

DEMOGRAPHIC AND HEALTH SURVEYS  
MODEL HOUSEHOLD QUESTIONNAIRE

[NAME OF COUNTRY]  
[NAME OF ORGANIZATION]

IDENTIFICATION <sup>1</sup>	
PLACE NAME _____	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; position: relative;"> <div style="position: absolute; top: 0; right: 0; width: 10px; height: 10px; background-color: black;"></div> </div>
NAME OF HOUSEHOLD HEAD _____	
CLUSTER NUMBER .....	
HOUSEHOLD NUMBER .....	
REGION .....	
URBAN/RURAL (URBAN=1, RURAL=2) .....	
LARGE CITY/SMALL CITY/TOWN/COUNTRYSIDE <sup>2</sup> ..... (LARGE CITY=1, SMALL CITY=2, TOWN=3, COUNTRYSIDE=4)	

INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE				DAY
				MONTH
				YEAR
INTERVIEWER'S NAME				NAME
RESULT*				RESULT
NEXT VISIT: DATE				TOTAL NO. OF VISITS
TIME				<div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div>
<b>*RESULT CODES:</b> 1 COMPLETED 2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 4 POSTPONED 5 REFUSED 6 DWELLING VACANT OR ADDRESS NOT A DWELLING 7 DWELLING DESTROYED 8 DWELLING NOT FOUND 9 OTHER _____ <div style="text-align: center; margin-top: 5px;">(SPECIFY)</div>				TOTAL PERSONS IN HOUSEHOLD <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; vertical-align: middle;"></div>  TOTAL ELIGIBLE WOMEN <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; vertical-align: middle;"></div>  LINE NO. OF RESP. TO HOUSEHOLD QUEST. <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; vertical-align: middle;"></div>

SUPERVISOR	FIELD EDITOR	OFFICE EDITOR	KEYED BY
NAME _____ <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; vertical-align: middle;"></div>	NAME _____ <div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block; vertical-align: middle;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>	<div style="border: 1px solid black; width: 30px; height: 20px; display: inline-block;"></div>
DATE _____	DATE _____		

<sup>1</sup> This section should be adapted for country-specific survey design.

<sup>2</sup> The following guidelines should be used to categorize urban sample points: "Large cities" are national capitals and places with over 1 million population; "small cities" are places with between 50,000 and 1 million population; remaining urban sample points are "towns."

# HOUSEHOLD QUESTIONNAIRE

## Household listing and eligibility for Women's Questionnaire (1-9)

All household members are listed, as well as all individuals who stayed with the household as guests the previous night (2). For all listed individuals, information is collected on relationship to the head of the household, sex, residence status, and age (3-7). An important use of this information is to identify women who are eligible for the Women's Questionnaire and eligible for height, weight, and hemoglobin measurement (8). These data are also used to identify children eligible for height, weight, and hemoglobin measurement (9).

The data on the relationship of each household member to the head of the household provide a picture of the structure and composition of the household. The data on age and sex can be used to assess the degree to which the sample represents the population. In countries where never-married women are excluded from the sample, information collected in the Household Questionnaire is used to derive denominators for the calculation of rates based on all women.

## Parental survivorship and residence (10-13)

For children less than 15 years of age, questions are asked about the survivorship of the child's biological parents and whether or not they are household members. This information can be used to measure the prevalence of orphanhood and child fostering in the population.

## Education (14-20)

The series of questions on education establishes whether each household member age 5 or older has ever attended school, and if so, the highest level of schooling (primary, secondary, higher) attended, and the highest grade completed at that level (14-15). For household members age 5-24, the Household Questionnaire collects information on whether the person is currently attending school, at what level and grade, and the person's schooling status during the previous school year (16-20). These questions permit the calculation of widely accepted education indicators including gross and net attendance ratios, and repetition and dropout rates.

The educational attainment of adult members of the household provides an indication of the household's resource base. The current attendance and educational attainment of children provide a measure of children's access to resources and their well being, and allow an investigation of the relationship between family size and children's educational opportunities.

# HOUSEHOLD SCHEDULE

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

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX		RESIDENCE		AGE	ELIGIBILITY	
			Is (NAME) male or female?	Does (NAME) usually live here?	Did (NAME) stay here last night?	How old is (NAME)?		CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN UNDER AGE 6
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	
			M F	YES NO	YES NO	IN YEARS			
01		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	01	01	
02		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	02	02	
03		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	03	03	
04		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	04	04	
05		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	05	05	
06		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	06	06	
07		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	07	07	
08		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	08	08	
09		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	09	09	
10		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	10	10	

\* CODES FOR Q.3

RELATIONSHIP TO HEAD OF HOUSEHOLD:

01 = HEAD  
 02 = WIFE OR HUSBAND  
 03 = SON OR DAUGHTER  
 04 = SON-IN-LAW OR DAUGHTER-IN-LAW  
 05 = GRANDCHILD  
 06 = PARENT

07 = PARENT-IN-LAW  
 08 = BROTHER OR SISTER  
 10 = OTHER RELATIVE  
 11 = ADOPTED/FOSTER/STEPCHILD  
 12 = NOT RELATED  
 98 = DON'T KNOW

LINE NO.	PARENTAL SURVIVORSHIP AND RESIDENCE FOR PERSONS LESS THAN 15 YEARS OLD**				EDUCATION							
	Is (NAME)'s natural mother alive?	IF ALIVE Does (NAME)'s natural mother live in this household? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER	Is (NAME)'s natural father alive?	IF ALIVE Does (NAME)'s natural father live in this household? IF YES: What is his name? RECORD FATHER'S LINE NUMBER	IF AGE 5 YEARS OR OLDER		IF AGE 5-24 YEARS					
	(10)	(11)	(12)	(13)	(14)	(15)	(16) <sup>1</sup>	(17) <sup>1</sup>	(18) <sup>1</sup>	(19) <sup>1</sup>	(20)	
	YES NO DK		YES NO DK		YES NO	LEVEL GRADE	YES NO	YES NO	LEVEL GRADE	YES NO	LEVEL GRADE	
01	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
02	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
03	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
04	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
05	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
06	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
07	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
08	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
09	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
10	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	

\*\*CODES FOR Q.10 THROUGH Q.13  
THESE QUESTIONS REFER TO THE BIOLOGICAL PARENTS OF THE CHILD.  
IN Q.11 AND Q.13, RECORD '00' IF PARENT NOT LISTED IN HOUSEHOLD SCHEDULE.

\*\*\*CODES FOR Qs. 15, 18 AND 20  
EDUCATION LEVEL:  
1 = PRIMARY  
2 = SECONDARY  
3 = HIGHER  
8 = DON'T KNOW

EDUCATION GRADE:  
00 = LESS THAN 1 YEAR COMPLETED  
98 = DON'T KNOW

<sup>1</sup> The wording of the question in this column is appropriate when all of the fieldwork is conducted during a single school year. For alternative wording in cases where some or all of the fieldwork is conducted between two school years, see Appendix A.

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	ELIGIBILITY	
	Please give me the names of the persons who usually live in your household and guests of the household who stayed here last night, starting with the head of the household.	What is the relationship of (NAME) to the head of the household?*	Is (NAME) male or female?	Does (NAME) usually live here?	Did (NAME) stay here last night?	How old is (NAME)?	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49	CIRCLE LINE NUMBER OF ALL CHILDREN UNDER AGE 6
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
11		<input type="text"/>	M F 1 2	YES NO 1 2	YES NO 1 2	IN YEARS <input type="text"/>	11	11
12		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	12	12
13		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	13	13
14		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	14	14
15		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	15	15
16		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	16	16
17		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	17	17
18		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	18	18
19		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	19	19
20		<input type="text"/>	1 2	1 2	1 2	<input type="text"/>	20	20

\* CODES FOR Q.3  
RELATIONSHIP TO HEAD OF HOUSEHOLD:  
01 = HEAD  
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05 = GRANDCHILD  
06 = PARENT

07 = PARENT-IN-LAW  
08 = BROTHER OR SISTER  
10 = OTHER RELATIVE  
11 = ADOPTED/FOSTER/STEPCHILD  
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\*\* CODES FOR Q.10 THROUGH Q.13  
THESE QUESTIONS REFER TO THE BIOLOGICAL PARENTS OF THE CHILD.  
IN Q.11 AND Q.13, RECORD '00' IF PARENT NOT LISTED IN HOUSEHOLD SCHEDULE.

\*\*\* CODES FOR Qs. 15, 18 AND 20  
EDUCATION LEVEL:  
1 = PRIMARY  
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3 = HIGHER  
8 = DON'T KNOW  
EDUCATION GRADE:  
00 = LESS THAN 1 YEAR COMPLETED  
98 = DON'T KNOW

LINE NO.	PARENTAL SURVIVORSHIP AND RESIDENCE FOR PERSONS LESS THAN 15 YEARS OLD**				EDUCATION							
	Is (NAME)'s natural mother alive?	IF ALIVE Does (NAME)'s natural mother live in this household? IF YES: What is her name? RECORD MOTHER'S LINE NUMBER	Is (NAME)'s natural father alive?	IF ALIVE Does (NAME)'s natural father live in this household? IF YES: What is his name? RECORD FATHER'S LINE NUMBER	IF AGE 5 YEARS OR OLDER		IF AGE 5-24 YEARS					
	(10)	(11)	(12)	(13)	(14)	(15)	(16) <sup>1</sup>	(17) <sup>1</sup>	(18) <sup>1</sup>	(19) <sup>1</sup>	(20)	
	YES NO DK		YES NO DK		YES NO	LEVEL GRADE	YES NO	YES NO	LEVEL GRADE	YES NO	LEVEL GRADE	
11	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
12	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
13	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
14	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
15	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
16	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
17	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
18	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
19	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	
20	1 2 8	<input type="text"/>	1 2 8	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	1 2 GO TO 18	1 2 GO TO 19	<input type="text"/>	1 2 NEXT LINE	<input type="text"/>	

TICK HERE IF CONTINUATION SHEET USED <input type="checkbox"/>			
Just to make sure that I have a complete listing:			
1) Are there any other persons such as small children or infants that we have not listed?	YES <input type="checkbox"/>	ENTER EACH IN TABLE	NO <input type="checkbox"/>
2) In addition, are there any other people who may not be members of your family, such as domestic servants, lodgers or friends who usually live here?	YES <input type="checkbox"/>	ENTER EACH IN TABLE	NO <input type="checkbox"/>
3) Are there any guests or temporary visitors staying here, or anyone else who stayed here last night, who have not been listed?	YES <input type="checkbox"/>	ENTER EACH IN TABLE	NO <input type="checkbox"/>

<sup>1</sup> The wording of the question in this column is appropriate when all of the fieldwork is conducted during a single school year. For alternative wording in cases where some or all of the fieldwork is conducted between two school years, see Appendix A.

#### Water and toilet facilities (21-24)

These questions relate to the determinants of infant and child morbidity and mortality and are relevant for cross-national comparative analyses. The major headings for source of drinking water (21) and for type of toilet facilities (23) should be included in country-specific versions of the *DHS+* questionnaires. Specific response categories under each major heading may be as detailed as necessary for each survey.

A question on the travel time to the source of water is included to obtain an indirect measure of the amount of water available (22). The main interest in the questions on the type of toilet facility and whether it is used by other households is in the hygienic conditions offered by the facility (24).

#### Dwelling characteristics and household possessions (25-28)

Whether the household has electricity, a radio, television, telephone, and a refrigerator are included primarily to provide an index of the standard of living or socioeconomic status. The main material of the floor is another such indicator. Such information is thought to be reported more reliably and thus to be more useful than a simple question on household income.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																		
21	What is the main source of drinking water for members of your household? <sup>1</sup>	PIPED WATER PIPED INTO DWELLING ..... 11 → 23 PIPED INTO YARD/PLOT ..... 12 → 23 PUBLIC TAP ..... 13 WATER FROM OPEN WELL OPEN WELL IN DWELLING ..... 21 → 23 OPEN WELL IN YARD/PLOT ..... 22 → 23 OPEN PUBLIC WELL ..... 23 WATER FROM COVERED WELL OR BOREHOLE PROTECTED WELL IN DWELLING ..... 31 → 23 PROTECTED WELL IN YARD/PLOT ..... 32 → 23 PROTECTED PUBLIC WELL ..... 33 SURFACE WATER SPRING ..... 41 RIVER/STREAM ..... 42 POND/LAKE ..... 43 DAM ..... 44  RAINWATER ..... 51 → 23 TANKER TRUCK ..... 61 BOTTLED WATER ..... 71 → 23  OTHER ..... 96 (SPECIFY)																			
22	How long does it take you to go there, get water, and come back?	MINUTES ..... <table border="1"><tr><td></td><td></td><td></td></tr></table> ON PREMISES ..... 996																			
23	What kind of toilet facilities does your household have? <sup>1</sup>	FLUSH TOILET ..... 11 PIT TOILET/LATRINE TRADITIONAL PIT TOILET ..... 21 VENTILATED IMPROVED PIT (VIP) LATRINE ..... 22 NO FACILITY/BUSH/FIELD ..... 31 → 25  OTHER ..... 96 (SPECIFY)																			
24	Do you share these facilities with other households?	YES ..... 1 NO ..... 2																			
25	Does your household have: <sup>2</sup>  Electricity? A radio? A television? A telephone? A refrigerator?	<table><tr><th></th><th>YES</th><th>NO</th></tr><tr><td>ELECTRICITY .....</td><td>1</td><td>2</td></tr><tr><td>RADIO .....</td><td>1</td><td>2</td></tr><tr><td>TELEVISION .....</td><td>1</td><td>2</td></tr><tr><td>TELEPHONE .....</td><td>1</td><td>2</td></tr><tr><td>REFRIGERATOR .....</td><td>1</td><td>2</td></tr></table>		YES	NO	ELECTRICITY .....	1	2	RADIO .....	1	2	TELEVISION .....	1	2	TELEPHONE .....	1	2	REFRIGERATOR .....	1	2	
	YES	NO																			
ELECTRICITY .....	1	2																			
RADIO .....	1	2																			
TELEVISION .....	1	2																			
TELEPHONE .....	1	2																			
REFRIGERATOR .....	1	2																			
26	What type of fuel does your household mainly use for cooking?	ELECTRICITY ..... 01 LPG/NATURAL GAS ..... 02 BIOGAS ..... 03 KEROSENE ..... 04 COAL, LIGNITE ..... 05 CHARCOAL ..... 06 FIREWOOD, STRAW ..... 07 DUNG ..... 08  OTHER ..... 96 (SPECIFY)																			

<sup>1</sup> Coding categories to be developed locally and revised based on the pretest; however, the broad categories must be maintained.

<sup>2</sup> Additional indicators of socioeconomic status should be added, especially to distinguish among lower socioeconomic classes.



#### Use of bednets by children under age 5 (29-32)

It is recognized that the continuous use of bednets decreases the incidence of clinical malaria and malaria-related deaths in children less than five years of age. Consequently, many countries are now instituting programs that promote their use. Questions 29-32 are designed to capture information on the use of bednets by children under the age of five who slept in the household the night preceding the interview.

In countries with low or no risk of malaria, these questions should not be included in the questionnaire.

#### Place for hand washing (33-34)

The washing of hands at appropriate times (before food preparation and after urination, defecation, and handling the sick) is one of the most important ways of preventing the spread of disease by means of direct contact and through food contamination. In order to carry out appropriate hand washing, a household needs a dedicated location that contains a clean water supply, a basin for containing water, and a cleaning agent such as soap. In the absence of soap and/or water, hands may be cleaned using ashes or sand, but these are less satisfactory. The purpose of questions 33 and 34 is to ascertain whether the household has a dedicated place for washing hands and whether the requisite items are present.

Additional questions on hygienic practices are located in the Woman's Questionnaire (485 and 495).

#### Testing of salt for iodine (35)

The type of salt used for cooking is tested to determine whether iodine is present in the salt and the amount of iodine in parts per million.

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP												
27	MAIN MATERIAL OF THE FLOOR <sup>1</sup>  RECORD OBSERVATION.	NATURAL FLOOR EARTH/SAND ..... 11 DUNG ..... 12 RUDIMENTARY FLOOR WOOD PLANKS ..... 21 PALM/BAMBOO ..... 22 FINISHED FLOOR PARQUET OR POLISHED WOOD ..... 31 VINYL OR ASPHALT STRIPS ... 32 CERAMIC TILES ..... 33 CEMENT ..... 34 CARPET ..... 35  OTHER _____ 96 (SPECIFY)													
28	Does any member of your household own:  A bicycle? A motorcycle or motor scooter? A car or truck?	<table> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>BICYCLE .....</td> <td>1</td> <td>2</td> </tr> <tr> <td>MOTORCYCLE/SCOOTER ...</td> <td>1</td> <td>2</td> </tr> <tr> <td>CAR/TRUCK .....</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	BICYCLE .....	1	2	MOTORCYCLE/SCOOTER ...	1	2	CAR/TRUCK .....	1	2	
	YES	NO													
BICYCLE .....	1	2													
MOTORCYCLE/SCOOTER ...	1	2													
CAR/TRUCK .....	1	2													
29	Does your household have any bednets that can be used while sleeping? <sup>2</sup>	YES ..... 1 NO ..... 2	→ 33												
30	CHECK COLUMNS (6) AND (7): <sup>2</sup>  NUMBER OF CHILDREN UNDER AGE 5 WHO SLEPT IN THE HOUSEHOLD LAST NIGHT  NONE <input type="checkbox"/> _____ → 33  ONE <input type="checkbox"/> TWO OR MORE <input type="checkbox"/> _____ → 32 ↓														
31	Did (NAME) sleep under a bednet last night? <sup>2</sup>	YES ..... 1 NO ..... 2	→ 33												
32	Did all, some or none of the children under age 5 who slept in the household last night sleep under a bednet? <sup>2</sup>	ALL CHILDREN ..... 1 SOME CHILDREN ..... 2 NONE ..... 3													
33	Where do you usually wash your hands?	IN DWELLING/YARD/PLOT ..... 1 SOMEWHERE ELSE ..... 2 NOWHERE ..... 3	→ 35												
34	ASK TO SEE THE PLACE AND OBSERVE IF THE FOLLOWING ITEMS ARE PRESENT.	<table> <tr> <td></td> <td>YES</td> <td>NO</td> </tr> <tr> <td>WATER/TAP .....</td> <td>1</td> <td>2</td> </tr> <tr> <td>SOAP, ASH OR OTHER   CLEANSING AGENT .....</td> <td>1</td> <td>2</td> </tr> <tr> <td>BASIN .....</td> <td>1</td> <td>2</td> </tr> </table>		YES	NO	WATER/TAP .....	1	2	SOAP, ASH OR OTHER CLEANSING AGENT .....	1	2	BASIN .....	1	2	
	YES	NO													
WATER/TAP .....	1	2													
SOAP, ASH OR OTHER CLEANSING AGENT .....	1	2													
BASIN .....	1	2													
35	ASK RESPONDENT FOR A TEASPOONFUL OF SALT. TEST SALT FOR IODINE. <sup>3</sup>  RECORD PPM (PARTS PER MILLION).	0 PPM (NO IODINE) ..... 1 7 PPM ..... 2 15 PPM ..... 3 30 PPM ..... 4 NO SALT IN HH ..... 5 SALT NOT TESTED ..... 6 (SPECIFY REASON)													

<sup>1</sup> In some countries, it may be desirable to ask an additional question on the material of walls or ceilings.

<sup>2</sup> Delete in countries where malaria is not prevalent.

<sup>3</sup> There are many different kinds of iodine testing kits available. The proper test kit should be selected in each country depending on the type of iodine additive used in the country and the gradations (in PPM) required. The response categories should be modified to be consistent with the particular test kits used.

### Nutritional status of women and young children (36-43)

All women of reproductive age are eligible for height and weight measurement. This is a change from earlier versions of the DHS core questionnaires in which data on women's nutritional status were collected only for mothers with young children, effectively eliminating nutritional assessment of younger women who had not yet started childbearing as well as older women of reproductive age who had not recently given birth.

The nutritional status of women is assessed by the measurement of their weight (40) and height (41) and is useful for several reasons. A woman's weight-for-height can reflect the current availability of food in the household and recent occurrences of illness. A woman's height can be used to predict difficulty in delivering children and is a risk factor in perinatal and neonatal mortality, given the association between height and pelvis size. This information is also useful for examining differentials in women's nutritional status among population subgroups in a country.

All children listed in the Household Questionnaire who were born in the last 5 to 6 years are eligible for nutritional assessment. This represents a change from earlier versions of the core questionnaire in which only children of interviewed women were weighed and measured. The extension of data collection to all children in the household will result in more representative samples of the child population.

The nutritional status of children is assessed in terms of their weight (40) and height/length (41-42) in conjunction with their age. Nutritional status of children is influenced by food intake and by the illness episodes that they have suffered. Many countries have programs designed to increase child survival by improving infant and child feeding practices, increasing vaccination coverage, and promoting clean drinking water. Information on the nutritional status of children provides an outcome measure for these programs. This information is also useful for identifying subgroups of children who are disadvantaged and in need of special attention in a country.

WEIGHT, HEIGHT AND HEMOGLOBIN MEASUREMENT

CHECK COLUMNS (8) AND (9): RECORD THE LINE NUMBER, NAME AND AGE OF ALL WOMEN AGE 15-49 AND ALL CHILDREN UNDER AGE 6.

WOMEN 15-49				WEIGHT AND HEIGHT MEASUREMENT OF WOMEN 15-49			
LINE NO.  FROM COL.(8)	NAME  FROM COL.(2)	AGE  FROM COL.(7)	What is (NAME)'s date of birth?	WEIGHT (KILOGRAMS)	HEIGHT (CENTIMETERS)	MEASURED LYING DOWN OR STANDING UP	RESULT 1 MEASURED 2 NOT PRESENT 3 REFUSED 6 OTHER
(36)	(37)	(38)	(39)	(40)	(41)	(42)	(43)
		YEARS					
<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/>		<input type="text"/>
<input type="text"/>		<input type="text"/>		<input type="text"/>	<input type="text"/>		<input type="text"/>

CHILDREN UNDER AGE 6				WEIGHT AND HEIGHT MEASUREMENT OF CHILDREN BORN IN 1995 <sup>1</sup> OR LATER			
LINE NO.  FROM COL.(9)	NAME  FROM COL.(2)	AGE  FROM COL.(7)	What is (NAME)'s date of birth?	WEIGHT (KILOGRAMS)	HEIGHT (CENTIMETERS)	MEASURED LYING DOWN OR STANDING UP	RESULT 1 MEASURED 2 NOT PRESENT 3 REFUSED 6 OTHER
			DAY MO. YEAR			LYING STAND.	
<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 2	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 2	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 2	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 2	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 2	<input type="text"/>
<input type="text"/>		<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	1 2	<input type="text"/>

TICK HERE IF CONTINUATION SHEET USED ☐

<sup>1</sup> For fieldwork beginning in 2001, 2002 or 2003, the year should be 1996, 1997 or 1998, respectively.

### Anemia testing of women and young children (44–51)

Anemia, a low concentration of red cells in the blood, decreases the amount of oxygen reaching the tissues and organs of the body and reduces their capacity to function. Anemia is known to have especially detrimental effects on the health of pregnant and breastfeeding women and young children. It can be the underlying cause of complications of pregnancy and delivery and of maternal mortality. Among children, anemia is associated with impaired cognitive and motor development. Although there are many causes of anemia, a deficiency of bioavailable dietary iron usually accounts for the majority of cases in a population. Determination of the level of anemia in a population can provide important information for the development of intervention programs, such as food fortification and/or the provision of iron supplements.

Several DHS surveys have conducted anemia testing of women and young children but this is the first version of the core questionnaire that includes anemia testing. The *DHS+* protocol for anemia testing is forthcoming as a *DHS+* publication.

All women who are of reproductive age and all children born in the last 5 or 6 years are eligible for anemia testing. Anemia testing is accomplished by measuring hemoglobin levels in the blood. For this purpose a blood droplet is required from each person tested. Specially trained members of the interviewing teams, who are designated health technicians, are assigned to this task and they follow protocols developed to ensure the safety of the participants.

Special consent for participation in the anemia test is necessary. Consent is obtained by explaining to women and to adults who are responsible for eligible minors the procedures that are followed for anemia testing and asking if they agree to participate. Participation of eligible individuals is strictly voluntary. Their decision on whether or not to participate is recorded (46) and, if there is agreement to participate, the health technician attests to that decision with his/her signature (46).

Test results and the pregnancy status of women are recorded in the Household Questionnaire (47 and 48). Participants are provided with a copy of their test scores at the time of the survey and they are given an explanation of those results, both verbally and on paper.

HEMOGLOBIN MEASUREMENT OF WOMEN 15-49					
CHECK COLUMN (38):	LINE NO. OF PARENT/ RESPONSIBLE ADULT. RECORD '00' IF NOT LISTED IN HOUSEHOLD SCHEDULE	READ CONSENT STATEMENT TO WOMAN/PARENT/RESPONSIBLE ADULT*  CIRCLE CODE (AND SIGN)	HEMOGLOBIN LEVEL (G/DL)	CURRENTLY PREGNANT	RESULT 1 MEASURED 2 NOT PRESENT 3 REFUSED 6 OTHER
(44)	(45)	(46)	(47)	(48)	(49)
AGE 15-17    AGE 18-49		GRANTED                      REFUSED		YES    NO/DK	
1 GO TO 46 ← 2	<input type="text"/>	1 SIGN _____ NEXT LINE ← 2	<input type="text"/> <input type="text"/>	1          2	<input type="text"/>
1 GO TO 46 ← 2	<input type="text"/>	1 SIGN _____ NEXT LINE ← 2	<input type="text"/> <input type="text"/>	1          2	<input type="text"/>
1 GO TO 46 ← 2	<input type="text"/>	1 SIGN _____ NEXT LINE ← 2	<input type="text"/> <input type="text"/>	1          2	<input type="text"/>

HEMOGLOBIN MEASUREMENT OF CHILDREN BORN IN 1995 <sup>1</sup> OR LATER					
	LINE NO. OF PARENT/ RESPONSIBLE ADULT. RECORD '00' IF NOT LISTED IN HOUSEHOLD SCHEDULE	READ CONSENT STATEMENT TO PARENT/RESPONSIBLE ADULT*  CIRCLE CODE (AND SIGN)	HEMOGLOBIN LEVEL (G/DL)		RESULT 1 MEASURED 2 NOT PRESENT 3 REFUSED 6 OTHER
	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>	GRANTED <span style="float: right;">REFUSED</span> 1 <span style="float: right;">2</span> v SIGN _____ NEXT LINE ←	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>
	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>	1 <span style="float: right;">2</span> v SIGN _____ NEXT LINE ←	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>
	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>	1 <span style="float: right;">2</span> v SIGN _____ NEXT LINE ←	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>
	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>	1 <span style="float: right;">2</span> v SIGN _____ NEXT LINE ←	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>
	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>	1 <span style="float: right;">2</span> v SIGN _____ NEXT LINE ←	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>
	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>	1 <span style="float: right;">2</span> v SIGN _____ NEXT LINE ←	<div style="border: 1px solid black; width: 40px; height: 30px; margin: 0 auto;"></div>		<div style="border: 1px solid black; width: 30px; height: 30px; margin: 0 auto;"></div>

\* CONSENT STATEMENT

As part of this survey, we are studying anemia among women and children. Anemia is a serious health problem that results from poor nutrition. This survey will assist the government to develop programs to prevent and treat anemia.

We request that you (and all children born in 1995<sup>1</sup> or later) participate in the anemia testing part of this survey and give a few drops of blood from a finger. The test uses disposable sterile instruments that are clean and completely safe. The blood will be analyzed with new equipment and the results of the test will be given to you right after the blood is taken. The results will be kept confidential.

May I now ask that you (and NAME OF CHILD[REN]) participate in the anemia test. However, if you decide not to have the test done, it is your right and we will respect your decision. Now please tell me if you agree to have the test(s) done.

Note: In countries where some enumeration areas are higher than 1,000 meters, altitude information should be collected on a separate form for each enumeration area higher than 1,000 meters so that the anemia estimates can be adjusted appropriately.

<sup>1</sup> For fieldwork beginning in 2001, 2002 or 2003, the year should be 1996, 1997 or 1998, respectively.

It is the policy of the *DHS+* program to inform the medical staff at the appropriate health facility of individuals who were found to have a hemoglobin level of less than 9 g/dl for pregnant women and less than 7 g/dl for nonpregnant women and children. To do so it is necessary to obtain consent, yet a second time, because survey participants have been told that the information collected in the survey is confidential. The names of individuals suffering from severe anemia are recorded and consent to inform the appropriate health facility of their anemia status is requested (51).

50	CHECK 47 AND 48:  NUMBER OF PERSONS WITH HEMOGLOBIN LEVEL BELOW THE CUTOFF POINT*  <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;">           ONE OR MORE <input type="checkbox"/> </div> <div style="text-align: center;">           NONE <input type="checkbox"/> </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 48%;">           GIVE EACH WOMAN/PARENT/RESPONSIBLE ADULT            RESULT OF HEMOGLOBIN MEASUREMENT AND            CONTINUE WITH 51.**         </div> <div style="width: 48%;">           GIVE EACH WOMAN/PARENT/RESPONSIBLE ADULT RESULT            OF HEMOGLOBIN MEASUREMENT AND END HOUSEHOLD            INTERVIEW.         </div> </div>		
51	We detected a low level of hemoglobin in (your blood/the blood of NAME OF CHILD(REN)). This indicates that (you/NAME OF CHILD(REN)) have developed severe anemia, which is a serious health problem. We would like to inform the doctor at _____ about (your condition/the condition of NAME OF CHILD(REN)). This will assist you in obtaining appropriate treatment for the condition. Do you agree that the information about the level of hemoglobin in (your blood/the blood of NAME OF CHILD(REN)) may be given to the doctor?		
	NAME OF PERSON WITH HEMOGLOBIN BELOW THE CUTOFF POINT	NAME OF PARENT/RESPONSIBLE ADULT	AGREES TO REFERRAL?
	WOMEN AGE 18-49		
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
	WOMEN AGE 15-17 AND CHILDREN		
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2
			YES ..... 1 NO ..... 2

\* The cutoff point is 9 g/dl for pregnant women and 7 g/dl for children and women who are not pregnant (or who don't know if they are pregnant).

\*\* If more than one woman or child is below the cutoff point, read the statement in Q.51 to each woman who is below the cutoff point and to each woman/parent/responsible adult of a child who is below the cutoff point.



## APPENDIX A

Questions 16-19 should be worded as follows under these 3 specified conditions<sup>1</sup>:

- **Fieldwork is done at the end of a school year and over the break before the next school year begins:**

For interviews done through the last day of the school year, the questions are unchanged.

Interviews done after schools have closed should use these questions:

- 16 DELETE THIS QUESTION
- 17 During the school year that ended in [month], 2000,<sup>2</sup> did (NAME) attend school at any time?
- 18 During that school year, what level and grade did (NAME) attend?
- 19 During the previous school year that ended in [month], 1999,<sup>2</sup> did (NAME) attend school at any time?

- **Fieldwork is done between two school years and at the beginning of the new school year:**

- 16 DELETE THIS QUESTION
- 17 During the school year that ended in [month], 2000,<sup>2</sup> did (NAME) attend school at any time?
- 18 During that school year, what level and grade did (NAME) attend?
- 19 During the previous school year that ended in [month], 1999,<sup>2</sup> did (NAME) attend school at any time?

- **Fieldwork is done at the end of one school year, between school years, and at the beginning of a new school year:**

For interviews done through the last day of the first school year, the questions are unchanged.

For interviews done during the time between school years and during the new school year:

- 16 DELETE THIS QUESTION
- 17 During the school year that ended in [month], 2000,<sup>2</sup> did (NAME) attend school at any time?
- 18 During that school year, what level and grade did (NAME) attend?
- 19 During the previous school year that ended in [month], 1999,<sup>2</sup> did (NAME) attend school at any time?

<sup>1</sup> Note that in some cases, the timing of the school year varies by region or by district, so different sets of questions may be required for one country.

<sup>2</sup> Revise the month and year according to the close of the school year and the year the fieldwork is done.