

APPENDIX D THAILAND MICS 2019 QUESTIONNAIRES

The questionnaires of the Thailand MICS 2019 are presented in Appendix D:

- Household questionnaire
- Questionnaire for Individual Women
- Questionnaire for Individual Men
- Questionnaire for Children Under Five
- Questionnaire for Children Age 5-14

HOUSEHOLD INFORMATION PANEL **HH**

| | | | |
|---|--|--|---------------------------|
| HH1. Cluster number: _____ | | HH2. Household number: _____ | |
| HH3. Interviewer's name and number: NAME _____ | | HH4. Supervisor's name and number: NAME _____ | |
| HH5. Day / Month / Year of interview: _____ / _____ / <u>2</u> <u>5</u> <u>6</u> <u>2</u> | | HH7. Region: BANGKOK 1 CENTRAL 2 NORTH 3 NORTHEAST 4 SOUTH 5 | |
| HH6. Area: | MUNICIPALITY 1 NON-MUNICIPALITY 2 | | |
| HH7A. Province | | | |
| HH8. Is the household selected for Questionnaire for Men? | | | YES 1 NO 2 |

| | |
|---|----------------------------------|
| <p><i>Check that the respondent is a knowledgeable member of the household and at least 18 years old before proceeding. You may only interview a child age 15-17 if there is no adult member of the household or all adult members are incapacitated. You may not interview a child under age 15.</i></p> | HH11. Record the time. |
| | HOURS : MINUTES _____ : _____ |

HH12. Hello, my name is (*your name*). We are from National Statistical Office. We are conducting a survey about the situation of children, families and households. I would like to talk to you about these subjects. This interview usually takes about 25 minutes. Following this, I may ask to conduct additional interviews with you or other individual members of your household. All the information we obtain will remain strictly confidential and anonymous. If you do not wish to answer a question or stop the interview, please let me know. May I start now?

| | |
|------------------------|-------------------------------|
| YES 1 | 1 ⇨ LIST OF HOUSEHOLD MEMBERS |
| NO / NOT ASKED 2 | 2 ⇨ HH46 |

| | |
|---|--|
| HH46. Result of Household Questionnaire interview: | COMPLETED 01 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 02 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 03 REFUSED 04 DWELLING VACANT OR ADDRESS NOT A DWELLING 05 DWELLING DESTROYED 06 DWELLING NOT FOUND 07 OTHER (specify) _____ 96 |
| <i>Discuss any result not completed with Supervisor.</i> | |

| |
|---|
| HH47. Name and line number of the respondent to Household Questionnaire interview: |
| NAME _____ |
| HOUSEHOLD MEMBERS |
| WOMEN AGE 15-49 |
| <i>If household is selected for Questionnaire for Men:</i> MEN AGE 15-49 |
| CHILDREN UNDER AGE 5 |
| CHILDREN AGE 5-17 |

| | |
|--|-----|
| <i>To be filled after the Household Questionnaire is completed</i> | |
| TOTAL NUMBER | |
| HH48 | ___ |
| HH49 | ___ |
| HH50 | ___ |
| HH51 | ___ |
| HH52 | ___ |

| | |
|--|-----------------------------|
| <i>To be filled after all the questionnaires are completed</i> | |
| COMPLETED NUMBER | |
| HH53 | ___ |
| HH54 | ___ |
| HH55 | ___ |
| HH56 | ZERO 0 ONE 1 |

LIST OF HOUSEHOLD MEMBERS

HL

First complete HL2-HL4 vertically for all household members, starting with the head of the household. Once HL2-HL4 are complete for all members, make sure to probe for additional members: Those that are not currently at home, any infants or small children and any others who may not be family (such as servants, friends) but who usually live in the household.

Then, ask questions HL5-HL20 for each member one at a time. If additional questionnaires are used, indicate by ticking this box:

| HL1. Line number | HL2. First, please tell me the name of each person who usually lives here, starting with the head of the household. <i>Probe for additional household members.</i> | HL3. What is the relationship of (name) to (name of the head of household)? | HL4. Is (name) male or female? 1 MALE 2 FEMALE | HL5. What is (name)'s date of birth? 98 DK 9998 DK | HL6. How old is (name)? Record in completed years. <i>If age is 95 or above, record '95'.</i> | HL8. Record line number if woman and age 15-49. | HL9. Record line number if man, age 15- 49 and HH8 is yes. | HL10. Record line number if age 0-4. | HL11. Age 0-17? 1 YES 2 NO ☺ Next Line | HL12. Is (name)'s natural mother alive? 1 YES 2 NO ☺ HL16 8 DK ☺ HL16 | HL13. Does (name)'s natural mother live in this household? 1 YES 2 NO ☺ HL15 | HL14. Record the line number of mother and go to HL16. | HL15. Where does (name)'s natural mother live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME REGION 3 IN ANOTHER HOUSEHOLD IN ANOTHER REGION 4 INSTITUTION IN THIS COUNTRY 8 DK | HL16. Is (name)'s natural father alive? 1 YES 2 NO ☺ HL20 8 DK ☺ HL20 | HL17. Does (name)'s natural father live in this household? 1 YES 2 NO ☺ HL19 | HL18. Record the line number of father and go to HL20. | HL19. Where does (name)'s natural father live? 1 ABROAD 2 IN ANOTHER HOUSEHOLD IN THE SAME REGION 3 IN ANOTHER HOUSEHOLD IN ANOTHER REGION 4 INSTITUTION IN THIS COUNTRY 8 DK | HL20. Copy the line number of mother from HL14. If blank, ask: Who is the primary caretaker of (name)? <i>If 'No one' for a child age 15-17, record '90'.</i> | HL21. Only if HL14 is blank and HL20≠90, probe: What is the relationship of the primary caregiver to (name)? |
|------------------------|--|---|--|---|--|---|--|---|--|---|---|--|--|---|---|--|---|---|--|
| LINE | NAME | RELATION* | M F | MONTH | YEAR | AGE | W 15-49 | M 15-49 | 0-4 | Y N | Y N DK | Y N | MOTHER | Y N DK | Y N | FATHER | | | RELATION** |
| 01 | | 0 1 | 1 2 | __ | __ | __ | 01 | 01 | 01 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 02 | | __ | 1 2 | __ | __ | __ | 02 | 02 | 02 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 03 | | __ | 1 2 | __ | __ | __ | 03 | 03 | 03 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 04 | | __ | 1 2 | __ | __ | __ | 04 | 04 | 04 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 05 | | __ | 1 2 | __ | __ | __ | 05 | 05 | 05 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 06 | | __ | 1 2 | __ | __ | __ | 06 | 06 | 06 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 07 | | __ | 1 2 | __ | __ | __ | 07 | 07 | 07 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 08 | | __ | 1 2 | __ | __ | __ | 08 | 08 | 08 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 09 | | __ | 1 2 | __ | __ | __ | 09 | 09 | 09 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |
| 10 | | __ | 1 2 | __ | __ | __ | 15 | 15 | 15 | 1 2 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | 1 2 8 | 1 2 | __ | 1 2 3 4 8 | __ |

| | | | | |
|---|--|---|--|--|
| * Codes for HL3: Relationship to head of household: | 01 HEAD 02 SPOUSE / PARTNER 03 SON / DAUGHTER 04 SON-IN-LAW / DAUGHTER-IN-LAW | 05 GRANDCHILD 06 PARENT 07 PARENT-IN-LAW 08 BROTHER / SISTER | 09 BROTHER-IN-LAW / SISTER-IN-LAW 10 UNCLE/AUNT 11 NIECE / NEPHEW 12 OTHER RELATIVE | 13 ADOPTED / FOSTER / STEPCHILD 14 SERVANT (LIVE-IN) 96 OTHER (NOT RELATED) 98 DK |
|---|--|---|--|--|

| | | | |
|---|--|---|--|
| ** Codes for HL21: Relationship to primary caregiver: | 01 FATHER 02 PATERNAL GRANDFATHER 03 PATERNAL GRANDMOTHER 04 MATERNAL GRANDFATHER | 05 MATERNAL GRANDMOTHER 06 UNCLE, PARENTS' OLDER BROTHER 07 AUNT, PARENTS' OLDER SISTER 08 AUNT, PARENTS' YOUNGER SISTER | 09 UNCLE, PARENTS' YOUNGER BROTHER 10 OLDER BROTHER/SISTER 11 OTHER RELATIVE 96 OTHER (NOT RELATED) |
|---|--|---|--|

| EDUCATION 1 | | | | | | | | | | | | | ED | | | | |
|---------------------|--|-----|---|----|--|----|---|------------|-------------------------------|---|--|-----|----|---|----|--|--|
| ED1. Line number | ED2. Name and age. Copy names and ages of <u>all</u> members of the household from HL2 and HL6 to below <u>and</u> to next page of the module. | | ED3. Age 3 or above? 1 YES 2 NO ☺ Next Line | | ED4. Has (name) ever attended school or any Early Childhood Education programme? 1 YES 2 NO ☺ Next Line | | ED5. What is the highest level and grade or year of school (name) has ever <u>attended</u> ? LEVEL: (See codes at the end of the module) 00 ECE ☺ ED7 | | GRADE/YEAR: 98 DK ☺ ED7 | | ED6. Did (name) ever <u>complete</u> that (grade/year)? 1 YES 2 NO 8 DK | | | ED7. Age 3-24? 1 YES 2 NO ☺ Next Line | | ED8. Check ED4: Ever attended school or ECE? 1 YES 2 NO ☺ Next Line | |
| LINE | NAME | AGE | YES | NO | YES | NO | LEVEL | GRADE/YEAR | Y | N | DK | YES | NO | YES | NO | | |
| 01 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 02 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 03 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 04 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 05 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 06 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 07 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 08 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 09 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |
| 10 | | ___ | 1 | 2 | 1 | 2 | ___ | ___ | 1 | 2 | 8 | 1 | 2 | 1 | 2 | | |

EDUCATION 2 **ED**

| ED1. Line number | ED2. Name and age. | | ED9. At any time during the 2562-63 school year did (name) attend school or any Early Childhood Education programme? 1 YES 2 NO ☺ ED15 | ED10. During the 2562-63 school year, which level and grade or year is (name) attending? LEVEL: (See codes at the end of the module) 00 ECE ☺ ED11 | | ED10C. If ED10 (Level) is recorded 01-03 only, probe: Is (name) attending formal school, NFE, or home school? 1 ATTENDING NFE ☺ ED12 2 ATTENDING HOME SCHOOL Attending NFE ☺ ED12 3 NOT ATTENDING BOTH FORM 8 DK | ED11. Is (he/she) attending a public school? If "Yes", record '1'. If "No", probe to code who controls and manages the school. 1 GOVT./ PUBLIC 2 RELIGIOUS/ FAITH ORG. 3 PRIVATE 6 OTHER 8 DK | ED12. In the 2562-63 school year, has (name) received any school tuition support? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO ☺ ED14 8 DK ☺ ED14 | ED13. Who provided the tuition support? Record all mentioned. A GOVT. / PUBLIC B RELIGIOUS/ FAITH ORG. C PRIVATE. X OTHER Z DK | ED14. For the 2562-63 school year, has (name) received any material support or cash to buy shoes, exercise books, notebooks, school uniforms or other school supplies? If "Yes", probe to ensure that support was not received from family, other relatives, friends or neighbours. 1 YES 2 NO 8 DK | ED15. At any time during the 2561-62 school year did (name) attend school or any Early Childhood Education programme? 1 YES 2 NO ☺ 8 DK ☺ Next Line Next Line | ED16. During 2561-62 school year, which level and grade or year did (name) attend? LEVEL: (See codes at the end of the module) 0 ECE ☺ Next Line | |
|---------------------|-----------------------|-------|---|--|----------------|--|--|--|---|---|--|--|----------------|
| LINE | NAME | AGE | YES NO | LEVEL | GRADE/ YEAR | NFE | AUTHORITY | YES NO DK | TUITION | YES NO DK | YES NO DK | LEVEL | GRADE/ YEAR |
| 01 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 02 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 03 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 04 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 05 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 06 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 07 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 08 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 09 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |
| 10 | | _____ | 1 2 | _____ | _____ | 1 2 3 8 | 1 2 3 6 8 | 1 2 8 | A B C X Z | 1 2 8 | 1 2 8 | _____ | _____ |

| | | | |
|---|--|--|---|
| * Codes for level of education for ED5, ED10, and ED16: | 00 ECE 01 PRIMARY 02 LOWER SECONDARY | 03 UPPER SECONDARY 04 CERTIFICATE (VCE / TCE) 05 DIPLOMA (HVC / CTV / HTC) | 06 BACHELOR DEGREE 07 MASTER DEGREE 08 DOCTORAL DEGREE 98 DK |
|---|--|--|---|

| HOUSEHOLD CHARACTERISTICS | | HC |
|--|--|----|
| HC1A. What is the religion of (<i>name of the head of the household from HL2</i>)? | BUDDHISM..... 1 ISLAM..... 2 CHRISTIANITY 3 OTHER RELIGION (<i>specify</i>) 6 NO RELIGION 7 | |
| HC1B. What is the native language of (<i>name of the head of the household from HL2</i>)? | THAI (INCLUDING LOCAL DIALECTS) 01 ENGLISH..... 02 CHINESE 03 BURMESE 04 KHMER / KUY 05 MALAY / JAWI..... 06 LAO..... 07 KAREN 08 HMONG..... 09 LAHU 10 MON..... 11 LAWLA 12 AKHA 13 NYEU 14 SHAN 15 OTHER LANGUAGE (<i>specify</i>) 96 | |
| HC3. How many rooms do members of this household usually use for sleeping? | NUMBER OF ROOMS..... __ __ | |
| HC4. Main material of the dwelling floor. <i>Record observation.</i> <i>If observation is not possible, ask the respondent to determine the material of the dwelling floor.</i> | NATURAL FLOOR EARTH / SAND 11 RUDIMENTARY FLOOR WOOD PLANKS 21 PALM / BAMBOO..... 22 FINISHED FLOOR PARQUET OR POLISHED WOOD 31 VINYL OR ASPHALT STRIPS 32 CERAMIC TILES 33 CEMENT 34 CARPET 35 MARBLE / POLISHED STONE..... 36 OTHER (<i>specify</i>) 96 | |

| <p>HC5. Main material of the roof.</p> <p><i>Record observation.</i></p> | <p>NATURAL ROOFING</p> <p>THATCH (E.G. NIPA PALM / SUGAR PALM / PALM / COCONUT LEAF) 12</p> <p>SOD (E.G. COGON GRASS / VETIVER GRASS)..... 13</p> <p>RUDIMENTARY ROOFING</p> <p>WOOD PLANKS 23</p> <p>FINISHED ROOFING</p> <p>CERAMIC TILES 34</p> <p>CEMENT..... 35</p> <p>ZINC..... 37</p> <p>STEEL 38</p> <p>ALUMINUM / OTHER METAL..... 39</p> <p>OTHER (<i>specify</i>) 96</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|----|-----|----|------------------------------|---|---|---------------|---|---|------------|---|---|----------------------|---|---|--------------------------------|---|---|------------------|---|---|------------------|---|---|-----------------------|---|---|-----------------------------------|---|---|------------------------|---|---|--|
| <p>HC6. Main material of the exterior walls.</p> <p><i>Record observation.</i></p> | <p>NATURAL WALLS</p> <p>TRUNKS 12</p> <p>RUDIMENTARY WALLS</p> <p>BAMBOO..... 21</p> <p>PLYWOOD 24</p> <p>REUSED WOOD 26</p> <p>FINISHED WALLS</p> <p>CEMENT..... 31</p> <p>STONE WITH CEMENT..... 32</p> <p>BRICKS..... 33</p> <p>CEMENT BLOCKS / BLOCK BRICKS 34</p> <p>WOOD PLANKS 36</p> <p>TIN 37</p> <p>GYPSUM BOARD..... 38</p> <p>SMART BOARD / FIBER CEMENT BOARD..... 39</p> <p>OTHER (<i>specify</i>) 96</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>HC7. Does your household have:</p> <p>[A] A fixed telephone line?</p> <p>[B] A radio?</p> <p>[C] A bed?</p> <p>[D] A dining table?</p> <p>[E] A sofa / living room furniture set?</p> <p>[F] A wardrobe?</p> <p>[G] A showcase?</p> <p>[H] A pantry cabinet?</p> <p>[I] A water tank / big water jar?</p> <p>[J] A charcoal stove?</p> | <table border="1"> <thead> <tr> <th></th> <th>YES</th> <th>NO</th> </tr> </thead> <tbody> <tr> <td>FIXED TELEPHONE LINE 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>RADIO 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>BED..... 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>DINING TABLE 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>SOFA / LIVING ROOM SET 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>WARDROBE 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>SHOWCASE 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>PANTRY CABINET..... 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>WATER TANK / BIG WATER JAR..... 1</td> <td>1</td> <td>2</td> </tr> <tr> <td>CHARCOAL STOVE 1</td> <td>1</td> <td>2</td> </tr> </tbody> </table> | | YES | NO | FIXED TELEPHONE LINE 1 | 1 | 2 | RADIO 1 | 1 | 2 | BED..... 1 | 1 | 2 | DINING TABLE 1 | 1 | 2 | SOFA / LIVING ROOM SET 1 | 1 | 2 | WARDROBE 1 | 1 | 2 | SHOWCASE 1 | 1 | 2 | PANTRY CABINET..... 1 | 1 | 2 | WATER TANK / BIG WATER JAR..... 1 | 1 | 2 | CHARCOAL STOVE 1 | 1 | 2 | |
| | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FIXED TELEPHONE LINE 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RADIO 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| BED..... 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DINING TABLE 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SOFA / LIVING ROOM SET 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WARDROBE 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SHOWCASE 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PANTRY CABINET..... 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| WATER TANK / BIG WATER JAR..... 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CHARCOAL STOVE 1 | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| HC8. Does your household have electricity? | YES, INTERCONNECTED GRID 1 YES, OFF-GRID (GENERATOR/ISOLATED SYSTEM) 2 NO 3 | 3 ⇒ HC10 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|----------|-----|----|-----------------------------|---|---|---|---|---|------------------------------|---|---|--------------------------|---|---|--------------------------|---|---|--|---|---|---------------------------------|---|---|--|---|---|----------------------|---|---|-------------------------|---|---|----------------------|---|---|-----------------------|---|---|---------------------------------|---|---|-----------------------------|---|---|--|
| HC9. Does your household have: | <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">YES</th> <th style="width: 10%; text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>[A] A plain television set?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[B] An LCD / LED / plasma monitor television?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[C] A VCD / DVD player?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[D] A Blu-ray player?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[E] An electric fan?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[F] A refrigerator?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[G] A top-load washing machine?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[H] A front-load washing machine?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[I] A clothes dryer?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[J] An air conditioner?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[K] An air purifier?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[L] A microwave oven?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[M] A water heater in bathroom?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[N] An electric water pump?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table> | | YES | NO | [A] A plain television set? | 1 | 2 | [B] An LCD / LED / plasma monitor television? | 1 | 2 | [C] A VCD / DVD player? | 1 | 2 | [D] A Blu-ray player? | 1 | 2 | [E] An electric fan? | 1 | 2 | [F] A refrigerator? | 1 | 2 | [G] A top-load washing machine? | 1 | 2 | [H] A front-load washing machine? | 1 | 2 | [I] A clothes dryer? | 1 | 2 | [J] An air conditioner? | 1 | 2 | [K] An air purifier? | 1 | 2 | [L] A microwave oven? | 1 | 2 | [M] A water heater in bathroom? | 1 | 2 | [N] An electric water pump? | 1 | 2 | |
| | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [A] A plain television set? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [B] An LCD / LED / plasma monitor television? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [C] A VCD / DVD player? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [D] A Blu-ray player? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [E] An electric fan? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [F] A refrigerator? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [G] A top-load washing machine? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [H] A front-load washing machine? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [I] A clothes dryer? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [J] An air conditioner? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [K] An air purifier? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [L] A microwave oven? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [M] A water heater in bathroom? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [N] An electric water pump? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HC10. Does any member of your household own: | <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 10%; text-align: center;">YES</th> <th style="width: 10%; text-align: center;">NO</th> </tr> </thead> <tbody> <tr> <td>[A] A wristwatch?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[B] A bicycle?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[C] A motorcycle or scooter?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[E] A car, truck or van?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[F] A boat with a motor?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[G] A 2-wheel tractor (walking tractor)?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[H] A 4-wheel tractor?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>[I] A large sized motorcycle (big bike)?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table> | | YES | NO | [A] A wristwatch? | 1 | 2 | [B] A bicycle? | 1 | 2 | [C] A motorcycle or scooter? | 1 | 2 | [E] A car, truck or van? | 1 | 2 | [F] A boat with a motor? | 1 | 2 | [G] A 2-wheel tractor (walking tractor)? | 1 | 2 | [H] A 4-wheel tractor? | 1 | 2 | [I] A large sized motorcycle (big bike)? | 1 | 2 | | | | | | | | | | | | | | | | | | | |
| | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [A] A wristwatch? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [B] A bicycle? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [C] A motorcycle or scooter? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [E] A car, truck or van? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [F] A boat with a motor? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [G] A 2-wheel tractor (walking tractor)? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [H] A 4-wheel tractor? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [I] A large sized motorcycle (big bike)? | 1 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HC11. Does any member of your household have a computer or a tablet? | YES 1 NO 2 | 2 ⇒ HC12 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| HC11A. What kind of computer or tablet does any member of your household have? | DESKTOP COMPUTER A LAPTOP B TABLET C | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|----------|
| HC12. Does any member of your household have a mobile telephone? | YES 1 NO 2 | 2 ⇒ HC13 |
| HC12A. What kind of mobile telephone does any member of your household have? | SMARTPHONE A KEYPAD MOBILE PHONE B | |
| HC13. Does your household have access to internet at home? | YES 1 NO 2 | |
| HC14. Do you or someone living in this household own this dwelling? <i>If 'No', then ask: Do you rent this dwelling from someone not living in this household?</i> <i>If 'Rented from someone else', record '2'. For other responses, record '6' and specify.</i> | OWN 01 RENT..... 02 HIRE-PURCHASE..... 03 BELONG TO RELATIVE NOT IN HOUSEHOLD..... 04 WELFARE FROM WORK..... 05 DWELLING BUILT ON PUBLIC LAND 06 OTHER (<i>specify</i>) 96 | |
| HC15. Does any member of this household own any land that can be used for agriculture? | YES 1 NO 2 | 2 ⇒ HC17 |
| HC16. How many rais of agricultural land do members of this household own? <i>If the area is less than one rais, record '00'. If 95 or more rais, record '95'. If unknown, record '98'. For more details on conversions, please refer to manual.</i> | AREA (<i>rais</i>) ____ ____ | |
| HC17. Does this household own any livestock, herds, other farm animals, or poultry? | YES 1 NO 2 | 2 ⇒ HC19 |
| HC18. How many of the following animals does this household have? [A] Milk cows or bulls? [B] Buffaloes? [C] Horses, donkeys or mules? [D] Goats? [E] Sheep? [F] Chickens? [G] Pigs? [H] Ducks or geese? <i>If none, record '00'. If 95 or more, record '95'. If unknown, record '98'.</i> | MILK COWS OR BULLS ____ ____ BUFFALOES ____ ____ HORSES, DONKEYS OR MULES..... ____ ____ GOATS..... ____ ____ SHEEP ____ ____ CHICKENS ____ ____ PIGS ____ ____ DUCKS OR GEESE..... ____ ____ | |
| HC19. Does any member of this household have a bank account? | YES 1 NO 2 | |
| HC20. Does any member of the household have a credit card? | YES 1 NO 2 | |

SOCIAL TRANSFERS

ST

ST1. I would like to ask you about various external economic assistance programmes provided to households. By external assistance I mean support that comes from the government or from non-governmental organizations such as religious, charitable, or community-based organizations. This excludes support from family, other relatives, friends or neighbours.

| | [A] STATE WELFARE CARD | [B] OLD AGE ALLOWANCE | [C] CHILD SUPPORT GRANT | [D] ANY RETIREMENT PENSION | [X] ANY OTHER EXTERNAL ASSISTANCE PROGRAMME |
|--|---|---|---|---|---|
| ST2. Are you aware of (<i>name of programme</i>)? | YES 1 <input type="checkbox"/> <i>ST3</i> NO 2 <input type="checkbox"/> <i>[B]</i> | YES 1 <input type="checkbox"/> <i>ST3</i> NO 2 <input type="checkbox"/> <i>[C]</i> | YES 1 <input type="checkbox"/> <i>ST3</i> NO 2 <input type="checkbox"/> <i>[D]</i> | YES 1 <input type="checkbox"/> <i>ST3</i> NO 2 <input type="checkbox"/> <i>[X]</i> | YES (<i>specify</i>) ____ 1 <input type="checkbox"/> <i>ST3</i> NO 2 <input type="checkbox"/> <i>Next module</i> |
| ST3. Has your household or anyone in your household received assistance through (<i>name of programme</i>)? | YES 1 <input type="checkbox"/> <i>ST4</i> NO 2 <input type="checkbox"/> <i>[B]</i> DK 8 <input type="checkbox"/> <i>[B]</i> | YES 1 <input type="checkbox"/> <i>ST4</i> NO 2 <input type="checkbox"/> <i>[C]</i> DK 8 <input type="checkbox"/> <i>[C]</i> | YES 1 <input type="checkbox"/> <i>ST4</i> NO 2 <input type="checkbox"/> <i>[D]</i> DK 8 <input type="checkbox"/> <i>[D]</i> | YES 1 <input type="checkbox"/> <i>ST4</i> NO 2 <input type="checkbox"/> <i>[X]</i> DK 8 <input type="checkbox"/> <i>[X]</i> | YES 1 <input type="checkbox"/> <i>ST4</i> NO 2 <input type="checkbox"/> <i>Next module</i> DK 8 <input type="checkbox"/> <i>Next module</i> |
| ST4. When was the <u>last time</u> your household or anyone in your household received assistance through (<i>name of programme</i>)? <i>If less than one month, record '1' and record '00' in Months.</i> <i>If less than 12 months, record '1' and record in Months.</i> <i>If 1 year/12 months or more, record '2' and record in Years.</i> | MONTHS AGO... 1 ____ <input type="checkbox"/> <i>[B]</i> YEARS AGO 2 ____ <input type="checkbox"/> <i>[B]</i> DK 998 <input type="checkbox"/> <i>[B]</i> | MONTHS AGO ...1 ____ <input type="checkbox"/> <i>[C]</i> YEARS AGO 2 ____ <input type="checkbox"/> <i>[C]</i> DK 998 <input type="checkbox"/> <i>[C]</i> | MONTHS AGO ...1 ____ <input type="checkbox"/> <i>[D]</i> YEARS AGO 2 ____ <input type="checkbox"/> <i>[D]</i> DK 998 <input type="checkbox"/> <i>[D]</i> | MONTHS AGO... 1 ____ <input type="checkbox"/> <i>[X]</i> YEARS AGO 2 ____ <input type="checkbox"/> <i>[X]</i> DK 998 <input type="checkbox"/> <i>[X]</i> | MONTHS AGO ...1 ____ <input type="checkbox"/> <i>Next module</i> YEARS AGO 2 ____ <input type="checkbox"/> <i>Next module</i> DK 998 <input type="checkbox"/> <i>Next module</i> |

| HOUSEHOLD ENERGY USE | | EU |
|--|--|---------|
| <p>EU1. In your household, what type of cookstove is <u>mainly</u> used for <u>cooking</u>?</p> | ELECTRIC STOVE 01 | 01 ⇒EU5 |
| | SOLAR COOKER 02 | 02 ⇒EU5 |
| | LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE 03 | 03 ⇒EU5 |
| | BIOGAS STOVE 05 | 05 ⇒EU5 |
| | THREE STONE STOVE / OPEN FIRE 09 | 09 ⇒EU4 |
| | CHARCOAL STOVE 10 | |
| | OTHER (<i>specify</i>) 96 | 96 ⇒EU4 |
| <p>EU2. Does it have a chimney?</p> | YES 1 | |
| | NO 2 | |
| | DK 8 | |
| <p>EU4. What type of fuel or energy source is used in this cookstove?</p> <p><i>If more than one, record the main energy source for this cookstove.</i></p> | ALCOHOL / ETHANOL 01 | |
| | GASOLINE / DIESEL 02 | |
| | KEROSENE / PARAFFIN 03 | |
| | COAL / LIGNITE 04 | |
| | CHARCOAL 05 | |
| | WOOD 06 | |
| | CROP RESIDUE / GRASS / STRAW / SHRUBS 07 | |
| | ANIMAL DUNG / WASTE 08 | |
| | PROCESSED BIOMASS (PELLETS) OR WOODCHIPS 09 | |
| | GARBAGE / PLASTIC 10 | |
| | SAWDUST 11 | |
| OTHER (<i>specify</i>) 96 | | |
| <p>EU5. Is the cooking usually done in the house, in a separate building, or outdoors?</p> <p><i>If in main house, probe to determine if cooking is done in a separate room.</i></p> <p><i>If outdoors, probe to determine if cooking is done on veranda, covered porch, or open air.</i></p> | IN MAIN HOUSE | |
| | NO SEPARATE ROOM 1 | |
| | IN A SEPARATE ROOM 2 | |
| | IN A SEPARATE BUILDING 3 | |
| | OUTDOORS | |
| | OPEN AIR 4 | |
| ON VERANDA OR COVERED PORCH 5 | | |
| OTHER (<i>specify</i>) 6 | | |

| | | |
|--|--|--|
| <p>EU9. At night, what does your household <u>mainly</u> use to <u>light</u> the household?</p> | <p>ELECTRICITY 01 SOLAR LANTERN 02 RECHARGEABLE FLASHLIGHT, TORCH OR LANTERN 03 BATTERY POWERED FLASHLIGHT, TORCH OR LANTERN 04 BIOGAS LAMP 05 GASOLINE LAMP 06 KEROSENE OR PARAFFIN LAMP 07 CHARCOAL 08 WOOD 09 CROP RESIDUE / GRASS / STRAW / SHRUBS 10 ANIMAL DUNG / WASTE 11 CANDLE 13 OTHER (<i>specify</i>) _____ 96 NO LIGHTING IN HOUSEHOLD 97</p> | |
|--|--|--|

| WATER AND SANITATION | | WS |
|--|---|----|
| <p>WS1. What is the <u>main</u> source of drinking water used by members of your household?</p> <p><i>If unclear, probe to identify the place from which members of this household most often collect drinking water (collection point).</i></p> | <p>PIPED WATER</p> <p>PIPED INTO DWELLING11 11 ⇨WS7</p> <p>PIPED TO YARD / PLOT12 12 ⇨WS7</p> <p>PIPED TO NEIGHBOUR13 13 ⇨WS3</p> <p>PUBLIC TAP / STANDPIPE.....14 14 ⇨WS3</p> <p>TUBE WELL / BOREHOLE21 21 ⇨WS3</p> <p>DUG WELL</p> <p>PROTECTED WELL.....31 31 ⇨WS3</p> <p>UNPROTECTED WELL32 32 ⇨WS3</p> <p>RAINWATER.....51 51 ⇨WS3</p> <p>TANKER-TRUCK.....61 61 ⇨WS4</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)81 81 ⇨WS3</p> <p>PACKAGED WATER</p> <p>BOTTLED WATER91</p> <p>PACKAGED WATER GLASS / CUP WATER.....93</p> <p>COIN-OPERATED WATER DISPENSER.....94</p> <p>OTHER (<i>specify</i>).....96 96 ⇨WS3</p> | |
| <p>WS2. What is the <u>main</u> source of water used by members of your household for other purposes such as cooking and handwashing?</p> <p><i>If unclear, probe to identify the place from which members of this household most often collect water for other purposes.</i></p> | <p>PIPED WATER</p> <p>PIPED INTO DWELLING11 11 ⇨WS7</p> <p>PIPED TO YARD / PLOT12 12 ⇨WS7</p> <p>PIPED TO NEIGHBOUR13</p> <p>PUBLIC TAP / STANDPIPE.....14</p> <p>TUBE WELL / BOREHOLE21</p> <p>DUG WELL</p> <p>PROTECTED WELL.....31</p> <p>UNPROTECTED WELL32</p> <p>RAINWATER.....51</p> <p>TANKER-TRUCK.....61 61 ⇨WS4</p> <p>SURFACE WATER (RIVER, DAM, LAKE, POND, STREAM, CANAL, IRRIGATION CHANNEL)81</p> <p>OTHER (<i>specify</i>).....96</p> | |
| <p>WS3. Where is that water source located?</p> | <p>IN OWN DWELLING1 1 ⇨WS7</p> <p>IN OWN YARD / PLOT2 2 ⇨WS7</p> <p>ELSEWHERE3</p> | |
| <p>WS4. How long does it take for members of your household to go there, get water, and come back?</p> | <p>MEMBERS DO NOT COLLECT000 000 ⇨WS7</p> <p>NUMBER OF MINUTES _ _ _</p> <p>DK.....998</p> | |

| | | |
|---|--|---|
| <p>WS5. Who usually goes to this source to collect the water for your household?</p> <p><i>Record the name of the person and copy the line number of this person from the LIST OF HOUSEHOLD MEMBERS Module.</i></p> | <p>NAME _____</p> <p>LINE NUMBER..... _____</p> | |
| <p>WS6. Since last (<i>day of the week</i>), how many times has this person collected water?</p> | <p>NUMBER OF TIMES..... _____</p> <p>DK.....98</p> | |
| <p>WS7. In the last month, has there been any time when your household did not have sufficient quantities of drinking water?</p> | <p>YES, AT LEAST ONCE.....1</p> <p>NO, ALWAYS SUFFICIENT2</p> <p>DK.....8</p> | <p>2 ⇨ WS9</p> <p>8 ⇨ WS9</p> |
| <p>WS8. What was the main reason that you were unable to access water in sufficient quantities when needed?</p> | <p>WATER NOT AVAILABLE FROM SOURCE....1</p> <p>WATER TOO EXPENSIVE.....2</p> <p>SOURCE NOT ACCESSIBLE.....3</p> <p>OTHER (<i>specify</i>).....6</p> <p>DK.....8</p> | |
| <p>WS9. Do you or any other member of this household do anything to the water to make it safer to drink?</p> | <p>YES.....1</p> <p>NO.....2</p> <p>DK.....8</p> | <p>2 ⇨ WS11</p> <p>8 ⇨ WS11</p> |
| <p>WS10. What do you usually do to make the water safer to drink?</p> <p><i>Probe:</i> Anything else?</p> <p><i>Record all methods mentioned.</i></p> | <p>BOILA</p> <p>ADD BLEACH / CHLORINEB</p> <p>STRAIN IT THROUGH A CLOTH.....C</p> <p>USE WATER FILTER (CERAMIC, SAND, COMPOSITE, ETC.)D</p> <p>SOLAR DISINFECTIONE</p> <p>LET IT STAND AND SETTLEF</p> <p>OTHER (<i>specify</i>).....X</p> <p>DK.....Z</p> | |
| <p>WS11. What kind of toilet facility do members of your household usually use?</p> <p><i>If 'Flush' or 'Pour flush', probe:</i> Where does it flush to?</p> <p><i>If not possible to determine, ask permission to observe the facility.</i></p> | <p>FLUSH / POUR FLUSH</p> <p>FLUSH TO PIPED SEWER SYSTEM.....11</p> <p>FLUSH TO SEPTIC TANK.....12</p> <p>FLUSH TO PIT LATRINE.....13</p> <p>FLUSH TO OPEN DRAIN.....14</p> <p>FLUSH TO DK WHERE.....18</p> <p>PIT LATRINE</p> <p>VENTILATED IMPROVED PIT LATRINE.....21</p> <p>PIT LATRINE WITH SLAB22</p> <p>PIT LATRINE WITHOUT SLAB / OPEN PIT23</p> <p>NO FACILITY / BUSH / FIELD.....95</p> <p>OTHER (<i>specify</i>).....96</p> | <p>11 ⇨ WS14</p> <p>14 ⇨ WS14</p> <p>18 ⇨ WS14</p> <p>95 ⇨ Next module</p> <p>96 ⇨ WS14</p> |

| | | |
|---|---|-------------------------------|
| <p>WS12. Has your (<i>answer from WS11</i>) ever been emptied?</p> | <p>YES, EMPTIED.....1</p> <p>NO, NEVER EMPTIED4</p> <p>DK.....8</p> | <p>4 ⇒WS14</p> <p>8 ⇒WS14</p> |
| <p>WS13. The last time it was emptied, where were the contents emptied to?</p> <p><i>Probe:</i> Was it removed by a service provider?</p> | <p>REMOVED BY SERVICE PROVIDER</p> <p>TO A TREATMENT PLANT.....1</p> <p>BURIED IN A COVERED PIT2</p> <p>TO DON'T KNOW WHERE.....3</p> <p>EMPTIED BY HOUSEHOLD</p> <p>BURIED IN A COVERED PIT4</p> <p>TO UNCOVERED PIT, OPEN GROUND, WATER BODY OR ELSEWHERE.....5</p> <p>OTHER (<i>specify</i>).....6</p> <p>DK.....8</p> | |
| <p>WS14. Where is this toilet facility located?</p> | <p>IN OWN DWELLING1</p> <p>IN OWN YARD / PLOT.....2</p> <p>ELSEWHERE3</p> | |
| <p>WS15. Do you share this facility with others who are not members of your household?</p> | <p>YES1</p> <p>NO.....2</p> | <p>2 ⇒ Next module</p> |
| <p>WS16. Do you share this facility only with members of other households that you know, or is the facility open to the use of the general public?</p> | <p>SHARED WITH KNOWN HOUSEHOLDS (NOT PUBLIC).....1</p> <p>SHARED WITH GENERAL PUBLIC.....2</p> | <p>2 ⇒ Next module</p> |
| <p>WS17. How many households in total use this toilet facility, including your own household?</p> | <p>NUMBER OF HOUSEHOLDS (IF LESS THAN 10) <u>0</u> ..</p> <p>TEN OR MORE HOUSEHOLDS10</p> <p>DK.....98</p> | |

| HANDWASHING | | HW |
|--|---|--|
| <p>HW1. We would like to learn about where members of this household wash their hands.</p> <p>Can you please show me where members of your household <u>most often</u> wash their hands?</p> <p><i>Record result and observation.</i></p> | <p>OBSERVED</p> <p>FIXED FACILITY OBSERVED (SINK / TAP)</p> <p>IN DWELLING1</p> <p>IN YARD / PLOT2</p> <p>MOBILE OBJECT OBSERVED (BUCKET / JUG / KETTLE)3</p> <p>NOT OBSERVED</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>NO PERMISSION TO SEE5</p> <p>OTHER REASON (<i>specify</i>)6</p> | <p>4 ⇨ HW5</p> <p>5 ⇨ HW4</p> <p>6 ⇨ HW5</p> |
| <p>HW2. Observe presence of water at the place for handwashing.</p> <p><i>Verify by checking the tap/pump, or basin, bucket, water container or similar objects for presence of water.</i></p> | <p>WATER IS AVAILABLE1</p> <p>WATER IS NOT AVAILABLE2</p> | |
| <p>HW3. Is soap, detergent or dishwashing liquid present at the place for handwashing?</p> | <p>YES, PRESENT1</p> <p>NO, NOT PRESENT2</p> | <p>1 ⇨ HW7</p> <p>2 ⇨ HW5</p> |
| <p>HW4. Where do you or other members of your household <u>most often</u> wash your hands?</p> | <p>FIXED FACILITY (SINK / TAP)</p> <p>IN DWELLING1</p> <p>IN YARD / PLOT2</p> <p>MOBILE OBJECT (BUCKET / JUG / KETTLE)3</p> <p>NO HANDWASHING PLACE IN DWELLING / YARD / PLOT4</p> <p>OTHER (<i>specify</i>)6</p> | |
| <p>HW5. Do you have any soap or detergent or dishwashing liquid in your house for washing hands?</p> | <p>YES1</p> <p>NO2</p> | <p>2 ⇨ Next module</p> |
| <p>HW6. Can you please show it to me?</p> | <p>YES, SHOWN1</p> <p>NO, NOT SHOWN2</p> | <p>2 ⇨ Next module</p> |
| <p>HW7. Record your observation.</p> <p><i>Record all that apply.</i></p> | <p>BAR OR LIQUID SOAPA</p> <p>DETERGENT (POWDER / LIQUID / PASTE)B</p> <p>DISHWASHING LIQUIDD</p> | |

SALT IODISATION

SA

| | | |
|---|--|---|
| <p>SA1. We would like to check whether the salt used in your household is iodised. May I have a sample of the salt used <u>to cook meals</u> in your household?</p> <p><i>Apply 2 drops of the test solution from the <u>blue-capped</u> (iodate) test kit, observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p> | <p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 15 PPM OR MORE 3</p> <p>SALT NOT TESTED NO SALT IN THE HOUSE..... 4 OTHER REASON (specify) _____ 6</p> | <p>2 ⇨HH13 3 ⇨HH13 4 ⇨HH13 6 ⇨HH13</p> |
| <p>SA2. I would like to perform more tests. May I have another sample of the same salt?</p> <p><i>Apply 5 drops of the recheck solution from the <u>blue-capped</u> test kit. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p> | <p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 15 PPM OR MORE 3</p> <p>SALT NOT TESTED OTHER REASON (specify) 6 6</p> | <p>2 ⇨HH13 3 ⇨HH13 6 ⇨HH13</p> |
| <p>SA3. Ask for a fresh sample of salt.</p> <p><i>Apply 2 drops of test solution from the <u>red-capped</u> test kit (iodide), observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p> | <p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM)..... 2 ABOVE 15 PPM (AT LEAST 15 PPM) 3</p> <p>SALT NOT TESTED NO SALT IN THE HOUSE..... 4 OTHER REASON (specify) _____ 6</p> | <p>2 ⇨HH13 3 ⇨HH13 4 ⇨HH13 6 ⇨HH13</p> |
| <p>SA4. Ask for a fresh sample of salt.</p> <p><i>Apply 5 drops of the recheck solution from the <u>red-capped</u> test kit. Then apply 2 drops of test solution on the same spot. Observe the darkest reaction within 30 seconds, compare to the colour chart and then record the result (1, 2 or 3) that corresponds to test outcome.</i></p> | <p>SALT TESTED 0 PPM (NO REACTION) 1 BELOW 15 PPM (BETWEEN 0 AND 15 PPM) .. 2 ABOVE 15 PPM (AT LEAST 15 PPM)..... 3</p> <p>SALT NOT TESTED OTHER REASON (specify)..... 6</p> | |

| | | |
|--|--|--|
| <p>HH13. Record the time.</p> | <p>HOUR AND MINUTES..... __ __ : __ __</p> | |
| <p>HH14. Language of the Questionnaire.</p> | <p>THAI..... 1 ENGLISH 2</p> | |
| <p>HH15. Language of the Interview.</p> | <p>THAI..... 1 ENGLISH 2 OTHER LANGUAGE (specify) _____ 6</p> | |

| | | | | |
|--|---|--------------------------------------|-------------------------------------|-------------------------------------|
| HH16. <i>Native language of the Respondent.</i> | THAI..... | 01 | | |
| | ENGLISH | 02 | | |
| | CHINESE | 03 | | |
| | BURMESE | 04 | | |
| | KHMER / KUY | 05 | | |
| | MALAY / JAWI..... | 06 | | |
| | LAO | 07 | | |
| | KAREN..... | 08 | | |
| | HMONG | 09 | | |
| | LAHU | 10 | | |
| | MON | 11 | | |
| | LAWA | 12 | | |
| | AKHA..... | 13 | | |
| | NYEU | 14 | | |
| | SHAN | 15 | | |
| OTHER LANGUAGE (<i>specify</i>) _____ | 96 | | | |
| HH17. <i>Was a translator used for any parts of this questionnaire?</i> | YES, ENTIRE QUESTIONNAIRE..... | 1 | | |
| | YES, PART OF QUESTIONNAIRE..... | 2 | | |
| | NO, NOT USED | 3 | | |
| HH18. <i>Check HL6 in the LIST OF HOUSEHOLD MEMBERS and indicate the total number of children age 5-17 years:</i> | NO CHILDREN | 0 | 0 ⇒ HH29 | |
| | 1 CHILD | 1 | 1 ⇒ HH27 | |
| | 2 OR MORE CHILDREN (NUMBER) | __ | | |
| HH19. <i>List each of the children age 5-14 years below in the order they appear in the LIST OF HOUSEHOLD MEMBERS. Do not include other household members outside of the age range 5-14 years. Record the line number, name, sex, and age for each child.</i> | | | | |
| HH20. <i>Rank number</i> | HH21. <i>Line number from HL1</i> | HH22. <i>Name from HL2</i> | HH23. <i>Sex from HL4</i> | HH24. <i>Age from HL6</i> |
| RANK | LINE | NAME | M F | AGE |
| 1 | __ __ | | 1 2 | __ __ |
| 2 | __ __ | | 1 2 | __ __ |
| 3 | __ __ | | 1 2 | __ __ |
| 4 | __ __ | | 1 2 | __ __ |
| 5 | __ __ | | 1 2 | __ __ |
| 6 | __ __ | | 1 2 | __ __ |
| 7 | __ __ | | 1 2 | __ __ |
| 8 | __ __ | | 1 2 | __ __ |

HH25. Check the last digit of the household number (HH2) from the HOUSEHOLD INFORMATION PANEL. This is the number of the row you should go to in the table below.

Check the total number of children age 5-14 years in HH18 above. This is the number of the column you should go to in the table below.

Find the box where the row and the column meet and record the number that appears in the box. This is the rank number (HH20) of the selected child.

| LAST DIGIT OF HOUSEHOLD NUMBER (FROM HH2) | TOTAL NUMBER OF ELIGIBLE CHILDREN IN THE HOUSEHOLD (FROM HH18) | | | | | | |
|---|--|---|---|---|---|---|----|
| | 2 | 3 | 4 | 5 | 6 | 7 | 8+ |
| 0 | 2 | 2 | 4 | 3 | 6 | 5 | 4 |
| 1 | 1 | 3 | 1 | 4 | 1 | 6 | 5 |
| 2 | 2 | 1 | 2 | 5 | 2 | 7 | 6 |
| 3 | 1 | 2 | 3 | 1 | 3 | 1 | 7 |
| 4 | 2 | 3 | 4 | 2 | 4 | 2 | 8 |
| 5 | 1 | 1 | 1 | 3 | 5 | 3 | 1 |
| 6 | 2 | 2 | 2 | 4 | 6 | 4 | 2 |
| 7 | 1 | 3 | 3 | 5 | 1 | 5 | 3 |
| 8 | 2 | 1 | 4 | 1 | 2 | 6 | 4 |
| 9 | 1 | 2 | 1 | 2 | 3 | 7 | 5 |

HH26. Record the rank number (HH20), line number (HH21), name (HH22) and age (HH24) of the selected child.

RANK NUMBER

HH27. (When HH18=1 or when there is a single child age 5-14 in the household): Record the rank number as '1' and record the line number (HL1), the name (HL2) and age (HL6) of this child from the LIST OF HOUSEHOLD MEMBERS.

LINE NUMBER

NAME

AGE

HH28. Issue a QUESTIONNAIRE FOR CHILDREN AGE 5-14 to be administered to the mother/caretaker of this child.

HH29. Check HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any women age 15-49?

YES, AT LEAST ONE WOMAN AGE 15-49.....1
NO2

2⇒HH34

HH30. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL WOMEN for each woman age 15-49 years.

HH31. Check HL6 and HL8 in the LIST OF HOUSEHOLD MEMBERS: Are there any girls age 15-17?

YES, AT LEAST ONE GIRL AGE 15-171
NO2

2⇒HH34

HH32. Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one girl age 15-17?

YES, AT LEAST ONE GIRL AGE 15-17 WITH HL20≠90.....1
NO, HL20=90 FOR ALL GIRLS AGE 15-17.....2

2⇒HH34

HH33. As part of the survey we are also interviewing women age 15-49. We ask each person we interview for permission. A female interviewer conducts these interviews.

For girls age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (*name(s) of female member(s) age 15-17*) later?

- 'Yes' for all girls age 15-17 ⇒ Continue with HH34.
- 'No' for at least one girl age 15-17 and 'Yes' to at least one girl age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH34.
- 'No' for all girls age 15-17 ⇒ Record '06' in WM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH34.

| | | |
|---|---|----------|
| HH34. Check HH8 in the HOUSEHOLD INFORMATION PANEL: Is the household selected for Questionnaire for Men? | YES, HH8=1 1 NO, HH8=2 2 | 2 ⇒ HH40 |
|---|---|----------|

| | | |
|---|---|----------|
| HH35. Check HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any men age 15-49? | YES, AT LEAST ONE MAN AGE 15-49 1 NO 2 | 2 ⇒ HH40 |
|---|---|----------|

HH36. Issue a separate QUESTIONNAIRE FOR INDIVIDUAL MEN for each man age 15-49 years.

| | | |
|--|---|----------|
| HH37. Check HL6 and HL9 in the LIST OF HOUSEHOLD MEMBERS: Are there any boys age 15-17? | YES, AT LEAST ONE BOY AGE 15-17 1 NO 2 | 2 ⇒ HH40 |
|--|---|----------|

| | | |
|--|--|----------|
| HH38. Check HL20 in the LIST OF HOUSEHOLD MEMBERS: Is consent required for interviewing at least one boy age 15-17? | YES, AT LEAST ONE BOY AGE 15-17 WITH HL20≠90 1 NO, HL20=90 FOR ALL BOYS AGE 15-17 2 | 2 ⇒ HH40 |
|--|--|----------|

HH39. As part of the survey we are also interviewing men age 15-49. We ask each person we interview for permission. A male interviewer conducts these interviews.

For boys age 15-17 we must also get permission from an adult to interview them. As mentioned before, all the information we obtain will remain strictly confidential and anonymous.

May we interview (*name(s) of male member(s) age 15-17*) later?

- 'Yes' for all boys age 15-17 ⇒ Continue with HH40.
- 'No' for at least one boy age 15-17 and 'Yes' to at least one boy age 15-17 ⇒ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on individual questionnaires for those adult consent was not given. Then continue with HH40.
- 'No' for all boys age 15-17 ⇒ Record '06' in MWM17 (also in UF17 and FS17, if applicable) on all individual questionnaires for whom adult consent was not given. Then continue with HH40.

| | | |
|---|---|----------|
| HH40. Check HL10 in the LIST OF HOUSEHOLD MEMBERS: Are there any children age 0-4? | YES, AT LEAST ONE 1 NO 2 | 2 ⇒ HH45 |
|---|---|----------|

HH41. Issue a separate QUESTIONNAIRE FOR CHILDREN UNDER FIVE for each child age 0-4 years.

HH45. Now return to the *HOUSEHOLD INFORMATION PANEL* and,

- Record '01' in question HH46 (Result of the Household Questionnaire interview),
- Record the name and the line number (from the *LIST OF HOUSEHOLD MEMBERS*) of the Respondent to the Household Questionnaire interview in HH47,
- Fill the questions HH48 – HH52,
- Thank the respondent for his/her cooperation and then
- Proceed with the administration of the remaining individual questionnaire(s) in this household.

If there is no individual questionnaire to be completed in this household thank the respondent for his/her cooperation and move to the next household you have been assigned by your supervisor.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

| WOMAN'S INFORMATION PANEL | | WM |
|--|---|-----------|
| WM1. Cluster number: _____ | WM2. Household number: _____ | |
| WM3. Woman's name and line number: NAME _____ | WM4. Supervisor's name and number: NAME _____ | |
| WM5. Interviewer's name and number: NAME _____ | WM6. Day / Month / Year of interview: _____ / _____ / <u>2</u> <u>5</u> <u>6</u> <u>2</u> | |

| | | | | | |
|---|--|---------------------------------|----------|----------------------------|----------|
| <p><i>Check woman's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: If age 15-17, verify in HH33 that adult consent for interview is obtained or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in WM17.</i></p> | <p>WM7. Record the time:</p> <p align="center">HOURS : MINUTES _____ : _____</p> | | | | |
| <p>WM8. Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?</p> | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-right: 1px solid black;">YES, INTERVIEWED ALREADY1</td> <td style="width:50%;">1 ⇨ WM9B</td> </tr> <tr> <td style="border-right: 1px solid black;">NO, FIRST INTERVIEW2</td> <td>2 ⇨ WM9A</td> </tr> </table> | YES, INTERVIEWED ALREADY1 | 1 ⇨ WM9B | NO, FIRST INTERVIEW2 | 2 ⇨ WM9A |
| YES, INTERVIEWED ALREADY1 | 1 ⇨ WM9B | | | | |
| NO, FIRST INTERVIEW2 | 2 ⇨ WM9A | | | | |
| <p>WM9A. Hello, my name is (<i>your name</i>). We are from National Statistical Office. We are conducting a survey about the situation of children, families and households. I would like to talk to you about your health and other topics. This interview usually takes about 20 minutes. We are also interviewing mothers about their children. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?</p> | <p>WM9B. Now I would like to talk to you about your health and other topics in more detail. This interview will take about 20 minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?</p> | | | | |
| <p>YES1 NO / NOT ASKED2</p> | <p>1 ⇨ WOMAN'S BACKGROUND Module 2 ⇨ WM17</p> | | | | |

| | | | | | | | | | | | | | | | | | |
|--|---|----------------|----|-------------------|----|--------------|----|------------------------|----|--|----|---------------------------------|--|-----------------|----|-------------------------------|----|
| <p>WM17. Result of woman's interview.</p> <p><i>Discuss any result not completed with Supervisor.</i></p> | <table style="width:100%; border-collapse: collapse;"> <tr><td>COMPLETED.....</td><td align="right">01</td></tr> <tr><td>NOT AT HOME</td><td align="right">02</td></tr> <tr><td>REFUSED.....</td><td align="right">03</td></tr> <tr><td>PARTLY COMPLETED</td><td align="right">04</td></tr> <tr><td>INCAPACITATED (<i>specify</i>)</td><td align="right">05</td></tr> <tr><td>NO ADULT CONSENT FOR RESPONDENT</td><td></td></tr> <tr><td> AGE 15-17</td><td align="right">06</td></tr> <tr><td>OTHER (<i>specify</i>).....</td><td align="right">96</td></tr> </table> | COMPLETED..... | 01 | NOT AT HOME | 02 | REFUSED..... | 03 | PARTLY COMPLETED | 04 | INCAPACITATED (<i>specify</i>) | 05 | NO ADULT CONSENT FOR RESPONDENT | | AGE 15-17 | 06 | OTHER (<i>specify</i>)..... | 96 |
| COMPLETED..... | 01 | | | | | | | | | | | | | | | | |
| NOT AT HOME | 02 | | | | | | | | | | | | | | | | |
| REFUSED..... | 03 | | | | | | | | | | | | | | | | |
| PARTLY COMPLETED | 04 | | | | | | | | | | | | | | | | |
| INCAPACITATED (<i>specify</i>) | 05 | | | | | | | | | | | | | | | | |
| NO ADULT CONSENT FOR RESPONDENT | | | | | | | | | | | | | | | | | |
| AGE 15-17 | 06 | | | | | | | | | | | | | | | | |
| OTHER (<i>specify</i>)..... | 96 | | | | | | | | | | | | | | | | |

| WOMAN'S BACKGROUND | | WB |
|--|--|--------------------|
| WB1. Check the respondent's line number (WM3) in WOMAN'S INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the Household Questionnaire? | YES, RESPONDENT IS THE SAME, WM3=HH47..... 1 NO, RESPONDENT IS NOT THE SAME, WM3≠HH47..... 2 | 2 ⇒WB3 |
| WB2. Check ED5 in EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for this respondent: Highest level of school attended: | ED5=02-08..... 1 ED5=00, 01, 98 OR BLANK..... 2 | 1 ⇒WB15 2 ⇒WB14 |
| WB3. In what month and year were you born? | DATE OF BIRTH MONTH..... __ __ DK MONTH..... 98 YEAR..... __ __ __ __ DK YEAR..... 9998 | |
| WB4. How old are you? <i>Probe: How old were you at your last birthday?</i> <i>If responses to WB3 and WB4 are inconsistent, probe further and correct. Age must be recorded.</i> | AGE (IN COMPLETED YEARS)..... __ __ | |
| WB5. Have you ever attended school or any early childhood education programme? | YES..... 1 NO..... 2 | 2 ⇒WB14 |
| WB6. What is the highest level and grade or year of school you have attended? | EARLY CHILDHOOD EDUCATION..... 000 PRIMARY..... 1 __ __ LOWER SECONDARY..... 2 __ __ UPPER SECONDARY..... 3 __ __ CERTIFICATE (VCE / TCE)..... 4 __ __ DIPLOMA (HVC / CTV / HTC)..... 5 __ __ BACHELOR DEGREE..... 6 __ __ MASTER DEGREE..... 7 __ __ DOCTORAL DEGREE..... 8 __ __ | 000 ⇒WB14 |
| WB7. Did you complete that (grade/year)? | YES..... 1 NO..... 2 | |
| WB8. Check WB4: Age of respondent: | AGE 15-24..... 1 AGE 25-49..... 2 | 2 ⇒WB13 |
| WB9. At any time during the 2562-63 school year did you attend school? | YES..... 1 NO..... 2 | 2 ⇒WB11 |
| WB10. During the 2562-63 school year, which level and grade or year are you attending? | PRIMARY..... 1 __ __ LOWER SECONDARY..... 2 __ __ UPPER SECONDARY..... 3 __ __ CERTIFICATE (VCE)..... 4 __ __ HVC / DIPLOMA..... 5 __ __ BACHELOR DEGREE..... 6 __ __ MASTER DEGREE..... 7 __ __ DOCTORAL DEGREE..... 8 __ __ | |
| WB11. At any time during the 2561-62 school year did you attend school? | YES..... 1 NO..... 2 | 2 ⇒WB13 |

| | | |
|--|---|-----------------------|
| <p>WB12. During the 2561-62 school year, which level and grade or year did you <u>attend</u>?</p> | <p>PRIMARY..... 1 ___ LOWER SECONDARY 2 ___ UPPER SECONDARY 3 ___ CERTIFICATE (VCE)..... 4 ___ HVC / DIPLOMA 5 ___ BACHELOR DEGREE..... 6 ___ MASTER DEGREE 7 ___ DOCTORAL DEGREE..... 8 ___</p> | |
| <p>WB13. Check WB6: Highest level of school attended:</p> | <p>WB6=02 TO 08 1 WB6=01 2</p> | <p>1 ⇒WB15</p> |
| <p>WB14. Now I would like you to read this sentence to me.</p> <p><i>Show sentence on the card to the respondent.</i></p> <p><i>If respondent cannot read whole sentence, probe:</i> Can you read part of the sentence to me?</p> | <p>CANNOT READ AT ALL 1 ABLE TO READ ONLY PARTS OF SENTENCE..... 2 ABLE TO READ WHOLE SENTENCE..... 3 NO SENTENCE IN REQUIRED LANGUAGE / BRAILLE (specify language) 4</p> | |
| <p>WB15. How long have you been continuously living in (name of current city, town or village of residence)?</p> <p><i>If less than one year, record '00' years.</i></p> | <p>YEARS..... ___ ALWAYS / SINCE BIRTH 95</p> | <p>95 ⇒WB18</p> |
| <p>WB16. Just before you moved here, did you live in a city, in a town, or in a rural area?</p> <p><i>Probe to identify the type of place.</i></p> <p><i>If unable to determine whether the place is a municipality (urban) or non-municipality (rural), write the name of the place and then temporarily record '9' until you learn the appropriate category for the response.</i></p> <p>_____</p> <p>(Name of place)</p> | <p>MUNICIPAL..... 1 NON-MUNICIPAL..... 2</p> | |
| <p>WB17. Before you moved here, in which region did you live in?</p> | <p>BANGKOK 01 CENTRAL 02 NORTH 03 NORTHEAST 04 SOUTH..... 05 OUTSIDE OF THAILAND (specify) 96</p> | |
| <p>WB18. Are you covered by any health insurance?</p> | <p>YES 1 NO 2</p> | <p>2 ⇒Next module</p> |

| | | |
|---|--|--|
| <p>WB19. What type of health insurance are you covered by?</p> <p><i>Record all mentioned.</i></p> | <p>COMMUNITY HEALTH INSURANCE A HEALTH INSURANCE THROUGH EMPLOYER..... B SOCIAL SECURITY/COMPENSATION FUND . C PRIVATE HEALTH INSURANCE D UNIVERSAL HEALTH-CARE COVERAGE SCHEME.....E GOVERNMENT OFFICER.....F LOCAL ADMINISTRATIVE ORGANIZATION G STATE ENTERPRISES OR INDEPENDENT AGENCIES H OTHER (<i>specify</i>) _____ X</p> | |
|---|--|--|

FERTILITY

CM

| | | |
|---|-------------------------------------|-----------------|
| <p>CM1. Now I would like to ask about all the births you have had during your life. Have you ever given birth?</p> <p><i>This module and the birth history should only include children born alive. Any stillbirths should not be included in response to any question.</i></p> | <p>YES 1 NO..... 2</p> | <p>2 ⇒ CM8</p> |
| <p>CM2. Do you have any sons or daughters to whom you have given birth who are now living with you?</p> | <p>YES 1 NO..... 2</p> | <p>2 ⇒ CM5</p> |
| <p>CM3. How many sons live with you?</p> <p><i>If none, record '00'.</i></p> | <p>SONS AT HOME _ _</p> | |
| <p>CM4. How many daughters live with you?</p> <p><i>If none, record '00'.</i></p> | <p>DAUGHTERS AT HOME..... _ _</p> | |
| <p>CM5. Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?</p> | <p>YES 1 NO..... 2</p> | <p>2 ⇒ CM8</p> |
| <p>CM6. How many sons are alive but do not live with you?</p> <p><i>If none, record '00'.</i></p> | <p>SONS ELSEWHERE..... _ _</p> | |
| <p>CM7. How many daughters are alive but do not live with you?</p> <p><i>If none, record '00'.</i></p> | <p>DAUGHTERS ELSEWHERE..... _ _</p> | |
| <p>CM8. Have you ever given birth to a boy or girl who was born alive but later died?</p> <p><i>If 'No' probe by asking: I mean, to any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?</i></p> | <p>YES 1 NO..... 2</p> | <p>2 ⇒ CM11</p> |
| <p>CM9. How many boys have died?</p> <p><i>If none, record '00'.</i></p> | <p>BOYS DEAD _ _</p> | |
| <p>CM10. How many girls have died?</p> <p><i>If none, record '00'.</i></p> | <p>GIRLS DEAD _ _</p> | |
| <p>CM11. Sum answers to CM3, CM4, CM6, CM7, CM9 and CM10.</p> | <p>SUM..... _ _</p> | |
| <p>CM12. Just to make sure that I have this right, you have had in total (total number in CM11) births during your life. Is this correct?</p> | <p>YES 1 NO..... 2</p> | <p>1 ⇒ CM14</p> |
| <p>CM13. Check responses to CM1-CM10 and make corrections as necessary until response in CM12 is 'Yes'.</p> | | |

| | | |
|--|---|-------------------------------------|
| CM14A. Check CM11: How many live births? | NO LIVE BIRTHS, CM11=00 0 ONE LIVE BIRTH, CM11=01 1 TWO OR MORE LIVE BIRTH, CM11=02 OR MORE 2 | 0 ⇒ CM14B 1 ⇒ CM15A 2 ⇒ CM15B |
| CM14B. Have you ever been pregnant? | YES 1 NO 2 | 2 ⇒ Next module |
| CM14C. What was the result of the most recent pregnancy? | STILLBIRTH (BABY BORN WITHOUT SIGNS OF LIFE) 1 MISCARRIAGE 2 | 1 ⇒ Next module 2 ⇒ Next module |
| CM15A. In what month and year was your child born? CM15B. Of these (<i>total number in CM11</i>) births, in what month and year was the last child born? <i>Month and year must be recorded</i> | MONTH AND YEAR OF LAST BIRTH MONTH _ _ _ YEAR _ _ _ _ | |
| CM16A. Check CM11: How many live births? | ONE LIVE BIRTH, CM11=01 1 TWO OR MORE LIVE BIRTH, CM11=02 OR MORE 2 | 1 ⇒ CM17 |
| CM16B. Of these (<i>total number in CM11</i>) births, in what month and year was the first child born? | MONTH AND YEAR OF FIRST BIRTH MONTH _ _ _ DK MONTH 98 YEAR _ _ _ _ DK YEAR 9998 | |
| CM16C. Check CM16B: Is YEAR recorded? | YES 1 NO 2 | 1 ⇒ CM17 |
| CM16D. How many years ago did you have your first birth? <i>Probe by asking:</i> - How old is your first child now? - How old was you when you had your first child? (Take current respondent's age into consideration) | COMPLETED YEARS _ _ | |

| | | |
|--|---|-----------------|
| CM17. Check CM15A/B: Last birth occurred within the last 2 years, that is, since (<i>month of interview</i>) in B.E. 2560? <i>If the month of interview and the month of birth are the same, and the year of birth is B.E. 2560, consider this as a birth within the last 2 years.</i> | NO LIVE BIRTHS IN THE LAST 2 YEARS 0 ONE OR MORE LIVE BIRTHS IN THE LAST 2 YEARS 1 | 0 ⇒ Next module |
| CM18. Record name of the last born child. <i>If the child has died, take special care when referring to this child by name in the following modules.</i> | NAME OF LAST BORN CHILD _____ | |


| DESIRE FOR LAST BIRTH | | DB |
|---|---|----------------------|
| <p>DB1. Check CM17: Was there a live birth in the last 2 years?</p> <p>Copy name of last birth listed in the birth history (CM18) to here and use where indicated:</p> <p>Name _____</p> | <p>YES, CM17=1..... 1</p> <p>NO, CM17=0 OR BLANK 2</p> | 2 ⇒ Next module |
| <p>DB2. When you got pregnant with (<i>name</i>), did you want to get pregnant at that time?</p> | <p>YES 1</p> <p>NO..... 2</p> | 1 ⇒ Next module |
| <p>DB3. Check CM11: Number of births:</p> | <p>ONLY 1 BIRTH..... 1</p> <p>2 OR MORE BIRTHS 2</p> | 1 ⇒ DB4A 2 ⇒ DB4B |
| <p>DB4A. Did you want to have a baby later on, or did you not want any children?</p> <p>DB4B. Did you want to have a baby later on, or did you not want any more children?</p> | <p>LATER..... 1</p> <p>NO MORE / NONE 2</p> | |
| <p>DB5. If you did not wish to have (<i>name of last child</i>) (or wanted later), what was the main reason you did not prevent (or delay the) pregnancy?</p> | <p>SAFE PERIOD CALCULATION</p> <p>BIRTH CONTROL BUT PREGNANT 01</p> <p>OTHER BIRTH CONTROL METHOD BUT PREGNANT..... 02</p> <p>RECENTLY GAVE BIRTH / POST MISCARRIAGE..... 03</p> <p>FORCED TO HAVE SEX 04</p> <p>NOT EXPECTED TO HAVE SEX 05</p> <p>FORGOT TO TAKE BIRTH CONTROL PILLS 06</p> <p>NOT AFFORDED TO BUY BIRTH CONTROL PILLS / CONTRACEPTIVE DEVICE..... 07</p> <p>FAR SERVICE CENTRE..... 08</p> <p>NO TIME TO SEEK BIRTH CONTROL SERVICES 09</p> <p>UNFRIENDLY SERVICE CENTRES / WORKERS 10</p> <p>THOUGHT SHE WAS TOO OLD / MENOPAUSE 11</p> <p>NOT KNEW HOW TO PREVENT PREGNANCY 12</p> <p>OTHER (<i>specify</i>)..... 96</p> | |

MATERNAL AND NEWBORN HEALTH

MN

| | | | | | | | | | | | | | | |
|---|--|-----------------------------|-----|----|----------------------|---|---|--------------------|---|---|--------------------|---|---|--|
| <p>MN1. Check CM17: Was there a live birth in the last 2 years?</p> <p>Copy name of last birth listed in the birth history (CM18) to here and use where indicated:</p> <p>Name _____</p> | <p>YES, CM17=11</p> <p>NO, CM17=0 OR BLANK2</p> | <p>2⇒Next module</p> | | | | | | | | | | | | |
| <p>MN2. Did you see anyone for antenatal care during your pregnancy with (<i>name</i>)?</p> | <p>YES1</p> <p>NO2</p> | <p>2⇒MN7</p> | | | | | | | | | | | | |
| <p>MN3. Whom did you see?</p> <p>Probe: Anyone else?</p> <p>Probe for the type of person seen and record all answers given.</p> | <p>HEALTH PROFESSIONAL</p> <p>DOCTOR.....A</p> <p>NURSE / MIDWIFEB</p> <p>PRACTICAL NURSE/NURSE’S AIDE.....C</p> <p>OTHER (<i>specify</i>) _____X</p> | | | | | | | | | | | | | |
| <p>MN4. How many weeks or months pregnant were you when you first received antenatal care for this pregnancy?</p> <p>Record the answer as stated by respondent. If “9 months” or later, record 9.</p> | <p>WEEKS1 __ __</p> <p>MONTHS2 <u>0</u> __</p> <p>DK998</p> | | | | | | | | | | | | | |
| <p>MN5. How many times did you receive antenatal care during this pregnancy?</p> <p>Probe to identify the number of times antenatal care was received. If a range is given, record the minimum number of times antenatal care received.</p> | <p>NUMBER OF TIMES__ __</p> <p>DK98</p> | | | | | | | | | | | | | |
| <p>MN6. As part of your antenatal care during this pregnancy, were any of the following done at least once:</p> <p>[A] Was your blood pressure measured?</p> <p>[B] Did you give a urine sample?</p> <p>[C] Did you give a blood sample?</p> | <table style="width:100%; border:none;"> <tr> <td></td> <td style="text-align:right;">YES</td> <td style="text-align:right;">NO</td> </tr> <tr> <td>BLOOD PRESSURE</td> <td style="text-align:right;">1</td> <td style="text-align:right;">2</td> </tr> <tr> <td>URINE SAMPLE</td> <td style="text-align:right;">1</td> <td style="text-align:right;">2</td> </tr> <tr> <td>BLOOD SAMPLE</td> <td style="text-align:right;">1</td> <td style="text-align:right;">2</td> </tr> </table> | | YES | NO | BLOOD PRESSURE | 1 | 2 | URINE SAMPLE | 1 | 2 | BLOOD SAMPLE | 1 | 2 | |
| | YES | NO | | | | | | | | | | | | |
| BLOOD PRESSURE | 1 | 2 | | | | | | | | | | | | |
| URINE SAMPLE | 1 | 2 | | | | | | | | | | | | |
| BLOOD SAMPLE | 1 | 2 | | | | | | | | | | | | |
| <p>MN7. Do you have a health handbook or other document with your own immunisations listed?</p> <p>If yes, ask: May I see it please?</p> <p>If a health handbook is presented, use it to assist with answers to the following questions.</p> | <p>YES (HANDBOOK OR OTHER DOCUMENT SEEN).....1</p> <p>YES (HANDBOOK OR OTHER DOCUMENT NOT SEEN)2</p> <p>NO3</p> <p>DK8</p> | | | | | | | | | | | | | |
| <p>MN7A. When you were pregnant with (<i>name of last child</i>), did you receive a screening test for thalassemia?</p> | <p>YES1</p> <p>NO2</p> <p>DK8</p> | | | | | | | | | | | | | |
| <p>MN8. When you were pregnant with (<i>name</i>), did you receive any injection in the arm or shoulder to prevent the baby from getting tetanus, that is, convulsions after birth?</p> | <p>YES1</p> <p>NO2</p> <p>DK8</p> | <p>2⇒MN11</p> <p>8⇒MN11</p> | | | | | | | | | | | | |

| | | |
|---|---|-----------------------------------|
| <p>MN9. How many times did you receive this tetanus injection during your pregnancy with (<i>name</i>)?</p> | <p>NUMBER OF TIMES.....__</p> <p>DK.....8</p> | <p>8 ⇒ MN11</p> |
| <p>MN10. Check MN9: How many tetanus injections during last pregnancy were reported?</p> | <p>ONLY 1 INJECTION1</p> <p>2 OR MORE INJECTIONS2</p> | <p>2 ⇒ MN19</p> |
| <p>MN11. At any time before your pregnancy with (<i>name</i>), did you receive any tetanus injection either to protect yourself or another baby?</p> <p><i>Include DTP (Tetanus) vaccinations received as a child if mentioned.</i></p> | <p>YES1</p> <p>NO.....2</p> <p>DK.....8</p> | <p>2 ⇒ MN19</p> <p>8 ⇒ MN19</p> |
| <p>MN12. Before your pregnancy with (<i>name</i>), how many times did you receive a tetanus injection?</p> <p><i>If 7 or more times, record '7'.</i></p> <p><i>Include DTP (Tetanus) vaccinations received as a child if mentioned.</i></p> | <p>NUMBER OF TIMES.....__</p> <p>DK.....8</p> | |
| <p>MN13. Check MN12: How many tetanus injections before last pregnancy were reported?</p> | <p>ONLY 1 INJECTION1</p> <p>2 OR MORE INJECTIONS OR DK.....2</p> | <p>1 ⇒ MN14A</p> <p>2 ⇒ MN14B</p> |
| <p>MN14A. How many years ago did you receive that tetanus injection</p> <p>MN14B. How many years ago did you receive the last of those tetanus injections?</p> <p><i>The reference is to the last injection received <u>prior</u> to this pregnancy, as recorded in MN12.</i></p> <p><i>If less than 1 year, record '00'.</i></p> | <p>YEARS AGO __ __</p> <p>DK..... 98</p> | |
| <p>MN19. Who assisted with the delivery of (<i>name</i>)?</p> <p><i>Probe: Anyone else?</i></p> <p><i>Probe for the type of person assisting and record all answers given.</i></p> | <p>HEALTH PROFESSIONAL</p> <p>DOCTOR.....A</p> <p>NURSE / MIDWIFEB</p> <p>PRACTICAL NURSE/NURSE'S AIDE.....C</p> <p>OTHER PERSON</p> <p>COMMUNITY HEALTH WORKER.....G</p> <p>RELATIVE / FRIEND.....H</p> <p>OTHER (<i>specify</i>)X</p> <p>NO ONE.....Y</p> | |

| | | |
|---|---|---|
| <p>MN20. Where did you give birth to (<i>name</i>)?</p> <p><i>Probe to identify the type of place.</i></p> <p><i>If unable to determine whether public or private, write the name of the place and then temporarily record '76' until you learn the appropriate category for the response.</i></p> <p>_____</p> <p>(Name of place)</p> | <p>HOME</p> <p>RESPONDENT'S HOME..... 11</p> <p>OTHER HOME..... 12</p> <p>PUBLIC MEDICAL SECTOR</p> <p>GOVERNMENT HOSPITAL..... 21</p> <p>GOVERNMENT CLINIC / HEALTH CENTRE 22</p> <p>OTHER PUBLIC (<i>specify</i>).....26</p> <p>PRIVATE MEDICAL SECTOR</p> <p>PRIVATE HOSPITAL..... 31</p> <p>PRIVATE CLINIC..... 32</p> <p>OTHER PRIVATE MEDICAL (<i>specify</i>) _____ 36</p> <p>DK PUBLIC OR PRIVATE..... 76</p> <p>OTHER (<i>specify</i>) _____ 96</p> | <p>11 ⇨MN23</p> <p>12 ⇨MN23</p> <p>96 ⇨MN23</p> |
| <p>MN21. Was (<i>name</i>) delivered by caesarean section? That is, did they cut your belly open to take the baby out?</p> | <p>YES1</p> <p>NO.....2</p> | <p>2 ⇨MN23</p> |
| <p>MN22. When was the decision made to have the caesarean section?</p> <p><i>Probe if necessary: Was it before or after your labour pains started?</i></p> | <p>BEFORE LABOUR PAINS.....1</p> <p>AFTER LABOUR PAINS2</p> | |
| <p>MN22A. Check CM11: Number of children?</p> | <p>ONLY 1 CHILD..... 1</p> <p>2 OR MORE CHILDREN.....2</p> | <p>1 ⇨MN23</p> |
| <p>MN22B. Was this caesarean section the first or repeat caesarean section?</p> | <p>FIRST.....1</p> <p>REPEAT.....2</p> | |
| <p>MN23. Immediately after the birth, was (<i>name</i>) put directly on the bare skin of your chest?</p> <p><i>If necessary, show the picture of skin-to-skin position.</i></p>  <p><small>Photo Credit: Joyce Baldwin</small></p> | <p>YES1</p> <p>NO.....2</p> <p>DK/ DON'T REMEMBER8</p> | <p>2 ⇨MN25</p> <p>8 ⇨MN25</p> |
| <p>MN24. Before being placed on the bare skin of your chest, was the baby wrapped up?</p> | <p>YES1</p> <p>NO.....2</p> <p>DK/ DON'T REMEMBER8</p> | |

| | | |
|---|--|---------------------------------------|
| <p>MN25. Was (<i>name</i>) dried or wiped soon after birth?</p> | <p>YES1 NO2 DK/ DON'T REMEMBER8</p> | |
| <p>MN26. How long after the birth was (<i>name</i>) bathed for the first time?</p> <p><i>If "immediately" or less than 1 hour, record '000'. If less than 24 hours, record hours.</i></p> <p><i>If "1 day" or "next day", probe: About how many hours after the delivery?</i></p> <p><i>If "24 hours", probe to ensure best estimate of less than 24 hours or 1 day. If 24 hours or more, record days.</i></p> | <p>IMMEDIATELY/LESS THAN 1 HOUR000 HOURS1 __ __ DAYS2 __ __ NEVER BATHED997 DK / DON'T REMEMBER998</p> | |
| <p>MN32. When (<i>name</i>) was born, was (he/she) very large, larger than average, average, smaller than average, or very small?</p> | <p>VERY LARGE1 LARGER THAN AVERAGE2 AVERAGE3 SMALLER THAN AVERAGE4 VERY SMALL5 DK8</p> | |
| <p>MN33. Was (<i>name</i>) weighed at birth?</p> | <p>YES1 NO2 DK8</p> | <p>2 ⇒ MN35 8 ⇒ MN35</p> |
| <p>MN34. How much did (<i>name</i>) weigh?</p> <p><i>If a health handbook is available, record weight from health handbook.</i></p> | <p>FROM HEALTH HANDBOOK1 (KG) __ . __ __ __ FROM RECALL2 (KG) __ . __ __ __ DK99998</p> | |
| <p>MN35. Has your menstrual period returned since the birth of (<i>name</i>)?</p> | <p>YES1 NO2</p> | |
| <p>MN36. Did you ever breastfeed (<i>name</i>)?</p> | <p>YES1 NO2</p> | <p>2 ⇒ MN39B</p> |
| <p>MN37. How long after birth did you first put (<i>name</i>) to the breast?</p> <p><i>If less than 1 hour, record '00' hours. If less than 24 hours, record hours. Otherwise, record days.</i></p> | <p>IMMEDIATELY000 HOURS1 __ __ DAYS2 __ __ DK / DON'T REMEMBER998</p> | |
| <p>MN38. In the first three days after delivery, was (<i>name</i>) given anything to drink other than breast milk?</p> | <p>YES1 NO2</p> | <p>1 ⇒ MN39A 2 ⇒ Next module</p> |

| | | |
|--|---|--|
| <p>MN39A. What was (<i>name</i>) given to drink?</p> <p><i>Probe: Anything else?</i></p> <p><i>'Not given anything to drink' is not a valid response and response category Y cannot be recorded.</i></p> | <p>MILK (OTHER THAN BREAST MILK)A</p> <p>PLAIN WATER.....B</p> <p>SUGAR OR GLUCOSE WATERC</p> <p>ANTIFLATULENT SYRUP (GRIPE WATER)D</p> <p>SUGAR-SALT-WATER SOLUTION.....E</p> <p>FRUIT JUICEF</p> <p>INFANT FORMULA.....G</p> | |
| <p>MN39B. In the first three days after delivery, what was (<i>name</i>) given to drink?</p> <p><i>Probe: Anything else?</i></p> <p><i>'Not given anything to drink' (category Y) can only be recorded if no other response category is recorded.</i></p> | <p>TEA / INFUSIONS / TRADITIONAL HERBAL PREPARATIONSH</p> <p>HONEY.....I</p> <p>PRESCRIBED MEDICINEJ</p> <p>OTHER (<i>specify</i>) _____X</p> <p>NOT GIVEN ANYTHING TO DRINKY</p> | |

CONTRACEPTION

CP

| | | |
|--|--|---|
| <p>CP1. I would like to talk with you about another subject: family planning.</p> <p>Are you pregnant now?</p> | <p>YES, CURRENTLY PREGNANT 1 NO 2 DK OR NOT SURE 8</p> | <p>1 ⇒ CP3</p> |
| <p>CP2. Couples use various ways or methods to delay or avoid getting pregnant.</p> <p>Are you currently doing something or using any method to delay or avoid getting pregnant?</p> | <p>YES 1 NO 2</p> | <p>1 ⇒ CP4</p> |
| <p>CP3. Have you ever done something or used any method to delay or avoid getting pregnant?</p> | <p>YES 1 NO 2</p> | <p>1 ⇒ Next module 2 ⇒ Next module</p> |
| <p>CP4. What are you doing to delay or avoid a pregnancy?</p> <p><i>Do not prompt. If more than one method is mentioned, record each one.</i></p> | <p>FEMALE STERILIZATION A MALE STERILIZATION B IUD C INJECTABLES D IMPLANTS E PILL F MALE CONDOM G FEMALE CONDOM H DIAPHRAGM I FOAM / JELLY J PERIODIC ABSTINENCE / RHYTHM L WITHDRAWAL M CONTRACEPTIVE PATCH N EMERGENCY CONTRACEPTIVE PILL O</p> <p>OTHER (<i>specify</i>) _____ X</p> | |
| <p>CP5. From where did you or your partner receive this?</p> <p><i>Probe to identify the type of place. If unable to specify whether public or private medical facility, write the name of the place and temporarily record 'W' until you know the proper category for such response.</i></p> <p>_____</p> <p style="text-align: center;"><i>(Name of place)</i></p> | <p>PUBLIC MEDICAL FACILITY PUBLIC HOSPITAL A SHPH / PUBLIC HEALTH CENTRE B HEALTH VOLUNTEERS (CHV / VHV) C MOBILE MEDICAL UNIT D</p> <p>OTHER PUBLIC MEDICAL FACILITY (<i>specify</i>) _____ E</p> <p>PRIVATE MEDICAL FACILITY PRIVATE HOSPITAL F PRIVATE CLINIC G MOBILE CLINIC H</p> <p>OTHER PRIVATE MEDICAL FACILITY (<i>specify</i>) _____ I</p> <p>OTHER SOURCE RELATIVE / FRIEND J STORE / MARKET K PHARMACY L</p> <p>DON'T KNOW PUBLIC OR PRIVATE W</p> <p>OTHER (<i>specify</i>) _____ X</p> <p>NOT APPLICABLE Y</p> | |

| UNMET NEED | | UN |
|--|--|----------------------------------|
| UN1. Check CP1: Currently pregnant? | YES, CP1=1 1 NO, DK OR NOT SURE, CP1=2 OR 8 2 | 2 ⇨ UN6 |
| UN2. Now I would like to talk to you about your current pregnancy. When you got pregnant, did you want to get pregnant at that time? | YES 1 NO 2 | 1 ⇨ UN5 |
| UN3. Check CM11: Any births? | NO BIRTHS 0 ONE OR MORE BIRTHS 1 | 0 ⇨ UN4A 1 ⇨ UN4B |
| UN4A. Did you want to have a baby later on or did you not want any children? UN4B. Did you want to have a baby later on or did you not want any more children? | LATER 1 NONE / NO MORE 2 | |
| UN5. Now I would like to ask some questions about the future. After the child you are now expecting, would you like to have another child, or would you prefer not to have any more children? | HAVE ANOTHER CHILD 1 NO MORE / NONE 2 UNDECIDED / DK 8 | 1 ⇨ UN8 2 ⇨ UN14 8 ⇨ UN14 |
| UN6. Check CP4: Currently using 'Female sterilization'? | YES, CP4=A 1 NO, CP4≠A 2 | 1 ⇨ UN14 |
| UN7. Now I would like to ask you some questions about the future. Would you like to have (a/another) child, or would you prefer not to have any (more) children? | HAVE (A/ANOTHER) CHILD 1 NO MORE / NONE 2 SAYS SHE CANNOT GET PREGNANT 3 UNDECIDED / DK 8 | 2 ⇨ UN10 3 ⇨ UN12 8 ⇨ UN10 |
| UN8. How long would you like to wait before the birth of (a/another) child? <i>Record the answer as stated by respondent.</i> | MONTHS 1 __ __ YEARS 2 __ __ DOES NOT WANT TO WAIT (SOON/NOW) 993 SAYS SHE CANNOT GET PREGNANT 994 AFTER MARRIAGE 995 OTHER 996 DK 998 | 994 ⇨ UN12 |
| UN9. Check CP1: Currently pregnant? | YES, CP1=1 1 NO, DK OR NOT SURE, CP1=2 OR 8 2 | 1 ⇨ UN14 |
| UN10. Check CP2: Currently using a method? | YES, CP2=1 1 NO, CP2=2 2 | 1 ⇨ UN14 |
| UN11. Do you think you are physically able to get pregnant at this time? | YES 1 NO 2 DK 8 | 1 ⇨ UN14 8 ⇨ UN14 |

| | | |
|--|---|-----------------------|
| <p>UN12. Why do you think you are not physically able to get pregnant?</p> | <p>INFREQUENT SEX / NO SEX..... A MENOPAUSAL B NEVER MENSTRUATED..... C HYSTERECTOMY (SURGICAL REMOVAL OF UTERUS) D HAS BEEN TRYING TO GET PREGNANT FOR 2 YEARS OR MORE WITHOUT RESULT E POSTPARTUM AMENORRHEIC F BREASTFEEDING G TOO OLD H FATALISTIC.....I OTHER (<i>specify</i>)_____ X DK..... Z</p> | |
| <p>UN13. Check UN12: 'Never menstruated' mentioned?</p> | <p>MENTIONED, UN12=C 1 NOT MENTIONED, UN12≠C 2</p> | <p>1 ⇒Next module</p> |
| <p>UN14. When did your last menstrual period start?</p> <p><i>Record the answer using the same unit stated by the respondent.</i></p> <p><i>If '1 year', probe:</i> How many months ago?</p> | <p>DAYS AGO 1 __ __ WEEKS AGO 2 __ __ MONTHS AGO 3 __ __ YEARS AGO..... 4 __ __ IN MENOPAUSE / HAS HAD HYSTERECTOMY 993 BEFORE LAST BIRTH 994 NEVER MENSTRUATED..... 995</p> | |

ATTITUDES TOWARD DOMESTIC VIOLENCE

DV

DV1. Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:

| | | YES | NO | DK |
|--|-------------------------------|-----|----|----|
| [A] If she goes out without telling him? | GOES OUT WITHOUT TELLING..... | 1 | 2 | 8 |
| [B] If she neglects the children? | NEGLECTS CHILDREN | 1 | 2 | 8 |
| [C] If she argues with him? | ARGUES WITH HIM..... | 1 | 2 | 8 |
| [D] If she refuses to have sex with him? | REFUSES SEX | 1 | 2 | 8 |
| [E] If she burns the food? | BURNS FOOD | 1 | 2 | 8 |
| [F] If she neglects household chores? | NEGLECT HH CHORES | 1 | 2 | 8 |

VICTIMISATION

VT

| | | |
|--|---|---------------------------------|
| <p>VT1. <i>Check for the presence of others. Before continuing, ensure privacy. Now I would like to ask you some questions about crimes in which you <u>personally</u> were the victim.</i></p> <p>Let me assure you again that your answers are completely confidential and will not be told to anyone.</p> <p>In the last three years, that is since (<i>month of interview</i>) (<i>year of interview minus 3</i>), has anyone taken or tried taking something from you, by using force or threatening to use force?</p> <p><i>Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household.</i></p> <p><i>If necessary, help the respondent to establish the recall period and make sure that you allow adequate time for the recall. You may reassure: It can be difficult to remember this sort of incidents, so please take your time while you think about your answers.</i></p> | <p>YES 1</p> <p>NO 2</p> <p>DK 8</p> | <p>2 ⇒ VT9B</p> <p>8 ⇒ VT9B</p> |
| <p>VT2. Did this last happen during the last 12 months, that is, since (<i>month of interview</i>) (<i>year of interview minus 1</i>)?</p> | <p>YES, DURING THE LAST 12 MONTHS..... 1</p> <p>NO, MORE THAN 12 MONTHS AGO 2</p> <p>DK / DON'T REMEMBER 8</p> | <p>2 ⇒ VT5B</p> <p>8 ⇒ VT5B</p> |
| <p>VT3. How many times did this happen in the last 12 months?</p> <p><i>If 'DK/Don't remember', probe: Did it happen once, twice, or at least three times?</i></p> | <p>ONE TIME 1</p> <p>TWO TIMES 2</p> <p>THREE OR MORE TIMES 3</p> <p>DK / DON'T REMEMBER 8</p> | |
| <p>VT4. <i>Check VT3: One or more times?</i></p> | <p>ONE TIME, VT3=1 1</p> <p>MORE THAN ONCE OR DK, VT3=2, 3 OR 8 2</p> | <p>1 ⇒ VT5A</p> <p>2 ⇒ VT5B</p> |
| <p>VT5A. When this happened, was anything stolen from you?</p> <p>VT5B. The last time this happened, was anything stolen from you?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / NOT SURE..... 8</p> | |
| <p>VT6. Did the person(s) have a weapon?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / NOT SURE..... 8</p> | <p>2 ⇒ VT8</p> <p>8 ⇒ VT8</p> |
| <p>VT7. Was a knife, a gun or something else used as a weapon?</p> <p><i>Record all that apply.</i></p> | <p>YES, A KNIFE..... A</p> <p>YES, A GUN B</p> <p>YES, SOMETHING ELSE X</p> | |
| <p>VT8. Did you or anyone else report the incident to the police?</p> <p><i>If 'Yes', probe: Was the incident reported by you or someone else?</i></p> | <p>YES, RESPONDENT REPORTED 1</p> <p>YES, SOMEONE ELSE REPORTED 2</p> <p>NO, NOT REPORTED 3</p> <p>DK / NOT SURE..... 8</p> | |

| | | |
|---|---|--|
| <p>VT8A. Did you or anyone else report the incident to other agencies other than the police?</p> | <p>YES, RESPONDENT REPORTED 1 YES, SOMEONE ELSE REPORTED 2 NO, NOT REPORTED 3 DK / NOT SURE..... 8</p> | <p>3 ⇒VT9A 8 ⇒VT9A</p> |
| <p>VT8B. To which agencies did you or anyone else report the incident?</p> <p><i>Record all the answers that apply.</i></p> | <p>VILLAGE HEADMAN / SUBDISTRICT HEADMAN / SAO / MUNICIPALITY A OSCC 1300 HOTLINE B DAMRONGTHAM (OMBUDSMAN) CENTRE..... C FOUNDATION..... D SHELTERS FOR CHILDREN AND FAMILIES E PROVINCIAL MSDHS OFFICE F OTHER (<i>specify</i>)..... X</p> | <p>A ⇒VT9A B ⇒VT9A C ⇒VT9A D ⇒VT9A E ⇒VT9A F ⇒VT9A X ⇒VT9A</p> |
| <p>VT9A. Apart from the incident(s) just covered, have you in the last three years, that is since (<i>month of interview</i>) (<i>year of interview minus 3</i>), been physically attacked?</p> <p>VT9B. In the same period of the last three years, that is since (<i>month of interview</i>) (<i>year of interview minus 3</i>), have you been physically attacked?</p> <p><i>If 'No', probe: An attack can happen at home or any place outside of the home, such as in other homes, in the street, at school, on public transport, public restaurants, or at your workplace.</i></p> <p><i>Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household. Exclude incidents where the intention was to take something from the respondent, which should be recorded under VT1.</i></p> | <p>YES 1 NO 2 DK 8</p> | <p>2 ⇒VT20 8 ⇒VT20</p> |
| <p>VT10. Did this last happen during the last 12 months, that is, since (<i>month of interview</i>) (<i>year of interview minus 1</i>)?</p> | <p>YES, DURING THE LAST 12 MONTHS..... 1 NO, MORE THAN 12 MONTHS AGO 2 DK / DON'T REMEMBER 8</p> | <p>2 ⇒VT12B 8 ⇒VT12B</p> |
| <p>VT11. How many times did this happen in the last 12 months?</p> <p><i>If 'DK/Don't remember', probe: Did it happen once, twice, or at least three times?</i></p> | <p>ONE TIME 1 TWO TIMES 2 THREE OR MORE TIMES 3 DK / DON'T REMEMBER 8</p> | <p>1 ⇒VT12A 2 ⇒VT12B 3 ⇒VT12B 8 ⇒VT12B</p> |

| | | |
|--|---|---|
| <p>VT12A. Where did this happen?</p> <p>VT12B. Where did this happen the last time?</p> | <p>AT HOME..... 11</p> <p>IN ANOTHER HOME..... 12</p> <p>IN THE STREET 21</p> <p>ON PUBLIC TRANSPORT..... 22</p> <p>PUBLIC RESTAURANT / CAFÉ / BAR..... 23</p> <p>OTHER PUBLIC (<i>specify</i>)..... 26</p> <p>AT SCHOOL..... 31</p> <p>AT WORKPLACE..... 32</p> <p>OTHER PLACE (<i>specify</i>) 96</p> | |
| <p>VT13. How many people were involved in committing the offence?</p> <p><i>If 'DK/Don't remember', probe: Was it one, two, or at least three people?</i></p> | <p>ONE PERSON 1</p> <p>TWO PEOPLE 2</p> <p>THREE OR MORE PEOPLE 3</p> <p>DK / DON'T REMEMBER 8</p> | <p>1 ⇒VT14A</p> <p>2 ⇒VT14B</p> <p>3 ⇒VT14B</p> <p>8 ⇒VT14B</p> |
| <p>VT14A. At the time of the incident, did you recognize the person?</p> <p>VT14B. At the time of the incident, did you recognize at least one of the persons?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / DON'T REMEMBER 8</p> | |
| <p>VT17. Did the person(s) have a weapon?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / NOT SURE..... 8</p> | <p>2 ⇒VT19</p> <p>8 ⇒VT19</p> |
| <p>VT18. Was a knife, a gun or something else used as a weapon?</p> <p><i>Record all that apply.</i></p> | <p>YES, A KNIFE..... A</p> <p>YES, A GUN.....B</p> <p>YES, SOMETHING ELSE X</p> | |
| <p>VT19. Did you or anyone else report the incident to the police?</p> <p><i>If 'Yes', probe: Was the incident reported by you or someone else?</i></p> | <p>YES, RESPONDENT REPORTED 1</p> <p>YES, SOMEONE ELSE REPORTED 2</p> <p>NO, NOT REPORTED 3</p> <p>DK / NOT SURE..... 8</p> | |
| <p>VT19A. Did you or anyone else report the incident to other agencies other than the police?</p> | <p>YES, RESPONDENT REPORTED 1</p> <p>YES, SOMEONE ELSE REPORTED 2</p> <p>NO, NOT REPORTED 3</p> <p>DK / NOT SURE..... 8</p> | <p>3 ⇒VT20</p> <p>8 ⇒VT20</p> |
| <p>VT19B. To which agencies did you or anyone else report the incident?</p> <p><i>Record all the answers that apply.</i></p> | <p>VILLAGE CHIEF/SUBDISTRICT</p> <p>HEADMAN/SAO A</p> <p>OSCC 1300 HOTLINEB</p> <p>DAMRONGTHAM (OMBUDSMAN)</p> <p> CENTREC</p> <p>FOUNDATION..... D</p> <p>SHELTERS FOR CHILDREN AND FAMILIES.E</p> <p>PROVINCIAL MSDHS OFFICE F</p> <p>OTHER (<i>specify</i>)..... X</p> | |

| VT20. How safe do you feel walking alone in your neighbourhood after dark? | VERY SAFE 1 SAFE 2 UNSAFE 3 VERY UNSAFE..... 4 NEVER WALK ALONE AFTER DARK 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|----|-----|----|----|-----------------------------------|---|---|---|----------|---|---|---|-------------------------|---|---|---|----------|---|---|---|-------------------------|---|---|---|-----------------|---|---|---|------------------|---|---|---|--------------------|---|---|---|---------------------------|---|---|---|--|
| VT21. How safe do you feel when you are at home alone after dark? | VERY SAFE 1 SAFE 2 UNSAFE 3 VERY UNSAFE..... 4 NEVER ALONE AFTER DARK 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VT22. In the past 12 months, have you <u>personally</u> felt discriminated against or harassed on the basis of the following grounds? | <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> <th style="text-align: center;">DK</th> </tr> </thead> <tbody> <tr> <td>[A] Ethnic or immigration origin?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[B] Sex?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[C] Sexual orientation?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[D] Age?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[E] Religion or belief?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[F] Disability?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[G] Poor status?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[H] Work position?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[X] For any other reason?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </tbody> </table> | | YES | NO | DK | [A] Ethnic or immigration origin? | 1 | 2 | 8 | [B] Sex? | 1 | 2 | 8 | [C] Sexual orientation? | 1 | 2 | 8 | [D] Age? | 1 | 2 | 8 | [E] Religion or belief? | 1 | 2 | 8 | [F] Disability? | 1 | 2 | 8 | [G] Poor status? | 1 | 2 | 8 | [H] Work position? | 1 | 2 | 8 | [X] For any other reason? | 1 | 2 | 8 | |
| | YES | NO | DK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [A] Ethnic or immigration origin? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [B] Sex? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [C] Sexual orientation? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [D] Age? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [E] Religion or belief? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [F] Disability? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [G] Poor status? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [H] Work position? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [X] For any other reason? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| MARRIAGE/UNION | | MA |
|---|---|------------------------|
| MA1. Are you currently married or living together with someone as if married? | YES, CURRENTLY MARRIED 1 YES, LIVING WITH A PARTNER 2 NO, NOT IN UNION 3 | 3 ⇒ MA5 |
| MA2. How old is your (husband/partner)? <i>Probe:</i> How old was your (husband/partner) on his last birthday? | AGE IN YEARS __ __ DK 98 | |
| MA3. Besides yourself, does your (husband/partner) have any other wives or partners or does he live with other women as if married? | YES 1 NO 2 | 2 ⇒ MA7 |
| MA4. How many other wives or partners does he have? | NUMBER __ __ DK 98 | ⇒ MA7 98 ⇒ MA7 |
| MA5. Have you ever been married or lived together with someone as if married? | YES, FORMERLY MARRIED 1 YES, FORMERLY LIVED WITH A PARTNER .. 2 NO 3 | 3 ⇒ Next module |
| MA6. What is your marital status now: are you widowed, divorced or separated? | WIDOWED 1 DIVORCED 2 SEPARATED 3 | |
| MA7. Have you been married or lived with someone only once or more than once? | ONLY ONCE 1 MORE THAN ONCE 2 | 1 ⇒ MA8A 2 ⇒ MA8B |
| MA8A. In what month and year did you start living with your (husband/partner)? MA8B. In what month and year did you start living with your <u>first</u> (husband/partner)? | DATE OF (FIRST) UNION MONTH __ __ DK MONTH 98 YEAR __ __ __ __ DK YEAR 9998 | |
| MA9. Check MA8A/B: Is 'DK YEAR' recorded? | YES, MA8A/B=9998 1 NO, MA8A/B≠9998 2 | 2 ⇒ Next module |
| MA10. Check MA7: In union only once? | YES, MA7=1 1 NO, MA7=2 2 | 1 ⇒ MA11A 2 ⇒ MA11B |
| MA11A. How old were you when you started living with your (husband/partner)? MA11B. How old were you when you started living with your <u>first</u> (husband/partner)? | AGE IN YEARS __ __ | |

| HIV/AIDS | | HA | | | | | | | | | | | | | | | | |
|---|---|-----------------|-----|----|----|------------------------|---|---|---|-----------------------|---|---|---|------------------------|---|---|---|--|
| HA1. Now I would like to talk with you about something else. Have you ever heard of HIV or AIDS? | YES 1 NO 2 DK 8 | 2 ⇒ Next module | | | | | | | | | | | | | | | | |
| HA2. HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex partner who has no other sex partners? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA3. Can people get HIV from mosquito bites? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA4. Can people reduce their chance of getting HIV by using a condom every time they have sex? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA5. Can people get HIV by sharing food with a person who has HIV? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA6. Can people get HIV because of witchcraft or other supernatural means? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA7. Is it possible for a healthy-looking person to have HIV? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA8. Can HIV be transmitted from a mother to her baby: [A] During pregnancy? [B] During delivery? [C] By breastfeeding? | <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> <th style="text-align: center;">DK</th> </tr> </thead> <tbody> <tr> <td>DURING PREGNANCY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>DURING DELIVERY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>BY BREASTFEEDING</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </tbody> </table> | | YES | NO | DK | DURING PREGNANCY | 1 | 2 | 8 | DURING DELIVERY | 1 | 2 | 8 | BY BREASTFEEDING | 1 | 2 | 8 | |
| | YES | NO | DK | | | | | | | | | | | | | | | |
| DURING PREGNANCY | 1 | 2 | 8 | | | | | | | | | | | | | | | |
| DURING DELIVERY | 1 | 2 | 8 | | | | | | | | | | | | | | | |
| BY BREASTFEEDING | 1 | 2 | 8 | | | | | | | | | | | | | | | |
| HA9. Check HA8[A], [B] and [C]: At least one 'Yes' recorded? | YES 1 NO 2 | 2 ⇒ HA11 | | | | | | | | | | | | | | | | |
| HA10. Are there any special drugs that a doctor or a nurse can give to a woman infected with HIV to reduce the risk of transmission to the baby? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | |
| HA11. Check CM17: Was there a live birth in the last 2 years? Copy name of last birth listed in the birth history (CM18) to here and use where indicated: Name _____ | YES, CM17=1 1 NO, CM17=0 OR BLANK 2 | 2 ⇒ HA24 | | | | | | | | | | | | | | | | |
| HA12. Check MN2: Was antenatal care received? | YES, MN2=1 1 NO, MN2=2 2 | 2 ⇒ HA17 | | | | | | | | | | | | | | | | |

| | YES | NO | DK | |
|---|-------------------------------|----|----|----------|
| HA13. During any of the antenatal visits for your pregnancy with (<i>name</i>), were you given any information about: | | | | |
| [A] Babies getting HIV from their mother? | HIV FROM MOTHER..... | 1 | 2 | 8 |
| [B] Things that you can do to prevent getting HIV? | THINGS TO DO | 1 | 2 | 8 |
| [C] Getting tested for HIV? | TESTED FOR HIV | 1 | 2 | 8 |
| Were you: | | | | |
| [D] Offered a test for HIV? | OFFERED A TEST FOR HIV | 1 | 2 | 8 |
| HA14. I don't want to know the results, but were you tested for HIV as part of your antenatal care? | YES | 1 | | |
| | NO | 2 | | 2 ⇒HA16A |
| | DK | 8 | | 8 ⇒HA16A |
| HA15. I don't want to know the results, but did you get the results of the test? | YES | 1 | | |
| | NO | 2 | | 2 ⇒HA16A |
| | DK | 8 | | 8 ⇒HA16A |
| HA16. After you received the result, were you given any health information or counselling related to HIV? | YES | 1 | | |
| | NO | 2 | | |
| | DK | 8 | | |
| HA16A. I don't want to know the results, but whether during your antenatal care your husband / partner was tested for HIV? | YES | 1 | | |
| | NO | 2 | | |
| | DK | 8 | | |
| HA17. Check MN20: Was the child delivered in a health facility? | YES, MN20=21-36 OR 76..... | 1 | | |
| | NO, MN20=11-12 OR 96..... | 2 | | 2 ⇒HA21 |
| HA18. Between the time you went for delivery but before the baby was born were you offered an HIV test? | YES | 1 | | |
| | NO | 2 | | |
| HA19. I don't want to know the results, but were you tested for HIV at that time? | YES | 1 | | |
| | NO | 2 | | 2 ⇒HA21 |
| HA20. I don't want to know the results, but did you get the results of the test? | YES | 1 | | 1 ⇒HA22 |
| | NO | 2 | | 2 ⇒HA22 |
| HA21. Check HA14: Was the respondent tested for HIV as part of antenatal care? | YES, HA14=1 | 1 | | |
| | NO OR NO ANSWER, HA14≠1 | 2 | | 2 ⇒HA24 |
| HA22. Have you been tested for HIV since that time you were tested during your pregnancy? | YES | 1 | | 1 ⇒HA25 |
| | NO | 2 | | |
| HA23. How many months ago was your most recent HIV test? | LESS THAN 12 MONTHS AGO | 1 | | 1 ⇒HA28 |
| | 12-23 MONTHS AGO | 2 | | 2 ⇒HA28 |
| | 2 OR MORE YEARS AGO | 3 | | 3 ⇒HA28 |
| HA24. I don't want to know the results, but have you ever been tested for HIV? | YES | 1 | | |
| | NO | 2 | | 2 ⇒HA27 |
| HA25. How many months ago was your most recent HIV test? | LESS THAN 12 MONTHS AGO | 1 | | |
| | 12-23 MONTHS AGO | 2 | | |
| | 2 OR MORE YEARS AGO | 3 | | |

| | | |
|---|---|-----------------------------------|
| HA26. I don't want to know the results, but did you get the results of the test? | YES 1 NO 2 DK 8 | 1 ⇒HA28 2 ⇒HA28 8 ⇒HA28 |
| HA27. Do you know of a place where people can go to get an HIV test? | YES 1 NO 2 | |
| HA28. Have you heard of test kits people can use to test themselves for HIV? | YES 1 NO 2 | 2 ⇒HA30 |
| HA29. Have you ever tested yourself for HIV using a self-test kit? | YES 1 NO 2 | |
| HA30. Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| HA31. Do you think children living with HIV should be allowed to attend school with children who do not have HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| HA32. Do you think people hesitate to take an HIV test because they are afraid of how other people will react if the test result is positive for HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| HA33. Do people talk badly about people living with HIV, or who are thought to be living with HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| HA34. Do people living with HIV, or thought to be living with HIV, lose the respect of other people? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| HA35. Do you agree or disagree with the following statement? I would be ashamed if someone in my family had HIV. | AGREE 1 DISAGREE 2 DK / NOT SURE / DEPENDS 8 | |
| HA36. Do you fear that you could get HIV if you come into contact with the saliva of a person living with HIV? | YES 1 NO 2 SAYS SHE HAS HIV 7 DK / NOT SURE / DEPENDS 8 | |
| HA37. Check WB4 and WB5, age between 15-24 years and ever attended school? | YES (WB4 is 15-24 and WB5 =1) 1 NO 2 | 2 ⇒WM10 |
| HA38. Did you study sexuality education in school? Sexuality education includes birth control, safe sex, teen pregnancy, reproductive tract infections and wellbeing, etc. | YES 1 NO 2 | 2 ⇒WM10 |
| HA39. At what level did you first have sexuality education? | PRIMARY 1 LOWER SECONDARY 2 UPPER SECONDARY 3 VOCATIONAL CERTIFICATE 4 DIPLOMA / ASSOCIATE 5 DK / NOT SURE 8 | |

| | | |
|---|--|--|
| HA40. In sexuality education classes, did you learn any new information? | YES, MOSTLY NEW1 YES, SOME NEW2 NONE.....3 | |
| HA41. Apart from sexuality education classes, did you have other source of sexuality information? <i>Probe: Any other source?</i> | INTERNETA MOVIES.....B TELEVISION.....C RADIOD BOOKE COMICS.....F FICTIONG FRIENDSH OLDER BROTHER-SISTER / YOUNGER BROTHER-SISTER.....I PARENTS / GUARDIAN.....J OTHER (<i>specify</i>) _____ X NO SOURCEY | |

| | | |
|--|---|--|
| WM10. Record the time. | HOURS AND MINUTES : .. | |
| WM11. Was the entire interview completed in private or was there anyone else during the entire interview or part of it? | YES, THE ENTIRE INTERVIEW WAS COMPLETED IN PRIVATE 1 NO, OTHERS WERE PRESENT DURING THE ENTIRE INTERVIEW (specify) 2 NO, OTHERS WERE PRESENT DURING PART OF THE INTERVIEW (specify) 3 | |
| WM12. Language of the Questionnaire. | THAI 1 ENGLISH..... 2 | |
| WM13. Language of the Interview. | THAI 1 ENGLISH..... 2 OTHER LANGUAGE (specify) 6 | |
| WM14. Native language of the Respondent. | THAI 01 ENGLISH..... 02 CHINESE..... 03 BURMESE 04 KHMER / KUY 05 MALAY / JAWI..... 06 LAO..... 07 KAREN 08 HMONG..... 09 LAHU 10 MON 11 LAWA..... 12 AKHA 13 NYEU..... 14 SHAN 15 OTHER LANGUAGE (specify) 96 | |
| WM15. Was a translator used for any parts of this questionnaire? | YES, THE ENTIRE QUESTIONNAIRE..... 1 YES, PARTS OF THE QUESTIONNAIRE 2 NO, NOT USED..... 3 | |

WM16. Check columns HL10 and HL20 in *LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE*:
Is the respondent the mother or caretaker of any child age 0-4 living in this household?

- Yes* ⇒ Go to WM17 in *WOMAN'S INFORMATION PANEL* and record '01'. Then go to the *QUESTIONNAIRE FOR CHILDREN UNDER FIVE* for that child and start the interview with this respondent.
- No* ⇒ Check HH26-HH27 in *HOUSEHOLD QUESTIONNAIRE: Is there a child age 5-14 selected for QUESTIONNAIRE FOR CHILDREN AGE 5-14?*
 - Yes* ⇒ Check column HL20 in *LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of the child selected for QUESTIONNAIRE FOR CHILDREN AGE 5-14 in this household?*
 - Yes* ⇒ Go to WM17 in *WOMAN'S INFORMATION PANEL* and record '01'. Then go to the *QUESTIONNAIRE FOR CHILDREN AGE 5-14* for that child and start the interview with this respondent.
 - No* ⇒ Go to WM17 in *WOMAN'S INFORMATION PANEL* and record '01'. Then end the interview with this respondent by thanking her for her cooperation. Check to see if there are other questionnaires to be administered in this household.
 - No* ⇒ Go to WM17 in *WOMAN'S INFORMATION PANEL* and record '01'. Then end the interview with this respondent by thanking her for her cooperation. Check to see if there are other questionnaires to be administered in this household.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

| MAN'S INFORMATION PANEL | | MWM |
|--|---|-----|
| MWM1. Cluster number: _____ | MWM2. Household number: _____ | |
| MWM3. Man's name and line number: NAME _____ | MWM4. Supervisor's name and number: NAME _____ | |
| MWM5. Interviewer's name and number: NAME _____ | MWM6. Day / Month / Year of interview: _____ / _____ / 2 5 6 2 | |

| | | | | | | | | | |
|--|---|---------------------------------|----------------------|-----------------------------|---|----------------------------|--|----------|--|
| <p><i>Check man's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: If age 15-17, verify in HH39 that adult consent for interview is obtained or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in MWM17.</i></p> | <p>MWM7. Record the time:</p> <p align="center">HOURS : MINUTES _____ : _____</p> | | | | | | | | |
| <p>MWM8. Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?</p> | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; border-right: 1px solid black;">YES, INTERVIEWED ALREADY 1</td> <td style="width:50%;">1 ⇒MWM9B</td> </tr> <tr> <td style="border-right: 1px solid black;">NO, FIRST INTERVIEW 2</td> <td>2 ⇒MWM9A</td> </tr> </table> | YES, INTERVIEWED ALREADY 1 | 1 ⇒MWM9B | NO, FIRST INTERVIEW 2 | 2 ⇒MWM9A | | | | |
| YES, INTERVIEWED ALREADY 1 | 1 ⇒MWM9B | | | | | | | | |
| NO, FIRST INTERVIEW 2 | 2 ⇒MWM9A | | | | | | | | |
| <p>MWM9A. Hello, my name is (<i>your name</i>). We are from National Statistical Office. We are conducting a survey about the situation of children, families and households. I would like to talk to you about your health and other topics. This interview usually takes about 15 minutes. We are also interviewing mothers about their children. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?</p> | <p>MWM9B. Now I would like to talk to you about your health and other topics in more detail. This interview will take about 15 minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?</p> | | | | | | | | |
| <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">YES</td> <td style="width:50%;">1</td> </tr> <tr> <td>NO / NOT ASKED</td> <td>2</td> </tr> </table> | YES | 1 | NO / NOT ASKED | 2 | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">1 ⇒MAN'S BACKGROUND Module</td> <td style="width:50%;"></td> </tr> <tr> <td>2 ⇒MWM17</td> <td></td> </tr> </table> | 1 ⇒MAN'S BACKGROUND Module | | 2 ⇒MWM17 | |
| YES | 1 | | | | | | | | |
| NO / NOT ASKED | 2 | | | | | | | | |
| 1 ⇒MAN'S BACKGROUND Module | | | | | | | | | |
| 2 ⇒MWM17 | | | | | | | | | |

| | | | | | | | | | | | | | | | |
|---|---|----------------|----|-------------------|----|--------------|----|------------------------|----|--|----|--|----|-------------------------------|----|
| <p>MWM17. Result of man's interview.</p> <p><i>Discuss any result not completed with Supervisor.</i></p> | <table style="width:100%; border-collapse: collapse;"> <tr> <td>COMPLETED.....</td> <td align="right">01</td> </tr> <tr> <td>NOT AT HOME</td> <td align="right">02</td> </tr> <tr> <td>REFUSED.....</td> <td align="right">03</td> </tr> <tr> <td>PARTLY COMPLETED</td> <td align="right">04</td> </tr> <tr> <td>INCAPACITATED (<i>specify</i>)</td> <td align="right">05</td> </tr> <tr> <td>NO ADULT CONSENT FOR RESPONDENT AGE 15-17</td> <td align="right">06</td> </tr> <tr> <td>OTHER (<i>specify</i>).....</td> <td align="right">96</td> </tr> </table> | COMPLETED..... | 01 | NOT AT HOME | 02 | REFUSED..... | 03 | PARTLY COMPLETED | 04 | INCAPACITATED (<i>specify</i>) | 05 | NO ADULT CONSENT FOR RESPONDENT AGE 15-17 | 06 | OTHER (<i>specify</i>)..... | 96 |
| COMPLETED..... | 01 | | | | | | | | | | | | | | |
| NOT AT HOME | 02 | | | | | | | | | | | | | | |
| REFUSED..... | 03 | | | | | | | | | | | | | | |
| PARTLY COMPLETED | 04 | | | | | | | | | | | | | | |
| INCAPACITATED (<i>specify</i>) | 05 | | | | | | | | | | | | | | |
| NO ADULT CONSENT FOR RESPONDENT AGE 15-17 | 06 | | | | | | | | | | | | | | |
| OTHER (<i>specify</i>)..... | 96 | | | | | | | | | | | | | | |

| MAN'S BACKGROUND | MWB | |
|--|--|----------------------|
| MWB1. Check the respondent's line number (MWM3) in MAN'S INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the Household Questionnaire? | YES, RESPONDENT IS THE SAME, MWM3=HH47 1 NO, RESPONDENT IS NOT THE SAME, MWM3≠HH47 2 | 2 ⇒MWB3 |
| MWB2. Check ED5 in EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for this respondent: Highest level of school attended: | ED5=02 TO 08 1 ED5=00, 01, 98 OR BLANK 2 | 1 ⇒MWB15 2 ⇒MWB14 |
| MWB3. In what month and year were you born? | DATE OF BIRTH MONTH __ __ DK MONTH..... 98 YEAR..... __ __ __ __ DK YEAR 9998 | |
| MWB4. How old are you? <i>Probe: How old were you at your last birthday?</i> <i>If responses to MWB3 and MWB4 are inconsistent, probe further and correct. Age must be recorded.</i> | AGE (IN COMPLETED YEARS) __ __ | |
| MWB5. Have you ever attended school or any early childhood education programme? | YES 1 NO 2 | 2 ⇒MWB14 |
| MWB6. What is the highest level and grade or year of school you have attended? | EARLY CHILDHOOD EDUCATION 000 PRIMARY 1 __ __ LOWER SECONDARY 2 __ __ UPPER SECONDARY 3 __ __ CERTIFICATE (VCE / TCE) 4 __ __ DIPLOMA (HVC / CTV / HTC)..... 5 __ __ BACHELOR DEGREE..... 6 __ __ MASTER DEGREE 7 __ __ DOCTORAL DEGREE..... 8 __ __ | 000 ⇒MWB14 |
| MWB7. Did you complete that (grade/year)? | YES 1 NO 2 | |
| MWB8. Check MWB4: Age of respondent: | AGE 15-24 1 AGE 25-49 2 | 2 ⇒MWB13 |
| MWB9. At any time during the 2562-63 school year did you attend school? | YES 1 NO 2 | 2 ⇒MWB11 |
| MWB10. During the 2562-63 school year, which level and grade or year are you attending? | PRIMARY 1 __ __ LOWER SECONDARY 2 __ __ UPPER SECONDARY 3 __ __ CERTIFICATE (VCE)..... 4 __ __ HVC / DIPLOMA 5 __ __ BACHELOR DEGREE..... 6 __ __ MASTER DEGREE 7 __ __ DOCTORAL DEGREE..... 8 __ __ | |
| MWB11. At any time during the 2561-62 school year did you attend school? | YES 1 NO 2 | 2 ⇒MWB13 |

| | | |
|---|---|------------------------|
| <p>MWB12. During the 2561-62 school year, which level and grade or year did you <u>attend</u>?</p> | <p>PRIMARY..... 1 ___ LOWER SECONDARY 2 ___ UPPER SECONDARY 3 ___ CERTIFICATE (VCE)..... 4 ___ HVC / DIPLOMA 5 ___ BACHELOR DEGREE..... 6 ___ MASTER DEGREE 7 ___ DOCTORAL DEGREE..... 8 ___</p> | |
| <p>MWB13. Check MWB6: Highest level of school attended:</p> | <p>MWB6=02 TO 08 1 MWB6=01..... 2</p> | <p>1 ⇒ MWB15</p> |
| <p>MWB14. Now I would like you to read this sentence to me.</p> <p><i>Show sentence on the card to the respondent.</i></p> <p><i>If respondent cannot read whole sentence, probe: Can you read part of the sentence to me?</i></p> | <p>CANNOT READ AT ALL 1 ABLE TO READ ONLY PARTS OF SENTENCE..... 2 ABLE TO READ WHOLE SENTENCE..... 3 NO SENTENCE IN REQUIRED LANGUAGE / BRAILLE (specify language) 4</p> | |
| <p>MWB15. How long have you been continuously living in (name of current city, town or village of residence)?</p> <p><i>If less than one year, record '00' years.</i></p> | <p>YEARS..... ___ ALWAYS / SINCE BIRTH 95</p> | <p>95 ⇒ MWB18</p> |
| <p>MWB16. Just before you moved here, did you live in a city, in a town, or in a rural area?</p> <p><i>Probe to identify the type of place.</i></p> <p><i>If unable to determine whether the place is a municipality (urban) or non-municipality (rural), write the name of the place and then temporarily record '5' until you learn the appropriate category for the response.</i></p> <p>_____</p> <p>(Name of place)</p> | <p>MUNICIPALITY 1 NON-MUNICIPALITY 2</p> | |
| <p>MWB17. Before you moved here, in which region did you live in?</p> | <p>BANGKOK 01 CENTRAL 02 NORTH 03 NORTHEAST 04 SOUTH..... 05 OUTSIDE OF THAILAND (specify) 96</p> | |
| <p>MWB18. Are you covered by any health insurance?</p> | <p>YES 1 NO 2</p> | <p>2 ⇒ Next module</p> |

| | | |
|--|---|--|
| <p>MWB19. What type of health insurance are you covered by?</p> <p><i>Record all mentioned.</i></p> | <p>COMMUNITY HEALTH INSURANCE A</p> <p>HEALTH INSURANCE THROUGH EMPLOYER..... B</p> <p>SOCIAL SECURITY/COMPENSATION FUND . C</p> <p>PRIVATE HEALTH INSURANCE D</p> <p>UNIVERSAL HEALTH-CARE COVERAGE SCHEME.....E</p> <p>GOVERNMENT OFFICER.....F</p> <p>LOCAL ADMINISTRATIVE ORGANIZATION G</p> <p>STATE ENTERPRISES OR INDEPENDENT AGENCIES H</p> <p>OTHER (<i>specify</i>) _____ X</p> | |
|--|---|--|

FERTILITY
MCM

| | | |
|---|---|--------------------------|
| <p>MCM1. Now I would like to ask about all the children you have had during your life. I am interested in all of the children that are biologically yours, even if they are not legally yours or do not have your last name.</p> <p>Have you ever fathered any children with any woman?</p> <p><i>This module should only include children born alive. Any stillbirths should not be included in response to any question.</i></p> | YES 1 NO 2 DK 8 | 2 ⇒ MCM8 8 ⇒ MCM8 |
| <p>MCM2. Do you have any sons or daughters that you have fathered who are now living with you?</p> | YES 1 NO 2 | 2 ⇒ MCM5 |
| <p>MCM3. How many sons live with you?</p> <p><i>If none, record '00'.</i></p> | SONS AT HOME..... __ __ | |
| <p>MCM4. How many daughters live with you?</p> <p><i>If none, record '00'.</i></p> | DAUGHTERS AT HOME..... __ __ | |
| <p>MCM5. Do you have any sons or daughters that you have fathered who are alive but do not live with you?</p> | YES 1 NO 2 | 2 ⇒ MCM8 |
| <p>MCM6. How many sons are alive but do not live with you?</p> <p><i>If none, record '00'.</i></p> | SONS ELSEWHERE __ __ | |
| <p>MCM7. How many daughters are alive but do not live with you?</p> <p><i>If none, record '00'.</i></p> | DAUGHTERS ELSEWHERE __ __ | |
| <p>MCM8. Have you ever fathered a son or daughter who was born alive but later died?</p> <p><i>If 'No' probe by asking:</i> I mean, to any baby who cried, who made any movement, sound, or effort to breathe, or who showed any other signs of life even if for a very short time?</p> | YES 1 NO 2 | 2 ⇒ MCM11 |
| <p>MCM9. How many boys have died?</p> <p><i>If none, record '00'.</i></p> | BOYS DEAD __ __ | |
| <p>MCM10. How many girls have died?</p> <p><i>If none, record '00'.</i></p> | GIRLS DEAD __ __ | |
| <p>MCM11. Sum answers to MCM3, MCM4, MCM6, MCM7, MCM9 and MCM10.</p> | SUM __ __ | |
| <p>MCM12. Just to make sure that I have this right, you have fathered (<i>total number in MCM11</i>) live births during your life. Is this correct?</p> | YES 1 NO 2 | 1 ⇒ MCM14 |

| | | |
|--|---|-------------------------------|
| MCM13. Check responses to MCM1-MCM10 and make corrections as necessary until response in MCM12 is 'Yes'. | | |
| MCM14. Check MCM11: How many live births fathered? | NO LIVE BIRTHS, MCM11=00 0 ONE LIVE BIRTH ONLY, MCM11=01 1 TWO OR MORE LIVE BIRTHS, MCM11=02 OR MORE 2 | 0 ⇒ Next module 1 ⇒ MCM18A |
| MCM15. Did all the children you have fathered have the same biological mother? | YES 1 NO 2 | 1 ⇒ MCM17 |
| MCM16. In all, how many women have you fathered children with? | NUMBER OF WOMEN _ _ | |
| MCM17. How old were you when your first child was born? | AGE IN YEARS..... _ _ | ⇒ MCM18B |
| MCM18A. In what month and year was the child you have fathered born? MCM18B. In what month and year was the last of these (<i>total number in MCM11</i>) children you have fathered born even if he or she has died? <i>Month and year must be recorded.</i> | DATE OF LAST BIRTH MONTH _ _ YEAR _ _ _ _ | |

ATTITUDES TOWARD DOMESTIC VIOLENCE

MDV

MDV1. Sometimes a husband is annoyed or angered by things that his wife does. In your opinion, is a husband justified in hitting or beating his wife in the following situations:

| | | YES | NO | DK |
|--|--------------------------------|-----|----|----|
| [A] If she goes out without telling him? | GOES OUT WITHOUT TELLING | 1 | 2 | 8 |
| [B] If she neglects the children? | NEGLECTS CHILDREN | 1 | 2 | 8 |
| [C] If she argues with him? | ARGUES WITH HIM..... | 1 | 2 | 8 |
| [D] If she refuses to have sex with him? | REFUSES SEX | 1 | 2 | 8 |
| [E] If she burns the food? | BURNS FOOD | 1 | 2 | 8 |
| [F] If she neglects household chores? | NEGLECT HH CHORES | 1 | 2 | 8 |

VICTIMISATION

MVT

| | | |
|--|---|---|
| <p>MVT1. Check for the presence of others. Before continuing, ensure privacy. Now I would like to ask you some questions about crimes in which you <u>personally</u> were the victim.</p> <p>Let me assure you again that your answers are completely confidential and will not be told to anyone.</p> <p>In the last three years, that is since (<i>month of interview</i>) (<i>year of interview minus 3</i>), has anyone taken or tried taking something from you, by using force or threatening to use force?</p> <p><i>Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household.</i></p> <p><i>If necessary, help the respondent to establish the recall period and make sure that you allow adequate time for the recall. You may reassure: It can be difficult to remember this sort of incidents, so please take your time while you think about your answers.</i></p> | <p>YES..... 1 NO 2 DK 8</p> | <p>2 ⇨MVT9B 8 ⇨MVT9B</p> |
| <p>MVT2. Did this last happen during the last 12 months, that is, since (<i>month of interview</i>) (<i>year of interview minus 1</i>)?</p> | <p>YES, DURING THE LAST 12 MONTHS 1 NO, MORE THAN 12 MONTHS AGO..... 2 DK / DON'T REMEMBER..... 8</p> | <p>2 ⇨MVT5B 8 ⇨MVT5B</p> |
| <p>MVT3. How many times did this happen in the last 12 months?</p> <p><i>If 'DK/Don't remember', probe: Did it happen once, twice, or at least three times?</i></p> | <p>ONE TIME 1 TWO TIMES 2 THREE OR MORE TIMES..... 3 DK / DON'T REMEMBER..... 8</p> | |
| <p>MVT4. Check MVT3: One or more times?</p> | <p>ONE TIME, MVT3=1 1 MORE THAN ONCE OR DK, MVT3=2, 3 OR 8..... 2</p> | <p>1 ⇨MVT5A 2 ⇨MVT5B</p> |
| <p>MVT5A. When this happened, was anything stolen from you?</p> <p>MVT5B. The last time this happened, was anything stolen from you?</p> | <p>YES..... 1 NO 2 DK / NOT SURE 8</p> | |
| <p>MVT6. Did the person(s) have a weapon?</p> | <p>YES..... 1 NO 2 DK / NOT SURE 8</p> | <p>2 ⇨MVT8 8 ⇨MVT8</p> |
| <p>MVT7. Was a knife, a gun or something else used as a weapon?</p> <p><i>Record all that apply.</i></p> | <p>YES, A KNIFE A YES, A GUN B YES, SOMETHING ELSE..... X</p> | |
| <p>MVT8. Did you or anyone else report the incident to the police?</p> <p><i>If 'Yes', probe: Was the incident reported by you or someone else?</i></p> | <p>YES, RESPONDENT REPORTED 1 YES, SOMEONE ELSE REPORTED..... 2 NO, NOT REPORTED 3 DK / NOT SURE 8</p> | |

| | | |
|--|---|---|
| <p>MVT8A. Did you or anyone else report the incident to other agencies other than the police?</p> | <p>YES, RESPONDENT REPORTED 1 YES, SOMEONE ELSE REPORTED..... 2 NO, NOT REPORTED..... 3 DK / NOT SURE 8</p> | <p>2 ⇨MVT9A 8 ⇨MVT9A</p> |
| <p>MVT8B. To which agencies did you or anyone else report the incident?</p> <p><i>Record all the answers that apply.</i></p> | <p>VILLAGE HEADMAN / SUBDISTRICT HEADMAN / SAO / MUNICIPALITY..... A OSCC 1300 HOTLINE.....B DAMRONGTHAM (OMBUDSMAN) CENTRE.....C FOUNDATION D SHELTERS FOR CHILDREN AND FAMILIES E PROVINCIAL MSDHS OFFICE..... F OTHER (<i>specify</i>) X</p> | <p>A ⇨MVT9A B ⇨MVT9A C ⇨MVT9A D ⇨MVT9A E ⇨MVT9A F ⇨MVT9A X ⇨MVT9A</p> |
| <p>MVT9A. Apart from the incident(s) just covered, have you in the last three years, that is since (<i>month of interview</i>) (<i>year of interview minus 3</i>), been physically attacked?</p> <p>MVT9B. In the same period of the last three years, that is since (<i>month of interview</i>) (<i>year of interview minus 3</i>), have you been physically attacked?</p> <p><i>If 'No', probe: An attack can happen at home or any place outside of the home, such as in other homes, in the street, at school, on public transport, public restaurants, or at your workplace.</i></p> <p><i>Include only incidents in which the respondent was personally the victim and exclude incidents experienced only by other members of the household. Exclude incidents where the intention was to take something from the respondent, which should be recorded under MVT1.</i></p> | <p>YES..... 1 NO 2 DK 8</p> | <p>2 ⇨MVT20 8 ⇨MVT20</p> |
| <p>MVT10. Did this last happen during the last 12 months, that is, since (<i>month of interview</i>) (<i>year of interview minus 1</i>)?</p> | <p>YES, DURING THE LAST 12 MONTHS 1 NO, MORE THAN 12 MONTHS AGO..... 2 DK / DON'T REMEMBER..... 8</p> | <p>2 ⇨MVT12B 8 ⇨MVT12B</p> |
| <p>MVT11. How many times did this happen in the last 12 months?</p> <p><i>If 'DK/Don't remember', probe: Did it happen once, twice, or at least three times?</i></p> | <p>ONE TIME 1 TWO TIMES 2 THREE OR MORE TIMES..... 3 DK / DON'T REMEMBER..... 8</p> | <p>1 ⇨MVT12A 2 ⇨MVT12B 3 ⇨MVT12B 8 ⇨MVT12B</p> |

| | | |
|--|--|---|
| <p>MVT12A. Where did this happen?</p> <p>MVT12B. Where did this happen the last time?</p> | <p>AT HOME 11</p> <p>IN ANOTHER HOME 12</p> <p>IN THE STREET 21</p> <p>ON PUBLIC TRANSPORT 22</p> <p>PUBLIC RESTAURANT / CAFÉ / BAR 23</p> <p>OTHER PUBLIC (<i>specify</i>) 26</p> <p>AT SCHOOL 31</p> <p>AT WORKPLACE 32</p> <p>OTHER PLACE (<i>specify</i>) 96</p> | |
| <p>MVT13. How many people were involved in committing the offence?</p> <p><i>If 'DK/Don't remember', probe: Was it one, two, or at least three people?</i></p> | <p>ONE PERSON 1</p> <p>TWO PEOPLE 2</p> <p>THREE OR MORE PEOPLE 3</p> <p>DK / DON'T REMEMBER 8</p> | <p>1 ⇨MVT14A</p> <p>2 ⇨MVT14B</p> <p>3 ⇨MVT14B</p> <p>8 ⇨MVT14B</p> |
| <p>MVT14A. At the time of the incident, did you recognize the person?</p> <p>MVT14B. At the time of the incident, did you recognize at least one of the persons?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / DON'T REMEMBER 8</p> | |
| <p>MVT17. Did the person(s) have a weapon?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / NOT SURE 8</p> | <p>2 ⇨MVT19</p> <p>8 ⇨MVT19</p> |
| <p>MVT18. Was a knife, a gun or something else used as a weapon?</p> <p><i>Record all that apply.</i></p> | <p>YES, A KNIFE A</p> <p>YES, A GUN B</p> <p>YES, SOMETHING ELSE X</p> | |
| <p>MVT19. Did you or anyone else report the incident to the police?</p> <p><i>If 'Yes', probe: Was the incident reported by you or someone else?</i></p> | <p>YES, RESPONDENT REPORTED 1</p> <p>YES, SOMEONE ELSE REPORTED 2</p> <p>NO, NOT REPORTED 3</p> <p>DK / NOT SURE 8</p> | |
| <p>MVT19A. Did you or anyone else report the incident to other agencies other than the police?</p> | <p>YES, RESPONDENT REPORTED 1</p> <p>YES, SOMEONE ELSE REPORTED 2</p> <p>NO, NOT REPORTED 3</p> <p>DON'T KNOW / NOT SURE 8</p> | <p>3 ⇨MVT20</p> <p>8 ⇨MVT20</p> |
| <p>MVT19B. To which agencies did you or anyone else report the incident?</p> <p><i>Record all the answers that apply.</i></p> | <p>VILLAGE CHIEF/SUBDISTRICT HEADMAN/SAO A</p> <p>OSCC 1300 HOTLINE B</p> <p>DAMRONGTHAM (OMBUDSMAN) CENTRE C</p> <p>FOUNDATION D</p> <p>SHELTERS FOR CHILDREN AND FAMILIES E</p> <p>PROVINCIAL MSDHS OFFICE F</p> <p>OTHER (SPECIFY) X</p> | |

| MVT20. How safe do you feel walking alone in your neighbourhood after dark? | VERY SAFE..... 1 SAFE 2 UNSAFE..... 3 VERY UNSAFE..... 4 NEVER WALK ALONE AFTER DARK..... 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|----|-----|----|----|-----------------------------------|---|---|---|----------|---|---|---|-------------------------|---|---|---|----------|---|---|---|-------------------------|---|---|---|-----------------|---|---|---|------------------|---|---|---|--------------------|---|---|---|---------------------------|---|---|---|--|
| MVT21. How safe do you feel when you are at home alone after dark? | VERY SAFE..... 1 SAFE 2 UNSAFE..... 3 VERY UNSAFE..... 4 NEVER ALONE AFTER DARK..... 7 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| MVT22. In the past 12 months, have you <u>personally</u> felt discriminated against or harassed on the basis of the following grounds? | <table border="0" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 80%;"></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> <th style="text-align: center;">DK</th> </tr> </thead> <tbody> <tr> <td>[A] Ethnic or immigration origin?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[B] Sex?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[C] Sexual orientation?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[D] Age?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[E] Religion or belief?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[F] Disability?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[G] Poor status?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[H] Work position?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>[X] For any other reason?</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </tbody> </table> | | YES | NO | DK | [A] Ethnic or immigration origin? | 1 | 2 | 8 | [B] Sex? | 1 | 2 | 8 | [C] Sexual orientation? | 1 | 2 | 8 | [D] Age? | 1 | 2 | 8 | [E] Religion or belief? | 1 | 2 | 8 | [F] Disability? | 1 | 2 | 8 | [G] Poor status? | 1 | 2 | 8 | [H] Work position? | 1 | 2 | 8 | [X] For any other reason? | 1 | 2 | 8 | |
| | YES | NO | DK | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [A] Ethnic or immigration origin? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [B] Sex? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [C] Sexual orientation? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [D] Age? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [E] Religion or belief? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [F] Disability? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [G] Poor status? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [H] Work position? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| [X] For any other reason? | 1 | 2 | 8 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| MARRIAGE/UNION | | MMA |
|---|---|--------------------------|
| MMA1. Are you currently married or living together with someone as if married? | YES, CURRENTLY MARRIED 1 YES, LIVING WITH A PARTNER 2 NO, NOT IN UNION 3 | 3 ⇨ MMA5 |
| MMA3. Do you have other wives or do you live with other partners as if married? | YES 1 NO 2 | 2 ⇨ MMA7 |
| MMA4. How many other wives or live-in partners do you have? | NUMBER __ __ DK 98 | ⇨ MMA7 98 ⇨ MMA7 |
| MMA5. Have you ever been married or lived together with someone as if married? | YES, FORMERLY MARRIED 1 YES, FORMERLY LIVED WITH A PARTNER. 2 NO 3 | 3 ⇨ Next module |
| MMA6. What is your marital status now: are you widowed, divorced or separated? | WIDOWED 1 DIVORCED 2 SEPARATED 3 | |
| MMA7. Have you been married or lived with someone only once or more than once? | ONLY ONCE 1 MORE THAN ONCE 2 | 1 ⇨ MMA8A 2 ⇨ MMA8B |
| MMA8A. In what month and year did you start living with your (wife/partner)? MMA8B. In what month and year did you start living with your <u>first</u> (wife/partner)? | DATE OF (FIRST) UNION MONTH __ __ DK MONTH 98 YEAR __ __ __ __ DK YEAR 9998 | |
| MMA9. Check MMA8A/B: Is 'DK YEAR' recorded? | YES, MMA8A/B=9998 1 NO, MMA8A/B≠9998 2 | 2 ⇨ Next module |
| MMA10. Check MMA7: In union only once? | YES, MMA7=1 1 NO, MMA7=2 2 | 1 ⇨ MMA11A 2 ⇨ MMA11B |
| MMA11A. How old were you when you started living with your (wife/partner)? MMA11B. How old were you when you started living with your <u>first</u> (wife/partner)? | AGE IN YEARS __ __ | |

| HIV/AIDS | | | | MHA | | | | | | | | | | | | | | | |
|--|---|-------------------------------------|-----|-----|----|------------------------|---|---|---|-----------------------|---|---|---|------------------------|---|---|---|--|--|
| MHA1. Now I would like to talk with you about something else. Have you ever heard of HIV or AIDS? | YES 1 NO 2 DK 8 | 2 ⇒ Next module | | | | | | | | | | | | | | | | | |
| MHA2. HIV is the virus that can lead to AIDS. Can people reduce their chance of getting HIV by having just one uninfected sex partner who has no other sex partners? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA3. Can people get HIV from mosquito bites? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA4. Can people reduce their chance of getting HIV by using a condom every time they have sex? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA5. Can people get HIV by sharing food with a person who has HIV? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA6. Can people get HIV because of witchcraft or other supernatural means? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA7. Is it possible for a healthy-looking person to have HIV? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA8. Can HIV be transmitted from a mother to her baby: [A] During pregnancy? [B] During delivery? [C] By breastfeeding? | <table border="0" style="width: 100%;"> <thead> <tr> <th></th> <th style="text-align: center;">YES</th> <th style="text-align: center;">NO</th> <th style="text-align: center;">DK</th> </tr> </thead> <tbody> <tr> <td>DURING PREGNANCY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>DURING DELIVERY</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> <tr> <td>BY BREASTFEEDING</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> </tr> </tbody> </table> | | YES | NO | DK | DURING PREGNANCY | 1 | 2 | 8 | DURING DELIVERY | 1 | 2 | 8 | BY BREASTFEEDING | 1 | 2 | 8 | | |
| | YES | NO | DK | | | | | | | | | | | | | | | | |
| DURING PREGNANCY | 1 | 2 | 8 | | | | | | | | | | | | | | | | |
| DURING DELIVERY | 1 | 2 | 8 | | | | | | | | | | | | | | | | |
| BY BREASTFEEDING | 1 | 2 | 8 | | | | | | | | | | | | | | | | |
| MHA9. Check MHA8[A], [B] and [C]: At least one 'Yes' recorded? | YES 1 NO 2 | 2 ⇒ MHA24 | | | | | | | | | | | | | | | | | |
| MHA10. Are there any special drugs that a doctor or a nurse can give to a woman infected with HIV to reduce the risk of transmission to the baby? | YES 1 NO 2 DK 8 | | | | | | | | | | | | | | | | | | |
| MHA24. I don't want to know the results, but have you ever been tested for HIV? | YES 1 NO 2 | 2 ⇒ MHA27 | | | | | | | | | | | | | | | | | |
| MHA25. How many months ago was your most recent HIV test? | LESS THAN 12 MONTHS AGO 1 12-23 MONTHS AGO 2 2 OR MORE YEARS AGO 3 | | | | | | | | | | | | | | | | | | |
| MHA26. I don't want to know the results, but did you get the results of the test? | YES 1 NO 2 DK 8 | 1 ⇒ MHA28 2 ⇒ MHA28 8 ⇒ MHA28 | | | | | | | | | | | | | | | | | |

| | | |
|--|---|-----------|
| MHA27. Do you know of a place where people can go to get an HIV test? | YES 1 NO 2 | |
| MHA28. Have you heard of test kits people can use to test themselves for HIV? | YES 1 NO 2 | 2 ⇒ MHA30 |
| MHA29. Have you ever tested yourself for HIV using a self-test kit? | YES 1 NO 2 | |
| MHA30. Would you buy fresh vegetables from a shopkeeper or vendor if you knew that this person had HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| MHA31. Do you think children living with HIV should be allowed to attend school with children who do not have HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| MHA32. Do you think people hesitate to take an HIV test because they are afraid of how other people will react if the test result is positive for HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| MHA33. Do people talk badly about people living with HIV, or who are thought to be living with HIV? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| MHA34. Do people living with HIV, or thought to be living with HIV, lose the respect of other people? | YES 1 NO 2 DK / NOT SURE / DEPENDS 8 | |
| MHA35. Do you agree or disagree with the following statement? I would be ashamed if someone in my family had HIV. | AGREE 1 DISAGREE 2 DK / NOT SURE / DEPENDS 8 | |
| MHA36. Do you fear that you could get HIV if you come into contact with the saliva of a person living with HIV? | YES 1 NO 2 SAYS HE HAS HIV 7 DK / NOT SURE / DEPENDS 8 | |
| MHA37. Check MWB4 and MWB5, age between 15-24 years = and ever attended school? | YES (MWB4 IS 15-24 AND WB5 =1) 1 NO 2 | 2 ⇒ MWM10 |
| MHA38. Did you study sexuality education in school? Sexuality education includes birth control, safe sex, teen pregnancy, reproductive tract infections and wellbeing, etc. | YES 1 NO 2 | 2 ⇒ MWM10 |
| MHA39. At what level did you first have sexuality education? | PRIMARY 1 LOWER SECONDARY 2 UPPER SECONDARY 3 VOCATIONAL CERTIFICATE 4 DIPLOMA / ASSOCIATE 5 DON'T KNOW / NOT SURE 8 | |
| MHA40. In sexuality education classes, did you learn any new information? | YES, MOSTLY NEW 1 YES, SOME NEW 2 NONE 3 | |

| | | |
|---|--|--|
| <p>MHA41. Apart from sexuality education classes, did you have other source of sexuality information?</p> <p><i>Probe:</i> Any other source?</p> <p><i>Record all the answers given.</i></p> | <p>INTERNET A</p> <p>MOVIES.....B</p> <p>TELEVISION.....C</p> <p>RADIO D</p> <p>BOOKE</p> <p>COMICS.....F</p> <p>FICTION G</p> <p>FRIENDS H</p> <p>OLDER BROTHER-SISTER / YOUNGER BROTHER-SISTER.....I</p> <p>PARENTS / GUARDIAN.....J</p> <p>OTHER (specify) X</p> <p>NO SOURCE Y</p> | |
|---|--|--|

| | | |
|--|--|--|
| MWM10. <i>Record the time.</i> | HOURS AND MINUTES _ _ : _ _ | |
| MWM11. <i>Was the entire interview completed in private or was there anyone else during the entire interview or part of it?</i> | YES, THE ENTIRE INTERVIEW WAS COMPLETED IN PRIVATE 1 NO, OTHERS WERE PRESENT DURING THE ENTIRE INTERVIEW (specify) 2 NO, OTHERS WERE PRESENT DURING PART OF THE INTERVIEW (specify) 3 | |
| MWM12. <i>Language of the Questionnaire.</i> | THAI 1 ENGLISH..... 2 | |
| MWM13. <i>Language of the Interview.</i> | THAI 1 ENGLISH..... 2 OTHER LANGUAGE (specify) 6 | |
| MWM14. <i>Native language of the Respondent.</i> | THAI 01 ENGLISH..... 02 CHINESE..... 03 BURMESE 04 KHMER / KUY 05 MALAY / JAWI..... 06 LAO..... 07 KAREN 08 HMONG..... 09 LAHU 10 MON 11 LAWA 12 AKHA 13 NYEU..... 14 SHAN 15 OTHER LANGUAGE (SPECIFY) 96 | |
| MWM15. <i>Was a translator used for any parts of this questionnaire?</i> | YES, THE ENTIRE QUESTIONNAIRE..... 1 YES, PARTS OF THE QUESTIONNAIRE 2 NO, NOT USED..... 3 | |

MWM16. Check columns HL10 and HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE:
Is the respondent the caretaker of any child age 0-4 living in this household?

- Yes ⇒ Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN UNDER FIVE for that child and start the interview with this respondent.
- No ⇒ Check HH26-HH27 in HOUSEHOLD QUESTIONNAIRE: Is there a child age 5-14 selected for QUESTIONNAIRE FOR CHILDREN AGE 5-14?
 - Yes ⇒ Check column HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the caretaker of the child selected for QUESTIONNAIRE FOR CHILDREN AGE 5-14 in this household?
 - Yes ⇒ Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-14 for that child and start the interview with this respondent.
 - No ⇒ Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking him for his cooperation. Check to see if there are other questionnaires to be administered in this household.
 - No ⇒ Go to MWM17 in MAN'S INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking him for his cooperation. Check to see if there are other questionnaires to be administered in this household.

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

| UNDER-FIVE CHILD INFORMATION PANEL | | UF |
|--|--|----------------------------------|
| UF1. Cluster number: _____ | UF2. Household number: _____ | |
| UF3. Child's name and line number: NAME _____ | UF4. Mother's / Caretaker's name and line number: NAME _____ | |
| UF5. Interviewer's name and number: NAME _____ | UF6. Supervisor's name and number: NAME _____ | |
| UF7. Day / Month / Year of interview: _____ / _____ / <u>2 5 6 2</u> | UF8. Record the time: | HOURS : MINUTES _____ : _____ |

| | | |
|--|--|----------------------|
| <p><i>Check respondent's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: If age 15-17, verify that adult consent for interview is obtained (HH33 or HH39) or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in UF17. The respondent must be at least 15 years old.</i></p> | | |
| UF9. Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire? | YES, INTERVIEWED ALREADY 1 NO, FIRST INTERVIEW 2 | 1 ⇒UF10B 2 ⇒UF10A |
| UF10A. Hello, my name is (<i>your name</i>). We are from National Statistical Office. We are conducting a survey about the situation of children, families and households. I would like to talk to you about (<i>child's name from UF3</i>)'s health and well-being. This interview will take about 20 minutes. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now? | UF10B. Now I would like to talk to you about (<i>child's name from UF3</i>)'s health and well-being in more detail. This interview will take about 20 minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now? | |
| YES 1 NO / NOT ASKED 2 | 1 ⇒UNDER FIVE'S BACKGROUND Module 2 ⇒UF17 | |

| | |
|--|---|
| UF17. Result of interview for children under 5 <i>Codes refer to mother/caretaker. Discuss any result not completed with Supervisor.</i> | COMPLETED..... 01 NOT AT HOME 02 REFUSED 03 PARTLY COMPLETED 04 INCAPACITATED (specify) _____ 05 NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17 06 OTHER (specify) _____ 96 |
|--|---|

| UNDER-FIVE'S BACKGROUND | | UB |
|---|---|------------------------------|
| <p>UB0. Before I begin the interview, could you please bring (<i>name</i>)'s Birth Certificate, Maternal and Child Health Handbook, and any immunisation record from a private health provider? We will need to refer to those documents.</p> | | |
| <p>UB1. On what day, month and year was (<i>name</i>) born?</p> <p><i>Probe:</i> What is (his/her) birthday?</p> <p><i>If the mother/caretaker knows the exact date of birth, also record the day; otherwise, record '98' for day.</i></p> <p><i>Month and year <u>must</u> be recorded.</i></p> | <p>DATE OF BIRTH</p> <p>DAY__ __</p> <p>DK DAY98</p> <p>MONTH.....__ __</p> <p>YEAR <u>2</u> <u>5</u> __ __</p> | |
| <p>UB2. How old is (<i>name</i>)?</p> <p><i>Probe:</i> How old was (<i>name</i>) at (his/her) last birthday?</p> <p><i>Record age in completed years.</i></p> <p><i>Record '0' if less than 1 year.</i></p> <p><i>If responses to UB1 and UB2 are inconsistent, probe further and correct.</i></p> | <p>AGE (IN COMPLETED YEARS)__</p> | |
| <p>UB3. Check UB2: Child's age?</p> | <p>AGE 0, 1, OR 2.....1</p> <p>AGE 3 OR 42</p> | <p>1 ⇨UB9</p> |
| <p>UB4. Check the respondent's line number (UF4) in UNDER-FIVE CHILD INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the Household Questionnaire?</p> | <p>YES, RESPONDENT IS THE SAME, UF4=HH471</p> <p>NO, RESPONDENT IS NOT THE SAME, UF4≠HH472</p> | <p>2 ⇨UB6</p> |
| <p>UB5. Check ED10 in the EDUCATION MODULE in the HOUSEHOLD QUESTIONNAIRE: Is the child attending ECE in the current school year?</p> | <p>YES, ED10=001</p> <p>NO, ED10≠00 OR BLANK.....2</p> | <p>1 ⇨UB8B</p> <p>2 ⇨UB9</p> |
| <p>UB6. Has (<i>name</i>) ever attended any early childhood education programme, such as Children's Development Centre, early childhood skills and development promotion school, public and private nursery school, etc.?</p> | <p>YES.....1</p> <p>NO2</p> | <p>2 ⇨UB9</p> |
| <p>UB7. At any time since May 2562, did (he/she) attend (programmes mentioned in UB6)?</p> | <p>YES.....1</p> <p>NO2</p> | <p>1 ⇨UB8A</p> <p>2 ⇨UB9</p> |
| <p>UB8A. Does (he/she) currently attend (programmes mentioned in UB6)?</p> | <p>YES.....1</p> <p>NO2</p> | |
| <p>UB8B. You have mentioned that (<i>name</i>) has attended an early childhood education programme this school year. Does (he/she) currently attend this programme?</p> | <p>YES.....1</p> <p>NO2</p> | |

| | | |
|---|--|--------------------|
| UB9. Is (<i>name</i>) covered by any health insurance? | YES 1 NO 2 | 2 ⇒ Next module |
| UB10. What type of health insurance is (<i>name</i>) covered by? <i>Record all mentioned.</i> | COMMUNITY HEALTH INSURANCE A HEALTH INSURANCE THROUGH EMPLOYER..... B PRIVATE HEALTH INSURANCE..... D UNIVERSAL HEALTH-CARE COVERAGE SCHEME E GOVERNMENT OFFICER..... F LOCAL ADMINISTRATIVE ORGANIZATION G STATE ENTERPRISES OR INDEPENDENT AGENCIES..... H OTHER (<i>specify</i>) _____ X | |

| BIRTH REGISTRATION | | BR |
|--|---|------------------------|
| BR1. Does (<i>name</i>) have a birth certificate? <i>If yes, ask:</i> May I see it? | YES, SEEN.....1 YES, NOT SEEN2 NO3 DK8 | 1 ⇨ <i>Next module</i> |
| BR2. Has (<i>name</i>)'s birth been registered with the civil authorities? | YES1 NO2 DK8 | 1 ⇨ <i>Next module</i> |
| BR3. Do you know how to register (<i>name</i>)'s birth? | YES1 NO2 | |

| EARLY CHILDHOOD DEVELOPMENT | | EC |
|---|---|---------------------------|
| <p>EC1. How many children's books or picture books do you have for (<i>name</i>)?</p> | <p>NONE 00</p> <p>NUMBER OF CHILDREN'S BOOKS <u>0</u> ..</p> <p>TEN OR MORE BOOKS 10</p> | |
| <p>EC2. I am interested in learning about the things that (<i>name</i>) plays with when (he/she) is at home.</p> <p>Does (he/she) play with: Y N DK</p> <p>[A] Homemade toys, such as dolls, cars, or other toys made at home?</p> <p>[B] Toys from a shop or manufactured toys?</p> <p>[C] Household objects, such as bowls or pots, or objects found outside, such as sticks, rocks, animal shells or leaves?</p> | <p>HOMEMADE TOYS 1 2 8</p> <p>TOYS FROM A SHOP 1 2 8</p> <p>HOUSEHOLD OBJECTS OR OUTSIDE OBJECTS 1 2 8</p> | |
| <p>EC2D. Does (<i>child's name</i>) play with electronic devices such as mobile phones, tablets, game consoles?</p> | <p>YES..... 1</p> <p>NO 2</p> <p>DON'T KNOW 8</p> | <p>2⇒EC3</p> <p>8⇒EC3</p> |
| <p>EC2E. Normally, how many hours does (<i>child's name</i>) play with these electronic devices in a day?</p> <p><i>If less than one hour, record '00'.</i></p> <p><i>If 'Don't know', record '98'.</i></p> | <p>NUMBER OF HOURS..... _ _</p> <p>DON'T KNOW 98</p> | |
| <p>EC3. Sometimes adults taking care of children have to leave the house to go shopping, wash clothes, or for other reasons and have to leave young children.</p> <p>On how many days in the past week was (<i>name</i>):</p> <p>[A] Left alone for more than an hour?</p> <p>[B] Left in the care of another child, that is, someone less than 10 years old, for more than an hour?</p> <p><i>If 'None' record '0'. If 'Don't know' record '8'.</i></p> | <p>NUMBER OF DAYS LEFT ALONE FOR MORE THAN AN HOUR..... _</p> <p>NUMBER OF DAYS LEFT WITH ANOTHER CHILD FOR MORE THAN AN HOUR _</p> | |
| <p>EC4. Check UB2: Child's age?</p> | <p>AGE 0 OR 1 1</p> <p>AGE 2, 3 OR 4 2</p> | <p>1⇒Next module</p> |

| <p>EC5. In the past 3 days, did you or any household member age 15 or over engage in any of the following activities with <i>(name)</i>:</p> <p><i>If 'Yes', ask:</i> Who engaged in this activity with <i>(name)</i>?</p> <p><i>A foster/step mother or father living in the household who engaged with the child should be coded as mother or father.</i></p> <p><i>Record all that apply.</i></p> <p><i>'No one' cannot be recorded if any household member age 15 and above engaged in activity with child.</i></p> <p>[A] Read books or looked at picture books with <i>(name)</i>?</p> <p>[B] Told stories to <i>(name)</i>?</p> <p>[C] Sang songs to or with <i>(name)</i>, including lullabies?</p> <p>[D] Took <i>(name)</i> outside the home?</p> <p>[E] Played with <i>(name)</i>?</p> <p>[F] Named, counted, or drew things for or with <i>(name)</i>?</p> | <table border="1"> <thead> <tr> <th></th> <th>MOTHER</th> <th>FATHER</th> <th>OTHER</th> <th>NO ONE</th> </tr> </thead> <tbody> <tr> <td>READ BOOKS</td> <td>A</td> <td>B</td> <td>X</td> <td>Y</td> </tr> <tr> <td>TOLD STORIES</td> <td>A</td> <td>B</td> <td>X</td> <td>Y</td> </tr> <tr> <td>SANG SONGS</td> <td>A</td> <td>B</td> <td>X</td> <td>Y</td> </tr> <tr> <td>TOOK OUTSIDE</td> <td>A</td> <td>B</td> <td>X</td> <td>Y</td> </tr> <tr> <td>PLAYED WITH</td> <td>A</td> <td>B</td> <td>X</td> <td>Y</td> </tr> <tr> <td>NAMED</td> <td>A</td> <td>B</td> <td>X</td> <td>Y</td> </tr> </tbody> </table> | | MOTHER | FATHER | OTHER | NO ONE | READ BOOKS | A | B | X | Y | TOLD STORIES | A | B | X | Y | SANG SONGS | A | B | X | Y | TOOK OUTSIDE | A | B | X | Y | PLAYED WITH | A | B | X | Y | NAMED | A | B | X | Y | |
|---|---|------------------------|--------|--------|-------|--------|------------|---|---|---|---|--------------|---|---|---|---|------------|---|---|---|---|--------------|---|---|---|---|-------------|---|---|---|---|-------|---|---|---|---|--|
| | MOTHER | FATHER | OTHER | NO ONE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| READ BOOKS | A | B | X | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOLD STORIES | A | B | X | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SANG SONGS | A | B | X | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| TOOK OUTSIDE | A | B | X | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PLAYED WITH | A | B | X | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAMED | A | B | X | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>EC5G. Check UB2: Child's age?</p> | <p>AGE 2 1</p> <p>AGE 3 OR 4 2</p> | <p>1 ⇒ Next module</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>EC6. I would like to ask you some questions about the health and development of <i>(name)</i>. Children do not all develop and learn at the same rate. For example, some walk earlier than others. These questions are related to several aspects of <i>(name)</i>'s development.</p> <p>Can <i>(name)</i> identify or name at least ten letters of the alphabet?</p> | <p>YES..... 1</p> <p>NO 2</p> <p>DK 8</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>EC7. Can <i>(name)</i> read at least four simple, popular words?</p> | <p>YES..... 1</p> <p>NO 2</p> <p>DK 8</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>EC8. Does <i>(name)</i> know the name and recognize the symbol of all numbers from 1 to 10?</p> | <p>YES..... 1</p> <p>NO 2</p> <p>DK 8</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>EC9. Can <i>(name)</i> pick up a small object with two fingers, like a stick or a rock from the ground?</p> | <p>YES..... 1</p> <p>NO 2</p> <p>DK 8</p> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|--|
| EC10. Is (<i>name</i>) sometimes too sick to play? | YES..... 1 NO 2 DK 8 | |
| EC11. Does (<i>name</i>) follow simple directions on how to do something correctly? | YES..... 1 NO 2 DK 8 | |
| EC12. When given something to do, is (<i>name</i>) able to do it independently? | YES..... 1 NO 2 DK 8 | |
| EC13. Does (<i>name</i>) get along well with other children? | YES..... 1 NO 2 DK 8 | |
| EC14. Does (<i>name</i>) kick, bite, or hit other children or adults? | YES..... 1 NO 2 DK 8 | |
| EC15. Does (<i>name</i>) get distracted easily? | YES..... 1 NO 2 DK 8 | |

| CHILD DISCIPLINE | | UCD |
|---|--|-----------------|
| UCD1. Check UB2: Child's age? | AGE 0 1 AGE 1, 2, 3 OR 4 2 | 1 ⇒ Next module |
| UCD2. Adults use certain ways to teach children the right behavior or to address a behavior problem. I will read various methods that are used. Please tell me if <u>you or any other adult in your household</u> has used this method with (<i>name</i>) <u>in the past month</u> . | | |
| | YES NO | |
| [A] Took away privileges, forbade something (<i>name</i>) liked or did not allow (him/her) to leave the house. | TOOK AWAY PRIVILEGES 1 2 | |
| [B] Explained why (<i>name</i>)'s behavior was wrong. | EXPLAINED WRONG BEHAVIOR 1 2 | |
| [C] Shook (him/her). | SHOOK HIM/HER 1 2 | |
| [D] Shouted, yelled at or screamed at (him/her). | SHOUTED, YELLED, SCREAMED 1 2 | |
| [E] Gave (him/her) something else to do. | GAVE SOMETHING ELSE TO DO 1 2 | |
| [F] Spanked, hit or slapped (him/her) on the bottom with bare hand. | SPANKED, HIT, SLAPPED ON BOTTOM WITH BARE HAND 1 2 | |
| [G] Hit (him/her) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object. | HIT WITH BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT 1 2 | |
| [H] Called (him/her) dumb, lazy or another name like that. | CALLED DUMB, LAZY OR ANOTHER NAME 1 2 | |
| [I] Hit or slapped (him/her) on the face, head or ears. | HIT / SLAPPED ON THE FACE, HEAD OR EARS 1 2 | |
| [J] Hit or slapped (him/her) on the hand, arm, or leg. | HIT / SLAPPED ON HAND, ARM OR LEG 1 2 | |
| [K] Beat (him/her) up, that is hit (him/her) over and over as hard as one could. | BEAT UP, HIT OVER AND OVER AS HARD AS ONE COULD 1 2 | |
| UCD3. Check UF4: Is this respondent the mother or caretaker of any other children under age 5 or a child age 5-14 selected for the questionnaire for children age 5-17? | YES 1 NO 2 | 2 ⇒ UCD5 |
| UCD4. Check UF4: Has this respondent already responded to the following question (UCD5 or FCD5) for another child? | YES 1 NO 2 | 1 ⇒ Next module |
| UCD5. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished? | YES 1 NO 2 DK / NO OPINION 8 | |

| BREASTFEEDING AND DIETARY INTAKE | | BD |
|---|---|----------------------|
| BD1. Check UB2: Child's age? | AGE 0, 1, OR 2.....1 AGE 3 OR 4.....2 | 2 ⇒ Next module |
| BD2. Has (<i>name</i>) ever been breastfed? | YES.....1 NO2 DK8 | 2 ⇒ BD3A 8 ⇒ BD3A |
| BD3. Is (<i>name</i>) still being breastfed? | YES.....1 NO2 DK8 | 2 ⇒ BD3A 8 ⇒ BD3A |
| BD3A1. Yesterday, both during the day and night, how many times did (<i>child's name</i>) receive breast milk? | NUMBER OF TIMES RECEIVED BREAST MILK__ __ | |
| BD3A. Check UB2: Child's age? | AGE 0 OR 1.....1 AGE 22 | 2 ⇒ Next module |
| BD4. Yesterday, during the day or night, did (<i>name</i>) <u>drink anything from a bottle with a nipple?</u> | YES.....1 NO2 DK8 | |
| BD5. Did (<i>name</i>) <u>drink Oral Rehydration Salt solution (ORS)</u> yesterday, during the day or night? | YES.....1 NO2 DK8 | |
| BD6. Did (<i>name</i>) <u>drink or eat vitamin or mineral supplements or any medicines</u> yesterday, during the day or night? | YES.....1 NO2 DK8 | |

| | | |
|--|---|---|
| <p>BD7. Now I would like to ask you about all other liquids that (<i>name</i>) may have had yesterday during the day or the night.</p> <p>Please include liquids consumed outside of your home.</p> <p>Did (<i>name</i>) drink (<i>name of item</i>) yesterday during the day or the night:</p> | | |
| [A] Plain water? | PLAIN WATER | <p style="text-align: right;">YES NO DK</p> <p style="text-align: center;">1 2 8</p> |
| [B] Juice or juice drinks? | JUICE OR JUICE DRINKS | <p style="text-align: center;">1 2 8</p> |
| [C] Clear broth, clear soup? | CLEAR BROTH, CLEAR SOUP | <p style="text-align: center;">1 2 8</p> |
| [D] Infant formula such as Enfalac, Dumex, Hi-Q, S-26, etc.? | INFANT FORMULA | <p style="text-align: center;">1 2 [⚡] 8 [⚡]</p> <p style="text-align: center;"><i>BD7[E] BD7[E]</i></p> |
| <p>[D1] How many times did (<i>name</i>) drink infant formula?</p> <p><i>If 7 or more times, record '7'.</i></p> <p><i>If DK, record '8'.</i></p> | <p>NUMBER OF TIMES DRANK INFANT FORMULA</p> | |
| [E] Milk from animals, such as fresh, tinned, or powdered milk? | MILK | <p style="text-align: center;">1 2 [⚡] 8 [⚡]</p> <p style="text-align: center;"><i>BD7[F] BD7[F]</i></p> |
| <p>[E1] How many times did (<i>name</i>) drink milk?</p> <p><i>If 7 or more times, record '7'.</i></p> <p><i>If unknown, record '8'.</i></p> | <p>NUMBER OF TIMES DRANK MILK</p> | |
| [F] Sugary drinks, such as carbonated soft drinks, sweetened drinks, sweetened soy milk, tea and coffee? | SUGARY DRINKS | <p style="text-align: center;">1 2 8</p> |
| [X] Any other liquids? | OTHER LIQUIDS | <p style="text-align: center;">1 2 [⚡] 8 [⚡]</p> <p style="text-align: center;"><i>BD8 BD8</i></p> |
| [X1] Record all other liquids mentioned. | (Specify) _____ | |

| | | | | |
|---|--|--|-----------|-----------|
| <p>BD8. Now I would like to ask you about <u>everything</u> that (<i>name</i>) ate yesterday during the day or the night. Please include foods consumed outside of your home.</p> <p>- Think about when (<i>name</i>) woke up yesterday. Did (he/she) eat anything at that time? <i>If 'Yes' ask: Please tell me everything (<i>name</i>) ate at that time. Probe: Anything else?</i> <i>Record answers using the food groups below.</i></p> <p>- What did (<i>name</i>) do after that? Did (he/she) eat anything at that time? <i>Repeat this string of questions, recording in the food groups, until the respondent tells you that the child went to sleep until the next morning.</i></p> | | | | |
| <p>For each food group not mentioned after completing the above ask: Just to make sure, did (<i>name</i>) eat (<i>food group items</i>) yesterday during the day or the night</p> | | YES | NO | DK |
| <p>[A] Yogurt made from animal milk? <i>Note that liquid/drinking yogurt should be captured in BD7[E] or BD7[X], depending on milk content.</i></p> | | 1 | 2 \surd | 8 \surd |
| | | YOGURT | BD8[B] | BD8[B] |
| <p>[A1] How many times did (<i>name</i>) eat yogurt? <i>If 7 or more times, record '7'. If DK, record '8'.</i></p> | | NUMBER OF TIMES ATE YOGURT_____ | | |
| <p>[B] Any baby food, such as Cerelac, Nestle, PediaSure, etc.?</p> | | FORTIFIED BABY FOOD | 1 | 2 |
| | | | 8 | |
| <p>[C] Bread, rice, noodles, porridge, or other foods made from grains?</p> | | FOODS MADE FROM GRAINS | 1 | 2 |
| | | | 8 | |
| <p>[D] Pumpkin, carrots, squash, or sweet potatoes that are yellow or orange inside?</p> | | PUMPKIN, CARROTS, SQUASH, ETC. | 1 | 2 |
| | | | 8 | |
| <p>[E] White potatoes, white yams, cassava, or any other foods made from roots?</p> | | FOODS MADE FROM ROOTS | 1 | 2 |
| | | | 8 | |
| <p>[F] Any dark green, leafy vegetables, such as Chinese kale, broccoli, spinach, ivy gourd, water spinach</p> | | DARK GREEN, LEAFY VEGETABLES | 1 | 2 |
| | | | 8 | |
| <p>[G] Ripe mangoes, ripe papayas, cantaloupes, melons, or peach?</p> | | RIPE MANGO, RIPE PAPAYA | 1 | 2 |
| | | | 8 | |
| <p>[H] Any other fruits or vegetables, such as bananas, apples, guavas, rambutans, lychees, water chestnuts, cabbage, etc.?</p> | | OTHER FRUITS OR VEGETABLES | 1 | 2 |
| | | | 8 | |
| <p>[I] Liver, kidney, heart or other organ meats?</p> | | ORGAN MEATS | 1 | 2 |
| | | | 8 | |
| <p>[J] Any other meat, such as beef, pork, lamb, goat, chicken, duck or sausages made from these meats?</p> | | OTHER MEATS | 1 | 2 |
| | | | 8 | |
| <p>[K] Eggs?</p> | | EGGS | 1 | 2 |
| | | | 8 | |
| <p>[L] Fish or shellfish, either fresh or dried?</p> | | FRESH OR DRIED FISH | 1 | 2 |
| | | | 8 | |
| <p>[M] Beans, peas, lentils or nuts, including any foods made from these?</p> | | FOODS MADE FROM BEANS, PEAS, NUTS, ETC. | 1 | 2 |
| | | | 8 | |
| <p>[N] Cheese or other food made from animal milk?</p> | | CHEESE OR OTHER FOOD MADE FROM MILK | 1 | 2 |
| | | | 8 | |

| | | | | | |
|---|---|---|-------------------|-------------------|--|
| [O] Crunchy snacks or semi-processed foods that are salty such as instant noodles? | SALTY CRUNCHY SNACKS OR SEMI-PROCESSED FOODS | 1 | 2 | 8 | |
| [P] Sweets such as cakes, cookies, candy, Thai desserts? | SWEETS | 1 | 2 | 8 | |
| [X] Other solid, semi-solid, or soft food? | OTHER SOLID, SEMI-SOLID, OR SOFT FOOD | 1 | 2 Δ BD9 | 8 Δ BD9 | |
| [X1] Record all other solid, semi-solid, or soft food that do not fit food groups above. | (Specify) _____ | | | | |
| <p>BD9. How many times did (<i>name</i>) eat any solid, semi-solid or soft foods yesterday during the day or night?</p> <p><i>If BD8[A] is 'Yes', ensure that the response here includes the number of times recorded for yogurt in BD8[A1].</i></p> <p><i>If 7 or more times, record '7'.</i></p> | <p>NUMBER OF TIMES__</p> <p>DK8</p> | | | | |

| IMMUNISATION | | | | | | IM | | | | | |
|---|---|---|------------|--------------|--|-------------|----------|--|--|--|--|
| IM2. Do you have the Maternal and Child Health Handbook (the Pink Book), immunisation records from a private health provider or any other document where (<i>name</i>)'s vaccinations are written down? | YES, HAS ONLY CARD(S) | 1 | | | | | 1 ⇒ IM5 | | | | |
| | YES, HAS ONLY OTHER DOCUMENT | 2 | | | | | | | | | |
| | YES, HAS CARD(S) AND OTHER DOCUMENT | 3 | | | | | 3 ⇒ IM5 | | | | |
| | NO, HAS NO CARDS AND NO OTHER DOCUMENT | 4 | | | | | | | | | |
| IM3. Did you ever have the Maternal and Child Health Handbook (the Pink Book) or immunisation records from a private health provider for (<i>name</i>)? | YES | 1 | | | | | | | | | |
| | NO | 2 | | | | | | | | | |
| IM4. Check IM2: | HAS ONLY OTHER DOCUMENT, IM2=2 | 1 | | | | | | | | | |
| | HAS NO CARDS AND NO OTHER DOCUMENT AVAILABLE, IM2=4 | 2 | | | | | 2 ⇒ IM11 | | | | |
| IM5. May I see the Health Handbook (and/or) other document? | YES, ONLY HEALTH HANDBOOK SEEN | 1 | | | | | | | | | |
| | YES, ONLY OTHER DOCUMENT SEEN | 2 | | | | | | | | | |
| | YES, HEALTH HANDBOOK AND OTHER DOCUMENT SEEN | 3 | | | | | | | | | |
| | NO HEALTH HANDBOOK AND NO OTHER DOCUMENT SEEN | 4 | | | | | 4 ⇒ IM11 | | | | |
| IM6. (a) Copy dates for each vaccination from the documents. (b) Write '44' in day column if documents show that vaccination was given but no date recorded. | DATE OF IMMUNISATION | | | | | | | | | | |
| | | | DAY | MONTH | | YEAR | | | | | |
| BCG | BCG | | | | | 2 | 5 | | | | |
| Hepatitis B (at birth) | HepB0 | | | | | 2 | 5 | | | | |
| Polio (OPV) 1 | OPV1 | | | | | 2 | 5 | | | | |
| Polio (OPV) 2 | OPV2 | | | | | 2 | 5 | | | | |
| Polio (OPV) 3 | OPV3 | | | | | 2 | 5 | | | | |
| Polio (OPV) 4 | OPV4 | | | | | 2 | 5 | | | | |
| Polio (OPV) 5 | OPV5 | | | | | 2 | 5 | | | | |
| Polio (IPV) | IPV | | | | | 2 | 5 | | | | |
| Diphtheria, tetanus, whooping cough 1 | DTP1 | | | | | 2 | 5 | | | | |
| Diphtheria, tetanus, whooping cough 2 | DTP2 | | | | | 2 | 5 | | | | |
| Diphtheria, tetanus, whooping cough 3 | DTP3 | | | | | 2 | 5 | | | | |
| Diphtheria, tetanus, whooping cough 4 | DTP4 | | | | | 2 | 5 | | | | |
| Diphtheria, tetanus, whooping cough 5 | DTP5 | | | | | 2 | 5 | | | | |
| Hepatitis B 1 | HepB1 | | | | | 2 | 5 | | | | |
| Hepatitis B 2 | HepB2 | | | | | 2 | 5 | | | | |

| | | | | | | | | | | |
|---|-------|--|--|--|--|---|---|--|--|------------------------------------|
| Hepatitis B 3 | HepB3 | | | | | 2 | 5 | | | |
| Measles, mumps, rubella 1 | MMR1 | | | | | 2 | 5 | | | |
| Measles, mumps, rubella 2 | MMR2 | | | | | 2 | 5 | | | |
| Encephalitis 1 | JE1 | | | | | 2 | 5 | | | |
| Encephalitis 2 | JE2 | | | | | 2 | 5 | | | |
| Encephalitis 3 | JE3 | | | | | 2 | 5 | | | |
| IM7. Check IM6: Are all vaccines (BCG to Encephalitis) recorded? | | YES 1 NO 2 | | | | | | | | 1 ⇒ Next module |
| IM9. In addition to what is recorded on the document(s) you have shown me, did (<i>name</i>) receive any other vaccinations? | | YES 1 No 2 DK 8 | | | | | | | | 2 ⇒ Next module 8 ⇒ Next module |
| IM10. Go back to IM6 and probe for these vaccinations. <i>Record '66' in the corresponding day column for each vaccine received. For each vaccination <u>not</u> received record '00' in day column.</i> <i>When <u>finished</u>, go to End of module.</i> | | | | | | | | | | ⇒ Next module |
| IM11. Has (<i>name</i>) ever received any vaccinations to prevent (him/her) from getting diseases? | | YES 1 NO 2 DK 8 | | | | | | | | |
| IM13. Check IM11: | | NO OR DK 1 YES 2 | | | | | | | | 1 ⇒ Next module |
| IM14. Has (<i>name</i>) ever received a BCG vaccination against tuberculosis – that is, an injection in the arm or shoulder that usually causes a scar? | | YES 1 NO 2 DK 8 | | | | | | | | |
| IM15. Did (<i>name</i>) receive a Hepatitis B vaccination – that is an injection on the outside of the thigh to prevent Hepatitis B disease – within the first 24 hours after birth? | | YES, WITHIN 24 HOURS 1 YES, BUT NOT WITHIN 24 HOURS 2 NO 3 DK 8 | | | | | | | | 3 ⇒ IM16 8 ⇒ IM16 |
| IM15A. How many times was the Hepatitis B received? | | NUMBER OF TIMES ___ DK 8 | | | | | | | | |
| IM16. Has (<i>name</i>) ever received any vaccination drops in the mouth to protect (him/her) from polio? <i>Probe by indicating that the first drop is usually given at birth and later at the same time as injections to prevent other diseases.</i> | | YES 1 NO 2 DK 8 | | | | | | | | 2 ⇒ IM26 8 ⇒ IM26 |

| | | |
|---|---|--------------------------|
| IM17. Were the first polio drops received in the first two weeks after birth? | YES 1 NO 2 DK 8 | |
| IM18. How many times were the polio drops received? | NUMBER OF TIMES _ DK 8 | |
| IM19. The last time (<i>name</i>) received the polio drops, did (he/she) also get an injection to protect against polio? <i>Probe to ensure that both were given, drops and injection.</i> | YES 1 NO 2 DK 8 | |
| IM26. Has (<i>name</i>) ever received a MMR vaccine – that is, a shot in the arm at the age of 9 months or older - to prevent (him/her) from getting measles, mumps and rubella? | YES 1 NO 2 DK 8 | 2 ⇒ IM29 8 ⇒ IM29 |
| IM26A. How many times was the MMR vaccine received? | NUMBER OF TIMES _ DK 8 | |
| IM29. Has (<i>child's name</i>) ever received a DTP vaccine, to prevent diphtheria, tetanus, whooping cough, shot in the thigh, hip or upper arm? <i>Probe by indicating that sometimes it is shot at the same time as the polio vaccine.</i> | YES 1 NO 2 DK 8 | 2 ⇒ IM31 8 ⇒ IM31 |
| IM30. How many time did (<i>child's name</i>) receive DTP vaccine? | NUMBER OF TIMES _ DK 8 | |
| IM31. Has (<i>child's name</i>) ever received a encephalitis JE vaccine shot in the thigh, hip or upper arm? | YES 1 NO 2 DK 8 | 2 ⇒ UF11 8 ⇒ UF11 |
| IM32. How many times did (<i>child's name</i>) receive a JE vaccine? | NUMBER OF TIMES _ DK 8 | |

| | | |
|--|---|--|
| UF11. <i>Record the time.</i> | HOURS AND MINUTES _ _ : _ _ | |
| UF12. <i>Language of the Questionnaire.</i> | THAI 1 ENGLISH..... 2 | |
| UF13. <i>Language of the Interview.</i> | THAI 1 ENGLISH..... 2 OTHER LANGUAGE (specify) 6 | |
| UF14. <i>Native language of the Respondent.</i> | THAI 01 ENGLISH..... 02 CHINESE..... 03 BURMESE..... 04 KHMER / KUY..... 05 MALAY / JAWI..... 06 LAO..... 07 KAREN 08 HMONG..... 09 LAHU..... 10 MON 11 LAWA..... 12 AKHA 13 NYEU..... 14 SHAN 15 OTHER LANGUAGE (specify) 96 | |
| UF15. <i>Was a translator used for any parts of this questionnaire?</i> | YES, THE ENTIRE QUESTIONNAIRE..... 1 YES, PARTS OF THE QUESTIONNAIRE 2 NO, NOT USED..... 3 | |
| <p>UF16. <i>Tell the respondent that you will need to measure the weight and height of the child before you leave the household and a colleague will come to lead the measurement. Issue the ANTHROPOMETRY MODULE FORM for this child and complete the Information Panel on that Form.</i></p> <p><i>Check columns HL10 and HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of <u>another</u> child age 0-4 living in this household?</i></p> <p><input type="checkbox"/> <i>Yes</i> ⇒ <i>Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then go to the next QUESTIONNAIRE FOR CHILDREN UNDER FIVE to be administered to the same respondent.</i></p> <p><input type="checkbox"/> <i>No</i> ⇒ <i>Check HL6 and column HL20 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: Is the respondent the mother or caretaker of a child age 5-14 selected for Questionnaire for Children Age 5-14 in this household?</i></p> <p><input type="checkbox"/> <i>Yes</i> ⇒ <i>Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-17 to be administered to the same respondent.</i></p> <p><input type="checkbox"/> <i>No</i> ⇒ <i>Go to UF17 on the UNDER-FIVE INFORMATION PANEL and record '01'. Then end the interview with this respondent by thanking her/him for her/his cooperation. Check to see if there are other questionnaires to be administered in this household.</i></p> | | |

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS

| ANTHROPOMETRY MODULE INFORMATION PANEL | | AN |
|---|--|----|
| AN1. Cluster number: _____ | AN2. Household number: _____ | |
| AN3. Child's name and line number: NAME _____ | AN4. Child's age from UB2: AGE (IN COMPLETED YEARS) | |
| AN5. Mother's / Caretaker's name and line number: NAME _____ | AN6. Interviewer's name and number: NAME _____ | |

| ANTHROPOMETRY | | |
|--|---|--|
| AN7. Measurer's name and number: | NAME _____ | |
| AN8. Record the result of weight measurement as read out by the Measurer: <i>Read the record back to the Measurer and also ensure that he/she verifies your record.</i> | KILOGRAMS (KG) _____ . _____ CHILD NOT PRESENT AFTER REVISITS .. 99.3 CHILD REFUSED 99.4 RESPONDENT REFUSED 99.5 OTHER (specify) _____ 99.6 | 99.3 ⇨ AN13 99.4 ⇨ AN10 99.5 ⇨ AN10 99.6 ⇨ AN10 |
| AN9. Was the child undressed to the minimum? | YES 1 NO, THE CHILD COULD NOT BE UNDRESSED TO THE MINIMUM..... 2 | |
| AN10. Check AN4: Child's age? | AGE 0 OR 1 1 AGE 2, 3 OR 4 2 | 1 ⇨ AN11A 2 ⇨ AN11B |
| AN11A. The child is less than 2 years old and should be measured lying down. Record the result of length measurement as read out by the Measurer: <i>Read the record back to the Measurer and also ensure that he/she verifies your record.</i> | LENGTH / HEIGHT (CM) _____ . _____ CHILD REFUSED 999.4 RESPONDENT REFUSED 999.5 OTHER (specify) _____ 999.6 | 999.4 ⇨ AN12A 999.5 ⇨ AN12A 999.6 ⇨ AN12A |
| AN11B. The child is at least 2 years old and should be measured standing up. Record the result of height measurement as read out by the Measurer: <i>Read the record back to the Measurer and also ensure that he/she verifies your record.</i> | | |
| AN12. How was the child actually measured? Lying down or standing up? | LYING DOWN 1 STANDING UP..... 2 | |
| AN12A. Was (<i>child's name</i>) weighed at birth? | WEIGHED 1 NOT WEIGHED 2 DON'T KNOW 8 | 2 ⇨ AN12C 8 ⇨ AN12C |
| AN12B. What was the birth weight of (<i>child's name</i>)? <i>If the Health Handbook is available, record the weight as stated in the Handbook.</i> | FROM HEALTH HANDBOOK 1 (KG) _____ . _____ FROM INQUIRY 2 (KG) _____ . _____ DK 9.998 | |

| | | |
|---|--|--------------------------|
| AN12C. Was (<i>child's name</i>) measured the length at birth? | MEASURED 1 NOT MEASURED 2 DK 8 | 2 ⇨ AN13 8 ⇨ AN13 |
| AN12D. What was the birth length of (<i>child's name</i>)? <i>If the Health Handbook is available, record the length as stated in the Handbook.</i> | FROM HEALTH HANDBOOK 1 (CM) ____ . ____ FROM INQUIRY 2 (CM) ____ . ____ DK 99.98 | |
| AN13. Today's date: Day / Month / Year: | ____ / ____ / <u>2</u> <u>5</u> <u>6</u> <u>2</u> | |
| AN14. Is there another child under age 5 in the household who has not yet been measured? | YES 1 NO 2 | 1 ⇨ Next Child |
| AN15. Thank the respondent for his/her cooperation and inform your Supervisor that the Measurer and you have completed all the measurements in this household. | | |

INTERVIEWER'S OBSERVATIONS FOR ANTHROPOMETRY MODULE

MEASURER'S OBSERVATIONS FOR ANTHROPOMETRY MODULE

SUPERVISOR'S OBSERVATIONS FOR ANTHROPOMETRY MODULE

| 5-14 CHILD INFORMATION PANEL | | FS |
|--|--|--------------------------------------|
| FS1. Cluster number: _____ | FS2. Household number: _____ | |
| FS3. Child's name and line number: NAME _____ | FS4. Mother's / Caretaker's name and line number: NAME _____ | |
| FS5. Interviewer's name and number: NAME _____ | FS6. Supervisor's name and number: NAME _____ | |
| FS7. Day / Month / Year of interview: _____ / _____ / <u>2 5 6 2</u> | FS8. Record the time: | HOURS : MINUTES _____ : _____ |

| | | |
|--|--|----------------------|
| <p><i>Check respondent's age in HL6 in LIST OF HOUSEHOLD MEMBERS, HOUSEHOLD QUESTIONNAIRE: If age 15-17, verify that adult consent for interview is obtained (HH33 or HH39) or not necessary (HL20=90). If consent is needed and not obtained, the interview must not commence and '06' should be recorded in FS17. The respondent must be at least 15 years old.</i></p> | | |
| FS9. Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire? | YES, INTERVIEWED ALREADY1 NO, FIRST INTERVIEW2 | 1 ⇒FS10B 2 ⇒FS10A |
| FS10A. Hello, my name is (<i>your name</i>). We are from National Statistical Office. We are conducting a survey about the situation of children, families and households. I would like to talk to you about (<i>child's name from FS3</i>)'s health and well-being. This interview will take about 25 minutes. All the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now? | FS10B. Now I would like to talk to you about (<i>child's name from FS3</i>)'s health and well-being in more detail. This interview will take about 25 minutes. Again, all the information we obtain will remain strictly confidential and anonymous. If you wish not to answer a question or wish to stop the interview, please let me know. May I start now? | |
| YES 1 NO / NOT ASKED 2 | 1 ⇒CHILD'S BACKGROUND Module 2 ⇒FS17 | |

| | | | | | | | | | | | | | | | |
|---|--|----------------|----|-------------------|----|--------------|----|------------------------|----|---------------------------------|----|---|----|-----------------------|----|
| <p>FS17. Result of interview for child age 5-14 years</p> <p><i>Codes refer to the respondent.</i></p> <p><i>Discuss any result not completed with Supervisor.</i></p> | <table style="width:100%; border-collapse: collapse;"> <tr><td>COMPLETED.....</td><td style="text-align: right;">01</td></tr> <tr><td>NOT AT HOME</td><td style="text-align: right;">02</td></tr> <tr><td>REFUSED.....</td><td style="text-align: right;">03</td></tr> <tr><td>PARTLY COMPLETED</td><td style="text-align: right;">04</td></tr> <tr><td>INCAPACITATED (specify)_____</td><td style="text-align: right;">05</td></tr> <tr><td>NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17</td><td style="text-align: right;">06</td></tr> <tr><td>OTHER (specify) _____</td><td style="text-align: right;">96</td></tr> </table> | COMPLETED..... | 01 | NOT AT HOME | 02 | REFUSED..... | 03 | PARTLY COMPLETED | 04 | INCAPACITATED (specify)_____ | 05 | NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17 | 06 | OTHER (specify) _____ | 96 |
| COMPLETED..... | 01 | | | | | | | | | | | | | | |
| NOT AT HOME | 02 | | | | | | | | | | | | | | |
| REFUSED..... | 03 | | | | | | | | | | | | | | |
| PARTLY COMPLETED | 04 | | | | | | | | | | | | | | |
| INCAPACITATED (specify)_____ | 05 | | | | | | | | | | | | | | |
| NO ADULT CONSENT FOR MOTHER/ CARETAKER AGE 15-17 | 06 | | | | | | | | | | | | | | |
| OTHER (specify) _____ | 96 | | | | | | | | | | | | | | |

| CHILD'S BACKGROUND | | CB |
|---|--|-----------|
| CB1. Check the respondent's line number (FS4) in 5-14 CHILD INFORMATION PANEL and the respondent to the HOUSEHOLD QUESTIONNAIRE (HH47): Is this respondent also the respondent to the Household Questionnaire? | YES, RESPONDENT IS THE SAME, FS4=HH47.....1 NO, RESPONDENT IS NOT THE SAME, FS4≠HH47.....2 | 1 ⇒ CB11 |
| CB2. In what month and year was (<i>name</i>) born? <i>Month and year <u>must</u> be recorded.</i> | DATE OF BIRTH MONTH YEAR | |
| CB3. How old is (<i>name</i>)? <i>Probe:</i> How old was (<i>name</i>) at (his/her) last birthday? <i>Record age in completed years.</i> <i>If responses to CB2 and CB3 are inconsistent, probe further and correct.</i> | AGE (IN COMPLETED YEARS)..... | |
| CB4. Has (<i>name</i>) ever attended school or any early childhood education programme? | YES1 NO2 | 2 ⇒ CB11 |
| CB5. What is the highest level and grade or year of school (<i>name</i>) has ever attended? | EARLY CHILDHOOD EDUCATION.....000 PRIMARY 1 ___ LOWER SECONDARY 2 ___ UPPER SECONDARY 3 ___ CERTIFICATE (VCE)..... 4 ___ | 000 ⇒ CB7 |
| CB6. Did (he/she) ever complete that (grade/year)? | YES1 NO2 | |
| CB7. At any time during the 2562-2563 school year did (<i>name</i>) attend school or any early childhood education programme? | YES1 NO2 | 2 ⇒ CB9 |
| CB8. During the 2562-2563 school year, which level and grade or year is (<i>name</i>) <u>attending</u> ? | EARLY CHILDHOOD EDUCATION.....000 PRIMARY 1 ___ LOWER SECONDARY 2 ___ UPPER SECONDARY 3 ___ CERTIFICATE (VCE)..... 4 ___ | |
| CB8C. Check response to CB8: Attending primary, lower secondary, or upper secondary? | PRIMARY, LOWER OR UPPER SECONDARY.....1 OTHER.....2 | 2 ⇒ CB9 |
| CB8D. Is (<i>child's name</i>) attending Non-Formal Education (NFE) school or home school? | ATTENDING NFE1 ATTENDING HOME SCHOOL2 NOT ATTENDING BOTH FORM.....3 | |
| CB9. At any time during the 2561-2562 school year did (<i>name</i>) attend school or any early childhood education programme? | YES1 NO2 | 2 ⇒ CB11 |
| CB10. During the 2561-2562 school year, which level and grade or year did (<i>name</i>) <u>attend</u> ? | EARLY CHILDHOOD EDUCATION.....000 PRIMARY 1 ___ LOWER SECONDARY 2 ___ UPPER SECONDARY 3 ___ CERTIFICATE (VCE)..... 4 ___ | |

| | | |
|---|--|--------------------|
| CB11. Is (<i>name</i>) covered by any health insurance? | YES 1 NO 2 | 2 ⇒ Next module |
| CB12. What type of health insurance is (<i>name</i>) covered by? <i>Record all mentioned.</i> | COMMUNITY HEALTH INSURANCE A HEALTH INSURANCE THROUGH EMPLOYER..... B PRIVATE HEALTH INSURANCE D UNIVERSAL HEALTH-CARE COVERAGE SCHEME E GOVERNMENT OFFICER..... F LOCAL ADMINISTRATIVE ORGANIZATION..... G STATE ENTERPRISES OR INDEPENDENT AGENCIES H OTHER (<i>specify</i>)..... X | |

CHILD DISCIPLINE

FCD

| | | |
|---|---|-----------------|
| <p>FCD2. Now I'd like to talk to you about something else.</p> <p>Adults use certain ways to teach children the right behaviour or to address a behaviour problem. I will read various methods that are used. Please tell me if <u>you or any other adult in your household</u> has used this method with <i>(name)</i> <u>in the past month</u>.</p> <p>[A] Took away privileges, forbade something <i>(name)</i> liked or did not allow (him/her) to leave the house.</p> <p>[B] Explained why <i>(name)</i>'s behaviour was wrong.</p> <p>[C] Shook (him/her).</p> <p>[D] Shouted, yelled at or screamed at (him/her).</p> <p>[E] Gave (him/her) something else to do.</p> <p>[F] Spanked, hit or slapped (him/her) on the bottom with bare hand.</p> <p>[G] Hit (him/her) on the bottom or elsewhere on the body with something like a belt, hairbrush, stick or other hard object.</p> <p>[H] Called (him/her) dumb, lazy or another name like that.</p> <p>[I] Hit or slapped (him/her) on the face, head or ears.</p> <p>[J] Hit or slapped (him/her) on the hand, arm, or leg.</p> <p>[K] Beat (him/her) up, that is hit him/her over and over as hard as one could.</p> | <p style="text-align: right;">YES NO</p> <p>TOOK AWAY PRIVILEGES..... 1 2</p> <p>EXPLAINED WRONG BEHAVIOR 1 2</p> <p>SHOOK HIM/HER 1 2</p> <p>SHOUTED, YELLED, SCREAMED 1 2</p> <p>GAVE SOMETHING ELSE TO DO 1 2</p> <p>SPANKED, HIT, SLAPPED ON BOTTOM WITH BARE HAND 1 2</p> <p>HIT WITH BELT, HAIRBRUSH, STICK OR OTHER HARD OBJECT 1 2</p> <p>CALLED DUMB, LAZY OR ANOTHER NAME 1 2</p> <p>HIT / SLAPPED ON THE FACE, HEAD OR EARS 1 2</p> <p>HIT / SLAPPED ON HAND, ARM OR LEG 1 2</p> <p>BEAT UP, HIT OVER AND OVER AS HARD AS ONE COULD..... 1 2</p> | |
| <p>FCD3. Check FS4: Is this respondent the mother or caretaker of any other children under age 5?</p> | <p>YES1</p> <p>NO2</p> | 2 ⇒ FCD5 |
| <p>FCD4. Check FS4: Has this respondent already responded to the following question (UCD5) for another child?</p> | <p>YES1</p> <p>NO2</p> | 1 ⇒ Next module |
| <p>FCD5. Do you believe that in order to bring up, raise, or educate a child properly, the child needs to be physically punished?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK / NO OPINION 8</p> | |

| PARENTAL INVOLVEMENT | | PR |
|---|--|--------------------|
| PR1. Check CB3: Child's age? | AGE 5-6 YEARS..... 1 AGE 7-14 YEARS..... 2 | 1 ⇒Next module |
| PR2. At the end of this interview I will ask you if I can talk to (<i>name</i>). If (he/she) is close, can you please ask (him/her) to stay here. If (<i>name</i>) is not with you at the moment could I ask that you now arrange for (him/her) to return? If that is not possible, we will later discuss a convenient time for me to call back. | | |
| PR3. Excluding school text books and holy books, how many books do you have for (<i>name</i>) to read at home? | NONE 00 NUMBER OF BOOKS..... 0 ___ TEN OR MORE BOOKS 10 | |
| PR4. Check CB7: Did the child attend any school? <i>Check ED9 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB7 was not asked.</i> | YES, CB7/ED9=1..... 1 NO, CB7/ED9=2 OR BLANK 2 | 2 ⇒Next module |
| PR4A. Check CB8D: Does the child attend NFE or home school? <i>Check ED10C in the EDUCATION Module of the HOUSEHOLD QUESTIONNAIRE.</i> | YES (CB8D/ED10C=1, 2) 1 NO (CB8D/ED10C≠1, 2) 2 | 1 ⇒Next module |
| PR5. Does (<i>name</i>) ever have homework? | YES 1 NO 2 DK 8 | 2 ⇒PR7 8 ⇒PR7 |
| PR6. Does anyone help (<i>name</i>) with homework? | YES 1 NO 2 DK 8 | |
| PR7. Does (<i>name</i>)'s school have a school governing body in which parents can participate such as parent association or basic educational institution board? | YES 1 NO 2 DK 8 | 2 ⇒PR10 8 ⇒PR10 |
| PR8. In the last 12 months, have you or any other adult from your household attended a meeting called by this school governing body? | YES 1 NO 2 DK 8 | 2 ⇒PR10 8 ⇒PR10 |
| PR9. During any of these meetings, was any of the following discussed: [A] A plan for addressing key education issues faced by (<i>name</i>)'s school? [B] School budget or use of funds received by (<i>name</i>)'s school? | <p style="text-align: right;">YES NO DK</p> <p>PLAN FOR ADDRESSING SCHOOL'S ISSUES 1 2 8</p> <p>SCHOOL BUDGET..... 1 2 8</p> | |
| PR10. In the last 12 months, have you or any other adult from your household received a school report book for (<i>name</i>)? | YES 1 NO 2 DK 8 | |

| | | |
|--|---|-----------------|
| <p>PR11. In the last 12 months, have you or any adult from your household gone to <i>(name)</i>'s school for any of the following reasons?</p> <p>[A] A school celebration or a sport event?</p> <p>[B] To discuss <i>(name)</i>'s progress with (his/her) teachers?</p> <p>[C] To discuss with teachers about the behaviour learning of <i>(name)</i>?</p> | <p style="text-align: right;">YES NO DK</p> <p>CELEBRATION OR SPORT EVENT..... 1 2 8</p> <p>TO DISCUSS PROGRESS WITH TEACHERS 1 2 8</p> <p>TO DISCUSS BEHAVIOUR WITH TEACHERS 1 2 8</p> | |
| <p>PR12. In the last 12 months, has <i>(name)</i>'s school been closed on a school day due to any of the following reasons:</p> <p>[A] Natural disasters, such as flood, cyclone, epidemics or similar?</p> <p>[B] Man-made disasters, such as fire, building collapse, riots or similar?</p> <p>[C] Teacher strike?</p> <p>[D] Student strike?</p> <p>[X] Other?</p> | <p style="text-align: right;">YES NO DK</p> <p>NATURAL DISASTERS..... 1 2 8</p> <p>MAN-MADE DISASTERS..... 1 2 8</p> <p>TEACHER STRIKE..... 1 2 8</p> <p>STUDENT STRIKE..... 1 2 8</p> <p>OTHER..... 1 2 8</p> | |
| <p>PR13. In the last 12 months, was <i>(name)</i> unable to attend class due to (his/her) teacher being absent?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK 8</p> | |
| <p>PR14. Check PR12[C] and PR13: Any 'Yes' recorded?</p> | <p>YES, PR12[C]=1 OR PR13=1..... 1</p> <p>NO 2</p> | 2 ⇒ Next module |
| <p>PR15. When <i>(teacher strike / teacher absence)</i> happened did you or any other adult member of your household contact any school officials or school governing body representatives?</p> | <p>YES 1</p> <p>NO 2</p> <p>DK 8</p> | |

| | | | |
|------------------------------|---------------------|---|---------|
| FL0. Check CB3: Child's age? | AGE 5-6 YEARS | 1 | 1 ⇒FS11 |
| | AGE 7-14 YEARS..... | 2 | |

FL1. Now I would like to talk to (*name*). I will ask (him/her) a few questions about (himself/herself) and about reading, and then ask (him/her) to complete a few reading and number activities.

These are not school tests and the results will not be shared with anyone, including other parents or the school.

You will not benefit directly from participating and I am not trained to tell you how well (*name*) has performed.

The activities are to help us find out how well children in this country are learning to read and to use numbers so that improvements can be made.

This will take about 20 minutes. Again, all the information we obtain will remain strictly confidential and anonymous.

| | | | |
|--------------------------------|-----------------------------------|---|---------|
| May I talk to (<i>name</i>)? | YES, PERMISSION IS GIVEN..... | 1 | 2 ⇒FL28 |
| | NO, PERMISSION IS NOT GIVEN | 2 | |

| | | | |
|-----------------------|-------------------------|---------|--|
| FL2. Record the time. | HOURS AND MINUTES | __ : __ | |
|-----------------------|-------------------------|---------|--|

FL3. My name is (*your name*). I would like to tell you a bit about myself.

Could you tell me a little bit about yourself?

When the child is comfortable, continue with the verbal consent:

Let me tell you why I am here today. I am from National Statistical Office. I am part of a team trying to find out how children are learning to read and to use numbers. We are also talking to some of the children about this and asking them to do some reading and number activities. (*Your mother/Name of caretaker*) has said that you can decide if you want to help us. If you wish to help us, I will ask you some questions and give you some activities to do. I will explain each activity, and you can ask me questions any time. You do not have to do anything that you do not want to do. After we begin, if you do not want to answer a question or you do not want to continue that is alright.

| | | | |
|-------------------------------|----------------------|---|---------|
| Are you ready to get started? | YES | 1 | 2 ⇒FL28 |
| | NO / NOT ASKED | 2 | |

FL4. Before you start with the reading and number activities, tick each box to show that:

- You are not alone with the child unless they are at least visible to an adult known to the child.
- You have engaged the child in conversation and built rapport, e.g. using an Icebreaker.
- The child is sat comfortably, able to use the **READING & NUMBERS BOOK** without difficulty while you can see which page is open.

| | | |
|--|--------------------------------|-----|
| FL5. Remember you can ask me a question at any time if there is something you do not understand. You can ask me to stop at any time. | | |
| FL6. First we are going to talk about reading. | YES NO | |
| [A] Do you read books at home? | READS BOOKS AT HOME..... | 1 2 |
| [B] Does someone read to you at home? | READ TO AT HOME | 1 2 |
| FL7. Which language do you speak most of the time at home? | THAI..... | 1 |
| | ENGLISH..... | 2 |
| <i>Probe if necessary and read the listed languages.</i> | OTHER (<i>specify</i>) | 6 |
| | DK | 8 |

| | | |
|--|--|--|
| <p>FL8. Check CB7: In the current school year, did the child attend school or any early childhood education programme?</p> <p>Check ED9 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB7 was not asked.</p> | <p>YES, CB7/ED9=1 1 NO, CB7/ED9=2 OR BLANK..... 2</p> | <p>1 ⇒FL9A</p> |
| <p>FL8A. Check CB4: Did the child ever attend school or any early childhood education programmes?</p> <p>Check ED4 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB4 was not asked.</p> | <p>YES, CB4/ED4=1 1 NO, CB4/ED4=2 OR BLANK..... 2</p> | <p>1 ⇒FL9B 2 ⇒FL23</p> |
| <p>FL9A. What language do your teachers use most of the time when teaching you in class?</p> <p>FL9B. When you were in school, what language did your teachers use most of the time when teaching you in class?</p> <p>Probe if necessary and name the listed languages.</p> | <p>THAI 1 ENGLISH..... 2</p> <p>OTHER (specify) _____ 6 DK 8</p> | <p>1 ⇒FL10A 2 ⇒FL23</p> <p>6 ⇒FL23 8 ⇒FL23</p> |
| <p>FL10A. Now I am going to give you a short story to read in Thai. Would you like to start reading the story?</p> | <p>YES 1 NO 2</p> | <p>2 ⇒FL23</p> |
| <p>FL11. Check CB3: Child's age?</p> | <p>AGE 7-9 YEARS 1 AGE 10-14 YEARS 2</p> | <p>1 ⇒FL13</p> |
| <p>FL12. Check CB7: In the current school year, did the child attend school or any early childhood education programme?</p> <p>Check ED9 in the EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for child if CB7 was not asked.</p> | <p>YES, CB7/ED9=1 1 NO, CB7/ED9=2 OR BLANK..... 2</p> | <p>1 ⇒FL19</p> |
| <p>FL13. Give the child the <i>READING & NUMBERS BOOK</i>.</p> <p>Open the page showing the reading practice item and say:</p> <p>Now we are going to do some reading. Point to the sentence. I would like you to read this aloud. Then I may ask you a question.</p> <p><i>Khao is a cat. Kathi is a dog. Khao ages 5 years. Kathi ages 6 years.</i></p> | | |
| <p>FL14. Did the child read every word in the practice correctly?</p> | <p>YES 1 NO 2</p> | <p>2 ⇒FL23</p> |
| <p>FL15. Once the reading is done, ask: How old is Khao?</p> | <p>KHAO IS 5 YEARS OLD.....1 OTHER ANSWERS2 NO ANSWER AFTER 5 SECONDS.....3</p> | <p>1 ⇒FL17</p> |
| <p>FL16. Say: Khao is 5 years old. <i>and go to FL23.</i></p> | | <p>⇒FL23</p> |
| <p>FL17. Here is another question: Who is older: Khao or Kathi?</p> | <p>KATHI IS OLDER (THAN KHAO).....1 OTHER ANSWERS2 NO ANSWER AFTER 5 SECONDS.....3</p> | <p>1 ⇒FL19</p> |
| <p>FL18. Say: Kathi is older than Khao. Kathi is 6 years old and Khao is 5 years old. <i>and go to FL23.</i></p> | | <p>⇒FL23</p> |

| | | | | | | | |
|---|---|---------|--------|----------|----------|----------|----------|
| <p>FL19. Turn the page to reveal the reading passage.</p> <p>Thank you. Now I want you to try this.</p> <p>Here is a story. I want you to read it aloud as carefully as you can.</p> <p>You will start here (<i>point to the first word on the first line</i>) and you will read line by line (<i>point to the direction for reading each line</i>).</p> <p>When you finish I will ask you some questions about what you have read.</p> <p>If you come to a word you do not know, go onto the next word.</p> <p>Put your finger on the first word. Ready? Begin.</p> | Numsai | is | in | class | two. | One | day, |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 |
| | Numsai | was | going | home | from | school. | She |
| | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| | saw | some | red | flowers | on | the | way. |
| | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
| | The | flowers | were | near | an | eggplant | farm. |
| | 22 | 23 | 24 | 25 | 26 | 27 | 28 |
| | Numsai | wanted | to | get | some | flowers | for |
| | 29 | 30 | 31 | 32 | 33 | 34 | 35 |
| | her | mother. | Numsai | ran | fast | across | the |
| | 36 | 37 | 38 | 39 | 40 | 41 | 42 |
| | farm | to | get | the | flowers. | She | fell |
| | 43 | 44 | 45 | 46 | 47 | 48 | 49 |
| | down | near | a | banana | tree. | Numsai | started |
| | 50 | 51 | 52 | 53 | 54 | 55 | 56 |
| crying. | The | farmer | saw | her | and | came. | |
| 57 | 58 | 59 | 60 | 61 | 62 | 63 | |
| He | gave | Numsai | many | flowers. | Numsai | was | |
| 64 | 65 | 66 | 67 | 68 | 69 | 70 | |
| very | happy. | | | | | | |
| 71 | 72 | | | | | | |
| FL20. Results of the child's reading. | LAST WORD ATTEMPTED NUMBER __ __ | | | | | | |
| | TOTAL NUMBER OF WORDS INCORRECT OR MISSED NUMBER __ __ | | | | | | |
| FL21. How well did the child read the story? | THE CHILD READ AT LEAST ONE WORD CORRECTLY 1 | | | | | | |
| | THE CHILD DID NOT READ ANY WORD CORRECTLY 2 | | | | | | 2 ⇒ FL23 |
| | THE CHILD DID NOT TRY TO READ THE STORY 3 | | | | | | 3 ⇒ FL23 |

| | | |
|---|---|--|
| <p>FL22. Now I am going to ask you a few questions about what you have read.</p> <p><i>If the child does not provide a response after a few seconds, repeat the question. If the child seems unable to provide an answer after repeating the question, mark 'No response' and say: Thank you. That is ok. We will move on.</i></p> <p><i>Make sure the child can still see the passage and ask:</i></p> <p>[A] What class is Numsai in?</p> <p>[B] What did Numsai see on the way home?</p> <p>[C] Why did Numsai start crying?</p> <p>[D] Where did Numsai fall (down)?</p> <p>[E] Why was Numsai happy?</p> | <p>CORRECT (NUMSAI IS IN CLASS P.2).....1 INCORRECT2 NO RESPONSE / SAYS 'I DON'T KNOW'3</p> <p>CORRECT (SHE SAW SOME FLOWERS).....1 INCORRECT2 NO RESPONSE / SAYS 'I DON'T KNOW'3</p> <p>CORRECT (BECAUSE SHE FELL).....1 INCORRECT2 NO RESPONSE / SAYS 'I DON'T KNOW'3</p> <p>CORRECT (NUMSAI FELL DOWN) NEAR A BANANA TREE)1 INCORRECT2 NO RESPONSE / SAYS 'I DON'T KNOW'3</p> <p>CORRECT (BECAUSE THE FARMER GAVE HER MANY FLOWERS / BECAUSE SHE HAD FLOWERS TO GIVE TO HER MOTHER)1 INCORRECT2 NO RESPONSE / SAYS 'I DON'T KNOW'3</p> | |
| <p>FL23. Turn the page in the <i>READING & NUMBERS BOOK</i> so the child is looking at the list of numbers. Make sure the child is looking at this page. Now here are some numbers. I want you to point to each number and tell me what the number is.</p> <p><i>Point to the first number and say:</i> Start here.</p> <p><i>If the child stops on a number for a while, tell the child what the number is, mark the number as 'No Attempt', point to the next number and say:</i> What is this number?</p> <p><i>If the child does not attempt to read 2 consecutive numbers, say:</i> Thank you. That is ok.</p> | <p>9 CORRECT1 INCORRECT2 NO ATTEMPT.....3</p> <p>12 CORRECT1 INCORRECT2 NO ATTEMPT.....3</p> <p>30 CORRECT1 INCORRECT2 NO ATTEMPT.....3</p> <p>48 CORRECT1 INCORRECT2 NO ATTEMPT.....3</p> <p>74 CORRECT1 INCORRECT2 NO ATTEMPT.....3</p> <p>731 CORRECT1 INCORRECT2 NO ATTEMPT.....3</p> | |

| | | |
|--|---|-------------------------------|
| <p>FL23A. Check FL23: Did the child correctly identify two of the first three numbers (9, 12 and 30)?</p> | <p>YES, AT LEAST TWO CORRECT1 NO, AT LEAST 2 INCORRECT OR WITH NO ATTEMPT2</p> | <p>2 ⇒FL28</p> |
| <p>FL24. Turn the page so the child is looking at the first pair of numbers. Make sure the child is looking at this page. Say: Look at these numbers. Tell me which one is bigger.</p> <p><i>Record the child's answer before turning the page in the book and repeating the question for the next pair of numbers.</i></p> <p><i>If the child does not provide a response after a few seconds, repeat the question. If the child seems unable to provide an answer after repeating the question, record '3', no attempt, for the appropriate pair of numbers, turn the booklet page and show the child the next pair of numbers.</i></p> <p><i>If the child does not attempt 2 consecutive pairs, record '3', no attempt, for remaining pairs and say: Thank you. That is ok. We will go to the next activity.</i></p> | <p>7 & 5 CORRECT (7).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>11 & 24 CORRECT (24).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>58 & 49 CORRECT (58).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>65 & 67 CORRECT (67).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>146 & 154 CORRECT (154).....1 INCORRECT2 NO ATTEMPT.....3</p> | |
| <p>FL25. Give the child a pencil and paper. Turn the page so the child is looking at the first addition. Make sure the child is looking at this page. Say: Look at this sum. How much is (number plus number)? Tell me the answer. You can use the pencil and paper if it helps you.</p> <p><i>Record the child's answer before turning the page in the book and repeating the question for the next sum.</i></p> <p><i>If the child does not provide a response after a few seconds, repeat the question. If the child seems unable to provide an answer after repeating the question, record '3', no attempt, for the appropriate sum, turn the booklet page and show the child the next addition.</i></p> <p><i>If the child does not attempt 2 consecutive sums, record '3', no attempt, for remaining sums and say: Thank you. That is ok. We will go to the next activity.</i></p> | <p>3 + 2 CORRECT (5).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>8 + 6 CORRECT (14).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>7 + 3 CORRECT (10).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>13 + 6 CORRECT (19).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>12 + 24 CORRECT (36).....1 INCORRECT2 NO ATTEMPT.....3</p> | |
| <p>FL26. Turn to the first practice sheet for pattern recognition. Say: Here are some numbers. 1, 2, __, and 4.</p> <p><i>Point to each number and blank space and say: What number goes here?</i></p> | <p>CORRECT (3).....1 INCORRECT2 NO ATTEMPT.....3</p> | <p>2 ⇒FL26B 3 ⇒FL26B</p> |
| <p>FL26A. That's correct, 3. Let's do another one.</p> | | <p>⇒FL26C</p> |
| <p>FL26B. Do not explain how to get the correct answer. Just say: The number 3 goes here. Say the numbers with me. (Point to each number) 1, 2, 3, 4. 3 goes here. Let's do another one.</p> | | |

| | | |
|--|--|-------------------------------|
| <p>FL26C. Here are some more numbers. 5, 10, 15 and __.</p> <p><i>Point to each number and blank space and say: What number goes here?</i></p> | <p>CORRECT (20).....1 INCORRECT2 NO ATTEMPT.....3</p> | <p>2 ⇒FL26E 3 ⇒FL26E</p> |
| <p>FL26D. That’s correct, 20.</p> | | <p>⇒FL27</p> |
| <p>FL26E. <i>Do not explain how to get the correct answer. Just say:</i> The number 20 goes here. Say the numbers with me. <i>(Point to each number)</i> 5, 10, 15, 20. 20 goes here.</p> | | |
| <p>FL26F. <i>Check FL26: Was the answer correct?</i></p> | <p>YES, FL26=1 1 NO, FL26=2 OR 3 2</p> | <p>2 ⇒FL28</p> |
| <p>FL27. Now I want you to try this on your own.</p> <p>Here are some more numbers. Tell me what number goes here (<i>pointing to the missing number</i>).</p> <p><i>Record the child’s answer before turning the page in the book and repeating the question.</i></p> <p><i>If the child does not provide a response after a few seconds, repeat the question. If the child seems unable to provide an answer after repeating the question, record ‘3’, no attempt, for the appropriate question, turn the page and show the child the next question.</i></p> <p><i>If the child does not attempt 2 consecutive patterns, record ‘3’, no attempt, for remaining patterns and say: Thank you. That is ok.</i></p> | <p>5, 6, 7, __ CORRECT (8).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>14, 15, __, 17 CORRECT (16).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>20, __, 40, 50 CORRECT (30).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>2, 4, 6, __ CORRECT (8).....1 INCORRECT2 NO ATTEMPT.....3</p> <p>5, 8, 11, __ CORRECT (14).....1 INCORRECT2 NO ATTEMPT.....3</p> | |

| | | |
|--|---|--|
| <p>FL28. <i>Result of interview with child.</i></p> <p><i>Discuss any result not completed with Supervisor.</i></p> | <p>COMPLETED01 NOT AT HOME.....02 MOTHER / CARETAKER REFUSED.....03 CHILD REFUSED04 PARTLY COMPLETED.....05 INCAPACITATED06</p> <p>OTHER (<i>specify</i>).....96</p> | |
|--|---|--|

| | | |
|---|---|--|
| FS11. <i>Record the time.</i> | HOURS AND MINUTES __ : __ | |
| FS12. <i>Language of the Questionnaire.</i> | THAI 1 ENGLISH 2 | |
| FS13. <i>Language of the Interview.</i> | THAI 1 ENGLISH 2 OTHER LANGUAGE (specify) 6 | |
| FS14. <i>Native language of the Respondent.</i> | THAI 01 ENGLISH 02 CHINESE 03 BURMESE 04 KHMER / KUY 05 MALAY / JAWI 06 LAO 07 KAREN 08 HMONG 09 LAHU 10 MON 11 LAWA 12 AKHA 13 NYEU 14 SHAN 15 OTHER LANGUAGE (specify) 96 | |
| FS15. <i>Was a translator used for any parts of this questionnaire?</i> | YES, THE ENTIRE QUESTIONNAIRE 1 YES, PARTS OF THE QUESTIONNAIRE 2 NO, NOT USED 3 | |
| <p>FS16. <i>Thank the respondent and the child for her/his cooperation.</i></p> <p><i>Proceed to complete the result in FS17 in the 5-14 CHILD INFORMATION PANEL and then go to the HOUSEHOLD QUESTIONNAIRE and complete HH56.</i></p> <p><i>Make arrangements for the administration of the remaining questionnaire(s) in this household.</i></p> | | |

INTERVIEWER'S OBSERVATIONS

SUPERVISOR'S OBSERVATIONS