

CENSUS EA CODE.....

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### IDENTIFICATION

179

# HOUSEHOLD SCHEDULE

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

NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD*	RESIDENCE		SEX	AGE	EDUCATION			PARENTAL SURVIVORSHIP AND RESIDENCE				ELIGIBILITY
			Does (NAME) usually live here?	Did (NAME) sleep here last night?			Is (NAME) male or female?	How old is (NAME)?	IF AGED 6 OR OLDER		IF AGED LESS THAN 15 YEARS			
									Has (NAME) ever been to school?	What is the highest level of school (NAME) attended?	IF AGED LESS THAN 25 YEARS	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 (12)	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)
	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?	YES NO	YES NO	M F	IN YEARS	YES NO	LEVEL GRADE	YES NO	YES NO DK		YES NO DK		
01			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		01
02			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		02
03			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		03
04			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		04
05			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		05
06			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		06
07			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		07
08			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		08
09			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		09
10			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		10

## HOUSEHOLD SCHEDULE CONTINUED

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)
			YES NO	YES NO	M F	IN YEARS	YES NO	LEVEL GRADE	YES NO	YES NO DK		YES NO DK		
11			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		11
12			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		12
13			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		13
14			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		14
15			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		15
16			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		16
17			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		17
18			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		18
19			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		19
20			1 2	1 2	1 2		1 2		1 2	1 2 8		1 2 8		20

TICK HERE IF CONTINUATION SHEET USED ☐TOTAL NUMBER OF ELIGIBLE WOMEN 

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?
- 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?
- 3) Do you have any guests or temporary visitors staying here, or anyone else who slept here last night?

YES ☐ → ENTER EACH IN TABLENO ☐YES ☐ → ENTER EACH IN TABLENO ☐YES ☐ → ENTER EACH IN TABLENO ☐

## \* 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= DK

## \*\* CODES FOR Q.9

LEVEL OF EDUCATION:

1= PRIMARY  
 2= SECONDARY  
 3= HIGHER  
 8= DK

GRADE:

00=LESS THAN 1 YEAR COMPLETED  
 98=DK

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP TO															
16	What is the source of water your household uses for handwashing and dishwashing?	PIPED INTO RESIDENCE/YARD/PLOT.....11 PUBLIC TAP.....12 WELL IN RESIDENCE/YARD/PLOT.....21 PUBLIC WELL.....22 SPRING.....31 RIVER/STREAM.....32 POND/LAKE.....33 DAM.....34 RAINWATER.....41 TANKER TRUCK.....51 OTHER.....71 (SPECIFY)	18 18 18															
17	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																
18	Does your household get drinking water from this same source?	YES.....1 NO.....2	20															
19	What is the source of drinking water for members of your household?	PIPED INTO RESIDENCE/YARD/PLOT.....11 PUBLIC TAP.....12 WELL IN RESIDENCE/YARD/PLOT.....21 PUBLIC WELL.....22 SPRING.....31 RIVER/STREAM.....32 POND/LAKE.....33 DAM.....34 RAINWATER.....41 TANKER TRUCK.....51 OTHER.....71 (SPECIFY)																
20	What kind of toilet facility does your household have?	FLUSH TOILET.....11 TRADITIONAL PIT LATRINE.....21 VENTILATED IMPROVED PIT (VIP) LATRINE.....22 BUCKET.....23 NO FACILITY/BUSH/FIELD.....31 OTHER.....41 (SPECIFY)																
21	Does your household have:	<table border="1"> <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>A radio?</td> <td>1</td> <td>2</td> </tr> <tr> <td>A television?</td> <td>1</td> <td>2</td> </tr> <tr> <td>A refrigerator?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	Electricity?	1	2	A radio?	1	2	A television?	1	2	A refrigerator?	1	2	
	YES	NO																
Electricity?	1	2																
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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 DUNG.....12 WOOD PLANKS.....21 PALMS/BAMBOO.....22 PARQUET OR POLISHED WOOD.....31 VINYL OR ASPHALT STRIPS.....32 CERAMIC TILES.....33 CEMENT.....34 CARPET.....35 OTHER.....41 (SPECIFY)																
24	Does any member of your household own:	<table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>A donkey cart or horse?</td> <td>1</td> <td>2</td> </tr> <tr> <td>A bicycle?</td> <td>1</td> <td>2</td> </tr> <tr> <td>A motorcycle?</td> <td>1</td> <td>2</td> </tr> <tr> <td>A car?</td> <td>1</td> <td>2</td> </tr> </tbody> </table>		YES	NO	A donkey cart or horse?	1	2	A bicycle?	1	2	A motorcycle?	1	2	A car?	1	2	
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