



Approved: August 16, 2012 IRB No.: 4332

## Household Listing and Screening Form

Evaluation of JHSPH IRB 00004332 Version Date: September 6, 2012
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### 1. Location of Household

	Name(s)	Code
101. Region		
102. Health Center		
103. Enumeration Area		
104. Village		None
105. Interviewer		
106. Head of household		None
107. Nearest Health Post	..... Distance (km) .....	

### 2. Interviewer Visit Results

	Visit 1	Visit 2
<b>201. Date and time visit made</b>		
<b>202. Result of visit (Use codes from below)</b>		



### 3. Household Eligibility/Selection Form

	<p>Hello, my name is ____ . I am here on behalf of the Maternal, Child Health Integrated Program led by Jhpiego in partnership with the Nepal Ministry of Health and Population. We are doing a study to examine the care women receive during pregnancy in this district.</p> <p>First, I need to ask if you are 18 years old or older? [<i>Wait for response, if person answering the door is older than 18, proceed to question 301. If younger than 18, continue with script.</i>] If not, is there someone in the house who is 18 years or older that I can speak with?</p> <p>[<i>When an adult is available, complete screening consent script and ask for participation before proceeding to the screening questions.</i>]</p>	
301.	<p>Please can you tell me how many people usually live in this household and share meals together?</p> <p>PROBE: Does this include children (including infants) living here?</p> <p>Does it include any other people who may not be members of your family, such as domestic servants, lodgers or friends who live here and share food?</p> <p>MAKE SURE THESE PEOPLE ARE INCLUDED IN THE TOTAL</p>	<p>TOTAL NUMBER OF PEOPLE IN HOUSEHOLD</p> <p>[       ]</p>
302.	<p>Is the head of the household male or female? (mark "1" for Male, "2" for Female)</p>	<p>[   ]</p>
303.	<p>Date of birth of the head of HH (DD/MM/YY)</p> <p>(specify date or circle "don't know")</p>	<p>[   /   /   ]</p> <p>Don't know</p>
304.	<p>How old is the head of household?</p>	<p>[   ]</p>

Household Number: [\_\_\_\_|\_\_\_\_|\_\_\_\_]  
 HC#|EA#|HH#

305 .	Please give me the names of all women aged 10 to 50 years who usually live in your household (and share meals).	What is the relationship of NAME to the head of the household?* (USE CODES BELOW)	Did NAME deliver baby in the past 6 months?		Is NAME eligible? (SEE CRITERIA BELOW)	
			YES	NO	YES	NO
1			1	2	1	2
2			1	2	1	2
3			1	2	1	2
4			1	2	1	2
5			1	2	1	2
6			1	2	1	2
7			1	2	1	2
8			1	2	1	2
9			1	2	1	2
10			1	2	1	2

<b>RELATIONSHIP CODES</b>	06 MOTHER	12 DOMESTIC SERVANT
01 HEAD	07 MOTHER IN LAW	13 VISITOR
02 WIFE	08 SISTER	14 FRIEND
03 DAUGHTER	09 SISTER IN LAW	98 OTHER NOT RELATIVE: (Please Specify)
04 DAUGHTER IN LAW	10 OTHER RELATIVE	_____
05 GRANDDAUGHTER	11 ADOPTED/FOSTER/STEP DAUGHTER	

Household Number: [ \_\_\_ | \_\_\_ | \_\_\_ ]  
 HC# | EA# | HH#

**ELIGIBILITY CRITERIA:**

ANY WOMAN WHO HAS HAD A BIRTH WITHIN THE LAST 6 MONTHS

AND

IS CURRENTLY LIVING IN HOUSEHOLD

<b>Summary of Listing</b>	
306. Total number of individuals living in the household (From Q 301)	
307. Total number of eligible women who live in the house and have had a pregnancy and delivery in the past 6 months (Total of Q 305, Eligible=Yes)	
308. Date and time listing completed	
309. Person who checked the listing for completeness	
310. Comments	

IF MORE THAN ONE ELIGIBLE WOMEN LIVES IN THIS HOUSEHOLE, RANDOMLY SELECT ONE WOMAN FOR THE INTERVIEW.

<b>4. Interview Contacts</b>		
401.	Line number of woman selected for interview.	_____
402.	Name of woman selected for interview.	_____

<b>6. Interviewer Visit Attempts for SURVEY COMPLETION</b>			
	Visit 1	Visit 2	FINAL VISIT
<b>Date and time visit made</b>			

Household Number: [\_\_|\_\_|\_\_]  
HC#|EA#|HH#

<b>Result of visit (Use codes from below)</b>			
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Codes for result	<input type="checkbox"/> 10. RDW present, completed interview <input type="checkbox"/> 11. Refused <input type="checkbox"/> 12. Dwelling vacant <input type="checkbox"/> 14. RDW not home at time of visit	=> Need to return
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