

PN-ACA-233

**Demographic and Health Surveys
Phase III**

Interviewer's Manual

**For Use with
Model "A" Questionnaire
For High Contraceptive
Prevalence Countries**

**DHS-III Basic Documentation
Number 3**

Macro International Inc.
Calverton, Maryland

January 1997

The Demographic and Health Surveys (DHS) is a 13-year project to assist government and private agencies in developing countries to conduct national sample surveys on population and maternal and child health. Funded primarily by the United States Agency for International Development (USAID), DHS is administered by Macro International Inc. in Calverton, Maryland.

The main objectives of the DHS program are: (1) to promote widespread dissemination and utilization of DHS data among policymakers, (2) to expand the international population and health database, (3) to advance survey methodology, and (4) to develop in participating countries the skills and resources necessary to conduct high-quality demographic and health surveys.

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Recommended citation:

Macro International Inc. 1997. *Interviewer's Manual for Use with Model "A" Questionnaire for High Contraceptive Prevalence Countries*. DHS-III Basic Documentation No. 3. Calverton, Maryland.

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ACKNOWLEDGEMENTS

Production of this manual was the responsibility of Laura Nyblade and Kia Weinstein. Other DHS staff members who contributed substantially to this effort were Mickey Marckwardt, Fred Arnold, Bernard Barrere, Anne Cross, Kate Stewart, Luis Ochoa, Sri Poedjastoeti, Michka Serrousi, Pav Govindasamy and Elisabeth Sommerfelt.

I. INTRODUCTION TO THE [COUNTRY]¹ DEMOGRAPHIC AND HEALTH SURVEY

The [Country] Demographic and Health Survey (DHS) is a national sample survey designed to provide information on fertility, family planning, and health in [Country]. The DHS will involve interviewing a randomly selected group of women who are between 15 and 49 years of age. These women will be asked questions about their background, the children they have given birth to, their knowledge and use of family planning methods, the health of their children, and other information which will be helpful to policymakers and administrators in the health and family planning fields.²

You are being trained as an interviewer for the DHS. After the training course, which will take about three weeks to complete, selected interviewers will be working in teams, going to different parts of the country to interview women in their houses. This is called fieldwork. Depending on the areas assigned to your team and on how well you perform the tasks given to you, you may be working on the DHS for up to [expected length of fieldwork] months. However, we have recruited more interviewers to participate in the training course than are needed to do the work and at the end of the course, we will be selecting the best qualified among you to work as interviewers. Those not selected may be retained as alternates or data entry staff.

During the training course, you will be listening to lectures about how to fill in the questionnaires correctly. You will also be conducting practice interviews with other trainees and with strangers. You will be given periodic tests, and the questionnaires that you complete will be edited to check for completeness and accuracy.

You should study this manual and learn its contents since this will reduce the amount of time needed for training and will improve your chances of being selected as an interviewer.

¹Text in [] is to be modified on a country-specific basis. This manual was written assuming fieldwork will be conducted in 1997; appropriate changes will have to be made when fieldwork is to be conducted at a later date.

²In countries using a male questionnaire, this chapter should be revised accordingly.

A. SURVEY OBJECTIVES

The DHS is part of a world-wide survey program. The international DHS program is designed to:

- ▶ collect information on fertility and family planning;
- ▶ measure differences across the country in fertility and family planning use;
- ▶ find out what type of women are likely to have more or fewer children or to use or not use family planning;
- ▶ collect information on certain health-related matters such as immunizations, breastfeeding and antenatal check-ups;
- ▶ assist countries in conducting surveys periodically to monitor changes in birth rates, health, and the use of family planning;
- ▶ provide an international data base which can be used by researchers investigating topics related to fertility, health, and the use of family planning.

As part of the international DHS program, surveys are being carried out in countries in Africa, Latin America, Asia, and the Middle East.

B. SAMPLE

There are several ways to gather information about people. One way is to contact every person or nearly every person and ask them questions about the things you need to know. Talking to everyone is called a complete enumeration, and a national census is a good example of this type of information gathering. This is very costly because it takes a lot of people to talk to everyone. However, in cases such as a national census, it is necessary to have a complete enumeration despite the cost.

Another way to collect information is through a sample survey. When it is not necessary to know exact total numbers, the sample survey can collect information about people much more quickly and cheaply. Most often we do not use whole numbers in making our decisions, but instead we think in terms of percentages. For example, hearing that 800 people support a certain candidate in an election means very little to most of us. However, if we read that 55% of the voters support that candidate, we can judge that he will probably win the election. The sample survey provides us with answers that are expressed in averages, proportions, or percentages, such as the proportion of children who are immunized against a certain disease or the proportion of women who do not want to have any more children. The sampling procedure allows us to collect data on a small number of people and draw conclusions which are valid for the whole country. The main reasons for using sample surveys instead of a complete enumeration are to reduce the time and cost of collecting information.

The accuracy of a sample survey depends, among other things, upon the size of the sample. For example, if you only chose a sample of three people from a population of 3000, the results of the sample would probably bear little resemblance to the total. On the other hand, a scientific sample of 400 would yield very accurate results. Therefore, the size of a sample is determined by how accurately the results must reflect the whole population being studied. This is determined by statistical methods which we will not try to discuss in this training session. What you should know, however, is that the sample size is predetermined by the survey organizers according to the level of accuracy they need for the results. Consequently, it is critical to a survey that field workers try their hardest to complete all assigned interviews to ensure that the correct number of people are included in the survey.

The accuracy of a sample survey is also dependent upon another major factor, the absence of bias which would affect the proportions found through the sample. To control or prevent bias from creeping into the results, the selection of people included in the sample must be absolutely random. This means that every person in the total population to be studied has the same opportunity to be selected in the sample. This is why it is so important to make call-backs to reach those people who are not at home, since they may be different from people who are at home. For example, it may be that women who have no children are more likely to be working away from the house and if we don't call back to interview them, we may bias the fertility estimates.

Certain households throughout [Country] have been scientifically selected to be included in the DHS sample.³ Each and every one of these households will be visited and enumerated using a Household

³In this manual, it has been assumed that a household listing will be available for the fieldwork. In some countries, dwellings may be selected instead of households. The description of the sampling process has to be adapted accordingly.

Questionnaire. Women aged 15-49 will be interviewed using an Individual Questionnaire.⁴ We expect to be interviewing about [expected sample size] women in this survey. Studying the fertility, health, and family planning behavior and attitudes of these women will provide insights into the behavior and attitudes of all women in the country.

[Include a brief explanation of the actual sample selection in [Country], including discussion of the number of clusters or segments selected, and whether a household listing and/or mapping operation has been done before the survey.]

⁴In some countries, women must also be ever-married or ever in union to be eligible for the Individual Interview; in such cases, this manual will have to be modified accordingly.

C. SURVEY ORGANIZATION

The DHS is a comprehensive survey involving several agencies and many individuals. [Name of organization] has the major responsibility for conducting the survey. [Describe participation of other organizations or committees that are involved in designing or implementing the DHS.]

[Description of survey organization, naming the project director, deputy director and fieldwork coordinators. Clarification of how interviewers relate to these people and lines of authority.]

Each of you who is selected to work on the survey will work in teams consisting of one supervisor, one field editor, one Household interviewer, and [four] Individual interviewers. Field supervisors may be either male or female; and field editors and interviewers should be female, since they will be interviewing female respondents regarding personal topics.

Each field supervisor will be responsible for one team of interviewers. He/she will be assisted by the field editor, who will be in charge in the absence of the supervisor. The specific duties of the field supervisor and the field editor are described in detail in the Supervisor's and Editor's Manual. As the workloads of the field supervisor and the field editor will vary from day to day, it is expected that they will assist each other in completing their respective duties. In the central office, [editing clerks,] data entry staff and computer programmers will also be assigned to the project.

D. SURVEY QUESTIONNAIRES

There are two questionnaires that will be used in the DHS, the Household Questionnaire and the Individual Questionnaire.

The households which have been scientifically selected to be included in the DHS sample will be visited and enumerated using a Household Questionnaire. **The Household interviewer and field supervisor will administer the Household Questionnaires. (Note that all members of the interviewing teams will be trained to administer the Household Questionnaire because Individual interviewers may occasionally be called upon to do Household interviews.)**

The Household Questionnaire consists of a cover sheet to identify the household, and a form on which all members of the household and visitors are listed. (Members of the household are persons who usually live in the household, and visitors are persons who do not usually live in the household but who slept there the previous night.) The **Household interviewer** will collect some information about each person, such as name, sex, age, and education. This information can be used to calculate certain demographic rates such as the birth rate, and to evaluate the quality of the sample implementation.

Household interviewers will also identify which women are eligible (qualified) to be interviewed with the Individual Woman's Questionnaire. All women listed in the Household Questionnaire who are age 15 to 49 are eligible for the Individual interview. This means that household members (persons who usually live in the household) and visitors (persons who do not usually live in the household but who slept there the previous night) are eligible for the Individual interview.

[In countries where the sample is ever-married women, the marital status of women aged 15 to 49 has to be recorded in the Household Questionnaire, and the eligibility criteria for Individual interviews will include: women who are currently married, no longer living together, divorced or widowed.]

After the household interviewer has identified the eligible women in a household, **Individual interviewers** will use the Individual Questionnaire to interview the women they are assigned.

The Individual Questionnaire collects information on the following topics:

- ▶ Background characteristics. Questions on age, marital status, education, employment status, [religion, ethnic group] and place of residence are included in order to provide information on characteristics likely to influence fertility and contraceptive behavior. If a woman has ever been married or lived with a man, questions are also asked about the husband or partner.
- ▶ Reproductive behavior and intentions. Data are collected on the dates of birth and survival status of births, current pregnancy status and on future childbearing intentions.
- ▶ Knowledge and use of contraception. Questions are designed to determine knowledge and use of specific family planning methods. For women not using family planning, questions are included about reasons for nonuse and intentions for future use.
- ▶ Availability of family planning. Questions are included to determine where a user obtained her family planning method and whether nonusers know of places to get family planning.

- ▶ Breastfeeding and health. Questions are included on length of breastfeeding, immunizations, and recent occurrences of diarrhea, fever, and cough for all children born in the past three years.
- ▶ AIDS. Questions are included to ascertain knowledge of AIDS.
- ▶ Height and weight of children aged less than 3 years and of their mothers⁵. All respondents who have had one or more children who were born since January [1994] and their children born since January [1994] will be measured by [a trained technician and/or the interviewer.]

⁵In some countries height and weight will be taken for children under age five. Text will need to be adjusted accordingly.

E. ROLE OF HOUSEHOLD INTERVIEWER AND INDIVIDUAL INTERVIEWER

The interviewer occupies the central position in the DHS, since she is the one who collects information from respondents. Therefore, the success of the DHS depends on the quality of each interviewer's work.

In general, the responsibilities of the Household Interviewer include:

- ▶ locating the structures and households in the sample which are assigned to her and completing the Household Questionnaire;
- ▶ identifying all eligible women in those households.

In general, the responsibilities of the Individual Interviewer include:

- ▶ interviewing all eligible women in the households assigned to her, using the Individual Questionnaire;
- ▶ checking completed interviews to be sure that all questions were asked and the responses neatly and legibly recorded;
- ▶ returning to households to interview women she could not contact during her initial visits.

These tasks will be described in more detail throughout this manual and during your training.

F. TRAINING OF INTERVIEWERS

Although some people are more adept at interviewing than others, one can become a good interviewer through experience. Your training will consist of a combination of classroom training and practical experience. Before each training session you should study this manual carefully along with the questionnaire, writing down any questions you may have. Ask questions you might have at any time in order to avoid mistakes during actual interviews. Interviewers can learn a lot from each other by asking questions and talking about situations encountered in practice and actual interview situations. [A list of training materials each interviewer should have may be included here].

During your training course, you will see and hear demonstration interviews conducted in front of the class by two of the trainers as examples of the interviewing process. During this phase of your training, the questionnaire sections, questions, and instructions will be discussed in detail. You will also have a homework assignment for the evenings of this part of your training. You will practice reading the questionnaire aloud to another person several times so that you may become comfortable with reading the questions aloud. This is a very important assignment to prepare you for the next phase of training.

The next phase of training will be role playing in which you practice by interviewing another trainee. One person will be the interviewer and one will be the respondent. [Later on, you will be assigned to groups according to language, and will practice interviewing in your language.]

The third phase of training will be field practice interviewing in which you will actually interview household respondents and eligible women. You will be required to check and edit the questionnaires just as you would do in the actual fieldwork assignments.

You will be given tests to see how well you are progressing during your formal training period. They will test your familiarity and understanding of the questionnaire and the survey process. At the end of the training course, the interviewers will be selected.

Your training as an interviewer does not end when the formal training period is completed. Each time a supervisor meets with you to discuss your work in the field, your training is being continued. The formal training period merely provides you with the basic knowledge and information regarding the survey, questionnaires, etc. Continued observation and supervision during the fieldwork completes the training process. This is particularly important during the first few days of fieldwork. Again, as you run into situations which you did not cover in training, it will be helpful to discuss them with your team. Other interviewers may be running into similar problems, so you can all benefit from each other's experiences.

G. SUPERVISION OF INTERVIEWERS

Training is a continuous process. Observation and supervision throughout the fieldwork are a part of the training and data collection process. Your team supervisor and the field editor will play very important roles in continuing your training and in ensuring the quality of DHS data. They will:

- ▶ observe some of your interviews to ensure that you are conducting yourself well, asking the questions in the right manner, and interpreting the answers correctly;
- ▶ spot check some of the addresses selected for interviewing to be sure that Household interviewers interviewed the correct households, and that Individual interviewers interviewed the correct women;
- ▶ review each questionnaire to be sure it is complete and is internally consistent;
- ▶ **uncover apparent omission of births the respondent has had or improper recording of dates of birth and take action;**
- ▶ meet with each member of the team on a daily basis to discuss performance and give out future work assignments;
- ▶ help you to solve any problems that you might have with finding the assigned households, understanding the concepts in the questionnaire or with difficult respondents.

The survey director may release from service any interviewer who is not performing at the level necessary to produce the high quality data required to make the DHS a success.

H. DHS REGULATIONS

During the next few weeks, your presence, interest, participation, and cooperation are absolutely vital. We will try to do all that we can during this time to provide you with the necessary information, training, tools, and support for you to accomplish this very important task. In order for the workload to be equally divided and the support equally shared, the following survey regulations have been established and will be strictly enforced.

1. Every position on the survey staff is vital to the success of the survey. If you are chosen to be on a team and accept the position, your presence is required for each day of fieldwork.
2. Except for illnesses, any person who is absent from duty during any part of the training or any part of the fieldwork (whether it is a whole day or part of a day) without prior approval from her supervisor may be dismissed from the survey.
3. There is a great deal of work to be done over the next few weeks and tardiness in attending the training sessions or arriving late at an assigned work site will not be tolerated.
4. The selection of the survey team members is competitive; it is based on performance, ability, and testing results during the training. Therefore any person found offering assistance to or receiving assistance from another person during tests will be dismissed from the survey.
5. Throughout the survey training and the fieldwork period, you are representing the [name of survey organization]. Your conduct must be professional and your behavior must be congenial in dealing with the public. We must always be aware of the fact that we are only able to do our work with the good will and cooperation of the people we interview. Therefore, any team member who is consistently overly aggressive, abrupt, or disrespectful to the people in the field may be dismissed from the survey team.
6. For the survey to succeed, each team must work closely together sharing in the difficulties and cooperating and supporting each other. We will attempt to make team assignments in a way that enhances the cooperation and good will of the team. However, any team member who in the judgement of the Project Director creates a disruptive influence on the team may be asked to transfer to another team or may be dismissed from the survey.
7. It is critical that the data gathered during the fieldwork be both accurate and valid. To control for inaccurate or invalid data, spot checks will be conducted. Interviewers may be dismissed at any time during the fieldwork if their performance is not considered adequate for the high quality this survey demands.
8. Vehicles and gasoline are provided for the survey for official use only. Any person using the vehicle for an unauthorized personal reason will be dismissed from the survey.
9. DHS data are confidential. They should not be discussed with anyone, including your fellow interviewers. Under no circumstances should confidential information be passed on to third parties. Persons breaking these rules, and therefore, the confidence placed in them by the respondent, will be dismissed.

II. CONDUCTING AN INTERVIEW

The interviewing techniques discussed in this chapter are applicable to both the Household interviewer and the Individual interviewer. Successful interviewing is an art and should not be treated as a mechanical process. Each interview is a new source of information, so make it interesting and pleasant. The art of interviewing develops with practice but there are certain basic principles which are followed by every successful interviewer. In this section you will find a number of general guidelines on how to build rapport with a respondent and conduct a successful interview.

A. BUILDING RAPPORT WITH THE RESPONDENT

The field supervisor will assign a Household interviewer to make the first contact with a household selected for the DHS. Any capable adult member of the household is a suitable respondent for the Household interview (this person may or may not be a woman age 15 to 49). If one or more eligible women is identified in the Household Questionnaire, the supervisor will assign an Individual interviewer to that household to complete the Individual Questionnaire with each eligible woman identified. As either a Household interviewer or an Individual interviewer, your first responsibility as the interviewer is to establish rapport with the respondent.

At the beginning of an interview, you and the respondent are strangers to each other. The respondent's first impression of you will influence his/her willingness to cooperate with the survey. Be sure that your manner is friendly as you introduce yourself. [Before you start to work in an area, your supervisor will have informed the local leaders, who will in turn, inform the women in the area that you will be coming to interview them.] You will also be given a letter [identification card] that states that you are working with the [name of survey organization].

1. Make a good first impression.

When first approaching the respondent, do your best to make her feel at ease. With a few well chosen words you can put the respondent in the right frame of mind for the interview. Open the interview with a smile and greeting such as "Good Afternoon" and then proceed with your introduction.

A good introduction might be:

"My name is _____. I am a representative of [name of survey organization]. We are conducting a survey about family life and health and we are interviewing women throughout the country. I would like to talk to you and ask you some questions".

2. Always have a positive approach.

Never adopt an apologetic manner, and do not use words such as "Are you too busy?", "Would you spare a few minutes?" or "Would you mind answering some questions?" Such questions invite refusal before you start. Rather, tell the respondent, "I would like to ask you a few questions" or "I would like to talk with you for a few moments."

3. Stress confidentiality of responses when necessary.

If the respondent is hesitant about responding to the interview or asks what the data will be used for, explain that the information you collect will remain confidential, no individual names will be used for any purpose and that all information will be grouped together to write a report. Also, you should never mention other interviews or show completed questionnaires to other interviewers or supervisors in front of a respondent or any other person.

4. Answer any questions from the respondent frankly.

Before agreeing to be interviewed, the respondent may ask you some questions about the survey or how she was selected to be interviewed. Be direct and pleasant when you answer. However if she asks questions about family planning methods or medicines, tell her that you will try to answer her questions after you have finished the interview.

The respondent may also be concerned about the length of the interview. If she asks, tell her that the interview usually takes about 45 minutes. Indicate your willingness to return at another time if it is inconvenient for her to answer questions then.

5. Interview the respondent alone.

The presence of a third person during an interview can keep you from getting frank, honest answers from a respondent. It is, therefore, very important that the individual interview be conducted privately and that all questions are answered by the respondent herself.

If other people are present, explain to the respondent that some of the questions are private and ask where is the best place you can talk with her alone. Sometimes asking for privacy will make others more curious, so they will want to listen; you will have to be creative. Establishing privacy from the beginning will allow the respondent to be more attentive to your questions.

If it is impossible to get privacy, you may have to carry out the interview with the other people present. However, try to separate yourself and the respondent from the others as much as possible. Extra effort should be made to gain privacy if the other person is a man, particularly the husband. If there is more than one eligible woman in the household, you must not interview one in the presence of the other.

B. TIPS IN CONDUCTING THE INTERVIEW

1. Be neutral throughout the interview.

Most people are polite and will tend to give answers that they think you want to hear. It is therefore very important that you remain absolutely neutral as you ask the questions. Never, either by the expression on your face or by the tone of your voice, allow the respondent to think that she has given the "right" or "wrong" answer to the question. Never appear to approve or disapprove of any of the respondent's replies.

A respondent may ask you questions during the interview, for example, about certain contraceptive methods or treatments for diseases. Or she may ask you whether you use family planning or what you think the ideal family size is. Tell her that we are interested in her opinions and that you cannot answer her questions because otherwise you would slow down the pace of the work.

The questions are all carefully worded to be neutral. They do not suggest that one answer is more likely or preferable to another answer. If you fail to read the complete question, you may destroy that neutrality. For example, the following is a question in the DHS: "Would you like to have another child or would you prefer not to have any more children?" It is a neutral question. However, if you only ask the first part—"Would you like to have another child?" you are more likely to get a "YES" answer. This is what we call a "leading question". That is why it is important to read the whole question as it is written.

If the respondent gives an ambiguous answer, try to probe in a neutral way, asking questions such as:

"Can you explain a little more?"

"I did not quite hear you, could you please tell me again?"

"There is no hurry. Take a moment to think about it."

2. Never suggest answers to the respondent.

If a respondent's answer is not relevant to a question, do not prompt her by saying something like "I suppose you mean that... Is that right?" In many cases, she will agree with your interpretation of her answer, even when that is not what she meant. Rather, you should probe in such a manner that the respondent herself comes up with the relevant answer. You should never read out the list of coded answers to the respondent, even if she has trouble in answering.

3. Do not change the wording or sequence of questions.

The wording of the questions and their sequence in the questionnaire must be maintained. If the respondent has misunderstood the question, you should repeat the question slowly and clearly. If she still does not understand, you may reword the question, being careful not to alter the meaning of the original question. Provide only the minimum information required to get an appropriate response.

4. Handle hesitant respondents tactfully.

There will be situations where the respondent simply says "I don't know", gives an irrelevant answer, acts very bored or detached, contradicts something she has already said, or refuses to answer the question. In these cases you must try to re-interest her in the conversation. For example, if you sense that she is shy or afraid, try to remove her shyness or fear before asking the next question. Spend a few moments talking about things unrelated to the interview (for example, her town or village, the weather, her daily activities, etc.).

If the woman is giving irrelevant or elaborate answers, do not stop her abruptly or rudely, but listen to what she has to say. Then try to steer her gently back to the original question. A good atmosphere must be maintained throughout the interview. The best atmosphere for an interview is one in which the respondent sees the interviewer as a friendly, sympathetic and responsive person who does not intimidate her, and to whom she can say anything without feeling shy or embarrassed. As indicated earlier, the major problem in controlling the interview may be one of privacy. This problem can be prevented if you are able to obtain a private area in which to conduct the interview.

If the respondent is reluctant or unwilling to answer a question, try to overcome her reluctance, explaining once again that the same question is being asked of women all over the country and that the answers will all be merged together. If she still refuses, simply write REFUSED next to the question and proceed as if nothing had happened. If you have successfully completed the interview, you may try to obtain the missing information at the end, but do not push too hard for an answer. Remember, the respondent cannot be forced to give an answer.

5. Do not form expectations.

You must not form expectations as to the ability and knowledge of the respondent. Do not assume women from rural areas or those who are less educated or illiterate do not know about family planning or various family planning methods.

On the other hand, remember that differences between you and the respondent can influence the interview. The respondent, believing that you are different from her, may be afraid or mistrustful. You should always behave and speak in such a way that she is put at ease and is comfortable talking to you.

6. Do not hurry the interview.

Ask the questions slowly to ensure the respondent understands what she is being asked. After you have asked a question, pause and give her time to think. If the respondent feels hurried or is not allowed to formulate her own opinion she may respond with "I don't know" or give an inaccurate answer. If you feel the respondent is answering without thinking, just to speed up the interview, say to the respondent, "There is no hurry. Your opinion is very important so consider your answers carefully."

[C. LANGUAGE OF THE INTERVIEW (only for multi-lingual surveys)]

[The questionnaires for the DHS have been translated into all the major languages in which interviewing will take place. However, there may be times when you will have to use an interpreter or modify the wording of the questions to fit local dialects and culture. It is very important not to change the meaning of the question when you rephrase it or interpret it into another language. We will be practicing interviews in the local languages during training.

Of course, one of the first things you will do when you approach a household to do an interview is to establish the language or languages that are spoken there. We will be arranging the field teams in such a way that you will be working in an area in which your language is spoken, so there should be few cases in which respondents do not speak your language. In such cases you might be able to find another language that both of you speak and you will be able to conduct the interview in that language.

However, in some cases, it will not be possible for you to find a language which both you and the respondent speak. In this case, try to find out if the respondent speaks a language which another member of your team or the team supervisor speaks. If so, tell your supervisor so that he or she can arrange for that person to conduct the interview.

If the respondent does not speak a language which any of your team members speak, you will need to rely on a third person to translate for you. Since the interview involves some sensitive topics, it is best if you can find another woman to act as an interpreter. Try to avoid using the respondent's husband as an interpreter. Children are also unsuitable interpreters. Remember, try to avoid using interpreters if at all possible since this not only jeopardizes the quality of the interview but also will mean that the interview will take nearly twice as long to conduct.]

III. FIELD PROCEDURES

The DHS survey will be successful only if each member of the interviewing team understands and follows correct field procedures. The following sections describe the proper procedures for receiving work assignments and keeping records of selected households.

A. PREPARATORY ACTIVITIES AND ASSIGNMENT SHEETS

1. Household Interviewer: Receiving work assignments

Each morning your supervisor will brief you on your day's work and explain how to locate the households assigned to you. When your supervisor assigns households to you, he/she will write the identification information on the Supervisor's/Editor's Assignment Sheet (see next page). The identifying information (household number, address, name of the head of the household) and your name and date of assignment will be written in Columns (1)-(4).

When you receive your work assignment, review it and ask any questions you might have; remember that your supervisor will not always be available to answer questions once the work begins. Before going to your first selected household, it is your responsibility to do the following:

- ▶ Have a Household Questionnaire for each household you are assigned;
- ▶ Fill in the identification information on the cover page of each Household Questionnaire;
- ▶ Know the location of the selected households you are to interview, and have sufficient materials (maps, written directions, etc.) to locate them;
- ▶ Understand any special instructions from your supervisor about contacting the households you are assigned;
- ▶ Have several blank Individual Questionnaires.

After completing a household interview, it is the responsibility of the household interviewer to allocate an Individual Questionnaire for each eligible respondent identified in the household. The household interviewer will fill in the identification information on the cover sheet of an Individual Questionnaire for each eligible respondent identified in the Household Schedule. The completed Household Questionnaire will then be returned to the supervisor, with an Individual Questionnaire for each eligible woman placed inside.

For example, after completing the household interview you have found that there are two women eligible for the Individual interview; you will take two Individual Questionnaires and fill in the identification information for each of the two women. You will then return the completed Household Questionnaire with two Individual Questionnaires tucked inside to your supervisor.

When you return the completed Household Questionnaire, your supervisor will complete columns 5-10 of the Supervisor's/Editor's Assignment Sheet. Columns 5-7 indicate the final result of the household interview. Your supervisor will then assign the eligible respondents to an Individual interviewer. Column 8 indicates the name of the Individual interviewer assigned to those women, and the date the assignment was given. All eligible respondents in a household will be assigned to a single Individual interviewer. Columns 9 and 10 indicate the line number and residency status of each eligible woman in the household (from Qs.1 and 4 of the Household Schedule).

CLUSTER NUMBER **516**

DHS SUPERVISOR'S/FIELD EDITOR'S ASSIGNMENT SHEET

NAME OF LOCALITY Cross River

PAGE 1 OF 4 PAGES

DHS HOUSEHOLD NUMBER (1)	DHS STRUCTURE NUMBER OR ADDRESS (2)	NAME OF HEAD OF HOUSEHOLD (3)	HOUSEHOLD INTERVIEWER NAME AND DATE ASSIGNED (4)	HOUSEHOLD INTERVIEW			FEMALE INTERVIEWER NAME AND DATE ASSIGNED (8)	FEMALE INTERVIEW				(NUMBER OF CHILDREN AGE 3 AND UNDER IN HOUSEHOLD SCHEDULE) MINUS (NUMBER IN BIRTH HISTORY) (13)
				FINAL RESULT (5)	TOTAL ELIG. WOMEN (6)	DATE COMPLETED (7)		LINE NO. OF ELIG. WOMAN (9)	RESIDENT OR VISITOR (10)	FINAL RESULT (11)	DATE RE-TURNED (12)	
12	21 Eleke Crescent	Abu Ahmad	12/7	1	1	12/7	Rauta 12/7	2	1	1	12/7	0
14	27 Eleke Crescent	Monday Salawu	12/7	1	1	12/7	Rauta 12/7	3	1	1	13/7	0
15	121 Garden Road	Benjamin Mina	12/7	1	2	12/7	Pamela 12/7	2	1	1	13/7	0
								6	2	1	13/7	0
18	35 Eleke Crescent	George Okediji	12/7	1	2	12/7	Rauta 12/7	2	1	1	12/7	0
								5	1	1	13/7	0
21	128 Garden Road	Joshua Palmer	12/7	1	1	12/7	Pamela 12/7	4	1	1	12/7	0

19

CODES FOR COLUMN 5

- 1 COMPLETED
- 2 NO HH MEMBER AT HOME/ NO COMPETENT RESPONDENT
- 3 ENTIRE HH ABSENT FOR EXTENDED PERIOD
- 4 POSTPONED
- 5 REFUSED

- 6 DWELLING VACANT/ ADDRESS NOT A DWELLING
- 7 DWELLING DESTROYED
- 8 DWELLING NOT FOUND
- 9 OTHER

COLUMN 10

- 1 RESIDENT
- 2 VISITOR

CODES FOR COLUMN 11

- 1 COMPLETED
- 2 NOT AT HOME
- 3 POSTPONED
- 4 REFUSED
- 5 PARTLY COMPLETED
- 6 INCAPACITATED
- 7 OTHER

NUMBER OF HOUSEHOLDS SELECTED

25

NUMBER OF HOUSEHOLD QUESTIONNAIRES

25

2. Individual Interviewer: Receiving work assignments

Each morning your supervisor will brief you on your day's work and assign to you women who are eligible for the Individual interview. You will receive one Individual Questionnaire for each eligible woman. The Identification information on the cover sheet of each Individual Questionnaire should have already been completed by the Household Interviewer. NOTE: Household Questionnaires will NOT be given to Individual Interviewers. You will then transcribe all necessary information from the Supervisor's/Editor's Assignment Sheet to your Interviewer's Assignment Sheet (see next page) in Columns (1)-(6).

After receiving your work assignment, you should review it in order to ask your supervisor or the Household interviewer any questions you may have. Before going to your first interview of the day, it is your responsibility to do the following:

- ▶ Obtain an Individual Questionnaire from your supervisor for each eligible woman you are assigned;
- ▶ Check that the Identification information on the cover sheet of the Individual Questionnaire has been completed for each woman you are assigned;
- ▶ Complete Columns (1)-(6) of your Interviewer's Assignment Sheet for the women you are assigned;
- ▶ Have extra blank Individual questionnaires in case you need an additional questionnaire;
- ▶ Understand the Identification information for locating the eligible respondents you are assigned, including any special instructions from your supervisor about contacting the selected household and locating the respondents within that household.

After completing an Individual interview, you will record the final result of the interview in Column 7 of your Interviewer's Assignment Sheet. You record the date on which you return the questionnaire to your supervisor in Column 8. In Column 9, you will record any special observations regarding the interview.

It will then be the responsibility of the supervisor to record the final result of the Individual interview in Column 11 of the Supervisor's/Editor's Assignment Sheet. He/she will also record the date the Individual Questionnaire was returned to him/her in Column 12.

CLUSTER NUMBER **516**

NAME OF LOCALITY Cross River

DHS INTERVIEWER'S ASSIGNMENT SHEET

PAGE 1 OF 2 PAGES

DHS HOUSEHOLD NUMBER (1)	NAME OF HEAD OF HOUSEHOLD (2)	DATE ASSIGNED (3)	FEMALE INTERVIEW					OBSERVATIONS (9)
			NAME OF ELIGIBLE WOMAN (4)	LINE NO. OF ELIG. WOMAN (5)	RESIDENT OR VISITOR (6)	FINAL RESULT (7)	DATE RETURNED (8)	
12	Abu Ahmad	12/7/97	Fatima Ahmad	2	1	1	12/7	
14	Monday Salawu	12/7/97	Khalida Salawu	3	1	1	13/7	
18	George Okediji	12/7/97	Betty Okediji	2	1	1	12/7	
			Pamela Okediji	5	1	1	13/7	
23	Hamid Siddiqu	13/7	Amina Siddiqu	3	1	1	13/7	husband present during first half
			Dorothea Lalique	6	2	1	13/7	
27	Zahid Mir	13/7	Fatima Mir	2	1	1	14/7	
32	Ambreen Zafar	13/7	Ambreen Zafar	1	1	1	14/7	

CODES FOR COLUMN 6

1 RESIDENT
2 VISITOR

CODES FOR COLUMN 7

1 COMPLETED
2 NOT AT HOME
3 POSTPONED
4 REFUSED
5 PARTLY COMPLETED
6 INCAPACITATED
7 OTHER

INTERVIEWER NAME Rauta

28

NUMBER OF ELIGIBLE WOMEN

08

NUMBER OF INDIVIDUAL QUESTIONNAIRES

08

B. HOUSEHOLD INTERVIEWERS: CONTACTING HOUSEHOLDS

[Note: Each country has a specific method of numbering the structures and households such that each has a unique number within the selected cluster. The instructions here assume a sample design that includes the assignment of unique numbers on all structures within sampling units, and a listing of households, identified by name of the head of the household. Each household is then assigned a number and selection of the sample is done on households. In countries where the sample is drawn on the basis of dwellings rather than households, the contact procedures will have to be modified.]

1. Locating sample households

Several months ago, household listing teams visited each of the selected sample clusters and 1) prepared up-to-date maps to indicate the location of structures, 2) recorded address information for each structure, 3) wrote numbers on structures that do not have addresses, or described their location (for areas lacking street names or numbers on structures), and 4) made a list of the names of the heads of all the households living in the structures.

A structure is a free-standing building that can have one or more rooms in which people live; it may be an apartment building, a house, or a thatched hut, for instance. Within a structure, there may be one or more dwelling (or housing) units. For instance, there would be one dwelling unit in a thatched hut, but there may be 50 dwelling units in an apartment building or 5 dwelling units in a compound. A dwelling unit is a room or group of rooms occupied by one or more households. It may be distinguished from the next dwelling unit by a separate entrance. Within a dwelling unit, there may be one or more households. For example, a compound may have 5 households living within it, and each household may live in its own dwelling unit. (See Chapter V, Part B for the definition of household).

Specific households have been selected to be interviewed and you should not have any trouble in locating the households assigned to you if you use the structure number and the name of the head of the household to guide you. The structure number is usually written above the door of the house but sometimes it may be on the wall. [It is preceded by DHS, for example, DHS-003 or DHS-032.] Although the supervisor of your team will be with you in the field, it is important that you also know how to locate the structures in the sample.

2. Problems in contacting a household

In some cases you will have problems in locating the households that were selected because the people may have moved, or the listing teams may have made an error. Here are examples of some problems you may find and how to solve them:

- ▶ The selected household has moved away and the dwelling is vacant. If a household has moved out of the dwelling where it was listed and no one is living in the dwelling, you should consider the dwelling vacant and record Code '6' on the cover sheet of the Household Questionnaire.
- ▶ The household has moved away and a new one is now living in the same dwelling. In this case, interview the new household.

- ▶ The structure number and name of household head do not match with what you find in the field. Say, for example, that you have been assigned a household headed by Sola Ogedengbe, which is listed as living in structure number DHS-003. But when you go to DHS-003, the household living there is headed by Mary Kehinde. Consider whichever household is living in DHS-003 as the selected household. You would interview the household headed by Mary Kehinde.
- ▶ The household selected does not live in the structure that was listed. If, for example, you are assigned a household headed by Vincent Okigbo located in DHS-007, and you find that Vincent Okigbo actually lives in another structure, interview the household living in DHS-007. In other words, if there is a discrepancy between the structure number and the name of the household head, interview whomever is living in the structure assigned to you. Tell your supervisor about any such situations you find.
- ▶ The listing shows only one household in the dwelling but two households are living there now. In this case, interview both households, and make a note on the cover page of the household that was not on the listing. Your supervisor will assign this household a number, which you should enter on the questionnaire. However, if the listing shows two households, only one of which was selected, and you find three households there now, only interview the one which had been selected and ignore the new one. In either case, inform your supervisor of the situation.
- ▶ The head of the household has changed. In some cases, the person who is listed as the household head may have moved away or died since the listing. Interview the household that is living there.
- ▶ The house is all closed up and the neighbors say the people are on the farm (or away visiting, etc.) and will be back in several days or weeks. Enter Code '3' (ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD). The house should be revisited at least two more times to make sure that the household members have not returned.
- ▶ The house is all closed up and the neighbors say that no one lives there; the household has moved away permanently. Enter Code '6' (DWELLING VACANT OR ADDRESS NOT A DWELLING).
- ▶ A structure assigned to you is actually a shop and no one lives there. Check very carefully to see if anyone is living there. If not, enter Code '6' (DWELLING VACANT OR ADDRESS NOT A DWELLING).
- ▶ A selected structure is not found in the cluster, and residents tell you it was destroyed in a recent fire. Enter Code '7' (DWELLING DESTROYED).
- ▶ No one is home and neighbors tell you the family has gone to the market. Enter Code '2' (NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT) and return to the household at a time when the family will be back (later in the day or the next day).

Remember that the usefulness of the DHS sample in representing the entire country depends on the interviewers locating and visiting all the households they are assigned.

3. Identifying eligible respondents

To be "eligible" means to "qualify" for something. An eligible respondent is someone who is qualified to be included in our survey. You will use the Household Questionnaire to identify who is eligible to be interviewed with the Individual Questionnaire.

All women aged 15-49 years who are either members of the household or visitors are considered eligible in the DHS, even if they do not usually live in that dwelling. It is very important that you do not miss an eligible respondent when you fill in the Household Schedule. In certain cases, you may find it difficult to decide whether or not a woman is eligible. Use these examples as a guide:

- ▶ A visitor who spent the previous night in the house, but is away at the market when you arrive. She is eligible for the Individual interview.
- ▶ A usual resident who spent the previous night at her sister's house. She should be counted as a member of the household on the Household Schedule, and she is eligible for the Individual interview.
- ▶ A usual resident who did not sleep in the household the previous night. She is eligible for the Individual interview.

In some households, there will be no eligible respondents (i.e., there will be no usual household members or visitors who are women between the ages of 15 and 49). For these households, you will have a completed Household Questionnaire, with no accompanying Individual Questionnaires.

C. INDIVIDUAL INTERVIEWERS: CONTACTING INDIVIDUAL RESPONDENTS

1. Locating sample households by Individual Interviewers

The task of locating the dwelling unit/households in which the eligible respondents are living should not be difficult after the household has been found by the Household Interviewer. If for some reason the Individual interviewer cannot find a household, she should check with the Household interviewer or the team supervisor.

2. Problems in obtaining Individual interviews

The following are examples of the kinds of problems the Individual interviewer may experience in obtaining an interview:

- ▶ Eligible respondent not available. If the eligible respondent is not at home when you visit, enter Code '2' (NOT AT HOME) as the result for the visit on the cover sheet and ask a neighbor or family member when the respondent will return. You should contact the dwelling at least three times, trying to make each visit at a different time of day. Under no circumstances is it acceptable to conduct all three visits on the same day and then stop attempting to contact the respondent.
- ▶ Respondent refuses to be interviewed. The respondent's availability and willingness to be interviewed will depend in large part on the initial impression you make when you meet her. Introduce yourself, explain the purpose of the visit, and tell her the interview will take only a short time. If necessary, impress upon her that the information is confidential. If the respondent is still unwilling to be interviewed, it may be that the present time is inconvenient. Ask if another time would be more convenient and make an appointment. If the woman still refuses to be interviewed, enter a Code '4' (REFUSED) as the result for the visit on the cover sheet and report it to your supervisor. The supervisor will make the decision on what action to take.
- ▶ Interview not completed. A respondent may be called away during the interview or she may not want to answer all the questions at the time you visit her. If an interview is incomplete for any reason, you should try to arrange an appointment to see the respondent again as soon as possible to obtain the missing information. Be sure that you record on the cover sheet of the questionnaire that the interview is incomplete Code '5' (PARTLY COMPLETED) and indicate the time you agreed on for a revisit; you should also report the problem to your supervisor.
- ▶ Respondent Incapacitated. There may be cases in which you cannot interview a woman because she is too sick or because she is mentally unable to understand your questions or because she is deaf, etc. In these cases, record Code '6' (INCAPACITATED) on the cover sheet of the questionnaire and on your Assignment Sheet.

The outcome and date of the final attempt to contact an eligible respondent should be noted in Columns 7 and 8 of your Interviewer's Assignment Sheet. It is important that you keep the visit record on the Interviewer's Assignment Sheet accurately as this form provides a summary of all eligible respondents in the DHS sample. These forms will be returned to the central office for review following completion of interviewing, and will be used to calculate response rates.

D. MAKING CALLBACKS

Because each household has been carefully selected, you must make every effort to conduct interviews with the households assigned to you, and with the eligible women identified. Sometimes a household member will not be available at the time you first visit. You need to make at least 3 different visits to a household or eligible respondent when trying to obtain an interview. The Household interviewer needs to make at least 3 different visits to obtain a Household interview, and the Individual interviewer needs to make at least 3 different visits when trying to obtain an Individual interview.

At the beginning of each day, you should examine the cover sheets of your questionnaires to see if you made any appointments for revisiting a household or eligible respondent. If no appointments were made, make your callbacks to a household or respondent at a different time than the earlier visits; for example, if the initial visits were made in the early afternoon, you should try to arrange your schedule so you make the callback in the morning or late afternoon. Scheduling callbacks at different times is important in reducing the rate of non response (i.e., the number of cases in which you fail to contact a household or complete an Individual interview).

E. CHECKING COMPLETED QUESTIONNAIRES

It is the responsibility of the interviewer to review each questionnaire when the interview is finished. This review should be done before you leave the household so that you can be sure every appropriate question was asked, that all answers are clear and reasonable, and that your handwriting is legible. Also check that you have followed the skip instructions correctly. You can make minor corrections yourself, but any serious error should be clarified by the respondent. Simply explain to the respondent that you made an error and ask the question again.

Do not recopy questionnaires. As long as the answers are clear and readable, it is not necessary that the questionnaire itself be neat. Every time you transcribe the answers to a new questionnaire, you increase the chance of an error. For this reason you are not allowed to use work sheets to collect information. Record ALL information on the questionnaires you have been provided. Any calculations you make should be written in the margins or on the back of the questionnaires.

Anything out of the ordinary should be explained either in the margins near the relevant question, or in the comments section at the end. These comments are very helpful to the supervisor and field editor in checking questionnaires. Comments are also read in the office and used to resolve problems encountered during data entry.

F. RETURNING WORK ASSIGNMENTS

1. Household Interviewer

At the end of fieldwork each day, check that you have filled out the cover sheet of a Household Questionnaire for each household assigned to you, whether or not you managed to complete an interview. Also check that you have filled out the identification information on the cover sheet of an Individual Questionnaire for each eligible respondent you identified in the household. Completed Household Questionnaires and accompanying Individual Questionnaires are returned to your supervisor. He/she will update the Supervisor's/Editor's Assignment Sheet, give the Household Questionnaires to the editor, and assign the Individual Questionnaires to Individual interviewers.

You should inform your supervisor about any problems you experienced in locating a household or completing a Household Questionnaire. For these difficult cases, at least three visits will be made to a household during the DHS in an effort to obtain a completed Household interview.

2. Individual Interviewer

At the end of fieldwork each day, fill in the final result and date of all interviews you completed on your Interviewer's Assignment Sheet (Columns 7 and 8). Record any observations or comments in Column 9. Then give the completed Individual Questionnaires to your supervisor; he/she will record the final result code and date on the Supervisor's/Editor's Assignment Sheet and give the questionnaires to the editor.

You should inform your supervisor about any problems you experienced in conducting an interview with an eligible respondent. At least three visits will be made to a respondent during the DHS in an effort to obtain a completed Individual interview.

G. DATA QUALITY

It is the responsibility of the editor to edit both the Household Questionnaires and the Individual Questionnaires from a sample cluster while the interviewing team is still in the cluster. The editing rules followed by the editor are explained in detail in the Supervisor's/Editor's Manual. It is especially important for the editor to conduct thorough edits of questionnaires at the initial stages of fieldwork. The supervisor may assist in editing questionnaires during the first two or three weeks of fieldwork. The editor will then discuss with each Household and Individual interviewer the errors found in the collection of data. It may sometimes be necessary to send an interviewer back to a respondent in order to correct some data error.

An important task of the editor will be to ensure that Individual interviewers do not omit births or misrecord dates of births in the birth history of the Individual Questionnaire. The editor will be checking for such errors by comparing information recorded in the Household Questionnaire (which Individual interviewers will have not seen) with information recorded in the Individual Questionnaire. If birth omission or misrecording of dates of birth is detected, disciplinary action will be taken by the supervisor.

H. SUPPLIES REQUIRED FOR FIELDWORK

Before leaving for the field, you should make sure you have adequate supplies for the day's work. These supplies include:

- A sufficient supply of questionnaires
- Interviewer's Assignment Sheets (Individual Interviewers only)
- Interviewer's Manual
- Identification documents
- A clipboard
- Blue ballpoint pens
- A briefcase or bag in which to carry the questionnaires
- Any personal items you will need to be comfortable, given the circumstances and the area in which you are working.

IV. GENERAL PROCEDURES FOR COMPLETING THE QUESTIONNAIRE

To collect the information needed by the DHS, you must understand how to ask each question, what information the question is attempting to collect and how to handle problems which might arise during the interview. You must also know how to correctly record the answers the respondent gives and how to follow special instructions in the questionnaire. This part of the training manual is designed to familiarize you with the DHS questionnaire.

A. ASKING THE QUESTIONS

It is very important that you ask each question exactly as it is written in the questionnaire. When asking a question, be sure to speak slowly and clearly so that the respondent will have no difficulty in hearing or understanding the question. At times you may need to repeat the question in order to be sure the respondent understands it. In those cases, do not paraphrase the question but repeat it exactly as it is written.

If, after you have repeated a question, the respondent still does not understand it, you may have to restate the question. Be very careful when you change the wording, however, that you do not alter the meaning of the original question.

In some cases, you may have to ask additional questions (we call this probing), to obtain a complete answer from a respondent. If you do this, you must be careful that your probes are "neutral" and that they do not suggest an answer to the respondent. Probing requires both tact and skill and it will be one of the most challenging aspects of your work as a DHS interviewer.

B. RECORDING THE RESPONSES

In the DHS, all interviewers will use pens with blue ink to complete all questionnaires. Supervisors and field editors will do all their work using pens with red ink. There are four types of questions in the DHS questionnaire: (1) questions which have precoded responses, (2) questions which do not have precoded responses, i.e., "open-ended" (3) filters, and (4) the calendar.

1. Questions with precoded responses

For some questions, we can predict the types of responses a respondent will give. The responses to these questions are listed in the questionnaire. To record a respondent's answer you merely circle the number (code) which corresponds to the reply. Make sure that each circle surrounds only a single number.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
107	Have you ever attended school?	YES ① NO 2	→114

In some cases, precoded responses will include an "other" category. The "other" code should be circled when the respondent's answer is different from any of the precoded responses listed for the question. When you circle the code "other" for a particular question you must always write the respondent's answer in the space provided. If you need more room, use the margins or the comments section at the end, and write, "see note in comments section."

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
238	During which times of the monthly cycle does a woman have the greatest chance of becoming pregnant?	DURING HER PERIOD 01 RIGHT AFTER HER PERIOD HAS ENDED 02 IN THE MIDDLE OF THE CYCLE 03 JUST BEFORE HER PERIOD BEGINS 04 OTHER <u>JUST BEFORE AND JUST AFTER HER</u> (SPECIFY) PERIOD ⑨6 DON'T KNOW 98	

2. Recording responses which are not precoded

The answers to some questions are not precoded; in entering the response for these questions you must write the respondent's answer in the space provided. Usually you will record a number or date in the boxes provided. There are two ways this is done:

(a) For some questions, you will have to choose which are the correct boxes in which to record the response, and only fill in one row.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP												
219	How old was (NAME) when he/she died?	DAYS 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table> MONTHS ② <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>9</td></tr><tr><td> </td><td> </td></tr></table> YEARS 3 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td> </td><td> </td></tr><tr><td> </td><td> </td></tr></table>					0	9							
0	9														

Whenever the boxes are preceded by codes, you are to fill in boxes for one row only. You must circle the code which identifies the row you have chosen, and then fill in the response for that row. If the respondent said her child died at the age of 9 months, you would circle Code '2' for MONTHS and write the response in the boxes next to MONTHS.

(b) For other questions, you fill in all the boxes provided.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP								
215	In what month and year was (NAME) born?	MONTH <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>0</td><td>2</td></tr><tr><td> </td><td> </td></tr></table> YEAR <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>8</td><td>8</td></tr><tr><td> </td><td> </td></tr></table>	0	2			8	8			
0	2										
8	8										

Whenever boxes are provided without having codes in front of them, you provide the information for all the rows. As in the example above for a child born in February 1988, you record the month and year.

Notice that if the response has fewer digits than the number of boxes provided, you fill in leading zeroes. For example, a response of "9" is recorded '09' in two boxes, or if three boxes had been provided, you would record '009'.

There are other cases, however, where you must write down the response in the respondent's own words. Try to record those answers exactly as they are given; if you need to shorten a lengthy description, be careful to keep the meaning accurate, and if necessary, write a note on the bottom or side of the page to explain.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
712	What is your occupation, that is, what kind of work do you mainly do?	SELL HOMEMADE FOOD AT THE MARKET <input type="checkbox"/>	

3. Marking Filters

Filters require you to look back to the answer to a previous response and then mark an X in the box. (See section D.2 for description of filters.)

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
113	CHECK 108: PRIMARY <input checked="" type="checkbox"/> SECONDARY OR HIGHER <input type="checkbox"/>		→ 115

4. The Calendar

The following information is recorded in the calendar located in the flip out section at the end of the Individual Questionnaire: births, pregnancies, contraceptive methods used, reasons for discontinuing any method, unions, and places of residence. The information is recorded for the period five years prior to the interview [since January 1992]. See Chapter VI. The Calendar for a full explanation of its use.

C. CORRECTING MISTAKES

It is very important that you record all answers neatly. For precoded responses, be sure that you circle the code for the correct response carefully. For open-ended responses, the reply should be written legibly so that it can be easily read. If you made a mistake in entering a respondent's answer or she changes her reply, be sure that you cross out the incorrect response and enter the right answer. Do not try to erase an answer. Just put two lines through the incorrect response. Remember that if there are two responses for a particular question, it may not be possible later, when the data are being coded, to determine which is the correct answer. Here is how to correct a mistake:

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
111	Are you currently attending school?	YES 1 NO 2	→113

D. FOLLOWING INSTRUCTIONS

1. Skip instructions

It is very important not to ask a respondent questions which are not relevant to her situation. For example, a woman who is not pregnant should not be asked for how many months she has been pregnant. In cases where a particular response makes subsequent questions irrelevant, an instruction is written in the questionnaire directing you to skip to the next appropriate question. It is important that you carefully follow skip instructions.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
502	Are you currently married or living with a man?	YES, CURRENTLY MARRIED 1 YES, LIVING WITH A MAN 2 NO, NOT IN UNION 3	→507

Notice that if you circled either Code 1 or 2 you would skip to Question 507. In this case, Question 503 is only asked of women who are not currently in a union.

2. Filters

In order to ensure the proper flow of the questionnaire you will sometimes be directed to check a respondent's answer to an earlier question, indicate what the response was by marking a box, and then follow various skip instructions. Questions of this type are called "filters"; they are used to prevent a respondent from being asked irrelevant, and perhaps embarrassing or upsetting, questions. In filter questions it is important that you follow the instructions which ask you to check back to an earlier question. Do not rely on your memory. Remember that you do not need to ask the respondent the same question a second time. Check back and mark an "X" in the appropriate box in the filter; then, follow the skip instructions.

Example:

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
604	CHECK 227: NOT PREGNANT OR UNSURE <input type="checkbox"/> PREGNANT <input checked="" type="checkbox"/>		→607

Note that all instructions for the interviewer are printed in all CAPITAL LETTERS whereas questions to be asked of the respondent are printed in small letters.

E. CHECKING COMPLETED QUESTIONNAIRES

After you have completed an interview, you must review the questionnaire by carefully checking the answer to each question. It is important to check that you have followed all the appropriate skip patterns and that you have not omitted any sections. If necessary, you may correct your handwriting or clarify answers. You should review the questionnaire BEFORE you leave the household, so that if you need to question the respondent further, she is likely to still be available. You should write any comments about the interview that you feel would clarify the answers you recorded or that would be of interest to your supervisor. If you have any doubts about how to record an answer, feel free to write a note on the questionnaire, and then check with your supervisor. She/he is there to help you.

V. HOUSEHOLD QUESTIONNAIRE

The purpose of the Household Questionnaire is to provide information on general characteristics of the population and their households. You will use it to identify women who are eligible (qualified) to be interviewed with the Individual Questionnaire.

The Household Questionnaire is a short schedule that includes a number of relatively simple questions. It is preceded by a cover page for entering data about the location of the household, the date and outcome of the interview.

A. IDENTIFICATION OF HOUSEHOLD ON THE COVER PAGE

Before you begin an interview, fill in the identification information in the box at the top of the cover page. The identification information is obtained from the sample household listing, and will be given to you by your supervisor. Write the name of the place in which you are working. Also write the name of the head of the household which you are to interview. Record the cluster number, the household number, and the code for the region in the boxes to the right of those lines. Then record whether the place is urban or rural by placing a '1' or '2' in the box to the right of the line marked: URBAN/RURAL. Then record whether this place is in a large or small city, a town, or in the countryside by placing a '1', '2', '3' or '4' in the box to the right of the line marked LARGE CITY/SMALL CITY/TOWN/COUNTRYSIDE. All this information will be given to you by your supervisor.

Since you will fill in the rest of the cover page after you have conducted the interview, it is described in Section C. under the heading RETURN TO COVER PAGE.

B. COMPLETING THE HOUSEHOLD QUESTIONNAIRE

In order to complete the Household Questionnaire you will need to find a suitable respondent. Any adult member of the household who is capable of providing information needed to fill in the Household Questionnaire can serve as the respondent. If an adult is not available, do not interview a young child, but instead, go on to the next household, and callback at the first household later. Once you have introduced yourself and explained the purpose of your visit, you are ready to begin the interview. Be sure to read the introductory sentence at the top of the page before continuing with the question in Column 2.

COLUMN 1: LINE NUMBER

This is the Line Number used to identify each person listed in the schedule.

COLUMN 2: MEMBERS AND VISITORS

The first step in completing the Household Questionnaire is to get a complete list of all persons who usually live in the household and any visitors. You will always list the head of the household first. In order to get a correct listing you will have to know what we mean by a member of the household, and what we mean by a visitor.

Member of the household:

A household is a person or group of persons that usually lives and eats together. This is not the same as a family. A family only includes people who are related; but a household includes any people who live together, whether they are related or unrelated. For example, three unrelated men who live and cook meals together would not be considered as one family, but they would be considered as one household.

A member of the household is any person who usually lives in the household.

Visitor:

A visitor is someone who is not a member of the household, but did sleep in the household the night before the day you are conducting the interview. So even though a visitor does not qualify to be a respondent for the Household Interview, if he or she slept in the household the previous night he or she should be listed on the schedule (and will qualify for the Individual Interview if they are a woman aged 15 to 49).

Sometimes it is not easy to know who to include in the household and who to leave out. Here are some examples:

- ▶ A woman lists her husband as head of the household, but he lives somewhere else. If he does not usually live in the household you are interviewing, and he did not sleep there the previous night, he should not be included in the listing.
- ▶ Sometimes people eat in one household and sleep in another. Consider the person to be a member of the household where he sleeps.
- ▶ A person living alone. He/she is a household.
- ▶ A servant. He is a member of the household if he usually lives in the household.

Anyone included in the household listing has to be either a usual resident of that household (Column 4 is YES) or has to have spent the previous night in the household (Column 5 is YES).

As your respondent lists the names, write them down, one on each row in Column (2) of the table. Begin with the head of the household, i.e. the person who is considered responsible for the household. This person may be appointed on the basis of age (older), sex (generally, but not necessarily, male), economic status (main provider), or some other reason. It is up to the respondent to define who is the head. There generally should not be a problem with this.

Since there is not much room on the form, you may not be able to write the full names for each person, so, if the last name is the same for several people, you can use ditto marks, e.g.:

- 01 Alfred Johnson
- 02 Miriam "
- 03 Sarah "

When you have written all the names, you want to be certain you have included everyone that should be listed before continuing with the rest of the questionnaire. To do this, ask the questions at the bottom of the page. If the answer to any is YES, add those persons' names to the list.

After you have a complete list of names, then start with the person listed on line 01 and move across the page, asking each appropriate question. When you have completed the information for the person on Line 01, move to the person listed on Line 02, etc.

COLUMN 3: RELATIONSHIP

Record the relationship of the person listed to the head of the household. Use the codes at the bottom of the page. Be particularly careful in doing this if the respondent is not the head of the household; make sure that you record the relationship of each person to the household head, not the relationship to the respondent. For example, if the respondent is the wife of the head of the household and she says that Sola is her brother, then Sola should be coded as OTHER RELATIVE not BROTHER OR SISTER, because Sola is a brother-in-law of the head of the household. If the head of the household is married to a woman who has a child from a previous marriage, that child's relationship to the head of the household should be coded ADOPTED/FOSTER/STEP CHILD.

COLUMNS 4 and 5: RESIDENCE

If the person usually lives in the household, circle '1' for YES in Column 4. We call someone who usually lives there a member of the household. Someone who does not usually live in the household, but did sleep there last night is called a visitor. If the person slept in the household the night prior to the time you are conducting the interview, circle '1' for YES in Column 5. A usual member of the household may or may not have slept in the household last night.

If after asking these residence questions you learn that the person does not usually live there (Column 4 is NO) and did not sleep there last night (Column 5 is also NO), you will have to delete this person from the listing because he is neither a member nor a visitor. For example, imagine you had listed Mary Worth as Line Number 04 and then learned that she does not usually live there, and she did not sleep there last night. You would draw a line through Row 04, canceling Mary from the listing. Then you would have to renumber the subsequent Line Numbers to make them correct (in Columns 1 and 15

change Line 05 to 04, 06 to 05, etc.). Whenever you make a correction to the Line Numbers, you must check Columns 12 and 14 and make appropriate corrections to the Line Numbers there also.

COLUMN 6: SEX

Simply circle '1' for males and '2' for females.

COLUMN 7: AGE

If you have difficulty in obtaining the ages of household members, use the methods described for Question 106 in the Individual Questionnaire to probe for the correct age. You are to obtain each person's age in completed years, that is, the age at the time of the last birthday.

COLUMNS 8-10: EDUCATION

Questions on education are only to be asked for people who are 6 years old or older. For anyone less than 6 years old, simply leave Columns (8), (9) and (10) blank.

For everyone aged 6 or older, ask the question in Column (8). Circle '1' for persons who have ever been to school, and '2' for those who never went to school. If the person never attended school, you will leave Columns (9) and (10) blank.

If the person has been to school, you will record their education in Column (9). Do this by using the codes at the bottom of the page. You will first record the level of schooling by recording the highest level they ever attended, even if they did not finish that level. Then you will record how many grades they completed at that level. For example, a man who completed all grades of primary school would be LEVEL 1, GRADE 06. A child who is currently in the third year of primary school would be LEVEL 1 and GRADE 02 (she has not yet completed the third year). A man who left during his first year of secondary school would be recorded as LEVEL 2 and GRADE 00 because the highest level he attended was secondary, but he did not finish any grade at that level. Now suppose the respondent knows his son went to primary school, but he does not know what grade he completed. You would record Level = 1 and Grade = 98 (DON'T KNOW). If the respondent does not even know the highest level his son attended, you would record Level = 8 (DON'T KNOW) and leave the grade blank.

Column (10) is for anyone aged less than 25 who has been to school. Ask whether he/she is still in school and circle '1' or '2' for YES or NO.

COLUMNS 11-14: SURVIVORSHIP AND RESIDENCE OF PARENTS

For all children who are less than 15 years old, we want to know if either of their own (natural) parents live in the dwelling. For everyone aged 15 years and more, Columns 11, 12, 13 and 14 will be left blank. First, ask if the child's natural mother is alive. By "natural" we mean the biological mother. In many cultures people consider other peoples' children that they are raising as their own, especially children of their husbands or sisters, etc. So you should be certain that the respondent understands that you are asking about the woman who gave birth to the child. Record whether or not the child's natural mother is still alive by circling '1' or '2' in Column 11. If the respondent does not know whether the natural mother is still alive, circle '8' for Don't Know. If you find in Column 11 that the mother is not alive or the respondent does not know (Column 11 is 2 or 8), you would skip to Column 13 (leave Column 12 blank) and ask about the father.

If the mother is still alive, we want to know if she lives in the household. Ask the question in Column 12 and if the mother does live in the household, ask who she is (she should be listed on the schedule if she lives in the household) and record her line number in Column 12. Her line number is printed in Column 1 and this will identify who the mother is. If the mother is not a member of the household, record '00' in Column 12. Follow the same procedure for the child's natural father (Columns 13 and 14) as you do for the natural mother.

Remember, if you found it necessary to cross someone off the Household Schedule, you are to renumber the Line Numbers and you will also have to make appropriate corrections to the Line Numbers here in Columns 12 and 14.

COLUMN 15: ELIGIBILITY FOR INDIVIDUAL INTERVIEW

Finally, look at Columns (6) and (7) and circle the line number in Column (15) for all women who are between 15 and 49 years of age (this includes those who are aged 15 and 49). These are "eligible women" (eligible means to qualify) and these women qualify for an interview using the Individual Questionnaire. Remember, the woman may be a usual resident of the household or only a visitor.

CONTINUATION SHEET

If you interview a household that has more than 14 members, mark the box at the bottom of the list of household members, take a fresh Household Questionnaire, fill in all the information on the cover page and write "CONTINUATION" on the top. Then on the second Household Questionnaire, change the Line Number '01' to '15' and if necessary, change line '02' to '16', etc. and then write the information for these household members. Return to the first Household Questionnaire to complete the interview.

OVERVIEW OF QUESTIONS 16-23: HOUSEHOLD AMENITIES

After asking the questions about each member of the household, you will ask Qs.16-23, which ask about the household as a whole. Questions 16-23 ask about amenities most frequently used by the household.

Q. 16: HOUSEHOLD DRINKING WATER

The purpose of this question is to assess the cleanliness of household drinking water. If drinking water is obtained from several sources, probe to determine the source from which the household obtains the majority of its drinking water. If the source varies by season, record the source used at the time of interview.

Q. 17: TIME TO GET WATER

This question is not asked if the respondent's source of drinking water is within the household compound; it is also not asked if the household collects rainwater, or buys bottled water. Include the time it takes to get to the source, wait to get water (if necessary), and get back to the house. This is by whatever means of transportation is generally used, whether the person who gets the water walks or rides a bicycle or motor vehicle. Convert the answer to minutes if necessary, and put zeroes in front; for example, "30 minutes" would be '030', and "one hour and a half" would be '090'. If the source of water is on the property, for example a stream that runs through the yard, you would record ON PREMISES.

Q. 18: TOILET FACILITIES

As with Qs.16-17, the purpose of this question is to obtain a measure of the sanitation level of the household, since water supply and toilet facilities are important for disease control and health improvement.

A FLUSH toilet is one in which water carries the waste down pipes, whether the water is piped into the toilet or poured in by buckets. Notice that you need to find out if the flush toilet is shared with any other households. A VIP is a ventilated improved pit latrine, which has been improved by the addition of some kind of construction (usually a pipe) that provides a route for fumes to escape, other than the hole itself. A traditional pit toilet is not ventilated. If the respondent answers that they use the bush, the fields, or a cleared corner of the compound record NO FACILITY/BUSH/FIELD.

QUESTION 19: HOUSEHOLD ITEMS

The answers to these questions on ownership of certain items will be used to determine a rough measure of the socioeconomic status of the household. Read out each item and circle the answer given after each item. If the woman reports that a household item such as a radio is broken, try to find out how long it has been broken, and if it will be fixed. If the item appears to be out of use only temporarily, circle '1' for YES. Otherwise, circle '2' for NO. Be sure to circle either a '1' or a '2' for each item. Do not leave any blank.

QUESTION 20: NUMBER OF ROOMS USED FOR SLEEPING

This information gives a measure of household crowding, as well as reflecting the socioeconomic condition of the household. A room in this case refers to a special area with a permanent partition which is used for sleeping. It is not necessarily the number of rooms in the household which are called "bedrooms", but rather how many rooms get used for sleeping on a regular basis.

QUESTION 21: FLOOR MATERIAL

This is not a question that you will have to ask the respondent since you will usually be able to see for yourself what kind of floor her house has. However, ask if you are not sure. If there is more than one kind of flooring material, record the main flooring material, the material that covers the largest amount of floor space.

QUESTION 22: OWNERSHIP OF TRANSPORTATION

As another rough measure of socioeconomic status, we also ask whether any member of the household owns a bicycle, motorcycle or car. Follow the same procedure as in Q.19 in asking about these items. A small child's bicycle is primarily a toy and should not be recorded here.

Q.23: TYPE OF SALT

The purpose of this question is to assess whether households use processed salt that has been fortified with iodine in cooking and/or at meals. Fortified salt prevents iodine deficiency. Iodine is an important micronutrient and a lack of it may lead to an enlarged thyroid gland in the neck known as goiter.

Different types of salt may be available and respondents may not know whether the salt they use is fortified. For these reasons it is important that you ask the respondent to show you the salt they use in cooking.

LOCAL SALT is salt from a salt bed or sea water; it is usually sold in blocks or lumps, the crystals are large, and it is usually grayish or brownish in color. PACKAGED SALT is commercially produced salt that has a manufacturer's label. If the salt has been fortified with iodine the packet will be marked to indicate that the salt is iodized or iodated. Where such a label exists, record PACKAGED SALT (IODIZED). If the manufacturer's label does not indicate that the salt is fortified record PACKAGED SALT (NOT IODIZED). SALT FOR ANIMALS indicates that the household uses the same salt as that normally fed to animals. OTHER includes, for example, salt that has no manufacturer's label because the storekeeper has repackaged the salt into smaller unlabelled packets for sale, or the household uses salt substitutes such as monosodium glutamate, fish sauce, or soya sauce.

C. RETURN TO COVER PAGE

After you have finished filling out the household schedule, go back to the cover page of the Household Questionnaire.

INTERVIEWER VISITS

AFTER you have contacted the household, you will need to write in the result of your visit. The spaces under (2) and (3) are for recording the results of any callbacks that you may have to make if you cannot contact the household on your first visit. Remember, you must make at least three different visits to try to obtain an interview with a household.

RESULT CODES

The result of your final visit to a household is recorded in two places: on the cover sheet of the Household Questionnaire and in Column 5 of the Supervisor's/Editor's Assignment Sheet.

You will make every attempt to contact and interview the household, but sometimes it may happen that you make three visits to the household (at different times) and are unable to conduct the interview. In this case, you record the result of the third visit.

The following are descriptions of the various result codes:

- ▶ Code 1 Completed. Enter this code when you have completed the household interview.
- ▶ Code 2 No household member at home or no competent respondent at home at time of visit. This code is to be used in cases where the dwelling is occupied, but no one is home. If no one is home when you visit, or if there is only a child or an adult member who is ill, deaf, or mentally incompetent, enter Code '2' as the result of the visit. Try to find out from a neighbor or from the children when a competent adult will be present and include this information in the visit record.
- ▶ Code 3 Entire household absent for extended period. This code is to be used **only** in cases in which no one is home and the neighbors say that no one will return for several days or weeks. In such cases, enter Code '3' as the result of that visit. Since the neighbors may be mistaken, you should make callbacks to the household to check that no one has returned. **In cases in which no one is home and you cannot find out whether they are gone for a few hours or a few weeks, enter Code '2'.**
- ▶ Code 4 Postponed. If you contact a household but for some reason it is not convenient for them to be interviewed then, schedule a callback interview and enter Code '4' on the cover sheet as a result code for that visit. If there is some extreme circumstance such that the interview is never conducted, you would enter Code '4' for the final result code.
- ▶ Code 5 Refused. The impression you make during your initial contacts with members of a household is very important. Be careful to introduce yourself and explain the purpose of the survey. Stress that the interview takes only a short amount of time and that the information will be confidential. If the individual with whom you first talk is unwilling to cooperate, ask to speak with another member of the household, (e.g., the household head).

Suggest that you can return at another time if it would be more convenient. If the individual still refuses to cooperate, enter Code '5' and report the problem to your supervisor.

- ▶ Code 6 Dwelling vacant or address not a dwelling. In some cases you may find that a structure number assigned to you is unoccupied, that is, it is empty with no furniture and is not being lived in. This is what we call 'vacant' and you should enter Code '6'. Other times you may find that a structure is not a residential unit. It is a shop, church, school, workshop, or some other type of facility which is not used as a living area. After making sure there are no residential units in back of or above the premises, enter Code '6' as the result for the visit. Be sure to report the situation to your supervisor.
- ▶ Code 7 Dwelling destroyed. If the dwelling burned down or was demolished in some other manner, enter Code '7'.
- ▶ Code 8 Dwelling not found. You should make a thorough search, asking people in the area if they are familiar with the address or the name of the household head. If you are still unable to locate the structure, you should enter Code '8' as the result for the visit to that household.
- ▶ Code 9 Other. There may be times that you cannot interview a household and the above categories do not describe the reason. Examples of cases that would fit in the 'Other' category would be if the entire cluster is flooded and inaccessible or if the household is quarantined because of a disease.

FINAL VISIT

Once you have paid your last visit to the household you will fill in the boxes under FINAL VISIT. The date on which you completed the Household interview is recorded in the DAY, MONTH, YEAR boxes. Write the day of the month in the DAY boxes. You need to convert the month into numbers. For this, January is '01', February is '02', March is '03', etc. Write ['97'] in the last two YEAR boxes. For example, the last day in October [1997] would be DAY 31, MONTH 10, YEAR [1997]. Write your assigned interviewer number in the boxes labelled NAME. Record '1' in the RESULT box for a completed interview. Add up the number of visits you made for the Household interview and enter the total by TOTAL NUMBER OF VISITS.

TOTALS IN HOUSEHOLD AND ELIGIBLE WOMEN

After you have completed the Household interview, you will record the total number of people listed in the schedule in the boxes labelled TOTAL IN HOUSEHOLD. You will also record (in the boxes labelled TOTAL ELIGIBLE WOMEN) the total number of women in the household who are eligible for interview with the Individual Questionnaire. And in the boxes labelled LINE NO. OF RESP. TO HOUSEHOLD SCHEDULE record the line number of the person who was your respondent.

BOTTOM OF COVER PAGE

At the bottom of the cover page, the field editor will write her name and the date on which she edited the questionnaire. Office editing and data entry will only be done in the main office, and space is provided for the office editor and data entry person to record their names.

PREPARE INDIVIDUAL QUESTIONNAIRE FOR EACH ELIGIBLE WOMAN

After completing a household interview, it is the responsibility of the household interviewer to allocate an Individual Questionnaire for each eligible respondent identified in the household. You will fill in the identification information on the cover sheet of an Individual Questionnaire for each eligible respondent identified in the Household Schedule. For example, after completing the household interview you have found that there are two women eligible for the Individual interview; you will take two Individual Questionnaires and fill in the identification information for each of the two women.

The identification information on the Individual Questionnaire is similar to the identification information on the Household Questionnaire. However, there are two additional items which you must record on the Individual cover page. You must write the eligible woman's name and the Line Number she was assigned in the Household Schedule (Column 1 of the Schedule). You will then return the completed Household Questionnaire with two Individual Questionnaires tucked inside to your supervisor.

When you return the completed Household Questionnaire, your supervisor will complete Columns 5-10 of the Supervisor's/Editor's Assignment Sheet. Columns 5-7 indicate the final result of the household interview. Your supervisor will then assign the eligible respondents to an Individual interviewer. Column 8 indicates the name of the Individual interviewer assigned to those women, and the date the assignment was given. All eligible respondents in a household will be assigned to a single Individual interviewer. Columns 9 and 10 indicate the line number and residency status of each eligible woman in the household (taken from Columns 1 and 4 of the Household Schedule).

VI. CALENDAR

A. DESCRIPTION OF THE CALENDAR

The calendar is located in the flip-out section at the end of the Individual Questionnaire. It is called a "calendar" because it is where you will record information about the timing of recent events in the respondent's life. The calendar is "recent" in that only events occurring in the 5 full calendar years preceding the current year are included.⁶ On the vertical axis of the calendar, there are 72 boxes (each box representing 1 month of time) divided into 6 sections (each representing 1 year or 12 months of time). On the horizontal axis are 4 columns, each concerning different but related experiences in the woman's life:

- Column 1: Live births, pregnancies, and contraceptive use
- Column 2: Reason for discontinuing contraceptive use
- Column 3: Marital unions
- Column 4: Residential mobility

For example, in Column 1 you will place coded information that describes the timing of the woman's recent experience with pregnancy, childbearing and contraceptive use. In this chapter, we discuss the methods by which you are going to fill in the calendar. But before we proceed, a couple of points need to be understood:

- (1) You may at this point ask "What and where are the questions that I am supposed to ask that will allow me to complete the calendar?" The answer to this question has two parts. First, the calendar is completed at the same time that the Individual Questionnaire is completed. Much of the information you need to complete the calendar is drawn directly from the responses recorded in the questionnaire. Second, the calendar will give you a visual "snapshot" of the woman's last five or six years of life. The calendar is built in a series of steps. At each step, you can and should determine whether or not a woman's response is consistent with previous responses and where to place the event in relation to other events. For example, if there have been 12 months between the birth of Baby A and the beginning of the pregnancy resulting in Baby B, you can easily see in the calendar that these 12 months need to be accounted for in terms of use or non-use of a contraceptive method. There are many ways to get this information and the calendar allows you to be innovative in obtaining the responses you need to completely fill in the calendar with the correct codes. Simply bear in mind that there may well be more than one correct way to "build" the calendar.
- (2) While interviewing procedures may be flexible, the method of recording information on the calendar is not. Only certain codes (shown to the left of the calendar) are acceptable for use in the calendar. You need to translate the woman's responses to codes. Only one code may appear in each box.

⁶The calendar should cover the survey year up to the last month of fieldwork, plus the full 5 years prior to the survey year. For surveys fielded in 1998, the calendar begins with the year 1993 [surveys fielded in 1998 begin the calendar with the year 1994].

COLUMN 1: LIVE BIRTHS, PREGNANCIES, AND CONTRACEPTIVE USE

For each live birth since January [1992] (Q.215), place a 'B' in the month of birth, and a 'P' in the 8 preceding months of gestation. This eight-month rule applies to all pregnancies ending in a live birth, irrespective of the actual length of the pregnancy. Write the baby's name to the left of the 'B'.

For current pregnancies (Q.227), place a 'P' in the month of interview and in each preceding month of pregnancy. The number of P's in the calendar should equal the number of completed months of pregnancy given in Q.228. For all pregnancies that ended in a non live birth (Qs.230-235), place a 'T' in the month of pregnancy termination and a 'P' in each month of pregnancy. (e.g. if a miscarriage occurred in the 4th month of pregnancy (i.e., after three completed months) in June [1994], then place one 'T' on June [1994] and one 'P' on each of the two preceding months, for a total of one T and two P's in the calendar.)

For contraceptive use since January [1992], write the code for each method used in the months it was used (Qs.324 and 325, or Q.321 if she or her partner is sterilized). If a method was used for an extensive period (at least 3 or 4 months), enter the code in the first and last months of use and connect them with a squiggly line. As a last step, months without any method use (and no pregnancy or live birth termination) should be coded '0' for no method (Qs.324 and 325, or Q.306 if the woman never used a method).

Every month in Column 1 must be accounted for, i.e., filled with a code.

COLUMN 2: REASON FOR DISCONTINUING CONTRACEPTIVE USE

For every discontinuation of a method, the reason for discontinuation is recorded in Column 2 in the last month the method was used (Q.325). For example, if Column 1 indicates discontinuation of pill use during April of [1995], then you should identify and record the reason for the discontinuation in Column 2 in the same month, April [1995].

COLUMN 3: UNIONS

All months in union (Q.514) are coded 'X' in Column 3. If a union lasts for an extensive period, mark an 'X' in the first and last months of a union (or the first month and the month of survey if the respondent has been in one union for the entire calendar period) and connect them with a squiggly line to show that the union extended over the entire period. As a last step, all of the months during which the respondent was not in a union should be coded '0'. All months in Column 3 must be coded.

COLUMN 4: RESIDENTIAL MOBILITY

The recent history of a respondent's place(s) of residence is recorded in Column 4 (Qs.727 and 728). The first step is to identify and code the month during which a move took place. An 'X' is placed in the month of moving for each move that took place. In the month after the 'X', place the code of the new residence and in the month before the 'X' place the code of the old residence. All residences can be classified as '1' city, '2' town, or '3' countryside. Between the first and last months of residence in a single place, draw a squiggly line to connect the residence codes to indicate continuous residence in that place (i.e., between 1 and 1, 2 and 2, or 3 and 3). Do the same for all moves and all places of residence during the calendar period. All months in Column 4 should be filled in. (Note: If the woman reports to have

been at the same residence since January [1992], simply place the appropriate residence code in the month of the survey and in January [1992] and connect the two codes with a squiggly line.)

B. GENERAL COMMENTS

- ▶ Only one code is entered in any one box (month) of the calendar.
- ▶ In Columns 1, 3, and 4 all months should be filled in.
- ▶ Column 2 records a reason for each interruption of method use that occurs in Column 1. The code is entered in the last month of use.
- ▶ Each squiggly line must have both endpoints defined by the same code.
- ▶ To label the births, write the baby's name to the left of the 'B'. This will make your work easier and more accurate because birth dates serve as your best reference points.
- ▶ Always refer to information which is already in the calendar to help the respondent recall dates. And remember, the calendar is built in steps; each entry should be consistent with previous entries.

C. ILLUSTRATIVE CASES

CASE #1

In Case #1, we will complete Column 1 of the calendar for three situations of increasing complexity as well as completing Columns 2-4. We assume that the respondent knows the dates of birth of her children and also the dates during which she used contraception.

To complete Column 1, three steps are necessary: 1) transfer the dates of live births from the birth history to the calendar, 2) record the months of pregnancy (P), for pregnancies terminating in live births (B) and non-live births (T), 3) record the months of contraceptive use and non-use.

Case #1 (Situation 1): two live births, no contraceptive use.

In this example, the respondent had two births since January [1992]. The first was Alfredo, born on September 18, [1993] and the second was Bernardo, born on February 25, [1995]. The woman responded that she has never used a contraceptive method. She was interviewed in [June of 1997].

The first panel shows the first step in recording these events. The dates of birth of the children are obtained from the birth history, Q.215. The instructions for filling out Column 1 of the calendar are given in Q.226. Record a 'B' in each month of birth and write the name of the corresponding children to the left of the 'B'.

In the second panel (Step 2) you record a 'P' in each of the eight months prior to each live birth. For Alfredo, the pregnancy extends from January [1993] to August [1993], while for Bernardo it is from June [1994] to January [1995]. The respondent has not had any miscarriages, abortions, or stillbirths.

In this case, Step 3 is very simple. There is no contraceptive use to consider so that you fill the rest of the boxes in Column 1 with '0's representing non-use.

Step 1

WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN CALENDAR	
EVENT	DATE		MONTHS	CODE
Alfredo	Sept. 18, 1993	1	SEP 1993	B
Bernardo	Feb. 25, 1995	1	FEB 1995	B

Step 2

WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN CALENDAR	
EVENT	DATE		MONTHS	CODE
Pregnant	Jan. - Sept. 1993	8	JAN - AUG 1993	P
Alfredo	Sept. 18, 1993	1	SEP 1993	B
Pregnant	June 1994 - Feb. 25, 1995	8	JUN 1994 - JAN 1995	P
Bernardo	Feb. 25, 1995	1	FEB 1995	B

Step 3

WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN CALENDAR	
EVENT	DATE		MONTHS	CODE
Non-use	Jan. 1992 - Jan. 1993	12	JAN - DEC 1992	0
Pregnant	Jan. 1993 - Sept. 1993	8	JAN - AUG 1993	P
Alfredo	Sept. 18, 1993	1	SEP 1993	B
Non-use	Sept. 18, 1993 - June 1994	8	OCT 1993 - MAY 1994	0
Pregnant	June 1994 - Feb. 25, 1995	8	JUN 1994 - JAN 1995	P
Bernardo	Feb. 25, 1995	1	FEB 1995	B
Non-use	Feb. 25, 1995 - June 1997	28	MAR 1995 - JUN 1997	0

CASE #1 (Situation 1), COLUMN 1

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____

(SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____

(SPECIFY)

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

			1	2	3	4			
	12 DEC	01							01 DEC
	11 NOV	02							02 NOV
	10 OCT	03							03 OCT
	09 SEP	04							04 SEP
1	08 AUG	05							05 AUG 1
9	07 JUL	06							06 JUL 9
9	06 JUN	07							07 JUN 9
7	05 MAY	08							08 MAY 7
*	04 APR	09							09 APR *
	03 MAR	10							10 MAR
	02 FEB	11							11 FEB
	01 JAN	12							12 JAN
<hr/>									
	12 DEC	13							13 DEC
	11 NOV	14							14 NOV
	10 OCT	15							15 OCT
	09 SEP	16							16 SEP
1	08 AUG	17							17 AUG 1
9	07 JUL	18							18 JUL 9
9	06 JUN	19							19 JUN 9
6	05 MAY	20							20 MAY 6
	04 APR	21							21 APR
	03 MAR	22							22 MAR
	02 FEB	23							23 FEB
	01 JAN	24							24 JAN
<hr/>									
	12 DEC	25							25 DEC
	11 NOV	26							26 NOV
	10 OCT	27							27 OCT
	09 SEP	28							28 SEP
1	08 AUG	29							29 AUG 1
9	07 JUL	30							30 JUL 9
9	06 JUN	31							31 JUN 9
5	05 MAY	32							32 MAY 5
	04 APR	33							33 APR
	03 MAR	34							34 MAR
	02 FEB	35							35 FEB
	01 JAN	36							36 JAN
<hr/>									
	12 DEC	37							37 DEC
	11 NOV	38							38 NOV
	10 OCT	39							39 OCT
	09 SEP	40							40 SEP
1	08 AUG	41							41 AUG 1
9	07 JUL	42							42 JUL 9
9	06 JUN	43							43 JUN 9
4	05 MAY	44							44 MAY 4
	04 APR	45							45 APR
	03 MAR	46							46 MAR
	02 FEB	47							47 FEB
	01 JAN	48							48 JAN
<hr/>									
	12 DEC	49							49 DEC
	11 NOV	50							50 NOV
	10 OCT	51							51 OCT
	09 SEP	52							52 SEP
1	08 AUG	53							53 AUG 1
9	07 JUL	54							54 JUL 9
9	06 JUN	55							55 JUN 9
3	05 MAY	56							56 MAY 3
	04 APR	57							57 APR
	03 MAR	58							58 MAR
	02 FEB	59							59 FEB
	01 JAN	60							60 JAN
<hr/>									
	12 DEC	61							61 DEC
	11 NOV	62							62 NOV
	10 OCT	63							63 OCT
	09 SEP	64							64 SEP
1	08 AUG	65							65 AUG 1
9	07 JUL	66							66 JUL 9
9	06 JUN	67							67 JUN 9
2	05 MAY	68							68 MAY 2
	04 APR	69							69 APR
	03 MAR	70							70 MAR
	02 FEB	71							71 FEB
	01 JAN	72							72 JAN

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

Bernardo

Alfredo

Case #1 (Situation 2): two live births, one contraceptive method used at two different times.

This is simply an extension of Situation 1. The only difference is that, here, the woman has used a contraceptive method at two different points in time,(an IUD, code = 2), before becoming pregnant with Alfredo and after giving birth to Bernardo. The first two steps of Situation 2 are exactly the same as in Situation 1. We thus proceed to step three.

After having probed about the timing of the woman's IUD use relative to Alfredo's birth date, the interviewer has determined that an IUD was first inserted during March of [1991] and was later removed during October of [1992]. Since the calendar begins on January of [1992], only 10 months (January to October [1992]) of her IUD use are recorded. After Bernardo was born, the woman had an IUD inserted again. The woman reported that the IUD insertion was done less than 1 month after delivery and that the IUD is still in place.

Step 3

EVENT	WOMAN'S RESPONSE		NUMBER OF MONTHS	ENTRY IN CALENDAR	
	DATE			MONTHS	CODE
IUD	March 16, 1991 - Oct. 20, 1992		10	JAN - OCT 1992	2
Non-use	Nov. 1992 - Jan. 1993		2	NOV - DEC 1992	0
Pregnant	Jan. - Sept. 1993		8	JAN - AUG 1993	P
Alfredo	Sept. 18, 1993		1	SEP 1993	B
Non-use	Sept. 18, 1993 - June 1994		8	OCT 1993 - MAY 1994	0
Pregnant	June 1994 - Feb. 25, 1995		8	JUN 1994 - JAN 1995	P
Bernardo	Feb. 25, 1995		1	FEB 1995	B
Non-use	Feb. 25, - March 23, 1995		0	--	--
IUD	March 24, 1995 - June 1997		28	MAR 1995 - JUN 1997	2

CASE #1 (Situation 2), COLUMN 1

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____

(SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____

(SPECIFY)

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4		
	12 DEC	01				01	DEC
	11 NOV	02				02	NOV
	10 OCT	03				03	OCT
	09 SEP	04				04	SEP
1	08 AUG	05				05	AUG
9	07 JUL	06				06	JUL
9	06 JUN	07	2			07	JUN
7	05 MAY	08				08	MAY
*	04 APR	09				09	APR
	03 MAR	10				10	MAR
	02 FEB	11				11	FEB
	01 JAN	12				12	JAN
<hr/>							
	12 DEC	13				13	DEC
	11 NOV	14				14	NOV
	10 OCT	15				15	OCT
	09 SEP	16				16	SEP
1	08 AUG	17				17	AUG
9	07 JUL	18				18	JUL
9	06 JUN	19				19	JUN
6	05 MAY	20				20	MAY
	04 APR	21				21	APR
	03 MAR	22				22	MAR
	02 FEB	23				23	FEB
	01 JAN	24				24	JAN
<hr/>							
	12 DEC	25				25	DEC
	11 NOV	26				26	NOV
	10 OCT	27				27	OCT
	09 SEP	28				28	SEP
1	08 AUG	29				29	AUG
9	07 JUL	30				30	JUL
9	06 JUN	31				31	JUN
5	05 MAY	32				32	MAY
	04 APR	33				33	APR
	03 MAR	34				34	MAR
	02 FEB	35				35	FEB
	01 JAN	36				36	JAN
<hr/>							
	12 DEC	37				37	DEC
	11 NOV	38				38	NOV
	10 OCT	39				39	OCT
	09 SEP	40				40	SEP
1	08 AUG	41				41	AUG
9	07 JUL	42				42	JUL
9	06 JUN	43				43	JUN
4	05 MAY	44				44	MAY
	04 APR	45				45	APR
	03 MAR	46				46	MAR
	02 FEB	47				47	FEB
	01 JAN	48				48	JAN
<hr/>							
	12 DEC	49				49	DEC
	11 NOV	50				50	NOV
	10 OCT	51				51	OCT
	09 SEP	52				52	SEP
1	08 AUG	53				53	AUG
9	07 JUL	54				54	JUL
9	06 JUN	55				55	JUN
3	05 MAY	56				56	MAY
	04 APR	57				57	APR
	03 MAR	58				58	MAR
	02 FEB	59				59	FEB
	01 JAN	60				60	JAN
<hr/>							
	12 DEC	61				61	DEC
	11 NOV	62				62	NOV
	10 OCT	63				63	OCT
	09 SEP	64				64	SEP
1	08 AUG	65				65	AUG
9	07 JUL	66				66	JUL
9	06 JUN	67				67	JUN
2	05 MAY	68				68	MAY
	04 APR	69				69	APR
	03 MAR	70				70	MAR
	02 FEB	71				71	FEB
	01 JAN	72				72	JAN

Bernardo

Alfredo

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

Case #1 (Situation 3): two live births, 4 contraceptive methods used.

In this example, four different types of contraception were reported during the calendar period. She reported having used the pill (code = 1) from March [1991] until August [1992]. As in the previous situation, contraceptive use before the month of January [1992] is not recorded on the calendar; so, fill boxes representing January to August [1992] with '1's. Immediately after this, she reported having used a condom (code = 6) for 2 months before stopping because she wanted to get pregnant. Two '6's are placed in boxes representing September and October [1992] and then two '0's are placed in the boxes November and December to indicate 2 months of non-use before becoming pregnant in January of [1993].

After the birth of Alfredo, the woman reports that she did not use contraception for four months. Four boxes (from October [1993] to January [1994]) are coded with '0's (for non-use) in Column 1. She then started to use injections (code = 3). The women said that she forgot to get the second injection and consequently became pregnant. Since one injection is effective for 3 months, the interviewer fills in 3 boxes (February to April [1994]) with '3's and the following month with a '0'. Less than one month after the birth of Bernardo, the woman began using an IUD and has used it ever since. Therefore all of the boxes, beginning in the month following Bernardo's birth, up to the month of survey (March [1995] to June [1997]) are assigned to IUD use (code = 2).

Step 3

EVENT	WOMAN'S RESPONSE	NUMBER OF MONTHS	ENTRY IN CALENDAR	
	DATE		MONTHS	CODE
Pill	March 1991 - Aug. 1992	8	JAN - AUG 1992	1
Condom	Sep. - Oct. 1992	2	SEP - OCT 1992	6
Non-use	Oct. - Dec. 1992	2	NOV - DEC 1992	0
Pregnant	Jan. - Sept. 1993	8	JAN - AUG 1993	P
Alfredo	Sept. 18, 1993	1	SEP 1993	B
Non-use	Oct. 1993 - Jan. 1994	4	OCT 1993 - JAN 1994	0
Injection	Feb. - April 1994	3	FEB - APR 1994	3
Non-use	May 1994	1	MAY 1994	0
Pregnant	June 1994 - Feb. 25, 1995	8	JUN 1994 - JAN 1995	P
Bernardo	Feb. 25, 1995	1	FEB 1995	B
Non-use	Feb. 25, - March 23, 1995	0	--	--
IUD	March 23, 1995 - June 1997	28	MAR 1995 - JUN 1997	2

CASE #1 (Situation 3), COLUMN 1

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____
 (SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____
 (SPECIFY)
- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

			1	2	3	4		
	12 DEC	01					01	DEC
	11 NOV	02					02	NOV
	10 OCT	03					03	OCT
	09 SEP	04					04	SEP
1	08 AUG	05					05	AUG
9	07 JUL	06					06	JUL
9	06 JUN	07		2			07	JUN
7	05 MAY	08					08	MAY
*	04 APR	09					09	APR
	03 MAR	10					10	MAR
	02 FEB	11					11	FEB
	01 JAN	12					12	JAN
<hr/>								
	12 DEC	13					13	DEC
	11 NOV	14					14	NOV
	10 OCT	15					15	OCT
	09 SEP	16					16	SEP
1	08 AUG	17					17	AUG
9	07 JUL	18					18	JUL
9	06 JUN	19					19	JUN
6	05 MAY	20					20	MAY
	04 APR	21					21	APR
	03 MAR	22					22	MAR
	02 FEB	23					23	FEB
	01 JAN	24					24	JAN
<hr/>								
	12 DEC	25					25	DEC
	11 NOV	26					26	NOV
	10 OCT	27					27	OCT
	09 SEP	28					28	SEP
1	08 AUG	29					29	AUG
9	07 JUL	30					30	JUL
9	06 JUN	31					31	JUN
5	05 MAY	32					32	MAY
	04 APR	33					33	APR
	03 MAR	34					34	MAR
	02 FEB	35					35	FEB
	01 JAN	36					36	JAN
<hr/>								
	12 DEC	37					37	DEC
	11 NOV	38					38	NOV
	10 OCT	39					39	OCT
	09 SEP	40					40	SEP
1	08 AUG	41					41	AUG
9	07 JUL	42					42	JUL
9	06 JUN	43					43	JUN
4	05 MAY	44					44	MAY
	04 APR	45					45	APR
	03 MAR	46					46	MAR
	02 FEB	47					47	FEB
	01 JAN	48					48	JAN
<hr/>								
	12 DEC	49					49	DEC
	11 NOV	50					50	NOV
	10 OCT	51					51	OCT
	09 SEP	52					52	SEP
1	08 AUG	53					53	AUG
9	07 JUL	54					54	JUL
9	06 JUN	55					55	JUN
3	05 MAY	56					56	MAY
	04 APR	57					57	APR
	03 MAR	58					58	MAR
	02 FEB	59					59	FEB
	01 JAN	60					60	JAN
<hr/>								
	12 DEC	61					61	DEC
	11 NOV	62					62	NOV
	10 OCT	63					63	OCT
	09 SEP	64					64	SEP
1	08 AUG	65					65	AUG
9	07 JUL	66					66	JUL
9	06 JUN	67					67	JUN
2	05 MAY	68					68	MAY
	04 APR	69					69	APR
	03 MAR	70					70	MAR
	02 FEB	71					71	FEB
	01 JAN	72					72	JAN

Bernardo

Alfredo

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

Column 1 should now be completed. We now proceed to expand upon Situation 1 to include information that will allow us to fill in Columns 2 through 4. Refer to the completed calendar on the facing page.

To complete Column 2, the interviewer needs to know the reasons for discontinuing each of the methods except the IUD, which is still in use. The interviewer finds out that the woman stopped pill use because of "bad headaches" (code = 6 for side effects), stopped using condom to get pregnant (code = 2), and discontinued use of injections because she simply forgot (code= X for "other"). These codes are placed in the box corresponding to the last month of contraceptive use.

Column 3 is filled in based on the union status of the woman since January [1992]. Her responses indicate that she has been married to her current husband continuously since January of [1985]. An 'X' is placed in the month January [1992] and in the month of survey [June 1997], and a squiggly line connects the 'X's.

The woman says that since her marriage she has lived continuously in the same house (in a small town) where she is being interviewed. In Column 4, the boxes for January [1992] and June [1997] are coded with a '2' and connected with a squiggly line.

CASE #1 (Situation 3), COLUMNS 2 - 4

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____

(SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER FORGOT TO RENEW
- Z DON'T KNOW

(SPECIFY)

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4				
	12 DEC	01				01	DEC		
	11 NOV	02				02	NOV		
	10 OCT	03				03	OCT		
	09 SEP	04				04	SEP		
1	08 AUG	05				05	AUG	1	
9	07 JUL	06				06	JUL	9	
9	06 JUN	07	2		X	2	07	JUN	9
7	05 MAY	08					08	MAY	7
*	04 APR	09					09	APR	*
	03 MAR	10					10	MAR	
	02 FEB	11					11	FEB	
	01 JAN	12					12	JAN	
<hr/>									
	12 DEC	13				13	DEC		
	11 NOV	14				14	NOV		
	10 OCT	15				15	OCT		
	09 SEP	16				16	SEP		
1	08 AUG	17				17	AUG	1	
9	07 JUL	18				18	JUL	9	
9	06 JUN	19				19	JUN	9	
6	05 MAY	20				20	MAY	6	
	04 APR	21				21	APR		
	03 MAR	22				22	MAR		
	02 FEB	23				23	FEB		
	01 JAN	24				24	JAN		
<hr/>									
	12 DEC	25				25	DEC		
	11 NOV	26				26	NOV		
	10 OCT	27				27	OCT		
	09 SEP	28				28	SEP		
1	08 AUG	29				29	AUG	1	
9	07 JUL	30				30	JUL	9	
9	06 JUN	31				31	JUN	9	
5	05 MAY	32				32	MAY	5	
	04 APR	33				33	APR		
	03 MAR	34	2			34	MAR		
	02 FEB	35	P			35	FEB		
	01 JAN	36	P			36	JAN		
<hr/>									
	12 DEC	37				37	DEC		
	11 NOV	38				38	NOV		
	10 OCT	39				39	OCT		
	09 SEP	40				40	SEP		
1	08 AUG	41				41	AUG	1	
9	07 JUL	42				42	JUL	9	
9	06 JUN	43				43	JUN	9	
4	05 MAY	44				44	MAY	4	
	04 APR	45			X	45	APR		
	03 MAR	46				46	MAR		
	02 FEB	47				47	FEB		
	01 JAN	48				48	JAN		
<hr/>									
	12 DEC	49				49	DEC		
	11 NOV	50				50	NOV		
	10 OCT	51				51	OCT		
	09 SEP	52				52	SEP		
1	08 AUG	53				53	AUG	1	
9	07 JUL	54				54	JUL	9	
9	06 JUN	55				55	JUN	9	
3	05 MAY	56				56	MAY	3	
	04 APR	57				57	APR		
	03 MAR	58				58	MAR		
	02 FEB	59				59	FEB		
	01 JAN	60				60	JAN		
<hr/>									
	12 DEC	61				61	DEC		
	11 NOV	62				62	NOV		
	10 OCT	63		2		63	OCT		
	09 SEP	64				64	SEP		
1	08 AUG	65		6		65	AUG	1	
9	07 JUL	66				66	JUL	9	
9	06 JUN	67				67	JUN	9	
2	05 MAY	68				68	MAY	2	
	04 APR	69				69	APR		
	03 MAR	70				70	MAR		
	02 FEB	71				71	FEB		
	01 JAN	72	1		X	2	72	JAN	

Bernardo

INJECTION

Alfredo

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

The following six model calendars (Cases #2 - #7) illustrate a variety of other possible histories. They are intended to give you some additional practice in the use of the calendar, from Column 1 to Column 4.

CASE #2

The respondent was interviewed in [Oct 1997]. During the period covered by the calendar, she had one birth (Carlos), occurring in September [1995] and one other pregnancy that miscarried after three months, in July [1993]. She is currently using the pill, which she began using 5 months after the birth of Carlos.

The pregnancy that led to Carlos' birth was planned (code = 2 in Column 2), occurring 5 months after she interrupted an earlier episode of pill use. Her previous pregnancy occurred accidentally while her partner was using the condom (code = 1 in Column 2). Her partner had been using the condom since she was first married in January [1993]. Immediately after this pregnancy ended, she began using the pill. Prior to her marriage she had not been sexually active and was not using any method.

She lives in a city, having moved there in August [1995] from another part of that city, where she had moved at the time of her marriage. Prior to her marriage she had lived in a town.

CASE #2

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____
 (SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____
 (SPECIFY)
- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

* For fieldwork beginning in 1998, 1999, or 2000,
 the years should be adjusted.

		1	2	3	4			
	12 DEC	01				01	DEC	
	11 NOV	02				02	NOV	
	10 OCT	03				03	OCT	
	09 SEP	04			X	1	04 SEP	
1	08 AUG	05					05 AUG	1
9	07 JUL	06					06 JUL	9
9	06 JUN	07					07 JUN	9
7	05 MAY	08					08 MAY	7
*	04 APR	09					09 APR	*
	03 MAR	10					10 MAR	
	02 FEB	11					11 FEB	
	01 JAN	12					12 JAN	
<hr/>								
	12 DEC	13				13	DEC	
	11 NOV	14				14	NOV	
	10 OCT	15				15	OCT	
	09 SEP	16				16	SEP	
1	08 AUG	17				17	AUG	1
9	07 JUL	18				18	JUL	9
9	06 JUN	19				19	JUN	9
6	05 MAY	20				20	MAY	6
	04 APR	21				21	APR	
	03 MAR	22				22	MAR	
	02 FEB	23				23	FEB	
	01 JAN	24				24	JAN	
<hr/>								
	12 DEC	25				25	DEC	
	11 NOV	26				26	NOV	
	10 OCT	27				27	OCT	
	09 SEP	28				28	SEP	
1	08 AUG	29				29	AUG	1
9	07 JUL	30				30	JUL	9
9	06 JUN	31				31	JUN	9
5	05 MAY	32				32	MAY	5
	04 APR	33				33	APR	
	03 MAR	34				34	MAR	
	02 FEB	35				35	FEB	
	01 JAN	36				36	JAN	
<hr/>								
	12 DEC	37				37	DEC	
	11 NOV	38				38	NOV	
	10 OCT	39				39	OCT	
	09 SEP	40				40	SEP	
1	08 AUG	41				41	AUG	1
9	07 JUL	42				42	JUL	9
9	06 JUN	43				43	JUN	9
4	05 MAY	44				44	MAY	4
	04 APR	45				45	APR	
	03 MAR	46				46	MAR	
	02 FEB	47				47	FEB	
	01 JAN	48				48	JAN	
<hr/>								
	12 DEC	49				49	DEC	
	11 NOV	50				50	NOV	
	10 OCT	51				51	OCT	
	09 SEP	52				52	SEP	
1	08 AUG	53				53	AUG	1
9	07 JUL	54				54	JUL	9
9	06 JUN	55				55	JUN	9
3	05 MAY	56				56	MAY	3
	04 APR	57				57	APR	
	03 MAR	58				58	MAR	
	02 FEB	59				59	FEB	
	01 JAN	60				60	JAN	
<hr/>								
	12 DEC	61				61	DEC	
	11 NOV	62				62	NOV	
	10 OCT	63				63	OCT	
	09 SEP	64				64	SEP	
1	08 AUG	65				65	AUG	1
9	07 JUL	66				66	JUL	9
9	06 JUN	67				67	JUN	9
2	05 MAY	68				68	MAY	2
	04 APR	69				69	APR	
	03 MAR	70				70	MAR	
	02 FEB	71				71	FEB	
	01 JAN	72				72	JAN	

Carlos

CASE #3

The respondent was interviewed in [Oct 1997]. The woman's only birth in this period (Wambui) occurred in March [1996], following an accidental pregnancy while using withdrawal, a method she had been using for one year. She is currently pregnant, having failed with the use of withdrawal two months earlier. She and her husband had been using withdrawal since the birth of Wambui. She also had a miscarriage in December [1993] after 4 completed months of pregnancy. That pregnancy began several months after her marriage, while no method was being used. After that miscarriage, she had not used any method for 6 months before beginning to use withdrawal.

She was married for the first time in May [1993] and has remained in the same union to the present time. She had not used any method of contraception before marriage. She lives in a city to which she moved at the time of her marriage, after having lived in a town.

CASE #3

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____

(SPECIFY)

Wambui

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____

(SPECIFY)

- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4				
	12 DEC	01				01	DEC		
	11 NOV	02				02	NOV		
	10 OCT	03				03	OCT		
	09 SEP	04	P		X	I	04	SEP	
1	08 AUG	05	A	I			05	AUG	1
9	07 JUL	06					06	JUL	9
9	06 JUN	07					07	JUN	9
7	05 MAY	08					08	MAY	7
*	04 APR	09					09	APR	*
	03 MAR	10					10	MAR	
	02 FEB	11					11	FEB	
	01 JAN	12					12	JAN	
	12 DEC	13					13	DEC	
	11 NOV	14					14	NOV	
	10 OCT	15					15	OCT	
	09 SEP	16					16	SEP	
1	08 AUG	17					17	AUG	1
9	07 JUL	18					18	JUL	9
9	06 JUN	19					19	JUN	9
6	05 MAY	20					20	MAY	6
	04 APR	21	A				21	APR	
	03 MAR	22	B				22	MAR	
	02 FEB	23	P				23	FEB	
	01 JAN	24					24	JAN	
	12 DEC	25					25	DEC	
	11 NOV	26					26	NOV	
	10 OCT	27					27	OCT	
	09 SEP	28					28	SEP	
1	08 AUG	29					29	AUG	1
9	07 JUL	30	P				30	JUL	9
9	06 JUN	31	A	I			31	JUN	9
5	05 MAY	32					32	MAY	5
	04 APR	33					33	APR	
	03 MAR	34					34	MAR	
	02 FEB	35					35	FEB	
	01 JAN	36					36	JAN	
	12 DEC	37					37	DEC	
	11 NOV	38					38	NOV	
	10 OCT	39					39	OCT	
	09 SEP	40					40	SEP	
1	08 AUG	41					41	AUG	1
9	07 JUL	42	A				42	JUL	9
9	06 JUN	43	O				43	JUN	9
4	05 MAY	44					44	MAY	4
	04 APR	45					45	APR	
	03 MAR	46					46	MAR	
	02 FEB	47					47	FEB	
	01 JAN	48	O				48	JAN	
	12 DEC	49	T				49	DEC	
	11 NOV	50	P				50	NOV	
	10 OCT	51	P				51	OCT	
	09 SEP	52	P				52	SEP	
1	08 AUG	53	O				53	AUG	1
9	07 JUL	54					54	JUL	9
9	06 JUN	55					55	JUN	9
3	05 MAY	56			X	X	56	MAY	3
	04 APR	57			O	2	57	APR	
	03 MAR	58					58	MAR	
	02 FEB	59					59	FEB	
	01 JAN	60					60	JAN	
	12 DEC	61					61	DEC	
	11 NOV	62					62	NOV	
	10 OCT	63					63	OCT	
	09 SEP	64					64	SEP	
1	08 AUG	65					65	AUG	1
9	07 JUL	66					66	JUL	9
9	06 JUN	67					67	JUN	9
2	05 MAY	68					68	MAY	2
	04 APR	69					69	APR	
	03 MAR	70					70	MAR	
	02 FEB	71					71	FEB	
	01 JAN	72	O		O	2	72	JAN	

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

CASE #4

The respondent was interviewed in [Oct 1997]. She reported two births in the reference period, the most recent (Fatima) in July [1995], and the earlier one (Hassan) in November [1992]. At the time of Fatima's birth, she was surgically sterilized. Fatima was conceived after 4 months of trying to become pregnant. Before this she had used the pill, which she had started using 3 months after the birth of Hassan. Before becoming pregnant with Hassan, she had never used a contraceptive method.

She was married for the first time in May [1992]. (Note: this was during her third month of pregnancy. Ask the respondent if this is indeed correct.) Her marriage dissolved in December [1996], and she has not been in any union since then.

She now lives in a town, having moved there from another town at the time her marriage dissolved. The only other previous move was during her childhood around [1973].

CASE #4

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____
 (SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____
 (SPECIFY)
- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4				
	12 DEC	01				01	DEC		
	11 NOV	02				02	NOV		
	10 OCT	03	7		0	2	03	OCT	
	09 SEP	04					04	SEP	
1	08 AUG	05					05	AUG	1
9	07 JUL	06					06	JUL	9
9	06 JUN	07					07	JUN	9
7	05 MAY	08					08	MAY	7
*	04 APR	09					09	APR	*
	03 MAR	10					10	MAR	
	02 FEB	11					11	FEB	
	01 JAN	12				0	2	12	JAN
<hr/>									
	12 DEC	13			X	X	13	DEC	
	11 NOV	14					14	NOV	
	10 OCT	15					15	OCT	
	09 SEP	16					16	SEP	
1	08 AUG	17					17	AUG	1
9	07 JUL	18					18	JUL	9
9	06 JUN	19					19	JUN	9
6	05 MAY	20					20	MAY	6
	04 APR	21					21	APR	
	03 MAR	22					22	MAR	
	02 FEB	23					23	FEB	
	01 JAN	24					24	JAN	
<hr/>									
	12 DEC	25					25	DEC	
	11 NOV	26					26	NOV	
	10 OCT	27					27	OCT	
	09 SEP	28					28	SEP	
1	08 AUG	29	7				29	AUG	1
9	07 JUL	30	P				30	JUL	9
9	06 JUN	31	B				31	JUN	9
5	05 MAY	32	7				32	MAY	5
	04 APR	33					33	APR	
	03 MAR	34					34	MAR	
	02 FEB	35					35	FEB	
	01 JAN	36					36	JAN	
<hr/>									
	12 DEC	37					37	DEC	
	11 NOV	38					38	NOV	
	10 OCT	39					39	OCT	
	09 SEP	40					40	SEP	
1	08 AUG	41	0				41	AUG	1
9	07 JUL	42	0				42	JUL	9
9	06 JUN	43	0		2		43	JUN	9
4	05 MAY	44	0				44	MAY	4
	04 APR	45					45	APR	
	03 MAR	46					46	MAR	
	02 FEB	47					47	FEB	
	01 JAN	48					48	JAN	
<hr/>									
	12 DEC	49					49	DEC	
	11 NOV	50					50	NOV	
	10 OCT	51					51	OCT	
	09 SEP	52					52	SEP	
1	08 AUG	53					53	AUG	1
9	07 JUL	54					54	JUL	9
9	06 JUN	55					55	JUN	9
3	05 MAY	56					56	MAY	3
	04 APR	57					57	APR	
	03 MAR	58					58	MAR	
	02 FEB	59					59	FEB	
	01 JAN	60	0				60	JAN	
<hr/>									
	12 DEC	61					61	DEC	
	11 NOV	62					62	NOV	
	10 OCT	63					63	OCT	
	09 SEP	64					64	SEP	
1	08 AUG	65					65	AUG	1
9	07 JUL	66					66	JUL	9
9	06 JUN	67					67	JUN	9
2	05 MAY	68					68	MAY	2
	04 APR	69					69	APR	
	03 MAR	70					70	MAR	
	02 FEB	71					71	FEB	
	01 JAN	72	0				72	JAN	

Hassan

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

CASE #5

This respondent was interviewed in [Oct 1997]. She had two births since January [1992]; the first resulted in twins but only one was born alive (Jane), while the other was a stillbirth. Jane was born in June [1992]. Her younger brother, John, was born in February [1994]. Note that since the first of these pregnancies began before January [1992], only five months of pregnancy are indicated in the first column. Also note that the stillbirth is not recorded as a pregnancy termination, because it involved a pregnancy that resulted in a live birth (Jane), and you may place only one code in a box.

Her first contraceptive use during the period (the pill) began 9 months after the last birth. She used the pill for 6 months and then began using the IUD right afterwards. She stopped using the pill because it was too expensive. She used the IUD until September [1996], when she stopped after separating from her husband. She has not used any contraception since that time.

The respondent had been married from before January [1992] until her separation in September [1996]. She has lived in the countryside throughout the period.

CASE #5

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____
 (SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____
 (SPECIFY)
- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4		
	12 DEC 01					01	DEC
	11 NOV 02					02	NOV
	10 OCT 03	0		0	3	03	OCT
	09 SEP 04					04	SEP
1	08 AUG 05					05	AUG
9	07 JUL 06					06	JUL
9	06 JUN 07					07	JUN
7	05 MAY 08					08	MAY
*	04 APR 09					09	APR
	03 MAR 10					10	MAR
	02 FEB 11					11	FEB
	01 JAN 12					12	JAN
<hr/>							
	12 DEC 13					13	DEC
	11 NOV 14					14	NOV
	10 OCT 15	0		0		15	OCT
	09 SEP 16	2	D	X		16	SEP
1	08 AUG 17					17	AUG
9	07 JUL 18					18	JUL
9	06 JUN 19					19	JUN
6	05 MAY 20					20	MAY
	04 APR 21					21	APR
	03 MAR 22					22	MAR
	02 FEB 23					23	FEB
	01 JAN 24					24	JAN
<hr/>							
	12 DEC 25					25	DEC
	11 NOV 26					26	NOV
	10 OCT 27					27	OCT
	09 SEP 28					28	SEP
1	08 AUG 29					29	AUG
9	07 JUL 30					30	JUL
9	06 JUN 31	2				31	JUN
5	05 MAY 32	1	8			32	MAY
	04 APR 33					33	APR
	03 MAR 34					34	MAR
	02 FEB 35					35	FEB
	01 JAN 36					36	JAN
<hr/>							
	12 DEC 37					37	DEC
	11 NOV 38					38	NOV
	10 OCT 39	0				39	OCT
	09 SEP 40					40	SEP
1	08 AUG 41					41	AUG
9	07 JUL 42					42	JUL
9	06 JUN 43					43	JUN
4	05 MAY 44					44	MAY
	04 APR 45					45	APR
	03 MAR 46					46	MAR
	02 FEB 47					47	FEB
	01 JAN 48					48	JAN
<hr/>							
	12 DEC 49					49	DEC
	11 NOV 50					50	NOV
	10 OCT 51					51	OCT
	09 SEP 52					52	SEP
1	08 AUG 53					53	AUG
9	07 JUL 54					54	JUL
9	06 JUN 55					55	JUN
3	05 MAY 56					56	MAY
	04 APR 57					57	APR
	03 MAR 58					58	MAR
	02 FEB 59					59	FEB
	01 JAN 60					60	JAN
<hr/>							
	12 DEC 61					61	DEC
	11 NOV 62					62	NOV
	10 OCT 63					63	OCT
	09 SEP 64					64	SEP
1	08 AUG 65					65	AUG
9	07 JUL 66					66	JUL
9	06 JUN 67					67	JUN
2	05 MAY 68					68	MAY
	04 APR 69					69	APR
	03 MAR 70					70	MAR
	02 FEB 71					71	FEB
	01 JAN 72					72	JAN

John

Jane

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

CASE #6

The respondent was interviewed in [Oct 1997], and was in her fourth month of pregnancy at the time of the interview (has completed 3 months of pregnancy). Her most recent birth occurred in November [1995] (Luis), and she had no other pregnancy since [1991]. She first began using a method (the diaphragm) two months after Luis was born. She stopped using the diaphragm some months ago after she became pregnant while using this method.

She has had two unions; the first was ongoing as of January [1992] and ended in February [1993]. She remarried in December [1994] and is still in that union. She lived in two residences within this period: the first in a small town until her move to the city in August [1994].

CASE #6

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE
 FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER

(SPECIFY)

Luis

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER

(SPECIFY)

- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4		
	12 DEC	01				01	DEC
	11 NOV	02				02	NOV
	10 OCT	03				03	OCT
	09 SEP	04	P		X	04	SEP
1	08 AUG	05	P			05	AUG
9	07 JUL	06	5	1		06	JUL
9	06 JUN	07				07	JUN
7	05 MAY	08				08	MAY
*	04 APR	09				09	APR
	03 MAR	10				10	MAR
	02 FEB	11				11	FEB
	01 JAN	12				12	JAN
<hr/>							
	12 DEC	13				13	DEC
	11 NOV	14				14	NOV
	10 OCT	15				15	OCT
	09 SEP	16				16	SEP
1	08 AUG	17				17	AUG
9	07 JUL	18				18	JUL
9	06 JUN	19				19	JUN
6	05 MAY	20				20	MAY
	04 APR	21				21	APR
	03 MAR	22				22	MAR
	02 FEB	23	5			23	FEB
	01 JAN	24	0			24	JAN
<hr/>							
	12 DEC	25				25	DEC
	11 NOV	26				26	NOV
	10 OCT	27				27	OCT
	09 SEP	28				28	SEP
1	08 AUG	29				29	AUG
9	07 JUL	30				30	JUL
9	06 JUN	31				31	JUN
5	05 MAY	32				32	MAY
	04 APR	33				33	APR
	03 MAR	34				34	MAR
	02 FEB	35				35	FEB
	01 JAN	36	0			36	JAN
<hr/>							
	12 DEC	37				37	DEC
	11 NOV	38				38	NOV
	10 OCT	39				39	OCT
	09 SEP	40				40	SEP
1	08 AUG	41				41	AUG
9	07 JUL	42				42	JUL
9	06 JUN	43				43	JUN
4	05 MAY	44				44	MAY
	04 APR	45				45	APR
	03 MAR	46				46	MAR
	02 FEB	47				47	FEB
	01 JAN	48				48	JAN
<hr/>							
	12 DEC	49				49	DEC
	11 NOV	50				50	NOV
	10 OCT	51				51	OCT
	09 SEP	52				52	SEP
1	08 AUG	53				53	AUG
9	07 JUL	54				54	JUL
9	06 JUN	55				55	JUN
3	05 MAY	56				56	MAY
	04 APR	57				57	APR
	03 MAR	58				58	MAR
	02 FEB	59				59	FEB
	01 JAN	60				60	JAN
<hr/>							
	12 DEC	61				61	DEC
	11 NOV	62				62	NOV
	10 OCT	63				63	OCT
	09 SEP	64				64	SEP
1	08 AUG	65				65	AUG
9	07 JUL	66				66	JUL
9	06 JUN	67				67	JUN
2	05 MAY	68				68	MAY
	04 APR	69				69	APR
	03 MAR	70				70	MAR
	02 FEB	71				71	FEB
	01 JAN	72	0			72	JAN

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

CASE #7

The respondent was interviewed in [October 1997]. She has had only one pregnancy (and no births) since January [1992]. The pregnancy lasted for 3 months between November [1995] and January [1996], ending in a miscarriage.

The respondent first used contraception at the start of her first marriage in March [1993]. She and her husband used the condom for a couple of years except for the 6 month period beginning August [1994], when her husband was temporarily away. (Note: discontinuation of condom use is marked with a '0' in Column 2 for "husband away", but the temporary separation is not considered as a change in union status and is thus not indicated in Column 3). She and her husband resumed using the condom after he returned and continued use until she accidentally became pregnant in November [1995]. The respondent got sterilized immediately after the pregnancy.

The respondent got married in March [1993] and has remained in the marriage ever since. She lived in the countryside continuously in one residence until her move to the city 6 months ago.

CASE #7

INSTRUCTIONS:
 ONLY ONE CODE SHOULD APPEAR IN ANY BOX.
 FOR COLUMNS 1, 3, AND 4, ALL MONTHS SHOULD BE FILLED IN.

INFORMATION TO BE CODED FOR EACH COLUMN

COL.1: Births, Pregnancies, Contraceptive Use

- B BIRTHS
- P PREGNANCIES
- T TERMINATIONS

- 0 NO METHOD
- 1 PILL
- 2 IUD
- 3 INJECTABLES
- 4 IMPLANTS
- 5 DIAPHRAGM/FOAM/JELLY
- 6 CONDOM
- 7 FEMALE STERILIZATION
- 8 MALE STERILIZATION
- 9 PERIODIC ABSTINENCE
- A WITHDRAWAL
- X OTHER _____
 (SPECIFY)

COL.2: Discontinuation of Contraceptive Use

- 0 INFREQUENT SEX/HUSBAND AWAY
- 1 BECAME PREGNANT WHILE USING
- 2 WANTED TO BECOME PREGNANT
- 3 HUSBAND DISAPPROVED
- 4 WANTED MORE EFFECTIVE METHOD
- 5 HEALTH CONCERNS
- 6 SIDE EFFECTS
- 7 LACK OF ACCESS/TOO FAR
- 8 COST TOO MUCH
- 9 INCONVENIENT TO USE
- F FATALISTIC
- A DIFFICULT TO GET PREGNANT/MENOPAUSE
- D MARITAL DISSOLUTION/SEPARATION
- X OTHER _____
 (SPECIFY)
- Z DON'T KNOW

COL.3: Marriage/Union

- X IN UNION (MARRIED OR LIVING TOGETHER)
- 0 NOT IN UNION

COL.4: Moves and Types of Communities

- X CHANGE OF COMMUNITY
- 1 CITY
- 2 TOWN
- 3 COUNTRYSIDE

		1	2	3	4				
	12 DEC	01				01	DEC		
	11 NOV	02				02	NOV		
	10 OCT	03	7		X	1	03	OCT	
	09 SEP	04					04	SEP	
1	08 AUG	05					05	AUG	1
9	07 JUL	06					06	JUL	9
9	06 JUN	07					07	JUN	9
7	05 MAY	08					08	MAY	7
*	04 APR	09				X	09	APR	*
	03 MAR	10				2	10	MAR	
	02 FEB	11					11	FEB	
	01 JAN	12					12	JAN	
<hr/>									
	12 DEC	13				13	DEC		
	11 NOV	14				14	NOV		
	10 OCT	15				15	OCT		
	09 SEP	16				16	SEP		
1	08 AUG	17				17	AUG	1	
9	07 JUL	18				18	JUL	9	
9	06 JUN	19				19	JUN	9	
6	05 MAY	20				20	MAY	6	
	04 APR	21				21	APR		
	03 MAR	22				22	MAR		
	02 FEB	23	7			23	FEB		
	01 JAN	24	T			24	JAN		
<hr/>									
	12 DEC	25	P			25	DEC		
	11 NOV	26	P			26	NOV		
	10 OCT	27	6	1		27	OCT		
	09 SEP	28				28	SEP		
1	08 AUG	29				29	AUG	1	
9	07 JUL	30				30	JUL	9	
9	06 JUN	31				31	JUN	9	
5	05 MAY	32				32	MAY	5	
	04 APR	33				33	APR		
	03 MAR	34				34	MAR		
	02 FEB	35	6			35	FEB		
	01 JAN	36	0			36	JAN		
<hr/>									
	12 DEC	37				37	DEC		
	11 NOV	38				38	NOV		
	10 OCT	39				39	OCT		
	09 SEP	40				40	SEP		
1	08 AUG	41	6			41	AUG	1	
9	07 JUL	42	6	0		42	JUL	9	
9	06 JUN	43				43	JUN	9	
4	05 MAY	44				44	MAY	4	
	04 APR	45				45	APR		
	03 MAR	46				46	MAR		
	02 FEB	47				47	FEB		
	01 JAN	48				48	JAN		
<hr/>									
	12 DEC	49				49	DEC		
	11 NOV	50				50	NOV		
	10 OCT	51				51	OCT		
	09 SEP	52				52	SEP		
1	08 AUG	53				53	AUG	1	
9	07 JUL	54				54	JUL	9	
9	06 JUN	55				55	JUN	9	
3	05 MAY	56				56	MAY	3	
	04 APR	57				57	APR		
	03 MAR	58	6		X	58	MAR		
	02 FEB	59	6			59	FEB		
	01 JAN	60				60	JAN		
<hr/>									
	12 DEC	61				61	DEC		
	11 NOV	62				62	NOV		
	10 OCT	63				63	OCT		
	09 SEP	64				64	SEP		
1	08 AUG	65				65	AUG	1	
9	07 JUL	66				66	JUL	9	
9	06 JUN	67				67	JUN	9	
2	05 MAY	68				68	MAY	2	
	04 APR	69				69	APR		
	03 MAR	70				70	MAR		
	02 FEB	71				71	FEB		
	01 JAN	72	0		0	2	72	JAN	

* For fieldwork beginning in 1998, 1999, or 2000, the years should be adjusted.

VII. INDIVIDUAL QUESTIONNAIRE

The Individual Questionnaire consists of 9 sections as follows:

- Section 1. Respondent's Background
- Section 2. Reproduction
- Section 3. Contraception
- Section 4. Health of Children
 - 4A: Pregnancy and Breastfeeding
 - 4B: Immunization and Health
- Section 5. Marriage
- Section 6. Fertility Preferences
- Section 7. Husband's Background, Woman's Work and Residence
- Section 8. AIDS
- Section 9. Height and Weight

The Individual Questionnaire has a cover page to record identification information and the interview results. The information identifying the household and the eligible woman you are to interview should have been filled in by the Household Interviewer. You will be filling in the area labelled "Interviewer Visits". Here you will record your own name, keep a record of your visits, and record the final date and result code. You will also be entering this information into your Interviewer's Assignment Sheet.

Before you begin the Individual interview, ask the respondent collect all the birth certificates and health/immunization cards that she has for her children. It is important that you examine these documents, so assure the respondent that you have plenty of time to wait while she looks for them.

A. SECTION 1. RESPONDENT'S BACKGROUND

In this section we obtain some general background information about the respondent, and if she is a visitor, about her household.

Q. 101: TIME

Record the time of the day you start the individual interview. If the hour or minutes are less than 10, put a zero in the first box. Record the time in hours and minutes, using the 24 hour system. So if it is 1:00 PM or later, you would add 12 to the current hour.

Half past nine in the morning is:	HOUR	<table border="1"><tr><td>0</td><td>9</td></tr></table>	0	9
0	9			
	MINUTES	<table border="1"><tr><td>3</td><td>0</td></tr></table>	3	0
3	0			
Half past four in the afternoon is:	HOUR	<table border="1"><tr><td>1</td><td>6</td></tr></table>	1	6
1	6			
	MINUTES	<table border="1"><tr><td>3</td><td>0</td></tr></table>	3	0
3	0			

Q. 102: CHILDHOOD RESIDENCE

Record the respondent's answer about the type of place she lived in for most of the time as a young girl. Note that we want the type of place, not the name of the place. If she tells you a name, probe by saying: "Was (NAME) a city, a town, or in the countryside?" Also, it may be that she is currently living in the place she grew up in, but that the area has grown from being a town when she was young to a city today. Or, it may have been rural then but is a town now. In either case, circle whatever type of place it was when she was a young girl. Note that we are asking about the place she lived in for most of the time. If she lived in more than one place before the age of 12, ask her in which place she lived the longest.

Q. 103: LENGTH OF RESIDENCE

This question asks how long the woman has been living in her current place of residence. Here, "living continuously" means without having moved away. For example, if the respondent has been away from her home only on visits, these periods should not count as having lived away. If she has always lived in her current place of residence, (that is, she has never lived in any other place), circle '95'. If she is a visitor and does not usually live in the place where you are interviewing her, circle '96' for VISITOR. If either '95' or '96' is circled, leave the two code boxes blank and skip to Q.105. However, if she has lived in other places, ask her to count how many years she has been living continuously in her current place of residence (how many years have passed since she moved to this place). Record answers in completed years. If the answer is "three and one-half years," write '03'. If the answer is less than one year, write '00'.

Q. 104: TYPE OF PRIOR RESIDENCE

This question is similar to Q.102, except it is for the place the woman lived just before she moved to her current residence. If she has lived in more than one place before, we want to know which type of place was the last one before her current place. That is why we say "just before."

Q. 105: MONTH AND YEAR OF BIRTH

Questions 105 and 106 must be asked independently of the information on the Household Questionnaire. Even if you already asked the respondent her age when you were completing the Household Questionnaire, you must ask again for her date of birth on the Individual Questionnaire.

If the respondent knows her date of birth, write it in the appropriate boxes for MONTH and YEAR. You will need to convert the month into numbers. For this, January is '01', February is '02', March is '03', etc.

If she does not know her month of birth, circle '98' for DON'T KNOW MONTH and ask her for the year of her birth. If she knows the year, write in the last 2 digits in the boxes for YEAR (the first two digits (19) have already been filled in for you). Try under all circumstances to obtain at least the year of birth. If the respondent is unable to provide this information, ask if she has any documentation such as an identification card, or a birth or baptismal certificate that might give her date of birth. Only when it is absolutely impossible to even estimate the year of birth should you circle '9998' for DON'T KNOW YEAR.

Q. 106: AGE

[In countries that use other calendars besides the Gregorian, a conversion chart from one calendar to the other should be attached.]

This is one of the most important questions in the interview, since almost all analysis of the data depends on the respondent's age. For example, the two most important results of the survey, fertility rates and the proportion of women who use family planning, are calculated by age of woman.

You must obtain her age in completed years, that is, her age at her last birthday. You must record an age for the woman and you will do this in one of four ways, depending on the type of information you get from the respondent.

- a) The woman knows her age.
If the woman tells you her age, simply write it in the space provided.
- b) The woman does not know her age, but year of birth is reported in Q.105.
If the woman does not know her age, but she did report a year of birth in Q.105, then you may compute her age as follows. If the woman has had her birthday in the current year, subtract the year of birth from the current year [1997]. If the woman has not yet had her birthday in the current year, subtract the year of birth from last year [1996]. If the woman does not keep track of the time within a year when her birthday falls, it is sufficient to subtract year of birth from the current year [1997].

- c) The woman does not know her age, and year of birth is not reported in Q.105. If the woman does not know her age and she could not report a year of birth, you will have to probe to try to estimate her age. Probing for ages is time-consuming and sometimes tedious, however, it is important that you take the time to try to get the best possible information. There are several ways to probe for age:

Ask the respondent how old she was when she got married or had her first child, and then try to estimate how long ago she got married or had her first child. For example, if she says she was 19 years old when she had her first child, and that the child is now 12 years old, she is probably 31 years old.

You might be able to relate her age to that of someone else in the household whose age is more reliably known.

Try to determine how old she was at the time of an important event [war, flood, earthquake, change in political regime] and add her age at that time to the number of years that have elapsed since the event.

- d) The woman does not know her age and probing did not help. If probing does not help in determining the respondent's age, and date of birth was not recorded in Q.105, you will have to estimate her age. Remember, this is a last resort to be used only when all your efforts at probing have failed.

Remember, you **MUST** fill in an answer to Q.106.

CONSISTENCY CHECK: DATE OF BIRTH AND AGE

You must now check the consistency of the reported year of birth (Q.105) and age (Q.106). The concept underlying the check is that the woman's age plus her year of birth must equal the year in which she last had a birthday. There are two methods for checking whether the age and year of birth are consistent: the arithmetic method and the chart method. You may use either method, but do not perform the check until after you have asked Qs.105 and 106.

I. Arithmetic method You will choose the procedure explained in 1a. or 1b. to do the arithmetic, depending on the type of information you have recorded in Q.105. Use the margins of the questionnaire to do the necessary arithmetic.

- 1a. IF BOTH MONTH AND YEAR ARE RECORDED IN Q.105. If the month of birth is before the month of interview (she has had her birthday this year), then her age plus her year of birth should equal [97] (the last two digits of the year of interview). If the month of birth is after the month of interview (she has not had her birthday this year), then her age plus her year of birth should equal [96] (the last two digits of the previous year). If the month of birth is the same as the month of interview, then a sum of either [96] or [97] is acceptable. If the sum is incorrect, then either the year of birth or the age (or both) are incorrect and need to be corrected. If the sum is off by exactly one year, then it is also possible that the month of birth is incorrect and the other information is accurate. In such cases, the age and the month and year of birth all need to be reviewed to see where the error lies.

EXAMPLE: If a respondent tells you that she was born in January 1954, she is [43] years old, and you are interviewing her in July [1997], you would add 54 to [43]. If the information the respondent gave you is consistent, the sum should be [97], since July comes after January. If another respondent tells you that she was born in December 1967 and she is [29] years old, the sum should equal [96] since she will not become a full year older until December (July is before December).

- 1b. IF ONLY YEAR OF BIRTH IS RECORDED IN Q.105. Add the year of birth to the respondent's age and accept a sum of either [96] or [97]. For example, if she says she was born in 1969, but she does not know the month, she should be either [27] (since $69+[27]=96$) or [28] (since $69+[28]=97$). If the sum does not equal either [96] or [97], probe to find out if the year of birth or age is incorrect.
2. HOW TO CORRECT INCONSISTENT ANSWERS. If the age plus the year of birth do not add to [96] or [97] as appropriate, probe to get consistent information. For example, if the sum equals [95] and it should be [96], then you need to add 1 to either the age or the year of birth after checking with the respondent to see which one is wrong. If the sum adds to [99] and it should be [97], you need to subtract 2 from either the age or the year of birth or else subtract 1 from both the age and the year of birth. It is important to understand that either or both the age and year of birth may be incorrect.

II. Chart method Use the Age-Birth Date Consistency Chart to check consistency. You will choose the procedure explained in 1a. or 1b., depending on the type of information you have recorded in Q.105.

- 1a. IF BOTH MONTH AND YEAR ARE RECORDED IN Q.105. Enter the chart at the age you recorded in Q.106. If the month of birth is before the month of interview (she has already had her birthday this year), use the right hand column to see what year of birth is consistent with that age. If the month of birth is after the month of interview (she has not yet had her birthday this year), use the left hand column to see what year of birth is consistent with that age. If the year of birth recorded in Q.105 is not the same as the year of birth in the chart, then Q.105 and 106 are inconsistent and you will have to make a correction.
- 1b. IF ONLY YEAR OF BIRTH IS RECORDED IN Q.105. Enter the chart at the age you recorded in Q.106. The year of birth listed in either the left or right hand column is consistent with that age. If the year of birth recorded in Q.105 is not the same as one of the two years of birth recorded in the chart, then Q.105 and 106 are inconsistent and you will have to make a correction.
2. HOW TO CORRECT INCONSISTENT ANSWERS. If the recorded year of birth (Q.105) does not agree with the year in the chart, you must correct the inconsistency. This is done by further probing and adjustment of either the age information, the date information, or both. It is important to understand that either or both of the two pieces of information may be incorrect. Do not always assume that an inconsistency means, for instance, that the date of birth was given correctly, and that the age is incorrect. It could be that the date or both the age and the date are incorrect.

Finally, before moving on to the next question, verify that the respondent is indeed eligible. If the woman is younger than 15 years or older than 49, you have to terminate the interview. Do this tactfully by asking 2 or 3 more questions and then thank the respondent for her cooperation; write "ineligible" on the first page of the questionnaire, and correct the information for this woman on the Household Questionnaire.

Note: The only time you will go back to correct information recorded on the Household Questionnaire will be to correct information which affects the eligibility status of a woman. When this happens, you have to correct the total number of eligible women reported in two places: on the cover page of the Household Questionnaire and on your Interviewer's Assignment Sheet.

AGE - BIRTH DATE CONSISTENCY CHART FOR SURVEY IN [1997]

Current Age	Year of Birth	
	Has not had birthday in 1997	Has already had birthday in 1997
	Don't Know	
0	1996	--
1	1995	1996
2	1994	1995
3	1993	1994
4	1992	1993
5	1991	1992
6	1990	1991
7	1989	1990
8	1988	1989
9	1987	1988
10	1986	1987
11	1985	1986
12	1984	1985
13	1983	1984
14	1982	1983
15	1981	1982
16	1980	1981
17	1979	1980
18	1978	1979
19	1977	1978
20	1976	1977
21	1975	1976
22	1974	1975
23	1973	1974
24	1972	1973
25	1971	1972
26	1970	1971
27	1969	1970
28	1968	1969
29	1967	1968

Current Age	Year of Birth	
	Has not had birthday in 1997	Has already had birthday in 1997
	Don't Know	
30	1966	1967
31	1965	1966
32	1964	1965
33	1963	1964
34	1962	1963
35	1961	1962
36	1960	1961
37	1959	1960
38	1958	1959
39	1957	1958
40	1956	1957
41	1955	1956
42	1954	1955
43	1953	1954
44	1952	1953
45	1951	1952
46	1950	1951
47	1949	1950
48	1948	1949
49	1947	1948
50	1946	1947
51	1945	1946
52	1944	1945
53	1943	1944
54	1942	1943
55	1941	1942
56	1940	1941
57	1939	1940
58	1938	1939
59	1937	1938

[Chart needs to be reconstructed for surveys in later years]

Q. 107: EVER ATTENDED SCHOOL

The term "school" means any kind of formal school, but does not include such things as Bible school or Koranic school, or short courses like typing school or sewing classes. However, it does include technical or vocational training beyond the primary school level, such as long-term courses in mechanics, engineering, secretarial work, etc.

Q. 108: HIGHEST LEVEL ATTENDED

Record here the highest level she ever attended, regardless of whether or not the year was completed. For example, if she attended Form/Year 1 of secondary school for only two weeks, record SECONDARY.

Q. 109: HIGHEST GRADE/FORM/YEAR COMPLETED

In this question, record only the number of years which the respondent successfully completed at that level. For example, if a woman was attending Form/Year 3 of secondary school, and left school before completing that year, record '02'. Although Form/Year 3 was the highest year she attended, she completed two years of secondary school. Note that you will record the number of years completed at the level which was recorded in Q.108. If she attended only two weeks of Form/Year 1 of secondary school, record '00' for completed years.

Q. 110: FILTER FOR AGE

Look back to Q.106. If the respondent is age 24 or younger, mark the box on the left. If she is age 25 or older, mark the box on the right. Follow the appropriate skip pattern.

Q. 111: CURRENTLY ATTENDING SCHOOL

As in Q.107, we are referring to formal schooling.

Q. 112: REASON STOPPED SCHOOLING

There may be numerous reasons why she no longer attends school, but we are asking for the main reason.

Q. 113: FILTER FOR EDUCATION

Look back to Q.108. If her highest level of school is primary, mark the box on the left. If she attended secondary or higher, mark the box on the right. Follow the appropriate skip pattern.

Q. 114: LITERACY

This question is only asked if the woman has not attended secondary or higher schooling. Be sure to read all of the alternatives mentioned in the question before accepting her answer. It does not matter in what language she is literate.

Q. 115: READING OF NEWSPAPER

The purpose of this question is to find out if the respondent is exposed to influences outside her local community by means of reading newspapers or magazines. It does not matter what type of articles she reads, what language she reads in, or who buys the newspapers or magazines she reads. The question is simply whether she usually reads them at least once a week.

Q. 116: RADIO LISTENING

If there is any doubt as to whether she listens every day, use your judgement. For example, if she says "I listen almost every day, but during the planting season I'm away and I don't listen at all," record YES, since she usually listens every day. It does not matter who owns the radio and what program she listens to.

Q. 117: TELEVISION WATCHING

As with Qs.115 and 116, the purpose is to get an idea of how much exposure the respondent has to influences outside her place of residence. It does not matter who owns the television and what program she watches.

[Qs. 118 and 119: COUNTRY SPECIFIC ON RELIGION AND ETHNICITY]

Q. 120: FILTER FOR USUAL RESIDENT

Questions 121-128 are only asked of visitors (women who do not usually live in the selected household, but slept there the night before you conducted the household interview). These women should answer your questions on household amenities (Qs.121-128) by describing their usual place of residence, and not the place they are visiting.

Look back to Column 4 in the Household Questionnaire to see if the woman usually lives in the household. If she does (Column 4 is YES), mark the box on the right and skip to Q.201. If the woman is a visitor who spent the previous night in the household (Column 4 is NO and Column 5 is YES), mark the box on the left and continue with Qs.121-128.

Q. 121: TYPE OF USUAL RESIDENCE

Since the woman is a visitor to the household in which you are interviewing her, we need to ask her about the place where she usually lives. Ask her for the name of the place and write the name in the space provided. This is to help you record her answer in the correct category, because you need to make the distinction between Capital/Large city, Small city, Town, and Countryside. If it is not clear what category you should code, your supervisor can help you correctly classify the place according to the population.

Q. 122: LOCATION OF USUAL RESIDENCE

We want to know in what administrative area the woman usually lives.

Q. 123: HOUSEHOLD DRINKING WATER

The purpose of this question is to assess the cleanliness of household drinking water. If drinking water is obtained from several sources, probe to determine the source from which the household obtains the majority of its drinking water. If the source varies by season, record the source used at the time of interview. Since the respondent is a visitor to the household in which you are interviewing her, she should describe the situation in her own household for Qs.123-128.

Q. 124: TIME TO GET WATER

This question is not asked if the respondent's source of drinking water is within the household compound; it is also not asked if the household collects rainwater, or buys bottled water. Include the time it takes to get to the source, wait to get water (if necessary), and get back to the house by whatever means of transportation is generally used, whether it is by walking, by bicycle, or by motor vehicle. Record the answer in minutes, and put zeroes in front if necessary; for example, "30 minutes" would be '030', and "one hour and a half" would be '090'. If the source of water is on the property, for example a stream that runs through the yard, record ON PREMISES.

Q. 125: TOILET FACILITIES

As with Qs.123-124, the purpose of this question is to obtain a measure of the sanitation level of the household, since water supply and toilet facilities are important for disease control and health improvement.

A FLUSH toilet is one in which water carries the waste down pipes, whether the water is piped into the toilet or poured in by buckets. Notice that you need to find out if the flush toilet is shared with any other households. A VIP is a ventilated improved pit latrine which has been improved by the addition of some kind of construction (usually a pipe) that provides a route for fumes to escape, other than the hole itself. A traditional pit toilet is not ventilated. If the respondent answers that they use the bush, the fields, or a cleared corner of the compound record NO FACILITY/BUSH/FIELD.

Q. 126: HOUSEHOLD ITEMS

The answers to these questions on ownership of certain items will be used to determine a rough measure of the socioeconomic status of the household. Read out each item and circle the answer given after each item. If the woman reports that a household item (such as a radio) is broken, try to find out how long it has been broken, and if it will be fixed. If the item appears to be out of use only temporarily, circle '1' for YES. Otherwise, circle '2' for NO. Be sure to circle either a '1' or a '2' for each item. Do not leave any blank.

Q. 127: FLOOR MATERIAL

Ask the respondent to describe the floor of her own home. If there is more than one kind of flooring material, record the main flooring material, the material that covers the largest amount of floor space.

Q. 128: OWNERSHIP OF TRANSPORTATION

As another rough measure of socioeconomic status, we also ask whether any member of the woman's household owns a bicycle, motorcycle, or car. Follow the same procedure as in Q.126 in asking about these items. A small child's bicycle is primarily a toy and should not be recorded here.

B. SECTION 2. REPRODUCTION

In this section, information is collected about the births that a woman has had during her life. This is a particularly important section and you need to be especially careful to obtain all the required information. The questions in this section can be divided into six groups:

- Qs. 201-210: Aggregate information about the total number of sons and daughters that a woman has given birth to.
- Qs. 211-221: Specific information about each birth that a woman has had (date of birth, age, sex, etc.).
- Qs. 222-225: Finishing the birth history table.
- Q. 226: Recording births in the calendar.
- Qs. 227-235: Questions about current pregnancy and earlier pregnancies.
- Qs. 236-238: Questions about menstruation

GENERAL NOTES ABOUT Qs. 201-210 AND Qs. 211-221

These two groups of questions collect information about all births that the woman has had (no matter who the father is). It is important at the outset of this section that you understand which events to include. We want to record all of the respondent's natural births, even if the child no longer stays in the household, and even if the child is no longer alive. Even births that survived only for a few minutes (and showed signs of life by crying, breathing, or moving) should be recorded.

It is also important to understand what events should not be recorded. You must not record stillbirths (i.e. giving birth to a dead child), adopted children, or children of the husband to which the respondent did not give birth herself.

Q. 201: EVER GIVEN BIRTH

This question serves two purposes: to introduce the section, and to learn if the respondent has ever given birth. If the answer is YES, circle '1' and proceed to the next question. If the answer is NO, circle '2' and skip to Q.206. You must ask Q.206 even if the respondent says she has never given birth because she may have neglected to tell you about children who died very young.

Q. 202: ANY CHILDREN LIVING WITH HER

Read the question slowly. The sons and daughters being considered are those who live with her in her household (which will usually be the household in which the interview is being held, except for women who are visitors). If the answer to this question is NO, skip to Q.204 and leave Q.203 blank.

Q. 203: NUMBER OF CHILDREN LIVING WITH HER

If the answer to Q.202 is YES, fill in the number of sons and daughters who live with the respondent. If she has only sons living with her, write '00' in the boxes for daughters, and vice versa. Remember that we are only interested in the respondent's OWN children and not in foster children, children of her husband by another woman, or children of another relative.

Qs. 204 and 205: ANY CHILDREN LIVING ELSEWHERE

This refers to her sons and daughters who are alive, but not living with her. For example, they may be living with a relative, staying in a boarding school, been given up for adoption, or may be grown-up children who have left home. If she has only sons living elsewhere, write '00' in the boxes for daughters, and vice versa. Make sure the respondent is not reporting dead children in this question. If she answers NO in Q.204, skip to Q.206 and leave Q.205 blank.

Qs. 206 and 207: CHILDREN WHO DIED

These questions on children who have died are extremely important and are among the most difficult on which to obtain accurate data. Some respondents may fail to mention children who died very young so if she answers NO, it is important to probe by asking "Any baby who cried or showed signs of life but survived only a few hours or days?" Some respondents may be reluctant to talk about this subject and may become sad or upset that you are asking such questions. Be sympathetic and tactful in such situations. Say that you know that the subject is painful, but that the information is important.

Q. 208: TOTAL BIRTHS

Add up the numbers in Qs.203, 205 and 207 and enter the total in Qs.208 and 209.

Q. 209: CHECKING TOTAL WITH RESPONDENT

Ask the respondent if the total is correct. If she says NO, first check your addition, and then go through the list to check with the respondent whether you have obtained the information correctly. For example, starting with Q.203, you would ask "You have two sons and one daughter living with you. Is that correct?" Do the same for Qs.205 and 207 and then enter the correct sum in Qs.208 and 209.

Q. 210: FILTER FOR SCREENING WOMEN WITH NO BIRTHS

Check Q.208 to see if she has had at least one birth. Mark the appropriate box and follow the instructions given.

BIRTH HISTORY TABLE: Qs. 211-221

In this table we want a complete list of all the births she has had in the order in which they occurred. Begin the section with Q.211 to inform the respondent that we would like to record the names of all of her births, whether or not they are still alive, from the first to the last. The only births we will not include are stillbirths. Ask the name of each child in Q.212, beginning with the first born, and continuing until the last born. Record all the names in Q.212, one in each row. Then ask the respondent if any of these were multiple births (e.g., twins) and record single or multiple birth status for each child in Q.213. If the respondent has had two or more births, make it clear to her that she should start with the first birth she

had and proceed in order to her last birth. She should not tell you first about all the living children, and then about all those who have died; she must proceed in chronological order whether or not a child is now alive.

After recording the names and single/multiple birth status for all the children, go back to the first child and ask Q.214-221 as appropriate. Then ask these same questions for the second child, etc.; you will complete the row for one child at a time. If, after you fill in information for several births, you find that they are not in order, do not erase the information. Instead, correct the birth order line numbers and draw arrows to indicate the correct order. Record twins on separate lines.

Q. 212: CHILD'S NAME

First ask for the name of the respondent's firstborn child and write it in the first row. Write the name which distinguishes that child from the others—in other words, if there are two children, Harvey Johnson and Matilda Johnson, write "Harvey Johnson" and "Matilda J.," not "H. Johnson" and "M. Johnson." If the baby never had a name, either because it is still very young or because it died very young, write "Baby" for the name. Record the names of all her births in chronological order before going to the next question.

Q. 213: SINGLE OR MULTIPLE BIRTHS

Ask the respondent if any of her births were multiple births and record the status of each child. If a child is a multiple birth, be sure to have recorded the twin (or triplet, etc.) on a separate line. Asking about multiple births is a good way to insure that the respondent has told you about all multiple births that did not survive. Once you have completed Qs.212 and 213 for all births, you are ready to proceed with Qs.214-221 for one child at a time.

Q. 214: CHILD'S SEX

Circle the code for the sex of the birth. Although you can usually tell the sex from the name, check with the respondent by saying for example, "and Joyce is a girl?" Do not assume the sex of the child from the name.

BIRTH HISTORY TABLE

211 Now I would like to record the names of all your births, whether still alive or not, starting with the first one you had.
RECORD NAMES OF ALL THE BIRTHS IN 212. RECORD TWINS AND TRIPLETS ON SEPARATE LINES.

212	213	214	215	216	217	218	219	220	221
What name was given to your (first/next) baby? (NAME)	Were any of these births twins?	Is (NAME) a boy or a girl?	In what month and year was (NAME) born? PROBE: What is his/her birthday? OR: In what season was he/she born?	Is (NAME) still alive?	How old was (NAME) at his/her last birthday? RECORD AGE IN COMPLETED YEARS.	Is (NAME) living with you?	How old was (NAME) when he/she died? IF '1 YR.', PROBE: How many months old was (NAME)? RECORD DAYS IF LESS THAN 1 MONTH; MONTHS IF LESS THAN TWO YEARS; OR YEARS.	FROM YEAR OF BIRTH OF (NAME) SUBTRACT YEAR OF PREVIOUS BIRTH. IS THE DIFFERENCE 4 OR MORE?	Were there any other live births between (NAME OF PREVIOUS BIRTH) and (NAME)?
01 Ali	SING ... 1 MULT ... 2	BOY ... 1 GIRL ... 2	MONTH ... 08 YEAR ... 85	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS 11	YES ... 1 NO ... 2 (NEXT BIRTH)	DAYS 1 MONTHS 2 YEARS 3		
02 Khalida	SING ... 1 MULT ... 2	BOY 1 GIRL ... 2	MONTH ... 03 YEAR ... 88	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS 09	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2
03 Mohamed	SING ... 1 MULT ... 2	BOY ... 1 GIRL ... 2	MONTH ... 12 YEAR ... 91	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS 01	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS ... 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2
04 Ahmad	SING ... 1 MULT ... 2	BOY ... 1 GIRL ... 2	MONTH ... 05 YEAR ... 94	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS 03	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2
05	SING ... 1 MULT ... 2	BOY 1 GIRL 2	MONTH YEAR ↓ 219	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS ↓ 219	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2
06	SING ... 1 MULT ... 2	BOY 1 GIRL 2	MONTH YEAR ↓ 219	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS ↓ 219	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2
07	SING ... 1 MULT ... 2	BOY 1 GIRL 2	MONTH YEAR ↓ 219	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS ↓ 219	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2
08	SING ... 1 MULT ... 2	BOY 1 GIRL 2	MONTH YEAR ↓ 219	YES ... 1 NO ... 2 ↓ 219	AGE IN YEARS ↓ 219	YES ... 1 NO ... 2 (GO TO 220)	DAYS 1 MONTHS 2 YEARS 3	YES 1 NO ... 2 (NEXT BIRTH)	YES 1 NO ... 2

Q. 215: MONTH AND YEAR OF BIRTH

Write the month and year of each birth, whether or not the child is living. If she gives you a year of birth, but does not know the month of birth, probe to try to estimate the month. For example, if she says her daughter was born in 1987, but she doesn't know which month, ask her if she gave birth in the [dry or wet season, if she remembers if she was pregnant at Christmas or Easter time, during the month of Ramadan, or some other significant event/season of the year,] to try to determine the month of birth. Convert months to numbers, as before. If you cannot even estimate a month, write '98' for MONTH.

If the respondent cannot recall the year when the birth occurred, you need to probe carefully. Check the documents collected at the beginning of the interview, such as the birth certificate or immunization record, to see if a date of birth has been recorded. Before entering a date from these items, check with the respondent to determine if she believes the date is accurate. If there is no birth certificate or other document for the child, see if the respondent knows a firm birth date for any other child in the household and relate it to that. For example, if she knows the second child was born in 1985, and the first child was just a year old at that time, enter '1984'. You must enter a year for all children, even if it is just your best estimate.

Q. 216: SURVIVAL STATUS

Circle the code for whether the child is still alive or not. If the child is dead, skip to Q.219. If alive, ask Q.217.

Q. 217: AGE OF CHILD

The ages of all living children should be recorded in completed years. For example, a child who will become 3 years old next week should be recorded as 02 years today. A child aged less than one year will be recorded as age 00 years.

Sometimes a mother will not know the current age of her child. In this case, you may rephrase the question to: "How many years ago was John born?" You can also use other available information. For example, you can relate John's age to the age of a child she does know. For example, the mother may know that her youngest child was born 1 year ago, and that John was two years old at that time, in which case John would be three years old now.

You MUST record an age for all children who are still alive.

CONSISTENCY CHECK: DATE OF BIRTH AND AGE

You are not finished with Q.217 until you have checked the consistency between Q.215 and Q.217. Check their consistency by using the procedures explained for Qs.105 and 106 of this manual (you can use either the arithmetic procedure or the Age-Birth Date Consistency Chart). Both procedures are explained following Qs.105 and 106.

The arithmetic procedure is summarized here. Add the year of birth and the age. If the child has already had a birthday this year (month of birth is prior to month of interview), the sum should be [97] (the last two digits of the year of interview). If the child has not had a birthday yet this year (month of birth is after month of interview), the sum should be [96] (the last two digits of the previous year). If the child's month of birth is the same as the month of interview, or if the month of birth is not known, the sum can be either [96] or [97].

If year of birth plus age do not add to [96] or [97] as appropriate, probe to get consistent information. For example, if the sum equals [95] and it should be [96], then you need to add 1 to either the age or the year of birth after checking with the respondent to see which one is wrong. If the sum adds to [99] and it should be [97], you need to subtract 2 from either the age or the year of birth or else subtract 1 from both the age and the year of birth.

Q. 218: CHILD LIVING WITH MOTHER/OTHER PERSON

This question is important in determining the extent to which children live away from their own mothers. If a child is away at boarding school, or lives with other people on a permanent basis, record NO. If the child is away for a short while, but usually lives with the mother, record YES. After recording Q.218 for the first child, you will proceed with Q.214 for the next birth. After recording Q.218 for any birth after the first child, you will go to Q.220. If you are following the skip pattern correctly, you will only be asking this question (Q.218) for living children.

Q. 219: AGE AT DEATH

For children who have died, you must record information about age at death even if the information is only a best estimate. Age at death information is recorded either in days, months, or years. If the child was less than one month old at death, circle '1' and write the answer in DAYS. If the child was less than two years, but at least one month old when he or she died, circle '2' and write the answer in MONTHS. If the child was two years or older when he or she died, circle '3' and write the answer in YEARS. For example:

RESPONSE

CORRECT ENTRY

"She was 3 years old when she died"

DAYS	1	<input type="text"/>	<input type="text"/>
MONTHS	2	<input type="text"/>	<input type="text"/>
YEARS	③	0	3

"He was only 6 months old"

DAYS	1	<input type="text"/>	<input type="text"/>
MONTHS	②	0	6
YEARS	3	<input type="text"/>	<input type="text"/>

"She died when she was 5 days old"

DAYS	①	0	5
MONTHS	2	<input type="text"/>	<input type="text"/>
YEARS	3	<input type="text"/>	<input type="text"/>

"He was 4 and a half months old"

DAYS	1	<input type="text"/>	<input type="text"/>
MONTHS	②	0	4
YEARS	3	<input type="text"/>	<input type="text"/>

"He was 2 weeks old when he passed away"

After probing, you learn that the baby was actually 12 days old when he died.

DAYS	①	1	2
MONTHS	2	<input type="text"/>	<input type="text"/>
YEARS	3	<input type="text"/>	<input type="text"/>

"She died on the same day she was born"

DAYS	①	0	0
MONTHS	2	<input type="text"/>	<input type="text"/>
YEARS	3	<input type="text"/>	<input type="text"/>

You should give the answer in completed units, i.e., if she says "four and a half months," record MONTHS 04. Note that if the respondent gives you an answer in weeks, you must convert the answer to days or months. If the answer is less than one month (less than 4 weeks), probe to find out the exact

age at death in days. For example, if the answer is "three weeks," probe for the number of days. If the mother says 19 days, record DAYS 19. If the answer is one or more months (4 weeks or more), you would convert the answer to months. An answer of "7 weeks" would be recorded as MONTHS 01.

Similarly, if the respondent answers "1 year," you need to probe to find the exact number of months. We know that if a child died at the age of 10, 11, 12, 13, or 14 months, a woman is likely to round-off her answer when asked how old her child was when it died, because she does not know that we need the exact age. This means that she is likely to respond "1 year old" even if the child really was 10 months or 13 months old. Therefore, anytime a woman responds "1 year" to this question, probe by asking "How many months old was (Name)?" Record the answer in completed months.

"She died when she was one year old"

After probing you may learn that the child was actually 13 months old.

DAYS	1		
MONTHS	2	1	3
YEARS	3		

Note that this is a table of children that were born alive. If the respondent says that the baby was not alive when it was born, probe by saying: "Did it cry or show any sign of life when it was born?" If she says the baby was dead when it was born, cross out the entry in the table. Make sure to renumber the birth order numbers when this occurs.

If you are following the skip pattern correctly, you will only be asking this question for dead children. If you are recording an age at death for the first born child, continue with Q.214 for the next birth. After recording Q.219 for any birth after the first child, go to Q.220.

Q. 220: INTERVAL CHECK

You will reach Q.220 for every birth in the table, with the exception of the first birth. For children who are alive you will come here after asking Q.218. For children who have died, you will come here after asking Q.219.

Start with the year of birth of NAME. Subtract from it the year of birth of the child born just before NAME (this is the PREVIOUS BIRTH). This calculation will tell you how long after its older sibling NAME was born. In other words, it will tell you approximately how many years passed between the birth of NAME and NAME's older brother or sister.

In performing the subtraction, you will use only the years and disregard the months. For example, if Mohamed was born in December 1987 and Ahmad was born in May 1993, you would calculate (1993 - 1987 = 6) and record YES, even though the actual time elapsed was three years and seven months.

We make this calculation because if the interval of time that has passed is long (the result of the subtraction is 4 or more), we want to find out if there were any live births that the respondent forgot to tell you about. If the result of your calculation is 4 or more, record YES, and continue with Q.221. If the result of your calculation is less than 4, record NO, and return to Q.214 for the next birth.

Q. 221: LIVE BIRTHS IN INTERVAL

If you find in Q.220 that the interval between NAME and NAME'S older brother or sister is 4 or more years, probe the respondent for any births that may have occurred during that time that she has not told us about. For example: a respondent tells you that Mohamed was born in 1987 and Ahmad was born in 1991. Start by calculating the length of the interval ($1991 - 1987 = 4$) in Q.220 for Ahmad. Since the interval is 4 years, record YES and ask Q.221: "Were there any other live births between the birth of Mohamed and Ahmad?"

If the woman tells you there was a birth after Mohamed and before Ahmad, record YES in Q.221 and add that birth to the end of the birth history. Draw an arrow showing the birth's proper location, correct the birth order numbers in Q.212, and ask Qs.213-221 for that birth. You may also have to correct the information in Qs.202-209. If, however, the woman tells you there was no birth between Mohamed and Ahmad, record NO in Q.221, and ask the reason for the long gap.

The long gap may be the result of use of contraception, absence of the husband, illness, or a lost pregnancy. Whatever accounts for the long gap, write the reason on the questionnaire between the births in question. Then proceed with Q.214 for the next birth (or go to Q.222 if Ahmad was the last birth).

Qs. 222 and 223: PROBING THE INTERVAL SINCE LAST BIRTH

This question is similar to Qs.220-221, but is specifically designed to probe the time that has passed since the last birth. In Q.222, start with the year of interview. Subtract from it the year of birth of the last child in the birth history table. This calculation will tell you how long it's been since the birth of her last child. In other words, it will tell you approximately how many years have passed since her last child was born. As in Qs.220-221, use only the years in the subtraction, disregarding the months.

If the interval of time that has passed is long (the result of the subtraction is 4 or more), record YES and continue with Q.223. If the interval is less than 4 years, record NO and skip to Q.224. In Q.223, probe the respondent for any birth that may have occurred since the last reported birth. For example: if Ahmad is reported to be her last birth, and he was born in [1991], calculate the length of the interval (year of interview - year of last birth) [$1997 - 1991 = 6$] in Q.222 and ask in Q.223: "Have you had any live births since the birth of Ahmad?"

If the woman tells you there was a birth since Ahmad, add that birth to the end of the birth history. Then ask Qs.213-221 for that birth, and you may also have to correct the information in Qs.202-209. If, however, there was no birth after Ahmad, record NO, and ask the reason for the long gap. Record the reason for the long gap since the last birth in the questionnaire, following the last birth.

OTHER POINTS ABOUT THE BIRTH HISTORY TABLE

- 1) Recording of age at death, year of birth, and age of living children. For month of birth in Q.215, it is permissible to record Code '98' for DON'T KNOW as an answer. However, for year of birth (Q.215), age of living children (Q.217), and age at death (Q.219), you must record an answer, even if it is only your best estimate. It is very important to obtain information for these questions, so you must probe for this information and make your best estimate on the basis of the woman's answers.
- 2) Recording of information on twins. If there are any twins, record the information about each twin on a separate line. If the twins are the respondent's last birth, and if one twin is dead, record the living twin last. By doing this, you will be able to talk about the living twin first when you get to Section 4, which may be more comforting for the respondent.
- 3) Recording information for more than 10 births. There are lines for 10 births in the table. If in an exceptional case you find a respondent with more than 10 births, write at the bottom of the table 'CONTINUED ON A SEPARATE QUESTIONNAIRE'. Write the word 'CONTINUATION' and the identification information on the cover sheet of the second questionnaire. Then change the number '01' on the birth history in the second questionnaire to a '11', etc. Once you have recorded information in the birth history for these additional births, return to the first questionnaire to complete the interview.
- 4) Correcting of reported sequence of births. If you find that the respondent reports a birth which is not in order of birth, draw an arrow indicating the position in the table where it belongs according to the date when it occurred, and correct the line numbers printed in Q.212.
- 5) Checking birth interval. Check the dates of each birth. If any two children are reported born less than 7 months apart, e.g., December 1983 and June 1984, probe and correct dates. Either the December birth occurred earlier or the June birth occurred later, or both.

Q. 224: CHECK ON THE CONSISTENCY OF TOTAL BIRTHS

Check that the number in Q.208 is the same as the number of births listed in the table. If the number in Q.208 is the same as the number of births recorded in the table, mark the box labelled NUMBERS ARE SAME and proceed with the rest of Q.224. If the number recorded in Q.208 is not the same as the number of births in the table, mark the box labelled NUMBERS ARE DIFFERENT. Then you must probe to find the cause of the difference and correct it before you continue with the rest of Q.224. When properly completed, your questionnaire must always have the same number of births in the table as the number recorded in Q.208. Once this is so, mark the box NUMBERS ARE SAME. The rest of Q.224 is to check that you have filled in the birth history table correctly.

FOR EACH BIRTH: YEAR OF BIRTH IS RECORDED

Look back to Q.215 to check that every birth has a year of birth recorded. Once a year of birth is recorded for every birth, mark the box to the right of the statement.

FOR EACH LIVING CHILD: CURRENT AGE IS RECORDED

Look back to Qs.216 and 217. For every child that is still alive (Q.216 is YES) there must be an age recorded in Q.217. When you have checked that an age is recorded for every living child, mark the box to the right of the statement. (If after checking the table you see that there are no living children, you still mark the box to show you have gone back to check the table.)

FOR EACH DEAD CHILD: AGE AT DEATH IS RECORDED

Look back to Qs.216 and 219. For every child that is dead (Q.216 is NO) there must be an age at death recorded in Q.219. When you have checked that an age at death is recorded for every dead child, mark the box to the right of the statement. (If after checking the table you see that there are no dead children, you still mark the box to show you have gone back to check the table.)

FOR AGE AT DEATH 12 MONTHS OR 1 YEAR:

PROBE TO DETERMINE EXACT NUMBER OF MONTHS.

Look back to Q.219. If the age at death is reported to be 12 months, probe to determine whether the child died at exactly 12 months, or earlier or later. For example, ask the respondent whether the child had reached his first birthday before he died. For any dead child that died at an age less than two years (but more than 1 month), the age at death must be recorded in months. This means that any child with a recorded age at death of YEARS 01 should be probed for the exact number of months. No child should be recorded as dying at one year.

Q. 225: FILTER FOR BIRTHS SINCE JANUARY [1994]

Look back to Q.215, count how many births occurred since January 1, [1994], and record this number in the box. You must include all births since January 1, [1994], even if they later died.

Q. 226: BIRTHS IN CALENDAR

Each birth since January 1, [1992] should be entered in the calendar. In Column 1, place a 'B' in the month of birth and a 'P' in the 8 months preceding the birth. Write the child's name in front of the 'B' code.

Q. 227: CURRENT PREGNANCY STATUS

If the respondent does not know for certain whether or not she is pregnant, record UNSURE.

Q. 228: MONTHS OF PREGNANCY

If the woman does not know how many months she has been pregnant, probe to get an estimate. Remember that we are interested in completed months of pregnancy. To make sure that you are getting completed months of pregnancy, probe with a question like: "Are you in your Xth month of pregnancy, or have you completed your Xth month of pregnancy?" Record the answer, putting a zero in the first box, for example, '03' for three completed months.

You will now record her pregnancy in Column 1 of the calendar. Write 'P' in the month of interview, and for the preceding months of pregnancy. The total number of months recorded with 'P' for the current pregnancy will be the same as the number recorded in Q.228, the number of completed months of pregnancy.

Q. 229: DESIRED TIMING OF PREGNANCY

Read the entire question to the respondent before accepting an answer, stressing the underlined words.

Q. 230: LOST PREGNANCIES

We want to know whether the respondent had any pregnancies which did not result in a live birth, so we ask about each type of lost pregnancy. If a pregnancy ended early and involuntarily, it was a miscarriage. If a woman voluntarily ended a pregnancy, it was an abortion. If a woman gave birth to a child that showed no signs of life, it was a stillbirth.

Q. 231: DATE LAST PREGNANCY LOSS

If she has ever had such a pregnancy, write the month and year the most recent such pregnancy ended. Follow the same procedure for converting months to a number, for example, '08' for August. If the woman cannot remember the date, use probes discussed in Q.215.

Q. 232: FILTER FOR DATE OF PREGNANCY LOSS

Check the answer to Q.231 and mark the appropriate box. If the last pregnancy loss occurred before January 1, [1992], mark the box on the right. If the last pregnancy loss occurred on or after January 1, [1992], mark the box on the left. Follow the appropriate skip pattern.

Q. 233: GESTATION LENGTH

This question is asked only of women who lost a pregnancy since January 1, [1992]. There are two parts to this question: first record the length of the last lost pregnancy in the boxes provided and then record the pregnancy in Column 1 of the calendar. As with Q.228, record the number of completed months. The number of months recorded in the questionnaire should equal the total recorded in the calendar.

If the woman responds in weeks, you will have to convert the answer to months. For example, if she says the pregnancy ended at 12 weeks, record '03'. Then continue with the calendar. In Column 1, place a 'T' in the month the pregnancy terminated (given in Q.231) and a 'P' in each of the two preceding months that the woman was pregnant. If a woman says she had an abortion after 10 weeks of pregnancy, you would record '02' in Q.233 and place a 'T' in the month the pregnancy was terminated, and a 'P' in the month preceding the month of termination; one 'T' and one 'P' records two completed months.

Q. 234: OTHER PREGNANCY LOSSES

The respondent has told you about one pregnancy loss in Qs.230-233. Now ask her if she has had any other such pregnancies (miscarriage, abortion or stillbirth).

Q. 235: ENTER LOST PREGNANCIES IN CALENDAR

Ask when the other pregnancy ended. Any pregnancy that ended since January 1, [1992], and did not result in a live birth, should be recorded in the calendar using the same procedure as in Q.233.

Q. 236: START OF LAST MENSTRUAL PERIOD

The answers to this question will help to determine if any of the respondents are actually menopausal or infecund because they have not had their periods in a long time. This is important in any study of fertility since menstruation is directly linked to pregnancy. Record the respondent's answer in the units that she uses. For example, if she says "3 weeks ago," circle '2' and record WEEKS AGO 03. If she says "Four days ago," circle '1' and record DAYS AGO 04. If the respondent appears to be rounding off her answer, probe for an exact answer. For example, if she says "About a week ago" say, "Do you remember which day? Was it before or after the weekend?" etc.

If the respondent gives you the date that her last menstrual period began, write the date in the space provided on the questionnaire. Calculate the amount of time that has passed, and record it. Note that it is not necessary to obtain a date. The space is provided only for cases in which the respondent gives you a date. If she tells you she is in menopause, record IN MENOPAUSE. If she has not menstruated since the birth of her last child, record BEFORE LAST BIRTH. If she has never menstruated, record NEVER MENSTRUATED.

Qs. 237 and 238: KNOWLEDGE OF PREGNANCY IN MONTHLY CYCLE

First ask Q.237 to see if the woman thinks there are times during a woman's monthly cycle when she is more likely to become pregnant. If she says there is no time that is more likely than another, or she does not know, record the response and skip to Q.301. If she says there is a time when a woman is more likely to become pregnant, record YES and ask Q.238. Remember, do not prompt the respondent by suggesting possible answers. If the respondent gives you an answer and you are not sure whether it fits one of the precoded answers, circle '96' and write down what she said. DO NOT read out the coding categories for this question since it might lead her into selecting one of them.

C. SECTION 3. CONTRACEPTION

This section collects information on the knowledge and use of various contraceptive methods, how a couple can avoid or delay pregnancy. The topic of contraception and family planning may be considered a personal matter by a respondent, and she may feel embarrassed to talk about it. To overcome her embarrassment, you must show that you do not feel embarrassed or uncomfortable in any way. Ask these questions as if they were no different from any other questions in the questionnaire. If she is hesitant to answer any of these questions, reassure her that everything she says will be treated confidentially and that the same questions are being asked of women all over the country.

Questions regarding use of male methods of contraception apply to all partners of respondents, whether or not the couple is currently living together or married. If the respondent has been married more than once, it does not matter with which particular husband or partner she may have used a method.

GENERAL NOTE ON CONTRACEPTIVE TABLE:

The contraceptive table asks the respondent about her knowledge, as well as use, of specific contraceptive methods. In the first column of the table you will record the respondent's knowledge of specific methods, while in the second column you will record whether she has ever used any of the methods that she has heard of.

We will be classifying a woman's knowledge of contraception into three categories:

- a) Spontaneous Knowledge: methods the respondent thinks of on her own (she can list them spontaneously, without any probing),
- b) Probed Knowledge: methods the respondent recognizes after being asked specifically about them,
- c) No Knowledge: methods the respondent has not heard of.

This is how you should work through this table:

- 1) Read the introductory sentence at the top of the table. Then read Q.301 and wait for the respondent to list the contraceptive methods she knows about. These are the methods she can list spontaneously, so circle '1' in the first column for each method that she mentions.
- 2) Now proceed down the list of methods, asking Q.302 for any methods that the respondent did not mention spontaneously, circling '2' if she knows the method, and '3' if she does not know the method.
- 3) After you have completed the list of methods asking about knowledge, return to the top of the list and ask Q.303 (ever use) for each method that the respondent reported having knowledge of.

It is important that you follow the above procedure of first asking about Knowledge for all methods, before asking about Use, so that the respondent does not become confused about whether you are asking about knowledge or use of a particular method.

Q. 301: KNOWLEDGE OF WAYS TO DELAY/AVOID PREGNANCY

This is a general question to find out if the respondent can name any methods of family planning without being prompted. Read the statement at the top of the table: "Now I would like to talk about family planning - the various ways or methods..." Then read Q.301: "Which ways or methods have you heard about?" Wait for the woman to tell you which methods she knows about. Circle '1' for SPONTANEOUS YES in the first column, for each method that she mentions "spontaneously." Do not prompt her in any way with the names of methods while you are recording her SPONTANEOUS answers. Spontaneous means the woman can give the method without any probing from you. If she mentions a traditional or folk method (such as herbs), or any method not listed in the table, circle '1' for SPONTANEOUS YES for Method 11 at the bottom of the table and write the name of the method in the space provided. After she has mentioned the methods she has heard about, ask (by reading the question in Method 11) if she has heard about any other methods to make sure she has finished listing all the methods she is familiar with. If she mentions more than two other methods for Method 11, record only the first two methods mentioned.

Q. 302: METHODS READ OUT TO THE RESPONDENT

Once you have recorded all methods the respondent mentioned spontaneously, proceed to Q.302. Ask Q.302 for each method the respondent did not mention spontaneously. For example, if she did not mention the pill spontaneously, ask her about it now by reading the description of the method: "Have you ever heard of the pill? Women can take a pill every day." If she says she has heard of it, record '2' for PROBED YES. If she has never heard of the pill, record NO by circling '3'. Repeat this for each method that she did not mention spontaneously, reading the description of each method.

The respondent may not always understand what you are talking about when you describe a particular method. In such cases, repeat the description. If she still does not understand, you may need to explain the method in different words, or in slightly greater detail. For this, you need to have some knowledge of these contraceptive methods yourself and must be familiar with names which people use in referring to each method. Some additional information about selected methods is given below:

INJECTABLE:

A shot that is normally given every three or six months and is also known as Depo-provera or Noristerat.

IMPLANTS:

Also called Norplant, these small rods are surgically implanted in a woman's upper arm. They usually protect a woman against pregnancy for five years.

DIAPHRAGM, FOAM, JELLY:

In this case, we have grouped together a large number of female methods that are used in the vagina, including diaphragm, spermicidal foam, jelly, foaming tablets, etc. You must find out if the respondent has heard of any of these methods.

FEMALE STERILIZATION:

There are several types of sterilization operations a woman can have, for example, 'tube tie' (tubal ligation), or removal of the womb, uterus, or ovaries. You should stress the phrase 'an operation not to have any more children'. Operations to remove the womb or uterus are often performed for reasons other than to provide contraceptive protection. Only when the operation was performed to enable the woman to stop having children should you record it as a sterilization.

MALE STERILIZATION:

This is a comparatively minor operation done on men for contraceptive purposes. It is also called vasectomy.

PERIODIC ABSTINENCE:

This is also called the safe period, rhythm, or the calendar method. Periodic abstinence is based on the principle that by not having sexual relations on certain days of her monthly cycle, a woman can avoid becoming pregnant. Note that this is not the same as prolonged abstinence where the couple stops having sexual relations for months at a time to avoid pregnancy without regard to the woman's monthly cycle. To ensure that the respondent understands, stress the phrase 'on the days of the month she is most likely to get pregnant' while putting the question to the respondent. Also, if a woman does not feel like having sex on particular days of her cycle, that does not mean that she is using periodic abstinence. She has to be avoiding sex in order to avoid pregnancy.

ANY OTHER METHODS:

Women may mention traditional methods such as certain herbs or medicines. If so, write the name of the method or methods. If she mentions prolonged abstinence, breastfeeding or abortion, write these down, since she considers them methods of family planning.

At first you may feel embarrassed to talk about and describe these methods, but remember, if you are embarrassed, you may increase the embarrassment of the respondent. You should keep from smiling or giggling so that you encourage her to be direct, and to feel more comfortable talking with you about this subject.

Q. 303: EVER USE OF CONTRACEPTIVE METHODS

Once you have completed Qs.301 and 302, you are ready to ask the respondent about use of contraception. However, before you ask Q.303 for each method, you must first check whether the respondent reported having knowledge of the method in Qs. 301 and 302. Ask Q.303 for each method that has either a '1' or a '2' circled in the first column, indicating that the respondent has heard of the method. Do not ask Q.303 for methods the woman has not heard of (code '3' circled in Q.302).

When asking about the use of female sterilization say: "Have you ever had an operation to avoid having any more children?"

In asking Q.303 for male methods, such as the condom and withdrawal, use the phrase: "Have you and your husband or any partner ever used (condoms/withdrawal)?" Similarly, when asking about male sterilization say: "Have you ever had a partner who had an operation to avoid having any more children?" If she has had more than one husband or partner, we are interested in finding out whether any of them ever used condoms or withdrawal with her, or was sterilized. Remember that the answer to this question is YES even if the respondent used a method for only a short time, or only with one partner.

If she has named any other methods in Q.301 (Method 11), be sure to ask if she ever used them in Q.303 and record her answer.

Q. 304: FILTER FOR EVER USED A METHOD

This is a filter for you to screen women according to whether they have ever used any method or have never used any method. Check the answers to Q.303 and mark the appropriate box in Q.304. The box on the left which is labelled NOT A SINGLE YES is for a woman who has not a single YES recorded in Q.303. This would be a woman who has never used a method of contraception. The box on the right which is labelled AT LEAST ONE YES is for a woman who has at least one YES recorded in Q.303. This means the woman has used at least one method of contraception.

Qs. 305 and 307: PROBE FOR EVER USED

The purpose of these questions is to be certain that neither the respondent nor her husband (or partner) has ever used anything to delay or avoid getting pregnant, since contraception is one of the most important features of the survey.

If the woman responds YES to Q.305, ask Q.307 to find out what she has used or done. Note that you should not record the answer to Q.307 in the coding section to the right of the question. Instead, go back to the contraceptive table and correct Qs.303 and 304 (and Q.302 if necessary). For example, if the woman says here that her husband has used a condom with her, you may have to change Q.302 in the row for the condom from Code '3' to Code '2'. Then, you must change Q.303 to Code '1'. Finally, correct the filter in Q.304 and then continue with Q.308.

CONTRACEPTION TABLE

<p>Now I would like to talk about family planning - the various ways or methods that a couple can use to delay or avoid a pregnancy.</p> <p>CIRCLE CODE 1 IN 301 FOR EACH METHOD MENTIONED SPONTANEOUSLY. THEN PROCEED DOWN COLUMN 302, READING THE NAME AND DESCRIPTION OF EACH METHOD NOT MENTIONED SPONTANEOUSLY. CIRCLE CODE 2 IF METHOD IS RECOGNIZED, AND CODE 3 IF NOT RECOGNIZED. THEN, FOR EACH METHOD WITH CODE 1 OR 2 CIRCLED IN 301 OR 302, ASK 303.</p>				
301	Which ways or methods have you heard about?	302 Have you ever heard of (METHOD)?		303 Have you ever used (METHOD)?
		SPONTANEOUS YES	PROBED YES NO	
01	PILL Women can take a pill every day.	①	2 3 <input type="checkbox"/>	YES ① NO 2
02	IUD Women can have a loop or coil placed inside them by a doctor or a nurse.	①	2 3 <input type="checkbox"/>	YES 1 NO ②
03	INJECTABLES Women can have an injection by a doctor or nurse which stops them from becoming pregnant for several months.	1	② 3 <input type="checkbox"/>	YES 1 NO ②
04	IMPLANTS Women can have several small rods placed in their upper arm by a doctor or nurse which can prevent pregnancy for several years.	1	2 ③ <input type="checkbox"/>	YES 1 NO 2
05	DIAPHRAGM, FOAM, JELLY Women can place a sponge, suppository, diaphragm, jelly, or cream inside themselves before intercourse.	1	2 ③ <input type="checkbox"/>	YES 1 NO 2
06	CONDOM Men can put a rubber sheath on their penis during sexual intercourse.	①	2 3 <input type="checkbox"/>	YES ① NO 2
07	FEMALE STERILIZATION Women can have an operation to avoid having any more children.	1	② 3 <input type="checkbox"/>	Have you ever had an operation to avoid having any more children? YES 1 NO ②
08	MALE STERILIZATION Men can have an operation to avoid having any more children.	1	② 3 <input type="checkbox"/>	Have you ever had a partner who had an operation to avoid having children? YES 1 NO ②
09	RHYTHM, PERIODIC ABSTINENCE Every month that a woman is sexually active she can avoid having sexual intercourse on the days of the month she is most likely to get pregnant.	1	② 3 <input type="checkbox"/>	YES 1 NO ②
10	WITHDRAWAL Men can be careful and pull out before climax.	1	② 3 <input type="checkbox"/>	YES 1 NO ②
11	Have you heard of any other ways or methods that women or men can use to avoid pregnancy?	①	3	YES 1 NO ②
		<p>HERBS</p> <p>_____ (SPECIFY)</p> <p>_____ (SPECIFY)</p>		<p>YES 1 NO ②</p> <p>YES 1 NO 2</p>
304	<p>CHECK 303:</p> <p>NOT A SINGLE "YES" (NEVER USED) <input type="checkbox"/></p> <p>AT LEAST ONE "YES" (EVER USED) <input checked="" type="checkbox"/> → SKIP TO 308</p>			

Q. 306: ENTER PERIODS OF NONUSE IN CALENDAR

If the woman says NO in Q.305, that she (or a partner) has never used a method to delay or avoid pregnancy, record '0' in Column 1 of the calendar in each blank month (where there is no 'B', 'P' or 'T' code). Now, for women who have never used a method of family planning, there should be a code in each month of Column 1. Skip to Q.331.

Q. 308: FIRST METHOD

Here we want to know the very first method that the woman used to delay or avoid pregnancy. Remember, this could include methods used by a partner with her, such as condom and withdrawal. If the method is not listed here, circle '96' and specify the method in the OTHER category.

Q. 309: LIVING CHILDREN WHEN FIRST USED FAMILY PLANNING

This question refers to the number of living children the respondent already had the first time she used a method to avoid getting pregnant. If she has never given birth to a child, or if she started to use family planning before she had any children, record '00'.

Q. 311: FILTER FOR STERILIZATION

Check Q.303 in the contraceptive table to see if the woman is sterilized. If she is, mark the box on the right. If she is not sterilized, mark the box on the left. Follow the appropriate skip pattern.

Q. 312: FILTER FOR PREGNANCY

Check Q.227 to see if the woman is pregnant. If she is not pregnant, or is not sure if she is pregnant, mark the box on the left. If she is pregnant, mark the box on the right. Follow the appropriate skip pattern.

Qs. 313-314A: CURRENT USE OF CONTRACEPTION

These questions are some of the most important in the questionnaire. Since methods are effective for different lengths of time, you may have some difficulty deciding if a particular respondent is currently using a method. Coitus-related methods such as condoms, vaginal methods and withdrawal are used with each act of intercourse, so current users of these methods will have used them during the most recent acts of intercourse. Current users of the pill should be taking pills daily. Other methods provide ongoing protection without daily or regular action by the woman. Contraceptive injections may have been administered 3-6 months earlier and still provide protection, while implants provide protection for up to five years, or until removed. An IUD, once inserted, protects against pregnancy until removed or expelled. If the woman has been sterilized, you will record FEMALE STERILIZATION as the current method. Or, if the woman's current partner has been sterilized, you will record MALE STERILIZATION as the current method. If, however, she is no longer married to (or living with) a former partner who had a vasectomy, this should not be noted as the current method.

If the woman mentions more than one method, circle the method which is higher on the list in Q.314, and follow the skip pattern for that method.

Check to be sure that the response to Q.314 is consistent with the responses to Q.302 and Q.303; for example, the respondent may say that she is using the pill but reported in Q.302 that she didn't know the pill, or reported in Q.303 that she has never used the pill. If this happens, probe further and correct the responses in Q.302 to Q.314 as necessary.

While it is not common, you may encounter a woman who has had a hysterectomy, which is the surgical removal of all or part of the uterus. Such a woman is unable to become pregnant, and therefore does not need to use contraception in order to avoid pregnancy. But because the operation is usually not performed for contraceptive reasons, we will consider a woman with a hysterectomy as a nonuser of contraception. She is similar to a woman who is menopausal. In the filter in Q.311 you would mark the box labelled WOMAN NOT STERILIZED, and in Q.312 the box labelled NOT PREGNANT. In Q.313 record NO (she is not currently using a method of contraception), and skip to Q.325 to ask about and record in the calendar any relevant contraceptive use that occurred before the hysterectomy. In the filter in Q.327, record NOT ASKED and skip to Q.331. Finally, in Q.331 record HYSTERECTOMY.

Qs. 315 and 316: PILL BRAND

If the respondent is currently using the pill, we want to know the type of pill that she is using. Ask to see her package of pills. If you see the package, circle '1' and record the brand name. If it is determined while inquiring about the brand name that the respondent has stopped pill use, Q.314 should be corrected. If the woman is using pills but cannot show the package, circle '2' in Q.315 for PACKAGE NOT SEEN and go to Q.316 to ask if she can name the brand. Write the brand name on the line, but leave the boxes in Qs. 315 and 316 blank; they will be filled in after fieldwork is completed. If she does not know the brand name, circle '98'.

Q. 317: COST OF ONE CYCLE OF PILLS

This question applies to the last time she bought pills. This is only the cost of the pills. It does not include the cost of a doctor's visit. Be sure to write the cost in the correct units. If she does not have to pay for them, record FREE. If someone buys the pills for her, they are not free if the other person has to pay for them; ask how much they cost. If she does not know how much the pills cost, record DON'T KNOW.

Q. 318: WHERE OBTAINED STERILIZATION

This question applies to either the respondent's, or her partner's, sterilization. Record her response in two ways: write the name of the place in the space provided on the questionnaire, and also circle the code which indicates what type of place it is. When choosing a code, you need to know whether the place is in the public sector (run by the government), or in the private sector. If the respondent does not know whether the place is governmental or private, inform your supervisor after you complete the interview. Since you have recorded the name of the place, your supervisor will be able to learn what type of place it is from other people in the area.

Qs. 319 and 320: STERILIZATION REGRET

Again, this question is asked if either the woman, or her partner, is sterilized. We want to know whether the woman regrets the fact that she, or her partner, had the sterilization operation. If she says she does regret that she (or her partner) had the operation, ask Q.320 and record why she regrets it.

The category CHILD DIED is to be used only if the respondent tells you that since the sterilization a child has died and she would like to have a child to replace the one that has died, but is unable to because of the sterilization. Do not use this code just because a child has died; it is only appropriate if the respondent tells you specifically that this is the reason for her regret.

Q. 321: DATE OF STERILIZATION OPERATION

If the respondent does not remember the date when she or her partner had the sterilization operation, probe to help her remember. Perhaps relating it to the age and date of birth of her youngest child would help. You must get a date, even if it is just your best estimate.

Q. 322: ENTER STERILIZATION IN CALENDAR

The respondent or her partner is sterilized, so enter a Code '7' or '8' (depending on whether the woman or her partner is sterilized) in Column 1 of the calendar in the month of interview and in each month back to the date of the operation or to January [1992] if the operation occurred prior to that date. Notice that the skip from this question depends on which box you marked in the filter (a sterilization before January [1992] will skip to Q.329A and a sterilization after January [1992] will skip to Q.325).

Q. 323: DAYS TO ABSTAIN

This question will only be asked of women who have told you they are currently using periodic abstinence to avoid pregnancy.

Qs. 324 and 325: CONTRACEPTIVE HISTORY

Questions 324 and 325 are instructions on how to fill Columns 1 and 2 of the calendar. Q.324 gives instructions for coding current use in Column 1. To begin with, you should record the code of the contraceptive method the respondent is currently using (check Q.314) in the month of interview in Column 1. You then need to find out how long she has been continually using her current method by asking a question like: "**How long have you been using (METHOD) continuously?**" Record the code for her current method in each month of continuous use. Be sure to record all months of use. If this method was used for an extensive period of time, write the code in the current month and the beginning month, and join them with a squiggly line. Do not draw the squiggly line through months she did not use a method.

Question 325 asks both current and non-current users of contraception about previous times that they have used contraception since January [1992]. In Q.324 you recorded the respondent's most recent episode of contraceptive use in Column 1. You now need to find out the rest of the story about her history of contraceptive use since January [1992]. Begin by reading the introductory sentence in Q.325, so that the respondent understands what information you are asking for.

Now use the events that are already recorded in the calendar (birth dates, names, pregnancies, and pregnancy losses) as reference points for yourself and the respondent. Use these events to ask questions about contraceptive use and non-use in the periods of time around these events.

For each period of time in Column 1 that is still empty (no B, P, or T), you need to enter a code that reflects the respondent's contraceptive story. To do this you need to find out several pieces of information:

- 1) Was the respondent using a method of contraception in a period of time, and if so, what method was she using.
- 2) When did she start using that method.
- 3) For how long did she use that method continuously; when did she stop using that method.
- 4) What happened when she stopped using that method; did she not use any method, did she start using a different method, or did she become pregnant?

For example, if the respondent has two births, Mary and John, you could ask a series of questions that would fill in the respondent's contraceptive history in the period of time between the births of Mary and John. The first question you could ask would be: **"Did you, or did you not, use any contraceptive method between the births of Mary and John?"** (The respondent tells you that she used condoms.) You would then ask: **"How long after the birth of Mary did you begin using condoms?"** (She tells you the first month after the birth of Mary.) This gives you the starting month in which she began using condoms, but you also need to know for how long she used condoms continuously and when she stopped using them. So you could ask: **"For how long did you use condoms continuously?"** (She tells you 10 months.) Now you know when she started using condoms and when she stopped, but say there are 15 months between the birth of Mary and the time she became pregnant with John. You now need to find out what the respondent was doing between the time she stopped using the condom and became pregnant with John. Ask a question like: **"After you stopped using the condom, and before you became pregnant with John, did you, or did you not, use any contraceptive method?"** (She tells you she did not use any method.)

Now you know:

- 1) If she used a contraceptive method between Mary and John, and which method she used.
- 2) At what point she began using that method after the birth of Mary.
- 3) For how long she used that method continuously and when she stopped using that method.
- 4) Whether or not she used another method after she stopped using the condom and before the birth of John.

This gives you the respondent's complete contraceptive story between the births of Mary and John. You would continue in a similar way until you have filled in each month of Column 1 with a code. Enter the codes of the methods she used in each month of use and '0' in the months where she did not use a method. Once you have recorded periods of use and non-use, Column 1 should be completely filled. You will have accounted for every month since January [1992] by recording either births, current pregnancies, lost pregnancies, use of contraception, or nonuse of contraception.

After completing Column 1, you must complete Column 2. For each time there is an interruption of contraceptive use in Column 1, you need to ask the respondent why she stopped using that method. Do this by asking: **"Why did you stop using the (METHOD)?"** Record the reason for the interruption in Column 2 in the same month as the last month of use of that method recorded in Column 1.

For example, when a woman stops using condoms, in the next month she may:

- a) be using a different method
- b) not be using any method
- c) be pregnant.

In cases which a respondent tells you she used the method until she got pregnant, you will ask: **"Did you become pregnant while using (METHOD), did you stop to become pregnant, or did you stop for some other reason?"** It may happen that several months passed between the time that she stopped using and actually became pregnant. If she did in fact become pregnant while using the method, you will code

'1' in Column 2, otherwise, you will ask: "**How many months passed between the time you stopped using (METHOD) and you became pregnant with (NAME)?**" Enter '0' in Column 1 for each month she was not using a method.

Q. 327: FILTER FOR CURRENT METHOD

Look back to Q.314 and circle the same method here as is circled in Q.314; this is the method currently being used. Follow the appropriate skip pattern.

Q. 328: SOURCE OF CURRENT METHOD

Mention the method you recorded her as using in Q.327. For example, if she is using condoms with her husband, ask "Where did you obtain the condoms the last time?" If she says her husband, or someone else, got the method for her, ask if she knows where they got it. If the method required a prescription, this question pertains to where the prescription was filled.

Record the response in two ways; write the name of the place in the space provided on the questionnaire and also circle the code which indicates what type of place it is. When choosing a code, you need to know whether the place is in the public sector (run by the government), or in the private sector. If the respondent does not know whether the place is governmental or private, inform your supervisor after you complete the interview. Since you have recorded the name of the place, your supervisor will be able to learn what type of place it is from other people in the area.

If the woman tells you she got her pills from a doctor, ask her where the doctor is located. She may tell you a hospital, ask her for the name of the hospital, and write it down. Then ask her whether it is run by the government or is privately owned. Only record PRIVATE DOCTOR if the doctor has his own practice, which is not located within a larger facility.

Note that you only need to write the name of the source if it is a hospital, health center, or clinic. It is not necessary to write the name of the source if it was a private doctor, a field worker, or a friend or relative.

Qs. 329 and 329A: ALTERNATIVE SOURCE FOR METHOD

The respondent has already told you where she obtained her method of contraception the last time, but we are also interested in knowing if she is aware of another place where she could get that method.

Q. 330: REASONS FOR CHOOSING CURRENT SOURCE

If a respondent knows of more than one place to obtain her method, we want to know why she went to the place that she did (which you recorded in Q.328 or 318), rather than to some other place which she knows about. Record the woman's responses in two ways; write her response in the space provided, and then circle the appropriate code. There are many response categories here so be certain that you know what each of them means. If the woman gives you a reason that does not fall into one of the categories, write it in OTHER and circle '96'. All answers from this question skip to Q.334.

Q. 331: REASON FOR NOT USING A METHOD

This question is asked of women who are not currently using a method of contraception (they answered NO in Q.313), women who have never used a method, and women who are currently pregnant. If the respondent is currently pregnant, there is no need to ask Q.331; simply record PREGNANT and proceed to Q.332. Otherwise, there are many reasons why a person may not be using contraception, so listen to your respondent carefully. Record what the respondent considers to be her main, or most important, reason for not using contraception.

SIDE EFFECTS are undesirable consequences of using a method which do not adversely affect the health of the user. For example, side effects may be spotting or bleeding with the pill, while HEALTH CONCERNS may be that she heard that the pill may be linked with breast cancer. INCONVENIENT would be if the method is too troublesome to use, such as being messy. This is inconvenient to use, but not inconvenient to get the method, since there is a separate category LACK OF ACCESS/TOO FAR.

RELIGIOUS PROHIBITION means that she feels her religion does not allow the use of family planning. There are three other categories under the heading of OPPOSITION TO USE. RESPONDENT OPPOSED means that the respondent herself does not approve of family planning. If her husband or partner is opposed to family planning, circle code for HUSBAND OPPOSED. If she says she is not using because someone other than her partner tells her they are opposed to her using family planning, code OTHERS OPPOSED.

Code INFREQUENT SEX if the respondent says she is not sexually active enough to be using a method (NOT HAVING SEX would be appropriate if she says she is not sexually active at all). Code SUBFECUND/INFECUND if she thinks she cannot get pregnant (not including being menopausal). MENOPAUSAL means she is no longer menstruating and therefore cannot get pregnant. If the woman had an operation to remove her uterus, record HYSTERECTOMY.

If the woman's main reason is not listed as a response, write her response on the OTHER line and circle '96'. If the woman does not know at all why she is not using contraception, record DON'T KNOW.

Qs. 332 and 333: KNOWLEDGE OF SOURCE

These questions are asked of women who are not using a method of contraception, or women who are using a traditional method of contraception. If the respondent insists that she isn't using a method, or doesn't intend to use a method (or doesn't need to go anywhere to obtain her traditional method), simply explain that we want to know if she is aware of a place where methods are available if someone were to ask her for advice on where to get them.

When recording her response, you need to know whether the place is run by the government, or is privately owned (follow the same procedure as described for Q.328). If the respondent cannot tell you this, inform your supervisor, who will learn what type of place it is from other people in the area.

Q. 334: VISITED BY FAMILY PLANNING WORKER

This question is to ascertain whether a family planning worker visited the respondent in the last 12 months specifically to discuss family planning.

Q. 335: VISITED HEALTH FACILITY IN PAST YEAR

This question refers specifically to the respondent and whether she went to a health facility for any purpose in the past 12 months. The visit did not have to be specifically for family planning.

Q. 336: FAMILY PLANNING INFORMATION AT THE HEALTH FACILITY

The respondent need not have gone to the health facility for purposes of discussing family planning for the answer to be YES. Staff persons may take the opportunity to discuss family planning even if a client comes to the facility for another purpose.

Qs. 337 and 338: BREASTFEEDING AND CHANCES OF BECOMING PREGNANT

Question 337 is a simple question to find out whether the respondent thinks breastfeeding can affect a woman's chance of becoming pregnant.

For those women who answered YES or DON'T KNOW to Q.337, we want to know how they think breastfeeding affects a woman's chance of becoming pregnant. It is important that you read the whole question so as not to lead the respondent into giving you a response. There are 4 response categories: INCREASED, DECREASED, DEPENDS and DON'T KNOW.

Q. 339: FILTER FOR BIRTHS

This is the same as the filter in Q.210; mark the appropriate box and follow the skip pattern.

Qs. 340, 341 and 342: BREASTFEEDING TO AVOID PREGNANCY

Frequent and intense breastfeeding can reduce the risk of pregnancy in the first several months following delivery, so we want to know if women have used breastfeeding as a method to avoid pregnancy. Many women breastfeed their infants, so be sure that the respondent understands that we are asking specifically about use of breastfeeding as a safeguard against pregnancy.

Q.340 asks whether the respondent has ever relied on breastfeeding for protection against pregnancy.

Q.341 is a filter to check Qs. 227 and 311. If the respondent is pregnant or she or her partner is sterilized, mark the box on the right. If she is not pregnant and not using one of these methods, mark the box on the left. Follow the appropriate skip pattern.

D. SECTION 4. HEALTH OF CHILDREN

The objective of this section is to obtain information related to the health of children (both alive and dead children) and the mother. The topics include antenatal care, delivery care, breastfeeding, child nutrition, vaccinations and recent illnesses of young children. We ask these questions about births in the previous three calendar years as well as births in the year of the survey. Recall that in Section 2 we obtained information on all births, beginning with the woman's first birth. Because in this section we are interested in recent births, we begin with the woman's last birth.

SECTION 4A. PREGNANCY AND BREASTFEEDING

Q. 401: FILTER FOR BIRTHS SINCE JANUARY [1994]

Check Q.225 to see whether the respondent has had one or more births since January 1, [1994]. Mark the appropriate box.

Qs. 402-404: COLUMN HEADINGS FOR BIRTHS IN THE LAST 3 YEARS

All births born since January 1, [1994] will be entered in this table. Look back to Q.212, to the last birth (last row filled in). Fill in this line number, as well as the child's name, in the table heading for the LAST BIRTH in Qs.403 and 404. Also mark whether the child is alive or dead after checking for this in Q.216. Then fill in the child's name at the top of the next 4 pages. Consider twins as separate births and list them in separate columns, taking care to keep their positions in this table consistent with their order in the birth history. For example, if the last births were twins, Judy (line 07 in Q.212) and Jeffrey (line 08 in Q.212), Jeffrey should be recorded as the LAST BIRTH in this table, and Judy as the NEXT-TO-LAST birth. Recall that if the last children in Q.212 are twins and one twin is dead, the living twin should be recorded as the last birth. This will allow you to talk to the respondent about the living twin first, which may put her at ease before talking about the dead twin.

When you have filled in the names and survival status of all the births since January [1994], proceed to Q.405. Ask the questions in Section 4A for the last born child, then ask these questions for the next-to-last birth, etc. Be sure to insert the name of the child where indicated when asking questions so there is no confusion as to which child you are referring to. You will not move on to Section 4B until you have asked all the appropriate questions for all the births in Section 4A.

If the respondent has had more than two births since January [1994], write SEE CONTINUATION SHEET at the top of Section 4A. Take a fresh Individual Questionnaire, fill in all the information on the cover page and write CONTINUATION on the top. Then on the second Individual Questionnaire, change the heading of the second column from NEXT-TO-LAST BIRTH to SECOND-FROM-LAST BIRTH and then record the information for the additional birth(s). Leave the first column of the second questionnaire blank. Notice that the SECOND-FROM-LAST BIRTH will be recorded in the second column (previously headed NEXT-TO-LAST BIRTH) and will now be labelled SECOND-FROM-LAST. After collecting information for the second-from-last birth in sections 4A and 4B, return to the original questionnaire to complete the interview.

Q. 405: DESIRED TIMING OF PREGNANCY

Read the entire question to the respondent before accepting an answer, stressing the underlined words.

Q. 406: HOW LONG TO WAIT

Record the answer in either months or years, and circle the corresponding code. If the respondent gives a general answer such as "I would have liked to have waited until I was ready," ask her how many months or years she would like to have waited. Record the extra time beyond her pregnancy that she would have like to have waited. For example, if a woman became pregnant 18 months after her previous birth, and she tells you she would have preferred a two year (24 months) interval before becoming pregnant again, you would record '06' months (24 - 18 = 6).

Q. 407: ANTENATAL CHECK

This question refers to any antenatal care given by a health care provider during her pregnancy. This is to specifically check her pregnancy, and not for other reasons. The antenatal care is usually given at a health care facility, but is sometimes provided in the pregnant woman's home. This is a two-part question because if the respondent answers YES, you must ask whom she saw. Ask the woman if she saw more than one person and record all persons seen.

Notice that the codes here are letters of the alphabet rather than numbers; letter codes are used to remind you to circle all responses which apply. If the respondent did not see anyone at all for a check on her pregnancy, only circle the code for NO ONE and skip to Q.410; otherwise proceed with Q.408.

Qs. 408 and 409: FREQUENCY OF ANTENATAL CHECKUPS

Ask the respondent how many months into her pregnancy she was when she received her first antenatal care. If she does not remember, ask her how many periods she had missed at the time. Then ask her how many times in total she saw someone for antenatal care during her pregnancy. This refers to care related to her pregnancy and would not include seeing a doctor or nurse for other reasons.

Qs. 410 and 411: TETANUS TOXOID INJECTION

Neonatal tetanus is a disease which kills many babies. This disease is easily prevented by a woman receiving an immunization against tetanus while she is pregnant with the baby; the immunity against tetanus is transferred to the baby before birth. This immunization is usually given to the pregnant woman as an injection in the arm. Since more than one injection may be required in order to provide protection for their babies, ask in Q.411 how many times the woman received the injection during that pregnancy. Another name for tetanus is lockjaw.

Q. 412: PLACE OF BIRTH

The intent of this question is to identify births delivered in a health facility. If the woman gave birth in a health facility, ask whether the place is in the public (run by the government) or private sector. If the respondent does not know whether the place is run by the government, or is private, write the name of the place and tell your supervisor. Your supervisor will learn from other people in the community whether the place is public or private, and then circle the appropriate code.

Q. 413: ASSISTANCE AT DELIVERY

Again, when asking the question, be sure to insert the name of the child you are referring to, so that there is no confusion. If she is not sure of the status of the person who attended the delivery, for example, if she doesn't know whether the person was a midwife or a traditional birth attendant, probe. The codes are letters of the alphabet to remind you to circle codes for all the people she says attended her.

Q. 414: COMPLICATIONS AT DELIVERY

In this question you are asking whether the mother experienced any of four complications at the time of birth of the child, or soon after.

The first complication you will ask about is long (or prolonged) labor. The respondent needs to understand that you are only asking about the time during which the contractions (or labor pains) became regular and strong, and were a predictable number of minutes apart. A respondent may tell you her labor was long, but a YES response is appropriate only if she experienced such contractions for more than 12 hours.

The second complication you will ask about is related to bleeding following childbirth. When asking this question, stress that you are talking about an "excessive" amount of blood, and not just the normal amount of bleeding that accompanies childbirth.

The third complication is a high fever accompanied by a bad smelling vaginal discharge. A very high fever will often cause a person to have cold sweats and trembling. Their skin may be warm to the touch and their face may be flushed. Women normally have vaginal discharge after childbirth, but we are asking about discharge that is not normal for the respondent. It smells bad and may be of a different color and consistency.

The fourth complication is convulsions caused by eclampsia, a condition some women suffer during pregnancy, which is unrelated to fever. The type of convulsions we are asking about will have caused the respondent's muscles to become stiff, and she may also have shaken uncontrollably, had her eyes roll back and lost consciousness. Sometimes women will suffer from convulsions related to a fever, which may cause them to shiver (tremble) like they are cold; we are not asking about this type of convulsion here.

Q. 415: CAESAREAN SECTION

A caesarean section is a delivery of a baby through an incision in the woman's abdomen and womb, rather than through the birth canal. Such a delivery is necessary for some women due to pregnancy complications. Find out if the baby was delivered by an operation and not through the birth canal.

Q. 416: SIZE OF BABY

Read the entire question before accepting an answer. This is the woman's own opinion about the size of her baby. Some respondents may give you the baby's birth weight, instead of a size. Insist that you want to know whether she thinks the baby was VERY LARGE, LARGER THAN AVERAGE, AVERAGE, SMALLER THAN AVERAGE, or VERY SMALL. If the respondent herself is unable to tell you the baby's size at birth, do not try to guess the answer based on birth weight information.

Qs. 417 and 418: WEIGHT AT BIRTH

If the baby was not weighed at birth, record NO in Q.417 and skip to Q.419. If the baby was weighed at birth, ask Q.418 to find out how much the baby weighed.

Notice that in Q.418 there are two sets of boxes for recording the birth weight; the first is GRAMS FROM CARD, and the second is GRAMS FROM RECALL. GRAMS FROM CARD refers to a written record of the birth weight on a document, such as the vaccination card, the antenatal card, or the birth certificate. GRAMS FROM RECALL refers to the mother's verbal report of her child's birth weight, which she is reporting from memory.

Fill in only one set of boxes and always record the birth weight from the card when possible. The only time you will fill in the boxes for GRAMS FROM RECALL is if there is no card, or no birth weight recorded on the card. When recording the birth weight, first circle the appropriate code in front of the boxes; '1' for GRAMS FROM CARD, and '2' for GRAMS FROM RECALL, and then fill in the birth weight. If there is no weight available from a card and the respondent says she cannot remember the exact birth weight, ask her to give you her best estimate. Only record DON'T KNOW if she absolutely cannot remember even an approximate weight.

Qs. 419-424: POSTPARTUM AMENORRHEA AND ABSTINENCE

After a woman has given birth, there is a length of time when she is less likely to become pregnant again because she does not have her monthly menstrual periods (postpartum amenorrhea) or she has not resumed sexual relations (postpartum abstinence). Note that Q.419, Q.422, and Q.423 are only asked about the last birth, although we do ask about length of time without a period (Q.421) and without sexual relations (Q.424) following all births. Record the woman's answer in number of completed months. If in asking Q.420 for the next-to-last birth you learn that the woman became pregnant again before the return of her menstrual periods, record NO.

Q. 425: EVER BREASTFED CHILD

Breastfeeding is important for fertility and child health. In this question it does not matter how long the respondent breastfed the child, only whether or not she ever gave the child the breast, even if the baby died very young.

Q. 426: WHEN BEGAN BREASTFEEDING

If the mother reports that the baby was put to the breast immediately after birth, circle '000'. If the mother began breastfeeding within 24 hours of the birth, circle '1' and record the number of hours that passed before the baby was put to the breast. Record the time in completed hours or days. For example, if the woman said she began breastfeeding within 10 minutes of the birth, circle '1' and record 00 hours. If she began breastfeeding more than 24 hours after the birth, circle '2' and record the number of days. Record in completed number of days. For example, if the baby was first breastfed 30 hours after delivery, circle '2' and record 01 days.

Q. 427: FILTER FOR CHILD ALIVE

Check Q.404 to see if the child is alive or dead. If the child is alive, mark the box on the left (ALIVE). If the child is dead, mark the box on the right. Follow the appropriate skip pattern.

Q. 428: STILL BREASTFEEDING

This question is only asked if the child is still alive. It does not matter if she is giving the child other liquids or foods as well as breastfeeding; we are interested in knowing whether the child is being breastfed at all.

Q. 429: NUMBER OF MONTHS BREASTFED

This question is for women who are no longer breastfeeding the child in question. It is important to try to get as accurate information as possible. If the respondent says she can't remember how long she breastfed a child, urge her to think about it for a while, or ask her if she remembers how old the child was when she completely stopped breastfeeding him or her. If she gives an approximate answer, such as "about one year," establish if it was exactly one year or how much more or less.

Record the number of months until she completely stopped breastfeeding the child. It does not matter if she was giving the child other liquids or foods as well as breastfeeding; we are interested in how many months she was breastfeeding at all.

Q. 430: WHY STOPPED BREASTFEEDING

Circle the first response mentioned.

WEANING AGE/AGE TO STOP means the mother thought her child became too old to continue breastfeeding. MOTHER WORKING means the mother was unable to continue breastfeeding because she was working. INSUFFICIENT MILK reflects the mother's perception that there was not enough milk or no milk. A woman may experience NIPPLE/BREAST PROBLEMS, such as cracked nipples, or engorged breasts due to insufficient emptying of milk, which lead her to stop feeding.

Q. 431: FILTER FOR CHILD ALIVE

Check Q.404. If the child is alive, mark the box on the left and skip to Q.434. If the child is dead, you have finished the questions in Section 4A for this child. For the dead child you will mark the box on the right and then do one of two things: a) if there is another birth in the table (another child born since January [1994]), go back to Q.405 and ask the questions in Section 4A for that child, or b) if there are no more births (you have obtained information for all the births born since January [1994]), you will go to Q.442 and begin Section 4B.

Qs. 432 and 433: NIGHTTIME AND DAYTIME BREASTFEEDING

These questions are only asked if the child is still being breastfed. Find out in Q.432 how many times she put her child to the breast last night, that is between sunset and sunrise. If she feeds the child on demand, or she can't remember how many times she breastfed last night, ask her to estimate. In Q.433, we want to find out how many times she put her child to the breast yesterday, that is, during the daytime from sunrise to sunset. Again, if she is not certain, ask her to estimate.

Q. 434: BOTTLE WITH NIPPLE

Since use of bottles with nipples can be unsanitary, and can indicate early or inappropriate weaning, this question seeks to measure bottle feeding practices.

Q. 435: LIQUIDS AND FOODS GIVEN YESTERDAY/LAST NIGHT

The purpose of this question is to determine the types of liquids and foods that mothers give to their children. Read the question slowly and then read the first item on the list. Wait for the woman's response and record YES or NO by circling either '1' (YES) or '2' (NO). Then ask about the next item. Read each item on the list, waiting for the woman's response before going on to the next item.

Q. 436: FILTER FOR FOOD OR LIQUID GIVEN

If at least one '1' (YES) is circled in Q.435, mark the box on the left. If no liquid or food other than breast milk was given (only '2's (NO) or '8's (DON'T KNOW) are circled in Q.435), mark the box on the right. Follow the appropriate skip pattern.

Q. 437: NUMBER OF TIMES ATE YESTERDAY

This includes both meals and snacks. For babies who are no longer breastfeeding do not read the portion in parentheses.

Q. 438: CERTAIN FOODS GIVEN IN PAST WEEK

This is simply the number of days out of the previous 7 days that the child was given each type of food or liquid. For example, if the child ate eggs three times in the last seven days, each on a different day, record '3'. However, if the child ate meat three times, but on the same day, record '1'. If the item has not been eaten by the child at any time in the previous 7 days, record '0'. Ask about one item at a time, recording the response before proceeding to the next item.

Q. 439: SKIP TO NEXT CHILD

At this point, go back to Q.405 to ask questions in Section 4A for the child in the next column. If you have finished these questions for all births in the last 3 years, proceed to Section 4B.

SECTION 4B. IMMUNIZATION AND HEALTH

Qs. 440-442: TABLE HEADING

Complete the table heading, following the same procedure as you did for Section 4A. There is an important difference between Section 4A and 4B. Section 4A obtains information for both living and dead children, while Section 4B obtains information only for living children. However, you still need to complete the table headings for both living and dead children in Section 4B, because all women will be asked about treatment of childhood diarrhea and cough at the end of this section.

Check Q.212 and fill in the line number (Q.441), child's name, and survival status (Q.442) at the top of this page and the child's name at the top of the next 3 pages. Make sure to start with the last birth, then the next-to-last, etc. Use a continuation sheet if there are more than 2 births since January [1994].

After completing Q.442 for all births born since January [1994], start with the LAST BIRTH in the first column and do one of three things: a) if the child is alive, ask Q.443 or, b) if the child is dead, go to the next column for the birth recorded there or, c) if there are no births, go to Q.465.

Q. 443: VACCINATION CARD

You should have obtained documentation (birth certificates and vaccination cards) at the beginning of the interview. If you did not already obtain a card for a particular child, now is the time to ask for it again.

In some cases the respondent may not be willing to take time to look for the health card, thinking that you are in a hurry. Encourage the respondent to look for the health cards of all eligible children. It is critical to obtain written documentation of the child's immunization history; therefore, be patient if the respondent needs to search for the card. When reading the card be very careful. Take your time to read the card, and be certain to match the correct card with the child you are asking about.

If you have already collected a vaccination card for the child, circle '1' for YES, SEEN. If you have not collected the child's vaccination card, ask Q.443 as written. If the respondent says that she has a health card for the child, then ask, "May I see it please?" If the respondent shows you the health card, record YES, SEEN. If the respondent says the child has a health card, but she is unable to show it to you because she has lost it, someone else has it, or it is not accessible to her during the interview, record YES, NOT SEEN for that child. If the respondent says she does not have a card for her child, record NO CARD. Each response has a different skip instruction, so be careful to follow the correct skip pattern.

Q. 444: EVER HAD VACCINATION CARD

If in Q.443 the woman tells you she does not have a card for her child, ask her in this question whether she ever had a card for that child. It is possible that she at one time did have a card, but no longer has it. Circle the appropriate code and skip to Q.447.

Q. 445: RECORDING VACCINATIONS

If the respondent shows you the health card, fill in the responses to Q.445, taking the information directly from the health card. This may not be easy since the health card may list the vaccinations in a different order than the questionnaire. Dates should be recorded with the day first, then the month and then the year. Check the card carefully to see which way the dates are written, because sometimes the month might come first, followed by the day and year. Be very careful to record dates correctly.

Besides recording vaccination dates on the card, some health facilities may also record the dates (appointments) on which the mother should bring her child for the next immunizations. Be very careful not to record a scheduled appointment date as a vaccination date. It is possible that an appointment date was given, but the child never received the vaccination. Only record dates that vaccinations were actually given, and not dates of appointments. Be patient and read the card thoroughly.

Here are some examples:

<u>ENTRY ON HEALTH CARD</u>	<u>CORRECT ENTRY IN Q. 445</u>
	DAY MO YR
March 6, 1993	060393
7 December 1994	071294
9/27/93	270993
July 1995	980795
24/7/96	240796
Measles given	44

If the card shows only part of the date, record '98' for DON'T KNOW in the column for which the information is not given. For example, if the date given was July, 1995, you would record '98' for the Day, '07' for Month, and '95' for Year.

If the card shows that a vaccination was given, but there is no date recorded, record '44' in the DAY column next to the vaccine and leave the month and year blank. However, if a date is given for a DPT vaccination and there is simply a check to show that a polio vaccine was also given, record the date of

the DPT injection on the polio line since this probably indicates that the vaccinations were given on the same day. Some immunization cards have only a single line for DPT1 and POLIO1, DPT2 and POLIO2, etc. If there is a date on one of these lines, record the same date for both the DPT and polio injections.

Q. 446: ANY VACCINES GIVEN BUT NOT RECORDED

Sometimes a child will receive a vaccine but no record is made on the health card. After copying the card, ask the respondent whether the child received any vaccinations that are not recorded on the card. If the child did so, record YES, then find out which vaccine was given, record '66' in the DAY column next to the vaccine received and leave the month and year blank. Only record YES in Q.446 if the respondent mentions one of the following vaccines: BCG, Polio 0, Polio 1-3, DPT 1-3, or measles (i.e., one of the vaccines recorded in Q.445). Skip to Q.449.

Q. 447: EVER HAD A VACCINATION (BUT NO HEALTH CARD)

Only ask this question if you did not see a health card for this child.

Qs. 448-448G: VACCINATIONS FOR CHILDREN WITH NO CARD

If you did not see a child's health card and the respondent tells you that the child did receive at least one vaccination, we want to find out what vaccinations the child received. This is a series of questions on four vaccinations: BCG, Polio, DPT, and Measles.

Read the introductory question (Q.448) and then ask questions 448A-G, following the appropriate skip patterns. Because there are many types of vaccines, we specify how each one is given so the mother will know which vaccine we are asking about. Read the whole sentence before accepting the woman's response.

Notice that there are follow-up questions for the Polio and DPT vaccinations. For the Polio vaccine we ask if the child received it, how many times the child received it, and when the child first received it. Similarly, for the DPT vaccination we ask if the child received the vaccination, and how many times.

Q. 449: FEVER IN LAST 2 WEEKS

Fever is a symptom of malaria and pneumonia, which are two of the principal causes of death for young children in many countries. A response of YES is appropriate only if the fever occurred within the two weeks prior to the date of interview.

Q. 450: COUGH IN LAST 2 WEEKS

A response of YES is appropriate only if the cough occurred within the two weeks prior to the date of interview.

Q. 451: SHORTNESS OF BREATH

This question is only asked if the child had a cough in the past two weeks.

Pneumonia and respiratory infections, which can be accompanied by short, rapid breathing, are a principal cause of death among children.

Qs. 452 and 453: ADVICE OR TREATMENT SOUGHT FOR COUGH

If the woman did not seek advice or treatment from anywhere for the cough, record NO and skip to Q.454. If she did seek advice, go on to ask Q.453. Probe to determine whether she saw more than one person, or went to more than one place, and record all seen. Be careful to distinguish between public and private institutions. If the respondent does not know whether the place is public (run by the government), or private, write the name of the place and tell your supervisor. Your supervisor will learn from other people in the community whether the place is public or private, and then circle the appropriate code.

Q. 454: DIARRHEA IN LAST 2 WEEKS

Diarrhea is a major cause of illness and death among young children in developing countries. If a respondent is not sure what we mean by diarrhea, tell her it means "more than three runny stools per day." While reading this question, emphasize "in the last two weeks."

If the child has had diarrhea in the last two weeks, record YES and continue with Q.455. Skip to Q.464 only if the child did not have diarrhea, or the mother does not know (Code 2 or 8).

Qs. 455: BLOOD IN THE STOOLS

Record whether there was any blood in the stools. Blood in the stools is a symptom of dysentery, an infection caused by a particular bacteria.

Q. 456: NUMBER OF BOWEL MOVEMENTS

Numbers under 10 should be written with a zero in the first box, for example, six would be recorded as 06. Notice that we are not asking about just any day, but specifically about the worst day of the diarrhea episode.

Q. 457: DRINKING DURING DIARRHEA

Mothers may change the amount of fluids given while a child has diarrhea. Read the entire question before accepting a response.

Q. 458: EATING DURING DIARRHEA

Mothers may change the amount of food given while a child has diarrhea. Read the entire question before accepting a response.

Q. 459: SPECIAL PACKET

"A special packet" refers to a packet of Oral Rehydration Salts (ORS), a treatment for diarrhea which consists of combining the contents of a small packet of powder (the ORS packet) with water. The packets are often available from health clinics, pharmacies, and field workers.

Qs. 460 and 461: TREATMENT OF DIARRHEA

These questions ask the mother if the child received anything for this episode of diarrhea. If, back in Q.459 you learned that (NAME) was given fluid from an ORS packet, then ask Q.460 by saying: "Was anything else given to treat the diarrhea?" If, however, in Q.459 you learned that fluid from an ORS packet was not given, ask Q.460 by saying: "Was anything given to treat the diarrhea?"

If you learn in Q.460 that treatment was given for the episode of diarrhea, record in Q.461 all treatment that was given. The treatment may have been given by anyone. After recording a treatment, ask the woman whether "Anything else" was given, but do so without implying that something else should have been given.

RECOMMENDED HOME FLUID is a solution which can easily be made in the home. For example, the recommended home fluid may be a cereal-based mixture, or perhaps made from sugar, salt, and water.

Qs. 462 and 463: SEEKING ADVICE FOR DIARRHEA

These questions ask if advice was sought from someone else on how to treat this episode of diarrhea; for example, advice from a health center, a health worker, or a traditional healer. If no advice or treatment was sought for this episode of diarrhea, record NO in Q.462 and skip to Q.464. If the mother did seek advice or treatment (Q.462 is YES), ask Q.463 and probe for all persons seen. If she sought advice from more than one source, circle the code for each service and person she went to. You will need to distinguish between public and private sources, as instructed in Q.453.

Q. 464: SKIP INSTRUCTION

At this point, go back to Q.442 and ask the series of questions for the birth in the next column. If there are no other births, proceed with Q.465.

Qs.465 and 466: FLUIDS AND FOOD FOR CHILDREN WITH DIARRHEA

These two questions are to learn whether the respondent has an opinion about how a child with diarrhea should be fed. When asking about fluids, it is important that you complete the whole question before accepting a response so the respondent feels comfortable choosing the response she thinks is correct. You are not to make her feel that one answer is any more correct than another. The same procedure is to be followed for Q.466 on foods. In Q.465 stress the word drink, and in Q.466 stress the word eat. She should not be pressed to choose one of the alternatives given in the question; if she does not know, simply record DON'T KNOW.

Q. 467: KNOWLEDGE TO SEEK TREATMENT FOR DIARRHEA

This is the woman's own opinion; record the answer(s) the respondent gives you. It is important that you not make her feel that she needs to give a response which you feel is correct. Simply record her response, whatever it is; you are not to probe.

The question refers to a hypothetical situation; that is, the respondent is asked to imagine that a child is sick with diarrhea. Notice that both Codes A and B refer to watery stools. You have to be careful in choosing the correct one if you get a response about watery stools. If the woman tells you that watery

stools indicate a child should be taken to a health facility, you would record Code B for Any Watery Stools. Code A is only to be used if the woman specifically tells you that repeated watery stools indicate action. The same distinction needs to be made when recording a response that refers to vomiting. If the woman tells you in general terms that when a child with diarrhea vomits, he or she should be taken to a health facility, then you record Code D. Only if the respondent specifically tells you that repeated vomiting indicates that the child should be taken to a health facility would you record Code C. Again, you are not to probe here, nor force her response to fit into a category. If none of the categories apply, simply write her response in OTHER and circle 'X'.

Q. 468: KNOWLEDGE TO SEEK TREATMENT FOR COUGH

This question is similar to Q.467, except that now you are asking about a hypothetical situation referring to a child who is sick with a cough. That is, you are asking the respondent to imagine that a child is sick with cough. You are not to probe the respondent after asking the question, simply record the response. You are asking the woman for her opinion.

Q. 469: FILTER FOR ORS GIVEN

If ORS made from a packet was given to any child (see Q.459 for all columns), mark the box on the right. If ORS was not given, or not asked about, mark the box on the left. Follow the appropriate skip pattern.

Q. 470: EVER HEARD OF ORS

You will only ask this question of a respondent who has not already used ORS, to see if she knows about ORS.

E. SECTION 5. MARRIAGE

Q. 501: PRESENCE OF OTHERS

This is not a question to ask the respondent, but something that you answer yourself. Just look around and see who else is within listening distance while you are interviewing. Record YES or NO to each category. If a supervisor observes the interview, be sure to include her or him as another female or male present.

Q. 502: CURRENTLY MARRIED OR LIVING WITH A MAN

The options here are either: currently married, living with a man, or not in union (she is neither married nor living with a man). Record her status at the time of the interview. In the questionnaire and this manual, "marriage" always refers to both formal and informal unions, such as living together arrangements. An informal union is one in which the man and woman live together for some time, intending to have a lasting relationship, but do not have a formal civil or religious ceremony. Casual sexual encounters are not included here. For example, if a woman went to live with her boyfriend and his family, and has stayed for several years, they would be considered as "living together," whether or not they have any children. On the other hand, if a woman has a boyfriend, but has never lived with him, she would not be considered as being in a union.

Q. 503: CURRENT SEXUAL PARTNER

This question is asked of respondents who are not currently married and not currently living with someone. It is important that you read the whole question, so that the respondent is informed of the full range of acceptable responses. A Regular Sexual Partner is someone with whom the respondent has an ongoing, sexual relationship which is expected to continue. A respondent has an Occasional Sexual Partner if she is having sexual relations with one or more partners with no expectations that the sexual relations will continue.

Q. 504: EVER BEEN MARRIED

For women who are not currently married, ask if they have ever been married or lived with a man. Remember that "married" refers to both formal and informal unions. Notice that there are two different response categories (and 2 different skip patterns) for a Yes response: YES, FORMERLY MARRIED and YES, LIVED WITH A MAN. Be sure to make the distinction between the two categories. If the respondent just answers YES, probe by asking: "Were you formerly married or did you live with a man?"

Q. 505: FILL IN COLUMN 3 OF CALENDAR

Turn to Column 3 of the calendar, which records marital history. The respondent answered NO to Q.504, indicating that she has never been married and never lived with a man. Enter '0' in Column 3 for the month of the interview and in January [1992] and join these with a squiggly line. Skip to Q.515.

Q. 506: CURRENT MARITAL STATUS

For a woman who is not currently married and not currently living with someone, but was formerly in a union, record her current marital status at the time of the interview. Since she was in a union at one time, but is not on the day you are interviewing her, she will be either widowed, divorced, or separated.

Q. 507: WHERE PARTNER LIVES

For a woman who is either currently married or living with a man, ask whether her partner actually lives with her, or whether he lives elsewhere. If the woman's partner usually lives with her, but is only away temporarily, record LIVES WITH HER. When asking this question, choose the appropriate term for the woman's relationship (husband or partner).

Q. 511: MULTIPLE MARRIAGES

As with Q.502, we are interested in formal marriages as well as informal arrangements. If a woman was married, or lived with a man and then was widowed, divorced or separated from her partner, and is now either married to, or living with someone else, record MORE THAN ONCE.

Q. 512: DATE FIRST LIVED WITH A PARTNER

Here we want to know the month and year when the respondent started living with her first husband or partner. Check Q.511. If the respondent has only been in union once, mark the box on the left and ask the question directly underneath it. If she has been in union more than once, mark the box on the right and ask the question directly underneath it.

If she can't remember the date, probe, using the techniques discussed in Q.105. It also might be possible to probe using the birth history. For example, check the date of birth of her first child and ask her how many months or years before (or after) the birth she started living with her (first) husband or partner. Note that we are interested in the starting date of her first union (marriage or living together arrangement), not the date of first sex or first birth. Do not assume that the starting date of first union comes before the date of first birth; it may be that the first birth comes before first union.

If she answers in terms of the number of years ago (for example, "two years ago"), probe to find the month. If the woman does not know the month, circle '98' for DON'T KNOW MONTH. If she knows the year, but not the month, circle '98' for DON'T KNOW MONTH and fill in the boxes for YEAR. If the respondent cannot tell you the year, circle '9998' for DON'T KNOW YEAR and go on to ask her age when she started living with that first partner (Q.513). Notice that in recording the date in Q.512, you will record both the month and year and if one of these items is not known, you will record DON'T KNOW for that item.

Q. 513: AGE FIRST LIVED WITH HUSBAND/PARTNER

If, after asking the date the woman started living with her first partner (Q.512) you were unable to record a year, ask how old she was when she started living with him. As with other age questions, if she doesn't know, probe. Ask how old she was when her first child was born, and then ask how long before or after giving birth she began living with her first husband or partner.

Notice that circling 9998 for DON'T KNOW is allowed as a valid response for Q.512. However, if you were unable to obtain a numerical response to YEAR in Q.512, you will have to provide the AGE in Q.513.

Q. 514: RECORD UNIONS IN CALENDAR

We are interested in all unions since January [1992]. In Column 3 of the calendar, enter 'X' in each month in which the woman was in union and '0' in each month in which she was not in a union. If she is currently in a union, enter 'X' in the current month and ask when this relationship began. Enter 'X' in the month it began and connect the beginning and ending dates with a squiggly line. Ask and record dates of all earlier unions as well. For women not currently in a union, probe for dates of earlier unions. Remember to use other events in the calendar as reference points.

GENERAL COMMENTS: Qs. 515-519 ON SEXUAL INTERCOURSE AND CONDOM USE

The purpose of these questions about sexual intercourse is to determine the respondent's exposure to pregnancy, since fertility levels are directly related to the frequency of intercourse. Condom use is of interest because it can help reduce the risk of transmission of AIDS and other sexually transmitted diseases. These questions may be embarrassing for some respondents; therefore, ask them in a matter-of-fact voice and do not make her feel embarrassed by your own behavior. A common reaction for people who are embarrassed is to giggle or laugh. If you laugh in return, or act as if you are embarrassed too, it will make the respondent think that the questions are not serious. Make sure you maintain a serious attitude.

Qs. 515: TIME OF LAST INTERCOURSE

Because you will be asking this question of all women, whether or not they have ever been in union or ever had a birth, it is essential that you pay attention to their particular situation and phrase the question appropriately. To determine whether you should read the words in parentheses (if ever) at the end of the sentence, check Q.503 to see if the respondent has a current sexual partner, Q.504 to see if she has ever been in union, and Q.210 to see if she has ever had a birth. If the answers to all three of these questions is NO, then you should read the question as: "When was the last time you had sexual intercourse, if ever?" If she has never had intercourse, record NEVER.

For all women, read the introductory sentence: "Now I need to ask you some questions..." before asking the question "When was the last time...".

Fill in the respondent's answer in the space according to the units that she uses. For example, if she says "3 weeks ago," circle '2' and write '03' in the boxes next to WEEKS AGO. If she says "Four days ago," circle '1' and write '04' next to DAYS AGO. If the respondent appears to be rounding off her answer, probe for an exact answer. For example, if she says "About a week ago," ask, "Do you remember which day? Was it before or after the weekend?"

In some cases, you may have to convert a respondent's answer. For example, if she says, "Last night," circle '1' and write '00' for DAYS AGO. If she has not yet resumed intercourse since she had her last child, circle '996' for BEFORE LAST BIRTH.

Q. 516: CONDOM USED AT LAST INTERCOURSE

Condom use if of interest because if used correctly, condoms can reduce the risk of transmission of AIDS and other sexually transmitted diseases. Check Qs. 301 and 302. If the respondent mentioned knowing the condom (either spontaneously or probed), mark the box on the left, and ask the question under that box. If she did not know about condoms, mark the box on the right and ask the question under that box.

Qs. 517 and 518: KNOW SOURCE FOR CONDOMS

Question 517 is concerned with a respondent's knowledge of a source for condoms. You will be asking this question of some women who have not used condoms. If a respondent insists she has never used condoms and therefore cannot answer this question, explain that we simply want to know if she is aware of a source for condoms. For example, if someone asked her for advice on where to obtain condoms could she tell them where to go.

Record her response to Q.518 in two ways: write the name of the place in the space provided on the questionnaire, and also circle the code which indicates what type of place it is. When choosing a code, you need to know whether the place is in the public (run by the government) or private sector. If the respondent does not know whether the place is governmental or private, inform your supervisor after you complete the interview. Since you have recorded the name of the place, your supervisor will be able to learn what type of place it is from other people in the area.

If the woman tells you that she could get condoms from a doctor, ask her where the doctor is located. If she replies that the doctor is located in a hospital, ask her for the name of the hospital, and write it down. Then ask her whether it is run by the government or is privately owned. Only record PRIVATE DOCTOR if the doctor has his own practice, which is not located within a larger facility.

Note that you only need to write the name of the source if it is a hospital, health center, or clinic. It is not necessary to write the name of the source if it was a private doctor, a field worker, pharmacy, or a friend or relative.

Q. 519: AGE AT FIRST INTERCOURSE

If the respondent says she does not know how old she was when she first had intercourse, probe by relating it to how old she was when she first got married or had her first child. However, when doing this probing, be certain not to assume that the first time she had sex was at the time of her first marriage. The respondent should feel comfortable in taking her time to think about her response, to remember correctly. If she says her first time was when she got married, record it as such by circling '96'. Recording FIRST TIME WHEN MARRIED is only appropriate if the respondent offers this as a response; otherwise, you should try to get an age.

Check to make sure that the age at first intercourse and the age at first birth are consistent. The age at first intercourse should not be later than her age at first birth. To calculate her age at first birth, subtract her own year of birth from the year of birth of her first child. This will tell you the age of the woman when she had her first birth. If her reported age at intercourse (Q.519) is older than her age at first birth, then either the year of birth of her first child is wrong, or her age at first intercourse is wrong. Check to see which date is wrong and correct it.

F. SECTION 6. FERTILITY PREFERENCES

This section gathers information on desires for additional children, preferred birth intervals, attitudes towards family planning and family size, and unwanted pregnancies.

Q. 601: FILTER FOR STERILIZATION

Check Q.314 to see if either the woman or her husband/partner is sterilized. If one of them is sterilized, mark the box on the right. If not, mark the box on the left. Follow the appropriate skip pattern.

Q. 602: PREFERENCE FOR ADDITIONAL CHILDREN

This question is a combination of a filter and a question. First check Q.227 to see if the respondent is pregnant and mark the appropriate box. If she is not pregnant and has no living children, ask the question on the left as follows: "Now I have some questions about the future. Would you like to have a child or would you prefer not to have any children?" If she is not pregnant and has one or more children, you will have to word the question differently saying: "Would you like to have another child or would you prefer not to have any more children?" (including the portion printed in parentheses).

If the respondent is currently pregnant, mark the box labelled PREGNANT and ask the question under that box: "...After the child you are expecting..." Note that we want to make sure that pregnant women do not think that we are asking them if they want the child they are pregnant with now.

In either case, circle the code which reflects the woman's response, and be careful to follow the correct skip instruction.

Q. 603: TIME TO WAIT

Follow the same procedure as in Q.602 for choosing the appropriate question to ask. Question 603 is to be asked of all women who say that they want to have another child. Note that the answer can be given in months or years. Circle '1' if the response is in months, or '2' if in years, and record the answer in the appropriate boxes. If she says she would like to have a baby right away, record SOON/NOW. If the woman says she cannot get pregnant, circle '994'. If the woman tells you she would like to wait until after she is married to have a child, record AFTER MARRIAGE. If the woman gives a different answer, circle '996' and write her response in the OTHER category.

Q. 604: FILTER FOR PREGNANCY

Follow the same procedure for marking this filter as you did in Q.602 and Q.603. If the woman is not pregnant (or is unsure), mark the box on the left. If she is pregnant, mark the box on the right. Follow the appropriate skip pattern.

Q. 605: HAPPY OR UNHAPPY TO GET PREGNANT

This question is only asked of women who are not pregnant, or who are unsure if they are pregnant. Be certain to finish asking the entire question before accepting a response.

Q. 606: FILTER FOR USING A METHOD

Check Q.313. If you completed Section 3 correctly, then Q.313 will either be: YES because the woman is currently using a method of family planning, NO because she has used a method of family planning at some time in the past, but she is not currently using a method, or Q.313 may be blank because it was not asked. If after checking Q.313 you see YES recorded, you will mark the box on the right in this question for CURRENTLY USING. If after checking Q.313 you see NO recorded, you will mark the box in the middle for NOT CURRENTLY USING. If after checking Q.313 you see that it was not asked (she is either pregnant or has never used a method) you will mark the box on the left for NOT ASKED.

Q. 607: INTENT TO USE IN NEXT 12 MONTHS

This question is for all women who are currently not using a method of contraception and women who were not asked about current contraceptive use. The purpose of this question is to see if the respondent has any intention of using a method of family planning within the next 12 months.

Q. 608: INTENT TO USE

The intent of this question is to see if the respondent thinks she might use some method of family planning at any time in the future.

Q. 609: PREFERRED METHOD

This question is for women who think they will use a method of contraception in the future. If the respondent mentions more than one method, ask her which one she prefers most; if she cannot make a choice, then circle the method which is higher on the list.

Q. 610: WHY DO NOT INTEND TO USE

This question is asked of women who are currently not using a method and do not intend to use a method in the future. There are many reasons why a person may not use contraception, so listen to your respondent carefully. Record what the respondent considers to be her main reason for not intending to use contraception.

Only record NOT MARRIED if the respondent offers this as her reason for not intending to use a method. If the woman's main reason is not listed as a response, write her response in the OTHER category and circle '96'. If the woman does not know at all why she will not use contraception, record DON'T KNOW.

SIDE EFFECTS are undesirable consequences of using a method which do not adversely affect the health of the user. For example, side effects may be spotting or bleeding with the pill, while HEALTH CONCERNS may be that she heard that the pill may be linked with breast cancer. INCONVENIENT would be if the method is too troublesome to use, such as being messy. This is inconvenient to use, but not inconvenient to get the method, since there is a separate category LACK OF ACCESS/TOO FAR.

RELIGIOUS PROHIBITION means that she feels her religion does not allow the use of family planning. There are three other categories under the heading of OPPOSITION TO USE. RESPONDENT OPPOSED means that the respondent herself does not approve of family planning. If her husband or partner is opposed to family planning, circle code for HUSBAND OPPOSED. If she says she does not

intend to use because someone other than her partner tells her they are opposed to her using family planning, code OTHERS OPPOSED.

Code INFREQUENT SEX if the respondent says she is not sexually active enough to be using a method. Code SUBFECUND/INFECUND if she thinks she cannot get pregnant (not including being menopausal). MENOPAUSAL means she is too old to get pregnant. If the woman had an operation to remove her uterus, record HYSTERECTOMY.

Q. 611: INTEND TO USE IF MARRIED

This question is only asked of a woman if she told you in response to Q.610 that she does not intend to use a method because she is not married. Now you are asking her whether she would use a method of family planning if she were married.

Q. 612: PREFERRED NUMBER OF CHILDREN

Check Q.216 to see if the woman has any children who are alive. Mark the box on the right if she has no living children or mark the box on the left if she has at least one living child. Ask the question under the marked box. If she already has living children, we ask her to imagine the time when she had no children and could choose exactly how many to have. We are not asking how many she would like to have by her current age (now), but rather, how many she would like over her entire life (including the future).

If she tells you a number, record it in the boxes by NUMBER, then proceed to Q.613. If she gives an answer which is not a number, for example, "It's up to God," probe her for a numeric response. If after probing, the woman refrains from quantifying her response, write down her exact words in the OTHER category, and skip to Q.614.

Q. 613: DESIRED SEX COMPOSITION OF CHILDREN

This question is asked of all women who gave a numerical response to Q.612. Record the number of boys and girls preferred by the woman in the boxes provided under BOYS and GIRLS, respectively. If the woman says she does not mind the sex of the child, write the number in the boxes under EITHER. For example, if in Q.612 she says she would like to have six children, and in Q.613 she would like to have 2 boys, 2 girls, and two more of either sex, you would record 02, 02, 02. If she would like to have two children (02 in Q.612) and she would want two boys, you would record 02, 00, 00. If she gives some other answer, circle '96' for OTHER under each box and record her exact words in OTHER. You only need to record her OTHER response under one box, but be sure to code the '96' under each box. For each box there must be either a number in the box (and this can be 00) or the '96' must be coded.

Q. 614: APPROVAL OF FAMILY PLANNING

This is the woman's own opinion, regardless of whether or not she herself is using a method.

Q. 615: ATTITUDE TOWARD FAMILY PLANNING INFORMATION IN MEDIA

If the respondent says it depends on how the information is presented, ask her if she approves "in general" of family planning messages on the radio or television.

Q. 616: HEARD FAMILY PLANNING MESSAGE?

We are interested in any information about family planning, whether it is a program concerned with giving information about family planning, an advertisement about family planning, or a speech in which family planning is mentioned. Read the introductory question and then each line, waiting for her response and coding it before moving on to the next line. There must be an answer coded for each line, do not leave any blank.

Q. 617: COUNTRY-SPECIFIC QUESTIONS ON FAMILY PLANNING MESSAGES

Qs. 618 and 619: DISCUSSED FAMILY PLANNING WITH OTHERS

In Q.618 you are asking whether the respondent has discussed family planning with any friends or relatives within the last few months prior to your interview. It does not matter who initiated the discussion, and it does not matter whether the discussants approved or disapproved of family planning. If the woman responds YES to Q.618, ask her in Q.619 to specify with whom she had the discussions. Circle all persons with whom she discussed family planning over the last few months.

Q. 620: FILTER FOR MARITAL STATUS

Check Q.502. There is one box in Q.620 for each possible response to Q.502. Mark the appropriate box and follow the skip instructions.

Q. 621: PARTNER'S ATTITUDE TOWARDS FAMILY PLANNING

This question asks the woman what she thinks her husband or partner's attitude is towards family planning. It does not matter in this question whether or not the couple has recently discussed family planning; this is simply the woman's opinion of her husband or partner's attitude.

Q. 622: DISCUSSION OF FAMILY PLANNING IN PAST YEAR

We are interested in knowing whether, and how often, the respondent and her husband or partner have discussed family planning in the past year.

Q. 623: HUSBAND AND WIFE'S PREFERENCE FOR CHILDREN

This question asks for the woman's opinion of her husband's preferences. Read the entire question before accepting a response.

G. SECTION 7. HUSBAND'S BACKGROUND, WOMAN'S WORK AND RESIDENCE

In this section, take care to word the questions in the present or past tense according to whether the woman is currently in union (married or living together) or not. If she has been married more than once, ask about her most recent husband or partner.

Q. 701: FILTER FOR MARITAL STATUS

Look back to Q.502. If the woman is currently married or living with a man, you will mark the box on the left. If the woman is not currently in union, you will have to check Q.504 before marking a box in this filter. If the woman is not in union now, but was formerly married or formerly lived with a man, mark the box in the center. If the woman is not in union now (Q.502 is NO) and she has never been in a union (Q.504 is also NO), mark the box on the right.

Q. 702: HUSBAND'S AGE

If you have difficulties obtaining the husband's age, use the same methods to probe for his age as described in Q.106 for obtaining her age.

Qs. 703-705: HUSBAND'S EDUCATION

These questions are identical to Questions 107-109 which were asked of the respondent. Again, note that in Q.704, you record the highest level attended, and in Q.705, you record the highest standard, form, or year completed at that level.

Q. 706: HUSBAND'S CURRENT (OR MOST RECENT) TYPE OF WORK

Write the answer in the respondent's own words. Be specific. For example, if the respondent says, "He works for the Ministry of Planning," ask what the man does there. Examples of occupations are: clerk, secretary, barber, taxi driver, nurse, teacher, lawyer, salesman, rubber tapper, fisherman, rice farmer, carpenter, etc. If you are not sure how to write the occupation, it is better to give more detail than less.

"Not currently working" is not an acceptable response. If he is unemployed, get a description of his most recent job. If he does more than one job, write down what he does most of the time. If he is not working because he is in school, write "student." Do not fill in the two code boxes for this question, since numerical codes will be assigned afterwards in the office.

Q. 707: FILTER FOR AGRICULTURAL OR OTHER WORK

Mark the appropriate box, depending on the type of work described in Q.706. Agricultural work includes farming, raising animals (including livestock, poultry, and fish), fishing, hunting, driving a tractor on a farm, or other activities involved with growing or harvesting food. If his job is selling food that he did not produce, he is not considered an agricultural worker. If he grows just a few crops, but has another regular job, mark the box for DOES NOT WORK IN AGRICULTURE.

Q. 708: WORK ON FAMILY OR OTHER LAND

If he works mainly on land belonging to himself, record OWN LAND. If he works on land which belongs to his family, or his wife's family, record FAMILY LAND. If he rents the land he farms, record RENTED LAND. If he is a laborer on someone else's land or on a plantation, record SOMEONE ELSE'S LAND.

Qs. 709-711: EMPLOYMENT

In this section we are not asking about housework, but about other work a woman may do. If the respondent answers YES she does work to Q.709, skip to Q.712. If in Q.709 the respondent answers NO she is not working, ask Q.710. It often happens that women who sell things, or work on the family farm, will not consider what they do as work. Read the introductory sentences of Q.710 so the respondent understands what we mean by "work." Be careful to follow the skip patterns in Q.710 and Q.711.

Q. 712: OCCUPATION

You should record the type of work the woman does, using the same guidelines as for the husband's occupation in Q.706. Again, leave the code boxes blank, as these will be filled in at the office.

Q. 713: FILTER FOR AGRICULTURAL OR OTHER WORK

Mark the appropriate box, depending on the type of work described in Q.712. Agricultural work includes farming, raising animals (including livestock, poultry, and fish), fishing, hunting, driving a tractor on a farm, or other activities involved with growing or harvesting food. If her job is selling food that she did not produce, she is not considered an agricultural worker. If she grows just a few crops, but has another regular job, mark the box for DOES NOT WORK IN AGRICULTURE.

Q. 714: WORK ON FAMILY OR OTHER LAND

This question is asked of women working in agriculture to determine the ownership of the land on which she is working. If the respondent works mainly on land belonging to herself, record OWN LAND. If she works on land which belongs to her family, or her husband's family, record FAMILY LAND. If she rents the land she farms, record RENTED LAND. If she is a laborer on someone else's land or on a plantation, record SOMEONE ELSE'S LAND.

Q. 715: NATURE OF EMPLOYMENT

There are three categories here. Consider a woman who works in a shop as an example. If she works in a shop owned and operated by a non-family member, she works FOR SOMEONE ELSE. If her husband or father operates the shop and she works for him, she is working FOR FAMILY MEMBER. If she runs the shop with her husband, or runs it on her own, she is SELF-EMPLOYED.

Q. 716: WORK ALL OR PART OF THE YEAR

Of interest here is the regularity with which, or amount that, a respondent is working. If she is working all year long, record **THROUGHOUT THE YEAR**. If her work is seasonal, record **SEASONALLY/PART OF THE YEAR**. If she works occasionally, record **ONCE IN A WHILE**. Each response has a different skip instruction, so be careful to follow the appropriate skip pattern.

Q. 717: NUMBER OF MONTHS WORKED OVER LAST 12 MONTHS

This question is asked of women who are engaged in seasonal work to determine the length of their employment during the last 12 months. Record the number of months the respondent worked in the past 12 months.

Q. 718: NUMBER OF DAYS WORKED PER WEEK

This question is asked of women who work seasonally, or part of the year. You are asking how many days a week the respondent usually worked during the months that she was employed. For example, if a woman worked every day of the week, with one day of rest, you would record '6'.

Q. 719: DAYS WORKED

This question is asked of women who work **ONCE IN A WHILE**. Record the total number of days the respondent worked in the past 12 months.

Q. 720: EARN CASH

This question asks whether a respondent receives money for her work. For example, a woman who sells fruit in the market to people who pay money for it, does earn cash for her work. If she answers **NO**, probe by asking: "Do you make money for working?"

Q. 721: AMOUNT OF MONEY EARNED

When recording the response, you must circle the code which indicates whether the response given is payment by the hour, for the day, by the week, by the month, or by the year. Then record the amount of money earned in the boxes corresponding to the time period for which the amount is given.

Q. 722: CONTROL OVER MONEY EARNED

Check Q.502. If the woman is currently married, or living with a man, mark the box on the left and ask the question directly under it. If the woman is not in union mark the box on the right and ask the question below it.

Q. 723: WORKS AT HOME OR ELSEWHERE

Whether the woman works at home or away from home will usually be clear. **HOME** means within the area of her house or compound. A woman may work on family fields which are far from the compound, in this case you would code **AWAY**. If she works on a plot of land just outside the house, you would code **HOME**.

Q. 724: FILTER FOR YOUNG CHILD

If a woman has a young child living with her at home, and is also working, we want to know how she manages care of the child. Look back to Questions 217 and 218 to see if she has a child age 5 or less who is living with her. If she does, mark the YES box. If she does not have a child age 5 or less, or she does have a young child but the child does not live with her, mark the NO box.

Q. 725: TAKES CARE OF CHILD

This question is asked of respondents who have a child age 5 years or younger and living at home. You will ask who is the main caretaker of the child. If the respondent says more than one person, ask who takes care of the child most of the time. Note that if she responds that an older child is the primary caretaker, you need to ask whether it is an older sister or brother.

Q. 726: NUMBER OF COMMUNITIES

In rural areas, each village or administrative district is a separate community. In urban areas, each administrative area, such as a municipality or a sector of a metropolitan area, is a separate community. Be sure to include the current place of residence in the total number of communities. If the woman has lived in another community before her current one, you would code MORE THAN ONE COMMUNITY. If she has never lived anywhere but her current community, code ONE COMMUNITY.

Qs. 727 and 728: RESIDENCE HISTORY/ COLUMN 4 in CALENDAR

If the respondent has lived in one place only, enter the type of place code in Column 4 of the calendar in the month of interview and mark down through January [1992]. If the respondent has lived in more than one place, ask in what month and year she moved to her current place. Enter 'X' in the month and year she moved there, and enter the type of place code in the current month and in the month after the move, connecting the two codes with a squiggly line. Ask about types of places she lived in prior to the current one, marking dates she moved there with 'X'.

H. SECTION 8. AIDS

AIDS is an illness caused by the HIV virus, which weakens the immune system and leads to death through secondary infections, such as pneumonia. It is transmitted sexually or through contact with contaminated blood. This section asks a group of questions on knowledge of, and behavior related to, AIDS.

Q. 801: HEARD OF AIDS

This question allows us to verify whether a respondent has heard of AIDS.

Q. 802: SOURCES OF INFORMATION

This question seeks to obtain information about where women are hearing and learning about AIDS. Pay special attention to circle all the sources of information mentioned by the respondent. If a respondent gives an answer that is not on the list, circle 'X' for OTHER and write the answer in the space provided.

Qs. 803 and 804: WHAT TO DO TO AVOID AIDS

Question 803 is asked to determine if the respondent has knowledge of how to avoid contracting AIDS.

Question 804 asks women who have knowledge of how to avoid getting AIDS to list the specific ways they know of to avoid getting AIDS. Note that more than one answer can be given and all responses mentioned should be recorded.

Qs. 805 and 806: SAFE SEX

[These questions are country specific and should be adapted in two ways. First, they should only be asked in countries that have national AIDS education campaigns. Secondly, the key phrase SAFE SEX needs to be replaced (in Qs. 804, 805 and 806) by the appropriate slogan that is being used in the campaign.

Check the answers to Q.804 to determine if the respondent mentioned "safe sex" as a way to avoid getting AIDS. If she did not, mark the box on the right. If the respondent did mention safe sex in Q.804, mark the box on the left.

In Q.806 it is possible to have more than one answer, and you are to record all responses given. If an answer is given that is not included in the list, record OTHER, and write the answer in the space provided.]

Q. 807: HEALTHY PERSON CAN HAVE AIDS

This question asks whether the respondent thinks that a healthy-looking person can have the AIDS virus.

Q. 808: IS AIDS A FATAL DISEASE

We want to know if the respondent thinks that AIDS is a fatal disease for everyone who contracts it, that is, whether people with AIDS will die from the disease. Read all the choices in the question before accepting a response.

Q. 809: CHANCES OF GETTING AIDS

This question asks the respondent what she thinks her own chances of getting AIDS are. Read the whole question so that she answers with one of the given categories of SMALL, MODERATE, GREAT, or NO RISK AT ALL.

Q. 810: HAS CHANGED BEHAVIOR BECAUSE OF AIDS

This question refers to the respondent's behavior in response to AIDS. It asks if the respondent has changed her sexual behavior in order to prevent getting AIDS. For respondents who have changed their sexual behavior because of AIDS, you will record what specific measures they are taking to avoid AIDS. Record each response mentioned and if an answer does not fit into the list of given responses, record OTHER and write the answer in the given space.

If the respondent says that knowing about AIDS has not changed anything for her because she has never had sexual intercourse, then record DID NOT START SEX. If she says that knowing about AIDS has not changed her sexual behavior, record NO CHANGE IN SEXUAL BEHAVIOR.

Q. 811: TIME INTERVIEW ENDED

Don't forget to write the time when you finished the interview, using the 24 hour system. If there was an extended break during the interview time, for example the respondent excused herself to care for a sick child and returned to complete the interview 45 minutes later, make a note to report how long a break was taken.

Be sure to thank the respondent for her cooperation. At this point, check your questionnaire carefully. Make sure you have followed the skip patterns correctly, and that your marks are legible.

I. SECTION 9. HEIGHT AND WEIGHT

All women who have had one or more births since January 1, [1994], as well as all their children born since January, 1 [1994], will be weighed and measured. The results will be recorded in Section 9. The measurement of height and weight (anthropometric measurement) is a separate operation that will be conducted sometime after the individual interview is completed. The anthropometric measurement will require the cooperation of a measurer and an assistant. The measurement procedures to be followed appear at the end of this section.

Q. 901: FILTER FOR BIRTH

If the respondent has had one or more births since January 1, [1994], mark the box on the left. You will weigh and measure this woman and all her living children who were born since January [1994]. If a woman has given birth since January [1994] but none of the children are living, mark the box on the left as you will still weigh and measure this woman. Only mark the box on the right if the woman has not given birth since January 1, [1994].

Column 1 is for any respondent who has given birth since January [1994], and the other columns are for all her living children born since January [1994]. If none of her children born since January [1994] are still alive, still complete Column 1.

Qs. 902 and 903: LINE NUMBERS AND NAMES

Record the name of the respondent in the first column of Q.903. Write the line numbers and the names of all living children born since January [1994], starting with the youngest living child (the last child born who is still alive). Be careful to record the children in the correct columns.

Q. 904: DATE OF BIRTH

Copy the month and year of birth of each child from Q.215. Also, ask for the day of the month that the child was born. If the day is unknown, record '98'.

Q. 905: BCG SCAR

Check each child to see if a BCG scar is visible.

A BCG scar is the result of a BCG immunization that is given to protect the child against tuberculosis. It can be given at any time from birth. The BCG vaccine is injected just under the skin, usually in the left shoulder or left upper arm. The vaccine causes a small swelling and usually leaves a scar. The scar is usually round or oval in shape and is less than one centimeter wide.

For this question, DO NOT rely on information provided by the mother or information from the immunization card in recording the response. We only want to know whether you actually see the BCG scar or not. If you use the immunization card or information from the mother it may not be correct because it is possible for the child not to have a BCG scar even though the injection was given. It is also possible that the child has a BCG scar even though the immunization was not recorded on the card and the mother does not know that the immunization was given.

Qs. 906-908: HEIGHT AND WEIGHT MEASUREMENTS

Here you will:

- a) record the height of mother and children in centimeters.
- b) record whether the child was measured while lying down or standing up.
- c) record the weight of mother and children in kilograms.

Qs. 909-911: DATE, RESULT, AND STAFF NAMES

Record the date the measurements are made, the result, and the names and codes of both the measurer and the assistant. Notice that you will record a result for the respondent and every living child born since January [1994]. If you are unable to measure someone, record the reason here.

Record the date on which the mother and children were measured. If you did not measure the children on the same day as you interviewed the mother, then the date in Section 9 will be different from the date on the cover sheet. The date on the cover sheet will be the date on which you conducted the Individual interview, and the date in Section 9 will be the date on which you measured the mother and children.

INSTRUCTIONS FOR MEASURING HEIGHT AND WEIGHT
OF BOTH RESPONDENTS AND CHILDREN

Acknowledgement: the instructions that follow have been taken (with some alterations) from the United Nations manual "How to Weigh and Measure Children: Assessing the Nutritional Status of Young Children in Household Surveys," Department of Technical Co-operation for Development and Statistical Office, New York, 1986.

I. PROCEDURES AND PRECAUTIONS BEFORE MEASURING

A. **Layout of the Procedures**

Each step of the measurement procedures is directed at specific participants, who are named in bold letters at the beginning of each step: e.g. "**Measurer**", "**Assistant**", etc.

B. **Two Trained People Required**

Two trained people are required to measure a child's height and length. The measurer holds the child and takes the measurements. The assistant helps hold the child and records the measurements on the questionnaire. If there is an untrained assistant such as the mother, then the trained measurer should also record the measurements on the questionnaire. One person alone can take the weight of a child and record the results if an assistant is not available.

C. **Measuring Board and Scale Placement**

Be selective about where you place the measuring board and scale. It is best to measure outdoors during daylight hours. If it is cold, raining or if too many people congregate and interfere with the measurements, it may be more comfortable to weigh and measure indoors. Make sure there is adequate light.

D. **Age Assessment**

Before you measure, determine the child's age. If the child is less than two years, measure length. If the child is two years of age or older, measure height. If accurate age is not possible to obtain, measure length if the child is less than 85 cm. Measure height if the child is equal to or greater than 85 cm.

E. **When to Weigh and Measure**

Weigh and measure after you have conducted the Individual interview. This will allow you to become familiar with the members of the household. DO NOT weigh and measure at the beginning of the interview, i.e., as soon as you enter a household, which would be more of an upsetting intrusion.

F. **Weigh and Measure One Child at a Time**

If there is more than one eligible child in a household, complete the weighing and measuring of one child at a time. Then proceed with the next eligible child. DO NOT weigh and measure all the children together. If there is more than one eligible woman in a household, weigh and measure her and all her eligible children before proceeding with the next woman. Otherwise measurements may get recorded in the wrong columns of the questionnaire. Return measuring equipment to their storage bags immediately after you complete the measurements for each household.

G. Control the Child

When you weigh and measure, you must control the child. The strength and mobility of even very young children should not be underestimated. Be firm yet gentle with children. Your own sense of calm and self confidence will be felt by the mother and the child.

When a child has contact with any measuring equipment, i.e., on a measuring board you must hold and control the child so the child will not trip or fall. Never leave a child alone with a piece of equipment.

H. Coping with Stress

Since weighing and measuring requires touching and handling children, normal stress levels for this type of survey work are higher than for surveys where only verbal information is collected.

Explain the weighing and measuring procedures to the mother, and to a limited extent, the child, to help minimize possible resistance, fears or discomfort they may feel. You must determine if the child or mother is under so much stress that the weighing and measuring must stop. Remember, young children are often uncooperative; they tend to cry, scream, kick and sometimes bite. If a child is under severe stress and is crying excessively, try to calm the child or return the child to the mother before proceeding with the measuring.

Do not weigh or measure a child if:

- a. The mother refuses.
- b. The child is too sick or distressed.
- c. The child is physically deformed which will interfere with or give an incorrect measurement. To be kind, you may want to measure such a child and make a note of the deformity on the questionnaire.

I. Recording Measurements and Being Careful

Keep objects out of your hands and pens out of your mouth, hair or breast pocket when you weigh and measure so that neither the child nor you will get hurt due to carelessness. When you are not using a pen, place it in your equipment pack or on the questionnaire. Make sure you do not have long fingernails. Remove interfering rings and watches before you weigh and measure.

J. Strive for Improvement

You can be an expert measurer if you strive for improvement and follow every step of every procedure the same way every time. The quality and speed of your measurements will improve with practice. You will be required to weigh and measure many children. Do not take these procedures for granted even though they may seem simple and repetitious. It is easy to make errors when you are not careful. Do not omit any steps. Concentrate on what you are doing.

II. HEIGHT, SUMMARY OF PROCEDURES

A. CHILD'S HEIGHT (Illustration 1)

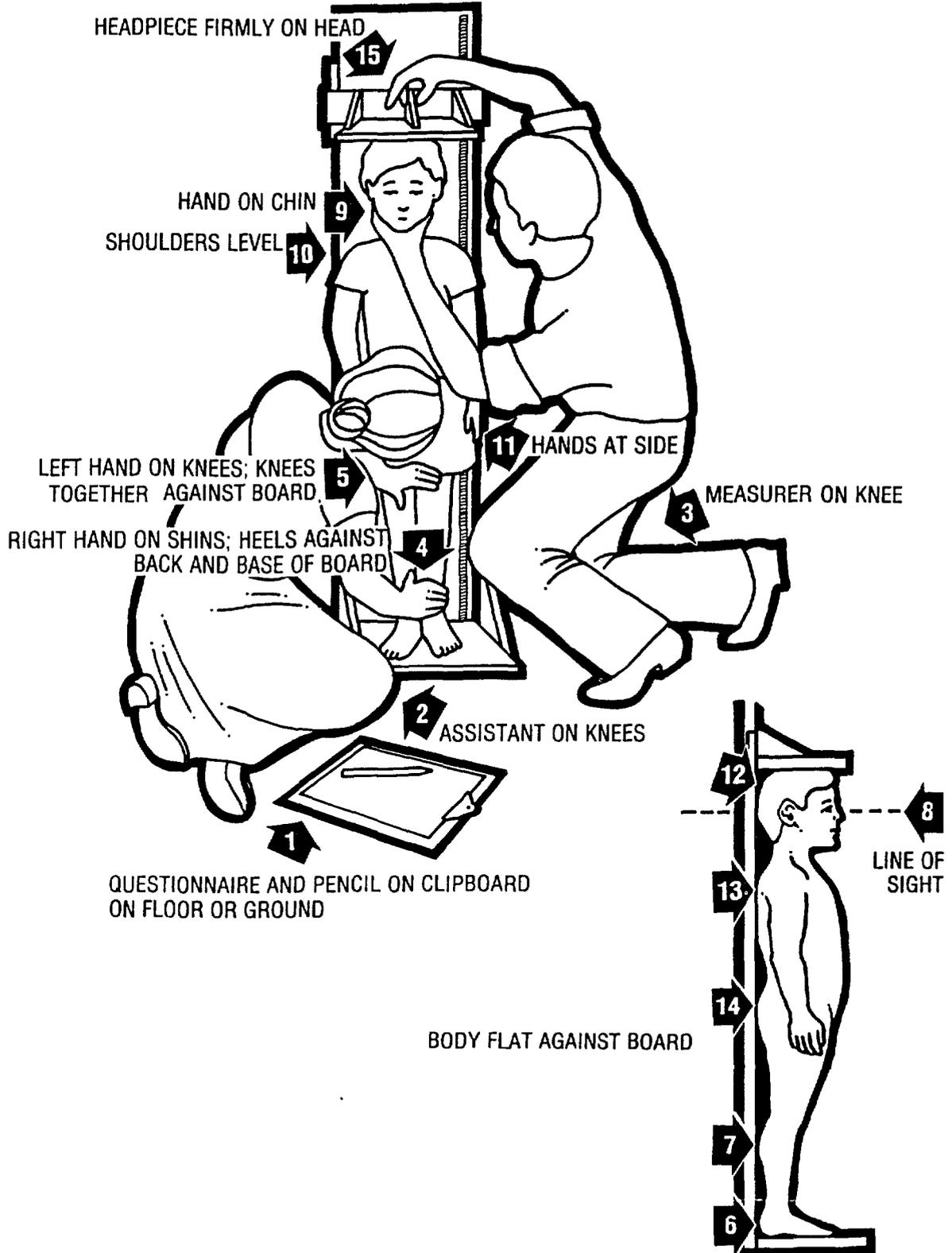
1. **Measurer or Assistant:** Place the measuring board on a hard flat surface against a wall, table, tree, staircase, etc. Make sure the board is stable.
2. **Measurer or Assistant:** Ask the mother to remove the child's shoes and unbraid any hair that would interfere with the height measurement. Ask her to walk the child to the board and to kneel in front of the child (if she is not the assistant).
3. **Assistant:** Place the questionnaire and pen on the ground (Arrow 1). Kneel with both knees on the right side of the child. (Arrow 2).
4. **Measurer:** For mobility, kneel on your right knee only, on the child's left side (Arrow 3).
5. **Assistant:** Place the child's feet flat and together in the center of and against the back and base of the board. Place your right hand just above the child's ankles on the shins (Arrow 4), your left hand on the child's knees (Arrow 5) and push against the board. Make sure the child's legs are straight and the heels and calves are against the board (Arrows 6 and 7). Tell the measurer when you have completed positioning the feet and legs.
6. **Measurer:** Tell the child to look straight ahead at the mother if she is in front of the child. Make sure the child's line of sight is level with the ground (Arrow 8). Place your open left hand on the child's chin. Gradually close your hand (Arrow 9). Do not cover the child's mouth or ears. Make sure the shoulders are level (Arrow 10), the hands are at the child's side (Arrow 11), and the head, shoulder blades and buttocks are against the board (Arrows 12, 13, 14). With your right hand, lower the headpiece on top of the child's head. Make sure you push through the child's hair (Arrow 15).
7. **Measurer and Assistant:** Check child's position (Arrows 1-15). Repeat any steps as necessary.
8. **Measurer:** When the child's position is correct, read and call out the measurement to the nearest 0.1 cm. Remove the headpiece from the child's head, your left hand from the child's chin and support the child during the recording.
9. **Assistant:** Immediately record the measurement and show it to the measurer. Note: If the assistant is untrained, the measurer records the height.
10. **Measurer:** Check the recorded measurement on the questionnaire for accuracy and legibility. Instruct the assistant to correct any errors.

B. WOMAN'S HEIGHT

Measure the height of the respondent in the same way you do for older children. Make sure that any scarves are removed and that her hairstyle does not interfere with the measurement. You must use all extension pieces for the measuring board. While measuring, you should be careful to respect her modesty when checking that she is standing straight against the board.

Illustration 1

Child Height Measurement



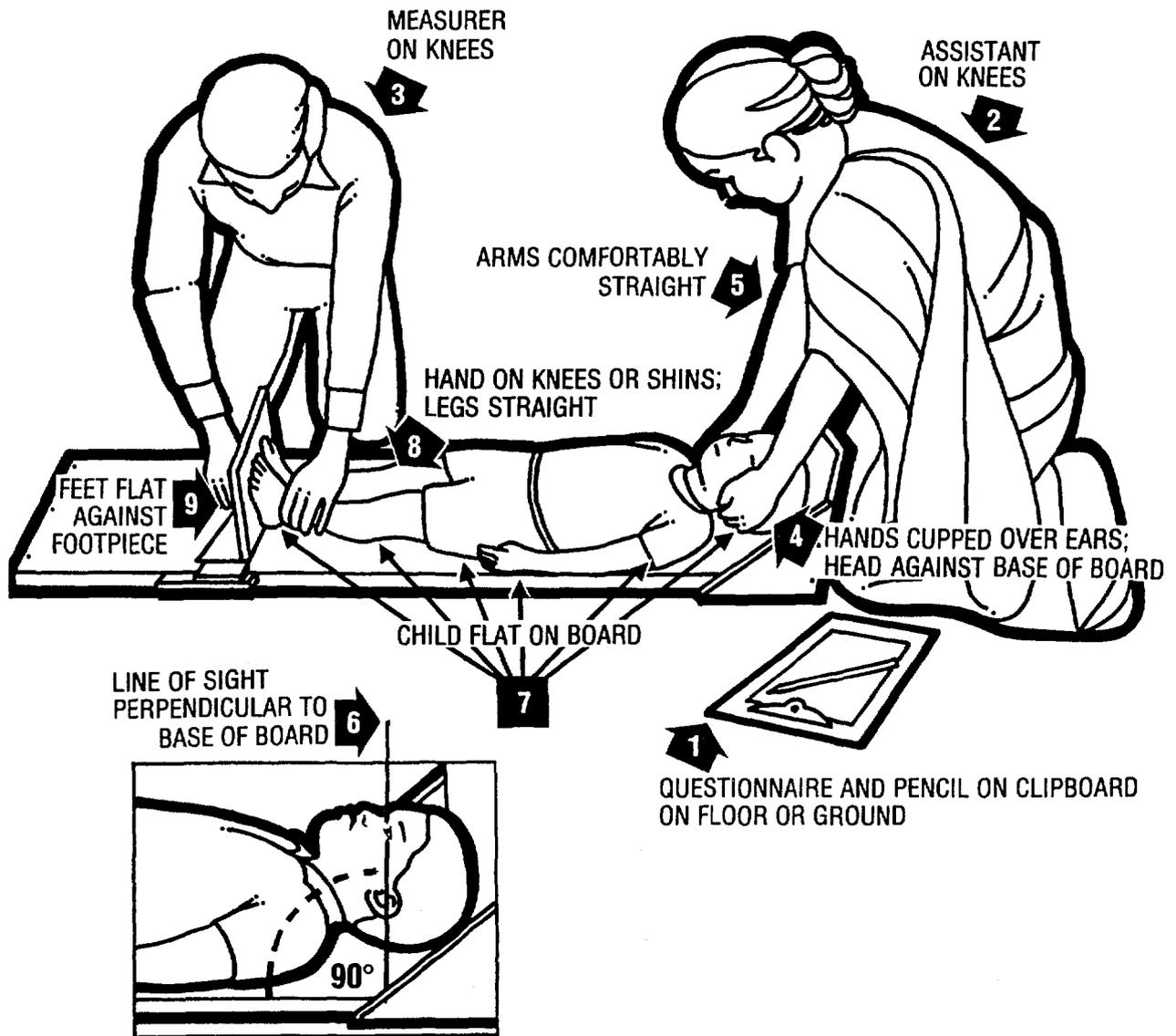
C. CHILD'S LENGTH (Illustration 2)⁷

1. **Measurer or Assistant:** Place the measuring board on a hard flat surface, i.e. ground, floor or steady table.
2. **Assistant:** Place the questionnaire and pen on the ground, floor or table (Arrow 1). Kneel with both knees behind the base of the board, if it is on the ground or floor (Arrow 2).
3. **Measurer:** Kneel on the right side of the child so that you can hold the footpiece with your right hand (Arrow 3).
4. **Measurer and Assistant:** With the mother's help, lay the child on the board by doing the following:
Assistant: Support the back of the child's head with your hands and gradually lower the child onto the board.
Measurer: Support the child at the trunk of the body.
5. **Measurer or Assistant:** If she is not the assistant, ask the mother to kneel on the opposite side of the board facing the measurer to help keep the child calm.
6. **Assistant:** Cup your hands over the child's ears (Arrow 4). With your arms comfortably straight (Arrow 5), place the child's head against the base of the board so that the child is looking straight up. The child's line of sight should be perpendicular to the ground (Arrow 6). Your head should be straight over the child's head. Look directly into the child's eyes.
7. **Measurer:** Make sure the child is lying flat and in the center of the board (Arrow 7). Place your left hand on the child's shins (above the ankles) or on the knees (Arrow 8). Press them firmly against the board. With your right hand, place the footpiece firmly against the child's heels (Arrow 9).
8. **Measurer and Assistant:** Check the child's position (Arrows 1-9). Repeat any steps as necessary.
9. **Measurer:** When the child's position is correct, read and call out the measurement to the nearest 0.1 cm. Remove the footpiece, release your left hand from the child's shins or knees and support the child during the recording.
10. **Assistant:** Immediately release the child's head, record the measurement, and show it to the measurer. Note: If the assistant is untrained, the measurer records the length on the questionnaire.
11. **Measurer:** Check the recorded measurement on the questionnaire for accuracy and legibility. Instruct the assistant to correct any errors.

⁷ If the assistant is untrained, e.g. the mother, then the measurer should help the assistant with the length procedure.

Illustration 2

Child Length Measurement



III. WEIGHT, SUMMARY OF PROCEDURES FOR WEIGHING WOMEN AND CHILDREN [INCLUDE THIS SECTION IN THE MANUAL WHEN USING THE UNICEF SCALE]

A. Equipment:

1. **Digital scale** (UNICEF Electronic Scale or Uniscale⁸) for weighing both children and adults. (The scale looks like a bathroom scale, with a digital display. The scale is accurate to 0.1 kg (0.2 lbs), and allows the measurer to directly read the weight of the child when held by the mother without requiring any calculations).

The Uniscale has solar cells; there are no batteries that can be changed.

(The following incorporates part of the instructions in the booklet that accompanies the Uniscale. Please also see **Additional notes on the Uniscale** following the instructions on how to weigh women and children).

2. **Wooden support board** to place under the scale (to be carried with the scale). If you do not have a wooden board, you may have to use the top section from the height measuring board unless you can place the scale on a completely flat and horizontal floor.

B. **Measurer: Explaining the weighing procedure to the respondent/mother**

1. Explain to the mother that you have a scale to weigh the child(ren), and that the child(ren) will be weighed while being held by the mother. Also explain that you will record the respondent's/mother's weight as well. Older children may be weighed by standing by themselves on the scale.
2. Ask the mother to wear just light indoor clothing (e.g. a dress or a blouse and skirt) when she is weighed. She should not wear thick clothing or anything heavy.
3. Ask the mother to undress the child(ren) completely. The only exception is that the children may wear a small pair of underpants if desired by the mother. Children should not wear diapers. If she is concerned that it is cold, tell her that she may cover the child(ren) with a cloth or a blanket until the scale is ready.
4. Ask the mother to let someone else hold the baby so she can be ready to step onto the scale (or hold the baby yourself if no one else is there).
5. Tell the mother that after weighing her, you will first weigh the youngest child, then the second youngest, etc.

C. **Measurer: Preparing the scale**

1. It is important to remember that the scale will not function correctly if it becomes too warm. It is best to use the scale in the shade, or indoors, as long as there is enough light for the solar cells.

⁸ The UNICEF emblem of the mother and child is on the Uniscale which is manufactured by SECA. The scale carries the inscription "This scale was manufactured for UNICEF using technology developed in Australia and donated to UNICEF by the people of Australia".

Place the wooden support board flat on the ground, making sure that it is on a smooth surface, and that it will not move at all even if someone stands on it.

2. Then place the scale on the board and make sure that it is flat (horizontal).
3. If the scale is not flat (horizontal) or if the scale and board are not steady, move the board into a different position, or place something under the board, until the problem is corrected.
4. Check again to make sure that the board is flat (horizontal) and stable and that it cannot move at all. It is important that the scale is placed on a hard, level surface; soft or uneven surfaces may cause errors in weighing.
5. Have the questionnaire and pen ready in your hand.

D. Measurer: Weighing women and older children who can stand on the scale by themselves

1. Turn the scale 'ON' by covering the solar cells for less than one second (the scale will not turn on if the solar cells are covered too long). The display should show '188.8' first, and then '0.0'. The '0.0' reading indicates that the scale is ready.
2. Ask the woman to step onto the center of the scale and stand quietly. Wait until the numbers on the display no longer change. Make sure that the solar cells are not covered by a skirt or by the woman's feet.
3. The woman's weight will appear in the display within two seconds. Record the woman's weight to the nearest 0.1 kg in the questionnaire in the RESPONDENT column (this is the weight of the respondent). (Make sure that you are able to see the whole display area so that you can read all the numbers correctly).
4. Tell the mother to please keep standing still on the scale, since you are getting ready to weigh the child now.

E. Measurer: Weighing the child(ren)

NOTE: If it is cold and the mother wants the child to be covered during the weighing, give her a blanket or cloth for covering the baby **after** you have recorded her own weight in the questionnaire (that is, after Step D.3), but **before** you go to the next step (E.1).

1. If you are NOT giving the mother a blanket or cloth: While the mother is standing still on the scale, make sure that the numbers are not changing, then (while the woman is standing quietly on the scale) cover the solar cells for less than one second. The scale will read '0.0'. There will be a small picture of a mother holding a baby which means that the scale has adjusted itself to ignore the woman's weight (this is called taring) and prepared itself to show you only the baby's weight. The scale is ready to weigh the baby in the mother's arms.

If you ARE giving the mother a blanket or cloth for covering the baby: Ask the mother to step off the scale after you have recorded her weight. Then give her the blanket or cloth and ask her to step back onto the scale. (It is necessary for the woman to step off the scale because blankets and cloths usually weigh less than 2 kilograms; see H.2 below). While the woman is standing still on the scale, make sure that the numbers are not changing, then (while the woman is

standing quietly on the scale and holding the blanket) cover the solar cells for less than one second. The scale will read '0.0'. There will be a small picture of a mother holding a baby which means that the scale has adjusted itself to ignore the woman's weight (this is called taring) and prepared itself to show you only the baby's weight. The scale is ready to weigh the baby in the mother's arms.

2. Give the mother the youngest child to hold. Wait until the numbers on the display no longer change.
3. Record the weight of the child to the nearest 0.1 kg in the questionnaire in the column with the child's name. (The scale has now shown you the weight of the child alone even though he/she was held by the mother).

F. Measurer: Weighing more than one child per respondent

Repeat the steps above (under E.) for each child, giving the mother the second to the youngest child to hold, then the third youngest, etc.

1. Make sure that you cover the solar cells for less than one second while the mother stands quietly alone on the scale **before each** child is weighed. The scale will read '0.0' and the small picture of a mother holding a baby will appear, telling you that the scale is ready to weigh the child in the mother's arms. (For the best results, it is best to follow this procedure of taring the scale before each child).
2. Give the child to the mother to hold. Wait for a few seconds until the numbers on the display no longer change.
3. Record the weight to the nearest 0.1 kg in the questionnaire in the column with the child's name.

G. Measurer: Thank the respondent

Thank the respondent, and tell her something nice about her child(ren).
(The scale will turn itself off after a short while).

H. Additional notes on the Uniscale:

1. The Uniscale **switches itself off automatically two minutes after the last weighing**. If this happens, follow the instructions from the beginning to turn it on again.
2. There are **special instructions for weighing very small babies** (those who weigh less than about 2 kg.). If you are not able to get a weight reading when trying to weigh a small baby, follow these instructions. To get a reading for such a small child, the scale should be tared by covering the solar cells for less than one second while the woman stands on the scale (as described above under E.1). The woman must then step off the scale (the display will then show '--.-'), take the small baby, and then step right back on the scale again. The display will show the weight of the small baby.
3. If there is **too much movement** on the scale during measurement, the display will switch between '1.' and '.1' until the load becomes stable.
4. Do not weigh loads with a **total weight** of more than 150 kg.

5. Possible reasons for the scale not taring (returning to '0.0' after covering the cells when the mother is standing on the scale):
 - a. there was no weight on the scale to tare
 - b. the solar cell was not covered completely
 - c. the solar cell was covered for more than one second; try covering it for less than one second
 - d. it is too dark; put the scale in a brighter place
 - e. the load weighs more than 120 kg.; use a lighter load

6. **What to do if the scale display shows:**

E01:

The scale has to readjust itself. Get off the scale and wait until E01 no longer appears.

E02 and switches off automatically:

Be sure there is no load on the scale and try to start the scale.

E03 and switches off automatically:

The scale is either too cold or too hot. move it to a different place with the temperature between 0 degrees C and 45 degrees C. Wait 15 minutes for it to adjust to the temperature, then start the scale.

E04 after measuring:

The load is too heavy (more than 150 kg.). Get off the scale and reduce the load.

E05 for a few seconds after trying to start the tare function:

The load is too heavy for taring (more than 120 kg.). Get off the scale and reduce the load.

7. **Notes on using, cleaning and storing the Uniscale:**

- a. The scale will not function correctly if it becomes too warm. It is best to use the scale in the shade, or indoors, as long as there is enough light for the solar cells. If the scale becomes too hot and does not work correctly, place it in a cooler area and wait 15 minutes before using it again.
- b. The scale must adjust to changes in temperature. if the scale is moved to a new site with a different temperature, wait for 15 minutes before using the scale again.
- c. Do not drop or bump the scale.
- d. Do not store the scale in direct sunlight or other hot places. For example, do not leave the scale in a parked vehicle on a sunny day.
- e. Protect the scale against excess humidity and wetness.
- f. Do not use the scales at temperatures below 0 degrees C or above 45 degrees C.
- g. To clean the scale, wipe surfaces with a damp cloth. Never put the scale into water.

III. WEIGHT, SUMMARY OF PROCEDURES FOR WEIGHING WOMEN AND CHILDREN [INCLUDE THIS SECTION IN THE MANUAL WHEN USING THE SECA 770 SCALE]

A. Equipment:

1. **Digital scale** (SECA 770)⁹ for weighing both children and adults. (The scale to be used looks like a bathroom scale, with a digital display. The scale is accurate to 0.1 kg (0.2 lbs), and allows the measurer to directly read the weight of the child when held by the mother without requiring any calculations).
2. **Wooden support board** to place under the scale (to be carried with the scale). If you do not have a wooden board, you may have to use the top section from the height measuring board unless you can place the scale on a completely flat and horizontal floor.

B. **Measurer: Explaining the weighing procedure to the respondent/mother**

1. Explain to the mother that you have a scale to weigh the child(ren), and that the child(ren) will be weighed while being held by the mother. Also explain that you will record the respondent's/mother's weight as well. Older children may be weighed by standing by themselves on the scale (See G. below).
2. Ask the mother to wear just light indoor clothing (e.g. a dress or a blouse and skirt) when she is weighed. She should not wear thick clothing or anything heavy.
3. Ask the mother to undress the child(ren) completely. The only exception is that the children may wear a small pair of underpants if desired by the mother. Children should not wear diapers. If she is concerned that it is cold, tell her that she may cover the child(ren) with a cloth or a blanket until the scale is ready.
4. Ask the mother to let someone else hold the baby so she can be ready to step onto the scale (or hold the baby yourself if no one else is there).
5. Tell the mother that, you will first weigh the youngest child, then the second youngest, etc.

C. **Measurer: Preparing the scale**

1. Place the wooden support board flat on the ground, making sure that it is on a smooth surface, and that it will not move at all even if someone stands on it.
2. Then place the scale on the board and make sure that it is flat (horizontal).
3. If the scale is not flat (horizontal), or if the scale and board are not steady, move the board into a different position, or place something under the board, until the problem is corrected.
4. Check again to make sure that the board is flat (horizontal) and stable and that it cannot move at all. It is important that the scale is placed on a hard level surface; soft or uneven surfaces may cause errors in weighing.

⁹ The name SECA Model 770 is written on the scale.

5. Have the questionnaire and pen ready in your hand.

D. Measurer: Weighing the woman

1. Turn the scale 'ON' by pushing the switch through the hole in the bar at the back of the scale. The display will read '00.0' when the scale is ready.
2. Ask the woman to step onto the center of the scale and stand quietly. Wait until the numbers on the display no longer change.
3. Record the woman's weight to the nearest 0.1 kg in the questionnaire in the RESPONDENT column (this is the weight of the respondent). (Make sure that you are able to see the whole display area so that you can read all the numbers correctly).
4. Tell the mother to please keep standing still on the scale, since you are getting ready to weigh the child now.

E. Measurer: Weighing the child(ren)

NOTE: If it is cold and the mother wants the child to be covered during the weighing, give the mother a blanket or cloth for covering the baby while she is standing quietly on the scale **after** you have recorded her own weight in the questionnaire (that is, after Step D.3), but **before** you go to the next step, Step E.1.

1. While the mother is standing still on the scale, make sure that the numbers are not changing, then push the switch through the hole in the bar at the back of the scale. The display will read '00.0' when the scale is ready.
2. Give the mother the youngest child to hold. Wait until the display numbers no longer change.
3. Record the weight of the child to the nearest 0.1 kg in the questionnaire in the column with the child's name. (The scale has now shown you the weight of the child alone even though he/she was held by the mother).

F. Measurer: Weighing more than one child per respondent

Repeat step E above for each child, giving the mother the second to the youngest child to hold, then the third youngest, etc.

1. Make sure that you push the switch through the hole in the bar at the back of the scale when the mother stands alone quietly on the scale **before each** child is weighed.
2. Give the next child to the mother to hold. Wait for a few seconds until the numbers on the display no longer change.
3. Record the weight to the nearest 0.1 kg in the questionnaire in the column with the child's name.

G. Measurer: Weighing older children who stand on the scale by themselves

Follow steps D.1 through D.3 above.

H. Measurer: Thank the respondent

Thank the respondent, and tell her something nice about her child. (The scale will turn itself off after a short while).

J. INTERVIEWER'S OBSERVATIONS

After you have checked over your questionnaire and thanked the respondent, note any comments on the last page. You may make comments about the woman you interviewed, about specific questions on the questionnaire, or about any other aspects of the interview. If anything about the interview was unusual or should be brought to the attention of the editor or supervisor, note it here. For example, if a respondent attended school in a different country which had a different system for dividing grades into primary and secondary, note that here. You may wish to explain why a result code was other than a '1'. If answers which were not pre-coded require further explanation, use this space. These comments are extremely helpful to the editor, supervisor, and data processing staff in interpreting the information in the questionnaire.