NEPAL FAMILY HEALTH SURVEY
HOUSEHOLD SCHEDULE

IDENTIFICATION

DISTRICT NAME AND NUMBER _____ ☐☐

VILLAGE/MUNICIPALITY NAME AND NUMBER _____ ☐☐☐

WARD NUMBER . . . . ☐☐

CLUSTER NUMBER . . . . ☐☐☐

HOUSEHOLD NUMBER . . . . ☐☐

CITY/TOWN/COUNTRYSIDE . . . . ☐
(city=1, town=2, countryside=3)

NAME OF HOUSEHOLD HEAD _____

NAME OF RESPONDENT

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					

*RESULT CODES:
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 _____
                     (SPECIFY)

TOTAL IN HOUSEHOLD ☐☐

TOTAL ELIGIBLE WOMEN ☐☐

LINE NO. OF RESP. IN HOUSEHOLD SCHEDULE ☐☐

SUPERVISOR	FIELD EDITOR	OFFICE EDITOR	KEYED BY
NAME _____ ☐☐	NAME _____ ☐☐	☐☐	☐☐
DATE	DATE		

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			MARITAL STATUS		ELIGIBILITY
							IF AGE 6 YEARS OR OLDER			IF AGE 10 YEARS OR OLDER		
	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?	Does (NAME) usually live here?	Did (NAME) stay here last night?	Is (NAME) male or female?	How old is (NAME)?	Has (NAME) ever been to school?	IF ATTENDED SCHOOL		Has (NAME) ever been married?	IF EVER-MARRIED AND AGE LESS THAN 20	CIRCLE LINE NUMBER OF ALL ELIGIBLE WOMEN: IF FEMALE AGE 15-49 AND YES TO COL. (11) AND COL. (12) IS YES OR NOT ASKED.
								What is the highest grade** completed by (NAME)?	IF AGE LESS THAN 25 YEARS Is (NAME) still in school?		Has (NAME) started living with his/her spouse?	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
			YES NO	YES NO	M F	IN YEARS	YES NO	GRADE	YES NO	YES NO	YES NO	
01		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	01
02		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	02
03		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	03
04		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	04
05		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	05
06		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	06
07		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	07

208

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)
08		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	08
09		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	09
10		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	10
11		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	11
12		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	12
13		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	13
14		☐☐	1 2	1 2	1 2	☐☐	1 2	☐☐	1 2	1 2	1 2	14

TICK HERE IF CONTINUATION SHEET USED   ☐

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 ☐→ ENTER EACH IN TABLE   NO ☐

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 ☐→ ENTER EACH IN TABLE   NO ☐

3)   Are there any guests or temporary visitors staying here, or anyone else who slept here last night that have not been listed?   YES ☐→ ENTER EACH IN TABLE   NO ☐

*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
09 = NEPHEW OR NIECE
10 = CO-WIFE
11 = OTHER RELATIVE
12 = ADOPTED/FOSTER/STEP CHILD
13 = NOT RELATED
98 = DON'T KNOW

** CODES FOR Q.9
GRADE FOR EDUCATION
00 = LESS THAN 1 YR
01 = GRADE 1
02 = GRADE 2
03 = GRADE 3
04 = GRADE 4
05 = GRADE 5
06 = GRADE 6

07 = GRADE 7
08 = GRADE 8
09 = GRADE 9
10 = COMPLETED SLC
11 = INTERMEDIATE FIRST YEAR
12 = INTERMEDIATE COMPLETE
13 = BACHELORS'S NOT COMPLETE
14 = BACHELOR'S/HIGHER
95 = NON-FORMAL EDUCATION
98 = DON'T KNOW

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP

14	What is the main source of drinking water for members of your household?	PIPED WATER
		  PIPED INTO
		      RESIDENCE/YARD/PLOT ... 11
		      PUBLIC TAP 12
		WELL WATER
		  WELL IN
		      RESIDENCE/YARD/PLOT ... 21
		      PUBLIC WELL 22
		HAND PUMP
		      RESIDENCE/YARD/PLOT 31
		      PUBLIC 32
		SURFACE WATER
		      SPRING/KUWA 41
		      RIVER/STREAM 42
		      POND/LAKE 43
		      STONE TAP (DHARA) 44
		
		OTHER _____ 96
		     (SPECIFY)
			→ 16
			
			→ 16
			
			→ 16

15	How long does it take to get there, get water, and come back?	MINUTES .... ☐☐☐ ON PREMISES 996	

16	What kind of toilet facility does your household have?	FLUSH TOILET 11
		PIT TOILET/LATRINE
		    TRADITIONAL PIT TOILET 21
		    VENTILATED IMPROVED PIT ... 22
		PAN 31
		NO FACILITY/BUSH/FIELD 41
		
		OTHER _____ 96
		     (SPECIFY)	

17	Does your household have: Electricity? A radio? A television? A telephone? A bicycle?	YES NO ELECTRICITY .... 1 2 RADIO .... 1 2 TELEVISION .... 1 2 TELEPHONE .... 1 2 BICYCLE 1 2	
18	How many rooms in your household are used for sleeping?	ROOMS .... ☐☐	
19	What is the religion of the head of the household?	HINDU .... 01 BUDDHIST .... 02 MUSLIM .... 03 CHRISTIAN .... 04 OTHER _____ 96 (SPECIFY)	
20	What is the caste of the head of the household? WRITE CASTE IN SPACE PROVIDED. CODE WILL BE ENTERED BY FIELD EDITOR.	☐☐ _____ (CASTE)	

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP

21	MAIN MATERIAL OF THE FLOOR.
	
	RECORD OBSERVATION.
		NATURAL FLOOR
		    MUD/DUNG 11
		RUDIMENTARY FLOOR
		    WOOD PLANKS 21
		FINISHED FLOOR
		    POLISHED WOOD 31
		    CEMENT 32
		    LINOLEUM 33
		    MARBLE CHIPS 34
		    CARPET 35
		
		OTHER _____96
		                (SPECIFY)	

22	What type of salt is usually used for cooking in your household?
	
	(ASK TO SEE SALT PACKAGE).
		PACKAGED
		    IODIZED 11
		    NOT IODIZED 12
		NOT PACKAGED
		    CRYSTAL SALT 21
		    LOOSE SALT 22
		
		OTHER _____96
		                (SPECIFY)	

23	TEST THE SALT AND WRITE THE RESULT.	IODINE READING (PPM) . . [ ][ ][ ]	