

MALAWI DEMOGRAPHIC AND HEALTH SURVEY
MALAWI GOVERNMENT - NATIONAL STATISTICAL OFFICE

HEALTH SERVICES AVAILABILITY QUESTIONNAIRE

FORM MDHS-S/92

IDENTIFICATION																								
REGION/DISTRICT _____	<table border="1" style="width: 100%; height: 100%; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>																							
TA/STA/TOWN _____																								
ENUMERATION AREA																								
CENTRAL VILLAGE OR PLACE _____																								
MDHS CLUSTER NUMBER.....																								
URBAN/RURAL (urban=1, rural=2).....																								
INTERVIEWER NAME AND NUMBER _____																								
DATE OF VISIT DAY																								
MONTH																								
YEAR																								
NAME	FIELD EDITED BY	OFFICE EDITED BY	KEYED BY	KEYED BY																				
DATE	_____	_____	_____	<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 25px;"></td><td style="width: 25px;"></td></tr> </table>																				

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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO																								
1	What is the name of the nearest health facility that provides health services to (VILLAGE/PLACE)? _____ (NAME)	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>																									
2	Under what authority is the facility operated?	GOVERNMENT.....1 MISSION/CHURCH.....2 PRIVATE EMPLOYER.....3 OTHER PRIVATE.....4 OTHER.....5 (SPECIFY)																									
3	How far is the facility from here (in kms or miles) ? RECORD '00' IF LESS THAN 1 KM, IF 97 KM OR MORE RECORD '97', IF UNKNOWN RECORD '98'	KILOMETERS.....1 <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> MILES.....2 <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div>																									
4	How do most persons in this community get from here to (HEALTH FACILITY NAME) ?	CAR / MOTORCYCLE.....1 PUBLIC TRANSPORT (BUS,TAXI).....2 BICYCLE.....3 ANIMAL / ANIMAL CART.....4 WALKING.....5 OTHER.....6 (SPECIFY)	1 → 5 5 → 5																								
4A	FOR RURAL CLUSTERS ONLY: How often per week is motorized transport available to residents to go to the facility ? RECORD '00' IF LESS THAN ONCE PER WEEK. IF UNKNOWN RECORD '98'.	NO. OF TIMES PER WEEK.... <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div>																									
5	How long does it take to get from here to (HEALTH FACILITY NAME) using (MEANS MENTIONED IN 4) ? RECORD IN MINUTES IF LESS THAN 2 HOURS AND IN HOURS IF 2 HOURS OR MORE.	HOURS.....1 <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div> MINUTES.....2 <div style="border: 1px solid black; width: 20px; height: 20px; display: inline-block;"></div>																									
6	Does (HEALTH FACILITY NAME) provide: antenatal care? delivery care? child immunization? childspacing services? condoms?	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> <th>DK</th> </tr> </thead> <tbody> <tr> <td>ANTENATAL CARE.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>DELIVERY CARE.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>CHILD IMMUNIZATION.....1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>CHILDSPACING SERVICES...1</td> <td>2</td> <td>8</td> <td></td> </tr> <tr> <td>CONDOMS.....1</td> <td>2</td> <td>8</td> <td></td> </tr> </tbody> </table>		YES	NO	DK	ANTENATAL CARE.....1	2	8		DELIVERY CARE.....1	2	8		CHILD IMMUNIZATION.....1	2	8		CHILDSPACING SERVICES...1	2	8		CONDOMS.....1	2	8		
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CONDOMS.....1	2	8																									
7	CHECK 1: IS THE NEAREST FACILITY A HOSPITAL? <div style="display: inline-block; vertical-align: middle;"> NO <input type="checkbox"/> ↓ </div> <div style="display: inline-block; vertical-align: middle;"> YES <input type="checkbox"/> </div>		14																								
8	What is the name of the nearest hospital that provides health services to (VILLAGE/PLACE)? _____ (NAME OF HOSPITAL)	<div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>																									

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9	Under what authority is the hospital operated?	GOVERNMENT.....1 MISSION/CHURCH.....2 PRIVATE EMPLOYER.....3 OTHER PRIVATE.....4 OTHER.....5 (SPECIFY)																									
10	How far is the hospital from here (in kms or miles) ? RECORD '00' IF LESS THAN 1 KM, IF 97 KM OR MORE RECORD '97', IF UNKNOWN RECORD '98'	KILOMETERS.....1 <input type="text"/> <input type="text"/> MILES.....2 <input type="text"/> <input type="text"/>																									
11	How do most persons in this community get from here to (HOSPITAL NAME) ?	CAR / MOTORCYCLE.....1 PUBLIC TRANSPORT (BUS,TAXI).....2 BICYCLE.....3 ANIMAL / ANIMAL CART.....4 WALKING.....5 OTHER.....6 (SPECIFY)	12 12																								
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14	Is (NAME OF VILLAGE/PLACE) served by mobile outreach, that is, by a health unit that arrives regularly nearby to provide health services to persons in this community? IF YES: What is the name of the outreach point? _____ (NAME) IF NO: RECORD '000'.	<input type="text"/> <input type="text"/> <input type="text"/> NO MOBILE OUTREACH.....000	21																								
15	Under what authority is this service operated?	GOVERNMENT.....1 MISSION/CHURCH.....2 PRIVATE EMPLOYER.....3 OTHER PRIVATE.....4 OTHER.....5 (SPECIFY)																									
16	How far is the outreach point from here (in kms or miles)? RECORD '00' IF LESS THAN 1 KM, IF 97 KM OR MORE RECORD '97', IF UNKNOWN RECORD '98'	KILOMETERS.....1 <input type="text"/> <input type="text"/> MILES.....2 <input type="text"/> <input type="text"/>																									

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NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
23	How do most persons in this community get from here to (PLACE MENTIONED IN 21)?	CAR / MOTORCYCLE.....1 PUBLIC TRANSPORT (BUS,TAXI).....2 BICYCLE.....3 ANIMAL / ANIMAL CART.....4 WALKING.....5 OTHER.....6 (SPECIFY)	24 24
23A	FOR RURAL CLUSTERS ONLY: How often per week is motorized transport available to residents to go to (PLACE MENTIONED IN 21)? RECORD '00' IF LESS THAN ONCE PER WEEK. IF UNKNOWN RECORD '98'.	NO. OF TIMES PER WEEK....	
24	How long does it take to get from here to (PLACE MENTIONED IN 21) using (MEANS MENTIONED IN 23)? RECORD IN MINUTES IF LESS THAN 2 HOURS AND IN HOURS IF 2 HOURS OR MORE.	HOURS.....1 MINUTES.....2	
25	What is the name of the nearest place where a person from (NAME OF VILLAGE/PLACE) can obtain a modern* method of childspacing other than condoms? _____ (NAME OF PLACE) * NOTE: This excludes traditional methods such as herbal medicines, strings, etc.	PUBLIC SECTOR GOVERNMENT HOSPITAL.....11 PRIMARY HEALTH CENTRE.....12 DISPENSARY/MATERNITY CLINIC...13 MOBILE CLINIC.....14 MEDICAL PRIVATE SECTOR PRIVATE HOSPITAL21 PRIVATE HEALTH CENTRE.....22 DISPENSARY/MATERNITY CLINIC...23 MOBILE CLINIC.....24 PRIVATE DOCTOR.....25 OTHER PRIVATE SECTOR SHOP.....31 CHURCH.....32 FRIENDS/RELATIVES.....33 OTHER.....41 (SPECIFY) DK.....98	29 29 29
26	How far is (PLACE MENTIONED IN 25) from here (in kms or miles)? RECORD '00' IF LESS THAN 1 KM, IF 97 KM OR MORE RECORD '97', IF UNKNOWN RECORD '98'	KILOMETERS.....1 MILES.....2	
27	How do most persons in this community get from here to (PLACE MENTIONED IN 25)?	CAR / MOTORCYCLE.....1 PUBLIC TRANSPORT (BUS,TAXI).....2 BICYCLE.....3 ANIMAL / ANIMAL CART.....4 WALKING.....5 OTHER.....6 (SPECIFY)	28 28

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO
27A	FOR RURAL CLUSTERS ONLY: How often per week is motorized transport available to residents to go to (PLACE MENTIONED IN 25) ? RECORD '00' IF LESS THAN ONCE PER WEEK. IF UNKNOWN RECORD '98'.	NO. OF TIMES PER WEEK.... <input type="text"/> <input type="text"/>	
28	How long does it take to get from here to (PLACE MENTIONED IN 25) using (MEANS MENTIONED IN 27)? RECORD IN MINUTES IF LESS THAN 2 HOURS AND IN HOURS IF 2 HOURS OR MORE.	HOURS.....1 <input type="text"/> <input type="text"/> <input type="text"/> MINUTES.....2 <input type="text"/> <input type="text"/> <input type="text"/>	
29	Has there been any special educational campaigns in (NAME OF VILLAGE/PLACE) over the past 12 months that were intended to increase awareness about the problem of AIDS ?	YES.....1 NO.....2	

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