

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			PARENTAL SURVIVORSHIP AND RESIDENCE FOR PERSONS LESS THAN 15 YEARS OLD***				ELIGIBILITY WOMEN	HUSBAND LINE NUMBER	ELIGIBILITY MEN		
			Does (NAME) usually live here?	Did (NAME) sleep here last night?			Is (NAME) male or female?	How old is (NAME)?	Has (NAME) ever been to school?	IF AGE 6 YEARS OR OLDER		Is (NAME)'s natural mother alive?	IF ALIVE				Is (NAME)'s natural father alive?	IF ALIVE
										What is the highest level of school (NAME) attended?	IF AGE LESS THAN 25 YEARS							
(1)	(2)	(3)	YES NO	YES NO	M F	IN YEARS	YES NO	LEVEL GRADE	YES NO	YES NO DK	YES NO DK	YES NO DK	(15)	(16)	(17)			
01			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		01		01		
02			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		02		02		
03			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		03		03		
04			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		04		04		
05			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		05		05		
06			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		06		06		
07			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		07		07		
08			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		08		08		
09			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		09		09		
10			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		10		10		

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP																								
18A	What is the main source of drinking water for members of your household?	PIPED INTO RESIDENCE/YARD/PLOT...11 →20 PUBLIC TAP.....12 WELL IN RESIDENCE/YARD/PLOT.....21 →20 PUBLIC WELL.....22 BOREHOLE.....23 SPRING.....31 RIVER/STREAM.....32 POND/LAKE/DAM.....33 GRAVITY FLOW SCHEME.....34 RAINWATER.....41 →20 BOTTLED WATER.....51 →20 OTHER.....96																									
18B	Where do you store the drinking water?	POT.....1 JERRY CAN.....2 PAN.....3 KALABASH.....4 OTHER.....6																									
18C	How much water is used in this household every day?	LITRES..... <input type="text"/> <input type="text"/> <input type="text"/>																									
19	How long does it take to go there, get water, and come back?	MINUTES..... <input type="text"/> <input type="text"/> <input type="text"/> ON PREMISES.....996																									
20	What kind of toilet facility does your household have?	FLUSH TOILET OWN FLUSH TOILET.....11 SHARED FLUSH TOILET.....12 PIT TOILET/LATRINE TRADITIONAL PIT TOILET.....21 IMPROVED PIT LATRINE.....22 NO FACILITY/BUSH/FIELD.....31 OTHER.....96																									
21	Does your household have: Electricity? A radio? A television? A telephone? A refrigerator? A Video An Electric cooker	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <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> <tr> <td>VIDEO.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>ELECTRIC COOKER.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	ELECTRICITY.....	1	2	RADIO.....	1	2	TELEVISION.....	1	2	TELEPHONE.....	1	2	REFRIGERATOR.....	1	2	VIDEO.....	1	2	ELECTRIC COOKER.....	1	2	
	YES	NO																									
ELECTRICITY.....	1	2																									
RADIO.....	1	2																									
TELEVISION.....	1	2																									
TELEPHONE.....	1	2																									
REFRIGERATOR.....	1	2																									
VIDEO.....	1	2																									
ELECTRIC COOKER.....	1	2																									
22	How many rooms in your household are used for sleeping?	ROOMS..... <input type="text"/> <input type="text"/>																									
23	MAIN MATERIAL OF THE FLOOR. RECORD OBSERVATION.	EARTH/SAND.....11 COW DUNG.....12 PARQUET OR POLISHED WOOD.....21 VINYL OR ASPHALT STRIPS.....22 CERAMIC TILES.....23 CEMENT.....24 OTHER.....96 (SPECIFY)																									
24	Does any member of your household own: A bicycle? A motorcycle? A Motor vehicle (CAR, BUS, LORRY, TRACTOR)	<table border="0"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>BICYCLE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>MOTORCYCLE.....</td> <td>1</td> <td>2</td> </tr> <tr> <td>MOTOR VEHICLE.....</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	BICYCLE.....	1	2	MOTORCYCLE.....	1	2	MOTOR VEHICLE.....	1	2													
	YES	NO																									
BICYCLE.....	1	2																									
MOTORCYCLE.....	1	2																									
MOTOR VEHICLE.....	1	2																									
25	What type of salt is usually used for cooking in your household? (ASK TO SEE SALT PACKAGE)	LOCAL SALT.....1 PACKAGED SALT (IODIZED).....2 PACKAGED SALT (NOT IODIZED).....3 SALT FOR ANIMALS.....4 OTHER SALT.....6																									
25A	TEST THE SALT AND WRITE THE RESULT.	IODINE READING (PPM)..... <input type="text"/> <input type="text"/> <input type="text"/>																									
26	How many meals did the household have yesterday? (MEALS: OTHER THAN TEA AND SNACKS)	NUMBER OF MEALS <input type="text"/>																									
27	In terms of household consumption, do you think that your household is: Surplus household Neither surplus nor deficit Occasionally deficit Always deficit	SURPLUS.....1 NEITHER SURPLUS NOR DEFICIT.....2 OCCASIONALLY DEFICIT.....3 ALWAYS DEFICIT.....4 DOES NOT KNOW.....8																									