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MULTIPLE INDICATOR CLUSTER SURVEY, NIGERIA 2011



MANUAL OF INSTRUCTION

CHAPTER ONE

1.0 GENERAL INFORMATION

The Multiple Cluster Indicator Survey (MICS) was conceptualized to monitor the progress of Child Survival, Development, protection and participation (CSDPP) Programme as well as to serve as means of data generating mechanism for measuring the achievement and gaps in the targets of Millennium Development Goals (MDGs), particularly as it may affect the children and women. At the World Summit for Social Development in 1995, the need was also stressed for better social statistics if social development had to move to centre stage for the cause of the children of the world.

However, Nigeria has participated in three rounds of MICS. Two rounds through the Federal Office of Statistics (FOS) in 1995 and 1999 for MICS 1 and MICS2 respectively and the third round, MICS3, as National Bureau of Statistics (NBS) in 2007. The current round of MICS4 which is slated for between January and March, 2011, though the pilot is to come up in October, 2010 was designed to provide up to date data information for assessing situation of children and women in Nigeria and contribute data for monitoring socio-economic activities of Nigerian population. Likewise, MICS4 will support monitoring numerous international and national goals and targets which includes;

- Millennium Development Goals (MDGs)
- World Fit for children
- Roll-Back Malaria (RBM)
- Vision 20-2020 etc.

1.1 Pilot Study

1.1.1 Survey Objectives

The objectives of the pilot study among others include;

- i. To test the adequacy of survey instruments (Questionnaires and Manuals)
- ii. To test the administration of the questionnaires
- iii. To test some of the data processing arrangement (system development, data processing capability, analysis and tabulation, etc.)
- iv. To test all the logistics arrangement (fieldwork, transportation, field equipment etc)
- v. To write an administrative and technical report on the pilot

1.1.2 Coverage:

The pilot study will cover four (4) states which were selected based on two (2) from southern and two (2) from the Northern parts of Nigeria. Both urban and rural areas will be canvassed. The states are;

- Osun and Akwa-Ibom state (South)
- Kano and Gombe state (North)

1.1.3 Scope:

The general subject areas to be covered in the three (3) set of questionnaires namely;

(i) Household, Individual women (15 – 49) and Children under five include:

(a) Household Questionnaire

- (i) Household Information Panel
- (ii) Household Listing Form
- (iii) Education
- (iv) Water and Sanitation
- (v) Salt iodization
- (vi) Hand-washing
- (vii) Child labour
- (viii) Child discipline
- (ix) Insecticide treated nets
- (x) Household Characteristics etc.

(b) Individual Women (15 – 49) Questionnaire

- (i) Woman's information panel
- (ii) Woman's background
- (iii) Child Mortality
- (iv) Desire for last birth
- (v) Maternal and Newborn Health
- (vi) Illness symptoms
- (vii) Contraception
- (viii) Unmet need
- (ix) Female Genital Mutilation/Cutting
- (x) Attitudes toward domestic violence
- (xi) Marriage/union
- (xii) Sexual behaviour
- (xiii) HIV/AIDS etc

(c) Children Under Five Questionnaire

- (xi) Under-five child Information Panel
- (xii) Age
- (xiii) Birth registration
- (xiv) Early child development
- (xv) Breastfeeding
- (xvi) Care of illness
- (xvii) Malaria
- (xviii) Immunization
- (xix) Anthropometry etc.

In addition, the coordinates of the EAS/Clusters for the pilot study will be taken using the Global Positioning System (GPS).

1.1.4 Sample Design:

The frame of Enumeration Areas (EAs/Clusters) of 2006 Housing and Population Census conducted by National Population Commission (NpopC) will be used. However, the National integrated Survey of Households (NISH) which is the vehicle for conducting all household based surveys in NBS, the 2007/2012 edition will be adopted for the survey.

Ten (10) EAs/Clusters which translated to one (1) replicate will be selected in each of the affected states for the pilot study. Further, twenty (20) households (HHs) will be systematically selected in each of the EAs/Clusters thus given a total of 200 HHs to be canvassed in each selected state. In all, 800 HHs will be studied for the pilot in which all the eligible women and children under five in these households will be administered with the relevant questionnaires (see table 2.1.4.1).

1.1.5 SURVEY INSTRUMENTS:

The survey instruments were jointly reviewed and harmonized by NBS, UNICEF and other stakeholders with inputs from UNICEF RO/HQ.

The survey instruments to be used are:

- *Household questionnaire*
- *Individual Women (15 – 49 years old) questionnaire*
- *Children under - 5 years old*
- *Instruction Manual*
- *EA line maps and selected HHs lists.*

While the questionnaires and EA/Cluster line maps and selected HHs lists will be used during data collection, the instruction manual will further serve as reference material for the field personnel

1.1.6 TRAINING FOR FIELDWORK:

There will be two (2) levels of training, the 1st level, the training of trainers (TOT) and the 2nd, the zonal training.

The 1st level will be held at Minna, Niger State and it will involve twenty (20) participants comprising the NBS coordinators, NBS trainers and UNICEF officials. It will last for five (5) days.

The 2nd level will be held at two (2) NBS zonal states; Enugu (Enugu state) for Osun and Akwa Ibom states and Maiduguri (Borno State) for Kano and Gombe states. The 2nd level training will last for ten (10) days.

1.1.7 FIELDWORK ARRANGEMENT FOR DATA COLLECTION:

Two (2) roving teams will be used in each of the selected states. Each roving team will comprise of:

- Five (5) interviewers (female)
- One (1) measurer (female)
- One (1) editor (male or female)
- One (1) supervisor (male or female) NBS permanent staff

To make the fieldwork run smoothly, vehicles will be provided for the field personnel throughout the duration of data collection which will last for 20 days including travel time within the EAs/Clusters and LGAs.

1.1.8 Monitoring of Fieldwork

There will be a monitoring exercise to be mounted at NBS Headquarters, which primary objective is to ensure that data collected is of good quality. Those to be involved in the monitoring exercise are four (4) NBS headquarters staff among the eight (8) NBS trainers, four (4) zonal controllers and four (4) state officers of where the pilot study is being carried out. Also to be involved will be the UNICEF officials. The monitoring exercise will last for six (6) days for all categories of monitors.

1.1.9 Coordination of fieldwork

Four (4) coordinators from NBS Headquarters will coordinate the pilot study. The coordinators will be involved in Training of Trainers (TOT), coordinate the zonal training and fieldwork. However, coordination will last for four (4) days for both activities.

1.1.10 Retrieval of Questionnaires

The monitoring officers from NBS Headquarters will retrieve the completed questionnaires from the field. As such, the monitoring exercise will be designed to coincide with the end of fieldwork.

1.1.11 Data Processing/Analysis:

The data processing and analysis for the pilot study will be done by the data processing personnel and it will take place at NBS Headquarters, Abuja. The data processing and analysis activities will comprise the following interrelated operations namely: manual editing, data entry and verification, computer editing, tabulation and analysis. The experiences gained during these activities will be useful for finalization of the main survey data processing arrangement.

1.1.12 Report Writing

Senior and experienced report writers from NBS and UNICEF will write the report. Report will be written in such a way that it will be useful and assist in conducting the main survey in early 2011.

Table 1: Distribution of selected EAs/Clusters, HHs to be covered, field personnel and numbers of days for fieldwork by training centre and state for MICS4 pilot study

S/n	Zone/Training centre	State	No of EAs/ Clusters selected	No of HHs to be covered	No of Interviewers	No of Measurer	No of Editor	No of Supervisor	No of days for fieldwork
1.	S.E (Enugu)	Osun	10	200	10	2	2	2	20
2	S.E(Enugu)	Akwa- Ibom	10	200	10	2	2	2	20
3	N.E(Maiduguri)	Kano	10	200	10	2	2	2	20
4	N.E(Maiduguri)	Gombe	10	200	10	2	2	2	20
Total			40	800	40	8	8	8	20

1.1.13 Timeline for MICS-4 Pilot Study

Headquarters TOT	27 Sept.– 2 Oct.2010								
Zonal/State Training		4 - 15 Oct.2010							
Fieldwork			18 Oct. – 6 Nov. 2010						
Zonal Controllers/State Officers Monitoring				19 - 24 Oct. 2010					
Headquarters Staff Monitoring					1 - 5 Nov. 2010				
Headquarters Coordination						25 - 29 Oct. 2010			
Retrieval							Nov. 10, 2010		
Data Analysis/Processing								Nov. 15 - Dec. 14 2010	
Report Writing									15 - 23 Dec. 2010

1.2 Main Survey

1.2.1 Survey Objectives

The objectives of the main survey among others include:

- i. To provide up-to-date information on the situation of children and woman in Nigeria
- ii. To strengthen national statistical capacity by focusing on data gathering, quality of survey information, statistical tracking and analysis
- iii. To contribute to the improvement of data and monitoring systems in Nigeria
- iv. To strengthen technical expertise in the design, implementation and analysis of such systems
- v. To furnish data needed for monitoring progress toward the MDGs, and target for A World Fit for Children (WFFC), vision 20-2020 etc.
- vi. To provide statistics to complement and assess the quality of data from recent national surveys like Harmonized Nigeria Living Standard (HNLSS) part A and B, Nigerian General Household Panel Survey (NGHPS) and National Demographic and Health Survey (NDHS) conducted by National Population Commission (NpopC)

1.2.2. COVERAGE:

The main survey will cover both the urban and rural areas of all the thirty six (36) states of the Federation and FCT, Abuja.

1.2.3. SCOPE:

The subject areas to be covered for the main survey will be as contained in the Pilot Study for all the three (3) sets of questionnaires as well as the usage of the GPS for measuring the coordinates of the EAs/Clusters.

1.2.4 SAMPLE DESIGN:

As was for the pilot study, the frame of enumeration areas/Clusters (EAs/Clusters) of 2006 housing and population census conducted by National population commission (NPOPC) will be used. Also, the National Integrated Survey of Households (NISH) 2007/2012 **Master Sample Frame** (MSF) will be adopted for the survey. However, the NISH 2007/2012 Master Sample was constructed from LGA Master Sample which may be called Master Frame (MF). In order to select the NISH sub-sample of EAs/Clusters in each state, the 30 master sample EAs/Clusters in each LGA for that state were pooled together, hence, the total number of EAs/Clusters in the LGA master sample for each state is equal to 30 times the number of the LGAs in the state except in FCT, Abuja where it was 40 times.

Then, systematic sample of 200 EAs/Clusters were selected with equal probability across all LGAs within the state and the NISH EAs/Clusters in each state were divided into 20 replicates of 10 EAs/Clusters in each replicate.

The sample EAs/Clusters for most national household surveys such as the GHS are based on a sub-sample of the NISH master sample, selected as a combination of replicates from the NISH frame. However, the MICS4 main survey will derive from NISH (2007/2012) and as such four (4) replicates taken from replicates 17 to 20 containing forty (40) EAs/Clusters will be canvassed in each of the thirty six states of the Federation and FCT, Abuja. In addition, twenty (20) households will be systematically selected in each EAs/Clusters and all the three (3) sets of questionnaires will be administered to all eligible respondents. In all, one thousand, four hundred and eighty (1,480) EAs/Clusters will be covered nationally, and twenty nine thousand, six hundred (29,600) households will be interviewed. It is worthy to note that a fresh household listing exercise was carried out for all study units (EAs/Clusters) for MICS4.

1.2.5 SURVEY INSTRUMENTS

The same sets of questionnaires to be used for pilot study will be used for the main survey. Likewise, the same instruction manual will be used. However, if there are fundamental changes after the pilot study in those survey instruments, it will be amended accordingly before adopting them for main survey. Also, the EAs/Clusters line maps and selected HHs lists to be used will be in accord with the selected studying units (EAs/Clusters) in the design.

1.2.6 TRAINING FOR FIELDWORK

There will be two (2) levels of training, the 1st, the training of trainers (TOT) and the 2nd, the zonal training. The 1st level will be held at Abuja and it will involve fifty five (55) participants, comprising the NBS trainers, NBS coordinators and Unicef officials. It will last for ten (10) days. The 2nd level will be held at all NBS six (6) zonal states, except North East zone; NC (Plateau), NE (Gombe), NW (Kaduna), South East (Enugu), South South (Calabar) and South West (Oyo). The 2nd level training will last for fifteen (15) days.

1.2.7 FIELDWORK ARRANGEMENT FOR DATA COLLECTION:

Two (2) roving teams will be used in each state of the Federation and FCT, Abuja as was in the pilot study. Each roving team will comprise of;

- ❖ Five (5) Interviewers (Females)
- ❖ One (1) Measurer (Female) – Ministry of Health
- ❖ One (1) Editor (Male or Female)
- ❖ One (1) Supervisor (Male or Female) –NBS permanent staff

As will be done in the pilot study, for smooth running of fieldwork, vehicles will be provided for the field personnel throughout the duration of fieldwork. Data collection will last for forty two (42) days including travel time within the EAs and LGAs. There will be two interviewers who will be placed on standby among the field personnel that will be trained for data collection, so that replaced can be made quickly when the need arises during fieldwork.

1.2.8 MONITORING OF FIELD WORK

Monitoring exercise will be carried out. The exercise will ensure that quality data is collected from the field. The headquarters staff will monitor in all the thirty seven (37) states of the federation. Also the six (6) NBS zonal controllers and thirty seven (37) state officers as well as the Directors of state Statistical agencies (SSA) will be involved in the monitoring exercise. Likewise, the UNICEF Headquarters and their zonal offices staff will partake in the monitoring exercise.

1.1.9 COORDINATION OF FIELDWORK

Six (6) coordinators from NBS headquarters will be involved in the coordination exercise. As will be in the pilot study, the coordinators will participate in the training of training (TOT), zonal training as well as fieldwork. Each coordinator will be assigned to each of the six (6) zone for the coordination activities.

1.1.10 RETRIEVAL OF QUESTIONNAIRES

As the data processing will be carried out at the Six (6) NBS Zonal Headquarters, it is important that the NBS State Officers will ensure complete retrieval of all completed questionnaires and send them to his/her zonal office for data processing. Likewise, each NBS Zonal Controllers will make sure that all the completed questionnaires are retrieved from all the states in his/her zone.

1.2.11 DATA PROCESSING/ANALYSIS:

As said earlier, the data processing for the main survey will be carried out at NBS Zonal Headquarters while the analysis will be held at the NBS Headquarters in Abuja. However, the data processing activities will comprise the following inter-related operations namely: manual editing, data entry and verification, computer editing and tabulation. The analysis at the NBS Headquarters Abuja will be done by competent Programmers/Analysts.

1.2.12 REPORT WRITING:

Senior and experienced report writers from NBS and UNICEF will write the report.

Report will be written in such a way to make it useful to:

- i. Users
- ii. Policy Makers
- iii. Planners
- iv. Researchers and Students etc.

1.2.13 DOCUMENTATION/DISSEMINATION/ARCHIVING:

Data management toolkit will be used to:

- i. Document
- ii. Disseminate data

The results will be published on CD and hosted on NBS and UNICEF websites for further dissemination.

CHAPTER TWO

2.0 FIELD STAFF

2.1 The Roles of Enumerators

Interviewers play a central role in the collection of data and the ultimate outcome of the exercise depends on how they conduct the interviews. The success of this survey therefore, depends on the quality of each interviewer's ability to collect accurate information from the respondents. It is, therefore, important for the interviewer to be consistent in the way he/she puts the questions to the respondent. Therefore, the role of the enumerator includes the following:

- (i) Locating structures and housing units in the sample Clusters assigned to him/her by the supervisor.*
- (ii) Identifying the entire eligible respondent in each household*
- (iii) Carrying on the interviews in accordance with the procedures described in the manual.*
- (iv) Checking the completed records so as to be sure that all questions were asked and the response were neatly and legibly written.*
- (v) Making call-backs to interview respondents who could not be interviewed during their first or second visit due to various reasons.*
- (vi) Ensuring that the information given is correct by keeping the respondent focused to the questions.*
- (vii) Preparing the debriefing notes in the notebook for the field editor and supervisor on the problems encountered.*
- (viii) Verifying questionnaires completely before handing them over to the supervisor and before leaving the locality*

2.1.1 Building rapport with the respondent

The respondent's first impression of the enumerator determines his/her willingness to cooperate in the survey.

- ✓ **Introduction:** To introduce himself/herself, the enumerator will clearly state his/her name, show the enumerator's identification card and request politely to talk to the head of the household/family.
- ✓ **First Impression:** When an enumerator is approaching a respondent for the first time he/she should: -
 - a) Choose words that will make the respondent feel free and at ease for the interview.
 - b) Open the interview with a smile and salutation:
"Good Morning Sir/Madam, my name is (NAME). I am an interviewer of the National Bureau of Statistics. We are conducting a survey sponsored by UNICEF on the household's, women and children's welfare. Your household has been selected through a random sampling process and we would like to interview you, the women and children in your household."
 - c) Proper clothing and attire are strictly required as a sign of respect to the respondents and to represent properly the institution hiring the enumerator for the survey.

- ✓ **Neutrality during Interview:** Most respondents are polite and will tend to give answers they assumed the enumerator wants to hear. It is therefore very important that the enumerator remains absolutely neutral as he/she asks questions. The enumerators should not either by facial expression or by tone of voice allow the respondent to think he has given the right or wrong answers to the questions.
- ✓ **Maintain word and sequence of the questions:** The wording and the sequence in the questionnaire must be maintained. If the respondent misunderstands a question, the enumerator should read the question again slowly and clearly. To follow the sequence of the questions the enumerator should respect the filter and skip instructions indicated in the questionnaire.
- ✓ **Be tactful:** In a situation where the respondent shows no interest, acts bored, detached, contradicts previous answers or refuses to answer the questions, the enumerator must tactfully bring back the respondent's interest in the interview.
- ✓ **Do not hurry the Interview:** The enumerator should ask questions slowly and give the respondent time to think to ensure that he/she understands what is being asked. If the respondent is not allowed to think and formulate his/her opinion the response may be «don't know» or he/she may give an inaccurate answer. If the respondent seems to be responding slowly there is no need to hurry or to discontinue the interview.

2.2 The Roles of Supervisors

The major responsibilities of the supervisors are to:

- (i) Contact local authority Officials in the areas assigned to a team to gain their cooperation.*
- (ii) Locate the Clusters (slum and non-slum) assigned to his\her team.*
- (iii) Assign works to enumerators and provide working materials.*
- (iv) Continue training the enumerators on the job if necessary.*
- (v) Check the quality of the work of each enumerator through skim and spot checks.*
- (vi) Maintain the morals of the enumerators so that they work in cheerful atmosphere.*
- (vii) Observe some of enumerator's interviews to ensure politeness and that question are properly asked and ideas correctly interpreted.*
- (viii) Help the enumerator to resolve problems he\she may have with locating households or with difficult respondents.*
- (ix) Review each question to be sure it is completed and consistent.*
- (x) Meet with each enumerator on daily basis to discuss performance and future assignments.*
- (xi) Write a comprehensive report of the data collection in his/her team*
- (xii) To use the Global Positioning System (GPS) in measuring the coordinate of the EA and record in appropriate questionnaire.*

2.3. The Roles of Editors

- (i) It is the responsibility of the editors to scrutinize, edit and code, where necessary, the three questionnaires using the editing manual as guide.*
- (ii) No decision other than those specified in the editing guideline should be taken by editors.*

- (iii) The editors should ensure the quality of data collected right in the EAs and effect correction where necessary before leaving the EAs.*
- (iv) The editors/Supervisors should assist and work along with the measurer to ensure good measurement of the children anthropometry and salt iodization test in the EAs/Clusters covered.*

Generally speaking, Data and Scrutiny exercise includes the following:

2.3.1 Scope of Editors

- (i) Consistency Checking:** for instance, the number of women eligible for interview in HH12 of Household questionnaire must be equal to the women actually interviewed in the women questionnaire.
- (ii) Unreasonableness of data:** The magnitude of the data collected in respect of some variables may become doubtful. Such doubt could arise from past knowledge. For example If a woman aged 55years is entered as eligible to answer women questionnaire, such a data is liable to suspicion, hence it needs to be checked.
- (iii) Omission:** Editing sometimes, involves making imputations for missing information especially in cases where other information in the same questionnaire or in other questionnaires within say) the same enumeration areas could help one to arrive at the missing information. For instance, if the number of eligible women for women questionnaire is not given in HH12, this can be found in the circled line number in question HL6.
- (iv) Double Entries:** Some questions allow for circling of one code, therefore double entries are wrong in such cases and they should be corrected. However, care needs to be taken to determine, the correct entry.
- (v) Wrong Coding:** Editing exercise also provides an occasion for correcting, especially, glaring errors of coding from the field.
- (vi) Transcription Errors:** Errors can arise in the process of copying information from one part of the questionnaire to another. The editor must watch out for this.
- (vii) Computational Errors:** Computation must be carefully done to avoid making mistakes.

2.4 The Roles of Measurer

- (i) Test the anthropometry tools daily and record the results on the standardization form before starting fieldwork..*
- (ii) Understand and implement the methods detailed in the interviewer guide*
- (iii) It is the responsibility of the measurer to ensure good measurement and accurate recording of all the children anthropometry and salt iodization test in the entire household covered by the enumerators within the EAs/Clusters covered.*
- (iv) To work along with the editors in assuring the total coverage of the entire eligible children and women within the selected household. Should assist the Editors in editing the completed questionnaire according to the editing the specified guidelines*
- (v) Protect all equipment (especially the height board and scales) from damage*
- (vii) No decision other than those specified in the editing guideline should be taken by Measurer.*
- (viii) The Measurer should ensure the quality of data collected right in the EAs and effect correction where necessary before leaving the EAs.*

2.5 The Roles of State Officers

- (i) The State Officer co-ordinates the totality of the activities of the survey in his/her state.*
- (ii) He/she will make contact with the district head and relevant authority of the EAs that will be canvassed.*
- (iii) He/she will ensure relevant intervention whenever that is necessary in order to get the cooperation of the respondents.*
- (iv) He/she will help the field staff to solve whatever problem(s) they may encounter in the field.*
- (v) He/she will ensure compliance to retrieval time-line.*
- (vi) He/she must submit both technical and administrative reports of the operation in the state*

2.6 The Roles of Zonal Controllers

- (i) Zonal Controller supervises the activities of the survey in the zone through the State Officers.*
- (ii) He/she will coordinate the totality of the survey in the states under his zone.*
- (iii) He/she will ensure the quality of data that will be collected in his zone.*
- (iv) He/she must submit an overall technical/administrative report in his zone*

2.7 The Roles of NBS HQ Monitoring Officers

The monitoring officers are to:

- (i) Ensure compliance to retrieval programme*
- (ii) Conduct both skim and spot – check exercises and effect corrections*
- (iii) Ensure proper compliance to quality programme of collecting high quality data.*

2.8 The Roles of Independent Monitors

Independent monitors comprise of the 6 coordinators for each zone and 37 monitors for the states and the FCT, Abuja. They are from the Universities /Research Institutions and private monitoring firms and all have varied experiences relating to the survey work. Some have worked with NBS on surveys/projects as monitors and evaluators.

Their key roles are to:

- (i) Form another layer of supervision and monitoring of field work.*
- (ii) Further ensure and enhance collection of high quality data.*
- (iii) Add value to integrity of data collected.*
- (iv) Conduct skim and spot check exercises for high quality data collection.*
- (v) Submit reports for various levels of the field work.*

2.9 The Roles of MICS 4 National Consultant

He/she is a full time consultant for the project and will perform the following roles during field works:

- involve as technical person during training exercises*
- participate in supervision and monitoring exercises*
- address and solve problems in collaboration with the project director and other heads of relevant department*
- submit field report*

CHAPTER THREE

INSTRUCTIONS FOR INTERVIEWERS

MICS4 QUESTIONNAIRES AND ELIGIBLE RESPONDENTS

In each sampled household you visit, you should begin by interviewing a knowledgeable adult member of the household to fill in the Household Questionnaire.

All modules of the **Household Questionnaire** will be administered to this person, referred to as the **Household Respondent**, including the module in the questionnaire where the information collected is about other household members (i.e., the educational attainment).

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

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

There should only be one respondent to the Household Questionnaire and the other members of the household should not respond to any part of the questionnaire. Ideally, the respondent is also not expected to consult any other members that may be available in the household for some factual questions he or she may not be certain (i.e., age or education of household members).

However, if you think that this may seriously affect the flow of the questionnaire(s) you may allow the respondent to ask other members in order to get more correct information (such as age information which may affect the eligibility of some members for individual questionnaires or modules where age checks are important (i.e., education or child labour module).

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

- You should interview separately all **women aged 15 through 49** who reside in the household to fill in the **Questionnaire for Individual Women**.

- *You should administer the **Questionnaire for Children under-5 to mothers of children under-5 years of age who are residing in the household**. If the mother is not listed in the Household Listing, then the person who is acknowledged as the **primary caregiver** should be the respondent to the Under Five Questionnaire.*

You will identify these individuals by completing the Household Listing Form in the Household Questionnaire. If you visit a household with no members eligible for the individual questionnaires (**Questionnaire for Individual Women and Questionnaire for Children Under-5**), you must still ask questions about the household to a knowledgeable adult member and complete the Household Questionnaire.

Your supervisor will give you a list or tell you how to find the households to visit. You must visit all these households.

If no one is at home when you go to interview the household, ask the neighbours whether the house is inhabited. If it is occupied, ask the neighbours when the household members will return. Arrange with your supervisor to go back to the dwelling when it will be occupied or at the end of the day. Note those plans on your EA control sheet and note the time you are to return on the first page of the questionnaire (Household Information Panel). Do not substitute another household.

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

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

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

The person to be interviewed for the Questionnaire for **"Children Under-5"** should be the **mother**. Only if the mother of the child is not alive or if she is alive but not listed in the household (living elsewhere) then you should interview the **primary caregiver of the child** in that household. **If the mother/primary caregiver is not available for interview or not at home**, try to find out when she/he will be available and return. 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 -5years old is not available, but the mother/primary caregiver is, complete the questionnaire for the child but do not complete the last module (Anthropometry). If the child is still not available after the call-back visit(s), record the result in question AN2 as ‘Child not present’.

Ask your supervisor if you are in doubt about what to do when you cannot locate a household, or you cannot complete an interview. Always keep a record on the EA control sheet of the households you visited where nobody was at home. If it is not possible to interview an eligible woman, record this on the Woman’s Information Panel of the questionnaire. If it is not possible to interview a mother or primary caregiver, record this on the Under Five Child Information Panel of the Questionnaire for Children Under Five.

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

Character formatting:

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

Skip Instructions:

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

Skips are very important, since a failure to take a skip into account may result in

- (1) asking an inappropriate question to the respondent,
- (2) incorrectly skipping a whole section which might otherwise be administer.

Question styles:

- Some ‘questions’ are in the form of filters. These are in fact not questions to be asked to respondents. They include **checks** that the interviewer uses to skip certain questions.
- Areas with **light gray background** indicate those questions and filters that should not be asked directly by interviewers, *but should be coded, based on previous responses or observations.*
- **Letters** are used to indicate response categories in questions where **multiple responses can be accepted and coded**. **Numbers** are used to indicate response categories in **questions where only one response will be coded**. These constitute the majority of questions.
- **DK** is used to abbreviate ‘Don’t Know’.

- For **numeric response** codes, '8', '98', '998' and '9998' are used throughout to indicate '*DK*' responses; '6', '96', '996' and '9996' are used to indicate '*Other*' responses.
- In questions where **letters are used for response** categories, '*X*' is used for '*Other*', '*Y*' is used for '*None*', and '*Z*' is used for '*DK*'.
- **Rosters:** These are lists that involve the *collection of information on the same subject for multiple persons*. For example, the education module is in the form of a roster, where educational level and attainment information is collected for all members of the household above age 5.
- **Skip instructions** are provided to the right of the response categories (with the exception of rosters), normally in a skip column, and indicate the number of the question that the interviewer should skip to (11⇒WS6).
- **Probes** are used to ask further questions to the respondent, and are either indicated as "*Probe:*" or with a question such as "**ANYTHING ELSE?**"
- Prompts are used to explicitly remind the respondent of an answer expected on a selected topic. For example, in the case of household assets, respondent is not asked to simply list all household assets in the household, but rather, each of the assets the questionnaire is intended to collect is directly asked as a question, such as "ELECTRICITY?"
- There are occurrences when a word is either in **old characters** or **underlined**. These are *intended to emphasize a point, or make sure that you do not forget what the question is intended to capture*. For instance, in question WS1, the word "**MAIN**" is in bold to emphasize that only one source of drinking water should be circled.
- "**Other**" response codes are almost always followed by (*specify*), which indicate that once the "other" option is circled, you are expected to write the exact answer.

HOW TO HANDLE AN INTERVIEW

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

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

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

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

- Ensure that you **understand the exact purpose** of the survey and each question. This will help you to know if the responses you are receiving are adequate.
- Remember the **survey schedule**, and remember that you are part of a team. Do not stay and talk for too long, but do not rush the interview either.
- Ask the questions **exactly as they are written**. Even small changes in wording can alter the meaning of a question.
- Ask the questions **in the same order as they are given on the questionnaires**. Do not change the sequence of the questions.
- Ask **all the questions**, even if the respondent answers two questions at once. You can explain that you must ask each question individually, or say "Just so that I am sure..." or "Just to refresh my memory..." and then ask the question.
- Help your respondents to feel comfortable, but **make sure you do not suggest answers to your questions**. For example, do not 'help' a woman to remember various contraceptive methods.
- **Do not leave a question unanswered** unless you have been instructed to skip it. Questions left blank are difficult to deal with later. In the office it may look as though you forgot to ask the question. Always write in "0" when a zero answer is given. For some questions, the code 'Doesn't know' will already be provided, and after you are sure that the respondent is unable to provide you with an answer, you will be able to circle this response. In questions where a 'Doesn't know' response is not printed on the questionnaire, you must make sure that the respondent comes up with an answer. In exceptional cases where this may not be possible, indicate this on the questionnaire with a note.

- **Record answers immediately** when the respondent gives you the responses. Never rely on writing answers in a notebook for transfer to the questionnaire later.
- **Check the whole questionnaire before you leave** the household to be sure it is completed correctly.
- **Thank the respondent for her (or his) cooperation** and giving you time to interview her/him. Leave the way open to future interviews. Avoid over-staying in the respondent's household even if he/she is very friendly and welcoming.

GENERAL POINTS

Make a good first impression

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

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

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

Gain rapport with the respondent

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

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

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

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

Remain calm and polite at all times.

Always have a positive approach

Never adopt an apologetic manner, and does not use word such as "*are you too busy?*". Such questions will obviously invite refusal before you start. Rather, tell the respondent, "***I would like to ask you a few questions***".

Stress confidentiality of information collected

Always stress confidentiality of the information you obtain from the respondent. Explain to the respondent that the information you collect will remain confidential and that no individual names

will be used for any purposes, and that all information will be grouped together and depersonalized when writing the report. Never mention other interviews or read the questionnaire with other interviewers or supervisor in front of a respondent or any other person. This will automatically erode the confidence the respondent has in you.

Probe for adequate responses

The interviewer should phrase the question as it is in the questionnaire. If he/she realizes that an answer is not consistent with other responses, then he 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 to the respondent in a particular direction. *Ensure the meaning of the original question is not changed.*

Pause and wait if the respondent is trying to remember difficult items. Ask the respondent to clarify her/his answer if necessary. You may have misunderstood the response.

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

Answering questions from respondent

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

Interview the respondent alone

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

Handling hesitant respondents

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

TIPS FOR SUCCESSFUL INTERVIEW

Be Neutral throughout the Interview

Most people are polite and will tend to give answers that they think you want to hear. It is therefore very important that you remain absolutely neutral as you ask the questions. Never give the impression by your look or by the tone of your voice to the respondent that she has given the "Right" or "Wrong" answer to the question. Never appear to approve or disapprove of any of the respondent's replies.

If the respondent gives an ambiguous answer, try to probe in a neutral way, asking questions such as: "Can you explain a little more?", "I did not quite hear you, could you please tell me again?", "There is no hurry. Take a moment to think about it".

Never Suggest Answers to the Respondent

If a respondent's answer is not relevant to a question, do not probe her by saying something like "I suppose you mean that Is that right?" In many cases, she will agree with your interpretation of her answer, even when that is not what she meant. Rather, you should probe in such a manner that the respondent herself comes up with the relevant answer.

Handle Hesitant Respondents Tactfully

There will be situations where the respondent simply says "I don't know", gives an irrelevant answer, acts very bored or detached, contradicts something she has already said, or refuses to answer the question. In these cases you must try to re-interest her in the conversation. If the respondent refuses, simply write REFUSED next to the question and proceed as if nothing had happened. If you have successfully completed the interview, you may try to obtain the missing information at the end, but do not push too hard for an answer. Remember, the respondent cannot be forced to give an answer.

Do not Form Expectations

You must not form or express any opinions about the ability and knowledge of the respondent because this can influence the interview. The respondent, believing that you are different from her, may be afraid or mistrustful. You should always behave and speak in such a way that she is put at ease and is comfortable talking to you.

DAILY PREPARATIONS BEFORE DATA COLLECTION

1. Test the scale with a standard weight, and the height boards with a standard wooden dowel/rod. Record the results on the standardization of tools form.
2. Verify that the team has all necessary equipment and materials.
3. Ensure all the preparations with the car and driver are completed in the evening before the full day of data collection. Don't lose valuable time fuelling cars and/or repairing tires during daylight hours. The itinerary for each day should be discussed with the team to ensure enough time is provided for data collection.

What to do when arriving in the cluster

1. Meet with the village chief or other local representative and explain the objectives of the survey.
2. Present the EA/cluster's household listing information and update it with the village chief or community leader.

What to do in the selected household

1. The team leader will indicate the selected household and assign the number in sequence to identify the household within in the cluster (1,2,3...). The interviewer will record the household number on the questionnaire and the team leader will double check the number is correctly recorded.
2. Identify the head of the household or another appropriate adult to serve as respondent.
3. Briefly explain the purpose of the visit and request consent to continue. If the respondent gives consent, confirm exactly what will be considered as a household for the purpose of the survey.
4. If there are children under five years of age in the household, request any vaccination cards, health cards, birth registration or identification for the young children in the household.
5. One team member begins to complete the household composition questionnaire with the respondent
6. After the household listing on the household composition questionnaire is given, the measurer or assistant should be able to easily identify all children under five years of age that belong to the household, as well as the women aged 15 to 49 years.
7. Measure the height and weight of all children less than five years of age. Carefully record the results, verifying with between the measurer and assistant as you go along (see section on anthropometric measurement below for further instructions).After the measurement of each child, collect children information on measles immunization status and vitamin A supplementation and deworming in the past six months (if included on the questionnaire).
 - Request the vaccination card and review. If the child received the measles vaccination from the card, record 1 to indicate yes, vaccination information from card. If the vitamin A supplementation and/or deworming has been recorded in the past six months, record 1 to indicate yes, vitamin A and/or deworming information from card.
 - For measles, if the respondent does not have a document to confirm the immunization status, ask him/her to show you what the site of injection (left arm).

- For vitamin A, show the respondent the vitamin A samples (red and blue) and ask if the child received a vitamin A supplementation drops in the mouth in the past six months. If the answer is yes, record 2 to indicate yes, from recall.
 - For deworming, show the respondent the deworming tablet and ask if the child received a deworming in the past six months. If the answer is yes, record 2 to indicate yes, from recall.
8. Ensure that the same household ID number is recorded on the household composition questionnaire as the anthropometry questionnaire.
 9. At the end of fieldwork every day,
 - ✓ Check that the identification information of all completed questionnaires is complete
 - ✓ Check each questionnaire for mistakes.
 10. When finished give the completed questionnaires to the team leader. The team leader will review the questionnaires and enter the data before putting them in to a folder of the completed interviews for the cluster.

What to do before leaving village

1. Check on the cluster assignment sheet that all data was collected
2. Review data quality of all anthropometric measures of children.
3. Return to the households where errors have been identified in anthropometric measures, make re-measures and enter the corrections.
4. Ensure that all absent households were re-visited.
5. Gather all survey equipment and store carefully in the car.
6. Thank the village chief or responsible authority for their collaboration before leaving.

Placement of Height Board and Scale

Find a comfortable area with shade where you can set-up the equipment. It is preferable to take the measures outside during the day. Always find a flat surface where you can place the scale and height board. Also, it is best to place the height board against a wall to prevent the board from falling backwards.

Never put the height board on a table for measurement of children. This is dangerous.

If it's raining or there are many people present, you can also take the measurements inside. If you must take the measures inside, make an open space and make sure that there is enough light to read the instruments.

Take all measurements as a two person team

When taking a child's height/length, the assistant holds the child in place and ensures that the child is straight on the height board. Be gentle but firm when holding the child on the

height board. With weight measures the mother can hold the child. When a child is around the measuring equipment, he/she should be held as to prevent tripping or falling.

Never leave a child alone around measurement equipment.

Measure and weigh women then children

Measure women first as it will help to reassure children. It is advisable to measure the less “difficult” child first. Measure one person at a time and use the names of women and children to avoid mistakes during the recording of measures.

Do not frighten the child

In order to weigh and measure children, you have to help them onto the board or scale and adjust their bodies before the measurement. Always explain to the mother or the child what you will do. Ensure that the mother and child are stressed by taking the measures. If a child is distressed, allow the mother to calm the child before taking measurements.

Try to continually improve your anthropometry skills

Your skills will improve if you make an effort to always make correct and accurate measures. As you develop a regular routine, it will become easier to measure even difficult children quickly and accurately.

GLOBAL POSITIONING SYSTEM (GPS)

GPS stands for Global positioning system. The GPS is a satellite-based navigation system made up of a network of 24 satellites placed into orbit by the U.S. department of defence. GPS was originally intended for military applications, but in the 1980s, the government made the system available for civilian use. GPS works in any weather conditions, anywhere in the world, 24 hours a day.

Uses of GPS

- i To conduct a farm survey
- ii To monitor enumerators, whether farm survey was actually done.
- iii To construct NISH, NISE and SAS frames that has true geographic bearing with the earth surface.
- iv Measuring terrain features that are difficult to measure by conventional means.
- v Positioning offshore oil platforms.
- vi Updating road data with a GPS receiver in a car.
- vii Car navigation
- viii Determining camera – carrying aircraft positions to reduce reliance on fixed masks in aerial photography.



HOW IT WORKS

GPS Satellites circles the earth twice a day in a very precise orbit and transmit signal information to earth. GPS receivers take this information and use triangulation to calculate the user’s exact

location. Essentially, the GPS receiver compares the time a signal was transmitted by a satellite with the time it was received. The time difference tells the GPS receiver how far away the satellite. Now, with distance measurements from a few more satellites, the receiver can determine the user’s position and display it on the unit’s electronic map.

GARMIN ETREX LEGEND GPS (WAY POINT METHOD)

Way-points: A waypoint is a location that you mark on a map (or the earth’s surface). It can be an address, an existing map feature, a point of interest, an empty spot on the map, or any other point you wish. In this case, waypoints would be used to determine the actual location of the EAs/Clusters on the Earth surface (*a point of interest*).

Procedure:

1. Switch on the GPS receiver.
2. Wait for 1-2 minutes for GPS to initialize and locate satellites. Also make sure that the satellite reception is good (i.e. satellite signal bar is high) before the point is marked, for better result. *At least four (4) satellite bar is required.*
3. Cycle to the main page by pressing the QUIT key repeatedly. On the main page select MARK to mark your present position as a waypoint.
4. Make sure you are at the centre/very close to the centre of the EA/Cluster you are covering.
5. Note the waypoint ID. Select the OK button to mark the point

To view the stored waypoint:

- Cycle to the main page:
- Select find and go to waypoints.

Note:

- Satellite reception by GPS receivers has to have a direct view with the sky, **do not stay under shed, indoor or near building that may obscure the reception.**
- Always cycle to the satellite page to ensure that it’s tracking (4) satellites and the signal strength is high before reading is taken. **If the signal strength is not high, raise the GPS and avoid obstructing its view.**
- **Do not obstruct** the GPS antenna.
- **Study the GPS manual** properly before use.
- The GPS reading is to be taking and **questionnaire filled by the Supervisors.**

GPS DATA COLLECTION FORM		GP
GP1 Cluster number		
GP2 Sector	GP3 State (Name) Code	
Urban 1		
Rural 2		
GP4 Operator name and number		
Name		
GPS Day/Month/Year of measurement		
CLUSTER POSITION CHECKLIST		
<input type="checkbox"/>	CHECKED ESTIMATED ACCURACY (AFTER "READY TO NAVIGATE")	
<input type="checkbox"/>	MARKED WAYPOINT	
<input type="checkbox"/>	RENAMED WAYPOINT TO CLUSTER NUMBER	
<input type="checkbox"/>	RECORDED WAYPOINT'S POSITION ON DATA COLLECTION FORM	
<input type="checkbox"/>	SAVED WAYPOINT	
GP6 Waypoint name		
	N/S/E/W	Degrees Decimal degrees
GP7 Elevation		
GP8 Latitude	NS	
GP9 Longitude	EW	

HOW TO FILL IN THE GLOBAL POSITION SYSTEM (GPS) QUESTIONNAIRE

GP1: Enter the EA code/Cluster Number in the space provided

GP2: Circle the appropriate code to identify either the EA/Cluster referred is urban or rural setting.

GP3: Enter the name of the state you are covering and the code.

GP4: The name of the person (supervisor) who took the reading and his/her code.

GP5: Enter the Day, Month and Year of the reading.

GP6: Enter the way point name and the reading.

GP7: Enter the elevation reading from the GPS in Degrees. The reading is always in East (E), West (W), North (N) and South (S)

GP8: Enter the Latitude reading from the GPS in Degrees North (N) or South (S) of the Equator. However Nigeria is at the North (N).

GP9: Enter the Longitude reading from the GPS in degrees East (E) or West (W) of the meridian line.

CLUSTER POSITION CHECKLIST: The **supervisor** has to fill in this position as he/she complete the questionnaire on GPS in order to know if the questionnaire is completely filled

HOW TO FILL IN THE HOUSEHOLD QUESTIONNAIRE

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

Begin by saying the following to the respondent:

WE ARE FROM (NATIONAL BUREAU OF STATISTICS). WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION WHICH IS SPONSORED BY UNICEF. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT 40 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?

You may change the wording of these introductory sentences as appropriate. However, you must make sure to include the following when you are introducing yourself: the name of the implementing agency (National Bureau of Statistics – NBS); the topic of the survey (Multiple Indicators Cluster Survey – MICS); approximate duration of the interview; the issue of confidentiality; and with whom you would like to speak. You can also include the sponsors name (UNICEF), *it has an added advantage as per the effect of UNICEF on Nigerian Women and*

HOUSEHOLD QUESTIONNAIRE NIGERIA	
HOUSEHOLD INFORMATION PANEL HH	
HH1. Cluster number:	HH2. Household number: ___
HH3. Interviewer name and number: Name _____	HH4. Supervisor name and number: Name _____
HH5. Day / Month / Year of interview: _____ / _____ / _____	
HH6. Area: Sector Urban 1 Rural 2	HH7. State Name: Code _____
<p>We are from (NATIONAL BUREAU OF STATISTICS). We are working on a project concerned with family health and education. I would like to talk to you about these subjects. The interview will take about 40 minutes. All the information we obtain will remain strictly confidential and your answers will never be shared with anyone other than our project team.</p> <p>MAY I START NOW?</p> <p><input type="checkbox"/> Yes, permission is given ⇒ Go to HH18 to record the time and then begin the interview.</p> <p><input type="checkbox"/> No, permission is not given ⇒ Complete HH9. Discuss this result with your supervisor.</p>	

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

HOUSEHOLD INFORMATION PANEL

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

HH1. Enumeration Area Name/Cluster number

Enter the cluster number as provided by your supervisor. The cluster number in four digits includes two digits for the state and two digits for the EA serial number in the state.

HH2. Household number

The household Number is represented by three digit code. This is the serial number generated for the 10 HUs selected in each EA and this can be copied from the selection sheet.

HH3. Interviewer name and number

The interviewer will write his/her own name and the code assigned to him/her during training as a form of control to ensure the quality of data collected.

HH4. Supervisor name and number

The supervisor will write his/her own name and the code assigned to him/her during training as a form of control to ensure the quality of data collected.

HH5. Day/Month/Year of interview

Enter the date of the interview as day, month and year. If the interview is not completed on your first visit and you visit the household again, revise and enter final date of interview. In other words, enter the date you complete the Household Questionnaire.

HH6. Area/Sector

The code of each of the Area/sector within a state is one digit. Circle 1 for urban and 2 for rural as in the selection sheet.

HH7. State

The name and code of the State where the interview was conducted should be recorded in the space and box provided.

HH8. Name of head of household

Enter the full name of the head of household (HH). Confirm the name with the one in the Household Listing, column HL2. If the name of the household head given to you is different from the one in the Household Listing, *write down the name of the current head of household.*

HH9. Result of Household Interview

This area must be completed at end of the household questionnaire. One of the options must be circle to show the status of the questionnaire completed for the household.

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

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

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

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

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

'Dwelling destroyed': If the dwelling was burned down or was demolished, circle '06'.

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

'Partially completed': If the Household Questionnaire is not completely filled, circle '08'

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

Complete Questions HH10, HH11, HH12 and HH14 should be completed after the Household Listing Form on the next page.

HH10. Respondent to household questionnaire

Enter the name and line number (from the Household Listing, columns HL1 and HL2) of the respondent to the Household Questionnaire. : The respondent for the household Questionnaire should preferably be the head of the household. If he/she is absent the next person who is acting as head of household or an adult in the household should be interviewed. This person should be a member of the household and must be capable of providing all the necessary information on each household member. The interviewer should

ask a few questions to be able to identify who the head of the household is. Other members can help by adding information or details on the questions concerning them.

HH11. Total number of household members

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

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 lines circled in HL7.

HH13. Number of woman's questionnaires completed

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

HH14. Number of children under age 5

Enter the total number of children under five eligible for inclusion in the survey. This should be calculated as the total number of children under five for whom a mother or caregiver line number is entered in column HL8. You will be using the Questionnaire for children under five to interview the mothers or primary caregivers of these children.

HH15. Number of under-5 questionnaires completed

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

***NOTE:** You will complete question HH9 (Result of household interview) as soon as the Household Questionnaire has been completed, or after all attempts have been made to interview the household. Questions HH13 and HH15 should be filled in once you have concluded all individual interviews in the household – that is, when all mothers or primary caregivers of children under five have been interviewed, and questionnaires for each child under age five have been completed. Assuming that all interviews for the household have been successfully completed, the numbers in HH13 and HH15 should equal the total number of eligible women (HH12) 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 HH15 and HH14. If you are unable to complete all or part of the interviews for this household, note details in the space provided at the bottom of the panel.*

HH16. Field edited by (name and number)

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

HH17. Data entry clerk (name and number)

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

HH18. Record the time

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

HOUSEHOLD LISTING FORM

A household is defined as "A person or a group of persons, related or unrelated, who live together and share a common eating arrangement and livelihood, and recognize one person as a head." (National Definition and Source)

A household is defined as a person or group of persons

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

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

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

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

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

Household Listing Form

HL1. Line number. This is the number used to identify each person listed. You must obtain a complete list of all persons who usually live in the household, but you do not need to fill in or do anything in this column since the numbers are already provided. All household members are identified with these line numbers throughout the questionnaires administration in the household after the Households' Listing Form is completed,

You should begin by saying:

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

List the head of the household in line 01. 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.

List of all household members should follow the head of household from line 02. A household is defined as "A person or a group of persons, related or unrelated, who live together and share a common eating arrangement and livelihood, and recognize one person as a head". Then ask: **ARE THERE ANY OTHERS WHO LIVE HERE – EVEN IF THEY ARE NOT AT HOME NOW?** If yes, complete the listing for all of them.

Note** that if there are more than 15 household members, you will need to use a continuation (additional) questionnaire to record the additional household members. Mark the cover page of the continuation questionnaire as "CONTINUATION". The primary questionnaire for that set should say 'SEE CONTINUATION' across the top of the cover sheet. The clause "Tick here if additional Questionnaire used" should be completed. The continuation questionnaire should have all identification information (HH1 to HH7) written on it on the cover page. After filling the information for remaining household members in the continuation questionnaire, you should continue your interview in the primary questionnaire. Please remember to change the line numbers of household members on the continuation questionnaire by cancelling the pre-printed numbers and entering numbers starting from 16 to read '16', '17', '18', etc., and to keep the continuation questionnaire inside the primary one so that they remain together. **When carrying out the listing of the households, firstly complete questions HL2-HL4 for all members, that is, (HL2) the Name of the household member, (HL3) the relationship to the head of household and (HL4) their sex, then start asking questions HL5 through HL14 for each person at a time.

This means, the Household Listing Form will be completed in two stages:

- **Names (HL2), Relationship codes (HL3) and Sex (HL4)**, of all household members are to be recorded until all household members are included in the list. When the respondent is asked to provide the names of persons living in the household, their relationship to the head of the household and their sex is naturally mentioned during the course of listing the names. For this reason, the list is completed vertically for HL2, HL3 and HL4 during the first stage. Then, questions from HL5 to HL14 are asked for each person before moving to the next person.
- **"WHAT IS (name)'s DATE OF BIRTH?"(HL5) through "DOES (name's) NATURAL FATHER LIVE IN THIS HOUSEHOLD?" (HL14)** must be completed horizontally, that is each of the member of the household from head to the last member following the skip instructions attached to each question.

HL2. Name

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

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

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

Enter the code corresponding to how the person listed is related to the head of the household. Use the codes at the bottom of the Household Listing. 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. Respondents tend to provide the relationship of the person to themselves, rather than to the head of the household.

Household head: The member who makes key decisions in the household and whose authority is acknowledged by other members. It should be borne in mind that the key decision maker may not necessarily be the oldest. Other factors within the household can determine who the head is such as what proportion of income is member's to total household income.

Wife/Husband: refers to the married or partner by mutual consent to the head of household.

Son/Daughter: refers to biological child of the Head of household (male – son; female – daughter)

Son-in-Law/Daughter-in-Law: these are husband or wife to any of the head of households' children

Grand Child: children to any of the biological child of the head of household

Parent: father or mother to whom the head of household is a biological child.

Parent-in-Law: the biological father/mother to the spouse of the head of household

Brother/Sister: someone who is blood related to the head of household

Brother-in-Law/Sister-in-Law: Someone who is blood related to the head of household's spouse.

Uncle/Aunty: this is the blood related brother or sister to the parent of the head of household

Niece/Nephew: this refers to the child born to the brother or sister to the head of household

Other Relatives: refers to the other unclassified person who can be traced to the head of household or spouse living in the household e.g. Cousins

Adopted Child; A child not having the head of household as the biological father but was accepted by the head as his/her child.

Foster Child: A Child who was accepted to be cared for by the head of household

Step Child: A child brought to the head of household by the spouse

Not Related: Someone who is not bloodily related to the head of household e.g friend

Don't Know: If the interviewer refused to ask/forgot to ask for the relationship **due to in competency** then the person might fall into these category.

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

Circle '1' for 'Male' and '2' for 'Female'. Do not guess the sex of the household member from the name provided to you. When the respondent is listing everyone in the household, he/she may indicate the sex of the person at the same time, by saying "My sister Mary," for instance. In this case, you do not need to ask the sex of the household member again, since it is already obvious that the person is a female. However, when a name is mentioned and the person is not physically available for your

confirmation of sex, Please ask “**boy or girl?**”, “**male or female?**” or “**please the gender of the person?**” never use your judgement. This column should never be left blank.

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

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

HL5. WHAT IS (name)’S DATE OF BIRTH?

If the respondent knows the date of birth for the member of the household, record the answer in months and year. You will need to convert the month into numbers. For this,

January = 01;	February = 02;	March = 03;	April = 04;
May = 05;	June = 06;	July = 07;	August = 08;
September = 09;	October = 10;	November = 11;	December = 12.

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 you still have difficulty obtaining the ages of elderly members of the household, you may enter the code ‘98’, meaning ‘Doesn’t know/over age 50’. For household members younger than 50, completed ages must be entered. However, you should still indicate, with a note, what age range the person in question might be, so that your editor or supervisor can have an idea of the eligibility of the person to individual questionnaires. If the age of the member of the household is 95 or higher enter the code ‘95’ for all such cases.

How to use the historical calendar:

- *Ask of any historical event (national or local) which occurred around the time of birth or childhood.*
- *Ask how old respondent was when that event occurred or how many years elapsed before his/her birth.*
- *Then use the information obtained to calculate the age. For example, if respondent was 15 when Nigeria obtained independence, this person should be 15 + 45 (i.e. 1st October 1960 to 23rd September 2005) = 60 years. If still this methodology fails try the next approach.*
- *Simply estimate how old the respondent may be based on some district historical events, some events which occurred.*

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

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

Circle the line number in this column if the household member is a woman 15-49 years of age (this includes those age 15 and age 49). Do not ask this question from the respondent again, as you can check through HL4 and HL6, and for any female “code 2” in HL4 and aged from 15years to 49years in HL6, circle the line number as applicable in HL7.

HL8. For children age 5-17: WHO IS THE MOTHER OR PRIMARY CAREGIVER OF THIS CHILD?

If the household member is a child between 5 and 17 years of age (this includes children aged 5 years and aged 17 years old as at the last birthday), record the line number of his/her mother or primary caregiver in this column. Ask this question to the respondent if necessary. In case of females who are 17 years or less and are married, they are legal children and you should be careful not to refer to them in the presence of their husbands. All you need to do is just to record their husbands as their primary caregiver and the husbands could supply the information in HL11 – HL14.

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

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

If the household member is a child under the age of five (this includes babies delivered even on the day of the interview and children who had their last birthday as 4 years old), do not enter for children who had their last birthday as 5 years old or more), record the line number of his/her mother or primary caregiver in this column. Ask this question from the respondent if necessary. Later, you will be interviewing the person you are circling her/his line number here about the child you are collecting information. Remember if there is entry to any line number in HL8 (5years to 14years old), then HL9 (0 to less than 5years old) must be empty for such a child.

HL10. Did (name) STAY HERE LAST NIGHT?

Record whether or not the household member slept in the household last night. The question is for all members of the household.

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

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

For all children that is yet to celebrate 18years of age, we want to know whether their own (natural) parents are listed in the Household Listing Form, and their survival status. This information can be used to measure the prevalence of orphan hood and child fostering in the population. For everyone age 18 and older, HL11-HL14 will be left blank. Please, do not ask these questions from any member of the household listed that has clocked 18years and older.

HL11. Is (name’s) NATURAL MOTHER ALIVE?

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

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

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

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

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

By **'natural' we mean the biological father of the child whose name is mentioned.** In many cultures, people consider other people's children whom they are raising as their own, especially children of their wife or brothers/sisters, etc. You should be certain that the respondent understands that you are asking about the father who gave birth to him/her.

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, go to the next person on the list.

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

If the natural/biological father of the child is still alive, we want to know whether he lives in the household. If the father does live in the household, ask who he is (*he should be listed in the Household Listing if he lives in the household*) and **record his line number in the space provided.** If the father is not a member of the household (that is, the natural/biological father of the child is not listed in the Household Listing), record '00'.

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

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

- For each woman age 15-49 years, write her name and line number in the spaces provided (WM3 and WM4) at the top of her Questionnaire for Individual Women.
- For each child under age five, write his/her name and line number (UF3-UF4) and the name and line number of his/her mother or caregiver in the spaces provided (UF5-UF6) at the top of the Questionnaire for Children Under Five.

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

EDUCATION MODULE

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

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

ED1. *Line number:*

This is the number assigned to each person on the Household Listing Form. You do not need to fill in or do anything in this column since the numbers are already provided. Please, maintain the line number of attached to each household member in HL1.

ED2. *Name and Age:*

Copy the names and ages of each person age 5 years old and older from the Household Listing Form (HL2 and HL6) to their corresponding line numbers. Leave this column and the rest of the line blank for each child that is less than 5 years old as listed in HL2 and HL6.

For each household member age 5 years or older, ask ED3 and ED4. These questions ask about educational attainment for all household members in this age group. (If children younger than 5 years attend school or preschool, do not complete it here, the information will be recorded in the Questionnaire for Children Under-5).

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

The question wants to if the respondent had attended a formal (organized) school with standard curriculum. Example of the schools referred here can be found in ED4. Circle '1' if the answer is 'Yes' and continue with question ED4. If the answer is 'No', circle '2' and go to the household member on the next line.

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

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

'Preschool' is listed for children who do not attend grade 1, but do attend some form of organized learning or early childhood education programme, whether or not such a programme is considered part of the

school system. The definition of organized early learning programme does not refer to programmes offering only babysitting or child-minding.

ED4. WHAT IS THE HIGHEST LEVEL OF SCHOOL (*name*) ATTENDED?

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

Then ask, "WHAT IS THE HIGHEST GRADE (*name*) COMPLETED AT THIS LEVEL?"

Enter the highest grade completed or '98' for 'DK' ('doesn't know'). If the respondent has not completed the first grade in the level, enter the first grade-code which begins with zero '0'. For instance, if a person has attended pre-school but did not complete the first grade (Nursery 1), then the level for this person will be circled as '0', and the grade will be entered as '00'. The respondent that has not completed primary 1 will have the level code as '1' and the grade code as '10'. Any respondent that has not completed JSS 1 will have the level coded as '2' and the grade coded as '20' and so on.

Similarly, for a child who is currently in primary 5 at the time of the interview, the level will be coded as '1' and the grade as '14', since this person is yet to complete primary 5.

For someone who is no more at school, the highest level attended is the one he/she went to before leaving education system, even if it was for a few weeks. **Note that the grade 00, 10, 20, 30 and 40 can only apply to ED4 as a form of transition.** In ED4, if level is 4 go to ED5.

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

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

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

LEVEL

0 - Pre School	1 - Primary
2 - Secondary	3 - Higher
6 - Non—Formal Education	8 - Don't Know (DK)

GRADE:

Codes for grades in WB5 Pre-School	Primary	Secondary	Higher
Kindergarten - 01	Primary 1 - 11	JSS 1 - 21	NCE/AL/OND - 31-34
Nursery 1 - 02	Primary 2 - 12	JSS 2 - 22	B.Sc./HND - 41-42
Nursery 2 - 03	Primary 3 - 13	JSS 3 - 23	Post Graduate - 43
	Primary 4 - 14	SS 1 - 24	Non formal education - 51
	Primary 5 - 15	SS 2 - 25	
	Primary 6 - 16	SS 3 - 26	

ED5. DURING THE (2010-2011) SCHOOL YEAR, DID (*name*) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?

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

Take the example of a state where the school year ends in July and the new school year begins in September: If the interview is carried out in August 2010 (between school years), then the question should refer to the 2009-2010 school year; if the interview is carried out in October 2010 (during the new school year), then the question should refer to the 2010-2011 school year.

Circle the code corresponding to the answer given. If the response is 'Yes', continue with the next question. But if the response is 'No', then skip to ED7.

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

Circle the code for the level of school, and enter the household member's current grade. If it applies, circle '8' for 'DK' ('Doesn't know'). Enter the highest grade number completed using '01', '02', etc.

If the interview is conducted during the time between two school years, the question should refer to the school year that has ended, and you should use 'THAT' and 'WAS' in the question. If the interview is conducted during the school year, the question should refer to the current school year. Note that these questions should capture children who may have been attending at the beginning of the school year, but have dropped out since then. If necessary, past tense could be used to make sure that you obtain information on the level and grade of children who may have dropped out from school during the course of the school year. If the response on level in ED6 is 4, interviewer should go to ED7.

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

SURVEY COORDINATORS: IF THE INTERVIEW IS CARRIED OUT BEFORE THE START OF THE 2010-2011 SCHOOL YEAR, THEN ED5-ED6 SHOULD REFER TO THE 2009-2010 SCHOOL YEAR, AND ED7-ED8 SHOULD REFER TO THE SCHOOL YEAR 2008-2009.

IF THE INTERVIEW IS CARRIED OUT AFTER THE START OF THE 2010-2011 SCHOOL YEAR, THEN ED5-ED6 SHOULD REFER TO THE 2010-2011 SCHOOL YEAR, AND ED7-ED8 SHOULD REFER TO THE SCHOOL YEAR 2009-2010.

ED7. DURING THE PREVIOUS SCHOOL YEAR, THAT IS (2008-2009), DID (*name*) ATTEND SCHOOL OR PRESCHOOL AT ANY TIME?

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

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

If the person has been to school, record the highest level of schooling attended by circling the code for the response. You may need to probe for the type of school attended if the respondent says 'I don't

know', if the respondent "doesn't know" Circle '8'. If the highest level of school the child has attended is preschool (Level=0), then circle 0.

Then ask, **"WHAT IS THE HIGHEST GRADE (*name*) COMPLETED AT THIS LEVEL?"**

Enter the highest grade completed or '98' for 'DK' ('doesn't know'). If less than one grade, enter '00'. For instance, if a person has attended preschool but did not complete the first grade (Kindergarten), then the level for this person will be circled as '0', and the grade will be entered as '00'.

Similarly, for a child who is attending grade 5 (i.e. primary 5) in primary school at the time of the interview, the level will be coded as '1' and the grade as '14', since this person has not yet completed grade 5 (primary 5).

Circle the code for the level of school attended and fill in the child's grade or circle '8' if the respondent doesn't know the level and/or '98' if the respondent doesn't know the grade. If level in ED8 is 4, interviewer should go to the next person.

WATER AND SANITATION MODULE

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

SURVEY COORDINATORS: DURING TRAINING, PROVIDE INTERVIEWERS WITH PICTORIALS DEPICTING VARIOUS WATER SOURCES AND SANITATION FACILITIES. THESE PICTORIALS ARE AVAILABLE FROM http://www.childinfo.org/files/JMP_Pictorials_for_Water_and_Sanitation.pdf. THESE PICTORIALS SHOULD NOT BE SHOWN TO THE RESPONDENTS, HOWEVER.

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

- '11' – Piped into dwelling, also called a house connection, is defined as water service connected by pipe with in-house plumbing to one or more taps, for example, in the kitchen and/or bathroom.
- '12' – Piped into compound, yard or plot, also called a yard connection, is defined as a piped water connection to a tap placed in the compound, yard or plot outside the house.
- '13' – Piped to neighbour - the household may be obtaining water from a neighbour's house or yard connection.
- '14' – A public tap / standpipe is a water point from which the public may collect their water. A standpipe may also be known as a public fountain or public tap. Public standpipes can have one or more taps and are typically made of brickwork, masonry or concrete.
- '21' – A tube-well or borehole is a deep hole that has been driven, bored or drilled with the purpose of reaching groundwater supplies. Boreholes/tube-wells are constructed with casing, or pipes, which prevent the small-diameter hole from caving in and provide protection from infiltration of run-off water. Water is delivered from a tube-well or borehole through a pump that may be powered by humans, animals, wind, electricity, diesel fuel or solar energy.
- '31' – A protected dug well is a dug well that is protected from run-off water through a well lining or casing that is raised above ground level and a platform that diverts spilled water away from the well. Additionally, a protected dug well is covered so that bird droppings and animals cannot fall down the hole.

- '32' – An unprotected dug well is a dug well for which one or both of the following are true: (1) the well is not protected from run-off water; (2) the well is not protected from bird droppings and animals. If at least one of these conditions is true, the well is unprotected.
- '41' – A protected spring is a spring that is free from run-off and from bird droppings and animals. A spring is typically protected by a 'spring box' that is constructed of brick, masonry or concrete and is built around the spring so that water flows directly out of the box into a pipe without being exposed to outside pollution.
- '42' – An unprotected spring is a spring that is subject to run-off or bird droppings or animals. Unprotected springs typically do not have a 'spring box' (described above).
- '51' – Rainwater collection refers to rain that is collected or harvested from surfaces by roof or ground catchment and stored in a container, tank or cistern until used.
- '61' – A tanker-truck water source transports and sells water by means of a tanker truck.
- '71' – Cart with small tank/drum is used by a water provider who transports water into a community and then sells the water. Types of transports may include donkey cart, motorized vehicle or other means.
- '81' – Surface water is water located above ground and includes rivers, dams, lakes, ponds, streams, canals and irrigation channels from which water is taken directly.
- '91' – Bottled water is purchased water sold in bottles. Note that the code refers only to bottled water that is commercially available. Sometimes household members may store water from other sources in bottles – this should not be coded as bottled water.

SURVEY COORDINATORS: THE PRE-TEST WILL DETERMINE IF ANY ADDITIONAL WATER SOURCES TYPICALLY USED IN YOUR LOCALITY NEED TO BE ADDED TO THIS LIST. BE SURE TO RETAIN THE CATEGORIES SHOWN IN THE QUESTIONNAIRE. THESE WILL DETERMINE THE NUMBER OF HOUSEHOLDS TO COUNT IN THE NUMERATOR OF THE WATER AND SANITATION INDICATORS (SEE CHAPTER II.2).

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

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

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

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

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

WS3. WHERE IS THAT WATER SOURCE LOCATED?

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

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

This question is used to find out how convenient the location of the source of water is to the dwelling for households using a water source outside their dwelling.

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

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

WS4A. HOW LONG DOES IT TAKE TO GO THERE, GET WATER, AND COME BACK BY FOOT?

This question is used to find out how close the source of water is to the dwelling for households using a water source, even if the water is within dwelling, during rainy and dry seasons.

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

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

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

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

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

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

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

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

Probe: **“ANYTHING ELSE?”** Circle ‘X’ for ‘Other’ and specify on the line provided what the household does to the water to make it safer to drink. Circle ‘Z’ if the respondent ‘Doesn’t know’. If ‘Z’ is circled then the other codes should not be circled. This question can have multiple responses.

Definitions of various methods of water treatment are as follows:

- ‘A’ – Boil refers to boiling or heating water with fuel.
- ‘B’ – Add bleach/chlorine refers to using liquid chlorine bleach or bleaching powder to treat drinking water.
- ‘C’ – Strain it through a cloth refers to pouring water through a cloth that acts as a filter for collecting particles from the water.
- ‘D’ – Use water filter involves water flowing through a filter made of ceramic, sand or a combination of materials to remove particles and at least some microbes from the water.
- ‘E’ – Solar disinfection consists of exposing water, stored in buckets, containers or clear vessels, to sunlight.
- ‘F’ – Let it stand and settle refers to storing water undisturbed and without mixing long enough for larger particles to settle to the bottom by gravity. The settled water is carefully removed by decanting, ladling or other gentle methods that do not disturb the settled particles.
- ‘G’ – Add alum refers to using alum to filter the drinking water.
- ‘H’ – Add water tablet/liquid refers to using water tablet/liquid to treat drinking water.

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

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

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

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

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

Definitions of various types of toilet facilities are as follows:

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

- ‘11’ - A piped sewer system is a system of sewer pipes, also called sewerage, that is designed to collect human excreta (faeces and urine) and wastewater and remove them from the household environment. Sewerage systems consist of facilities for collection, pumping, treating and disposing of human excreta and wastewater.
- ‘12’ - A septic tank is an excreta collection device and is a water-tight settling tank normally located underground, away from the house or toilet.

- '13' - A flush/pour flush to pit latrine refers to a system that flushes excreta to a hole in the ground and has a water seal.
- '14' - A flush/pour flush to somewhere else refers to excreta being deposited in or nearby the household environment (may have a water seal but deposited not into pit, septic tank or sewer); excreta may be flushed to the street, yard/plot, drainage way or other location.
- '15' - Flush to unknown place/Not sure/DK where should be coded in cases when the respondent knows that the toilet facility is a flush toilet, but does not know where it flushes to.
- '21' - A ventilated improved pit latrine or VIP is a type of pit latrine that is ventilated by a pipe extending above the latrine roof. The open end of the vent pipe is covered with gauze mesh or fly-proof netting and the inside of the superstructure is kept dark.
- '22' - A pit latrine with slab uses a hole in the ground for excreta collection and has a squatting slab, platform or seat (made of concrete, steel, or wood to allow standing with ease) that is firmly supported on all sides, easy to clean and raised above the surrounding ground level to prevent surface water from entering the pit.
- '23' - A pit latrine without slab/Open pit uses a hole in the ground for excreta collection and does not have a squatting slab, platform, or seat. An open pit is a rudimentary hole in the ground where excreta is collected.
- '31' - A composting toilet is a toilet into which excreta and carbon-rich material are added (vegetable wastes, straw, grass, sawdust, ash) and special conditions maintained to produce inoffensive compost.
- '41' - Bucket refers to the use of a bucket or other container for the retention of faeces (and sometimes urine and anal cleaning material), which is periodically removed for treatment or disposal.
- '51' - A hanging toilet/hanging latrine is a toilet built over the sea, a river, or other body of water into which excreta drops directly.
- '95' - No facilities/bush/field includes excreta wrapped and thrown with garbage, the 'cat' method of burying excreta in dirt, defecation in the bush or field or ditch, and defecation into surface water (drainage channel, beach, river, stream or sea).

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

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

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

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

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

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

The total number of households using this facility should include the household being interviewed. If less than ten households use this toilet facility, enter the number of households on the line provided. Circle '10' if ten or more households use this toilet facility. Note that '01' is not a valid response (since it means that this is the only this household that uses the facility; if that is the case, you should go back to WS9 and correct the response there). Circle '98' for 'DK' ('Doesn't know').

HOUSEHOLD CHARACTERISTICS MODULE**HC1A. WHAT IS THE RELIGION OF THE HEAD OF THIS HOUSEHOLD?****HC1B. WHAT IS THE MOTHER TONGUE/NATIVE LANGUAGE OF THE HEAD OF THIS HOUSEHOLD?****HC1C. TO WHAT ETHNIC GROUP DOES THE HEAD OF THIS HOUSEHOLD BELONG?**

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

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

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

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

HC3. *Main material of the dwelling floor:*

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

HC4. *Main material of the roof:*

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

HC5. Main material of the exterior walls:

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

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

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

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

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

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

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

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

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

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

HC8. DOES YOUR HOUSEHOLD HAVE:

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

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

HC9. DOES ANY MEMBER OF YOUR HOUSEHOLD OWN:

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

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

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

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

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

Circle the code corresponding to the response given. If 'No', skip to HC13.

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

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

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

Record the total number of hectares of land owned by all members of the household that can be used for agriculture. If 95 or more hectares (or other units) are owned, record '95'. If unknown, record '98'. The interviewer can record the size of land owned by any member(s) of household in local unit such as ridges, plot, acres etc. But, the supervisor of the team should convert the information recorded in local unit to the standard 'Hectares' in the space provided.

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

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

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

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

Read out each item and enter the number corresponding to the answer given. Add numbers of milk cows and bulls together, even if the respondent gives separate numbers for each. Similarly, count horses, donkeys and mules together. If the answer is 'none', record '00' for that animal/animal group. If the household has 95 or more of any one type of animal/animal group, record '95'. If the household

owns a particular type of animal/animal group, but the respondent does not know how many, circle '98'. Do not leave any items blank.

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

HC15. DOES ANY MEMBER OF THIS HOUSEHOLD HAVE AN ACTIVE BANK ACCOUNT?

The bank account owned by any member of the household must be functional and active. Circle the code corresponding to the response given.

INSECTICIDE TREATED NETS MODULE

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

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

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

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

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

TN2. HOW MANY MOSQUITO NETS DOES YOUR HOUSEHOLD HAVE?

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

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

OBSERVATION OF MOSQUITO NETS: TN4 TO TN13.

There are various types and brands of mosquito nets. Some require regular treatment with insecticide; others are factory treated and do not require any treatment for 6-12 months (pre-treated) or 36 months (long-lasting type). In order to assess the effectiveness of mosquito net use in preventing malaria, we need

to gather information on how long the household has had each net, the brand of net, whether the net has been treated with insecticide, and whether household members use the nets when they sleep at night.

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

To distinguish each net, you may use phrases like, “Now let’s talk about the first net you showed me” or ‘Let’s talk about the net which (*name*) uses’ if this information has already been mentioned by the respondent. If a household has more than 3 nets, use an additional questionnaire. At the top of ITN Module of additional questionnaire, rename the columns ‘4th Net’, ‘5th Net’, and ‘6th Net’. Fill the identification information on the first page of the additional questionnaire (mainly cluster number and household number). Once ITN module has been completed for all additional nets, continue the interview on the first household questionnaire.

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

TN4. Mosquito net observed?

For each net, record whether you actually observed the net or not.

TN5. Is the net (are any of the nets) any of the following types:

During training, you will be shown all the common mosquito nets that are available in the country. The brand/type name is often located on the net itself. A picture of the different types of nets available in the country may also be provided for reference during interviews. Use this to identify the type of net in the dwelling and circle the corresponding number on the questionnaire.

Read the name of each type of nets in turn: **“IS THE NET (ARE ANY OF THE NETS) LONG-LASTING?** Circle the appropriate response code. Then proceed to ask about the re-treatable nets: **“IS THE NET (ARE ANY OF THE NETS) RE-TREATED?** Circle the appropriate response code. Is there any other Insecticide nets? Specify.

Note that if the respondent has indicated the number of nets in TN2, you should still have the respondent confirm the presence or absence of each of the type of nets in TN3. For example, the respondent may have indicated that there is only one net in the household. If the respondent indicates that there is a net in the household of a type, you should still continue down the list of nets and code ‘No’ for all other nets. It is possible that once you mention the type of net, the respondent may remember an extra net not included in the figure in TN2.

If the respondent is not sure whether a net is one of these types, try to observe the net, if possible. If it is not possible to observe the net(s), use the pictures you were given to aid in identification

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

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

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

TN7. Check TN5 for type of net

Check the type of net. If it is a long-lasting net, tick the corresponding box and skip to 'TN11', if it is re-treatable, tick the corresponding box and skip to 'TN9', if it is others types of net, tick the box and continue with the next question (TN8).

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

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

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

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

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

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

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

TN11. DID ANYONE SLEEP UNDER THIS MOSQUITO NET LAST NIGHT?

TN12. WHO SLEPT UNDER THIS MOSQUITO NET LAST NIGHT?

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

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

If more than four people slept under a single net the night before the survey, use an additional questionnaire to record the name and line number of these persons. Fill the identification information on the first page of the additional questionnaire (mainly cluster number and household number). Once additional persons are listed there, continue the interview on the first household questionnaire. If someone not listed in the Household List slept under the mosquito net, record "00" for the line number.

TN13.

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

CHILD LABOUR MODULE

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

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

CL1. Line number:

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

CL2. Name and Age:

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

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

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

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

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

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

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

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

CL5 is intended to capture typical work children usually get involved with. Circle ‘1’ if ‘Yes’, and continue to the next question. If ‘No’, circle ‘2’ and skip to CL7.

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

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

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

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

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

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

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

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

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

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

CHILD DISCIPLINE MODULE

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

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

The module has a unique structure and approach. You will use the first part to select, randomly, the child for whom you will be asking the questions CD9-CD22. These questions are placed in the second part of the module, and are designed to collect information about disciplinary methods used by the mother or primary caregiver for the selected child.

Table 1 is used to list all *Children aged 2-14 Years Eligible for Child Discipline Questions*. As described in the module itself, you will review the Household Listing and list each of the children aged 2-14 years (including children age 2 and age 14) in the table in order according to their line number (HL1). You should not include other household members outside of the age range of 2-14 years. One by one, record the line number (HL1), name (HL2), sex (HL4), and age (HL6) from the Household Listing Form to the columns CD2, CD3, CD4, and CD5 for each child age 2-14 years.

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

CD1. Rank number

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

CD2. Line number from HL1

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

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

CD3. Name from HL2

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

CD4. Sex from HL4

Record the eligible child's sex from HL4.

CD5. Age from HL6

Record the eligible child's age from HL6.

CD6. Total children age 2-14 years

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

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

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

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

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

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

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

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

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

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

First, start with the introductory sentence in CD10.

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

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

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

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

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

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

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

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

CD13. SHOOK HIM/HER.

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

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

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

CD15. GAVE HIM/HER SOMETHING ELSE TO DO.

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

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

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

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

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

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

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

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

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

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

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

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

Circle the code corresponding to the response given.

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

This question is designed to capture attitudes toward discipline and should be asked last, after asking about parental/caregiver disciplinary behaviour. The question asks the respondent for her/his own opinion of whether it is necessary to use physical punishment when teaching a child to behave properly. Do not be surprised if a respondent who has indicated that she/he has used physical punishment says that she/he does not believe in such punishment.

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

HANDWASHING MODULE

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

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

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

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

If tap water is used, you may need to open the tap to see if water is available.

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

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

HW3 will be used to record whether there is soap or detergent at the place used for handwashing. Circle all available at the place for handwashing. 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 SOAP OR DETERGENT (OR OTHER LOCALLY USED CLEANSING AGENT) IN YOUR HOUSEHOLD FOR WASHING HANDS?

HW5. CAN YOU PLEASE SHOW IT TO ME?

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

HH19. Record the time.

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

SALT IODIZATION MODULE

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

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

This item is used to record the type of salt used to prepare the family's main meals and the outcome of the test for salt iodization.

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

The salt testing kits contain small 10 ml bottles with a stabilized starch-based solution. Each kit is sufficient for testing at least 100 samples of salt. One to two drops of the solution dripped on a small

amount of salt containing iodine produces a blue/purple colour change. Coloration indicates that iodine is present. Below follows a brief description of the basic steps to test for iodate content in salt, the most common fortificant. The same basic principles also apply when testing for iodide content in salt, with the main difference being that no re-check solution will be needed with that type of salt.

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

SURVEY COORDINATORS: IN MICS4, SALT CONTAINING 15 PARTS PER MILLION (PPM) OR MORE OF IODATE/IODIDE IS CONSIDERED ADEQUATELY IODIZED. THIS IS IN ACCORDANCE WITH THE INTERNATIONALLY AGREED INDICATOR FOR IODIZED SALT CONSUMPTION. IT IS THEREFORE IMPORTANT THAT THE SALT TESTING KITS USED IN MICS4 SURVEYS HAVE A CUT-OFF POINT OF 15 PPM, EVEN IF A DIFFERENT CUT-OFF POINT IS COMMONLY USED IN THE COUNTRY. FURTHERMORE, EVERY EFFORT SHOULD BE MADE TO USE ONLY THOSE KITS THAT HAVE A SINGLE CUT-OFF; IN OTHER WORDS, THE SOLUTION IN THE KIT SHOULD DISTINGUISH ONLY BETWEEN LESS THAN 15 PPM VERSUS 15 PPM OR GREATER, IN ADDITION TO 0 PPM. REFER TO CHAPTER II.7 FOR MORE INSTRUCTIONS ABOUT SALT IODIZATION TESTING.

If the respondent indicates that no salt was used to cook the main meal last night, or that no meal was cooked, ask for a sample of the salt usually used for cooking in the household, and perform the test on this sample of salt.

The Household Questionnaire ends with two questions that will confirm the presence (or absence) of other individuals you may need to interview in this household. If there is at least one woman in the household eligible for the Questionnaire for Individual Women, you will proceed to interview that woman. If not, you will check if there are any eligible children, and interview their mother/primary caregiver if there is at least one such child residing in the household.

Before ending the interview, go through your entire questionnaire quickly to check if no information is missing, everything is clearly written and all information is consistent. If necessary, do not hesitate to ask the questions again to the respondent. When you are sure your questionnaire is complete, continue with HH20.

HH20. Does any eligible woman age 15-49 reside in the household?

Check household listing, column HL7 for any eligible woman. You should have a questionnaire with the Information Panel filled in for each eligible woman. If there is at least one eligible woman in the household, go to QUESTIONNAIRE FOR INDIVIDUAL WOMEN to administer the questionnaire to the first eligible woman. If there is no eligible woman in the household continue with HH21.

HH21. Does any child under the age of 5 reside in the household?

Check household listing, column HL9 for any eligible child under age 5. You should have a questionnaire with the Information Panel filled in for each eligible child. If there is at least one eligible child in the household go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE to administer the questionnaire to mother or caregiver of the first eligible child. If there is no eligible child, end the interview by thanking the respondent for his/her cooperation. Gather together all questionnaires for this household and complete the relevant information on the cover page.

OBSERVATIONS

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

HOW TO FILL IN THE QUESTIONNAIRE FOR INDIVIDUAL WOMEN

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

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

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

WOMAN’S INFORMATION PANEL

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

WM1. Cluster number

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

WM2. Household number

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

WM3. Woman’s name

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

WM4. Woman’s line number

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

WM5. Interviewer name and number

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

QUESTIONNAIRE FOR INDIVIDUAL WOMEN NIGERIA	
WOMAN'S INFORMATION PANEL WM	
This questionnaire is to be administered to all women age 15 through 49 (see Household Listing Form, column HL7). A separate questionnaire should be used for each eligible woman.	
WM1. Cluster number: <input style="width: 80px;" type="text"/>	WM2. Household number: <input style="width: 80px;" type="text"/>
WM3. Woman's name: <input style="width: 90%; border-bottom: 1px solid black;" type="text"/>	WM4. Woman's line number: <input style="width: 80px;" type="text"/>
WM5. Interviewer name and number: <input style="width: 90%; border-bottom: 1px solid black;" type="text"/>	WM6. Day / Month / Year of interview: <input style="width: 80px;" type="text"/>

WM6. Day/Month/Year of interview

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

WM7. Result of woman's interview

Complete this question once you have concluded the interview with the woman. Circle the code corresponding to the result of the interview. If the questionnaire is completed, circle '01' for 'Completed'. If you have not been able to contact the woman after repeated visits, circle '02' for 'Not at home'. If the woman refuses to be interviewed, circle '03' for 'Refused'. If you were able to only partly complete the questionnaire, circle '04' for 'Partly completed'. If the woman is incapacitated, 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.

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

If the respondent is a mother/caregiver, 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 NATIONAL BUREAU OF STATISTICS. WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT THESE SUBJECTS. THE INTERVIEW WILL TAKE ABOUT 30 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?"**

If you are starting to interview the same person that you have completed the household interview with, you need to read a revised version of the greeting (see below) as the time to complete the questionnaire for individual women will be different than the household questionnaire and normally a separate consent is required to do this interview.

NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT YOUR HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT 30 MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?"

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

If permission is given, begin the interview. If the respondent does not agree to continue, complete WM7, thank her and go on to the next interview. Later, discuss the refusal with your supervisor; you or another person from the team may attempt to interview the woman for a second time. This will depend on your

description of the refusal. However, remember that a woman's participation in the survey must be on a voluntary basis, and potential respondents must never be forced to participate.

WM8. Field edited by (Name and number)

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

WM9. Data entry clerk (Name and number)

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

WM10. Record the time

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

WOMAN'S BACKGROUND MODULE

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

WB1. IN WHAT MONTH AND YEAR WERE YOU BORN?

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

WB2. HOW OLD ARE YOU?

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

Probe: "HOW OLD WERE YOU AT YOUR LAST BIRTHDAY?"

If she does not know the answer to either of these two questions, probe for clues that might indicate her age. Ask how old she was when she was first married or first gave birth. Try to find out how long ago she got married or had her first child. (You may be able to find out the age of her oldest child if the child is still living. You may be able to relate her age to someone else in the household whose age is known. You may be able to determine her age based on how old she was when an important event

occurred, and the number of years that have elapsed since.) You MUST fill in this information. Do not leave this blank. Compare and correct WB1 and WB2 if inconsistent.

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

Questions WB3-WB7 is about the educational attainment and literacy of the woman. Note that you have collected some of this information on the Education module in the Household Questionnaire, either from another household member or from the woman herself. You should ask these questions again and compare if there is any difference the interviewers is to probe further in order to get the correct information.

WB3. HAVE YOU EVER ATTENDED SCHOOL OR PRESCHOOL?

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

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

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

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

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

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

For this question, record the number of years that the respondent successfully completed at that level recorded in WB4. For example, if a woman was attending grade 3 of secondary school and left school before completing that year, record '11'. Although grade 3 was the highest year she attended, she completed 2 years of secondary school. If less than 1 year, record '00' for completed years. For example, if she attended only 2 weeks of grade 1 of secondary school, record '00' for completed years.

WB6. Check WB4.

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

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

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

To ascertain whether women are literate or not, you will show the women being interviewed cards with pre-printed sentences, and you will ask them to read the sentences. Note that only women who have not attended school will answer this question, or those who did not attend school beyond 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.

Based on your knowledge of/interaction with 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/mute or visually/speech impaired, circle '5'.

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

CHILD MORTALITY MODULE

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

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

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

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

Live birth: It is one in which the new born baby or infant showed signs of life, by crying or breathing even if it died shortly afterwards.

Still birth: It is an infant which showed no sign of life when born.

Miscarriage: It is a spontaneous involuntary abortion during the first six months of pregnancy

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.

CHILD MORTALITY		CM
<i>1 questions refer only to LIVE births.</i>		
M1. NOW I WOULD LIKE TO ASK ABOUT ALL THE BIRTHS YOU HAVE HAD DURING YOUR LIFE. HAVE YOU EVER GIVEN BIRTH?	Yes 1 No 2	2⇒ CM8
<i>“No” probe by asking: I MEAN, TO 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?</i>		
M2. WHAT WAS THE DATE OF YOUR FIRST BIRTH? I MEAN THE VERY FIRST TIME YOU GAVE BIRTH, EVEN IF THE CHILD IS NO LONGER LIVING, OR WHOSE FATHER IS NOT YOUR CURRENT PARTNER.	Date of first birth Day __ __ DK day 98 Month __ __ DK month 98 Year __ __ __ __ DK year 9998	⇒ CM4
<i>Skip to CM4 only if year of first birth is given. Otherwise, continue with CM3.</i>		
M3. HOW MANY YEARS AGO DID YOU HAVE YOUR FIRST BIRTH?	Completed years since first birth __ __	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

This question is extremely important.

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

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

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

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

CM10. Sum answers to CM5, CM7 and CM9

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

NOTE: For women who responded NO in **CM1** and **CM8** the interviewer should records (00) in the space provided in **CM10** and proceed to **IS1**.

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

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

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

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

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

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

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

CM13. Check CM12: Last birth occurred within the last 2 years, that is, since (*day and month of interview*) in 2009

SURVEY COORDINATORS: INTERVIEWERS SHOULD REPLACE (*day and month of interview in 2009*) WITH THE DAY AND MONTH THE INTERVIEW IS BEING CONDUCTED, AND USE 2009 FOR THE YEAR SINCE THE INTERVIEW WILL BE CONDUCTED IN 2011.

EXAMPLES:

- IF FIELDWORK WILL BE COMPLETED DURING JANUARY 2011, CHANGE TO 'JANUARY 2009' AND INSTRUCT INTERVIEWERS TO USE THE DAY OF THE INTERVIEW. IF AN INTERVIEW IS CONDUCTED ON 23 JANUARY 2011 THE SENTENCE SHOULD READ "***Did the woman's last birth occur within the last 2 years, that is, since 23 JANUARY 2009?***"

If the respondent's last birth occurred in the last 2 years, check the box marked 'Yes' and enter the name of the child on the line provided. Then continue with MATERNAL AND NEWBORN HEALTH Module. If the respondent's last birth did not occur in the last 2 years, check the box marked 'No' and go to the ILLNESS SYMPTOMS Module.

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

WOMAN INTERVIEWED IN FEBRUARY 2010 HAS HAD FOUR LIVE BIRTHS. TWO OF HER CHILDREN, ONE BOY AND ONE GIRL, ARE LIVING WITH HER. ONE BOY, FROM HER FIRST BIRTH IN MARCH 1999, IS LIVING ELSEWHERE, AND ONE GIRL (WANTED AT THE TIME), WHO WAS BORN IN NOVEMBER 2009, HAS DIED SINCE THEN. ASSUMING THAT THE WOMAN HAS GIVEN THE CORRECT INFORMATION (NO CHANGES NEEDED AFTER CHECKING CM11), THE FOLLOWING RESPONSES SHOULD BE CODED:

CM1	'1' CIRCLED
CM2	'98' CIRCLED FOR DAY, '03' ENTERED FOR MONTH, '1999' ENTERED FOR YEAR.
CM3	SKIPPED (REMAINS BLANK).
CM4	'1' CIRCLED
CM5	'01' FOR SONS AT HOME, AND '01' FOR DAUGHTERS AT HOME ENTERED
CM6	'1' CIRCLED
CM7	'01' ENTERED FOR SONS ELSEWHERE, '00' ENTERED FOR DAUGHTERS ELSEWHERE
CM8	'1' CIRCLED
CM9	'00' ENTERED FOR BOYS DEAD, '01' ENTERED FOR GIRLS DEAD
CM10	'04' ENTERED
CM11	'YES' MARKED AND 'ONE OR MORE BIRTHS' MARKED

CM12	'98/11/2009' ENTERED
CM13	'YES' MARKED

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. (Even if the child is not alive). Check CM13 in Child Mortality module and record name of last born child on the space provided at the top of this module. Use this child's name while asking the questions, where indicated. If the child had died before naming him/her the interviewer should write NO NAME) in the space provided.

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

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

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

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

DB3. HOW MUCH LONGER DID YOU WANT TO WAIT?

If the response is given in months, circle '1' and record the number of months. If the response is given in years, circle '2' and record the number of years. If don't know, record 998

DESIRE FOR LAST BIRTH		DB
<i>This module is to be administered to all women with a live birth in the 2 years preceding date of interview. Check child mortality module CM13 and record name of last-born child here _____ Use this child's name in the following questions, where indicated.</i>		
DB1. WHEN YOU GOT PREGNANT WITH (name), DID YOU WANT TO GET PREGNANT AT THAT TIME?	Yes.....1 No.....2	1⇒Next Module
DB2. DID YOU WANT TO HAVE A BABY LATER ON, OR DID YOU NOT WANT ANY (MORE) CHILDREN?	Later.....1 No more.....2	2⇒Next Module
DB3. HOW MUCH LONGER DID YOU WANT TO WAIT?	Months.....1 __ Years.....2 __ DK.....998	

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. (Even if the child is not alive). Check CM13 in Child Mortality module and record the name of the last-born child in the space provided. Use this child's name in the following questions, where indicated.

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

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



Pregnant: A woman is said to be pregnant if fertilization has taken place after sexual intercourse, t *Pre-natal Care* refers to a pregnant woman going for consultation on the conditions of the pregnancy before child birth. (Note that the woman need not be ill.)

Pre-natal Care refers to a pregnant woman going for consultation on the conditions of the pregnancy before child birth. (Note that the woman need not be ill.)

Post-natal Care refers to the mother and child (aged 5 years or less) going for consultations after delivery. (Note they need not be ill.)

MN1. DID YOU SEE ANYONE FOR ANTENATAL CARE FOR THIS PREGNANCY?

Circle the code corresponding to the response given. If the response is ‘Yes’ circle 1 and circle 2 if ‘no’ then skip to MN5.

MN2. WHOM DID YOU SEE?

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

In MN1, ask if she saw anyone for antenatal care for this pregnancy. If she saw no one for antenatal checks, circle ‘2’ and skip to MN5. If the woman answers ‘Yes’ to MN1, ask whom she saw for the check-up. Probe to learn if she saw more than one person and record all persons seen. Also probe for the type of person seen and circle all answers given. If you are unsure how to code a person mentioned, write the words used to describe the person in the space provided ‘Other’ and circle ‘X’.

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

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

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

A *Doctor* is physician who examines, diagnose, and treat patients.

A *nurse* can be synonymous to a physician assistant examine, diagnose, and treat patients under the supervision of a physician. A person educated and licensed to practice nursing and one who is concerned with the diagnosis and treatment of human responses to actual or potential health problems

A *midwife* is a person; usually a woman but can be a man, is one who is trained to assist women in childbirth, i.e. the person serves as an attendant at childbirth but is not a physician.

MATERNAL AND NEWBORN HEALTH		MN
<i>This module is to be administered to all women with a live birth in the 2 years preceding date of interview. Check child mortality module CM13 and record name of last-born child here _____ . Use this child's name in the following questions, where indicated</i>		
MN1. DID YOU SEE ANYONE FOR ANTENATAL CARE DURING YOUR PREGNANCY WITH (name)?	Yes.....1 No.....2	2⇒MN5
MN2. WHOM DID YOU SEE?	Health professional: Doctor.....A Nurse / Midwife.....B Auxiliary midwife/MCH Aide.....C Other person: Traditional birth attendant.....F Community health worker.....G Other (specify).....X	
Probe: ANYONE ELSE?		
Probe for the type of person seen and circle all answers given.		
MN2A. HOW MANY MONTHS PREGNANT WERE YOU AT YOUR FIRST ANTENATAL CARE VISIT FOR THIS PREGNANCY?	Months _____ DK _____	98

A *Traditional Birth Attendant (TBA)* is one who assists the mother during childbirth. She may have acquired skills by delivering babies herself, or through apprenticeship from other TBAs.

MCH is a Maternal and Child Health aide. Main function concerns health status of mother and children.

Community Health Workers (CHW) used today as an umbrella term to describe members of the health workforce that function under a multitude of various job titles such as community health advisors, lay health advocates, outreach educators, community health representatives, peer health promoters, and peer health educators. Either they are lay members of communities who work for pay or as volunteers in association with the local health care system in both urban and rural environments and usually share ethnicity, language, socioeconomic status and life experiences with the community members they serve. CHWs offer interpretation and translation services, provide culturally appropriate health education and information, assist people in receiving the care they need, give informal counselling and guidance on health behaviours, advocate for individual and community health needs, and provide some direct services such as first aid and blood pressure screening.

MN2A. HOW MANY MONTHS PREGNANT WERE YOU AT YOUR FIRST ANTENATAL CARE VISIT FOR THIS PREGNANCY?

This refers to the age of the pregnancy at first antenatal care visit.

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

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

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

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

A. WAS YOUR BLOOD PRESSURE MEASURED?

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

B. DID YOU GIVE A URINE SAMPLE?

C. DID YOU GIVE A BLOOD SAMPLE?

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

D. WERE YOU WEIGHED?**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 questions. If the woman says she has a card but does not/cannot show it to you, circle '2'.

If the card is not available ('2' or '3' circled in MN5), you must try to find out how long ago the last Tetanus toxoid (TT) dose was received, and the total number of TT doses the mother has received in her lifetime. Use the probing questions, and record her answers in the spaces provided.

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

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

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

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

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

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

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

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

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

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

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

Ask about doses of tetanus injections received during or before the next-to-last pregnancy or between pregnancies (at any time before the last pregnancy). Enter her response in the space provided, as in MN7. If the number of doses is 7 or more times, record '7'. If 'don't know' circle 8 and then skip to MN12.

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

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

MN12. Check MN1 for presence of antenatal care during this pregnancy:

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

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

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

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

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

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

MN14. WHICH MEDICINES DID YOU TAKE TO PREVENT MALARIA?

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

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

If the respondent cannot remember the name of the medicine taken, ask her to show you the package it came in. If she doesn’t have the package, show her typical anti-malarials and ask if she took any of

them. If she mentions that during an antenatal visit she was given three tablets to take all at the same time in order to prevent malaria, circle 'A' on the assumption that she took SP.

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

MN15. Check MN14 for medicine taken:

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

MN16. DURING THIS PREGNANCY, HOW MANY TIMES DID YOU TAKE SULPHADOXINE PYRE METHAMINE?

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

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

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

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

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

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

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

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, write the name of the place in the space provided on the questionnaire. 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'.

Dispensary, health centre or health post is typically the lowest level of care, or first point of entry into the health system.

Government hospital

It is a union comprising a number of partially self-governing states united by a central (federal) government.

State Govt is the self-governing status of the state and is a component of the federal government. It is the second hierarchy of the government.

Private medical sector : it is run by an individual, or group of person or association

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'. Then 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. Places that are not health facilities, other than home, should also be coded as 'Other' and described.

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

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

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

Low-birth weight babies are at higher risk of serious illness or death than other babies. Mothers are asked to give the baby's birth weight, 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 birth weight.

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 birth weight, 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 birth weight information or the appearance of the baby; circle '8' for 'DK'. In cases when the woman knows the birth weight 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 birth weight 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.

Birth weight is defined as the weight taken immediately after birth or within the first 24 hrs of life.

For example, where birth is at home and immediately after child is taken to hospital, then this is assumed to be birth weight. If mother takes child to hospital one day or week later, this is not weight at birth.

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

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

MN22A. HOW LONG AFTER DELIVERY OF (NAME) WERE YOU DISCHARGED FROM THE HOSPITAL?

Ask the woman to tell you how long she stayed in the hospital after the delivery of her baby before she was discharged from the hospital. If 'Immediately' circle '000', If time spent is less than '1 day or 24 hours' write the number of hours spent in front of Hours. If more than 24 hours write the number of days.

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

Circle the code corresponding to the response given.

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

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

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

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

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

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

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

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

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

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

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

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

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

ILLNESS SYMPTOMS MODULE

IS1. Check Household Listing, column HL9

Check column HL9 in Household Listing Form of the household questionnaire. If the respondent is the mother or caregiver of any child under age 5, then continue with IS2. Otherwise, go to next module.

IS2. SOMETIMES CHILDREN HAVE SEVERE ILLNESSES AND SHOULD BE TAKEN IMMEDIATELY TO A HEALTH FACILITY. WHAT TYPES OF SYMPTOMS WOULD CAUSE YOU TO TAKE YOUR CHILD TO A HEALTH FACILITY RIGHT AWAY?

This question asks for symptoms that would cause the respondent to take a child to a health facility right away. Probe by saying 'ANY OTHER SYMPTOMS' and keep asking for more signs or symptoms until the mother/caregiver cannot recall any additional symptoms.

Circle all symptoms mentioned, but do not prompt with any suggestions. . If you are not sure whether a certain sign as reported by the respondent fits in one of the above categories, write it down in full and check with your supervisor later.

If the respondent mentions a symptom not listed here, write the description of the symptom in the space provided for 'Other' and circle 'X' ('Y', and 'Z', for additional symptoms not listed).

CONTRACEPTION MODULE

The module should be administered to all women aged 15-49 years (including women age 15 and age 49). These questions deal with private behaviour and attitudes. They are designed to collect the basic information needed to estimate contraceptive prevalence rates and types of methods used.

Any other person that may be present during the interview should be asked to leave the interview area to ensure privacy. Even in cases where women are being interviewed alone, they will be reluctant to answer these questions, especially if they sense that you are part of a team that includes males and that her responses may be shared with the males in the team.

CP1. I WOULD LIKE TO TALK WITH YOU ABOUT ANOTHER SUBJECT – FAMILY PLANNING. ARE YOU PREGNANT NOW?

This question is important because later questions in this module will not need to be asked of pregnant women. A woman who is pregnant does not need to use contraception!

Circle the code corresponding to the response given. If she is pregnant, circle '1' and go to the next module. If the woman is unsure or does not know for certain if she is pregnant, circle '8' for 'Unsure or DK'.

CP2. COUPLES USE VARIOUS WAYS OR METHODS TO DELAY OR AVOID A PREGNANCY. ARE YOU CURRENTLY DOING SOMETHING OR USING ANY METHOD TO DELAY OR AVOID GETTING PREGNANT?

Circle the code corresponding to the response given. If the answer is 'No', go to the next module.

CP3. WHAT ARE YOU DOING TO DELAY OR AVOID A PREGNANCY?

Circle the code corresponding to the response given. Do not prompt the woman. If she mentions more than one method, circle the code for each method that is currently being used. If she mentions a method you do not know of, write her description in the space provided in 'Other' and circle 'X'. Since methods are effective for different lengths of time, you may have difficulty determining if a particular respondent is currently using a method. Current users of the pill should be taking pills daily. Methods such as condom use, vaginal methods and withdrawal are used with each act of intercourse, so current users of these methods will have used them during the most recent acts of intercourse.

Other methods provide ongoing protection without daily or regular action by the woman. Contraceptive injections may be administered 2 to 6 months earlier and still provide protection. Implants provide protection for up to 5 years or until removed. An IUD protects against pregnancy until it is removed or expelled.

Female sterilization: Also known as tubal ligation or tubectomy. It involves a surgical operation that cuts and ties separately the fallopian tubes (i.e. the female ducts through which the female egg passes into the womb after being released from the ovaries) with the aim of preventing fertilization by the sperms.

Male sterilization: It is also known as Vasectomy. It involves a surgical operation to cut, and tie separately the vas deferens (i.e. the male ducts which conduct sperms) with the aim of preventing the sperms from entering the womb during sexual intercourse.

I.U.C.D.: It is the abbreviated version of Intra Uterine Contraceptive Device. It is a special loop or coil which is inserted into the womb to prevent sperm from fertilizing the female egg after sexual intercourse.

Douche: It involves the use of syringe to wash the vagina with water or chemical solution immediately after intercourse with the aim of preventing the sperm from fertilizing the ovum.



Abstinence: It is a non-scientific method of birth control which involves staying away from sexual intercourse either permanently or for a period of time.

Withdrawal: It involves the man withdrawing before ejaculation during sexual intercourse.

Rhythm: It is a non-scientific method of birth control which involves deliberate avoidance of sexual intercourse during the "unsafe period" of a woman's menstrual cycle but indulging in the sex act during her "safe period". Safe period is that period outside the woman's ovulation period.

DIAPHRAGM: A dome-shaped rubber or plastic contraceptive device for women, placed inside the Vagina over the entrance to the womb to prevent sperm from entering.

NORPLANT: Trademarks for a removable skin implant dispensing a long-term contraceptive drug.



Note that vasectomy and tubectomy are different from other surgical operations on the male or female organ for other purposes.

If needed, consider the last 1 month as 'current use'.

If the woman has been sterilized, you will circle 'A' for 'Female sterilization' as the current method. If the woman's current partner has been sterilized, you will circle 'B' for 'Male sterilization' as the current method. However, if she is no longer married to (or living with) a former partner who had a vasectomy, this should not be noted as the current method. Lactational amenorrhoea method (LAM) should be circled only if the woman explicitly states that she is breastfeeding for contraceptive purposes or that she believes that she is being protected from the risk of pregnancy because she is breastfeeding.

UNMET NEED MODULE

Women with unmet need are those who are fecund and sexually active but are not using any method of contraception, and report not wanting any more children or wanting to delay the next child. The concept of unmet need points to the gap between women's reproductive intentions and their contraceptive behaviour. Questions used in this module as well as a number of other modules are used to assess whether women have an unmet need for family planning.

UN1. Check CP: Currently pregnant?

This is a filter that you will use to make sure that you do not 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.

UNMET NEED		UN
UN1. Check CP1. Currently pregnant?		
<input type="checkbox"/> Yes, currently pregnant → Continue with UN2 <input type="checkbox"/> No, unsure or DK → Go 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?	Yes1 No2	1 → UN4
UN3. Did you want to have a baby later on or did you not want any (more) children?	Later1 No more2	
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?	Have another child1 No more / None2 Undecided / Don't know8	1 → UN7 2 → UN13 8 → UN13

UN2. NOW I WOULD LIKE TO TALK TO YOU ABOUT YOUR CURRENT PREGNANCY. WHEN YOU GOT PREGNANT, DID YOU WANT TO GET PREGNANT AT THAT TIME?

Circle the code corresponding to the answer given. Skip to UN4 if 'Yes'. Otherwise, continue to the next question.

UN3. DID YOU WANT TO HAVE A BABY LATER ON OR DID YOU NOT WANT ANY (MORE) CHILDREN?

Circle the code corresponding to the answer given.

UN4. NOW I WOULD LIKE TO ASK SOME QUESTIONS ABOUT THE FUTURE. AFTER THE CHILD YOU ARE NOW EXPECTING, WOULD YOU LIKE TO HAVE ANOTHER CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY MORE CHILDREN?

Note that we want to make sure that pregnant women do not think that we are asking them if they want the child they are pregnant with now. Circle the code corresponding to the response given. If the woman wants to have another child, you should circle '1' and continue with UN7. If she wants no more children or does not want to have children at all, you should circle '2' and skip to UN13. If she is undecided or does not know, circle '8' and skip to UN13.

UN5. Check CP3. Currently using "Female sterilization"?**UN6. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE FUTURE. WOULD YOU LIKE TO HAVE (A/ANOTHER) CHILD, OR WOULD YOU PREFER NOT TO HAVE ANY (MORE) CHILDREN?**

Circle the code corresponding to the response given. If the woman wants to have a/another child, you should circle '1'. If she wants no more children or does not want to have children at all, you should circle '2' and skip to UN9. If she says she cannot get pregnant, circle '3' and skip to UN11. If she is undecided or does not know, circle '8' and skip to UN9.

UN7. HOW LONG WOULD YOU LIKE TO WAIT BEFORE THE BIRTH OF (A/ANOTHER) CHILD?

Here, you will also need to choose the appropriate phrasing for the question, based on what you already know about the respondent. This question should be asked of all women (pregnant or not pregnant) who say that they want to have another child.

Note that the answer can be given in months or years. Circle '1' if the response is in months or '2' if in years, and record the answer in the appropriate spaces. If she says she would like to have a baby right away, record 993 for 'Soon/Now'. If the woman says she cannot get pregnant, circle '994'. If the woman tells you she would like to wait until after she is married to have a child, record '995' for 'After marriage'. If she gives a different answer, circle '996' for 'Other'. If she says she does not know, circle '998'. For women who say that they cannot get pregnant, you should skip to UN11.

UN8. Check CP1. Currently pregnant?

Check CP1. If the woman is currently pregnant, mark the corresponding box and skip to UN13. If she is currently not pregnant, is unsure or does not know, continue with UN9.

UN9. Check CP2. Currently using a method?

Check CP2. If the woman is currently using a method, mark the corresponding box and skip to UN13. If she is currently not using a method, continue with UN10.

UN10. DO YOU THINK YOU ARE PHYSICALLY ABLE TO GET PREGNANT AT THIS TIME?

A woman who believes that she is incapable of becoming pregnant cannot be considered to have 'unmet need' for contraception. This question aims to learn whether the woman thinks she can conceive a child. Circle the code corresponding to the response given.

Make sure that the woman does not relate her current physical ability to get pregnant with her current marital status. It is important to emphasize to the woman, if necessary, that we are interested in her current physical ability – she may be physically able to get pregnant, but may think that this is not possible because she currently does not have a partner. In such cases, the woman should obviously be coded as 'Yes'.

UN11. WHY DO YOU THINK YOU ARE NOT PHYSICALLY ABLE TO GET PREGNANT?

If the woman does not believe that she is physically capable of becoming pregnant, we ask the reason(s) why. Circle the code corresponding to the answer. If more than one reason is given, circle all the codes for these responses.

UN12. Check UN11. "Never menstruated" mentioned?

Check UN11. If code 'C' is circled (Never menstruated), mark the corresponding box and go to the next module. If code 'C' is not circled, continue with UN13.

UN13. WHEN DID YOUR LAST MENSTRUAL PERIOD START?

Note that the answer can be given in months or years. Circle '1' if the response is in days, '2' if in weeks, '3' if in months, '4' if in years and record the answer in the appropriate spaces. If she says she is in menopause or has had hysterectomy, record 994. If the woman tells you she had her last menstrual period before her last birth, record '995'. If she says she has never menstruated, circle '996'.

FEMALE GENITAL MUTILATION/CUTTING MODULE

Female genital mutilation/cutting (FGM/C), or female circumcision, has been practised for hundreds of years by some population groups living in Africa and along the southern edge of the Arabian Peninsula. It involves total or partial removal of the external female genitalia. The operation is performed on young girls, usually before they reach the age of puberty. It is frequently performed, particularly in rural areas, without anaesthesia by traditional midwives and/or circumcision practitioners.

The World Health Organization has identified four types of FGM/C:

- **Clitoridectomy:** the removal of all or part of the clitoris
- **Excision:** the removal of all or part of both the clitoris and the labia minora
- **Infibulation:** the removal of all or part of the clitoris, labia minora and labia majora, followed by the stitching together of the edges of the wound so as to form a hood over the

FEMALE GENITAL MUTILATION/CUTTING		
FG1. HAVE YOU EVER HEARD OF FEMALE CIRCUMCISION?	Yes No	1→FG3
FG2. IN SOME COUNTRIES, THERE IS A PRACTICE IN WHICH A GIRL MAY HAVE PART OF HER GENITALS CUT. HAVE YOU EVER HEARD ABOUT THIS PRACTICE?	Yes No	2→Next Module
FG3. HAVE YOU YOURSELF EVER BEEN CIRCUMCISED?	Yes No	2→FG9
FG4. NOW I WOULD LIKE TO ASK YOU WHAT WAS DONE TO YOU AT THAT TIME.	Yes No	1→FG6
WAS ANY FLESH REMOVED FROM THE GENITAL AREA?	DK.....	
FG5. WAS THE GENITAL AREA JUST NICKED WITHOUT REMOVING ANY FLESH?	Yes No DK.....	
FG6. WAS THE GENITAL AREA SEWN CLOSED? <i>If necessary, probe: WAS IT SEALED?</i>	Yes No DK.....	

urethra and vagina leaving only a small posterior opening to allow the passage of urine and menstrual fluid

- Other manipulations of the labia: usually cutting without removal of any flesh.

After determining if the respondent has ever heard of FGM/C in questions FG1 and FG2, the module contains questions to determine if the respondent was circumcised and, if so, the type of circumcision and the type of practitioner who performed the operation (FG3 to FG8). Questions related to the type of circumcision are only intended to differentiate the most radical type of circumcision, 'Infibulation', and the least radical, 'Other manipulations of the labia', from other forms of mutilation ('Clitoridectomy' and 'Excision'). Results from previous surveys have indicated that respondents could not provide enough detailed information to make a more precise clarification.

FG1. HAVE YOU EVER HEARD OF FEMALE CIRCUMCISION?

Circle the code corresponding to the answer given. Skip to FG3 if 'Yes'. Otherwise, continue to the next question.

FG2. IN SOME COUNTRIES, THERE IS A PRACTICE IN WHICH A GIRL MAY HAVE PART OF HER GENITALS CUT. HAVE YOU EVER HEARD ABOUT THIS PRACTICE?

Circle the code corresponding to the answer given. If 'No', go to the next module.

FG3. HAVE YOU YOURSELF EVER BEEN CIRCUMCISED?

Circle the code corresponding to the answer given. If 'No', skip to FG9.

FG4. NOW I WOULD LIKE TO ASK YOU WHAT WAS DONE TO YOU AT THIS TIME. WAS ANY FLESH REMOVED FROM THE GENITAL AREA?

Circle the code corresponding to the answer given. Skip to FG6 if 'Yes' ('1').

FG5. WAS THE GENITAL AREA JUST NICKED WITHOUT REMOVING ANY FLESH?

To nick is to make a small cut in the edge or surface. Circle the code corresponding to the answer given.

FG6. WAS THE GENITAL AREA SEWN CLOSED?

Circle the code corresponding to the answer given. If necessary, probe: **WAS IT SEALED?**

FG7. HOW OLD WERE YOU WHEN YOU WERE CIRCUMCISED?

Write the age of respondent at circumcision. If the respondent does not know the exact age, probe to get an estimate. If she still says she does not remember or unsure, circle '98'.

FG8. WHO PERFORMED THE CIRCUMCISION?

First ask if she knows who circumcised her. Probe to find out the type of person who performed the operation. Circle the code corresponding to the answer given. If she knows it was a health professional but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other health professional' and circle '16'. If she knows it was a traditional person but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other traditional' and circle '26'. If she does not know who circumcised her, circle '98'.

FG9. Check CM5 for Number of daughters at home and CM7 for Number of daughters elsewhere, and sum the answers here

Check CM5 and CM7 of the Child Mortality module. Sum the answers to both questions and write the total.

FG10. JUST TO MAKE SURE THAT I HAVE THIS RIGHT, YOU HAVE (total number in FG9) LIVING DAUGHTERS. IS THIS CORRECT?

If the respondent says ‘Yes’ and if she has one or more living daughters continue with FG11. If the respondent says ‘Yes’ but she does not have any living daughters skip to FG22.

If the respondent says ‘No’, check responses to CM1 – CM10 and make corrections as necessary, until she answers ‘Yes’ to FG10.

FG11.

Ask the respondent to tell you the name(s) of her daughter(s), beginning with the youngest daughter (if more than one daughter). Write down the name of each daughter in FG12. Then, ask questions FG13 to FG20 for each daughter at a time.

The total number of daughters in FG12 should be equal to the number in FG9

If more than 4 daughters, use additional questionnaires

At this point, you will start the second set of questions, which are related to the respondent’s daughter(s) (FG12-FG21). These allow for the tracking of intergenerational changes in the practice of FGM/C. If (at least one of) the respondent’s daughter(s) is circumcised, questions that focus on the most recently circumcised daughter are asked about the type of circumcision, the age at circumcision, and the type of practitioner who performed the operation.

FG11. Ask the respondent to tell you the name(s) of her daughter(s), beginning with the youngest daughter (if more than one daughter). Write down the names of each daughter in FG12. Then, ask questions FG13 to FG20 for each daughter at a time.

The total number of daughters in FG12 should be equal to the number in FG9

If more than 4 daughters, use additional questionnaires

	Daughter #1	Daughter #2	Daughter #3	Daughter #4
FG12. Name of daughter	_____	_____	_____	_____
FG13. How old is (name)?	Age _____	Age _____	Age _____	Age _____
FG14. Is (name) younger than 15 years of age?	Yes.....1	Yes.....1	Yes.....1	Yes.....1
	No.....2	No.....2	No.....2	No.....2
	If 'No', go to FG13 for next daughter. If no more daughters, go to FG22	If 'No', go to FG13 for next daughter. If no more daughters, go to FG22	If 'No', go to FG13 for next daughter. If no more daughters, go to FG22	If 'No', go to FG13 for next daughter. If no more daughters, go to FG22

FG12. Name of Daughter

Record the daughter’s name in the space provided.

FG13. HOW OLD IS (name)?

Record the age of her daughter in the space provided.

FG14. Is (name) younger than 15 years of age?

Check FG13 and circle ‘1’ for ‘Yes’ if her daughter is less than 15 years of age. If ‘No’, circle ‘2’ and skip to FG13 for next daughter(s). If there are no more daughters, skip to FG22.

FG15. IS (name) CIRCUMCISED?

Record the corresponding answer. If ‘No’, skip to FG13 for next daughter. If there are no more daughters, skip to FG22.

FG16. HOW OLD WAS (*name*) WHEN THIS OCCURRED?

Enter the daughter's age at the time she was circumcised in the space provided. If the respondent does not know how old her daughter was at circumcision, probe to get an estimate. If she is still unable to provide her daughter's age at circumcision, circle '98'.

FG17. NOW I WOULD LIKE TO ASK YOU WHAT WAS DONE TO (*name*) AT THAT TIME. WAS ANY FLESH REMOVED FROM THE GENITAL AREA?

Circle the code corresponding to the answer given. If 'Yes', skip to FG19. Otherwise, continue to the next question.

FG18. WAS HER GENITAL AREA JUST NICKED WITHOUT REMOVING ANY FLESH?

Circle the code corresponding to the answer given.

FG19. WAS HER GENITAL AREA SEWN CLOSED?

Circle the code corresponding to the answer given. If necessary, probe: **WAS IT SEALED?**

FG20. WHO PERFORMED THE CIRCUMCISION?

First ask if she knows who circumcised her daughter. Probe to find out the type of person who performed the operation. Circle the code corresponding to the answer given. If she knows it was a health professional but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other health professional' and circle '16'. If she knows it was a traditional person but you are unsure how to code the person mentioned, write the words used to describe the person in the space provided for 'Other traditional' and circle '26'. If she does not know who circumcised her daughter, circle '98'.

FG21.

Go back to FG13 for next daughter. If there are no more daughters, continue with FG22.

FG22. DO YOU THINK THIS PRACTICE SHOULD BE CONTINUED OR SHOULD IT BE DISCONTINUED?

The last question in the module aims to elicit the respondent's opinion of FGM/C. The question is asked of all women who have ever heard of FGM/C (FG1=1 or FG2=1). Circle the code corresponding to the answer given.

ATTITUDES TOWARD DOMESTIC VIOLENCE

In this module, we have only one question, which asks for the woman's opinion on domestic violence. Note that we are not asking whether the woman has been subjected to domestic violence. Research has shown, however, that there is overall agreement in the proportion of women who think that a husband may be justified in hitting or beating his wife in certain situations, and the actual prevalence of domestic violence. The correlation may be on a societal level, and not on an individual level.

DV1. SOMETIMES A HUSBAND IS ANNOYED OR ANGERED BY THINGS THAT HIS WIFE DOES. IN YOUR OPINION, IS A HUSBAND JUSTIFIED IN HITTING OR BEATING HIS WIFE IN THE FOLLOWING SITUATIONS:

[A] IF SHE GOES OUT WITHOUT TELLING HIM?

[B] IF SHE NEGLECTS THE CHILDREN?

[C] IF SHE ARGUES WITH HIM?

[D] IF SHE REFUSES TO HAVE SEX WITH HIM?

[E] IF SHE BURNS THE FOOD?

Read each item aloud. For each situation, circle the code corresponding to the answer given – ‘1’ if ‘Yes’ (she thinks the husband is justified in hitting or beating his wife in that situation), ‘2’ if ‘No’, and ‘8’ if the respondent does not know or does not have an opinion.

MARRIAGE/UNION MODULE

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

In the questionnaire and this manual, ‘marriage’ always refers to both formal and informal unions, such as living together. An informal union is one in which the man and woman live together for some time, intending to have a lasting relationship, but do not have a formal civil or religious ceremony.

For example, if a woman went to live with her boyfriend and his family and stayed there for several years, they would be considered ‘living together’, whether or not they have any children. On the other hand, if a woman has a boyfriend but has never lived with him, she would not be considered in a union. Casual sexual encounters are not included here.

MA1. ARE YOU CURRENTLY MARRIED OR LIVING TOGETHER WITH A MAN AS IF MARRIED?

The options here are currently married, living with a man, or not in union (the woman is neither married nor living with a man). Circle the code corresponding to the respondent’s status at the time of the interview. If the woman is currently neither married or in a union, skip to MA5.

MA2. HOW OLD IS YOUR HUSBAND/PARTNER?

If she knows the age of her current partner on his last birthday, enter his age in the space provided. If she does not know his age, circle ‘98’.

MA3. BESIDES YOURSELF, DOES YOUR HUSBAND/PARTNER HAVE ANY OTHER WIVES OR PARTNERS OR DOES HE LIVE WITH OTHER WOMEN AS IF MARRIED?

In this question, we are interested in the wives and/or live-in partners that the respondent’s husband/partner has. Circle the code corresponding to the answer given. If ‘No’, skip to MA7 and if ‘don’t know’, also skip to MA7 as well.

MA4. HOW MANY OTHER WIVES OR PARTNERS DOES HE HAVE?

Similar to the previous question, we are interested here in the number of wives and/or live-in partners the respondent’s husband has. Enter the number of other wives in the space provided. Use leading zeros if necessary. For all answers, skip to MA7.

MA5. HAVE YOU EVER BEEN MARRIED OR LIVED TOGETHER WITH A MAN AS IF MARRIED?

For women who are not currently married or living with a man, ask whether they have ever been married or lived with a man. Remember that ‘married’ refers to both formal and informal unions.

Circle the code corresponding to the response given. Notice that there are two different response categories for a 'Yes' response: 'Yes, formerly married' and 'Yes, formerly lived with a man'. Be sure to make the distinction between the two categories. If the respondent just answers 'Yes', probe by asking, **"WERE YOU FORMERLY MARRIED OR DID YOU LIVE WITH A MAN?"** If she was formerly married and also reports living with a man, circle the code for 'Yes, formerly married'.

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

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

Circle the code corresponding to the response given. For a woman who is not currently married and not currently living with someone but who was formerly in a union, record her current marital status at the time of the interview. Since she was in a union at one time, but is not on the day you are interviewing her, she will be either widowed, divorced or separated.

You should use 'widowed' (a) for women who were married and their husband died, and (b) for women who were in an informal union and their partner died. 'Divorced' should be used for women who were formally married and whose marriage formally ended. 'Separated' should be used (a) for women who were married, but are no longer continuing the marriage with their husband, and (b) for women who were in an informal union and are no longer continuing the union with their partner.

MA7. HAVE YOU BEEN MARRIED OR LIVED WITH A MAN ONLY ONCE OR MORE THAN ONCE?

As with MA1, we are interested in formal marriages as well as informal arrangements. If a woman was married or lived with a man and then was widowed, divorced, or separated from her husband or partner and is now either married to or living with someone else, record 'More than once'. If a woman is not currently married or in an informal union but was previously married or living with someone else two or more times, record 'More than once' by circling '2'. If she has married or lived with someone else only once, circle '1.'

Note that the question refers to periods of marriage or informal unions, and not to numbers of husbands or partners. If a woman was married to a man and divorced him, and then married the same person again, she should be considered as having married 'More than once'. The same applies to informal unions with the same person.

MA8. IN WHAT MONTH AND YEAR DID YOU FIRST MARRY OR START LIVING WITH A MAN AS IF MARRIED?

If the respondent knows the date that she first married or started living with a man as if married, write it in the appropriate spaces for 'Month' and 'Year'. You will need to convert the month into numbers, as instructed earlier. For example, January is '01,' February is '02,' March is '03,' etc.

If she does not recall the date that she first married or started living with a man as if married, ask whether she has any documentation that might give the date. If she does not know or have documentation of the month, circle '98' for 'DK month' and ask her the year that she first married or started living with a man as if married. Enter the year in the space provided and go to next module. If she does not know and does not have documentation of the year that she first married or started living with a man as if married, circle '9998' for 'DK year'.

MA9. HOW OLD WERE YOU WHEN YOU STARTED LIVING WITH YOUR FIRST HUSBAND/PARTNER?

As with other age questions, if she does not know, probe. For instance, ask how old she was when her first child was born and then ask how long before or after giving birth she began living with her first husband or partner. Do not leave this question blank.

SEXUAL BEHAVIOUR MODULE

The purpose of this module is to obtain information to help programme managers and policy makers plan more effective family planning/reproductive health programmes. **Before continuing, ensure that no one else, besides you and the respondent, is present for the interview and the respondent's answers will remain strictly confidential. If the respondent's privacy cannot be ensured, STOP HERE and do not ask the questions in this module until you have privacy again.**

These questions may be embarrassing for some respondents; therefore, ask them in a matter-of-fact voice and do not make the respondent feel embarrassed by your own behaviour. A common reaction for people who are embarrassed is to giggle or laugh. If you laugh in return or act as if you are embarrassed too, it will make the respondent think that the questions are not serious. Make sure you maintain a serious attitude.

SB1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT SEXUAL ACTIVITY IN ORDER TO GAIN A BETTER UNDERSTANDING OF SOME IMPORTANT FAMILY LIFE ISSUES. THE INFORMATION YOU SUPPLY WILL REMAIN STRICTLY CONFIDENTIAL. HOW OLD WERE YOU WHEN YOU HAD SEXUAL INTERCOURSE FOR THE VERY FIRST TIME?

It is very important that you read the first sentence, and to emphasize to the respondent that her responses will remain strictly confidential. If necessary, explain to her once again that the information she shares with you will only be used for statistical purposes; that her name will never be revealed; and her responses will not be shared with others in the community or elsewhere.

The age we are asking about is the age of the respondent the very first time she had sexual intercourse. It does not matter whether the woman continued to have a relationship with this person. We are not asking about the first time with her current partner, but rather, the first experience of sexual intercourse in her entire life.

If the response is 'Never had intercourse', circle '00' and skip to the next module. Otherwise, enter the age in years on the line provided. If she was less than 10 years old, use a zero to fill in the first space.

If the respondent tells you that her first time was when she started living with her first husband, record her response by circling '95'. You will have collected this information in the Marriage/Union module. If the respondent says that her first time was with her first husband, but it was before they began living together, probe for the respondent's age at the time.

If the respondent says she does not know how old she was when she first had intercourse, probe by relating it to how old she was when she first married or had her first child. However, when doing this probing, be certain not to assume that the first time she had sex was at the time of her first marriage. If she has never married and/or never had children, you can probe by relating the timing of the first intercourse to whether she was going to school at the time, or to places that she might have lived. The respondent should feel comfortable in taking her time to think about her response to remember correctly.

SB2. THE FIRST TIME YOU HAD SEXUAL INTERCOURSE, WAS A CONDOM USED?

If used correctly, condoms can reduce the risk of transmission of AIDS and other sexually transmitted infections. We do not mention this fact to the respondent, because we do not want to influence her answer here. In this question we are referring to the first occasion the respondent had sexual intercourse.

Circle the code for the response given.

SB3. WHEN WAS THE LAST TIME YOU HAD SEXUAL INTERCOURSE?

By 'the last time you had sexual intercourse' we are referring to the respondent's most recent act of sexual intercourse.

In most cases you will record the respondent's answer by using the same units of measure she used in her response. For example, if she says '3 weeks ago', circle '2' and write '03' in the boxes next to 'Weeks ago'. If she says "4 days ago," circle '1' and write '04' next to 'Days ago'. If the respondent says "last night," circle '1' and write '00' for 'Days ago'. If the respondent answers with a month, for example, if she says "it was in December," count the number of months and record months. It may be helpful to write the name of the month in the questionnaire. All responses within the last 12 months will be recorded in months, weeks or days.

If the response is 12 months or more, circle '4' and record the answer in years. The 'Years ago' row should be used only if the last intercourse was more than 1 year ago. There should never be a response recorded '00' 'Years Ago'. If the response is 12 months or more, go to the SB13.

While this question is a simple one, respondents who have not had sexual intercourse recently are likely to round off their answers, and it will be up to you to learn from respondents whether they last had sex more or less than a year ago. For example, a woman with no regular sexual relationships may engage in sexual intercourse on an irregular basis. Perhaps the last time she had sexual intercourse was during a trip she took 10 months ago; she will be more likely to respond "about a year ago," rather than count how many months ago it was. Therefore, you will need to probe all responses of 'a year ago' with: "DO YOU REMEMBER WHICH MONTH IT WAS?" In this way, we will be able to determine whether the respondent actually had intercourse within the last year or more than a year ago. Respondents who last had sexual intercourse, 10, 11, 12, 13, 14 or 15 months ago may all give responses of 'a year ago'; it will be up to you to clarify when it actually was. Asking the respondent "WAS IT MORE OR LESS THAN A YEAR AGO" is not a very good probe for this question; it would be best to ask, "DO YOU REMEMBER WHAT MONTH IT WAS?"

If a woman has not yet resumed intercourse since she had her last child, check CM12 for the month and year of birth of her last child, and ask how long before the birth of that child she had sex the last time.

SB4. THE LAST TIME YOU HAD SEXUAL INTERCOURSE WAS A CONDOM USED?

In this question, this time, we are referring only to the last occasion the respondent had sexual intercourse.

Circle the code for the response given.

SB5. WHAT WAS YOUR RELATIONSHIP TO THIS PERSON WITH WHOM YOU LAST HAD SEXUAL INTERCOURSE?

In this question, we want to know the relationship of the respondent to the person with whom she last had sex. If the person is 'boyfriend', ask: **"WERE YOU LIVING TOGETHER AS IF MARRIED?"** If 'Yes', circle '2' for 'Cohabiting partner'. If 'No', circle '3' for 'Boyfriend' and skip to SB7.

Note that we are interested in the relationship of the woman with the person mentioned at the time they last engaged in sexual intercourse. For example, if a woman's last partner was a boyfriend she was living with at the time, you would record 'Cohabiting partner' even though they are no longer living together. They were living together at the time of the sexual encounter. Record the status of the relationship that existed at the time the two people last had sexual intercourse. It is most important to determine whether or not the sexual partner was someone the respondent was living with at the time they last had sexual intercourse.

SB6. Check MA1:

Check MA1 of the Marriage/Union module. If the respondent is currently married or living with a man, check the corresponding box and skip to SB8. If the woman is not married or in union, check the corresponding box and continue to the next question.

SB7. HOW OLD IS THIS PERSON?

Sometimes young women have sexual partners who are significantly older than they are; this can put them at higher risk of HIV infection. In this question we ask young women to tell us the age of their sexual partners.

Record the age in the space provided. If she does not know, ask her to estimate the age of this person. If the respondent is unable to estimate the partner's age, probe by asking **"ABOUT HOW OLD IS THIS PERSON?"**. If she still says she does not know, circle '98' and continue to the next question.

SB8. HAVE YOU HAD SEXUAL INTERCOURSE WITH ANY OTHER PERSON IN THE LAST 12 MONTHS?

We are interested in finding out whether the respondent had sexual intercourse with anyone else within the past 12 months. We want the respondent to take their time in answering because we are asking about a fairly long period of time – the entire year preceding the date of interview. Continue to the next question if 'Yes'. If 'No', skip to SB15.

SB9. THE LAST TIME YOU HAD SEXUAL INTERCOURSE WITH THIS OTHER PERSON, WAS A CONDOM USED?

This question asks about condom use with 'this other person'. This is the person she had intercourse with during the last 12 months, but not the person she had her last intercourse with.

Circle the code for the response given.

SB10. WHAT WAS YOUR RELATIONSHIP TO THIS PERSON?

This question asks about the relationship she had with this other person. It should refer to the relationship she had with the person at the time of intercourse.

The questions should be asked, probed and recorded the same way as SB5. If the person is 'boyfriend', ask: **"WERE YOU LIVING TOGETHER AS IF MARRIED?"** If 'Yes', circle '2' for 'Cohabiting partner'. If 'No', circle '3' for 'Boyfriend' and skip to SB12.

SB11. Check MA1 and MA7:

Check MA1 and MA7 of the Marriage/Union module. If the respondent is currently married or living with a man and married only once, check the corresponding box and skip to SB13. For all other cases, check the corresponding box and continue to the next question.

SB12. HOW OLD IS THIS PERSON?

Again, we are looking for the age of the person she had sexual intercourse with at the time of the sexual encounter.

Record the age in the space provided. If she does not know, ask her to estimate the age of this person. If the respondent is unable to estimate the sexual partner's age, probe by asking "ABOUT HOW OLD IS THIS PERSON?". If she still says she does not know, circle '98' and continue to the next question.

SB13. OTHER THAN THESE TWO PERSONS, HAVE YOU HAD SEXUAL INTERCOURSE WITH ANY OTHER PERSON IN THE LAST 12 MONTHS?

Circle the code corresponding to response given. Continue to the next question if the response is 'Yes'. If 'No', skip to SB15.

SB14. IN TOTAL, WITH HOW MANY DIFFERENT PEOPLE HAVE YOU HAD SEX IN THE LAST 12 MONTHS?

This is the total number of different partners the respondent has had sexual intercourse with in the last 12 months, including the ones already mentioned.

Enter the total in the space provided. If her response is less than 10, use a leading zero. Since this question is asked only if the respondent has had sexual intercourse with at least three partners in the last 12 months, the answer should never be '00', '01' or '02'.

SB14A. HOW MANY OF THE PEOPLE IN SB14 ARE NON MARITAL PARTNERS YOU HAD SEXUAL INTERCOURSE WITH IN THE LAST 12 MONTHS?

Among the total number of partners the respondent has had sexual intercourse with in the last 12 months in SB14; the respondent should give the number of those partners of which she is not married to.

SB14B. FOR ALL THE SEXUAL INTERCOURSE WITH NON MARITAL PARTNERS IN THE LAST 12 MONTHS (FROM DATE OF THIS INTERVIEW), WAS A CONDOM USED?

Among the total number of partners the respondent has had sexual intercourse with in the last 12 months in SB14B; the respondent should give the number of those partners of which condom was used.

SB15. IN TOTAL, WITH HOW MANY DIFFERENT PEOPLE HAVE YOU HAD SEXUAL INTERCOURSE IN YOUR LIFETIME?

This is the total number of different partners the respondent has had sexual intercourse in her lifetime. Enter the total in the space provided. If her response is less than 10, use a leading zero. If a non-numeric answer is given, probe to get an estimate. If number of partners is 95 or more, write '95'.

HIV/AIDS MODULE

The purpose of this module is to obtain information to help programme managers and policy makers plan more effective programmes to prevent HIV infection. The questions assess knowledge, attitudes and behaviour related to AIDS transmission, prevention and testing for the virus that causes AIDS.

SURVEY COORDINATORS: THROUGHOUT THIS MODULE THE TERM “AIDS VIRUS” IS USED ALTHOUGH, TECHNICALLY SPEAKING, AIDS IS THE DISEASE CAUSED BY THE HUMAN IMMUNODEFICIENCY VIRUS (HIV). HOWEVER, AMONG PUBLIC, THE TERM AIDS IS KNOWN MORE WIDELY COMPARED TO HIV AND THE DISTINCTION BETWEEN AIDS AND HIV MAY NOT BE VERY CLEAR. IN ORDER TO AVOID “DON’T KNOW” RESPONSES TO THE QUESTION, THIS MODULE USES THE TERM AIDS VIRUS. DURING THE TRAINING, THIS SHOULD BE EMPHASIZED AND INTERVIEWERS SHOULD KNOW THAT THE OBJECTIVE IS TO REFER TO THE VIRUS, NOT THE ILLNESS.

First, questions are asked to estimate the respondent’s basic knowledge about HIV transmission and AIDS.

HA1. NOW I WOULD LIKE TO TALK WITH YOU ABOUT SOMETHING ELSE. HAVE YOU EVER HEARD OF AN ILLNESS CALLED AIDS?

This question serves as an introduction and allows us to verify whether a respondent has heard of AIDS. If there is a local term for AIDS, use the local term in addition to ‘AIDS’.

If a respondent has never heard of the AIDS, skip to WM11.

The following questions HA2-HA8 ask the respondent about specific ways to avoid HIV transmission. They focus on programmatically important ways to avoid HIV – by limiting the number of partners and by using condoms. They also probe into misconceptions concerning HIV transmission, through mosquito bites or sharing food, for example.

For questions HA2-HA7 circle the code for the response given. If the respondent cannot provide a ‘Yes’ or ‘No’ answer, circle ‘8’ for ‘DK’. Do not prompt the respondent or indicate the ‘correct’ answer in any way.

HA2. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE AIDS VIRUS BY HAVING JUST ONE UNINFECTED SEX PARTNER WHO HAS NO OTHER SEX PARTNERS?

HA3. CAN PEOPLE GET THE AIDS VIRUS BECAUSE OF WITCHCRAFT OR OTHER SUPERNATURAL MEANS?

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?

HIV/AIDS		HA
HA1. NOW I WOULD LIKE TO TALK WITH YOU ABOUT SOMETHING ELSE.	Yes.....1	
HAVE YOU EVER HEARD OF AN ILLNESS CALLED AIDS?	No.....2	2=WM11
HA2. CAN PEOPLE REDUCE THEIR CHANCE OF GETTING THE HIV VIRUS THAT CAUSES AIDS BY HAVING JUST ONE UNINFECTED SEX PARTNER WHO HAS NO OTHER SEX PARTNERS?	Yes.....1 No.....2 DK.....8	
HA3. CAN PEOPLE GET THE HIV VIRUS THAT CAUSES AIDS BECAUSE OF WITCHCRAFT OR OTHER SUPERNATURAL MEANS?	Yes.....1 No.....2 DK.....8	

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 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'.

HA8A. CAN THE AIDS VIRUS IN AN INFECTED MOTHER BE PREVENTED FROM INFECTING AN UNBORN CHILD BY GIVING DRUGS THAT REDUCE THE HIV VIRUS IN MOTHER?

As in HA8, this question is aimed at testing the knowledge of the respondent in the area drugs that can reduce HIV virus.

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 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 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 teacher be allowed to continue teaching?

HA10. WOULD YOU BUY FRESH VEGETABLES FROM A SHOPKEEPER OR VENDOR IF YOU KNEW THAT THIS PERSON HAD THE AIDS VIRUS?**HA11. IF A MEMBER OF YOUR FAMILY GOT INFECTED WITH THE AIDS VIRUS, WOULD YOU WANT IT TO REMAIN A SECRET?****HA12. IF A MEMBER OF YOUR FAMILY BECAME SICK WITH AIDS, WOULD YOU BE WILLING TO CARE FOR HER OR HIM IN YOUR HOUSEHOLD?**

The following questions aim to obtain information about the level of 'unmet need' for HIV-testing and will be asked to women with a live birth in last 2 years and received antenatal care. They first ask about AIDS counselling and experience of HIV testing. Voluntary testing and counselling are now encouraged, in the belief that if a person knows his or her status, he or she is more likely to adopt behaviours to prevent contracting the virus or (if positive) transmitting it. Many of those who get tested do not return to learn the results of the test, but the proportion of those who return should rise as the quality of pre-test counselling improves. It is important to obtain an estimate of the number of those tested who return to learn the results, in order to monitor this proxy indicator of the quality of available counselling and the level of demand for such services.

HA13. Check CM13: Any live birth in last 2 years?

Check CM13 in the Maternal and Newborn Health module to see if the woman has any live births in last 2 years. If the respondent has no live births in last 2 years check the box marked 'No' and skip to HA24. If she has a live birth in last 2 years check the corresponding box and continue with HA14.

HA14. Check MN1: Received antenatal care?

Check the respondent's answer to MN1 in the Maternal and Newborn Health module regarding whether or not she received antenatal care. If the respondent has received antenatal care check the box marked 'Yes' and continue with HA15. If she has not received antenatal care in last 2 years check the corresponding box and skip to HA24.

HA15. DURING ANY OF THE ANTENATAL VISITS FOR YOUR PREGNANCY WITH (*name*), WERE YOU GIVEN ANY INFORMATION ABOUT

[A] BABIES GETTING THE AIDS VIRUS FROM THEIR MOTHER?

[B] THINGS THAT YOU CAN DO TO PREVENT GETTING THE AIDS VIRUS?

[C] GETTING TESTED FOR THE AIDS VIRUS?

WERE YOU:

[D] OFFERED A TEST FOR THE AIDS VIRUS?

We want to know if someone spoke with the respondent about AIDS or the AIDS virus during any of her antenatal care visits during this pregnancy. This covers topics such as babies getting the AIDS virus, things that you can do to prevent getting the AIDS virus, or getting tests for the AIDS virus. It does not matter whether the topic was discussed only once or more than once, or discussed in one visit or over several visits.

HA16. I DON'T WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR THE AIDS VIRUS AS PART OF YOUR ANTENATAL CARE?

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she was tested. Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to HA19.

HA17. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?

Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go to get the results.

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she knows the results of the test. Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to HA22.

HA18. REGARDLESS OF THE RESULT, ALL WOMEN WHO ARE TESTED ARE SUPPOSED TO RECEIVE COUNSELING AFTER GETTING THE RESULT. AFTER YOU WERE TESTED, DID YOU RECEIVE COUNSELLING?

Circle the code corresponding to the response.

All answers should skip to HA22.

HA19. Check MN17: Birth delivered by health professional (A, B, or C)?

Check the respondent's answer to MN17 in the Maternal and Newborn Health module regarding whether or not this birth was delivered by a health professional (doctor, nurse/midwife, or auxiliary midwife). If the birth was delivered by a health professional check the box marked 'Yes' and continue with HA20. If the birth was not delivered by a health professional check the corresponding box and skip to HA24.

HA20. I DO NOT WANT TO KNOW THE RESULTS, BUT WERE YOU TESTED FOR THE AIDS VIRUS BETWEEN THE TIME YOU WENT FOR DELIVERY BUT BEFORE THE BABY WAS BORN?

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she was tested. Circle the code corresponding to the response. If the answer is 'No', skip to HA24.

HA21. I DON'T WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?

Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go to get the results.

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she knows the results of the test. Circle the code corresponding to the response.

HA22. HAVE YOU BEEN TESTED FOR THE AIDS VIRUS SINCE THAT TIME YOU WERE TESTED DURING YOUR PREGNANCY?

Be clear to the respondent that you are not asking to know the results of the test, simply whether or not she was tested. Circle the code corresponding to the response. If the answer is 'Yes', skip to HA25. If the answer is 'No', continue with HA23.

HA23. WHEN WAS THE MOST RECENT TIME YOU WERE TESTED FOR THE AIDS VIRUS?

Circle the code corresponding to the response.

All answers should skip to WM11.

HA24. I DO NOT WANT TO KNOW THE RESULTS, BUT HAVE YOU EVER BEEN TESTED TO SEE IF YOU HAVE THE AIDS VIRUS?

Ask the respondent if she was tested for the HIV. Be clear to the respondent that you are not asking to know the results of the test. Circle the code for the response given. If her answer is 'No', skip to HA27.

HA25. WHEN WAS THE MOST RECENT TIME YOU WERE TESTED?

Circle the code corresponding to the response.

HA26. I DO NOT WANT TO KNOW THE RESULTS, BUT DID YOU GET THE RESULTS OF THE TEST?

Sometimes people are tested for the AIDS virus but are not told whether or not they have the virus, or do not go to get the results.

It is important that you do not attempt to find out the HIV status of any respondent who has been tested, or simply that you have any interest in knowing her HIV status. Ask the question, ensuring that the respondent knows that you are not interested in learning the results of any test she may have undergone. Circle the code corresponding to her response.

All answers should skip to WM11.

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.

WM11. Record the time

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

WM12. Is the respondent the mother or caregiver of any child age 0-4 living in this household?**Check household listing, column HL9.**

If the respondent is the mother or caregiver of any child age 0-4 living in this household then go to QUESTIONNAIRE FOR CHILDREN UNDER FIVE for that child and start the interview with this respondent. Otherwise end the interview with this respondent by thanking her for her cooperation. Check for the presence of any other eligible woman or children under-5 in the household.

OBSERVATIONS

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

HOW TO FILL IN THE QUESTIONNAIRE FOR CHILDREN UNDER FIVE

The purpose of the Questionnaire for Children Under Five is to provide information on a wide range of MICS4 indicators relating to the first 5 years of life. You will have identified children under five, eligible for this questionnaire, after you have completed the Household Listing Form in the Household Questionnaire.

To collect information on children under five by using this questionnaire, we have to identify a respondent who can answer detailed questions on the health and well-being of these children. If the mother is living in the same household as the eligible child (in other words, if she is listed in the Household Listing, together with the child), then she is obviously the person who should be interviewed for that child. If the mother of the eligible child is not listed in the Household Listing (she may be deceased or living elsewhere), you should have identified a person in the Household Listing who takes primary responsibility for raising and caring for the child. This person can be a man or a woman.

This questionnaire is to be administered to all mothers or primary caregivers (see the Household Listing, column HL9) who care for a child that lives with them and is under the age of 5 years (see the Household Listing, column HL6).

A separate form should be filled in for each eligible child listed in the Household Questionnaire – check column HL9 on the Household Listing.

UNDER-FIVE CHILD INFORMATION PANEL

UF1-UF8 should be filled in before you start the interview.

UF1. E.A name/Cluster number (E.A Code)

Enter the enumeration area name and cluster number/E .A code from the Household Questionnaire, question HH1.

UF2. Household number

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

UF3. Child's name

Enter the child's name from the Household Questionnaire, column HL2 of the Household Listing. The child's name should be used throughout the interview. In order to prevent confusion during the interview, his/her name is recorded here.

UF4. Child's line number

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

UF5. Mother's / Caregiver's name

Enter the mother's/primary caregiver's name from the Household Questionnaire, column HL2 of the Household Listing.

UF6. Mother's / Caregiver's line number

Enter the mother's/primary caregiver's line number from the Household Questionnaire, column HL1 of the Household Listing.

UF7. Interviewer name and number

Enter your own name and identifying number. You will be provided with these identification numbers during training.

UF8. Day / Month / Year of interview

Enter the date of the interview: day/month/year. If the interview is not completed on your first visit and you visit the household to interview the mother/caregiver 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 caregiver of the under-five child.

Repeat greeting if not already read to this mother/primary caregiver: **"WE ARE FROM NATIONAL BUREAU OF STATISTICS. WE ARE WORKING ON A PROJECT CONCERNED WITH FAMILY HEALTH AND EDUCATION. I WOULD LIKE TO TALK TO YOU ABOUT (*name*)'S HEALTH AND WELL-BEING. THE INTERVIEW WILL TAKE ABOUT 20 MINUTES. ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?"**

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

MICS QUESTIONNAIRE FOR CHILDREN UNDER FIVE NIGERIA	
UNDER-FIVE CHILD INFORMATION PANEL UF	
<p><i>This questionnaire is to be administered to all mothers or caregivers (see Household Listing Form, column HL9) who care for a child that lives with them and is under the age of 5 years (see Household Listing Form, column HL6).</i></p> <p><i>A separate questionnaire should be used for each eligible child.</i></p>	
UF1. Cluster number	UF2. Household number:
UF3. Child's name: Name: _____	UF4. Child's line number: _____
UF5. Mother's / Caregiver's name: Name: _____	UF6. Mother's / Caregiver's line number: _____
UF7. Interviewer's name and number: Name: _____	UF8. Day / Month / Year of interview: ____/____/____

complete the questionnaire for under-5 will be different than the household or individual women questionnaire and normally a separate consent is required to do this interview.

NOW I WOULD LIKE TO TALK TO YOU MORE ABOUT (*child's name from UF3*)'S HEALTH AND OTHER TOPICS. THIS INTERVIEW WILL TAKE ABOUT 20 MINUTES. AGAIN, ALL THE INFORMATION WE OBTAIN WILL REMAIN STRICTLY CONFIDENTIAL AND YOUR ANSWERS WILL NEVER BE SHARED WITH ANYONE OTHER THAN OUR PROJECT TEAM. MAY I START NOW?"

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

If permission is given, go to UF12 to record the time and then begin the interview. If the respondent does not agree to continue, complete UF9, thank her/him and go to the next interview. Later, discuss the refusal with your supervisor; you or another person from the team may attempt to interview the respondent for a second time. This will depend on your description of the refusal. However, remember that the respondent's participation in the survey must be on a voluntary basis, and potential respondents must never be forced to participate.

UF10. Field edited by (Name and number)

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

UF11. Data entry clerk (Name and number)

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

UF12. Record the time

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

UF9. Result of interview for children under 5

Complete this question once you have concluded the interview. Remember that the code refers to the mother or primary caregiver 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 caregiver after repeated visits, circle '02' for 'Not at home'. If the mother/primary caregiver 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 caregiver is incapacitated, circle '05'. If you have not been able to complete this questionnaire for another reason, you should circle '96' for 'Other' and specify the reason in the space provided.

Ask the mother/primary caregiver to collect all the birth certificates and health/immunization cards she has for this child before you begin the interview. You will need these during the interview.

AGE MODULE

Date of birth and age. You will begin the interview with questions about the child's date of birth and age. These are two of the most important questions in the interview, since almost all analysis of the data depends on the child's exact age. While completed age in years is sufficient for women's interviews, we need to obtain accurate information on the child's age in months. This is necessary because some of the analysis of the information that you will be collecting can only be done on the basis of age in months. You will collect this information by learning the child's date of birth. It will then be possible to compare the date of interview with the date of birth of the child and, after the data is collected, calculate the child's age in months by comparing these two pieces of information.

The questions on age and date of birth must be asked independently from similar questions on the Household Questionnaire and Questionnaire for Individual Women. The person you may be interviewing for this questionnaire may be the same woman you interviewed for the Questionnaire for Individual Women, and you may have obtained dates of birth of her children in that questionnaire. Also, you may have obtained the child's age in the Household Questionnaire. Even in such cases, you must ask these questions again.

THE CHILD'S DATE OF BIRTH IS VERY IMPORTANT IN THIS SURVEY. FOR A NUMBER OF INDICATORS, INCLUDING THOSE ON ANTHROPOMETRY, IMMUNIZATION AND BREASTFEEDING, WE NEED TO HAVE THE EXACT AGE OF CHILDREN IN MONTHS TO BE ABLE TO CALCULATE THE RELEVANT INDICATORS (SEE APPENDIX ONE). EMPHASIZE THIS IN THE TRAINING AND DISCUSS WAYS OF OBTAINING ACCURATE DATES OF BIRTH WITH THE INTERVIEWERS.

AG1. NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE HEALTH OF (*name*). IN WHAT MONTH AND YEAR WAS (*name*) BORN?

Ask the mother or primary caregiver for the child's date of birth. Probe: "**WHAT IS HIS/HER BIRTHDAY?**" It is important to record the child's month and year of birth accurately.

If the mother/primary caregiver knows the exact birth date, including the day, enter the day of birth. Otherwise, circle '98' for 'DK day'. You do not need to probe further for day of birth.

Convert the month to a number as you have done before. Enter the number in the space provided. If the month or day contains only one digit, use a leading zero. For example, the month of March is coded as '03'. Note that you are not allowed to enter 'DK' for month or year of birth. You have to obtain month and year of birth of the child.

If the survey is conducted in 2010, the year of birth of the child cannot be earlier than 2005 and if the survey is conducted in 2011, the year of birth of the child cannot be earlier than 2006.

If the mother/primary caregiver is unable to provide the date of birth information, ask whether she/he has any documentation such as an identification card, health card, horoscope, or a birth or baptismal certificate that might give the date of birth of the child. However, confirm with the respondent that the date of birth recorded on such documents is indeed correct.

AG2. HOW OLD IS (*name*)?

After having obtained the child's date of birth, ask the child's age in completed years, and record in the space provided. Remember, ages must refer to the last birthday. Probe if necessary by asking "**HOW OLD WAS (name) AT HIS/HER LAST BIRTHDAY?**"

If the mother/primary caregiver does not know the current age of the child, try asking "**HOW MANY YEARS AGO WAS (name) BORN?**" You may help the respondent by relating the child's age to that of other children or to some important event or to the season of birth, by asking, for example, "**HOW MANY WET SEASONS AGO WAS (name) BORN?**"

Record age in completed years. Record '0' if the child is less than 1 year old.

SURVEY COORDINATORS: DURING TRAINING, PROVIDE INTERVIEWERS THE DATES OF IMPORTANT EVENTS THAT THEY CAN USE AS REFERENCE POINTS IN THE INTERVIEWS. DATES OF RECENT NATURAL DISASTERS, MAJOR POLITICAL INCIDENTS AND RELIGIOUS EVENTS CAN BE VERY USEFUL TO PROBE FOR DATES OF BIRTH, AGES, DURATIONS AND SO FORTH.

SIMILARLY, OTHER PERSONAL IMPORTANT EVENTS FROM RESPONDENT'S PAST CAN BE USED AS REFERENCE POINTS IN THE INTERVIEW AS WELL AS INFORMATION ALREADY GATHERED IN THAT HOUSEHOLD (I.E., HOUSEHOLD ROSTER, IMMUNIZATION CARD, ETC.)

Ask AG1 and AG2 independently. Then, check for consistency between the date of birth and completed age.

You have to be meticulous in checking for the consistency between the date of birth and age. You also have to be fairly quick in doing so. A good interviewer will perform the check without causing a lull in the conversation.

Checking for consistency between date of birth (AG1) and completed age (AG2). After having obtained both date of birth and age, check for the consistency between the two. The child's age plus her year of birth must equal the year in which the child had his/her last birthday.

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

- If the month of birth is before the month of interview (the child had his/her birthday this year), then her/his age plus her/his year of birth should equal the year of interview.
 - Example: A child who was born in October 2008, in a survey conducted in November 2010, should be age 2 ($2008 + 2 = 2010$).
- If the month of birth is after the month of interview (the child has not yet had his/her birthday this year), then her/his age plus year of birth should equal the previous year.
 - Example: A child who was born in December 2008, in a survey conducted in October 2010, should be age 1 ($2008 + 1 = 2009$).
- If the month of birth is the same as the month of interview, and the day of birth is not known, then a sum of either the current or the previous year is correct.
 - Example: A child born in November 2007, in a survey conducted in November 2010, could be age 3 or age 2. Probe further to see if the date of birth is correct and whether the child has completed age 2 or 3.
- If the month of birth is the same as the month of interview, and the day of birth is known, the sum of age and year of birth should equal the year of interview if the day of birth is before the day of interview, and the sum of age and year of birth should equal the previous year if the day of birth is after the day of interview.

- Example: A child born on 8 February 2006, in an interview conducted on 15 February 2010, should be age four. A child born on 28 February 2006, in an interview conducted on 3 February 2010, should be age three, since this child will complete 4 full years on 28 February 2010.

If you find that the date of birth and age are inconsistent, either the date of birth or the age, or both, are incorrect, and need to be corrected. Probe, using documents that may be available, dates of well-known events and ages of other children, of the respondent herself/himself, etc.

If after having asked AG1 and AG2, you determine that the child is already 5 years old or more, you must stop the interview because he/she is not eligible anymore. Thank the mother/caregiver for her/his cooperation if she/he does not have other under 5 children. Go back to the Household Listing Form to correct the child age and change as well the number of under 5 children recorded in HH14.

BIRTH REGISTRATION MODULE

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

Ask household member if the child has a birth certificate. This does not refer to the piece of paper given in a hospital to confirm child birth. It is this paper issued in the hospital that is taken to the National Population Commission/registration centre and the birth will be recorded.

BIRTH REGISTRATION. The certificate itself usually includes some or all of the following information: -

- Birth name
- Date and time of birth
- Sex of the child
- Place and/or location of birth
- Names of the parents of the child
- Occupations of parents of the child
- Birth weight and length
- Name of informant registering the birth
- Date of registration of birth
- A birth registration number or file number
- A *birth certificate* is a vital record that documents the birth of a child. The birth certificate itself is not proof of a person's identity, but only a record stating that a birth occurred at a particular time

The question aims to provide an estimate of the extent of birth registration in your country. Respondents must be assured that the information about individual families will never be given to authorities, and that they cannot be identified in any way.

If the answer is yes, ask “**MAY I SEE IT?**” and circle the appropriate corresponding code, noting whether or not the certificate was seen. If the child has a birth certificate and it was seen, circle ‘1’ and go to next module. If the child has a birth certificate but the mother/primary caregiver 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 CIVIL AUTHORITIES?

Circle the code corresponding to the response. If the answer is 'Yes', go to next module. If the child's birth has not been registered with civil authorities or the respondent does not know, continue to the next question.

BR3. DO YOU KNOW HOW TO REGISTER YOUR CHILD'S BIRTH?

The purpose of this question is to assess how important lack of knowledge (of the process of registering or, if applicable, the place to go to register) may be among the reasons for non-registration. This information can inform advocacy efforts and help in the formulation of education campaigns.

Circle the code corresponding to the response.

BR3A. WITH WHICH AUTHORITY WAS (NAME)'S BIRTH REGISTERED?

This question applies to the children whose birth were registered, whether the certificates were seen or not in BR1 and BR2. The interviewer should circle the appropriate response corresponding to the authority with which the children were registered.

BR4. WHY WAS (NAME)'S BIRTH NOT REGISTERED?

This question aims to elicit the reason for non-registration.

Circle the code corresponding to the response. Note that although there might be more than one reason for not registering a child, we need to get only one response – the most important one according to the mother/primary caretaker. If the response is definitely not one of the pre-coded responses, circle '6' for 'Other' and specify the response in the space provided. If don't know circle 8.

EARLY CHILDHOOD DEVELOPMENT MODULE

The questions in this module are used to obtain information about the extent to which households provide a supportive and stimulating learning environment. The module includes a mix of questions to obtain information on various aspects of development (physical, social, emotional, language, and cognitive development).

SURVEY COORDINATORS: SOCIAL DESIRABILITY RESPONSE BIAS IS A COMMON PROBLEM IN RESEARCH AND REFERS TO THE TENDENCY FOR PEOPLE TO PRESENT A FAVOURABLE IMAGE OF THEMSELVES. THESE BIASED ANSWERS CONFOUND RESEARCH RESULTS BY CREATING FALSE RELATIONSHIPS OR OBSCURING RELATIONSHIPS BETWEEN VARIABLES. SENSITIVE QUESTIONS MAY LEAD RESPONDENTS TO ADJUST THEIR ANSWERS SO AS TO APPEAR POLITICALLY CORRECT OR SOCIALLY ACCEPTABLE. QUESTIONNAIRE ITEMS WITH STRONG SOCIAL NORMS (SUCH AS ADHERENCE TO RELIGIOUS OR CULTURAL EXPECTATIONS), OR ADOPTING ATTITUDES/ACTIVITIES/OBJECTS THAT ARE WIDELY CONSIDERED DESIRABLE OR UNDESIRABLE TEND TO ELICIT "SOCIAALLY ACCEPTABLE ANSWERS" RATHER THAN CORRECT AND HONEST ANSWERS.

TO MINIMISE SOCIAL RESPONSE BIAS IT IS VERY IMPORTANT FOR THE INTERVIEWERS TO ADOPT A NON-JUDGEMENTAL ATTITUDE AND TO NOT DISPLAY ANY OF THEIR OWN ATTITUDES, SUCH AS CULTURAL OR RELIGIOUS VALUES.

EC1. HOW MANY CHILDREN’S BOOKS OR PICTURE BOOKS DO YOU HAVE FOR (name)?

This question asks specifically about children’s books or picture books for the child. This excludes schoolbooks (appropriate for or belonging to older children), as well as other books for adults that are present in the household.

Record the number of books in the space provided. There is no need to make an actual count of books yourself. Rely on the respondent’s answer, and avoid asking to see and count the books yourself, since this is likely to require extra time. If the respondent is unsure about the number of children’s books or picture books and is not able to provide an answer the first time you ask the question, ask her/him if there are more than 10 such books. If yes, circle ‘10’. If she/he says that there are less than 10 such books, probe further to get an exact number. If there are no such books in the household, record ‘00’.

EC2. I AM INTERESTED IN LEARNING ABOUT THE THINGS THAT (name) PLAYS WITH WHEN HE/SHE IS AT HOME. DOES HE/SHE PLAY WITH:

- [A] HOMEMADE TOYS (SUCH AS DOLLS, CARS, OR OTHER TOYS MADE AT HOME)?**
- [B] TOYS FROM A SHOP OR MANUFACTURED TOYS?**
- [C] HOUSEHOLD OBJECTS (SUCH AS BOWLS OR POTS) OR OBJECTS FOUND OUTSIDE (SUCH AS STICKS, ROCKS, ANIMAL SHELLS OR LEAVES)?**

EARLY CHILDHOOD DEVELOPMENT		EC
EC1. How many children's books or picture books do you have for (name)?	None 00	
	Number of children's books 0	
	Ten or more books 10	

This question is used to learn about different types of playthings used by the child. We want to know if the child has objects to play with, and what these are, even if they do not include store-bought toys. We are interested in learning about other objects that are used as playthings, such as ordinary household objects and natural materials.

Extra care should be taken to ask this question and record the responses. Experience has shown that respondents find it very easy to give the same answer to a list of different playthings. Often they will answer ‘Yes’ to all items, whether or not it is true, perhaps because they think this is the ‘correct’ response or one that will please the interviewer.

Do not pause after reading the first sentence and continue by saying “**DOES HE/SHE PLAY WITH**” and start asking whether the child plays with playthings from each of the categories listed. For example, ask: “**DOES HE/SHE PLAY WITH HOMEMADE TOYS (SUCH AS DOLLS, CARS, OR OTHER TOYS MADE AT HOME)?**” and so on.

If the respondent answers ‘Yes’ to any of these prompted categories, then probe to learn specifically what the child plays with to ascertain the response. For example, probe by saying “**WHAT DOES HE/SHE SPECIFICALLY PLAY WITH?**” or “**CAN YOU PLEASE GIVE AN EXAMPLE?**” If you ascertain that the child uses playthings that would fall into each of the prompted categories, circle ‘1’ . If the child doesn’t play with items mentioned in a specific category, or the respondent doesn’t know circle ‘2’ or ‘8’, for that specific category. Read each category aloud and circle the code corresponding to the response before proceeding to the next category.

EC3. SOMETIMES ADULTS TAKING CARE OF CHILDREN HAVE TO LEAVE THE HOUSE TO GO SHOPPING, WASH CLOTHES, OR FOR OTHER REASONS AND HAVE TO LEAVE YOUNG CHILDREN. ON HOW MANY DAYS IN THE PAST WEEK WAS (name):

- [A] LEFT ALONE FOR MORE THAN AN HOUR?**
- [B] LEFT IN THE CARE OF ANOTHER CHILD, THAT IS, SOMEONE LESS THAN 10 YEARS OLD, FOR MORE THAN AN HOUR?**

This question is used to assess whether children are at increased risk, either because they are left alone or are left with a child as. 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 caregiver would be gone for more than just a moment – situations in which the child could be left alone for an hour or more. The question specifies that we want to know about situations in which the respondent actually leaves the premises, not simply going out of sight of the child, such as to another part or another room of the house.

Enter the response in the spaces provided. If the child was not left in the care of another child during this period, enter '0' for 'None'. Note that 'another child' is defined as a child less than 10 years old.

EC4. Check AG2: Age of child:

If the child is 3 or 4 years old, check the appropriate box and continue with EC5. If not (if the child is 0, 1 or 2 years old), check the appropriate box and go to next module.

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

This question aims to find out if the child is participating in early learning activities. Baby-sitting or child-minding, even if done in a special place such as a day-care centre, does not qualify as such a programme unless it includes organized learning activities. You must ensure that the mother or primary caregiver understands the meaning of 'Early Childhood Education Programme', explaining it as instructed.

Circle the appropriate code. Skip to EC7 if the answer to this question is 'No' or 'DK'.

EC5 A. WHO ORGANISED THE LEARNING CENTRE?

This question aims to find out whether the learning centre is organised by public or private organisation. Circle the code corresponding to the response.

SURVEY COORDINATORS: SUPPLY APPROPRIATE LOCAL TERMS FOR THESE TYPES OF EDUCATION PROGRAMMES. IF YOU ARE UNSURE OF WHETHER A PROGRAMME QUALIFIES AS AN 'EARLY CHILDHOOD EDUCATION PROGRAMME', CONTACT THE MICS4 REGIONAL COORDINATOR.

EC6. WITHIN THE LAST SEVEN DAYS, ABOUT HOW MANY HOURS DID (*name*) ATTEND?

This question is asked if the child is attending an early childhood education programme. Record the estimated number of hours the child attended any organized learning or early childhood education programme in the last 7 days (excluding the day of interview). Use a leading zero if necessary.

EC7. IN THE PAST 3 DAYS, DID YOU OR ANY HOUSEHOLD MEMBER OVER 15 YEARS OF AGE ENGAGE IN ANY OF THE FOLLOWING ACTIVITIES WITH (*name*):

Read each items shown below. If 'No', circle 'Y' and move to the next item on the list. If 'Yes', ask: "**WHO ENGAGED IN THIS ACTIVITY WITH (*name*)**"

For each activity, circle the code for every person who engaged in the activity with the child before proceeding to the next item. If someone other than the mother or father engaged in the activity with the child, circle 'X'. If the respondent is the primary caregiver of the child and has engaged in any of these activities, code 'X' should be circled.

Note that in a household where there are no adults other than the child's mother and father, 'X' should not be circled. Adults who are not members of the household but who may have engaged in the listed activities with the child should not be coded here.

[A] READ BOOKS OR LOOKED AT PICTURE BOOKS WITH *(name)*?

[B] TOLD STORIES TO *(name)*?

[C] SANG SONGS TO *(name)* OR WITH *(name)*, INCLUDING LULLABIES?

[D] TOOK *(name)* OUTSIDE THE HOME, COMPOUND, YARD OR ENCLOSURE?

[E] PLAYED WITH *(name)*?

[F] NAMED, COUNTED, OR DREW THINGS TO OR WITH *(name)*?

EC8. I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE HEALTH AND DEVELOPMENT OF YOUR CHILD. CHILDREN DO NOT ALL DEVELOP AND LEARN AT THE SAME RATE. FOR EXAMPLE, SOME WALK EARLIER THAN OTHERS. THESE QUESTIONS ARE RELATED TO SEVERAL ASPECTS OF YOUR CHILD'S DEVELOPMENT.

CAN *(name)* IDENTIFY OR NAME AT LEAST TEN LETTERS OF THE ALPHABET?

Circle the code corresponding to the response. A 'Yes' answer means that the child can name ten or more letters of the alphabet while a 'No' answer means that the child can name less than ten or none at all.

EC9. CAN *(name)* READ AT LEAST FOUR SIMPLE, POPULAR WORDS?

Circle the code corresponding to the response. A 'Yes' response means that the child can read at least four simple, popular words while a 'No' response means that the child can only read one or two, or none at all.

SURVEY COORDINATORS: DURING FIELDWORK TRAINING, TOGETHER WITH THE INTERVIEWERS AND OTHER FIELDWORK STAFF, TRY TO CREATE A LIST OF LOCALLY USED SIMPLE AND POPULAR WORDS (FROM POEMS, LULLABIES, OR SONGS). THIS MAY HELP THEM TO GIVE EXAMPLES IF NECESSARY, WHILE ASKING THIS QUESTION.

EC10. DOES *(name)* KNOW THE NAME AND RECOGNIZE THE SYMBOL OF ALL NUMBERS FROM 1 TO 10?

Circle the code corresponding to the response. If parent seems hesitant, prompt with "does the child know '1'? Does the child know 2?" etc. A 'Yes' answer means that the child can recognize the symbol of all numbers from 1 to 10 while a 'No' answer means that the child can recognize less than ten or none at all.

EC11. CAN *(name)* PICK UP A SMALL OBJECT WITH TWO FINGERS, LIKE A STICK OR ROCK FROM THE GROUND?

Circle the code corresponding to the response. If necessary, use the pen you are holding to demonstrate the grip. Consider the small objects mentioned before when asking about the items children play with (sticks, rocks, animal shells or leaves). A 'Yes' answer means that the child is able to pick up small objects without difficulty while a 'No' answer means that the child seems to have difficulty with small items.

EC12. IS *(name)* SOMETIMES TOO SICK TO PLAY?

Circle the code corresponding to the response. A ‘Yes’ answer means that the child often gets sick and cannot play or do many physical activities, while a ‘No’ answer is in cases when the child is consistently ready to be active and play and only appears tired when it is appropriate for him/her to be so (e.g., in the evening; at the usual nap time)

EC13. DOES (name) FOLLOW SIMPLE DIRECTIONS ON HOW TO DO SOMETHING CORRECTLY?

Circle the code corresponding to the response. A ‘Yes’ answer means that the child can do things easily and correctly when asked to do so while a ‘No’ answer means that the child usually does not accomplish the simple tasks she/he is given successfully. Do not concern yourself with the reasons why not.

EC14. WHEN GIVEN SOMETHING TO DO, IS (name) ABLE TO DO IT INDEPENDENTLY?

Circle the code corresponding to the response. A ‘Yes’ answer means that the child is able to occupy herself/himself independently for an appropriate length of time, without constant asking for assistance or giving up quickly (e.g., colouring, building structures, etc.) while a ‘No’ answer means that the child cannot occupy herself/himself independently, asks for help or assistance, or gives up the work/play easily if not provided with help.

EC15. DOES (name) GET ALONG WITH OTHER CHILDREN?

Circle the code corresponding to the response. A ‘Yes’ answer means that the child does well playing and interacting with other children while a ‘No’ answer means that the child is uncomfortable around other children, prefers to be alone, or gets into conflicts.

EC16. DOES (name) KICK, BITE, OR HIT OTHER CHILDREN OR ADULTS?

Circle the code corresponding to the response. A ‘Yes’ answer means that the parent has noticed that the child can physically hurt (kick, bite, hit) other children while a ‘No’ answer means that the child does not do it. Do not concern yourself with what may be the reason of such behaviour (e.g., if parent tries to explain the reasons, or excuse the child).

EC17. DOES (name) GET DISTRACTED EASILY?

Circle the code corresponding to the response. A ‘Yes’ answer means that the child has difficulty sticking with/continuing any activity for the necessary length of time, gets easily distracted by anything happening around her/him, or finds other activities before completing the one started while a ‘No’ answer means that the child doesn’t get easily distracted.

BREASTFEEDING MODULE

BF1. HAS (name) EVER BEEN BREASTFED?

This question asks if the child has ever been breastfed. It includes any breastfeeding experience of the child – not necessarily by the mother/primary caregiver.

Circle the code corresponding to the response. Continue to the next question if the child was ever breastfed (‘1’). If the child was never breastfed, circle ‘No’ and skip to BF3. Skip to BF3 in the case of a ‘DK’ response as well.

BREASTFEEDING		BF	
BF1. HAS (name) EVER BEEN BREASTFED?	Yes	1	
	No	2 =>BF3	
	DK	8 =>BF3	
BF2. IS HE/SHE STILL BEING BREASTFED?	Yes	1	
	No	2	
	DK	8	
BF3. I WOULD LIKE TO ASK YOU ABOUT LIQUIDS THAT (name) MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT. I AM INTERESTED IN WHETHER (name) HAD THE ITEM EVEN IF IT WAS COMBINED WITH OTHER FOODS.	Yes	1	
	NO (name) DRINK PLAIN WATER YESTERDAY, DURING THE DAY OR NIGHT?	No	2
	DK	8	

BF2. IS HE/SHE STILL BEING BREASTFED?

'Being breastfed' is defined as putting the child to the breast at least once a day.

Circle the code corresponding to the response.

The questions BF3-BF18 asks about what the child was fed in the preceding 24 hours. The purpose of these questions is to determine what liquids or foods the child was given. Make sure that the respondent understands the question, particularly what is meant by 'yesterday, during the day or night'. Circle the code corresponding to the response. If the mother/primary caregiver does not know the answer, repeat the question using other local words for the fluid or food. If the answer is still not known, circle '8' for 'DK'.

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



BF3. I WOULD LIKE TO ASK YOU ABOUT LIQUIDS THAT (*name*) MAY HAVE HAD YESTERDAY DURING THE DAY OR THE NIGHT. I AM INTERESTED IN WHETHER (*name*) HAD THE ITEM EVEN IF IT WAS COMBINED WITH OTHER FOODS?

DID (*name*) DRINK PLAIN WATER YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF4. DID (*name*) DRINK INFANT FORMULA YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response. If the answer is 'No' or 'DK,' skip to BF6.

BF5. HOW MANY TIMES DID (*name*) DRINK INFANT FORMULA?

Record the number of times the child had infant formula.

BF6. DID (*name*) DRINK MILK, SUCH AS TINNED, POWDERED OR FRESH ANIMAL MILK YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response. If the answer is 'No' or 'DK,' skip to BF8.

BF7. HOW MANY TIMES DID (*name*) DRINK TINNED, POWDERED OR FRESH ANIMAL MILK?

Record the number of times the child had tinned, powdered or fresh animal milk.

BF8. DID (*name*) DRINK JUICE OR JUICE DRINKS YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF9. DID (*name*) DRINK (VEGETABLE/DRAW SOUP) YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF10. DID (*name*) DRINK OR EAT VITAMIN OR MINERAL SUPPLEMENTS OR ANY MEDICINES YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF11. DID (name) DRINK ORS (ORAL REHYDRATION SOLUTION) YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF11A. WHY DID YOU GIVE ORS TO (NAME)?

Circle the code corresponding to the response.

BF12. DID (name) DRINK ANY OTHER LIQUIDS YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF13. DID (name) DRINK OR EAT YOGURT YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to BF15.

BF14. HOW MANY TIMES DID (name) DRINK OR EAT YOGURT YESTERDAY, DURING THE DAY OR NIGHT?

Record the number of times the child had yogurt.

BF15. DID (name) EAT THIN PORRIDGE OR SEMI-SOLID (SOFT) FOOD YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response.

BF16. DID (name) EAT SOLID FOOD YESTERDAY, DURING THE DAY OR NIGHT?

Circle the code corresponding to the response. If the answer is 'No' or 'DK', skip to BF18.

BF17. HOW MANY TIMES DID (name) EAT SOLID OR SEMI-SOLID (SOFT) FOOD YESTERDAY, DURING THE DAY OR NIGHT?

Record the number of times the child had solid or semi-solid food.

BF18. YESTERDAY, DURING THE DAY OR NIGHT, DID (name) DRINK ANYTHING FROM A BOTTLE WITH A NIPPLE?

Circle the code corresponding to the response.

CARE OF ILLNESS MODULE

These questions aim to find out if the child has recently had diarrhoea or any other illness and, if so, what treatments, drinks and foods the child took during the episode.

CA1. IN THE LAST TWO WEEKS, HAS (name) HAD DIARRHOEA?

Diarrhoea is passing of watery stools or blood in the stool for three or more times in a day this makes the child very weak sometimes loose his/her appetite for food. This is determined by the mother or caregiver.

Record the mother's/primary caregiver's answer by circling the corresponding code. If a respondent is not sure what is meant by diarrhoea, tell her/him it means "THREE OR MORE LOOSE OR

WATERY STOOLS PER DAY, OR BLOOD IN THE STOOL." Make sure the respondent understands what is meant by 'in the last 2 weeks'. If the child has not had diarrhoea in the last 2 weeks or the caregiver doesn't know, skip to CA7.

CARE OF ILLNESS		CA
CA1. IN THE LAST TWO WEEKS, HAS (name) HAD DIARRHOEA?	Yes.....	1
	No.....	2 2=CA7
	DK.....	8 8=CA7
CA2. I WOULD LIKE TO KNOW HOW MUCH (name) HAS GIVEN TO DRINK DURING THE DIARRHOEA (INCLUDING BREAST MILK). DURING THE TIME (name) HAD DIARRHOEA, WAS HE/SHE GIVEN LESS THAN USUAL TO DRINK, ABOUT THE SAME AMOUNT, OR MORE THAN USUAL? <i>(less, more)</i>	MUCH LESS.....	1
	SOMEWAT LESS.....	2
	ABOUT THE SAME.....	3
	MORE.....	4
	NOTHING TO DRINK.....	5
	DK.....	8

CA2. I WOULD LIKE TO KNOW HOW MUCH (NAME) WAS GIVEN TO DRINK DURING THE DIARRHOEA (INCLUDING BREASTMILK). DURING THE TIME (name) HAD DIARRHOEA, WAS HE/SHE GIVEN LESS THAN USUAL, ABOUT THE SAME AMOUNT, OR MORE THAN USUAL?

If dehydrated, a child may take more fluids than usual. We want to know if the pattern of fluid consumption changed during diarrhoea. The focus in this question is on how much fluid was actually consumed by the child.

Ask the question just as it is worded here. Read out the entire question and circle the appropriate code for the caregiver's response. Get the respondent's best judgement of the relative amount of total fluids actually consumed by the child. All fluids are included, not just special ones given during diarrhoea. For example, water, tea, fruit juice, breastmilk and formula are included as well as special fluids such as ORS.

If the child was given less drink than usual during the diarrhoea, probe: **"WAS HE/SHE GIVEN MUCH LESS THAN USUAL TO DRINK, OR SOMEWHAT LESS?"**

Try to find out what actually happened, not what the respondent thinks ought to have happened. An answer such as, "A child with diarrhoea (or 'a child who is ill') needs more fluids" is not satisfactory. You would need to ask, **"BUT HOW MUCH DID YOUR CHILD ACTUALLY DRINK DURING THIS DIARRHOEA?"**

It may be difficult to estimate the relative amount of breastmilk taken by the child. The respondent may make an estimate based on whether the child nursed longer or more frequently.

CA3. DURING THE TIME (name) HAD DIARRHOEA, DID HE/SHE EAT LESS THAN USUAL, ABOUT THE SAME AMOUNT, MORE THAN USUAL, OR NOTHING TO EAT?

During an episode of diarrhoea or other illness, a child may change the amount usually eaten. The focus in this question is on how much food was actually consumed by the child.

Ask the question just as it is worded here. Read out the entire question and circle the code corresponding to the caregiver's response. Get the caregiver's best judgement of the relative amount of total food actually consumed by the child. Try to find out what actually happened, not what the caregiver thinks ought to have happened. An answer such as, "A child with diarrhoea (or 'a child who is ill') needs more food" is not satisfactory. You would need to ask, **"BUT HOW MUCH DID YOUR CHILD ACTUALLY EAT DURING THIS DIARRHOEA?"**

If the caregiver replies that the child took only fluids (that is, the child did not 'eat'), circle '5' for 'Stopped food'. If the child was given less than usual to eat during the diarrhoea, probe: **"WAS HE/SHE GIVEN MUCH LESS THAN USUAL TO EAT, OR SOMEWHAT LESS?"**. Then circle the appropriate code. If the mother/primary caregiver offered more food than usual, but the child ate much less, the answer is 'much less'; circle '1'.

Make sure that the respondent understands that this includes breastmilk, if the child is still being breastfed. If the child is very young and the caregiver replies that he/she takes only fluids or breastmilk (that is, has not started 'eating' yet), there is no need to probe, since 'drinking' and 'eating' count as the same for this child. Circle the answer for this question (eating) that comes closest to the answer you circle for CA4 (drinking).

CA4. DURING THE EPISODE OF DIARRHOEA, WAS (name) GIVEN TO DRINK ANY OF THE FOLLOWING:

ADAPT TO INCLUDE THE COUNTRY-SPECIFIC TERMS USED FOR THE ORAL REHYDRATION SOLUTION (ORS) PACKET, RECOMMENDED HOME FLUID, AND PRE-PACKAGED ORS FLUID.

ADAPT LOCALLY TO INCLUDE THE COUNTRY-SPECIFIC RECOMMENDED HOME FLUIDS. INGREDIENTS PROMOTED BY THE GOVERNMENT FOR MAKING THE RECOMMENDED HOME FLUIDS SHOULD BE REFLECTED IN SEPARATE CATEGORIES OF 'GOVERNMENT-RECOMMENDED HOMEMADE FLUID'.

IF NO PRE-PACKAGED ORS EXISTS IN THE COUNTRY, DELETE THIS CATEGORY.

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

Ask each question separately: “**WAS (name) GIVEN A FLUID MADE FROM A SPECIAL PACKET CALLED (*local name for ORS packet solution*)?, WAS (name) GIVEN A PRE-PACKAGED ORS FLUID FOR DIARRHOEA?**” and so forth. Read each item aloud and circle the code corresponding to the response before proceeding to the next item.

[A] A FLUID MADE FROM A SPECIAL PACKET CALLED (*local name for ORS packet solution*)?

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

[C] SALT SUGAR SOLUTION?

[D] COCONUT/RICE WATER?

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

This question asks the mother or caregiver whether the child received any (other) treatment for diarrhoea other than those mentioned in CA4 for this episode of diarrhoea. If in CA4 you learned that the child was given fluid from an ORS packet, sugar and salt solution, or pre-packaged ORS fluid, then phrase CA5 by saying, “Was anything else given to treat the diarrhoea?” If none of the liquids was given, ask CA5 by saying, “Was anything given to treat the diarrhoea?”

Circle the code corresponding to the answer given. If the response is ‘Yes’, continue to CA6 to learn the type of treatment given. If the child was not given anything (else) for the diarrhoea or the respondent doesn’t know, skip to CA7.

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

If you learn in CA5 that the child was given something to treat the episode of diarrhoea, ask CA6 to identify what the mother or anyone else may have given the child. After recording a treatment, ask the respondent whether “**ANYTHING ELSE**” was given, but do so without implying that something else should have been given. Record all treatments given. Write brand name(s) of all medicines mentioned.

Antimotility means anti-diarrhoea. Make the difference between antibiotic and non antibiotic treatment. If the mother/care taker doesn’t know ask to see the package of the medicine.

CA7. AT ANY TIME IN THE LAST TWO WEEKS, HAS (*name*) HAD AN ILLNESS WITH A COUGH?

Illness with a cough means a cold or other acute respiratory illness with a cough.

Circle the code corresponding to the response given. If the respondent says “He coughs all the time,” or “She’s been coughing for months,” do not count this as an ‘illness with a cough’ since it is a chronic problem. If the answer is ‘No’ or ‘DK’, circle the appropriate code and go to CA14. If the symptoms started before but continued into the 2-week period, this counts as ‘Yes’.

CA8. WHEN (*name*) HAD AN ILLNESS WITH A COUGH, DID HE/SHE BREATHE FASTER THAN USUAL WITH SHORT, RAPID BREATHS OR HAVE DIFFICULTY BREATHING?

SOME SOCIETIES HAVE SPECIFIC WORDS FOR RAPID BREATHING. IN NORTHEAST BRAZIL, FOR EXAMPLE, ‘CANSEIRA’ – MEANING ‘TIREDNESS’ – IS SPECIFICALLY IDENTIFIED WITH THIS SYMPTOM. YOU SHOULD ESTABLISH A LIST OF CULTURALLY APPROPRIATE WORDS FOR RAPID BREATHING.

The question aims to find out if the child has or had an illness needing assessment by a health professional.

If the respondent asks “What do you mean by ‘fast breathing’?” you may say “**NOTICEABLY FASTER THAN NORMAL WHEN THE CHILD IS RESTED.**” If the respondent asks “What do you mean by ‘difficulty breathing’?” you may say “**THE CHILD SOUNDED/LOOKED AS IF HE/SHE WAS HAVING TROUBLE BREATHING.**” You may give other explanations that were developed and tested during the adaptation and pre-testing of the questionnaire. Circle the code corresponding to the response. If the answer is ‘Yes’, continue to the next question. Otherwise, skip to CA14.

CA9. WAS THE FAST OR DIFFICULT BREATHING DUE TO A PROBLEM IN THE CHEST OR A BLOCKED OR RUNNY NOSE?

This question aims to find out if the problem needs assessment by a health professional, which does not include a simple cold.

Circle the code corresponding to the caregiver's response. If the symptoms were from a ‘Blocked or runny nose only’, skip to CA14. If the symptoms were due to ‘Other’ reasons, write the respondent’s description in the line provided, circle ‘6’ and skip to CA14. Otherwise, continue to the next question.

CA10. DID YOU SEEK ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE?

‘Seeking care outside the home’ means going outside the family or household for advice or treatment. Seeking care could include anything from asking a neighbour for advice, to holding a religious ceremony on the child’s behalf, to going to a hospital. If a physician or other provider visits the household to give care, this counts as seeking care outside the home. The child may or may not have accompanied the respondent when he/she sought care. For example, going to buy medicine without the child counts as seeking care.

Circle the code corresponding to the response given. If the answer is ‘Yes’, continue to the next question. Otherwise, skip to CA12.

CA11. FROM WHERE DID YOU SEEK ADVICE OR TREATMENT?

After the first reply, probe by asking: “**ANYWHERE ELSE?**” until all providers are mentioned. However, do not suggest or prompt any answers. Circle the code for every provider mentioned.

If the source of care is a hospital, health centre or clinic, write the name of the place in the space provided on the questionnaire. Ask whether the source 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 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'. Then 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.

CA12. WAS (*name*) GIVEN ANY MEDICINE TO TREAT THIS ILLNESS?

Circle the appropriate code. If the answer is 'Yes', continue to the next question. Otherwise, go to CA14.

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

This question aims to determine whether the child was given an antibiotic for the illness. More than one medicine may have been administered to the child. After the first reply, probe by asking: "**ANY OTHER MEDICINE?**" until all medicines are mentioned. Circle the codes corresponding to all medicines given.

THE RESPONDENT MAY NOT KNOW THE NAME OF THE MEDICINE OR WHETHER IT WAS AN ANTIBIOTIC OR ANOTHER MEDICINE. TALK TO EXPERTS AND COLLECT INFORMATION ON THE TYPE OF ANTIBIOTICS COMMONLY USED IN THE COUNTRY BEFORE YOU CUSTOMIZE YOUR QUESTIONNAIRE. DEVELOP THE RESPONSE CATEGORIES TO THIS QUESTION TO INCLUDE LOCALLY USED ANTIBIOTICS. DURING THE PRE-TEST, FIND OUT WHETHER THERE ARE OTHER CATEGORIES THAT NEED TO BE INCLUDED.

DEPENDING ON THE NUMBER OF DIFFERENT BRANDS USED IN THE COUNTRY, PROVIDE LISTS OF ANTIBIOTICS OR OTHER MEDICINES TO INTERVIEWERS. IF NECESSARY, PROVIDE THEM WITH SAMPLE PACKAGES OR PHOTOS OF PACKAGES OF ANTIBIOTICS AND OTHER MEDICINES. THESE MAY BE USED BY INTERVIEWERS DURING INTERVIEWS TO ASK RESPONDENTS TO IDENTIFY THE ONE(S) GIVEN TO THE CHILD.

If the respondent does not know the name of the medicine, ask him/her to show you the medicines. If he/she cannot show the packaged medicine, follow the guidelines provided to you during training.

If the respondent names a medicine that is not listed, circle 'X' for 'Other' medicine and fill in the name of the medicine in the space provided.

If you cannot determine the type of medicine given to the child with a cough, circle 'Z' for 'DK'.

CA14. Check AG2: Child aged under 3?

CA14 is used to filter out children aged 3 and 4 years, since the next question is to be asked only of children under age three. Check AG2; if the child is under three (he/she is 0, 1 or 2 years old), mark the box corresponding to 'Yes' and continue with the next question. If the child is not under three (she/he is 3 or 4), mark the box corresponding to 'No' and go to next module.

CA15. THE LAST TIME (*name*) PASSED STOOLS, WHAT WAS DONE TO DISPOSE OF THE STOOLS?

The purpose of this question is to know what was done with the most recent stools passed by the child in the household. The safe disposal of children's stools is of particular importance because children's

stools are the most likely cause of faecal contamination to the immediate household environment. Correct disposal of stools is linked with lower risks of diarrhoea.

Respondents are asked where they usually dispose of their children’s stools if the child did not use the toilet facility. Circle the most appropriate code.

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

MALARIA MODULE

Most children living in areas with malaria experience their first malaria infections during the first year or two of life, when they have not yet acquired adequate clinical immunity. In these young children, the disease can progress rapidly to severe malaria and death. About 90 per cent of deaths due to malaria are among children under 5 years of age. The World Health Organization recommends that all children under age five be presumptively treated with anti-malarial medication within 24 hours of the onset of fever to prevent severe malaria and death.

MALARIA		ML
ML1. IN THE LAST TWO WEEKS, HAS (name) BEEN ILL WITH A FEVER AT ANY TIME?	Yes.....	1
	No.....	2 2⇒Next Module
	DK.....	8 8⇒Next Module
ML2. AT ANY TIME DURING THE ILLNESS, DID (name) HAVE BLOOD SAMPLE FOR TESTING?	Yes.....	1
	No.....	2
	DK.....	8
ML3. DID YOU SEEK ANY ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE?	Yes.....	1
	No.....	2 2⇒ML8
	DK.....	8 8⇒ML8

ML1. IN THE LAST TWO WEEKS, HAS (name) BEEN ILL WITH A FEVER AT ANY TIME?

Fever is a symptom of malaria, and in areas where malaria is prevalent, mothers are advised to take action to treat for malaria as soon as fever begins.

Circle the code corresponding to the answer given. Circle the code corresponding to ‘Yes’ only if the child has been ill with a fever at any time in the 2 weeks prior to the date of the interview. If the child has not been ill with a fever or the respondent doesn’t know, go to next module.

ML2. AT ANY TIME DURING THE ILLNESS, DID (name) HAVE BLOOD TAKEN FROM HIS/HER FINGER OR HEEL FOR TESTING?

Circle the code corresponding to the response given.

ML3. DID YOU SEEK ANY ADVICE OR TREATMENT FOR THE ILLNESS FROM ANY SOURCE?

Circle the code corresponding to the answer given. If the respondent did not seek any advice or treatment from any source or doesn’t know, skip to ML8.

ML4. WAS (name) TAKEN TO A HEALTH FACILITY DURING THIS ILLNESS?

Circle the code corresponding to the answer given. If the child was not taken to a health facility or if the mother/primary caregiver does not know, skip to ML9.

ML5. WAS (name) GIVEN ANY MEDICINE FOR FEVER OR MALARIA AT THE HEALTH FACILITY?

Circle the code corresponding to the answer given. If the child was not given any medicine for the fever or malaria that was provided or prescribed at a health facility, or if the mother/primary caregiver does not know, skip to ML7.

ML6. WHAT MEDICINE WAS (name) GIVEN?

Circle the codes corresponding to all medicines taken by the child to treat the fever, both anti-malarials and other types of medicines such as acetaminophen that were provided or prescribed at the health facility. Write brand name(s) of all medicines, if given.

After the first reply, probe by asking: **“ANY OTHER MEDICINE?”** until all medicines are mentioned.

If the respondent cannot remember the names of all the medicines the child took, use the following approach to probe for the correct names of the anti-malarial and other types of medicines taken:

- (1) Ask to see the package of leftover medicines; some households keep popular anti-malarial and other medicines at home.
- (2) Show the respondent a sample of each common anti-malarial – from both public and private sources – in the original packages, in case some respondents remember the containers.
- (3) Use common brand names when asking the respondent about anti-malarial medicines.

If the medicine is an anti-malarial but is not listed, circle ‘H’ and fill in the name in the space provided. If the medicine is another type of medicine, but is not listed, circle ‘X’ and fill in the name in the space provided. If the mother/primary caregiver still doesn’t know, circle ‘Z’.

ML7. Was (*name*) GIVEN ANY MEDICINE FOR THE FEVER OR MALARIA BEFORE BEING TAKEN TO THE HEALTH FACILITY?

Circle the code corresponding to the answer given. If the response is ‘Yes’, skip to ML9 to learn the type of medicine given. If the child did not take any medicine for the fever or malaria before being taken to the health facility or the respondent doesn’t know, skip to ML10.

Note that all response categories to this question skip ML8, to go to either ML9 or ML10.

ML8. Was (*name*) GIVEN MEDICINE FOR FEVER OR MALARIA DURING THIS ILLNESS?

This question is only asked if the respondent did not seek advice or treatment for the illness from any source (ML3 = 2 or 8).

Circle the code corresponding to the answer given. If the child was not given any medicine for the fever or malaria during this illness or the respondent does not know, circle the appropriate code and skip to ML9. Otherwise, continue to the next question.

ML9. WHAT MEDICINE WAS (*name*) GIVEN?

Circle the codes corresponding to all medicines taken by the child to treat the fever, both anti-malarials and other types of medicines such as acetaminophen given during this illness. Write brand name(s) of all medicines, if given.

After the first reply, probe by asking: **“ANY OTHER MEDICINE?”** until all medicines are mentioned.

If the respondent cannot remember the names of all the medicines the child took, use the following approach to probe for the correct names of the anti-malarial or other types of medicines taken:

- (1) Ask to see the package of leftover medicines; some households keep popular anti-malarial and other medicines at home.

- (2) Show the respondent a sample of each common anti-malarial – from both public and private sources – in the original packages, in case some respondents remember the containers.
- (3) Use common brand names when asking the respondent about anti-malarial medicines.

If the medicine is an anti-malarial but is not listed, circle 'H' and fill in the name in the space provided. If the medicine is another type of medicine, but is not listed, circle 'X' and fill in the name in the space provided. If the mother/primary caregiver still doesn't know, circle 'Z'.

ML10. Check ML6 and ML9: Anti-malarial mentioned (codes A - H)?

If an anti-malarial was mentioned either in ML6 or ML9 (codes A-H), check the box marked 'Yes' and continue to the next question. If 'No', check the corresponding box and go to next module.

ML11. HOW LONG AFTER THE FEVER STARTED DID (name) FIRST TAKE (name of anti-malarial from ML6 or ML9)?

This question asks about the time interval between the beginning of the child's fever and when he/she took the first dose of an anti-malarial medicine to treat the fever.

If multiple anti-malarial medicines are mentioned in ML6 or ML9, name all anti-malarials mentioned. Record the code for the day on which an anti-malarial was given for the first time. If he/she started taking (the anti-malarial) the same day the fever started, circle '0' for 'Same day'. If the anti-malarial was first given the next day (the day after the fever began), circle '1' for 'Next day' and so on. If the respondent does not know how long after the fever started the child first took the anti-malarial, circle '8'.

IMMUNIZATION MODULE

PROCEDURES FOR COMPLETING THIS MODULE ARE SOMEWHAT MORE COMPLICATED THAN MOST OTHER MODULES IN THE MICS4 QUESTIONNAIRES. MAKE SURE TO HAVE INTERVIEWERS PRACTISE THE ADMINISTRATION OF THE MODULE DURING TRAINING BY USING REAL VACCINATION CARDS. READING AND UNDERSTANDING VACCINATION CARDS USUALLY REQUIRES CONSIDERABLE PRACTICE.

This module is used to obtain information for children under five who have received BCG, DPT3, OPV3, measles and other immunizations.

Immunization is a way of protecting children against serious diseases. A child who is not vaccinated is more likely to suffer illness, become permanently disabled or become undernourished and die

Vaccination book or card" refers to any official document (usually a small booklet or folded card) which indicates among others the child's name, age and the type of vaccinations he or she has ever received. Inside this booklet or card you will see the number of times the child has been vaccinated against the illness or disease listed with the dates he received the vaccinations. Sometimes a child needs more than one vaccination to acquire full immunity. For every disease

A list of vaccines is listed. This can be from mother/caregiver memory. Be careful to probe, as respondent may not be familiar with the different types of vaccines. Copy vaccine information from vaccination book or card if provided and code accordingly.

Approximate times when to immunize	Vaccine	How is it given
At birth	BCG	Upper left arm
	Hepatitis B	Thigh
	Oral polio OPV	In the mouth
6 weeks	Hepatitis B1	Thigh
	Oral polio OPV1	In the mouth
	DPT 1	Thigh
10 weeks	Hepatitis B2	Thigh
	Oral polio OPV2	In the mouth
	DPT 2	Thigh
14 weeks	Oral polio OPV3	In the mouth
	Hepatitis B3	Thigh
	DPT 3	Thigh
9 Months	Measles	Upper left arm
	Yellow fever	Upper right arm
9 – 15 Months	Vitamin A	In the mouth

DPT (DIPHTHERIA PERTUSSIS & TETANUS) and POLIO: The first dose of DPT and POLIO vaccination is given at 6 weeks, the second dose at 10 weeks and the third dose at 14 weeks. This means that those aged between 6 and 9 weeks should have received one DPT/Polio vaccination while those between the ages of 10 to 13 weeks should have received two such vaccinations. A child who is 14 weeks and above should have had 3 doses of DPT/Polio to complete this vaccine set. (Note that in some cases the first dose of this vaccination is given at birth).

If a child is 12 weeks old and has received only one dose of DPT/Polio, code 2 will be entered for him in the appropriate columns. On the other hand, NA will be recorded for a 4 week old child who has no vaccination card and whose mother answered NO to the DPT/Polio vaccination.

MEASLES: The vaccination against measles is given only once at the age of 9 months although some children receive it at the age of 7 months.



BCG: Offers partial protection against some forms of tuberculosis and leprosy. BCG vaccine is also given to the child only once in the first week after birth. Therefore code 3 should be recorded for all children who have not yet received this vaccination. Interviewers must keep in mind the age of

the child when choosing a response. Easy way to detect if BCG has been administered is a scar on the arm or shoulder.

IM1. DO YOU HAVE A CARD WHERE *(name)*'S VACCINATIONS ARE WRITTEN DOWN? (If yes) MAY I SEE IT PLEASE?

If the respondent reports that there is a vaccination card for the child, ask to see it. You should have obtained vaccination cards at the beginning of the interview. If you did not already obtain the card for the child, now is the time to ask for it again.

In some cases, the respondent may not be willing to take time to look for the vaccination card, thinking that you are in a hurry. Encourage the respondent to look for the vaccination card for the child. It is critical to obtain written documentation of the child's immunization history. Therefore, be patient if the respondent needs to search for the card.

If the respondent does not have a vaccination card but the vaccine doses are registered in another document (for example, a booklet with records of clinic visits), ask to see it. If the card or other document is seen, circle '1' and skip to IM3. If the child has a vaccination card or other document but the respondent is unable to show you, circle '2' and skip to IM6 – you will be asking the respondent to recall the child's vaccinations. If the respondent does not have a vaccination card or any other document where the vaccine doses are registered for the child, circle '3' and continue to next question.

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

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

IM3.

You will complete question IM3 when respondents show you the vaccination card for the child:

- Copy the dates in the spaces provided for IM3 for each type of immunization dose recorded on the card or document.
- If the card shows only part of the date, record '98' for 'DK' in the column for which the information is not given. For example, if the date given was July 2008, you would record '98' for 'Day', '07' for 'Month', and '2008' for 'Year'.
- If the card shows that a vaccination was administered but the date is not specified, write '44' in the day column, and leave the month and year columns blank.
- However, if a date is given for a DPT vaccination and there is simply a check to show that a polio vaccine was also given, record the date of the DPT injection on the polio line since this probably indicates that the vaccinations were given on the same day.

Remember that vaccines may be listed on the card in a different order than the one that appears on the questionnaire. Be sure to check the card carefully because sometimes the month may be listed first, sometimes the day. Be careful to record the dates correctly.

Besides recording vaccination dates on the card, some health facilities may also record the dates (appointments) that children should be brought in for their next immunizations. Be very careful not to record a scheduled appointment date as a vaccination date. It is possible that an appointment date was given, but the child never received the vaccination. Only record dates that vaccinations were actually given, and not date of appointments. Be patient and read the card thoroughly. It is very important that you copy the information on administered vaccinations on the card to the questionnaire accurately.

After you have completed transferring the information from the card to the questionnaire, proceed with question IM4.

IM4. Check IM3: Are all vaccines (BCG to Yellow Fever) recorded?

If all vaccines are recorded check the box marked 'Yes' and go to IM18. If 'No', check the corresponding box and continue with the next question.

IM5. IN ADDITION TO WHAT IS RECORDED ON THIS CARD, DID (*name*) RECEIVE ANY OTHER VACCINATIONS – INCLUDING VACCINATIONS RECEIVED IN CAMPAIGNS OR IMMUNIZATION DAYS?

It is possible that some of the vaccinations received by the child were not recorded. For example, the respondent may have forgotten to bring the card to the health facility or the respondent may have taken the child to a National Immunization Day.

If the answer is 'Yes', circle '1' only if the respondent mentions vaccines included in the questionnaire. You can refer to the information already obtained from the vaccination card to make sure that the mother/primary caregiver is referring only to these vaccines. Write '66' in the corresponding 'Day' column for IM3, and leave the month and year columns blank. For example, if two doses of DPT were recorded on the card, and another dose was given but not recorded, there should be '66' in the 'Day' column.

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

Once you have probed for any other vaccination, skip to IM18.

Questions IM6 through IM17 are asked only to mothers/primary caregivers of children who do not have vaccination cards, or those children for whom vaccination cards were not shown.

IM6. HAS (*name*) EVER RECEIVED ANY VACCINATIONS TO PREVENT HIM/HER FROM GETTING DISEASES, INCLUDING VACCINATIONS RECEIVED IN A CAMPAIGN OR IMMUNIZATION DAY?

Only ask IM6-IM17 to obtain the child's vaccination status if a vaccination card or other document is not available (that is, if the answer to IM1 was '2' for 'Yes, not seen' or '3' for 'No card'). Describe the vaccination techniques in detail to the caregiver and provide further explanations if needed. When mentioning the vaccines or the specific diseases, use local synonyms if needed. We are not interested in injections for treating a disease – antibiotics, anti-malarials, etc. – but only in vaccines.

Circle the code corresponding to the response. If the answer is 'Yes', continue to the next question, to start asking about each of the vaccines. If the answer is 'No' or 'DK', skip to IM18.

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

Circle the code corresponding to the response.

IM8. HAS (*name*) EVER RECEIVED ANY ‘VACCINATION DROPS IN THE MOUTH’ TO PROTECT HIM/HER FROM GETTING DISEASES – THAT IS, POLIO?

Circle the code corresponding to the response. If the answer is ‘Yes’, continue to the next question. If the answer is ‘No’ or ‘DK’, skip to IM11.

IM9. WAS THE FIRST POLIO VACCINE RECEIVED IN THE FIRST TWO WEEKS AFTER BIRTH OR LATER?

Ask if the first polio vaccine was received in the first two weeks after birth or later. Circle the code corresponding to the response.

IM10. HOW MANY TIMES WAS THE POLIO VACCINE RECEIVED?

Fill in the number in the space provided.

IM11. HAS (*name*) RECEIVED A DPT VACCINATION – THAT IS, AN INJECTION IN THE THIGH OR BUTTOCKS – TO PREVENT HIM/HER FROM GETTING TETANUS, WHOOPING COUGH, DIPHTHERIA?

ADAPT LOCALLY, USING THE MOST COMMON VACCINATION SITE AND SCHEDULE USED IN THE COUNTRY.

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

IM12. HOW MANY TIMES WAS A DPT VACCINE RECEIVED?

Fill in the number in the space provided.

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

ADAPT LOCALLY, USING THE MOST COMMON VACCINATION SITE AND SCHEDULE USED IN THE COUNTRY.

Circle the code corresponding to the response. If the answer is ‘Yes’, continue to the next question. If ‘No’ or ‘DK’, skip to IM16.

IM14. WAS THE FIRST HEPATITIS B VACCINE RECEIVED WITHIN 24 HOURS AFTER BIRTH, OR LATER?

Ask if the first hepatitis B vaccine was received within 24 hours after birth or later. Circle the code corresponding to the response.

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

Fill in the number in the space provided.

IM16. HAS (*name*) EVER RECEIVED A MEASLES INJECTION OR AN MMR INJECTION – THAT IS, A SHOT IN THE ARM AT THE AGE OF 9 MONTHS OR OLDER – TO PREVENT HIM/HER FROM GETTING MEASLES?

MEASLES VACCINE IS NORMALLY GIVEN AS AN INJECTION IN THE ARM AT THE AGE OF 9 MONTHS. IN SOME COUNTRIES, SOME CHILDREN MAY RECEIVE IT AS AN INJECTION IN THE THIGH. IN SOME COUNTRIES, MEASLES VACCINE IS ADMINISTERED AT 12 OR 15 MONTHS OF AGE. THE APPROPRIATE AGE FOR AND LOCATION OF THE INJECTION SHOULD BE ADAPTED TO THE RECOMMENDATIONS FOR THE MEASLES VACCINATION IN YOUR COUNTRY.

Circle the code corresponding to the response. If the caregiver specifically mentions measles vaccine but refers to an injection in the thigh, accept the answer as valid and circle '1' for 'Yes'.

IM17. HAS (*name*) EVER RECEIVED THE YELLOW FEVER VACCINATION – THAT IS, A SHOT IN THE ARM AT THE AGE OF 9 MONTHS OR OLDER – TO PREVENT HIM/HER FROM GETTING YELLOW FEVER?

Probe by indicating that the yellow fever vaccine is sometimes given at the same time as the measles vaccine. Circle the code corresponding to the response.

IM18. HAS (*name*) RECEIVED A VITAMIN A DOSE LIKE (THIS/ANY OF THESE) WITHIN THE LAST 6 MONTHS?

This question asks if the child has received a vitamin A supplement.

Show the capsule or dispenser you were given to help the caregiver remember. You may be instructed to show different capsules, 100,000 IU for children 6-11 months old and 200,000 IU for children 12-59 months old, asking the caregiver to identify the correct one. Circle the code corresponding to the response. If the child has never received a vitamin A supplement or the mother/caregiver does not know if he/she has ever received one, skip to the next module.

IM19. PLEASE TELL ME IF (*name*) HAS PARTICIPATED IN ANY OF THE FOLLOWING CAMPAIGNS, NATIONAL IMMUNIZATION DAYS AND/OR VITAMIN A OR CHILD HEALTH DAYS.

This question is asked to provide information about immunization programmes. It also provides a check on IM4 for children with a vaccination card, since doses given on National Immunization Days are usually not recorded on the card.

Circle the code corresponding to the response. If the respondent answers 'Yes' here to at least one of the dates, check back to IM5. If the answer given there (to IM5) was 'No', ask again.

UF13. Record the time

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

UF14. Is the respondent the mother or caregiver of another child age 0-4 living in this household?

If the respondent is the mother or caregiver of another child age 0-4 living in this household, mark the box marked 'Yes' and indicate to the respondent that you will need to measure the weight and height of the child later. Go to the next QUESTIONNAIRE FOR CHILDREN UNDER FIVE to be administered to the same respondent.

If the respondent is not the mother or caregiver of another child age 0-4 living in this household, mark the appropriate box and end the interview with this respondent by thanking him/her for his/her cooperation and tell her/him that you will need to measure the weight and height of the child.

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

Move to another woman's or under-5 questionnaire, or start making arrangements for anthropometric measurements of all eligible children in the household.

ANTHROPOMETRY MODULE¹

Weights and heights of all eligible children under five in the household will be measured after all the Questionnaires for Children Under Five are completed. However, if some respondents or children have to leave the household before all questionnaires in the household have been completed, or if a call-back has to be made to interview another respondent, it is best to complete the measurements on those children who are present. The most important thing is not to miss measuring those who are eligible.

Measurement of heights and weights will be the responsibility of measurers. Each fieldwork team will have one set of measuring boards and weighing scales. Therefore, once you have completed the questionnaires and are ready to start anthropometric measurements, you should call upon measurers to join you in the household, together with the equipment.

Although the measurer will be the main team member responsible for anthropometric measurements, other fieldwork staff will also receive training on how to weigh and measure children. In some cases, the entrance of measurers to the household may not be possible; in such cases, if it is not possible for the measurer to measure the child outside, interviewers may perform the measurements inside the household, with the assistance of the mother.

Each child will be weighed and measured, and the results will be recorded in his/her questionnaire. Be sure the weight for each child is recorded on the correct questionnaire. Procedures for weight and height measurements are discussed in detail in Chapter II.5. This section is confined to explaining how the results will be coded.

AN1. Measurer's name and number

You should enter the name and two-digit identification number of the person who performed the measurements in the space provided. This would normally be the measurer.

AN2. Result of height/length and weight measurement

Circle the appropriate code corresponding to the result of the measurement. If the reason is 'Other', write a description in the line provided and circle '6'.

AN3. Child's weight

The child should be weighed according to the instructions given during training. Record exactly as is shown on the scale, in kilograms with one decimal point. Place the kilograms to the left of the decimal point and grams to the right of the decimal point. Use a leading zero if the number of kilograms is one digit. If the weight is not measured circle '99.9'.

AN4. Child's length or height

Check the age of the child in AG2. If the child is under 2 years old, check the appropriate box, circle '1' and then measure and record recumbent length (that is, lying down), to the nearest tenth of a

¹For more details on anthropometric techniques, see *Assessing the Nutritional Status of Young Children*, DP/UN/INT-88-X01/8E, New York: UN National Household Survey Capability Programme, 1990; *Demographic and Health Surveys Interviewer's Manual*, DHS-II Basic Documentation-4, Colombia, Md: Institute for Resource Development, 1990; and *How to Weigh and Measure Children*, DP/UN/INT-81-041-6E, New York: UN National Household Survey Capability Programme, 1986, a summary of which is included in Appendix Five of this manual.

centimetre. If the child is age two or older, check the corresponding box, circle '2', and then measure and record standing height. Write a zero first if the number of centimetres is two digits.

AN5. Oedema

Oedema (Body swelling) is the retention of fluid in the tissues of the body; sign of kwashiorkor, a form of severe acute malnutrition. Please check to see if the child is having oedema. If the child is having oedema circle '1'. If the child is not having oedema, circle '2'. If undecided, circle '3'. If oedema is not checked for some reason, circle '7' and specify the reason.

AN6. Is there another child in the household who is eligible for measurement?

If there is another child in the household who is eligible for measurement, check the box marked 'Yes' and record measurements for the next child on that child's questionnaire. If 'No', check the appropriate box and end the interview with this household by thanking all participants for their cooperation.

After you have completed all anthropometric measurements in the household, you should record the results of the interviews in UF9 of the Under-Five Child Information Panel on each child's questionnaire.

Gather together all questionnaires for this household and check that all identification numbers are inserted on each page. Tally on the Household Information Panel the number of interviews completed.

Before you leave the dwelling, check to ensure that the entire questionnaire (including all modules) is completed and that there are no blanks left. Be sure to distinguish between true zero answers and missing data or 'DK' answers. Make sure that all identifying numbers have been filled in on the Information Panels of each questionnaire. Give the questionnaires to your supervisor.

OBSERVATIONS

The last page of the under-5 questionnaire has been reserved for the interviewers, supervisors, or editors to write any notes or observations regarding this particular household interview.

Weight Measurement Method

- ALWAYS EXPLAIN THE WEIGHING PROCEDURE TO THE MOTHER. THE CHILD SHOULD BE WEIGHED COMPLETELY NUDE. ASK FOR THE MOTHER'S AUTHORIZATION AND HELP TO UNDRESS THE CHILD.
- ALWAYS SET THE SCALE ON A FLAT SOLID SURFACE. IF THE GROUND IS SAND OR THE SCALE IS INSTABLE FOR OTHER REASONS, PLACE THE SCALE ON A FLAT PIECE OF WOOD TO ENSURE PROPER FUNCTION.

The digital scale can be used to weigh children in two different ways:

1. Children who can stand on their own can be weighed by stepping on the scale and standing unsupported.
2. Babies and young children can be weighed in the arms of an assistant or of the mother. This second way is called "weighing with adjusted calibration".

Preparation for the use of the scale

1. Remove all packaging material from the underside of the scale.
2. Put the batteries in to the scale.
2. Place the scale on a hard and flat surface (board, concrete or solid ground). Soft or irregular surfaces would cause errors in the weight measure.
3. The scale will not function if it is too hot. It is best to place it in the shade out of direct sunlight. If the scale becomes overheated, place it in a cooler space and wait for 15 minutes before reusing it.
4. Handle the scale carefully:
 - Do not drop or let the scale fall.
 - Do not weigh people over 150 kg.
 - Do not store the scale in a hot place or expose it to sun for long periods.
 - Protect the scale from excessive humidity.

The battery scale has an on/off button in the battery compartment under the machine. Turn it off when not in use. Remove the batteries from the scale if the scale will not be in use for a long time.

Cleaning

To clean the scale, wipe the surface with a wet cloth. Never immerse the scale in water.

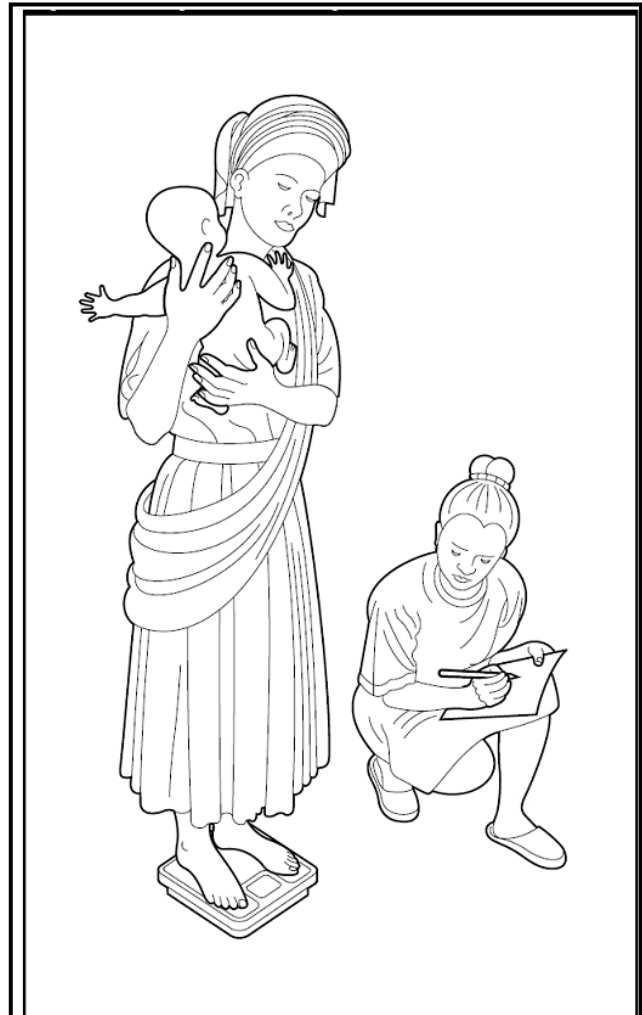


Figure 2- Weighing with Adjusted Calibration

Double weighing also known as “weighing with adjusted calibration”

To weigh a young child, you must first weigh the mother or assistant, tare the scale to zero, then weigh the adult and child. The scale will automatically calculate the weight of the child.

To weigh a child with this method you must use the Mother-and-Baby function.

- Ensure that the scale is on.
- Wait until the zeros in the screen stop flashing .
- Have the mother step on to the scale without the child to take her weight.
- Press the Mother-and-Baby key to activate the special tare function.

The display returns to zero and the scale is ready to take the weight of the child.



NOTE: THE PERSON MUST REMAIN STILL WHILE ON THE SCALE.

Have the mother take the child into her arms. The accurate weight is shown when the numbers in the display stop blinking (after about three seconds).

The Mother-and-Baby function remains switched on until the Mother-and-Baby key is pressed again or the scale switches off.

The measurer reads the measure out loud, the assistant repeats the measure while it is recorded it in the questionnaire. The assistant double checks the correct recording of the weight measure.

Weighing with calibration: important notes

- The weight of the person who will hold the baby has to be shown (and immediately calibrated) before they are given the child to be weighed.
- Only the person whose weight has been tared can hold the baby to be weighed.

Problems with digital scales

What to do if ...

1. No weight is displayed when there is someone on the scale
 - Check if the scale is switched on?
 - Check if the batteries are still charged?
2. The scale keeps switching on during transport for example.
 - Ensure that the switch inside the battery compartment is set to OFF when the scale is not in use.
3. The scale displays a weight, not zero after transportation or installation of new batteries
 - Wait until the scale switches off automatically after 2 minutes. The scale then should work normally after.
4. The zeros do not appear on the screen before weighing.
 - Start the scale again after it switches off automatically. Ensure there is no weight on the scale.
5. ----- appears on the screen.
 - Start the scale again after it switches off automatically. Ensure there is no weight on the scale.
6. The screen shows a battery image.
 - Battery power is running low .Change the batteries in the coming days.
7. BATT appears in the screen.
 - The batteries are empty. Change the batteries.
8. STOP appears in the screen.
 - Maximum weight of 150kg has been exceeded.
9. TEMP appears in the screen.
 - The temperature for use of the scale is too high or too low to ensure proper function. Allow 15 minutes for the scale to cool and try again.
10. The screen displays **E** and a **number**.
 - Start the scale again after it switches off automatically. Ensure there is no weight on the scale. If the scale continues to not work, change the scale out with the spare.



Height measurement methods

Always explain to the mother the height measurement procedure. **Note that you will need to remove shoes and any hair pieces or braids in order to accurately measure the child.**

HEIGHT OR LENGTH

- If a child is less than 24 months of age, measure the length on the measuring board set horizontally on the ground. If a child is 24 months of age, measure the standing height on a vertical measuring board.
- If the AGE IS NOT KNOWN, measure the length of children under 87cm (STANDING HEIGHT) on a horizontal height board and measure the standing height of those 87cm or taller.

Standing height For children 24 months of age or older (see Figure 3 below).

1. Measurer or assistant: Place the board vertically and against a wall, table or other support. Ensure that the board does not wobble or feel unstable.

2. Measurer or assistant: Ask the mother to take the child's shoes off and to undo any braids or hair decorations that could interfere with the height measurement. Ask her to bring the child to the board and to kneel directly in front of the child in order to maintain eye contact.

3. The assistant: Kneel on the right hand side of the child and ensure that the child is standing straight on the board.

4. Measurer: Kneels on the child's left (Arrow 3). This allows the measurer to be at the correct position to adjust and measure the child correctly. If either the assistant or measurer is standing they are NOT FOLLOWING the proper methods and will not make correct measures.

5. Assistant: Put the child's feet flat and joined at the centre and against the back and base of the board. Put your right hand just over the child's ankles to ensure that the child does not stand on his/her toes (Arrow 4), and your left hand on the child's knees to ensure that the legs are held straight and the knees are not bent (Arrow 5) and to hold gently against the board. Verify that the child's legs are straight and that the heels and the calves are against the board. Inform the measurer when you have finished positioning the feet and legs and are ready for the measure.

6. Measurer: Tell the child to look straight ahead towards his/her mother, who should be in front of him/her. Ensure that the child's line of vision is parallel to the ground (Arrow 8). Put your open hand on the child's chin. Close your hand gradually (Arrow 9). Do not cover the child's mouth or ears. Ensure that his/her shoulders are at the same level (Arrow 10), hands on the side and not gripping to the height board (Arrow 11). Ensure the head, the shoulder blades and the buttocks are against the board (Arrows 12, 13 and 14). With your right hand, lower head piece to the child's head. Make sure you're pressing on the child's hair (Arrow 15).

7. Measurer and assistant: Verify the child's position (Arrow 1 to 15). Repeat certain steps if necessary.

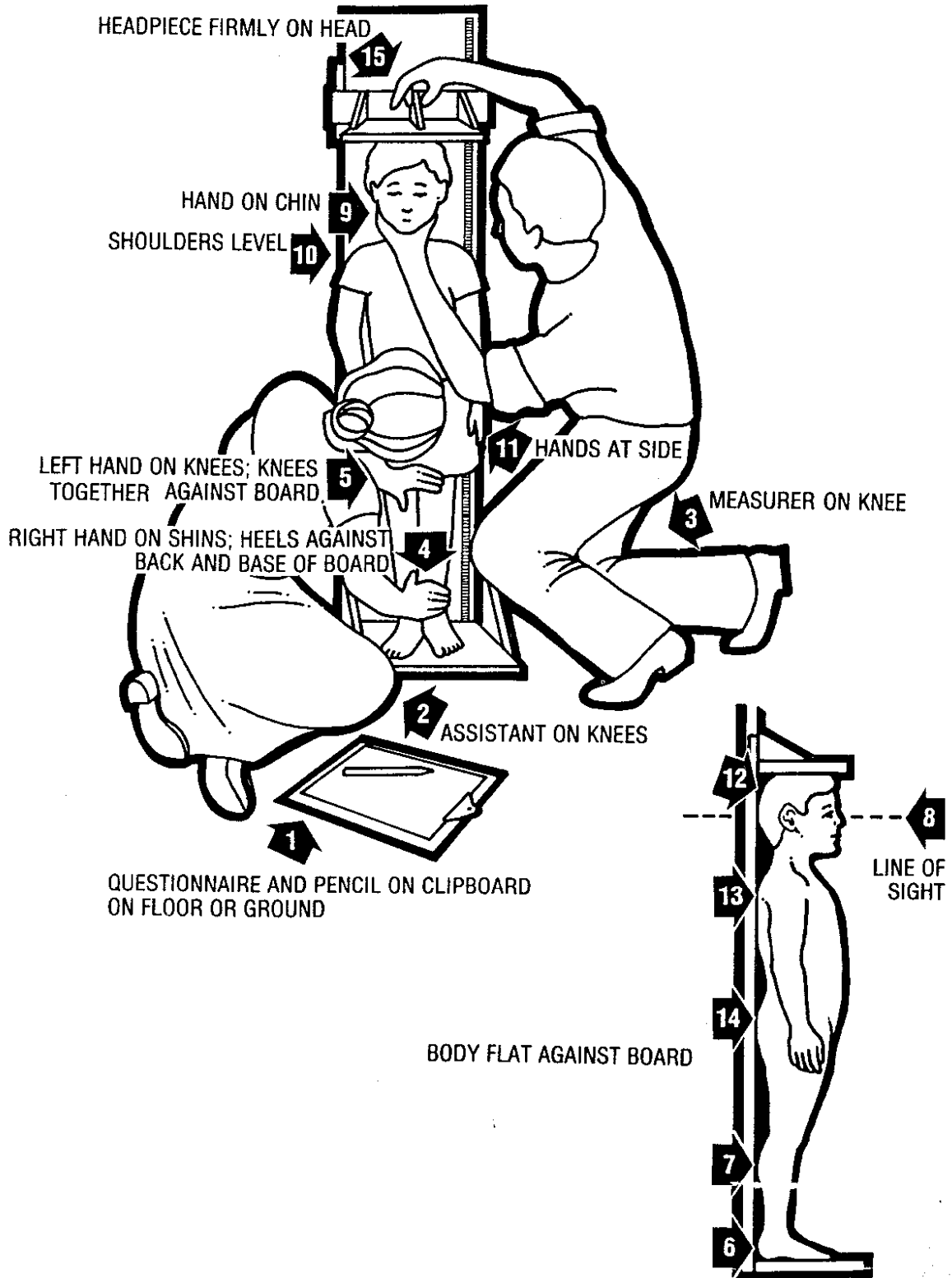


Figure 3: Height measurement for all children 24 months of age or older

8. Measurer: Once the child's position is correct, read the measure out loud to the nearest 0.1 cm (1 mm) (example: 121.5 cm).

9. Assistant: Repeat the measurement out loud and note it down in the questionnaire in the appropriate cell.

Recumbent Length

Recumbent length means the length measured with the child laying horizontally on the board. The length should be measured all children under 24 months of age. If the age of the child is unknown, take the recumbent length for all children less than 87 cm (STANDING HEIGHT). See figure 4 below.

1. Measurer or assistant: Place the board horizontally on a flat and solid surface, for example on the ground. Never place the height board on a table, the child could fall off and be injured. If it is hot and children are sweaty, it can help to spread a small towel on the board. This allows the child to slide easily along the board. If the sweaty skin of the child sticks to the board, then moving the child will cause a pinching feeling causing the child to cry complicating the measurement.

2. Assistant: Kneel with both legs behind the base of the board (Arrow 2). Put one knee against the base of the board to keep it from sliding along the ground.

3. Measurer: Kneel on the child's right side to be able to hold the sliding piece that holds the feet with your right hand (Arrow 3). The mother can approach the board directly in front of the measurer.

4. MEASURER AND ASSISTANT: WITH THE MOTHER'S HELP, LAY THE CHILD ON THE BOARD BY SUPPORTING THE BACK OF THE CHILD'S HEAD WITH ONE HAND AND THE TRUNK OF THE BODY WITH THE OTHER HAND. THE HEAD SHOULD BE SETTLED INTO THE BASE OF THE BOARD, INTO THE ASSISTANT'S HANDS. GRADUALLY LOWER THE CHILD ONTO THE BOARD.

5. MEASURER OR ASSISTANT: ASK THE MOTHER TO KNEEL CLOSE TO THE OTHER SIDE OF THE BOARD, FACING THE MEASURER, SO THAT THE CHILD REMAINS CALM.

6. Assistant: Put your hands over the child's ears (Arrow 4). Place the child's head against the base of the board with your firm, but relaxed arms (Arrow 5), so that the child looks upwards. The child's line of vision should be perpendicular to the ground (Arrow 6). Your head should be straight, above the child's head. Look straight in the child's eyes.

7. Measurer: Make sure the child is lying flat and in the center of the board (Arrows 7). Place your left hand on the child's shins (above the ankles) or on the knees (Arrow 8). Press them firmly against the height board.

8. Measurer and assistant: Verify the child's position (Arrow 1 to 9). Repeat any necessary step.

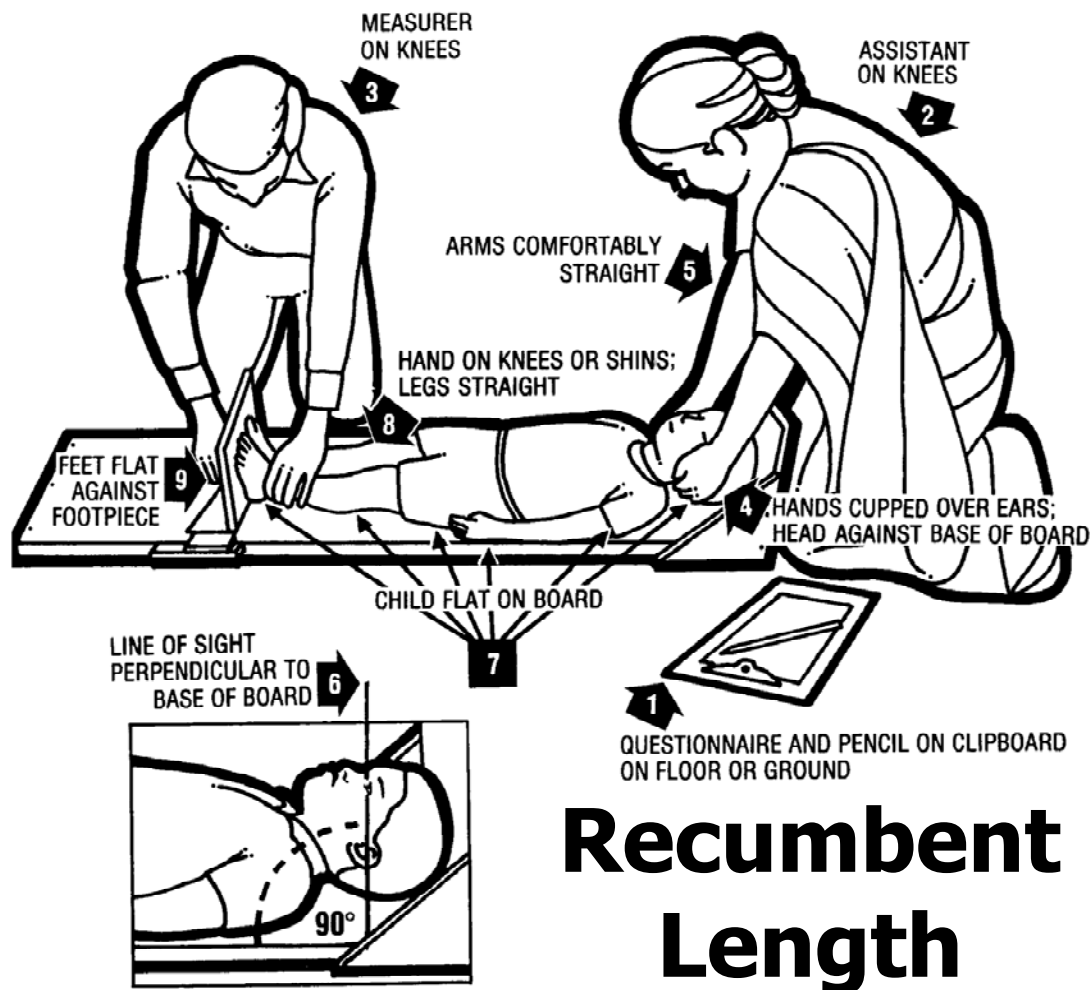


Figure 4: Recumbent length measure for children under 24 months of age.

9. Measurer: Once the child's position is correct, with your right hand, slide the foot piece firmly against the child's heels (Arrow 9). Read the measure out loud to the nearest 0.1 cm (1 mm) (example: 75.6 cm).

10. Assistant: Repeat the measurement out loud and note it down in the questionnaire in the appropriate box.

Bilateral Oedema

1. Describe to the mother the procedure for the assessment of oedema.
2. Apply pressure (hard pressure is not necessary) with the thumbs to top part of both feet.
3. Hold the feet for three seconds (ex. Count slowly one-thousand-and-one, one-thousand-and-two, one-thousand-and-three).

4. Release both feet and assess if the imprint of the thumbs remains for a few seconds on the top of both feet. Edema must be present in both feet (Bilateral) for the child to be considered to have nutrition related edema (Severe Acute Malnutrition). If the child's body appears swollen, ask the mother if the swelling began in the feet. If the swelling did not begin in the feet, it is not bilateral edema.
5. In the box entitled "**Oedema**", put a "**Y**" if bilateral oedema is present or a "**N**" if not .



Figure 5: Bilateral oedema diagnostic test.

All cases of children with bilateral oedema should be reviewed with the team leader and any medical personnel who may be nearby. Bilateral oedema indicates severe acute malnutrition which demands immediate treatment. If the child has bilateral oedema, fill out the referral form to the management of severe acute malnutrition program and arrange with the mother/caregiver to seek treatment as soon as possible.

These are the Selected Languages in Nigeria

Language	Code	Language	Code	Language	Code	Language	Code	Language	Code
Hausa	01	Birou	13	Gwari	25	Kamri	37	Numwana	49
Igbo	02	Bura	14	Ibibio	26	Kataf	38	Nupe	50
Yoruba	03	Chamba	15	Idoma	27	Kilba	39	Piam	51
Afima	04	Ebira	16	Igala	28	Kutep	40	Shuwa Arab	52
Ankwai	05	Efik	17	Ijaw,	29	Mangu	41	Tarok (Iagtang)	53
Ayu	06	Egun	18	Ishan	30	Margi	42	Tiv	54
Bachama	07	Ejaghan	19	Ishekiri	31	Mbembe	43	Urhobo	55
Baju	08	Fulani	20	Jabta	32	Mumuye	44	Wurkun	56
Bakula	09	Fulani	21	Jenjo	33	Munga	45	Yagba	57
Bekwara	10	Fulfudew	22	Jukun	34	Nbula	46	Yandag	58
Berom	11	Gbagi	23	Kadara	35	Ngas	47		
Bine	12	Gwari	24	Kajoro	36	Nizam	48		

DATA EDITING GUIDELINES

This appendix provides guidelines that are to be used during data entry and secondary editing. The guidelines offer detailed instructions on handling inconsistencies in the data. You should refer to these guidelines whenever you see an unfamiliar error message. It is imperative that you follow the guidelines: They will improve the quality and flexibility of your data and ensure that your survey is comparable to other MICS4 surveys.

The guidelines below are listed in ascending order of error message number. Each error message in the data-entry and editing applications has a four digit number. The first position is equal to 0 if the message concerns the Household Questionnaire, 1 if the message concerns the Questionnaire for Individual Women, 2 if the message concerns the Questionnaire for Children Under Five and 9 if the message is not specific to a particular questionnaire type.

Immediately after the error message number is an alphanumeric code that identifies the type of the message. The four possible types of error message are:

- D An inconsistency discovered during data entry that must be resolved
- W An inconsistency discovered during data entry that must be checked but not necessarily resolved
- E An inconsistency discovered during editing that must be resolved
- M An inconsistency discovered during editing that must be checked but not necessarily resolved.

Following the error message number and type is the text of the error message. Many messages appear in both the data-entry and editing applications and have slightly different wording in each. For these error messages, the text listed is the text of the error message in the data-entry application; the text in the editing application is usually substantively the same but provides more information about the data.

On the line below the error message number, type and text are the guidelines for correction. If a message appears in both the data-entry and editing applications and should be handled differently in these two contexts, the guidelines will make this clear. In general, the MICS approach is to look for keying errors during data entry, leaving complex inconsistencies unchanged. During secondary editing, complex inconsistencies are thoroughly investigated and, when appropriate, corrected.

HOUSEHOLD QUESTIONNAIRE

Message

Number Code Description

0010 D Cluster number not valid

The cluster number is either outside the range specified in the sample design or is not equal to the cluster number entered in the data-entry menu. Quit the data-entry program, correct the cluster number and then restart the data-entry program. The data-entry supervisor should be informed that data files with an incorrect cluster number have been created on the computer.

0011 D E Cluster identification is incorrect

A data-entry operator enters all of the questionnaires for a particular cluster into a single file. Within a cluster, all of the geographic identification information for each questionnaire must be identical, and each of the identification information variables must be consistent with the cluster number. If any information, such as urban/rural, region, province or district is inconsistent with the cluster number or is different from the previous questionnaire's identification information, then the identification information *must* be corrected.

0012 W Household number not in increasing order

Within a cluster, households should be entered in ascending order by household number. When this message is displayed, double-check that the household number has been correctly entered. If the household number has been correctly entered and the household is truly out of order, do not make any changes. After you finish with the current household, sort the remaining questionnaires in ascending order by household number so that this message will not be displayed again.

0013 D E More children interviewed than total number of eligible children

On the household cover sheet, the total number of children interviewed (HH15) cannot be larger than the total number of children under the age of five (HH14). Count the number of under-fives in the household schedule and the number of under-five questionnaires. Use these numbers to correct HH14 and HH15. If the number of questionnaires exceeds the number of under-fives in the Household Listing, you must correct the Household Listing (by correcting the eligibility code HL9). In rare cases, this may require you to add a new household member to the Household Listing (use this option only if you are sure that the extra questionnaire does not match any existing household member).

0014 D E More women interviewed than total number of eligible women

On the household cover sheet, the total number of women interviewed (HH13) cannot be larger than the total number of women aged 15 to 49 (HH12). Count the number of eligible women in the household schedule and the number of women's questionnaires. Use these numbers to correct HH12 and HH13. If the number of questionnaires exceeds the number of eligible women in the Household Listing, you must correct the Household Listing (by correcting the eligibility code HL7). In rare cases, this may require you to add a new household member to the Household Listing (use this option only if you are sure that the extra questionnaire does not match any existing household member).

0015 D E More eligible women and children < 5 than household members

The number of eligible women and children on the Household Information Panel (that is, the sum of HH12 and HH14) must be less than or equal to the number of household members (HH11). Check that HH12 and HH14 are correct by counting the number of eligible women and under-fives in the household schedule; if they are not, correct them. Once HH12 and HH14 are correct, count the number of household members in the household schedule and set HH11 equal to this number.

0016 D E Date of interview impossible

The date of interview must be a valid date: The day must agree with the month and year, and the date must be earlier than the current date and later than the date of the start of the survey. Check that the date of interview specified on the questionnaire has been correctly entered; if not, enter it correctly. If the questionnaire is a Household Questionnaire, compare the date of interview to the date of interview for any individual questionnaires in the household. If the questionnaire is an individual questionnaire, compare the date of interview to the date of interview for the Household Questionnaire and any other individual questionnaires. If no such comparison questionnaires exist, compare the date of interview to the dates of interview for other households in the cluster and to the fieldwork dates for that cluster. Correct the error using one of these sources of information and your judgement.

0017 D E Line number of respondent can not be higher than the total number of household members

The line number of respondent must be less or equal to the total number of household members from the Household Listing Form. If there is a discrepancy check that the value of variable HH10 have been entered correctly; if not, enter the correct value. If the value on the questionnaire has been entered correctly but inconsistent with Household Listing, check for the name of the respondent in the Household Listing form and if you find the member set HH10 equal to HL1. If you cannot find the respondent in the Household Listing Form, check if additional questionnaire has been used and try to find the respondent in that questionnaire.

If the inconsistency cannot be resolved by any of the methods above change the value of HH10 to 97 (inconsistent). If both name and line number of respondent were left blank, set HH10 to 99 (missing)

0020 D E Please check and correct the result codes of the individual interviews or the count of completed women and children interviews

On the household cover sheet, the total number of women (HH13) and children (HH15) interviewed must be equal to the number of completed individual questionnaires for women and children. Count the number of completed women and completed children questionnaires and use these numbers to correct HH13 and HH15. If the number of questionnaires exceeds the number of eligible women or children in the Household Listing, you must correct the Household Listing (by correcting the eligibility codes HL7 and HL9). In rare cases, this may require you to add a new household member to the Household Listing (use this option only if you are sure that the extra questionnaire does not match any existing household member).

0031 W E Age and date of birth inconsistent

A household member date of birth and his/her age should be consistent. Check HL5 and HL6 for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, you must resolve this inconsistency. If there are no data-entry errors, check if there is an individual questionnaire for that household member and check the age, date of birth or date of interview. If it is impossible to resolve the inconsistency this way, you must resolve it using one of the methods listed below. The methods are listed in order of precedence, meaning that you should try them in the order in which they are listed, stopping when the inconsistency has been resolved.

If the month of birth and the month of interview are the same and the member's reported age (HH6) is one year smaller than his/hers calculated age (that is, the age according to HH5), leave the data unchanged. If both month and year of birth are valid (and the situation above does not apply), correct the member's reported age to equal his/her calculated age. If only year of birth is valid, set the member's year of birth equal to 9997.

0090 W E Level and grade of education inconsistent

The highest grade completed at a particular level must be less than or equal to the maximum grade at that level. Check that the level and grade have been correctly entered; if not, enter them correctly. If the data have been correctly entered, check if an error may have occurred in the form in which the answer was recorded. For example, the interviewer may have recorded the total number of years of schooling rather than the grade at the reported level. For example, if the reported level of education is secondary, the response to the highest grade should be between 01 and 06. If the response recorded for the grade is 07, this is probably a mistake due to treating secondary education as grades 7 through 12. In this case, the grade should be changed to 01. Finally, if there is an individual questionnaire for this household member, you can try to resolve the problem by checking the values of variables WB4 and WB5.

If the inconsistency cannot be resolved by any of the methods above, change the number of years of schooling to 97 (inconsistent). (These editing instructions should be adapted to fit the educational system in your country).

0091 D E Current level of education (ED6A=%02d) greater than highest level (ED4A=%02d)

The household member's current level of education cannot exceed his/her highest level of education. Check that ED4A and ED6A have been correctly entered; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, check the values of ED8A (if applicable) and WB4 (if there is an individual questionnaire for this household member). If you cannot use this information to resolve the problem, set ED4A equal to ED6A unless it is clear that ED6A is incorrect; in this case, set ED6A equal to ED4A.

0092 W E Current grade of education (ED6B=%02d) greater than highest grade (ED4B=%02d) plus one [two]

If a household member's current and highest level are the same, his/her current grade of education should not be more than one grade higher than her highest completed grade. If this error occurs during data entry, check for keying errors and correct any that are found; if none are found, leave the data unchanged. During editing, this check is relaxed by making the allowable difference two grades (to accommodate children who skip a grade), but no more. If the gap between maximum grade and current grade is larger than two, try to resolve the inconsistency by checking for keying errors and by examining variables ED8B (if applicable) and WB5 (if the household member has an individual questionnaire). If you cannot resolve the inconsistency, set ED6B equal to 97 (inconsistent).

0093 D E Previous year's level of education (ED8A=%02d) greater than highest level (ED4A=%02d)

The household member's level of education last year cannot exceed his/her highest level of education. Check that ED4A and ED8A have been correctly entered; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, check the values of ED6A (if applicable) and WB4 (if there is an individual questionnaire for this household member). If you cannot use this information to resolve the problem, set ED4A equal to ED8A unless it is clear that ED8A is incorrect; in this case, set ED8A equal to ED4A.

0094 W E Previous year's grade of education (ED8B=%02d) greater than highest grade (ED4B=%02d) plus one [two]

If a household member's previous year's and highest level are the same, his/her previous year's grade of education should not be more than one grade higher than his/her highest completed grade. If this error occurs during data entry, check for keying errors and correct any that are found; if none are found, leave the data unchanged. During editing, this check is relaxed by making the allowable difference two grades (to accommodate children who skip a grade), but no more. If the gap between maximum grade and the previous year's grade is larger than two, try to resolve the inconsistency by checking for keying errors and by examining variables ED6B (if applicable) and WB5 (if the household member has an individual questionnaire). If you cannot resolve the inconsistency, set ED8B equal to 97 (inconsistent).

0095 W E Previous year's education (ED8A/B=%02d/%02d) greater than current year (ED6A/B=%02d/%02d)

If a household member's previous year's and current level are the same, his/her previous year's grade of education should not be higher than his/her current grade. If this error occurs during data entry, check for keying errors and correct any that are found; if none are found, leave the data unchanged. During editing, try to resolve the inconsistency by checking for keying errors and by examining variables ED4, ED6 and ED8. If you cannot resolve the inconsistency, set ED8B equal to 97 (inconsistent).

0101 D E This household member is eligible; enter her line number

For any female household member aged 15-49, HL7 must equal her line number. Check that the values of variables HL4, HL5, HL6 and HL7 have been entered correctly; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, check whether there is a Questionnaire for Individual Women for this household member. If there is, set HL7 equal to HL1.

If there is no individual questionnaire for the household member and you cannot determine that her age or sex is incorrect, you must assume that the age and sex information on the questionnaire is correct. Set HL7 equal to HL1 and create a women's questionnaire for her. On a blank woman's questionnaire, fill out the identification variables using the information on the Household Questionnaire, circle response code '9' and write 'not interviewed' in the space provided. You may also have to correct the values of variables HH12 and HH13 and update the cluster control sheet and the cluster tracking form to reflect the change in the number of eligible women.

0102 D E This household member is ineligible; enter 0

For any household member who is not a woman aged 15-49, HL7 must equal 0. Check that the values of variables HL4, HL5, HL6 and HL7 have been entered correctly; if not, enter them correctly. If there is an individual questionnaire for this household member, use it to correct HL4, HL5 and HL6. If there is no women's questionnaire and HL4, HL5 and HL6 appear to be correct, set HL7 equal to 0. You may also have to correct the values of variables HH12 and HH13 and update the cluster control sheet and the cluster tracking form to reflect the change in the number of eligible women.

0104 D E Only one head of household allowed, %d found--check relationship codes of all members

The head of household should be listed on the first line of the household schedule and nowhere else. Check if the relationship codes of all household members have been entered correctly; if not, enter them correctly. If there are no keying errors, carefully check the relationship codes of household members in relation to the member listed on the first line, and use this information to change the relationship code of the second head. If you cannot resolve the inconsistency, set HL3 of second head equal to 97 (inconsistent).

0110 D E Total number of %s in household listing (%d) doesn't equal %s (%d)

The counts of various types of household members from the Household Listing Form must equal the actual number of such household members in the Household Information Panel. If there is a discrepancy, check first for keying errors and correct any that you find. If there are no keying errors, carefully count the number of household members of the particular type. Set the total equal to this number.

0111 D E Total %s (%02d) doesn't equal number on the cover sheet (%s=%02d)

The counts of eligible women and under-fives at the end of the Household Listing Form (variables TOHL7 and TOHL9, respectively) must equal the same values on the Household Information Panel (variables HH12 and HH14, respectively). If there is a discrepancy, check first for keying errors and correct any that you find. If there are no keying errors, carefully count the number of eligible women and under-fives. Set HH12 and TOHL7 equal to the number of eligible women and HH14 and TOHL9 equal to the number of under-fives.

0120 D E Caretaker's line number (HL8=%02d) greater than number of household members (HH11=%02d)

The line number of the caretaker of a child aged 5-14 (that is, the value of variable HL8) must be a valid line number. Check that the value of variable HL8 has been entered correctly; if not, enter it correctly. If this does not resolve the problem, identify the most likely caretaker for the child using variables HL3, HL12 and HL14 and set HL8 equal to his or her line number.

0121 D E This child is eligible; enter caretaker's line number

For any household member aged 5-14, HL8 must be equal to her caretaker's line number. Check that the values of variables HL6 and HL8 have been entered correctly; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, you must assume that the age information on the questionnaire is correct. If HL12 has a valid value and does not equal zero, set HL8 equal to HL12. If HL12 has an invalid value or is equal to zero and HL14 has a valid value and does not equal zero, set HL8 equal to HL14. If neither of these solutions is possible, use your judgement to determine the line number of the child's caretaker.

0122 D E This household member is ineligible; check entries, entering 0 if ineligible

For any household member not aged 5-14, HL8 must be equal to zero. Check that the values of variables HL6 and HL8 have been entered correctly; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, you must assume that the age information on the questionnaire is correct and set HL8 equal to zero.

0130 D E Caretaker's line number (HL9=%02d) greater than number of household members (HH11=%02d)

The line number of the caretaker of a child aged 0-4 (that is, the value of variable HL9) must be a valid line number. Check that the value of variable HL9 has been entered correctly; if not, enter it correctly. If the value on the questionnaire has been entered correctly but is inconsistent, check the value of variable UF6 on the Questionnaire for Children Under Five for this child. Set HL9 equal to this value. If this does not

resolve the problem, identify the most likely caretaker for the child using variables HL3, HL12 and HL14 and set HL9 equal to his or her line number.

0131 D E This child is eligible; enter caretaker's line number

For any household member aged 0-4, HL9 must be equal to her caretaker's line number. Check that the values of variables HL6 and HL9 have been entered correctly; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, check whether there is an under-five questionnaire for this household member. If there is, set HL7 equal to UF6.

If there is no individual questionnaire for the household and you cannot determine that her age is incorrect, you must assume that the age information on the questionnaire is correct. Assign a valid value to HL9 using the procedure laid out for error message 0121. Once you have done this, you must create an under-five questionnaire for this household member. On a blank under-five questionnaire, fill out the identification variables using the information on the Household Questionnaire, circle response code '9' and write 'not interviewed' in the space provided. You may also have to update the cluster control sheet and the cluster tracking form to reflect the change in the number of under-fives.

0132 D E This household member is ineligible; enter 0

For any household member not aged 0-4, HL9 must be equal to zero. Check that the values of variables HL6 and HL9 have been entered correctly; if not, enter them correctly. If the values on the questionnaire have been correctly entered but are inconsistent, check whether there is an under-five questionnaire for this household member. If there is, use it to correct HL6. If there is no individual questionnaire and HL6 appears to be correct, set HL9 equal to zero. You may also have to update the cluster control sheet and the cluster tracking form to reflect the change in the number of under-fives.

0141 W M The head of household must be on line 1

The head of household should be listed on the first line of the household schedule and nowhere else. Check for data-entry errors and correct any that you find. If this does not resolve the inconsistency and there are two heads of household listed in the Household Listing, change the line number of the second head of household to 97 unless you can determine his or her relation to the head of household. In all other cases, leave the data unchanged.

0142 W M HL1=02%d: The spouse of the head of household should be of the opposite gender

The head of household and her/his spouse are generally of opposite genders. If they are not, check for keying errors in variables HL3 and HL4. If you cannot resolve the problem, leave the data unchanged.

0143 W M The head of household is less than %02d years older than his/her child (HL1=%02d)

For each country there is a minimum age at birth of first child (the default value is 144 months or 12 years). If the age difference between the head of household and her/his children is less than this minimum difference, check for keying or interviewer errors in variables HL3 and HL6. If you cannot resolve the problem, leave the data unchanged.

0145 W M The head of household is less than %02d years older than his/her grandchild (HL1=%02d)

For each country there is a minimum age at birth of first child (the default value is 144 months or 12 years). If the age difference between the head of household and her/his grandchildren is less than twice this minimum difference, check for keying or interviewer errors in variables HL3 and HL6. If you cannot resolve the problem, leave the data unchanged.

0146 W M The head of household (HL1=1) is less than %02d years younger than his/her parent (HL1=%02d)

For each country there is a minimum age at birth of first child (the default value is 144 months or 12 years). If the age difference between the head of household and her/his parent is less than this minimum difference, check for keying or interviewer errors in variables HL3 and HL6. If you cannot resolve the problem, leave the data unchanged.

0147 W M Head of the HH on line #%d is younger than 15 years old (%d)

For each country the household head should be 15 years or older. If the household head is younger than 15 years old, check for keying or interviewer errors in variables HL3 and HL6. If you cannot resolve the problem, leave the data unchanged.

0161 D E %s line number (HL12/HL14=%02d) greater than number of household members (HH11=%02d)

The line number of the child's mother (HL12) and father (HL14), if not missing, cannot be greater than the number of household members (HH11). Check for keying errors in HL12 or HL14. If this does not resolve the problem, check the values of variables HL8, HL9 and HL3. If you cannot resolve the inconsistency, set HL12 or HL14 equal to 97.

0162 D E %s line number (HL12/HL14=%02d) equals child's line number (HL1=%02d)

A child cannot be his or her own mother (HL12) or father (HL14). Check for keying errors in HL12 or HL14. If this does not resolve the problem, check the values of variables HL8, HL9 and HL3. If you cannot resolve the inconsistency, set HL12 or HL14 equal to 97.

0163 W M Mother's line number (HL12=%02d) doesn't equal caretaker's line number (%s=%02d)

The value of HL12 indicates that the child's mother is in the household, but she is not the child's primary caretaker according to HL8 or HL9. This situation is possible but unusual. Check for keying errors in variables HL12 and HL8 or HL9. If this does not resolve the situation, check the values of variables HL3, HL8, HL9 and HL12. If you can determine the source of the inconsistency using these variables, correct it; otherwise, leave the data uncorrected.

0164 W E HL1=%02d: Either sex (HL4=%01d) or age (HL6=%02d) of %s (%s=%02d) incorrect

A child's mother must be female and the gap between her age and the child's age must not be smaller than the minimum generation gap. A child's father must be male and the difference between his age and the child's age must not be smaller than the minimum generation gap. Check HL12 or HL14, the child's and parents' ages (HL6) and the parents' sex (HL4) for keying errors. If none are found and this message appears during data entry, leave the data unchanged.

During editing, you must resolve this inconsistency. If, after reviewing the Household Listing and any relevant individual questionnaires, you cannot determine a valid line number for the child's parent, set HL12 or HL14 equal to 97.

0170 D E If the HH owns animals (HC13=1) then one of the HC14 responses must equal a non-zero value

If the household owns animals (HC13 is equal to one), then at least one of HC14 responses must be greater than 0. Check HC13 and HC14 for keying errors. If no such errors were made, set the value of HC13 to 2.

0171 E HL1=%02d: Relationship (HL3=%02d) between %s (%s=%02d, HL3=%02d) and child not correct

The variables HL12 and HL14 give the line number of a household member's mother and father, respectively, if they live in the household. The variable HL3 gives a household member's relationship to the head of household. The household member's relationship to the head of household must be consistent with his mother and/or father's relationship to the head of household. For example, if a household member is the son of the head of household, his mother must either be the head of household or the spouse of the head of household, with rare exceptions.

Check HL3, HL12 and HL14 for keying errors, and correct any that you find. If this does not resolve the inconsistency, check for interviewer errors and correct any that you find. If you are unable to resolve the inconsistency, set the most inconsistent relationship code to 97 (inconsistent).

0172 E HL1=%02d: Child has different %s (%02d vs %02d) in household according to relationship codes

This message is closely related to message 0171. For each household member (henceforth, the original household member), the editing program searches for another household member who, based on her or his relationship to the head of household and the original household member's relationship to the head of household, could be the original household member's mother or father. If the line number of the potential mother or father does not equal HL12 or HL14, respectively, the error message above is produced.

Check HL3, HL12 and HL14 for keying errors, and correct any that you find. If this does not resolve the inconsistency, check for interviewer errors and correct any that you find. If you are unable to resolve the inconsistency, set the most inconsistent relationship code to 97 (inconsistent).

0180 D E Line number (TN12=%02d) greater than number of household members (HH11=%02d)

Line number of household member that was sleeping under mosquito net the night before the survey must be less or equal to the total number of household members. Check TN12 and HH11 for keying errors, and make necessary corrections. If no keying errors found check Household Listing and try to resolve inconsistency. If it is not possible set the value of TN12 to 97.

0181 D E Line number (TN12=%02d) equal to line number for different net

One household member can sleep under one net only on the night preceding survey. Check TN12 for keying errors, and make necessary corrections. If no keying errors found check Household Listing and try to resolve inconsistency. If it is not possible set the value of TN12 for both household members to 97.

0182 W E Result of number of people sleeping under the net inconsistent with previous question

If at least one household member slept under mosquito net (TN11 is equal to one), then at least one of TN12 responses must be greater than 0. Check TN11 and TN12 for keying errors. If no such errors were made, set the value of TN11 to 2.

0183 W E Person (%02d) list as sleeping under net last night did not sleep in household (HL10=%1d)

Household member that slept under mosquito net, has to be recorded to slept in the household on the night preceding the survey. Check TN12 and HL10 for keying errors and if no errors found set HL10 to 1 for that household member.

0201 W M Child worked more than 80 hours in past week; please check values of CL4, CL6, CL8 and CL10

It is unusual for children to work more than 80 hours a week. Check for keying or interviewer errors in variables CL4, CL6, CL8 and CL10. If no such errors were made, leave the data unchanged.

0301 W M Total number of children aged 2-14 years doesn't agree with HH listing count (%d)

The number of children aged 2-14 years in Table 1 of the Child Discipline module should equal the number of children aged 2-14 years in the Household Listing. If this is not true, check CD6 for keying errors. If no such errors were made, leave the data unchanged. (You should only correct keying errors for this question because one of the goals is to see whether the child selection system can be easily implemented.)

0302 W M Rank of child (CD8=%02d) greater than number of children 2-14 (CD6=%02d)

The rank of the selected child in Table 1 (CD8) cannot be larger than the number of children in Table 1 (CD6). Check CD6 and CD8 for keying errors. If no such errors were made, leave the data unchanged. (You

should only correct keying errors for this question because one the goals is to see whether the child selection system can be easily implemented.)

0303 W M If only one child aged 2-14 years, his/her rank must equal 1

If there is only one child in Table 1 (CD6 is equal to one), the rank of the selected child (CD8) must be equal to one. Check CD6 and CD8 for keying errors. If no such errors were made, leave the data unchanged. (You should only correct keying errors for this question because one of the goals is to see whether the child selection system can be easily implemented.)

0304 D E Line number (CD9=%02d) greater than number of household members (HH11=%02d)

CD9 must give the line number of a household member aged 2-14 years. This variable must be corrected because it will be used during the analysis of the data. Check CD9 for keying errors. If no such errors were made, use the name of the child (written on the questionnaire above CD9) and the information in Tables 1 and 2 to determine the correct line number for the child. If you cannot identify the correct line number for the child, set CD9 equal to 97 (inconsistent). DO NOT correct CD6 and CD8.

0305 D E This household member (age=%02d) is not eligible

CD9 must give the line number of a household member aged 2-14. This variable must be corrected because it will be used during the analysis of the data. Check CD9 for keying errors. If no such errors were made, use the name of the child (written on the questionnaire above CD9) and the information in Tables 1 and 2 to determine the correct line number for the child. If you cannot identify the correct line number for the child, set CD9 equal to 97 (inconsistent). DO NOT correct CD6 and CD8.

QUESTIONNAIRE FOR INDIVIDUAL WOMEN

1000 D Line number of woman incorrect; next questionnaire is %s on line %02d

After the Household Questionnaire has been entered, the data-entry program requires the data-entry operator to enter the individual questionnaires. In particular, it requires that any women's questionnaire be entered in ascending order of line number, followed by any under-five questionnaires, also in ascending order of line number. If the data-entry operator enters a line number in variable WM4 that is not the line number of the next eligible woman, the error message above will be displayed. Check for data-entry errors in WM4 and correct any that you find. If there are no such errors, the physical questionnaires must be incorrectly sorted. Sort them correctly and find the correct questionnaire to enter.

If no questionnaire exists for the woman that the data-entry program is expecting, check the Household Listing to make sure that this individual is eligible for a women's interview. If the woman is not in fact eligible, you must go back and correct the Household Listing. If the woman is eligible, you must create a questionnaire for her. On a blank women's questionnaire, fill out the identification variables using the information on the Household Questionnaire, circle response code '9' and write 'not interviewed' in the space provided.

1001 W E Woman either too young or too old to be interviewed

Women must be aged 15 to 49 to be eligible for the women's questionnaire. Depending on the date of interview, this translates into a minimum and maximum possible date of birth. Occasionally a woman's date of birth is outside of this range. Check for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, you must resolve this inconsistency. If the woman's month of birth is the same as the month of interview, her year of birth is 50 years before the year of interview and her age is recorded as 49, then leave the data unchanged (the presumption is that the woman's day of birth is greater than the day of interview). If the woman's age (WB2) is equal to 49 and only her year of birth is given, set her year of birth (WB1Y) equal to 9997.

For all other cases, if the woman was born outside of the expected range then she should be dropped from the sample due to ineligibility. Make a large 'X' on the front cover of the woman's questionnaire (using a green pen) and write 'ineligible' in a prominent place. Correct the woman's age and eligibility in the household schedule and the summary variables HH12 and HH13. You must also change the cluster control sheet and the cluster tracking form to reflect the change in the number of eligible women.

1002 W M Age of woman (WB2=%02d) and age in household different (HL6=%02d)

The age of the woman in variable WB2 and her age in the household schedule (HL6) should generally be the same. Check for data-entry errors in WB2 and HL6 and correct any that you find. If there are no data-entry errors, leave the data unchanged.

If there are two or more eligible women in the household, each of the individual questionnaires should be checked to ensure that the correct questionnaire is being entered. Occasionally the wrong line numbers are written on the cover pages of the questionnaires. If this is the case, the line numbers should be corrected, the questionnaires reordered and then entered according to the correct order.

1003 W E Age of woman and her date of birth inconsistent

A woman's date of birth and her age should be consistent. Check WM6, WB1 and WB2 for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, you must resolve this inconsistency. If there are no data-entry errors, check other dates on the woman's questionnaire (for example, date of first birth CM2, date of marriage MA8) and see if the age, date of birth or date of interview is clearly inconsistent. If this method does not resolve the inconsistency, you must resolve it using one of the methods listed below. The methods are listed in order of precedence, meaning that you should try them in the order in which they are listed, stopping when the inconsistency has been resolved.

If the month of birth and the month of interview are the same and the woman's reported age (WB2) is one year smaller than her calculated age (that is, her age according to WB1), leave the data unchanged. If both month and year of birth are valid (and the situation above does not apply), correct the woman's reported age to equal her calculated age. If only year of birth is valid, set the woman's year of birth equal to 9997.

1004 W M Woman's month of birth (WB1M=%02d) different from household month of birth (HL5M=%02d)

The month of birth of the woman in variable WB1M and her month of birth in the household schedule (HL5M) should generally be the same. Check for data-entry errors in WB1 and HL5 and correct any that you find. If there are no data-entry errors, leave the data unchanged.

Similar as in message 1102 if there are two or more eligible women in the household, each of the individual questionnaires should be checked to ensure that the correct questionnaire is being entered.

1005 W M Woman's year of birth (WB1Y=%04d) different from household year of birth (HL5Y=%04d)

The year of birth of the woman in variable WB1Y and her year of birth in the household schedule (HL5Y) should generally be the same. As in message 1004, check for data-entry errors in WB1 and HL5 and correct any that you find. If there are no data-entry errors, leave the data unchanged. Also, check if the correct individual questionnaire is being entered.

1011 W M School attendance different in household (ED3=%02d) and women's questionnaires (WB3=%02d)

The school attendance of a woman in her individual questionnaire (WB3) and the Household Questionnaire (ED3) should generally be the same. Check for data-entry errors in WB3 and ED3 and correct any that you find. If there are no data-entry errors, leave the data unchanged.

1012 W M Woman's level of education different in household (ED4A=%02d) and women's questionnaires (WB4=%02d)

The level of education of a woman in her questionnaire (WB4) and the Household Questionnaire (ED4A) should generally be the same. Check for data-entry errors in WB4 and ED4A and correct any that you find. If there are no data-entry errors, leave the data unchanged.

1013 W M Woman's grade of education different in household (ED4B=%02d) and women's questionnaires (WB5=%02d)

The level of education of a woman in her questionnaire (WB5) and the Household Questionnaire (ED4B) should generally be the same. Check for data-entry errors in WB5 and ED4B and correct any that you find. If there are no data-entry errors, leave the data unchanged.

1014 W E Level and grade of education inconsistent

The highest grade completed at a particular level must be less than or equal to the maximum grade at that level. Check that the level and grade have been correctly entered; if not, enter them correctly. During data entry, do nothing else. During editing, this inconsistency must be resolved. If the data have been correctly entered, check if an error may have occurred in the form in which the answer was recorded. For example, the interviewer may have recorded the total number of years of schooling rather than the number of years at the reported level. For example, if the reported level of education is secondary, the response to the highest grade should range between 01 through 06. If the response recorded for the grade is 08, this is

probably a mistake due to treating secondary education as grades 7 through 12. In this case the grade should be changed to 02.

If the inconsistency cannot be resolved by any of the methods above, change the number of years of schooling to 97 (inconsistent). (These editing instructions should be adapted to fit the educational system in your country).

1101 W E Date of birth of first child before age %1d

Each survey has a country-specific minimum age at first birth (default value: 12 years old), and no one should give birth at a younger age. Check for data-entry errors in CM2, WM6, WB1 and WB2 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. Try first to use other available information about this woman and child (for example, the child's age in the Household Listing, if present, the child's date of birth if he/she has an under-five questionnaire, etc.) to resolve the inconsistency, but only rely upon this evidence if it is irrefutable. If the actions above don't resolve the inconsistency and the year of birth (CM2Y) is inconsistent (for example, the year of birth is less than 12 years after the women's year of birth), set it equal to 9997. If the month of birth (CM2M) is inconsistent (for example, the year of interview and birth are 12 years apart), set it equal to 97.

1102 W E Date of birth of first child after date of interview

No child should be born after the date of interview. Check for data-entry errors in CM2 and WM6 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. Try first to use other available information about this woman and child (for example, the child's age in the Household Listing, if present, the child's date of birth if he/she has an under-five questionnaire, etc.) to resolve the inconsistency, but only rely upon this evidence if it is irrefutable.

If the actions above don't resolve the inconsistency and the year of birth (CM2Y) is inconsistent (that is, the year of birth is larger than the year of interview), set it equal to 9997. If the month of birth (CM2M) is inconsistent (that is, the year of interview and birth are the same and the month of birth is larger than the month of interview), set it equal to 97. Finally, if the day of birth (CM2D) is inconsistent (that is, the month and years of birth and interview are the same and day of birth is larger than the day of interview), set it equal to 97.

1103 W E Had first birth when less than %02d years old

This message is similar to message 1101 but is only performed when the year of the woman's first birth is missing or unknown. The editing program compares the woman's current age to her age at first birth and generates this message if the difference is less than the survey's minimum age at first birth (default value: 12 years old). Check for data-entry errors in CM3 and WB2 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. If other available information about this woman and child (for example, the child's age in the Household Listing, if present, the child's date of birth if he/she has an under-five questionnaire, etc.) does not easily resolve the inconsistency, set CM3 equal to 97 (inconsistent).

1110 D E Number of boys and girls must be greater than zero

If variable CM4 equals 1, then the sum of variables CM5A and CM5B must not equal zero. If variable CM6 equals 1, then the sum of variables CM7A and CM7B must not equal zero. If variable CM8 equals 1, then the sum of variables CM9A and CM9B must not equal zero. Check for data-entry errors and correct any that you find. If there are no data-entry errors, and the sum of the variables does equal zero, change the response to the preceding question to 2.

1111 D E Number of children ever born incorrect

A woman's total number of live births (CM10) must be equal to the sum of her children at home (CM5), her children elsewhere (CM7) and her number of children who have died (CM9). Check for data-entry errors and correct any that you find. If no data-entry errors were made, change CM10 to equal the sum of CM5, CM7 and CM9.

1121 W E Date of birth of last child before age %1d

Each survey has a country-specific minimum age at first birth (default value: 12 years old), and no one should give birth at a younger age. Check for data-entry errors in CM12, WM6, WB1 and WB2 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. Try first to use other available information about this woman and child (for example, the child's age in the Household Listing, if present, the child's date of birth if he/she has an under-five questionnaire, etc.) to resolve the inconsistency, but only rely upon this evidence if it is irrefutable. If the actions above don't resolve the inconsistency and the year of birth (CM12Y) is inconsistent (for example, the year of birth is less than 12 years after the women's year of birth), set it equal to 9997. If the month of birth (CM12M) is inconsistent (for example, the year of interview and birth are 12 years apart), set it equal to 97.

1122 W E Date of birth of last child after date of interview

No child should be born after the date of interview. Check for data-entry errors in CM12 and WM6 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. Try first to use other available information about this woman and child (for example, the child's age in the Household Listing, if present, the child's date of birth if he/she has an under-five questionnaire, etc.) to resolve the inconsistency, but only rely upon this evidence if it is irrefutable.

If the actions above don't resolve the inconsistency and the year of birth (CM12Y) is inconsistent (that is, the year of birth is larger than the year of interview), set it equal to 9997. If the month of birth (CM12M) is inconsistent (that is, the year of interview and birth are the same and the month of birth is larger than the month of interview), set it equal to 97. Finally, if the day of birth (CM12D) is inconsistent (that is, the month and years of birth and interview are the same and day of birth is larger than the day of interview), set it equal to 97.

1123 W E Date of birth of only child must be the same in CM2 and CM12

If a woman has given birth only one time, then the dates of birth of her first (CM2) and last child (CM12) must be the same. Check for data-entry errors in CM2, CM10 and CM12 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. Check for any

information that shows that the woman has had more than one live birth (for example, does she have more than one child in the Household Listing?). If you find irrefutable evidence that the woman has had more than one live birth, correct variables CM4 through CM10. Otherwise, set the date of the woman's first birth (CM2) equal to the date of her last birth (CM12).

1124 W E Date of birth of last child before date of birth of first child

The date of birth of a woman's first child (CM2) must be before the date of birth of her last child (CM12). Check for data-entry errors in CM2 and CM12 and correct any that you find. During data entry, do nothing else. During editing you must resolve this inconsistency. Check for any information (for example, vaccination dates if either child has an individual questionnaire) that will allow you to correct either CM2 or CM12. Check also if the interviewer reversed the dates and wrote the date of last birth in CM2 and the date of first birth in CM12. If this is the case, reverse the dates on the questionnaire (that is, set CM2 equal to CM12's original value and CM12 equal to CM2's original value). If you are unable to correct either CM2 or CM12 with certainty, set CM2D equal to 97 (inconsistent), set CM2M equal to 97 and set CM2Y equal to 9997.

1131 D E Date of birth of last child was in last 2 years

If the woman has had a birth in the last 2 years, then CM13 must equal 'Y'. Check CM12 and WM6 (date of interview) for data-entry errors and correct any that you find. If no data-entry errors were made, check any other sources of information about the date of the woman's most recent birth (including any under-five questionnaires). If you find irrefutable evidence that the child's date of birth is incorrect, change CM12; otherwise, you must assume that the child's date of birth is correct and change CM13's value to 'Y'.

1132 D E No birth in last 2 years

If the woman has not had a birth in the last 2 years, then CM13 must equal 'N'. Check CM12 and WM6 (date of interview) for data-entry errors and correct any that you find. If no data-entry errors were made, check any other sources of information about the date of the woman's most recent birth (including any under-five questionnaires). If you find irrefutable evidence that the child's date of birth is incorrect, change CM12; otherwise, you must assume that the child's date of birth is correct and change CM13's value to 'N'.

1201 W M Last tetanus dose before last pregnancy came when woman was less than %02d

The woman's last tetanus dose before her last pregnancy should not be before she was born and generally should not be before the country-specific minimum age at first birth (though the latter is possible if the woman received the dose for a reason other than pregnancy). Check for data-entry errors in WB1, WB2 and MN11 and correct any that you find. During data entry, do nothing else.

During editing, if the dose was received before the minimum age at first birth but after the woman's date of birth, do nothing else. However, if the dose was received before the woman was born, set MN11 equal to 97.

1301 D E Special answers inconsistent

The source of the weight information can be special (that is, equal to 9) if and only if the child's weight is equal to 'Don't know' (9.998) or is 'Missing' (9.999). Check for data-entry errors. If no such error was made

and the weight is equal to 9.998 or 9.999, set the source equal to 9. If the source is special and the weight is a valid value, set the source equal to 7 (inconsistent).

1401 W M According to DOB (%02d/%04d) and DOM (%02d/%04d), woman less than age %02d when married

No woman should be married before she is born and generally should not be married before the country-specific minimum age at first marriage (though the latter is possible). Check for data-entry errors in WM6, WB1, WB2 and MA8 and correct any that you find. During data entry, do nothing else.

During editing, if the marriage was before the minimum age at first marriage but after the woman's date of birth, do nothing else. However, if the marriage was before the woman was born, set MA8M equal to 97 and MA8Y equal to 9997.

1403 W E Age at first marriage (%02d) and date of first marriage (%02d/%04d) inconsistent (DOB=%02d/%04d)

If a woman has a valid year of marriage and an age at first marriage, these two pieces of information must be consistent with one another. Check MA8, MA9, WM6 and WB1 for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, if no data-entry errors are present, set MA8M equal to 97 (inconsistent) and MA8Y equal to 9997.

1404 W E Age at first marriage (%02d) greater than current age (%02d)

A woman's age at first marriage (MA9) cannot be greater than her current age (WB2). Check MA9 and WB2 for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, if no data-entry errors were made, set MA9 equal to 97.

1601 W E Mother (age=%02d) less than %02d years older than daughter (age at circumcision=%02d)

The difference between the woman's age and her daughter's age at circumcision should not be less than minimum age at first birth. Check WB2 for data-entry errors and correct any that you find. During data entry do nothing else. During editing, if no data-entry errors were made, change FG16's value to 97 (inconsistent).

1602 D E Number of living daughters (FG9=%02d) not equal to total number of living daughters in CM5/7B (%02d)

There should be no difference in number on living daughters women has on questions CM5, CM7 and FG9. Check CM5B, CM7B and FG9 for data entry errors and correct any that you find. If no data entry errors are made, change FG9's value to sum of CM5B and CM7B.

1801 W E Woman's age at first sex (SB1=%02d) greater than her current age (WB2=%02d)

A woman's age at first sex (SB1) cannot be greater than her current age (WB2). Check SB1 and WB2 for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, if no data-entry errors were made, set SB1 equal to 97.

1802 W E Maximum age at last sex (WB2-SB3N=%02d) less than age at first sex (SB1=%02d)

The woman's maximum age at last sex (her current age minus her years since last sex when SB3U = 4) cannot be less than her age at first sex. Check SB1 and SB3 for data-entry errors and correct any that you find. If no such errors were made, set SB3U equal to 9 (special) and SB3N equal to 97 (inconsistent).

1803 D E Total number of lifetime partners (SB15=%02d) must be bigger than number of partners in the last 12 months (SB14=%02d)

The woman's maximum number of lifetime partners (SB15) cannot be less than number of partners in the last year (SB14). Check SB14 and SB15 for data-entry errors and correct any that you find. If no such errors were made, set SB15 equal to 97 (inconsistent).

QUESTIONNAIRE FOR CHILDREN UNDER FIVE**2000 D Line number of child incorrect; next questionnaire is %s on line %02d**

After the Household Questionnaire has been entered, the data-entry program requires the data-entry operator to enter the individual questionnaires. In particular, it requires that any women's questionnaire be entered in ascending order of line number, followed by any under-five questionnaires, also in ascending order of line number. If the data-entry operator enters a line number in variable UF4 that is not the line number of the next eligible child, the error message above will be displayed. Check for data-entry errors in UF4 and correct any that you find. If there are no such errors, the physical questionnaires must be incorrectly sorted. Sort them correctly and find the correct questionnaire to enter.

If no questionnaire exists for the child that the data-entry program is expecting, check the Household Listing to make sure that this child is eligible for an under-five interview. If the child is not in fact eligible, you must go back and correct the Household Listing. If the child is eligible, you must create a questionnaire for him/her. On a blank under-five questionnaire, fill out the identification variables using the information on the Household Questionnaire, circle response code '9' and write 'not interviewed' in the space provided.

2001 W E Child either too young or too old to be interviewed

Children are eligible for the under-five questionnaire if they are aged 0 to 4. Depending on the date of interview, this translates into a minimum and maximum possible date of birth. Occasionally a child's date of birth is outside of this range. If the child's day of birth is invalid, the child's month of birth is the same as the month of interview, the child's year of birth is 5 years before the date of interview, and the age of the child is recorded as four, then leave the data unchanged (the presumption is that the child's day of birth is greater than the day of interview). If the child's age (AG2) is equal to four and only her/his year of birth is given, set her/his year of birth (AG1Y) equal to 9997.

For all other cases, if the child was born outside of the expected range, then the child should be dropped from the sample due to ineligibility. Make a large 'X' on the front cover of the under-five questionnaire (using a green pen) and write 'ineligible' in a prominent place. Correct the child's age and eligibility in the household schedule and the summary variables HH14 and HH15. You must also change the cluster control sheet and the cluster tracking form to reflect the change in the number of under-fives.

2002 W M Age of child (AG2=%02d) and age in household different (HL6=%02d)

The age of the child in variable AG2 and her/his age in the household schedule (HL6) should generally be the same. Check for data-entry errors in AG2 and HL6 and correct any that you find. If no data-entry errors were made, leave the data unchanged.

If there are two or more under-fives in the household, each of the under-five questionnaires should be checked to ensure that the correct questionnaire is being entered. Occasionally the wrong line numbers are written on the cover pages of the questionnaires. If this is the case, the line numbers should be corrected and the questionnaires reordered and then entered in the correct order.

2003 W E Age of child and date of birth inconsistent

A child's date of birth and her/his age should be consistent. Check UF8, AG1 and AG2 for data-entry errors and correct any that you find. If there are no data-entry errors, check other dates on the child's questionnaire (for example, the dates on which BCG and Polio 0 were given) and see if age, date of birth or date of interview is clearly inconsistent. If this method does not resolve the inconsistency, you must resolve it using one of the methods listed below. The methods are listed in order of precedence, meaning that you should try them in the order in which they are listed, stopping when the inconsistency has been resolved.

If the child's day, month and year of birth are all provided, set the child's reported age equal to the calculated age. If the day of birth is invalid and the month of birth and month of interview are the same and the child's reported age (AG2) is one year smaller than her calculated age, leave the data unchanged. If month and year of birth are provided (and the situation above does not apply), change the reported age to equal the calculated age. If only year of birth is provided, set the child's year of birth equal to 9997.

2004 W E Line number of caretaker (UF6=%02d) must be the same as in the household (HL9=%02d)

The line number of the child's caretaker must be the same in the Questionnaire for Children Under Five (UF6) and the Household Questionnaire (HL9). Check for data-entry errors and correct any that are found. If there are no data-entry errors, determine which line number is correct by reviewing the Household Listing, particularly variables HL3-HL6, HL12 and HL14. Correct whichever line number is incorrect.

2005 W M Month of birth of child (AG1M=%02d) different from month of birth in the household listing (HL5M=%02d)

The month of birth of the child in variable AG1M and her/his month of birth in the household schedule (HL5M) should generally be the same. Check for data-entry errors in AG1 and HL5 and correct any that you find. If no data-entry errors were made, leave the data unchanged.

As in message 2002 if there are two or more under-fives in the household, each of the under-five questionnaires should be checked to ensure that the correct questionnaire is being entered.

2006 W M Year of birth of child (AG1Y=%04d) different from year of birth in the household listing (HL5Y=%04d)

The year of birth of the child in variable AG1Y and her/his year of birth in the household schedule (HL5Y) should generally be the same. Check for data-entry errors in AG1 and HL5 and correct any that you find. If no data-entry errors were made, leave the data unchanged. Also, check if the correct questionnaire is being entered.

2701 W E Date of vaccination invalid

The day, month and year of the vaccination are inconsistent with each other (for example, 31st of February). Check for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, use the instructions in 2702 to try to determine the source of the inconsistency and correct it. If you cannot uncover the source of the inconsistency, set the day of the vaccination equal to 97 (inconsistent).

2702 W E Date of vaccination after date of interview

The date of the vaccination is after the date of interview. Check the date of the vaccination for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, if there are no data-entry errors, follow the instructions below.

Check that the date of vaccination was correctly recorded. Look for recording errors on the questionnaire, such as two vaccinations being recorded on the same day and month, but with a different year. For example, if Polio 2 is recorded as 12 January 2008 and DPT 2 as 12 January 2009, then the year of one of these is probably incorrect. If there is an obvious error of this type, then correct the vaccination date.

Also check to see that the day and month of immunization have not been reversed. For example, an immunization given on 9 May 2007 should be coded in the *ddmmyy* form as 09052007; however, the day and month may have been reversed, and the date recorded as 05092007. If reversing the month and day codes will allow the date to be consistent with the date of interview (and will not cause an inconsistency between dates of immunization given in a series), reverse the two codes.

In some countries, a date for a return visit for a vaccination may have been recorded on the vaccination card rather than the date of vaccination itself. If this is believed to be the case, then the date of vaccination should be deleted.

In efforts to resolve inconsistencies in the dates of immunizations for a child, attention should be paid to dates of immunization recorded for other children in the household, since children of different ages may have been immunized on the same date (for example, during a national campaign against polio).

If none of the methods above reveals a clear correction and the year of vaccination and interview are the same, set the month of vaccination equal to 97. If the year of vaccination is after the year of interview, set the year of vaccination equal to 9997.

2703 W E Date of vaccination is before minimum date of birth of child

No vaccination can be given before a child is born. Check the date of vaccination and date of birth for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, if no data-entry errors are found, look for recording errors on the questionnaire as for message 2702. If this does not resolve the inconsistency and the year of vaccination is the same as the year of birth, set the month of vaccination equal to 97. If the year of vaccination is before the year of birth, set the year of vaccination equal to 9997.

2704 E Date of vaccination is earlier than next vaccine in series

Certain vaccinations (for example, polio) are actually a series of several vaccinations. The dates of the vaccinations in the series must be consistent. For example, the date of a child's third polio vaccination cannot be before the date of her/his second polio vaccination. Check the dates of the vaccinations for data-entry errors and correct any that you find.

If there are no data-entry errors, look for recording errors on the questionnaire as for message 2702. If this does not resolve the inconsistency, set the day, month and year of the most inconsistent vaccination equal to 97, 97 and 9997, respectively. In the example below, it is clear that the date of the Polio 3 vaccination is inconsistent. In this case, it is possible to correct the year from 2007 to 2008; had this not been possible, the day, month and year would have been set equal to 97, 97 and 9997, respectively.

Polio 1	Polio 2	Polio 3	DPT 1	DPT 2	DPT 3
28012008	27032008	01052007	27032008	24042008	04062008

2705 M Date of vaccinations are different

In most countries, polio and DPT vaccinations are given together and the dates of the vaccinations are the same. Check for data-entry errors in the dates of the vaccinations and correct any that you find. If no data-entry errors were made, look for recording errors on the questionnaire as for message 2702. If the vaccinations appear to have been given on different dates, the data should be left unchanged.

Corrections should only be made when there is overwhelming evidence that a mistake has been made. In the table below, for example, it is clear that the year of the DPT2 vaccination should be changed to 2008.

Polio 1	Polio 2	Polio 3	DPT 1	DPT 2	DPT 3
16062008	08082008	13092008	16062008	08082009	13092008

2706 M Vaccination card, but no vaccinations received

The child is reported as having a vaccination card, however no date is recorded for any vaccination on the card. Check for data-entry errors and correct any that you find. If no data-entry errors were made, leave the data unchanged.

2707 M Receipt of other vaccinations inconsistent with vaccinations recorded

The caretaker of a child who has a vaccination card is asked if that child received any vaccinations that are not recorded on the vaccination card. Any such vaccinations are recorded using the code '66' for the day of the vaccination. If the caretaker says 'yes' (IM5 equals 1), the day of one of the vaccinations should equal 66. If the caretaker says 'no' or 'don't know' (IM5 does not equal 1), none of the vaccinations in the table should have a day equal to 66. Check for data-entry errors and correct any that you find. If no data-entry errors are found, leave the data unchanged.

2801 W M Weight outside range expected for child age %d months

Expected limits for children's height and weight are given in the next section. Check AN3 for data-entry errors and correct any that you find. If no data-entry errors were made, leave the data unchanged.

2802 W M Height (length) outside range expected for child age %d months

Expected limits for children's height and weight are given in the next section. Check AN4 for data-entry errors and correct any that you find. If no data-entry errors were made, leave the data unchanged.

2803 W M Children under 2 are usually measured lying down, 2+ standing up

Children under age two are usually measured lying down; children 2 years or older are usually measured standing up. Check AN4 for data-entry errors and correct any that you find. If no data-entry errors were made, leave the data unchanged.

2804 W M Height and weight are outside range expected

Expected limits for children's height and weight are given in the next section. Check AN3 and AN4 for data-entry errors and correct any that you find. If no data-entry errors were made, leave the data unchanged.

2805 W E Result of measurement inconsistent with measurement recorded

The result code can be equal to 1 (measured) if and only if there is a weight or height for the child. If both weight and height were not measured, the result cannot be equal to 1. Check AN2, AN3 and AN4 for data-entry errors and correct any that you find. During data entry, do nothing else. During editing, if no data-entry errors were found and both weight and height are not valid, change AN2's value to 7 (inconsistent)

and write 'inconsistent' in the space provided on the questionnaire. If either weight or height is valid and AN2 does not equal 1, change its value to 1.

GENERAL ERROR MESSAGES

9990 D End time is before start time. Please check the value entered

9992 D E Unit and number inconsistent; check questionnaire's coding instructions

This error message is for two-part questions in which one part gives the units of the response and the other the number of the response. Check for keying errors and correct any that are found. If no keying errors are found, correct the number and units to be consistent with the instructions on the questionnaire. For example, question MN25 records how long after birth the child was put to the breast. If the response is longer than 23 hours, it must be recorded in days (MN25U equals 2); otherwise it is recorded in hours (MN25U equals 1). If MN25U equals 1 and MN25N equals 26, it means that the child was first put to the breast after 26 hours. Since this is more than 23 hours, the response should be recorded as 1 day (that is, MN25U equals 2 and MN25N equals 1).

9995 D Response 'No one' inconsistent with other answers

The current variable is alphanumeric, and one of its responses is 'No one'. If this response is selected, then no other response is permitted. Check for keying errors and correct any that are found. If no keying errors are found, remove the code for 'No one' from the variable.

9996 D Response 'Don't know' inconsistent with other answers

The current variable is alphanumeric, and one of its responses is 'Don't know'. If this response is selected then no other response is permitted. Check for keying errors and correct any that are found. If no keying errors are found, remove the code for 'Don't know' from the variable.

9998 D Code given for alpha variable not acceptable

The response to alphanumeric variables must contain only codes that are printed on the questionnaire and these codes must be entered in alphabetic order (and no one code can appear more than once). This error message is always the result of a keying error. Check the questionnaire and resolve the keying error.

LIMITS FOR LENGTH AND WEIGHT OF CHILDREN

The following table presents the minimum and maximum expected values for the length and weight of children. The ranges depend on the sex and age of the child. Lengths (height) are given in centimetres and weights are given in kilograms.

Age in months	LENGTH (centimetres)				WEIGHT (kilograms)			
	Males		Females		Males		Females	
	Minimum	Maximum	Minimum	Maximum	Minimum	Maximum	Minimum	Maximum
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
57-60	82.0	139.0	81.0	136.0	5.5	33.0	6.0	34.5