

HOUSEHOLD QUESTIONNAIRE

FORM A

Questionnaire processing dates:	
Corrections completed	<input type="text"/>
Data entered: old members	<input type="text"/>
Data entered: new members	<input type="text"/>

HOUSEHOLD IDENTIFICATION

Q001 Census district: _____ **EA:**

Q002 Village: _____

Q003 Name of household head (R2): _____

Q004 Name of household head (R3): _____

Q005 Category of household*:

Q006 Study site reference:

Q007 Household number:

Q008 Growth point or compound: Yes 1
No 2

Q009 Distance from nearest (tarred) roadside business centre:

INTERVIEWER VISIT

	1	2	3
Q010 Date:	_____	_____	_____
Q011 Time:	_____	_____	_____
Q012 Interviewer:	_____	_____	_____
Q013 Result**:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Q014 <i>How many deaths have there been in the household in the last 12 months?</i>			<input type="text"/>
Q015 <i>How many of the people who died had moved into the household in the last 2 years? (i.e.: since our last visit).</i>			<input type="text"/>

Do NOT correct after completing interview.

CHECKED BY SUPERVISOR

Q016 Signature: _____

Q017 Date: _____

***HOUSEHOLD CATEGORY**

- Follow-up household 1
- Household refused at baseline 2
- Household missed at baseline 3
- Household refused at R2 4
- Household missed at R2 5
- New household in the area since R2 8
- Other (specify) _____ 8

****RESULT CODES**

- Completed 1
- No one at home 2
- Household away for duration of survey 3
- Postponed 4
- Refused 5
- Dwelling vacant or address not a dwelling 6
- Dwelling destroyed 7
- Dwelling not found 8
- Other (specify) _____ 9
- Household relocated - within study areas 10
- Household relocated - outside study areas 11
- Household dispersed (split up) 12

HOUSEHOLD MEMBERS FORM

Q. No:

"Now I would like to get some information about the people who were not members of the household when we came two years ago but who are staying here now or who have done so since we came last time " ...

LINE NO	USUAL RESIDENTS AND REGULAR VISITORS	RELATED TO H.O.H. (R3)	SPOUSE IN SAME HOUSEHOLD	SEX	AGE	PARENTS SURVIVAL RELATIONSHIP TO CARER FOR CHILDREN UNDER 18 YEARS OLD				CHILD'S MAIN CAREGIVER	EDUCATION	HOUSEHOLD MEMBER'S SURVIVAL STATUS	RESIDENCE				ELIGIBILITY FOR INTERVIEW						
Q018	Q019	Q021	Q022	Q023	Q024	Q025	Q026	Q027	Q028	Q029	Q030	Q031	Q032	Q033	Q034	Q035	Q036	Q037	Q038	Q039	Q040	Q041	Q042
	<i>Please give me the names of the new persons who have been staying (physically) in this household on a regular basis (starting with the head of household)?</i> Circle line no. of respondent.	<i>What is the relationship of (NAME) to the head of household? Samusha?</i>	<i>Is (NAME) married to another member of this household? If yes: record spouse's line no.</i>	<i>Is (NAME) male or female?</i>	<i>How old is (NAME)?</i>	<i>Is (NAME)'s natural father still alive?</i> Tick "BC" if checked identity - birth certificate.	<i>Year died.</i>	<i>Is (NAME)'s natural mother still alive?</i> Tick "BC" if checked identity - birth certificate.	<i>Year died.</i>	<i>What is the relationship of his/her principal carer to (NAME)?*</i> Including non-orphans	<i>State highest level of education completed.**</i>	<i>Is (NAME) still alive?</i>	<i>When did (NAME) start staying in this household?</i>	<i>Why did (NAME) come to this house- hold? p iv(3)</i>	<i>Was (NAME) staying the same month last year?</i>	<i>Does (NAME) still stay in this household on a regular basis? (at death)</i>	<i>Why did (NAME) leave this house- hold? p iv(3)</i>	<i>Where did (NAME) stay last night? Codes: p iv(6)</i>	<i>How many nights is it since (NAME) last slept in this household?</i>	<i>How many nights has (NAME) slept here in the last month?</i>	<i>Circle line no if person selected for inter- view***</i>		
	See footnote*	Y N	#	M F	Years	Y N DK BC	Year	Y N DK BC	Year	Footnote*	Level	Years	Y N DK Mth	Yr	Mth	Yr	Code	Y N	Y N	Code	Enter code	#	#
20 1			1 2		1 2		1 2 8											1 2	1 2				20 1
20 2			1 2		1 2		1 2 8											1 2	1 2				20 2
20 3			1 2		1 2		1 2 8											1 2	1 2				20 3
20 4			1 2		1 2		1 2 8											1 2	1 2				20 4
20 5			1 2		1 2		1 2 8											1 2	1 2				20 5
20 6			1 2		1 2		1 2 8											1 2	1 2				20 6
20 7			1 2		1 2		1 2 8											1 2	1 2				20 7
20 8			1 2		1 2		1 2 8											1 2	1 2				20 8
20 9			1 2		1 2		1 2 8											1 2	1 2				20 9
21 0			1 2		1 2		1 2 8											1 2	1 2				21 0

Tick here, if a further continuation sheet is used: Enter total number of individuals selected for interview:

"Just to make sure that I have a complete listing" ...

Q043 Are there any other persons such as small children or infants that we have not yet listed? Number: Add each in table above.

Q044 In addition, are there any other people who may not be members of your family, such as lodgers, friends or domestic servants who live here now or have done so in the last three years? Number: Add each in table above. Total number of current household members.

Q045 Are there any other family members or other people who usually stay elsewhere, but who sleep here from time to time and stayed overnight within the last month? Number: Add each in table above. Line no. of current household head.

Q046 Are there any other people who stayed here for a while but have now passed away? Number: Add each in table above.

* CODES FOR Q021 & Q029: RELATIONSHIP TO HEAD OF HOUSEHOLD & PRINCIPAL CAREGIVER

01 Head	07 Parent-in-law	13 Paternal uncle
02 Wife or husband	08 Brother or sister (natural)	14/15 Maternal grandfather/mother
03 Son or daughter (natural)	09 Stepfather/mother (father's co-wife)	16/17 Paternal grandfather/mother
04 Son or daughter-in-law	10 Maternal aunt	18 Other relative/cousin
05 Grandchild	11 Paternal aunt	19 Adopted/foster child
06 Father/mother (natural)	12 Maternal uncle	20 Not related

** CODES FOR Q030 & Q031: LEVEL & YEARS OF EDUCATION

Level:	Years: years completed:
0 None	0 Less than one year completed
1 Primary	98 Don't know
3 Higher	
2 Secondary	8 Don't know

***ELIGIBLE PERSONS (Q041/Q042)

1 Follow-up (from R2)	6 Selected but not found R2
2 Previously under age	7 Selected but refused R2
3 Non-regular visitor	8 Other
4 Spouse/co-wife not selected R2	9 Household missed R2
5 In-migrant since R2	10 Previously over age

LINE NO	HOUSEHOLD MEMBERS SELECTED FOR INDIVIDUAL INTERVIEW*	APPOINTMENTS / VISITS			IVQ REF.	WHY NO VIEW	RESIDENCE					MARRIAGE & COHABITATION								EMPLOYMENT			
		Q048	Q049	Q050			Q051	Q052	Q053	Q054	Q055	Q056	Q057	Q058	Q059	Q060	Q061	Q062	Q063	Q064	Q065	Q066	Q067
From Q018. (ii/iii)	Name	1st Visit	2nd Visit	3rd Visit	Note ref.	Note reason not selected for inter-view (2)	Has (NAME) stayed overnight since leaving? Outmigrants.	How long has (NAME) been living in this household? (6)	What was (NAME)'s previous residence? (6)	Why did (NAME) move to this house-hold? (3)	Record current marital status. (4)	Record co-habiting status if married. (5)	Record of co-residence. (6)	How many times has (NAME) been separated? (Lifetime)	How long ago was the last time? (5)	Record co-habiting status with this partner. (5)	Record of co-residence with this partner. (6)	How many times has (NAME) been widowed? (Lifetime)	How long ago was the last time? (5)	Record co-habiting status with this partner. (5)	Record of co-residence with this partner. (6)	In which sector of employment does (NAME) work? (7)	What type of work does he/she do? (8)
No.		Time Day/Mth Res(1)	Time Day/Mth Res(1)	Time Day/Mth Res(1)	MUTNO		Years	Enter code	Enter code	Code	Code	Code	#	Yrs Mths	Code	Code	Code	Yrs Mths	Code	Code	Code	Code	Code

LINE NO	HOUSEHOLD MEMBERS NOT SELECTED FOR INTERVIEW**	NEW ADDRESS & TELEPHONE NO. Outmigrants.	Proj. area ref.	If "4", complete Q071.																				
No.	Q071		Q071	Enter code	Y	N	DK	Years	Enter code	Enter code	Code	Code	Enter code	#	Yrs Mths	Enter code	Enter code	Enter code	Yrs Mths	Enter code	Enter code	Enter code	Enter code	

- | | | | | | | |
|--|--|--|---|--|---|--|
| (1) RESULT CODES
1. Completed
2. Not at home: at work (fields, shops etc.)
3. Not at home: away from home (school)
4. Not at home: away from home (other)
5. Not at home: in hospital / clinic
6. Not at home: whereabouts unknown
7. Refused
8. Other (specify) | (2) NOT SELECTED CODES
1. Stayed < 4 nights in last month, not follow-up
4. No longer a regular resident: out-migrant
5. Joined since baseline: since left
6. Eligible in another study household
10. Other | (3) IN/OUT-MIGRATION CODES
1. Work
2. Partner's work
3. Marriage
4. Illness
5. Establish rural home
6. Lost job
7. Death in source household
9. Death in destination household
8. Other (specify) | (4) MARRIAGE CODES
1. Single: never married
2. Married: incl. other cohabiting or long-term (>12m) rel'ships
3. Divorced/separated
4. Widowed

(5) COHABITATION CODES
1. Live together all the time
2. Live together but occasionally apart for work reasons
3. Live together but separated by seasonal employment
4. Live apart: regular/frequent cohabitation
5. Live apart: infrequent cohabitation | (6) CO-RESIDENCE CODES
1. In this household
2. Locally
3. Harare
4. Mutare
5. Rusape
6. Other town
7. Small town / growth point
8. Estate/mine (commercial)
9. Roadside business centre
10. Rural business centre
11. Communal/resettlement | (7) WORK SECTOR CODES
1. Estates (tea, coffee, forestry, etc)
2. Manufacturing or building trade
3. Police or army
4. Education
5. Health sector
6. Services or retail (shops)
7. Informal sector: trading
8. Informal sector: subsistence agriculture
9. Student
10. Unemployed
11. Other (specify) | (8) WORK LEVEL CODES
1. Professional or managerial
2. Self-employed: small business
3. Skilled labour
4. Manual / unskilled labour |
|--|--|--|---|--|---|--|
- * Indicate deceased R2 residents for whom verbal autopsy questionnaires are needed with an "**".
 ** Including out-migrants & deceased recent in-migrants (aged 15-64/66 yrs).
 Obtain the details direct from the person him/herself whenever possible.

REF.	QUESTIONS & FILTERS	CODING CATEGORIES	SKIP TO
Q072	What is the main source of drinking water for members of your household?	Piped into residence Private tap in yard or plot Communal tap Own well or borehole Other well or borehole Protected spring Other (specify)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 10 <input type="checkbox"/>
Q073	What kind of toilet facility does your household have?	Flush toilet Blair toilet Pit latrine Other (specify) No facilities	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> - Q075
Q074	Is this toilet facility used by members of your household alone, shared with neighbours, or is it communal?	Household alone Shared with neighbours Communal	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
Q075	Does your household have: Electricity? A refridgerator? A radio? A television?	Electricity Refridgerator Radio Television	Y N 1 2 1 2 1 2 1 2
Q076	Record house type.	Pole and dagga structure Brick house - thatched roof Brick house - tiled/sheeting roof Cabin/other	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 8 <input type="checkbox"/>
Q077	Observe and record type of floor of the main dwelling.	Natural floor (earth/sand/dung) Rudimentary (planks/palm/bamboo) Finished (wood/cement/carpet...)	1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/>
Q078	Have any major improvements been made to your homestead in the last 12 months?	Yes No	1 <input type="checkbox"/> 2 <input type="checkbox"/> - Q081
Q079	Describe the main improvements.		
Q080	Name of person / organization who paid the most towards these improvements. Line no. from this questionnaire (if any).		<input type="text"/>
Q081	Does any member of your household own: A bicycle? A motorcycle? A car? A tractor?	Bicycle Motorcycle Car Tractor	Y N 1 2 1 2 1 2 1 2
Q082	How many cattle does your household own?	Number of cattle	<input type="text"/>
Q083	Have any of the following household assets been sold or removed from the household in the last 12 months? <u>Read through list & tick all assets mentioned.</u>	Radio Television Bicycle Furniture Refridgerator Kitchen/cooking equipment Cattle Other (specify)	Y N 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2
Q084	Were these assets sold or removed for any of the following reasons? <u>Read through list & tick all assets mentioned.</u>	Medical expenses Funeral or memorial costs Removed by relatives after death School fees Other (specify)	Y N 1 2 1 2 1 2 1 2 1 2