# MULTIPLE INDICATOR CLUSTER SURVEYS

## MICS

# INSTRUCTIONS
# FOR
# INTERVIEWERS

# STATISTICAL INSTITUTE OF BELIZE
# MICS5 – 2015
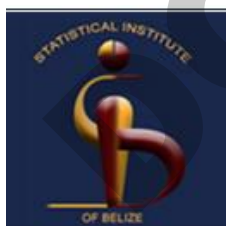
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# 1. INTRODUCTION

The Statistical Institute of Belize (SIB) in collaboration with the United Nations Children's Fund (UNICEF) has undertaken to conduct the fifth round of a Multiple Indicator Cluster Survey (MICS5). The MICS5 is being conducted countrywide, covering households in both urban and rural areas. The sample size is 5,232 households distributed across the country, and questionnaires will collect information on households, health and education of women and men 15-49 years and children under the age of 5 years.

The Multiple Indicator Cluster Survey (MICS) is a household survey developed by UNICEF to assist countries in filling data gaps for monitoring the situation of children and women. Over the years, it has been noted that data on men's situation are badly lacking, therefore the decision was taken to extend the survey to include men. It is designed to produce estimates of indicators that are statistically sound and internationally comparable.

The MICS was originally developed in response to the World Summit for Children to measure progress towards an internationally agreed set of mid-decade goals. The first round of MICS was conducted around 1995 in more than 60 countries. A second round of surveys was conducted in 2000 (around 65 countries) and a third round in 2006 with over 50 countries participating, and then in 2011, the most recent round was conducted. These surveys resulted in an increasing wealth of data to monitor the situation of children and women. For the first time it was possible to monitor trends in many indicators and set baselines for other indicators.

The MICS5, which is the current round of MICS, is focused on providing a monitoring tool for the World Fit for Children, the Millennium Development Goals (MDGs), as well as for other major international commitments, such as the UNGASS on HIV/AIDS, and to establish a baseline for the emerging Sustainable Development Goals (SDGs). Many of the MDG indicators can be collected in the current round of MICS, offering the largest single source of data for MDG monitoring.

## 1.1: Training Package

A training package has been prepared for each individual, and includes the following items:

- ➢ Training Manual
- ➢ Household and Individual Questionnaires
- ➢ Notepad, pencil, eraser, sharpener, pen
- ➢ Cluster Control Form
- ➢ Reading Literacy Card

- ➢ Training Agenda
- ➢ Evaluation Forms
- ➢ Oath of Secrecy
- ➢ Response Card
- ➢ Anthropometry Measurement Ranges

## 1.2: Training Ground Rules

To facilitate the smooth flow of the training exercise, it is important that the following ground rules be adhered to at all times:

- ➢ **Signing the attendance register** – the register should be signed at the beginning of both the morning and afternoon sessions.

- ➢ **Use of cell phones** – the use of cell phones during the training sessions is discouraged.  Cell phones should either be turned off or set on vibrate mode.  If it is absolutely necessary to take or make a call, this should be done outside of the training room.

- ➢ **Discussions** – All trainees are expected to participate in discussions.  To facilitate learning, only one person should speak at a time, and differences in opinions should be aired respectfully.

- ➢ **Punctuality** – the training starts promptly at 8:30a.m. daily.  Trainees are expected to arrive in the SIB's parking lot by 8:00a.m., to facilitate the timely shuttle transfer to the training site.  Delays in beginning the training will prolong the day for you and your colleagues.

- ➢ **Dress code** – attire should be appropriate, casual but not revealing.

## 1.3:  Authority for Survey

The Statistical Institute of Belize Act, 2006, of the Laws of Belize, gives you the power as an employee of the Statistical Institute of Belize to collect information from household members.  It also sets out an Oath of Secrecy that you must sign and the penalties for breach of confidentiality.

Bear in mind that the MICS is a voluntary survey, which means that selected respondents may choose not to participate.  However, it is expected that interviewers will use positive measures of persuasion and tact to get all the information needed from all eligible respondents.

## 1.4:  Confidentiality

Some respondents may out rightly refuse to answer the questionnaire, while others may be reluctant to answer some of the questions.  This is understandable since you would be asking for information that is not usually disclosed to strangers.  You, the interviewer will be expected to inform the respondent that:

(a) You have taken an oath of secrecy.  It is strictly against the Law for you to divulge information to any unauthorized individual or organization.

(b) Information collected is kept strictly confidential.  No information about any individual can be made available, even to a government department.

(c) The information collected will be used solely in the preparation of tables showing group totals, not individuals' information.

## 1.5: Mission Statement

The Statistical Institute of Belize is committed to provide, with the highest degree of integrity, quality and with strict adherence to professional and international standards, accurate, reliable and timely statistical information to facilitate effective policy and decision-making for local and international clients.

## 1.6: Training

All persons involved in the collection of the data and supervision of fieldwork must attend the training sessions. The training will enable you to have a thorough knowledge of the main concepts and be familiar with the questionnaires and the training manual.

# 2. KEY CONCEPTS AND DEFINITIONS

**Household**

A household consists of one or more persons living together, that is, who usually sleeps most nights of the week (at least 4 nights per week) **AND** shares at least one daily meal with the household.

In certain cases, a person may qualify as a member of a household even though he/she only sleeps there and eats somewhere else. For example, if a person sleeps most nights with a certain household and only eats elsewhere, then emphasis would be placed on the nights slept. This person would be part of the household where he/she sleeps.

It is important to note that a member of a household need not be a relative of the main family. For example, a boarder or a domestic servant who sleeps in most nights of the week is a member of the household. It is possible for a household to consist of just one person, or of more than one family, as long as they share living arrangements. A group of unrelated persons living together also comprises a household.

Many types of living arrangements may be found in the field, and some examples are given below for your guidance:

(a) If a person has recently moved in with a group of other persons, as long as he/she intends to make his/her home with them, that person is to be considered a member of the household;

(b) A boarding house that caters for boarders or lodgers (less than six) is to be classified as one household.

(c) If a house is divided into flats or other separate dwellings, each such separate dwelling accommodates at least one separate household. A tenant or subtenant, if he makes his own arrangements for eating, also forms a separate household.

(d) A domestic who sleeps in the house or in an outbuilding on the premises is to be listed as a member of the household. A maid who does not sleep on his/her employer's premises is not to be included as a member of the household where he/she works.

(e) A boarder or lodger, i.e. a person who eats and sleeps with the household during most nights of the week, is to be considered a member of the household.

(f) A person who rents a room but does not share any meal with his/her landlord/lady constitutes a separate single-person household.

(g) Persons living, working and sleeping away from their place of usual residence for most nights of the week should be included as members of the household in which they are found during the reference week.

(h) Persons engaged in shift work or who work at night, such as security workers, are to be included as members of the household.

*Include as household members:*

(a) Persons away on vacation (locally or abroad) if present dwelling is considered their "home";

(b) Persons away on business (locally or abroad) if present dwelling is considered their "home";

(c) Persons away on study leave or from a job, if present dwelling is considered their "home";

(d) Visitors to the household (planning to stay more six months or more) who presently consider that dwelling unit their home, sleeping there at least 4 nights of the week and sharing at least 1 daily meal.

*Exclude from the list of household members:*

(a) Family members who usually work and live away from the dwelling 4 or more nights per week.

(b) A domestic worker who makes his/her own eating arrangements and is in an outbuilding separate from the household.

**Household Head**
For the purpose of the survey, every household must have a head.

(a) The household head must be a member of the household, and is the person recognized as the head of the household by the other household members.

(b) In a household that has only one household member, that person is the household head.

(c) In a household where the members are unrelated, the household head is any persons recognized as such by the other household members.

**Dwelling Unit**
A dwelling unit is any building or separate and independent part of a building where people live and can provide accommodation for one or more households.  It must have direct access from the street or common landing, staircase, passage or gallery where occupants can enter or leave without passing through anybody else's living quarters.

**Reference Periods**

Several different reference periods are used throughout the MICS Questionnaires.  A reference period refers to the time period to which a particular survey question relates, and for which information is collected.

1) *Last 2 years:*
   Any time from the month of the interview to the same month in 2013

2) *Last 12 months:*
   The 12 months preceding the date of the interview – any time from the month of the survey to the same month in 2014.

3) *Past month:*
   The 30 days preceding the date of the interview

4) *Last two weeks:*
   The two weeks preceding the date of the interview

5) *Yesterday, during the day or night:*
   The 24 hours preceding the date of the interview

# 3. MICS5 QUESTIONNAIRES AND ELIGIBLE RESPONDENTS

## 3.1: OVERVIEW OF QUESTIONNAIRES

The MICS5 includes four questionnaires; household, women 15-49 years of age, men 15-49 years of age and children under five years old (administered to the child's mother or caretaker).  The modules included in each questionnaire are as follows:

| Household Questionnaire | | | |
|------|-------------------------------|------|-------------------------------|
| HH | Household Information Panel | HC | Household Characteristics |
| HL | List of Household Members | WS | Water and Sanitation |
| ED | Education | HW | Handwashing |
| CD | Child Discipline | SI | Salt Iodization |

| Questionnaire for Individual Women | | | |
|------|-------------------------------|------|-------------------------------|
| WM | Woman's Information Panel | CP | Contraception |
| WB | Woman's Background | UN | Unmet Need |
| MT | Access to Mass Media and use of Information / Communication Technology | MA | Attitudes toward Domestic Violence |
| CM | Fertility/Birth History | SB | Marriage/Union |
| BH | Birth History | HA | HIV/AIDS |
| DB | Desire for Last Birth | TA | Tobacco and Alcohol Use |
| MN | Maternal and Newborn Health | LS | Life Satisfaction |
| PN | Post-Natal Health Checks | | |
| IS | Illness Symptoms | | |

| Questionnaire for Individual Men | | | |
|------|-------------------------------|------|-------------------------------|
| MWM | Man's Information Panel | MM | Marriage and Union |
| MWB | Man's Background | MSB | Sexual Behaviour |
| MMT | Access to Mass Media and use of Information / Communication Technology | MHA | HIV/AIDS |
| MCM | Fertility | MTA | Tobacco and Alcoholic Use |
| MDV | Attitude toward Domestic Violence | MLS | Life Satisfaction |

| Questionnaire for Children Under Five | | | |
|------|-------------------------------|------|-------------------------------|
| UF | Under-Five Child Information Panel | BD | Breastfeeding and Dietary Intake |
| AG | Age | IM | Immunization |
| BR | Birth Registration | CA | Care of Illness |
| EC | Early Childhood Development | AN | Anthropometry |

## 3.2:  ELIGIBLE RESPONDENTS FOR THE QUESTIONNAIRES

**Eligible Respondents for the Household Questionnaire**

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 one person, referred to as the **Household Respondent**, including the modules in the questionnaire where the information collected is about other household members. The Education Module is one such example.

For the purposes of the Household Questionnaire, an adult is defined as someone aged 15 years 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 make every effort to interview this person who is likely to be more knowledgeable about the household. Whenever possible, you should interview the household member who is likely to be more knowledgeable.

On the other hand, interviewing the household head is not a requirement for the household questionnaire and you are not expected to ask for the household head to do the interview.

You should also keep in mind that for practical reasons, it may be an advantage to begin the Household Questionnaire with a mother or primary caretaker (of a child under five years of age), since many of the questions/modules are about children, and mothers/caretakers provide more accurate responses to such questions better than anybody else. While you should not make a special 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. Multiple respondents to the questionnaire will undoubtedly lead to an uncontrolled, low quality interview, and may lead to errors in recording responses. Ideally, the household respondent is not expected to consult other members that may be available in the household. However, you may allow the household respondent to ask other members in order to get more correct information, especially on information such as age, which may affect the eligibility of some members for individual questionnaires, or modules where age checks are important, such as the Education, or the Child Discipline Modules.

**Eligible Respondents for the Individual Questionnaires**

When you have completed the Household Questionnaire, you will have identified women (age 15-49), men (age 15-49) and 'mothers or primary caretakers' (age 15 or above) 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.
   - If the mother is NOT recorded in the List of Household Members (that is, if the mother is not a member of this household), then the person who is acknowledged by the household respondent as the primary caretaker (in HL15 in the List of Household Members of the Household Questionnaire) should be the respondent to the Questionnaire for Children Under Five.

   - Note that if the mother of an under-five child is under the age of 15 years, that interview must not be conducted.

You will identify these eligible respondents by completing the List of Household Members in the Household Questionnaire.

If you visit a household where there are no members eligible for the individual questionnaires, you must still ask questions about the household to a knowledgeable adult household member and complete the Household Questionnaire.

As a general rule, the respondent to any of the questionnaires must be at least 15 years old. This also applies to the mother or primary caretaker of a child under age 5.

- In the rare event that a mother or primary caretaker is less than age 15, you should record 'Other' as the result of the interview in UF9 and specify that the mother/caretaker is less than age 15 and therefore cannot be interviewed.

- As long as the mother of the under-five child is a member of the household, no other respondent should be permitted to answer the questionnaire.

- If the mother of the child is unable to respond because of incapacitation, you should record 'Incapacitated' as the result of the interview.

> ➢ If the mother of an under-five child is not a member of the household, then the person identified as the primary caretaker of the child in the List of Household Members should answer the questionnaire.

**Finding and Re-Visiting Households**

Your supervisor will assign the households to be visited to each interviewer, and help you to find the households.  You must visit all these households and should not replace these households with other households that are not selected for interviews, as this will negatively affect the representativeness of the sample.

If no one is at home when you go to interview the household, ask the neighbours whether anyone lives at this location.  If it is occupied, ask the neighbours when the household members will return. Arrange with your supervisor to go back to the location when the household members are expected to be at home; for example, at the end of the day.  Note such plans on your cluster control sheet, including the time you are to return.

If no adult household member is at home, arrange to come back at another time.  Do not interview a household member younger than age 15, a temporary caretaker of the children, such as a daytime babysitter, and do not interview anyone who does not usually live in the household.  The rule to interview a knowledgeable adult household member cannot be relaxed or violated under any circumstances.

> ➢ Each household in the sample has to be visited at least three times (two re-visits) before you can mark HH9 (Result of household interview) as 'No household member or no competent respondent at home at time of visit', 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 which case HH9 would be marked as 'Entire household absent for extended period of time'.  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 it is necessary to revisit a household, unless you have been given a specific time to return, it is important that the visits be made at different times of the day.  For example, there is no point in visiting a household three times within the space of two hours.

If an eligible man or woman, or a mother or primary caretaker is not available for the individual interview or is not at home, find out from a household member or neighbour when he/she will return.  Note this on your cluster control sheet (Annex 1), follow your supervisor's instructions, and return to interview him/her at that time.  **Do not take responses for the individual questionnaires from anyone other than the eligible person him/herself.**

The person to be interviewed for the Questionnaire for Children Under Five should be the mother.

> ➢ A person other than the mother of the child under five can be interviewed only if the mother is living elsewhere or is deceased, and therefore does not appear in the List of Household Members in the Household Questionnaire.
>
>> • In these cases, the person who is acknowledged by the household respondent as the primary caretaker of the child in that household should be interviewed.
>>
>> • If the mother/primary caretaker is not available for interview or is not at home, try to find out when she/he will be available and return to the household at that time.
>>
>> • 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 available, you can complete the Questionnaire for Children Under Five, with the exception of the Anthropometry Module, since you need the child to perform measurements.

> ➢ In such a case, complete the questionnaire with the mother/primary caretaker, but leave the Anthropometry Module blank to be completed during the next visit.  Note this on your cluster control sheet and discuss with your supervisor.
>
> ➢ If the child is still not available after the re-visits, record the result in question AN2 as 'Child not present'.  Re-visits should be planned by supervisors, if possible, to measure the heights and weights of children, when children are not present at the time of the first visit to the household.

**Non Response**

> ➢ Ask your supervisor if you are in doubt about what to do when 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 respective questionnaires.
>
> ➢ 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.

# 4. GENERAL CHARACTERISTICS OF THE MICS QUESTIONNAIRES

**Character Formatting**

A standard coding and formatting system is used throughout the questionnaires. These conventions can be summarized as follows:

| | |
|---|---|
| SMALL CAPS | used for questions the interviewer will ask to respondents |
| *Italics* | instructions to the interviewer |
| Lower case letters | response category labels |
| *(italics enclosed in parentheses)* | 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 (Water and Sanitation Module, Household Questionnaire), you are required to ask whether the toilet facility is shared with members of other households.  If the response is "No", the skip instruction is to continue the interview with the next module 2⇨Next Module, so that WS10 and WS11 are not asked to the respondent:  These questions are only for toilets which are shared, and are designed to collect information on whether such toilets are shared only with other households and how many other households use the same toilet, or whether these are public facilities.

Skips are very important, since a failure to take a skip into account may result in:
   (a) Asking an inappropriate question to the respondent; and/or
   (b) Incorrectly skipping a whole section which should actually 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.  Example:  MN8 in the Maternal and Newborn Health Module of the Women's Questionnaire.

- Areas with a 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.  Example:  HH10 in the Household Information Panel and HC3 in the Household Characteristics module, both in the Household Questionnaire.

- Upper case letters are used to indicate response categories in questions where multiple responses can be accepted and coded.  Example: MN17 in the Maternal and Newborn Health Module, Women's Questionnaire.

- Numbers are used to indicate response categories in questions where only one response will

be coded.  For example, WS1 in the Water and Sanitation Module, Household Questionnaire. These questions constitute the majority of questions in all questionnaires.

- 'DK' is used throughout to abbreviate 'Don't Know'.

- For numeric response codes, '8', '98', '998' and '9998' are used throughout for 'DK' responses, while  '6', '96', '996' and '9996' are used for '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'.

- Some modules include "rosters", which are lists that involve the collection of information on the same subject for multiple persons or items.  For example, the Education Module in the Household Questionnaire is in the form of a roster, where educational level and attainment information is collected for all members of the household 5 years or older.

- 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.  For example, in question WS1 in the Water and Sanitation Module of the Household Questionnaire, 11⇨WS6 appears in the skip column, indicating that if the response was "Piped into dwelling" and you circled '11', you should ask question WS6 next.

- Probes are used to ask further questions to the respondent, and are either indicated as "*Probe:*" or with a question such as "ANYTHING ELSE?"  Example, CA2 and CA11 in the Care of Illness Module, Under Five Questionnaire.

- Prompts are used to explicitly ask about a specific item or a specific topic.  For example, in the case of household assets, the 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.  Example, HC8 in the Household Characteristics Module in the Household Questionnaire.

- 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 (Water and Sanitation Module, Household Questionnaire), the word 'main' is underlined ('MAIN') to emphasize that only the main 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 in the space provided.

**Types of Marks**

1) Write in response (print), for example, in the Household Information Panel of the Household Questionnaire:
   - HH1. Cluster number:   **1**   **2**   **3**

2) Circle Code, for example, in the Household Information Panel:
   - HH6. Area

     Urban   1
     Rural   ②

3) Tick Box, for example, greeting in the Household Information Panel:
   - ☑ *Yes, permission is given* ⇨ *Go to HH18 to record the time and then …*

4) Fill in (print) and circle, for example, HC5 in the Household Characteristics Module of the Household Questionnaire:
   - Other (specify)    Tempered Glass    96

5) Circle and fill in (print), for example, MN22 in the Maternal and Newborn Health Module of the Women's Questionnaire:
   - From card ................ 1 (lbs) **0**   **6** . **0**   **8**

**Leading Zero**

Wherever a number is to be filled in, if multiple spaces are provided, a leading zero has to be inserted if the response has fewer digits than spaces provided.  For example, MN10 and MN11 in the Maternal and Newborn Health Module.

# 5. HOW TO HANDLE AN INTERVIEW

The interviewer and the respondent are strangers to each other; 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, therefore, make sure that your appearance is neat and you also appear friendly as you introduce yourself.

- On meeting the respondent, the first thing you should do is to introduce yourself, stating your name, the organization you are working for, the objectives of the survey, and what you want the respondent to do for you.

- You are advised to avoid long discussions on issues which are not related to the survey and which may consume a lot of your 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 help you 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 or relevant.

- Keep in mind 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 <u>exactly</u> as they are written. Even small changes in wording can alter the meaning of a question.

- Ask the questions <u>in the same order</u> as they are given on the questionnaires. Do not change the sequence of the questions.

- Ask <u>all</u> 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. Those cases when you are expected to 'help' the respondent, such as probing for answers or using information to remind the respondent of dates, ages, and durations are clearly indicated on the questionnaires, and are topics that will be covered during this training.

- Do not leave a question unanswered unless you have been instructed to skip it, as questions left blank are difficult to deal with later. When questionnaires arrive at the head office, it may look as though you forgot to ask the question.
  - Always write in '0' when a zero answer is given, example, CM5 in the Fertility/Birth History Module in the Women's Questionnaire.
  - For some questions, the code 'DK' will 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 'DK' response is not printed on the questionnaire, you must make sure that the respondent provides 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 his/her cooperation and giving you time to interview him/her. This helps to leave the way open to future interviews (for re-visits) if necessary.

- Avoid over-staying in the respondent's household even if he/she is very friendly and welcoming.

# 6. GENERAL GUIDELINES FOR A SUCCESSFUL INTERVIEW

**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, therefore you should dress neatly and simply at all times.

When first approaching the respondent, do your best to make him/her feel at ease? With a few well-chosen words, you can put the respondent in the right frame of mind for the interview. Always open the interview with a smile and greeting 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 in the development of plans for children and women and that his/her cooperation will be highly appreciated.

**Gain rapport with the respondent**

Try not to arrive at the selected household at an inconvenient time of day, such as mealtimes, or too late or early during the day. Try to arrive when the respondents 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 members of 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.

Make sure that the respondents do not confuse you with others who might be visiting households for other reasons; for instance, for the selling of goods, or the conducting of some survey other than the MICS.

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 never approach with such words as "Are you too busy?" or "If you are not too busy?" of "If you don't mind ..." Such questions will invite refusal before you even start. Rather, tell the respondent "I would like to ask you a few questions, please."

**Emphasize the confidentiality of any information collected**

Always stress confidentiality of the information you obtain from the respondent. Explain to the respondent that the information you collect will remain strictly confidential and that no individual names will be used without their consent, and that all information will be grouped together and make anonymous when writing the report.

Use a language understandable by the respondent to get this message across. Never mention other interviews or read the questionnaire with other interviewers or the 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**

You should phrase the question as it is in the questionnaire.

- If you realize that an answer is not consistent with other responses, then you 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 his/her answer if necessary, as 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.

- However, never point out to the respondents inconsistencies that you may have identified in a manner that may be understood as if you are testing the respondent's honesty or integrity.

**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 him/her, 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 Women's and Men's Questionnaires, which include several topics that the 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 him/her 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 become interested in the question. Spending a few moments to talk about things unrelated to the interview (e.g. his/her town or village, the weather, his/her daily activities etc.) may be useful.

**Adopt a non-judgemental attitude**

"Social desirability response bias" is a potential problem in surveys and refers to the tendency for respondents to present a favourable image of themselves to the interviewers. 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 desirability response bias, it is very important to adopt a non-judgemental attitude and to not display any of your own attitudes, such as cultural or religious values, political preferences, and the like.

# 7. THE ROLE OF INTERVIEWERS

Interviewers play a central role in the collection of data, and the ultimate outcome of the exercise depends on how well you conduct the interviews.  <u>Success, therefore, depends on the quality of the interviewers' work</u>.  It is therefore important that you are consistent in the way you put the questions to the respondent.

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

In general, the responsibilities of the interviewers will include:

- With the assistance of the field supervisor, locating the 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 the first or second visit due to various reasons;

- Ensuring that the information given is correct by keeping the respondent focused on the questions;

- Recording their specific observations on issues experienced at households in the notebook provided;

- Preparing additional debriefing notes for the field supervisor on other problems or observations;

- Assisting the measurer while he/she is performing the anthropometric measurements.

# 8. THE HOUSEHOLD QUESTIONNAIRE

The purpose of the Household Questionnaire is to provide information on the general characteristics of the population, the households and where the households are located.  You will use the Household Questionnaire to collect important information on topics such as household composition and educational achievement, and housing quality and sanitation.

You will also use this questionnaire to identify women and men who are eligible (qualified) to be interviewed for the Questionnaire for Individual Women and Individual Men, as well as the mothers (or primary caretakers) of children under five years old who will then be administered the Questionnaire for Children Under Five.

## 8.1:  HOUSEHOLD INFORMATION PANEL

The Household Information Panel consists of an upper panel (HH1 to HH7) and a lower panel (HH9 to HH15).  The upper panel should be filled in before you approach the household.  Your supervisor will have provided the necessary information to you for filling the entire upper panel 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's name and number**

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

**HH4. Supervisor's name and number**

>    Enter your supervisor's name and number, as provided by your supervisor.

**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, 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.  In light of this, it is therefore recommended that the date be entered AFTER the questionnaire has been completed.

**Note that in HH1 to HH5, multiple spaces have been provided for the information to be recorded. No space is to be left blank, but must instead have a digit from 0 to 9.**

**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**

> Circle the code for region as instructed/provided by your supervisor. Note that for the purpose of the MICS, we have 7 regions.

After HH1-HH7 have been filled out, approach the household and identify an eligible **household respondent. I**ntroduce yourself by name and show your identification card, and begin by saying the following to the respondent:

> WE ARE FROM THE STATISTICAL INSTITUTE OF BELIZE. WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THIS INTERVIEW WILL TAKE ABOUT 25 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL. MAY I START NOW?

You may change the order and or the wording of these introductory sentences - 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, tick the appropriate box and begin the interview.

- If the respondent indicates that you have come at an inconvenient time, discuss with him/her when would be a good time for you to go back and make a note of the time and date.
- Always ensure that you keep your appointment.
- If the respondent does not agree to continue (refuses to be interviewed), even after you have made further attempts to explain the importance of the survey and to persuade him/her to participate, thank him/her and leave the household to go to the next selected household.

Later, discuss the refusal with your supervisor; you or another person from the team may make a second attempt to interview the household. This will depend on your description of the refusal. However, remember that a household's participation in this survey must be on a voluntary basis,

and while you are expected to persuade potential respondents to participate, they have no legal obligation to do so.

You will complete question HH9 (Result of household interview) **after** the Household Questionnaire has been completed, <u>or after all attempts have been made to interview the household</u>.

**HH9. Result of household interview**

<u>'Completed'</u>:  If the Household Questionnaire is completed, circle '01'.

<u>'No household member or no competent respondent at home at time of visit'</u>:  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 <u>after repeated visits</u>, circle '02'.

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

<u>'Refused'</u>:  If the household refuses to be interviewed, circle '04'.

<u>'Dwelling vacant / Address not a dwelling'</u>:  If a dwelling assigned to you is not occupied, 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 may be a shop, a church, a school, or some other type of facility that is not used as a living area.  After making sure there are no residential units in the back of or above the premises, circle '05'.

<u>'Dwelling destroyed'</u>:  If the dwelling was burnt down or was demolished in some other manner, circle '06'.

<u>'Dwelling not found'</u>:  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 the sample list, circle '07'.
- Remember that you are not looking for the household head whose name may have been provided to you.  Such names will be provided as information that you will use to locate the residential unit <u>where a household is known to be living</u> according to the information at the time of selection of the household for the survey.
- Your target is to find the dwelling or location where a household is living.

<u>'Other'</u>:  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 ill (and no other knowledgeable adult household member lives in the household);
- The questionnaire is partly completed. The latter means that you have started the interview but after making some progress, the interview was discontinued.
- A household questionnaire which was completed from beginning to end, but that has a few questions or a module unanswered should NOT be considered a "partly completed" questionnaire.

You will complete questions HH10, HH11, HH12, HH13A and HH14 <u>after the household questionnaire has been completed</u>.

**HH10. Respondent to Household Questionnaire**

Enter the name and line number (from the List of Household Members, 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 List of Household Members and enter the total here. Normally, this is the line number of the last member recorded in the List of Household Members.

**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.

**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.

**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 circled line numbers in column HL7B. You will be using the Questionnaire for Children Under Five to interview the mothers or primary caretakers of these children.

You will complete questions HH13, HH13B, and HH15 <u>after all the questionnaires for the household</u> have been completed.

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

Enter the number of the completed Questionnaires for Individual Women here.

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

Enter the number of the completed Questionnaires for Individual Men here.

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

Enter the number of the completed Questionnaires for Children Under Five here.

Assuming that all interviews for the household have been successfully completed (results of the interviews are coded '01' for 'completed' in WM7, MWM7 and UF9), the numbers in HH13, HH13B and HH15 should be equal to 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.

**HH18. Record the time**

Record the time of the day you start the household interview. For example, if the time is 10 minutes past 4 o'clock in the afternoon, record 04 for 'Hour' and '10' for 'Minutes'.

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.

## 8.2:  LIST OF HOUSEHOLD MEMBERS

A household is a person or group of persons who usually live (at least 4 nights of the week) 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 living arrangements; they should be counted as separate one-person households.

- Domestic helpers, 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).
- Unrelated persons who live and cook meals together would be considered to form one household.

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

You should note the distinction between a family and a household:

- Family reflects blood descent and marriage; while
- Household is used in this survey to identify an economic/social unit.

You must be conscious of, and use the criteria provided on household membership to determine which individuals make up a particular household.

**HL1:**  *Line no.*

Note that the List of Household Members includes **HL1. Line number**.

- This is the number used to identify each person listed in the household.
- 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, as once household members are assigned these line numbers after the List of Household Members 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, THAT IS, PERSONS WHO SLEEP AT LEAST 4 NIGHTS AND SHARE AT LEAST 1 DAILY MEAL.  PLEASE START WITH THE HEAD OF THE HOUSEHOLD.**

**Always record the name of the head of the household in line 01**.  This is the only stipulation to the order of listing – record all other household members in the order in which they are given by the respondent.

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 the listing for questions HL2 to 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.
- In the rare cases where household members may have difficulty identifying who the household head is, explain that for the purpose of the survey, identifying a household head will assist us in establishing the composition of the households and relationships among household members.

If you interview a household that has more than 15 members, tick the box following line 15.

- Take a fresh Continuation Household Questionnaire and fill in all the information on the cover page (HH1 to HH7).
- Then write the information for the additional household members.
- Return to the primary Household Questionnaire to complete the interview.
- Write 'SEE CONTINUATION' across the top of the cover sheet of the primary questionnaire.
- Once you have completed the Household Questionnaire, keep the Continuation Questionnaire inside the primary one so that they remain together.

The List of Household Members 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.  This is because 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 are 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 HL15 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 the head of the household by the household respondent).  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.  You do not need to print the full name of each individual.  Record the name in a way that will help you and respondents identify each member uniquely.

**HL3. WHAT IS THE RELATIONSHIP OF (*name*) TO THE HEAD OF 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 List of Household Members.  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 naturally 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 the household member listed is not related to any of the household members but is a domestic helper living in the household, this should be coded as '14' ('Household Helper – Live-in').

If a household member is not related to the head of household, such as a friend who lives with the household, enter '96' ('Other – Not related').
Enter '98' ('DK') 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 try to guess the sex of the household member from the name provided to you, as this can lead to mistakes. 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 because of the use of the respondent's relationship ('sister') to Mary. 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 (such as Shawn, Shannon, Cameron), 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 HL15) for the person on line 01, continue to the person listed on line 02, until you have completed HL5 to HL15 for all household members.

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 HL15.

**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'.

**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'. This effectively means that the person is above age 50, since 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 supervisor can have an idea of the eligibility of the person to administer the individual questionnaires.

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

**Questions HL7, HL7A and HL7B concern eligibility information.**

**HL7.** *Circle line number if woman age 15-49.*
Circle the line number already printed 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 age 15-49.*
Circle the line number already printed 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.

**HL7B.** *Circle line number if age 0-4.*
Circle the line number already printed in this column if the household member is a child age 0-4 (this includes children age 4). You will not ask this question to the respondent.

**For children age 0-17 years (ask HL11-HL14A):**
For all children under the age of 18 years, we want to know whether their own (natural) parents are recorded in the List of Household Members, the parents' survival status and their whereabouts. This information can be used to measure the prevalence of orphanhood and child fostering in the population. For everyone age 18 and older, HL11-HL14A 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/wife from a previous relationship or children of their 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).

**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 must be recorded in the List of Household Members if she lives in the household), record her line number in the space provided and continue to HL13. If the mother is not a member of the household (that is, she is not recorded in the List of Household Members), record '00' and proceed to the next question (HL12A).

**HL12A. Where DOES (***name***)'S NATURAL MOTHER LIVE?**

This question is asked only for those children whose mothers are alive but not living in the interviewed household (recorded '00' in HL12). Circle '1' if the natural mother is living in the country of Belize but in another household, and circle '2' if she is living in an institution in the country of Belize (such as nursing home or prison). If the mother is living abroad, circle '3' regardless of whether she is living in a household or in an institution. If the mother is homeless, circle '8' (DK).

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

By 'natural' we mean the biological father. In many cultures, people consider other people's children whom they are raising as their own, especially children of their husband/wife from a previous relationship or children of their sisters, etc. You should be certain that the respondent understands that you are asking about the man who is the biological father of the child.

Record whether or not the child's natural father is still alive by circling the code corresponding to the response given. If the child's natural father is not alive or if the respondent does not know, skip to HL15. Otherwise, continue with the question in the next column (HL14).

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

**HL14A. WHERE DOES (*name*)'S NATURAL FATHER LIVE?**

Fill in these questions in exactly the same way as HL12 and HL12A. If the line number of thr father is recorded in HL14, skip to HL15. If the father of the child is alive (HL13='1') but not living in this household (HL14='00'), ask HL14A.

**HL15. For children age 0-14: WHO IS THE PRIMARY CARETAKER OF (*name*)?**

If the household member is a child age 0-14 years (this includes those age 14), you will record the line number of his/her 'mother or primary caretaker' (who should be age 15 or above) in this column.

If the child is living with his/her mother in the same household, you will copy the line number from HL12, and will not need to ask this question. If HL12 is blank or '00', then you will ask this question to establish the primary caretaker of the child. This person should be a member of the household.

If the child is under the age of five, you will later complete the Questionnaire for Children Under Five with the person whose line number you are recording.

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 recorded in the List of Household Members (because she is living elsewhere or deceased), the person you will identify as the primary caretaker with this question will be the respondent to the Questionnaire for Children Under Five.
- If the mother is a member of the household but cannot be administered the questionnaire because she is incapacitated, record '05' at UF9 on the Questionnaire for Children Under Five.

When you have completed the recording of all household members and all questions in the List of Household Members, probe (ARE THERE ANY OTHERS WHO LIVE HERE, EVEN IF THEY ARE NOT AT HOME NOW?) 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 List of Household Members for all household members, prepare the individual questionnaires 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) in the Woman's Information Panel at the top of the Questionnaire for Individual Women, and copy the information in HH1 and HH2 (in the Information Panel of the Household Questionnaire) to the appropriate spaces provided in WM1 and WM2.

- 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) in the Man's Information Panel at the top of the Questionnaire for Individual Men, and copy the information in HH1 and HH2 (in the Information Panel of the Household Questionnaire) to the appropriate spaces provided in MWM1 and MWM2.

- For each child under age five (whose line numbers are circled in HL7B), write his/her name and line number (UF3 and UF4) <u>and</u> the name and line number of his/her mother (or primary caretaker) (whose line number is written in HL15 corresponding to the line number of this child) in the spaces provided (UF5 and UF6) in the Under-five Child Information Panel at the top of the cover page of the Questionnaire for Children Under Five.  Copy the information in HH1 and HH2 (in the Information Panel of the Household Questionnaire) to the appropriate spaces provided in UF1 and UF2.

  - <u>Note that if the mother of the child is a member of the household, no one else's name and line number but the mother's should appear in UF5 and UF6.</u>

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.

## 8.3:  EDUCATION MODULE

The structure of the Education Module is similar to that of the List of Household Members.
Information should be collected horizontally in this module.  To prepare the module for
administration:

1. First, copy to ED2 the names (HL2) and ages (HL6) of **all** household members in the List of
   Household Members;
2. Then, complete all education questions for each eligible person (age 5 and above), before
   you move on to the next person.

**ED1.** *Line number:*

> This is the same number assigned to each person on the List of Household Members.  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 <u>each person</u> from the List of Household Members (HL2 and HL6)
> to their corresponding line numbers.

***For household members age 5 and above*:**

For each household member age 5 and above, ask ED3, ED4A and ED4B.  These questions ask about
educational attainment for <u>all household members age 5 and older</u>.  Note that if children younger
than five are attending 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 rest of the questions are not
> applicable for this person.

> 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 <u>long-term</u> courses in
> mechanics or secretarial work.  'School' also includes correspondence courses or online
> learning programmes leading to a diploma, associate or higher degree.

> Schools in the Mennonite communities, home schools and those schools that cater to
> persons with special needs, for example, Stella Maris, are also captured here, as well as
> institutions such as CET/ITVET/VOTEC, Police Training School, Belize Defence Force, etc.

> 'Preschool' is listed for children who do not attend the first grade of primary school, 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 ever 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.

- If the response is 'primary', probe for whether it was at the infant or standard level.
- If the person took vocational studies in institutions such as CET/ITVET/VOTEC, Police Training School, Belize Defence Force, Belize Tourism Board or any other institution that is outside the formal schooling, usually in short, intensive courses or part-time, circle '96' ('Other').
- Circle '96' if the person attended a special institution such as Stella Maris or a Mennonite school.
- Circle '98' if the respondent 'Doesn't know'.
- If the highest level of school the child has attended is preschool (ED4A= '00'), skip to ED5.

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 only for a few weeks.

If a person is temporarily not at school due to vacation, holiday, illness, industrial dispute, weather or other reason, the highest level would be the last one they attended before the break.

**ED4B. WHAT IS THE HIGHEST STANDARD/FORM/YEAR** *(name)* **COMPLETED AT THIS LEVEL?**

Enter the highest standard/form/year completed or '98' for 'DK'.  If the first standard/ form/ year at this level has not been completed, enter '00'.

- For instance, if a person has attended primary school but did not complete the first standard, then the level for this person will be circled as '02' in ED4A, and the standard/form/year will be entered as '00' in ED4B.
- Correspondingly, if a person has attended secondary school but did not complete the first form, then the level for this person will be circled as '03' in ED4A, and the standard/form/year will be entered as '00' in ED4B.
- Similarly, for a child who is attending standard 5 in primary school at the time of the interview, the level will be coded as '02' in ED4A and the standard/form/year as '04' in ED4B, since this person has not yet completed standard 5.

Note that if the level of schooling is given as preschool in ED4A, the standard/form/year (ED4B) should be left blank.

**The equivalency of the Belize Education System to the Grade System is given below:**

| Belize Education System | Grade System | | Belize Education System | Grade System | |
|---|---|---|---|---|---|
| Infant 1 | ➡ | Grade 1 | Form 1 | ➡ | Grade 9 |
| Infant 2 | ➡ | Grade 2 | Form 2 | ➡ | Grade 10 |
| Standard 1 | ➡ | Grade 3 | Form 3 | ➡ | Grade 11 |
| Standard 2 | ➡ | Grade 4 | Form 4 | ➡ | Grade 12 |
| Standard 3 | ➡ | Grade 5 | Associate (year 1) | ➡ | Grade 13 |
| Standard 4 | ➡ | Grade 6 | | | |
| Standard 5 | ➡ | Grade 7 | | | |
| Standard 6 | ➡ | Grade 8 | | | |

**The standard, form or year of the various school levels are given below:**

| School Level: | Standard, form or year |
|---|---|
| Infant: | Years 1 and 2 |
| Primary: | Standards 1, 2, 3, 4, 5 and 6 |
| Secondary: | Forms 1, 2, 3 and 4 |
| Associates: | Years 1 and 2 |
| Bachelor's (BSc.) & Higher: | Years 1 through 6 |

### *For household members age 5-24 years:*

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

Questions ED5 to ED8 refer to current and recent school attendance. You will need to be careful in asking these questions, depending on when you are conducting the interview – whether schools are open or on holiday. 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 CURRENT SCHOOL YEAR, DID** *(name)* **ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?**

> Circle the code corresponding to the answer given. If the response is 'Yes', continue to the next question (ED6). If 'No', skip to ED7.
>
> - If the interview is carried out in August 2015 and the person is attending primary school and is still on summer vacation, then the question will refer to the 2014-2015 school year.
> - However, if the person is attending high school and has already returned to school, the question will refer to the 2015-2016 school year.
> - On the other hand, regardless of the school level, if the interview is conducted in October 2015 for example, reference in all cases will be to the 2015-2016 school year.

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

> Circle the code for the level of school, and enter the household member's current standard/form/year.
> - If it applies, circle '98' for 'DK'.
> - Enter the standard/form/year number attended using '01', '02', etc.
> - If a child is in preschool, leave standard/form/year blank and skip to ED7.
>
> 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 <u>current</u> 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.

**ED7. DURING THE PREVIOUS SCHOOL YEAR, DID** *(name)* **ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?**

> If the child attended school at any time during the previous school year, circle '1' and continue with ED8.  If the answer is 'No' or 'DK', circle the appropriate code and go to the household member on the next line.

**ED8. DURING THAT SCHOOL YEAR, WHICH LEVEL AND STANDARD/FORM/YEAR DID** *(name)* **ATTEND?**

> Circle the code for the level of school attended and fill in the standard/form/year.  Circle '98' if the respondent doesn't know the level and/or '98' if the respondent doesn't know the standard/form/year.  If the household member was in preschool, leave standard/form/year blank, and go to household member on the next line.

If you interview a household that has more than 15 members, you should have a second Continuation Household Questionnaire for this household where the cover page (HH1 to HH7) information is completed, and the information of additional member(s) have been entered in the List of Household Members.  Once you have completed the Education Module in the primary Household Questionnaire, ask the questions in the Education Module of the Continuation Household Questionnaire and record the information for these household members.

Return to the primary Household Questionnaire to complete the interview.  Remember that once you complete the Household Questionnaire you should keep the continuation questionnaire inside the primary one so that they remain together.

## 8.4: SELECTION OF ONE CHILD FOR CHILD DISCIPLINE

This module is used to list all children age 1-14 years eligible for the Child Discipline Module. You will review the List of Household Members and record each of the children age 1-14 years (including children age 1 and age 14) in SL2A in order according to their line number (HL1). You should not include other household members outside of the age range of 1-14 years. Then you will use the table in SL8 to select one child randomly.

This module has a unique structure and approach. You will complete the whole module yourself, and will not need to ask any questions. This module helps you select one child age 1-14 years randomly and collect information on this child in the next module.

It is **critical** that you follow the instructions and perform the random selection perfectly. Random selection means that the selection is unbiased. If children have been selected randomly by all interviewers in the whole survey, the selected children will be representative of all children, including those who have not been selected.

**SL1.** *Check HL6 in the List of Household Members and write the total number of children age 1-14 years*

> Count the number of children age 1-14 years from HL6 in the List of Household Members and write the total number here.

**SL2.** *Check the number of children age 1-14 years in SL1*

- If there are no children age 1-14 years in the household, tick the corresponding box ('*Zero*') and go to Household Characteristics module.
- If there is only one child, tick the corresponding box ('*One*') and go to SL9, record the rank number as '1' and enter the child's line number (HL1), name (HL2) and age (HL6). This means that since there is only one child age 1-14 in the household, random selection will not need to be carried out.
- If there are two or more children, tick the corresponding box ('*Two or more*') and continue with SL2A, to perform the random selection.

**SL2A**. *List each of the children age 1-14 years below (in the grid) in the order they appear in the List of Household Members. Do not include other household members outside of the age range 1-14 years. Record the line number (HL1), name (HL2), sex (HL4), and age (HL6) for each child.*

> Note that if there are more than 8 children 1-14 years in the household, you need only record the first 8 children.

**SL3.** *Rank number*

This is the number used to identify the one child randomly chosen for this Child Discipline module. You will use this number later, to complete the selection. You do not need to fill in or do anything in this column since the numbers are already provided.

**SL4.** *Line number from HL1*

This is the number used to identify each child from the List of Household Members who is eligible for this module. Go to the List of Household Members and record in the grid each of the children age 1-14 years (including those age 1 and those age 14) in the same order of their line numbers (HL1). Do not include other household members outside of the age range of 1 to 14 years.

Note that once you have entered the name of a household member here, you automatically assign a rank number to this person (SL3).

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.

**SL5.** *Name from HL2*

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

**SL6.** *Sex from HL4*

Record the eligible child's sex from HL4.

**SL7.** *Age from HL6*

Record the eligible child's age from HL6.

**SL8.** *Check the* *last digit of the household number (HH2) from the cover page. This is the number of the row you should go to in the table below.*

*Check the* *total number of children age 1-14 years in SL1 above. This is the number of the column you should go to in the table below.*

*Find the box where the row and the column meet and circle the number that appears in the box. This is the rank number (SL3) of the selected child.*

The instructions provided in this question should be self-explanatory. Proper use of the table here leads to an unbiased selection of one child from all those recorded in SL2A.

Note that if there are more than 8 children age 1-14 in the household, then you should be using the column '8+' in this table and perform the selection accordingly.

**SL9.** *Record the rank number (SL3), line number (SL4), name (SL5) and age (SL7) of the selected child*

## 8.5: CHILD DISCIPLINE MODULE

The purpose of this module is to obtain information on the disciplinary methods used with children age 1-14 years by adults living in the same household. The module aims to elicit a range of disciplinary practices, from non-violent approaches to psychological aggression to moderate and severe forms of physical punishment.

The questions included are specially designed to measure some common ways in which parents discipline their children. These questions are not intended to cover ALL practices 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 disciplinary methods mentioned.

Beware that in rare circumstances the selected child for this module could be the respondent's spouse/partner whose age is less than 15. Even though the module is designed to collect information on the disciplinary methods used with children, this is a unique situation where the selected member is married despite her young age. Under this condition, you may need to rephrase all of the questions to adapt to this specific case.

**CD2. *Write the line number and name of the child from SL9***

> Record the line number and name of the selected child and use this child's name in the following questions, where indicated.

**CD3. A**DULTS USE CERTAIN WAYS TO TEACH CHILDREN THE RIGHT BEHAVIOUR OR TO ADDRESS A BEHAVIOUR PROBLEM. **I** WILL READ VARIOUS METHODS THAT ARE USED. **P**LEASE TELL ME IF <u>YOU OR ANY OTHER ADULT IN YOUR HOUSEHOLD</u> HAS USED THIS METHOD WITH (*name*) <u>IN THE PAST MONTH</u>.

> First, start with the introductory sentence and then ask the questions [A] to [K]. 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 interview date – and only in relation to this child.

> When asking the questions, remind the respondent, from time to time, that you are asking about the last one month, and that you are interested if she/he or any other adult in the household has used this method with the child. Circle '1' for 'Yes' or '2' for 'No' in all questions. If the respondent says 'Don't know', this should be recorded as 'No' considering the absence of a clear reporting otherwise.

> All methods can be used alone, or in combination with other disciplinary measures. It is important to remember that we are trying to capture disciplinary methods used by all adult household members, not just the respondent.

If the selected child was away from the household/household members during the past month, then you will need to circle '2' for 'No' in all sub-questions from [A] to [K].

In the rare case that the selected child is the respondent's spouse/partner, reword CD3 as follows: **PLEASE TELL ME IF <u>YOU OR ANY OTHER ADULT MEMBER OF YOUR HOUSEHOLD</u> HAS USED THIS DISCIPLINARY METHOD WITH (*name*) <u>IN THE PAST MONTH</u>**.

**[A] 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 or not granted on a regular basis. 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. For example:

> "**DID YOU (OR ANY OTHER ADULT IN THE HOUSEHOLD) FORBID (*name*) FROM LEAVING THE HOUSE OR FROM GOING OUTSIDE FOR A TIME?**" or

> "**DID YOU (OR ANY OTHER ADULT 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.

**[B] 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 inappropriate. For example, a young child playing with matches may be told not to do so, because he or she could accidentally start a fire.

**[C] 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) the child back and forth more than once. This is a method some parents may use to punish a child for bad behaviour, particularly with young children.

**[D] SHOUTED, YELLED AT OR SCREAMED AT HIM/HER.**

Parents/caretakers may raise their voice when children do something they consider wrong or speak to them in a firm manner. These types of behaviours can be common among parents/caregivers and may not always qualify as abusive. This question is not intended to capture mild forms of verbal discipline but rather to capture a parent expressing anger or disapproval towards a child in a harsh manner.

**[E] GAVE HIM/HER SOMETHING ELSE TO DO.**

This question is designed to capture another non-violent discipline technique, that is, 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 FROM THE MISBEHAVIOUR BY GIVING HIM/HER SOMETHING ELSE TO DO**".

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

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

**[G] 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 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. Remember, <u>you are asking if the method of punishment was used with this child during the last one month</u>.

**[H] CALLED HIM/HER DUMB, LAZY, OR ANOTHER NAME LIKE THAT.**

Some parents/caretakers may react to child's perceived misbehaviours by using offensive or derogatory language.

**[I] HIT OR SLAPPED HIM/HER ON THE FACE, HEAD OR EARS.**

This asks if anyone 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 <u>bare hand</u>. (All questions using these terms refer to use of a bare hand, unless another object is explicitly mentioned.)

**[J] HIT OR SLAPPED HIM/HER ON THE HAND, ARM, OR LEG.**

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

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

This item covers the harshest form of physical punishment.

**CD4. 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 physical punishment and should be asked last, after asking about the child's experience of the different disciplinary methods. The question <u>asks the respondent for her/his own opinion</u> 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 the child has experienced physical punishment says that he/she does not believe in such punishment. The respondent may not be the one who used

that form of punishment with the child, as he/she is reporting about methods used by <u>any adult household member</u>.

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

## 8.6: HOUSEHOLD CHARACTERISTICS MODULE

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

**HC1B. WHAT IS THE FIRST 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 first language of the household head.

**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, by the household members. 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. For example, if a household member regularly sleeps in the kitchen, it should be counted as a 'room used for sleeping'.

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

**HC3. *Main material of the dwelling floor: Record Observation.***

We are interested in what is the main material covering the floor, not what is underneath. Circle the correct code for the main 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: Record Observation***

We are interested in what is the main material covering the roof, not what is underneath. Circle the correct code for the main material of the dwelling roof, based on your observation. Before entering the dwelling, 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).

**Note:** The 'roof' is what is at the top of the building on the outside, regardless of the number of floors, and whether or not all floors are occupied by the selected household.

### HC5. *Main material of the exterior walls:  Record Observation*

We are interested in what is the <u>main</u> material covering the exterior walls, not what is underneath.  Circle the correct code for the main material of the dwelling walls, based on your observation.  Before entering the dwelling, 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 <u>MAINLY</u> 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), biogas or kerosene is mainly used, circle '01', '02', '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 again, 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.

Please note that 'Biogas' includes gases produced by fermenting manure in an enclosed pit.

### 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. This includes cases where the house is an open plan design, where the kitchen space form part of the room used for living, sitting and dining.
- 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 (HC8 and HC9) will be used as an approximate measure of the socio-economic status of the household.  In asking these questions, you have to remain neutral and not show any reactions to any of the answers given.

**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, FIXED LINE TELEPHONE, REFRIGERATOR, and so on.**

**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.  Bicycles for children (used as a toy) should not be considered.

Ask the question for the following items: **WATCH, CELL PHONE, BICYCLE, MOTORCYCLE/SCOOTER, ANIMAL-DRAWN CART, CAR/TRUCK, BOAT WITH MOTOR, and so on.**

**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 (HC11).
- 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, and record the response in the space provided.

**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), for raising animals, and/or for 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 ACRES OF AGRICULTURAL LAND DO MEMBERS OF THIS HOUSEHOLD OWN?**
Record the <u>total number of acres of land owned by all members of the household</u> that can be used for agriculture.

- If 95 or more hectares are owned, record '95'.
- If less than one acre, record '00'.
- 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?**
<u>This question is only asked if the response to HC3 was 'Yes'</u>. <u>Read out each item</u> 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, and count turkeys and ducks together.

- <u>If the answer is 'none', record '00' for that animal/animal group</u>.
- 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, record '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; TURKEYS, DUCKS.**

**HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE A BANK ACCOUNT, A BANK BOOK OR CREDIT UNION BOOK?**
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.

## 8.7: WATER AND SANITATION MODULE

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

If needed, use the pictorials depicting various water sources and sanitation facilities in Annex II. The pictorials could help you with identifying which response categories you should be circling. However, these pictorials should not be shown to the respondents.

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

- '11' – <u>Piped into dwelling</u>, 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' – <u>Piped into compound, yard or plot</u>, 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' – <u>Piped from neighbour</u> - the household may be obtaining water from a neighbour's house or yard connection.

- '14' – A <u>public pipe / standpipe</u> is a water point from which the public may collect their water. A standpipe may also be known as a public pipe. Public standpipes can have one or more taps and are typically made of brickwork, masonry or concrete.

- '21' – A <u>tube-well / borehole / hand-pump</u> 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 through a pump that may be powered by humans, animals, wind, electricity, diesel fuel or solar energy.

- '31' – A <u>protected dug well</u> 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' – <u>An unprotected dug well</u> is a dug well for which <u>one or both</u> of the following are true:
  - (1) the well is not protected from run-off water; and/or
  - (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 <u>protected spring</u> 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 <u>unprotected spring</u> is a spring that is subject to run-off or bird droppings or animals.  Unprotected springs typically do not have a 'spring box' as described above..

- '51' – <u>Rainwater collection</u> refers to rain that is collected or harvested from roof and stored in a container, tank or cistern until used.  Ground or surface rainwater catchments should not be considered under this category.

- '61' – A <u>tanker-truck</u> is where a water source transports and sells/distributes water by means of a tanker truck.

- '71' – <u>Cart with small tank/drum</u> 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' – <u>Surface water</u> 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 sealed 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.

**WS1. WHAT IS THE <u>MAIN</u> 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.  <u>If the source varies by season, record the source for the season of the interview</u>.
- If the response is 'Piped into dwelling', 'Piped into compound, yard or plot', or 'Piped from 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. <u>Note that the next question is only asked if the response to this question is 'Bottled water'</u>.
- For all other responses, skip to WS3.

**WS2. WHAT IS THE <u>MAIN</u> SOURCE OF WATER USED BY YOUR HOUSEHOLD FOR OTHER PURPOSES SUCH AS WASHING, BATHING 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 from neighbour', circle '11', '12', or 13 respectively, and skip to WS6.
- Otherwise circle appropriate code and continue to the next question.

**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 '3' 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 or yard/plot.  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 for one round trip 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').  If the respondent answers using hours, <u>probe to find the best estimate for one round trip while converting to minutes</u>.  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.

If the respondent has told you that the water is delivered to their dwelling, probe to determine who is usually responsible for accepting and handling this delivery within the household.

The purpose of the following two questions, WS6 and WS7, is to determine whether the household's 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', 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.

> Probe: "**ANYTHING ELSE**?"  Record all items mentioned (for example, the household may be filtering the water and adding chlorine at the same time).

> If the respondent mentions a method that is not included in the pre-coded responses, 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, no other codes cannot be circled.

> Definitions of various methods of water treatment are as follows:
> - 'A' – <u>Boil</u> refers to boiling or heating water with fuel.
> - 'B' – <u>Add bleach/chlorine</u> refers to using liquid chlorine bleach or bleaching powder to treat drinking water.
> - 'C' – <u>Strain it through a cloth</u> refers to pouring water through a cloth that acts as a filter for collecting particles from the water.

- 'D' – <u>Use water filter</u> 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.

- 'E' – <u>Solar disinfection</u> consists of exposing water, stored in buckets, containers or clear vessels, to sunlight.

- 'F' – <u>Let it stand and settle</u> 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 how well a household toilet or latrine (sanitation facility) prevents the users from coming into contact with human waste. <u>It may be necessary to observe the facility</u>. 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' to '15') are given, probe: **"WHERE DOES IT FLUSH TO?"** Circle the code corresponding to the response given.
- If the any of the pit responses ('21' to '23') are given, probe to find out what type of pit latrine, or ask permission to observe the facility. Circle the corresponding code.

Definitions of various types of toilet facilities are as follows (See pictorials in Annex II):

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 <u>piped sewer system</u> 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 <u>septic tank</u> is an excreta collection device and is a water-tight settling tank normally located underground, away from the house or toilet.

- '13' - A <u>flush/pour flush to pit latrine</u> refers to a system that flushes excreta to a hole in the ground and has a water seal.

- '14' - A <u>flush/pour flush to somewhere else</u> 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' - <u>Flush to unknown place/Not sure/DK where</u> 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 <u>ventilated improved pit latrine or VIP</u> 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 <u>pit latrine with a slab</u> is a dry pit latrine whereby the pit is fully covered by a slab or platform that is fitted either with a squatting hole or seat. The platform can be made of any type of material (concrete, logs with earth or mud, cement, etc.) as long as it adequately covers the pit without exposing the pit content other than through the squatting hole or seat.

- '23' - A <u>pit latrine without slab/Open pit</u> 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 <u>composting toilet</u> 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' - <u>Bucket</u> 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 <u>hanging toilet/hanging latrine</u> is a toilet built over the sea, a river, or other body of water into which excreta drops directly.

- '95' - <u>No facilities/bush/field</u> 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).

The purpose of the following two questions (WS9 and WS10) 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 <u>include</u> 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.
- <u>Note that '01' is not a valid response</u> (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').

## 8.8: HANDWASHING MODULE

Handwashing with water and soap (soap, detergent or other cleansing agent) 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 some extra time.

It is known that the presence of a place or device used for handwashing in the household and the presence of soap and water at that place is a good predictor of handwashing behaviour. The presence of soap and water at the 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 the location for handwashing is associated with reduced disease risk.

Place for handwashing 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 place for handwashing where water and soap are present.

The presence of water and soap at the place for handwashing: For correct handwashing to happen at this 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 presumably is aware of some of the benefits of using soap.

**HW1. WE WOULD LIKE TO LEARN ABOUT THE PLACES THAT HOUSEHOLDS USE TO WASH THEIR HANDS. CAN YOU PLEASE SHOW ME WHERE MEMBERS OF YOUR HOUSEHOLD MOST OFTEN WASH THEIR HANDS?**

You 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 place where household members wash their hands, circle '1'. This includes a bucket or other container in a designated area.
- 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', write the reason and skip to HW4.

In many cultures and crowded slum areas there may not be a specific place for hand-washing.  Rather, a movable object may be used, like a bucket, basin, container or kettle, for people to wash or rinse their hands.  In cases where the respondent report that they use a container but you are not able to observe it, circle the code '6' and specify what object is used to hold the water.

**HW2.** *Observe presence of water at the specific place for handwashing.  Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.*

**HW3A.** *Is soap, detergent or ash/sand present at the place for handwashing?*

**HW3B.** *Record your observation.*

HW2, HW3A and HW3B 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 is not available ('2').

HW3A will be used to record whether there is soap or detergent at the place used for handwashing.  If there is no cleansing agent at the place for handwashing, circle '2' and skip to HW4.

If any cleansing agent is present (HW3A is 'Yes'), HW3B will then be used to record the type of cleansing agent(s) observed.

- In HW3B, circle all agents 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.

**HW4. DO YOU HAVE ANY BAR SOAP, SOAP POWDER, LIQUID SOAP OR ASH/SAND IN YOUR HOUSEHOLD FOR WASHING HANDS?**

**HW5A. CAN YOU PLEASE SHOW IT TO ME?**

**HW5B.** *Record your observation.*

> 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 HW5A. HW4 asks whether soap or detergent or ash/sand 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 in HW5B if the respondent shows you the soap, detergent, or other cleansing agent.
> - Circle all that apply.
> - Hand sanitizers are not accepted as a cleansing agent that can be used for handwashing.

**HH19. Record the time.**

Record the time of the day you finish the household interview. For example, if the time is 10 minutes past 4 o'clock in the afternoon, record 04 for 'Hour' and '10' for 'Minutes', and record p.m. (or a.m. as appropriate).

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.

> If the interview is interrupted for more than 15 minutes or it is not completed on your first visit and you visit the household again to continue the interview, the amount of time between HH18 and HH19 will not reflect the correct duration of the interview. You should take a note of this next to the question HH19 and if necessary provide additional explanation at the end of the household questionnaire.

## 8.9: 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 request a sample of salt from the respondent for testing.

**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 '4' if there is 'No salt in home'.
> - Circle '6' if the salt was present, but not tested for any reason.

The salt testing kits contains 2 10ml bottles of Test Solution, 1 10ml bottle of Recheck Solution, 1 colour chart and 1 white cup. One to two drops of the Test Solution dripped on a small amount of salt containing iodine produces a bluish/purplish colour change. Coloration indicates that iodine is present. Below follows a 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. Fill the small cup with salt, and then spread the surface flat.
2. Shake the Test Solution well.
3. Squeezing gently, add 2 drops of the Test Solution (white bottle) on the surface of the salt. (Pierce the bottle with a pin).
4. Within 1 minute of adding the Test Solution, compare the colour on the salt with the colour chart to determine the iodine content.
5. If no colour appears on the salt after 1 minute (due to suspected alkalinity in the salt), <u>on a fresh sample of salt</u> add up to 5 drops of the Recheck Solution (red bottle – shake well) then add 2 drops of Test Solution on the same spot.

6. Add 1-2 drops of test solution and check the result immediately in good light, using the colour chart supplied with the test kit.

7. Now compare the colour on the salt with the colour chart to determine iodine content, and circle the code in SI1 that corresponds to the test outcome.

## 8.10: ENDING THE QUESTIONNAIRE

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 any 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 List of Household Members:*

Check List of Household Members, column HL7 for any eligible woman. You should have a questionnaire with the Information Panel filled in for each eligible woman.

Check List of Household Members, column HL7A for any eligible man. You should have a questionnaire with the Information Panel filled in for each eligible man.

Check List of Household Members, column HL7B 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 result of the household interview (HH9), the name and line number of the Respondent to the Household Questionnaire (HH10), and 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 or supervisors to write any notes or observations regarding this particular household interview.

# 9.  THE QUESTIONNAIRE FOR INDIVIDUAL WOMEN

The purpose of this questionnaire is to provide information on factors affecting women's health and quality of life.  After you have completed the List of Household Members in the Household Questionnaire, you would have identified women who are eligible for the Individual Women's Questionnaire, and you should have already prepared questionnaires for all eligible women.  Eligible women for this questionnaire are women recorded in the List of Household Members who are age 15 through 49 (see column HL7 of the List of Household Members).

**You need to complete this questionnaire with the respondent herself** – other household members should not be present at any stage of the interview.

## 9.1:  WOMAN'S INFORMATION PANEL

WM1 to 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 List of Household Members.

**WM4. Woman's line number**

> Enter the woman's line number from the Household Questionnaire, column HL1 of the List of Household Members.

**WM5. Interviewer's 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.

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

If the respondent is identified as the mother/caretaker (in column HL15) of a child under age five (in column HL7B) in 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 THE STATISTICAL INSTITUTE OF BELIZE. WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, FAMILIES AND HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT 35 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL. 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 35 MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL. MAY I START NOW?**

If permission is given, tick the appropriate checkbox and begin the interview. If the respondent does not agree to continue, even after you have done your best to explain to her the importance of the survey and persuade her to participate, complete WM7 by circling '03', thank her and go on to the next eligible person in the household, if any. 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.

**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.

**WM10. Record the time**

Record the time of the day you start the interview.  If the hour or minutes are less than 10, put a zero in front of the hour or minute.  For example, if the time is 10 minutes past 4 o'clock in the afternoon, record 04 for 'Hour' and '10' for 'Minutes', and indicate if the time is a.m. or p.m.

## 9.2: WOMAN'S BACKGROUND MODULE

**Age and date of birth:** Age (WB1 and WB2) is the most important information in the interview, since almost all analyses of the data depends on the respondent's age. <u>These questions must be asked independently of the information on the Household Questionnaire</u>. 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 example, January is '01', February is '02', March is '03', and so on. If the month 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 the woman 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, social security card, 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.
>     - <u>Only when it is absolutely impossible to even estimate the year of birth</u> 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 <u>MUST</u> fill in this information. <u>Do not leave this blank</u>.

- Compare and correct WB1 and WB2 if inconsistent. Note that either or both of the responses might be incorrect.

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 Columns HL6 and HL7 of the Household Questionnaire.
- In addition, you will have to correct the total number of eligible women reported on the cover page of the Household Questionnaire.
- Note that you should correct the information on the woman's age in the Household Questionnaire only when it affects her eligibility status. In all other cases of inconsistencies between the household questionnaire and the Individual Questionnaire for Women, do not change the age response in the Household Questionnaire.
- If the woman was eligible on the date of the household interview but became ineligible because her interview is being conducted at a later date, follow the procedure above for an ineligible respondent.

Questions WB3 to 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.  'School' also includes correspondence courses or online learning programmes leading to a diploma, associate or higher degree.

Schools in the Mennonite communities, home schools and those schools that cater to persons with special needs, for example, Stella Maris, are also captured here, as well as institutions such as CET/ITVET/VOTEC, Police Training School, Belize Defence Force, etc.

**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 any standard/form/year was completed. For example, if she attended form 1 of secondary school for only 2 weeks, record 'Secondary'. If '00' or '96', skip to WB7.

**WB5. WHAT IS THE HIGHEST STANDARD/FORM/YEAR YOU COMPLETED AT THAT LEVEL?**

For this question, enter the highest standard/form/year the respondent successfully <u>completed</u> at that level recorded in WB4. For example, if a woman was attending 3<sup>rd</sup> form of secondary school and left school before completing that year, record '02'. Although 3<sup>rd</sup> form was the highest year she attended, she completed 2 years of secondary school. If the first year at this level is not completed, record '00'. For example, if she attended only 2 weeks of 1<sup>st</sup> form of secondary school, record '00'.

**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.**

To ascertain whether women are literate or not, you will be showing the women you interview cards with pre-printed sentences on them (see Annex III), 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.  This is because 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 four respondents, start again with the first sentence on the card.

## 9.3: 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 to MT4) and 6 questions on information/communication technologies (MT6 to 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 is blank (respondent has secondary or higher education) you should tick this box and continue with MT2.
> - If WB7 is '2', '3', or '4', (able to read or no sentence in required language), tick this box and continue with MT2.
> - If WB7 is '1' or '5' (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 <u>normally</u> 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 or magazines on the internet, this should still be considered as exposure to newspapers. The objective is to collect information on whether respondents are accessing newspapers or magazines, 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 <u>normally</u> 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.

<u>If the respondent is visually impaired, you may rephrase the question accordingly. For example, you may replace the word 'watch' with 'listen to'.</u>

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 the 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, tick the corresponding box and go to the next module, if she is age 15-24, tick the corresponding box and 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. "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.

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.

## 9.4:  FERTILITY/BIRTH HISTORY MODULE

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

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

<u>Do not record any stillbirths (children who were born dead), or miscarriages, or children adopted by the woman, or children of her present spouse born to another partner (to whom the respondent herself did not give birth)</u>.

**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.

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

> <u>Read the question slowly</u>.  The sons and daughters being considered are those who live with her in her household (these children should have been recorded in the List of Household Members).  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?**

> Ask about sons and record the response before asking about daughters.  Record the number of sons and daughters living with the woman in the space provided.
> - If she does not have any sons living with her 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.
> - <u>Do not leave either of the spaces blank.</u>
> - Since the question is asked only to women who have children living with them in the same household (CM4 = Yes), at least one of the spaces should have a value higher than '00'.

Remember, we are interested only in the respondent's <u>OWN</u> children – not foster children, children of her spouse 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.

<u>Make sure the respondent is not reporting dead children in this question.</u> 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'. <u>For women who have been asked this question, the spaces should not be left blank.</u>

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

<u>This question is extremely important for determining the levels of child mortality.</u> Some respondents may be reluctant to give a positive answer and talk about this subject. They may also become sad or upset that you are asking such questions, especially with a recent death. Be sympathetic and tactful in such situations. Say that you know the subject is painful, but the information is 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.

**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 in CM10***) 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 never given birth, go to Illness Symptoms Module. If she had at least one live birth, continue with the Birth History Module.

If she says 'No' it is not correct, first check responses in CM1 to 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 tick 'Yes' after you have made the corrections.

## 9.5: BIRTH HISTORY MODULE

In the Birth History Module, we want to list all the live 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 any 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 the 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 Phiri" 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 to BH10 for one child at a time.

**BH3. I**S *(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. I**N 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, 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, or during some other significant event/season of the year, to try to determine the month of birth.  Convert months to numbers, as usual.  Only as a last resort, 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 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. I**S *(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 only for 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 underlined 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 who is 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 Michael'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 Michael 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 List of Household Members. If the child does not live in the household, enter '00'. If the child is not recorded in the List of Household Members, but the mother says that the child is in fact a usual resident, add the child to the List of Household Members 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 (⇨next line). 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 filling in 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, underlined 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 <u>two</u> 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 ①  Month 2  Years 3 | 0 | 5 | The child died when five days old |
| Days 1  Month ②  Years 3 | 0 | 2 | Child died when two months old |
| Days 1  Month 2  Years ③ | 0 | 3 | Child died when three years old |

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 given is more than four weeks, you would convert the answer to months.  An answer of "seven weeks" would be recorded as Months '01.'

Specifically, 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 if this occurs.

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

**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.  When you reach BH10 for Ahmad you will ask: "**WERE THERE ANY OTHER LIVE BIRTHS BETWEEN THE BIRTH OF MOHAMED AND AHMAD?**"

If the woman tells you there <u>was</u> 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 to BH10 for that birth.  You may also have to correct the information in CM4-CM11.  If, however, the woman tells you <u>there was no birth</u> 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 BH10 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 <u>was</u> 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 CM4 to CM11.  If, however, <u>there was no birth</u> after Ahmad, record 'No'.

**CM12A.** *Compare number in CM10 with number of births in the BIRTH HISTORY Module 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 Fertility Module altogether.

**CM13.** *Check BH4 in BIRTH HISTORY Module:  Last birth occurred within the last 2 years, that is, since (month of interview) in 2013 (if the month of interview and the month of birth are the same, and the year of birth is 2013, consider this as a birth within the last 2 years).*

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

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.
    a. For month of birth in BH4, it is permissible to record Code '98' for 'Don't Know' as an answer, as a last resort.
    b. 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.
    c. 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.
    a. If there are any twins, record the information about each twin on a separate line.
    b. If the twins are the respondent's last birth and if one twin is dead, record the living twin last.
    c.  By doing this, you will be able to talk about the living twin when you get to the following modules, which will be more comforting for the respondent.


3) Recording information for more than 14 births.
    a. There are lines for 14 births in the table.  If in an exceptional case you find a respondent with more than 14 births, take a Continuation Questionnaire for Individual Women, fill in all the information on the cover page (WM1 to WM6), then write the information for these additional births in the Birth History Module.
    b. Return to the primary Questionnaire for Individual Women to complete the interview.  Write 'SEE CONTINUATION' across the top of the cover sheet of the primary questionnaire.
    c. Once you complete the Questionnaire for Individual Women keep the continuation questionnaire inside the primary one so that they remain together.

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 BH Line Numbers printed in the first column of the Birth History Module.

5) Checking birth interval.
    a. Check the dates of each birth.
    b. 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.
    c. Either the February 2004/November 2003 birth occurred earlier or the September 2004/May 2004 birth occurred later, or both.

6) <u>Checking woman's age</u>.  Subtract her age of first birth from her current age.  Probe for any birth occurring before age 12.

## 9.6:  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 Fertility/Birth History Module and copy the 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.  <u>Note:  This module should only be asked to women who had a live birth in last 2 years</u>.

**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?**
With this question, some degree of recall is necessary:

- If the respondent has more than one child, ask "... **OR DID YOU NOT WANT <u>ANY MORE</u> CHILDREN**?" or
- If she has only one child, ask "... **OR DID YOU NOT WANT <u>ANY</u> 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.

## 9.7: 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 Fertility/Birth History Module and record the name of the last-born child in the space provided. If the last birth was a multiple birth and the last-born child has died, ask the questions for the next last-born child.  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 PRENATAL CARE DURING YOUR PREGNANCY WITH** *(name)***?**

Prenatal 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 prenatal care received during the pregnancy – a check specifically for the pregnancy and not for other reasons.

In MN1, ask if she saw anyone for prenatal care for this pregnancy.  If she saw no one for prenatal checks, circle '2' and skip to MN5.  If the woman answers 'Yes' to MN1, continue with MN2.

**MN2. WHOM DID YOU SEE?**

Doctors, nurses and midwives are skilled health personnel who have been trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies and the immediate postnatal period, or to refer obstetric complications.  'Traditional birth attendants' and 'community health workers' are not considered skilled health personnel even if they have received training.

Circle the code for the person seen for prenatal care.  Probe to learn if she saw more than one person by asking "**ANYONE ELSE?**" and circle the codes for any other persons seen for prenatal care during this pregnancy.  If you are unsure how to code a person mentioned, write the words used to describe the person in the space provided at 'Other' and circle 'X'.

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

**MN2A. HOW MANY WEEKS OR MONTHS PREGNANT WERE YOU WHEN YOU FIRST RECEIVED PRENATAL CARE FOR THIS PREGNANCY?**

Circle a code for the unit of time the respondent mentions (either weeks or months) and then fill in a number to the right of the code you circle.

- Note that you are allowed to enter double digits for the number of weeks (if the number of weeks is less than 10, enter a leading zero).
- However, because a pregnancy will not go beyond 9 months, the leading zero is already entered for you if you are recording the time in months.

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

Ask the respondent how many times she saw someone for prenatal care during her last pregnancy (that is, when 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.

Probe to identify the number of times prenatal care was received. If a range is given, record the minimum number of times prenatal care was received. For example, after probing, if a woman still says that she received prenatal care 10-15 times, record '10'.

**MN4. AS PART OF YOUR PRENATAL 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 prenatal 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?**

Urine tests are conducted on every prenatal care visit where women are asked to provide a urine sample in a sterile cup. This test is used to detect abnormal levels of sugar, protein, blood cells, bacteria and other markers which could be indicative of pregnancy-related health issues that may require prompt attention.

**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 (MN6 and MN7). 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', '3' or '8' circled in MN5), you must try to find out how long ago the last tetanus toxoid (TT) dose was received (MN6) and the total number of doses received (MN7). Ask the 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?**

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 received during last pregnancy. If she reported at least two tetanus injections during her last pregnancy, go to MN17. If she reported only one tetanus injection 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 MN17. If 'Yes', continue with MN10.

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

Ask about the number of 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. If the number of doses is 7 or more, record '7'. If she responds 'Don't Know', skip to question MN17.

**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.

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

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

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

Doctors, nurses and midwives are skilled health personnel who have been trained to proficiency in the skills needed to manage normal (uncomplicated) pregnancies and the immediate postnatal period, or to refer obstetric complications.

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 and try to identify. 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 at 'Other' and circle 'X'. If no one attended the delivery, circle 'Y'.

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

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 (C-SECTION)? THAT IS, DID THEY CUT YOUR BELLY OPEN TO TAKE THE BABY OUT?**

A caesarean section (often referred to by respondents as a "C-section" or "caesarean") is the 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 while in some cases it is by choice. If the woman responds 'No', skip to MN20.

**MN19A. WHEN WAS THE DECISION MADE TO HAVE THE CAESAREAN SECTION? WAS IT BEFORE OR AFTER YOUR LABOUR PAINS STARTED?**

Circle the code corresponding to the response given.

**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?**

Ask the woman to show you her (or the child's) health card, if available. Record the birthweight in pounds.

- If the weight is 'From card' or is recorded on another written document (such as a vaccination card, prenatal 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 6.5 pounds at birth; enter the information as '06.50'.
- <u>Always record the birthweight from the card when possible</u>.

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 emotional development. For this question, it does not matter how long the respondent breastfed the child, only whether or not she ever put the child to 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 the 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, circle code '1' for 'Yes' or 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'.

## 9.8:  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.

Each respondent with a live 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 (PN) 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, <u>it is very important to check each filter question carefully and to follow all skip instructions.</u>

**PN1.  *Check MN18: Was the child delivered in a health facility?***
- Check MN18.  If MN18 is '21'-'26' or '31'-'36' (the respondent delivered her child in a health facility) tick 'Yes' and continue with PN2.
- If MN18 is '11' or '12' or '96' (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 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.

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 the question. Circle '1' if 'Yes' or '2' if 'No' and continue to the next question.

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

**DID ANYONE CHECK ON <u>YOUR</u> HEALTH BEFORE YOU LEFT (*name or type or facility in MN18*)?**

PN4 is similar to PN3, but here we are asking about a check on the <u>health of the mother</u>, 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 the question.

Note that we do not include health checks occurring immediately after delivery; <u>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.</u> 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 <u>after</u> 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' and skip to PN11, or circle '2' if 'No' and skip to PN16.

**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 from 'A' to '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.
>
> 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 <u>YOUR</u> 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 <u>before she left the premises after delivery</u>.

PN8 is composed of two parts – a question and an explanation. Note that the explanation 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 explanation after asking the question so that the respondent understands the meaning of the 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' and skip to PN11, or '2' if 'No' and skip to PN18.

**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 the 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 then ask PN12A.
- If 'More than once', circle '2' and then ask PN12B.

**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 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?**

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 at 'Other' and circle 'X'.

- Probe: "**ANYONE ELSE**?" and circle the codes for any other persons assisting with the delivery of this child

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

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 at '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 from '21' to '26' or from '31' to '36' (the respondent delivered her child in a health facility), continue with PN16. If MN18 is '11', '12' or '96' (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' and skip to PN20, or circle '2' if 'No' and proceed to the next module.
> - 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 from 'A' to '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' and skip to PN20. If 'No', circle '2' and proceed to the next module.

**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 – a question and an explanation. Note that the explanation 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 explanation after asking the question so that the respondent understands the meaning of the 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' then ask PN21A. If 'More than once', circle '2' then ask PN21B.

**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 (hours, days or weeks) and then fill in a number 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?**

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 who were involved in that (first) health check. If you are unsure where to code a person mentioned, write it in the space provided at 'Other' and circle 'X'.

**PN23. WHERE DID THIS CHECK TAKE PLACE?**

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.

## 9.9:  ILLNESS SYMPTOMS MODULE

This module is asked to respondents who are the mother or primary caretaker of a child under the age of 5 years, to identify the symptoms of illness for which mothers are most likely to take their children to a health facility.

**IS1.** *Check List of Household Members, columns HL7B and HL15*

If the respondent is the mother or caretaker of any child age 0-14 her Line Number is recorded in HL15.  She may be the mother or caretaker of more than one child.

- Check the respondent's Line Number in the Woman's Information Panel.
- Check HL15 in the List of Household Members for the respondent's Line Number.
- If the respondent's Line Number does not appear in HL15, continue to the next module (Contraception).
- If the respondent's Line Number appears in HL15, check HL7B to see if the respondent is the mother/primary caretaker of a child under 5.
- If yes, tick the appropriate box and continue with IS2.  Otherwise, tick the appropriate box and go to the Contraception 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 A CHILD UNDER THE AGE OF 5 TO A HEALTH FACILITY RIGHT AWAY?**

This question asks for symptoms of <u>illnesses</u> that would cause the respondent to take a child to a health facility right away.  Probe by asking '**ANY OTHER SYMPTOMS?'** and keep asking for more signs or symptoms of illnesses until the mother/caretaker cannot recall any additional symptoms.  Note that accidents should not be considered as symptoms of an illness.

Circle all symptoms mentioned, but do <u>not</u> prompt with any suggestions.  If you are not sure whether a certain sign as reported by the respondent fits in one of the response 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).

## 9.10: CONTRACEPTION MODULE

The module should be administered to all women age 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 contraceptive methods used.

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. Make sure to emphasize here that the respondent's answers will remain strictly confidential.

**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 skip to CP2A. 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 'yes', circle '1' and skip to CP3.

If clarification is necessary, consider the last 1 month as 'current use'.

**CP2A. HAVE YOU EVER DONE SOMETHING OR USED ANY METHOD TO DELAY OR AVOID GETTING PREGNANT?**

Circle the code corresponding to the response given and go to 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'.

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 (such as foam/jelly) 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 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.

If the woman mentions 'Condom', probe to find out if she is referring to a male condom or a female condom, or both.

## 9.11: 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 CP1.  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?**

> If this is the respondent's first pregnancy, ask "... ANY CHILDREN?"  Otherwise, ask "... 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 skip to UN7.
> - If she wants no more children, 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 ('A' circled in CP3), 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?**

If the woman already has children, say **"... ANOTHER CHILD"** and "... **ANY MORE CHILDREN**", however, if she has no children, say "... **A CHILD**" and "... **ANY CHILDREN**".

Circle the code corresponding to the response given.
- If the woman wants to have a/another child, you should circle '1' and continue to the next question.
- 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?**

This question should be asked of all women (pregnant or not pregnant) who say that they want to have another child. You will also need to choose the appropriate phrasing for this question, based on what you already know about the respondent. If she is currently pregnant and/or already has a child, say **"... ANOTHER CHILD"**; otherwise, say **"... A 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, circle 993 for 'Soon/Now'.
- If the woman says she cannot get pregnant, circle '994' and skip to UN11.
- 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'

**UN8. *Check CP1. Currently pregnant?***

Check CP1. If the woman is currently pregnant, tick 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 (CP2=1), 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?**

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) she thinks she cannot get pregnant.  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 answer 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 days, weeks, 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 a hysterectomy, circle 994.  A woman who is too old to menstruate or become pregnant is described as being in menopause, and a hysterectomy is an operation to remove the uterus.

If the woman tells you she had her last menstrual period before her last birth, circle '995'.  If she says she has never menstruated, circle '996'.

## 9.12:  ATTITUDES TOWARD DOMESTIC VIOLENCE MODULE

In this module, there is only one question, which asks for the woman's attitudes toward wife-beating.  Note that we are not asking whether the woman has been subjected to domestic violence.  Supportive attitudes should not necessarily be interpreted as a measure of *approval* of domestic violence, nor do they imply that a woman has been victim of such violence or will inevitably become a victim.  Rather, such attitudes should be seen as an indication of the *social acceptance* of violence (in contexts where women have a lower status in society) as a disciplinary action when a woman does not comply with certain expected gender roles.

**DV1. SOMETIMES A HUSBAND/PARTNER IS ANNOYED OR ANGERED BY THINGS THAT HIS WIFE DOES.  IN YOUR OPINION, IS A HUSBAND/PARTNER 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?**

**[F] IF SHE WASTES THE MONEY?**

**[G] IF SHE IS SEEN TALKING TO ANOTHER MAN WHO IS NOT A RELATIVE?**

**[H] IF SHE DOES NOT KEEP THE HOUSE CLEAN?**

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.

## 9.13: MARRIAGE/UNION MODULE

This module is to be administered to all women age 15-49 years (including women age 15 and age 49).

In the questionnaires and this manual, 'marriage' always refers to both formal and informal unions, such as living together in a common-law union. An informal union is one in which the man and woman live together, intending to have a lasting relationship, but do not have a formal civil or religious ceremony. Additionally, if a woman has a boyfriend with whom she is sexually active and who visits her at her home and/or who she visits at his home, she is considered to be in a union (visiting partner relationship).

Note that although this module is intended to collect information on opposite-sex unions, if the respondent indicates that she is currently in a same sex union, you should record her responses while remaining neutral, and make a note in the space provided for your observations.

**MA1. ARE YOU CURRENTLY MARRIED OR LIVING TOGETHER WITH A MAN AS IF MARRIED OR IN A VISITING PARTNER RELATIONSHIP?**

> The options here are currently married, living with a man, in a visiting partner relationship or not in union (the woman is neither married nor living with a man as if married nor in a visiting partner relationship). Circle the code corresponding to the respondent's status at the time of the interview. If the woman is currently not in a union, circle 3 and skip to MA5.

**MA2. HOW OLD IS YOUR HUSBAND/PARTNER/VISITING PARTNER?** *Probe*: **HOW OLD WAS YOUR HUSBAND/PARTNER/ VISITING PARTNER ON HIS LAST BIRTHDAY?**

> The term you use here will be dependent on the woman's response in MA1. If she knows the age of her current partner on his last birthday, enter his age in the space provided and skip to MA7. If she does not know his age, circle '98' and skip to MA7.

**MA5. HAVE YOU EVER BEEN MARRIED OR LIVED TOGETHER WITH A MAN AS IF MARRIED OR BEEN IN A VISITING PARTNER RELATIONSHIP?**

> For women who are not currently married or living with a man or in a visiting partner relationship, ask whether they have ever been married or lived with a man as if married or been in a visiting partner relationship.
>
> Circle the code corresponding to the response given. Notice that there are three different response categories for a 'Yes' response:
> - 'Yes, formerly married';
> - 'Yes, formerly lived with a man'; and
> - 'Yes, formerly in a visiting partner relationship'.

Be sure to make the distinction between the three categories. If the respondent just answers 'Yes', probe by asking, **"WERE YOU FORMERLY MARRIED OR DID YOU LIVE WITH A MAN OR WERE YOU IN A VISITING PARTNER RELATIONSHIP?"** If she was formerly married and also reports living with a man and/or having been in a visiting partner relationship, circle the code for 'Yes, formerly married'.

If she was never married, never lived with a man and never been in a visiting partner relationship, circle '3' for 'No' and go to the next module. Otherwise, continue with MA6.

**MA6. WHAT IS YOUR MARITAL STATUS NOW: ARE YOU WIDOWED, DIVORCED OR SEPARATED?**

Circle the code corresponding to the response given. For a woman who is not currently married, not currently living with someone and not currently in a visiting partner relationship 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 but are not been divorced, 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 OR BEEN IN A VISITING PARTNER RELATIONSHIP 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 or had been in a visiting partner relationship and then was widowed, divorced, or separated from her husband or partner and is now either married to or living with or in a visiting partner relationship with someone else, circle '2' ('More than once'), and continue with MA8B.

If a woman is not currently married or in an informal union but was previously married or in an informal union two or more times, record 'More than once' by circling '2' and continue with MA8B.

If she has married or been in an informal union only once, circle '1' and continue with MA8A.

Note that the question refers to periods of marriage or informal unions, and not to numbers of husbands or partners. Therefore, 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.

**MA8A. IN WHAT MONTH AND YEAR DID YOU ENTER THE UNION?**

**MA8B. IN WHAT MONTH AND YEAR DID YOU ENTER THE FIRST UNION?**

If the respondent knows the date that she first married or started living with a man as if married or started the visiting partner relationship, 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 or started the visiting partner relationship, 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, or started the visiting partner relationship.  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 or entered the visiting partner relationship, circle '9998' for 'DK year' and continue with MA9.

**MA9. HOW OLD WERE YOU WHEN YOU ENTERED YOUR (FIRST) UNION (HUSBAND/PARTNER/VISITING PARTNER)?**

If the woman's response at MA7 was 'Only once', say "... YOUR UNION".  Otherwise, say "... YOUR FIRST UNION".

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.

## 9.14:  SEXUAL BEHAVIOUR MODULE

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 that 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.

Note that even though the questions in this module refer to 'sexual intercourse', they do not specifically mention sexual activity with the opposite sex.  Therefore, ask each question as it is written and record the answer regardless of whether the respondent is referring to a heterosexual activity or not.

**SB1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT YOUR 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 sentences, 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 lines 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/common-law partner, 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/common-law partner, 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. <u>The respondent should feel comfortable in taking her time to think about her response to remember correctly.</u> <u>Allowing time for her to recall will also reflect how serious you are with this range of questions, which in turn will make the respondent more comfortable.</u>

<u>You are not allowed to leave this question unanswered.</u>

**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 <u>first</u> 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' 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 <u>12 months or more</u>, circle '4' and record the answer in years.  <u>The 'Years ago' row should be used only if the last intercourse was more than 1 year ago.</u>  There should never be a response recorded '00' 'Years Ago'.  If the response is 12 months or more, skip to SB15, otherwise continue to SB4.

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 responds that she has not yet resumed intercourse since she had her last child, check BH4 (Birth History Module) for the month and year of birth of her last child, and ask how long before the birth of that child had she last had sex.

**SB4. THE LAST TIME YOU HAD SEXUAL INTERCOURSE WAS A CONDOM USED?**
In this question, we now refer only to the <u>last</u> time 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 <u>at the time they last engaged in sexual intercourse</u>.  For example, if a woman's last partner was a boyfriend she was living with at the time, you would record 'Cohabiting partner/common-law' 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 or in a visiting partner relationship, tick the corresponding box and skip to SB8. If she is not married/in a union, tick 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, which 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, as a last resort, 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 during the last intercourse with 'this other person'.  This is 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 the last intercourse.

The question should be asked, probed and recorded the same way as in SB5.  If the respondent says 'boyfriend', ask: **"WERE YOU LIVING TOGETHER AS IF MARRIED?"**  If 'Yes', circle '2' for 'Cohabiting partner/Common-law'.  If 'No', circle '3' for 'Boyfriend' and skip to SB12.  If her response is '4' (Casual acquaintance) or '6' (Other), skip to SB12.

**SB11.** *Check MA1 and MA7:*

Check MA1 and MA7 of the Marriage/Union module. If the respondent is currently married or in a common-law union and married only once, tick the corresponding box and skip to SB13. For all other cases, tick the box at 'Else' 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 <u>at the time of the sexual encounter.</u>

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 if '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 <u>in the last 12 months</u>, 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 <u>in her lifetime</u>.

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'.

## 9.15:  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 infections.  The questions assess knowledge, attitudes and behaviour related to AIDS transmission, prevention and testing for the virus that causes AIDS.  Questions are asked to estimate the respondent's basic knowledge about HIV transmission and AIDS.

For some questions, out of interest or curiosity, respondents may ask you what the correct answer is.  As for all other such questions, you should courteously tell the respondent that you would like to hold questions until after the interview(s) has been concluded.  It is therefore important that you know the correct answer to the knowledge questions, so that you can answer the respondents' questions after you have completed all the interviews in that household.

**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 a respondent has never heard of AIDS, skip to the next module.

The following questions (HA2 to 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.

For questions HA2 to 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?**

**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?**

**HA7A. CAN PEOPLE GET THE AIDS VIRUS BY TOUCHING A PERSON WHO HAS 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 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?

**HA9A. IN YOUR OPINION, SHOULD A CHILD WHO HAS THE AIDS VIRUS BUT IS NOT SICK BE ALLOWED TO ATTEND SCHOOL WITH OTHER CHILDREN WHO DO NOT HAVE IT?**

**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 at obtaining 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 who received prenatal care.

They are first asked 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 returned 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 Fertility/Birth History Module to see if the woman has any live births in last 2 years. If the respondent has no live births in the last 2 years tick the box marked 'No' and skip to HA24. If she has a live birth in last 2 years tick the corresponding box and continue with HA14.

**HA14. *Check MN1: Received prenatal care?***

> Check the respondent's answer to MN1 in the Maternal and Newborn Health Module regarding whether or not she received prenatal care. If the respondent has received prenatal care tick the corresponding box and continue with HA15. If she has not received prenatal care in last 2 years tick the corresponding box and skip to HA24.

**HA15. DURING ANY OF THE PRENATAL 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 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 <u>she</u> knows the results of the test.  Circle the code corresponding to the response.  If the answer is 'No' or 'DK', skip to HA22.

**HA18. R**EGARDLESS OF THE RESULT, ALL WOMEN WHO ARE TESTED ARE SUPPOSED TO RECEIVE COUNSELLING AFTER GETTING THE RESULT. **A**FTER 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 or B)?*

> 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, or 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 <u>she</u> 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 the next question.

**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 DON'T 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 AIDS. 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 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.
>
> It is important that you do not attempt to find out the HIV status of any respondent who has been tested. 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.

## 9.16:  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 to TA5), 4 questions on use of smoked tobacco products (TA6 to TA9), 4 questions on the use of smokeless tobacco products (TA10 to TA13), and 4 questions on alcohol use.  The module is administered to all women, age 15 to 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 specific to 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. For clarification, 'currently smoke' may be defined as smoking in the last one month.

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 about the consumption of at least one whole cigarette.

If a range is given, record the minimum number of cigarettes smoked. For example, after probing, if a woman still says that she smoked 10-15 cigarettes, record '10'. 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".

**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 question refers to "having tried" any of the mentioned smoked tobacco products, without any reference to frequency of use, amount used or when the product was used. This information is collected in the next few questions.

Note also that this question refers only to products derived from tobacco.

**TA7. DURING THE LAST ONE MONTH, DID YOU USE ANY SMOKED TOBACCO PRODUCTS?**

Similar to TA6, this question, as well as TA8 and TA9, must not include use of cigarettes as this has already been asked and answered. 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".

**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 alcohol consumption.

**TA14. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT DRINKING ALCOHOL. HAVE YOU EVER DRUNK ALCOHOL?**

> Note that we are interested in finding out if the respondent has had <u>even a few sips of any alcoholic beverage</u>.
>
> Circle '1' if 'Yes', and continue to the next question. If 'No', circle '2' and skip to the next module.

**TA15. WE COUNT ONE DRINK OF ALCOHOL AS ONE CAN OR BOTTLE OF BEER, ONE GLASS OF WINE, OR ONE SHOT OF TEQUILA, 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 is not the intention of this question. 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 average number of drinks the respondent may have had <u>on the days that she had any alcohol.</u>

- For example, if the respondent had alcohol on three days during the last one month (the response to question TA16), and she had 2 drinks on day one, 4 on day two and 3 on day three, then the response to this question should be 3 drinks (the average number of drinks she 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.

## 9.17:  LIFE SATISFACTION MODULE

It is well-known that individuals' subjective perceptions of their incomes, education and living environments play a significant role in their lives, independently of 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 support or hinder their development, thus creating a more comprehensive picture of young people's life situations.

A closely related but different domain, happiness, on the other hand, is a fleeting emotion that can be affected by numerous factors, ranging from good weather to a recent death in the family.  In the latter case, for instance, a person may be satisfied with her job, income, education, family life, friends and the like, but still be unhappy.

This module attempts to generate a snapshot of the typical level of happiness and life satisfaction in among young people.  It is to be administered only to respondents who are 15 to 24 years old.  The module includes 14 questions.

A double-sided response card (see Annex IV) has been provided to be shown to the respondent, to make it easier for her 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 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 to 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. I WOULD LIKE TO ASK YOU SOME SIMPLE QUESTIONS ON HAPPINESS AND SATISFACTION.**

**FIRST, 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 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 on to 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 in reference to a shorter term state of mind. We first ask the question on happiness so that an overall level of happiness can be ascertained.

A person who is dissatisfied with her income, with her school and the like, may also be happy, because, for example, of the outcome of a recent election or a recent birth in her family.

Question LS3 has an explanatory introduction at the beginning, which will help you to introduce Side 2 of the response card, applicable for all questions from LS3 to LS13. It is important that you take your time to introduce these questions by using the sentences provided.

**LS3. NOW I WILL ASK YOU QUESTIONS ABOUT YOUR LEVEL OF SATISFACTION IN DIFFERENT AREAS.**

**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.**

You should be able to gauge whether or not the respondent understands the topic. If necessary, repeat the sentence, and 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.**

Show side 2 of response card and explain what each symbol represents. 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 does not look happy at all, stands for very unsatisfied. Tell the respondent that you want her to point to 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 little or no education.

Then, ask the question on family life:

**HOW SATISFIED ARE YOU WITH YOUR FAMILY LIFE?**

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 with their immediate or extended family, whichever they spend more time with.

**LS4. HOW SATISFIED ARE YOU WITH YOUR FRIENDSHIPS?**

Circle the code corresponding to the response given or to the smiling face pointed at by the respondent.

**LS5. DURING THE CURRENT (*2015/2016*) 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. If 'No', circle '2' and skip to LS7.

**LS6. HOW SATISFIED ARE 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 she does not have a job, circle "0" and continue with the next question. <u>Do not probe to find out how she feels about not having a job, unless she tells you herself.</u>

- However, if she says, for example, that she does not have a job and she is very unsatisfied, circle "5" and continue with the next question.

**LS8. H**OW 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. H**OW 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 she likes it, if she wishes 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.

<u>If necessary, explain that the question refers to the living environment, including the neighbourhood and the dwelling.</u>

**LS10. H**OW 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. H**OW 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. H**OW 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 an 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 condition her responses to her level of satisfaction in other non-income domains based on her level of satisfaction with her income.

If the respondent says that 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.

- However, if she says, for example, 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 WORSENED, 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.

## 9.18: ENDING THE QUESTIONNAIRE

**WM11.** *Record the time*

Record the time of the day you finish the woman's interview. If the hour or minutes are less than 10, put a zero in front of the hour or minute. Indicate the time of day (a.m. or p.m.).

If the interview is interrupted for more than 15 minutes or it is not completed on your first visit and you visit the household again to continue the interview, the amount of time between WM10 and WM11 will not reflect the correct duration of the interview. You should take a note of this next to the question WM11 and if necessary, provide additional explanation at the end of the questionnaire.

**WM12.** *Check List of Household Members, columns HL7B and HL15. 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, proceed to complete the result of woman's interview (WM7) on the cover page and 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 and proceed to complete the result of woman's interview (WM7) on the cover page.

## 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.

# 10. THE QUESTIONNAIRE FOR INDIVIDUAL MEN

The Questionnaire for Individual Men includes, for the most part, a subset of the modules included in the Questionnaire for Individual Women. A number of modules which are not applicable to men are excluded. For those modules in both questionnaires, there are some modest differences between the two questionnaires. These differences form the main narrative in this section.

The following modules which appear in the Questionnaire for Individual Men are also found in the Questionnaire for Individual Women and therefore are not covered here. Please refer to the section on the Women's Questionnaire in this manual, for detailed explanations:

- Man's Information Panel
- Man's Background Module
- Access to Mass Media and Use of Information/Communication Technology Module
- Attitudes Toward Domestic Violence Module
- Tobacco and Alcohol Use Module
- Life Satisfaction Module

The following modules include important differences from the Questionnaire for Individual Women. These differences are described below.

## 10.1: FERTILITY MODULE

**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 recorded in the List of Household Members). 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?**

Ask about sons, record the response, and then ask about daughters. Record the number of sons and daughters living with the man in the space provided.

- If he does not have any sons living with him 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 (MCM4 = Yes), 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/partner 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', ask about sons, record the response, and then ask about daughters. 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, A CHILD WHO EVER BREATHED OR CRIED OR SHOWED OTHER 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', ask about sons, record the response, and then ask about daughters. 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, tick the appropriate box and go to next module. If he has fathered live births before, continue with MCM11A.

If he says 'No', first check responses to MCM1 to 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. O**F THESE **(***total number in MCM10***)** BIRTHS YOU HAVE FATHERED, WHEN WAS THE LAST ONE BORN **(**EVEN IF HE OR SHE HAS DIED**)?**

> You should only say "**EVEN IF HE OR SHE HAS DIED**" if the respondent reported in MCM8 that a child had 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.
>
> Note that you MUST obtain exact information on the month and year of the last birth, as 'DK' is not allowed for this question.

## 10.2: MARRIAGE/UNION MODULE

Following are the differences from the Questionnaire for Individual Women:
> MMA1:  If response is '1' (Yes, currently married), '2' (Yes, living with a woman) or '3' (Yes, in a visiting partner relationship), skip to MMA7.  Otherwise, continue to MMA5
>
> Question MA2 has been removed.

## 10.3: SEXUAL BEHAVIOUR MODULE

Following are the differences from the Questionnaire for Individual Women:
> MSB5 & MSB10 – Response category 'Prostitute/Sex worker' is added
>
> MSB5 & MSB10 – 'boyfriend' is replaced with 'girlfriend'

## 10.4: HIV/AIDS MODULE

Following are the differences from the Questionnaire for Individual Women:
> Questions HA13 to HA23 are removed

## 10.5: ENDING THE QUESTIONNAIRE

**MWM12.** *Check List of Household Members, columns HL7B and HL15.  Is the respondent the caretaker of any child age 0-4 living in this household?*

> If the respondent is the caretaker of any child age 0-4 living in this household, proceed to complete the result of man's interview (MWM7) on the cover page and then go to the Questionnaire for Children Under Five for that child and start the interview with this respondent.

Otherwise, end the interview with this respondent by thanking him for his cooperation and proceed to complete the result of man's interview (MWM7) on the cover page.

## OBSERVATIONS

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

# 11. THE QUESTIONNAIRE FOR CHILDREN UNDER FIVE

The purpose of the Questionnaire for Children Under Five is to collect information on a wide range of topics such as child development, breastfeeding, nutrition, treatment and care seeking for illnesses, and immunizations during the first five years of life.  You will have identified children under five, eligible for this questionnaire, after you have completed the List of Household Members 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.

- <u>If the mother is living in the same household as the eligible child (in other words, if she is recorded in the List of Household Members, together with the child), then she is the person who has to be interviewed for that child</u>.
- If the mother of the eligible child is not recorded in the List of Household Members (she may be deceased or living elsewhere), you should have identified a person in the List of Household Members who takes primary responsibility for caring for the child.  This person may be a man or a woman.

  Note:
  - The primary caretaker is <u>not</u> simply someone looking after the child when the mother is away (for example, people who may care for the child during the day when the mother is at work).
  - <u>Only interview a respondent other than the mother if the mother is not listed in the household</u>.

This questionnaire is to be administered to all mothers (or primary caretakers) (see the List of Household Members, column HL15) of a child that lives with them and is under the age of 5 years (see the List of Household Members, column HL7B).

<u>A separate questionnaire should be filled in for each eligible child listed in the Household Questionnaire</u> – check column HL7B on the List of Household Members.

## 11.1:  UNDER-FIVE CHILD INFORMATION PANEL

UF1 to 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 List of Household Members.  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 List of Household Members.

**UF5. Mother's / Caretaker's name**

Enter the mother's/primary caretaker's name from the Household Questionnaire, column HL2 of the List of Household Members.

**UF6. Mother's / Caretaker's line number**

Enter the mother's/primary caretaker's line number from the Household Questionnaire, column HL1 of the List of Household Members.

**UF7. Interviewer's 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 THE STATISTICAL INSTITUTE OF BELIZE.  WE ARE CONDUCTING A SURVEY ABOUT THE SITUATION OF CHILDREN, FAMILIES AND

HOUSEHOLDS. I WOULD LIKE TO TALK TO YOU ABOUT (*child's name from UF3*)'S HEALTH AND WELL-BEING. THE INTERVIEW WILL TAKE ABOUT 20 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL. MAY I START NOW?"

If you are interviewing the same person with whom you have completed the household, individual women or men questionnaire, you should read the revised version of the greeting below. This is necessary, as the time to complete the Questionnaire for Children Under Five will be different from that needed to complete the household, individual women or men questionnaire, and we require a separate consent for each individual 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 20 MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL. MAY I START NOW?"

If permission is given, tick the corresponding box, 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. Depending on the reasons for the refusal, you or another person from the team may attempt to interview the respondent for a second time. 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.

### 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.

### UF12. Record the time

Record the time of the day you start the under-five interview. If the hour or minutes are less than 10, put a zero in front of the hour or minute. Also record the time of day (a.m. or p.m.).

Ask the mother/primary caretaker to collect the birth certificate, health/immunization cards, and any other relevant documents she/he has for this child before you begin the interview.  You will need these during the interview.

## 11.2:  AGE MODULE

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 analyses of the data depends on the child's exact age.  While completed age in years is sufficient for women's and men's interviews, we need to obtain accurate information on the child's age in months.  This is necessary because some of the analyses of the data 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 to calculate his/her age in months, after the data has been collected.

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 the 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.

**AG1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE DEVELOPMENT AND HEALTH OF** *(name).*  **ON WHAT DAY, 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 day, 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'.

> Convert the month to a number as you have done before, and 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 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/immunization card, 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.

As the survey will be conducted in 2015, and only children who have not had their 5th birthday are eligible, the year of birth of the child cannot be earlier than 2010.

**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 in the household, 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.

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 long pause 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 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.  For example, if the child is 4 years old and she was born in 2010, then her last birthday must have been in 2014.

Assuming that you were able to obtain a month and year of birth, you should check the consistency by following these steps:

1.  If the month of birth is before the month of interview (the child had his/her last birthday this year), then his/her age plus his/her year of birth should equal the year of interview.
    Example:  A child who was born in February 2013, in a survey conducted in September 2015, should be age 2 (2013 + 2 = 2015).

2.  If the month of birth is after the month of interview (the child has not yet had his/her birthday this year), then his/her age plus year of birth should equal the previous year.
    Example:  A child who was born in December 2013, in a survey conducted in September 2015, should be age 1 (2013 + 1 = 2014).

3. <u>If the month of birth is the same as the month of interview, and the day of birth is not known</u>, then a sum of either the current or the previous year is correct.

   Example: A child born in September 2012, in a survey conducted in September 2015, could be age 3 or age 2. Probe further to see if the date of birth is correct and to ascertain whether the child has completed age 2 or 3.

4. <u>If the month of birth is the same as the month of interview, and the day of birth is known</u>, then the sum of the age and the year of birth should equal the year of interview if the day of birth is before the day of interview.

   On the other hand, the sum of the age and the year of birth should equal the previous year if the day of birth is after the day of the interview.

   Example: A child born on 20 September 2011, in an interview conducted on 27 September 2015, will be age four.

   However, a child born on 30 September 2011, in an interview conducted on 27 September 2015, should be age three, since this child will only complete 4 full years on 30 September 2015.

If you find that the date of birth and age are inconsistent, <u>either the date of birth or the age, or both, are incorrect, and need to be corrected</u>. Probe, using documents that may be available, dates of well-known events and ages of other children, age of the respondent herself/himself, as well as other information already gathered in that household. Dates of recent natural disasters, major political incidents and religious events can be very useful to probe for dates of birth, ages, and durations.

<u>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 for the Questionnaire for Children Under Five.</u> Do this tactfully, and thank the mother/caretaker for her/his cooperation if she/he does not have other under 5 children. Write 'INELIGIBLE' on the cover page of the questionnaire, and <u>correct the age and eligibility information for this child in Columns HL5, HL6 and HL7B of the Household Questionnaire</u>. In addition, you will have to correct the total number of eligible children reported on the cover page of the Household Questionnaire (HH14).

<u>Note that you should correct the age information in the Household Questionnaire only when it affects the child's eligibility status.</u> If the age information needs to be corrected because of the change in the eligibility status, for example, for a child whose age has been changed from 4 to 5, you will also need to ask the questions in the Education Module for this child.

In all other cases of inconsistencies (that are not affecting the eligibility) between the Household Questionnaire and the Questionnaire for Children Under Five, do not change the age response in the Household Questionnaire.

## 11.3: BIRTH REGISTRATION MODULE

**BR1. DOES *(name)* HAVE A BIRTH CERTIFICATE?**

This question aims to provide an estimate of the extent of birth registration in our 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.

In some cases, a child may not have been issued a birth certificate but the birth may still have been registered with the civil authorities, sometimes referred to as the Vital Stats Office. This is the official agency authorized to register the occurrence of a vital event (such as a live birth) and to record the required details.

A 'birth certificate' is a vital record that documents the birth of a child. This can be either the original document certifying the circumstances of the birth, or a certified copy or representation of the registration of that birth.

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.

**BR2. HAS (*name*)'S BIRTH BEEN REGISTERED WITH THE VITAL STATISTICS OFFICE?**

Circle the code corresponding to the response. If the answer is 'Yes', go to the next module. If the child's birth has not been registered with the Vital Statistics Office or a Vital Stats Agent, or if the respondent does not know, continue to the next question.

**BR3. DO YOU KNOW HOW TO REGISTER (*name*)'S BIRTH?**

The purpose of this question is to assess how important lack of knowledge (of the process of registering) 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.

## 11.4:  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 for children.  The module also includes a mix of questions to obtain information on various aspects of development (physical, social, emotional, language, and cognitive development).

**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 includes e-books for children but 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, and record this in the space provided.
> - If there are no such books in the household, circle '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 asking this question and recording 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 part of the question and continue by saying **"DOES HE/SHE PLAY WITH"** and start asking whether the child plays with playthings from each of the categories listed. 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 if 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.

Read each category aloud and circle the code corresponding to the response before proceeding to the next category.

**EC4.** *Check AG2: Age of child:*

If the child is 0, 1 or 2 years old, check the appropriate box and go to the next module.  If the child is 3 or 4 years old, check the appropriate box and continue with EC5.

**EC5. DOES** *(name)* **ATTEND ANY ORGANIZED LEARNING OR EARLY CHILDHOOD EDUCATION PROGRAMME, SUCH AS A PRIVATE OR GOVERNMENT FACILITY, INCLUDING PRESCHOOL OR COMMUNITY CHILD CARE?**

Circle the appropriate code.  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.  For example, early childhood education would include the Roving Caregivers Programme in Toledo.

**EC7. IN THE PAST 3 DAYS, DID YOU OR ANY HOUSEHOLD MEMBER AGE 15 YEARS OR OVER ENGAGE IN ANY OF THE FOLLOWING ACTIVITIES WITH** *(name)***:**
**[A] READ BOOKS TO 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)***?**
Read each item aloud and circle the code corresponding to the response before proceeding to the next item.
- 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 biological 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.

**EC8. I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE HEALTH AND DEVELOPMENT OF** *(name)*. **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** *(name)*'**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, two, or three words, or none at all.

**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 the mother seems hesitant, prompt with "**DOES THE CHILD KNOW '1'? DOES THE CHILD KNOW 2**?" and so on. 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 symbols 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/pencil 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 picking up 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 (for example, in the evening or 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 successfully accomplish the simple tasks he/she is given. Do not concern yourself with the reasons the child doesn't usually do so.

**EC14. WHEN GIVEN SOMETHING TO DO, IS** *(name)* **ABLE TO DO IT BY** *(himself/herself)*?

> Circle the code corresponding to the response. A 'Yes' answer means that the child is able to occupy himself/herself independently for an appropriate length of time, without constantly

asking for assistance or giving up quickly (for example, colouring, building structures, etc.).  A 'No' answer means that the child cannot occupy himself/himself independently, and usually 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 often 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 mother has noticed that the child will physically hurt (kick, bite, hit) other children or adults, while a 'No' answer means that the child does not do this.  Do not concern yourself with what may be the reasons of such behaviour (for example, if mother tries to explain the reasons, or to excuse the child, just politely acknowledge her and quickly move on to the next question).

**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 him/her, or starts other activities before completing the one already started.  A 'No' answer means that the child doesn't get easily distracted.

## 11.5: BREASTFEEDING AND DIETARY INTAKE MODULE

**BD1.** *Check AG2: Age of child:*

If the child is 0, 1 or 2 years old, check the appropriate box and continue with BD2. If not (if the child is 3 or 4 years old), check the appropriate box and go to the Care of Illness Module.

**BD2.** 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. If the child is given pumped breast milk, it is also to be included here. If the child is under age 2, you may have asked this question when administering the Questionnaire for Individual Women.

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 '2' (No) and skip to BD4. Skip to BD4 in the case of a 'DK' response as well.

**BD3.** Is *(name)* 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 BD4 to BD11 ask about how and 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'.

Note that the child might have been fed outside the household when the mother/primary caretaker was not around. If the mother/primary caretaker is knowledgeable about what the child was given in her/his absence, you should record these as well.

If the mother/primary caretaker says "Don't know", try to probe but if the answer is still the same because the child was fed when mother or caretaker was not around, circle '8' for 'DK'.

Note that for milk, infant formula, yogurt, and solid/semi-solid or soft foods, the number of times the child had the food is also asked.

**BD4.** Yesterday, during the day or night, did **(*name*)** drink anything from a bottle with a nipple?

Circle the code corresponding to the response.

**BD5. 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.

**BD6. 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.

**BD7. NOW I WOULD LIKE TO ASK YOU ABOUT (OTHER) LIQUIDS THAT (*name*) MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT. I AM INTERESTED TO KNOW WHETHER (*name*) HAD THE ITEM EVEN IF COMBINED WITH OTHER FOODS. PLEASE INCLUDE LIQUIDS CONSUMED OUTSIDE OF YOUR HOME.**

- If any of the responses from BD2 to BD6 is 'Yes', say "**NOW I WOULD LIKE TO ASK YOU ABOUT OTHER LIQUIDS ...**"
- If none of the responses from BD2 to BD6 is 'Yes", say "**NOW I WOULD LIKE TO ASK YOU ABOUT LIQUIDS ...**"

**DID (*name*) DRINK (*Name of item*) YESTERDAY, DURING THE DAY OR NIGHT:**

Circle the codes corresponding to the response.

**[A] PLAIN WATER?**

**[B] JUICE OR JUICE DRINKS?**

**[C] WATERY SOUP?**

**[D] MILK SUCH AS TINNED, POWDERED, OR FRESH ANIMAL MILK?**

If yes, circle '1' and ask, "**HOW MANY TIMES DID (*name*) DRINK MILK?**"
- If the respondent says 7 or more times, record '7'.
- If the respondent doesn't know, record '8'.

**[E] INFANT FORMULA?**

If yes, circle '1' and ask, "**HOW MANY TIMES DID (*name*) DRINK INFANT FORMULA?**"
- If the respondent says 7 or more times, record '7'.
- If the respondent doesn't know, record '8'.

**[F] ANY OTHER LIQUIDS?**

The categories [A] to [E] are designed to cover different types of liquids that can be given to a child.  This last category is a final probe to make sure that we have not missed any liquid that was given to the child.  If the respondent mentions a liquid item here, make sure that the item cannot be placed into one of the above categories.  Only if the item cannot be placed into the above categories or you cannot decide, you may circle 'Yes' and specify the item.

It is important to ensure you specify the "other liquid" with great care.  For example, if the mother/primary caretaker says that the child had tea the day before, you have to probe to find out whether that tea had milk or was clear and made with water only.  You must write such details out when you specify (e.g. clear tea/no milk OR tea with milk).

If this other liquid had milk in it, you will also need to ask how much milk was included.  If the tea or other beverage was made with a lot of milk (more than half), you will need to include this in BD7 [D] and ask how many times they had milk tea (or other beverage) in the last day.

**BD8. NOW I WOULD LIKE TO ASK YOU ABOUT (OTHER) FOODS THAT *(name)* MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT.  AGAIN, I AM INTERESTED TO KNOW WHETHER *(name)* HAD THE ITEM EVEN IF COMBINED WITH OTHER FOODS.  PLEASE INCLUDE FOODS CONSUMED OUTSIDE OF YOUR HOME.**

- If any of the responses from BD2 to BD7[F] is 'Yes', say "**NOW I WOULD LIKE TO ASK YOU ABOUT OTHER FOODS …"**
- If none of the responses from BD2 to BD7[F] is 'Yes", say "**NOW I WOULD LIKE TO ASK YOU ABOUT FOODS …"**

**DID *(name)* EAT *(Name of food)* YESTERDAY DURING THE DAY OR THE NIGHT:**
Circle the codes corresponding to the response.

**[A] YOGURT?**

If yes, circle 1 and ask **"HOW MANY TIMES DID (*name*) DRINK OR EAT YOGURT?"**
- If the respondent says 7 or more times, record '7'.
- If the respondent doesn't know, record '8'.

**[B] ANY GERBER, HERO, CERELAC OR NESTUM*?***

**[C] BREAD, RICE, NOODLES, PORRIDGE, OR OTHER FOODS MADE FROM GRAINS?**

**[D] PUMPKIN, CARROTS, SQUASH OR SWEET POTATOES THAT ARE YELLOW OR ORANGE INSIDE?**

**[E]** IRISH POTATOES, WHITE YAMS, CASSAVA, OR ANY OTHER FOODS MADE FROM ROOTS?

**[F]** ANY DARK GREEN, LEAFY VEGETABLES?

**[G]** RIPE MANGOES, PAPAYAS?

**[H]** ANY OTHER FRUITS OR VEGETABLES?

**[I]** LIVER, KIDNEY, HEART OR OTHER ORGAN MEATS?

**[J]** ANY MEAT, SUCH AS BEEF, PORK, LAMB, GOAT, CHICKEN, OR DUCK?

**[K]** EGGS?

**[L]** FRESH OR DRIED FISH OR SHELLFISH?

**[M]** ANY FOODS MADE FROM BEANS, PEAS, LENTILS, OR NUTS?

**[N]** CHEESE OR OTHER FOOD MADE FROM MILK?

**[O]** ANY OTHER SOLID, SEMI-SOLID, OR SOFT FOOD THAT I HAVE NOT MENTIONED?

> The categories [A] to [N] are designed to cover all the list of food groups.  This last category is a final probe to make sure that we have not missed any food that was given to the child.  If the respondent mentions a food item here, make sure that the item cannot be placed into one of the above categories.  Only if the item cannot be placed into any of the above categories or if you cannot decide, you may circle 'Yes' and specify the item.  Some typical examples of foods that would be recorded here are chocolate or sweets.

**BD9.** *Check BD8 (Categories "A" through "O")*

> Check the categories 'A' through 'O' in BD8.  If there is at least one 'Yes' or all of the responses are 'DK', check the corresponding box and skip to BD11.  For all other cases, check the box at 'Else' and continue with BD10.

**BD10.** *Probe to determine whether the child ate any solid, semi-solid or soft foods yesterday during the day or night*

> If the child did not eat or the respondent does not know, tick the corresponding box and skip to the next module.  If the child ate at least one solid, semi-solid or soft food item mentioned by the respondent, go back to BD8 and record the food eaten yesterday [A to O], then continue with BD11.

Note that if the child has not eaten anything, this could only happen when the child was too sick or if the child is living in a very poor household where no food was available to the members.

**BD11. HOW MANY TIMES DID (*name*) EAT ANY SOLID, SEMI-SOLID OR SOFT FOODS YESTERDAY DURING THE DAY OR NIGHT?**

Record the number of times the child had solid, semi-solid or soft foods.  If the child ate seven or more times, record '7'.

- A range of feeding episodes, from a full meal to small snacks should be counted here (for example, a piece of fruit or a piece of bread).
- However, liquids and very small snacks such as a bite or two from someone else's food should not be counted.

## 11.6: IMMUNIZATION MODULE

This module is used to obtain information for children age 0, 1, and 2 years who have received BCG, DPT, Polio, measles, other immunizations and Vitamin A supplements.

**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 the 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, as 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 IM2A.
- If the child has a vaccination card or other document but the respondent is unable to show you, circle '2' and skip to IM6, where 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 the next question.

**IM2. DID YOU EVER HAVE A VACCINATION CARD FOR *(name)*?**

Circle the code corresponding to the answer given and skip to IM6.

**IM2A. DID (*name*) GET HIS VACCINATIONS AT A PRIVATE OR PUBLIC FACILITY?**

The answer to this question will be an indication of which vaccines are applicable for the child.  The table below compares vaccines that are given in public facilities with those that are given in the private facilities.  Circle the code corresponding to the answer given and continue to the next question.

| Public Health Facilities | | Private Health Facilities |
|---|---|---|
| BCG | ⇨ | BCG |
| Polio | ⇨ | Polio |
| Pentavalent | ⇨ | DTaP |
| | ⇨ | Hib |
| | ⇨ | HBV |
| MMR | ⇨ | MMR |
| Seasonal Influenza | ⇨ | Flu |

**IM3.**

You will complete question IM3 from the vaccination card for the child.  If there is more than one eligible child for the under-5 questionnaire, be very careful that you are recording the information for the correct child in the corresponding questionnaire.

- Copy the dates in the spaces provided in 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 2013, you would record '98' for 'Day', '07' for 'Month', and '2013' 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 (public health facility) and there is simply a check on the card to show that a polio vaccine was also given, you may record the date of the DPT injection on the polio line since this probably indicates that the vaccinations were given on the same day.  Similarly, if a date is given for the DTaP-P (private health facility) and you see a check on the card for HBV and Hib, you may assume that these vaccinations were also given to the child on the same date as DTaP-P. Please also verify this with the respondent.
- 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.  Additionally, 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.

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 on which 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 from 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 Seasonal Influenza) recorded?*
If all vaccines are recorded check the box marked 'Yes' and go to the Care of Illness Module. If 'No', check the corresponding box and continue with the next question.  Because of their age, some of the children may not be eligible to receive some of the vaccinations (for

example, a newborn child is not eligible to receive most of the vaccinations).  You should still check 'No' for such cases and continue with the next question.

Shown below are the vaccinations that fully immunized children of selected ages should have received:

| Age | Vaccines | | Comment |
|---|---|---|---|
| | **Public** | **Private** | |
| Less than 2 months old | BCG | BCG | BCG Given at birth or shortly thereafter |
| 2 months or older but less than 4 months old | − BCG<br>− 1st dose of Polio and Pentavalent | − BCG<br>− 1st dose of Polio, DTap-P, Hib and HBV | 1st dose of Polio and Pentavalent/(DTap-P Hib & HBV) given at 2 months |
| 4 months or older but less than 6 months old | − BCG<br>− 1st & 2nd dose of Polio and Pentavalent | − BCG<br>− 1st & 2nd dose of Polio, DTap-P, Hib and HBV | 2nd dose of Polio and Pentavalent/(DTap-P Hib & HBV) given at 4 months |
| 6 months or older but less than 8 months old | − BCG<br>− 1st, 2nd & 3rd dose of Polio and Pentavalent<br>− 1st dose of Vitamin A<br>− 1st Flu Shot | − BCG<br>− 1st, 2nd & 3rd dose of Polio, DTap-P, Hib and HBV<br>− 1st dose of Vitamin A<br>− 1st Flu Shot | − 3rd dose of Polio and Pentavalent/(DTap-P Hib & HBV) given at 6 months<br>− 1st Vitamin A given at 6 months<br>− 1st Flu Shot given at 6 months |
| 8 months or older but less than 12 months old | − BCG<br>− 1st, 2nd & 3rd dose of Polio and Pentavalent<br>− 1st dose of Vitamin A<br>− 1st & 2nd Flu Shot | − BCG<br>− 1st, 2nd & 3rd dose of Polio, DTap-P, Hib and HBV<br>− 1st dose of Vitamin A<br>− 1st & 2nd Flu Shot | 2nd Flu Shot given at 8 months (during the period October to March) |
| 12 months or older but less than 18 months | − BCG<br>− 1st, 2nd & 3rd dose of Polio and Pentavalent<br>− 1st & 2nd dose of Vitamin A<br>− 1st & 2nd Flu Shot<br>− 1st MMR | − BCG<br>− 1st, 2nd & 3rd dose of Polio, DTap-P, Hib and HBV<br>− 1st & 2nd dose of Vitamin A<br>− 1st & 2nd Flu Shot<br>− 1st MMR | − 2nd dose of Vitamin A given at 12 months<br>− 1st MMR given at 12 months |

| Age | Vaccines | | Comment |
|-----|----------|--------|---------|
| | Public | Private | |
| 18 months or older but less than 24 months | − BCG<br>− 1st, 2nd & 3rd dose of Polio and Pentavalent<br>− 1st, 2nd & 3rd dose of Vitamin A<br>− 1st & 2nd Flu Shot<br>− 1st & 2nd MMR | − BCG<br>− 1st, 2nd & 3rd dose of Polio, DTap-P, Hib and HBV<br>− 1st, 2nd & 3rd dose of Vitamin A<br>− 1st & 2nd Flu Shot<br>− 1st & 2nd MMR | − 3rd dose of Vitamin A given at 18 months<br>− 2nd dose of MMR given at 18 months (since March 2015) |
| 24 months or older | − BCG<br>− 1st, 2nd & 3rd dose of Polio and Pentavalent<br>− 1st, 2nd, 3rd & 4th dose of Vitamin A<br>− 1st & 2nd Flu Shot<br>− 1st & 2nd MMR | − BCG<br>− 1st, 2nd & 3rd dose of Polio, DTap-P, Hib and HBV<br>− 1st, 2nd, 3rd & 4th dose of Vitamin A<br>− 1st & 2nd Flu Shot<br>− 1st & 2nd MMR | − 4th dose of Vitamin A given at 24 months<br>− 2nd dose of MMR given at 24 months (2010 to March 2015) |

**IM5. I**N ADDITION TO WHAT IS RECORDED ON THIS CARD, DID *(name)* RECEIVE ANY OTHER VACCINATIONS − INCLUDING VACCINATIONS RECEIVED IN CAMPAIGNS OR IMMUNIZATION DAYS OR CHILD HEALTH 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 provider might not have recorded a vaccination.

- It is recommended that go through the immunization card with the respondent, using the table above as a guide to perhaps help trigger memories.
- It has been seen where the Vitamin A supplement in particular is often not recorded, therefore it would be good to probe for the number of doses, depending on the child's age

If the answer is 'Yes', check the corresponding box <u>only if</u> 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 Pentavalent were recorded on the card, and another dose was given but not recorded, there should be '66' in the 'Day' column of DPT/Hep/Hib3 (or DTap-P3, Hib3 & HBV3).

- <u>Do not ask the respondent to supply dates from memory.</u> Enter a date <u>only</u> if the card or other document is available and lists a date for the immunization dose.

Once you have probed for any other vaccinations, go to the Care of Illness Module.

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 OR CHILD HEALTH DAY?**

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', go to the next module.

**IM7. HAS *(name)* EVER RECEIVED A BCG VACCINATION AGAINST TUBERCULOSIS OR TB – THAT IS, AN INJECTION IN THE ARM OR SHOULDER THAT USUALLY CAUSES A SCAR?**

Circle the code corresponding to the response.

**IM8. HAS *(name)* EVER RECEIVED ANY VACCINATION DROPS IN THE MOUTH TO PROTECT HIM/HER FROM 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 IM10A.

**IM9. WAS THE FIRST POLIO VACCINE RECEIVED WHEN THE CHILD WAS TWO MONTHS OLD?**

Ask if the first polio vaccine was received when the child was two months old. Circle the code corresponding to the response.

**IM10. HOW MANY TIMES WAS HE/SHE GIVEN THESE DROPS (THE POLIO VACCINE)?**

Fill in the number in the space provided.

**IM10A. HAS (*name*) EVER RECEIVED A PENTAVALENT OR DPT VACCINATION – THAT IS, AN INJECTION TO PREVENT HIM/HER FROM GETTING DIPHTHERIA, WHOOPING COUGH, TETANUS, HEPATITIS B AND INFLUENZA TYPE B?**

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 IM12A.

**IM10B. HOW MANY TIMES WAS A PENTAVALENT OR DPT VACCINE RECEIVED?**

Enter the number in the space provided, and skip to IM16.

**IM12A. HAS (*name*) EVER RECEIVED A DTaP VACCINATION – THAT IS, AN INJECTION TO PREVENT HIM/HER FROM GETTING DIPHTHERIA, WHOOPING COUGH, TETANUS AND POLIO?**

Circle the code corresponding to the response.  If the answer is 'Yes', continue to the next question. If 'No' or 'DK', skip to IM12C.

**IM12B. HOW MANY TIMES WAS A DTaP VACCINE RECEIVED?**

Enter the number in the space provided.

**IM12C. HAS** *(name)* **EVER RECEIVED A HIB VACCINATION – THAT IS, AN INJECTION TO PREVENT HIM/HER FROM GETTING INFLUENZAE TYPE B?**

Circle the code corresponding to the response. If the answer is 'Yes', continue to the next question. If 'No' or 'DK', skip to IM13.

**IM12D. HOW MANY TIMES WAS A HIB VACCINE RECEIVED?**

Enter the number in the space provided.

**IM13. HAS** *(name)* **EVER BEEN GIVEN A HEPATITIS B OR HBV VACCINATION – THAT IS, AN INJECTION IN THE THIGH OR BUTTOCKS TO PREVENT HIM/HER FROM GETTING HEPATITIS B?**

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 TWO MONTHS AFTER BIRTH, OR LATER?**

Circle the code corresponding to the response.

**IM15. HOW MANY TIMES WAS A HEPATITIS B VACCINE RECEIVED?**

Enter the number in the space provided.

**IM16. HAS** *(name)* **EVER RECEIVED A MEASLES OR MMR INJECTION – THAT IS, A SHOT IN THE ARM AT THE AGE OF 12 MONTHS OR OLDER – TO PREVENT HIM/HER FROM GETTING MEASLES?**

Circle the code corresponding to the response. If the mother/primary caretaker specifically mentions measles vaccine but refers to an injection in the thigh, accept the answer as valid and circle '1' for 'Yes'. If 'No' or 'DK', skip to IM19A.

**IM16A. HOW MANY TIMES WAS A MEASLES (OR AN MMR) VACCINE RECEIVED?**

Enter the number in the space provided.

**IM19A. HAS (***name***) EVER RECEIVED ANY VITAMIN A DROPS?**

Circle the code corresponding to the response. If the answer is 'Yes', continue to the next question. If 'No' or 'DK', skip to IM19C.

**IM19B. HOW MANY TIMES WERE VITAMIN A DROPS RECEIVED?**

Enter the number in the space provided.

**IM19C. HAS (***name***) EVER RECEIVED A SEASONAL INFLUENZA VACCINE OR A FLU SHOT?**

Circle the code corresponding to the response. If the answer is 'Yes', continue to the next question. If 'No' or 'DK', go the next module.

**IM19D. HOW MANY TIMES WAS A FLU SHOT RECEIVED?**

Enter the number in the space provided.

## 11.7: CARE OF ILLNESS MODULE

These questions aim to find out if the child has recently had diarrhoea, fever or an illness with a cough and, if so, what treatments 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 the stool, or more frequently than is normal for the child. Please note that it is normal for exclusively breastfed babies to have three or more loose stools every day.

> Record the 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 more frequently than is normal for the child."** 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 CA6A.

**CA2. I WOULD LIKE TO KNOW HOW MUCH (*name*) WAS GIVEN TO DRINK DURING THE DIARRHOEA (INCLUDING BREAST MILK). 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. <u>The focus in this question is not on how much fluid was offered to the child</u> but rather on **how much fluid was actually consumed by the child compared to his/her usual consumption**.

> Ask the question just as it is worded here. Read out the entire question and circle the appropriate code for the response. Get the respondent's best judgement of the relative amount of <u>total</u> fluids <u>actually consumed</u> by the child. All fluids are included, not just special ones given to treat diarrhoea. For example, water, tea, fruit juice, breast milk and formula are included as well as special fluids such as Oral Rehydration Salts.

> If the respondent says 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?"**, and record the response accordingly.

> 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 THE CHILD ACTUALLY DRINK DURING THIS DIARRHOEA?**", and then, "**IS THAT LESS THAN HE/SHE USUALLY DRINKS, OR IS ABOUT THE SAME AMOUNT OR MORE THAN USUAL?**"

It may be difficult to estimate the relative amount of breast milk 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, WAS HE/SHE GIVEN 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 not on how much food was offered to the child but rather on how much food was actually consumed by the child compared to his/her usual consumption.

Ask the question just as it is worded here. Read out the entire question and circle the code corresponding to the mother's/primary caretaker's response. Get her/his best judgement of the relative amount of total food actually consumed by the child.

Try to find out what actually happened, not what the mother/primary 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 the child actually eat during this diarrhoea?"

If the mother/primary 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 child was offered more food than usual, but the child ate much less, the answer is 'much less'; circle '1'.

If the child is very young and the caretaker replies that he/she takes only fluids or breast milk (that is, has not started 'eating' yet), there is no need to probe, since 'drinking' and 'eating' count as the same for this child. In such a case, breastfeeding will have been captured in previous question (CA2); circle '6' for 'Never gave food'.

**CA3A. DID YOU SEEK ANY ADVICE OR TREATMENT FOR THE DIARRHOEA FROM ANY SOURCE?**

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 CA4.

**CA3B. FROM WHERE DID YOU SEEK ADVICE OR TREATMENT?**

After the first reply, probe by asking: **"ANYWHERE ELSE?"** until all applicable 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.
    - o 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'.
    - o 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'.
    - 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 should also be coded as 'Other' and described.

**CA4. DURING THE TIME** *(name)* **HAD DIARRHOEA, WAS HE/SHE GIVEN TO DRINK:**

We want to know if and what type of oral rehydration solution (ORS) the child took during the last episode of diarrhoea.

**[A] A FLUID MADE FROM A SPECIAL PACKET CALLED ORAL REHYDRATION SALT?**

**[B] A PRE-PACKAGED ORS FLUID FOR DIARRHOEA CALLED PEDIALYTE?**

**CA4A. *Check CA4: ORS***

If the child was given ORS ('Yes' circled in 'A' or 'B' in CA4), continue with CA4B. If the child was not given ORS, skip to CA4C.

**CA4B. WHERE DID YOU GET THE ORS?**

Circle the code for the provider or person mentioned. If the respondent does not know whether a facility is public or private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview.

**CA4C. DURING THE TIME** *(name)* **HAD DIARRHOEA, WAS HE/SHE GIVEN:**

Circle the code corresponding to the response.

**[A] ZINC TABLETS?**

**[B] ZINC SYRUP?**

**CA4D.** *Check CA4C: Any zinc?*

If the child was given any zinc ('Yes' circled in 'A' or 'B' in CA4C), continue with CA4E. If the child was not given any zinc, skip to CA4F.

**CA4E. WHERE DID YOU GET THE ZINC?**

Circle the code for the provider or person mentioned. If the respondent does not know whether a facility is public or private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview.

**CA4F. DURING THE TIME** *(name)* **HAD DIARRHOEA, WAS HE/SHE GIVEN COCONUT WATER TO DRINK?**

Circle the code corresponding to the response.

**CA5. WAS ANYTHING (ELSE) GIVEN TO TREAT THE DIARRHOEA?**

This question asks the mother/primary caretaker whether the child received any (other) treatment for diarrhoea other than those mentioned in CA4, CA4C and CA4F for this episode of diarrhoea.

- If, for example, in CA4 you learned that the child was given fluid from an ORS packet or Pedialyte, then phrase CA5 by saying, "**WAS ANYTHING** <u>ELSE</u> **GIVEN TO TREAT THE DIARRHOEA?**"
- If none of the treatments mentioned in CA4, CA4C or CA4F 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 CA6A.

**CA6. WHAT (ELSE) WAS GIVEN TO TREAT THE DIARRHOEA?**

If you learn in CA5 that the child was given something (more) 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.

Anti-motility means anti-diarrhoea. If the mother/primary caretaker doesn't know what type of medicine was given (anti-motility, antibiotic, non-antibiotic) ask to see the package of the medicine.

**CA6A. IN THE LAST TWO WEEKS, HAS (name) BEEN ILL WITH A FEVER AT ANY TIME?**

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.

**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 symptoms started before but continued into the 2-week period, this counts as 'Yes.'
- If the answer is 'No' or 'DK', circle the appropriate code and skip to CA9A.  .

**CA8. WHEN (name) HAD AN ILLNESS WITH A COUGH, DID HE/SHE BREATHE FASTER THAN USUAL WITH SHORT, RAPID BREATHS OR HAVE DIFFICULTY 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: **"I MEAN, NOTICEABLY FASTER THAN NORMAL WHEN THE CHILD IS RESTED."**  If the respondent asks "What do you mean by 'difficulty breathing'?" you may say **"I MEAN, THE CHILD SOUNDED/LOOKED AS IF HE/SHE WAS HAVING TROUBLE BREATHING**."  Circle the code corresponding to the response.  If the answer is 'Yes', continue to the next question.  Otherwise, skip to CA10.

**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 due to 'Other' reasons, write the respondent's description in the line provided and circle '6'.  All responses in this question should skip to CA10.

**CA9A.** *Check CA6A: Had fever?*

    If the child had fever (CA6A = 1), continue with CA10.  If the child did not have fever (CA6A = 2 or 8), skip to CA14.

**CA10. D**ID YOU SEEK ANY ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE**?**

    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 answer given.  If the respondent did not seek any advice or treatment from any source or doesn't know, skip to CA12.

**CA11. F**ROM WHERE DID YOU SEEK ADVICE OR TREATMENT**?**

    After the first reply, probe by asking: **"A**NYWHERE ELSE**?"** until all relevant 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 should also be coded as 'Other' and described.

**CA12. A**T ANY TIME DURING THE ILLNESS WAS **(***name***)** GIVEN ANY MEDICINE FOR THE ILLNESS**?**

    Circle the code corresponding to the answer given.  If the child was not given any medicine for the illness or if the mother/primary caretaker does not know, skip to CA14.

**CA13. WHAT MEDICINE WAS (name) GIVEN?**

Circle the codes corresponding to all medicines taken by the child to treat the fever, 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 relevant medicines are mentioned.

If the respondent cannot remember the names of all the medicines the child took, ask to see the packaging of any leftover medicines. If the medicine is a type of medicine that is not listed, circle 'X' and fill in the name in the space provided. If the packaging is not available, circle 'Z' for 'DK'.

**CA13A. *Check CA13: Antibiotic mentioned (codes I -J)?***

If antibiotic is mentioned, tick the 'Yes' box and continue with CA13B, otherwise skip to CA14.

**CA13B. WHERE DID YOU GET THE ANTIBIOTIC?**

Circle the code for the provider or person mentioned. If the respondent does not know whether a facility is public or private, write the name of the facility in the space provided, and inform your supervisor after you complete the interview.

**CA14. *Check AG2: Age of Child.***

CA14 is used to filter out children age 3 and 4 years, since the next question is to be asked only of children under age three. Check AG2; if the child is 0, 1 or 2 years old, tick the corresponding box and continue with the next question. If the child is 3 or 4 years old, skip to UF13.

**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. 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 dispose of their children's stools last time, if the child did not use the toilet facility. Circle the appropriate code.

If the respondent states that disposable diapers are used, then probe to establish how the diapers are disposed of.

## 11.8: ENDING THE QUESTIONNAIRE

At this point, the interview is completed, with the exception of recording the time (UF13), and checking for other interviews in the household (UF14). However, remember that you still have the anthropometry module to complete, as part of this questionnaire (see below).

**UF13. Record the time**

Record the time of the day you finish the under-five interview. If the hour or minutes are less than 10, put a zero in front of the hour or minute, and record a.m. or p.m. as appropriate.

If the interview is interrupted for more than 15 minutes or it is not completed on your first visit and you visit the household again to continue the interview, the amount of time between UF12 (start time) and UF13 (end time) will not reflect the correct duration of the interview. You should make a note of this next to question UF13 and, if necessary, provide additional explanation at the end of the questionnaire.

**UF14. *Check List of Household Members, columns HL7B and HL15. Is the respondent the mother or primary 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, 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.
- Otherwise end the interview with this respondent by thanking her/him for her/his cooperation and tell her/him that you will need to measure the weight and height of the child before you leave the household.

Check to see if there are other woman's, man's or under-5 questionnaires to be administered in this household.

## 11.9:  ANTHROPOMETRY MODULE

The 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 the anthropometric measurements, you should inform your supervisor and call upon the measurer to join you in the household.

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, to enable them to act as the measurer's assistants.

Each child will be weighed and measured, and the results will be recorded in his/her questionnaire.  Be sure that the data for each child are recorded in the correct questionnaire.  Procedures for weight and height measurements are described in detail in section 12 of this manual. This section is confined to explaining how the results will be coded.

Note that for this module, no questions will be asked of mother/primary caretaker.

**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 should only be the measurer.

**AN2.** *Result of height/length and weight measurement*

Circle the appropriate code corresponding to the result of the measurement.  If the result is 'Other', write a description on the line provided and circle '6'.  If no measurement is taken, skip to AN6.

**AN3.** *Child's weight*

The child should be weighed according to the instructions given during training.  Record the weight exactly as read out by the measurer.
- Repeat the measurement back to the measurer to make sure that you have heard correctly.
- If the measurer confirms, record the weight in kilograms with one decimal point.
- Use a leading zero if the number of kilograms is one digit.

- If the weight is not measured, circle '99.9' and skip to AN3B.

**AN3A.** *Was the child undressed to the minimum?*

Circle the appropriate code. Minimum means that all clothes are removed other than light clothing such as underclothes. If the child has not been undressed to the minimum, make a note of the circumstances and discuss with your supervisor afterwards.

**AN3B.** *Check the age of the child in AG2*

If the child is under 2 years old, check the appropriate box and then measure length (that is, take the measurement while the child is lying down). If the child is age two or older, measure height (that is, take the measurement while the child is standing).

**AN4.** *Child's length or height*

Record the length or height exactly as it is called out by the measurer.

- Use a leading zero if the number of centimetres is only two digits.
- Repeat the measurement back to the measurer to make sure you have heard correctly, or show what you have recorded on the questionnaire to be confirmed by the measurer.
- If the length is not measured, circle '999.9' and skip to AN6.

**AN4A.** *How was the child actually measured? Lying down or standing up?*

Circle the appropriate code.

**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.

- If there are blanks left where a response is expected, complete the missing information by asking these questions to the respondent or adding a note detailing the reasons for the blank.
- 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 Questionnaire for Children Under Five has been reserved for the interviewers, supervisors, and measurers to write any notes or observations regarding this particular under-5 interview.

# 12. COLLECTION OF ANTHROPOMETRIC MEASUREMENTS

These instructions[1] are intended for all MICS field staff and outline the required steps that need to be taken during the MICS data collection exercise in order to accurately measure and weigh children. It is easy to make errors in measurements when not being careful. **Measurers in particular should carry these instructions with them in the field and review them regularly to make sure they are always following the correct procedures.** Supervisors should also frequently refer to these instructions in the field when observing the work of the measurers.

## 12.1: RESPONSIBILITIES OF FIELD TEAM MEMBERS DURING THE COLLECTION OF ANTHROPOMETRIC MEASUREMENTS

**Measurers:**

Taking anthropometric measurements of children is the main responsibility of the team measurer and requires that he or she follows the procedures specified in this manual and that no steps in the procedures are omitted. Although measurers will be assisted by another trained team member, it should however be emphasised that the measurer will hold the overall responsibility for determining final measurements and making sure that they measurements have been properly recorded on the under-five questionnaire.

Special attention should be paid to the values of the measurements to make sure they lie within the ranges specified in Annex V. If a value falls outside the acceptable range, the measurer should re-measure the child and check that the child's age has been correctly recorded. Please note that while measurements outside the ranges given are possible, they are very rare. The measurer should always make a note of any such anomaly.

The measurer is also responsible for carrying and taking care of the equipment used for anthropometric measurements, and reporting to the supervisor immediately if any of the equipment is malfunctioning.

**Interviewers and field supervisors:**

Two trained persons are always required to measure a child's height and length; a measurer and an assistant. The assistant may be an interviewer or a field supervisor as long as they have undergone the MICS anthropometry training. The measurer holds the child and reads the measurements while the assistant helps hold the child and records the measurements on the questionnaire.

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[1] This manual has been developed by UNICEF to be used for Multiple Indicator Cluster Surveys (MICS). The manual draws heavily on resources developed by the World Health Organization (WHO), Action Contre la Faim Canada, and the Food and Nutrition Technical Assistance Project (FANTA). The authors would like to thank WHO, Action Contre la Faim, and FANTA for the kind permission to use their materials. The illustrations and summary procedures for measuring length or height are adapted from *How to Weigh and Measure Children: Assessing the Nutritional Status of Young Children in Household Surveys, Annex I, Summary Procedures* prepared by the United Nations Department of Technical Co-operation, Development and Statistical Office (New York: 1986).

**Under no circumstances** should an untrained person such as a mother or other caregiver of the child assist in taking the length or height measurement. It is however recommended that a mother/primary caretaker be near to the child to comfort him/her and to assist in putting the child at ease so that he/she can be measured.

**Field Supervisors:**
Supervisors will be responsible to coordinate the work of the measurer by making sure he/she knows where to find the households that interviewers are conducting interviews in, and to know approximately how many children are to be measured and at what time the measurer should visit the household.

The supervisor is also expected to regularly observe the measurer and assistants performing anthropometric measurements. The supervisors will be responsible for ensuring that measurements are taken following the exact steps and procedures outlined in these instructions.

In situations where measurers are routinely making errors in taking and/or reading measurements, in manipulating children and/or equipment, and in reporting the information on the questionnaire, the supervisor should consult with the fieldwork coordinator when necessary.

## 12.2:  GENERAL CONSIDERATIONS FOR MEASURERS AND ASSISTANTS

**(1) Placement of the measuring board and electronic scale**
Measurers should begin to observe possible places where the electronic scale and board can be positioned as soon as they walk into a sample household. They should be selective about where the measuring board and electronic scale is placed. During daylight hours, it is best to measure outdoors. If it is cold, rainy, or if too many people congregate and interfere with the measurements, it may be more comfortable to weigh and measure a child indoors. Make sure there is adequate light and ensure you place the equipment on a flat and even surface.

**(2) When to weigh and measure**
Weights and heights of all eligible children under age five years living 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 of those children who are present.** Do not weigh and measure at the beginning of the interview, that is, as soon as the interviewer enters a household, since this would likely be perceived as overly intrusive.

It is the supervisors' responsibility to coordinate the work of the measurer so that the measurer visit households at the convenient time before the interviewers leave to their next household. If households within a cluster are scattered, then transport and logistics issues need to be well planned. Good planning will help to ensure that measurers are not wasting time waiting in one household for the interviews to finish, while other interviewers have completed their interviews and are waiting with the respondents and children for the measurer to arrive.

**(3) Weigh and measure one child at a time**

In cases when there is more than one eligible child of the same mother/primary caretaker, complete all the questionnaires for the mother/primary caretaker, and then weigh and measure all her/his children one after the other, making sure not to confuse the questionnaires.

If there is more than one mother/primary caretaker with children under 5 in the same household, care should be taken over the timing and the organization of the measurements, and good judgement be applied in such cases.

If it is considered that leaving all of the measurements until after the completion of all questionnaires will cause confusion and errors, then measurements of children by the same mother/primary caretaker should be conducted once the questionnaires administered to that mother/primary caretaker have been completed, and then the measurer moves on to children of the next mother/primary caretaker.

However, in reality, it is often the case that interviewing all mothers/primary caretakers first, and measuring all children at the end is more practical – use this option if it will not cause confusion. It is very important to complete both the weight and the height/length measurements for one child before continuing with the next eligible child.

**(4) Controlling and taking care of the child**

When children are weighed and measured, the measurer and assistant must take care to gently control the child. The strength and mobility of even very young children should not be underestimated. Needless to say, a gentle but firm approach is necessary. Do not apply excessive force on children's limbs to get measurements. **The measurer's own sense of calm and self-confidence will be felt by the mother and the child**.

When a child comes into contact with any measuring equipment, that is, a measuring board or electronic scale, the child must be held carefully so that he/she does not trip or fall. **Children should never be left alone with a piece of equipment; physical contact with the child, except for the few seconds while taking his or her weight, should always be maintained**.

Measurers and assistants should keep objects out of their hands and pens out of their mouth, hair, or breast pocket when a child is being weighed and measured so that the child will not get hurt due to carelessness.  When the pen is not being used it should be placed in the equipment pack, pen case, or on the survey form.

**Measurers and assistants should not have long fingernails and should remove rings and watches before they weigh and measure children to prevent them from getting in the way or harming the child.**  No member of the field team should smoke when in a household or in the process of taking measurements.

**(5)  Coping with stress**

Since weighing and measuring requires touching and handling children, normal stress levels for this part of the survey work is higher than for where only verbal information is collected.

Measurers should explain the weighing and measuring procedures to the mother and, to a limited extent, the child, to help minimize possible resistance, fear, or discomfort.  It should be determined if the child or mother is under so much stress that the weighing and measuring must stop.  Remember, young children are often uncooperative – they tend to cry, scream, kick, and sometimes bite.  If a child is under severe stress and is crying excessively, attempts to calm the child should be made, for example, by returning the child to the mother for a moment before proceeding with the weighing and measuring.

Bear in mind that if a child is terrified and cries too much, this can have a big impact on the other children of the household that need to be measured.  It is better to leave the distressed child to calm down and to come back later to try to weigh and measure the child again.  In some cases it may be possible to weigh and measure a distressed child after he or she has seen other children such as his or her siblings in the household being measured.

Do not weigh or measure a child if:
- The mother refuses.
- The child is too sick or too distressed.
- The child is physically deformed, which will interfere with or give an incorrect measurement. To be sensitive to the feelings of such a child, its parents, and other children, you may want to measure the child and make note of the deformity on the questionnaire.

**(6)  Take good care of the equipment and keep it clean**

The equipment needs to be cleaned on a very regular basis as it easily becomes dirty.  As a courtesy, it is important to clean the wooden height boards in between children as the feet and head are placed on the same spot of the wooden board depending on the age of the child.

**(7) Strive for improvement**

We can become very skilled in taking measurements if we strive for improvement and follow every step of every procedure the same way every time. The quality and speed of measurements will improve with practice. Do not take these procedures for granted, even though they may seem simple and repetitious, and do not omit any of the steps.

**(8) Hygiene**

Do not handle children without clean hands. Likewise, cleaning hands after handling a child is recommended. Disinfecting wipes and an alcohol-based hand gel will be provided to facilitate the cleaning of hands before and after handling a child. There will be households in which soap and water will not be available to the measurer and others where measurement without cleaning hands will not be allowed.

## 12.3:  MEASURING A CHILD'S WEIGHT – SUMMARY OF PROCEDURES

During MICS5 data collection, children should only be weighed using the seca 874 U Scale. If for any reason the scale is not working during field work, then the measurer should immediately inform the team supervisor, who will produce the back-up scale procured for just such an event. The supervisor should also immediately contact the fieldwork coordinator to apprise her of the situation. It is highly recommended that teams always carry a back-up scale, so that fieldwork is not interrupted due to problems with one scale.

**Setting up the scale for use**

- To turn on the scale, carefully turn it over so that the base is accessible.
    1. Press the closure of the battery compartment in the direction of the cover itself to open the battery compartment.
    2. Insert the six supplied batteries into the battery compartment, checking that the polarity is correct.
    3. To activate the power supply, push the switch located on the side of the display to the "ON" position.

- **Scales should always be placed on a hard, level surface (wood, concrete, or firm earth). Soft or uneven surfaces may cause errors in weighing.**

- The scale will not function correctly if it becomes too warm or too cold. It is best to use the scale in the shade, or indoors. If the scale becomes hot and does not work correctly, place it in a cooler area and wait 15 minutes before using it again. Make sure to check the surface of the scale if for any reason it was left in direct sunlight, as the grey surface can become extremely hot and could easily burn bare feet. If it becomes too cold, place it in a warmer area.

- The scale must adjust to significant changes in temperature.  If the scale is moved to a new site with a different temperature, wait for 15 minutes before using it again.

- The seca 874 U is a sturdy yet sensitive piece of electronic equipment.  <u>The scale must be tested **every single day** of fieldwork.</u>  This is best done using a labelled standard weight of 2.5 – 5.0 kg, which must be tested initially to ensure that the indicated weight is accurate.  <u>Record the results of the daily test of the scale, including the date and weight.  In addition, it is recommended that the tared weight function be tested daily.</u>

- In reference to the scale's minimum and maximum operating temperatures, it is advisable to test the scale before <u>every</u> measurement when the scale is moved and operated in extreme weather conditions.

- Actual calibration cannot be done in the field, but only by a technician. Therefore the scale should be immediately replaced if readings are off.

**Switching off the scale**
The scale switches off automatically:
- After 3 minutes in normal mode; or
- After 2 minutes, if the mother-and-baby function is switched on.

**Maintaining and storing the scale**
Always handle the scale carefully:
- Do not drop/bump the scale or subject it to violent shocks;
- Do not weigh loads totalling more than 150 kilograms;
- Protect the scale from excess moisture or humidity;
- <u>Do not step on the display</u> as this could damage it – step on the rubberized area;
- Do <u>not</u> use the scale at temperatures below 10º C or above 40º C.  Test the scale if transported or used under such circumstances.

To clean the scale, wipe surfaces with a damp cloth.  <u>Never put the scale into water</u>.

Do not store the scale in direct sunlight or other hot places.

The seca 874 U scale is powered exclusively by batteries. 10,000 weighing operations can be performed with one set of batteries.  The scale uses six type AA 1.5 V batteries that are easily replaceable.

**Preparing the child for weighing**
Explain to the mother/primary caretaker that the child needs to remove his/her outer clothing in order to obtain an accurate weight.
- A wet diaper, or shoes and jeans, can weigh more than 0.5 kg.

- Babies should be weighed naked; wrap them in a blanket to keep them warm until weighing.
- When using the **2 in 1** or tared weighing described below, the adult can be weighed holding a blanket, which he/she can then wrap around the naked baby during measurement.
- Older children should remove all but minimal clothing, such as their underclothes.

If it is too cold to undress a child or if the child resists being undressed and becomes agitated, please weigh the clothed child, but code in the questionnaire (AN3A) that the child could not be undressed to the minimum and make a note of the circumstances.

**Weighing a child who is less than 2 years old (tared weighing)**
The **2 in 1** function enables the body weight of infants and young children to be more accurately determined.  The child is weighed while being held in the arms of the mother/primary caretaker (or another adult if necessary).

**(1)  Measurer:**

(a) Switch on the scale with no weight applied.
Wait until **0.0** appears on the display
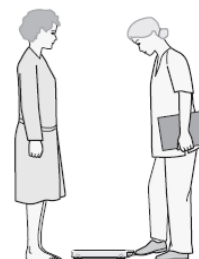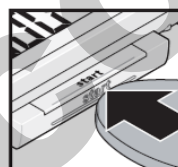
(b) Ask the mother/primary caretaker to step onto the scale (without the child).
The weight is displayed.
<u>Note</u>: The person being weighed on the scale must stand very still.
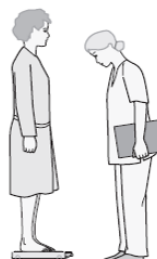
**(2)  Measurer:**

(a) Press the **2 in 1** key.
The weight is stored.
**0.0** and the word **NET** appears on the display.
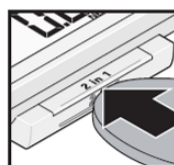
(b) Ask the mother/caretaker to hold the (first) baby while standing on the scale and to try

not to move.

(c) Wait until the weight display and the message **HOLD** are no longer flashing.

(d) Read out the baby's weight to the assistant.

(e) Confirm the correct weight has been recorded.

(f) Ask the mother to step off the scale with the baby.

(g) The baby's weight remains displayed.

(h) The adult's weight remains stored. A new child measurement is automatically taken as soon as any weight is placed on the scale again.

(i) You can therefore take measurements of other babies in the same way with the same adult. You do not need to reactivate the **2 in 1** function or switch the scale off and on again between measurements. It is important that this person's weight does not change (e.g. by taking off a garment). If no measurements have been taken for two minutes, the **2 in 1** function and the scale automatically switch off and the process needs to begin again.
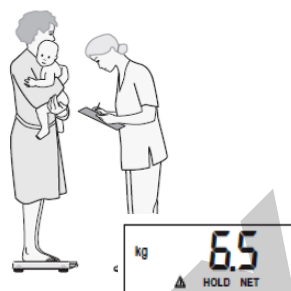
After each child's weight has been taken, the measurer reads out the value on the display of the scale and the assistant repeats back the value. If the measurer confirms this is correct the assistant records the value on the questionnaire in AN3. The measurer should check the weight that has been recorded after the weight measurement of each child has been completed.

**Weighing a child who is 2 years or older**
If the child is 2 years or older <u>and willing to stand still</u>, weigh the child alone.
   **Measurer:** Explain to the child that they will need to step on the scale alone and stand very still. Communicate with the child in a sensitive, non-frightening way.

(a) Switch on the scale with no weight applied.

(b) Wait until the display shows **0.0** before asking the child to step on the scale.

(c) Ask the child to stand in the middle of the scale, feet slightly apart and to remain still until the weight appears on the display. <u>Do not hold or support the child as this will interfere with the measurement.</u>

(d) Once the value is stable for about 3 seconds, the display is retained. This avoids the display jumping around as a result of the child's movements.

(e) <u>If the child jumps on the scale or will not stand still, you will need to use the tared weighing procedure instead</u> (please see above).

(f) Read out loud the child's weight from the display.

   **Assistant**: Repeat the weight that has just been called out.

   **Measurer:** Confirm if this is the correct weight. If it is correct then the assistant will record the weight on the questionnaire.

**Assistant**: If measurer confirms, record weight in AN3.

**Measurer:**  Check the weight recorded in AN3 to confirm that it matches the weight that was on the display.  The child can then leave the scale.

**NOTE:**

Even though the displays of the seca 874 U scales show two decimals, the last decimal is set to always show **0**.  To be consistent with the corresponding question (AN3) in the Questionnaire for Children Under Five, the scales provided by UNICEF have a sticker on the display facing the measurer, allowing the measurer to see only the first decimal of the measurement.  Two decimals are shown on the display facing the child.

## 12.4:  MEASURING A CHILD'S HEIGHT – SUMMARY OF PROCEDURES FOR WHEN A CHILD IS OVER 2 YEARS OF AGE (SEE ILLUSTRATION 1)

*(1)*   **Measurer:**  Place the measuring board on a hard flat surface against a wall, table, staircase, etc.  Make sure the board is stable.  If the only level surface available to place the board does not have a steady structure against where to lean it, and there are no sturdy pieces of furniture that can be moved behind it, **have an adult stand behind the board and provide the support for it not to tip over.**

*(2)*   **Measurer or assistant:** Ask the mother/primary caretaker to remove the child's shoes and socks.  Also ask the mother, if necessary, to un-braid any hair that would interfere with the height measurement and add to the child's height.  Then ask her/him to walk the child to the board and to kneel in front of the child.

*(3)*   **Assistant:**  Place the questionnaire and pen on the ground (Arrow 1).  Kneel with both knees on the child's right side (Arrow 2).

*(4)*   **Measurer:**  Kneel on your right knee only, for maximum mobility, on the child's left side (Arrow 3).

*(5)*   **Assistant:**  Place the child's feet flat and together in the centre of and against the back and base of the board.  Place your right hand just above the child's ankles on the shins (Arrow 4), your left hand on the child's knees (Arrow 5), and push against the board.  Make sure the child's legs are straight and the heels and calves are against the board (Arrows 6 and 7).  Tell the measurer when you have completed positioning the feet and legs.

*(6)*   **Measurer:**  Tell the child to look straight ahead at the mother if she is in front of the child.  Make sure the child's line of sight is level with the ground (Arrow 8).  Place your open left hand on the child's chin.  Gradually close your hand (Arrow 9).  Do not pinch the jaw.  **Do not cover the child's mouth or ears**.  Make sure the shoulders are level (Arrow 10), the hands are at the child's side (Arrow 11), and the head, shoulder blades, and buttocks are against the board
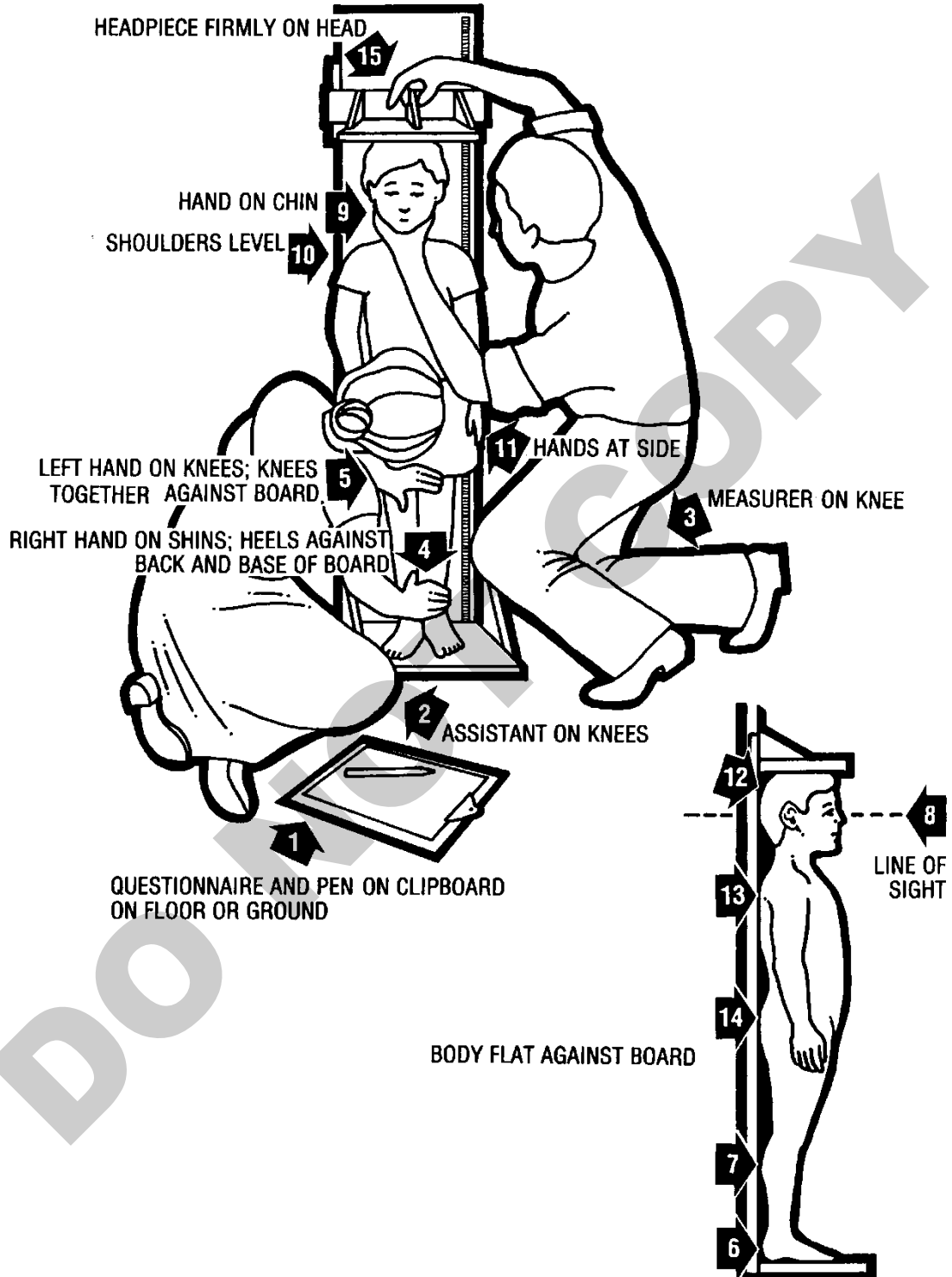
(Arrows 12, 13 and 14).  With your right hand, **<u>slowly and gently</u>** lower the headpiece on top of the child's head.  Make sure you push through the child's hair (Arrow 15).

*(7)*  **Measurer and assistant:** Check the child's position (Arrows 6-14).  Repeat any steps as necessary.

*(8)*  **Measurer:**  When the child's position is correct, read and call out the measurement to the nearest 0.1 centimetre.  <u>Remove the headpiece from the child's head, your left hand from the child's chin and support the child during the recording</u>.

*(9)*  **Assistant:**  Immediately record the measurement in AN4 and show it to the measurer.  Alternatively, the assistant could call out the measurement and have the measurer confirm by repeating back.

*(10)*  **Assistant:**  Record in AN4A whether the child was measured lying down or standing up.

*(11)*  **Measurer:**  Check the recorded measurement on the questionnaire for accuracy and legibility.  Instruct the assistant to cancel and correct any errors.

**<u>NOTE:</u>**

If the interviewer is not confident in the precision of the child's age (over age 2), please take measurement as described above.  If the child's height is measured to less than 85 cm, you must instead measure the child's length.

ILLUSTRATION1: MEASURING A CHILD'S HEIGHT

HEADPIECE FIRMLY ON HEAD **15**

HAND ON CHIN **9**

SHOULDERS LEVEL **10**

LEFT HAND ON KNEES; KNEES TOGETHER AGAINST BOARD **5**

RIGHT HAND ON SHINS; HEELS AGAINST BACK AND BASE OF BOARD **4**

**11** HANDS AT SIDE

**3** MEASURER ON KNEE

**2** ASSISTANT ON KNEES

**1**

QUESTIONNAIRE AND PEN ON CLIPBOARD ON FLOOR OR GROUND

**12**

**8** LINE OF SIGHT

**13**

**14**

BODY FLAT AGAINST BOARD

**7**

**6**

## 12.5: MEASURING A CHILD'S LENGTH: SUMMARY OF PROCEDURES FOR WHEN A CHILD IS UNDER 2 YEARS OF AGE (SEE ILLUSTRATION 2)

*(1)* **Measurer:** Place the measuring board on a <u>hard, flat surface</u>, such as the ground, floor or a steady table.

*(2)* **Assistant:** Place the questionnaire and pen on the ground, floor or table (Arrow 1). Kneel with both knees behind the base of the board, if it is on the ground or floor (Arrow 2).

*(3)* **Measurer:** Kneel on the child's right side so that you can hold the foot-piece with your right hand (Arrow 3).

*(4)* **Measurer and assistant:** With the mother's/primary caretaker's help, lay the child on the board by doing the following:

**Assistant:** Support the back of the child's head with your hands and gradually lower the child onto the board.

**Measurer:** Support the child at the trunk of the body.

*(5)* **Measurer or assistant:** Ask the mother/primary caretaker to kneel on the opposite side of the board facing the measurer to help keep the child calm.

*(6)* **Assistant:** <u>Cup</u> your hands over the child's ears (Arrow 4). With your arms comfortably straight (Arrow 5), place the child's head against the base of the board so that the child is looking straight up. The child's line of sight should be perpendicular to the ground (Arrow 6). Your head should be straight over the child's head. Look directly into the child's eyes.

*(7)* **Measurer:** Make sure the child is lying flat and in the centre of the board (Arrow 7). Place your left hand on the child's shins (above the ankles) or on the knees (Arrow 8). Press them firmly against the board. With your right hand, place the foot-piece firmly against the child's heels (Arrow 9).

*(8)* **Measurer and assistant:** Check the child's position (Arrows 4-9). Repeat any steps as necessary.

*(9)* **Measurer:** When the child's position is correct, read and call out the measurement to the nearest 0.1 centimetre. Remove the foot-piece, release your left hand from the child's shins or knees and support the child during the recording.

*(10)* **Assistant:** Immediately release the child's head, record the measurement in AN4 and show it to the measurer. Alternatively, the assistant could call out the measurement and have the measurer confirm by repeating back.

*(11)* **Assistant:** Record in AN4A whether the child was measured lying down or standing up.

*(12)* **Measurer:** Check the recorded measurement on the questionnaire for accuracy and legibility. Instruct the assistant to cancel and correct any errors.

**NOTE:**

If the interviewer is not confident in the precision of the child's age (under age 2), please take measurement as described above. If the child's length is measured to 85 cm or more, you must instead measure the child's height.

ILLUSTRATION 2: MEASURING A CHILD'S LENGTH
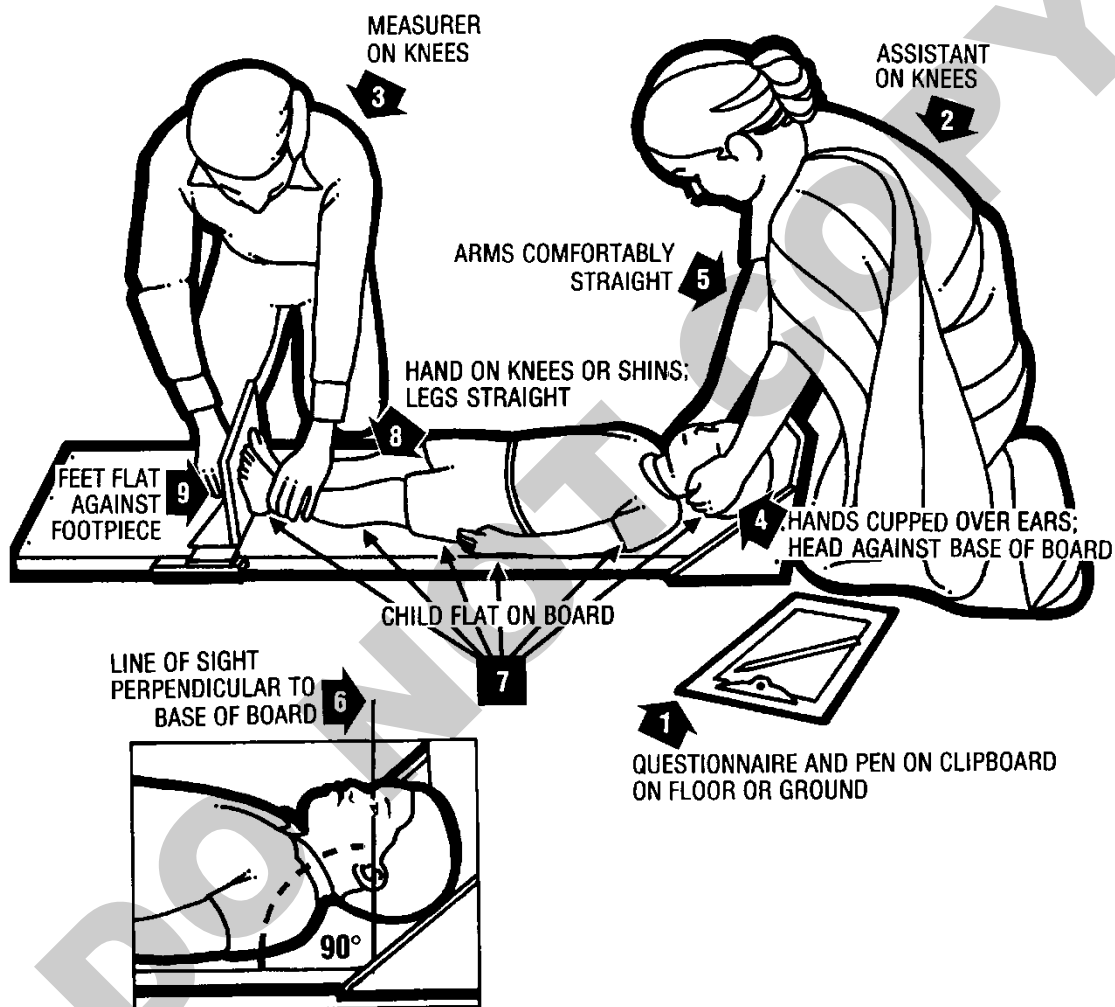
## 12.6: TROUBLESHOOTING THE SCALE

- If no weight is displayed when there is a load on the scale:
  - o Ensure the **ON-OFF** switch is in the "**ON**" position.
  - o Check the batteries.

- If the scale keeps switching on while being transported:
  - o The start key has been activated.
  - o Due to the very low energy requirement of the scale, the service life of the batteries will not be impaired.
  - o For long journeys, push the **ON-OFF** switch to the "**OFF**" position.

- If the scale displays a weight after being transported or after new batteries have been put in:
  - o Wait until the scale switches off automatically after 3 minutes.  The scale will then work normally again.

- If **0.00** does not appear before weighing:
  - o Start the scale again after it switches off automatically – there should not be any load on the scale.

- If **-----** appears instead of **0.00** before weighing:
  - o Start the scale again after it switches off automatically – there should not be any load on the scale.

- If one segment of the display is illuminated constantly or not at all:
  - o The relevant segment has a fault.  Inform the fieldwork coordinator.

- If "**St0P**" appears on the display:
  - o Maximum load has been exceeded.

- If the display flashes:
  - o Take the load off the scale and start the scale again
  - o Wait until **0.00** appears and then weigh again.

- If the display "**Er**" and a number appear:
  - o Start the scale again after it switches off automatically.  The scale will then work normally again.  If this is not the case, inform the fieldwork coordinator.

# 13. THE INTERVIEWERS CLUSTER CONTROL SHEET

One Interviewer's Cluster Control Sheet (ICCS) should be completed for each cluster by the Interviewer, and returned to the field supervisor upon completion of the cluster (see Annex 1 for an example of the Interviewer's Cluster Control Sheet).

Each interviewer will use only one ICCS per cluster.

1. Fill in the Cluster Identification number and region name and code as instructed by the supervisor.  If a cluster number has less than three digits, fill the space(s) with leading zero (es).

2. Fill in the Interviewer's name and number, and the date of visit to the cluster.

3. As soon as the households at which you will conduct interviews have been assigned to you by the supervisor, complete columns 1 and 2.

4. Once the interviews have been completed at each household, copy information about the results of the interview into columns 3 to 9 of the ICCS.  This information will come from the Household Information Panel of the Household Questionnaire.
    a. In column 3, copy the result code from HH9.
    b. In column 4, copy the number of eligible women age 15 to 49 years identified in HH12.
    c. In column 5, copy the number of eligible men age 15 to 49 years identified in HH13A.
    d. In column 6, copy the number of eligible children age 0 to 4 years identified in HH14.
    e. In column 7, copy the number of eligible woman with completed interviews from HH13.
    f. In column 8, copy the number of eligible men with completed interviews from HH13B.
    g. In column 9, copy the number of eligible children with completed interviews from HH15.

5. In columns 10 and 11, record the number of eligible children who have been measured for height and weight in columns 10 and 11 respectively.
    a. If no eligible children were in the household, record a dash ('−') to indicate that no measurements were necessary.

6. Column 12 is available for making any important notes about each particular household.  If additional space is required, continue on the back of the page, ensuring that you indicate the household number.

7. In the 'Total' row, record the sum of each of the columns numbered 4 to 11.

## ANNEX I: INTERVIEWER'S CLUSTER CONTROL SHEET

**BELIZE MICS5 INTERVIEWER'S CLUSTER CONTROL SHEET**

Cluster No.: ___ ___ ___     Region Name: _____     Region Code: ___

Interviewer's name and number: _____ ___ ___     Day / Month / Year of cluster visit: ___ ___ / ___ ___ /2015

| HH No. | Name of head of household | Final result | Number of eligible | | | Interviews Completed | | | Anthropometry | | Notes (*Continue on back if required. Write HH No. clearly next to note*) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | W | M | U5 | W | M | U5 | Height measured | Weight measured | |
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 |
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| **Total:** | | | | | | | | | | | |

## ANNEX II: ILLUSTRATIONS OF WATER SOURCES AND TOILET FACILITIES[2]
## A: WATER SOURCES

11. Piped into dwelling
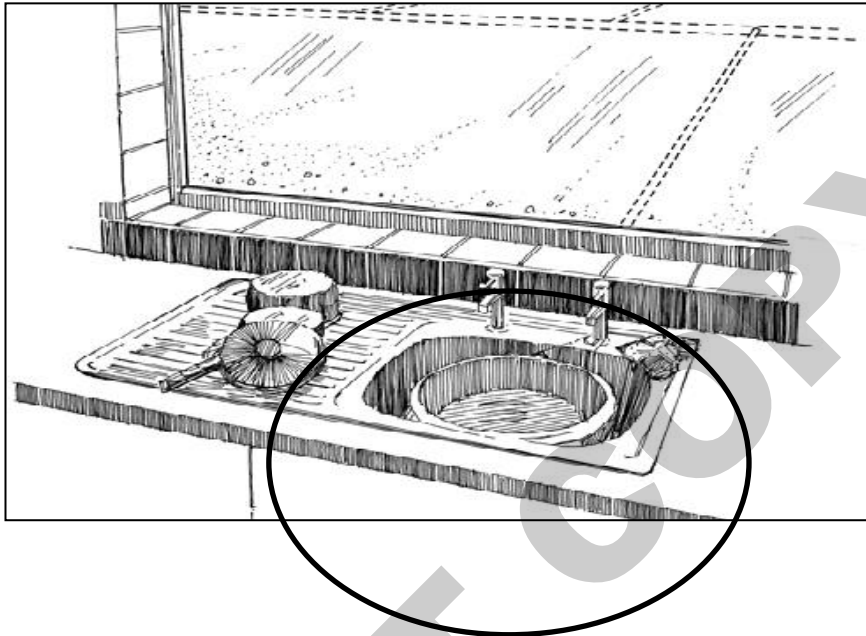


12. Piped into compound, yard or plot



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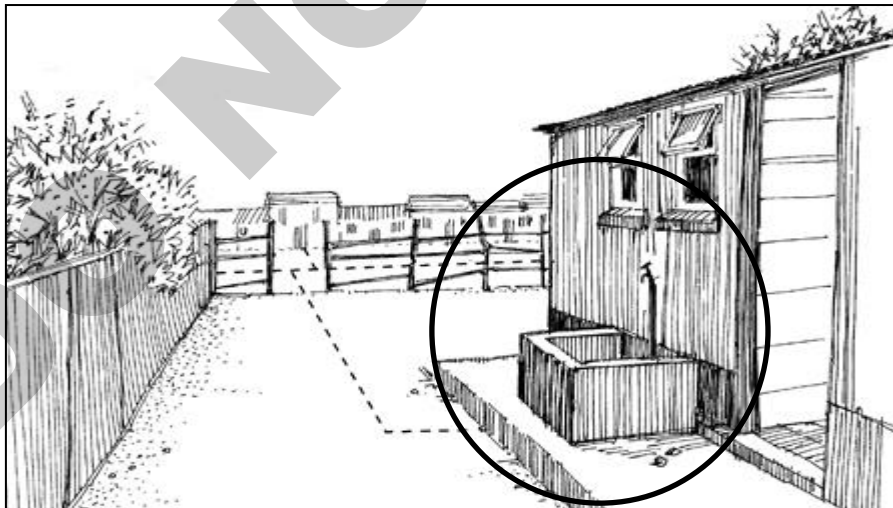
2 This section includes images from Rod Shaw's Preparation of pictorial illustrations in access to water supply and sanitation facilities for use in national household surveys, available at www-staff.lboro.ac.uk/cvrjs2/JMP-Final-Report.htm.

## 13. Piped from neighbour
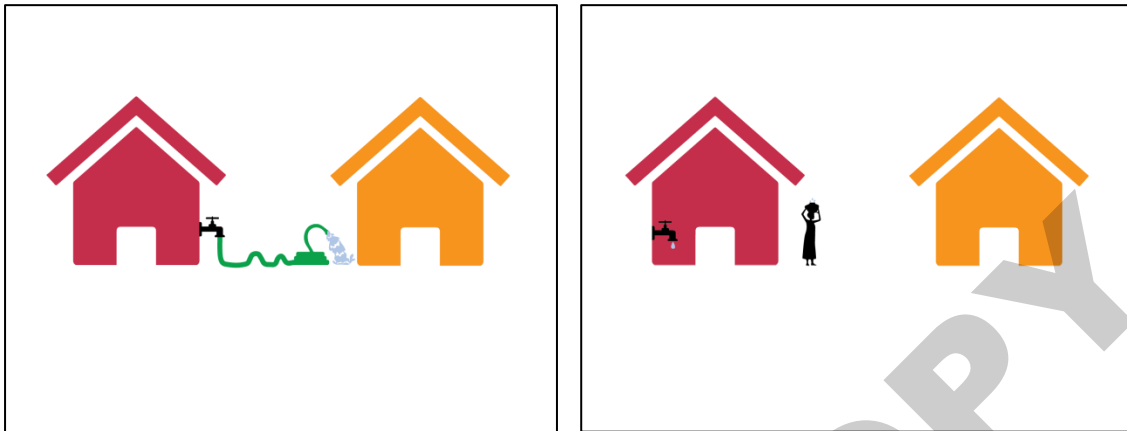


## 14. Public pipe/standpipe
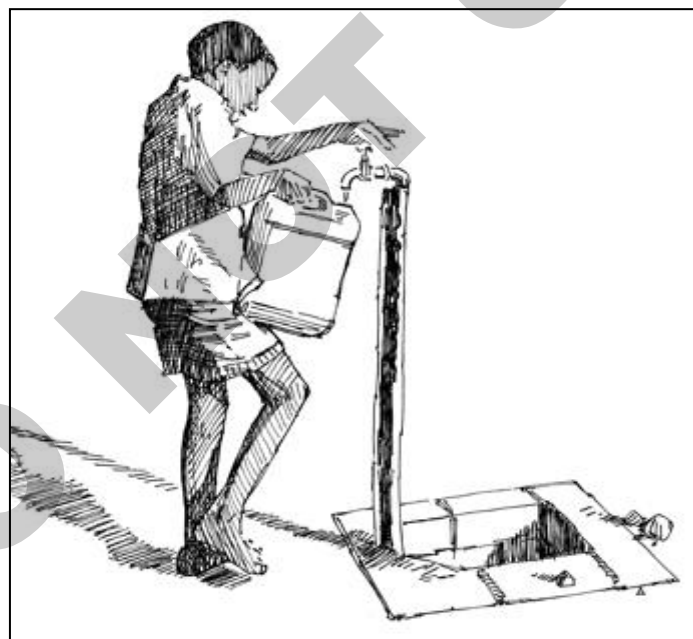
### 21. Tube well, Borehole, Hand-pump



### 31. Protected dug well
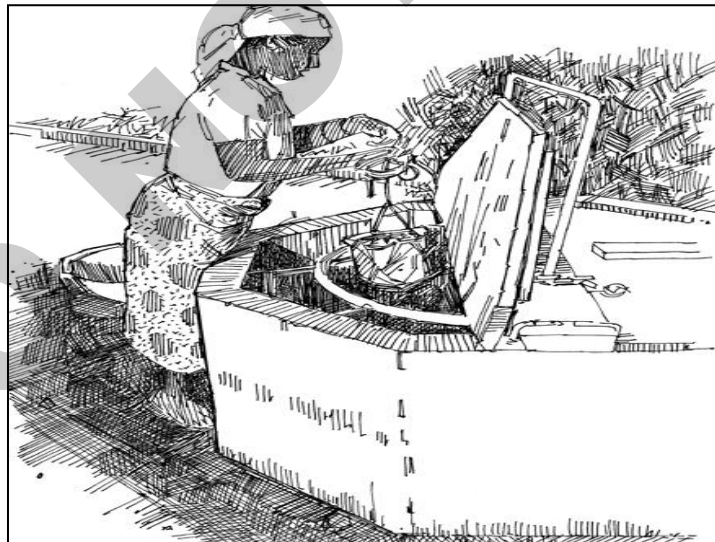
## 32. Unprotected dug well



## 41. Protected spring
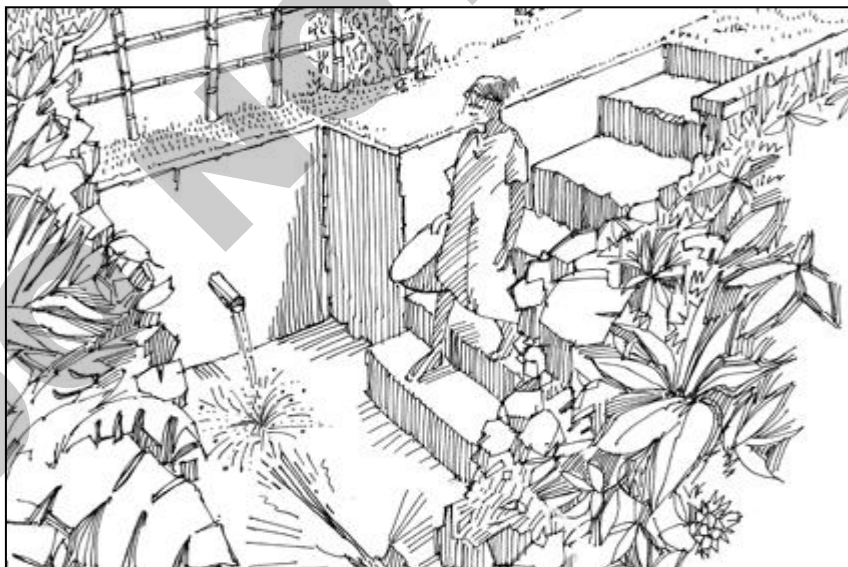
## 42. Unprotected Spring



## 51. Rainwater Collection
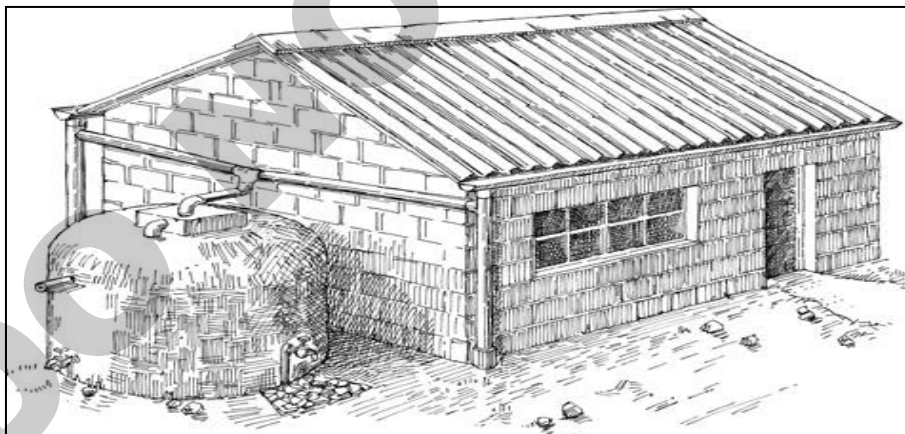
## 61. Tanker truck
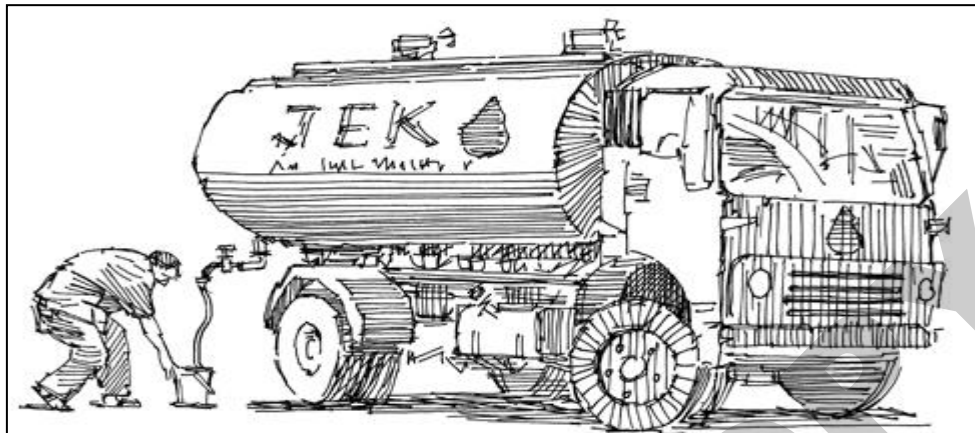


## 71. Cart with small tank/drum



## 81. Surface water (river, stream, etc.)

91. Bottled water

## B: TOILET FACILITIES

<u>11. Flush to piped sewer system</u>
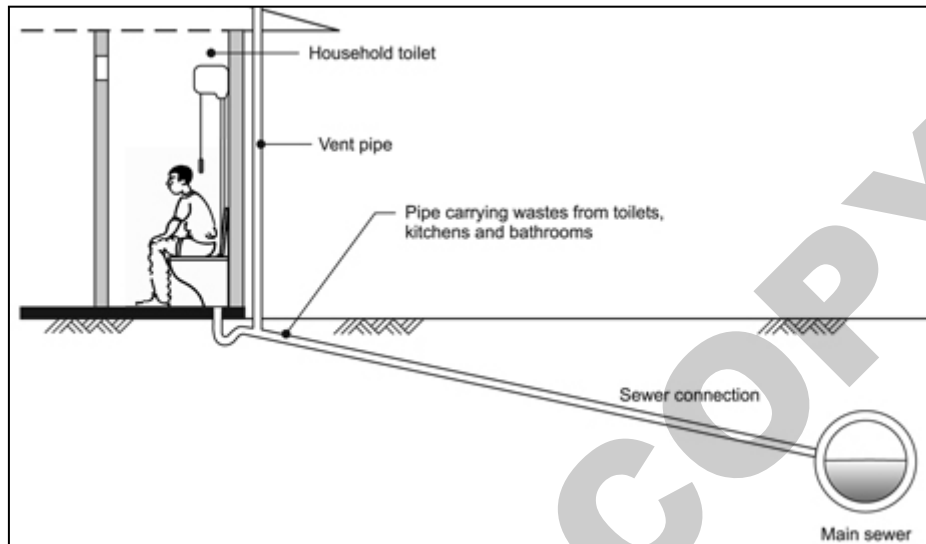


<u>12. Flush to septic tank</u>
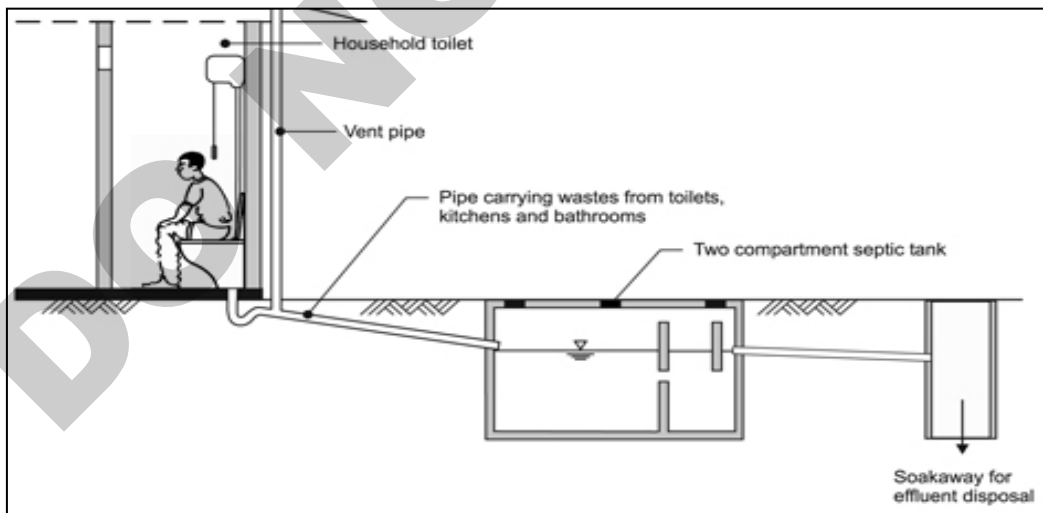
13. Flush to pit



21. Ventilated Improved Pit Latrine (slap and covered vent pipe)
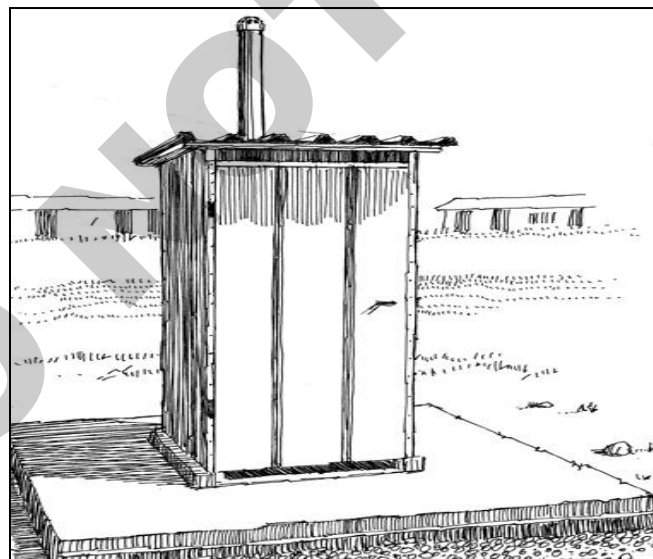
## 22. Pit latrine with slab (no vent pipe)
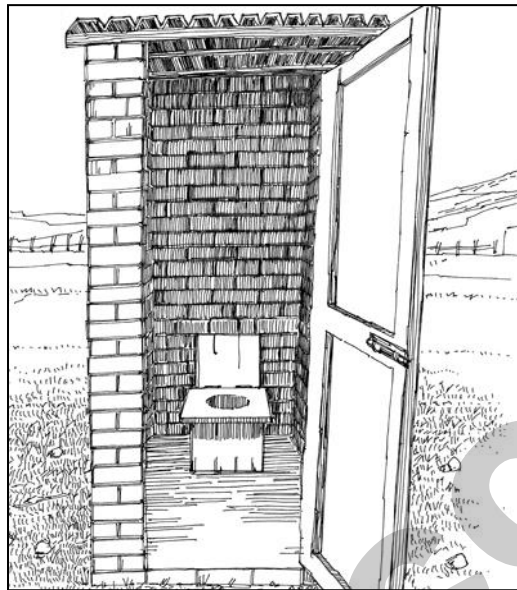


## 23. Pit latrine without slab

### 31. Composting toilet



### 41. Bucket

![MICS]
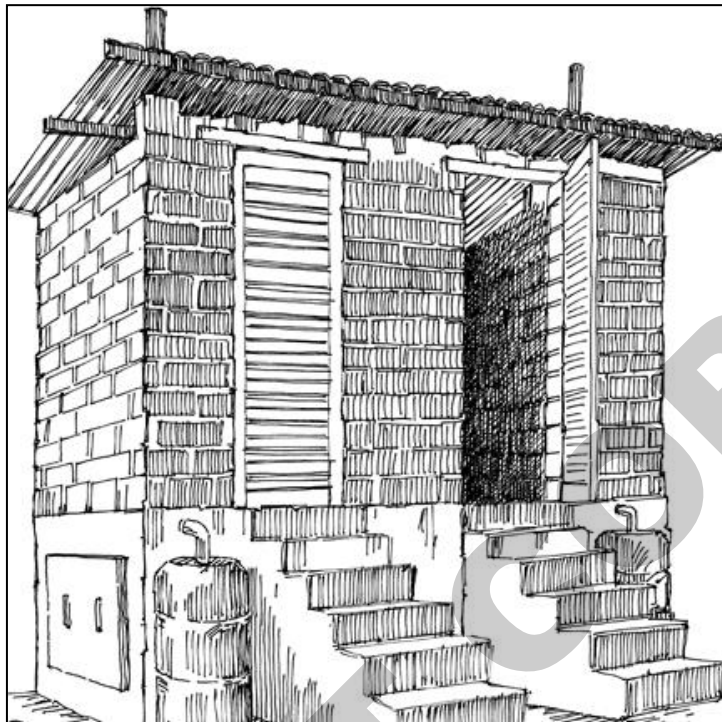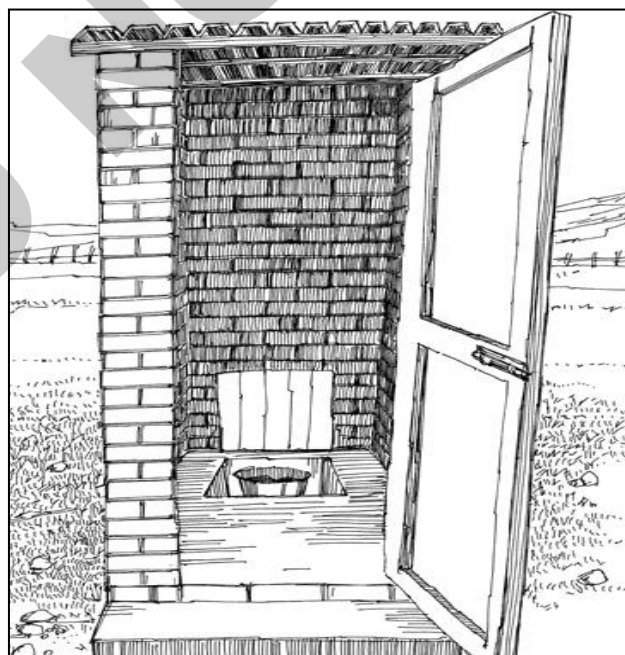
51. Hanging toilet
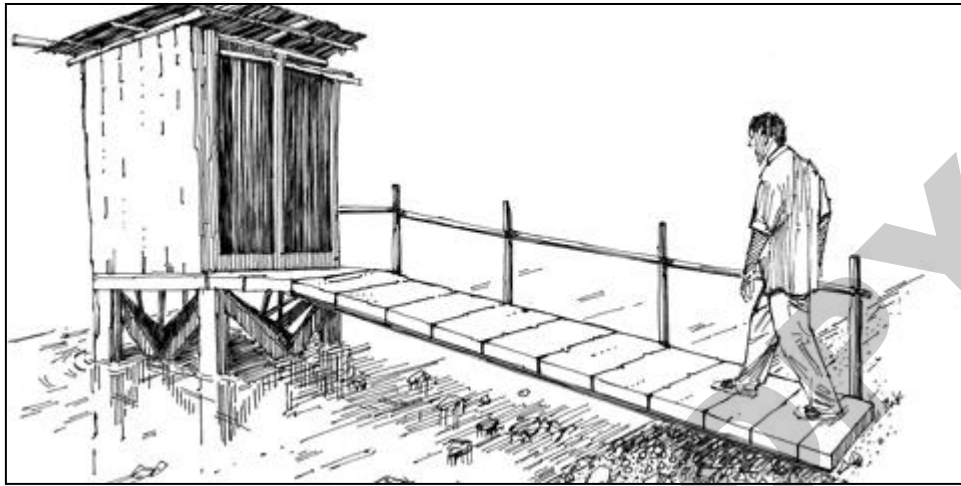
# ANNEX III: READING LITERACY SENTENCES

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.

# ANNEX IV: LIFE SATISFACTION MODULE RESPONSE CARD

**SIDE 1**

| Very happy | Somewhat happy | Neither happy, nor unhappy | Somewhat unhappy | Very unhappy |

**SIDE 2**

| Very satisfied | Somewhat satisfied | Neither satisfied, nor unsatisfied | Somewhat unsatisfied | Very unsatisfied |

# ANNEX V: ANTHROPOMETRY – MEASUREMENT RANGES

**Expected Length and Weight of Children by Sex and Age in Months**

In editing the recorded length and weight of children to ensure that no data entry errors are made, the following values are used as the minimum and maximum expected values. The ranges are dependent on the sex and age of the child and are given in centimetres for the length (height) of the child and kilograms for the weight of the child.

| Age in Months | Length/height (cm) | | | | Weight (kg) | | | |
|---|---|---|---|---|---|---|---|---|
| | Males | | Females | | Males | | Females | |
| | Min | Max | Min | Max | Min | Max | Min | Max |
| 0–2 | 36.0 | 74.0 | 36.0 | 72.0 | 0.5 | 10.0 | 0.5 | 9.0 |
| 3–5 | 45.0 | 83.0 | 44.0 | 80.0 | 1.0 | 13.0 | 1.0 | 12.0 |
| 6–8 | 51.0 | 87.0 | 50.0 | 86.0 | 2.0 | 15.0 | 2.0 | 14.0 |
| 9–11 | 56.0 | 91.0 | 54.0 | 90.0 | 3.0 | 16.5 | 2.5 | 15.5 |
| 12–14 | 59.0 | 96.0 | 57.0 | 95.0 | 4.0 | 17.5 | 3.0 | 16.5 |
| 15–17 | 62.0 | 100.0 | 60.0 | 99.0 | 4.0 | 18.5 | 3.5 | 17.5 |
| 18–20 | 64.0 | 104.0 | 62.0 | 102.0 | 4.0 | 19.5 | 3.5 | 18.5 |
| 21–23 | 65.0 | 107.0 | 64.0 | 106.0 | 4.5 | 20.5 | 4.0 | 19.5 |
| 24–26 | 67.0 | 108.0 | 66.0 | 107.0 | 4.5 | 23.0 | 4.5 | 21.5 |
| 27–29 | 68.0 | 112.0 | 68.0 | 111.0 | 5.0 | 24.0 | 5.0 | 23.0 |
| 30–32 | 70.0 | 115.0 | 69.0 | 114.0 | 5.0 | 24.5 | 5.0 | 24.5 |
| 33–35 | 71.0 | 118.0 | 71.0 | 117.0 | 5.0 | 25.5 | 5.0 | 25.5 |
| 36–38 | 73.0 | 121.0 | 72.0 | 120.0 | 5.0 | 26.0 | 5.0 | 27.0 |
| 39–41 | 74.0 | 124.0 | 74.0 | 122.0 | 5.0 | 27.0 | 5.0 | 28.0 |
| 42–44 | 75.0 | 127.0 | 75.0 | 124.0 | 5.0 | 28.0 | 5.5 | 29.0 |
| 45–47 | 77.0 | 129.9 | 77.0 | 126.0 | 5.0 | 29.0 | 5.5 | 30.0 |
| 48–50 | 78.0 | 132.0 | 78.0 | 129.0 | 5.0 | 30.0 | 5.5 | 31.0 |
| 51–53 | 79.0 | 134.0 | 79.0 | 131.0 | 5.0 | 31.0 | 5.5 | 32.0 |
| 54–56 | 80.0 | 136.0 | 81.0 | 133.0 | 5.5 | 32.0 | 6.0 | 33.0 |
| 57–59 | 82.0 | 139.0 | 81.0 | 136.0 | 5.5 | 33.0 | 6.0 | 34.5 |