

HOUSEHOLD QUESTIONNAIRE MICS5 BELIZE

HOUSEHOLD INFORMATION PANEL	НН
HH1. Cluster number:	HH2. Household number:
HH3. Interviewer's name and number:	HH4. Supervisor's name and number:
Name	Name
HH5. Day / Month / Year of interview: / / 2015 HH6. Area: Urban	HH7. Region: Corozal
CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LIKE INTERVIEW WILL TAKE ABOUT 25 MINUTES. ALL THE INCONFIDENTIAL. MAY I START NOW?	FORMATION WE OBTAIN WILL REMAIN STRICTLY
□Yes, permission is given⇔Go to HH18 to recording INo, permission is not given⇔Circle 04 in HH9	
No household member or no competent resport Entire household absent for extended period of Refused	
Other (specify)	96
After the household questionnaire has been completed, fill in the following information:	
HH10. Respondent to Household Questionnaire: Name Line No	
HH11. Total number of household members:	After all questionnaires for the household have been completed, fill in the following information:
HH12. Number of women age 15-49 years:	HH13. Number of women's questionnaires completed:
HH13A. Number of men age 15-49 years:	HH13B. Number of men's questionnaires completed:
HH14. Number of children under age 5:	HH15. Number of under-5 questionnaires completed:

HH18. Record the time.
Hour
Minutes
am/pm m

LIST OF HOUSEHOLD MEMBERS

FIRST, PLEASE TELL ME THE NAME OF EACH PERSON WHO USUALLY LIVES HERE, THAT IS, PERSONS WHO SLEEP AT LEAST 4 NIGHTS OF THE WEEK AND SHARE AT LEAST 1 DAILY MEAL. PLEASE START 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? These may include children in school or adults at work. If yes, complete listing for questions HL2-HL4. Then, ask questions starting with HL5 for each person at a time. Use an additional questionnaire if all rows in the List of Household Members have been used.

								For women age 15-49	For men age 15-49	For children age 0-4	For children age 0-17 years				For Children age 0-14		
HL1. Line no.	HL2. Name	HL3. WHAT IS THE RELATION- SHIP OF (name) TO THE HEAD OF HOUSE- HOLD?	HL Is (nan MALE (FEMAL 1 Male 2 Fem	ne) DR E?		HL5. (<i>name</i>)'S BIRTH? 9998 DK	completed years.	Circlelin e no. if woman age 15-49.	HL7A. Circlelin e no.if man age 15-49	HL7B. Circlelin e no.if age0-4.	HL11. IS (name)'S NATURAL MOTHER ALIVE? 1 Yes 2 No \(\text{No}\) HL13 8 DK \(\text{M}\) HL13	go to HL13	HL12A. WHERE DOES (name)'S NATURAL MOTHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK		ana go to	HL14A. WHERE DOES (name)'S NATURAL FATHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	HL15. Record line no. of mother from HL12 if indicated. If HL12 is blank or '00' ask: WHO IS THE PRIMARY CARETAKER OF (name)?
Line	Name	Relation*	М	F	Month	Year	Age	15-49	15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother
01		0 1	1	2				01	01	01	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
02			1	2				02	02	02	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
03			1	2				03	03	03	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
04			1	2				04	04	04	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
05			1	2		-4-		05	05	05	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
06			1	2			1	06	06	06	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
07			1	2				07	07	07	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
80			1	2				07	07	07	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
09			1	2				07	07	07	1 2 8		1 2 3 8	1 2 8		1 2 3 8	

* Codes for HL3: Relationship to head of household:

01 Head

02 Spouse/Partner

03 Son / Daughter

04 Son-In-Law / Daughter-In-Law

05 Grandchild

06 Parent

07 Parent-In-Law

08 Brother / Sister

09 Brother-In-Law / Sister-In-Law

10 Uncle / Aunt

11 Niece / Nephew 12 Other relative

13 Adopted / Foster/ Stepchild 14 Household Helper

96 Other (Not related)

98 DK (Live-in)

							For women age 15-49	For men age 15-49	For children age 0-4			For children	age 0-17 yea.	rs		For Children age 0-14
HL1. Line no.	HL2 . Name	HL3. WHAT IS THE RELATION- SHIP OF (name) TO THE HEAD OF HOUSE- HOLD?	HL4. Is (name) MALE OR FEMALE? 1 Male 2 Female		HL5. (<i>name</i>)'S BIRTH? 9998 DK	HL6. HOW OLD IS (name)? Record in completed years. If age is 95 or above, record '95'.		HL7A. Circlelin e no.if man age 15-49	HL7B. Circlelin e no.if age0-4.	HL11. IS (name)'S NATURAL MOTHER ALIVE? 1 Yes 2 No HL13 8 DK HL13	HOUSE- HOLD? If "Yes", record line	(name)'S NATURAL MOTHER LIVE?	HL13. IS (name)'S NATURAL FATHER ALIVE? 1 Yes 2 No & HL15 8 DK & HL15	and go to	HL14A. WHERE DOES (name)'S NATURAL FATHER LIVE? 1 In another household in this country 2 Institution in this country 3 Abroad 8 DK	HL15. Record line no. of mother from HL12 if indicated. If HL12 is blank or '00' ask: WHO IS THE PRIMARY CARETAKER OF (name)?
Line	Name	Relation*	M F	Month	Year	Age	15-49	15-49	0-4	Y N DK	Mother		Y N DK	Father		Mother
10			1 2				13	13	13	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
11			1 2				11	11	11	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
12			1 2				12	12	12	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
13			1 2				13	13	13	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
14			1 2				14	14	14	1 2 8		1 2 3 8	1 2 8		1 2 3 8	
15			1 2				15	15	15	1 2 8		1 2 3 8	1 2 8		1 2 3 8	

Probe for additional household members.

Tick here if additional questionnaire used

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

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

For each man age 15-49 years, write his name and line number and other identifying information in the information panel of a separate Individual Man's Questionnaire.

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

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

* Codes for HL3 :
Relationship to head
of household:

01 Head02 Spouse/Partner03 Son / Daughter

04 Son-In-Law / Daughter-In-Law

05 Grandchild

06 Parent

07 Parent-In-Law 08 Brother / Sister

10 Uncle / Aunt11 Niece / Nephew

13 Adopted / Foster/ Stepchild

96 Other (Not related) 98 DK

09 Brother-In-Law / Sister-In-Law

12 Other relative

14 Household Helper (Live-in)

EDUCA	ΓΙΟΝ										ED
			For household membersage 5 and above For household members age 5-24 years								
ED1. Line number Copy from HL2 and HL6.			ED3. HAS (name) EVER ATTENDED SCHOOL	ED4A. WHAT IS THE HIGHEST LEVEL OF SCHOOL (name) HAS ATTENDED?	ED4B. WHAT IS THE HIGHEST STANDARD/ FORM/ YEAR (name) COMPLETED AT	ED5. DURING THE SCHOOL YEAROF201 4-2015, DID (name)	ED6. DURING THAT SCHOOL YE LEVEL AND STANDARD/ FO YEARWAS (name) ATTEND	RM/	ED7. DURING THE SCHOOL YEAR OF 2013- 2014, DID (name)	ED8. DURING THE SCHOOL YEAR OF 2013-2014 WHICH LEVEL AND STANDARD/FORM/ YEAR DID (name) ATTEND?	
			OR PRE- SCHOOL? 1 Yes 2 No⊴ Next Line	Level: 00 Preschool 01 Infant 02 Primary 03 Secondary 04Associates 05 BSc. & Higher 96Other 98 DK If level=00, skip to ED5.	THIS LEVEL? Standard/ Form/ Year: 98 DK If the first Std / Form/ Year at this level is not completed, enter "00".	ATTEND SCHOOL OR PRESCHOOL AT ANY TIME? 1 Yes 2 No \(\) ED7	Level: 00 Preschool 01 Infant 02 Primary 03 Secondary 04 Associates 05 BSc. & Higher 96 Other 98 DK If level=00, skip to ED7.	Standard / Form/ Year: 98 DK	ATTEND SCHOOL OR PRESCHOOL AT ANY TIME? 1 Yes 2 No ☆ Next Line 8 DK ☆ Next Line	Level: 00 Preschool 01 Infant 02 Primary 03 Secondary 04 Associates 05 BSc. & Higher 96 Other 98 DK If level=00, go to next line.	Standard / Form/ Year: 98 DK
Line	Name	Age	Yes No	Level	Std/Form/ Year	Yes No	Level	Std/Form/ Year	Y N DK	Level	Std/Form/ Year
01			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
02			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
03			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
04			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
05			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
06			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
07			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
80			1 2	00 01 02 03 04 05 96 98 00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98 00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98 00 01 02 03 04 05 96 98	
09			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
10			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
11			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
13			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
14			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	
15			1 2	00 01 02 03 04 05 96 98		1 2	00 01 02 03 04 05 96 98		1 2 8	00 01 02 03 04 05 96 98	

SELECTION OF O											SL
SL1 . Check HL6 in the total number	-			ibers and w	vrite	Total num	ber				· ——
SL2. Check the number of children age 1-14 years in SL1:											
□Zero ⇔ Go to	□Zero Go to HOUSEHOLD CHARACTERISTICS module.										
□One ⇔ Go to S	SL9 and rec	ord the ra	ınk nu	mber as '1	', enter i	the line nur	nber, c	hild's n	ame and a	ige.	
☐Two or more	⇒Continue	with SL2A	١.								
SL2A. List each of not include other age for each child	household										
	SL3.	SL4.		SL5.		SL	.6.	SL	7.		
	Rank	Line		Name from	ı HL2	Sex f		Age			
	number	number from				HI	.4	H	L6		
	Rank	HL1 Line		Name		M	F	Ag	70		
	1	LINE		INAIII	<u> </u>	1	2	7	y c		
	2					1	2				
	3					1	2				
	4					1	2				
	5					1	2				
	6					1	2				
	7					1	2				
٥	8					1	2				
SL8. Check the last should go to it Check the totato in the table Find the box value of the control of the short of the s	n the table in table in the table in table in the table in ta	below. f children ow and the	age 1	-14years in	ı SL1 ab	oove. This is	s the nu	ımber oʻ	f the colui	nn you shou	ıld go
			Total	Number o	f Eligib	le Childrer	n in the	House	hold (fro	m SL1)	
	of Househer (from HH		2	3	4	5		6	7	8+	
	0		2	2	4	3		6	5	4	-
	2		1 2	3 1	1 2	5		2	6 7	5 6	-
	3		1	2	3	1		3	1	7	
	4		2	3	4	2		4	2	8	•
	5		1	1	1	3		5	3	1	
	6		2	2	2	4		6	4	2	_
	8		1 2	3 1	3 4	5		2	5 6	3 4	
	9		1	2	1	2		3	7	5	-
SL9.Record the ran (SL5) and age (er (SL4), no		Line numl	ber				
						Age					

CHILD DISCIPLINE	CD
CD2 .Write the line number and name of the child from SL9.	Line number
CD3. ADULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. I WILL READ VARIOUS METHODS THAT ARE USED. PLEASE TELL ME IF YOU OR ANY OTHER ADULT IN YOUR HOUSEHOLD HAS USED THIS METHOD WITH (name)IN THE PAST MONTH.	Yes No.
[A] TOOK AWAY PRIVILEGES, FORBADE SOMETHING (<i>name</i>) LIKED OR DID NOT ALLOW HIM/HER TO LEAVE THE HOUSE.	Took away privileges1 2
[B] EXPLAINED WHY (<i>name</i>)'S BEHAVIOUR WAS WRONG.	Explained wrong behaviour1 2
[C] SHOOK HIM/HER.	Shook him/her1 2
[D] SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.	Shouted, yelled, screamed1 2
[E] GAVE HIM/HER SOMETHING ELSE TO DO.	Gave something else to do1 2
[F] SPANKED, HIT OR SLAPPED HIM/HER ON THE BOTTOM WITH BARE HAND.	Spanked, hit, slapped on bottom with bare hand1 2
[G] HIT HIM/HER ON THE BOTTOM OR ELSEWHERE ON THE BODY WITH SOMETHING LIKE A BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT.	Hit with belt, hairbrush, stick, or other hard object
[H] CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT.	Called dumb, lazy, or another name1 2
[I] HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.	Hit/slapped on the face, head or ears1 2
[J] HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG.	Hit/slapped on hand, arm or leg 2
[K] BEAT HIM/HER UP, THAT IS HIT HIM/HER OVER AND OVER AS HARD AS ONE COULD.	Beat up, hit over and over as hard as one could1 2
CD4. DO YOU BELIEVE THAT IN ORDER TO BRING UP, RAISE, OR EDUCATE A CHILD PROPERLY, THE CHILD NEEDS TO BE PHYSICALLY PLINISHED?	Yes

HOUSEHOLD CHARACTERISTICS		НС
HC1A. WHAT IS THE RELIGION OF THE HEAD OF THIS HOUSEHOLD?	Anglican	
HC1B. WHAT IS THE FIRST LANGUAGE OF THE HEAD OF THIS HOUSEHOLD?	Chinese/Taiwanese 01 Creole 02 English 03 German 04 Hindi 05 Maya 06 Spanish 07 Garifuna 08 Other (specify) 96	
HC1C. TO WHAT ETHNIC GROUP DOES THE HEAD OF THIS HOUSEHOLD BELONG?	Asian 01 Caucasian 02 Creole 03 East Indian 04 Maya 05 Mennonite 06 Mestizo/Spanish/Latino 07 Garifuna 08 Other (specify) 96	
HC2. HOW MANY ROOMS IN THIS HOUSEHOLDARE USED FOR SLEEPING?	Number of rooms	
HC3. Main material of the dwelling floor. Record observation.	Natural floor 11 Rudimentary floor 21 Wood planks 21 Plywood 23 Finished floor 23 Parquet or polished wood 31 Vinyl or asphalt strips/marley 32 Ceramic tiles/cement tiles 33 Cement/Concrete 34 Carpet 35 Other (specify) 96	

HC4. Main material of the roof.	Natural roofing	
v	Thatch/Palm leaf/Bay leaf 12	
Record observation.	Rudimentary Roofing	
	Cardboard	
	Rubber rye25	
	Finished roofing	
	Metal/Tin/corrugated zinc	
	Cement/Concrete	
	Roofing shingles	
	Other (specify)96	
HC5. Main material of the exterior walls.	Natural walls	
	No walls	
Record observation.	Paimetto/Wildcane/Sticks14	
	Rudimentary walls	
	Bamboo/Palmetto with mud/whitelime 21 Stone with mud 22	
	Plywood	
	Carton/Cardboard 25 Reused wood 26	
	Reuseu wood	
	Finished walls	
	Cement/Concrete	
	Bricks	
	Cement blocks	
	Wood planks/shingles36 Wood and concrete37	
	Stucco	
	Plycem39 Metal/Tin/Corrugated Zinc40	
	Other(specify)96	
HC6. WHAT TYPE OF FUEL DOES YOUR HOUSEHOLD	Electricity01	01⇒HC8
MAINLY USE FOR COOKING?	Butane/Liquefied Petroleum Gas (LPG)02	02⇒HC8
	Biogas	04⇒HC8 05⇒HC8
	Charcoal07	00-71100
· ·	Wood08	
	Agricultural crop residue11	
	No food cooked in household95	95⇒HC8
	Other (<i>specify</i>) 96	
HC7. IS THE COOKING USUALLY DONE IN THE HOUSE,	In the house	
IN A SEPARATE BUILDING, OR OUTDOORS?	In a separate room used as kitchen1	
If the deal and a local post post in a	Elsewhere in the house	
If 'In the house', probe: IS IT DONE IN A SEPARATE ROOM USED AS A KITCHEN?	In a separate building3 Outdoors4	
- · · · · · · · · · · · · · · · · · · ·		
	Other (<i>specify</i>)6	

HC8. Does your household have:	Yes No
[A] ELECTRICITY?	Electricity 2
[B] A RADIO?	Radio 2
[C] A TELEVISION?	Television 2
[D] A FIXED LINE TELEPHONE?	Fixed line telephone
[E] A REFRIGERATOR?	Refrigerator 2
[F] A FAN?	Fan 2
[G] A MICRO WAVE OVEN?	Micro Wave Oven 2
[H] A SECURITY ALARM SYSTEM?	Security Alarm System 2
[I] A WASHING MACHINE?	Washing Machine 2
[J] A DV D PLAYER?	DVD Player 2
[K] A GAS BAR-B-Q GRILL?	Gas Bar-B-Q Grill 2
[L] An Air Conditioner?	Air Conditioner 2
[M] A WATER COOLER?	Water Cooler 2
[N] A SOFA SET?	Sofa set 2
[O] A DINING ROOM SET?	Dining Room set 2
[P] A CLOTHES CLOSET?	Clothes Closet 2
HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:	Yes No
[A] A WATCH?	Watch1 2
B] A CELLPHONE?	Cellphone 1 2
[C] A BICYCLE?	Bicycle 1 2
[D] A MOTORCYCLE OR SCOOTER?	Motorcycle/Scooter 2
[E] An animal- drawn cart?	Animal-drawn cart1 2
[F] A CAR OR TRUCK?	Car/Truck1 2
[G] A BOAT WITH A MOTOR?	Boat with motor 2
[H] A TABLET COMPUTER?	Tablet Computer 2
[I] A FISHING ROD?	Fishing Rod 2
[J] A WEIGHT TRAINING MACHINE?	Weight Training Machine 2
[K] A COMPUTER	Computer 2
[L] CANOE/A BOAT WITHOUT A MOTOR?	Canoe/Boat without motor1 2

HC10. Do You or someone living in this HOUSEHOLD OWN THIS DWELLING?	Own1 Rent2	
If "No", then ask: DO YOU RENT THIS DWELLING FROM SOMEONE NOT LIVING IN THIS HOUSEHOLD?	Other (specify)6	
If "Rented from someone else", circle "2". For other responses, circle "6".		
HC11 . DOES ANY MEMBER OF THIS HOUSEHOLD OWN ANY LAND THAT CAN BE USED FOR AGRICULTURE?	Yes	2⇒HC13
HC12. HOW MANY ACRES OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN?	Acres	
If less than 1, record "00". If 95 or more, record "95". If unknown, record "98".		
HC13. DOES THIS HOUSEHOLD OWN ANY LIVESTOCK, HERDS, OTHER FARM ANIMALS, OR POULTRY?	Yes1 No2	2⇒HC15
HC14. HOW MANY OF THE FOLLOWING ANIMALS DOES THIS HOUSEHOLD HAVE?		
[A] CATTLE, MILK COWS, OR BULLS?	Cattle, milk cows, or bulls	
[B] HORSES, DONKEYS, OR MULES?	Horses, donkeys, or mules	
[C] GOATS?	Goats	
[D] SHEEP?	Sheep	
[E] CHICKENS?	Chickens	
[F] Pigs?	Pigs	
[G] TURKEYS, DUCKS?	Turkeys, ducks	
If none, record "00".If 95 or more, record "95". If unknown, record "98".		
HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE BANK ACCOUNT, A BANK BOOK OR CREDIT UNION BOOK?	Yes1 No2	

WATER AND SANITATION		WS
WS1. WHAT IS THE MAIN SOURCE OF DRINKING WATER FOR MEMBERS OF YOUR HOUSEHOLD?	Piped water Piped into dwelling	11⇒WS6 12⇒WS6 13⇒WS6 14⇒WS3 21⇒WS3 31⇒WS3 32⇒WS3 41⇒WS3 42⇒WS3 51⇒WS3 61⇒WS3 71⇒WS3
	Surface water (river, stream, dam, lake, pond, canal, irrigation channel)81 Bottled water91	81⇒WS3
	Other (specify) 96	96 ⇒WS 3
WS2. WHAT IS THE MAIN SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS WASHING, BATHING AND HANDWASHING?	Piped water Piped into dwelling	11⇒WS6 12⇒WS6 13⇒WS6
WS3. WHERE IS THAT WATER SOURCE LOCATED?	In own dwelling	1⇔WS6 2⇔WS6
WS4. HOW LONG DOES IT TAKE TO GO THERE, GET WATER, AND COME BACK?	Number of minutes	

WS5. WHO USUALLY GOES TO THIS SOURCE	Adult woman (age 15+ years)1	
TO COLLECT THE WATER FOR YOUR	Adult man (age 15+ years)2	
HOUSEHOLD?	Female child (under 15)3	
	Male child (under 15)4	
Probe: IS THIS PERSON UNDER AGE 15? WHAT SEX?	DK8	
	Voc	
WS6. DO YOU DO ANYTHING TO THE WATER	Yes	2⇒WS8
TO MAKE IT SAFER TO DRINK?	NO	25,44,28
	DK8	8⇒WS8
WS7. WHAT DO YOU USUALLY DO TO MAKE	BoilA	
	Add bleach / chlorine B	
THE WATER SAFER TO DRINK?	Strain it through a clothC	
Probe:	Use water filter (ceramic, sand,	
ANYTHING ELSE?	composite, etc.)	
ANT ITHING ELGE:	Solar disinfection E	
Record all items mentioned.	Let it stand and settleF	
necora un nems mennonea.	Lot it stand and settle	
	Other (specify) X	
	DKZ	
MOO WALLER OF THE STREET		
WS8. WHAT KIND OF TOILET FACILITY DO	Flush / Pour flush	
MEMBERS OF YOUR HOUSEHOLD	Flush to piped sewer system11	
USUALLY USE?	Flush to septic tank	
TC "(1 1) "	Flush to pit (latrine)	
If "flush" or "pour flush", probe:	Flush to somewhere else14	
WHERE DOES IT FLUSH TO?	Flush to unknown place / Not sure /	
If not neggible to determine 1	DK where15 Pit latrine	
If not possible to determine, ask permission		
to observe the facility.	Ventilated Improved Pit latrine (VIP)21 Pit latrine with slab22	
	Pit latrine with slab / Open pit23	
	The latting without slab / Open pit23	
	Composting toilet31	
	Bucket41	
	Hanging toilet, Hanging latrine51	
	No facility, Bush, Field95	95⇒Next
	, , , , , , , , , , , , , , , , , , , ,	Module
	Other (specify) 96	
WS9. DO YOU SHARE THIS FACILITY WITH	Yes1	
OTHERS WHO ARE NOT MEMBERS OF	No	2⇒Next
YOUR HOUSEHOLD?		Module
		Middaic
WS10. DO YOU SHARE THIS FACILITY ONLY	Other households only (not public)1	
WITH MEMBERS OF OTHER HOUSEHOLDS	Public facility2	2⇒Next
THAT YOU KNOW, OR IS THE FACILITY		Module
OPEN TO THE USE OF THE GENERAL		
PUBLIC?		
WS11. HOW MANY HOUSEHOLDS IN TOTAL		
USE THIS TOILET FACILITY, INCLUDING	Number of households (if less than 10) 0	
YOUR OWN HOUSEHOLD?	·	
	Ten or more households10	
	DK98	

HANDWASHING		HW
HW1. WE WOULD LIKE TO LEARN ABOUT THE PLACES THAT HOUSEHOLDS USE TO WASH THEIR HANDS. CAN YOU PLEASE SHOW ME WHERE MEMBERS OF YOURHOUSEHOLD MOST OFTEN WASH THEIR HANDS?	Observed	2 ⇔HW4 3 ⇔HW4 6 ⇔HW4
HW2. Observe presence of water at the place for handwashing. Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.	Water is available	
HW3A. Is soap, detergentor ash/sand present at the place for handwashing?	Yes, present	2⇔HW4
HW3B. Record your observation. Circle all that apply.	Bar soap	A⇔Next Module B⇔ Next Module C⇔ Next Module D⇔ Next Module
HW4. DO YOU HAVE ANY BAR SOAP, SOAP POWDER, LIQUID SOAP OR SAND IN YOUR HOUSE FOR WASHING HANDS?	Yes	2⇒ Next Module
HW5A. CAN YOUPLEASE SHOW IT TO ME?	Yes, shown	2⇒ Next Module
HW5B. Record your observation. Circle all that apply.	Bar soap	

HH19. Record the time.	Hour, minutes and am/pm :::	m
------------------------	-----------------------------	---

SALT IODIZATION	S	SI
SI1. WE WOULD LIKE TO CHECK WHETHER THE SALT USED IN YOUR HOUSEHOLD IS IODIZED. MAY I HAVE A SAMPLE OF THE SALT USED TO COOK MEALS IN YOUR HOUSEHOLD? Once you have tested the salt, circle number that corresponds to test outcome.	Not iodized - 0 PPM	

HH20. Thank the respondent for his/her cooperation and check the List of Household Members:
☐ A separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN has been issued for each woman age 15-49 years in theList of Household Members (HL7).
□ A separate QUESTIONNAIRE FOR INDIVIDUAL MEN has been issued for each man age 15-49 years in
theList of Household Members (HL7A). \$\Begin{align*} \Pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
the List of Household Members (HL7B). Return to the cover page and make sure that the result of the household interview (HH9), the name and line number of the respondent to the household questionnaire (HH10), and the number ofeligible women (HH12), men
(HH13A), and under-5s (HH14) are entered.
Make arrangements for the administration of the remaining questionnaire(s) in this household.

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