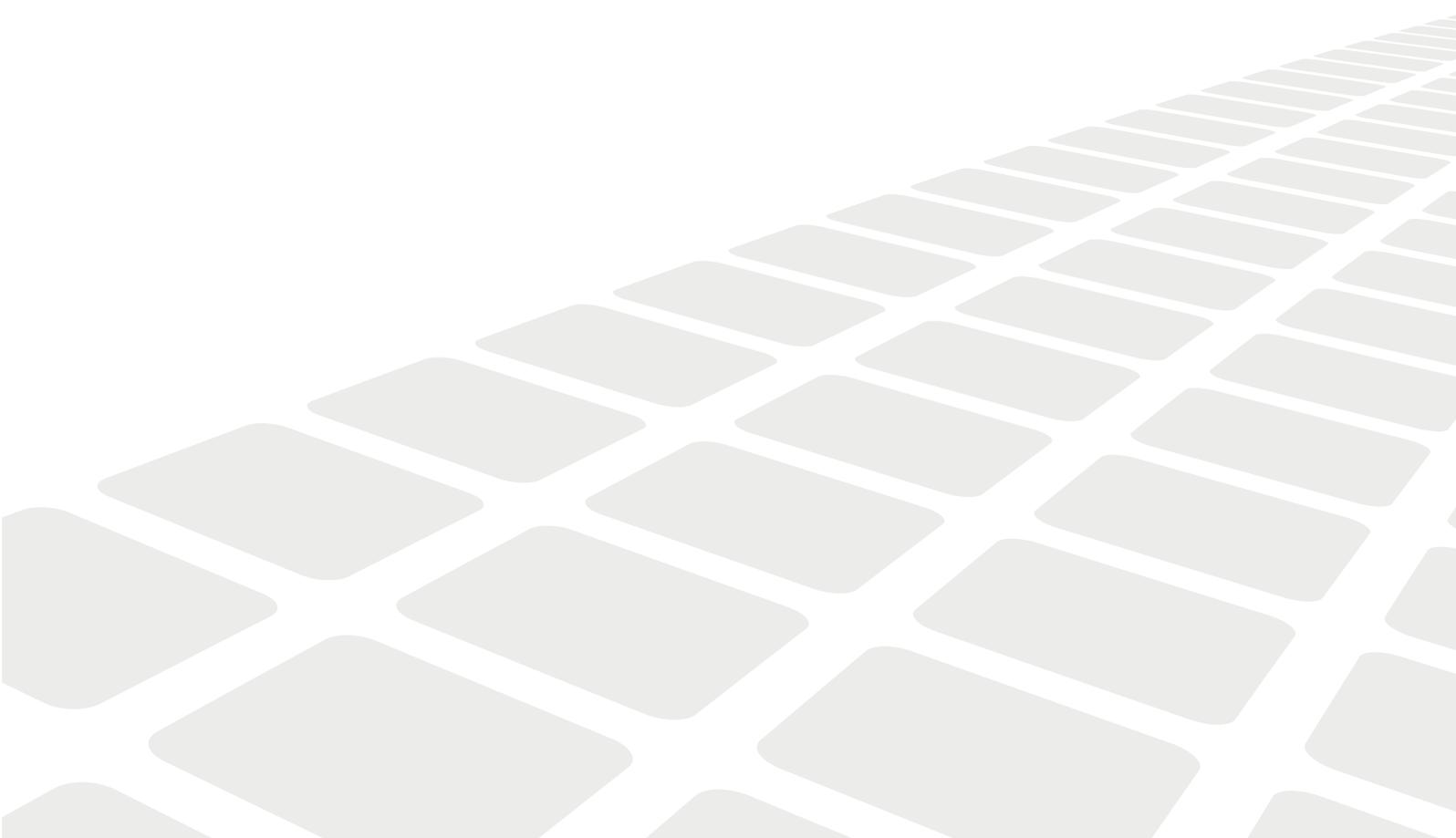




REPUBLIC OF NAMIBIA
Ministry of Health and Social Services

Household Census Register Form



Catchment area: _____ Household Number (from map) _____

Name of head of household _____ Number of occupants _____

Date of data collection: ___ / ___ / ___ Name of HEW: _____

| Register of Occupants | | | |
|---|------------|------------|--------------------|
| Name | Sex | Age | |
| New born 0 - 28 days | | | |
| | | | |
| | | | |
| Children aged 29 days to 5 years | Sex | Age | |
| | | | |
| | | | |
| | | | |
| Young people ages 6-14 years | Sex | Age | Preg (tick) |
| | | | |
| | | | |
| | | | |
| Men and women in reproductive ages 15-49 years | Sex | Age | Preg (tick) |
| | | | |
| | | | |
| | | | |
| Men and women aged 50 years or more | Sex | Age | |
| | | | |
| | | | |
| | | | |

Information for the family practices flag:**(circle the answer)**

| | | | |
|---|----|-----------|-----|
| 1. If there are children under 5, have they all been fully vaccinated? | No | Partly | Yes |
| 2. If there are pregnant women, are they attending antenatal care? | No | Sometimes | Yes |
| 3. Have all persons over 16 been tested for HIV? | No | Some | All |
| 4. In a malaria area, do under 5's and pregnant women sleep under ITNs? | No | Some | Yes |
| 5. Is there a hand washing facility (Observe) | No | | Yes |
| 6. Is there a latrine in the household (Observe) | No | | Yes |
| 7. Is the household using safe/protected water source (Observe) | No | | Yes |

Other medical information

| | | | |
|---|----|--|-----|
| 8. Has any woman just given birth or had an abortion? | No | | Yes |
| 9. Is there anyone in the house that is taking ARVs? | No | | Yes |
| 10. Is anyone on TB treatment? | No | | Yes |
| 11. Is there a person with disability? | No | | Yes |
| 12. Is there a person with serious alcohol problem? | No | | Yes |