

APPENDIX

SAMPLE HOUSEHOLD
ROSTER QUESTIONS

No.	Question Description
	FULL NAME
Q1	Family and Household members <u>See instructions for listing of names above</u>
	RELATIONSHIP TO RESP
Q2	What is (name)'s relationship to you?
	SEX
Q3	Is (name) male or female? [M = 1 F = 2]
	ALIVE?
Q4	Is (name) alive? If (name) is dead, when did he/she die? <i>If (name) is dead, strike out Q5–Q16; do <u>not</u> ask Q5–Q16 for persons who have died</i>

AGE

- Q5 How old is (name)?
OR, in what year was (name)
Born
Circle age or birth year
DK = 9999
If under 1 year, then age = 0.
-

REG MEM OF HOUSEHOLD

- Q6 Where does (name) usually live?
Q7 Did (name) sleep here last night?
NO = 0
YES = 1
-

MOBILITY

- Q8 When did (name) move to this place?
Ask only if Q6=1 or Q6=2
-

HEALTH

- Q9 Has (name) been ill in the past 12 months?
IF YES: For how long?
Q10 How would you rate (name)'s health in general?
Q11 How would you compare (name)'s
health to other people in your village who are the same age and sex?
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MARITAL STATUS

- IF AGE \geq 10
Q12 What is (name)'s current marital status?
Probe current marital status if not currently married.
IF MARRIED: To another household or family member?
WRITE LINE ID OF SPOUSE
-

EDUCATION

IF AGE \geq 5

Q13 What is the highest level of schooling (name) attended?

Q14 How many grades (in years) did
(name) complete at that level?

[enter number of years]

DK/CR = 99

WORK

IF AGE \geq 15

Q15 What is (name)'s main way of earning money?

SAMPLE HOUSEHOLD ROSTER

	<i>Full Name</i>	<i>Relationship to Resp</i>	<i>Sex</i>	<i>Alive?</i>	<i>Age</i>
ID	Q1	Q2	Q3	Q4	Q5
LINE ID	NAME	CODE	CODE	CODE	AGE OR YEAR OF BIRTH
01	(=Resp.)	1		1	age b-year
02					age b-year
03					age b-year
04					age b-year
05					age b-year
06					age b-year
07					age b-year
08					age b-year
09					age b-year

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