

NATIONAL INSTITUTE OF POPULATION STUDIES
PAKISTAN DEMOGRAPHIC AND HEALTH SURVEY 2006

LONG HOUSEHOLD QUESTIONNAIRE

IDENTIFICATION				
PROVINCE (PUNJAB=1; SINDH=2; NWFP=3; BALOCHISTAN=4; FATA=5) _____				
DISTRICT _____				
TEHSIL _____				
CLUSTER NUMBER				
HOUSEHOLD NUMBER				
IS HOUSEHOLD SELECTED FOR ? (SHORT=1; WOMAN=2; VERBAL AUTOPSY=3; WOMAN AND VERBAL AUTOPSY= 4)				
NAME OF HOUSEHOLD HEAD _____				
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY MONTH YEAR 2 0 0
INTERVIEWER'S NAME	_____	_____	_____	INT. NUMBER
RESULT*	_____	_____	_____	RESULT
NEXT VISIT: DATE TIME	_____ _____	_____ _____		TOTAL NUMBER OF VISITS
*RESULT CODES: 1 COMPLETED 2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 4 POSTPONED 5 REFUSED 6 DWELLING VACANT OR ADDRESS NOT A DWELLING 7 DWELLING DESTROYED 8 DWELLING NOT FOUND 9 OTHER _____ (SPECIFY)				TOTAL PERSONS IN HOUSEHOLD TOTAL ELIGIBLE WOMEN DEATHS UNDER 5 /SBs FROM Q. 38 FEMALE DEATHS AGE 12-49 FROM Q. 39
LANGUAGE OF QUESTIONNAIRE: URDU				LINE NO. OF RESPONDENT
SUPERVISOR NAME _____ DATE _____		FIELD EDITOR NAME _____ DATE _____		OFFICE EDITOR _____ _____ _____
				KEYED BY _____ _____
Signature of interviewer: _____ Date: _____ RESPONDENT AGREES TO BE INTERVIEWED 1 RESPONDENT DOES NOT AGREE TO BE INTERVIEWED 2 → END				

HOUSEHOLD SCHEDULE

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

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX		RESIDENCE		AGE	IF AGE 12 OR OLDER
			Is (NAME) male or female?	Does (NAME) usually live here?	Did (NAME) stay here last night?	How old is (NAME)?	MARITAL STATUS	
	<p>Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household.</p> <p>AFTER LISTING NAMES, RELATIONSHIP AND SEX FOR EACH PERSON, ASK Qs. 2A-2C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK QUESTIONS IN COLUMNS 5-17 FOR EACH PERSON.</p>	<p>What is the relationship of (NAME) to the head of the household?</p> <p>(SEE CODES BELOW)</p>					<p>IF LESS THAN 1 YEAR, WRITE '00'.</p> <p>IF AGE 96 YEARS OR MORE, WRITE '96'.</p>	<p>What is (NAME'S) current marital status?</p> <p>(SEE CODES BELOW)</p>
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	
01		<input type="text"/>	M F 1 2	YES NO 1 2	YES NO 1 2	IN YEARS <input type="text"/>	M W D/S N 1 2 3 4	
02		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
03		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
04		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
05		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
06		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
07		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
08		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
09		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	
10		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4	

CODES FOR Q. 3
 RELATIONSHIP TO HEAD OF HOUSEHOLD:
 01 = HEAD
 02 = WIFE OR HUSBAND
 03 = SON OR DAUGHTER
 04 = SON-IN-LAW OR DAUGHTER-IN-LAW
 05 = GRANDCHILD
 06 = PARENT
 07 = PARENT-IN-LAW
 08 = BROTHER OR SISTER

09 = BROTHER/SISTER IN LAW
 10 = NIECE/NEPHEW
 11 = GRAND PARENTS
 12 = AUNTS/UNCLE
 13 = OTHER RELATIVE
 14 = ADOPTED/FOSTER/STEPCHILD
 15 = NOT RELATED
 16 = DOMESTIC SERVANT
 98 = DON'T KNOW

CODES FOR Q. 8
 MARITAL STATUS
 1 = MARRIED
 2 = WIDOWED
 3 = DIVORCED/SEPARATED
 4 = NEVER MARRIED

ELIGIBILITY	IF AGE 5 YEARS OR OLDER		IF AGE 5-24 YEARS			IF AGE 0-17 YEARS SURVIVORSHIP OF BIOLOGICAL PARENTS			FOR ALL AGES REGISTRATION WITH NADRA
	EDUCATION		CURRENT SCHOOLING		SCHOOLING DURING LAST YEAR				
CIRCLE LINE NUMBER OF ALL WOMEN AGE 12-49 WHO ARE MARRIED, WIDOWED OR DIVORCED OR SEPARATED	Has (NAME) ever attended school?	What is the highest class of school (NAME) completed?	Did (NAME) attend school at any time during the 2006 year?	During this school year, what class/grade [is/was] NAME attending?	Did (NAME) attend school at any time during the previous year 2005?	Is (NAME)'s natural mother alive?	Is (NAME)'s natural father alive?	Has (NAME) been registered with NADRA?	
		(SEE CODES BELOW)		(SEE CODES BELOW)				IF YES - PROBE: Does (NAME) have NIC card or name entered onto a 'bay' form, or nothing at all? (SEE CODES BELOW)	
(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	
	YES NO	CLASS	YES NO	CLASS	YES NO	Y N DK	Y N DK	NIC BF NONE DK	
01	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
02	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
03	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
04	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
05	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
06	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
07	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
08	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
09	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
10	1 2 ↓ GO TO 15	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	

CODES FOR Q. 11 AND 13
EDUCATION CLASS:
00 = LESS THAN 1 YEAR COMPLETED
01 = CLASS 1;
02 = CLASS 2
...
10 = MATRIC, CLASS 10
11 = CLASS 11
...
16 = MASTER'S DEGREE OR MBBS, PhD, MPHIL, BSc (4 YEARS);
98 = DON'T KNOW

CODES FOR Q. 17
(1) HAS NIC
(2) NAME ON 'BAY' FORM
(3) NEITHER OF THE ABOVE
(8) DOES NOT KNOW

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	IF AGE 12 OR OLDER
				Does (NAME) usually live here?	Did (NAME) stay here last night?		MARITAL STATUS
	<p>Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household.</p> <p>AFTER LISTING NAMES, RELATIONSHIP AND SEX FOR EACH PERSON, ASK Qs. 2A-2C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK QUESTIONS IN COLUMNS 5-17 FOR EACH PERSON.</p>	<p>What is the relationship of (NAME) to the head of the household?</p> <p>(SEE CODES BELOW)</p>	<p>Is (NAME) male or female?</p>			<p>How old is (NAME)?</p> <p>IF LESS THAN 1 YEAR, WRITE '00'.</p> <p>IF AGE 96 YEARS OR MORE, WRITE '96'.</p>	<p>What is (NAME'S) current marital status?</p> <p>(SEE CODES BELOW)</p>
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
			M F	YES NO	YES NO	IN YEARS	M W D/S N
11		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
12		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
13		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
14		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
15		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
16		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
17		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
18		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
19		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
20		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	1 2 3 4
TICK HERE IF CONTINUATION SHEET USED			<input type="checkbox"/>				
<p>Just to make sure that I have a complete household listing:</p> <p>2A) Are there any other persons such as small children or infants that we have not listed? YES <input type="checkbox"/> → ADD TO TABLE NO <input type="checkbox"/></p> <p>2B) Are there any other people who may not be members of your family such as domestic servants, lodgers or friends who usually live here? YES <input type="checkbox"/> → ADD TO TABLE NO <input type="checkbox"/></p> <p>2C) Are there any guests or temporary visitors staying here, or anyone else who slept here last night, who have not been listed? YES <input type="checkbox"/> → ADD TO TABLE NO <input type="checkbox"/></p> <p>IF NO MORE MEMBERS, GO TO COLUMN 5.</p>							

ELIGIBILITY	IF AGE 5 YEARS OR OLDER		IF AGE 5-24 YEARS			IF AGE 0-17 YEARS SURVIVORSHIP OF BIOLOGICAL PARENTS			FOR ALL AGES REGISTRATION WITH NADRA
	EDUCATION		CURRENT SCHOOLING		SCHOOLING DURING LAST YEAR				
CIRCLE LINE NUMBER OF ALL WOMEN AGE 12-49 WHO ARE MARRIED, WIDOWED OR DIVORCED OR SEPARATED	Has (NAME) ever attended school?	What is the highest class of school (NAME) completed? (SEE CODES BELOW)	Did (NAME) attend school at any time during the 2006 year?	During this school year, what class/grade [is/was] NAME attending? (SEE CODES BELOW)	Did (NAME) attend school at any time during the previous year 2005?	Is (NAME)'s natural mother alive?	Is (NAME)'s natural father alive?	Has (NAME) been registered with NADRA? IF YES - PROBE: Does (NAME) have NIC card or name entered onto a 'bay' form, or nothing at all? (SEE CODES BELOW)	
(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	
	YES NO	CLASS	YES NO	CLASS	YES NO	Y N DK	Y N DK	NIC BF NONE DK	
11	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
12	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
13	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
14	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
15	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
16	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
17	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
18	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
19	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	
20	1 2 ↓ NEXT	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 14	<input type="text"/> <input type="text"/>	1 2	1 2 8	1 2 8	1 2 3 8	

CODES FOR Q. 11 AND 13
EDUCATION CLASS:

- 00 = LESS THAN 1 YEAR COMPLETED
- 01 = CLASS 1;
- 02 = CLASS 2
- ...
- 10 = MATRIC, CLASS 10
- 11 = CLASS 11
-
- 16 = MASTER'S DEGREE OR MBBS, PhD, MPHIL, BSc (4 YEARS)
- 98 = DON'T KNOW

CODES FOR Q. 17

- (1) HAS NIC
- (2) NAME ON 'BAY' FORM
- (3) NEITHER OF THE ABOVE
- (8) DOES NOT KNOW

INFORMATION ABOUT BIRTHS AND DEATHS IN THE HOUSEHOLD IN THE PREVIOUS 3 YEARS

18 Now I would like to ask you about all the births that occurred in this household in the last 3 years, whether they were born alive or dead. Since January 2003, did any woman who was a usual resident of this household at that time give birth? I am interested in any birth, even stillbirths and children who did not survive.

YES . . . 1
NO . . . 2 → 27

19 How many births occurred in this household in the last 3 years?

NO.	What are the names of the babies born in the last 3 years? IF STILL BORN, WRITE 'BABY'.	Is (NAME) a boy or a girl?	In what month and year was (NAME) born? IF MONTH DON'T KNOW RECORD '98'	Was (NAME) born alive?	Is (NAME) still alive?	LINE NUMBER FROM HOUSEHOLD ROSTER (RECORD '00' IF CHILD NOT LISTED IN HH ROSTER)						
20	21	22	23	24	25	26						
01	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
02	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
03	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
04	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
05	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
06	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
07	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										
08	_____	BOY . 1 GIRL . 2	MONTH YR <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;">2</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;">0</td><td style="width: 20px; height: 20px;"></td></tr></table>	2	0	0		YES 1 NO 2 NEXT ←	YES 1 NO 2 NEXT ←	<table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table> NEXT ←		
2	0	0										

CONTINUED (Additional Sheet)

27 Now I would like to ask you about any deaths that occurred in this household in the last 3 years.
 Since January 2003, God forbid, has any usual member of this household died? YES . 1
 NO . 2 → 38

28 How many deaths occurred to usual residents in this household in the last 3 years?

NO.	What were the names of the people who died in the last 3 years?	Was (NAME) male or female?	In what month and year did (NAME) die? IF MONTH DON'T KNOW RECORD '98'	How old was (NAME) when he/she died? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN 2 YEARS; OR YEARS.	CHECK 31 AND 33: WAS THIS A WOMAN AGE 12-49 WHEN SHE DIED?	Female, 12-49 years old		
						Was (NAME) pregnant when she died?	Did (NAME) die during childbirth?	Did (NAME) die within 6 weeks after delivery?
29	30	31	32	33	34	35	36	37
01	_____	MALE 1 FEMALE 2	MONTH YR 2 0 0	DAYS . 1 MONTH. 2 YEARS . 3	YES . 1 NO . 2 NEXT ↙	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2 NEXT ↙
02	_____	MALE 1 FEMALE 2	MONTH YR 2 0 0	DAYS . 1 MONTH. 2 YEARS . 3	YES . 1 NO . 2 NEXT ↙	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2 NEXT ↙
03	_____	MALE 1 FEMALE 2	MONTH YR 2 0 0	DAYS . 1 MONTH. 2 YEARS . 3	YES . 1 NO . 2 NEXT ↙	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2 NEXT ↙
04	_____	MALE 1 FEMALE 2	MONTH YR 2 0 0	DAYS . 1 MONTH. 2 YEARS . 3	YES . 1 NO . 2 NEXT ↙	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2	YES . 1 NEXT ↙ NO . 2 NEXT ↙

38. CHECK COLS. 32, 33 AND 24/23: NUMBER OF DEATHS TO CHILDREN UNDER 5 YEARS AND STILLBIRTHS IN 2005 OR AFTER

39. CHECK COLUMN 34 AND 32: NUMBER OF DEATHS TO WOMEN AGE 12-49 YEARS OLD IN 2003 OR AFTER

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	What is the main source of drinking water for members of your household?	PIPED WATER PIPED INTO DWELLING 11 PIPED TO YARD/PLOT 12 PUBLIC TAP/STAND PIPE ... 13 TUBE WELL OR BOREHOLE 21 HAND PUMP 22 DUG WELL PROTECTED WELL 31 UNPROTECTED WELL 32 WATER FROM SPRING PROTECTED SPRING/KAREZ ... 41 UNPROTECTED SPRING 42 RAINWATER 51 TANKER TRUCK 61 CART WITH SMALL TANK 71 SURFACE WATER (RIVER/DAM/LAKE/ POND/STREAM/CANAL 81 BOTTLED WATER 91 OTHER _____ 96 (SPECIFY)	→ 103
102	How long does it take to go there, get water, and come back?	MINUTES <input type="text"/> <input type="text"/> <input type="text"/> ON PREMISES 996 DON'T KNOW 998	
103	Do you treat your water in any way to make it safer to drink?	YES 1 NO 2 DON'T KNOW 8	→ 105
104	What do you usually do to the water to make it safer to drink? Anything else? RECORD ALL MENTIONED.	BOIL A ADD BLEACH/CHLORINE B STRAIN THROUGH A CLOTH C USE WATER FILTER (CERAMIC/ SAND/COMPOSITE/ETC.) D SOLAR DISINFECTION E LET IT STAND AND SETTLE F OTHER _____ X (SPECIFY) DON'T KNOW Z	
105	What kind of toilet facility do members of your household usually use?	FLUSH OR POUR FLUSH TOILET FLUSH TO SEWER SYSTEM ... 11 FLUSH TO SEPTIC TANK 12 FLUSH TO SOMEWHERE ELSE ... 13 FLUSH, DON'T KNOW WHERE ... 14 PIT LATRINE VENTILATED IMPROVED PIT LATRINE (VIP) 21 PIT LATRINE WITH SLAB 22 PIT LATRINE WITHOUT SLAB/ OPEN PIT 23 BUCKET TOILET 41 HANGING TOILET/HANGING LATRINE 51 NO FACILITY/BUSH/FIELD 61 OTHER _____ 96 (SPECIFY)	→ 107

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																																																			
106	Do you share this toilet facility with other households?	YES 1 NO 2																																																				
107	Does your household have: Electricity? Radio? Television? Refrigerator? Mobile telephone or land line telephone? Room cooler, air conditioner? Washing machine? Water pump? Bed? Chairs? Almira / cabinet? Clock? Sofa? Sewing machine? Camera? Personal computer?	<table border="0"> <thead> <tr> <th></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>ELECTRICITY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>RADIO</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>TELEVISION</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>REFRIGERATOR</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>ANY TELEPHONE</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>ROOM COOLER, AIR COND. . .</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>WASHING MACHINE</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>WATER PUMP</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>BED</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>CHAIRS</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>ALMIRAH/CABINET</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>CLOCK</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>SOFA</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>SEWING MACHINE</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>CAMERA</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>PERSONAL COMPUTER ...</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>		YES	NO	ELECTRICITY	1	2	RADIO	1	2	TELEVISION	1	2	REFRIGERATOR	1	2	ANY TELEPHONE	1	2	ROOM COOLER, AIR COND. . .	1	2	WASHING MACHINE	1	2	WATER PUMP	1	2	BED	1	2	CHAIRS	1	2	ALMIRAH/CABINET	1	2	CLOCK	1	2	SOFA	1	2	SEWING MACHINE	1	2	CAMERA	1	2	PERSONAL COMPUTER ...	1	2	
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108	What type of fuel does your household mainly use for cooking?	ELECTRICITY 01 CYLINDER GAS 02 NATURAL GAS 03 BIOGAS 04 KEROSENE 05 CHARCOAL 06 WOOD 07 STRAW/SHRUBS/GRASS 08 AGRICULTURAL CROP 09 ANIMAL DUNG 10 NO FOOD COOKED IN HOUSEHOLD 95 OTHER _____ 96 (SPECIFY)																																																				
109	MAIN MATERIAL OF THE FLOOR: RECORD OBSERVATION	NATURAL FLOOR EARTH / SAND / MUD 11 FINISHED FLOOR CHIPS / TERRAZZO 31 CERAMIC TILES 32 MARBLE 33 CEMENT 34 CARPET 35 BRICKS 36 MATS 37 OTHER _____ 96 (SPECIFY)																																																				

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
110	<p>MAIN MATERIAL OF THE ROOF:</p> <p>RECORD OBSERVATION</p>	<p>NATURAL ROOFING THATCH / BAMBOO / WOOD / MUD 12</p> <p>RUDIMENTARY ROOFING CARDBOARD / PLASTIC 21</p> <p>FINISHED ROOFING IRON SHEETS / ASBESTOS 31 T-IRON / WOOD / BRICK 32 REINFORCED BRICK CEMENT/RCC 33</p> <p>OTHER _____ 96 (SPECIFY)</p>	
111	<p>MAIN MATERIAL OF THE WALLS:</p> <p>RECORD OBSERVATION</p>	<p>NATURAL WALLS MUD / STONES 11 BAMBOO / STICKS / MUD 12</p> <p>RUDIMENTARY WALLS UNBAKED BRICKS / MUD 21 PLYWOOD SHEETS 22 CARTON / PLASTIC 23</p> <p>FINISHED WALLS STONE BLOCKS 31 BAKED BRICKS 32 CEMENT BLOCKS/ CEMENT ... 33 TENT 34</p> <p>OTHER _____ 96 (SPECIFY)</p>	
112	How many rooms in this household are used for sleeping?	ROOMS <input type="text"/> <input type="text"/>	
113	Is this house rented, rent-free, mortgaged, or owned by a member of the household?	<p>RENTED 1</p> <p>RENT-FREE 2</p> <p>MORTGAGED 3</p> <p>OWNED 4</p> <p>OTHER 6</p>	
114	Does any member of this household own:	<p style="text-align: right;">YES NO</p> <p>A watch? WATCH 1 2</p> <p>A bicycle? BICYCLE 1 2</p> <p>A motorcycle or motor scooter? MOTORCYCLE/SCOOTER ... 1 2</p> <p>An animal-drawn cart? ANIMAL-DRAWN CART 1 2</p> <p>A car or truck or Tractor? CAR/TRUCK 1 2</p> <p>A boat with a motor? BOAT WITH MOTOR 1 2</p>	
115	Does any member of this household own any land that can be used for agriculture?	<p>YES 1</p> <p>NO 2</p>	
116	Does this household own any livestock, herds, other farm animals, or poultry?	<p>YES 1</p> <p>NO 2</p>	→ 118

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP														
117	<p>How many of the following animals does this household own?</p> <p>Buffalo</p> <p>Milk cows or bulls?</p> <p>Camels?</p> <p>Donkeys, or mules or horses?</p> <p>Goats?</p> <p>Sheep?</p> <p>Chickens?</p> <p>IF NONE, WRITE '00'. IF > 95, WRITE '95'. IF UNKNOWN, WRITE '98'</p>	<p>BUFFALO</p> <p>COWS/BULLS</p> <p>CAMELS</p> <p>DONKEYS/MULES/HORSES .</p> <p>GOATS</p> <p>SHEEP</p> <p>CHICKENS</p> <table border="1" data-bbox="1230 285 1321 617"> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> <tr><td></td><td></td></tr> </table>															
118	<p>Does your household have any mosquito nets that can be used while sleeping?</p>	<p>YES 1</p> <p>NO 2</p>	→ 126														
119	<p>How many mosquito nets does your household have?</p>	<p>NUMBER OF NETS <input type="text"/></p>															

ASK THESE QUESTIONS FOR TWO BEDNETS ONLY		NET #1	NET #2
120	When you got the net, was it already treated with an insecticide to kill or repel mosquitos?	YES 1 SKIP to 123 ← NO 2 NOT SURE 8	YES 1 (SKIP TO 123) ← NO 2 NOT SURE 8
121	Since you got the mosquito net, was it ever soaked or dipped in a liquid to kill or repel mosquitos?	YES 1 NO 2 (SKIP TO 123) ← NOT SURE 8	YES 1 NO 2 (SKIP TO 123) ← NOT SURE 8
122	How many months ago was the net last soaked or dipped? IF LESS THAN ONE MONTH, RECORD '00'.	MONTH AGO <input type="text"/> 25 OR MORE MONTHS AGO ... 95 NOT SURE 98	MONTH AGO <input type="text"/> 25 OR MORE MONTHS AGO ... 95 NOT SURE 98
123	Did anyone sleep under this mosquito net last night?	YES 1 NO 2 (SKIP TO 125) ← NOT SURE 8	YES 1 NO 2 (SKIP TO 125) ← NOT SURE 8
124	Who slept under this mosquito net last night? RECORD THE PERSON'S LINE NUMBER FROM THE HOUSEHOLD SCHEDULE.	NAME _____ LINE NO. <input type="text"/> NAME _____ LINE NO. <input type="text"/> NAME _____ LINE NO. <input type="text"/>	NAME _____ LINE NO. <input type="text"/> NAME _____ LINE NO. <input type="text"/> NAME _____ LINE NO. <input type="text"/>
125		GO BACK TO 120 FOR NEXT NET; OR, IF NO MORE NETS, GO TO 126.	GO TO 126.
126	Does your household do anything (else) to avoid mosquitos?		YES 1 NO 2 →128
127	What do you do? CIRCLE ALL MENTIONED.		COIL A MATS B SPRAY C ELECTRIC SPRAY REPELLANT D INSECT REPELLANT E OTHER _____ X (SPECIFY)
128	Do you have any medicines for treating malaria in your house now?		YES 1 NO 2 DOES NOT KNOW 8