your supervisor will have provided the necessary information to you when you are assigned the household.

#### **HH1. Cluster number**

Enter the cluster number as instructed by your supervisor.

**HH2. Household number**

Enter the household number as instructed by your supervisor.

**HH3. Interviewer name and number**

Enter your own name and identification number provided to you at the time of training.

**HH4. Supervisor name and number**

Leave this space blank. The supervisor will later enter his/her name and number in the space provided.

**HH5. Day/Month/Year of interview**

Enter the date of the interview as day, month and year. If the interview is not completed on your first visit and you visit the household again, revise and enter final date of interview. In other words, the date here should be either when you have completed the Household Questionnaire or when the interview has not been conducted but there will be no more attempts to interview the household.

**HH6. Area**

Circle the code for area of residence as instructed/provided by your supervisor. This will have been pre-determined; you will not be required to assess whether the household is in an urban or rural area.

**HH7. Region**

**SURVEY COORDINATORS:** ADAPT THE RESPONSE CODES AS APPROPRIATE.

Circle the code for region as instructed/provided by your supervisor.

After the HH1-HH7 has been filled out, begin by saying the following to the respondent:

WE ARE FROM (**country-specific affiliation**). WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT (**number**) MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?

**SURVEY COORDINATORS:** WHEN THE QUESTIONNAIRES ARE CUSTOMIZED, REPLACE (**country-specific affiliation**) WITH THE NAME OF THE IMPLEMENTING AGENCY IN YOUR COUNTRY. ESTIMATE THE APPROXIMATE DURATION OF AN INTERVIEW DURING THE PRE-TEST AND REPLACE (**number**) WITH THIS ESTIMATE.

You may change the wording of these introductory sentences as appropriate. However, you must make sure to include the following when you are introducing yourself: the name of the implementing agency; the topic of the survey; approximate duration of the interview; the issue of confidentiality; and with whom you would like to speak. If permission is given, begin the interview. If the respondent does not agree to continue, thank him/her and leave the household to go the next household. Later, discuss the refusal with your supervisor; you or another person from the team may attempt to interview the household for a second time. This will depend on your description of the refusal. However, remember that a household's participation in the survey must be on a voluntary basis, and potential respondents must never be forced to participate.

**HH8. Name of head of household**

Enter the full name of the head of household (HH) from column HL2 of Line 01 after completing the Household Listing. In cases when the name of the household head given to you prior to approaching the household is not the same as the household head you identify in the Household Listing, you should write down the name of the current household head from column HL2 of Line 01.

Complete questions HH8, HH10, HH11, HH12, HH13A and HH14 once you have completed the Household Listing Form on the next page.

**HH9. Result of household interview**

‘Completed’: If the Household Questionnaire is completed, circle ‘01’.

‘No household member or no competent respondent at home at time of visit’: If the dwelling is occupied, but no one is at home or if there is only a child at home or an adult member who is ill, deaf, or mentally incompetent and you have not been able to contact a more qualified member of the household after repeated visits, circle ‘02’.

‘Entire household absent for extended period of time’: If no one is at home and the neighbours say that no one will return for several days or weeks, circle ‘03’.

‘Refused’: If the household refuses to be interviewed, circle ‘04’.

‘Dwelling vacant / Address not a dwelling’: If a dwelling assigned to you is unoccupied, that is, it is empty with no furniture and is not being lived in, this is what we call “vacant,” and you should circle ‘05’. Other times, you may find that a dwelling is not a residential unit. It is a shop, church, school, workshop, or some other type of facility that is not used as a living area. After making sure there are no residential units in back of or above the premises, circle ‘05’ as the result for the visit.

‘Dwelling destroyed’: If the dwelling was burned down or was demolished in some other manner, circle ‘06’.

‘Dwelling not found’: If you are unable to find the dwelling even after asking people in the area whether they are familiar with the address or the name of the household head on listing forms, circle ‘07’.

‘Other’: If you have not been able to complete the Household Questionnaire for another reason, you should circle ‘96’ and specify the reason in the space provided. Some examples of ‘Other’ codes might be: the household respondent is incapacitated; the questionnaire is partly completed.

**HH10. Respondent to household questionnaire**

Enter the name and line number (from the Household Listing, columns HL1 and HL2) of the respondent to the Household Questionnaire.

**HH11. Total number of household members**

Count the number of household members recorded in column HL1 of the Household Listing Form and enter the total here. Normally, this is the line number of the last member listed in the Household Listing Form.

**HH12. Number of women age 15-49 years**

Enter the total number of women age 15-49; these are women eligible for interview with the Questionnaire for Individual Women. This should be calculated as the total number of circled line numbers in HL7.

**HH13. Number of woman's questionnaires completed**

Once all of the Questionnaires for Individual Women have been completed for a particular household, enter the number completed here.

**HH13A. Number of men age 15-49 years**

Enter the total number of men age 15-49; these are men eligible for interview with the Questionnaire for Individual Men. This should be calculated as the total number of circled line numbers in HL7A.

**HH13B. Number of man's questionnaires completed**

Once all of the Questionnaires for Individual Men have been completed for a particular household, enter the number completed here.

**HH14. Number of children under age 5**

Enter the total number of children under five eligible for interview with the Questionnaire for Children Under Five. This should be calculated as the total number of children for whom a mother or caretaker line number is entered in column HL9. You will be using the Questionnaire for Children Under Five to interview the mothers or primary caretakers of these children.

**HH15. Number of under-5 questionnaires completed**

Once all of the Questionnaires for Children Under Five have been completed for a particular household, enter the number completed here.

You will complete question HH9 (Result of household interview) as soon as the Household Questionnaire has been completed, or after all attempts have been made to interview the household. Questions HH13, HH13B and HH15 should be filled in once you have concluded all individual interviews for women and men in the household and all interviews for each child under age five have been completed. Assuming that all interviews for the household have been successfully completed, the numbers in HH13, HH13B and HH15 should equal the total number of eligible women (HH12), eligible men (HH13A) and children under five (HH14), respectively. Since the maximum number of women interviewed for the Questionnaire for Individual Women cannot be higher than the number of eligible women in the household, the number in HH13 should never be greater than that in HH12. The same applies in the case of HH13B and HH13A as well as HH15 and HH14. ~~If you are unable to complete all or part of the interviews for this household, note details in the space provided at the bottom of the panel.~~

**HH16. Field edited by (Name and number)**

Leave this space blank. The field editor of your team will later enter his/her name and number in the space provided when checking the completed household questionnaires.

**HH17. Data entry clerk (Name and number)**

Leave this space blank. The data entry clerk will enter his/her name and number in the space provided.

**HH18. Record the time**

Record the time of the day you start the household interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in front of the hour or minute. Avoid rounding the minutes and write the exact minutes as you see on your watch.

**HOUSEHOLD LISTING FORM**

**SURVEY COORDINATORS:** CHECK THE DEFINITION OF 'HOUSEHOLD' IN USE IN YOUR COUNTRY. THIS WILL NORMALLY BE THE DEFINITION USED IN YOUR CENSUS. USE THIS DEFINITION IN THE SURVEY.

A household is a person or group of persons who usually live and eat together.

A household is defined as a person or group of persons

- who are related or unrelated,
- who live together in the same dwelling unit,
- who acknowledge one adult male or female as the head of household,
- who share the same living arrangements, and
- who are considered as one unit.

In some cases one may find a group of people living together in the same dwelling, but each person has separate eating arrangements; they should be counted as separate one-person households. Domestic servants, relatives and other workers living and eating in the household are to be included as household members (even if they spend the weekend elsewhere and stay with the household the rest of the week). Three unrelated persons who live and cook meals together would be considered to form one household.

Collective living arrangements (also referred to as institutional populations) such as hostels, army camps, boarding schools, or prisons are not considered as households.

You will be assigned specific households to interview. Households that you will visit will have been identified previously by listing teams.

One should make a distinction between a family and a household. The first reflects blood decent and marriage. The second is used in this survey to identify an economic unit. You must be conscious and use the criteria provided on household membership to determine which individuals make a particular household.

Note that the Household Listing Form includes **HL1. Line number**. This is the number used to identify each person listed. You must obtain a complete list of all persons who usually live in the household, but you do not need to fill in or do anything in this column since the numbers are already provided. This is a very important number since, once household members are assigned these line numbers after the

Household Listing Form is completed, all members are identified with these line numbers throughout the questionnaires administered in this household.

You should begin by saying:

**FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, STARTING WITH THE HEAD OF THE HOUSEHOLD.**

List the head of the household in line 01. List all household members (HL2), their relationship to the household head (HL3), and their sex (HL4). Then ask:

**ARE THERE ANY OTHERS WHO LIVE HERE, EVEN IF THEY ARE NOT AT HOME NOW?** If yes, complete the listing for questions HL2-HL4. Then, ask questions starting with HL5 for each person at a time.

A household head is a usual resident member of the household acknowledged by the other members of the household as the household head. This person may be acknowledged as the head on the basis of age (older), sex (generally, but not necessarily, male), economic status (main provider), or some other reason. It is up to the respondents to define who heads the household. You are not required to assess who the household head is most likely to be, or whether the person stated as the household head has the relevant characteristics to be the household head.

Also note that if there are more than 15 household members, you will need to use a continuation (additional) questionnaire to record the additional household members. Please remember to change the line numbers of household members on the continuation questionnaire to read '16', '17', '18', etc., and to mark the cover page of the continuation questionnaire as "CONTINUATION". The primary questionnaire for that set should say 'SEE CONTINUATION' across the top of the cover sheet. The continuation questionnaire should have all identification information (HH1 to HH7) written on it on the cover page. After filling the information for remaining household members in the continuation questionnaire, you should continue your interview in the primary questionnaire. Once you complete the Household Questionnaire keep the continuation questionnaire inside the primary one so that they remain together.

The Household Listing Form will be completed in two stages: first, names (HL2), relationship codes (HL3) and sex (HL4) of all household members are recorded until all household members are included in the list. When the respondent is asked to provide the names of persons living in the household, their relationship to the head of the household and their sex is naturally mentioned during the course of listing the names. For this reason, the list is completed vertically for HL2, HL3 and HL4 during the first stage. Then, questions from HL5 to HL14 are asked for each person before moving to the next person.

### **HL2. Name**

Fill in the name of each household member, starting with the head of household (the person who is considered to be responsible for the household). It is up to the respondent to define who the head of the household is. The head of the household should always be on the first row of the list. Never contest the respondent's answer.

Also note that the names of household members will never be used for analysis purposes. However, recording the names of all household members is important since you will be using these names to address the questions.

### **HL3. WHAT IS THE RELATIONSHIP OF (*name*) TO THE HEAD OF THE HOUSEHOLD?**

Enter the code corresponding to how the person listed is related to the head of the household. Use the codes at the bottom of the Household Listing Form. Be particularly careful in doing this if the respondent is not the head of the household. Make sure that you record the relationship of each person to the household head, not the relationship to the respondent. For example, if the respondent is the wife of the head of the household and she says that *Sola* is her brother, then *Sola* should be coded as '09' ('Brother-in-law / Sister-in-law'), not as '08' ('Brother / Sister'), because *Sola* is a brother-in-law of the head of the household. Be very careful in obtaining this information correctly, since respondents tend to provide the relationship of the person to themselves, rather than to the head of the household.

If the head of the household is married to a woman who has a child from a previous marriage, that child's relationship to the head of the household should be coded as '13' ('Adopted/foster/stepchild'). If a household member is not related to the head of household, such as a friend who lives with the household, enter '14' ('Not related'). Enter '98' if the respondent doesn't know the relationship of a household member to the head of household.

#### **HL4. IS (*name*) MALE OR FEMALE?**

Circle '1' for 'Male' and '2' for 'Female'. Do not guess the sex of the household member from the name provided to you. When the respondent is listing everyone in the household, he/she may indicate the sex of the person at the same time, by saying "My sister Mary," for instance. In this case, you do not need to ask the sex of the household member again, since it is already obvious that the person is a female. However, when a name is mentioned that can be used for both males and females, never use your judgement. Even in cases when you think that the name would most likely be a male's (or a female's) name, have the respondent confirm the sex. This column should never be left blank.

Once you have a complete list of names, relationship codes and sex, move across this page to ask and record answers to questions about individual persons starting from HL5. Start with the household head on line 01. When you have finished asking all questions HL5 to HL14 for the person on line 01, continue to the person listed on line 02, etc.

The bold line around questions HL1, HL2, HL3 and HL4 is intended to emphasize that the information here should be completed vertically, before moving on to complete the listing horizontally, separately for each person, from HL5 to HL14.

#### **HL5. WHAT IS (*name*)'S DATE OF BIRTH?**

If the respondent knows the date of birth for the member of the household, record the answer in months and year. You will need to convert the month into numbers. For this, January is '01', February is '02', March is '03', and so on. If the respondent does not know the month of birth, enter the code '98' for 'Don't know month' and ask for the year of birth. Try to obtain at least the year of birth. If year is still unknown, enter '9998'.

**SURVEY COORDINATORS:** IF DATE OF BIRTH INFORMATION IS DIFFICULT INFORMATION TO COLLECT IN YOUR COUNTRY FOR CULTURAL REASONS YOU MAY NOT INCLUDE THIS QUESTION IN YOUR QUESTIONNAIRE.

**HL6. HOW OLD IS (*name*)?**

Enter each person's age in completed years, that is, his/her age at his/her last birthday. Completed age is also defined as 'the number of completed years since birth'. With this definition, since a 6-month-old baby has not completed a full year, his/her age will be entered as '00'. Note that you will be obtaining more accurate estimates of children's ages later.

This column should never be left blank.

Even after you have probed and asked all the necessary information from the respondent and you still have difficulty obtaining the ages of elderly members of the household, you may enter the code '98', meaning 'Doesn't know/over age 50'. For household members younger than 50, completed ages must be entered. However, you should still indicate, with a note, what age range the person in question might be, so that your editor or supervisor can have an idea of the eligibility of the person to administer the individual questionnaires.

If the age of the member of the household is 95 or higher enter the code '95' for all such cases.

**ELIGIBILITY FOR INDIVIDUAL MODULES:** Questions HL7, HL7A and HL9 concern eligibility information.

**HL7. Circle line number if woman is age 15-49.**

Circle the line number in this column if the household member is a woman 15-49 years of age (this includes those age 15 and age 49). You will not ask this question to the respondent.

**HL7A. Circle line number if man is age 15-49.**

Circle the line number in this column if the household member is a man 15-49 years of age (this includes those age 15 and age 49). You will not ask this question to the respondent.

**HL8. For children age 5-14: WHO IS THE MOTHER OR PRIMARY CARETAKER OF THIS CHILD?**

If the household member is a child between 5 and 14 years of age (this includes those age 5 and age 14), record the line number of his/her mother or primary caretaker in this column. Ask this question to the respondent if necessary.

**SURVEY COORDINATORS:** THIS INFORMATION WILL BE USED DURING THE ANALYSIS OF VARIOUS INDICATORS. WHILE THIS INFORMATION IS COMPULSORY FOR THE CHILD LABOUR AND CHILD DISCIPLINE MODULES, IT IS ALSO USED TO MATCH THE HOUSEHOLD RESPONDENT AND THE MOTHER/CARETAKER AND COMPARE THE RESPONSES OF THE TWO, FOR VARIOUS INDICATORS THAT USE CHILDREN 5-14 IN THEIR DENOMINATORS.

**HL9. For children under age 5: WHO IS THE MOTHER OR PRIMARY CARETAKER OF THIS CHILD?**

If the household member is a child under the age of five (this includes those just born and those age 4, but not children who have completed 5 years of age), record the line number of his/her mother or primary caretaker in this column. Ask this question to the respondent if necessary. Later, you will be interviewing the person you are recording her/his line number here about the child you are collecting information.

The Questionnaire for Children Under Five should be administered to mothers of children under 5 years of age who are residing in the household. If the mother is not listed in the Household Listing (living elsewhere or deceased), the person you will identify as the primary caretaker will be the respondent to the Under Five Questionnaire.

**HL10. DID (*name*) STAY HERE LAST NIGHT?**

Record whether or not the household member stayed in the household last night.

**SURVEY COORDINATORS:** THIS INFORMATION WILL BE USED DURING THE ANALYSIS OF INSECTICIDE TREATED NETS MODULES. PLEASE DO NOT REMOVE THIS QUESTION ESPECIALLY IF YOU HAVE INCLUDED INSECTICIDE TREATED NETS MODULE.

***For children age 0-17 years ask HL11-HL14:***

For all children under age 18, we want to know whether their own (natural) parents are listed in the Household Listing Form, and their survival status. This information can be used to measure the prevalence of orphanhood and child fostering in the population. For everyone age 18 and older, HL11-HL14 will be left blank.

**HL11. IS (*name*'s) NATURAL MOTHER ALIVE?**

By 'natural' we mean the biological mother. In many cultures, people consider other people's children whom they are raising as their own, especially children of their husband or sisters, etc. You should be certain that the respondent understands that you are asking about the woman who gave birth to the child.

Record whether or not the child's natural mother is still alive by circling the code corresponding to the response given. If the child's natural mother is not alive or if the respondent does not know, skip to HL13. Otherwise, continue to the question in the next column.

**HL12. DOES (*name*'s) NATURAL MOTHER LIVE IN THIS HOUSEHOLD?**

If the natural mother is still alive, we want to know whether she lives in the household. If the mother does live in the household, ask who she is (she should be listed in the Household Listing Form if she lives in the household) and record her line number in the space provided. If the mother is not a member of the household (not listed in the Household Listing Form), record '00'.

**HL13. IS (*name*'s) NATURAL FATHER ALIVE?**

**HL14. DOES (*name*'s) NATURAL FATHER LIVE IN THIS HOUSEHOLD?**

Fill in these questions in exactly the same way as HL11 and HL12. This time, make sure to record the survival status and the line number of the natural (biological) fathers. If the father of the household member is not alive or his survival status is not known by the respondent in HL13, move to the next person on the list.

When you have completed the listing of all household members and all questions in the Household Listing Form, probe one more time to see if there are any other household members you have not included in the list. If there is any, insert the name of the member and complete the form.

When you have completed the Household Listing Form for all household members, prepare the individual questionnaire forms for this household:

- For each woman age 15-49 years (whose line numbers are circled in HL7), write her name and line number in the spaces provided (WM3 and WM4) at the top of the Questionnaire for Individual Women.
- For each man age 15-49 years (whose line numbers are circled in HL7A), write his name and line number in the spaces provided (MWM3 and MWM4) at the top of the Questionnaire for Individual Men.
- For each child under age five (whose line numbers are written in HL9), write his/her name and line number (UF3-UF4) and the name and line number of his/her mother or caretaker in the spaces provided (UF5-UF6) at the top of the Questionnaire for Children Under Five.

You should now have a separate questionnaire for each eligible woman, man and child under five in the household, ready for use when you administer the questionnaires later on.

## EDUCATION MODULE

Continue line by line, asking the questions for each household member who is eligible (age five or older), as you did when completing the Household Listing Form. Note that the lines corresponding to household members under five should remain blank.

Information should be collected horizontally in this module. For this, start by copying here the name and age information of all members who are age five or older in the Household Listing Form. Then, complete all education questions for each person, before you move on to the next person.

### **ED1. Line number:**

This is the number assigned to each person on the Household Listing Form. You do not need to fill in or do anything in this column since the numbers are already provided.

### **ED2. Name and age:**

Copy the names and ages of each person age five and older from the Household Listing Form (HL2 and HL6) to their corresponding line numbers. Leave the rest of the line blank for each child under 5 in Household Listing Form.

For each household member age five or older, ask ED3, ED4A and ED4B. These questions ask about educational attainment for all household members in this age group. (If children younger than five attend school or preschool, this information will be recorded in the Questionnaire for Children Under Five.)

### **ED3. HAS (name) EVER ATTENDED SCHOOL OR PRESCHOOL?**

Circle '1' if the answer is 'Yes' and continue with question ED4A. If the answer is 'No', circle '2' and go to the household member on the next line.

The term 'school' includes primary, secondary and post-secondary schooling, as well as any other intermediate levels of schooling in the *formal school system*. It also includes technical or vocational training beyond the primary-school level, such as long-term courses in mechanics or secretarial work.

Schools that carry out non-standard curriculum (*non-formal education*) are not included here. A non-standard curriculum includes religious schools, such as Koranic schools, that do not teach a full, standard school curriculum. If a school teaches religious courses but also includes the standard curriculum – such as many Catholic schools – it would be coded as a standard (*formal*) school.

'Preschool' is listed for children who do not attend grade 1, but do attend some form of organized learning or early childhood education programme, whether or not such a programme is considered part of the school system. The definition of organized early learning programme does not refer to programmes offering only babysitting or child-minding.

**ED4A. WHAT IS THE HIGHEST LEVEL OF SCHOOL (*name*) HAS ATTENDED?**

If the person has been to school, record the highest level of schooling attended by circling the code for the response. You may need to probe for the type of school attended. Circle '8' if the respondent 'Doesn't know'. If the highest level of school the child has attended is preschool (Level=0), skip to ED5.

**ED4B. WHAT IS THE HIGHEST GRADE (*name*) COMPLETED AT THIS LEVEL?**

**SURVEY COORDINATORS:** CHANGE THE TERM 'GRADE' TO THE TERM USED LOCALLY, SUCH AS 'FORM' OR 'YEAR'.

Enter the highest grade completed or '98' for 'DK' ('Doesn't know'). If less than one grade, enter '00'. For instance, if a person has attended primary school but did not complete the first grade, then the level for this person will be circled as '1' in ED4A, and the grade will be entered as '00' in ED4B.

Similarly, for a child who is attending grade 5 in primary school at the time of the interview, the level will be coded as '1' and the grade as '04', since this person has not yet completed grade 5.

Note that if the level of schooling is given as preschool in ED4A, the grade should be left blank.

For someone not at school anymore, the highest level attended is the one he/she went to before leaving the education system, even if it was for a few weeks. For someone still at school, the highest level is the one he/she is currently attending (or was attending if we are conducting the interview during a long school break period).

***For household members age 5-24 years ask ED5-ED8:***

For each household member 5-24 years of age (this includes those age 5 and age 24), ask questions ED5-ED8, which inquire about school attendance.

Since questions from ED5 to ED8 refer to school attendance, they will have to be adapted to the situation at the time of the interview. All questions should be retained. However, the wording and coding will have to be changed. The objective of these questions is to capture the school attendance of household members in two consecutive school years. In the explanations below, information is provided on how this can be tackled.

**ED5. DURING THE (2011-2012) SCHOOL YEAR, DID (*name*) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?**

<b>SURVEY COORDINATORS: ADAPT SCHOOL YEAR TO MATCH COUNTRY-SPECIFIC SCHOOL YEARS.</b>
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Circle the code corresponding to the answer given. If 'Yes', continue to the next question. If 'No', skip to ED7.

If the interview is carried out during the school year, then the question should be worded to refer to the current school year. If the interview is carried out between school years, then the question should refer to the last school year that has ended.

Take the example of a country where the school year ends in June and the new school year begins in September: If the interview is carried out in July 2012 (between school years), then the question should refer to the 2011-2012 school year; if the interview is carried out in October 2012 (during the new school year), then the question should refer to the 2012-2013 school year.

**ED6. DURING THIS/THAT SCHOOL YEAR, WHICH LEVEL AND GRADE IS/WAS (*name*) ATTENDING?**

Circle the code for the level of school, and enter the household member's current grade. If it applies, circle '8' for 'DK' ('Doesn't know'). Enter the highest grade number completed using '01', '02', etc. If a child is in preschool or kindergarten, and grades are not used, leave grade blank, and skip to ED7.

If the interview is conducted during the time between two school years, the question should refer to the school year that has ended, and you should use 'THAT' and 'WAS' in the question. If the interview is conducted during the school year, the question should refer to the current school year. Note that these questions should capture children who may have been attending at the beginning of the school year, but have dropped out since then. If necessary, past tense could be used to make sure that you obtain information on the level and grade of children who may have dropped out from school during the course of the school year.

Questions ED5 and ED6 collect information on the school attendance of household members age 5-24 during the current school year (if the interview is conducted when schools are open) or the last school year that has ended (if the interview is conducted between school years). Questions ED7 and ED8 collect information on the school attendance of household members age 5-24 during the previous school year.

<b>SURVEY COORDINATORS: IF THE INTERVIEW IS CARRIED OUT <u>BEFORE</u> THE START OF THE 2012-2013 SCHOOL YEAR, THEN ED5-ED6 SHOULD REFER TO THE 2011-2012, AND ED7-ED8 SHOULD REFER TO THE 2010-2011 SCHOOL YEAR.</b>
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<b>IF THE INTERVIEW IS CARRIED OUT <u>AFTER</u> THE START OF THE 2012-2013 SCHOOL YEAR, THEN ED5-ED6 SHOULD REFER TO THE 2012-2013 SCHOOL YEAR, AND ED7-ED8 SHOULD REFER TO THE 2011-2012 SCHOOL YEAR.</b>
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**ED7. DURING THE PREVIOUS SCHOOL YEAR, THAT IS (*2010-2011*), DID (*name*) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?**

If the child attended school at any time during the last school year, circle '1'. If the answer is 'No' or 'DK', circle the appropriate code and go to the household member on the next line.

**ED8. DURING THAT PREVIOUS SCHOOL YEAR, WHICH LEVEL AND GRADE DID (*name*) ATTEND?**

Circle the code for the level of school attended and fill in the child's grade or circle '8' if the respondent doesn't know the level and/or '98' if the respondent doesn't know the grade. If the child was in preschool or kindergarten, and grades are not used, leave grade blank, and skip to the next person.

## WATER AND SANITATION MODULE

The purpose of the first two questions of this module is to assess the type of household water used for drinking as well as for other purposes, such as cooking and washing hands.

**SURVEY COORDINATORS:** DURING TRAINING, PROVIDE INTERVIEWERS WITH PICTORIALS DEPICTING VARIOUS WATER SOURCES AND SANITATION FACILITIES. THESE PICTORIALS ARE AVAILABLE FROM [http://www.childinfo.org/files/JMP\\_Pictorials\\_for\\_Water\\_and\\_Sanitation.pdf](http://www.childinfo.org/files/JMP_Pictorials_for_Water_and_Sanitation.pdf). THESE PICTORIALS SHOULD NOT BE SHOWN TO THE RESPONDENTS, HOWEVER.

Definitions of the various sources of water are as follows (codes refer to those used in WS1 and WS2):

- '11' – Piped into dwelling, also called a house connection, is defined as water service connected by pipe with in-house plumbing to one or more taps, for example, in the kitchen and/or bathroom.
- '12' – Piped into compound, yard or plot, also called a yard connection, is defined as a piped water connection to a tap placed in the compound, yard or plot outside the house.
- '13' – Piped to neighbour - the household may be obtaining water from a neighbour's house or yard connection.
- '14' – A public tap / standpipe is a water point from which the public may collect their water. A standpipe may also be known as a public fountain or public tap. Public standpipes can have one or more taps and are typically made of brickwork, masonry or concrete.
- '21' – A tube-well or borehole is a deep hole that has been driven, bored or drilled with the purpose of reaching groundwater supplies. Boreholes/tube-wells are constructed with casing, or pipes, which prevent the small-diameter hole from caving in and provide protection from infiltration of run-off water. Water is delivered from a tube-well or borehole through a pump that may be powered by humans, animals, wind, electricity, diesel fuel or solar energy.
- '31' – A protected dug well is a dug well that is protected from run-off water through a well lining or casing that is raised above ground level and a platform that diverts spilled water away from the well. Additionally, a protected dug well is covered so that bird droppings and animals cannot fall down the hole.
- '32' – An unprotected dug well is a dug well for which one or both of the following are true: (1) the well is not protected from run-off water; (2) the well is not protected from bird droppings and animals. If at least one of these conditions is true, the well is unprotected.
- '41' – A protected spring is a spring that is free from run-off and from bird droppings and animals. A spring is typically protected by a 'spring box' that is constructed of brick, masonry or concrete and is built around the spring so that water flows directly out of the box into a pipe without being exposed to outside pollution.
- '42' – An unprotected spring is a spring that is subject to run-off or bird droppings or animals. Unprotected springs typically do not have a 'spring box' (described above).
- '51' – Rainwater collection refers to rain that is collected or harvested from surfaces by roof or ground catchment and stored in a container, tank or cistern until used.
- '61' – A tanker-truck water source transports and sells water by means of a tanker truck.

- ‘71’ – Cart with small tank/drum is used by a water provider who transports water into a community and then sells the water. Types of transports may include donkey cart, motorized vehicle or other means.
- ‘81’ – Surface water is water located above ground and includes rivers, dams, lakes, ponds, streams, canals and irrigation channels from which water is taken directly.
- ‘91’ – Bottled water is purchased water sold in bottles. Note that the code refers only to bottled water that is commercially available. Sometimes household members may store water from other sources in bottles – this should not be coded as bottled water.

**SURVEY COORDINATORS:** THE PRE-TEST WILL DETERMINE IF ANY ADDITIONAL WATER SOURCES TYPICALLY USED IN YOUR LOCALITY NEED TO BE ADDED TO THIS LIST. BE SURE TO RETAIN THE CATEGORIES SHOWN IN THE QUESTIONNAIRE. THESE WILL DETERMINE THE NUMBER OF HOUSEHOLDS TO COUNT IN THE NUMERATOR OF THE WATER AND SANITATION INDICATORS (SEE MICS4 LIST OF INDICATOR).

**WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?**

Circle the code for the most usual source. If several sources are mentioned, probe to determine the most usual source. Note that you can only circle one response code. If the source varies by season, record the source for the season of the interview. If the response is ‘Piped into dwelling’, ‘Piped into compound, yard or plot’, or ‘Piped to neighbour’ circle ‘11’, ‘12’, or ‘13’ respectively, and skip to WS6. If the response is ‘Bottled water’ circle ‘91’ and continue to the next question. Note that the next question is only asked if the response to this question is ‘Bottled water’. For all other responses, skip to WS3.

**WS2. WHAT IS THE MAIN SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS COOKING AND HANDWASHING?**

This question should only be asked to households that use ‘Bottled water’ for drinking. Circle the code for the most usual source. If the source varies by season, record the source for the season of the interview. If the most usual source of non-drinking water is ‘Piped into dwelling’, ‘Piped into compound, yard or plot’, or ‘Piped into neighbour’, circle ‘11’, ‘12’, or 13 respectively, and skip to WS6. Otherwise circle appropriate code and continue to the next question.

Note that you cannot replace “cooking and handwashing” with other uses of non-drinking water.

**WS3. WHERE IS THAT WATER SOURCE LOCATED?**

This question should only be asked to households where the main source of water is not a piped system. Circle the code for the location of water source. If the location is in own dwelling or in own yard/plot then circle ‘1’ or ‘2’ and skip to WS6. Otherwise circle appropriate code and continue to the next question.

**WS4. HOW LONG DOES IT TAKE TO GO THERE, GET WATER, AND COME BACK?**

This question is used to find out how convenient the location of the source of water is to the dwelling for households using a water source outside their dwelling. Record the time it takes to get water by whatever means of transportation the person generally uses, whether the person walks or rides a bicycle or motor vehicle.

Fill in the estimated time (in minutes, converting from hours, if necessary) it takes by the usual mode of transport to get to the water source, wait to get water, and get back to the dwelling. Use zero(s) preceding the number if less than 100 minutes (for example, '060' or '005'). Then continue to the next question.

If the respondent tells you that the water is delivered to their dwelling (a situation that could arise if the water comes from a tanker truck or a small cart with a tank), record '000'.

If the respondent does not know how long it takes, circle '998' and continue to the next question.

**WS5. WHO USUALLY GOES TO THIS SOURCE TO COLLECT THE WATER FOR YOUR HOUSEHOLD?**

The purpose of this question is to find out the age and gender of the person who usually performs the task of hauling water. This will provide an understanding of whether water hauling responsibilities are given to members of a particular sex or age group.

Probe: **"IS THIS PERSON UNDER AGE 15? WHAT SEX?"** Circle the code that corresponds with the response or '8' if the respondent does not know. Adult refers to anyone age 15 or over, regardless of whether he/she is a household member. Child refers to anyone under the age of 15, regardless of whether he/she is a household member.

The purpose of the following two questions, WS6 and WS7, is to determine whether the household drinking water is treated within the household and, if so, what type of treatment is used. This question is intended to gather information on water treatment at the household level and not water treatment at the municipal or vendor level.

**WS6. DO YOU DO ANYTHING TO THE WATER TO MAKE IT SAFER TO DRINK?**

Circle '1' if 'Yes', and continue to the next question. If 'No' or 'DK' (Doesn't know'), circle '2' or '8', respectively, and skip to WS8.

**WS7. WHAT DO YOU USUALLY DO TO MAKE THE WATER SAFER TO DRINK?**

Circle the code corresponding to the response. The household may be using a method that you know does not make water safer to drink. Do not use your own judgement, just record the response. Record all items mentioned (for example, the household may be filtering the water and adding chlorine at the same time).

Probe: **"ANYTHING ELSE?"** Circle 'X' for 'Other' and specify on the line provided what the household does to the water to make it safer to drink. Circle 'Z' if the respondent 'Doesn't know'. If 'Z' is circled then the other codes should not be circled.

Definitions of various methods of water treatment are as follows:

- 'A' – Boil refers to boiling or heating water with fuel.
- 'B' – Add bleach/chlorine refers to using liquid chlorine bleach or bleaching powder to treat drinking water.

**SURVEY COORDINATORS: FREE CHLORINE MAY BE USED IN THE FORM OF LIQUID SODIUM HYPOCHLORITE, SOLID CALCIUM HYPOCHLORITE AND BLEACHING POWDER (CHLORIDE OF LIME)**

- ‘C’ – Strain it through a cloth refers to pouring water through a cloth that acts as a filter for collecting particles from the water.
- ‘D’ – Use water filter involves water flowing through a filter made of ceramic, sand or a combination of materials to remove particles and at least some microbes from the water.

**SURVEY COORDINATORS:** CERAMIC MAY INCLUDE CLAYS, DIATOMACEOUS EARTH, GLASS AND OTHER FINE PARTICLES.

- ‘E’ – Solar disinfection consists of exposing water, stored in buckets, containers or clear vessels, to sunlight.
- ‘F’ – Let it stand and settle refers to storing water undisturbed and without mixing long enough for larger particles to settle to the bottom by gravity. The settled water is carefully removed by decanting, ladling or other gentle methods that do not disturb the settled particles.

Questions WS8, WS9, WS10 and WS11 are about the toilet facility household members use.

**WS8. WHAT KIND OF TOILET FACILITY DO MEMBERS OF YOUR HOUSEHOLD USUALLY USE?**

The purpose of this question is to obtain a measure of the hygiene of the sanitary facility used by the household members.

It may be necessary to observe the facility. If so, ask permission to do so. If the respondent answers or it is observed that the household members have no facilities or use the bush or field, enter ‘95’ for ‘No facilities or bush or field’ and skip to the next module.

If any of the flush or pour flush responses (11-15) are given, probe: **“WHERE DOES IT FLUSH TO?”** Circle the code corresponding to the response given.

Definitions of various types of toilet facilities are as follows:

A flush toilet uses a cistern or holding tank for flushing water and has a water seal, which is a U-shaped pipe, below the seat or squatting pan that prevents the passage of flies and odours. A pour flush toilet uses a water seal, but unlike a flush toilet, a pour flush toilet uses water poured by hand for flushing (no cistern is used).

- ‘11’ - A piped sewer system is a system of sewer pipes, also called sewerage, that is designed to collect human excreta (faeces and urine) and wastewater and remove them from the household environment. Sewerage systems consist of facilities for collection, pumping, treating and disposing of human excreta and wastewater.
- ‘12’ - A septic tank is an excreta collection device and is a water-tight settling tank normally located underground, away from the house or toilet.
- ‘13’ - A flush/pour flush to pit latrine refers to a system that flushes excreta to a hole in the ground and has a water seal.
- ‘14’ - A flush/pour flush to somewhere else refers to excreta being deposited in or nearby the household environment (may have a water seal but deposited not into pit, septic tank or sewer); excreta may be flushed to the street, yard/plot, drainage way or other location.
- ‘15’ - Flush to unknown place/Not sure/DK where should be coded in cases when the respondent knows that the toilet facility is a flush toilet, but does not know where it flushes to.

- ‘21’ - A ventilated improved pit latrine or VIP is a type of pit latrine that is ventilated by a pipe extending above the latrine roof. The open end of the vent pipe is covered with gauze mesh or fly-proof netting and the inside of the superstructure is kept dark.
- ‘22’ - A pit latrine with slab uses a hole in the ground for excreta collection and has a squatting slab, platform or seat (made of concrete, steel, or wood to allow standing with ease) that is firmly supported on all sides, easy to clean and raised above the surrounding ground level to prevent surface water from entering the pit.
- ‘23’ - A pit latrine without slab/Open pit uses a hole in the ground for excreta collection and does not have a squatting slab, platform, or seat. An open pit is a rudimentary hole in the ground where excreta is collected.
- ‘31’ - A composting toilet is a toilet into which excreta and carbon-rich material are added (vegetable wastes, straw, grass, sawdust, ash) and special conditions maintained to produce inoffensive compost.
- ‘41’ - Bucket refers to the use of a bucket or other container for the retention of faeces (and sometimes urine and anal cleaning material), which is periodically removed for treatment or disposal.
- ‘51’ - A hanging toilet/hanging latrine is a toilet built over the sea, a river, or other body of water into which excreta drops directly.
- ‘95’ - No facilities/bush/field includes excreta wrapped and thrown with garbage, the ‘cat’ method of burying excreta in dirt, defecation in the bush or field or ditch, and defecation into surface water (drainage channel, beach, river, stream or sea).

**SURVEY COORDINATORS:** ADAPT THESE INSTRUCTIONS, ADDING EXPLANATIONS OF ANY ADDITIONAL CATEGORIES. BE SURE TO RETAIN THE CATEGORIES SHOWN ON THE QUESTIONNAIRE. THESE WILL DETERMINE THE NUMBER OF HOUSEHOLDS TO COUNT IN THE NUMERATOR OF THE WATER AND SANITATION INDICATORS. ANY OTHER USUAL TYPES OF FACILITIES THAT DO NOT FIT INTO THESE CATEGORIES SHOULD ALSO BE LISTED HERE.

The purpose of the following two questions is to determine whether the household shares their sanitation facility with other households. The shared status of a sanitation facility is important because shared facilities can be less hygienic than facilities used by only a single household. Unhygienic conditions (faeces on the floor, seat or wall and flies) may discourage use of the facility.

**WS9. DO YOU SHARE THIS FACILITY WITH OTHERS WHO ARE NOT MEMBERS OF YOUR HOUSEHOLD?**

Circle the code corresponding to the response given. If ‘No’, go to the next module.

**WS10. DO YOU SHARE THIS FACILITY ONLY WITH MEMBERS OF OTHER HOUSEHOLDS THAT YOU KNOW, OR IS THE FACILITY OPEN TO THE USE OF THE GENERAL PUBLIC?**

The intention of this question is to understand whether the shared facility is only shared with other households (such as a neighbouring household) or whether the facility is open to the public. If it is a public facility, then circle ‘2’ and skip to the next module. If ‘1’ is circled, continue with WS11.

**WS11. HOW MANY HOUSEHOLDS IN TOTAL USE THIS TOILET FACILITY, INCLUDING YOUR OWN HOUSEHOLD?**

The total number of households using this facility should include the household being interviewed. If less than ten households use this toilet facility, enter the number of households on the line provided. Circle ‘10’ if ten or more households use this toilet facility. Note that ‘01’ is not a valid response

(since it means that this is the only household that uses the facility; if that is the case, you should go back to WS9 and correct the response there). Circle '98' for 'DK' ('Doesn't know').

## HOUSEHOLD CHARACTERISTICS MODULE

### HC1A. WHAT IS THE RELIGION OF THE HEAD OF THIS HOUSEHOLD?

### HC1B. WHAT IS THE MOTHER TONGUE/NATIVE LANGUAGE OF THE HEAD OF THIS HOUSEHOLD?

### HC1C. TO WHAT ETHNIC GROUP DOES THE HEAD OF THIS HOUSEHOLD BELONG?

Circle the code corresponding to the answer given. Make sure to get the religion, ethnicity or mother tongue/native language of the household head.

**SURVEY COORDINATORS:** QUESTIONS ON RELIGION, LANGUAGE AND ETHNICITY SHOULD BE ADAPTED TO THE COUNTRY-SPECIFIC SETTING. THESE QUESTIONS ARE INTENDED TO IDENTIFY THE SOCIOCULTURAL BACKGROUND OF THE HOUSEHOLDS. SOME SOCIOCULTURAL GROUPS TEND TO BE MORE VULNERABLE OR DISADVANTAGED THAN OTHERS. DEPENDING ON THE CRITERIA USED IN YOUR COUNTRY TO DIFFERENTIATE BETWEEN THESE GROUPS, YOU MAY WANT TO DELETE ONE OR TWO OF THESE QUESTIONS IF ONLY ONE OF THEM IS SUFFICIENT, OR ADD A SIMILAR QUESTION WHICH USES A CRITERION OTHER THAN RELIGION, ETHNIC GROUP OR MOTHER TONGUE. FOR INSTANCE, IN SOME COUNTRIES, ASKING ABOUT THE RELIGIOUS SECT MAY BE NECESSARY TO DIFFERENTIATE BETWEEN VARIOUS GROUPS.

### HC2. HOW MANY ROOMS IN THIS HOUSEHOLD ARE USED FOR SLEEPING?

This information provides a measure of how crowded the house is, and reflects the socio-economic condition of the household. A room in this case refers to a special area with a permanent partition that is used for sleeping. It is not necessarily the number of rooms in the household that are called 'bedrooms', but rather how many rooms get used for sleeping on a regular basis. Exclude rooms that are used only for sleeping by visitors to the household, but include those rooms that may not be regular 'bedrooms' but may be regularly used by one or more of the household members for sleeping.

Enter the number of rooms in this household that are used for sleeping.

### HC3. *Main material of the dwelling floor:*

**SURVEY COORDINATORS:** ADAPT THE RESPONSE CATEGORIES TO INCLUDE LOCALLY RELEVANT FLOOR MATERIALS.

Circle the correct code for the material of the dwelling floor based on your observation. You will be able to observe the correct answer in most cases, but if in doubt, ask. If there is more than one kind of material making up the floor at different parts of the household, record the main flooring material (the material that covers the largest amount of floor space).

### HC4. *Main material of the roof:*

**SURVEY COORDINATORS:** ADAPT THE RESPONSE CATEGORIES TO INCLUDE LOCALLY RELEVANT ROOF MATERIALS.

Circle the correct code for the material of the dwelling roof, based on your observation. You will be able to observe the correct answer in most cases, but if in doubt, ask. If there is more than one kind of

material making up the roof, record the main roofing material (the material that covers the largest amount of roof space).

**HC5. Main material of the exterior walls:**

**SURVEY COORDINATORS:** ADAPT THE RESPONSE CATEGORIES TO INCLUDE LOCALLY RELEVANT WALL MATERIALS.

Circle the correct code for the material of the dwelling walls, based on your observation. You will be able to observe the correct answer in most cases, but if in doubt, ask. If there is more than one kind of material making up the walls at different parts of the household, record the main wall material (the material that covers the largest amount of wall space).

**HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD MAINLY USE FOR COOKING?**

Information on the type of fuel used for cooking is collected as another measure of the socio-economic status of the household. The use of some cooking fuels can also have adverse health consequences.

Circle the code corresponding to the answer given. Remember that this question asks about fuel for cooking, not fuel for heating or lighting. If the household uses more than one fuel for cooking, find out which type of fuel is used most often. If electricity, liquid propane gas (LPG), natural gas, biogas or kerosene is mainly used, circle '01', '02', '03', '04', or '05', respectively, and skip to HC8. There might be cases when no cooking is done in the household. In this case, circle '95' and skip to HC8. If any fuel other than the pre-coded ones is reported as being the main fuel used for cooking, circle '96' and specify the type of fuel on the line provided.

Definitions of some of the types of fuel are as follows: 'Biogas' includes gases produced by fermenting manure in an enclosed pit. 'Lignite' is a derivative of coal that produces more smoke when burned but produces less heat than coal.

**SURVEY COORDINATORS:** CHECK <http://www.eia.doe.gov/glossary/index.html> FOR DESCRIPTIONS OF RESPONSE CATEGORIES

**HC7. IS THE COOKING USUALLY DONE IN THE HOUSE, IN A SEPARATE BUILDING, OR OUTDOORS?**

Circle the code corresponding to the response given. Circle '1' if the cooking is done in a separate room designated as a kitchen. Circle '2' if the cooking is done in an area used for living, sitting, sleeping, and not in a separate kitchen or building. Circle '3' if the cooking is done in another building and '4' only if the cooking is usually done outdoors.

If a response is given other than the pre-coded ones, circle '6' and specify the cooking place on the line provided.

The answers to the following two questions on ownership of certain items will be used as an approximate measure of the socio-economic status of the household.

**HC8. DOES YOUR HOUSEHOLD HAVE:**

Read out each item and circle the code corresponding to the answer given after each item. If the respondent reports that a household item such as a radio is broken, try to find out how long it has been broken and whether it will be fixed. If the item appears to be out of use only temporarily, circle '1' for 'Yes'. Otherwise, circle '2' for 'No'. Be sure to circle either a '1' or a '2' for each item. Do not leave any blank.

Ask the question for the following items: **ELECTRICITY, RADIO, TELEVISION, NON-MOBILE TELEPHONE, REFRIGERATOR?**

**SURVEY COORDINATORS:** EACH COUNTRY SHOULD ADD TO THE LIST AT LEAST FIVE ITEMS OF FURNITURE (SUCH AS A TABLE, A CHAIR, A SOFA, A BED, AN ARMOIRE, OR A CUPBOARD OR CABINET).

IN ADDITION, EACH COUNTRY SHOULD ADD AT LEAST FOUR ADDITIONAL HOUSEHOLD APPLIANCES SO THAT THE LIST INCLUDES AT LEAST THREE ITEMS THAT EVEN A POOR HOUSEHOLD MAY HAVE, AT LEAST THREE ITEMS THAT A MIDDLE INCOME HOUSEHOLD MAY HAVE, AND AT LEAST THREE ITEMS THAT A HIGH INCOME HOUSEHOLD MAY HAVE. SOME POSSIBLE ADDITIONS ARE CLOCK, WATER PUMP, GRAIN GRINDER, FAN, BLENDER, WATER HEATER, ELECTRIC GENERATOR, WASHING MACHINE, MICROWAVE OVEN, COMPUTER, VCR OR DVD PLAYER, CASSETTE OR CD PLAYER, CAMERA, AIR CONDITIONER OR COOLER, COLOUR TV, SEWING MACHINE.

**HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:**

This question collects information on the ownership of various items owned by any of the household members. Read out each item and circle the code corresponding to the answer given after each item. If the respondent reports that an item such as a motorcycle is broken, try to find out how long it has been broken and whether it will be fixed. If the item appears to be out of use only temporarily, circle '1' for 'Yes'. Otherwise, circle '2' for 'No'. Be sure to circle either a '1' or a '2' for each item. Do not leave any blank. Bicycle for children (used as a toy) should not be considered.

Ask the question for the following items: **WATCH, MOBILE TELEPHONE, BICYCLE, MOTORCYCLE/SCOOTER, ANIMAL-DRAWN CART, CAR/TRUCK, BOAT WITH MOTOR.**

**HC10. DO YOU OR SOMEONE LIVING IN THIS HOUSEHOLD OWN THIS DWELLING?**

Note that the question pertains to the situation at the time of interview. If the respondent or anyone else living in the household owns the dwelling, circle '1' and continue with the next question. If the answer is 'No' then ask **DO YOU RENT THIS DWELLING FROM SOMEONE NOT LIVING IN THIS HOUSEHOLD?** If the dwelling is rented, circle '2'. If the household lives in the dwelling without paying rent, if the household is squatting (occupied illegally), or if there is another arrangement, circle '6'; probe if the dwelling is not owned or rented by a household member.

**HC11. DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?**

Agricultural land refers to land that is used for growing crops (the crops may be food for people, food for animals, or other non-food crops), raising animals, and grazing animals. In answering this question, common land used to graze animals but not owned by the household should not be included. Circle the code corresponding to the response given. If 'No', skip to HC13.

Note that the land in question may be far away, even in another country. Accept such answers as “Yes”.

#### **HC12. HOW MANY HECTARES OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN?**

**SURVEY COORDINATORS:** IF A MEASUREMENT UNIT OTHER THAN HECTARES IS COMMONLY USED, ADAPT THE QUESTION TO ALLOW FOR THE RECORDING OF COMMONLY USED UNITS.

Record the total number of hectares of land owned by all members of the household that can be used for agriculture. If 95 or more hectares (or other units) are owned, record ‘95’. If unknown, record ‘98’.

#### **HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS OR POULTRY?**

Circle the code corresponding to the response given. If ‘No’, skip to HC15.

#### **HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD HAVE?**

**SURVEY COORDINATORS:** ADD COUNTRY-SPECIFIC ANIMALS TO THE LIST, AS APPROPRIATE, SUCH AS OXEN, WATER BUFFALO, CAMELS, LLAMAS, ALPACAS, DUCKS, GEESE, OR ELEPHANTS.

Read out each item and enter the number corresponding to the answer given. Add numbers of milk cows and bulls together, even if the respondent gives separate numbers for each. Similarly, count horses, donkeys and mules together. If the answer is ‘none’, record ‘00’ for that animal/animal group. If the household has 95 or more of any one type of animal/animal group, record ‘95’. If the household owns a particular type of animal/animal group, but the respondent does not know how many, circle ‘98’. Do not leave any items blank.

Ask the question for the following animals: **CATTLE; MILK COWS OR BULLS; HORSES, DONKEYS OR MULES; GOATS; SHEEP; CHICKENS; PIGS.**

#### **HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT?**

Ask if any member in the household has an account with a bank, credit association or other similar organization in which they can deposit and withdraw funds. Circle the code corresponding to the response given.

### **INSECTICIDE TREATED NETS MODULE**

It is recognized that consistent use of insecticide-treated mosquito nets (ITN) decreases the incidence of clinical malaria and malaria-related deaths, especially in very young children. Consequently, many countries are now instituting programmes that promote the use of ITNs. There are various types and brands of mosquito nets. Some require regular treatment with insecticide. Others are factory-treated and do not require re-treatment for 6 to 12 months (pre-treated) or 36 months (permanent type). By observing the mosquito nets yourself, you should be able to identify what brands or types of mosquito nets households own, but respondents may not always permit you to enter the sleeping areas where the nets are found. Your supervisor may provide you with photographs to help you to distinguish different brands of mosquito nets. In order to assess the effectiveness of mosquito net use in preventing malaria, we need to gather accurate information on the type of nets, whether and when they were last treated with insecticide

and whether household members use the nets when they sleep at night. As the questions require observation of the mosquito nets, the completion of this module may take time.

**SURVEY COORDINATORS:** THIS MODULE SHOULD BE INSERTED IN THE HOUSEHOLD QUESTIONNAIRE IN MALARIA-AFFECTED COUNTRIES. CERTAIN ITEMS IN THIS MODULE REQUIRE ADJUSTMENT. PLEASE CONSULT THE NATIONAL MALARIA CONTROL PROGRAMME FOR ASSISTANCE IN IDENTIFYING BRANDS OF MOSQUITO NETS AND OBTAINING PHOTOGRAPHS AND/OR DESCRIPTIONS OF BRAND LOGOS TO SERVE AS AIDS IN THE FIELD.

Note that ‘cake covers’ or baby nets that are used to keep flies off infants, usually during the daytime, are not considered mosquito nets. These nets cannot be treated with insecticide. Window screens are also not considered mosquito nets.

**TN1. DOES YOUR HOUSEHOLD HAVE ANY MOSQUITO NETS THAT CAN BE USED WHILE SLEEPING?**

Circle the code corresponding to the response given. If ‘No’, skip to the next module.

Note that the question asks whether the household has mosquito nets that can be used while sleeping. In short, even if there is a mosquito net which is actually not used or set up, we consider that the household owns it and include this net in the total number of mosquito nets.

**TN2. HOW MANY MOSQUITO NETS DOES YOUR HOUSEHOLD HAVE?**

Enter the number of mosquito nets that the household has. Remember that if a mosquito net is owned but not used, we include this net in the total number of mosquito nets.

**TN3.** Ask the respondent to show you the nets in the household; if more than 3, you will use additional questionnaires, since the page only includes three columns for nets.

**OBSERVATION OF MOSQUITO NETS: TN4 TO TN13.**

There are various types and brands of mosquito nets. Some require regular treatment with insecticide; others are factory treated and do not require any treatment for 6-12 months (pre-treated) or 36 months (long-lasting type). In order to assess the effectiveness of mosquito net use in preventing malaria, we need to gather information on how long the household has had each net, the brand of net, whether the net has been treated with insecticide, and whether household members use the nets when they sleep at night.

To obtain this information, you will need to ask questions TN4 through TN12, as applicable for each net that the household owns. Ask to see all of the nets that the household has and systematically ask the questions for each net as it is shown to you, beginning with the first net and asking all the questions for one net at a time. Even if you cannot directly observe a net, you must ask the questions for each net the household member reports.

To distinguish each net, you may use phrases like, “Now let’s talk about the first net you showed me” or ‘Let’s talk about the net which (*name*) uses’ if this information has not already been mentioned by the respondent. If a household has more than 3 nets, use an additional questionnaire. At the top of ITN Module of additional questionnaire, rename the columns ‘4<sup>th</sup> Net’, ‘5<sup>th</sup> Net’, and ‘6<sup>th</sup> Net’. Fill the identification information on the first page of the additional questionnaire (mainly cluster number and household number). Once ITN module has been completed for all additional nets, continue the interview on the first household questionnaire.

Brands and treatment could be different from one net to the other. That is why it is important to complete the information from TN4 to TN12 for one net before asking your questions for the next one.

**TN4. *Mosquito net observed?***

For each net, record first whether you actually observed the net.

**TN5. *Observe or ask the brand/type of mosquito net***

**SURVEY COORDINATORS:** INSERT THE BRAND NAMES OF PERMANENTLY TREATED NETS AND PRE-TREATED NETS AVAILABLE IN THE COUNTRY.

TN5 is about the type and brand of net. You may encounter nets in the field that you will not recognize. During training, you will be shown all the common mosquito nets that are available in the country. The brand name is often located on the net itself. A picture of the different types of nets available in the country may also be provided for reference during interviews. Use this to identify the type of net in the dwelling and circle the corresponding number on the questionnaire.

If the respondent tells you or you learn from the packaging that the net is long-lasting try to determine the exact brand. If you cannot determine the brand circle '18' for 'DK brand'.

Similarly, if you determine that the net is pre-treated but it is not one of the listed brands, circle '26' and specify the brand of the net in the space provided. When you cannot determine the brand but have determined that it is pre-treated, circle '28' for 'DK brand'.

In some cases, you may be able to identify the brand but not what the type of net it is; for those nets, circle '31' (Other). Code '98' should be circled when you cannot obtain information on either the type or brand. For nets for which you circle '31' or '98' in question TN5, you must probe to find out if the respondent knows whether or not the net was treated when the household first got the net.

**TN6. HOW MANY MONTHS AGO DID YOUR HOUSEHOLD GET THE MOSQUITO NET?**

Ask how many months ago the household obtained the net. If the net was obtained within 36 months from the interview date, you must record the actual number of months before the interview that the net was obtained. If the household got the mosquito net more than 36 months ago, record '95'. If less than one month, record "00"

The respondent may tell you that they are not exactly certain when the net was obtained. In such cases, probe to try to get some idea of approximately how many months ago the net was obtained. Record '98' (DK/Not sure) if the respondent does not have any idea of how long ago the household obtained the net.

**TN7. *Check TN5 for type of net***

Check the type of net. If it is a long-lasting net (one of the codes from 11 to 18 is circled in TN5), tick the corresponding box and skip to 'TN11', if it is pre-treated (one of the codes from 21 to 28 is circled in TN5), tick the corresponding box and skip to 'TN9', if it is not a long-lasting or pre-treated net (code 31 or 98 is circled in TN5) continue with the next question.

**TN8. WHEN YOU GOT THE NET, WAS IT ALREADY TREATED WITH AN INSECTICIDE TO KILL OR REPEL MOSQUITOES?**

This question is only asked about all nets other than the long-lasting and pre-treated nets. With this question, we try to learn whether the net was actually treated with an insecticide when the household obtained it.

**TN9. SINCE YOU GOT THE NET, WAS IT EVER SOAKED OR DIPPED IN A LIQUID TO KILL OR REPEL MOSQUITOES?**

This question is only asked for pre-treated nets, and obtains information on whether the household has ever treated the net with insecticide. Make sure that the respondent understands that you don't mean simply "washing the net" or spraying it with insecticide from a can or canister. We want to know whether the net was soaked or dipped in an insecticide. This information will be linked to the information on the type of net and when the net was obtained to determine if the net is still effective.

If the respondent answers 'Yes', circle 1 and continue with the next question. If the response is 'No' or the respondent does not know or unsure about it, circle '2' or '8' respectively and skip to TN11.

**TN10. HOW MANY MONTHS AGO WAS THE NET LAST SOAKED OR DIPPED?**

If the last time was within the last 2 years (24 months), record the number of months ago in the space provided. If the last time was less than 1 month ago, record '00'. If the last time was more than 24 months ago, circle '95'. If the respondent does not know the number of months, probe to obtain his/her best estimate. Circle '98' for 'DK/Not sure' only if the respondent cannot even estimate when the net was last soaked or dipped.

**TN11. DID ANYONE SLEEP UNDER THIS MOSQUITO NET LAST NIGHT?****TN12. WHO SLEPT UNDER THIS MOSQUITO NET LAST NIGHT?**

These questions are intended to collect information on the particular mosquito nets and people sleeping under them the night before the survey.

In TN11, ask the respondent if anyone slept under each mosquito net last night, and if the respondent answers "Yes", record the name and line number of the person from the household listing form in TN12.

If more than four people slept under a single net the night before the survey, use an additional questionnaire to record the name and line number of these persons. Fill the identification information on the first page of the additional questionnaire (mainly cluster number and household number). Once additional persons are listed there, continue the interview on the first household questionnaire.

If someone not listed in the Household List slept under the mosquito net, record "00" for the line number.

**TN13.**

At this point, go back to TN4 if there are any other nets. If no more nets, continue to the next module.

**INDOOR RESIDUAL SPRAYING MODULE**

Indoor residual spraying (IRS) is the organized, timely spraying of an insecticide on the inside walls of houses or dwellings. It is designed to interrupt malaria transmission by killing adult female mosquitoes when they enter houses and rest on the walls after feeding, but before they can transmit the infection to another person. IRS has been shown to be effective in reducing vectorial capacity and malarial disease in a wide variety of settings, and is particularly effective in locations where mosquitoes are indoor-resting and malaria is seasonally transmitted.

**IR1. AT ANY TIME IN THE PAST 12 MONTHS, HAS ANYONE COME INTO YOUR DWELLING TO SPRAY THE INTERIOR WALLS AGAINST MOSQUITOES?**

**IR2. WHO SPRAYED THE DWELLING?**

With IR1, we want to learn whether anyone has come into the dwelling to spray the interior walls of the dwelling against mosquitoes during the last 12 months. Record YES only if the spraying was done as part of an organized spraying program. If such spraying has not been done during the last 12 months or the respondent does not know, we skip to the next module. If such spraying has been done, then we ask who did the spraying (IR2).

If spraying was done more than once during the last 12 months, then information in IR2 should refer to the last spraying.

### **CHILD LABOUR MODULE**

This module is to be completed for each child resident in the household aged 5 through 14 years (this includes those age 5 and age 14). For household members younger than five or older than 14, rows should be left blank.

**SURVEY COORDINATORS:** YOU MAY DECIDE TO EXTEND THE AGE RANGE, IF DESIRED FOR NATIONAL PURPOSES. ALL MULTIPLE INDICATOR CLUSTER SURVEYS SHOULD INCLUDE CHILDREN AGED 5 THROUGH 14 YEARS, HOWEVER.

Before starting to ask the questions in this module you should go back to the Household Listing Form and identify children age 5-14. Then, copy the name and age of such children to the child labour module, to the corresponding rows, and ask all questions (CL3 - CL10) on child labour for each child age 5-14 listed here.

**CL1. Line number:**

This is the number assigned to each person on the Household Listing Form. You do not need to fill in or do anything in this column since the numbers are already provided.

**CL2. Name and Age:**

Insert the child's name and age, copying from the Household Listing Form, columns HL2 and HL6. This is done to prevent confusion during the interview.

Explain, "**NOW I WOULD LIKE TO ASK ABOUT ANY WORK CHILDREN AGE 5-14 IN THIS HOUSEHOLD MAY DO.**". Questions CL3 – CL10 are to be completed for first child, before moving to the second child, etc.

**CL3. DURING THE PAST WEEK, DID (*name*) DO ANY KIND OF WORK FOR SOMEONE WHO IS NOT A MEMBER OF THIS HOUSEHOLD? *If yes: FOR PAY IN CASH OR KIND?***

‘Pay’ refers to any compensation for work, including cash or goods or services provided to the child or his family. ‘The past week’ refers to the 7 days preceding the interview day (not counting the interview day). Note that the person indicated – someone who is not a member of this household – may be a relative or a family member who lives in a different household.

If the answer is ‘Yes’, ask if the work was done for pay in cash or kind. Circle ‘1’ if work was done for pay in cash or kind. Circle ‘2’ if work was not done for any form of pay. If ‘1’ or ‘2’ is circled, continue to the next question. If no work was done by that child in the past week, circle ‘3’ and skip to CL5.

**CL4. SINCE LAST (*day of the week*), ABOUT HOW MANY HOURS DID HE/SHE DO THIS WORK FOR SOMEONE WHO IS NOT A MEMBER OF THIS HOUSEHOLD?**

Record the estimated number of hours the child spent doing work in the past 7 days and continue with CL5. If less than 1 hour, record 00. Make sure the respondent understands what you mean by “SINCE LAST (*day of the week*)” – specify the name of today’s weekday, as you did in the Education Module. If the child works more than one such job, include the total hours spent doing such work in all jobs.

**CL5. DURING THE PAST WEEK, DID (*name*) FETCH WATER OR COLLECT FIREWOOD FOR HOUSEHOLD USE?**

As in CL3, ‘the past week’ refers to the 7 days preceding the interview day (not counting the interview day). CL5 is intended to capture typical work children usually get involved with. Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to CL7.

**CL6. SINCE LAST (*day of the week*), ABOUT HOW MANY HOURS DID HE/SHE FETCH WATER OR COLLECT FIREWOOD FOR HOUSEHOLD USE?**

Insert the estimated number of hours worked.

**CL7. DURING THE PAST WEEK, DID (*name*) DO ANY PAID OR UNPAID WORK ON A FAMILY FARM OR IN A FAMILY BUSINESS OR SELLING GOODS IN THE STREET?**

This question is intended to capture whether the child has done any paid or unpaid work for the family. Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to CL9.

**CL8. SINCE LAST (*day of the week*), ABOUT HOW MANY HOURS DID HE/SHE DO THIS WORK FOR HIS/HER FAMILY OR HIMSELF/HERSELF?**

As in CL4 and CL6, ‘the past week’ refers to the 7 days preceding the interview day (not counting the interview day). Insert the estimated number of hours worked.

**CL9. DURING THE PAST WEEK, DID (*name*) HELP WITH HOUSEHOLD CHORES SUCH AS SHOPPING, CLEANING, WASHING CLOTHES, COOKING; OR CARING FOR CHILDREN, OLD OR SICK PEOPLE?**

This question intends to capture whether the child has done any paid or unpaid work for the family. Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to next child. If there are no more children left in this module, skip to next module.

**CL10. SINCE LAST (*day of the week*), ABOUT HOW MANY HOURS DID HE/SHE SPEND DOING THESE CHORES?**

As in CL3, CL6 and CL8, ‘the past week’ refers to the 7 days preceding the interview day (not counting the interview day). Insert the estimated number of hours worked.

### CHILD DISCIPLINE MODULE

The purpose of this module is to obtain information on the use of physical and verbal means of disciplining children age 2-14. The module aims to measure a range of discipline and punishment responses, from non-violent approaches to psychological aggression to moderate and severe forms of physical punishment.

**SURVEY COORDINATORS:** IF YOU PLAN TO INCLUDE THIS MODULE, EXTRA TRAINING FOR INTERVIEWERS, EDITORS AND SUPERVISORS WILL BE REQUIRED. QUESTIONS IN THIS MODULE MAY ASK ABOUT DISCIPLINARY METHODS THAT ARE VERY COMMON AND OTHERS THAT ARE STRONGLY CONDEMNED, EVEN PROHIBITED, AND THIS WILL VARY A GOOD DEAL AMONG COUNTRIES. EXTRA TIME IS REQUIRED TO PRACTISE USING THESE QUESTIONS, IN ROLE-PLAYING TRAINING SESSIONS AND DURING PILOT STUDY (FIELD PRACTICE) INTERVIEWS. NOTE THAT THE FIELD STAFF MAY HAVE STRONG VIEWS ON THESE DISCIPLINARY ACTIONS, AND YOU MUST ENSURE THAT THEIR VIEWS DO NOT INTERFERE WITH THE COLLECTION OF THE INFORMATION IN THE MODULE.

**SURVEY COORDINATORS:** GREAT CARE MUST BE TAKEN WITH THE TRANSLATION OF QUESTIONS IN THIS MODULE. THE QUESTIONS REFER TO DISCIPLINARY METHODS RANGING FROM NON-VIOLENT METHODS TO PSYCHOLOGICAL AGGRESSION AND TO PHYSICAL PUNISHMENT SO DO NOT CHANGE THE ORDER OF THESE QUESTIONS. NOTE THAT WE DO NOT ASK ABOUT THE CONSEQUENCES OF THESE ACTIONS, BUT ONLY WHETHER THE ACTIONS HAVE OCCURRED. PRACTICES COMMON IN ONE CULTURE MAY BE ABSENT IN ANOTHER. THE DISCIPLINE ITEMS IN THE MODULE HAVE BEEN CHOSEN WITH EXPERT ASSISTANCE AND AIM TO INCLUDE BEHAVIOURS THAT ARE UNIVERSAL – AND THAT RANGE FROM COMMON BEHAVIOURS TO RARE ONES. WHEN CORRECTLY TRANSLATED, THESE PRACTICES SHOULD BE UNDERSTOOD AND APPLICABLE IN VIRTUALLY ALL SETTINGS. PLEASE READ THE INSTRUCTIONS FOR EACH QUESTION TO ENSURE THAT YOU AND YOUR TRANSLATORS KNOW WHAT IS MEANT BY EACH ONE.

The module has a unique structure and approach. The module collects information on only one randomly selected child of aged 2-14 years. The first part of the module lists all eligible children and then randomly selects the child. . The questions in the second part of the module, are designed to collect information about disciplinary methods used by the respondent or anyone else in the household for the selected child.

**Table 1** is used to list all *Children aged 2-14 Years Eligible for Child Discipline Questions*. As described in the module itself, you will review the Household Listing and list each of the children aged 2-14 years (including children age 2 and age 14) in the table in order according to their line number (HL1). You should not include other household members outside of the age range of 2-14 years. If there are no children age 2-14 years in the household, skip to next module. One by one, record the line number (HL1), name (HL2), sex (HL4), and age (HL6) from the Household Listing Form to the columns CD2, CD3, CD4, and CD5 for each child age 2-14 years.

Then record the total number of children aged 2-14 years in the box provided (CD6).

#### **CD1. Rank number**

This is the number used to identify the one child randomly chosen for this module. You do not need to fill in or do anything in this column since the numbers are already provided.

**CD2. Line number from HL1**

This is the number used to identify each child from the household list who is eligible for this module. Go to the Household Listing and list below each of the children aged 2-14 years (including those age 2 and those age 14) in order according to their line number (HL1). Do not include other household members outside of the age range of 2 to 14 years.

It is very important that you list all eligible children in order according to their line number. Failure to do so may result in failure to select a child randomly and may introduce bias in the selection process.

**CD3. Name from HL2**

Insert the name of each eligible child in this column next to his/her line number, copying from the Household Listing, column HL2.

**CD4. Sex from HL4**

Record the eligible child's sex from HL4.

**CD5. Age from HL6**

Record the eligible child's age from HL6.

**CD6. Total children age 2-14 years**

Count the number of children and record the total number of children aged 2-14 years in the box provided.

If there is only one child aged 2-14 years in the household, then skip Table 2 and go to CD8; write down '1' and continue with CD9 to administer the questions on child discipline to the mother or the primary caretaker of this child.

If there is more than one eligible child on the list, go on to fill in Table 2.

**Table 2** is used for the *Selection of Random Child for Child Discipline Questions*. The table is used if there is more than one child aged 2-14 years in the household.

Go to the cover page of this questionnaire and find the last digit of the household number (HH2). Find the row with that digit in **CD7** and circle that number in the first column by looking vertically down.

Check the total number of eligible children (aged 2-14 years) in CD6. Find the column with that digit in CD7 top row and circle that number. Find the box where this row and this column meet and circle the number that appears in that box. Record the number you have circled in **CD8**. This is the rank number of the child selected for the child discipline questions.

After you have completed these tables and found the rank number of the selected child, continue:

**CD9. Write name and line number of the child selected for the module from CD3 and CD2, based on the rank number in CD8**

Now go back to Table 1 and find this rank number (CD8) in the list in column CD1. Record the line number and name of this selected child from Table 1 in CD9 on the next page.

The following questions are specially designed to measure various ways in which parents discipline their children. These questions are not intended to cover ALL ways that parents use to discipline children, but do cover some of the more common methods. It is important that you ask each question in a neutral way – do not let your voice reflect approval or disapproval of the various discipline methods mentioned.

First, start with the introductory sentence in CD10.

**CD10. ADULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED AND I WANT YOU TO TELL ME IF YOU OR ANYONE ELSE IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH (*name*) IN THE PAST MONTH.**

Ask the questions in the Child Discipline module, beginning with CD11. It is important to mention that we are interested in knowing only about what may have occurred during the past month – the 30 days preceding the survey and only in relation to this child. If the child has been living away from the household members for more than one month, the response category ‘2’ for ‘No’ should be circled.

When asking the questions, remind the respondent, from time to time, that you are asking about the last 30 days or one month, and that you are interested if she/he or anyone else has used this method with the child. Circle ‘1’ for ‘Yes’ and ‘2’ for ‘No’ in all questions up to CD21.

If the selected child was living away from the household/household members during the past month, then you will need to circle ‘2’ for ‘No’ in all questions from CD11 to CD21.

**CD11. TOOK AWAY PRIVILEGES, FORBADE SOMETHING (*name*) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE HOUSE.**

‘Privileges’ means a right or a benefit that is not available to everyone. As children get older, parents/caretakers often extend privileges not available to a very young child. If you must explain what this question means, first try by asking each prompting question separately. If you need to give examples, try to phrase these questions appropriately for the child’s age. “Did you (or someone else in the household) forbid (*name*) from leaving the house or from going outside for a time? Did you (or someone else in the household) prohibit (*name*) from doing something he/she usually does, such as playing with friends or watching TV?” For a young child, you might include such things as ‘forbidding him/her to have sweets’, etc.

**CD12. EXPLAINED WHY (*name*)’S BEHAVIOUR WAS WRONG.**

When a child does something wrong, some parents/caretakers try to teach the child not to repeat the behaviour by explaining why they consider the behaviour to be wrong. For example, a young child playing with matches may be told not to do so, because he or she could accidentally start a fire.

**CD13. SHOOK HIM/HER.**

Some parents/caretakers may shake (pick the child up or take him/her by the shoulders or other part of the body) and shake the child back and forth more than once. This is a method some parents may use to punish a child for bad behaviour. They may use this method alone, or combine this form of punishment together with other actions or methods to teach the child.

**CD14. SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.**

Parents/caretakers may raise their voice when a child does something they consider wrong.

**CD15. GAVE HIM/HER SOMETHING ELSE TO DO.**

This question is designed to capture another non-violent discipline technique, diverting the child's attention from the incorrect behaviour. A parent/caretaker may try to distract the child from doing the unsuitable behaviour by giving the child something else to do in its place. If the respondent does not understand, you may add a probe: "This means distracting the child or helping the child pay attention to something else."

**CD16. SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.**

Spanking a child on the bottom with a bare hand is a form of physical punishment used by some parents/caretakers.

**CD17. HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING LIKE A BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT.**

Hitting a child with a hard object (this includes a belt) is a more severe form of physical punishment used by some parents/caretakers. It is considered more severe than spanking because more force can be exerted with a hard object than a bare hand. Some parents/caretakers use this form of punishment to teach a child not to engage in a bad behaviour. Remember, you are asking if the method of punishment was used with this child during the previous 30 days.

**CD18. CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT.**

Some parents/caretakers use verbal abuse to teach a child not to engage in a bad behaviour.

**CD19. HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.**

This asks if the parent/caretaker (or someone else in the household) slapped the child on the head or in the face, or on one or both ears. As before, slapping or hitting refers to an action carried out with a bare hand. (All questions using these terms refer to use of a bare hand, unless another object is explicitly mentioned.) Repeat this question slowly, and be sure to wait for an answer before going on to CD20.

**CD20. HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG.**

This question is different from the previous question (CD19) because it asks whether the child was slapped or hit with a bare hand on the extremities – hand(s), arm(s) or leg(s).

**CD21. BEAT HIM/HER UP, THAT IS HIT HIM/HER OVER AND OVER AS HARD AS ONE COULD.**

Circle the code corresponding to the response given.

**CD22. DO YOU BELIEVE THAT IN ORDER TO BRING UP, RAISE, OR EDUCATE A CHILD PROPERLY, THE CHILD NEEDS TO BE PHYSICALLY PUNISHED?**

This question is designed to capture attitudes toward discipline and should be asked last, after asking about parental/caretaker disciplinary behaviour. The question asks the respondent for her/his own opinion of whether it is necessary to use physical punishment when teaching a child to behave

properly. Do not be surprised if a respondent who has indicated that she/he has used physical punishment says that she/he does not believe in such punishment.

If the respondent states that she/he has no opinion on this or that she/he does not know, circle '8'.

## **HANDWASHING MODULE**

Handwashing with water and soap is the most cost effective health intervention to reduce both the incidence of diarrhoea and pneumonia in children under five. This module is intended to collect information on handwashing facilities and the presence of cleansing agents in these facilities. As some of the questions require observation, the completion of this module may take time.

Research has found that rapid observation of a designated place or device used for hand washing in the household and the presence of soap and water at that designated place is a robust objective indicator for handwashing behavior. The presence of soap and water at a designated location or device for handwashing indicates that, at a minimum, the tools necessary for washing hands are present in the same place. Moreover, there is some evidence to suggest that having soap / water at a designated location for handwashing is associated with reduced disease risk.

A designated place for hand washing is the place that an interviewer is shown by a respondent as the place where members of the household most often wash their hands. Research has found that the likelihood that people wash their hands at critical times is highest in households which have a designated place for hand washing where water and soap are present at the designated place.

The presence of water and soap at the designated place for hand washing: For correct hand washing to take place at the designated place the presence of water – standing or running water – and the presence of any type of soap (bar, liquid, or powder) is a prerequisite.

Soap present anywhere in the household: The presence of any kind of soap (bar, liquid or powder) anywhere in the household is an indication that the household has access to a market that sells soap, and apparently is aware of some of the benefits of using soap. This information is likely more relevant for rural than for urban areas.

### **HW1. PLEASE SHOW ME WHERE MEMBERS OF YOUR HOUSEHOLD MOST OFTEN WASH THEIR HANDS.**

You will begin by asking whether you may see the place where household members most often wash their hands. If the respondent agrees and you observe the facility, circle '1'. If there is no specific place in dwelling, plot, or yard, circle '2' and skip to HW4. If there is a place but permission is not granted to see it, circle '3' and skip to HW4. If the place used for handwashing is not observed for any other reason, circle '6' and skip to HW4.

In many cultures and crowded slum areas there may not be a designated place for hand-washing. Rather a movable object is used, like a bucket, basin, container or kettle, for people to wash or rinse their hands. Recording where such movable object is usually used for hand washing is important.

**HW2. Observe presence of water at the specific place for handwashing**

**HW3. Record if soap or detergent is present at the specific place for handwashing**

HW2 and HW3 are observation questions. In HW2, you will observe whether there is water available at the place used for handwashing. If there is a tap or pump at the specific place for handwashing, open the tap or operate the pump to see if water is coming out. If there is a bucket, basin or other type of water container, examine to see whether water is present in the container. If you learn that the water is temporarily not available at the specific place for handwashing, code it as water not available ('2') but take a note of this at the end of the questionnaire.

HW3 will be used to record whether there is soap or detergent at the place used for handwashing. Circle all available at the place for handwashing. Hand sanitizers are not accepted as a cleansing agent that can be used for handwashing. If there is no soap or detergent at the place used for handwashing, continue with the next question, otherwise skip to HH19.

**SURVEY COORDINATORS:** ADAPT THE QUESTION TO INCLUDE LOCALLY USED CLEANSING AGENT, IF ANY.

**HW4. DO YOU HAVE ANY SOAP OR DETERGENT (*or other locally used cleansing agent*) IN YOUR HOUSEHOLD FOR WASHING HANDS?**

**HW5. CAN YOU PLEASE SHOW IT TO ME?**

If there is no specific place for handwashing in the household, or permission is not granted to see the place, you will need to ask questions HW4 and HW5. HW4 asks whether soap or detergent (or other locally used cleansing agent) is available in the household, and if so, HW5 is used to ask the respondent whether it is possible to show the soap or detergent. Record your observation if the respondent shows you the soap, detergent, or other cleansing agent. Circle all that apply. If the respondent is unable to show or does not want to show, circle 'Y'. Hand sanitizers are not accepted as a cleansing agent that can be used for handwashing.

**SURVEY COORDINATORS:** ADAPT THE QUESTION TO INCLUDE LOCALLY USED CLEANSING AGENT, IF ANY.

**HH19. Record the time.**

Record the time of the day you finish the household interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in front of the hour or minute. If the interview is not completed on your first visit and you visit the household again to continue the interview, revise and enter starting (HH18) and ending times (HH19) of interview to reflect the actual amount of time spent for the whole duration of this interview in both/all visits. Also provide a note at the end of the household questionnaire regarding this.

## **SALT IODIZATION MODULE**

Iodization of salt is a key strategy for achieving the goal of eliminating iodine deficiency. This module is used to test the iodine content of salt used for cooking in the household. Iodine is an important micronutrient and a lack of it may lead to an enlarged thyroid gland in the neck known as goiter or other thyroid-related health problems.

After you have completed all modules of the Household Questionnaire, administer the module on Salt Iodization. Note that in this module, you will most probably perform a test on a sample of salt provided by the respondent.

**SI1. WE WOULD LIKE TO CHECK WHETHER THE SALT USED IN YOUR HOUSEHOLD IS IODIZED. MAY I HAVE A SAMPLE OF THE SALT USED TO COOK MEALS IN YOUR HOUSEHOLD?**

This item is used to record the type of salt used to prepare the meals cooked in the household and the outcome of the test for salt iodization.

Ask for a sample of the salt usually used for cooking in the household, and perform the test on this sample of salt. Once you have a sample of salt, perform the test as described below and circle the code that corresponds to the test outcome. Circle '1' if the test is negative (0 parts per million/no colour - not iodized). Circle '2' if the test shows more than 0 but less than 15 parts per million iodine (weak colour). Circle '3' if the test is positive (15 parts per million or more, strong colour). Circle '6' if there is 'No salt in home'. Circle '7' if the salt was present, but not tested for any reason.

The salt testing kits contain small 10 ml bottles with a stabilized starch-based solution. Each kit is sufficient for testing at least 100 samples of salt. One to two drops of the solution dripped on a small amount of salt containing iodine produces a blue/purple colour change. Coloration indicates that iodine is present. Below follows a brief description of the basic steps to test for iodate content in salt, the most common fortificant. The same basic principles also apply when testing for iodide content in salt, with the main difference being that no re-check solution will be needed with that type of salt.

1. Put a small amount of salt (about a teaspoon or less) on a white piece of paper. Make a small pile and flatten the top.
2. Add 1-2 drops of test solution and check the result immediately in good light, using the colour chart supplied with the test kit.
3. When no colour appears (suspected alkalinity in the salt sample); on a fresh sample of salt, add up to 5 drops of the re-check solution supplied with the kit and then add 2 drops of test solution on the same spot and compare to the colour chart.
4. When you have compared to the colour chart, circle on the questionnaire the code that corresponds to the test outcome.

**SURVEY COORDINATORS:** IN MICS4, SALT CONTAINING 15 PARTS PER MILLION (PPM) OR MORE OF IODATE/IODIDE IS CONSIDERED ADEQUATELY IODIZED. THIS IS IN ACCORDANCE WITH THE INTERNATIONALLY AGREED INDICATOR FOR IODIZED SALT CONSUMPTION. IT IS THEREFORE IMPORTANT THAT THE SALT TESTING KITS USED IN MICS4 SURVEYS HAVE A CUT-OFF POINT OF 15 PPM, EVEN IF A DIFFERENT CUT-OFF POINT IS COMMONLY USED IN THE COUNTRY. FURTHERMORE, EVERY EFFORT SHOULD BE MADE TO USE ONLY THOSE KITS THAT HAVE A SINGLE CUT-OFF; IN OTHER WORDS, THE SOLUTION IN THE KIT SHOULD DISTINGUISH ONLY BETWEEN LESS THAN 15 PPM VERSUS 15 PPM OR GREATER, IN ADDITION TO 0 PPM. REFER TO 'SALT IODIZATION TESTING' CHAPTER OF THE MICS MANUAL FOR MORE INSTRUCTIONS ABOUT SALT IODIZATION TESTING.

The Household Questionnaire ends with a question that will check the presence (or absence) of other individuals you may need to interview in this household.

Before ending the interview, go through your entire questionnaire quickly to check if no information is missing, everything is clearly written and all information is consistent. If necessary, do not hesitate to ask

the questions again to the respondent. When you are sure your questionnaire is complete, continue with HH20.

**HH20. Thank the respondent for his/her cooperation and check the Household Listing Form:**

Check household listing, column HL7 for any eligible woman. You should have a questionnaire with the Information Panel filled in for each eligible woman.

Check household listing, column HL7A for any eligible man. You should have a questionnaire with the Information Panel filled in for each eligible man.

Check household listing, column HL9 for any eligible child under age 5. You should have a questionnaire with the Information Panel filled in for each eligible child.

Return to the cover page and make sure that all information is entered, including the number of eligible women (HH12), men (HH13A) and under-5s (HH14).

Make arrangements for the administration of the remaining questionnaire(s) in this household.

**OBSERVATIONS**

The last page of the household questionnaire has been reserved for the interviewers, supervisors, or editors to write any notes or observations regarding this particular household interview.

**HOW TO FILL IN THE QUESTIONNAIRE FOR INDIVIDUAL WOMEN**

The purpose of the Questionnaire for Individual Women is to provide information on a wide range of MICS4 indicators. You will have identified women who are eligible for this questionnaire after you have completed the Household Listing in the Household Questionnaire. Eligible women for this questionnaire are women listed in the Household Listing Form who are age 15 through 49 (see column HL7 of the Household Listing Form).

**SURVEY COORDINATORS:** THIS QUESTIONNAIRE SHOULD ONLY BE ADMINISTERED BY A SKILLED FEMALE INTERVIEWER. IT INCLUDES MODULES AND QUESTIONS ON SENSITIVE AND PRIVATE TOPICS SUCH AS SEXUAL BEHAVIOUR, CONTRACEPTION AND HIV/AIDS. THE USE OF A MALE INTERVIEWER WILL RESULT IN THE COLLECTION OF UNRELIABLE INFORMATION, IF NOT JEOPARDIZE THE ADMINISTRATION OF THE QUESTIONNAIRE OVERALL AND LEAD TO REFUSALS.

IT IS ALSO STRONGLY RECOMMENDED THAT INTERVIEWERS MAKE EVERY ATTEMPT TO INTERVIEW WOMEN ALONE.

**WOMAN'S INFORMATION PANEL**

WM1-WM6 should be filled in before you start the interview.

**WM1. Cluster number**

Enter the cluster number from the Household Questionnaire, question HH1.

**WM2. Household number**

Enter the household number from the Household Questionnaire, question HH2.

**WM3. Woman's name**

Enter the woman's name from the Household Questionnaire, column HL2 of the Household Listing.

**WM4. Woman's line number**

Enter the woman's line number from the Household Questionnaire, column HL1 of the Household Listing.

**WM5. Interviewer name and number**

Enter your own name and identifying number. You will be provided with these identification numbers at the time of training.

**WM6. Day/Month/Year of interview**

Enter the date of the interview as day, month and year. If the interview is not completed on your first visit and you visit the household to interview the woman again, revise and enter the final date of interview. In other words, the date here should be the date when you have either completed the woman's questionnaire, or when the interview has not been conducted but it has been decided that there will be no more attempts to interview the eligible woman.

**WM7. Result of woman's interview**

Complete this question once you have concluded the interview with the woman. Circle the code corresponding to the result of the interview. If the questionnaire is completed, circle '01' for 'Completed'. If you have not been able to contact the woman after repeated visits, circle '02' for 'Not at home'. If the woman refuses to be interviewed, circle '03' for 'Refused'. If you were able to only partly complete the questionnaire, circle '04' for 'Partly completed'. If the woman is incapacitated (mentally or physically incapacitated), circle '05'. If you have not been able to complete this interview for another reason, you should circle '96' for 'Other' and specify the reason in the space provided.

Make every attempt to carry out the woman's interview in privacy. Ask all other household members or anyone else who is present (including male members of the survey team) to leave in a courteous manner.

If the respondent is a mother/caretaker of a child identified as eligible in column HL9 of the Household Questionnaire, ask her to collect all the birth certificates and health/ immunization cards she has for her children or the children she cares for before you begin the interview. You will need these when you go on to interview her about her children under age five.

Repeat greeting if not already read to this woman: **“WE ARE FROM (*country-specific affiliation*). WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT (*number*) MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?”**

If you are starting to interview the same person that you have completed the household interview with, you need to read a revised version of the greeting (see below) as the time to complete the questionnaire

for individual women will be different than the household questionnaire and normally a separate consent is required to do this interview.

**NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT YOUR HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT (*number*) MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?"**

**SURVEY COORDINATORS:** WHEN THE QUESTIONNAIRES ARE CUSTOMIZED, REPLACE (*country-specific affiliation*) WITH THE NAME OF THE IMPLEMENTING AGENCY IN YOUR COUNTRY. ALSO, ESTIMATE THE APPROXIMATE DURATION OF THE WOMAN'S INTERVIEW DURING THE PRE-TEST AND REPLACE (*number*) WITH THIS ESTIMATE.

As with the similar sentence at the beginning of the Household Questionnaire, you may change the wording of these introductory sentences as appropriate. You must make sure, however, to include the following when you are introducing yourself: The name of the implementing agency; the topic of the survey; approximate duration of the interview; the issue of confidentiality; and with whom you would like to speak.

If permission is given, begin the interview. If the respondent does not agree to continue, complete WM7 by circling '03', thank her and go on to the next interview you have been assigned to. Later, discuss the refusal with your supervisor; you or another person from the team may attempt to interview the woman for a second time. This will depend on your description of the refusal. However, remember that a woman's participation in the survey must be on a voluntary basis, and potential respondents must never be forced to participate.

**WM8. Field edited by (Name and number)**

Leave this space blank. The field editor will later enter his/her name and number in the space provided when checking the completed questionnaires.

**WM9. Data entry clerk (Name and number)**

Leave this space blank. The data clerk will enter his/her name and number in the space provided.

**WM10. Record the time**

Record the time of the day you start the interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in front of the hour or minute.

**WOMAN'S BACKGROUND MODULE**

**Age and date of birth:** Age (WB1 and WB2) is one of the most important information in the interview, since almost all analysis of the data depends on the respondent's age. These questions must be asked independently of the information on the Household Questionnaire. Even if you already asked the respondent her age when you were completing the Household Questionnaire, you must ask again for her date of birth and age on the Questionnaire for Individual Women.

**WB1. IN WHAT MONTH AND YEAR WERE YOU BORN?**

If the respondent knows her date of birth, write it in the appropriate spaces for ‘Month’ and ‘Year’. You will need to convert the month into numbers. For this, January is ‘01’, February is ‘02’, March is ‘03’, etc. If the month or day contains only one digit, use a leading zero to fill in the first space. For example, the month of March is coded as ‘03’. If she does not know her month of birth, circle ‘98’ for ‘DK month’ and ask her for the year of her birth. If she knows the year, write it in the spaces for ‘Year’. Try under all circumstances to obtain at least the year of birth. If the respondent is unable to provide this information, ask whether she has any documentation such as an identification card, horoscope, or a birth or baptismal certificate that might give her date of birth. If such documentation is available, ask the woman if the information on the document(s) is correct. Only when it is absolutely impossible to even estimate the year of birth should you circle ‘9998’ for ‘DK year’.

**WB2. HOW OLD ARE YOU?**

Enter her age in completed years, that is, her age at her last birthday. If she knows her age, write it in the space provided.

Probe: “**HOW OLD WERE YOU AT YOUR LAST BIRTHDAY?**”

If she does not know the answer to either of these two questions, probe for clues that might indicate her age. Ask how old she was when she was first married or first gave birth. Try to find out how long ago she got married or had her first child. (You may be able to find out the age of her oldest child if the child is still living. You may be able to relate her age to someone else in the household whose age is known. You may be able to determine her age based on how old she was when an important event occurred, and the number of years that have elapsed since.) You **MUST** fill in this information. Do not leave this blank. Compare and correct WB1 and WB2 if inconsistent.

Finally, before moving on to the next question, verify that the respondent is indeed eligible. If the woman is younger than 15 or older than 49, you have to terminate the interview. Do this tactfully by asking two or three more questions and then thank the respondent for her cooperation; write ‘INELIGIBLE’ on the cover page of the questionnaire, and correct the age and eligibility information for this woman on the cover page and in Columns HL6 and HL7 of the Household Questionnaire.

Questions WB3-WB7 are about the educational attainment and literacy of the woman. Note that you will have collected some of this information on the woman in the Education module of the Household Questionnaire, either from another household member or from the woman herself. You should still ask these questions. You will be collecting slightly different information with these questions.

**WB3. HAVE YOU EVER ATTENDED SCHOOL OR PRESCHOOL?**

Circle the code corresponding to the response given. If ‘No’, skip to WB7. Otherwise, continue on to the next question.

The term ‘school’ includes primary, secondary and post-secondary schooling, as well as any other intermediate levels of schooling in the *formal school system*. It also includes technical or vocational training beyond the primary-school level, such as *long-term courses* in mechanics or secretarial work.

Schools that carry out non-standard curriculum (non-formal education) are not included here. A non-standard curriculum includes religious schools, such as Koranic schools, that do not teach a full,

standard school curriculum. If a school teaches religious courses but also includes the standard curriculum – such as many Catholic schools – it would be coded as a standard (formal) school.

**WB4. WHAT IS THE HIGHEST LEVEL OF SCHOOL YOU ATTENDED?**

Circle the code corresponding to the highest level ever attended, regardless of whether or not the year was completed. For example, if she attended Form/Year 1 of secondary school for only 2 weeks, record ‘Secondary’.

**WB5. WHAT IS THE HIGHEST GRADE YOU COMPLETED AT THAT LEVEL?**

**SURVEY COORDINATORS:** CHANGE THE TERM ‘GRADE’ TO THE TERM USED LOCALLY, SUCH AS ‘FORM’ OR ‘YEAR’.

For this question, record the number of years that the respondent successfully completed at that level recorded in WB4. For example, if a woman was attending grade 3 of secondary school and left school before completing that year, record ‘02’. Although grade 3 was the highest year she attended, she completed 2 years of secondary school. If less than 1 year, record ‘00’ for completed years. For example, if she attended only 2 weeks of grade 1 of secondary school, record ‘00’ for completed years.

**WB6. Check WB4.**

If the respondent attended secondary school or a higher level, check the corresponding box and go to the next module. If the highest level the respondent attended was primary school, check the appropriate box and continue to WB7.

**WB7. NOW I WOULD LIKE YOU TO READ THIS SENTENCE TO ME.**

**SURVEY COORDINATORS:** ARRANGE FOR CARDS WITH FOUR SIMPLE SENTENCES WRITTEN ON THEM PERTAINING TO DAILY LIFE. GIVE ONE COPY OF THE CARD TO EACH INTERVIEWER BEFORE FIELDWORK BEGINS. IF INTERVIEWS WILL BE CONDUCTED IN MORE THAN ONE LANGUAGE, PREPARE CARDS FOR EACH LANGUAGE USED IN THE INTERVIEWS. THE INTENTION IS TO LEARN IF THE RESPONDENT IS LITERATE IN ANY LANGUAGE. ADAPT THE LIST OF SENTENCES IN THE MODEL QUESTIONNAIRE TO INCLUDE CULTURALLY RELEVANT SENTENCES.

EXAMPLE SENTENCES FOR LITERACY TEST:

1. THE CHILD IS READING A BOOK.
2. THE RAINS CAME LATE THIS YEAR.
3. PARENTS MUST CARE FOR THEIR CHILDREN.
4. FARMING IS HARD WORK.

To ascertain whether women are literate or not, you will be showing women you interview cards with pre-printed sentences on them, and asking women to read them. Note that this question will be asked only to women who have not attended school, or did not attend school beyond the primary level. We assume that women who have attended secondary school or higher are literate. However, it is also known that some women who have attended or even completed primary school may be functionally illiterate. Therefore, we need to ask this question to such women.

Based on your knowledge of the respondent, choose the card with the language in which the respondent is likely to be able to read if she is literate. Show the first sentence on the card to the respondent. Give the respondent enough time to read the sentence; do not rush her. If the respondent cannot read the whole sentence, probe: **“CAN YOU READ PART OF THE SENTENCE TO ME?”**

Record whether the respondent was not able to read the sentence at all, was able to read only parts of the sentence, or was able to read the whole sentence. If the respondent asks for the sentences in another language and you were provided a card with sentences in that language, show the respondent the appropriate card. If there is no card with sentences in the language required, circle ‘4’, and specify the language. If the respondent is blind or visually impaired, circle ‘5’.

It is important to avoid the problem of having other respondents in the household overhear the sentence being read. Subsequent respondents in the household might be able to repeat the sentence when they are interviewed, even if they are unable to read. If there is a second eligible woman in the household, show her the second sentence on the card. Show the third respondent the third sentence on the card, and the fourth respondent the fourth sentence. If there are more than five respondents, start again with the first sentence on the card.

## **ACCESS TO MASS MEDIA AND USE OF INFORMATION/COMMUNICATION TECHNOLOGY MODULE**

The purpose of this module is to collect information on the exposure of respondents to mass media, and the use of computers and the internet. The module includes 3 questions on mass media (MT2-MT4) and 6 questions on information/communication technologies (MT6-MT11). The questions are straightforward, and will help to understand:

- whether respondents are exposed to newspapers/magazines, radio and television
- ever use and current/recent use of computers
- ever use and current/recent use of the internet

### **MT1. Check WB7**

Before starting to ask the questions in this module, check WB7. MT1 is intended to filter out those respondents who are unable to read, so that MT2 (on reading newspapers) is not asked to these respondents.

If WB7 was left blank, which means that respondent has secondary or higher education, you should continue with MT2. If WB7 is ‘2’, ‘3’, or ‘4’, continue with MT2. If WB7 is ‘1’ or ‘5’ this means that either the respondent cannot read at all or is blind; skip to MT3.

In the 3 questions that follow, the same response codes are used: “Almost every day”, “At least once a week”, “Less than once a week”, and “Not at all”, respectively for reading newspapers/magazines, listening to the radio, and watching television. “Almost every day” refers to cases when access to the medium in question is normally practiced every day; “At least once a week” is applicable when the normal practice is not every day or almost every day, but is practiced at least once a week. For example, reading a newspaper every other day would be classified as “at least once a week”. The respondent’s perception on the frequency of access is important in coding the correct response.

**MT2. HOW OFTEN DO YOU READ A NEWSPAPER OR MAGAZINE: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?**

The purpose of this question is to find out whether the respondent is exposed to influences outside her local community by means of reading newspapers or magazines. It does not matter what type of articles she reads, what language she reads in, or who buys the newspapers or magazines she reads. The question is simply about how often she reads them. Make sure that you read the entire question. It is important that the respondent hears all the four categories embodied in the question.

If the respondent tells you that she is reading newspapers on the internet, this should still be considered as exposure to newspapers. The objective is to collect information on whether respondents are accessing newspapers, and if so, how frequently.

Circle ‘1’ if the respondent reads a newspaper or magazine almost every day, ‘2’ if she reads it at least once a week, ‘3’ if less than once a week and ‘4’ if she does not read at all.

**MT3. DO YOU LISTEN TO THE RADIO ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?**

A radio is a device capable of receiving broadcast radio signals, using popular frequencies, such as FM, AM, LW and SW. Accessing the radio through the internet or cable services, or other means is also included here. We need to establish whether the respondent is exposed to radio broadcasts, by whatever means.

Circle the code corresponding to the response given. If there is any doubt as to whether the respondent listens to the radio almost every day, probe. For example, after probing, if she says “I listen almost every day, but during the planting season, I’m away and I don’t listen at all,” record “Almost every day”, since she normally listens almost every day. It does not matter who owns the radio or what program(s) she listens to. It also does not matter whether the radio is a transistor radio, part of a music set or a movie theatre. We need to ascertain whether the respondent is exposed to radio broadcasts. Again, make sure to read the entire question.

**MT4. HOW OFTEN DO YOU WATCH TELEVISION: WOULD YOU SAY THAT YOU WATCH ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?**

A television (TV) is a stand-alone device capable of receiving broadcast television signals, using popular access means such as over-the-air, cable and satellite. However, a respondent watching television broadcasts via the internet or with other means should still be considered as watching television, like other respondents who may be using regular TV sets, as long as she is accessing TV broadcasts.

Circle the code corresponding to the response given. As with MT2 and MT3, the purpose is to get an idea of how much exposure the respondent has to influences outside her place of residence, this time through television broadcasts. It does not matter who owns the television or what program she watches. Read the entire question. If the respondent watches television on a computer, for instance, this would still count as watching television, since the intention is to capture exposure to television broadcasts.

The remaining questions of the module, on use of information/communication technology, are only for those respondents who are 15-24 years of age. Therefore, we begin with the skip instruction MT5, to filter out those respondents who are above age 24.

With these questions, we intend to ascertain the respondent's exposure to, and use of, computers and the internet. Computers and internet open up possibilities of exposure to influences outside the local community or even the country, in ways different than exposure to newspapers, radio or television. Use of computers and internet are regarded as skill sets necessary in today's world, as an increasing amount of information is shared and transmitted through the internet, transactions are handled on the internet, and the like.

**MT5. Check WB2: Age of respondent?**

Check WB2. If the respondent's age is 25-49, go to the next module, if she is age 15-24, continue with MT6.

**MT6. HAVE YOU EVER USED A COMPUTER?**

A computer refers to a desktop or a laptop computer. It does not include equipment with some embedded computing abilities such as mobile cellular phones, personal digital assistants (PDAs) or TV sets.

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to MT9. It does not matter who owns the computer and if the computer that the respondent may be using is in the household or elsewhere.

**MT7. HAVE YOU USED A COMPUTER FROM ANY LOCATION IN THE LAST 12 MONTHS?**

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to MT9. Again, it does not matter who owns the computer and if the computer is in the household or elsewhere.

**MT8. DURING THE LAST ONE MONTH, HOW OFTEN DID YOU USE A COMPUTER: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?**

Circle the code corresponding to the response given. See explanations above for response categories.

Note that a respondent who has used a computer during the last 12 months (MT7 = 1) may respond as "Not at all" to this question, when the use of a computer was prior to the last one month, but within the last 12 months.

**MT9. HAVE YOU EVER USED THE INTERNET?**

The Internet is a world-wide public computer network. It provides access to a number of communication services including the World Wide Web and carries e-mail, news, entertainment and

data files, irrespective of the device used (not assumed to be only via a computer – it may also be by mobile phone, PDA, games machine, digital TV etc.). Access can be via a fixed or mobile network.

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to the next module. It does not matter if the use of internet is in the household the respondent is living or elsewhere.

Note that for those who have said that they have never used a computer or have not used a computer recently, we still ask the questions on internet use, since the respondent may have used the internet by mobile phone, PDA, games machine, digital TV and the like.

**MT10. IN THE LAST 12 MONTHS, HAVE YOU USED THE INTERNET?**

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to the next module. If necessary, probe for use from any location, with any device.

**MT11. DURING THE LAST ONE MONTH, HOW OFTEN DID YOU USE THE INTERNET: ALMOST EVERY DAY, AT LEAST ONCE A WEEK, LESS THAN ONCE A WEEK OR NOT AT ALL?**

Circle the code corresponding to the response given.

Note that a respondent who has used the internet during the last 12 months (MT10 = 1) may respond as "Not at all" to this question, when the last use of the internet was prior to the last one month, but within the last 12 months.

## **CHILD MORTALITY MODULE**

This module is to be administered to all eligible women age 15-49. All questions refer only to live births. These questions are used to collect information about all births the woman has ever had (including births from earlier marriages). The answers are used to estimate childhood mortality rates.

**SURVEY COORDINATORS:** EXPLAIN WHAT A LIVE BIRTH IS TO INTERVIEWERS DURING TRAINING. MAKE SURE THAT INTERVIEWERS UNDERSTAND CLEARLY THE DIFFERENCE BETWEEN A LIVE BIRTH AND OTHER PREGNANCY OUTCOMES, SUCH AS STILLBIRTHS, MISCARRIAGES AND ABORTIONS. IN COUNTRIES WHERE THE TERM USED FOR 'LIVE BIRTH' MAY NOT BE DISTINCT ENOUGH FROM TERMS USED FOR OTHER PREGNANCY OUTCOMES, MAKE SURE THAT THE QUESTIONNAIRE AND YOUR INSTRUCTIONS TO THE INTERVIEWERS ARE VERY CLEAR, AND THAT THE INTERVIEWERS ARE ABLE TO EXPLAIN TO RESPONDENTS WHAT IS MEANT BY A LIVE BIRTH, IF NECESSARY.

It is important that the respondent understands which events to include in these reports. We want to know about all of the woman's natural births, even if the child no longer lives with her and even if the child is no longer alive. We want to know about children who were born alive – ever breathed or cried or showed other signs of life – even if they lived only a few minutes or hours.

We do not want you to record any stillbirths (children who were born dead), or miscarriages, or children adopted by the woman, or children of her present husband born to another wife (to whom the respondent herself did not give birth).

**CM1. NOW I WOULD LIKE TO ASK ABOUT ALL THE BIRTHS YOU HAVE HAD DURING YOUR LIFE. HAVE YOU EVER GIVEN BIRTH?**

The first question of the module is used to determine if the rest of the module and several subsequent modules should be administered to this woman. If the answer is 'Yes', circle '1', and continue with the next question. If the woman says she has never given birth, circle '2' and skip to CM8.

**CM2. WHAT WAS THE DATE OF YOUR FIRST BIRTH? I MEAN THE VERY FIRST TIME YOU GAVE BIRTH, EVEN IF THE CHILD IS NO LONGER LIVING, OR WHOSE FATHER IS NOT YOUR CURRENT PARTNER.**

You need to obtain the year of the woman's first birth, which means the very first time she gave birth, even if the child is no longer living, or is the child of a partner other than her current one. As with all questions about dates and ages, you may need to probe to obtain the best information.

Ask for the child's date of birth. If she knows the exact birth date, enter the day, month and year of birth on the lines provided and continue to CM3. You will have to convert the month to a number, as you have been instructed. If the month or day contains only one digit, use a zero to fill in the first space. For example, the month of March is coded as '03'.

If she does not know the exact birth date, ask her the day, month and year separately. Enter the information as provided. If she does not know the day, circle '98'.

If she can give the month of birth, convert it to a number and enter it on the line provided. If she cannot give the month, probe to try to estimate the month. If you cannot estimate the child's month of birth from this information, you may need to find out in which season he/she was born. If it is still not possible to estimate the child's month of birth, circle '98' in the space for month of birth.

If she can give a year of birth, write it in the space provided and go to CM4. If she cannot give the year of the birth, circle '9998' and continue with CM3.

**CM3. HOW MANY YEARS AGO DID YOU HAVE YOUR FIRST BIRTH?**

This question is asked only to women who are not able to give the year of their first birth in CM2.

It may be easier to obtain this information, especially if the first child is still alive. In this case, the answer is the first child's current age in completed years. Record the response in the space provided.

**CM4. DO YOU HAVE ANY SONS OR DAUGHTERS TO WHOM YOU HAVE GIVEN BIRTH WHO ARE NOW LIVING WITH YOU?**

Read the question slowly. The sons and daughters being considered are those who live with her in her household (these children should have been listed in the Household Listing). Circle the code corresponding to the response. If she answers 'No', skip to CM6.

**CM5. HOW MANY SONS LIVE WITH YOU? HOW MANY DAUGHTERS LIVE WITH YOU?**

If the answer to CM4 is 'Yes', record the number of sons and daughters living with the woman in the space provided. If the answer is 'None' for sons (or if she does not have any sons), record '00' in the space provided for sons. Similarly, if she has no daughters now living with her (or if she does not have any daughters), record '00' in the space for daughters. Do not leave either of the spaces blank. Since the question is asked only to women who have children living with them in the same household, at least one of the spaces should have a value higher than 00.

Remember, we are interested only in the respondent's OWN children – not foster children, children of her husband by another woman, children of another relative, or children for whom she is the caretaker.

**CM6. DO YOU HAVE ANY SONS OR DAUGHTERS TO WHOM YOU HAVE GIVEN BIRTH WHO ARE ALIVE BUT DO NOT LIVE WITH YOU?**

This refers to sons and daughters who are alive but not living with the woman. For example, one or more of her children may be living with a relative, staying in a boarding school, been given up for adoption, or may be grown-up children who have left home.

Make sure the respondent is not reporting dead children in this question. Circle the code corresponding to the response. If she answers 'No', skip to CM8.

**CM7. HOW MANY SONS ARE ALIVE BUT DO NOT LIVE WITH YOU? HOW MANY DAUGHTERS ARE ALIVE BUT DO NOT LIVE WITH YOU?**

If the answer to CM6 is 'Yes', record the number of sons and daughters who are alive but not living with the respondent in the space provided. If the answer is 'None' for sons (or if she does not have any sons who are alive), record '00' in the space provided for sons. If the answer is 'None' for daughters (or if she does not have any daughters who are alive), record '00' in the space provided for daughters.

Since this question is asked only to women who have children alive who are not living with them, at least one of the spaces should have a value higher than 00. For women who have been asked this question, the spaces should not be left blank.

**CM8. HAVE YOU EVER GIVEN BIRTH TO A BOY OR GIRL WHO WAS BORN ALIVE BUT LATER DIED?**

This question is extremely important.

Circle the code corresponding to the response. Some respondents may fail to mention children who died very young, so if she answers 'No', it is important to probe by asking **"I MEAN, TO A CHILD WHO EVER BREATHED, CRIED OR SHOWED SIGNS OF LIFE – EVEN IF HE OR SHE LIVED ONLY A FEW MINUTES OR HOURS?"** If the answer is still 'No', skip to CM10.

Some respondents may be reluctant to talk about this subject and may become sad or upset that you are asking such questions. Be sympathetic and tactful in such situations. Say that you know the subject is painful, but the information is important.

**CM9. HOW MANY BOYS HAVE DIED? HOW MANY GIRLS HAVE DIED?**

If the answer to CM8 is 'Yes', record the number of sons and daughters who were born alive but later died in the spaces provided. Do not leave either of the spaces blank. For women who have been asked this question, at least one of the spaces should have a value higher than 00.

**CM10. *Sum answers to CM5, CM7 and CM9***

Add the numbers of births reported in CM5, CM7 and CM9 and write the sum here, then continue with CM11.

**CM11. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE HAD IN TOTAL (*total number*) BIRTHS DURING YOUR LIFE. IS THIS CORRECT?**

If she says it is correct, check the box marked ‘Yes’ and then further check if she has ever given birth. If she has not given any birth before, go to ILLNESS SYMPTOMS module. If she has given birth before, continue with CM12.

If she says ‘No’, first check responses to CM1-CM10 and then go back through the questions to check with the respondent whether you have obtained the information correctly. For example, starting with CM5, you would ask: “**YOU HAVE TWO SONS AND ONE DAUGHTER LIVING WITH YOU, IS THAT CORRECT?**” Do the same for CM7 and CM9. Correct the answers and the sum mentioned in CM10 and then continue to the next question. Make sure to cancel the ‘No’ in CM11 and check ‘Yes’ after you have made the corrections.

**CM12. OF THESE (*total number*) BIRTHS YOU HAVE HAD, WHEN DID YOU DELIVER THE LAST ONE (EVEN IF HE OR SHE HAS DIED)?**

This question is used to ascertain the woman’s eligibility for the subsequent two modules.

Enter the date of the woman’s most recent birth, even if the child is no longer alive, in the space provided. If the child has died, take special care when referring to this child by name in the following modules.

If the woman does not remember the day of birth, you may enter ‘98’ to the space provided for ‘Day’. Note that you **MUST** obtain exact information on the month and year of the last birth; ‘98’ is not allowed for month and year.

**CM13. Check CM12: Last birth occurred within the last 2 years, that is, since (*day and month of interview*) in 2010**

**SURVEY COORDINATORS:** INTERVIEWERS SHOULD REPLACE “(*day and month of interview*) in 2010” WITH THE DAY AND MONTH THE INTERVIEW IS BEING CONDUCTED, AND USE 2010 OR 2011 FOR THE YEAR, DEPENDING ON WHETHER THE INTERVIEW IS CONDUCTED IN 2012 OR 2013.

EXAMPLES:

- IF AN INTERVIEW IS CONDUCTED ON 23 NOVEMBER 2012, THE SENTENCE SHOULD READ “***Last birth occurred within the last 2 years, that is, since 23 November in 2010?***”
- IF AN INTERVIEW IS CONDUCTED ON 2 FEBRUARY 2013, THE SENTENCE SHOULD READ “***Last birth occurred within the last 2 years, that is, since 2 February in 2011?***”

If the respondent’s last birth occurred in the last 2 years, check the relevant box and enter the name of the child on the line provided. Then continue with DESIRE FOR LAST BIRTH, MATERNAL AND NEWBORN HEALTH, and then POST-NATAL HEALTH CHECKS Modules. If the respondent’s last birth did not occur in the last 2 years, check the relevant box and go to the ILLNESS SYMPTOMS Module.

**SURVEY COORDINATORS:** YOU MAY USE THE EXAMPLE BELOW (AND SIMILAR OTHER EXAMPLES) TO EXPLAIN TO INTERVIEWERS DURING TRAINING HOW THIS MODULE SHOULD BE COMPLETED AND HOW THE RESPONSES SHOULD BE ENTERED.

WOMAN INTERVIEWED IN FEBRUARY 2011 HAS HAD FOUR LIVE BIRTHS. TWO OF HER CHILDREN, ONE BOY AND ONE GIRL, ARE LIVING WITH HER. ONE BOY, FROM HER FIRST BIRTH IN MARCH 2000, IS LIVING ELSEWHERE, AND ONE GIRL (WANTED AT THE TIME), WHO WAS BORN IN NOVEMBER 2010, HAS DIED SINCE THEN. ASSUMING THAT THE WOMAN HAS GIVEN THE CORRECT INFORMATION (NO CHANGES NEEDED AFTER CHECKING CM11), THE FOLLOWING RESPONSES SHOULD BE CODED:

CM1            '1' CIRCLED  
 CM2            '98' CIRCLED FOR DAY, '03' ENTERED FOR MONTH, '2000' ENTERED FOR YEAR.  
 CM3            SKIPPED (REMAINS BLANK).  
 CM4            '1' CIRCLED  
 CM5            '01' FOR SONS AT HOME, AND '01' FOR DAUGHTERS AT HOME ENTERED  
 CM6            '1' CIRCLED  
 CM7            '01' ENTERED FOR SONS ELSEWHERE, '00' ENTERED FOR DAUGHTERS ELSEWHERE  
 CM8            '1' CIRCLED  
 CM9            '00' ENTERED FOR BOYS DEAD, '01' ENTERED FOR GIRLS DEAD  
 CM10          '04' ENTERED  
 CM11          'YES' MARKED AND 'ONE OR MORE BIRTHS' MARKED  
 CM12          '98/11/2010' ENTERED  
 CM13          'YES' MARKED

### BIRTH HISTORY MODULE

**SURVEY COORDINATORS:** THE INSTRUCTIONS HERE SHOULD BE PRECEDED WITH THOSE FOR THE CHILD MORTALITY MODULE, FOR QUESTIONS CM1 TO CM10 IN THE STANDARD MICS QUESTIONNAIRE FOR INDIVIDUAL WOMEN. WHEN THE BIRTH HISTORY MODULE IS ADDED, A NEW VERSION OF CM11 REPLACES THE ONE IN THE STANDARD CORE QUESTIONNAIRE. NEW VERSIONS OF CM12 AND CM13 ARE PLACED AFTER THE BIRTH HISTORY. THE INSTRUCTIONS HERE THEREFORE INCLUDE THOSE FOR CM11, THE BIRTH HISTORY QUESTIONS (BH1 TO BH11), CM12 AND CM13.

#### **CM11. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE HAD IN TOTAL (*total number*) BIRTHS DURING YOUR LIFE. IS THIS CORRECT?**

If she says it is correct, check the box marked 'Yes' and then further check if she has ever given birth. If she has not given any birth before, continue go to ILLNESS SYMPTOMS module. If she has given birth before, continue with the BIRTH HISTORY module.

If she says 'No', first check responses to CM1-CM10 and then go back through the questions to check with the respondent whether you have obtained the information correctly. For example, starting with CM5, you would ask: **"YOU HAVE TWO SONS AND ONE DAUGHTER LIVING WITH YOU, IS THAT CORRECT?"** Do the same for CM7 and CM9. Correct the answers and the sum mentioned in CM10 and then continue to the next question. Make sure to cancel the 'No' in CM11 and check 'Yes' after you have made the corrections.

In the Birth History module, we want to list all the births that the respondent has had in the order in which they occurred. Begin the section with the introductory line at the top of the table to inform the respondent that we would like to record the names of all children born to her, from all marriages and unions, whether or not they are still alive, from the first to the last.

**NOW I WOULD LIKE TO RECORD THE NAMES OF ALL OF YOUR BIRTHS, WHETHER STILL ALIVE OR NOT, STARTING WITH THE FIRST ONE YOU HAD**

We will not be including stillbirths or abortions she might have had in this list.

Ask the name of each child in BH1, beginning with the first born and continuing until the last born. Record all the names in BH1, one row for each child. If the respondent has had two or more births, make it clear to her that she should start with the first birth she had and proceed in order to her last birth. She should not tell you first about all the living children and then about all those who have died; she must proceed in chronological order whether or not a child is now alive. Then ask the respondent whether any of these were multiple births (e.g., twins) and record single or multiple birth status for each child in BH2.

After recording the names and single/multiple birth status for all the children, go back to the first child and ask BH3-BH10 as appropriate. Then ask these questions for the second child and so on; you will complete a row for one child at a time. If after you fill in information for several births, you find out that the births are not in order, do not erase the information. Instead, correct the birth order Line Numbers and draw arrows to indicate the correct order. Make sure to record twins on separate lines.

**BH1. WHAT NAME WAS GIVEN TO YOUR (*first/next*) BABY?**

First, ask for the name of the respondent's firstborn child and write it in the first row. Write the name that distinguishes that child from the others; in other words, if there are two children, Mathew Phiri and Jean Phiri, write "Mathew Phiri" and "Jean P" not "M. Phiri" and "J. Phiri." If the baby never had a name, either because the baby is still very young or because the baby died before a name was given, write "Baby" for the name. Record the names of all her births in chronological order before going to the next question.

**BH2. WERE ANY OF THESE BIRTHS TWINS?**

Ask the respondent whether any of her births were multiple births and record the status of each child. If a child is a multiple birth, be sure to record the twin (or triplet, etc.) on a separate line.

After you have completed BH1 and BH2 for all births, you are ready to proceed with BH3-BH10 for one child at a time.

**BH3. IS (*name*) A BOY OR A GIRL?**

Circle the code for the sex of the child. Although you can sometimes tell the sex from the name, check with the respondent by saying, for example, "and Susan is a girl?" Do not assume the sex of the child from the name.

**BH4. IN WHAT MONTH AND YEAR WAS (*name*) BORN?**

Write the month and year of each birth.

Probe: "WHAT IS HIS/HER BIRTHDAY?" if necessary. If the respondent gives you a year of birth but does not know the month of birth, probe to estimate the month. For example, if she says her daughter was born in 1997, but she doesn't know which month, ask her whether she gave birth in the dry or wet season, whether she remembers if she was pregnant at Christmas or Easter time, during the month of Ramadan, or during some other significant event/season of the year to try to determine the month

of birth. Convert months to numbers, as usual. If you cannot even estimate a month, write '98' for month.

If the respondent cannot recall the year when the birth occurred, you need to probe carefully. Check the documents collected at the beginning of the interview, such as the birth certificate or immunization record, to see whether a date of birth was recorded. Before entering a date from these documents, check with the respondent to determine whether she believes the date is accurate. If there is no birth certificate or other document for the child, see whether the respondent knows a firm birth date for any other child in the household and relate it to that. For example, if she knows the second child was born in 1994 and the first child was just a year old at that time, enter '1993.' You must enter a year for all children, even if it is just your best estimate. Leaving this area blank is not acceptable. If you leave this area blank, you will be asked by your field editor or supervisor to go back to the household and ask the question again to the respondent.

**BH5. IS (*name*) STILL ALIVE?**

Ask whether the child is still alive or not. If the child is dead, circle '2' and skip to BH9, because questions BH6, BH7 and BH8 are for only living children. If the child is alive, continue with BH6.

**BH6. HOW OLD WAS (*name*) AT HIS/HER LAST BIRTHDAY?**

The age of all living children should be recorded in completed years. For example, a child who will become three years old (complete three years) next week should be recorded as '02' years today. A child less than one year old will be recorded as age '00' years.

In some cases, the mother will not know the current age of her child. In this case, you may rephrase the question to, "How many years ago was Michael born?" You can also use other available information. For example, you can relate Henry's age to the age of a child she does know. For example, the mother may know that her youngest child was born one year ago and that Henry was two years old at that time, in which case Henry would be three years old now.

**You MUST record an age for all children who are still alive. Failure to do so is UNACCEPTABLE, and you will need to re-visit the household to complete this information.**

**BH7. IS (*name*) LIVING WITH YOU?**

This question is important in determining the extent to which children live away from their own mothers. If a child lives with other people on a permanent basis, record 'No'. If the child is away for a short while but usually lives with the mother, record 'Yes'. Children living with their mothers should have been recorded in the household list.

**BH8. Record household line number of child (from HL1)**

Write the Line Number of the child from HL1 of the Household Listing Form. If the child does not live in the household, enter '00' in the boxes. If the child is not listed in the Household Listing, but the mother says that the child is in fact a usual resident, add the child to the Household Listing and record the Line Number in BH8.

Remember that after recording BH8 for the first child, you will proceed with BH3 for the next birth. After recording BH8 for any birth after the first child, you will go to BH10. If you are following the

skips correctly, you will only be asking BH8 for living children. Be careful with this, since errors in the Line Numbers cause problems during data processing.

**BH9. *If dead*, HOW OLD WAS (*name*) WHEN HE/SHE DIED?**

If “1 year”, probe: **HOW MANY MONTHS OLD WAS (*name*)?**

For children who have died, you must record information about age at death even if the information is only a best estimate. Age at death information is recorded either in days, months, or years, according to a specific set of rules:

- If the child was less than one month old at death, circle ‘1’ and write the answer in ‘Days’ to the space provided, if necessary, with a leading zero, such as “08”.
- If the child was less than two years old but at least one month old when he or she died, circle ‘2’ and write the answer in ‘Months’, again with a leading zero if necessary.
- If the child was two years old or older when he or she died, circle ‘3’ and write the answer in ‘Years’.

(Note: *You should never record ‘00’ months or ‘00’ or ‘01’ years* if the interviewer instruction is followed correctly) Here are some examples of how to record age at death:

Days ..... <u>1</u>			The child died on sixth day of birth
Month.....2	0	5	
Years .....3	—	—	
Days .....1			Child died during the third month of birth
Month..... <u>2</u>	0	2	
Years .....3	—	—	
Days .....1			Child died during fourth year of birth
Month..... <u>2</u>	0	3	
Years ..... <u>3</u>	—	—	

You should record the answer in completed units, i.e., if she says “four and a half months,” record Months ‘04.’ Note that if the respondent gives you an answer in weeks, you must convert the answer to days or months. If the answer is less than one month (less than four weeks), probe to find out the exact age at death in days. For example, if the answer is “three weeks,” probe for the number of days. If the mother says ‘19 days’, record Days ‘19.’ If the answer is one or more months (four weeks or more), you would convert the answer to months. An answer of “seven weeks” would be recorded as Months ‘01.’

Similarly, if the respondent answers “one year,” you need to probe to find the exact number of months. We know that if a child died at the age of 10, 11, 12, 13, or 14 months, a woman is likely to round her answer because she does not know that we need the exact age. This means that she is likely to respond “one year old” even if the child really was 10 months or 13 months old. Therefore, any time a woman responds “one year” to this question, probe by asking, “How many months old was (*name*)?” Record the answer in completed months.

Note that this is a table of children who were born alive. If the respondent says that the baby was not alive when it was born, probe by saying, “Did the baby cry or show any sign of life when it was born?” If she says the baby was dead when it was born, cross out the entry in the table. Make sure to renumber the remaining births when this occurs.

If you are following the skip pattern correctly, you will only be asking this question for children who have died.

**BH10. WERE THERE ANY OTHER LIVE BIRTHS BETWEEN (*name of previous birth*) AND (*name*), INCLUDING ANY CHILDREN WHO DIED AFTER BIRTH?**

The purpose of this question is to make sure that we have not missed any of the respondent’s own births. Ask the respondent whether there were any live births that may have occurred between the two births. For example, a respondent tells you that Mohamed was born in 2001 and Ahmad was born in 2004. Ask BH10: “Were there any other live births between the birth of Mohamed and Ahmad?”

If the woman tells you there was a birth after Mohamed and before Ahmad, circle ‘1’ in BH10 and add that birth to the end of the birth history. Draw an arrow showing the birth’s proper location, correct the birth order numbers in BH1, and ask BH2-BH10 for that birth. You may also have to correct the information in CM3-CM11. If, however, the woman tells you there was no birth between Mohamed and Ahmad, circle ‘2’ in BH10. Then proceed with BH3 for the next birth (or go to BH11 if Ahmad was the last birth).

**BH11. HAVE YOU HAD ANY LIVE BIRTHS SINCE THE BIRTH OF (*name of last birth in Birth History*)?**

This question is similar to BM10 but is specifically designed to probe the time that has passed since the last birth. For example, if Ahmad is reported to be her last birth, and he was born in 2004, ask, “Have you had any live births since the birth of Ahmad?”

If the woman tells you there was a birth since Ahmad, add that birth to the end of the birth history. Then ask BH2-BH10 for that birth, and you may also have to correct the information in CM3-CM11. If, however, there was no birth after Ahmad, record ‘No’.

**CM12. Compare number in CM10 with number of births in the Birth History above and check:**

With this filter, we want to ascertain that the number of births recorded in the birth history is the same as the number recorded in CM10. These numbers should be equal. If they are indeed equal, continue with CM13. If not, you should probe to see which number is correct. You may need to record more births in the Birth History, delete births from the Birth History, or make changes to the CM module altogether.

**CM13. Check BH4 in BIRTH HISTORY: Last birth occurred within the last 2 years, that is, since (*month of interview*) in 2010**

With this filter, we want you to check whether the birth date of the last birth was within the last two years.

**SURVEY COORDINATORS:** INTERVIEWERS SHOULD REPLACE (*month of interview*) WITH THE MONTH THE INTERVIEW IS BEING CONDUCTED, AND USE 2010 OR 2011 FOR THE YEAR, DEPENDING ON WHETHER THE INTERVIEW IS CONDUCTED IN 2012 OR 2013.

EXAMPLES:

- IF AN INTERVIEW IS CONDUCTED ON 23 NOVEMBER 2012, THE SENTENCE SHOULD READ “*Last birth occurred within the last 2 years, that is, since 23 November in 2010?*”
- IF AN INTERVIEW IS CONDUCTED ON 2 FEBRUARY 2013, THE SENTENCE SHOULD READ “*Last birth occurred within the last 2 years, that is, since 2 February in 2011?*”

If the respondent’s last birth occurred in the last 2 years, check the relevant box and enter the name of the child on the line provided. Then continue with the next module. If the respondent’s last birth did not occur in the last 2 years, check the relevant box and go to the ILLNESS SYMPTOMS Module.

### **OTHER IMPORTANT POINTS ABOUT THE BIRTH HISTORY TABLE**

- 1) Recording of age at death, year of birth, and age of living children. For month of birth in BH4, it is permissible to record Code ‘98’ for Don’t Know as an answer. However, for year of birth (BH4), age of living children (BH6), and age at death (BH9), you must record an answer, even if it is only your best estimate. It is very important to obtain information for these questions, so you must probe for this information and make your best estimate on the basis of the woman’s answers.
- 2) Recording of information on twins. If there are any twins, record the information about each twin on a separate line. If the twins are the respondent’s last birth and if one twin is dead, record the living twin last. By doing this, you will be able to talk about the living twin first when you get to MN Section, which may be more comforting for the respondent.
- 3) Recording information for more than 14 births. There are lines for 14 births in the table. If you find a respondent with more than 14 births, write at the bottom of the table *continued on a separate Form*. Write the word *continuation* and the identification information on the cover sheet of the second Form. Then change the number ‘01’ on the birth history in the second Form to a ‘15’ and so on. After you have recorded information in the birth history for these additional births, return to the first questionnaire to complete the interview.
- 4) Correcting of reported sequence of births. If you find that the respondent reports a birth that is not in order of birth, draw an arrow indicating the position in the table where it belongs according to the date when it occurred, and correct the Line Numbers printed in BH1.
- 5) Checking birth interval. Check the dates of each birth. If any two children are reported born less than seven months apart, e.g., February 2004 & September 2004 or November 2003 & May 2004, probe and correct dates. Either the February 2004/November 2003 birth occurred earlier or the September 2004/May 2004 birth occurred later, or both.

### **DESIRE FOR LAST BIRTH MODULE**

This module is to be administered to all women with a live birth in the 2 years preceding the date of interview. Check CM13 in Child Mortality module and record name of last born child on the space provided at the top of this module. Use this child's name while asking the questions, where indicated.

**DB1. WHEN YOU GOT PREGNANT WITH (NAME), DID YOU WANT TO GET PREGNANT AT THAT TIME?**

Circle the code corresponding to the response given. If the response is 'Yes' (wanted to get pregnant), circle '1' and go to next module.

**DB2. DID YOU WANT TO HAVE A BABY LATER ON, OR DID YOU NOT WANT ANY (MORE) CHILDREN?**

Circle the code corresponding to the response given. If the respondent says she wanted no more, circle '2' and go to next module.

**DB3. HOW MUCH LONGER DID YOU WANT TO WAIT?**

If the response is given in months, circle '1' and record the number of months. If the response is given in years, circle '2' and record the number of years.

**MATERNAL AND NEWBORN HEALTH MODULE**

This module is to be administered to all women who have had a live birth in the 2 years preceding the date of the interview. Check CM13 in Child Mortality module and record the name of the last-born child in the space provided. Use this child's name in the following questions, where indicated.

If the woman has not had any live births in the 2 years preceding the date of interview, leave this module blank and skip to the next module.

The purpose of this module is to obtain information on the health of the mother and newborn child. The module asks about health and care received by the mother during pregnancy and during labour and delivery. We also ask about the weight of the child and breastfeeding at the time of birth.

**MN1. DID YOU SEE ANYONE FOR ANTENATAL CARE DURING YOUR PREGNANCY WITH (name)?**

**MN2. WHOM DID YOU SEE?**

Circle the code for the person seen for antenatal care. Probe: "ANYONE ELSE?" and circle the codes for any other persons seen for antenatal care during this pregnancy.

**SURVEY COORDINATORS:** THE CATEGORIES OF PROVIDERS MUST BE APPROPRIATELY ADAPTED AND TRANSLATED FOR THE LOCAL CONTEXT, BASED ON THE PRE-TEST. IT IS IMPORTANT TO MAINTAIN THE BROAD CATEGORIES SHOWN HERE. WE NEED TO BE ABLE TO DISTINGUISH BETWEEN ANTENATAL CARE PROVIDED BY HEALTH PROFESSIONALS AND CARE PROVIDED BY OTHERS. YOU MUST GIVE INTERVIEWERS DEFINITIONS OF EACH TYPE OF PROVIDER DURING TRAINING. CUSTOMIZE THE DESCRIPTIONS BELOW AS APPROPRIATE.

Antenatal care check-ups help to detect problems associated with pregnancy and delivery. All pregnant women should have routine check-ups. These questions refer to any antenatal care received during the pregnancy – a check specifically for the pregnancy and not for other reasons.

In MN1, ask if she saw anyone for antenatal care for this pregnancy. If she saw no one for antenatal checks, circle '2' and skip to MN5. If the woman answers 'Yes' to MN1, ask whom she saw for the

check-up. Probe to learn if she saw more than one person and record all persons seen. Also probe for the type of person seen and circle all answers given. If you are unsure how to code a person mentioned, write the words used to describe the person in the space provided 'Other' and circle 'X'.

Doctors, nurses, midwives and auxiliary nurse midwives are skilled health personnel who have midwifery skills to manage normal deliveries and diagnose or refer obstetric complications. 'Traditional birth attendants' may be trained or untrained.

If the woman gives the name of a health facility, ask her to tell you who she saw there.

**MN3. HOW MANY TIMES DID YOU RECEIVE ANTENATAL CARE DURING THIS PREGNANCY?**

Ask the respondent how many times she saw someone for antenatal care during her last pregnancy (i.e., she was pregnant with her last child). This refers to care related to her pregnancy and would not include seeing a doctor or nurse for other reasons.

**MN4. AS PART OF YOUR ANTENATAL CARE DURING THIS PREGNANCY, WERE ANY OF THE FOLLOWING DONE AT LEAST ONCE?**

Ask about each procedure and record the response before asking about the next one. Circle '1' for 'Yes', or '2' for 'No' in each case. It may be necessary to explain some of the procedures. We want to know whether each of the procedures listed was performed during any of the antenatal check-ups during her last pregnancy. It does not matter if they were performed only once or more than once, or performed in the same visit or spread over several visits. The question asks for the following procedures:

**A. WAS YOUR BLOOD PRESSURE MEASURED?**

Blood pressure is measured with a medical instrument. A rubber cuff is wrapped around a person's upper arm and is inflated. While slowly releasing air from the cuff, the person measuring the blood pressure listens to the pulsing of the blood vessels with a stethoscope to determine the pressure.

**B. DID YOU GIVE A URINE SAMPLE?**

**C. DID YOU GIVE A BLOOD SAMPLE?**

A blood sample may be taken from the woman's fingertip or from a vein (usually from a vein near the elbow or on the wrist). The blood sample is used to test for various diseases, such as anaemia, parasite infestations or infectious diseases.

**MN5. DO YOU HAVE A CARD OR OTHER DOCUMENT WITH YOUR OWN IMMUNIZATIONS LISTED? MAY I SEE IT PLEASE?**

First, ask whether she has a vaccination card or other documentary evidence of vaccination. Ask to see this evidence and record that you have seen it by circling '1'. If a card is presented, use it to assist with answers to the following 2 questions. If the woman says she has a card but does not/cannot show it to you, circle '2'.

If the card is not available ('2' or '3' circled in MN5), you must try to find out how long ago the last Tetanus toxoid (TT) dose was received in MN6, and the total number of TT doses the mother has

received in her lifetime in MN7. Use the probing questions, and record her answers in the spaces provided.

Women who do not have immunization cards may have difficulty identifying whether injections they received were tetanus toxoid injections.

**MN6. WHEN YOU WERE PREGNANT WITH (*name*), DID YOU RECEIVE ANY INJECTION IN THE ARM OR SHOULDER TO PREVENT THE BABY FROM GETTING TETANUS, THAT IS CONVULSIONS AFTER BIRTH?**

**SURVEY COORDINATORS:** ADAPT THE WORDING USED TO DESCRIBE A TETANUS TOXOID INJECTION, AND ANY ADDITIONAL PROBING QUESTIONS SPECIFYING THE SITE MOST FREQUENTLY USED (IN THE ARM OR SHOULDER).

Tetanus is an infection of the wound and women may be infected with tetanus after delivery. It can be prevented through a vaccination during pregnancy. The vaccine is known as tetanus toxoid.

Ask if she received any tetanus toxoid injection during her last pregnancy. Circle '1' for a 'Yes' response. If the answer is 'No' or 'DK', circle the code corresponding to the response and skip to MN9.

**MN7. HOW MANY TIMES DID YOU RECEIVE THIS TETANUS INJECTION DURING YOUR PREGNANCY WITH (*name*)?**

Enter the number of doses she reports in the space provided and continue to MN8. If the number of doses is 7 or more times, record '7'. If she does not know, circle '8' and skip to MN9.

**MN8. How many tetanus injections during last pregnancy were reported in MN7?**

Check the box corresponding to the number of tetanus injections during last pregnancy. If she reported at least two tetanus injections during her last pregnancy, go to MN12. If she reported only one tetanus injections during her last pregnancy, continue with MN9.

**MN9. DID YOU RECEIVE ANY TETANUS INJECTION AT ANY TIME BEFORE YOUR PREGNANCY WITH (*name*), EITHER TO PROTECT YOURSELF OR ANOTHER BABY?**

Circle the code corresponding to her response. If she reports never having received any tetanus injection prior to her last pregnancy, or does not know, circle the code corresponding to the answer given and skip to MN12. If 'Yes', continue with MN10.

**MN10. HOW MANY TIMES DID YOU RECEIVE A TETANUS INJECTION BEFORE YOUR PREGNANCY WITH (*name*)?**

Ask about doses of tetanus injections received during or before the next-to-last pregnancy or between pregnancies (at any time before the last pregnancy). Enter her response in the space provided, as in MN7. If the number of doses is 7 or more times, record '7'.

**MN11. HOW MANY YEARS AGO DID YOU RECEIVE THE LAST TETANUS INJECTION BEFORE YOUR PREGNANCY WITH (*name*)?**

Ask her to estimate how long ago she received the last dose of tetanus injections (the dose before her last pregnancy), and enter her response in years. If less than 1 year, record 00.

**MN12. Check MNI for presence of antenatal care during this pregnancy:**

If the answer to MN1 is 'Yes', check the corresponding box and continue with MN13. If no antenatal care is received during this pregnancy, skip to MN17.

**SURVEY COORDINATORS:** QUESTIONS MN13-MN16 ARE APPROPRIATE FOR MALARIA-AFFECTED COUNTRIES. IN OTHER COUNTRIES, THE EXCLUSION OF THESE FOUR QUESTIONS MEANS THAT A DIFFERENT SKIP IS REQUIRED IN MN8, MN9 AND MN10 (SKIP TO MN17 INSTEAD OF MN12). ALSO, YOU ARE EXPECTED TO DELETE THE MANUAL INSTRUCTIONS RELEVANT TO THESE QUESTIONS (MN12-MN16).

CHANGE THE FOLLOWING IN MN8:

IF WOMEN REPORTED AT LEAST TWO TETANUS INJECTIONS DURING LAST PREGNANCY SKIP SHOULD GO TO MN17 INSTEAD OF MN12.

CHANGE THE FOLLOWING IN MN9:

A 'NO' OR 'DK' ANSWER SHOULD SKIP TO MN17 INSTEAD OF MN12.

CHANGE THE FOLLOWING IN MN10:

A 'DK' ANSWER SHOULD SKIP TO MN17 INSTEAD OF MN12.

DELETE QUESTIONS MN12-MN16 BUT DO NOT RENUMBER THE REMAINING QUESTIONS IN THIS MODULE AS THIS MIGHT EASILY LEAD TO INCORRECT SKIPS OR PROBLEMS IN THE QUESTIONNAIRE.

**MN13. DURING ANY OF THESE ANTENATAL VISITS FOR THE PREGNANCY, DID YOU TAKE ANY MEDICINE IN ORDER TO PREVENT YOU FROM GETTING MALARIA?**

During pregnancy, a woman's immune system is weakened, making her more susceptible to malaria infection than women who are not pregnant. Malaria in pregnant women can cause several complications that are dangerous to the mother and unborn child, including severe malaria and death, maternal anaemia and low birthweight in newborns. The World Health Organization recommends that pregnant women in malaria-endemic areas take a treatment dose of SP/Fansidar (usually three tablets taken all at once) as a preventive measure, once a month during the third trimester of pregnancy (months 7, 8 and 9 of the pregnancy). Such preventive treatment with SP/Fansidar, usually given during antenatal visits, is known as intermittent preventive treatment (IPT). The generic name for SP/Fansidar is sulfadoxine-pyrimethamine, and other brand names can exist. Other anti-malarial medicines can be used as a preventive measure as well.

Circle the code corresponding to the answer given. Medicines to prevent malaria include only those medicines that a woman takes during pregnancy when she does not already have malaria. If the respondent took medicines during pregnancy when she did not already have malaria, continue to the next question.

If the respondent did not take any medicine to prevent her from getting malaria, circle '2'. If she does not know whether she received treatment to prevent malaria during her last pregnancy, circle '8' for 'DK'. In both cases, skip to MN17.

If the respondent says that she had malaria or a fever during the pregnancy and was given medicines to treat the malaria or fever, this would not be considered preventive treatment. In such a case, circle '2' for 'No' and skip to MN17.

**MN14. WHICH MEDICINES DID YOU TAKE TO PREVENT MALARIA?**

Circle the codes corresponding to all medicines reported taken to prevent malaria during the pregnancy.

**SURVEY COORDINATORS:** PROVIDE INTERVIEWERS WITH PICTURES OR PACKAGES OF TYPICAL ANTI-MALARIAL MEDICINES USED IN THE COUNTRY, TO BE SHOWN TO RESPONDENTS DURING THE INTERVIEWS.

If the respondent cannot remember the name of the medicine taken, ask her to show you the package it came in. If she doesn't have the package, show her typical anti-malarials and ask if she took any of them. If she mentions that during an antenatal visit she was given three tablets to take all at the same time in order to prevent malaria, circle 'A' on the assumption that she took SP/Fansidar.

If she took another medicine, write the name in the space provided in 'Other', and circle 'X'. If she doesn't know the name of the medicine she took to prevent malaria, circle 'Z'.

**MN15. Check MN14 for medicine taken:**

This filter is used to skip the next question if the woman did not take SP/Fansidar during her last pregnancy. If SP/Fansidar was taken (MN14), continue with the next question. If SP/Fansidar was not taken, skip to question MN17.

**MN16. DURING THIS PREGNANCY, HOW MANY TIMES DID YOU TAKE SP/FANSIDAR?**

Here we are asking about preventive doses of SP/Fansidar, not curative doses given if she had a fever. Therefore, in this question, we want to know only about preventive doses.

Record the number of times she took SP/Fansidar during pregnancy in the space provided. If the woman visited an antenatal clinic or other facility because she was sick with fever and was given SP/Fansidar, do not count this in the number of times she took SP/Fansidar during the pregnancy. Count only the 'times' taken (three tablets taken at the same time = '1 dose' = '1 time') when the woman was pregnant and did not have a fever.

**MN17. WHO ASSISTED WITH THE DELIVERY OF (name)?**

Circle the code for the person assisted with the delivery. Probe: "ANYONE ELSE?" and circle the codes for any other persons assisting with the delivery of this child.

**SURVEY COORDINATORS:** CODING CATEGORIES SHOULD BE DEVELOPED LOCALLY AND REVISED BASED ON THE PRE-TEST. HOWEVER, THE BROAD CATEGORIES MUST BE MAINTAINED. AGAIN, WE NEED TO KNOW WHETHER THE PERSON WHO ASSISTED WITH THE DELIVERY WAS A HEALTH PROFESSIONAL OR ANOTHER PERSON.

When asking this question, be sure to use the name of the child you are referring to, so that there is no confusion.

Probe for the type of person who assisted with the delivery. If the woman is not sure of the status of the person who attended the delivery, for example, if she doesn't know whether the attendant was a midwife or a traditional birth attendant, probe further. Circle the codes corresponding to all persons assisting at the delivery. If you are unsure where to code a person mentioned, write it in the space provided 'Other' and circle 'X'. If no one attended the delivery, circle 'Y'.

**MN18. WHERE DID YOU GIVE BIRTH TO (*name*)?**

**SURVEY COORDINATORS:** CODING CATEGORIES SHOULD BE DEVELOPED LOCALLY AND REVISED BASED ON THE PRE-TEST. MAKE SURE TO MAINTAIN THE BROAD CATEGORIES, SO THAT YOU ARE ABLE TO DISTINGUISH BETWEEN PRIVATE AND PUBLIC HEALTH FACILITIES, OR OTHER PLACES.

The intent of this question is to identify births delivered in a health facility. If the woman gave birth in a hospital, health centre or clinic, ask whether the place is in the public (run by the government) or private sector. If the place is in the public sector, but is not one of the pre-coded choices, write the description in the space provided for 'Other public' and circle '26'. Similarly, if the place is in the private medical sector, but is not one of the pre-coded choices, write the description in the space provided for 'Other private medical' and circle '36'. If you are unable to determine whether public or private, write the name of the place in the space provided on the questionnaire 'Name of place' and tell your supervisor. Your supervisor will learn from other people in the community whether the place is public or private and then circle the code corresponding to the response.

If the respondent answers that she delivered in another place not listed, write the description of the place in the space provided for 'Other' and circle '96'. Places that are not health facilities, other than home, should also be coded as 'Other' and described.

**MN19. WAS (*name*) DELIVERED BY CAESAREAN SECTION? THAT IS, DID THEY CUT YOUR BELLY OPEN TO TAKE THE BABY OUT?**

A caesarean section is a delivery of a baby through an incision in the woman's abdomen and womb, rather than through the birth canal. Such a delivery is necessary for some women due to pregnancy complications. Find out whether the baby was delivered by an operation and not through the birth canal.

**MN20. WHEN (*name*) WAS BORN, WAS HE/SHE VERY LARGE, LARGER THAN AVERAGE, AVERAGE, SMALLER THAN AVERAGE, OR VERY SMALL?**

Low-birthweight babies are at higher risk of serious illness or death than other babies. Mothers are asked to give the baby's birthweight, but since some babies are not weighed at birth, a mother's subjective assessment of the baby's size at birth is important. When the information from women who answer these questions is analysed, we can obtain an indication of what women mean by these subjective categories. This information can provide an estimate of the average birthweight.

Read the entire question exactly as written before accepting an answer. This is the woman's own opinion about the size of her baby. Even if she knows the child's birthweight, tell her that you want to know her own idea of whether the baby was very large, larger than average, average, smaller than average or very small. If the respondent is unable to tell you, do not try to guess the answer based on the birthweight information or the appearance of the baby; circle '8' for 'DK'. In cases when the woman knows the birthweight of the baby and tells you the exact weight, do not use your judgement to influence her response in MN20. In other words, even if the woman tells you that her baby was

smaller than average while the birthweight she is stating is quite large in your opinion, do not probe further to 'correct' the woman's perception of the size of the baby.

**MN21. WAS (*name*) WEIGHED AT BIRTH?**

Circle the code corresponding to the response given. If the baby was not weighed at birth or the mother doesn't know, skip to MN23.

**MN22. HOW MUCH DID (*name*) WEIGH?**

**SURVEY COORDINATORS:** IF POUNDS INSTEAD OF KILOGRAMS ARE USED, ADAPT RESPONSE CATEGORIES TO REFER TO POUNDS. IF POUNDS AS WELL AS KILOGRAMS ARE USED, ADAPT QUESTIONNAIRE TO INCLUDE SEPARATE CATEGORIES FOR RECORDING WEIGHT IN POUNDS. NEVER ALLOW ENTRY OF DIFFERENT UNITS OF WEIGHT IN THE SAME SPACES.

Ask the woman to show you her (or the child's) health card, if available. Record the birthweight in kilograms. If the weight is 'From card' or is recorded on another written document (such as a vaccination card, antenatal card or birth certificate), circle '1' and record the weight in the corresponding space. If the birthweight is reported by the mother, but no card or document is available, circle '2' for 'From recall' and record the weight in the corresponding space. Fill in the weight only once. Use zeros to fill in all digits if necessary. For example, if the woman tells you that the baby was 3.5 kilograms at birth; enter the information as '3.500'. Always record the birthweight from the card when possible.

If there is no card, and the mother cannot remember the exact weight, record her best estimate. Only circle '99998' for 'DK' if she absolutely cannot remember even the approximate weight.

**MN23. HAS YOUR MENSTRUAL PERIOD RETURNED SINCE THE BIRTH OF (*name*)?**

After a woman has given birth, there is a length of time when she will not have her monthly menstrual periods. This question asks about whether her period has resumed following the last birth. Circle the code corresponding to the response given.

**MN24. DID YOU EVER BREASTFEED (*name*)?**

Breastfeeding is important for a child's health and it prevents pregnancy during the period when the mother is breastfeeding. For this question, it does not matter how long the respondent breastfed the child, only whether or not she ever gave the child the breast, even if the baby died very young.

Circle the code corresponding to the response given. If the response is 'No' (she never breastfed the child), go to next module.

**MN25. HOW LONG AFTER BIRTH DID YOU FIRST PUT (*name*) TO THE BREAST?**

If the mother reports that the baby was put to the breast immediately after birth, circle '000'. Otherwise, record the time in completed hours or days.

If less than 1 hour, circle '1' for 'Hours' and record '00' in the space provided. For example, if the woman said she began breastfeeding within 10 minutes of the birth, circle '1' and record '00' hours.

If the mother began breastfeeding within 24 hours of the birth, circle '1' and record the number of hours that passed before the baby was put to the breast.

If she began breastfeeding 24 hours or more after the birth, circle '2' and record the number of days. Record in completed number of days. For example, if the baby was first breastfed 30 hours after delivery, circle '2' and record '01' days.

If the woman does not know or does not remember how long after birth she put the baby to the breast, circle '998'.

**MN26. IN THE FIRST THREE DAYS AFTER DELIVERY, WAS (*name*) GIVEN ANYTHING TO DRINK OTHER THAN BREAST MILK?**

If the child was given anything to drink other than breast milk, then circle code '1' for 'Yes' and otherwise '2' for 'No' and go to next module.

**MN27. WHAT WAS (*name*) GIVEN TO DRINK?**

Circle the code corresponding to the response. Probe by asking "ANYTHING ELSE?" to find out if the child was given anything else to drink. If the respondent answers that the child was given a drink other than those listed here, write the description of the drink in the space provided for 'Other' and circle 'X'.

**POST-NATAL HEALTH CHECKS MODULE**

The post-natal period is defined as the time following delivery until six weeks after birth. Post-natal health checks are important for the health and survival of both child and mother, particularly during the first couple of days after delivery.

The purpose of this module is to measure contact with a health provider at some point after the completion of the delivery process; thus, we will not consider checks occurring within the first hour as "post-natal health checks". Also, the module does not address content of care.

Each respondent with a birth within the last two years (*CM13=One or more live births in last two years*) will be asked a subset of the questions in the module. Questions about a post-natal health check are asked separately for the baby and for the mother.

- For births that occurred in a health facility, questions are asked to establish whether anyone checked on the health of the baby and on the health of the mother before they left the facility. We also ask about any post-discharge checks on health. If a health check did occur after leaving the facility, we ask when the check occurred, who performed the check, and where it took place.
- For births that occurred outside a health facility, the respondent is asked if the birth attendant provided any health check before leaving the mother and baby. Then she is asked if there was any health check after the attendant left and, if so, when the check occurred, who performed the check, and where it took place.
- For births that occurred outside a facility with no attendant present, the respondent is asked whether there was any check on her baby's health at some point after delivery and, if so, when the

check occurred, who performed the check, and where it took place. The same sequence of questions is asked about checks on the mother's health.

The Post-Natal Health Check (PNHC) module appears rather lengthy because it is necessary to ask different questions of women who delivered in a facility versus those who did not. Thus, it is very important to check each filter question carefully and to follow all skip instructions.

**PN1. Check MN18: Was the child delivered in a health facility?**

Check MN18. If MN18 is '21'-'26' or '31'-'36', which means the respondent delivered her child in a health facility, continue with PN2. If MN18 is '11' or '12' or '96', which means that the respondent delivered at home or some other place outside a facility, go to PN6.

**PN2. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT WHAT HAPPENED IN THE HOURS AND DAYS AFTER THE BIRTH OF (*name*).**

**YOU HAVE SAID THAT YOU GAVE BIRTH IN (*name or type of facility in MN18*). HOW LONG DID YOU STAY THERE AFTER THE DELIVERY?**

Note that PN2 is composed of two parts – an introduction and a question. Make sure to read the introduction before asking the question. Circle a code for the unit of time the respondent mentions (hours, days or weeks) and then fill in a number in the boxes to the right of the code you circle. Follow the instructions for recording time; that is less than one day should be recorded in hours and less than one week should be recorded in days. If the woman is uncertain, probe to get her best estimate of how long she stayed in the facility. Note that you will need to refer to the child by name, as well as the type of facility.

**PN3. I WOULD LIKE TO TALK TO YOU ABOUT CHECKS ON (*name*)'S HEALTH AFTER DELIVERY – FOR EXAMPLE, SOMEONE EXAMINING (*name*), CHECKING THE CORD, OR SEEING IF (*name*) IS OK. BEFORE YOU LEFT THE (*name or type of facility in MN18*), DID ANYONE CHECK ON (*name*)'S HEALTH?**

This question refers to health checks that occurred sometime after delivery was over but before the baby left the facility. This does not include care immediately following delivery.

PN3 is composed of two parts – an introduction and a question. Note that the introduction provides a series of examples to illustrate what we mean by “check on the baby's health”; these are meant to be examples only so it is okay if the baby's health check did not include any of these specific components. Make sure to read the introduction before asking the question so that the respondent understands the meaning of our question. Circle '1' if 'Yes' or '2' if 'No' and continue to the next question.

**PN4. AND WHAT ABOUT CHECKS ON YOUR HEALTH – I MEAN, SOMEONE ASSESSING YOUR HEALTH, FOR EXAMPLE ASKING QUESTIONS ABOUT YOUR HEALTH OR EXAMINING YOU.**

**DID ANYONE CHECK ON YOUR HEALTH BEFORE YOU LEFT (*name or type of facility in MN18*)?**

PN4 is similar to PN3, but here we are asking about a check on the health of the mother, not the newborn. It is important that the respondent understands that we are referring to health checks before leaving the facility.

PN4 is composed of two parts – an introduction and a question. Note that the introduction provides a series of examples to illustrate what we mean by a check on the mother’s health; these are meant to be examples only so it is okay if the health check did not include these specific components. Make sure to read the introduction before asking the question so that the respondent understands the meaning of our question. Note that we do not include health checks occurring immediately after delivery; if the respondent mentions a check that occurred 30 minutes after delivery, for example, probe to see if anyone checked on her health after that. Circle ‘1’ if ‘Yes’ or ‘2’ if ‘No’ and continue to the next question.

**PN5. NOW I WOULD LIKE TO TALK TO YOU ABOUT WHAT HAPPENED AFTER YOU LEFT (*name or type of facility in MN18*).**

**DID ANYONE CHECK ON (*name*)’S HEALTH AFTER YOU LEFT (*name or type of facility in MN18*)?**

For a woman who delivered in a health facility, the remaining questions in the module will focus on what happened to her and her baby after discharge from the facility. To ensure that the purpose of this and the following questions is clear, it is important to read the introduction before reading the question. Circle ‘1’ if ‘Yes’ or ‘2’ if ‘No’ and follow the skip pattern.

**PN6. Check MN17: Did a health professional, traditional birth attendant, or community health worker assist with the delivery?**

This filter will be administered for women who delivered outside a health facility. Check MN17. If any code between ‘A’-‘G’ is circled in MN17, which means the respondent delivered with a health professional, traditional birth attendant, or community health worker in attendance, continue with PN7. If none of the codes from ‘A’ to ‘G’ are circled, skip to PN10.

**PN7. YOU HAVE ALREADY SAID THAT (*person or persons in MN17*) ASSISTED WITH THE BIRTH. NOW I WOULD LIKE TO TALK TO YOU ABOUT CHECKS ON (*name*)’S HEALTH AFTER DELIVERY, FOR EXAMPLE EXAMINING (*name*), CHECKING THE CORD, OR SEEING IF (*name*) IS OK.**

**AFTER THE DELIVERY WAS OVER AND BEFORE (*person or persons in MN17*) LEFT YOU, DID (*person or persons in MN17*) CHECK ON (*name*)’S HEALTH?**

This question refers specifically to any health checks performed by the birth attendant after the delivery was completed but before leaving mother and newborn. This does not include care immediately following delivery.

PN7 is composed of two parts – an introduction and a question. Note that the introduction provides a series of examples to illustrate what we mean by “check on the baby’s health”; these are meant to be examples only so it is okay if the baby’s health check did not include any of these specific components. Make sure to read the introduction before asking the question so that the respondent understands the meaning of the question. Circle ‘1’ if ‘Yes’ or ‘2’ if ‘No’ and continue to the next question.

**PN8. AND DID (*person or persons in MN17*) CHECK ON YOUR HEALTH BEFORE LEAVING?  
BY CHECK ON YOUR HEALTH, I MEAN ASSESSING YOUR HEALTH, FOR EXAMPLE ASKING QUESTIONS**

**ABOUT YOUR HEALTH OR EXAMINING YOU.**

PN8 is similar to PN7, but here we are asking about a check on the health of the mother, not the newborn. It is important that the respondent understands that we are referring to health checks provided by the birth attendant before she left the premises after delivery.

PN8 is composed of two parts – an introduction and a question. Note that the introduction provides a series of examples to illustrate what we mean by a check on the mother’s health; these are meant to be examples only so it is okay if the health check did not include these specific components. Make sure to read the introduction before asking the question so that the respondent understands the meaning of our question. Note that we do not include health checks occurring immediately after delivery; if the respondent mentions a check that occurred 30 minutes after delivery, for example, probe to see if the attendant checked on her health after that but before leaving the home. Circle ‘1’ if ‘Yes’ or ‘2’ if ‘No’ and continue to the next question.

**PN9. AFTER THE (*person or persons in MN17*) LEFT YOU, DID ANYONE CHECK ON THE HEALTH OF (*name*)?**

For women who delivered at home with a birth attendant, the remaining questions in the module will focus on what happened after the attendant left her and her baby. Make sure the respondent understands that the question refers to a health check after the birth attendant left the home, regardless of who provided the care. Circle ‘1’ if ‘Yes’ or ‘2’ if ‘No’ and follow the skip pattern.

**PN10. I WOULD LIKE TO TALK TO YOU ABOUT CHECKS ON (*name*)’S HEALTH AFTER DELIVERY – FOR EXAMPLE, SOMEONE EXAMINING (*name*), CHECKING THE CORD, OR SEEING IF THE BABY IS OK. AFTER (*name*) WAS DELIVERED, DID ANYONE CHECK ON HIS/HER HEALTH?**

This question will be asked of respondents who delivered outside a facility with no birth attendant.

PN10 is composed of two parts – an introduction and a question. Note that the introduction provides a series of examples to illustrate what we mean by “check on the baby’s health”; these are meant to be examples only so it is okay if the baby’s health check did not include any of these specific components. Make sure to read the introduction before asking the question so that the respondent understands the meaning of our question. Circle ‘1’ if ‘Yes’ and continue to the next question. If ‘No’ circle code ‘2’ and skip to PN19.

**PN11. DID SUCH A CHECK HAPPEN ONLY ONCE, OR MORE THAN ONCE?**

This question will be asked of all respondents whose newborn received some sort of health check either after discharge from the health facility or after the birth attendant left the home. Respondents who delivered with no birth attendant will also be asked this question if they indicate that the baby received some sort of health check at any point after delivery. Circle ‘1’ if ‘Once’ or ‘2’ if ‘More than once’ and follow the skip pattern.

**PN12A. HOW LONG AFTER DELIVERY DID THAT CHECK HAPPEN?****PN12B. HOW LONG AFTER DELIVERY DID THE FIRST OF THESE CHECKS HAPPEN?**

Note that PN12A and PN12B are the same question, but worded differently depending on whether the newborn had just one health check or more than one (according to the response in PN11). Circle a code for the unit of time the respondent mentions (either hours, days or weeks) and then fill in a

number in the boxes to the right of the code you circle. Follow the instructions for recording time; that is less than one day should be recorded in hours and less than one week should be recorded in days. If the woman is uncertain, probe to get her best estimate.

**PN13. WHO CHECKED ON (*name*)’S HEALTH AT THAT TIME?**

**SURVEY COORDINATORS:** CODING CATEGORIES SHOULD BE DEVELOPED LOCALLY AND REVISED BASED ON THE PRE-TEST. HOWEVER, THE BROAD CATEGORIES MUST BE MAINTAINED. AGAIN, WE NEED TO KNOW WHETHER THE PERSON WHO PROVIDED THE HEALTH CHECK WAS A HEALTH PROFESSIONAL OR ANOTHER PERSON. NORMALLY, THESE CATEGORIES SHOULD BE CONSISTENT WITH THE CATEGORIES IN MN17.

Probe for the type of person who performed the health check. If the woman is unsure of the status of the person, for example, if she doesn’t know whether the provider was a midwife or a traditional birth attendant, probe further. Circle the codes corresponding to all persons were involved in that (first) health check. If you are unsure where to code a person mentioned, write it in the space provided ‘Other’ and circle ‘X’.

**PN14. WHERE DID THIS CHECK TAKE PLACE?**

**SURVEY COORDINATORS:** CODING CATEGORIES SHOULD BE DEVELOPED LOCALLY AND REVISED BASED ON THE PRE-TEST. MAKE SURE TO MAINTAIN THE BROAD CATEGORIES, SO THAT YOU ARE ABLE TO DISTINGUISH BETWEEN PRIVATE AND PUBLIC HEALTH FACILITIES, OR OTHER PLACES. NORMALLY, THESE CATEGORIES SHOULD BE CONSISTENT WITH THE CATEGORIES IN MN18.

The intent of this question is to identify where the health check occurred. If the place is in the public sector, but is not one of the pre-coded choices, write the description in the space provided for ‘Other public’ and circle ‘26’. Similarly, if the place is in the private medical sector, but is not one of the pre-coded choices, write the description in the space provided for ‘Other private medical’ and circle ‘36’. If you are unable to determine whether public or private, write the name of the place in the space provided on the questionnaire ‘Name of place’ and tell your supervisor. Your supervisor will learn from other people in the community whether the place is public or private and then circle the code corresponding to the response.

If the respondent names another place not listed, write the description of the place in the space provided for ‘Other’ and circle ‘96’. Places that are not health facilities, other than home, should also be coded as ‘Other’ and described.

**PN15. Check MN18: Was the child delivered in a health facility?**

Check MN18. If MN18 is '21'-'26' or '31'-'36', which means the respondent delivered her child in a health facility, continue with PN16. If MN18 is '11' or '12' or '96', which means that the respondent delivered at home or some other place outside a facility, go to PN17.

**PN16. AFTER YOU LEFT (name or type of facility in MN18), DID ANYONE CHECK ON YOUR HEALTH?**

This question is asked only of women who delivered in a health facility, and refers to a health check occurring after discharge from the facility. Circle '1' if 'Yes' or '2' if 'No' and follow the skip pattern. It is important for the respondent to understand that we are referring to a check on her health, not her baby's.

**PN17. Check MN17: Did a health professional, traditional birth attendant, or community health worker assist with the delivery?**

This filter will be administered for women who delivered outside a health facility. Check MN17. If any code between 'A'-'G' is circled in MN17, which means the respondent delivered with a health professional, traditional birth attendant, or community health worker in attendance, continue with PN18. If no codes from 'A' to 'G' are circled, skip to PN19.

**PN18. AFTER THE DELIVERY WAS OVER AND (person or persons in MN17) LEFT, DID ANYONE CHECK ON YOUR HEALTH?**

This question is addressed to women who delivered at home with a birth attendant, and the question specifically refers to any health checks she received after the birth attendant left her and the baby after delivery. Circle '1' if 'Yes' or '2' if 'No' and follow the skip pattern.

**PN19. AFTER THE BIRTH OF (name), DID ANYONE CHECK ON YOUR HEALTH?**

**I MEAN SOMEONE ASSESSING YOUR HEALTH, FOR EXAMPLE ASKING QUESTIONS ABOUT YOUR HEALTH OR EXAMINING YOU.**

This question will be asked of respondents who delivered outside a facility with no birth attendant. PN19 is composed of two parts – an introduction and a question. Note that the introduction provides a series of examples to illustrate what we mean by “check on health”; these are meant to be examples only so it is okay if the respondent's health check did not include any of these specific components. Make sure to read the introduction before asking the question so that the respondent understands the meaning of our question. Circle '1' if 'Yes' and continue to the next question. If 'No' circle code '2' and skip to the next module.

**PN20. DID SUCH A CHECK HAPPEN ONLY ONCE, OR MORE THAN ONCE?**

This question will be asked of all respondents who reported receiving some sort of health check, whether after discharge from the health facility or after the birth attendant left the home. Respondents who delivered with no birth attendant will also be asked this question if they indicate that they received a health check at any point after delivery. Circle '1' if 'Once' or '2' if 'More than once' and follow the skip pattern.

**PN21A. HOW LONG AFTER DELIVERY DID THAT CHECK HAPPEN?****PN21B. HOW LONG AFTER DELIVERY DID THE FIRST OF THESE CHECKS HAPPEN?**

Note that PN21A and PN21B are the same question, but worded differently depending on whether the respondent had just one health check or more than one. Circle a code for the unit of time the

respondent mentions (either hours, days or weeks) and then fill in a number in the boxes to the right of the code you circle. Follow the instructions for recording time; that is, less than one day should be recorded in hours and less than one week should be recorded in days. If the woman is uncertain, probe to get her best estimate.

**PN22. WHO CHECKED ON YOUR HEALTH AT THAT TIME?**

**SURVEY COORDINATORS:** CODING CATEGORIES SHOULD BE DEVELOPED LOCALLY AND REVISED BASED ON THE PRE-TEST. HOWEVER, THE BROAD CATEGORIES MUST BE MAINTAINED. AGAIN, WE NEED TO KNOW WHETHER THE PERSON WHO ASSISTED WITH THE DELIVERY WAS A HEALTH PROFESSIONAL OR ANOTHER PERSON. NORMALLY, THESE CATEGORIES SHOULD BE CONSISTENT WITH THE CATEGORIES IN PN13.

Probe for the type of person who performed the health check. If the woman is not sure of the status of the person, for example, if she doesn't know whether the provider was a midwife or a traditional birth attendant, probe further. Circle the codes corresponding to all persons were involved in that (first) health check. If you are unsure where to code a person mentioned, write it in the space provided 'Other' and circle 'X'.

**PN23. WHERE DID THIS CHECK TAKE PLACE?**

**SURVEY COORDINATORS:** CODING CATEGORIES SHOULD BE DEVELOPED LOCALLY AND REVISED BASED ON THE PRE-TEST. MAKE SURE TO MAINTAIN THE BROAD CATEGORIES, SO THAT YOU ARE ABLE TO DISTINGUISH BETWEEN PRIVATE AND PUBLIC HEALTH FACILITIES, OR OTHER PLACES. NORMALLY, THESE CATEGORIES SHOULD BE CONSISTENT WITH THE CATEGORIES IN PN14.

The intent of this question is to identify where the health check occurred. If the place is in the public sector, but is not one of the pre-coded choices, write the description in the space provided for 'Other public' and circle '26'. Similarly, if the place is in the private medical sector, but is not one of the pre-coded choices, write the description in the space provided for 'Other private medical' and circle '36'. If you are unable to determine whether public or private, write the name of the place in the space provided on the questionnaire 'Name of place' and tell your supervisor. Your supervisor will learn from other people in the community whether the place is public or private and then circle the code corresponding to the response.

If the respondent names another place not listed, write the description of the place in the space provided for 'Other' and circle '96'. Places that are not health facilities, other than home, should also be coded as 'Other' and described.

**ILLNESS SYMPTOMS MODULE**

**IS1. Check Household Listing, column HL9**

Check column HL9 in Household Listing Form of the household questionnaire. If the respondent is the mother or caretaker of any child under age 5, then continue with IS2. Otherwise, go to next module.

**IS2. SOMETIMES CHILDREN HAVE SEVERE ILLNESSES AND SHOULD BE TAKEN IMMEDIATELY TO A HEALTH FACILITY. WHAT TYPES OF SYMPTOMS WOULD CAUSE YOU TO TAKE YOUR CHILD TO A HEALTH FACILITY RIGHT AWAY?**

This question asks for symptoms that would cause the respondent to take a child to a health facility right away. Probe by saying ‘**ANY OTHER SYMPTOMS**’ and keep asking for more signs or symptoms until the mother/caretaker cannot recall any additional symptoms.

Circle all symptoms mentioned, but do not prompt with any suggestions. . If you are not sure whether a certain sign as reported by the respondent fits in one of the above categories, write it down in full and check with your supervisor later.

If the respondent mentions a symptom not listed here, write the description of the symptom in the space provided for ‘Other’ and circle ‘X’ (‘Y’, and ‘Z’, for additional symptoms not listed).

**CONTRACEPTION MODULE**

The module should be administered to all women aged 15-49 years (including women age 15 and age 49). These questions deal with private behaviour and attitudes. They are designed to collect the basic information needed to estimate contraceptive prevalence rates and types of methods used.

**SURVEY COORDINATORS:** EACH COUNTRY COORDINATOR WILL NEED TO MAKE DECISIONS ABOUT HOW TO INTRODUCE THESE QUESTIONS. A SUITABLE INTRODUCTION SHOULD BE PROVIDED TO FIELDWORKERS. INTERVIEWERS NEED TO BE ESPECIALLY SKILLED IN BRINGING UP THESE SENSITIVE TOPICS. AS NOTED EARLIER, INTERVIEWERS SHOULD ALWAYS BE FEMALE. MALE INTERVIEWERS SHOULD NOT BE EMPLOYED TO ASK WOMEN THESE QUESTIONS.

**SURVEY COORDINATORS:** SOME COUNTRIES MAY WANT TO ASK THESE QUESTIONS ON CONTRACEPTION ONLY TO WOMEN WHO HAVE EVER BEEN MARRIED. IN SUCH CASES, YOU MAY WANT TO INTRODUCE A FILTER QUESTION BEFORE CP1, WHERE THE INTERVIEWER MARKS WHETHER THE WOMAN HAS EVER BEEN MARRIED, AND SKIPS TO THE NEXT MODULE IF THE ANSWER IS ‘NO’.

Any other person that may be present during the interview should be asked to leave the interview area to ensure privacy. Even in cases where women are being interviewed alone, they will be reluctant to answer these questions, especially if they sense that you are part of a team that includes males and that her responses may be shared with the males in the team.

**CP1. I WOULD LIKE TO TALK WITH YOU ABOUT ANOTHER SUBJECT – FAMILY PLANNING. ARE YOU PREGNANT NOW?**

This question is important because later questions in this module will not need to be asked of pregnant women. A woman who is pregnant does not need to use contraception!

Circle the code corresponding to the response given. If she is pregnant, circle '1' and go to the next module. If the woman is unsure or does not know for certain if she is pregnant, circle '8' for 'Unsure or DK'.

**CP2. COUPLES USE VARIOUS WAYS OR METHODS TO DELAY OR AVOID A PREGNANCY. ARE YOU CURRENTLY DOING SOMETHING OR USING ANY METHOD TO DELAY OR AVOID GETTING PREGNANT?**

Circle the code corresponding to the response given. If the answer is 'No', go to the next module.

**CP3. WHAT ARE YOU DOING TO DELAY OR AVOID A PREGNANCY?**

Circle the code corresponding to the response given. Do not prompt the woman. If she mentions more than one method, circle the code for each method that is currently being used. If she mentions a method you do not know of, write her description in the space provided in 'Other' and circle 'X'.

**SURVEY COORDINATORS:** YOU MAY WANT TO INVITE AN EXPERT ON CONTRACEPTION TO THE TRAINING SESSION OF THE INTERVIEWERS AND HAVE EACH OF THE METHODS DESCRIBED/EXPLAINED.

Since methods are effective for different lengths of time, you may have difficulty determining if a particular respondent is currently using a method. Current users of the pill should be taking pills daily. Methods such as condom use, vaginal methods and withdrawal are used with each act of intercourse, so current users of these methods will have used them during the most recent acts of intercourse.

Other methods provide ongoing protection without daily or regular action by the woman. Contraceptive injections may be administered 2 to 6 months earlier and still provide protection. Implants provide protection for up to 5 years or until removed. An IUD protects against pregnancy until it is removed or expelled.

If needed, consider the last 1 month as 'current use'.

If the woman has been sterilized, you will circle 'A' for 'Female sterilization' as the current method. If the woman's current partner has been sterilized, you will circle 'B' for 'Male sterilization' as the current method. However, if she is no longer married to (or living with) a former partner who had a vasectomy, this should not be noted as the current method. Lactational amenorrhoea method (LAM) should be circled only if the woman explicitly states that she is breastfeeding for contraceptive purposes or that she believes that she is being protected from the risk of pregnancy because she is breastfeeding.

**UNMET NEED MODULE**

Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the next child. The concept of unmet need points to the gap between women's reproductive intentions and their contraceptive behaviour. Questions used in this module as well as a number of other modules are used to assess whether women have an unmet need for family planning.

**UN1. Check CPI. Currently pregnant?**

This is a filter that you will use to make sure that you ask questions UN2 to UN4 to women who are

pregnant at the time of the interview. Check her response to CP1: If the woman is currently pregnant, mark the corresponding box and continue with UN2. If she is currently not pregnant, is unsure or does not know, skip to UN5.

**UN2. NOW I WOULD LIKE TO TALK TO YOU ABOUT YOUR CURRENT PREGNANCY. WHEN YOU GOT PREGNANT, DID YOU WANT TO GET PREGNANT AT THAT TIME?**

Circle the code corresponding to the answer given. Skip to UN4 if 'Yes'. Otherwise, continue to the next question.

**UN3. DID YOU WANT TO HAVE A BABY LATER ON OR DID YOU NOT WANT ANY (MORE) CHILDREN?**

Circle the code corresponding to the answer given.

**UN4. NOW I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE FUTURE. AFTER THE CHILD YOU ARE NOW EXPECTING, WOULD YOU LIKE TO HAVE ANOTHER CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY MORE CHILDREN?**

Note that we want to make sure that pregnant women do not think that we are asking them if they want the child they are pregnant with now. Circle the code corresponding to the response given. If the woman wants to have another child, you should circle '1' and continue with UN7. If she wants no more children or does not want to have children at all, you should circle '2' and skip to UN13. If she is undecided or does not know, circle '8' and skip to UN13.

**UN5. Check CP3. Currently using "Female sterilization"?**

If the woman is currently using female sterilization, mark the corresponding box and skip to UN13. If she is currently not using female sterilization, continue with UN6.

**UN6. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE FUTURE. WOULD YOU LIKE TO HAVE (A/ANOTHER) CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY (MORE) CHILDREN?**

Circle the code corresponding to the response given. If the woman wants to have a/another child, you should circle '1'. If she wants no more children or does not want to have children at all, you should circle '2' and skip to UN9. If she says she cannot get pregnant, circle '3' and skip to UN11. If she is undecided or does not know, circle '8' and skip to UN9.

**UN7. HOW LONG WOULD YOU LIKE TO WAIT BEFORE THE BIRTH OF (A/ANOTHER) CHILD?**

Here, you will also need to choose the appropriate phrasing for the question, based on what you already know about the respondent. This question should be asked of all women (pregnant or not pregnant) who say that they want to have another child.

Note that the answer can be given in months or years. Circle '1' if the response is in months or '2' if in years, and record the answer in the appropriate spaces. If she says she does not want to wait and would like to have a baby right away, record 993 for 'Soon/Now'. If the woman says she cannot get pregnant, circle '994'. If the woman tells you she would like to wait until after she is married to have a child, record '995' for 'After marriage'. If she gives a different answer, circle '996' for 'Other'. If she says she does not know, circle '998'. For women who say that they cannot get pregnant, you should skip to UN11.

**UN8. Check CP1. Currently pregnant?**

Check CP1. If the woman is currently pregnant, mark the corresponding box and skip to UN13. If she

is currently not pregnant, is unsure or does not know, continue with UN9.

**UN9. Check CP2. Currently using a method?**

Check CP2. If the woman is currently using a method, mark the corresponding box and skip to UN13. If she is currently not using a method, continue with UN10.

**UN10. DO YOU THINK YOU ARE PHYSICALLY ABLE TO GET PREGNANT AT THIS TIME?**

A woman who believes that she is incapable of becoming pregnant cannot be considered to have ‘unmet need’ for contraception. This question aims to learn whether the woman thinks she can conceive a child. Circle the code corresponding to the response given.

Make sure that the woman does not relate her current physical ability to get pregnant with her current marital status. It is important to emphasize to the woman, if necessary, that we are interested in her current physical ability – she may be physically able to get pregnant, but may think that this is not possible because she currently does not have a partner. In such cases, the woman should obviously be coded as ‘Yes’.

**UN11. WHY DO YOU THINK YOU ARE NOT PHYSICALLY ABLE TO GET PREGNANT?**

If the woman does not believe that she is physically capable of becoming pregnant, we ask the reason(s) why. Circle the code corresponding to the answer. If more than one reason is given, circle all the codes for these responses.

**UN12. Check UN11. “Never menstruated” mentioned?**

Check UN11. If code ‘C’ is circled (Never menstruated), mark the corresponding box and go to the next module. If code ‘C’ is not circled, continue with UN13.

**UN13. WHEN DID YOUR LAST MENSTRUAL PERIOD START?**

The answers to this question will help to determine whether any of the respondents are actually menopausal or infecund because they have not had their periods in a long time. Record the respondent’s answer in the units that she uses. Note that the answer can be given in months or years. Circle ‘1’ if the response is in days, ‘2’ if in weeks, ‘3’ if in months, 4’ if in years and record the answer in the appropriate spaces.

In some cases, the respondent may give you the date that her last menstrual period began. If that happens, write the date on the questionnaire, calculate the length of time since that date, and record it in the appropriate units. Note that it is not necessary to obtain a date.

If she says she is in menopause or has had hysterectomy, record 994. A woman who is too old to menstruate or become pregnant is described as being in menopause. A hysterectomy is an operation to remove the uterus. If the woman tells you she had her last menstrual period before her last birth, record ‘995’. If she says she has never menstruated, circle ‘996’.

**FEMALE GENITAL MUTILATION/CUTTING MODULE**

**SURVEY COORDINATORS:** THIS MODULE SHOULD BE USED ONLY IN COUNTRIES IN WHICH FEMALE GENITAL MUTILATION/CUTTING IS PRACTISED.

Female genital mutilation/cutting (FGM/C), or female circumcision, has been practised for hundreds of years by some population groups living in Africa and along the southern edge of the Arabian Peninsula. It involves total or partial removal of the external female genitalia. The operation is performed on young girls, usually before they reach the age of puberty. It is frequently performed, particularly in rural areas, without anaesthesia by traditional midwives and/or circumcision practitioners.

The World Health Organization has identified four types of FGM/C:

- Clitoridectomy: the removal of all or part of the clitoris
- Excision: the removal of all or part of both the clitoris and the labia minora
- Infibulation: the removal of all or part of the clitoris, labia minora and labia majora, followed by the stitching together of the edges of the wound so as to form a hood over the urethra and vagina leaving only a small posterior opening to allow the passage of urine and menstrual fluid
- Other manipulations of the labia: usually cutting without removal of any flesh.

After determining if the respondent has ever heard of FGM/C in questions FG1 and FG2, the module contains questions to determine if the respondent was circumcised and, if so, the type of circumcision and the type of practitioner who performed the operation (FG3 to FG8). Questions related to the type of circumcision are only intended to differentiate the most radical type of circumcision, 'Infibulation', and the least radical, 'Other manipulations of the labia', from other forms of mutilation ('Clitoridectomy' and 'Excision'). Results from previous surveys have indicated that respondents could not provide enough detailed information to make a more precise clarification.

**FG1. HAVE YOU EVER HEARD OF FEMALE CIRCUMCISION?**

Circle the code corresponding to the answer given. Skip to FG3 if 'Yes'. Otherwise, continue to the next question.

**FG2. IN SOME COUNTRIES, THERE IS A PRACTICE IN WHICH A GIRL MAY HAVE PART OF HER GENITALS CUT. HAVE YOU EVER HEARD ABOUT THIS PRACTICE?**

Circle the code corresponding to the answer given. If 'No', go to the next module.

**FG3. HAVE YOU YOURSELF EVER BEEN CIRCUMCISED?**

Circle the code corresponding to the answer given. If 'No', skip to FG9.

**FG4. NOW I WOULD LIKE TO ASK YOU WHAT WAS DONE TO YOU AT THIS TIME. WAS ANY FLESH REMOVED FROM THE GENITAL AREA?**

Circle the code corresponding to the answer given. Skip to FG6 if 'Yes' ('1').

**FG5. WAS THE GENITAL AREA JUST NICKED WITHOUT REMOVING ANY FLESH?**

Circle the code corresponding to the answer given.

**FG6. WAS THE GENITAL AREA SEWN CLOSED?**

Circle the code corresponding to the answer given. If necessary, probe: **WAS IT SEALED?**

**FG7. HOW OLD WERE YOU WHEN YOU WERE CIRCUMCISED?**

Write the age of respondent at circumcision. If the respondent does not know the exact age, probe to get an estimate. If she still says she does not remember or unsure, circle '98'.

**FG8. WHO PERFORMED THE CIRCUMCISION?**

**SURVEY COORDINATORS:** YOU SHOULD ADAPT THE CODING CATEGORIES LOCALLY AND REVISE THEM BASED ON INFORMATION COLLECTED BEFORE THE SURVEY AND ON THE PRE-TEST. HOWEVER THE BROAD CATEGORIES MUST BE MAINTAINED. WE ARE ONLY INTERESTED IN THE DETAILED CODING CATEGORIES FOR 'HEALTH PROFESSIONALS' IN COUNTRIES WHERE HEALTH PROFESSIONALS PERFORM A LARGE NUMBER OF CIRCUMCISIONS.

First ask if she knows who circumcised her. Probe to find out the type of person who performed the operation. Circle the code corresponding to the answer given. If she knows it was a health professional but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other health professional' and circle '16'. If she knows it was a traditional person but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other traditional' and circle '26'. If she does not know who circumcised her, circle '98'.

**FG9. Check CM5 for Number of daughters at home and CM7 for Number of daughters elsewhere, and sum the answers here**

Check CM5 and CM7 of the Child Mortality module. Sum the answers to both questions and write the total.

**FG10. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE (total number in FG9) LIVING DAUGHTERS. IS THIS CORRECT?**

If the respondent says 'Yes' and if she has one or more living daughters continue with FG11. If the respondent says 'Yes' but she does not have any living daughters skip to FG22.

If the respondent says 'No', check responses to CM1 – CM10 and make corrections as necessary, until she answers 'Yes' to FG10.

**FG11. Ask the respondent to tell you the name(s) of her daughter(s), beginning with the youngest daughter (if more than one daughter). Write down the name of each daughter in FG12. Then, ask questions FG13 to FG20 for each daughter at a time.**

*The total number of daughters in FG12 should be equal to the number in FG9*

*If more than 4 daughters, use additional questionnaires*

At this point, you will start the second set of questions, which are related to the respondent's daughter(s) (FG12-FG21). These allow for the tracking of intergenerational changes in the practice of FGM/C. If (at least one of) the respondent's daughter(s) is circumcised, questions that focus on the most recently circumcised daughter are asked about the type of circumcision, the age at circumcision, and the type of practitioner who performed the operation.

**FG12. Name of daughter**

Record the daughter's name in the space provided.

**FG13. HOW OLD IS (name)?**

Record the age of her daughter in the space provided.

**FG14. Is (*name*) younger than 15 years of age?**

Check FG13 and circle '1' for 'Yes' if her daughter is less than 15 years of age. If 'No', circle '2' and skip to FG13 for next daughter(s). If there are no more daughters, skip to FG22.

**FG15. IS (*name*) CIRCUMCISED?**

Record the corresponding answer. If 'No', skip to FG13 for next daughter. If there are no more daughters, skip to FG22.

**FG16. HOW OLD WAS (*name*) WHEN THIS OCCURRED?**

Enter the daughter's age at the time she was circumcised in the space provided. If the respondent does not know how old her daughter was at circumcision, probe to get an estimate. If she is still unable to provide her daughter's age at circumcision, circle '98'.

**FG17. NOW I WOULD LIKE TO ASK YOU WHAT WAS DONE TO (*name*) AT THAT TIME. WAS ANY FLESH REMOVED FROM THE GENITAL AREA?**

Circle the code corresponding to the answer given. If 'Yes', skip to FG19. Otherwise, continue to the next question.

**FG18. WAS HER GENITAL AREA JUST NICKED WITHOUT REMOVING ANY FLESH?**

Circle the code corresponding to the answer given.

**FG19. WAS HER GENITAL AREA SEWN CLOSED?**

Circle the code corresponding to the answer given. If necessary, probe: **WAS IT SEALED?**

**FG20. WHO PERFORMED THE CIRCUMCISION?**

**SURVEY COORDINATORS:** YOU SHOULD ADAPT THE CODING CATEGORIES LOCALLY AND REVISE THEM BASED ON INFORMATION COLLECTED BEFORE THE SURVEY AND ON THE PRE-TEST. HOWEVER, THE BROAD CATEGORIES MUST BE MAINTAINED. WE ARE ONLY INTERESTED IN THE DETAILED CODING CATEGORIES FOR 'HEALTH PROFESSIONAL' IN COUNTRIES WHERE HEALTH PROFESSIONALS PERFORM A LARGE NUMBER OF CIRCUMCISIONS.

First ask if she knows who circumcised her daughter. Probe to find out the type of person who performed the operation. Circle the code corresponding to the answer given. If she knows it was a health professional but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other health professional' and circle '16'. If she knows it was a traditional person but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other traditional' and circle '26'. If she does not know who circumcised her daughter, circle '98'.

**FG21. Go back to FG13 for next daughter. If no more daughters, go to FG22.**

**FG22. DO YOU THINK THIS PRACTICE SHOULD BE CONTINUED OR SHOULD IT BE DISCONTINUED?**

The last question in the module aims to elicit the respondent's opinion of FGM/C. The question is asked of all women who have ever heard of FGM/C (FG1=1 or FG2=1). Circle the code corresponding to the answer given.

### **ATTITUDES TOWARD DOMESTIC VIOLENCE MODULE**

**SURVEY COORDINATORS:** THIS MODULE IS ONLY COMPOSED OF ONE QUESTION.

In this module, we have only one question, which asks for the woman's opinion on domestic violence. Note that we are not asking whether the woman has been subjected to domestic violence. Research has shown, however, that there is overall agreement in the proportion of women who think that a husband may be justified in hitting or beating his wife in certain situations, and the actual prevalence of domestic violence. The correlation may be on a societal level, and not on an individual level.

**SURVEY COORDINATORS:** KEEP THE SITUATIONS AS THEY ARE DESCRIBED IN THE MODULE (A TO E) SINCE THESE WILL BE USED FOR CROSS-COUNTRY COMPARISONS. YOU MAY WANT TO ADD OTHER SITUATIONS THAT YOU THINK MAY ALSO BE CULTURALLY RELEVANT.

**DV1. SOMETIMES A HUSBAND IS ANNOYED OR ANGERED BY THINGS THAT HIS WIFE DOES. IN YOUR OPINION, IS A HUSBAND JUSTIFIED IN HITTING OR BEATING HIS WIFE IN THE FOLLOWING SITUATIONS:**

- [A] IF SHE GOES OUT WITHOUT TELLING HIM?**
- [B] IF SHE NEGLECTS THE CHILDREN?**
- [C] IF SHE ARGUES WITH HIM?**
- [D] IF SHE REFUSES TO HAVE SEX WITH HIM?**
- [E] IF SHE BURNS THE FOOD?**

Read each item aloud. For each situation, circle the code corresponding to the answer given – '1' if 'Yes' (she thinks the husband is justified in hitting or beating his wife in that situation), '2' if 'No', and '8' if the respondent does not know or does not have an opinion.

### **MARRIAGE/UNION MODULE**

This module is to be administered to all women aged 15-49 years (including women age 15 and age 49).

In the questionnaire and this manual, 'marriage' always refers to both formal and informal unions, such as living together. An informal union is one in which the man and woman live together for some time, intending to have a lasting relationship, but do not have a formal civil or religious ceremony.

For example, if a woman went to live with her boyfriend and his family and stayed there for several years, they would be considered 'living together', whether or not they have any children. On the other hand, if a woman has a boyfriend but has never lived with him, she would not be considered in a union. Casual sexual encounters are not included here.

**SURVEY COORDINATORS:** ADAPT THE TERMS AND CONCEPTS USED IN THIS MODULE TO YOUR COUNTRY. IN SOME COUNTRIES, ‘VISITING UNIONS’ MAY BE PREVALENT, FOR INSTANCE, WHERE THE MAN AND WOMAN LIVE IN DIFFERENT HOUSEHOLDS BUT STILL CONSIDER THEIR RELATIONSHIP A ‘UNION’. IN SOME OTHER CULTURES, ONLY ‘CIVIL MARRIAGES’ MAY BE CONSIDERED UNIONS, AND THOSE IN RELIGIOUS UNIONS MAY NOT CONSIDER THEMSELVES AS ‘MARRIED’ OR EVEN ‘IN UNION’. BE VERY CAREFUL IN THE ADAPTATION OF THE TERMS AND CONCEPTS IN THE MODULE. YOU MAY WANT TO ASK AN ADDITIONAL QUESTION TO INQUIRE ABOUT THE TYPE OF MARRIAGE/UNION. CONTACT THE MICS4 REGIONAL COORDINATOR IF YOU INTEND TO DO SO.

**MA1. ARE YOU CURRENTLY MARRIED OR LIVING TOGETHER WITH A MAN AS IF MARRIED?**

The options here are currently married, living with a man, or not in union (the woman is neither married nor living with a man). Circle the code corresponding to the respondent’s status at the time of the interview. If the woman is currently neither married or in a union, skip to MA5.

**MA2. HOW OLD IS YOUR HUSBAND/PARTNER?**

If she knows the age of her current partner on his last birthday, enter his age in the space provided. If she does not know his age, circle ‘98’.

**SURVEY COORDINATORS:** IN COUNTRIES WHERE POLYGYNY IS NOT PRACTISED, THE FOLLOWING TWO QUESTIONS (MA3 AND MA4) MUST BE REMOVED AND ALL ANSWERS TO MA2 SHOULD SKIP TO MA7.

CHANGE THE FOLLOWING IN MA2:

ADD A SKIP TO MA7 IF HUSBAND/PARTNER’S AGE IS GIVEN;

ADD A SKIP TO MA7 IF HUSBAND/PARTNER’S AGE IS NOT KNOWN (‘DK’).

AFTER REMOVING MA3 AND MA4, DO NOT RENUMBER THE REMAINING QUESTIONS AS THIS MIGHT EASILY LEAD TO INCORRECT SKIPS OR PROBLEMS IN THE QUESTIONNAIRE.

**MA3. BESIDES YOURSELF, DOES YOUR HUSBAND/PARTNER HAVE ANY OTHER WIVES OR PARTNERS OR DOES HE LIVE WITH OTHER WOMEN AS IF MARRIED?**

In this question, we are interested in the wives and/or live-in partners that the respondent’s husband/partner has. Circle the code corresponding to the answer given. If ‘No’, skip to MA7.

**MA4. HOW MANY OTHER WIVES OR PARTNERS DOES HE HAVE?**

Similar to the previous question, we are interested here in the number of wives and/or live-in partners the respondent’s husband has. Enter the number of other wives in the space provided. Use leading zeros if necessary. For all answers, skip to MA7.

**MA5. HAVE YOU EVER BEEN MARRIED OR LIVED TOGETHER WITH A MAN AS IF MARRIED?**

For women who are not currently married or living with a man, ask whether they have ever been married or lived with a man. Remember that ‘married’ refers to both formal and informal unions.

Circle the code corresponding to the response given. Notice that there are two different response categories for a ‘Yes’ response: ‘Yes, formerly married’ and ‘Yes, formerly lived with a man’. Be sure to make the distinction between the two categories. If the respondent just answers ‘Yes’, probe by asking, “**WERE YOU FORMERLY MARRIED OR DID YOU LIVE WITH A MAN?**” If she was formerly married and also reports living with a man, circle the code for ‘Yes, formerly married’.

If she was never married and never lived with a man circle '3' for 'No' and go to the next module. Otherwise, continue on to MA6.

**MA6. WHAT IS YOUR MARITAL STATUS NOW: ARE YOU WIDOWED, DIVORCED OR SEPARATED?**

**SURVEY COORDINATORS:** CUSTOMIZE THIS QUESTION TO THE SITUATION IN YOUR COUNTRY AND/OR DESCRIBE TO THE INTERVIEWERS WHAT EACH OF THE CATEGORIES REFERS TO. FOR CASES OF INFORMAL UNIONS, 'WIDOWED' MEANS THAT THE LAST PARTNER THAT THE WOMAN HAD HAS DIED, AND 'DIVORCED' MEANS THAT SHE HAS SEPARATED FROM HER LAST PARTNER. IN SOME CULTURES, THE WORD 'MARITAL' IS NOT USED FOR INFORMAL UNIONS; DELETE THE WORD 'MARITAL' FROM THE QUESTION IF NECESSARY AND ASK "WHAT IS YOUR STATUS NOW: ARE YOU WIDOWED, DIVORCED OR SEPARATED?"

Circle the code corresponding to the response given. For a woman who is not currently married and not currently living with someone but who was formerly in a union, record her current marital status at the time of the interview. Since she was in a union at one time, but is not on the day you are interviewing her, she will be either widowed, divorced or separated.

You should use 'widowed' (a) for women who were married and their husband died, and (b) for women who were in an informal union and their partner died. 'Divorced' should be used for women who were formally married and whose marriage formally ended. 'Separated' should be used (a) for women who were married, but are no longer continuing the marriage with their husband, and (b) for women who were in an informal union and are no longer continuing the union with their partner.

**MA7. HAVE YOU BEEN MARRIED OR LIVED WITH A MAN ONLY ONCE OR MORE THAN ONCE?**

As with MA1, we are interested in formal marriages as well as informal arrangements. If a woman was married or lived with a man and then was widowed, divorced, or separated from her husband or partner and is now either married to or living with someone else, record 'More than once'. If a woman is not currently married or in an informal union but was previously married or living with someone else two or more times, record 'More than once' by circling '2'. If she has married or lived with someone else only once, circle '1.'

Note that the question refers to periods of marriage or informal unions, and not to numbers of husbands or partners. If a woman was married to a man and divorced him, and then married the same person again, she should be considered as having married 'More than once'. The same applies to informal unions with the same person.

**MA8. IN WHAT MONTH AND YEAR DID YOU FIRST MARRY OR START LIVING WITH A MAN AS IF MARRIED?**

If the respondent knows the date that she first married or started living with a man as if married, write it in the appropriate spaces for 'Month' and 'Year'. You will need to convert the month into numbers, as instructed earlier. For example, January is '01,' February is '02,' March is '03,' etc.

If she does not recall the date that she first married or started living with a man as if married, ask whether she has any documentation that might give the date. If she does not know or have documentation of the month, circle '98' for 'DK month' and ask her the year that she first married or

started living with a man as if married. Enter the year in the space provided and go to next module. If she does not know and does not have documentation of the year that she first married or started living with a man as if married, circle '9998' for 'DK year'.

**MA9. HOW OLD WERE YOU WHEN YOU STARTED LIVING WITH YOUR FIRST HUSBAND/PARTNER?**

As with other age questions, if she does not know, probe. For instance, ask how old she was when her first child was born and then ask how long before or after giving birth she began living with her first husband or partner. Do not leave this question blank.

**SEXUAL BEHAVIOUR MODULE**

**SURVEY COORDINATORS:** THIS MODULE SHOULD BE INCLUDED IN COUNTRIES WHERE HIV/AIDS IS A POTENTIAL CONCERN. IT IS INTENDED TO MEASURE BEHAVIOURS AMONG WOMEN THAT PUTS THEM AT INCREASED RISK OF HIV INFECTION.

THE PLACEMENT OF THIS MODULE IS IMPORTANT. IT SHOULD BE ASKED RIGHT AFTER MARRIAGE/UNION MODULE TO ENSURE THAT RAPPORT IS BUILT, BUT BEFORE HIV/AIDS MODULE TO AVOID BIASING RESPONSES.

MOST OF THE INDICATORS DERIVED FROM THIS MODULE ARE DEPENDENT ON EACH OTHER; CARE SHOULD BE TAKEN NOT TO DELETE QUESTIONS THAT CONTRIBUTE TO THE CALCULATION OF RELATED INDICATORS

The purpose of this module is to obtain information to help programme managers and policy makers plan more effective family planning/reproductive health programmes. **Before continuing, ensure that no one else, besides you and the respondent, is present for the interview and the respondent's answers will remain strictly confidential. If the respondent's privacy cannot be ensured, STOP HERE and do not ask the questions in this module until you have privacy again.**

These questions may be embarrassing for some respondents; therefore, ask them in a matter-of-fact voice and do not make the respondent feel embarrassed by your own behaviour. A common reaction for people who are embarrassed is to giggle or laugh. If you laugh in return or act as if you are embarrassed too, it will make the respondent think that the questions are not serious. Make sure you maintain a serious attitude.

**SB1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT SEXUAL ACTIVITY IN ORDER TO GAIN A BETTER UNDERSTANDING OF SOME IMPORTANT FAMILY LIFE ISSUES. THE INFORMATION YOU SUPPLY WILL REMAIN STRICTLY CONFIDENTIAL. HOW OLD WERE YOU WHEN YOU HAD SEXUAL INTERCOURSE FOR THE VERY FIRST TIME?**

It is very important that you read the first sentence, and to emphasize to the respondent that her responses will remain strictly confidential. If necessary, explain to her once again that the information she shares with you will only be used for statistical purposes; that her name will never be revealed; and her responses will not be shared with others in the community or elsewhere.

The age we are asking about is the age of the respondent the very first time she had sexual intercourse. It does not matter whether the woman continued to have a relationship with this person. We are not asking about the first time with her current partner, but rather, the first experience of sexual intercourse in her entire life.

If the response is 'Never had intercourse', circle '00' and skip to the next module. Otherwise, enter the age in years on the line provided. If she was less than 10 years old, use a zero to fill in the first space.

If the respondent tells you that her first time was when she started living with her first husband, record her response by circling '95'. You will have collected this information in the Marriage/Union module. If the respondent says that her first time was with her first husband, but it was before they began living together, probe for the respondent's age at the time.

If the respondent says she does not know how old she was when she first had intercourse, probe by relating it to how old she was when she first married or had her first child. However, when doing this probing, be certain not to assume that the first time she had sex was at the time of her first marriage. If she has never married and/or never had children, you can probe by relating the timing of the first intercourse to whether she was going to school at the time, or to places that she might have lived. The respondent should feel comfortable in taking her time to think about her response to remember correctly.

**SB2. THE FIRST TIME YOU HAD SEXUAL INTERCOURSE, WAS A CONDOM USED?**

If used correctly, condoms can reduce the risk of transmission of AIDS and other sexually transmitted infections. We do not mention this fact to the respondent, because we do not want to influence her answer here. In this question we are referring to the first occasion the respondent had sexual intercourse.

Circle the code for the response given.

**SB3. WHEN WAS THE LAST TIME YOU HAD SEXUAL INTERCOURSE?**

By 'the last time you had sexual intercourse' we are referring to the respondent's most recent act of sexual intercourse.

In most cases you will record the respondent's answer by using the same units of measure she used in her response. For example, if she says '3 weeks ago', circle '2' and write '03' in the boxes next to 'Weeks ago'. If she says "4 days ago," circle '1' and write '04' next to 'Days ago'. If the respondent says "last night," circle '1' and write '00' for 'Days ago'. If the respondent answers with a month, for example, if she says "it was in December," count the number of months and record months. It may be helpful to write the name of the month in the questionnaire. All responses within less than 12 months will be recorded in months, weeks or days.

If the response is 12 months or more, circle '4' and record the answer in years. The 'Years ago' row should be used only if the last intercourse was more than 1 year ago. There should never be a response recorded '00' 'Years Ago'. If the response is 12 months or more, go to the SB13.

While this question is a simple one, respondents who have not had sexual intercourse recently are likely to round off their answers, and it will be up to you to learn from respondents whether they last had sex more or less than a year ago. For example, a woman with no regular sexual relationships may engage in sexual intercourse on an irregular basis. Perhaps the last time she had sexual intercourse was during a trip she took 10 months ago; she will be more likely to respond "about a year ago,"

rather than count how many months ago it was. Therefore, you will need to probe all responses of ‘a year ago’ with: “**DO YOU REMEMBER WHICH MONTH IT WAS?**” In this way, we will be able to determine whether the respondent actually had intercourse within the last year or more than a year ago. Respondents who last had sexual intercourse, 10, 11, 12, 13, 14 or 15 months ago may all give responses of ‘a year ago’; it will be up to you to clarify when it actually was. Asking the respondent “**WAS IT MORE OR LESS THAN A YEAR AGO?**” is not a very good probe for this question; it would be best to ask, “**DO YOU REMEMBER WHAT MONTH IT WAS?**”

If a woman has not yet resumed intercourse since she had her last child, check CM12 for the month and year of birth of her last child, and ask how long before the birth of that child she had sex the last time.

**SB4. THE LAST TIME YOU HAD SEXUAL INTERCOURSE WAS A CONDOM USED?**

In this question, this time, we are referring only to the last occasion the respondent had sexual intercourse.

Circle the code for the response given.

**SB5. WHAT WAS YOUR RELATIONSHIP TO THIS PERSON WITH WHOM YOU LAST HAD SEXUAL INTERCOURSE?**

In this question, we want to know the relationship of the respondent to the person with whom she last had sex. If the person is ‘boyfriend’, ask: “**WERE YOU LIVING TOGETHER AS IF MARRIED?**” If ‘Yes’, circle ‘2’ for ‘Cohabiting partner’. If ‘No’, circle ‘3’ for ‘Boyfriend’ and skip to SB7.

Note that we are interested in the relationship of the woman with the person mentioned at the time they last engaged in sexual intercourse. For example, if a woman’s last partner was a boyfriend she was living with at the time, you would record ‘Cohabiting partner’ even though they are no longer living together. They were living together at the time of the sexual encounter. Record the status of the relationship that existed at the time the two people last had sexual intercourse. It is most important to determine whether or not the sexual partner was someone the respondent was living with at the time they last had sexual intercourse.

**SB6. Check MA1:**

Check MA1 of the Marriage/Union module. If the respondent is currently married or living with a man, check the corresponding box and skip to SB8. If the woman is not married or in union, check the corresponding box and continue to the next question.

**SB7. HOW OLD IS THIS PERSON?**

Sometimes young women have sexual partners who are significantly older than they are; this can put them at higher risk of HIV infection. In this question we ask young women to tell us the age of their sexual partners.

Record the age in the space provided. If she does not know, ask her to estimate the age of this person. If the respondent is unable to estimate the partner’s age, probe by asking “**ABOUT HOW OLD IS THIS PERSON?**”. If she still says she does not know, circle ‘98’ and continue to the next question.

**SB8. HAVE YOU HAD SEXUAL INTERCOURSE WITH ANY OTHER PERSON IN THE LAST 12 MONTHS?**

We are interested in finding out whether the respondent had sexual intercourse with anyone else within the past 12 months. We want the respondent to take their time in answering because we are asking about a fairly long period of time – the entire year preceding the date of interview. Continue to the next question if ‘Yes’. If ‘No’, skip to SB15.

**SB9. THE LAST TIME YOU HAD SEXUAL INTERCOURSE WITH THIS OTHER PERSON, WAS A CONDOM USED?**

This question asks about condom use with ‘this other person’. This is the person she had intercourse with during the last 12 months, but not the person she had her last intercourse with.

Circle the code for the response given.

**SB10. WHAT WAS YOUR RELATIONSHIP TO THIS PERSON?**

This question asks about the relationship she had with this other person. It should refer to the relationship she had with the person at the time of intercourse.

The questions should be asked, probed and recorded the same way as SB5. If the person is ‘boyfriend’, ask: **“WERE YOU LIVING TOGETHER AS IF MARRIED?”** If ‘Yes’, circle ‘2’ for ‘Cohabiting partner’. If ‘No’, circle ‘3’ for ‘Boyfriend’ and skip to SB12.

**SB11. Check MA1 and MA7:**

Check MA1 and MA7 of the Marriage/Union module. If the respondent is currently married or living with a man and married only once, check the corresponding box and skip to SB13. For all other cases, check the corresponding box and continue to the next question.

**SB12. HOW OLD IS THIS PERSON?**

Again, we are looking for the age of the person she had sexual intercourse with at the time of the sexual encounter.

Record the age in the space provided. If she does not know, ask her to estimate the age of this person. If the respondent is unable to estimate the sexual partner’s age, probe by asking **“ABOUT HOW OLD IS THIS PERSON?”**. If she still says she does not know, circle ‘98’ and continue to the next question.

**SB13. OTHER THAN THESE TWO PERSONS, HAVE YOU HAD SEXUAL INTERCOURSE WITH ANY OTHER PERSON IN THE LAST 12 MONTHS?**

Circle the code corresponding to response given. Continue to the next question if the response is ‘Yes’. If ‘No’, skip to SB15.

**SB14. IN TOTAL, WITH HOW MANY DIFFERENT PEOPLE HAVE YOU HAD SEX IN THE LAST 12 MONTHS?**

This is the total number of different partners the respondent has had sexual intercourse with in the last 12 months, including the ones already mentioned.

Enter the total in the space provided. If her response is less than 10, use a leading zero. Since this question is asked only if the respondent has had sexual intercourse with at least three partners in the last 12 months, the answer should never be '00', '01' or '02'.

**SB15. IN TOTAL, WITH HOW MANY DIFFERENT PEOPLE HAVE YOU HAD SEXUAL INTERCOURSE IN YOUR LIFETIME?**

This is the total number of different partners the respondent has had sexual intercourse in her lifetime. Enter the total in the space provided. If her response is less than 10, use a leading zero. If a non-numeric answer is given, probe to get an estimate. If number of partners is 95 or more, write '95'.

**HIV/AIDS MODULE**

The purpose of this module is to obtain information to help programme managers and policy makers plan more effective programmes to prevent HIV infection. The questions assess knowledge, attitudes and behaviour related to AIDS transmission, prevention and testing for the virus that causes AIDS.

**SURVEY COORDINATORS:** THROUGHOUT THIS MODULE THE TERM "AIDS VIRUS" IS USED ALTHOUGH, TECHNICALLY SPEAKING, AIDS IS THE DISEASE CAUSED BY THE HUMAN IMMUNODEFICIENCY VIRUS (HIV). HOWEVER, AMONG PUBLIC, THE TERM AIDS IS KNOWN MORE WIDELY COMPARED TO HIV AND THE DISTINCTION BETWEEN AIDS AND HIV MAY NOT BE VERY CLEAR. IN ORDER TO AVOID "DON'T KNOW" RESPONSES TO THE QUESTION, THIS MODULE USES THE TERM AIDS VIRUS. DURING THE TRAINING, THIS SHOULD BE EMPHASIZED AND INTERVIEWERS SHOULD KNOW THAT THE OBJECTIVE IS TO REFER TO THE VIRUS, NOT THE ILLNESS.

**SURVEY COORDINATORS:** MOST OF THE INDICATORS DERIVED FROM THIS MODULE ARE DEPENDENT ON EACH OTHER; CARE SHOULD BE TAKEN NOT TO DELETE QUESTIONS THAT CONTRIBUTE TO THE CALCULATION OF RELATED INDICATORS.

First, questions are asked to estimate the respondent's basic knowledge about HIV transmission and AIDS.

**HA1. NOW I WOULD LIKE TO TALK WITH YOU ABOUT SOMETHING ELSE. HAVE YOU EVER HEARD OF AN ILLNESS CALLED AIDS?**

This question serves as an introduction and allows us to verify whether a respondent has heard of AIDS. If there is a local term for AIDS, use the local term in addition to 'AIDS'.

If a respondent has never heard of the AIDS, skip to next module.

The following questions HA2-HA8 ask the respondent about specific ways to avoid HIV transmission. They focus on programmatically important ways to avoid HIV – by limiting the number of partners and by using condoms. They also probe into misconceptions concerning HIV transmission, through mosquito bites or sharing food, for example.

**SURVEY COORDINATORS:** QUESTIONS HA5 AND HA6 ASK ABOUT LOCAL MISCONCEPTIONS AND MAY BE REPLACED BY THE MOST COMMON MISCONCEPTIONS IN YOUR COUNTRY. ANOTHER EXAMPLE OF MISCONCEPTION: “CAN A PERSON GET AIDS BY HUGGING OR SHAKING HANDS WITH A PERSON WHO IS INFECTED?”

For questions HA2-HA7 circle the code for the response given. If the respondent cannot provide a ‘Yes’ or ‘No’ answer, circle ‘8’ for ‘DK’. Do not prompt the respondent or indicate the ‘correct’ answer in any way.

**HA2. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE AIDS VIRUS BY HAVING JUST ONE UNINFECTED SEX PARTNER WHO HAS NO OTHER SEX PARTNERS?**

**HA3. CAN PEOPLE GET THE AIDS VIRUS BECAUSE OF WITCHCRAFT OR OTHER SUPERNATURAL MEANS?**

**SURVEY COORDINATORS:** ADAPT THE TERMS ‘WITCHCRAFT’ AND ‘SUPERNATURAL MEANS’ IN THIS QUESTION TO THOSE USED LOCALLY.

**HA4. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE AIDS VIRUS BY USING A CONDOM EVERY TIME THEY HAVE SEX?**

**HA5. CAN PEOPLE GET THE AIDS VIRUS FROM MOSQUITO BITES?**

**HA6. CAN PEOPLE GET THE AIDS VIRUS BY SHARING FOOD WITH A PERSON WHO HAS AIDS?**

**HA7. IS IT POSSIBLE FOR A HEALTHY-LOOKING PERSON TO HAVE THE AIDS VIRUS?**

**HA8. CAN THE VIRUS THAT CAUSES AIDS BE TRANSMITTED FROM A MOTHER TO HER BABY:**

An understanding of more in-depth AIDS-related knowledge is obtained with this question, which aims to determine whether the woman knows that a mother who has AIDS can pass on the disease to her baby.

Ask each item one at a time and circle the code for the response given. The items ask whether the respondent thinks that a mother with AIDS can transfer the disease to her baby ‘**DURING PREGNANCY**’, ‘**DURING DELIVERY**’ or ‘**BY BREASTFEEDING**’ him/her. Circle ‘1’ for ‘Yes’ and ‘2’ for ‘No’ for each of the items. If the woman does not know the answer or is unsure, circle ‘8’.

The following four questions are meant to ascertain the respondent’s personal opinion and accepting attitude towards people with HIV/AIDS. We present a situation to the respondent, asking her to imagine a particular scenario. Then we ask her to tell us how she would react to the situation.

Circle the code for the response given. Once again, do not prompt the respondent or indicate the ‘correct’ answer in any way. If a respondent says she doesn’t know, is unsure, or that it depends, circle ‘8’ for ‘DK/not sure/depends’.

**HA9. IN YOUR OPINION, IF A FEMALE TEACHER HAS THE AIDS VIRUS BUT IS NOT SICK, SHOULD SHE BE ALLOWED TO CONTINUE TEACHING IN SCHOOL?**

If a school learns that a female teacher has the AIDS virus, but she is not sick, how should the school handle this information? Should the female teacher be allowed to continue teaching at the school, or should she be removed from her teaching position? We are not asking about whether or not a female teacher has actually been asked to leave a teaching position, but rather, what is the respondent’s

opinion about how such a case should be handled; should the female teacher be allowed to continue teaching?

**HA10. WOULD YOU BUY FRESH VEGETABLES FROM A SHOPKEEPER OR VENDOR IF YOU KNEW THAT THIS PERSON HAD THE AIDS VIRUS?**

**HA11. IF A MEMBER OF YOUR FAMILY GOT INFECTED WITH THE AIDS VIRUS, WOULD YOU WANT IT TO REMAIN A SECRET?**

**HA12. IF A MEMBER OF YOUR FAMILY BECAME SICK WITH AIDS, WOULD YOU BE WILLING TO CARE FOR HER OR HIM IN YOUR HOUSEHOLD?**

The remaining questions in this module are aimed to obtain information about the level of ‘unmet need’ for HIV-testing and will be asked to women with a live birth in last 2 years and received antenatal care. They first ask about AIDS counselling and experience of HIV testing. Voluntary testing and counselling are now encouraged, in the belief that if a person knows his or her status, he or she is more likely to adopt behaviours to prevent contracting the virus or (if positive) transmitting it. Many of those who get tested do not return to learn the results of the test, but the proportion of those who return should rise as the quality of pre-test counselling improves. It is important to obtain an estimate of the number of those tested who return to learn the results, in order to monitor this proxy indicator of the quality of available counselling and the level of demand for such services.

**HA13. Check CM13: Any live birth in last 2 years?**

Check CM13 in the Child Mortality module to see if the woman has any live births in last 2 years. If the respondent has no live births in last 2 years check the box marked ‘No’ and skip to HA24. If she has a live birth in last 2 years check the corresponding box and continue with HA14.

**HA14. Check MN1: Received antenatal care?**

Check the respondent’s answer to MN1 in the Maternal and Newborn Health module regarding whether or not she received antenatal care. If the respondent has received antenatal care check the box marked ‘Yes’ and continue with HA15. If she has not received antenatal care in last 2 years check the corresponding box and skip to HA24.

**HA15. DURING ANY OF THE ANTENATAL VISITS FOR YOUR PREGNANCY WITH (*name*), WERE YOU GIVEN ANY INFORMATION ABOUT**

**[A] BABIES GETTING THE AIDS VIRUS FROM THEIR MOTHER?**

**[B] THINGS THAT YOU CAN DO TO PREVENT GETTING THE AIDS VIRUS?**

**[C] GETTING TESTED FOR THE AIDS VIRUS?**

**WERE YOU:**

**[D] OFFERED A TEST FOR THE AIDS VIRUS?**

We want to know if someone spoke with the respondent about AIDS or the AIDS virus during any of her antenatal care visits during this pregnancy. This covers topics such as babies getting the AIDS virus, things that you can do to prevent getting the AIDS virus, or getting tests for the AIDS virus. It does not matter whether the topic was discussed only once or more than once, or discussed in one visit or over several visits.

**HA16. I DON’T WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR THE AIDS VIRUS AS PART OF YOUR ANTENATAL CARE?**

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she was tested. Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to HA19.

**HA17. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?**

Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go to get the results.

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she knows the results of the test. Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to HA22.

**HA18. REGARDLESS OF THE RESULT, ALL WOMEN WHO ARE TESTED ARE SUPPOSED TO RECEIVE COUNSELLING AFTER GETTING THE RESULT. AFTER YOU WERE TESTED, DID YOU RECEIVE COUNSELLING?**

Circle the code corresponding to the response.

All answers should skip to HA22.

**HA19. Check MN17: Birth delivered by health professional (A, B, or C)?**

Check the respondent's answer to MN17 in the Maternal and Newborn Health module regarding whether or not this birth was delivered by a health professional (doctor, nurse/midwife, or auxiliary midwife). If the birth was delivered by a health professional check the box marked 'Yes' and continue with HA20. If the birth was not delivered by a health professional check the corresponding box and skip to HA24.

**HA20. I DO NOT WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR THE AIDS VIRUS BETWEEN THE TIME YOU WENT FOR DELIVERY BUT BEFORE THE BABY WAS BORN?**

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she was tested. Circle the code corresponding to the response. If the answer is 'No', skip to HA24.

**HA21. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?**

Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go to get the results.

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she knows the results of the test. Circle the code corresponding to the response.

**HA22. HAVE YOU BEEN TESTED FOR THE AIDS VIRUS SINCE THAT TIME YOU WERE TESTED DURING YOUR PREGNANCY?**

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she was tested. Circle the code corresponding to the response. If the answer is 'Yes', skip to HA25. If the answer is 'No', continue with HA23.

**HA23. WHEN WAS THE MOST RECENT TIME YOU WERE TESTED FOR THE AIDS VIRUS?**

Circle the code corresponding to the response.

All answers should skip to next module.

**HA24. I DO NOT WANT TO KNOW THE RESULTS, BUT HAVE YOU EVER BEEN TESTED TO SEE IF YOU HAVE THE AIDS VIRUS?**

Ask the respondent if she was tested for the HIV. Be clear to the respondent that you are not asking to know the results of the test. Circle the code for the response given. If her answer is 'No', skip to HA27.

**HA25. WHEN WAS THE MOST RECENT TIME YOU WERE TESTED?**

Circle the code corresponding to the response.

**HA26. I DO NOT WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?**

Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go to get the results.

It is important that you do not attempt to find out the HIV status of any respondent who has been tested, or simply that you have any interest in knowing her HIV status. Ask the question, ensuring that the respondent knows that you are not interested in learning the results of any test she may have undergone. Circle the code corresponding to her response.

All answers should skip to next module.

**HA27. DO YOU KNOW OF A PLACE WHERE PEOPLE CAN GO TO GET TESTED FOR THE AIDS VIRUS?**

Circle the code corresponding to the response.

**MATERNAL MORTALITY MODULE**

The Maternal Mortality module collects information from respondents about all of their siblings born to the same mother, starting with the oldest.

**MM1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR BROTHERS AND SISTERS, THAT IS, ALL OF THE CHILDREN BORN TO YOUR NATURAL MOTHER. PLEASE INCLUDE ALL YOUR SISTERS AND BROTHERS WHO ARE LIVING WITH YOU, THOSE WHO ARE LIVING ELSEWHERE, AND THOSE WHO HAVE DIED. HOW MANY CHILDREN DID YOUR MOTHER GIVE BIRTH TO, INCLUDING YOURSELF?**

Read the question slowly so the respondent will understand that you are asking her questions on ALL her brothers and sisters, that is, all children born of her natural mother. This includes brothers and sisters of the respondent who may have died. The response recorded must include the respondent herself.

**MM2. Check MM1.**

Check the answer in MM1. If the mother of the respondent had two or more births, continue with MM3. If she had only one birth (respondent only), go to next module.

**MM3. HOW MANY OF THESE BIRTHS DID YOUR MOTHER HAVE BEFORE YOU WERE BORN?**

Record how many brothers and sisters from her natural mother are older than the respondent herself. By comparing the age of the respondent with that of her brothers and sisters you can verify that the table for brothers and sisters is complete.

**MM4. WHAT NAME WAS GIVEN TO YOUR OLDEST (NEXT OLDEST) BROTHER OR SISTER?**

At this point, you will start the second set of questions in this module (MM4-MM14), which are related to the respondent's sibling(s). Ask and record at the top of the columns the name of each brother or sister of the respondent beginning with the eldest or first-born. Do not include the respondent in a column. When the list is complete, you will ask the questions in this section for one sibling before asking about the brother or sister in the next column. Reference the brother or sister by mentioning his/her name.

If the respondent has more than 8 brothers and sisters born of the same mother, use additional questionnaire, fill in the information on the cover page and write 'CONTINUATION' on the top. In this second questionnaire, re-number the column numbers in MM4 to (9), (10), etc. and record the additional information about the other siblings.

**MM5. Is (*name*) male or female?**

Circle '1' for 'Male' and '2' for 'Female'.

**MM6. Is (*name*) still alive?**

If a brother or sister died (MM6 is 'No') go to MM8. If the respondent does not know if the brother or sister is still alive, circle 8 and go to the next column (if there are other brothers and sisters).

**MM7. How old is (*name*)?**

If the brother or sister is alive, you must record their age at their last birthday. If the respondent doesn't know, persist by asking by how many years the brother or sister is younger or older than the respondent.

The ages of sisters who are still alive are used for calculating the years of exposure for estimating maternal mortality rates. After recording the response, go to the next column (if there are other brothers or sisters).

Questions MM8 to MM13 will only be asked about brothers and sisters who have died.

**MM8. How many years ago did (*name*) die?**

This question and others that follow refer only to brothers and sisters who have died. Ask how many years ago the brother / sister died. If the respondent does not know, ask her the year of death and calculate to determine the number of years. You must at least get an estimate.

**MM9. How old was (*name*) when he/she died?**

Age at the time of death is very important information. Make a maximum effort to obtain the response. This information is more important for sisters than for brothers, because the age will determine which skip instruction you follow; whether to ask questions MM10 to MM13, or whether to go to the next column.

**MM10. Was (*name*) pregnant when she died?**

**MM11. Did (*name*) die during childbirth?**

**MM12. Did (*name*) die within two months after the end of a pregnancy or childbirth?**

These questions are asked only for sisters who died at the age of 12 and older. The objective of these questions is to detect cases of maternal mortality. Maternal mortality may happen during pregnancy, during delivery, or during the end of a pregnancy (abortion or still birth) or even during the two months after the end of a pregnancy.

**MM13. How many live born children did (*name*) give birth to during her lifetime?**

Ask the total number of births the sister had in her lifetime. Include all children who were born alive. Then proceed to ask questions for the sibling in the next column.

**MM14. If no more siblings, go to next module**

Go back to MM4 for next sibling. If there are no more siblings, go to next module

#### **Notes for the Maternal Mortality Module:**

- The number of columns filled must be equal to the number recorded in MM1 minus 1 (that is the total number of brothers and sisters born to the respondent's mother, minus the respondent herself).
- Indicate the respondent's position in the table by making a cross in the right place. The number of columns preceding this position must be equal to the number recorded in MM3.
- If you add MM8 (number of years passed since the death) and MM9 (age at death), this gives the age the brother or sister would have today if he/she were still alive. This calculation can be made to check that the brothers and sisters were recorded in the right order.
- If in MM9, 'Age at death', the respondent tells you she doesn't know, persist to obtain an estimate. It is preferable to obtain an approximate age than no age at all. However, if the brother or sister died when he/she was still very young record '00' for age.
- Compare the age of the brothers/sisters. Suppose a woman has a first child at the age of 15 and the last at the age of 47, which is an extreme case, the range between the age of the youngest brother or sister and the eldest brother/ sister cannot exceed  $47-15 = 32$  years.
- Cross check to see if the interval between brothers/sisters is not very long (5 years and above). If there is a long interval between births, be sure that the respondent has not forgotten to mention a brother or sister.

#### **TOBACCO AND ALCOHOL USE MODULE**

The purpose of this module is to collect information on the use of tobacco and alcohol. The module includes 5 questions on cigarette smoking (TA1-TA5), 4 questions on use of smoked tobacco products (TA6-TA9), 4 questions on the use of smokeless tobacco products (TA10-TA13), and 4 questions on alcohol use. The module is administered to all women, age 15-49 years.

The questions will help to understand:

- ever and current use of cigarettes and the age at which cigarette smoking first started
- ever and current use of smoked and smokeless tobacco products
- the intensity of use, of cigarettes, and smoked and smokeless tobacco products
- ever and current use of alcohol, and intensity of use

**TA1. HAVE YOU EVER TRIED CIGARETTE SMOKING, EVEN ONE OR TWO PUFFS?**

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to TA6. Note that one or two puffs at any time in the past will be sufficient for a "Yes" answer in this question. Note that this question is only on cigarettes, and does not include other smoked or smokeless tobacco products. If the respondent has only had tobacco products other than cigarettes, circle '2'.

This question is asked by reference to one or two puffs as an introductory question to ensure that we do not miss out on former users.

**TA2. HOW OLD WERE YOU WHEN YOU SMOKED A WHOLE CIGARETTE FOR THE FIRST TIME?**

Write the age at which the respondent first smoked a whole cigarette. If the respondent says she has never smoked a whole cigarette in her life, then circle '00' and skip to TA6.

Note that this question is no longer about smoking one or two puffs from a cigarette, but is about smoking a whole cigarette.

It is possible that someone who has tried cigarette smoking with one or two puffs (TA1='1') will respond with a 'Never smoked a whole cigarette' to this question.

**TA3. DO YOU CURRENTLY SMOKE CIGARETTES?**

Here you will ask the respondent whether she is currently smoking cigarettes. The intention is to capture those who smoke on a daily basis, as well as those who smoke occasionally, and those who smoke infrequently. Whether the respondent regards herself as currently smoking or not will determine the response to this question. Do not indicate to the respondent that you are asking the question to see if she smokes regularly or occasionally, as this type of information is collected in the next two questions.

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to TA6.

**TA4. IN THE LAST 24 HOURS, HOW MANY CIGARETTES DID YOU SMOKE?**

Record the total number of cigarettes smoked by the respondent during the last 24 hours. Here, if need be, explain to the respondent that we are interested in knowing the consumption of at least one whole cigarette.

If the respondent did not smoke any cigarettes during the last 24 hours, write "00".

**TA5. DURING THE LAST ONE MONTH, ON HOW MANY DAYS DID YOU SMOKE CIGARETTES?**

Record the total number of days on which the respondent smoked cigarettes during the last one month. Again, smoking cigarettes refers to smoking a whole cigarette, rather than a few puffs. If the answer given is less than 10 days, record the number of days in the space provided. If the respondent

says she smoked “everyday” or “almost every day”, circle “30”. If the response is ‘10 days or more but less than a month’, circle “10”.

**SURVEY COORDINATORS:** SMOKED TOBACCO PRODUCTS MENTIONED IN QUESTION TA6 AND TA8 SHOULD BE CUSTOMIZED LOCALLY, TO INCLUDE THOSE SMOKED TOBACCO PRODUCTS COMMONLY USED IN THE COUNTRY.

**TA6. HAVE YOU EVER TRIED ANY SMOKED TOBACCO PRODUCTS OTHER THAN CIGARETTES, SUCH AS CIGARS, WATER PIPE, CIGARILLOS OR PIPE?**

Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to TA10. Note that the questions refers to “having tried” any of the mentioned smoked tobacco products, without any reference to frequency of use or when the product was used. This information is collected in the next few questions.

**TA7. DURING THE LAST ONE MONTH, DID YOU USE ANY SMOKED TOBACCO PRODUCTS?**

Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to TA10. “Use” will be dependent on the respondent’s perception.

**TA8. WHAT TYPE OF SMOKED TOBACCO PRODUCT DID YOU USE OR SMOKE DURING THE LAST ONE MONTH?**

Circle the codes for the tobacco products smoked by the respondent during the last one month. Give the respondent the chance to tell you all types of smoked tobacco products she may have used or smoked. Do not rush to the next question. Pause and let the respondent mention all products that she may have used.

**TA9. DURING THE LAST ONE MONTH, ON HOW MANY DAYS DID YOU USE SMOKED TOBACCO PRODUCTS?**

Record the total number of days the respondent smoked tobacco products during the last one month. If the answer refers to a period less than 10 days, record the number of days. If the respondent says she has been using smoked tobacco products “everyday” or “almost every day”, circle “30”. If the response is ‘10 days or more but less than a month’, circle “10”.

**SURVEY COORDINATORS:** SMOKELESS TOBACCO PRODUCTS MENTIONED IN TA10 AND TA12 SHOULD BE CUSTOMIZED LOCALLY, TO INCLUDE THOSE SMOKELESS TOBACCO PRODUCTS COMMONLY USED IN THE COUNTRY.

**TA10. HAVE YOU EVER TRIED ANY FORM OF SMOKELESS TOBACCO PRODUCTS, SUCH AS CHEWING TOBACCO, SNUFF, OR DIP?**

This time we are interested with ever use of smokeless tobacco products. Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to TA14.

Note that the question refers to “having tried” any of the mentioned smokeless tobacco products, without any reference to frequency of use or when the product was used. This information is collected in the next few questions.

**TA11. DURING THE LAST ONE MONTH, DID YOU USE ANY SMOKELESS TOBACCO PRODUCTS?**

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to TA14. "Use" is dependent on the respondent's perception.

**TA12. WHAT TYPE OF SMOKELESS TOBACCO PRODUCT DID YOU USE DURING THE LAST ONE MONTH?**

Circle the codes for the smokeless tobacco products used by the respondent during the last one month. Give the respondent the chance to tell you all types of smokeless tobacco products she may have used. Do not rush to the next question. Pause and let the respondent mention all products that she may have used.

**TA13. DURING THE LAST ONE MONTH, ON HOW MANY DAYS DID YOU USE SMOKELESS TOBACCO PRODUCTS?**

Record the total number of days the respondent used smokeless tobacco products during the last one month. If the answer refers to a period less than 10 days, record the number of days. If the respondent says she has been using smoked tobacco products "everyday" or "almost every day", circle "30". If the response is '10 days or more but less than a month', circle "10".

The final four questions of the module are on drinking alcohol.

**TA14. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT DRINKING ALCOHOL. HAVE YOU EVER DRUNK ALCOHOL?**

Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to the next module.

<b>SURVEY COORDINATORS:</b> ALCOHOLIC DRINKS MENTIONED IN TA15 SHOULD BE CUSTOMIZED LOCALLY, TO INCLUDE THOSE ALCOHOLIC DRINKS COMMONLY CONSUMED IN THE COUNTRY.
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**TA15. WE COUNT ONE DRINK OF ALCOHOL AS ONE CAN OR BOTTLE OF BEER, ONE GLASS OF WINE, OR ONE SHOT OF COGNAC, VODKA, WHISKEY OR RUM. HOW OLD WERE YOU WHEN YOU HAD YOUR FIRST DRINK OF ALCOHOL, OTHER THAN A FEW SIPS?**

Make sure that the respondent understands what we mean by one drink of alcohol. Otherwise, we may be capturing those cases when the respondent may have taken just a few sips very early on, which we do not want to. We are looking for the consumption of at least one drink, as described in the question.

Write the age of the respondent at the time when she had her first drink. If the respondent says she has never had one drink of alcohol, then circle '00' and skip to the next module.

Note that a respondent who has had a few sips but never one full drink may respond with 'Yes' in TA14, but may respond with 'Never had one drink of alcohol' in this question. This is possible.

**TA16. DURING THE LAST ONE MONTH, ON HOW MANY DAYS DID YOU HAVE AT LEAST ONE DRINK OF ALCOHOL?**

Record the total number of days the respondent had at least one drink of alcohol during the last one month. If the answer refers to a period less than 10 days, record the number of days. If the respondent says she drank alcohol "everyday" or "almost every day", circle "30". If the response is ten days or more but less than a month, circle "10". If the respondent says she did not have one drink of alcohol in the last month, then circle '00' and skip to the next module.

**TA17. IN THE LAST ONE MONTH, ON THE DAYS THAT YOU DRANK ALCOHOL, HOW MANY DRINKS DID YOU USUALLY HAVE?**

Note that in this question, we are collecting information on the number of drinks the respondent may have had on the days that she had any alcohol. In other words, if the respondent had alcohol on three days during the last one month (the response to question TA16), then the response to this question should be the average (the amount that the respondent “usually” had) number of drinks she may have had during those three days. Note that the response here cannot be less than 1 drink, as this question and the previous question are about having at least one drink, as defined in TA15.

**LIFE SATISFACTION MODULE**

It is well-known that subjective perceptions of individuals of their incomes, education, living environments play a significant role in their lives, autonomously from objective conditions, such as physical wealth and health. Life satisfaction, which is a measure of an individual’s perceived level of well-being, can have an emotional toll which will impact on well-being regardless of actual income or ownership of goods. It is therefore important that we understand how satisfied young people are in a variety of domains and identify factors that that support or hinder their development, and thus, create a more comprehensive picture of young people’s life situations.

A closely related but different domain, happiness, on the other hand, is a fleeting, transient emotion that can be affected by numerous factors, ranging from good weather to a recent death in the family. In the latter, for instance, a person may be satisfied with her job, income, education, family life, friends and the like, but still be unhappy. In a cross-sectional survey, however, we are likely to generate a snapshot of the typical level of happiness in a population.

This module is to be administered to respondents age 15-24 only. The module includes 14 questions. A double-sided response card is also used and shown to the respondent, to make it easier for the respondent to answer the questions.

Question LS2 has 5 possible response categories on happiness, each of which is depicted by a smiling (and not so smiling) face on the response card.

Questions from LS3 to LS13 are on life satisfaction and all have the same response categories, in the form of a 5-item scale from “Very satisfied” to “Very unsatisfied”. Side 2 of the response card also has 5 “smiling faces” corresponding to these response categories.

Information on when and how to use the response card is given below.

**LS1. Check WB2: Age of respondent is between 15 and 24?**

Before starting to ask the questions in this module, check WB2. If the respondent is age 25-49 years, skip to question WM11, which is placed after this module. If the respondent is age 15 to 24, inclusive, continue with the next question, LS2.

The first question of the module (LS2) is about happiness. You will introduce Side 1 of the response card in this question.

**LS2.** You will first introduce the module with the following sentence:

**I WOULD LIKE TO ASK YOU SOME SIMPLE QUESTIONS ON HAPPINESS AND SATISFACTION.**

And ask the following question:

**TAKING ALL THINGS TOGETHER, WOULD YOU SAY YOU ARE VERY HAPPY, SOMEWHAT HAPPY, NEITHER HAPPY NOR UNHAPPY, SOMEWHAT UNHAPPY OR VERY UNHAPPY?**

You will immediately introduce Side 1 of the response card, by saying:

**YOU CAN ALSO LOOK AT THESE PICTURES TO HELP YOU WITH YOUR RESPONSE.**

You will need to explain to the respondent what each symbol represents, and ask the respondent to point out to the symbol which best represents her level of happiness.

With this question, we will first try to learn whether the respondent is happy at the time of interview, before we go and talk about levels of satisfaction in various domains.

Questions LS3 to LS13 are about satisfaction in various domains, and satisfaction overall. Satisfaction, compared to happiness, is thought to be longer term, while happiness is usually taken by the respondents to be a shorter term state of mind. We first ask the question on happiness, before reminding the respondent about the various domains, so that an overall level of happiness can be ascertained.

A person who may be satisfied with her income, with her school and the like, may also be very unhappy, because of the results of the results of a recent election, or because of the recent death of a family member.

Question LS3 has a long explanatory introduction at the beginning, and will also help you to introduce Side 2 of the response card, for all questions from LS3 to LS13. It is important that you take your time to introduce these questions by using the sentences provided.

Start the series of questions on satisfaction by saying:

**LS3. NOW I WILL ASK YOU QUESTIONS ABOUT YOUR LEVEL OF SATISFACTION IN DIFFERENT AREAS.**

And continue with the following explanation:

**IN EACH CASE, WE HAVE FIVE POSSIBLE RESPONSES: PLEASE TELL ME, FOR EACH QUESTION, WHETHER YOU ARE VERY SATISFIED, SOMEWHAT SATISFIED, NEITHER SATISFIED NOR UNSATISFIED, SOMEWHAT UNSATISFIED OR VERY UNSATISFIED.**

If the respondent does not understand the topic at hand, repeat the sentence. If necessary, describe the module as "...questions about how satisfied you are, in school, at work, with your friends and your family".

Then, introduce side 2 of the response card.

**AGAIN, YOU CAN LOOK AT THESE PICTURES TO HELP YOU WITH YOUR RESPONSE.**

Explain that she can use the response card for a number of questions:

*Show side 2 of response card and explain what each symbol represents. Circle the response code shown by the respondent, for questions LS3 to LS13.*

Describe to the respondent that the very happy-looking, smiling face on the left stands for very satisfied, while the one on the right, which looks very unsatisfied or unhappy, stands for the very

unsatisfied. Tell the respondent that you want her to show the face that best describes the level of satisfaction she has from any of the domains in the questions.

Note that the response card is to be used with all respondents, regardless of the level of education. However, it will probably be most useful and critical with respondents who have no or little education, and/or little ability to think in terms of scales.

And finally, ask the question on family life:

**HOW SATISFIED ARE YOU WITH YOUR FAMILY LIFE?**

If the respondent says that she does not have a family, circle “0”. Otherwise, circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

We have to leave it to the respondent’s perception as to what she refers to as “family life”. Note that the question is not about “family”, but rather about “family life”. In other words, we are not asking the respondent to think about family members individually. At hearing this question, some respondents will think of their immediate family, or members of family that she is living together with. Depending on the living arrangements or relationship patterns between immediate and extended family members, some respondents will automatically think of the extended family. Do not try to explain what is meant by the “family”, unless the respondent asks you to. If that happens, tell the respondent that we are interested in their family experiences, immediate or extended family, whichever they spend more time with.

**LS4. HOW SATISFIED ARE YOU WITH YOUR FRIENDSHIPS?**

If the respondent says that she does not have any friends, circle “0”. Otherwise, circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

**LS5. DURING THE (*current* / 2011-2012) SCHOOL YEAR, DID YOU ATTEND SCHOOL AT ANY TIME?**

With this question, we would like to establish whether the respondent has attended school at any time during the current school year.

**SURVEY COORDINATORS:**

IF THE SURVEY IS CONDUCTED DURING SCHOOL YEAR, THEN THE WORDING OF THE QUESTION SHOULD BE “CURRENT SCHOOL YEAR”; IF THE SURVEY IS CONDUCTED AFTER THE SCHOOL YEAR, THEN THE APPROPRIATE REFERENCE TO THE MOST RECENT SCHOOL YEAR SHOULD BE USED, SUCH AS “2011-2012 SCHOOL YEAR”. THE QUESTION SHOULD BE ADAPTED ACCORDINGLY, BEFORE DATA COLLECTION BEGINS.

**LS6. HOW SATISFIED (*are/were*) YOU WITH YOUR SCHOOL?**

Circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

**LS7. HOW SATISFIED ARE YOU WITH YOUR CURRENT JOB?**

Note that you will be leaving the definition of “job” to the perception of the respondent. When answering this question, she might be referring to a full-time job, irregular or seasonal work, family business, paid work or unpaid work, and the like. It is important that you ask the question as it is and ask the respondent to answer. You are not expected to define what a “job” is.

If the respondent says that ~~he~~/she does not have a job, circle “0” and continue with the next question. Do not probe to find out how she feels about not having a job, unless she tells you herself. For example, if she says that she does not have a job and she is very unsatisfied, circle “5” and continue with the next question.

**LS8. HOW SATISFIED ARE YOU WITH YOUR HEALTH?**

Circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

**LS9. HOW SATISFIED ARE YOU WITH WHERE YOU LIVE?**

Circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

“Where you live” might be understood in different ways by different respondents. The intention here is to get the respondent’s satisfaction from the neighbourhood she is living in, her neighbours and the characteristics of the dwelling (if they like it or if they wish they lived in a different house etc.). We are not interested in the level of satisfaction of the respondent with the city or country they are living in.

**LS10. HOW SATISFIED ARE YOU WITH HOW PEOPLE AROUND YOU GENERALLY TREAT YOU?**

Circle the code corresponding to the response given or to the smiling face pointed out by the respondent.

**LS11. HOW SATISFIED ARE YOU WITH THE WAY YOU LOOK?**

Circle the code corresponding to the response given or to the smiling face pointed out by the respondent.

**LS12. HOW SATISFIED ARE YOU WITH YOUR LIFE, OVERALL?**

Circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

The question is intended to elicit the evaluation of positivity of a respondent’s life as a whole, without making reference to a specific domain. This is the overall level of satisfaction of the respondent, considering all aspects of her life.

**LS13. HOW SATISFIED ARE YOU WITH YOUR CURRENT INCOME?**

Circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

This question is asked after the general question on life satisfaction (LS12) deliberately, so as to avoid having the respondent to condition her other responses to her level of satisfaction in other non-income domains.

If the respondent says ~~responds~~ that ~~he~~/she does not have any income, circle “0” and continue with the next question. Do not probe to find out how she feels about not having any income, unless she tells you herself. For example, if she says that she does not have any income and she is very unsatisfied with this situation, circle “5” and continue with the next question.

With the two questions that follow, we intend to learn from the respondent her perceptions about a better life – whether she thinks her life improved or worsened during the last one year, and what her expectation is for the next one year. Note that the response card is not used in these two questions.

**LS14. COMPARED TO THIS TIME LAST YEAR, WOULD YOU SAY THAT YOUR LIFE HAS IMPROVED, STAYED MORE OR LESS THE SAME, OR WORSENE, OVERALL?**

Make sure that the respondent understands the reference to the last one year of her life, and that we are referring to the overall improvement or worsening.

**LS15. AND IN ONE YEAR FROM NOW, DO YOU EXPECT THAT YOUR LIFE WILL BE BETTER, WILL BE MORE OR LESS THE SAME, OR WILL BE WORSE, OVERALL?**

Note that this question is about the respondent's expectations about her life course during the next one year, and that the sentence here is designed as a continuation of the previous question, by beginning with "And...". This question is also about overall improvement or worsening.

**WM11. Record the time**

Record the time of the day you finish the woman's interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in front of the hour or minute. If the interview is not completed on your first visit and you visit the household again to continue the individual interview, revise and enter starting (WM10) and ending times (WM11) of interview to reflect the actual amount of time spent for the whole duration of this interview in both/all visits. Also provide a note at the end of the individual questionnaire regarding this.

**WM12. Check household listing, column HL9. Is the respondent the mother or caretaker of any child age 0-4 living in this household?**

If the respondent is the mother or caretaker of any child age 0-4 living in this household then go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE for that child and start the interview with this respondent. Otherwise end the interview with this respondent by thanking her for her cooperation. Check for the presence of any other eligible woman, man or child under-5 in the household.

**OBSERVATIONS**

The last page of the individual women questionnaire has been reserved for the interviewers, supervisors, or editors to write any notes or observations regarding this particular individual interview.

## HOW TO FILL IN THE QUESTIONNAIRE FOR INDIVIDUAL MEN

**SURVEY COORDINATORS:** AS MAJORITY OF THE MODULES AND THE QUESTIONS IN THE QUESTIONNAIRE FOR INDIVIDUAL MEN AND THE QUESTIONNAIRE FOR INDIVIDUAL WOMEN ARE VERY SIMILAR, THE INSTRUCTIONS FOR FILLING IN THE QUESTIONNAIRE FOR INDIVIDUAL MEN PRESENTED HERE ONLY INCLUDE THE EXPLANATIONS ABOUT THE ADDITIONAL QUESTIONS OR MODULES INCLUDED.

WHILE PREPARING THE INSTRUCTIONS FOR INTERVIEWER'S MANUAL, PLEASE COPY THE EXPLANATIONS GIVEN FOR THE QUESTIONNAIRE FOR INDIVIDUAL WOMEN AND ADAPT THE CONTENTS ACCORDING TO THE MODULES INCLUDED IN YOUR SURVEY.

**MAJOR DIFFERENCES FROM THE QUESTIONNAIRE FOR INDIVIDUAL WOMEN**

ALL THE MODULE ABBREVIATIONS AND QUESTION NUMBERS IN THIS QUESTIONNAIRE HAS AN ADDITIONAL LETTER “M” TO INDICATE THE MODULES AND QUESTIONS ARE FOR INDIVIDUAL MEN.

THE TERM ‘WOMAN’ HAS BEEN REPLACED WITH ‘MAN’ IN THE MODULE NAMES, QUESTIONS, AND WHEREVER NECESSARY.

THE TERM ‘HUSBAND’ HAS BEEN REPLACED WITH ‘WIFE’ IN THE QUESTIONS AND WHEREVER NECESSARY.

**MAN’S INFORMATION PANEL**

No differences from the Questionnaire for Individual Women

**MAN’S BACKGROUND MODULE**

No differences from the Questionnaire for Individual Women

**ACCESS TO MASS MEDIA AND USE OF INFORMATION/COMMUNICATION TECHNOLOGY MODULE**

No differences from the Questionnaire for Individual Women

**CHILD MORTALITY MODULE**

There are important differences from the Questionnaire for Individual Women so the module description is written in detail below:

**MCM1. NOW I WOULD LIKE TO ASK ABOUT ALL THE CHILDREN YOU HAVE HAD IN YOUR LIFE. I AM INTERESTED IN ALL OF THE CHILDREN THAT ARE BIOLOGICALLY YOURS, EVEN IF THEY ARE NOT LEGALLY YOURS OR DO NOT HAVE YOUR LAST NAME. HAVE YOU EVER FATHERED ANY CHILDREN WITH ANY WOMAN?**

The first question of the module is used to determine if the respondent has fathered any children with any woman in his life. It is important that these children belong to the respondent biologically. If he says he has never fathered a child, circle ‘2’, and skip to MCM8. If he says he does not know if he has a child or not, circle ‘8’ and skip to MCM8.

**MCM3. HOW OLD WERE YOU WHEN YOUR (FIRST) CHILD WAS BORN?**

Enter the age in completed years.

**MCM4. DO YOU HAVE ANY SONS OR DAUGHTERS THAT YOU HAVE FATHERED WHO ARE NOW LIVING WITH YOU?**

Read the question slowly. The sons and daughters being considered are those who live with him in his household (these children should have been listed in the Household Listing). Circle the code corresponding to the response. If he answers ‘No’, skip to MCM6.

**MCM5. HOW MANY SONS LIVE WITH YOU? HOW MANY DAUGHTERS LIVE WITH YOU?**

If the answer to MCM4 is ‘Yes’, record the number of sons and daughters living with the man in the space provided. If the answer is ‘None’ for sons (or if he does not have any sons), record ‘00’ in the space provided for sons. Similarly, if he has no daughters now living with him (or if he does not have any daughters), record ‘00’ in the space for daughters. Do not leave either of the spaces blank. Since

the question is asked only to men who have children living with them in the same household, at least one of the spaces should have a value higher than 00.

Remember, we are interested only in the respondent's OWN children – not foster children, children of his wife by another man, children of another relative, or children for whom he is the caretaker.

**MCM6. DO YOU HAVE ANY SONS OR DAUGHTERS THAT YOU HAVE FATHERED WHO ARE ALIVE BUT DO NOT LIVE WITH YOU?**

This refers to sons and daughters who are alive but not living with the man. For example, one or more of his children may be living with a relative, staying in a boarding school, been given up for adoption, or may be grown-up children who have left home.

Make sure the respondent is not reporting dead children in this question. Circle the code corresponding to the response. If he answers 'No', skip to MCM8.

**MCM7. HOW MANY SONS ARE ALIVE BUT DO NOT LIVE WITH YOU? HOW MANY DAUGHTERS ARE ALIVE BUT DO NOT LIVE WITH YOU?**

If the answer to MCM6 is 'Yes', record the number of sons and daughters who are alive but not living with the respondent in the space provided. If the answer is 'None' for sons (or if he does not have any sons who are alive), record '00' in the space provided for sons. If the answer is 'None' for daughters (or if he does not have any daughters who are alive), record '00' in the space provided for daughters.

Since this question is asked only to men who have children alive who are not living with them, at least one of the spaces should have a value higher than 00. For men who have been asked this question, the spaces should not be left blank.

**MCM8. HAVE YOU EVER FATHERED A SON OR DAUGHTER WHO WAS BORN ALIVE BUT LATER DIED?**

Circle the code corresponding to the response. Some respondents may fail to mention children who died very young, so if he answers 'No', it is important to probe by asking **"I MEAN, TO A CHILD WHO EVER BREATHED, CRIED OR SHOWED SIGNS OF LIFE – EVEN IF HE OR SHE LIVED ONLY A FEW MINUTES OR HOURS?"** If the answer is still 'No', skip to MCM10.

Some respondents may be reluctant to talk about this subject and may become sad or upset that you are asking such questions. Be sympathetic and tactful in such situations. Say that you know the subject is painful, but the information is important.

**MCM9. HOW MANY BOYS HAVE DIED? HOW MANY GIRLS HAVE DIED?**

If the answer to MCM8 is 'Yes', record the number of sons and daughters who were born alive but later died in the spaces provided. Do not leave either of the spaces blank. For men who have been asked this question, at least one of the spaces should have a value higher than 00.

**MCM10. *Sum answers to MCM5, MCM7 and MCM9***

Add the numbers of births reported in MCM5, MCM7 and MCM9 and write the sum here, then continue with MCM11.

**MCM11. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE FATHERED IN TOTAL (*total number in MCM10*) LIVE BIRTHS DURING YOUR LIFE. IS THIS CORRECT?**

If he says it is correct, check the box marked 'Yes' and then further check if he has fathered any live births. If he has not fathered any live births before, go to next module. If he has fathered live births before, continue with MCM11A.

If he says 'No', first check responses to MCM1-MCM10 and then go back through the questions to check with the respondent whether you have obtained the information correctly. For example, starting with MCM5, you would ask: **"YOU HAVE TWO SONS AND ONE DAUGHTER LIVING WITH YOU, IS THAT CORRECT?"** Do the same for MCM7 and MCM9. Correct the answers and the sum mentioned in MCM10 and then continue to the next question. Make sure to cancel the 'No' in MCM11 and check 'Yes' after you have made the corrections.

**MCM11A. DID ALL THE CHILDREN YOU HAVE FATHERED HAVE THE SAME BIOLOGICAL MOTHER?**

Circle '1' if 'Yes', and go to MCM12. If 'No', circle '2'.

**MCM11B. IN ALL, HOW MANY WOMEN HAVE YOU FATHERED CHILDREN WITH?**

Record the number of women the respondent has fathered children with.

**MCM12. OF THESE (TOTAL NUMBER IN MCM10) BIRTHS YOU HAVE FATHERED, WHEN WAS THE LAST ONE BORN (EVEN IF HE OR SHE HAS DIED)?**

Enter the date of the most recent birth the man has fathered, even if the child is no longer alive, in the space provided.

If the man does not remember the day of birth, you may enter '98' to the space provided for 'Day'. Note that you **MUST** obtain exact information on the month and year of the last birth; '98' is not allowed for month and year.

**ATTITUDES TOWARD DOMESTIC VIOLENCE MODULE**

No differences from the Questionnaire for Individual Women

**MARRIAGE/UNION MODULE**

Following differences from the Questionnaire for Individual Women:

MMA3 - Wording change

MMA4 – Response category '98' is removed

**SEXUAL BEHAVIOUR MODULE**

Following differences from the Questionnaire for Individual Women:

MSB5 & MSB10 – Response category 'Prostitute' is added

MSB5 & MSB10 – 'boyfriend' is replaced with 'girlfriend'

**HIV/AIDS MODULE**

Following differences from the Questionnaire for Individual Women:

Questions HA13 – HA23 are removed

**CIRCUMCISION MODULE**

This module is only included in the Questionnaire for Individual Men

Circumcision involves the complete removal of the foreskin of the penis. Circumcision may be performed for religious, medical, or cultural reasons and can be carried out at birth, during adolescence, or at other times during a man's life.

**MMC1. SOME MEN ARE CIRCUMCISED, THAT IS, THE FORESKIN IS COMPLETELY REMOVED FROM THE PENIS. ARE YOU CIRCUMCISED?**

Circle the code corresponding to the answer given. If 'No', go to the next module.

**MMC2. HOW OLD WERE YOU WHEN YOU GOT CIRCUMCISED?**

Write the age of respondent at circumcision. If the respondent does not know the exact age, probe to get an estimate. If she still says she does not remember or unsure, circle '98'.

**MMC3. WHO DID THE CIRCUMCISION?**

Circle the code corresponding to the answer given. If he does not know if the person was a health worker/professional or a traditional person, write the words used to describe the person in the space provided for 'Other' and circle '6'. If he does not know who circumcised him, circle '8'.

**MMC4. WHERE WAS IT DONE?**

Circle the code corresponding to the answer given. If he does not know where the circumcision was done, circle '8'.

**TOBACCO AND ALCOHOL USE MODULE**

No differences from the Questionnaire for Individual Women

**LIFE SATISFACTION MODULE**

No differences from the Questionnaire for Individual Women

## **HOW TO FILL IN THE QUESTIONNAIRE FOR CHILDREN UNDER FIVE**

The purpose of the Questionnaire for Children Under Five is to provide information on a wide range of MICS4 indicators relating to the first 5 years of life. You will have identified children under five, eligible for this questionnaire, after you have completed the Household Listing Form in the Household Questionnaire.

To collect information on children under five by using this questionnaire, we have to identify a respondent who can answer detailed questions on the health and well-being of these children. If the mother is living in the same household as the eligible child (in other words, if she is listed in the Household Listing, together with the child), then she is the person who has to be interviewed for that child. If the mother of the eligible child is not listed in the Household Listing (she may be deceased or living elsewhere), you should have identified a person in the Household Listing who takes primary responsibility for raising and caring for the child. This person can be a man or a woman.

<p><b>SURVEY COORDINATORS:</b> INTERVIEWERS MAY GET CONFUSED ABOUT WHO THE RESPONDENT TO THE QUESTIONNAIRE FOR CHILDREN UNDER FIVE SHOULD BE. EXPLAIN THIS THOROUGHLY DURING TRAINING, GIVING EXAMPLES. MAKE SURE TO EXPLAIN THAT THE PRIMARY CARETAKER IS NOT SIMPLY</p>
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SOMEONE LOOKING AFTER THE CHILD WHEN THE MOTHER IS AWAY (FOR INSTANCE, PEOPLE WHO MAY CARE FOR THE CHILD DURING THE DAY WHEN THE MOTHER IS AT WORK). EXPLAIN TO INTERVIEWERS THAT THEY SHOULD ONLY INTERVIEW A RESPONDENT OTHER THAN THE MOTHER IF THE MOTHER IS NOT LISTED IN THE HOUSEHOLD.

This questionnaire is to be administered to all mothers or primary caretakers (see the Household Listing, column HL9) who care for a child that lives with them and is under the age of 5 years (see the Household Listing, column HL6).

A separate form should be filled in for each eligible child listed in the Household Questionnaire – check column HL9 on the Household Listing.

### **UNDER-FIVE CHILD INFORMATION PANEL**

UF1-UF8 should be filled in before you start the interview.

#### **UF1. Cluster number**

Enter the cluster number from the Household Questionnaire, question HH1.

#### **UF2. Household number**

Enter the household number from the Household Questionnaire, question HH2.

#### **UF3. Child's name**

Enter the child's name from the Household Questionnaire, column HL2 of the Household Listing. The child's name should be used throughout the interview. In order to prevent confusion during the interview, his/her name is recorded here.

#### **UF4. Child's line number**

Enter the child's line number from the Household Questionnaire, column HL1 of the Household Listing.

#### **UF5. Mother's / Caretaker's name**

Enter the mother's/primary caretaker's name from the Household Questionnaire, column HL2 of the Household Listing.

#### **UF6. Mother's / Caretaker's line number**

Enter the mother's/primary caretaker's line number from the Household Questionnaire, column HL1 of the Household Listing.

#### **UF7. Interviewer name and number**

Enter your own name and identifying number. You will be provided with these identification numbers during training.

#### **UF8. Day / Month / Year of interview**

Enter the date of the interview: day/month/year. If the interview is not completed on your first visit and you visit the household to interview the mother/caretaker again, revise and enter the final date of the interview. In other words, the date here should be the date when you have either completed the

Questionnaire for Children Under Five, or when the interview was not conducted but when it was decided that there will be no more attempts to interview the mother or primary caretaker of the under-five child.

Repeat greeting if not already read to this mother/primary caretaker: **“WE ARE FROM (*country-specific affiliation*). WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT (*name*)’S HEALTH AND WELL-BEING. THE INTERVIEW WILL TAKE ABOUT (*number*) MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?”**

If you are starting to interview the same person that you have completed the household or individual women questionnaire with, you need to read a revised version of the greeting (see below) as the time to complete the questionnaire for under-5 will be different than the household or individual women questionnaire and normally a separate consent is required to do this interview.

**NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT (*child’s name from UF3*)’S HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT (*number*) MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?”**

**SURVEY COORDINATORS:** WHEN THE QUESTIONNAIRES ARE CUSTOMIZED, REPLACE (*country-specific affiliation*) WITH THE NAME OF THE IMPLEMENTING AGENCY IN YOUR COUNTRY.

ESTIMATE THE APPROXIMATE DURATION OF THE UNDER-FIVE’S INTERVIEW DURING THE PRE-TEST AND REPLACE (*number*) WITH THIS ESTIMATE.

As with similar sentences at the beginning of the Household Questionnaire and Questionnaire for Individual Women, you may change the wording of these introductory sentences as appropriate. You must make sure, however, to include the following when you are introducing yourself: The name of the implementing agency; the topic of the survey; the approximate duration of the interview; the issue of confidentiality; and with whom you would like to speak.

If permission is given, go to UF12 to record the time and then begin the interview. If the respondent does not agree to continue, complete UF9, thank her/him and go to the next interview. Later, discuss the refusal with your supervisor; you or another person from the team may attempt to interview the respondent for a second time. This will depend on your description of the refusal. However, remember that the respondent’s participation in the survey must be on a voluntary basis, and potential respondents must never be forced to participate.

**UF10. Field edited by (Name and number)**

Leave this space blank. The field editor will later enter his/her name and number in the space provided when checking the completed questionnaires.

**UF11. Data entry clerk (Name and number)**

Leave this space blank. The data clerk will enter his/her name and number in the space provided.

**UF12. Record the time**

Record the time of the day you start the under-five interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in front of the hour or minute.

**UF9. Result of interview for children under 5**

Complete this question once you have concluded the interview. Remember that the code refers to the mother or primary caretaker of the under-five child. Circle the code corresponding to the results of the interview. If the questionnaire is completed, circle '01' for 'Completed'. If you have not been able to contact the mother/primary caretaker after repeated visits, circle '02' for 'Not at home'. If the mother/primary caretaker refuses to be interviewed, circle '03' for 'Refused'. If you were able to only partly complete the questionnaire, circle '04' for 'Partly completed'. If the mother/primary caretaker is incapacitated, circle '05'. If you have not been able to complete this questionnaire for another reason, you should circle '96' for 'Other' and specify the reason in the space provided.

Ask the mother/primary caretaker to collect all the birth certificates and health/immunization cards she has for this child before you begin the interview. You will need these during the interview.

**AGE MODULE**

**Date of birth and age.** You will begin the interview with questions about the child's date of birth and age. These are two of the most important questions in the interview, since almost all analysis of the data depends on the child's exact age. While completed age in years is sufficient for women's interviews, we need to obtain accurate information on the child's age in months. This is necessary because some of the analysis of the information that you will be collecting can only be done on the basis of age in months. You will collect this information by learning the child's date of birth. It will then be possible to compare the date of interview with the date of birth of the child and, after the data is collected, calculate the child's age in months by comparing these two pieces of information.

The questions on age and date of birth must be asked independently from similar questions on the Household Questionnaire and Questionnaire for Individual Women. The person you may be interviewing for this questionnaire may be the same woman you interviewed for the Questionnaire for Individual Women, and you may have obtained dates of birth of her children in that questionnaire. Also, you may have obtained the child's age in the Household Questionnaire. Even in such cases, you must ask these questions again.

**SURVEY COORDINATORS:** THE CHILD'S DATE OF BIRTH IS VERY IMPORTANT IN THIS SURVEY. FOR A NUMBER OF INDICATORS, INCLUDING THOSE ON ANTHROPOMETRY, IMMUNIZATION AND BREASTFEEDING, WE NEED TO HAVE THE EXACT AGE OF CHILDREN IN MONTHS TO BE ABLE TO CALCULATE THE RELEVANT INDICATORS (SEE APPENDIX ONE). EMPHASIZE THIS IN THE TRAINING AND DISCUSS WAYS OF OBTAINING ACCURATE DATES OF BIRTH WITH THE INTERVIEWERS.

**AG1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE HEALTH OF (name). IN WHAT MONTH AND YEAR WAS (name) BORN?**

Ask the mother or primary caretaker for the child's date of birth. Probe: "WHAT IS HIS/HER BIRTHDAY?" It is important to record the child's month and year of birth accurately.

If the mother/primary caretaker knows the exact birth date, including the day, enter the day of birth. Otherwise, circle '98' for 'DK day'. You do not need to probe further for day of birth.

Convert the month to a number as you have done before. Enter the number in the space provided. If the month or day contains only one digit, use a leading zero. For example, the month of March is coded as '03'. Note that you are not allowed to enter 'DK' for month or year of birth. You have to obtain month and year of birth of the child.

If the survey is conducted in 2012, the year of birth of the child cannot be earlier than 2007 and if the survey is conducted in 2013, the year of birth of the child cannot be earlier than 2008.

If the mother/primary caretaker is unable to provide the date of birth information, ask whether she/he has any documentation such as an identification card, health card, horoscope, or a birth or baptismal certificate that might give the date of birth of the child. However, confirm with the respondent that the date of birth recorded on such documents is indeed correct.

#### **AG2. HOW OLD IS (*name*)?**

After having obtained the child's date of birth, ask the child's age in completed years, and record in the space provided. Remember, ages must refer to the last birthday. Probe if necessary by asking **"HOW OLD WAS (*name*) AT HIS/HER LAST BIRTHDAY?"**

If the mother/primary caretaker does not know the current age of the child, try asking **"HOW MANY YEARS AGO WAS (*name*) BORN?"** You may help the respondent by relating the child's age to that of other children or to some important event or to the season of birth, by asking, for example, **"HOW MANY WET SEASONS AGO WAS (*name*) BORN?"**

Record age in completed years. Record '0' if the child is less than 1 year old.

**SURVEY COORDINATORS:** DURING TRAINING, PROVIDE INTERVIEWERS THE DATES OF IMPORTANT EVENTS THAT THEY CAN USE AS REFERENCE POINTS IN THE INTERVIEWS. DATES OF RECENT NATURAL DISASTERS, MAJOR POLITICAL INCIDENTS AND RELIGIOUS EVENTS CAN BE VERY USEFUL TO PROBE FOR DATES OF BIRTH, AGES, DURATIONS AND SO FORTH.

SIMILARLY, OTHER PERSONAL IMPORTANT EVENTS FROM RESPONDENT'S PAST CAN BE USED AS REFERENCE POINTS IN THE INTERVIEW AS WELL AS INFORMATION ALREADY GATHERED IN THAT HOUSEHOLD (I.E., HOUSEHOLD ROSTER, IMMUNIZATION CARD, ETC.)

Ask AG1 and AG2 independently. Then, check for consistency between the date of birth and completed age.

You have to be meticulous in checking for the consistency between the date of birth and age. You also have to be fairly quick in doing so. A good interviewer will perform the check without causing a lull in the conversation.

**Checking for consistency between date of birth (AG1) and completed age (AG2).** After having obtained both date of birth and age, check for the consistency between the two. The child's age plus her year of birth must equal the year in which the child had his/her last birthday.

Assuming that you were able to obtain a month and year of birth, you should check the consistency by following these steps:

- If the month of birth is before the month of interview (the child had his/her birthday this year), then her/his age plus her/his year of birth should equal the year of interview.
  - Example: A child who was born in October 2010, in a survey conducted in November 2012, should be age 2 ( $2010 + 2 = 2012$ ).
- If the month of birth is after the month of interview (the child has not yet had his/her birthday this year), then her/his age plus year of birth should equal the previous year.
  - Example: A child who was born in December 2010, in a survey conducted in October 2012, should be age 1 ( $2010 + 1 = 2011$ ).
- If the month of birth is the same as the month of interview, and the day of birth is not known, then a sum of either the current or the previous year is correct.
  - Example: A child born in November 2009, in a survey conducted in November 2012, could be age 3 or age 2. Probe further to see if the date of birth is correct and whether the child has completed age 2 or 3.
- If the month of birth is the same as the month of interview, and the day of birth is known, the sum of age and year of birth should equal the year of interview if the day of birth is before the day of interview, and the sum of age and year of birth should equal the previous year if the day of birth is after the day of interview.
  - Example: A child born on 8 February 2008, in an interview conducted on 15 February 2012, should be age four. A child born on 28 February 2008, in an interview conducted on 3 February 2012, should be age three, since this child will complete 4 full years on 28 February 2012.

If you find that the date of birth and age are inconsistent, either the date of birth or the age, or both, are incorrect, and need to be corrected. Probe, using documents that may be available, dates of well-known events and ages of other children, of the respondent herself/himself, etc.

If after having asked AG1 and AG2, you determine that the child is already 5 years old or more, you must stop the interview because he/she is not eligible anymore. Thank the mother/caretaker for her/his cooperation if she/he does not have other under 5 children. Go back to the Household Listing Form to correct the child age and change, copy the line number information for the child's mother or primary caretaker from HL9 to HL8, correct the number of under 5 children recorded in HH14, and collect schooling information of this child in Education and Child Labour Modules.

## BIRTH REGISTRATION MODULE

### BR1. DOES (*name*) HAVE A BIRTH CERTIFICATE?

**SURVEY COORDINATORS:** PRE-TEST RESULTS SHOULD BE EXAMINED CAREFULLY AND THE QUESTIONS AND THE RESPONSE CATEGORIES SHOULD BE REVISED ACCORDINGLY.

YOU MUST BE SENSITIVE TO LEGAL ISSUES SURROUNDING BIRTH REGISTRATION. IF THERE IS A LEGAL BURDEN ON PARENTS TO REGISTER EVERY BIRTH, AND ESPECIALLY IF SANCTIONS ARE IN PLACE FOR NON-REGISTRATION, IT MAY BE DIFFICULT TO OBTAIN ACCURATE RESPONSES TO THIS QUESTION AS WELL AS THE SUBSEQUENT QUESTIONS.

This question aims to provide an estimate of the extent of birth registration in your country. Respondents must be assured that the information about individual families will never be given to authorities, and that they cannot be identified in any way.

If the answer is yes, ask “**MAY I SEE IT?**” and circle the appropriate corresponding code, noting whether or not the certificate was seen. If the child has a birth certificate and it was seen, circle ‘1’ and go to next module. If the child has a birth certificate but the mother/primary caretaker is unable to show you the certificate, circle ‘2’ and go to next module. If the child does not have a birth certificate ‘3’ or the respondent does not know ‘8’ continue to the next question.

**SURVEY COORDINATORS:** IT IS VERY IMPORTANT THAT THE INTERVIEWER SEES THE CERTIFICATE, IF THERE IS ONE. THIS DOCUMENT CAN ALSO BE USED TO CHECK THE CORRECTNESS OF DATE OF BIRTH AND AGE INFORMATION FOR THE CHILD.

**BR2. HAS (*name*)’S BIRTH BEEN REGISTERED WITH THE CIVIL AUTHORITIES?**

Circle the code corresponding to the response. If the answer is ‘Yes’, go to next module. If the child’s birth has not been registered with civil authorities or the respondent does not know, continue to the next question.

**BR3. DO YOU KNOW HOW TO REGISTER YOUR CHILD’S BIRTH?**

The purpose of this question is to assess how important lack of knowledge (of the process of registering or, if applicable, the place to go to register) may be among the reasons for non-registration. This information can inform advocacy efforts and help in the formulation of education campaigns.

Circle the code corresponding to the response.

**EARLY CHILDHOOD DEVELOPMENT MODULE**

The questions in this module are used to obtain information about the extent to which households provide a supportive and stimulating learning environment. The module includes a mix of questions to obtain information on various aspects of development (physical, social, emotional, language, and cognitive development).

**SURVEY COORDINATORS:** SOCIAL DESIRABILITY RESPONSE BIAS IS A COMMON PROBLEM IN RESEARCH AND REFERS TO THE TENDENCY FOR PEOPLE TO PRESENT A FAVOURABLE IMAGE OF THEMSELVES. THESE BIASED ANSWERS CONFOUND RESEARCH RESULTS BY CREATING FALSE RELATIONSHIPS OR OBSCURING RELATIONSHIPS BETWEEN VARIABLES. SENSITIVE QUESTIONS MAY LEAD RESPONDENTS TO ADJUST THEIR ANSWERS SO AS TO APPEAR POLITICALLY CORRECT OR SOCIALLY ACCEPTABLE. QUESTIONNAIRE ITEMS WITH STRONG SOCIAL NORMS (SUCH AS ADHERENCE TO RELIGIOUS OR CULTURAL EXPECTATIONS), OR ADOPTING ATTITUDES/ACTIVITIES/OBJECTS THAT ARE WIDELY CONSIDERED DESIRABLE OR UNDESIRABLE TEND TO ELICIT “SOCIALLY ACCEPTABLE ANSWERS” RATHER THAN CORRECT AND HONEST ANSWERS.

TO MINIMISE SOCIAL RESPONSE BIAS IT IS VERY IMPORTANT FOR THE INTERVIEWERS TO ADOPT A NON-JUDGEMENTAL ATTITUDE AND TO NOT DISPLAY ANY OF THEIR OWN ATTITUDES, SUCH AS CULTURAL OR RELIGIOUS VALUES.

**EC1. HOW MANY CHILDREN’S BOOKS OR PICTURE BOOKS DO YOU HAVE FOR (*name*)?**

This question asks specifically about children’s books or picture books for the child. This excludes schoolbooks (appropriate for or belonging to older children), as well as other books for adults that are present in the household.

Record the number of books in the space provided. There is no need to make an actual count of books yourself. Rely on the respondent’s answer, and avoid asking to see and count the books yourself, since this is likely to require extra time. If the respondent is unsure about the number of children’s books or picture books and is not able to provide an answer the first time you ask the question, ask her/him if there are more than 10 such books. If yes, circle ‘10’. If she/he says that there are less than 10 such books, probe further to get an exact number. If there are no such books in the household, record ‘00’.

**EC2. I AM INTERESTED IN LEARNING ABOUT THE THINGS THAT (*name*) PLAYS WITH WHEN HE/SHE IS AT HOME. DOES HE/SHE PLAY WITH:**

**[A] HOMEMADE TOYS (SUCH AS DOLLS, CARS, OR OTHER TOYS MADE AT HOME)?**

**[B] TOYS FROM A SHOP OR MANUFACTURED TOYS?**

**[C] HOUSEHOLD OBJECTS (SUCH AS BOWLS OR POTS) OR OBJECTS FOUND OUTSIDE (SUCH AS STICKS, ROCKS, ANIMAL SHELLS OR LEAVES)?**

This question is used to learn about different types of playthings used by the child. We want to know if the child has objects to play with, and what these are, even if they do not include store-bought toys. We are interested in learning about other objects that are used as playthings, such as ordinary household objects and natural materials.

Extra care should be taken to ask this question and record the responses. Experience has shown that respondents find it very easy to give the same answer to a list of different playthings. Often they will answer ‘Yes’ to all items, whether or not it is true, perhaps because they think this is the ‘correct’ response or one that will please the interviewer.

Do not pause after reading the first sentence and continue by saying “**DOES HE/SHE PLAY WITH**” and start asking whether the child plays with playthings from each of the categories listed. For example, ask: “**DOES HE/SHE PLAY WITH HOMEMADE TOYS (SUCH AS DOLLS, CARS, OR OTHER TOYS MADE AT HOME)?**” and so on.

If the respondent answers ‘Yes’ to any of these prompted categories, then probe to learn specifically what the child plays with to ascertain the response. For example, probe by saying “**WHAT DOES HE/SHE SPECIFICALLY PLAY WITH?**” or “**CAN YOU PLEASE GIVE AN EXAMPLE?**” If you ascertain that the child uses playthings that would fall into each of the prompted categories, circle ‘1’. If the child doesn’t play with items mentioned in a specific category, or the respondent doesn’t know circle ‘2’ or ‘8’, for that specific category. Read each category aloud and circle the code corresponding to the response before proceeding to the next category.

**EC3. SOMETIMES ADULTS TAKING CARE OF CHILDREN HAVE TO LEAVE THE HOUSE TO GO SHOPPING, WASH CLOTHES, OR FOR OTHER REASONS AND HAVE TO LEAVE YOUNG CHILDREN. ON HOW MANY DAYS IN THE PAST WEEK WAS (*name*):**

**[A] LEFT ALONE FOR MORE THAN AN HOUR?**

**[B] LEFT IN THE CARE OF ANOTHER CHILD, THAT IS, SOMEONE LESS THAN 10 YEARS OLD, FOR MORE THAN AN HOUR?**

This question is used to assess whether children are at increased risk, either because they are left alone or are left with a child as caregiver. These situations have been shown to be associated with higher risk for children.

The question sets up a hypothetical situation, one in which the mother/primary caretaker would be gone for more than just a moment – situations in which the child could be left alone for an hour or more. The question specifies that we want to know about situations in which the respondent actually leaves the premises, not simply going out of sight of the child, such as to another part or another room of the house.

Enter the response in the spaces provided. If the child was not left in the care of another child during this period, enter '0' for 'None'. Note that 'another child' is defined as a child less than 10 years old.

**EC4. Check AG2: Age of child:**

If the child is 3 or 4 years old, check the appropriate box and continue with EC5. If not (if the child is 0, 1 or 2 years old), check the appropriate box and go to next module.

**EC5. DOES (*name*) ATTEND ANY ORGANIZED LEARNING OR EARLY CHILDHOOD EDUCATION PROGRAMME, SUCH AS A PRIVATE OR GOVERNMENT FACILITY, INCLUDING KINDERGARTEN OR COMMUNITY CHILD CARE?**

This question aims to find out if the child is participating in early learning activities. Baby-sitting or child-minding, even if done in a special place such as a day-care centre, does not qualify as such a programme unless it includes organized learning activities. You must ensure that the mother or primary caretaker understands the meaning of 'Early Childhood Education Programme', explaining it as instructed.

Circle the appropriate code. Skip to EC7 if the answer to this question is 'No' or 'DK'.

**SURVEY COORDINATORS:** SUPPLY APPROPRIATE LOCAL TERMS FOR THESE TYPES OF EDUCATION PROGRAMMES. IF YOU ARE UNSURE OF WHETHER A PROGRAMME QUALIFIES AS AN 'EARLY CHILDHOOD EDUCATION PROGRAMME', CONTACT THE MICS4 REGIONAL COORDINATOR.

**EC6. WITHIN THE LAST SEVEN DAYS, ABOUT HOW MANY HOURS DID (*name*) ATTEND?**

This question is asked if the child is attending an early childhood education programme. Record the estimated number of hours the child attended any organized learning or early childhood education programme in the last 7 days (excluding the day of interview). Use a leading zero if necessary.

**EC7. IN THE PAST 3 DAYS, DID YOU OR ANY HOUSEHOLD MEMBER OVER 15 YEARS OF AGE ENGAGE IN ANY OF THE FOLLOWING ACTIVITIES WITH (*name*):**

Read each items shown below. If 'No', circle 'Y' and move to the next item on the list. If 'Yes', ask: "WHO ENGAGED IN THIS ACTIVITY WITH (*name*)"

For each activity, circle the code for every person who engaged in the activity with the child before proceeding to the next item. If someone other than the mother or father engaged in the activity with the child, circle 'X'. If the respondent is the primary caretaker of the child and has engaged in any of these activities, code 'X' should be circled.

Note that in a household where there are no adults other than the child's mother and father, 'X' should not be circled. Adults who are not members of the household but who may have engaged in the listed activities with the child should not be coded here.

**[A] READ BOOKS OR LOOKED AT PICTURE BOOKS WITH *(name)*?**

**[B] TOLD STORIES TO *(name)*?**

**[C] SANG SONGS TO *(name)* OR WITH *(name)*, INCLUDING LULLABIES?**

**[D] TOOK *(name)* OUTSIDE THE HOME, COMPOUND, YARD OR ENCLOSURE?**

**[E] PLAYED WITH *(name)*?**

**[F] NAMED, COUNTED, OR DREW THINGS TO OR WITH *(name)*?**

**EC8. I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE HEALTH AND DEVELOPMENT OF *(name)* YOUR CHILD. CHILDREN DO NOT ALL DEVELOP AND LEARN AT THE SAME RATE. FOR EXAMPLE, SOME WALK EARLIER THAN OTHERS. THESE QUESTIONS ARE RELATED TO SEVERAL ASPECTS OF YOUR CHILD'S DEVELOPMENT.**

**CAN *(name)* IDENTIFY OR NAME AT LEAST TEN LETTERS OF THE ALPHABET?**

Circle the code corresponding to the response. A 'Yes' answer means that the child can name ten or more letters of the alphabet while a 'No' answer means that the child can name less than ten or none at all.

**EC9. CAN *(name)* READ AT LEAST FOUR SIMPLE, POPULAR WORDS?**

Circle the code corresponding to the response. A 'Yes' response means that the child can read at least four simple, popular words while a 'No' response means that the child can only read one or two, or none at all.

**SURVEY COORDINATORS:** DURING FIELDWORK TRAINING, TOGETHER WITH THE INTERVIEWERS AND OTHER FIELDWORK STAFF, TRY TO CREATE A LIST OF LOCALLY USED SIMPLE AND POPULAR WORDS (FROM POEMS, LULLABIES, OR SONGS). THIS MAY HELP THEM TO GIVE EXAMPLES IF NECESSARY, WHILE ASKING THIS QUESTION.

**EC10. DOES *(name)* KNOW THE NAME AND RECOGNIZE THE SYMBOL OF ALL NUMBERS FROM 1 TO 10?**

Circle the code corresponding to the response. If parent seems hesitant, prompt with "does the child know '1'? Does the child know 2?" etc. A 'Yes' answer means that the child can recognize the symbol of all numbers from 1 to 10 while a 'No' answer means that the child can recognize less than ten or none at all.

**EC11. CAN *(name)* PICK UP A SMALL OBJECT WITH TWO FINGERS, LIKE A STICK OR ROCK FROM THE GROUND?**

Circle the code corresponding to the response. If necessary, use the pen you are holding to demonstrate the grip. Consider the small objects mentioned before when asking about the items children play with (sticks, rocks, animal shells or leaves). A 'Yes' answer means that the child is able

to pick up small objects without difficulty while a 'No' answer means that the child seems to have difficulty with small items.

**EC12. IS (*name*) SOMETIMES TOO SICK TO PLAY?**

Circle the code corresponding to the response. A 'Yes' answer means that the child often gets sick and cannot play or do many physical activities, while a 'No' answer is in cases when the child is consistently ready to be active and play and only appears tired when it is appropriate for him/her to be so (e.g., in the evening; at the usual nap time)

**EC13. DOES (*name*) FOLLOW SIMPLE DIRECTIONS ON HOW TO DO SOMETHING CORRECTLY?**

Circle the code corresponding to the response. A 'Yes' answer means that the child can do things easily and correctly when asked to do so while a 'No' answer means that the child usually does not accomplish the simple tasks she/he is given successfully. Do not concern yourself with the reasons why not.

**EC14. WHEN GIVEN SOMETHING TO DO, IS (*name*) ABLE TO DO IT INDEPENDENTLY?**

Circle the code corresponding to the response. A 'Yes' answer means that the child is able to occupy herself/himself independently for an appropriate length of time, without constant asking for assistance or giving up quickly (e.g., colouring, building structures, etc.) while a 'No' answer means that the child cannot occupy herself/himself independently, asks for help or assistance, or gives up the work/play easily if not provided with help.

**EC15. DOES (*name*) GET ALONG WITH OTHER CHILDREN?**

Circle the code corresponding to the response. A 'Yes' answer means that the child does well playing and interacting with other children while a 'No' answer means that the child is uncomfortable around other children, prefers to be alone, or gets into conflicts.

**EC16. DOES (*name*) KICK, BITE, OR HIT OTHER CHILDREN OR ADULTS?**

Circle the code corresponding to the response. A 'Yes' answer means that the parent has noticed that the child can physically hurt (kick, bite, hit) other children while a 'No' answer means that the child does not do it. Do not concern yourself with what may be the reason of such behaviour (e.g., if parent tries to explain the reasons, or excuse the child).

**EC17. DOES (*name*) GET DISTRACTED EASILY?**

Circle the code corresponding to the response. A 'Yes' answer means that the child has difficulty sticking with/continuing any activity for the necessary length of time, gets easily distracted by anything happening around her/him, or finds other activities before completing the one started while a 'No' answer means that the child doesn't get easily distracted.

**BREASTFEEDING MODULE**

**BF1. HAS (*name*) EVER BEEN BREASTFED?**

This question asks if the child has ever been breastfed. It includes any breastfeeding experience of the child – not necessarily by the mother/primary caretaker.

Circle the code corresponding to the response. Continue to the next question if the child was ever breastfed ('1'). If the child was never breastfed, circle 'No' and skip to BF3. Skip to BF3 in the case of a 'DK' response as well.

**BF2. IS HE/SHE STILL BEING BREASTFED?**

'Being breastfed' is defined as putting the child to the breast at least once a day.

Circle the code corresponding to the response.

The questions BF3-BF18 asks about what the child was fed in the preceding 24 hours. The purpose of these questions is to determine what liquids or foods the child was given. Make sure that the respondent understands the question, particularly what is meant by 'yesterday, during the day or night'.

Circle the code corresponding to the response. If the mother/primary caretaker does not know the answer, repeat the question using other local words for the fluid or food. If the answer is still not known, circle '8' for 'DK'.

Note that for infant formula, milk, yogurt, and solid/semi-solid mushy food, the number of times the child had the food is also asked.

**SURVEY COORDINATORS:** SUPPLY INTERVIEWERS WITH LOCAL TERMS FOR FOODS AND LIQUIDS. IF IT IS COMMON PRACTICE TO FEED CHILDREN LIQUIDS OR FOOD NOT COVERED BY THE ITEMS IN THE QUESTIONNAIRE, REVISE THE TERMS USED IN THESE QUESTIONS.

**BF3. I WOULD LIKE TO ASK YOU ABOUT LIQUIDS THAT (*name*) MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT. I AM INTERESTED IN WHETHER (*name*) HAD THE ITEM EVEN IF IT WAS COMBINED WITH OTHER FOODS? PLEASE INCLUDE LIQUIDS CONSUMED OUTSIDE OF YOUR HOME.**

**DID (*name*) DRINK PLAIN WATER YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response.

**BF4. DID (*name*) DRINK INFANT FORMULA YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response. If the answer is 'No' or 'DK,' skip to BF6.

**BF5. HOW MANY TIMES DID (*name*) DRINK INFANT FORMULA?**

Record the number of times the child had infant formula.

**BF6. DID (*name*) DRINK MILK, SUCH AS TINNED, POWDERED OR FRESH ANIMAL MILK YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response. If the answer is 'No' or 'DK,' skip to BF8.

**BF7. HOW MANY TIMES DID (*name*) DRINK TINNED, POWDERED OR FRESH ANIMAL MILK?**

Record the number of times the child had tinned, powdered or fresh animal milk.

**BF8. DID (*name*) DRINK JUICE OR JUICE DRINKS YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response.

**BF9. DID (*name*) DRINK (*local name for clear broth/clear soup*) YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response.

**BF10. DID (*name*) DRINK OR EAT VITAMIN OR MINERAL SUPPLEMENTS OR ANY MEDICINES YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response.

**BF11. DID (*name*) DRINK ORS (ORAL REHYDRATION SOLUTION) YESTERDAY, DURING THE DAY OR NIGHT?**

Oral Rehydration Solution is a simple and inexpensive solution that can be prepared at home, consisting of sugar, salt, and water and can decrease fluid loss in children with diarrhoea.

Circle the code corresponding to the response.

**BF12. DID (*name*) DRINK ANY OTHER LIQUIDS YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response.

**BF13. DID (*name*) DRINK OR EAT YOGURT YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to BF15.

**BF14. HOW MANY TIMES DID (*name*) DRINK OR EAT YOGURT YESTERDAY, DURING THE DAY OR NIGHT?**

Record the number of times the child had yogurt.

**BF15. DID (*name*) EAT THIN PORRIDGE YESTERDAY, DURING THE DAY OR NIGHT?**

Thin porridges are often the first semi-solid foods given to infants. Any type of thin porridge should be counted here, regardless of main ingredient (for example, it may be grain-based, root/tuber based, etc.). Circle the code corresponding to the response.

**BF16. DID (*name*) EAT SOLID OR SEMI-SOLID (SOFT, MUSHY) FOOD YESTERDAY, DURING THE DAY OR NIGHT?**

Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to BF18.

**BF17. HOW MANY TIMES DID (*name*) EAT SOLID OR SEMI-SOLID (SOFT, MUSHY) FOOD YESTERDAY, DURING THE DAY OR NIGHT?**

Record the number of times the child had solid or semi-solid food.

**BF18. YESTERDAY, DURING THE DAY OR NIGHT, DID (*name*) DRINK ANYTHING FROM A BOTTLE WITH A NIPPLE?**

Circle the code corresponding to the response.

## CARE OF ILLNESS MODULE

These questions aim to find out if the child has recently had diarrhoea or any other illness and, if so, what treatments, drinks and foods the child took during the episode.

**CA1. IN THE LAST TWO WEEKS, HAS (*name*) HAD DIARRHOEA?**

Diarrhoea is determined by the perception of the mother or caretaker, or by three or more loose or watery stools per day, or by blood in stool.

Record the mother's/primary caretaker's answer by circling the corresponding code. If a respondent is not sure what is meant by diarrhoea, tell her/him it means **“THREE OR MORE LOOSE OR WATERY STOOLS PER DAY, OR BLOOD IN THE STOOL.”** Make sure the respondent understands what is meant by ‘in the last 2 weeks’. If the child has not had diarrhoea in the last 2 weeks or the caretaker doesn't know, skip to CA7.

**CA2. I WOULD LIKE TO KNOW HOW MUCH (NAME) WAS GIVEN TO DRINK DURING THE DIARRHOEA (INCLUDING BREASTMILK). DURING THE TIME (*name*) HAD DIARRHOEA, WAS HE/SHE GIVEN LESS THAN USUAL, ABOUT THE SAME AMOUNT, OR MORE THAN USUAL?**

If dehydrated, a child may take more fluids than usual. We want to know if the pattern of fluid consumption changed during diarrhoea. The focus in this question is on how much fluid was actually consumed by the child.

Ask the question just as it is worded here. Read out the entire question and circle the appropriate code for the caretaker's response. Get the respondent's best judgement of the relative amount of total fluids actually consumed by the child. All fluids are included, not just special ones given during diarrhoea. For example, water, tea, fruit juice, breastmilk and formula are included as well as special fluids such as ORS.

If the child was given less drink than usual during the diarrhoea, probe: **“WAS HE/SHE GIVEN MUCH LESS THAN USUAL TO DRINK, OR SOMEWHAT LESS?”**

Try to find out what actually happened, not what the respondent thinks ought to have happened. An answer such as, “A child with diarrhoea (or ‘a child who is ill’) needs more fluids” is not satisfactory. You would need to ask, **“BUT HOW MUCH DID YOUR CHILD ACTUALLY DRINK DURING THIS DIARRHOEA?”**

It may be difficult to estimate the relative amount of breastmilk taken by the child. The respondent may make an estimate based on whether the child nursed longer or more frequently.

**CA3. DURING THE TIME (*name*) HAD DIARRHOEA, DID HE/SHE EAT LESS THAN USUAL, ABOUT THE SAME AMOUNT, MORE THAN USUAL, OR NOTHING TO EAT?**

During an episode of diarrhoea or other illness, a child may change the amount usually eaten. The focus in this question is on how much food was actually consumed by the child.

Ask the question just as it is worded here. Read out the entire question and circle the code corresponding to the caretaker's response. Get the caretaker's best judgement of the relative amount of total food actually consumed by the child.

Try to find out what actually happened, not what the caretaker thinks ought to have happened. An answer such as, “A child with diarrhoea (or ‘a child who is ill’) needs more food” is not satisfactory. You would need to ask, **“BUT HOW MUCH DID YOUR CHILD ACTUALLY EAT DURING THIS DIARRHOEA?”**

If the caretaker replies that the child took only fluids (that is, the child did not ‘eat’), circle ‘5’ for ‘Stopped food’. If the child was given less than usual to eat during the diarrhoea, probe: **“WAS HE/SHE GIVEN MUCH LESS THAN USUAL TO EAT, OR SOMEWHAT LESS?”**. Then circle the appropriate code. If the mother/primary caretaker offered more food than usual, but the child ate much less, the answer is ‘much less’; circle ‘1’.

Make sure that the respondent understands that this includes breastmilk, if the child is still being breastfed. If the child is very young and the caretaker replies that he/she takes only fluids or breastmilk (that is, has not started ‘eating’ yet), there is no need to probe, since ‘drinking’ and ‘eating’ count as the same for this child. Circle the answer for this question (eating) that comes closest to the answer you circle for CA4 (drinking).

**CA4. DURING THE EPISODE OF DIARRHOEA, WAS (*name*) GIVEN TO DRINK ANY OF THE FOLLOWING:**

**SURVEY COORDINATORS:** ADAPT TO INCLUDE THE COUNTRY-SPECIFIC TERMS USED FOR THE ORAL REHYDRATION SOLUTION (ORS) PACKET, RECOMMENDED HOME FLUID, AND PRE-PACKAGED ORS FLUID.

ADAPT LOCALLY TO INCLUDE THE COUNTRY-SPECIFIC RECOMMENDED HOME FLUIDS. INGREDIENTS PROMOTED BY THE GOVERNMENT FOR MAKING THE RECOMMENDED HOME FLUIDS SHOULD BE REFLECTED IN SEPARATE CATEGORIES OF ‘GOVERNMENT-RECOMMENDED HOMEMADE FLUID’.

IF NO PRE-PACKAGED ORS EXISTS IN THE COUNTRY, DELETE THIS CATEGORY.

We want to know if and what type of oral rehydration solution (ORS) the child took during the last episode of diarrhoea.

Ask each question separately: **“WAS (*name*) GIVEN A FLUID MADE FROM A SPECIAL PACKET CALLED (*local name for ORS packet solution*)?, WAS (*name*) GIVEN A PRE-PACKAGED ORS FLUID FOR DIARRHOEA?”** and so forth. Read each item aloud and circle the code corresponding to the response before proceeding to the next item.

- [A] A FLUID MADE FROM A SPECIAL PACKET CALLED (*local name for ORS packet solution*)?**
- [B] A PRE-PACKAGED ORS FLUID FOR DIARRHOEA?**
- [C] (*Government-recommended homemade fluid X*)?**
- [D] (*Government-recommended homemade fluid Y*)?**
- [E] (*Government-recommended homemade fluid Z*)?**

**CA5. WAS ANYTHING (ELSE) GIVEN TO TREAT THE DIARRHOEA?**

This question asks the mother or caretaker whether the child received any (other) treatment for diarrhoea other than those mentioned in CA4 for this episode of diarrhoea. If in CA4 you learned that the child was given fluid from an ORS packet, sugar and salt solution, or pre-packaged ORS fluid, then phrase CA5 by saying, “Was anything else given to treat the diarrhoea?” If none of the liquids was given, ask CA5 by saying, “Was anything given to treat the diarrhoea?”

Circle the code corresponding to the answer given. If the response is 'Yes', continue to CA6 to learn the type of treatment given. If the child was not given anything (else) for the diarrhoea or the respondent doesn't know, skip to CA7.

**CA6. WHAT (ELSE) WAS GIVEN TO TREAT THE DIARRHOEA?**

If you learn in CA5 that the child was given something to treat the episode of diarrhoea, ask CA6 to identify what the mother or anyone else may have given the child. After recording a treatment, ask the respondent whether "ANYTHING ELSE" was given, but do so without implying that something else should have been given. Record all treatments given. Write brand name(s) of all medicines mentioned.

Antimotility means anti-diarrhoea. Make the difference between antibiotic and non antibiotic treatment. If the mother/care taker doesn't know ask to see the package of the medicine.

**CA7. AT ANY TIME IN THE LAST TWO WEEKS, HAS (*name*) HAD AN ILLNESS WITH A COUGH?**

Illness with a cough means a cold or other acute respiratory illness with a cough.

Circle the code corresponding to the response given. If the respondent says "He coughs all the time," or "She's been coughing for months," do not count this as an 'illness with a cough' since it is a chronic problem. If the answer is 'No' or 'DK', circle the appropriate code and go to CA14. If the symptoms started before but continued into the 2-week period, this counts as 'Yes'.

**CA8. WHEN (*name*) HAD AN ILLNESS WITH A COUGH, DID HE/SHE BREATHE FASTER THAN USUAL WITH SHORT, RAPID BREATHS OR HAVE DIFFICULTY BREATHING?**

**SURVEY COORDINATORS:** SOME SOCIETIES HAVE SPECIFIC WORDS FOR RAPID BREATHING. IN NORTHEAST BRAZIL, FOR EXAMPLE, 'CANSEIRA' – MEANING 'TIREDNESS' – IS SPECIFICALLY IDENTIFIED WITH THIS SYMPTOM. YOU SHOULD ESTABLISH A LIST OF CULTURALLY APPROPRIATE WORDS FOR RAPID BREATHING.

The question aims to find out if the child has or had an illness requiring assessment by a health professional.

If the respondent asks "What do you mean by 'fast breathing'?" you may say "NOTICEABLY FASTER THAN NORMAL WHEN THE CHILD IS RESTED." If the respondent asks "What do you mean by 'difficulty breathing'?" you may say "THE CHILD SOUNDED/LOOKED AS IF HE/SHE WAS HAVING TROUBLE BREATHING." You may give other explanations that were developed and tested during the adaptation and pre-testing of the questionnaire. Circle the code corresponding to the response. If the answer is 'Yes', continue to the next question. Otherwise, skip to CA14.

**CA9. WAS THE FAST OR DIFFICULT BREATHING DUE TO A PROBLEM IN THE CHEST OR A BLOCKED OR RUNNY NOSE?**

This question aims to find out if the problem needs assessment by a health professional, which does not include a simple cold.

Circle the code corresponding to the caretaker's response. If the symptoms were from a 'Blocked or runny nose only', skip to CA14. If the symptoms were due to 'Other' reasons, write the respondent's description in the line provided, circle '6' and skip to CA14. Otherwise, continue to the next question.

**CA10. DID YOU SEEK ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE?**

'Seeking care outside the home' means going outside the family or household for advice or treatment. Seeking care could include anything from asking a neighbour for advice, to holding a religious ceremony on the child's behalf, to going to a hospital. If a physician or other provider visits the household to give care, this counts as seeking care outside the home. The child may or may not have accompanied the respondent when he/she sought care. For example, going to buy medicine without the child counts as seeking care.

Circle the code corresponding to the response given. If the answer is 'Yes', continue to the next question. Otherwise, skip to CA12.

**CA11. FROM WHERE DID YOU SEEK ADVICE OR TREATMENT?**

After the first reply, probe by asking: "ANYWHERE ELSE?" until all providers are mentioned. However, do not suggest or prompt any answers. Circle the code for every provider mentioned.

The intent of this question is to identify the source of care. If the source of care is a hospital, health centre or clinic, ask whether the place is in the public (run by the government) or private sector. If the source is in the public sector, but is not one of the pre-coded choices, write the description in the space provided for 'Other public' and circle 'H'. Similarly, if the source is in the private medical sector, but is not one of the pre-coded choices, write the description in the space provided for 'Other private medical' and circle 'O'. If you are unable to determine whether public or private, write the name of the place in the space provided on the questionnaire 'Name of place' and tell your supervisor. Your supervisor will learn from other people in the community whether the place is public or private and then circle the code corresponding to the response.

If the respondent answers that he/she sought care from another place not listed, write the description of the place in the space provided for 'Other' and circle 'X'. Places that are not health facilities, other than home, should also be coded as 'Other' and described.

**CA12. WAS (*name*) GIVEN ANY MEDICINE TO TREAT THIS ILLNESS?**

Circle the appropriate code. If the answer is 'Yes', continue to the next question. Otherwise, go to CA14.

**CA13. WHAT MEDICINE WAS (*name*) GIVEN?**

This question aims to determine whether the child was given an antibiotic for the illness. More than one medicine may have been administered to the child. After the first reply, probe by asking: "ANY OTHER MEDICINE?" until all medicines are mentioned. Circle the codes corresponding to all medicines given.

**SURVEY COORDINATORS:** THE RESPONDENT MAY NOT KNOW THE NAME OF THE MEDICINE OR WHETHER IT WAS AN ANTIBIOTIC OR ANOTHER MEDICINE. TALK TO EXPERTS AND COLLECT INFORMATION ON THE TYPE OF ANTIBIOTICS COMMONLY USED IN THE COUNTRY BEFORE YOU CUSTOMIZE YOUR QUESTIONNAIRE. DEVELOP THE RESPONSE CATEGORIES TO THIS QUESTION TO INCLUDE LOCALLY USED

ANTIBIOTICS. DURING THE PRE-TEST, FIND OUT WHETHER THERE ARE OTHER CATEGORIES THAT NEED TO BE INCLUDED.

DEPENDING ON THE NUMBER OF DIFFERENT BRANDS USED IN THE COUNTRY, PROVIDE LISTS OF ANTIBIOTICS OR OTHER MEDICINES TO INTERVIEWERS. IF NECESSARY, PROVIDE THEM WITH SAMPLE PACKAGES OR PHOTOS OF PACKAGES OF ANTIBIOTICS AND OTHER MEDICINES. THESE MAY BE USED BY INTERVIEWERS DURING INTERVIEWS TO ASK RESPONDENTS TO IDENTIFY THE ONE(S) GIVEN TO THE CHILD.

If the respondent does not know the name of the medicine, ask him/her to show you the medicines. If he/she cannot show the packaged medicine, follow the guidelines provided to you during training.

If the respondent names a medicine that is not listed, circle 'X' for 'Other' medicine and fill in the name of the medicine in the space provided.

If you cannot determine the type of medicine given to the child with a cough, circle 'Z' for 'DK'.

**CA14. Check AG2: Child aged under 3?**

CA14 is used to filter out children aged 3 and 4 years, since the next question is to be asked only of children under age three. Check AG2; if the child is under three (he/she is 0, 1 or 2 years old), mark the box corresponding to 'Yes' and continue with the next question. If the child is not under three (she/he is 3 or 4), mark the box corresponding to 'No' and go to next module.

**CA15. THE LAST TIME (*name*) PASSED STOOLS, WHAT WAS DONE TO DISPOSE OF THE STOOLS?**

The purpose of this question is to know what was done with the most recent stools passed by the child in the household. The safe disposal of children's stools is of particular importance because children's stools are the most likely cause of faecal contamination to the immediate household environment. Correct disposal of stools is linked with lower risks of diarrhoea.

Respondents are asked where they usually dispose of their children's stools if the child did not use the toilet facility. Circle the most appropriate code.

If the respondent states that diapers are used, then probe to establish how the diapers are disposed of.

**MALARIA MODULE**

Most children living in areas with malaria experience their first malaria infections during the first year or two of life, when they have not yet acquired adequate clinical immunity. In these young children, the disease can progress rapidly to severe malaria and death. About 90 per cent of deaths due to malaria are among children under 5 years of age. The World Health Organization recommends that all children under age five be presumptively treated with anti-malarial medication within 24 hours of the onset of fever to prevent severe malaria and death.

**ML1. IN THE LAST TWO WEEKS, HAS (*name*) BEEN ILL WITH A FEVER AT ANY TIME?**

Fever is a symptom of malaria, and in areas where malaria is prevalent, mothers are advised to take action to treat for malaria as soon as fever begins.

Circle the code corresponding to the answer given. Circle the code corresponding to 'Yes' only if the child has been ill with a fever at any time in the 2 weeks prior to the date of the interview. If the child has not been ill with a fever or the respondent doesn't know, go to next module.

**ML2. AT ANY TIME DURING THE ILLNESS, DID (*name*) HAVE BLOOD TAKEN FROM HIS/HER FINGER OR HEEL FOR TESTING?**

Circle the code corresponding to the response given.

**ML3. DID YOU SEEK ANY ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE?**

Circle the code corresponding to the answer given. If the respondent did not seek any advice or treatment from any source or doesn't know, skip to ML8.

**ML4. WAS (*name*) TAKEN TO A HEALTH FACILITY DURING THIS ILLNESS?**

Circle the code corresponding to the answer given. If the child was not taken to a health facility or if the mother/primary caretaker does not know, skip to ML9.

**ML5. WAS (*name*) GIVEN ANY MEDICINE FOR FEVER OR MALARIA AT THE HEALTH FACILITY?**

Circle the code corresponding to the answer given. If the child was not given any medicine for the fever or malaria that was provided or prescribed at a health facility, or if the mother/primary caretaker does not know, skip to ML7.

**ML6. WHAT MEDICINE WAS (*name*) GIVEN?**

**SURVEY COORDINATORS:** DEVELOP CATEGORIES TO INCLUDE LOCALLY USED MEDICINES AND THEN PRE-TEST. GIVE INTERVIEWERS SAMPLE PACKAGES OF COMMONLY USED ANTI-MALARIALS AND OTHER MEDICINES, OR PRINT PHOTOGRAPHS OF PACKAGES TO GIVE TO INTERVIEWERS. THIS MIGHT HELP RESPONDENTS REMEMBER THE MEDICATION GIVEN TO THE CHILD.

Circle the codes corresponding to all medicines taken by the child to treat the fever, both anti-malarials and other types of medicines such as acetaminophen that were provided or prescribed at the health facility. Write brand name(s) of all medicines, if given.

After the first reply, probe by asking: "ANY OTHER MEDICINE?" until all medicines are mentioned.

If the respondent cannot remember the names of all the medicines the child took, use the following approach to probe for the correct names of the anti-malarial and other types of medicines taken:

- (1) Ask to see the package of leftover medicines; some households keep popular anti-malarial and other medicines at home.
- (2) Show the respondent a sample of each common anti-malarial – from both public and private sources – in the original packages, in case some respondents remember the containers.
- (3) Use common brand names when asking the respondent about anti-malarial medicines.

If the medicine is an anti-malarial but is not listed, circle 'H' and fill in the name in the space provided. If the medicine is another type of medicine, but is not listed, circle 'X' and fill in the name in the space provided. If the mother/primary caretaker still doesn't know, circle 'Z'.

**ML7. WAS (*name*) GIVEN ANY MEDICINE FOR THE FEVER OR MALARIA BEFORE BEING TAKEN TO THE HEALTH FACILITY?**

Circle the code corresponding to the answer given. If the response is ‘Yes’, skip to ML9 to learn the type of medicine given. If the child did not take any medicine for the fever or malaria before being taken to the health facility or the respondent doesn’t know, skip to ML10.

Note that all response categories to this question skip ML8, to go to either ML9 or ML10.

**ML8. WAS (*name*) GIVEN MEDICINE FOR FEVER OR MALARIA DURING THIS ILLNESS?**

This question is only asked if the respondent did not seek advice or treatment for the illness from any source (ML3 = 2 or 8).

Circle the code corresponding to the answer given. If the child was not given any medicine for the fever or malaria during this illness or the respondent does not know, circle the appropriate code and skip to ML10. Otherwise, continue to the next question.

**ML9. WHAT MEDICINE WAS (*name*) GIVEN?**

**SURVEY COORDINATORS:** DEVELOP CATEGORIES TO INCLUDE LOCALLY USED MEDICINES AND THEN PRE-TEST. GIVE INTERVIEWERS SAMPLE PACKAGES OF COMMONLY USED ANTI-MALARIALS AND OTHER MEDICINES, OR PRINT PHOTOGRAPHS OF PACKAGES TO GIVE TO INTERVIEWERS. THIS MIGHT HELP RESPONDENTS REMEMBER THE MEDICATION GIVEN TO THE CHILD.

Circle the codes corresponding to all medicines taken by the child to treat the fever, both anti-malarials and other types of medicines such as acetaminophen given during this illness. Write brand name(s) of all medicines, if given.

After the first reply, probe by asking: “**ANY OTHER MEDICINE?**” until all medicines are mentioned.

If the respondent cannot remember the names of all the medicines the child took, use the following approach to probe for the correct names of the anti-malarial or other types of medicines taken:

- (1) Ask to see the package of leftover medicines; some households keep popular anti-malarial and other medicines at home.
- (2) Show the respondent a sample of each common anti-malarial – from both public and private sources – in the original packages, in case some respondents remember the containers.
- (3) Use common brand names when asking the respondent about anti-malarial medicines.

If the medicine is an anti-malarial but is not listed, circle ‘H’ and fill in the name in the space provided. If the medicine is another type of medicine, but is not listed, circle ‘X’ and fill in the name in the space provided. If the mother/primary caretaker still doesn’t know, circle ‘Z’.

**ML10. Check ML6 and ML9: Anti-malarial mentioned (codes A - H)?**

If an anti-malarial was mentioned either in ML6 or ML9 (codes A-H), check the box marked ‘Yes’ and continue to the next question. If ‘No’, check the corresponding box and go to next module.

**ML11. HOW LONG AFTER THE FEVER STARTED DID (*name*) FIRST TAKE (*name of anti-malarial from ML6 or ML9*)?**

This question asks about the time interval between the beginning of the child's fever and when he/she took the first dose of an anti-malarial medicine to treat the fever.

If multiple anti-malarial medicines are mentioned in ML6 or ML9, name all anti-malarials mentioned. Record the code for the day on which an anti-malarial was given for the first time. If he/she started taking (the anti-malarial) the same day the fever started, circle '0' for 'Same day'. If the anti-malarial was first given the next day (the day after the fever began), circle '1' for 'Next day' and so on. If the respondent does not know how long after the fever started the child first took the anti-malarial, circle '8'.

**IMMUNIZATION MODULE**

**SURVEY COORDINATORS:** PROCEDURES FOR COMPLETING THIS MODULE ARE SOMEWHAT MORE COMPLICATED THAN MOST OTHER MODULES IN THE MICS4 QUESTIONNAIRES. MAKE SURE TO HAVE INTERVIEWERS PRACTISE THE ADMINISTRATION OF THE MODULE DURING TRAINING BY USING REAL VACCINATION CARDS. READING AND UNDERSTANDING VACCINATION CARDS USUALLY REQUIRES CONSIDERABLE PRACTICE.

This module is used to obtain information for children under five who have received BCG, DPT3, OPV3, measles and other immunizations.

**SURVEY COORDINATORS:** YOU SHOULD COLLECT INFORMATION ON A NUMBER OF ISSUES REGARDING IMMUNIZATION IN YOUR COUNTRY. SPECIFICALLY YOU SHOULD:

1. OBTAIN CHILD IMMUNIZATION CARDS USED IN YOUR COUNTRY, AND ADAPT THE MODULE ACCORDINGLY.
2. OBTAIN THE MOST RECENT NATIONAL IMMUNIZATION SCHEDULE FOR CHILDREN, AND REFLECT THE SCHEDULE IN THE MODULE.
3. FIND OUT IF ANY IMMUNIZATION CAMPAIGNS (FOR EXAMPLE, NATIONAL IMMUNIZATION DAYS FOR POLIO, MEASLES CAMPAIGNS, OTHER CAMPAIGNS SUCH AS YELLOW FEVER) WERE CARRIED OUT IN THE PREVIOUS YEAR.

BASED ON THIS INFORMATION, YOU SHOULD ADAPT THE IMMUNIZATION MODULE TO YOUR COUNTRY, REFLECTING COMBINATIONS OF VACCINES IF NECESSARY (HEPB1 OR DPTHEB1, FOR INSTANCE), OMITTING 'EXTRA' ANTIGENS IF NOT INCLUDED IN THE IMMUNIZATION SCHEDULE (SUCH AS YELLOW FEVER), OMITTING VITAMIN A, REFLECTING THE IMMUNIZATION SCHEDULE TO THE QUESTIONS (SUCH AS CHANGING THE APPROPRIATE AGE RECOMMENDED FOR MEASLES AND YELLOW FEVER VACCINES), OR ADDING OTHER VACCINES (SUCH AS H1B).

**IM1. DO YOU HAVE A CARD WHERE (*name*)'S VACCINATIONS ARE WRITTEN DOWN? (If yes) MAY I SEE IT PLEASE?**

If the respondent reports that there is a vaccination card for the child, ask to see it. You should have obtained vaccination cards at the beginning of the interview. If you did not already obtain the card for the child, now is the time to ask for it again.

In some cases, the respondent may not be willing to take time to look for the vaccination card, thinking that you are in a hurry. Encourage the respondent to look for the vaccination card for the

child. It is critical to obtain written documentation of the child's immunization history. Therefore, be patient if the respondent needs to search for the card.

If the respondent does not have a vaccination card but the vaccine doses are registered in another document (for example, a booklet with records of clinic visits), ask to see it. If the card or other document is seen, circle '1' and skip to IM3. If the child has a vaccination card or other document but the respondent is unable to show you, circle '2' and skip to IM6 – you will be asking the respondent to recall the child's vaccinations. If the respondent does not have a vaccination card or any other document where the vaccine doses are registered for the child, circle '3' and continue to next question.

**IM2. DID YOU EVER HAVE A VACCINATION CARD FOR (name)?**

Circle the code corresponding to the answer given and skip to IM6.

**IM3.**

You will complete question IM3 when respondents show you the vaccination card for the child:

- Copy the dates in the spaces provided for IM3 for each type of immunization dose recorded on the card or document.
- If the card shows only part of the date, record '98' for 'DK' in the column for which the information is not given. For example, if the date given was July 2008, you would record '98' for 'Day', '07' for 'Month', and '2008' for 'Year'.
- If the card shows that a vaccination was administered but the date is not specified, write '44' in the day column, and leave the month and year columns blank.
- However, if a date is given for a DPT vaccination and there is simply a check to show that a polio vaccine was also given, record the date of the DPT injection on the polio line since this probably indicates that the vaccinations were given on the same day.
- For any vaccine listed in the module, if there is no information on the vaccination card showing that the vaccine was administered, leave the rows for this vaccine blank.

Remember that vaccines may be listed on the card in a different order than the one that appears on the questionnaire. Be sure to check the card carefully because sometimes the month may be listed first, sometimes the day. Be careful to record the dates correctly.

**SURVEY COORDINATORS:** IF THE COMMON PRACTICE IN THE COUNTRY FOR RECORDING THE DATES IS DIFFERENT THAN THE FORMAT USED HERE (DD/MM/YYYY), YOU MAY CHANGE THE ORDER FOR DATES (i.e., MM/DD/YYYY).

Besides recording vaccination dates on the card, some health facilities may also record the dates (appointments) that children should be brought in for their next immunizations. Be very careful not to record a scheduled appointment date as a vaccination date. It is possible that an appointment date was given, but the child never received the vaccination. Only record dates that vaccinations were actually given, and not date of appointments. Be patient and read the card thoroughly. It is very important that you copy the information on administered vaccinations on the card to the questionnaire accurately.

After you have completed transferring the information from the card to the questionnaire, proceed with question IM4.

**IM4. Check IM3: Are all vaccines (BCG to Yellow Fever) recorded?**

If all vaccines are recorded check the box marked 'Yes' and go to IM18. If 'No', check the corresponding box and continue with the next question.

**IM5. IN ADDITION TO WHAT IS RECORDED ON THIS CARD, DID (name) RECEIVE ANY OTHER VACCINATIONS – INCLUDING VACCINATIONS RECEIVED IN CAMPAIGNS OR IMMUNIZATION DAYS?**

It is possible that some of the vaccinations received by the child were not recorded. For example, the respondent may have forgotten to bring the card to the health facility or the respondent may have taken the child to a National Immunization Day.

If the answer is 'Yes', circle '1' only if the respondent mentions vaccines included in the questionnaire. You can refer to the information already obtained from the vaccination card to make sure that the mother/primary caretaker is referring only to these vaccines. Write '66' in the corresponding 'Day' column for IM3, and leave the month and year columns blank. For example, if two doses of DPT were recorded on the card, and another dose was given but not recorded, there should be '66' in the 'Day' column.

Do not ask the respondent to supply dates from memory. Enter a date only if the card or other document is available and lists a date for the immunization dose.

Once you have probed for any other vaccination, skip to IM18.

Questions IM6 through IM17 are asked only to mothers/primary caretakers of children who do not have vaccination cards, or those children for whom vaccination cards were not shown.

**IM6. HAS (name) EVER RECEIVED ANY VACCINATIONS TO PREVENT HIM/HER FROM GETTING DISEASES, INCLUDING VACCINATIONS RECEIVED IN A CAMPAIGN OR IMMUNIZATION DAY?**

Only ask IM6-IM17 to obtain the child's vaccination status if a vaccination card or other document is not available (that is, if the answer to IM1 was '2' for 'Yes, not seen' or '3' for 'No card'). Describe the vaccination techniques in detail to the caretaker and provide further explanations if needed. When mentioning the vaccines or the specific diseases, use local synonyms if needed. We are not interested in injections for treating a disease – antibiotics, anti-malarials, etc. – but only in vaccines.

Circle the code corresponding to the response. If the answer is 'Yes', continue to the next question, to start asking about each of the vaccines. If the answer is 'No' or 'DK', skip to IM18.

**IM7. HAS (name) EVER RECEIVED A BCG VACCINATION AGAINST TUBERCULOSIS – THAT IS, AN INJECTION IN THE ARM OR SHOULDER THAT USUALLY CAUSES A SCAR?**

**SURVEY COORDINATORS:** ADAPT LOCALLY, USING THE MOST COMMON VACCINATION SITE AND SCHEDULE USED IN THE COUNTRY.

Circle the code corresponding to the response.

**IM8. HAS (*name*) EVER RECEIVED ANY ‘VACCINATION DROPS IN THE MOUTH’ TO PROTECT HIM/HER FROM GETTING DISEASES – THAT IS, POLIO?**

Circle the code corresponding to the response. If the answer is ‘Yes’, continue to the next question. If the answer is ‘No’ or ‘DK’, skip to IM11.

**IM9. WAS THE FIRST POLIO VACCINE RECEIVED IN THE FIRST TWO WEEKS AFTER BIRTH OR LATER?**

Ask if the first polio vaccine was received in the first two weeks after birth or later. Circle the code corresponding to the response.

**IM10. HOW MANY TIMES WAS THE POLIO VACCINE RECEIVED?**

Fill in the number in the space provided.

**IM11. HAS (*name*) EVER RECEIVED A DPT VACCINATION – THAT IS, AN INJECTION IN THE THIGH OR BUTTOCKS – TO PREVENT HIM/HER FROM GETTING TETANUS, WHOOPING COUGH, OR DIPHTHERIA?**

**SURVEY COORDINATORS:** ADAPT LOCALLY, USING THE MOST COMMON VACCINATION SITE AND SCHEDULE USED IN THE COUNTRY.

Circle the code corresponding to the response. If the answer is ‘Yes’, continue to the next question. If ‘No’ or ‘DK’, skip to IM13.

**IM12. HOW MANY TIMES WAS A DPT VACCINE RECEIVED?**

Fill in the number in the space provided.

**IM13. HAS (*name*) EVER BEEN GIVEN HEPATITIS B VACCINATION – THAT IS, AN INJECTION IN THE THIGH OR BUTTOCKS – TO PREVENT HIM/HER FROM GETTING HEPATITIS B?**

**SURVEY COORDINATORS:** ADAPT LOCALLY, USING THE MOST COMMON VACCINATION SITE AND SCHEDULE USED IN THE COUNTRY.

Circle the code corresponding to the response. If the answer is ‘Yes’, continue to the next question. If ‘No’ or ‘DK’, skip to IM16.

**IM14. WAS THE FIRST HEPATITIS B VACCINE RECEIVED WITHIN 24 HOURS AFTER BIRTH, OR LATER?**

Ask if the first hepatitis B vaccine was received within 24 hours after birth or later. Circle the code corresponding to the response.

**IM15. HOW MANY TIMES WAS A HEPATITIS B VACCINE RECEIVED?**

Fill in the number in the space provided.

**IM16. HAS (*name*) EVER RECEIVED A MEASLES INJECTION OR AN MMR INJECTION – THAT IS, A SHOT IN THE ARM AT THE AGE OF 9 MONTHS OR OLDER – TO PREVENT HIM/HER FROM GETTING MEASLES?**

**SURVEY COORDINATORS:** MEASLES VACCINE IS NORMALLY GIVEN AS AN INJECTION IN THE ARM AT THE AGE OF 9 MONTHS. IN SOME COUNTRIES, SOME CHILDREN MAY RECEIVE IT AS AN INJECTION IN THE THIGH. IN SOME COUNTRIES, MEASLES VACCINE IS ADMINISTERED AT 12 OR 15 MONTHS OF AGE. THE

APPROPRIATE AGE FOR AND LOCATION OF THE INJECTION SHOULD BE ADAPTED TO THE RECOMMENDATIONS FOR THE MEASLES VACCINATION IN YOUR COUNTRY.

Circle the code corresponding to the response. If the caretaker specifically mentions measles vaccine but refers to an injection in the thigh, accept the answer as valid and circle '1' for 'Yes'.

**IM17. HAS (*name*) EVER RECEIVED THE YELLOW FEVER VACCINATION – THAT IS, A SHOT IN THE ARM AT THE AGE OF 9 MONTHS OR OLDER – TO PREVENT HIM/HER FROM GETTING YELLOW FEVER?**

**SURVEY COORDINATORS:** THIS IS AN OPTIONAL QUESTION FOR USE IN COUNTRIES AFFECTED BY YELLOW FEVER. THE AGE SHOULD BE ADAPTED TO THE APPROPRIATE AGE RECOMMENDED FOR YELLOW FEVER VACCINATION. ALSO ADAPT LOCALLY TO REFERENCE THE MOST COMMON VACCINATION SITE.

Probe by indicating that the yellow fever vaccine is sometimes given at the same time as the measles vaccine. Circle the code corresponding to the response.

**IM18. HAS (*name*) RECEIVED A VITAMIN A DOSE LIKE (THIS/ANY OF THESE) WITHIN THE LAST 6 MONTHS?**

This question asks if the child has received a vitamin A supplement.

Show the capsule or dispenser you were given to help the caretaker remember. You may be instructed to show different capsules, 100,000 IU for children 6-11 months old and 200,000 IU for children 12-59 months old, asking the caretaker to identify the correct one. Circle the code corresponding to the response. If the child has never received a vitamin A supplement or the mother/caretaker does not know if he/she has ever received one, continue with the next question.

**IM19. PLEASE TELL ME IF (*name*) HAS PARTICIPATED IN ANY OF THE FOLLOWING CAMPAIGNS, NATIONAL IMMUNIZATION DAYS AND/OR VITAMIN A OR CHILD HEALTH DAYS.**

**SURVEY COORDINATORS:** YOU MUST INSERT THE DATES AND TYPES OF VACCINATION GIVEN IN THE MOST RECENT NATIONAL IMMUNIZATION DAY CAMPAIGNS IN YOUR COUNTRY. IF POSSIBLE, INCLUDE THE SEASON IN WHICH EACH NATIONAL IMMUNIZATION DAY CAMPAIGN TOOK PLACE, BECAUSE SOME RESPONDENTS MAY NOT BE ABLE TO IDENTIFY A PRECISE DATE.

This question is asked to provide information about immunization programmes. It also provides a check on IM4 for children with a vaccination card, since doses given in National Immunization Days are usually not recorded on the card.

Circle the code corresponding to the response. If the respondent answers 'Yes' here to at least one of the dates, check back to IM5. If the answer given there (to IM5) was 'No', ask again.

**SURVEY COORDINATORS:** IN SOME COUNTRIES, VACCINATION CARDS MAY BE KEPT ONLY AT HEALTH FACILITIES, AND NOT GIVEN TO MOTHERS/PRIMARY CARETAKERS. IF SO, YOU SHOULD MAKE ARRANGEMENTS TO HAVE FIELDWORK TEAMS VISIT HEALTH FACILITIES TO COLLECT THIS INFORMATION.

SPECIFICALLY, INTERVIEWERS SHOULD ADMINISTER THE MODULE TO MOTHERS/PRIMARY CARETAKERS, CIRCLING '2' FOR IM1 IN SUCH CASES, AND ASKING QUESTIONS IM5-IM17 TO OBTAIN THE RECALL INFORMATION IN IMMUNIZATIONS.

PRINT AND GIVE FIELDWORK TEAMS IMMUNIZATION FORMS, REPLICATING THE MODULE UP TO IM4 (EXCLUDING). FIELDWORK TEAMS SHOULD VISIT THE HEALTH FACILITY WHERE VACCINATION CARDS ARE KEPT, IDENTIFY THE CARDS FOR CHILDREN INCLUDED IN THE SURVEY, AND FILL OUT THE FORM ACCORDING TO INFORMATION ON THE CARD.

MAKE SURE TO INCLUDE, AT THE TOP OF THE PAGE, IDENTIFICATION INFORMATION THAT WILL LATER ALLOW YOU TO MATCH THE VACCINATION FORMS WITH THE QUESTIONNAIRES – QUESTIONS UF1 TO UF8.

IF YOU THINK THAT ALMOST ALL QUESTIONNAIRES WILL BE COMPLETED BY VISITING HEALTH FACILITIES, DO NOT PRODUCE A SEPARATE IMMUNIZATION FORM. ADAPT IM1 TO ALLOW FOR CODING WHETHER THE VACCINATION CARD WAS SHOWN BY THE MOTHER OR SEEN AT THE HEALTH FACILITY. COMPLETE THE REST OF THE QUESTIONS AS APPROPRIATE.

**IM20. Issue a “Questionnaire for Vaccinations at Health Facility” for this child. Complete the Information Panel on that Questionnaire and continue below.**

**UF13. Record the time**

Record the time of the day you finish the under-five interview using the 24-hour system. If the hour or minutes are less than 10, put a zero in front of the hour or minute. If the interview is not completed on your first visit and you visit the household again to continue the questionnaire for children under five, revise and enter starting (UF12) and ending times (UF13) of interview to reflect the actual amount of time spent for the whole duration of this interview in both/all visits. Also provide a note at the end of the questionnaire regarding this.

**UF14. Is the respondent the mother or caretaker of another child age 0-4 living in this household?**

If the respondent is the mother or caretaker of another child age 0-4 living in this household, mark the box marked 'Yes' and indicate to the respondent that you will need to measure the weight and height of the child later. Go to the next QUESTIONNAIRE FOR CHILDREN UNDER FIVE to be administered to the same respondent.

If the respondent is not the mother or caretaker of another child age 0-4 living in this household, mark the appropriate box and end the interview with this respondent by thanking him/her for his/her cooperation and tell her/him that you will need to measure the weight and height of the child.

Check to see if there are other woman's, man's or under-5 questionnaires to be administered in this household.

Move to another woman's, man's or under-5 questionnaire, or start making arrangements for anthropometric measurements of all eligible children in the household.

## ANTHROPOMETRY MODULE<sup>1</sup>

Weights and heights of all eligible children under five in the household will be measured after all the Questionnaires for Children Under Five are completed. However, if some respondents or children have to leave the household before all questionnaires in the household have been completed, or if a call-back has to be made to interview another respondent, it is best to complete the measurements on those children who are present. The most important thing is not to miss measuring those who are eligible.

Measurement of heights and weights will be the responsibility of measurers. Each fieldwork team will have one set of measuring boards and weighing scales. Therefore, once you have completed the questionnaires and are ready to start anthropometric measurements, you should call upon measurers to join you in the household, together with the equipment.

Although the measurer will be the main team member responsible for anthropometric measurements, other fieldwork staff will also receive training on how to weigh and measure children. In some cases, the entrance of measurers to the household may not be possible; in such cases, if it is not possible for the measurer to measure the child outside, interviewers may perform the measurements inside the household, with the assistance of the mother.

Each child will be weighed and measured, and the results will be recorded in his/her questionnaire. Be sure the weight for each child is recorded on the correct questionnaire. Procedures for weight and height measurements are discussed in detail in the 'Anthropometry' chapter of MICS Manual. This section is confined to explaining how the results will be coded.

### **AN1. *Measurer's name and number***

You should enter the name and two-digit identification number of the person who performed the measurements in the space provided. This would normally be the measurer.

### **AN2. *Result of height/length and weight measurement***

Circle the appropriate code corresponding to the result of the measurement. If the reason is 'Other', write a description in the line provided and circle '6'.

### **AN3. *Child's weight***

The child should be weighed according to the instructions given during training. Record exactly as is shown on the scale, in kilograms with one decimal point. Place the kilograms to the left of the decimal point and grams to the right of the decimal point. Use a leading zero if the number of kilograms is one digit. If the weight is not measured circle '99.9'.

### **AN4. *Child's length or height***

Check the age of the child in AG2. If the child is under 2 years old, check the appropriate box, circle '1' and then measure and record recumbent length (that is, lying down), to the nearest tenth of a

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<sup>1</sup>For more details on anthropometric techniques, see *Assessing the Nutritional Status of Young Children*, DP/UN/INT-88-X01/8E, New York: UN National Household Survey Capability Programme, 1990; *Demographic and Health Surveys Interviewer's Manual*, DHS-II Basic Documentation-4, Colombia, Md: Institute for Resource Development, 1990; and *How to Weigh and Measure Children*, DP/UN/INT-81-041-6E, New York: UN National Household Survey Capability Programme, 1986, a summary of which is included in Appendix Five of this manual.

centimetre. If the child is age two or older, check the corresponding box, circle '2', and then measure and record standing height. Write a zero first if the number of centimetres is two digits.

#### **AN5. Oedema**

Oedema is the retention of fluid in the tissues of the body; sign of kwashiorkor, a form of severe acute malnutrition. Please check to see if the child is having oedema. If the child is having oedema circle '1'. If the child is not having oedema, circle '2'. If undecided, circle '3'. If oedema is not checked for some reason, circle '7' and specify the reason.

#### **AN6. Is there another child in the household who is eligible for measurement?**

If there is another child in the household who is eligible for measurement, check the box marked 'Yes' and record measurements for the next child on that child's questionnaire. If 'No', check if there are any other individual questionnaires to be completed in the household.

After you have completed all anthropometric measurements in the household, you should record the results of the interviews in UF9 of the Under-Five Child Information Panel on each child's questionnaire.

Gather together all questionnaires for this household and check that all identification numbers are inserted on each page. Tally on the Household Information Panel the number of interviews completed.

Before you leave the dwelling, check to ensure that the entire questionnaire (including all modules) is completed and that there are no blanks left. Be sure to distinguish between true zero answers and missing data or 'DK' answers. Make sure that all identifying numbers have been filled in on the Information Panels of each questionnaire. Give the questionnaires to your supervisor.

#### **OBSERVATIONS**

The last page of the under-5 questionnaire has been reserved for the interviewers, supervisors, or editors to write any notes or observations regarding this particular under-5 interview.

### **HOW TO FILL IN THE QUESTIONNAIRE FORM FOR CHILD DISABILITY**

**SURVEY COORDINATORS:** REMEMBER THAT THIS FORM CAN BE USED FOR SCREENING PURPOSES. YOU ARE EXPECTED TO FOLLOW UP ON INFORMATION COLLECTED IN THIS FORM BY A SECOND-STAGE STUDY, IN WHICH A RANDOM SUB-SAMPLE OF CHILDREN IDENTIFIED WITH DISABILITIES AND THOSE IDENTIFIED WITHOUT DISABILITIES MAY UNDERGO CLINICAL EVALUATION. CONTACT THE GLOBAL MICS COORDINATOR FOR MORE INFORMATION ABOUT HOW TO ORGANIZE FOLLOW-UP VISITS. YOUR DECISION TO FOLLOW UP WITH A SECOND-STAGE STUDY COULD IMPLY THAT INTERVIEWERS SHOULD INFORM RESPONDENTS THAT A FOLLOW-UP VISIT MAY TAKE PLACE.

This form is to be administered to the mother or primary caretaker of each child resident in the household aged 2-9 years (this includes those age 2 and age 9) (Questions HL8 and HL9 in Household Listing Form of the Household Questionnaire).

#### **QUESTIONNAIRE FORM FOR CHILD DISABILITY**

DA1-DA8 should be filled in before you start the interview.

**DA1. Cluster number**

Enter the cluster number from the Household Questionnaire, question HH1.

**DA2. Household number**

Enter the household number from the Household Questionnaire, question HH2.

**DA3. Child's name**

Enter the child's name from the Household Questionnaire, column HL2 of the Household Listing.

**DA4. Child's line number**

Enter the child's line number from the Household Questionnaire, column HL1 of the Household Listing.

**DA5. Mother's / Caretaker's name**

Check HL8 and HL9 and identify the mother's / caretaker's line number. Enter the mother's / caretaker's name from the Household Questionnaire, column HL2 of the Household Listing.

**DA6. Child's line number**

Enter the mother's / caretaker's line number from the Household Questionnaire, column HL1 of the Household Listing.

**DA7. Interviewer name and number**

Enter your own name and identifying number. You will be provided with these identification numbers at the time of training.

**DA8. Day/Month/Year of interview**

Enter the date of the interview as day, month and year. If the interview is not completed on your first visit and you visit the household to interview the mother / caretaker again, revise and enter the final date of interview. In other words, the date here should be the date when you have either completed the child disability form, or when the interview has not been conducted but it has been decided that there will be no more attempts to interview the eligible mother / caretaker.

Repeat greeting if not already read to the respondent: **“WE ARE FROM (*country-specific affiliation*). WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT (*name*)’S HEALTH CONDITION. THIS WILL TAKE ONLY A FEW MINUTES. ALL THE INFORMATION YOU GIVE ME WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH THOSE OUTSIDE OF TEAM. MAY I START NOW?”**

If you are starting to interview the same person that you have completed the household interview with, you need to read a revised version of the greeting (see below) as the time to complete the questionnaire for individual women will be different than the household questionnaire and normally a separate consent is required to do this interview.

**NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT (*child's name from DA3*)’S HEALTH CONDITION. THIS WILL TAKE ONLY A FEW MINUTES. AGAIN, ALL THE INFORMATION YOU GIVE ME WILL REMAIN**

**STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH THOSE OUTSIDE OUR TEAM. MAY I START NOW?"**

**SURVEY COORDINATORS:** WHEN THE QUESTIONNAIRES ARE CUSTOMIZED, REPLACE (*country-specific affiliation*) WITH THE NAME OF THE IMPLEMENTING AGENCY IN YOUR COUNTRY.

As with the similar sentence at the beginning of the Household Questionnaire, you may change the wording of these introductory sentences as appropriate. You must make sure, however, to include the following when you are introducing yourself: The name of the implementing agency; the topic of the survey; approximate duration of the interview; the issue of confidentiality; and with whom you would like to speak.

If permission is given, begin the interview. If the respondent does not agree to continue, complete DA9, thank her/him and go on to the next interview. Later, discuss the refusal with your supervisor; you or another person from the team may attempt to interview the mother / caretaker for a second time. This will depend on your description of the refusal. However, remember that a respondent's participation in the survey must be on a voluntary basis, and potential respondents must never be forced to participate.

**DA9. Result of interview for child disability**

Complete this question once you have concluded the interview with the respondent. Circle the code corresponding to the result of the interview. If the questionnaire is completed, circle '01' for 'Completed'. If you have not been able to contact the mother / caretaker after repeated visits, circle '02' for 'Not at home'. If the mother / caretaker refuses to be interviewed, circle '03' for 'Refused'. If you were able to only partly complete the questionnaire, circle '04' for 'Partly completed'. If the mother / caretaker is incapacitated, circle '05'. If you have not been able to complete this questionnaire for another reason, you should circle '96' for 'Other' and specify the reason in the space provided.

**DA10. Field edited by (Name and number)**

Leave this space blank. The field editor will later enter his/her name and number in the space provided when checking the completed questionnaires.

**DA11. Data entry clerk (Name and number)**

Leave this space blank. The data clerk will enter his/her name and number in the space provided.

**CHILD DISABILITY**

**DA12. Copy child's name and age from HL2 and HL6, from Household Listing Form.**

Next, ask the following questions DA13 through DA24, in turn. Circle '1' for 'Yes' and '2' for 'No' for all questions in this module. Insert the child's name in the questions. Read out the entire question as it is written.

**DA13. COMPARED WITH OTHER CHILDREN, DOES OR DID (*name*) HAVE ANY SERIOUS DELAY IN SITTING, STANDING, OR WALKING?**

**DA14. COMPARED WITH OTHER CHILDREN, DOES (*name*) HAVE DIFFICULTY SEEING, EITHER IN THE DAYTIME OR AT NIGHT?**

**DA15. DOES (*name*) APPEAR TO HAVE ANY DIFFICULTY HEARING (USES HEARING AID, HEARS WITH DIFFICULTY OR COMPLETELY DEAF)?**

Do not mention the probing questions unless the respondent cannot answer the first question.

**DA16. WHEN YOU TELL (*name*) TO DO SOMETHING, DOES HE/SHE SEEM TO UNDERSTAND WHAT YOU ARE SAYING?**

**DA17. DOES (*name*) HAVE DIFFICULTY IN WALKING OR MOVING HIS/HER ARMS OR DOES HE/SHE HAVE WEAKNESS AND/OR STIFFNESS IN THE ARMS OR LEGS?**

**DA18. DOES (*name*) SOMETIMES HAVE FITS, BECOME RIGID, OR LOSE CONSCIOUSNESS?**

**DA19. DOES (*name*) LEARN TO DO THINGS LIKE OTHER CHILDREN HIS/HER AGE?**

**DA20. DOES (*name*) SPEAK AT ALL (CAN HE/SHE MAKE HIM OR HERSELF UNDERSTOOD IN WORDS; CAN HE/SHE SAY ANY RECOGNIZABLE WORDS)?**

If needed, use the additional probing questions in parentheses, replacing he/she with the appropriate pronoun.

**DA21. Check DA12: Age of child:**

If the child is 2 years old, check the appropriate box and go to DA23. If the child's age is 3 years or higher, check the appropriate box and continue with DA22.

**DA22. IS (*name*)'S SPEECH IN ANY WAY DIFFERENT FROM NORMAL (NOT CLEAR ENOUGH TO BE UNDERSTOOD BY PEOPLE OTHER THAN THE IMMEDIATE FAMILY)?**

This question should be asked only for children aged 3-9 years (children age 2 should not be asked this question).

If needed, use the additional probing questions in parentheses.

**DA23. CAN (*name*) NAME AT LEAST ONE OBJECT (FOR EXAMPLE, AN ANIMAL, A TOY, A CUP, A SPOON)?**

This question should be asked only for children age 2.

If needed, use the additional probing questions in parentheses.

**DA24. COMPARED WITH OTHER CHILDREN OF THE SAME AGE, DOES (*name*) APPEAR IN ANY WAY MENTALLY BACKWARD, DULL OR SLOW?**

**DA25. AS PART OF THIS SURVEY, OTHERS IN OUR TEAM MAY VISIT YOU AGAIN TO COLLECT MORE INFORMATION ON SOME OF THE TOPICS WE HAVE JUST TALKED ABOUT, CONCERNING (*name*). SUCH A VISIT MAY TAKE PLACE WITHIN THE NEXT (*days/weeks/months*).**

**MAY I PROCEED AND NOTE THAT YOU WOULD BE FINE WITH SUCH A VISIT, IF IT OCCURS AT ALL? AGAIN, YOU MAY CHANGE YOUR MIND AND DECLINE TO SPEAK TO OUR TEAM IF AND WHEN THE VISIT HAPPENS.**

Circle the code corresponding to the response.