

**BANGLADESH DEMOGRAPHIC AND HEALTH SURVEY 1993-94**  
**HOUSEHOLD SCHEDULE**

DIVISION _____					
DISTRICT _____					
UPAZILA/THANA _____					
UNION _____					
VILLAGE/MOHALLA/BLOCK _____					
CLUSTER NUMBER.....					
HOUSEHOLD NUMBER.....					
DHAKA/CHITTAGONG=1, SMALL CITY=2, TOWN=3, VILLAGE=4.....					
NAME OF HOUSEHOLD HEAD _____					
IS HOUSEHOLD SELECTED FOR HUSBAND SURVEY? (YES=1; NO=2).					
INTERVIEWER VISITS	1	2	3	FINAL VISIT	
DATE				DAY	
				MONTH**	
INTERVIEWER'S NAME				YR	1 9 9
RESULT *				NAME	
				RESULT	
NEXT VISIT: DATE				TOTAL NUMBER	
TIME				OF VISITS	
<p>* RESULT CODES:</p> <p>1 COMPLETED</p> <p>2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT</p> <p>3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD</p> <p>4 POSTPONED</p> <p>5 REFUSED</p> <p>6 DWELLING VACANT OR ADDRESS NOT A DWELLING</p> <p>7 DWELLING DESTROYED</p> <p>8 DWELLING NOT FOUND</p> <p>9 OTHER _____ (SPECIFY)</p>				TOTAL IN HOUSEHOLD	
				TOTAL ELIGIBLE WOMEN	
				TOTAL ELIGIBLE MEN	
				LINE NO. OF RESP. TO HOUSEHOLD SCHEDULE	
NAME	FIELD EDITED BY	OFFICE EDITED BY	KEYED BY	KEYED BY	
DATE	_____	_____	_____	_____	

\*\* MONTH:      01 JANUARY                      05 MAY                              09 SEPTEMBER  
                      02 FEBRUARY                      06 JUNE                              10 OCTOBER  
                      03 MARCH                              07 JULY                              11 NOVEMBER  
                      04 APRIL                                08 AUGUST                            12 DECEMBER

**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*	RESIDENCE		SEX		AGE	EDUCATION			EMPLOYMENT	MARITAL STATUS	WOMAN ELIGIBILITY	HUSBAND'S LINE NUMBER	HUSBAND ELIGIBILITY
			Does (NAME) usually live here?	Did (NAME) sleep here last night?	Is (NAME) male or female?	How old is (NAME)?	IF AGED 6 YEARS OR OLDER			IF AGED 8 YEARS OR OLDER	FOR ALL AGED 10 YEARS OR ABOVE	CIRCLE LINE NUMBER OF ALL EVER-MARRIED WOMEN AGE 10-49 YEARS.	WRITE THE LINE NUMBER OF THOSE OF THOSE IN (16). IF NOT MARRIED OR IF HUSBAND NOT IN HOUSEHOLD, WRITE '00'.	IF HOUSEHOLD CHOSEN FOR HUSBAND SURVEY, CIRCLE LINE NUMBER OF HUSBANDS OF ALL ELIGIBLE WOMEN.	
							Has (NAME) ever been to school?	IF ATTENDED SCHOOL	IF AGED LESS THAN 25 YEARS						
(1)	(2)	(3)	YES NO	YES NO	M F	IN YEARS	YES NO	LEVEL CLASS	YES NO	YES NO DK	YES NO	(16)	(17)	(18)	
01	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?	1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	01		01	
02			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	02		02	
03			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	03		03	
04			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	04		04	
05			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	05		05	
06			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	06		06	
07			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	07		07	
08			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	08		08	
09			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	09		09	
10			1 2	1 2	1 2		1 2		1 2	1 2 8	1 2	10		10	

HOUSEHOLD SCHEDULE CONTINUED

(1)	(2)	(3)	(7)		(8)		(9)		(10)	(11)		(12)		(13)		(14)			(15)	(16)	(17)	(18)	
			YES	NO	YES	NO	M	F	IN YEARS	YES	NO	LEVEL	CLASS	YES	NO	YES	NO	DK	YES	NO			
11			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	11		11
12			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	12		12
13			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	13		13
14			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	14		14
15			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	15		15
16			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	16		16
17			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	17		17
18			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	18		18
19			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	19		19
20			1	2	1	2	1	2		1	2			1	2	1	2	8	1	2	20		20

TICK HERE IF CONTINUATION SHEET USED

Just to make sure that I have a complete listing:

- 4) Are there any other persons such as small children or infants that we have not listed? YES  → ENTER EACH IN TABLE NO
- 5) 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  → ENTER EACH IN TABLE NO
- 6) Do you have any guests or temporary visitors staying here, or anyone else who slept here last night? YES  → ENTER EACH IN TABLE NO

\* CODES FOR Q.3

RELATIONSHIP TO HEAD OF HOUSEHOLD:

- 01= HEAD                      05= GRANDCHILD  
 02= WIFE OR HUSBAND        06= PARENT  
 03= SON OR DAUGHTER        07= PARENT-IN-LAW  
 04= SON OR DAUGHTER-IN-LAW 08= BROTHER OR SISTER

- 09= OTHER RELATIVE  
 10= ADOPTED/FOSTER CHILD  
 11= NOT RELATED  
 98= DOES NOT KNOW

\*\* CODES FOR Q.12

LEVEL OF EDUCATION:

- 1= PRIMARY  
 2= SECONDARY  
 3= COLLEGE/UNIVERSITY  
 8= DOES NOT KNOW

CLASS:

- 00=LESS THAN 1 YEAR COMPLETED  
 98=DOES NOT KNOW

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																														
19	What is the source of water your household uses for dishwashing?	PIPED WATER PIPED INSIDE DWELLING.....11 PIPED OUTSIDE DWELLING.....12 WELL WATER TUBEWELL.....21 SURFACE WELL/OTHER WELL.....22 SURFACE WATER POND/TANK/LAKE.....31 RIVER/STREAM.....32 RAINWATER.....41 OTHER.....51 (SPECIFY)	21 21																														
20	How long does it take to go there?	MINUTES..... <input type="text"/> <input type="text"/> <input type="text"/> ON PREMISES.....996																															
20A	How long do you usually wait to get water there?	MINUTES..... <input type="text"/> <input type="text"/> <input type="text"/>																															
21	Does your household get drinking water from this same source?	YES.....1 NO.....2	24																														
22	What is the source of drinking water for members of your household?	PIPED WATER PIPED INSIDE DWELLING.....11 PIPED OUTSIDE DWELLING.....12 WELL WATER TUBEWELL.....21 SURFACE WELL/OTHER WELL.....22 SURFACE WATER POND/TANK/LAKE.....31 RIVER/STREAM.....32 RAINWATER.....41 OTHER.....51 (SPECIFY)																															
24	Where do adult women in your household usually defecate?	SEPTIC TANK/MODERN TOILET.....11 PIT TOILET/LATRINE WATER SEALED/SLAB LATRINE.....21 PIT LATRINE.....22 OPEN LATRINE.....23 HANGING LATRINE.....24 NO FACILITY/BUSH/FIELD.....31 OTHER.....41 (SPECIFY)																															
25	Where do children in your household usually defecate?	SEPTIC TANK/MODERN TOILET.....11 PIT TOILET/LATRINE WATER SEALED/SLAB LATRINE.....21 PIT LATRINE.....22 OPEN LATRINE.....23 HANGING LATRINE.....24 NO FACILITY/BUSH/FIELD.....31 OTHER.....41 (SPECIFY) NO CHILDREN.....51																															
26	Does your household have:  Almira (wardrobe)? A table, chair or bench? A watch or clock? A cot or bed? Electricity? A radio that is working? A television that is working? A bicycle? Agricultural land?	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>ALMIRAH.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>TABLE/CHAIR/BENCH.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>WATCH/CLOCK.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>COT/BED.....</td> <td>1</td> <td>2</td> </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>BICYCLE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>AGRICULTURAL LAND.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	ALMIRAH.....	1	2	TABLE/CHAIR/BENCH.....	1	2	WATCH/CLOCK.....	1	2	COT/BED.....	1	2	ELECTRICITY.....	1	2	RADIO.....	1	2	TELEVISION.....	1	2	BICYCLE.....	1	2	AGRICULTURAL LAND.....	1	2	
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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
27	How many rooms in your household are used for sleeping?	ROOMS.....	<input type="text"/>
28	MAIN MATERIAL OF THE ROOF. RECORD OBSERVATION.	NATURAL ROOF KATCHA (BAMBOO/THATCH).....11 RUDIMENTARY ROOF TIN.....21 FINISHED ROOF CEMENT/CONCRETE.....31 OTHER .....41 (SPECIFY)	
29	MAIN MATERIAL OF THE WALLS. RECORD OBSERVATION.	NATURAL WALLS JUTE/BAMBOO/MUD (KATCHA).....11 RUDIMENTARY WALLS WOOD.....21 FINISHED WALLS BRICK/CEMENT.....31 TIN.....32 OTHER .....41 (SPECIFY)	
30	MAIN MATERIAL OF THE FLOOR. RECORD OBSERVATION.	NATURAL FLOOR EARTH/BAMBOO (KATCHA).....11 RUDIMENTARY FLOOR WOOD.....21 FINISHED FLOOR (PUKKA) CEMENT/CONCRETE.....31 OTHER .....41 (SPECIFY)	
31	IS THIS HOUSEHOLD IN A BOSTI (SLUM)? RECORD OBSERVATION.	YES.....1 NO.....2	

