

2022 KENYA DEMOGRAPHIC AND HEALTH SURVEY (KDHS)
HOUSEHOLD QUESTIONNAIRE - SHORT VERSION

KENYA
KENYA NATIONAL BUREAU OF STATISTICS

SHORT

IDENTIFICATION												
COUNTY	<input style="width: 90%;" type="text"/>											
SUB COUNTY	<input style="width: 90%;" type="text"/>											
LOCATION	<input style="width: 90%;" type="text"/>											
SUB LOCATION	<input style="width: 90%;" type="text"/>											
KDHS CLUSTER NUMBER	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>											
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NAME OF HOUSEHOLD HEAD	<input style="width: 90%;" type="text"/>											
HOUSEHOLD SELECTED FOR MAN'S SURVEY? (1=YES, 2=NO)				2								
HOUSEHOLD SELECTED FOR WOMAN'S DV MODULE? (1=YES, 2=NO)				1								
INTERVIEWER VISITS												
	1	2	3	FINAL VISIT								
DATE	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	DAY <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
INTERVIEWER'S NAME	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	MONTH <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
RESULT*	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	YEAR INT. NUMBER <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
NEXT VISIT: DATE	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	RESULT*								
TIME	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	TOTAL NUMBER OF VISITS <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
*RESULT CODES: 1 COMPLETED 2 NO HOUSEHOLD MEMBER AT HOME OR NO COMPETENT RESPONDENT AT HOME AT TIME OF VISIT 3 ENTIRE HOUSEHOLD ABSENT FOR EXTENDED PERIOD OF TIME 4 POSTPONED 5 REFUSED 6 DWELLING VACANT OR ADDRESS NOT A DWELLING 7 DWELLING DESTROYED 8 DWELLING NOT FOUND 9 OTHER <input style="width: 150px;" type="text"/> (SPECIFY)				TOTAL PERSONS IN HOUSEHOLD <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
				TOTAL ELIGIBLE WOMEN <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
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				LINE NO. OF RESPONDENT TO HOUSEHOLD QUESTIONNAIRE <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
LANGUAGE OF QUESTIONNAIRE**	0 2	LANGUAGE OF INTERVIEW**		NATIVE LANGUAGE OF RESPONDENT** <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>								
LANGUAGE OF QUESTIONNAIRE** KISWAHILI		TRANSLATOR USED (YES = 1, NO = 2) <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>										
**LANGUAGE CODES: 01 ENGLISH 06 KAMBA 11 LUO 16 SOMALI 02 KISWAHILI 07 KIKUYU 12 MAASAI 17 TURKANA 03 BORANA 08 KISII 13 MERU 96 OTHER 04 EMBU 09 LUHYA 14 MIJIKENDA 05 KALENJIN 10 MARAGOLI 15 POKOT SPECIFY <input style="width: 50px;" type="text"/>												
TEAM	TEAM SUPERVISOR											
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>			<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td><td style="width: 25px; height: 25px;"></td></tr> </table>									
NUMBER	NUMBER											

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INTRODUCTION AND CONSENT

Hujambo. Jina langu ni _____. na ninafanya kazi na shirika la Kitaifa la Takwimu nchini Kenya. Tunafanya utafiti wa mambo ya afya kote nchini Kenya. Habari tutakazopata zitaisaidia serikali kupanga huduma za afya. Nyumba yako imechaguliwa kwa utafiti huu. Ningependa kukuuliza maswali kuhusu hapa nyumbani. Maswali yatachukua kadiri ya dakika 30 hadi 60. Majibu yako yote yatawekwa siri na hayatatolewa kwa mtu yeyote isipokuwa watafiti wetu. Sio lazima ushiriki katika utafiti huu lakini tunataraji utajibu maswali hayo kwa sababu maoni yako ni muhimu. Nikikuuliza swali lolote ambalo hutaki kujibu, niambie na nitaliwacha na kwenda kwa swali litakalofuata. Unaweza kusimamisha mahojiano haya wakati wowote. Ikiwa una swali lolote kuhusu utafiti huu unaweza kuwasiliana na mtu aliyetajwa katika kadi hii.

GIVE CARD WITH CONTACT INFORMATION

Una swali lolote?

Ninaweza kuanza mahojiano sasa?

SIGNATURE OF INTERVIEWER _____ DATE _____

RESPONDENT AGREES
TO BE INTERVIEWED .. 1

RESPONDENT DOES NOT AGREE
TO BE INTERVIEWED .. 2 → END



100	RECORD THE TIME.	HOURS	<table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>				
		MINUTES	<table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>				

HOUSEHOLD SCHEDULE

LINE NO.	USUAL RESIDENTS AND VISITORS	RELATIONSHIP TO HEAD OF HOUSEHOLD	SEX	RESIDENCE		AGE	IF AGE 15 OR OLDER	ELIGIBILITY		
							MARITAL STATUS			
1	2	3	4	5	6	7	8	9	10	11
	Tafadhali nipatie majina ya watu ambao kwa kawaida wanaishi hapa nyumbani na wageni waliolala hapa usiku wa kuamukia leo, ukianza na kiongozi wa nyumba. AFTER LISTING THE NAMES AND RECORDING THE RELATIONSHIP, SEX, RESIDENCE, AND AGE FOR EACH PERSON, ASK QUESTIONS 7A-7C TO BE SURE THAT THE LISTING IS COMPLETE. THEN ASK APPROPRIATE QUESTIONS IN COLUMNS 8-20 FOR EACH PERSON.	Je, (NAME) ana uhusiano gani na kiongozi wa nyumba?	Je, (NAME) ni mume ama ni mke?	Je, kwa kawaida (NAME) anaishi hapa?	Je, (NAME) alilala hapa usiku wa kuamukia leo?	(NAME) ana umri gani? IF 95 OR MORE, RECORD '95'.	Hali ya ndoa ya (NAME) ni gani? 1 = MARRIED OR LIVING TOGETHER 2 = DIVORCED 3 = SEPARATED 4 = WIDOWED 5 = NEVER-MARRIED AND NEVER LIVED TOGETHER	CIRCLE LINE NUMBER OF ALL WOMEN AGE 15-49 CIRCLE LINE NUMBER OF ALL MEN AGE 15-54	IF HOUSEHOLD SELECTED FOR MAN'S SURVE CIRCLE LINE NUMBER OF ALL CHILDREN AGE 0-5	
01			M F 1 2	Y N 1 2	Y N 1 2	IN YEARS [][]	[]	01	01	01
02			1 2	1 2	1 2	[][]	[]	02	02	02
03			1 2	1 2	1 2	[][]	[]	03	03	03
04			1 2	1 2	1 2	[][]	[]	04	04	04
05			1 2	1 2	1 2	[][]	[]	05	05	05
06			1 2	1 2	1 2	[][]	[]	06	06	06
07			1 2	1 2	1 2	[][]	[]	07	07	07
08			1 2	1 2	1 2	[][]	[]	08	08	08
09			1 2	1 2	1 2	[][]	[]	09	09	09
10			1 2	1 2	1 2	[][]	[]	10	10	10

7A) Ili nihakikishe kuwa nina orodha kamili: je, kuna watu wengine wowote kama watoto wadogo ama wachanga ambao hatukuwaandika/hatukuwaorodhesha?	YES <input type="checkbox"/>	ADD TO TABLE	NO <input type="checkbox"/>
7B) Je, kuna watu wengine wowote ambao si wa familia yako, kama vile wafanyikazi wa nyumbani, ama marafiki ambao kwa kawaida wanaishi hapa?	YES <input type="checkbox"/>	ADD TO TABLE	NO <input type="checkbox"/>
7C) Kuna wageni wowote wa muda wanaoishi hapa, ama mtu mwingine yeyote aliyelala hapa jana usiku, ambaye hajaandikishwa/hajaorodheshwa?	YES <input type="checkbox"/>	ADD TO TABLE	NO <input type="checkbox"/>

CODES FOR Q. 3: RELATIONSHIP TO HEAD OF HOUSEHOLD

01 = HEAD	07 = PARENT-IN-LAW
02 = WIFE OR HUSBAND	08 = BROTHER OR SISTER
03 = SON OR DAUGHTER	09 = OTHER RELATIVE
04 = SON-IN-LAW OR DAUGHTER-IN-LAW	10 = ADOPTED/FOSTER/STEPCHILD
05 = GRANDCHILD	11 = NOT RELATED
06 = PARENT	98 = DON'T KNOW

	IF AGE 0-17 YEARS				IF AGE 3 YEARS OR OLDER								
LINE NO.	SURVIVORSHIP AND RESIDENCE OF BIOLOGICAL PARENTS				EVER ATTENDED SCHOOL								
	12	13	14	15	16	17							
	Mama mzazi wa (NAME) yuko hai?	Je, mama mzazi wa (NAME) kwa kawaida anaishi hapa nyumbani ama alikuwa mgeni aliyelala hapa usiku wa kuamukia leo? IF YES: Jina lake ni nani? RECORD MOTHER'S LINE NUMBER. IF NO, RECORD '00'.	Baba mzazi wa (NAME) yuko hai?	Je, baba mzazi wa (NAME) kwa kawaida anaishi hapa nyumbani ama alikuwa mgeni aliyelala hapa usiku wa kuamukia leo? IF YES: Jina lake ni nani? RECORD FATHER'S LINE NUMBER. IF NO, RECORD '00'.	Je, (NAME) amewahi kwenda shule ama chuo chochote cha mafundisho ?	Ni kiwango gani cha shule cha juu ambacho (NAME) aliwahi kufika? Katika kiwango hicho, (NAME) alimaliza (darasa/kidato/miaka) (gani/mingapi)? SEE CODES BELOW.							
01	Y N DK 1 2 8 ↓ GO TO 14	<table border="1"><tr><td></td><td></td></tr></table>			Y N DK 1 2 8 ↓ GO TO 16	<table border="1"><tr><td></td><td></td></tr></table>			Y N 1 2 ↓ GO TO 20	LEVEL GRADE <table border="1"><tr><td></td><td></td><td></td></tr></table>			
02	1 2 8 ↓ GO TO 14	<table border="1"><tr><td></td><td></td></tr></table>			1 2 8 ↓ GO TO 16	<table border="1"><tr><td></td><td></td></tr></table>			1 2 ↓ GO TO 20	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
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08	1 2 8 ↓ GO TO 14	<table border="1"><tr><td></td><td></td></tr></table>			1 2 8 ↓ GO TO 16	<table border="1"><tr><td></td><td></td></tr></table>			1 2 ↓ GO TO 20	<table border="1"><tr><td></td><td></td><td></td></tr></table>			
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LEVEL	GRADE
0 = PRE-PRIMARY	00 = LESS THAN
1 = PRIMARY	(USE '00' FOR
2 = SECONDARY/"A" LEVEL	THIS CODE IS
3 = MIDDLE LEVEL COLLEGE (CERTIFICATE/DIPLOMA)	FOR Q. 17B C
4 = UNIVERSITY	98 = DON'T KNOW
5 = VOCATIONAL	
6 = INFORMAL EDUCATION (MADRASA/ADULT BASIC)	

HH-5

HOUSEHOLD SCHEDULE

	IF AGE 3-24 YEARS					IF AGE 0-4 YEARS
LINE NO.	PREVIOUS SCHOOL ATTENDANCE		CURRENT/RECENT SCHOOL ATTENDANCE		REASON NOT CURRENTLY ATTENDING	BIRTH REGISTRATION
	17A	17B	18	19	19A	20
	Je, (NAME) alikwenda shule au taasisi yoyote ya mafunzo wakati wowote katika mwaka wa shule wa 2020 (Januari 2020-Julai 2021)?	Katika mwaka wa shule wa 2020 (Januari 2020-Julai 2021), Je, (NAME) alihudhuria kiwango na (darasa/kidato/miaka) (gani/mingapi)? SEE CODES BELOW.	Je, (NAME) aliwahi kwenda shule wakati wowote katika mwaka wa shule wa 2021 (Julai 2021- Aprili 2022)?	Katika mwaka wa shule wa 2021 (Julai 2021- Aprili 2022), alihudhuria kiwango na (darasa/kidato/miaka) (gani/mingapi)? SEE CODES BELOW.	IF Q.17A = YES Ni kwa sababu gani (NAME) aliwacha kwenda shule au taasisi ya mafunzo? SEE CODES BELOW.	Je(NAME) ana cheti za kuzaliwa? IF NO, PROBE: Je, kuzaliwa kwa (NAME) iliwahi kuandikishwa na mamlaka yoyote ya serikali? 1=YES REGISTERED WITH BIRTH CERTIFICATE 2 = YES REGISTERED WITHOUT BIRTH CERTIFICATE 3=NOT REGISTERED 8 = DON'T KNOW
01	Y N 1 2 ↓ GO TO 18	LEVEL GRADE <input type="text"/> <input type="text"/>	Y N 1 2 ↓ GO TO 19A	LEVEL GRADE <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
02	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
03	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
04	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
05	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
06	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
07	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
08	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
09	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>
10	1 2 ↓ GO TO 18	<input type="text"/> <input type="text"/>	1 2 ↓ GO TO 19A	<input type="text"/> <input type="text"/>	<input type="text"/>	<input type="text"/>

CODES FOR Q. 19A: REASON FOR STOP ATTENDANCE

- | | |
|--------------------------------|----------------------------|
| 1 = TOO YOUNG TO ATTEND | 9 = ORPHANHOOD |
| 2 = COMPLETED SCHOOL | 10 = SOCIO-CULTURAL/ |
| 3 = MARRIAGE | RELIGIOUS PRESSURE |
| 4 = PREGNANCY | 11 = COVID-19 RELATED |
| 5 = DISABILITY | PROBLEM |
| 6 = INSECURITY | 12 = ILLNESS (OWN/FAMILY) |
| 7 = WORKING/LOOKING FOR WORK | 13 = FAMILY RESPONSIBILITY |
| 8 = SCHOOL LEVIES/ OTHER COSTS | 96 = OTHER (SPECIFY) _____ |
| | 98 = DON'T KNOW |

SELECTION OF WOMAN FOR THE DOMESTIC VIOLENCE QUESTIONS (PAPER OPTION)

100	<p>ONLY ONE INDIVIDUAL (ONE WOMAN) SHOULD BE SELECTED FOR DOMESTIC VIOLENCE QUESTIONS</p> <p>CHECK COVER PAGE: HOUSEHOLD SELECTED FOR WOMAN'S DV MODULE?</p> <p style="text-align: center;"> YES <input type="checkbox"/> NO <input type="checkbox"/> → 101 </p>																																																																																																											
<p>LOOK AT THE LAST DIGIT OF THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER ON THE COVER PAGE. THIS IS THE ROW NUMBER YOU SHOULD GO TO. CHECK THE TOTAL NUMBER OF ELIGIBLE WOMEN (COLUMN 9) IN THE HOUSEHOLD SCHEDULE. THIS IS THE COLUMN NUMBER YOU SHOULD GO TO. FOLLOW THE SELECTED ROW AND COLUMN TO THE CELL WHERE THEY MEET AND CIRCLE THE NUMBER IN THE CELL. THIS IS THE NUMBER OF THE WOMAN SELECTED FOR THE DOMESTIC VIOLENCE QUESTIONS FROM THE LIST OF ELIGIBLE WOMEN IN COLUMN 9 OF THE HOUSEHOLD SCHEDULE. WRITE THE NAME AND LINE NUMBER OF THE SELECTED WOMAN IN THE SPACE BELOW THE TABLE.</p> <p>EXAMPLE: THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER IS '716' AND THE HOUSEHOLD SCHEDULE COLUMN 9 SHOWS THAT THERE ARE THREE ELIGIBLE WOMEN AGE 15-49 IN THE HOUSEHOLD (LINE NUMBERS 02, 04, AND 05). SINCE THE LAST DIGIT OF THE HOUSEHOLD SERIAL NUMBER IS '6' GO TO ROW '6' AND SINCE THERE ARE THREE ELIGIBLE WOMEN IN THE HOUSEHOLD, GO TO COLUMN '3'. FOLLOW THE ROW AND COLUMN AND FIND THE NUMBER IN THE CELL WHERE THEY MEET ('2') AND CIRCLE THE NUMBER. NOW GO TO THE HOUSEHOLD SCHEDULE AND FIND THE SECOND WOMAN WHO IS ELIGIBLE FOR THE WOMAN'S INTERVIEW (LINE NUMBER '04' IN THIS EXAMPLE). WRITE HER NAME AND LINE NUMBER IN THE SPACE BELOW THE TABLE.</p>																																																																																																												
LAST DIGIT OF THE HOUSEHOLD QUESTIONNAIRE SERIAL NUMBER	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="9" style="text-align: center; padding: 5px;">TOTAL NUMBER OF ELIGIBLE WOMEN AGE 15-49 IN HOUSEHOLD SCHEDULE COLUMN 9</th> </tr> <tr> <th style="width: 11.11%; text-align: center; padding: 5px;">1</th> <th style="width: 11.11%; text-align: center; padding: 5px;">2</th> <th style="width: 11.11%; text-align: center; padding: 5px;">3</th> <th style="width: 11.11%; text-align: center; padding: 5px;">4</th> <th style="width: 11.11%; text-align: center; padding: 5px;">5</th> <th style="width: 11.11%; text-align: center; padding: 5px;">6</th> <th style="width: 11.11%; text-align: center; padding: 5px;">7</th> <th style="width: 11.11%; text-align: center; padding: 5px;">8+</th> </tr> <tr><td style="text-align: center;">0</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">2</td><td style="text-align: center;">4</td><td style="text-align: center;">3</td><td style="text-align: center;">6</td><td style="text-align: center;">5</td><td style="text-align: center;">4</td></tr> <tr><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">3</td><td style="text-align: center;">1</td><td style="text-align: center;">4</td><td style="text-align: center;">1</td><td style="text-align: center;">6</td><td style="text-align: center;">5</td></tr> <tr><td style="text-align: center;">2</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">5</td><td style="text-align: center;">2</td><td style="text-align: center;">7</td><td style="text-align: center;">6</td></tr> <tr><td style="text-align: center;">3</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">3</td><td style="text-align: center;">1</td><td style="text-align: center;">3</td><td style="text-align: center;">1</td><td style="text-align: center;">7</td></tr> <tr><td style="text-align: center;">4</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">3</td><td style="text-align: center;">4</td><td style="text-align: center;">2</td><td style="text-align: center;">4</td><td style="text-align: center;">2</td><td style="text-align: center;">8</td></tr> <tr><td style="text-align: center;">5</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">3</td><td style="text-align: center;">5</td><td style="text-align: center;">3</td><td style="text-align: center;">1</td></tr> <tr><td style="text-align: center;">6</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">2</td><td style="text-align: center;">2</td><td style="text-align: center;">4</td><td style="text-align: center;">6</td><td style="text-align: center;">4</td><td style="text-align: center;">2</td></tr> <tr><td style="text-align: center;">7</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">3</td><td style="text-align: center;">3</td><td style="text-align: center;">5</td><td style="text-align: center;">1</td><td style="text-align: center;">5</td><td style="text-align: center;">3</td></tr> <tr><td style="text-align: center;">8</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">1</td><td style="text-align: center;">4</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">6</td><td style="text-align: center;">4</td></tr> <tr><td style="text-align: center;">9</td><td style="text-align: center;">1</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">1</td><td style="text-align: center;">2</td><td style="text-align: center;">3</td><td style="text-align: center;">7</td><td style="text-align: center;">5</td></tr> </table>	TOTAL NUMBER OF ELIGIBLE WOMEN AGE 15-49 IN HOUSEHOLD SCHEDULE COLUMN 9									1	2	3	4	5	6	7	8+	0	1	2	2	4	3	6	5	4	1	1	1	3	1	4	1	6	5	2	1	2	1	2	5	2	7	6	3	1	1	2	3	1	3	1	7	4	1	2	3	4	2	4	2	8	5	1	1	1	1	3	5	3	1	6	1	2	2	2	4	6	4	2	7	1	1	3	3	5	1	5	3	8	1	2	1	4	1	2	6	4	9	1	1	2	1	2	3	7	5
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HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
101	Kwa kawaida maji ya kunywa ya watu wa hapa nyumbani yanatoka wapi?	PIPED WATER PIPED INTO DWELLING 11 PIPED TO YARD/PLOT 12 PIPED TO NEIGHBOR 13 PUBLIC TAP/STANDPIPE 14 TUBE WELL OR BOREHOLE 21 DUG WELL PROTECTED WELL 31 UNPROTECTED WELL 32 WATER FROM SPRING PROTECTED SPRING 41 UNPROTECTED SPRING 42 RAINWATER 51 TANKER TRUCK 61 CART WITH SMALL TANK 71 SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) 81 BOTTLED WATER 91 OTHER 96 (SPECIFY)	→ 106 → 103 → 103
102	Kwa kawaida maji ya matumizi mengine kama kupika na kuosha mikono ya watu wa hapa nyumbani yanatoka wapi?	PIPED WATER PIPED INTO DWELLING 11 PIPED TO YARD/PLOT 12 PIPED TO NEIGHBOR 13 PUBLIC TAP/STANDPIPE 14 TUBE WELL OR BOREHOLE 21 DUG WELL PROTECTED WELL 31 UNPROTECTED WELL 32 WATER FROM SPRING PROTECTED SPRING 41 UNPROTECTED SPRING 42 RAINWATER 51 TANKER TRUCK 61 CART WITH SMALL TANK 71 SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) 81 OTHER 96 (SPECIFY)	→ 106
103	Mahali mnapotoa hayo maji ni wapi?	IN OWN DWELLING 1 IN OWN YARD/PLOT 2 ELSEWHERE 3	→ 106
104	Inachukua muda gani kwenda huko, kuchota maji, na kurudi nyumbani?	MINUTES <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW998	
105	Ni nani ambaye kwa kawaida huenda hapo kuchota maji kwa matumizi ya hapa nyumbani? RECORD THE PERSON'S NAME AND LINE NUMBER FROM THE HOUSEHOLD SCHEDULE. IF THE PERSON IS NOT LISTED IN THE HOUSEHOLD ROSTER, RECORD '00'.	NAME LINE NUMBER <input type="text"/> <input type="text"/>	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
106	Kwa mwezi moja umepita, je kumekuwa na wakati ambapo watu wa nyumbahii hawakupata maji ya kunywa ya kutosha walipokuwa wanahitaji?	YES 1 NO 2 DON'T KNOW 8	
107	Je, unafanya chochote kwa maji hayo kuyafanya kuwa salama zaidi kwa kunywa?	YES 1 NO 2 DON'T KNOW 8	→ 109
108	Je, kwa kawaida unafanya nini ili kuyafanya maji hayo kuwa salama kwa kunywa? Na nini kingine? RECORD ALL MENTIONED.	BOIL A ADD BLEACH/CHLORINE B STRAIN THROUGH A CLOTH C USE WATER FILTER (CERAMIC/ SAND/COMPOSITE/ETC) D SOLAR DISINFECTION E LET IT STAND AND SETTLE F COVER THE WATER CONTAINER G OTHER X (SPECIFY) DON'T KNOW Z	
109	Je, watu wa hapa nyumbani, kwa kawaida hutumia choo cha aina gani? IF NOT POSSIBLE TO DETERMINE, ASK PERMISSION TO OBSERVE THE FACILITY.	FLUSH OR POUR FLUSH TOILET FLUSH TO PIPED SEWER SYSTEM 11 FLUSH TO SEPTIC TANK 12 FLUSH TO PIT LATRINE 13 FLUSH TO SOMEWHERE ELSE 14 FLUSH, DON'T KNOW WHERE 15 PIT LATRINE VENTILATED IMPROVED PIT LATRINE 21 PIT LATRINE WITH SLAB 22 PIT LATRINE WITHOUT SLAB/OPEN PIT .. 23 COMPOSTING TOILET 31 BIODIGESTER 32 BUCKET TOILET 41 HANGING TOILET/HANGING LATRINE 51 NO FACILITY/BUSH/FIELD 61 OTHER 96 (SPECIFY)	→ 117
110	Je, mnatumia choo hiki pamoja na watu wa nyumba nyingine?	YES 1 NO 2	→ 112
111	Pamoja na nyumba yako, ni watu wa nyumba ngapi wanaotumia choo hiki?	NO. OF HOUSEHOLDS IF LESS THAN 10 <input type="text" value="0"/> 10 OR MORE HOUSEHOLDS 95 DON'T KNOW 98	
112	Choo hiki kiko wapi?	IN OWN DWELLING 1 IN OWN YARD/PLOT 2 ELSEWHERE 3	
113	CHECK 109: CODES 12, 13, 21, <input type="checkbox"/> 22, 23, OR 31 CIRCLED ↓	OTHER <input type="checkbox"/> _____	→ 117
114	Je, uchafu/kinyesi cha (tank ya septic/ choo cha shimo/choo cha mbolea) kimewahi kuondolewa?	YES 1 NO 2 DON'T KNOW 8	→ 117
115	Mara ya mwisho uchafu/kinyesi cha (tank ya septic/ choo cha shimo/choo cha mbolea) kuondolewa, je iliondolewa na mtoa huduma?	YES 1 NO 2 DON'T KNOW 8	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
116	Huo uchafu ulitupwa wapi?	A TREATMENT PLANT 1 BURIED IN A COVERED PIT 2 UNCOVERED PIT/BUSH/FIELD/ OPEN GROUND 3 SURFACE WATER (RIVER/DAM/ LAKE/POND/STREAM/CANAL/ IRRIGATION CHANNEL) 4 OTHER 6 (SPECIFY) DON'T KNOW 8	
117	Ni meko ya aina gani mu/unayotumia zaidi kupikia hapa nyumbani?	ELECTRIC STOVE 01 SOLAR COOKER 02 LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS STOVE 03 PIPED NATURAL GAS STOVE 04 BIOGAS STOVE 05 LIQUID FUEL STOVE 06 MANUFACTURED SOLID FUEL STOVE (JIKO) .. 07 TRADITIONAL SOLID FUEL STOVE 08 THREE STONE STOVE/OPEN FIRE 09 NO FOOD COOKED IN HOUSEHOLD 95 OTHER 96 (SPECIFY)	 → 121 → 120 → 120 → 123 → 120
118	Je, hiyo meko iko na sehemu ya kuondoa moshi?	YES 1 NO 2 DON'T KNOW 8	
119	Je, hiyo meko iko na feni?	YES 1 NO 2 DON'T KNOW 8	
120	Ni moto/kawi ya aina gani inatumika kwenye meko hii?	ALCOHOL/ETHANOL 01 GASOLINE/DIESEL 02 KEROSENE/PARAFFIN 03 COAL/LIGNITE 04 CHARCOAL 05 WOOD 06 STRAW/SHRUBS/GRASS 07 AGRICULTURAL CROP 08 ANIMAL DUNG/WASTE 09 PROCESSED BIOMASS (PELLETS) OR WOODCHIPS 10 GARBAGE/PLASTIC 11 SAWDUST 12 OTHER 96 (SPECIFY)	
121	Je, kwa kawaida unapika chakula ndani ya nyumba, nyumba nyingine ama nje?	IN THE HOUSE 1 IN A SEPARATE BUILDING 2 OUTDOORS 3 OTHER 6 (SPECIFY)	 → 123
122	Je, una chumba cha kando kinachotumiwa kwa kupikia/jiko?	YES 1 NO 2	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP		
123	Ni nini mnatumia kuweka joto katika hii nyumba wakati inahitajika?	MANUFACTURED SPACE HEATER 01 TRADITIONAL SPACE HEATER 02 MANUFACTURED COOKSTOVE (JIKO) 03 TRADITIONAL COOKSTOVE 04 THREE STONE STOVE/OPEN FIRE 05 FIREPLACE 06 CENTRAL HEATING 07 NO HEATING IN HOUSEHOLD 95 OTHER 96 (SPECIFY)	→ 125 → 125 → 126 → 125		
124	Je, iko na sehemu ya kuondoa moshi?	YES 1 NO 2 DON'T KNOW 8			
125	Ni kawi ya aina gani inatumika kwenye hicho kifaa?	ELECTRICITY 01 PIPED NATURAL GAS 02 SOLAR AIR HEATER 03 LIQUEFIED PETROLEUM GAS (LPG)/ COOKING GAS 04 BIOGAS 05 ALCOHOL/ETHANOL 06 GASOLINE/DIESEL 07 KEROSENE/PARAFFIN 08 COAL/LIGNITE 09 CHARCOAL 10 WOOD 11 STRAW/SHRUBS/GRASS 12 AGRICULTURAL CROP 13 ANIMAL DUNG/WASTE 14 PROCESSED BIOMASS (PELLETS) OR WOODCHIPS 15 GARBAGE/PLASTIC 16 SAWDUST 17 OTHER 96 (SPECIFY)			
126	Ni nini mnatumia kuleta mwangaza usiku wakati wa giza?	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 STRAW/SHRUBS/GRASS 10 AGRICULTURAL CROP 11 ANIMAL DUNG/WASTE 12 OIL LAMP 13 CANDLE 14 NO LIGHTING IN HOUSEHOLD 95 OTHER 96 (SPECIFY)			
127	Ni vyumba vingapi hapa nyumbani vinavyotumika kwa kulala?	ROOMS <table><tr><td></td><td></td></tr></table>			
127A	Je, mnamiliki nyumba hii, mnalipa kodi ama mnaishi hapa bila kulipa kodi?	OWNS 1 PAYS RENT/LEASE 2 NO RENT WITH CONSENT OF OWNER 3 NO RENT, SQUATTING 4			

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
127B	Je, mnamiliki ardhi kwenye hii nyumba iko?	OWNS 1 PAYS RENT/LEASE 2 NO RENT WITH CONSENT OF OWNER 3 NO RENT, SQUATTING 4	
128	Je, watu wa nyumba hii wanamiliki mifugo yoyote, ng'ombe, wanyama wengine wa shamba, au kuku?	YES 1 NO 2	→ 130
129	Je, hapa nyumbani mnamiliki idadi gani ya wanyama wafuatao? IF NONE, RECORD '00'. IF 95 OR MORE, RECORD '95'. IF UNKNOWN, RECORD '98'. a) Ng'ombe wa kienyeji? b) Ng'ombe wa kigeni/gredi? c) Farasi, punda na ngamia? d) Mbuzi? e) Kondoo? f) Kuku na aina nyingine ya ndege za kufugwa? g) Nguruwe?	a) LOCAL CATTLE (INDIGENOUS) b) EXOTIC/GRADE CATTLE/ CROSSBREED c) HORSES/DONKEYS/CAMELS d) GOATS e) SHEEP f) CHICKEN/OTHER POULTRY g) PIGS	
130	Je, kuna mtu yeyote wa hapa nyumbani anayemiliki ardhi ya kufanya kilimo?	YES 1 NO 2	→ 131A
131	Je, watu wa nyumba hii wanamiliki kiasi gani cha ardhi ya kilimo? ACRES/HECTARES: IF 995 OR MORE, RECORD '995.0' IN APPROPRIATE BOX. PLOT SIZE (SQ FT): IF 999995 OR MORE, RECORD '999995.0' IN APPROPRIATE BOX	ACRES 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> HECTARES 2 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> PLOT SIZE (SQ FT) 3 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 999998	
131A	Je, kuna mtu yeyote wa hapa nyumbani anayemiliki ardhi ambayo si ya kufanya kilimo?	YES 1 NO 2	→ 132
131B	Je, watu wa nyumba hii wanamiliki kiasi gani cha ardhi ambayo si ya kufanya kilimo? ACRES/HECTARES: IF 995 OR MORE, RECORD '995.0' IN APPROPRIATE BOX. PLOT SIZE (SQ FT): IF 999995 OR MORE, RECORD '999995.0' IN APPROPRIATE BOX	ACRES 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> HECTARES 2 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> PLOT SIZE (SQ FT) 3 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DON'T KNOW 999998	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES		SKIP
132	Je, nyumba hii iko na: a) Nguvu za umeme? b) Redio? c) Runinga/televisheni? d) Simu isiyokuwa ya rununu/mkononi? e) Tarakilishi/kompyuta? f) Jokofu? g) Paneli ya kawi kutoka kwa miale ya jua? h) Meza? i) Kiti? j) Sofa? k) Kitanda? l) Kabati? m) Saa ya ukuta? n) Tanuri ya microwave? o) Mtambo wa DVD? p) Mtambo wa kuchezea kaseti au CD?	YES	NO	
		a) ELECTRICITY 1	2	
		b) RADIO 1	2	
		c) TELEVISION 1	2	
		d) NON-MOBILE TELEPHONE .. 1	2	
		e) COMPUTER 1	2	
		f) REFRIGERATOR 1	2	
		g) SOLAR PANEL 1	2	
		h) TABLE 1	2	
		i) CHAIR 1	2	
		j) SOFA 1	2	
		k) BED 1	2	
		l) CUPBOARD 1	2	
		m) CLOCK 1	2	
		n) MICROWAVE OVEN 1	2	
		o) DVD PLAYER 1	2	
		p) CASSETTE/CD PLAYE..... 1	2	
133	Kuna mtu yeyote hapa nyumbani anayemiliki: a) Saa ya mkononi? b) Simu ya rununu/mkononi? c) Baiskeli? d) Pikipiki ama skuta? e) Mkokoteni inayovutwa na wanyama? f) Motokaa ama lori? g) Boti iliyo na mashini?	YES	NO	
		a) WATCH 1	2	
		b) MOBILE PHONE 1	2	
		c) BICYCLE 1	2	
		d) MOTORCYCLE/SCOOTER 1	2	
		e) ANIMAL-DRAWN CART 1	2	
		f) CAR/TRUCK 1	2	
		g) BOAT WITH MOTOR 1	2	
134	Je, kuna mtu yeyote wa nyumba hii aliye na akaunti kwa benki ama kwa mashirika mengine ya fedha?	YES 1	NO 2	
134A	Je, mnapokea msaada wa fedha ama msaada wowote kutoka kwa wafwatao: a) Serikali kuu? b) Serikali ya kaunti? c) Shirika lisilokuwa la serikali, shirika la kijamii ama shirika la kupeana msaada? d) Kanisa, msikiti ama shirika lolote la kidini? e) Marafiki, jamaa na majirani?	YES	NO	
		a) NATIONAL GOVERNMENT 1	2	
		b) COUNTY GOVERNMENT 1	2	
		c) NGOS/CBOS/OTHER CHARITABLE ORGANIZATIONS.. 1	2	
		d) CHURCH/MOSQUE/ OTHER RELIGIOUS ORGANIZATION.... 1	2	
		e) FRIENDS/RELATIVES/NEIGHBORS.. 1	2	
134B	CHECK 134A: ANY YES? AT LEAST 1 <input type="checkbox"/> YES ↓ ALL NO <input type="checkbox"/> → 134D			
134C	Ni kwa sababu gani mnapokea msaada wa kifedha ama msaada wowote? Kuna sababu nyingine? RECORD ALL MENTIONED.	ORPHANED CHILDREN 18 YEARS OR YOUNGE... A ELDERLY PERSON B PERSON WITH SEVERE DISABILITY C URBAN FOOD SUBSIDY D FOOD AID FOR PERSONS IN ARID AND SEMI-ARID LANDS E HEALTH VOUCHER F FOOD/CASH FOR WORK G SCHOOL FEEDING H HUNGER SAFETY NET PROGRAMME I COVID-19 RELIEF J OTHER X (SPECIFY)		
134D	Je, kuna yeyote kwa hii nyumba amejandikisha kwa Mpesa, Airtel money, na kadhalika?	YES 1	NO 2	
135	Je, kuna yeyote kwa hii nyumba anayetumia simu ya mkono/rununu kufanya shughuli za kifedha kwa mfano kutuma au kupokea pesa, kulipa gharama/bili, kununua bidhaa na huduma, ama kupokea mshahara?	YES 1	NO 2	

HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
135A	Sasa ningependa kukuuliza kuhusu ajali za barabarani ambazo mtu yeyote kwa nyumba hii anaweza kuwa amehusika. Kwa miezi kumi na miwili iliyopita, kuna yeyote wa nyumba yako amepoteza maisha kutokana na ajali ya barabarani?	YES 1 NO 2	→ 135C
135B	Kwa miezi kumi na miwili iliyopita, ni watu uwangapi wa nyumba yako wamepoteza maisha kutokana na ajali za barabarani?	NUMBER OF HH MEMBERS <input type="text"/>	
135C	Kwa miezi kumi na miwili iliyopita, kuna yeyote wa nyumba yako ameumia kwenye ajali ya barabarani, na kupata majeraha kiasi ambacho hangeweza kufanya kazi/shughuli zake za kawaida kwa angalau siku moja?	YES 1 NO 2	→ 135E
135D	Kwa miezi kumi na miwili iliyopita, watu wangapi wa nyumba yako a/waliumia kwenye ajali ya barabarani, na kupata majeraha kiasi ambacho hawangeweza kufanya kazi/shughuli zake/zao za kawaida kwa angalau siku moja?	NUMBER OF HH MEMBERS <input type="text"/>	
135E	Je, kuna yeyote wa hii nyumba amewahi kupimwa ugonjwa wa COVID-19?	YES 1 NO 2 DON'T KNOW 8	→ 135I
135F	Ukijumlisha na wewe mwenyewe, ni watu wangapi wa hii nyumba wamewahi kupimwa ugonjwa wa COVID-19?	NUMBER OF HH MEMBERS <input type="text"/>	
135G	Je, kuna yeyote wa hii nyumba amewahi kupatikana na ugonjwa wa COVID-19?	YES 1 NO 2 DON'T KNOW 8	→ 135I
135H	Ukijumlisha na wewe mwenyewe, ni watu wangapi wa hii nyumba wamewahi kupata ugonjwa wa COVID-19?	NUMBER OF HH MEMBERS <input type="text"/>	
135I	Je, kuna mtu yeyote wa hii nyumba ameaga kutokana na makali ya ugonjwa wa COVID-19?	YES 1 NO 2 DON'T KNOW 8	→ 135K
135J	Ni watu wangapi wa hii nyumba wameaga kutokana na makali ya ugonjwa wa COVID-19?	NUMBER OF HH MEMBERS <input type="text"/>	
135K	Je, kuna yeyote wa hii nyumba amepokea/amepata chanjo dhidi ya ugonjwa wa COVID-19?	YES 1 NO 2 DON'T KNOW 8	→ 136
135L	Ni watu wangapi wa hii nyumba wamepokea/wamepata chanjo dhidi ya ugonjwa wa COVID-19?	NUMBER OF HH MEMBERS <input type="text"/>	
136	Je, ni mara ngapi mtu yeyote huvuta tumbaku/sigara ndani ya nyumba yako? Je, unaweza sema ni kila siku, kila wiki/juma, kila mwezi, chini ya mara moja kwa mwezi, ama hawavutii nymbani kamwe?	DAILY 1 WEEKLY 2 MONTHLY 3 LESS OFTEN THAN ONCE A MONTH 4 NEVER 5	
137	Je kuna neti ya mbu kwa hii nyumba?	YES 1 NO 2	→ 149
138	Je, mko na neti ngapi hapa nyumbani? IF 7 OR MORE NETS, RECORD '7'.	NUMBER OF NETS <input type="text"/>	

MOSQUITO NETS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
	ASK THE RESPONDENT TO SHOW YOU ALL THE NETS IN THE HOUSEHOLD. OBSERVE AND ANSWER THE QUESTIONS FOR EACH NET, ONE BY ONE.		
139	ASSIGN EACH NET A SEQUENTIAL NUMBER AND RECORD THE NUMBER HERE. <div style="float: right;"> NET NUMBER <input type="text"/> <input type="text"/> </div>		
140	WAS THIS NET OBSERVED? <div style="float: right;"> OBSERVED 1 NOT OBSERVED 2 </div>		
141	Je, ni miezi mingapi tangu mpate/mnunue hii neti? IF LESS THAN ONE MONTH AGO, RECORD '00'. <div style="float: right;"> MONTHS AGO <input type="text"/> <input type="text"/> MORE THAN 36 MONTHS AGO 95 NOT SURE 98 </div>		
142	OBSERVE OR ASK BRAND/TYPE OF MOSQUITO NET. IF BRAND IS UNKNOWN AND YOU CANNOT OBSERVE THE NET, SHOW PICTURES OF TYPICAL NET TYPES/BRANDS TO RESPONDENT.	LONG-LASTING INSECTICIDE-TREATED NET (LLIN) OLYSET (SUPANET EXTRA) 11 PERMANET (SUPANET EXTRA) 12 NETPROTECT 13 YORKKOL 14 DAWA PLUS 15 DURANET 16 MAGNET 17 OTHER/DON'T KNOW BRAND (LLIN) 18 OTHER TYPE (NOT LLIN) 96 DON'T KNOW TYPE 98	
143	Je mlipata hii neti kupitia kliniki ya mama kabla ya kujifungua, ama wakati wa kupata chanjo?	YES, MASS DISTRIBUTION CAMPAIGN 1 YES, ANC 2 YES, CHILD WELFARE VISIT 3 NO 4	→ 145
144	Je, ulipata neti wapi?	GOVERNMENT HEALTH FACILITY 01 PRIVATE HEALTH FACILITY 02 PHARMACY 03 SHOP/MARKET 04 CHW 05 RELIGIOUS INSTITUTION 06 SCHOOL 07 OTHER 96 DON'T KNOW 98	
145	Je, kuna yeyote aliyelala ndani ya hii neti usiku wa jana?	YES 1 NO 2 NOT SURE 8	→ 147 → 148

MOSQUITO NETS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
146	<p>Nani alilala ndani ya neti hii usiku wa jana?</p> <p>RECORD THE PERSON'S NAME AND LINE NUMBER FROM HOUSEHOLD SCHEDULE.</p>	<div>NAME _____</div> <div>LINE NUMBER <input type="text"/> <input type="text"/></div> <hr/> <div>NAME _____</div> <div>LINE NUMBER <input type="text"/> <input type="text"/></div> <hr/> <div>NAME _____</div> <div>LINE NUMBER <input type="text"/> <input type="text"/></div> <hr/> <div>NAME _____</div> <div>LINE NUMBER <input type="text"/> <input type="text"/></div>	<div>→ 148</div>
147	Ni sababu gani kuu iliyosababisha neti kutotumika?	<p>TOO HOT 01</p> <p>DON'T LIKE NET SHAPE/COLOR/SIZE 02</p> <p>DON'T LIKE SMELL 03</p> <p>UNABLE TO HANG NET 04</p> <p>SLEPT OUTDOORS 05</p> <p>USUAL USER DIDN'T SLEEP HERE</p> <p> LAST NIGHT 06</p> <p>NO MOSQUITOES/NO MALARIA 07</p> <p>EXTRA NET/SAVING FOR LATER 08</p> <p>NET TOO SMALL/SHORT 09</p> <p>NET BROUGHT BEDBUGS 10</p> <p>OTHER _____ 96</p> <p align="center">(SPECIFY)</p>	
148	GO BACK TO 139 FOR NEXT NET; OR, IF NO MORE NETS, GO TO 149.		

ADDITIONAL HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
149	Tungependa kujua kuhusu sehemu ambapo watu huosha mikono yao. Je, unaweza kunionyesha pahali watu wa hii nyumba wanaoshea mikono kwa mara nyingi?	OBSERVED, FIXED PLACE 1 OBSERVED, MOBILE 2 NOT OBSERVED, NOT IN DWELLING/YARD/PLOT 3 NOT OBSERVED, NO PERMISSION TO SEE .. 4 NOT OBSERVED, OTHER REASON 5	<div style="border: 1px solid black; padding: 2px; display: inline-block;">→ 152</div>
150	OBSERVE PRESENCE OF WATER AT THE PLACE FOR HANDWASHING. RECORD OBSERVATION.	WATER IS AVAILABLE 1 WATER IS NOT AVAILABLE 2	
151	OBSERVE PRESENCE OF SOAP, DETERGENT, OR OTHER CLEANSING AGENT AT THE PLACE FOR HANDWASHING. RECORD OBSERVATION.	SOAP OR DETERGENT (BAR, LIQUID, POWDER, PASTE) A ASH, MUD, SAND B NONE Y	
152	OBSERVE MAIN MATERIAL OF THE FLOOR OF THE DWELLING. RECORD OBSERVATION.	NATURAL FLOOR EARTH/SAND 11 DUNG 12 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 OTHER 96 (SPECIFY)	
153	OBSERVE MAIN MATERIAL OF THE ROOF OF THE DWELLING. RECORD OBSERVATION.	NATURAL ROOFING NO ROOF 11 THATCH/GRASS/MAKUTI 12 SOD/MUD/DUNG 13 RUDIMENTARY ROOFING RUSTIC MAT 21 PALM/BAMBOO 22 WOOD PLANKS 23 CARDBOARD 24 TIN CANS 25 FINISHED ROOFING IRON SHEETS/METAL 31 WOOD 32 CALAMINE/CEMENT FIBER 33 CERAMIC TILES 34 CEMENT 35 ROOFING SHINGLES 36 ASBESTOS SHEET 37 OTHER 96 (SPECIFY)	

ADDITIONAL HOUSEHOLD CHARACTERISTICS

NO.	QUESTIONS AND FILTERS	CODING CATEGORIES	SKIP
154	<p>OBSERVE MAIN MATERIAL OF THE EXTERIOR WALLS OF THE DWELLING.</p> <p>RECORD OBSERVATION.</p>	<p>NATURAL WALLS</p> <p>NO WALLS 11</p> <p>CANE/PALM/TRUNKS 12</p> <p>DIRT 13</p> <p>RUDIMENTARY WALLS</p> <p>BAMBOO WITH MUD 21</p> <p>STONE WITH MUD 22</p> <p>UNCOVERED ADOBE 23</p> <p>PLYWOOD 24</p> <p>CARDBOARD 25</p> <p>REUSED WOOD 26</p> <p>IRON SHEETS 27</p> <p>FINISHED WALLS</p> <p>CEMENT 31</p> <p>STONE WITH LIME/CEMENT 32</p> <p>BRICKS 33</p> <p>CEMENT BLOCKS 34</p> <p>COVERED ADOBE 35</p> <p>WOOD PLANKS/SHINGLES 36</p> <p>OTHER 96</p> <p align="center">(SPECIFY)</p>	
155	<p>Ningependa kuangalia ikiwa chumvi inayotumika kwa hii nyumba iko na madini ya iodine. Tafadhali naomba unipe kiasi kidogo cha chumvi inayotumika kwa kupika chakula kwa hii nyumba.</p> <p>TEST SALT FOR IODINE.</p>	<p>SALT TESTED</p> <p>IODINE PRESENT 1</p> <p>NO IODINE 2</p> <p>SALT NOT TESTED</p> <p>HOUSEHOLD USES SALT BUT THERE IS NO SALT IN THE HOUSEHOLD 3</p> <p>HOUSEHOLD DOES NOT USE SALT 4</p> <p>SALT NOT TESTED 6</p> <p align="center">(SPECIFY REASON)</p>	

FOLLOW-ON STUDY CONSENT

- 400 Katika siku zijazo, timu nyengine kutoka kwa Shirika la Takwimu la Kenya, wangependa kutembelea nyumba yako kukuuliza maswali zaidi kuhusu afya na huduma za afya. Habari hizi zitatumika na Serikali ya Kenya kuweka mikakati na mipango kwa lengo la kuboresha afya na huduma za afya kwa jamii yako. Kwa niaba ya nyumba yako, idhini yako ni kwa hiari na unaweza kuondoa idhini hii wakati wowote. Hata hivyo tunatumai kwamba utakubali.

Je, una maswali yoyote?

Unakubali kutembelewa tena na timu kutoka Shirika la Kitaifa la Takwimu Kenya?

SIGNATURE OF INTERVIEWER _____ DATE _____

RESPONDENT AGREES
TO BE REVISITED ... 1



RESPONDENT DOES NOT AGREE
TO BE REVISITED ... 2



401	RECORD THE TIME.	HOURS	<table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>				
		MINUTES	<table border="1"><tr><td></td><td></td></tr><tr><td></td><td></td></tr></table>				

INTERVIEWER'S OBSERVATIONS

TO BE FILLED IN AFTER COMPLETING INTERVIEW

COMMENTS ABOUT INTERVIEW:

COMMENTS ON SPECIFIC QUESTIONS:

ANY OTHER COMMENTS:

SUPERVISOR'S OBSERVATIONS
