Nigeria - Post Measles Campaign Coverage Survey 2018, First round

National Bureau of Statistics - Federal Government of Nigeria (FGN)

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Overview

Identification

ID NUMBER
NGA-NBS-PMCCS-2018-v01

Version

VERSION DESCRIPTION
v1.1: Edited, anonymous dataset for public distribution

PRODUCTION DATE
2018-09-19

Overview

ABSTRACT
Executive summary

Introduction

The National Post Measles Campaign Coverage Survey (PMCCS) was conducted following measles campaign targeting children aged 9 and 59 months in conducted in Nigeria between November 2017 and March 2018 in Nigeria. The survey was commissioned by the National Primary Healthcare Development Agency (NPHCDA) and implemented by the National Bureau of Statistics. Technical assistance was provided by the World Health Organization while funding was provided by PMCCS provides information on the children receiving measles vaccination during the measles campaign. PMCCS was carried out from January to April 2018 and covered 6819 households with 10151 children aged between 9 and 59 months. The population sampled for the PMCCS is representative of children aged 9 to 59 months nationally and in all 36 states and FCT-Abuja.

Measles vaccination coverage

Eighty eight percent of all children who were eligible for measles vaccination during the campaign were vaccinated. Five states (Anambra, Ekiti, FCT-Abuja, Jigawa and Plateau) achieved an estimated coverage of 95 percent and above.

Proportion of children who received measles vaccination for the first time during the campaign

National close to 10 million children making 35 percent of all children aged between 9 and 59 months received measles vaccination for the first time ever during the measles campaign. As many as 59 percent of children aged 9 to 59 months living in Abuja, 67 percent of children aged 9 to 59 months living in Zamfara and 78 percent of children aged 9 to 59 months living in Katsina state.

Children with SIA cards

Only 59 percent of children who received measles vaccination during the campaign reported receiving a vaccination card during the campaign. The proportion of children who received a vaccination card was as low as 31 percent in Adamawa State and 35 percent in Kogi State.

Sources of information about the campaign

Nationally 3.9 percent of the respondents interviewed were not informed about the measles campaign. The proportion of respondents who were not informed ranged from .03 percent in Jigawa state to 11.5 % in Bauchi state. All respondents in Abuja knew about the measles campaign. Majority of the respondents were informed about the measles campaign through radio, mobilisers (criers), community health workers and village chiefs.

Reason for non-vaccination

Majority of the children were not vaccinated as a result of not being at home in the period of the vaccination campaign and also because the parents or primary caregivers were not aware of the vaccination campaign.

Information on previous vaccination status

Slightly over a half of eligible children had received measles vaccination before the campaign but only 16 percent of all eligible children had a card showing when the vaccination was given.

The primary objective of the survey was to determine the coverage of measles vaccination in all states, the Federal Capital Territory, Abuja and nationally. Secondary objectives of the survey were:

1. To stratify SIA coverage estimates by age group (9-11 months, 12-59 months)

2. To stratify SIA coverage estimates by sex

3. To identify key communication channels that were effectively used for the campaign

4. To determine reasons for non-vaccination of eligible children during the campaign

5. To determine occurrence of adverse events following immunization (AEFI) during the campaign

6. To determine the proportion of children receiving the first dose of measles vaccine during the campaign (i.e., previously unvaccinated)

KIND OF DATA
Sample survey data [ssd]

UNITS OF ANALYSIS
Individuals and households.

Scope

NOTES
The questionnaire for the Post Measles Supplementary Immunization Activity Survey consists of the following sections:

-Household Information Panel (Household rosters)

-Individual questionnaire- This questionnaire is to be administered to all mothers or caregivers who care for a child that lives with them and is within the age of 9 months - 59 months (5 years) and it is divided intho the Demographic Information and Immunization sections.

Coverage

GEOGRAPHIC COVERAGE (1)
National

GEOGRAPHIC COVERAGE (2)
State

GEOGRAPHIC COVERAGE (3)
Local Government Areas

GEOGRAPHIC COVERAGE (4)
Sector (Urban and Rural)

UNIVERSE
The National Post Measles Campaign Coverage Survey (PMCCS) was conducted following measles campaign targeting children aged 9 and 59 months.Parents and caregivers of all children aged between 9 month and 59 months in the selected households were eligible to participate in the survey

Producers and Sponsors

PRIMARY INVESTIGATOR(S)

Name	Affiliation
National Bureau of Statistics	Federal Government of Nigeria (FGN)

OTHER PRODUCER(S)

Name	Affiliation	Role
National Primary HealthCare Development Agency	Federal Ministry of Health	Coordinator
World Health Organization		Technical assistance
Centre for Disease Control and Prevention - National Stop Transmission of Polio CDC-NSTOP		Technical assistance
United Nations Children's Fund	United Nations	technical assistance in protocol development and scrutiny on the final report

FUNDING

Name	Abbreviation	Role
Bill and Melinda Gates Foundation	BMGF	Funding partner
The Vaccine Alliance	GAVI	Funding partner
Federal Government of Nigeria	FGN	Funding partner

OTHER ACKNOWLEDGEMENTS

Name	Affiliation	Role
Federal Ministry of Health	Federal Government of Nigeria	technical support

Metadata Production

METADATA PRODUCED BY

Name	Abbreviation	Affiliation	Role
National Bureau of Statistics	NBS	Federal Government of Nigeria	Documentation of the study

DATE OF METADATA PRODUCTION
2019-07-08

DDI DOCUMENT VERSION
Version 1.0 (July, 2019). This is the first version to be released.

DDI DOCUMENT ID
DDI-NGA-NBS-PMCCS-2018-v01

Sampling

Sampling Procedure

PMCCS was based on the National Population Commission (NPopC) master sampling frame based on the 2006 Nigeria Housing and Population Census. The sampling frame developed under the National Integrated Survey of Households (NISH2). Areas of the country that are inaccessible due to security reasons were excluded from the sampling frame including specific Local Government Areas (LGAs) in Borno and Adamawa states. Interpretation of results from these areas should therefore be conducted in light of these exclusions.

A stratified two stage - cluster sampling design was chosen for the 2017/18 PMCCS. Reporting strata were 36 state and FCT-Abuja.
The first stage selection involved the selection of EAs in each state and the FCT (Abuja) from the master sampling frame. A total of 30 EAs were selected from the sampling frame and with the selection probability of each EA was recorded for incorporation into household weights.
Following first stage sampling, household listing was conducted in the selected EAs to map all structures and boundaries and also identify households with children aged between 9 and 59 months eligible for second stage selection. Household listing was conducted between the 2nd and 9th of December 2017.
Second stage selection of households to be interviewed was conducted by the National Bureau of Statistics (NBS) using simple random sampling without replacement from the list of households with eligible children aged 9 to 59 months. Seven (7) households with eligible children were randomly selected from each of the 30 enumeration areas in every state.

Deviations from Sample Design

No Deviation

Response Rate

Nationally, the household response rate was 96.2 percent. The household response rate was generally higher in rural areas compared to urban areas with the response rate being 97.4 percent and 92.6 percent respectively. Notably, the household response rates in Lagos, Ebonyi, Oyo, Abuja and Abia were below 90 percent. Despite a planned sample size of 7 eligible households per EA, this planned sample was only achieved in 8 states. In a majority of the states, there were less than 7 households with eligible children available for selection to the survey and were all selected in the EA.

Weighting

Design weights were computed as the product of inverse probabilities of selection in the first and second stage. Next, the design weight was adjusted for household non-response and child non-response to get the sampling weights for households and for children, respectively. Non-response was adjusted at the sampling stratum level. After adjusting for non-response, the sampling weights were normalized and post stratified to get the final standard weights that appear in the data files. Post-stratification was conducted by multiplying the normalised weights with the estimated proportion of children aged 9 to 59 months in each stratum. The estimated number of children in each stratum was obtained from recently concluded microplanning activity.

Bivariate analysis of post measles campaign vaccination coverage, reasons for non-vaccination, AEFI and routine immunisation measles vaccination coverage were presented by residence, gender and zones. Wilson's 95% confidence intervals and upper and lower confidence bounds have been computed throughout the report.

Questionnaires

Overview

The questionnaire for the Post Measles Supplementary Immunization Activity Survey consisted of the following:
-Household Information Panel (Household rosters)
-Individual questionnaire- This questionnaire is to be administered to all mothers or caregivers who care for a child that lives with them and is within the age of 9 months - 59 months (5 years)

Data Collection

Data Collection Dates

Start	End	Cycle
2018-01-21	2019-04-06	5 Months

Data Collection Mode

Face-to-face [f2f]

DATA COLLECTION NOTES

Interviewers were selected from the states they were deployed in to ensure that the interviewers could speak languages in the state they were assigned to and were conversant with the local culture. Two levels of training were conducted for household listing and mapping. The first stage of training was a training of trainers conducted in Abuja while the second level of training was conducted in every state. The first level training consisted of resource persons and participants from NBS, NPHCDA, WHO, UNICEF and other relevant technical partners while the second level training targeted field workers who were to conduct mapping and listing activities in selected EAs.
A total of 600 personnel comprising of field team supervisors and enumerators were trained of whom 555 were selected to form the data collection teams. Training focused on the survey guidelines, identification of sampled enumeration areas and eligible households, determination of whether an eligible child had been vaccinated, ethics and informed consent, electronic data capture and transmission, and conducting quality control checks. In addition, supervisors were trained on managing survey logistics and on documenting and reporting survey progress. A post-training test was conducted to ensure that only those participants who were conversant with conducting the survey were included into the survey team.

Survey implementation dates
Zone State Training Data collection
NW Jigawa, Kaduna, Kano, Katsina, Kebbi, Zamfara 17-19 January 21 January to 2 February
NE Adamawa, Bauchi, Borno, Gombe, Taraba, Yobe, (Sokoto) 22-24 January 26 January to 7 February
NC Benue, FCT, Nasarawa, Niger, Plateau 10-12 March 14 to 26 March
SS Akwa Ibom, Bayelsa, Cross River, Delta, Edo, Rivers 5-7 April 9 to 21 April
SE Abia, Anambra, Ebonyi, Enugu, Imo 11-13 April 15 to 27 April
SW Ekiti, Lagos, Ogun, Ondo, Osun, Oyo, (Kogi, Kwara) 20-22 April 24 April to 6 May

Survey implementation in Sokoto was conducted with implementation in the North East zone whereas Sokoto geographically belongs to the North West zone while implementation in Kogi and Kwara was conducted with states in South West zone although Kogo and Kwara belong to North Central zone. NW = North West, NE = North East, NC = North Central, SS = South-South, SE = South East, SW = South West

Data collection was conducted by 5 teams in every state with each team comprising of a supervisor and two enumerators. Each team canvased on average 6 enumeration areas in 14 days.

Data Collectors

Name	Abbreviation	Affiliation
National Bureau of Statistics	NBS	Federal Government of Nigeria

SUPERVISION

There were three levels of quality assurance; Survey teams lead by the supervisors were responsible for quality of data collected. Data were collected on CAPI tablets with inbuilt range checks. Once an enumerator had finished data collection data were transferred to the supervisors CAPI tablet and reviewed the quality and completeness of the data before they were synchronized with the server. NBS state and zonal officers also ensured that the survey was conducted as per the survey guidelines and ensure that logistical support for the teams.
Monitoring by teams comprising of NPHCDA and NBS headquarters and state offices formed the second layer of quality assurance by conducting observations of interviews using checklists.
The third level of monitoring was conducted by monitoring data synchronized to the server and inconsistencies picked up were flagged up to the team supervisor who corrected them before teams left a specific EA.

Data Processing

Data Editing

Data collection was using Census and Survey Program (CSPro) software running on android computers. Range checks and skip patterns were predefined in the data entry program to ensure that only all valid responses were collected and there were responses to all applicable questions ensuring enhanced data quality and completeness of collected data. On completion of the household roster, only age-eligible respondents were presented to the interviewer for interviewing and information had to be collected on all selected respondents before a household completion status was generated by the CAPI software.

Other Processing

Data cleaning and analysis was conducted using the supplementary immunisation activity (SIA) module of Vaccination Coverage Quality Indicators (VCQI) software running on Stata version 14 (StataCorp. 2015. Stata Statistical Software: Release 14. College Station, TX: StataCorp LP.). All results presented in the report are based on the weighted data to account for the survey sampling design and survey nonresponse

Data Appraisal

Estimates of Sampling Error

Assuming an expected coverage of 90%, half-width confidence interval around state-level estimates of 8% (i.e., 90% +/- 8% coverage estimate) with an alpha level (type I error) of 5%, the effective sample size (i.e., sample size per stratum under a simple random sampling assumption) was n = 101. This level of precision allowed for estimation of coverage with acceptable precision at state, zonal and national levels1.

Other forms of Data Appraisal

Series of tables and graphs were generated.

File Description

Variable List

HOUSEHOLD ROSTER

Content	This dataset contains data on Household Information Panel on all the household members such as Name of household members, relationship to head of household etc.
Cases	43320
Variable(s)	19
Structure	Type: Keys: ()
Version	Version 1.0 (September, 2018)
Producer	National Bureau of Statistics (NBS)
Missing Data	All missing data were asterisks (*) and have been categorized as values '9' or '99'

Variables

ID	Name	Label	Type	Format	Question
V100	hm01	State	discrete	numeric	State name
V101	hm03	Cluster	contin	numeric	Cluster number
V102	hm09	Household Number	contin	numeric	Household ID number
V103	hm11	Name of head	discrete	character	Name of head
V104	hm21	Member Line Number	contin	numeric	SN
V105	hm22	NAME OF HOUSEHOLD MEMBER	discrete	character	NAME OF HOUSEHOLD MEMBER
V106	hm23	RELATIONSHIP OF HOUSEHOLD MEMBER TO HOUSEHOLD HEAD	discrete	numeric	RELATIONSHIP OF HOUSEHOLD MEMBER TO HOUSEHOLD HEAD
V107	hm24	SEX OF HOUSEHOLD MEMBER	discrete	numeric	SEX OF CHILD
V108	hm25	DID THE HOUSEHOLD MEMBER SLEEP HERE LAST NIGHT?	discrete	numeric	DID THE HOUSEHOLD MEMBER SLEEP HERE LAST NIGHT?
V109	hm26d	DATE OF BIRTH (DD)	discrete	numeric	DATE OF BIRTH (DD)
V110	hm26m	DATE OF BIRTH (MM)	discrete	numeric	DATE OF BIRTH (MM)
V111	hm26y	DATE OF BIRTH (YYYY)	contin	numeric	DATE OF BIRTH (YYYY)
V112	hm27	Age (Years)	contin	numeric	AGE AT TIME OF CAMPAIGN - NOVEMBER 2017 (COMPLETED YEARS)
V113	hm28	Age (Months)	contin	numeric	AGE AT TIME OF CAMPAIGN - NOVEMBER 2017
V114	hm29	DID THE CHILD LIVE HERE DURING THE CAMPAIGN	discrete	numeric	DID THE CHILD LIVE HERE DURING THE CAMPAIGN?
V115	sector	sector	discrete	numeric	
V116	zone	ZONE	discrete	numeric	
V117	pop_weight		contin	numeric	
V118	normalize_wt		contin	numeric	

IDENTIFICATION

Content	This file contains data on demographic information of the eligible child such as datae of birth, Age in completed months.
Cases	7090
Variable(s)	22
Structure	Type: Keys: ()
Version	Version 1.0 (September, 2018)
Producer	National Bureau of Statistics (NBS)
Missing Data	All missing data were asterisks (*) and have been categorized as values '9' or '99'

Variables

ID	Name	Label	Type	Format	Question
V119	hm01	State	discrete	numeric	State ID number
V120	hm02	State Name	discrete	character	State Name
V121	hm03	Cluster	contin	numeric	Cluster number
V122	hm04	Cluster name	discrete	character	Cluster name
V123	hm5	Interviewer	contin	numeric	Interviewer name
V124	hm7	Supervisor	discrete	numeric	Supervisor name
V125	hm09	Household Number	contin	numeric	Household ID number
V126	hm11	Name of head	discrete	character	
V127	hh5d	Day of interview	contin	numeric	Day of interview
V128	hh5m	Month of interview	discrete	numeric	Month of interview
V129	hh5y	Year of interview	discrete	numeric	Year of interview
V130	conscent	May I start the interview, now?	discrete	numeric	MAY, I START NOW?
V131	dispositioncode	DispositionCode	discrete	numeric	Disposition Code
V132	latitude	LATITUDE	contin	numeric	LATITUDE
V133	longitude	LONGITUDE	contin	numeric	LONGITUDE
V134	tot_hhsize	Total huosehold members	contin	numeric	
V135	tot_eligible	Total eligible children	discrete	numeric	
V136	line_resp	Line number of respondent	discrete	numeric	
V137	sector	sector	discrete	numeric	
V138	zone	ZONE	discrete	numeric	
V139	pop_weight		contin	numeric	
V140	normalize_wt		contin	numeric	

IMMUNIZATION

Content	This file contains data on Immunization such as the presence of a child during the campaign, source of information about the occurrence etc
Cases	10153
Variable(s)	58
Structure	Type: Keys: ()
Version	Version 1.0 (September, 2018)
Producer	National Bureau of Statistics (NBS)
Missing Data	All missing data were asterisks (*) and have been categorized as values '9' or '99'

Variables

ID	Name	Label	Type	Format	Question
V141	hm01	State	discrete	numeric	State name
V142	hm03	Cluster	contin	numeric	Cluster number
V143	hm09	Household Number	contin	numeric	Household ID number
V144	hm11	Name of head	discrete	character	Name of head
V145	hm21	Child Line number	contin	numeric	Child listing number
V146	hm24	SEX OF HOUSEHOLD MEMBER	discrete	numeric	Sex
V147	sia12a	Child Name	discrete	character	Child Name
V148	s1a09d	Day of interview	contin	numeric	Day of interview
V149	s1a09m	Month of interview	discrete	numeric	Month of interview
V150	s1a09y	Year of interview	discrete	numeric	Year of interview
V151	line_resp_child	LINE NUMBER OF RESPONDENT	contin	numeric	LINE NUMBER OF RESPONDENT
V152	conscent_child	Consent	discrete	numeric	MAY, I START NOW?
V153	response_status	Response status	discrete	numeric	SIA93. Disposition Code
V154	sia10h	hours	contin	numeric	Start time of interview -Hours
V155	sia10m	minutes	contin	numeric	Start time of interview -Minutes
V156	d1a	Day	discrete	numeric	ON WHAT DAY WAS (name) BORN?
V157	d1b	Month	discrete	numeric	ON WHAT MONTH WAS (name) BORN?
V158	d1c	Year	discrete	numeric	ON WHAT YEAR WAS (name) BORN?
V159	d2	Age	contin	numeric	HOW OLD IS (name)?
V160	s1a17	SIA17. WAS THE CHILD LIVING HERE DURING THE CAMPAIGN? (MENTION THE CAMPAIGN DATE	discrete	numeric	WAS THE CHILD LIVING HERE DURING THE CAMPAIGN? (MEASLES VACCINATION CAMPAIGN IN NOVEMBER/DECEMBER 2017)?
V161	s1a18	SIA18 WHAT WAS THE MAIN SOURCE OF INFORMATION ABOUT THE CAMPAIGN?	discrete	numeric	WHAT WAS THE PRIMARY SOURCE OF INFORMATION ABOUT THE OCCURRENCE OF THE CAMPAIGN?

ID	Name	Label	Type	Format	Question
V162	s1a19	SIA19. WHAT WAS THE PRIMARY SOURCE OF INFORMATION ABOUT THE OCCURRENCE OF THE CA	discrete	character	IF OTHER IN 18, PLEASE SPECIFY
V163	s1a20	SIA20. DID THE CHILD RECEIVE THE MEASLES VACCINE DURING THE RECENT CAMPAIGN	discrete	numeric	DID THE CHILD RECEIVE THE MEASLES VACCINE DURING THE RECENT CAMPAIGN (MEASLES VACCINATION CAMPAIGN IN NOVEMBER/DECEMBER 2017)?
V164	s1a21	SIA21. DID THE CHILD RECEIVE A VACCINATION CARD AFTER RECEIVING THE MEASLES VACC	discrete	numeric	DID THE CHILD RECEIVE A VACCINATION CARD AFTER RECEIVING THE MEASLES VACCINE DURING THE RECENT CAMPAIGN?
V165	s1a22	SIA22. WAS THE FINGER OF THE CHILD MARKED WITH A PEN AFTER RECEIVING THE MEASLES	discrete	numeric	WAS THE FINGER OF THE CHILD MARKED WITH A PEN AFTER RECEIVING THE MEASLES VACCINE DURING THE CAMPAIGN?
V166	s1a23	SIA23. DID THE CHILD DEVELOP A REACTION IN THE MONTHS FOLLOWING THE VACCINATION?	discrete	numeric	DID THE CHILD DEVELOP A REACTION AFTER THE VACCINATION?
V167	s1a24a	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Fever between 7 and 12 days following vaccination? .... A
V168	s1a24b	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	General rash between 7 and 10 days following vaccination? .... B
V169	s1a24c	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Pain at the site of injection? C
V170	s1a24d	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Problems with hearing or vision? .... D
V171	s1a24e	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Extreme drowsiness, fainting? .... E
V172	s1a24f	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Fussiness, irritability, crying for an hour or longer? .... F
V173	s1a24g	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Early bruising or bleeding, unusual weakness? . G
V174	s1a24h	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Difficulty in breathing or swallowing? .... H
V175	s1a24i	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Itching, especially of feet or hands? I
V176	s1a24j	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Hives (other itching or irrigation)? .... J
V177	s1a24k	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Seizure (black-out or convulsions); or High fever (within a few hours or a few days after the vaccine)? .... K
V178	s1a24l	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Pain or tiredness of eyes, swelling, or a lump where the shot was given? L
V179	s1a24m	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Headache (severe or continuing)? .... M
V180	s1a24n	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Confusion or dizziness? .... N
V181	s1a24o	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	low fever; joint or muscle pain? .... O
V182	s1a24p	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	numeric	Other (specify) .... P

ID	Name	Label	Type	Format	Question
V183	s1a24sspc	SIA24. IF YES, WHAT WAS THE PROBLEM?	discrete	character	IF 'OTHER' TO SIA24, SPECIFY
V184	s1a25	SIA25. IF THE CHILD DID NOT RECEIVE THE MEASLES VACCINE DURING THE CAMPAIGN, WHY	discrete	numeric	F THE CHILD DID NOT RECEIVE THE MEASLES VACCINE DURING THE CAMPAIGN, WHY?
V185	s1a26	SIA26. IF THE CHILD DID NOT RECEIVE THE MEASLES VACCINE DURING THE CAMPAIGN, WHY	discrete	character	IF 'OTHER' TO SIA25, PLEASE SPECIFY
V186	s1a27	SIA27 APART FROM CAMPAIGN, HAD THE CHILD ALREADY RECEIVED THE MEASLES VACCINE?	discrete	numeric	BEFORE THE CAMPAIGN, HAD THE CHILD ALREADY RECEIVED THE MEASLES VACCINE?
V187	s1a27a	SIA27A: REQUEST TO BE SHOWN VACCINATION CARD FOR (NAME)	discrete	numeric	REQUEST TO BE SHOWN VACCINATION CARD FOR (NAME)
V188	s1a28d	SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D	discrete	numeric	IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE DATES OF VACCINATION: 1ST MEASLES VACCINATION
V189	s1a28m	SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D	discrete	numeric	IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE DATES OF VACCINATION: 2ND MEASLES VACCINATION
V190	s1a28y	SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D	discrete	numeric	IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE DATES OF VACCINATION: 3RD MEASLES VACCINATION
V191	s1a35h	hours	contin	numeric	Hour
V192	s1a35m	minutes	contin	numeric	minutes
V193	sector	sector	discrete	numeric	
V194	reasons_non	Reason for not vaccinated	discrete	numeric	Reason for not vaccinated
V195	zone	ZONE	discrete	numeric	
V196	age_group	Age-group	discrete	numeric	
V197	pop_weight		contin	numeric	
V198	normalize_wt		contin	numeric	

State (hm01)
File: HOUSEHOLD ROSTER

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-37

Valid cases: 43320
Invalid: 0
Minimum: 1
Maximum: 37

Literal question

State name

Cluster (hm03)
File: HOUSEHOLD ROSTER

Overview

Type: Continuous
Format: numeric
Width: 4
Decimals: 0
Range: 1-1104

Valid cases: 43320
Invalid: 0
Minimum: 1
Maximum: 1104
Mean: 557.1
Standard deviation: 322.8

Literal question

Cluster number

Household Number (hm09)
File: HOUSEHOLD ROSTER

Overview

Type: Continuous
Format: numeric
Width: 3
Decimals: 0
Range: 1-166

Valid cases: 43320
Invalid: 0
Minimum: 1
Maximum: 166
Mean: 15.2
Standard deviation: 11.9

Literal question

Household ID number

Name of head (hm11)
File: HOUSEHOLD ROSTER

Overview

Type: Discrete
Format: character
Width: 34

Valid cases: 43320
Invalid: 0

Literal question

Name of head

Member Line Number (hm21)
File: HOUSEHOLD ROSTER

Overview

Member Line Number (hm21)
File: HOUSEHOLD ROSTER

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 1-30

Valid cases: 43320
Invalid: 0

Literal question

SN

NAME OF HOUSEHOLD MEMBER (hm22)
File: HOUSEHOLD ROSTER

Overview

Type: Discrete
Format: character
Width: 25

Valid cases: 43319
Invalid: 0

Literal question

NAME OF HOUSEHOLD MEMBER

RELATIONSHIP OF HOUSEHOLD MEMBER TO HOUSEHOLD HEAD (hm23)
File: HOUSEHOLD ROSTER

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-98

Valid cases: 43319
Invalid: 1

Literal question

RELATIONSHIP OF HOUSEHOLD MEMBER TO HOUSEHOLD HEAD

SEX OF HOUSEHOLD MEMBER (hm24)
File: HOUSEHOLD ROSTER

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 43319
Invalid: 1

Literal question

SEX OF CHILD

Interviewer instructions

1 MALE 2 FEMALE

DID THE HOUSEHOLD MEMBER SLEEP HERE LAST NIGHT? (hm25)
File: HOUSEHOLD ROSTER

DID THE HOUSEHOLD MEMBER SLEEP HERE LAST NIGHT? (hm25)
File: HOUSEHOLD ROSTER

Overview	
Type: Discrete	Valid cases: 43319
Format: numeric	Invalid: 1
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

DID THE HOUSEHOLD MEMBER SLEEP HERE LAST NIGHT?

DATE OF BIRTH (DD) (hm26d)
File: HOUSEHOLD ROSTER

Overview	
Type: Discrete	Valid cases: 43319
Format: numeric	Invalid: 1
Width: 2	Minimum: 1
Decimals: 0	Maximum: 31
Range: 1-31	

Literal question

DATE OF BIRTH (DD)

DATE OF BIRTH (MM) (hm26m)
File: HOUSEHOLD ROSTER

Overview	
Type: Discrete	Valid cases: 43319
Format: numeric	Invalid: 1
Width: 2	
Decimals: 0	
Range: 1-13	

Literal question

DATE OF BIRTH (MM)

DATE OF BIRTH (YYYY) (hm26y)
File: HOUSEHOLD ROSTER

Overview
Type: Continuous
Format: numeric
Width: 4
Decimals: 0
Range: 1900-2018

Literal question

DATE OF BIRTH (YYYY)

Age (Years) (hm27)
File: HOUSEHOLD ROSTER

Age (Years) (hm27)
File: HOUSEHOLD ROSTER

Overview	
Type: Continuous	Valid cases: 43319
Format: numeric	Invalid: 1
Width: 3	
Decimals: 0	
Range: 0-109	

Literal question

AGE AT TIME OF CAMPAIGN - NOVEMBER 2017 (COMPLETED YEARS)

Age (Months) (hm28)
File: HOUSEHOLD ROSTER

Overview	
Type: Continuous	Valid cases: 12584
Format: numeric	Invalid: 30736
Width: 2	Minimum: -2
Decimals: 0	Maximum: 94
Range: -2-94	Mean: 34.6
	Standard deviation: 18.7

Literal question

AGE AT TIME OF CAMPAIGN - NOVEMBER 2017

Interviewer instructions

COMPLETED MONTHS FOR ALL CHILDREN LESS THAN 6 YEARS

DID THE CHILD LIVE HERE DURING THE CAMPAIGN (hm29)
File: HOUSEHOLD ROSTER

Overview	
Type: Discrete	Valid cases: 0
Format: numeric	Invalid: 43320
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

DID THE CHILD LIVE HERE DURING THE CAMPAIGN?

Interviewer instructions

(COMPLETE ONLY FOR CHILDREN 9-59 MONTHS)

sector (sector)
File: HOUSEHOLD ROSTER

Overview	
Type: Discrete	Valid cases: 43320
Format: numeric	Invalid: 0
Width: 1	
Decimals: 0	
Range: 1-2	

ZONE (zone)
File: HOUSEHOLD ROSTER

Overview	
Type: Discrete	Valid cases: 43320
Format: numeric	Invalid: 0
Width: 1	
Decimals: 0	
Range: 1-6	

(pop_weight)
File: HOUSEHOLD ROSTER

Overview	
Type: Continuous	Valid cases: 43320
Format: numeric	Invalid: 0
Width: 8	Minimum: 533.9
Decimals: 2	Maximum: 32439
Range: 533.900024414062-32439	Mean: 3562.8
	Standard deviation: 3022.4

(normalize_wt)
File: HOUSEHOLD ROSTER

Overview	
Type: Continuous	Valid cases: 43320
Format: numeric	Invalid: 0
Width: 4	Minimum: 0.3
Decimals: 2	Maximum: 4.5
Range: 0.291666656732559-4.54166650772095	Mean: 1
	Standard deviation: 0.5

State (hm01)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-37

Valid cases: 7090
Invalid: 0

Literal question

State ID number

State Name (hm02)
File: IDENTIFICATION

Overview

Type: Discrete
Format: character
Width: 11

Valid cases: 7090
Invalid: 0

Literal question

State Name

Cluster (hm03)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 4
Decimals: 0
Range: 1-1104

Valid cases: 7090
Invalid: 0

Literal question

Cluster number

Cluster name (hm04)
File: IDENTIFICATION

Overview

Type: Discrete
Format: character
Width: 30

Valid cases: 7090
Invalid: 0

Literal question

Cluster name

Interviewer (hm5)
File: IDENTIFICATION

Overview

Interviewer (hm5)
File: IDENTIFICATION

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 11-53

Literal question

Interviewer name

Supervisor (hm7)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-5

Valid cases: 7090
Invalid: 0

Literal question

Supervisor name

Household Number (hm09)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 3
Decimals: 0
Range: 1-166

Valid cases: 7090
Invalid: 0
Minimum: 1
Maximum: 166

Literal question

Household ID number

Name of head (hm11)
File: IDENTIFICATION

Overview

Type: Discrete
Format: character
Width: 34

Valid cases: 7090
Invalid: 0

Day of interview (hh5d)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 1-31

Literal question

Day of interview (hh5d)
File: IDENTIFICATION

Day of interview

Month of interview (hh5m)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-12

Valid cases: 7090
Invalid: 0

Literal question

Month of interview

Year of interview (hh5y)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 4
Decimals: 0
Range: 2018-2018

Valid cases: 7090
Invalid: 0
Minimum: 2018
Maximum: 2018
Mean: 2018
Standard deviation: 0

Literal question

Year of interview

May I start the interview, now? (conscent)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 7089
Invalid: 1

Literal question

MAY, I START NOW?

Post question

YES ----1 NO-----2 DISCUSS WITH SUPERVISOR BEFORE ENDING INTERVIEW

DispositionCode (dispositioncode)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-4

Valid cases: 7089
Invalid: 1

DispositionCode (dispositioncode)
File: IDENTIFICATION

Literal question

Disposition Code

LATITUDE (latitude)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 7
Decimals: 2
Range: 0-1234

Literal question

LATITUDE

LONGITUDE (longitude)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 7
Decimals: 2
Range: 0-1234

Valid cases: 7076
Invalid: 14
Minimum: 0

Literal question

LONGITUDE

Total huosehold members (tot_hhsize)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 1-30

Valid cases: 6819
Invalid: 271
Minimum: 1
Maximum: 30
Mean: 6.4

Total eligible children (tot_eligible)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 0-12

Valid cases: 6818
Invalid: 272

Line number of respondent (line_resp)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-17

sector (sector)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 7090
Invalid: 0

ZONE (zone)
File: IDENTIFICATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-6

Valid cases: 7090
Invalid: 0

(pop_weight)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 8
Decimals: 2
Range: 533.900024414062-32439

Valid cases: 7090
Invalid: 0
Minimum: 533.9
Maximum: 32439
Mean: 3693.3
Standard deviation: 3393.7

Post question

pop_weight

(normalize_wt)
File: IDENTIFICATION

Overview

Type: Continuous
Format: numeric
Width: 4
Decimals: 2
Range: 0.291666656732559-4.54166650772095

Valid cases: 7090
Invalid: 0
Minimum: 0.3
Maximum: 4.5
Mean: 1
Standard deviation: 0.5

State (hm01)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10153
Format: numeric	Invalid: 0
Width: 2	
Decimals: 0	
Range: 1-37	

Literal question	

State name

Cluster (hm03)
File: IMMUNIZATION

Overview	
Type: Continuous	Valid cases: 10153
Format: numeric	Invalid: 0
Width: 4	
Decimals: 0	
Range: 1-1104	

Literal question	

Cluster number

Household Number (hm09)
File: IMMUNIZATION

Overview	
Type: Continuous	Valid cases: 10153
Format: numeric	Invalid: 0
Width: 3	
Decimals: 0	
Range: 1-166	

Literal question	

Household ID number

Name of head (hm11)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10153
Format: character	Invalid: 0
Width: 34	

Literal question	

Name of head

Child Line number (hm21)
File: IMMUNIZATION

Overview	

Child Line number (hm21)
File: IMMUNIZATION

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 1-30

Valid cases: 10153
Invalid: 0
Minimum: 1
Maximum: 30

Literal question

Child listing number

SEX OF HOUSEHOLD MEMBER (hm24)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 10153
Invalid: 0

Literal question

Sex

Child Name (sia12a)
File: IMMUNIZATION

Overview

Type: Discrete
Format: character
Width: 25

Valid cases: 10153
Invalid: 0

Literal question

Child Name

Day of interview (s1a09d)
File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 1-31

Literal question

Day of interview

Month of interview (s1a09m)
File: IMMUNIZATION

Overview

Month of interview (s1a09m)
File: IMMUNIZATION

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-12

Valid cases: 10153
Invalid: 0

Literal question

Month of interview

Year of interview (s1a09y)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 4
Decimals: 0
Range: 2018-2018

Literal question

Year of interview

LINE NUMBER OF RESPONDENT (line_resp_child)
File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 1-27

Valid cases: 10153
Invalid: 0
Minimum: 1
Maximum: 27

Literal question

LINE NUMBER OF RESPONDENT

Conscent (conscent_child)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 10153
Invalid: 0

Literal question

MAY, I START NOW?

Response status (response_status)
File: IMMUNIZATION

Overview

Response status (response_status)
File: IMMUNIZATION

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-4

Valid cases: 10152
Invalid: 1

Literal question

SIA93. Disposition Code

hours (sia10h)
File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 0-23

Literal question

Start time of interview -Hours

minutes (sia10m)
File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 0-59

Literal question

Start time of interview -Minutes

Day (d1a)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-31

Pre question

NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE DEVELOPMENT AND HEALTH OF (name).

Literal question

ON WHAT DAY WAS (name) BORN?

Interviewer instructions

Probe: WHAT IS HIS/HER BIRTHDAY? If the mother/caretaker knows the exact birth date, also enter the day; otherwise, circle 98 for day. Month and year must be recorded.

Month (d1b)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10152
Format: numeric	Invalid: 1
Width: 2	
Decimals: 0	
Range: 1-12	

Pre question

NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE DEVELOPMENT AND HEALTH OF (name).

Literal question

ON WHAT MONTH WAS (name) BORN?

Interviewer instructions

Probe: WHAT IS HIS/HER BIRTHDAY? If the mother/caretaker knows the exact birth date, also enter the day; otherwise, circle 98 for day. Month and year must be recorded.

Year (d1c)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10152
Format: numeric	Invalid: 1
Width: 4	Minimum: 2013
Decimals: 0	Maximum: 2017
Range: 2013-2017	

Pre question

NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT THE DEVELOPMENT AND HEALTH OF (name).

Literal question

ON WHAT YEAR WAS (name) BORN?

Interviewer instructions

Probe: WHAT IS HIS/HER BIRTHDAY? If the mother/caretaker knows the exact birth date, also enter the day; otherwise, circle 98 for day. Month and year must be recorded.

Age (d2)
File: IMMUNIZATION

Overview	
Type: Continuous	Valid cases: 10152
Format: numeric	Invalid: 1
Width: 2	Minimum: 9
Decimals: 0	Maximum: 60
Range: 9-60	Mean: 36.2
	Standard deviation: 14.5

Literal question

HOW OLD IS (name)?

Post question

If age is <9 months or >60 months go to next child, otherwise end interview

Interviewer instructions

Probe: HOW OLD WAS (name) AT HIS/HER LAST BIRTHDAY? Record age in completed months. Record '0' if less than 1 month. Compare and correct AG1 and/or AG2 if inconsistent.

SIA17. WAS THE CHILD LIVING HERE DURING THE CAMPAIGN? (MENTION THE CAMPAIGN DATE (s1a17)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10152
Format: numeric	Invalid: 1
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

WAS THE CHILD LIVING HERE DURING THE CAMPAIGN? (MEASLES VACCINATION CAMPAIGN IN NOVEMBER/DECEMBER 2017)?

SIA18 WHAT WAS THE MAIN SOURCE OF INFORMATION ABOUT THE CAMPAIGN? (s1a18)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10152
Format: numeric	Invalid: 1
Width: 2	
Decimals: 0	
Range: 1-66	

Literal question

WHAT WAS THE PRIMARY SOURCE OF INFORMATION ABOUT THE OCCURRENCE OF THE CAMPAIGN?

Post question

66 => SIA19

SIA19. WHAT WAS THE PRIMARY SOURCE OF INFORMATION ABOUT THE OCCURRENCE OF THE CA (s1a19)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 39
Format: character	Invalid: 0
Width: 24	

Literal question

IF OTHER IN 18, PLEASE SPECIFY

Interviewer instructions

(Ask the question first, after the person has answered, go through the list of answers to select the primary source.)

SIA20. DID THE CHILD RECEIVE THE MEASLES VACCINE DURING THE RECENT CAMPAIGN (s1a20)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 10152
Format: numeric	Invalid: 1
Width: 2	
Decimals: 0	
Range: 1-99	

Literal question

SIA20. DID THE CHILD RECEIVE THE MEASLES VACCINE DURING THE RECENT CAMPAIGN (s1a20)
File: IMMUNIZATION

DID THE CHILD RECEIVE THE MEASLES VACCINE DURING THE RECENT CAMPAIGN (MEASLES VACCINATION CAMPAIGN IN NOVEMBER/DECEMBER 2017)?

Post question

1 => SIA21 3 => SIA25 9 =>SIA27

SIA21. DID THE CHILD RECEIVE A VACCINATION CARD AFTER RECEIVING THE MEASLES VACC (s1a21)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 8951
Format: numeric	Invalid: 1202
Width: 1	
Decimals: 0	
Range: 1-9	

Literal question

DID THE CHILD RECEIVE A VACCINATION CARD AFTER RECEIVING THE MEASLES VACCINE DURING THE RECENT CAMPAIGN?

SIA22. WAS THE FINGER OF THE CHILD MARKED WITH A PEN AFTER RECEIVING THE MEASLES (s1a22)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 8951
Format: numeric	Invalid: 1202
Width: 1	
Decimals: 0	
Range: 1-9	

Literal question

WAS THE FINGER OF THE CHILD MARKED WITH A PEN AFTER RECEIVING THE MEASLES VACCINE DURING THE CAMPAIGN?

SIA23. DID THE CHILD DEVELOP A REACTION IN THE MONTHS FOLLOWING THE VACCINATION? (s1a23)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 8951
Format: numeric	Invalid: 1202
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

DID THE CHILD DEVELOP A REACTION AFTER THE VACCINATION?

Post question

01?SIA24 02?SIA25

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24a)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 2157
Format: numeric	Invalid: 7996
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

Fever between 7 and 12 days following vaccination? .... A

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24b)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 2157
Format: numeric	Invalid: 7996
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

General rash between 7 and 10 days following vaccination? .... B

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24c)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 2157
Format: numeric	Invalid: 7996
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

Pain at the site of injection? C

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24d)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 2157
Format: numeric	Invalid: 7996
Width: 1	
Decimals: 0	
Range: 1-2	

Literal question

Problems with hearing or vision? .... D

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24e)
File: IMMUNIZATION

Overview

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24e)
File: IMMUNIZATION

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Extreme drowsiness, fainting? .... E

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24f)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Fussiness, irritability, crying for an hour or longer? .... F

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24g)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Early bruising or bleeding, unusual weakness? . G

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24h)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Difficulty in breathing or swallowing? .... H

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24i)
File: IMMUNIZATION

Overview

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24i)
File: IMMUNIZATION

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Itching, especially of feet or hands? I

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24j)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Hives (other itching or irrigation)? .... J

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24k)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Seizure (black-out or convulsions); or High fever (within a few hours or a few days after the vaccine)? .... K

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24l)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Pain or tiredness of eyes, swelling, or a lump where the shot was given? L

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24m)
File: IMMUNIZATION

Overview

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24m)
File: IMMUNIZATION

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Headache (severe or continuing)? .... M

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24n)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Confusion or dizziness? .... N

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24o)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

low fever; joint or muscle pain? .... O

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24p)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 2157
Invalid: 7996

Literal question

Other (specify) .... P

Post question

P => SIA24A

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24sspc)
File: IMMUNIZATION

Overview

SIA24. IF YES, WHAT WAS THE PROBLEM? (s1a24sspc)
File: IMMUNIZATION

Type: Discrete
Format: character
Width: 1

Valid cases: 0
Invalid: 0

Literal question

IF 'OTHER' TO SIA24, SPECIFY

SIA25. IF THE CHILD DID NOT RECEIVE THE MEASLES VACCINE DURING THE CAMPAIGN, WHY (s1a25)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 2
Decimals: 0
Range: 1-66

Valid cases: 1166
Invalid: 8987

Literal question

F THE CHILD DID NOT RECEIVE THE MEASLES VACCINE DURING THE CAMPAIGN, WHY?

Interviewer instructions

(Ask the question first, after the person has answered, go through the list of answers to find the main reason for non-vaccination.)

SIA26. IF THE CHILD DID NOT RECEIVE THE MEASLES VACCINE DURING THE CAMPAIGN, WHY (s1a26)
File: IMMUNIZATION

Overview

Type: Discrete
Format: character
Width: 25

Valid cases: 102
Invalid: 0

Literal question

IF 'OTHER' TO SIA25, PLEASE SPECIFY

SIA27 APART FROM CAMPAIGN, HAD THE CHILD ALREADY RECEIVED THE MEASLES VACCINE? (s1a27)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-9

Valid cases: 10151
Invalid: 2

Literal question

BEFORE THE CAMPAIGN, HAD THE CHILD ALREADY RECEIVED THE MEASLES VACCINE?

SIA27A: REQUEST TO BE SHOWN VACCINATION CARD FOR (NAME) (s1a27a)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 5569
Format: numeric	Invalid: 4584
Width: 1	
Decimals: 0	
Range: 1-3	

Literal question

REQUEST TO BE SHOWN VACCINATION CARD FOR (NAME)

SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D (s1a28d)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 1967
Format: numeric	Invalid: 8186
Width: 2	Minimum: 1
Decimals: 0	Maximum: 44
Range: 1-44	

Literal question

IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE DATES OF VACCINATION: 1ST MEASLES VACCINATION

Interviewer instructions

WRITE 44 IN THE DD FIELD IF THE VACCINATION IS MARKED ON THE CARD, BUT THERE IS NOT A CLEAR DATE

SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D (s1a28m)
File: IMMUNIZATION

Overview	
Type: Discrete	Valid cases: 1655
Format: numeric	Invalid: 8498
Width: 2	
Decimals: 0	
Range: 1-12	

Literal question

IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE DATES OF VACCINATION: 2ND MEASLES VACCINATION

Interviewer instructions

WRITE 44 IN THE DD FIELD IF THE VACCINATION IS MARKED ON THE CARD, BUT THERE IS NOT A CLEAR DATE

SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D (s1a28y)
File: IMMUNIZATION

Overview	

SIA28. IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE D (s1a28y)
File: IMMUNIZATION

Type: Discrete
Format: numeric
Width: 4
Decimals: 0
Range: 2012-2018

Valid cases: 1655
Invalid: 8498
Minimum: 2012
Maximum: 2018
Mean: 2016.5
Standard deviation: 1.3

Literal question

IF THE HOME-BASED VACCINATION RECORD (ROUTINE) IS AVAILABLE, RECORD THE DATES OF VACCINATION: 3RD MEASLES VACCINATION

Interviewer instructions

WRITE 44 IN THE DD FIELD IF THE VACCINATION IS MARKED ON THE CARD, BUT THERE IS NOT A CLEAR DATE

hours (s1a35h)
File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 0-23

Literal question

Hour

minutes (s1a35m)
File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 2
Decimals: 0
Range: 0-59

Literal question

minutes

sector (sector)
File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-2

Valid cases: 10153
Invalid: 0

Reason for not vaccinated (reasons_non)
File: IMMUNIZATION

Reason for not vaccinated (reasons_non)

File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-4

Valid cases: 1166
Invalid: 8987

Literal question

Reason for not vaccinated

ZONE (zone)

File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-6

Valid cases: 10153
Invalid: 0

Age-group (age_group)

File: IMMUNIZATION

Overview

Type: Discrete
Format: numeric
Width: 1
Decimals: 0
Range: 1-3

Valid cases: 10153
Invalid: 0

(pop_weight)

File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 8
Decimals: 2
Range: 533.900024414062-32439

Valid cases: 10153
Invalid: 0
Minimum: 533.9
Maximum: 32439
Mean: 3539.8
Standard deviation: 3050.7

(normalize_wt)

File: IMMUNIZATION

Overview

Type: Continuous
Format: numeric
Width: 4
Decimals: 2
Range: 0.291666656732559-4.54166650772095

Valid cases: 10153
Invalid: 0
Minimum: 0.3
Maximum: 4.5
Mean: 1
Standard deviation: 0.5

Related Materials

Questionnaires

POST MEASLES CAMPAIGN COVERAGE SURVEY(PMCCS) QUESTIONNAIRE

Title	POST MEASLES CAMPAIGN COVERAGE SURVEY(PMCCS) QUESTIONNAIRE
subtitle	PMCCS 2018 QUESTIONNAIRE
Author(s)	National Bureau of Statisics(NBS)
Date	2017-01-01
Country	Nigeria
Language	English
Contributor(s)	National Primary Healthcare Development Agency (NPHCDA) , World Health Organization(WHO)
Publisher(s)	National Bureau of Statistics (NBS)
Description	This is the Questionnaire of the Post Measles Campaign Coverage Survey 2018.
Table of contents	QUESTIONNAIRE ....1 HOUSEHOLD ROSTER: COMPLETE FOR ALL MEMBERS IN THE HOUSEHOLDS ....2 INDIVIDUAL QUESTIONNAIRE..3 DEMOGRAPHIC INFORMATION...4 IMMUNIZATION...6
Filename	PMCCS 2018 QUESTIONNAIRE.pdf

Reports

POST MEASLES CAMPAIGN COVERAGE SURVEY(PMCCS) MAIN SURVEY REPORT

Title	POST MEASLES CAMPAIGN COVERAGE SURVEY(PMCCS) MAIN SURVEY REPORT
subtitle	PMCCS 2018 SURVEY REPORT
Author(s)	National Bureau of Statistics (NBS) , World Health Organization (WHO) , Dr. John Wagai
Date	2018-06-01
Country	Nigeria
Language	English
Contributor(s)	Centre for Disease Control and Prevention - National Stop Transmission of Polio (CDC-NSTOP) , United Nation's Children's Fund(UNICEF)
Description	This is the Main Survey Report of the Post Measles Campaign Coverage Survey 2018.

Table of contents	
Filename	PMCCS_Report_31October2018.pdf

Other materials

POST MEASLES CAMPAIGN COVERAGE SURVEY(PMCCS) 2018 STUDY DOCUMENT

Title	POST MEASLES CAMPAIGN COVERAGE SURVEY(PMCCS) 2018 STUDY DOCUMENT
subtitle	PMCCS 2018 STUDY DOCUMENT
Author(s)	National Bureau of Statistics (NBS)
Date	2019-07-08T00:49
Country	Nigeria
Language	English

Contributor(s)	World Health Organization
Publisher(s)	National Bureau of Statistics (NBS)
Description	This is the Post Measles Campaign Coverage Survey (PMCCS 2018) study documentation.
Table of contents	
Filename	PMCCS 2018 STUDY DOCUMENT.pdf