

WOMAN'S INFORMATION PANEL		WM
<b>WM1. Cluster number:</b> _____	<b>WM2. Household number:</b> _____	
<b>WM3. Woman's name and line number:</b> NAME _____	<b>WM4. Supervisor's name and number:</b> NAME _____	
<b>WM5. Interviewer's name and number:</b> NAME _____	<b>WM6. Day / Month / Year of interview:</b> _____ / _____ / <u>2</u> <u>0</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>	<b>WM7. Record the time:</b> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; text-align: center;">HOURS</td> <td style="width:50%; text-align: center;">MINUTES</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> </table>	HOURS	MINUTES	_____	_____		
HOURS	MINUTES						
_____	_____						
<b>WM8. Check completed questionnaires in this household: Have you or another member of your team interviewed this respondent for another questionnaire?</b>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">YES, INTERVIEWED ALREADY .....</td> <td style="width:50%; text-align: right;">1</td> <td style="width:50%; text-align: right;">1 ⇔ WM9B</td> </tr> <tr> <td>NO, FIRST INTERVIEW .....</td> <td style="text-align: right;">2</td> <td style="text-align: right;">2 ⇔ WM9A</td> </tr> </table>	YES, INTERVIEWED ALREADY .....	1	1 ⇔ WM9B	NO, FIRST INTERVIEW .....	2	2 ⇔ WM9A
YES, INTERVIEWED ALREADY .....	1	1 ⇔ WM9B					
NO, FIRST INTERVIEW .....	2	2 ⇔ WM9A					
<b>WM9A.</b> Hello, my name is ( <i>your name</i> ). We are from <i>THE CENTRAL ADMINISTRATION OF STATISTICS</i> . With support from UNICEF, 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 <b>30</b> minutes. We are also interviewing mothers about their children. All the information we obtain will remain strictly confidential and anonymous. This is also in accordance with law number 1793 date 22/2/1979 of the Central Administration of Statistics CAS stating, "gathered information will be confidential and will be used solely for statistical purposes". If you wish not to answer a question or wish to stop the interview, please let me know. May I start now?	<b>WM9B.</b> Now I would like to talk to you about your health and other topics in more detail. This interview will take about <b>30</b> 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 ⇔ <i>WOMAN'S BACKGROUND Module</i> 2 ⇔ WM17						

<b>WM17. Result of woman's interview.</b>  <i>Discuss any result not completed with Supervisor.</i>	<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 (<i>specify</i>) _____</td> <td style="text-align: right;">05</td> </tr> <tr> <td>NO ADULT CONSENT FOR RESPONDENT AGE 15-17.....</td> <td style="text-align: right;">06</td> </tr> <tr> <td>OTHER (<i>specify</i>).....</td> <td style="text-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														
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NO ADULT CONSENT FOR RESPONDENT AGE 15-17.....	06														
OTHER ( <i>specify</i> ).....	96														

WOMAN'S BACKGROUND		WB
<b>WB1.</b> 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
<b>WB2.</b> Check ED5 in EDUCATION Module in the HOUSEHOLD QUESTIONNAIRE for this respondent: Highest level of school attended:	ED5=21, 22, 31, 32, 41, 51 OR 61..... 1 ED5=00, 11, 71, 98 OR BLANK..... 2	1 ⇒WB15 2 ⇒WB14
<b>WB3.</b> In what month and year were you born?	DATE OF BIRTH MONTH.....__ __ DK MONTH..... 98  YEAR.....__ __ __ __ DK YEAR .....9998	
<b>WB4.</b> 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) .....__ __	
<b>WB5.</b> Have you ever attended any type of schooling ?	YES..... 1 NO ..... 2	2 ⇒WB14
<b>WB6.</b> What is the highest level and grade or year of school you have attended?	PRE-PRIMARY ..... 00 __ __ PRIMARY (CYCLE 1 & 2)..... 11 __ __ INTERMEDIARY (CYCLE 3) ..... 21 __ __ BP ..... 22 __ __ SECONDARY..... 31 __ __ BT ..... 32 __ __ TS ..... 41 __ __ UNIVERSITY ..... 51 __ __ LT ..... 61 __ __ DISABILITIES PROGRAM.....71 0 0	00 ⇒WB14
<b>WB7.</b> Did you complete that grade?	YES..... 1 NO ..... 2	
<b>WB8.</b> Check WB4: Age of respondent:	AGE 15-24..... 1 AGE 25-49..... 2	2 ⇒WB13
<b>WB9.</b> At any time during the 2022/2023 school year did you attend any type of schooling?	YES..... 1 NO ..... 2	2 ⇒WB11
<b>WB10.</b> During 2022/2023 school year, which level and grade are you attending?	PRIMARY (LEVEL 1 & 2) ..... 11 __ __ INTERMEDIARY (LEVEL 3)..... 21 __ __ BP ..... 22 __ __ SECONDARY..... 31 __ __ BT ..... 32 __ __ TS ..... 41 __ __ UNIVERSITY ..... 51 __ __ LT ..... 61 __ __ DISABILITIES PROGRAM.....71 0 0	
<b>WB11.</b> At any time during the 2021/2022 school year did you attend any type of schooling?	YES..... 1 NO ..... 2	2 ⇒WB13

<p><b>WB12.</b> During 2021/2022 school year, which level and grade did you <u>attend</u>?</p>	<p>PRIMARY (LEVEL 1 &amp; 2) ..... <b>11</b> ___</p> <p>INTERMEDIARY (LEVEL 3)..... <b>21</b> ___</p> <p>BP ..... <b>22</b> ___</p> <p>SECONDARY ..... <b>31</b> ___</p> <p>BT ..... <b>32</b> ___</p> <p>TS ..... <b>41</b> ___</p> <p>UNIVERSITY ..... <b>51</b> ___</p> <p>LT ..... <b>61</b> ___</p> <p>DISABILITIES PROGRAM.....71 0 0</p>	
<p><b>WB13.</b> Check WB6: Highest level of school attended:</p>	<p>WB6=21, 22, 31, 32, 41, 51, OR 61..... 1</p> <p>WB6=00, 11, 71, 98 OR BLANK..... 2</p>	<p>1 ⇒WB15</p>
<p><b>WB14.</b> 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</p> <p>ABLE TO READ ONLY PARTS OF SENTENCE..... 2</p> <p>ABLE TO READ WHOLE SENTENCE..... 3</p> <p>NO SENTENCE IN REQUIRED LANGUAGE / BRAILLE (specify language) _____ 4</p>	
<p><b>WB15.</b> 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 ..... ___</p> <p>ALWAYS / SINCE BIRTH ..... 95</p>	<p>95 ⇒WB18</p>
<p><b>WB17.</b> Before you moved here, in which governorate did you live in?</p>	<p>BEIRUT ..... 01</p> <p>MOUNT LEBANON..... 02</p> <p>NORTH..... 03</p> <p>AKKAR ..... 04</p> <p>BEKAA..... 05</p> <p>BAALBECK/EL HERMEL ..... 06</p> <p>SOUTH ..... 07</p> <p>NABATIEH ..... 08</p> <p>OUTSIDE OF LEBANON (specify) _____ 96</p>	
<p><b>WB18.</b> Are you covered by any health insurance?</p>	<p>YES..... 1</p> <p>NO ..... 2</p>	<p>2 ⇒ End</p>
<p><b>WB19.</b> What type of health insurance are you covered by?</p> <p>RECORD ALL MENTIONED.</p>	<p>MUTUAL HEALTH ORGANIZATION INSURANCE .....A</p> <p>HEALTH INSURANCE THROUGH EMPLOYER.....B</p> <p>NATIONAL SOCIAL SECURITY FUND.....C</p> <p>OTHER PRIVATELY PURCHASED COMMERCIAL HEALTH INSURANCE.....D</p> <p>FACULTATIVE FUND .....E</p> <p>PUBLICS SERVANTS COOPERATION ..... F</p> <p>ARMY AND THE INTERNAL SECURITY FORCES.....G</p> <p>FROM UNHCR OR UNRWA .....H</p> <p>OTHER (specify) .....X</p>	

**MASS MEDIA AND ICT**

**MT**

<p><b>MT1A.</b> CHECK WB14: READING THE SENTENCE</p>	<p>WB14= 1 ..... 1 WB14=2, 3, 4, OR EMPTY ..... 2</p>	<p>1 ⇒MT2</p>
<p><b>MT1.</b> Do you read a newspaper or magazine at least once a week, less than once a week or not at all?  <i>If 'At least once a week', probe: Would you say this happens almost every day? If 'Yes' record 3, if 'No' record 2.</i></p>	<p>NOT AT ALL..... 0 LESS THAN ONCE A WEEK..... 1 AT LEAST ONCE A WEEK..... 2 ALMOST EVERY DAY ..... 3</p>	
<p><b>MT2.</b> Do you listen to the radio at least once a week, less than once a week or not at all?  <i>If 'At least once a week', probe: Would you say this happens almost every day? If 'Yes' record 3, if 'No' record 2</i></p>	<p>NOT AT ALL..... 0 LESS THAN ONCE A WEEK..... 1 AT LEAST ONCE A WEEK..... 2 ALMOST EVERY DAY ..... 3</p>	
<p><b>MT3.</b> Do you watch television at least once a week, less than once a week or not at all?  <i>If 'At least once a week', probe: Would you say this happens almost every day? If 'Yes' record 3, if 'No' record 2</i></p>	<p>NOT AT ALL..... 0 LESS THAN ONCE A WEEK..... 1 AT LEAST ONCE A WEEK..... 2 ALMOST EVERY DAY ..... 3</p>	
<p><b>MT4.</b> Have you ever used a computer or a tablet from any location?</p>	<p>YES..... 1 NO ..... 2</p>	<p>2 ⇒MT9</p>
<p><b>MT5.</b> During the last 3 months, did you use a computer or a tablet at least once a week, less than once a week or not at all?  <i>If 'At least once a week', probe: Would you say this happened almost every day? If 'Yes' record 3, if 'No' record 2</i></p>	<p>NOT AT ALL..... 0 LESS THAN ONCE A WEEK..... 1 AT LEAST ONCE A WEEK..... 2 ALMOST EVERY DAY ..... 3</p>	<p>0 ⇒MT9</p>

	YES	NO
<p><b>MT6.</b> During the last 3 months, did you:</p> <p>[A] Copy or move a file or folder?</p> <p>[B] Use a copy and paste tool to duplicate or move information within a document?</p> <p>[C] Send e-mail with attached file, such as a document, picture or video?</p> <p>[D] Use a basic arithmetic formula in a spreadsheet?</p> <p>[E] Connect and install a new device, such as a modem, camera or printer?</p> <p>[F] Find, download, install and configure software?</p> <p>[G] Create an electronic presentation with presentation software, including text, images, sound, video or charts?</p> <p>[H] Transfer a file between a computer and other device?</p> <p>[I] Write a computer program in any programming language?</p>	<p>COPY/MOVE FILE ..... 1 2</p> <p>USE COPY/PASTE IN DOCUMENT..... 1 2</p> <p>SEND E-MAIL WITH ATTACHMENT ..... 1 2</p> <p>USE BASIC SPREADSHEET FORMULA. 1 2</p> <p>CONNECT DEVICE..... 1 2</p> <p>INSTALL SOFTWARE..... 1 2</p> <p>CREATE PRESENTATION..... 1 2</p> <p>TRANSFER FILE ..... 1 2</p> <p>PROGRAMMING ..... 1 2</p>	
<p><b>MT7.</b> Check MT6[C]: Is 'Yes' recorded?</p>	<p>YES, MT6[C]=1 ..... 1</p> <p>NO, MT6[C]=2..... 2</p>	<p>1 ⇒ MT10</p>
<p><b>MT8.</b> Check MT6[F]: Is 'Yes' recorded?</p>	<p>YES, MT6[F]=1 ..... 1</p> <p>NO, MT6[F]=2 ..... 2</p>	<p>1 ⇒ MT10</p>
<p><b>MT9.</b> Have you ever used the internet from any location and any device?</p>	<p>YES..... 1</p> <p>NO ..... 2</p>	<p>2 ⇒ MT11</p>
<p><b>MT10.</b> During the last 3 months, did you use the internet at least once a week, less than once a week or not at all?</p> <p><i>If 'At least once a week', probe: Would you say this happens almost every day?</i></p> <p><i>If 'Yes' record 3, if 'No' record 2.</i></p>	<p>NOT AT ALL..... 0</p> <p>LESS THAN ONCE A WEEK..... 1</p> <p>AT LEAST ONCE A WEEK ..... 2</p> <p>ALMOST EVERY DAY ..... 3</p>	
<p><b>MT11.</b> Do you own a mobile phone?</p>	<p>YES..... 1</p> <p>NO ..... 2</p>	<p>2 ⇒ End</p>
<p><b>MT12.</b> During the last 3 months, did you use a mobile telephone at least once a week, less than once a week or not at all?</p> <p><i>Probe if necessary: I mean have you communicated with someone using a mobile phone.</i></p> <p><i>If 'At least once a week', probe: Would you say this happens almost every day?</i></p> <p><i>If 'Yes' record 3, if 'No' record 2.</i></p>	<p>NOT AT ALL..... 0</p> <p>LESS THAN ONCE A WEEK..... 1</p> <p>AT LEAST ONCE A WEEK ..... 2</p> <p>ALMOST EVERY DAY ..... 3</p>	



<b>MA11A.</b> How old were you when you started living with your husband?	AGE IN YEARS ..... _ _	
<b>MA11B.</b> How old were you when you started living with your first husband?		

FERTILITY/BIRTH HISTORY		CM
<p><b>CM1.</b> 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>	YES ..... 1 NO..... 2	2 ⇒ CM8
<p><b>CM2.</b> Do you have any sons or daughters to whom you have given birth who are now living with you?</p>	YES ..... 1 NO..... 2	2 ⇒ CM5
<p><b>CM3.</b> How many sons live with you?</p> <p><i>If none, record '00'.</i></p>	SONS AT HOME ..... __ __	
<p><b>CM4.</b> How many daughters live with you?</p> <p><i>If none, record '00'.</i></p>	DAUGHTERS AT HOME ..... __ __	
<p><b>CM5.</b> Do you have any sons or daughters to whom you have given birth who are alive but do not live with you?</p>	YES ..... 1 NO..... 2	2 ⇒ CM8
<p><b>CM6.</b> How many sons are alive but do not live with you?</p> <p><i>If none, record '00'.</i></p>	SONS ELSEWHERE ..... __ __	
<p><b>CM7.</b> How many daughters are alive but do not live with you?</p> <p><i>If none, record '00'.</i></p>	DAUGHTERS ELSEWHERE..... __ __	
<p><b>CM8.</b> 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>	YES ..... 1 NO..... 2	2 ⇒ CM11
<p><b>CM9.</b> How many boys have died?</p> <p><i>If none, record '00'.</i></p>	BOYS DEAD..... __ __	
<p><b>CM10.</b> How many girls have died?</p> <p><i>If none, record '00'.</i></p>	GIRLS DEAD..... __ __	
<p><b>CM11.</b> Sum answers to CM3, CM4, CM6, CM7, CM9 and CM10.</p>	SUM ..... __ __	
<p><b>CM12.</b> Just to make sure that I have this right, you have had in total (<b>total number in CM11</b>) births during your life. Is this correct?</p>	YES ..... 1 NO..... 2	1 ⇒ CM14
<p><b>CM13.</b> Check responses to CM1-CM10 and make corrections as necessary until response in CM12 is 'Yes'.</p>		

<b>CM14.</b> <i>Check CM11: How many live births?</i>	NO LIVE BIRTHS, CM11=00 ..... 0 ONE OR MORE LIVE BIRTH, CM11=01 OR MORE..... 1	0 ⇒ <i>End</i>
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**FERTILITY/BIRTH HISTORY**

**BH**

**BH0.** Now I would like to record the names of all of your births, whether still alive or not, starting with the first one you had.

*Record names of all of the births in BH1. Record twins and triplets on separate lines.*

BH0. BH Line Number	BH1. What name was given to your (first/next) baby?	BH2. Were any of these births twins?  1 SINGLE 2 MULTI.	BH3. Is ( <i>name of birth</i> ) a boy or a girl?  1 BOY 2 GIRL	BH4. On what day, month and year was ( <i>name of birth</i> ) born?  <i>Probe: What is (his/her) birthday?</i>			BH5. Is ( <i>name of birth</i> ) still alive?  1 YES 2 NO		BH6. How old was ( <i>name of birth</i> ) at (his/her) last birthday?  <i>Record age in completed years.</i>	BH7. Is ( <i>name of birth</i> ) living with you?  1 YES 2 NO	BH8. <i>Record household line number of child (from HLI)</i>  <i>Record '00' if child is not listed.</i>	BH9. How old was ( <i>name of birth</i> ) when (he/she) died?  <i>If '1 year', probe: How many months old was (name of birth)?</i>  <i>Record days if less than 1 month; record months if less than 2 years; or years</i>		BH10. For the first birth, were there any birth before (name of the first birth), including any children who died after birth?  For the other births, Were there any other live births between ( <i>name of previous birth</i> ) and ( <i>name of birth</i> ), including any children who died after birth?  1 YES 2 NO	
				Day	Month	Year	Y	N				Age	Y	N	Line No
01		1 2	1 2	___	___	___	1	2 ☺	___	1 2	___	DAYS..... 1 MONTHS.. 2 YEARS ..... 3	___	1 ☺ 2 ☺ Add Next Birth Birth	
02		1 2	1 2	___	___	___	1	2 ☺	___	1 2	___	DAYS..... 1 MONTHS.. 2 YEARS ..... 3	___	1 ☺ 2 ☺ Add Next Birth Birth	
03		1 2	1 2	___	___	___	1	2 ☺	___	1 2	___	DAYS..... 1 MONTHS.. 2 YEARS ..... 3	___	1 ☺ 2 ☺ Add Next Birth Birth	
04		1 2	1 2	___	___	___	1	2 ☺	___	1 2	___	DAYS..... 1 MONTHS.. 2 YEARS ..... 3	___	1 ☺ 2 ☺ Add Next Birth Birth	
05		1 2	1 2	___	___	___	1	2 ☺	___	1 2	___	DAYS..... 1 MONTHS.. 2 YEARS ..... 3	___	1 ☺ 2 ☺ Add Next Birth Birth	


06		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
07		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
08		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
09		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
10		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
11		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
12		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
13		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
14		1 2	1 2	___	___	___	1 2 BH9	___	1 2	⇒BH10	DAYS.....1 MONTHS..2 YEARS ....3	___	1 2 Add Birth	2 2 Next Birth
BH11. Have you had any live births since the birth of ( <i>name of last birth listed</i> )?								YES .....	1	1 ⇒Record birth(s) in Birth History				
								NO .....	2					

<p><b>CM15.</b> Compare number in CM11 with number of births listed in the birth history above and check:</p>	<p>NUMBERS ARE THE SAME ..... 1  NUMBERS ARE DIFFERENT ..... 2</p>	<p>1 ⇒ CM17</p>
<p><b>CM16.</b> Probe and reconcile responses in the birth history until response in CM12 is 'Yes'.</p>		
<p><b>CM17.</b> Check BH4: Last birth occurred within the last 2 years, that is, since (<b>month of interview</b>) in (<b>year of interview minus 2</b>)?</p> <p><i>If the month of interview and the month of birth are the same, and the year of birth is (<b>year of interview minus 2</b>), consider this as a birth within the last 2 years.</i></p>	<p>NO LIVE BIRTHS IN THE LAST  2 YEARS..... 0  ONE OR MORE LIVE BIRTHS IN  THE LAST 2 YEARS ..... 1</p>	<p>0 ⇒ End</p>
<p><b>CM18.</b> Copy name of the last child listed in BH1.</p> <p><i>If the child has died, take special care when referring to this child by name in the following modules.</i></p>	<p>NAME OF LAST-BORN CHILD</p> <p>_____</p>	

DESIRE FOR LAST BIRTH		DB
<p><b>DB1.</b> 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 ⇨ End
<p><b>DB2.</b> 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 ⇨ End
<p><b>DB3.</b> Check CM11: Number of births:</p>	<p>ONLY 1 BIRTH..... 1</p> <p>2 OR MORE BIRTHS ..... 2</p>	1 ⇨ DB4A 2 ⇨ DB4B
<p><b>DB4A.</b> Did you want to have a baby later on, or did you not want any children?</p>	<p>LATER ..... 1</p> <p>NO MORE / NONE..... 2</p>	
<p><b>DB4B.</b> Did you want to have a baby later on, or did you not want any more children?</p>		

MATERNAL AND NEWBORN HEALTH		MN												
<p><b>MN1.</b> 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 ⇒ End												
<p><b>MN2.</b> Did you see anyone for antenatal care during your pregnancy with (<i>name</i>)?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	2 ⇒ MN19												
<p><b>MN3.</b> 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><b>HEALTH PROFESSIONAL</b></p> <p>DOCTOR ..... A</p> <p>NURSE / MIDWIFE ..... B</p> <p><b>OTHER PERSON</b></p> <p>TRADITIONAL BIRTH ATTENDANT ..... F</p> <p>COMMUNITY HEALTH WORKER ..... G</p> <p>OTHER (<i>specify</i>) ..... X</p>													
<p><b>MN4.</b> 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>WEEKS _____ 1 ____</p> <p>MONTHS _____ 2 0 ____</p> <p>DK _____ 998</p>													
<p><b>MN5.</b> 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>DK _____ 98</p>													
<p><b>MN6.</b> 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-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>BLOOD PRESSURE .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>URINE SAMPLE .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>BLOOD SAMPLE.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </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><b>MN19.</b> 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><b>HEALTH PROFESSIONAL</b></p> <p>DOCTOR ..... A</p> <p>NURSE / MIDWIFE..... B</p> <p><b>OTHER PERSON</b></p> <p>TRADITIONAL BIRTH ATTENDANT .....F</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><b>MN20.</b> 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>(<i>Name of place</i>)</p>	<p><b>HOME</b></p> <p>RESPONDENT'S HOME..... 11</p> <p>OTHER HOME ..... 12</p> <p><b>PUBLIC MEDICAL SECTOR</b></p> <p>GOVERNMENT HOSPITAL ..... 21</p> <p>PUBLIC CLINIC OR PRIMARY HEALTH CARE CENTER (PHCC) OR DISPENSARY... 22</p> <p>OTHER PUBLIC (<i>specify</i>) ..... 26</p> <p><b>PRIVATE MEDICAL SECTOR</b></p> <p>PRIVATE HOSPITAL..... 31</p> <p>PRIVATE CLINIC ..... 32</p> <p>PRIVATE MATERNITY HOME..... 33</p> <p>OTHER PRIVATE MEDICAL (<i>specify</i>) ..... 36</p> <p>NON-GOVERNMENTAL DISPENSARY ..... 41</p> <p>UNRWA CLINIC..... 42</p> <p>PALESTINIAN RED CRESCENT ..... 43</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><b>MN21.</b> Was (<i>name</i>) delivered by caesarean section? That is, did they cut your belly open to take the baby out?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	<p>2 ⇔MN23</p>
<p><b>MN22.</b> 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 PAINS ..... 2</p>	

<p><b>MN23.</b> 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>YES ..... 1  NO ..... 2</p> <p>DK/ DON'T REMEMBER ..... 8</p>	<p>2 ⇒ MN25  8 ⇒ MN25</p>
<p><b>MN24.</b> Before being placed on the bare skin of your chest, was the baby wrapped up?</p>	<p>YES ..... 1  NO ..... 2</p> <p>DK/ DON'T REMEMBER ..... 8</p>	
<p><b>MN25.</b> Was (<i>name</i>) dried or wiped soon after birth?</p>	<p>YES ..... 1  NO ..... 2</p> <p>DK/ DON'T REMEMBER ..... 8</p>	
<p><b>MN26.</b> 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'.</i>  <i>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.</i>  <i>If 24 hours or more, record days.</i></p>	<p>IMMEDIATELY/LESS THAN 1 HOUR..... 000</p> <p>HOURS ..... <b>1</b> _ _</p> <p>DAYS ..... <b>2</b> _ _</p> <p>NEVER BATHED..... 997</p> <p>DK / DON'T REMEMBER ..... 998</p>	
<p><b>MN32.</b> When (<i>name</i>) was born, was (he/she) very large, larger than average, average, smaller than average, or very small?</p>	<p>VERY LARGE..... 1  LARGER THAN AVERAGE ..... 2  AVERAGE..... 3  SMALLER THAN AVERAGE ..... 4  VERY SMALL..... 5</p> <p>DK ..... 8</p>	
<p><b>MN33.</b> Was (<i>name</i>) weighed at birth?</p>	<p>YES ..... 1  NO ..... 2</p> <p>DK ..... 8</p>	<p>2 ⇒ MN35  8 ⇒ MN35</p>
<p><b>MN34.</b> How much did (<i>name</i>) weigh?</p> <p><i>If a card is available, record weight from card.</i></p>	<p>FROM CARD ..... <b>1 (KG)</b> _ . _ _ _</p> <p>FROM RECALL ..... <b>2 (KG)</b> _ . _ _ _</p> <p>DK ..... 99998</p>	

<b>MN35.</b> Has your menstrual period returned since the birth of ( <i>name</i> )?	YES ..... 1 NO ..... 2	
<b>MN36.</b> Did you / or any other mom ever breastfeed ( <i>name</i> )?	YES ..... 1 NO ..... 2	2 ⇒ MN39B
<b>MN37.</b> How long after birth was the ( <i>name</i> ) breastfed for the first time?  <i>If less than 1 hour, record '00' hours.</i> <i>If less than 24 hours, record hours.</i> <i>Otherwise, record days.</i>	IMMEDIATELY ..... 000  HOURS ..... <b>1</b> __ __  DAYS ..... <b>2</b> __ __  DK / DON'T REMEMBER ..... 998	
<b>MN38.</b> In the first three days after delivery, was ( <i>name</i> ) given anything to drink other than breast milk (Any human milk whether from his mom or any other mom)?	YES ..... 1 NO ..... 2	1 ⇒ MN39A 2 ⇒ End
<b>MN39A.</b> What was ( <i>name</i> ) given to drink?  <i>Probe: Anything else?</i>  <i>'Not given anything to drink' is not a valid response and response category Y cannot be recorded.</i>  <b>MN39B.</b> In the first three days after delivery, what was ( <i>name</i> ) given to drink?  <i>Probe: Anything else?</i>  <i>'Not given anything to drink' (category Y) can only be recorded if no other response category is recorded.</i>	MILK (OTHER THAN BREAST MILK) ..... A PLAIN WATER ..... B SUGAR OR GLUCOSE WATER ..... C GRIPE WATER ..... D SUGAR-SALT-WATER SOLUTION ..... E FRUIT JUICE ..... F INFANT FORMULA ..... G TEA / INFUSIONS / TRADITIONAL HERBAL PREPARATIONS ..... H HONEY ..... I PRESCRIBED MEDICINE ..... J  OTHER ( <i>specify</i> ) _____ X  NOT GIVEN ANYTHING TO DRINK ..... Y	

**POST-NATAL HEALTH CHECKS**

**PN**

<p><b>PN1.</b> 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                  NO, CM17=0 ..... 2</p>	<p>2 ⇒ End</p>
<p><b>PN2.</b> Check MN20: Was the child delivered in a health facility?</p>	<p>YES, MN20=21-43 OR 76..... 1                  NO, MN20=11-12 OR 96 ..... 2</p>	<p>2 ⇒ PN7</p>
<p><b>PN3.</b> Now I would like to ask you some questions about what happened in the hours and days after the birth of (<i>name</i>).</p> <p>You have said that you gave birth in (<i>name or type of facility in MN20</i>). How long did you stay there after the delivery?</p> <p>If less than one day, record hours.                  If less than one week, record days.                  Otherwise, record weeks.</p>	<p>HOURS.....<b>1</b> __ __                  DAYS .....<b>2</b> __ __                  WEEKS.....<b>3</b> __ __                  DK / DON'T REMEMBER ..... 998</p>	
<p><b>PN4.</b> I would like to talk to you about checks on (<i>name</i>)'s health after delivery – for example, someone examining (<i>name</i>), checking the cord, or seeing if (<i>name</i>) is ok.</p> <p>Before you left the (<i>name or type of facility in MN20</i>), did anyone check on (<i>name</i>)'s health?</p>	<p>YES ..... 1                  NO ..... 2</p>	
<p><b>PN5.</b> And what about checks on <u>your</u> health – I mean, someone assessing your health, for example asking questions about your health or examining you?</p> <p>Did anyone check on <u>your</u> health before you left (<i>name or type or facility in MN20</i>)?</p>	<p>YES ..... 1                  NO ..... 2</p>	
<p><b>PN6.</b> Now I would like to talk to you about what happened after you left (<i>name or type of facility in MN20</i>).</p> <p>Did anyone check on (<i>name</i>)'s health after you left (<i>name or type of facility in MN20</i>)?</p>	<p>YES ..... 1                  NO ..... 2</p>	<p>1 ⇒ PN12                  2 ⇒ PN17</p>
<p><b>PN7.</b> Check MN19: Did a health professional, traditional birth attendant, or community health worker assist with the delivery?</p>	<p>YES, AT LEAST ONE OF THE CATEGORIES A TO G RECORDED..... 1                  NO, NONE OF THE CATEGORIES A TO G RECORDED ..... 2</p>	<p>2 ⇒ PN11</p>

<p><b>PN8.</b> You have already said that (<i>person or persons in MN19</i>) assisted with the birth. Now I would like to talk to you about checks on (<i>name</i>)’s health after delivery, for example examining (<i>name</i>), checking the cord, or seeing if (<i>name</i>) is ok.</p> <p>After the delivery was over and before (<i>person or persons in MN19</i>) left you, did (<i>person or persons in MN19</i>) check on (<i>name</i>)’s health?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	
<p><b>PN9.</b> And did (<i>person or persons in MN19</i>) check on <u>your</u> health before leaving, for example asking questions about your health or examining you?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	
<p><b>PN10.</b> After the (<i>person or persons in MN19</i>) left you, did anyone check on the health of (<i>name</i>)?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	<p>1 ⇒PN12</p> <p>2 ⇒PN19</p>
<p><b>PN11.</b> I would like to talk to you about checks on (<i>name</i>)’s health after delivery – for example, someone examining (<i>name</i>), checking the cord, or seeing if the baby is ok.</p> <p>After (<i>name</i>) was delivered, did anyone check on (his/her) health?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	<p>2 ⇒PN20</p>
<p><b>PN12.</b> Did such a check happen only once, or more than once?</p>	<p>ONCE ..... 1</p> <p>MORE THAN ONCE..... 2</p>	<p>1 ⇒PN13A</p> <p>2 ⇒PN13B</p>
<p><b>PN13A.</b> How long after delivery did that check happen?</p> <p><b>PN13B.</b> How long after delivery did the first of these checks happen?</p> <p><i>If less than one day, record hours.</i></p> <p><i>If less than one week, record days.</i></p> <p><i>Otherwise, record weeks.</i></p>	<p>HOURS ..... <b>1</b> _ _</p> <p>DAYS ..... <b>2</b> _ _</p> <p>WEEKS..... <b>3</b> _ _</p> <p>DK / DON’T REMEMBER ..... 998</p>	
<p><b>PN14.</b> Who checked on (<i>name</i>)’s health at that time?</p>	<p><b>HEALTH PROFESSIONAL</b></p> <p>DOCTOR ..... A</p> <p>NURSE / MIDWIFE..... B</p> <p><b>OTHER PERSON</b></p> <p>TRADITIONAL BIRTH ATTENDANT .....F</p> <p>COMMUNITY HEALTH WORKER.....G</p> <p>RELATIVE / FRIEND..... H</p> <p>OTHER (<i>specify</i>) ..... X</p>	

<p><b>PN15.</b> Where did this check take place?</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 style="text-align: center;">(Name of place)</p>	<p><b>HOME</b></p> <p>RESPONDENT'S HOME..... 11</p> <p>OTHER HOME ..... 12</p> <p><b>PUBLIC MEDICAL SECTOR</b></p> <p>GOVERNMENT HOSPITAL ..... 21</p> <p>PUBLIC CLINIC , PRIMARY HEALTH CARE CENTER (PHCC) OR DISPENSARY ..... 22</p> <p>OTHER PUBLIC (<i>specify</i>) _____ 26</p> <p><b>PRIVATE MEDICAL SECTOR</b></p> <p>PRIVATE HOSPITAL..... 31</p> <p>PRIVATE CLINIC ..... 32</p> <p>PRIVATE MATERNITY HOME ..... 33</p> <p>OTHER PRIVATE MEDICAL (<i>specify</i>) _____ 36</p> <p>NON-GOVERNMENTAL DISPENSARY ..... 41</p> <p>UNRWA CLINIC..... 42</p> <p>PALESTINIAN RED CRESCENT ..... 43</p> <p>DK PUBLIC OR PRIVATE..... 76</p> <p>OTHER (<i>specify</i>) _____ 96</p>	
<p><b>PN16.</b> Check MN20: Was the child delivered in a health facility?</p>	<p>YES, MN20=21-43 OR 76..... 1</p> <p>NO, MN20=11-12 OR 96 ..... 2</p>	<p>2 ⇒PN18</p>
<p><b>PN17.</b> After you left (<i>name or type of facility in MN20</i>), did anyone check on <u>your</u> health?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	<p>1 ⇒PN21</p> <p>2 ⇒PN25</p>
<p><b>PN18.</b> Check MN19: Did a health professional, traditional birth attendant, or community health worker assist with the delivery?</p>	<p>YES, AT LEAST ONE OF THE CATEGORIES A TO G RECORDED..... 1</p> <p>NO, NONE OF THE CATEGORIES A TO G RECORDED ..... 2</p>	<p>2 ⇒PN20</p>
<p><b>PN19.</b> After the delivery was over and (<i>person or persons in MN19</i>) left, did anyone check on <u>your</u> health?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	<p>1 ⇒PN21</p> <p>2 ⇒PN25</p>
<p><b>PN20.</b> After the birth of (<i>name</i>), did anyone check on <u>your</u> health, for example asking questions about your health or examining you?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	<p>2 ⇒PN25</p>
<p><b>PN21.</b> Did such a check happen only once, or more than once?</p>	<p>ONCE ..... 1</p> <p>MORE THAN ONCE..... 2</p>	<p>1 ⇒PN22A</p> <p>2 ⇒PN22B</p>
<p><b>PN22A.</b> How long after delivery did that check happen?</p> <p><b>PN22B.</b> How long after delivery did the first of these checks happen?</p> <p><i>If less than one day, record hours.</i></p> <p><i>If less than one week, record days.</i></p> <p><i>Otherwise, record weeks.</i></p>	<p>HOURS..... <b>1</b> ___</p> <p>DAYS ..... <b>2</b> ___</p> <p>WEEKS..... <b>3</b> ___</p> <p>DK / DON'T REMEMBER ..... 998</p>	

<p><b>PN23.</b> Who checked on <u>your</u> health at that time?</p>	<p><b>HEALTH PROFESSIONAL</b>  DOCTOR ..... A  NURSE / MIDWIFE..... B  <b>OTHER PERSON</b>  TRADITIONAL BIRTH ATTENDANT ..... F  COMMUNITY HEALTH WORKER..... G  RELATIVE / FRIEND..... H    OTHER (<i>specify</i>) ..... X</p>	
<p><b>PN24.</b> Where did this check take place?</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 style="text-align: center;"><i>(Name of place)</i></p>	<p><b>HOME</b>  RESPONDENT'S HOME..... 11  OTHER HOME ..... 12</p> <p><b>PUBLIC MEDICAL SECTOR</b>  GOVERNMENT HOSPITAL ..... 21  PUBLIC CLINIC, PRIMARY HEALTH CARE CENTER (PHCC) OR DISPENSARY ..... 22  OTHER PUBLIC (<i>specify</i>) ..... 26</p> <p><b>PRIVATE MEDICAL SECTOR</b>  PRIVATE HOSPITAL..... 31  PRIVATE CLINIC ..... 32  PRIVATE MATERNITY HOME ..... 33  OTHER PRIVATE MEDICAL  (<i>specify</i>) ..... 36</p> <p>NON-GOVERNMENTAL DISPENSARY ..... 41  UNRWA CLINIC..... 42  PALESTINIAN RED CRESCENT ..... 43</p> <p>DK PUBLIC OR PRIVATE..... 76</p> <p>OTHER (<i>specify</i>) ..... 96</p>	
<p><b>PN25.</b> During the first two days after birth, did any health care provider do any of the following either at home or at a facility:</p> <p>[A] Examine (<i>name</i>)'s cord?</p> <p>[B] Take the temperature of (<i>name</i>)?</p> <p>[C] Counsel you on breastfeeding?</p>	<p style="text-align: right;">YES NO DK</p> <p>EXAMINE THE CORD ..... 1 2 8</p> <p>TAKE TEMPERATURE ..... 1 2 8</p> <p>COUNSEL ON BREASTFEEDING .... 1 2 8</p>	
<p><b>PN26.</b> Check MN36: Was child ever breastfed?</p>	<p>YES, MN36=1..... 1  NO, MN36=2 ..... 2</p>	<p>2 ⇒PN28</p>
<p><b>PN27.</b> Observe (<i>name</i>)'s breastfeeding?</p>	<p style="text-align: right;">YES NO DK</p> <p>OBSERVE BREASTFEEDING..... 1 2 8</p>	
<p><b>PN28.</b> Check MN33: Was child weighed at birth?</p>	<p>YES, MN33=1..... 1  NO, MN33=2 ..... 2  DK, MN33=8 ..... 3</p>	<p>1 ⇒PN29A  2 ⇒PN29B  3 ⇒PN29C</p>

<p><b>PN29A.</b> You mentioned that (<i>name</i>) was weighed at birth. After that, was (<i>name</i>) weighed again by a health care provider within two days?</p> <p><b>PN29B.</b> You mentioned that (<i>name</i>) was not weighed at birth. Was (<i>name</i>) weighed at all by a health care provider within two days after birth?</p> <p><b>PN29C.</b> You mentioned that you do not know if (<i>name</i>) was weighed at birth. Was (<i>name</i>) weighed at all by a health care provider within two days after birth?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	
<p><b>PN30.</b> During the first two days after (<i>name</i>)'s birth, did any health care provider give you information on the symptoms that require you to take your sick child to a health facility for care?</p>	<p>YES ..... 1</p> <p>NO ..... 2</p>	

CONTRACEPTION		CP
<b>CP0.</b> CHECK MA0/MA1A.: IS THE RESPONDENT CURRENTLY MARRIED?	YES, CURRENTLY MARRIED, MA0/MA1A=1 ..... 1 NO, NOT CURRENTLY MARRIED, MA0/MA1A=2 ... 2	2 ⇒UN14
<b>CP1.</b> I would like to talk with you about another subject: family planning.  Are you pregnant now?	YES, CURRENTLY PREGNANT ..... 1 NO ..... 2  DK OR NOT SURE..... 8	1 ⇒CP3
<b>CP2.</b> Couples use various ways or methods to delay or avoid getting pregnant.  Are you currently doing something or using any method to delay or avoid getting pregnant?	YES..... 1  NO ..... 2	1 ⇒CP4
<b>CP3.</b> Have you ever done something or used any method to delay or avoid getting pregnant?	YES..... 1 NO ..... 2	2 ⇒End
<b>CP4.</b> What are you doing to delay or avoid a pregnancy?  <i>Do not prompt.</i> <i>If more than one method is mentioned, record each one.</i>	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 LACTATIONAL AMENORRHOEA METHOD (LAM) .....K PERIODIC ABSTINENCE / RHYTHM .....L WITHDRAWAL .....M  OTHER ( <i>specify</i> ) .....X	

UNMET NEED		UN
<b>UN1.</b> Check CP1: Currently pregnant?	YES, CP1=1 ..... 1 NO, DK OR NOT SURE, CP1=2 OR 8..... 2	2 ⇒UN6
<b>UN2.</b> 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
<b>UN3.</b> Check CM11: Any births?	NO BIRTHS ..... 0 ONE OR MORE BIRTHS ..... 1	0 ⇒UN4A 1 ⇒UN4B
<b>UN4A.</b> Did you want to have a baby later on or did you not want any children?  <b>UN4B.</b> Did you want to have a baby later on or did you not want any more children?	LATER ..... 1 NONE / NO MORE ..... 2	
<b>UN5.</b> 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
<b>UN6.</b> Check CP4: Currently using 'Female sterilization'?	YES, CP4=A..... 1 NO, CP4≠A ..... 2	1 ⇒UN14
<b>UN7.</b> 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
<b>UN8.</b> 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 OTHER ..... 996  DK..... 998	994 ⇒UN12
<b>UN9.</b> Check CP1: Currently pregnant?	YES, CP1=1 ..... 1 NO, DK OR NOT SURE, CP1=2 OR 8..... 2	1 ⇒UN14
<b>UN10.</b> Check CP2: Currently using a method?	YES, CP2=1 ..... 1 NO, CP2=2 ..... 2	1 ⇒UN14
<b>UN11.</b> Do you think you are physically able to get pregnant at this time?	YES ..... 1 NO..... 2  DK..... 8	1 ⇒UN14  8 ⇒UN14

<p><b>UN12.</b> 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</p> <p>OTHER (<i>specify</i>) _____ X</p> <p>DK..... Z</p>	
<p><b>UN13.</b> Check UN12: 'Never menstruated' mentioned?</p>	<p>MENTIONED, UN12=C..... 1  NOT MENTIONED, UN12≠C ..... 2</p>	<p>1 ⇒End</p>
<p><b>UN14.</b> 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 ___</p> <p>WEEKS AGO ..... 2 ___</p> <p>MONTHS AGO ..... 3 ___</p> <p>YEARS AGO..... 4 ___</p> <p>IN MENOPAUSE / HAS HAD  HYSTERECTOMY..... 993  BEFORE LAST BIRTH..... 994  NEVER MENSTRUATED ..... 995</p>	<p>993 ⇒End  994 ⇒End  995 ⇒End</p>
<p><b>UN15.</b> Check UN14: Was the last menstrual period within last year?</p>	<p>YES, WITHIN LAST YEAR ..... 1  NO, ONE YEAR OR MORE ..... 2</p>	<p>2 ⇒End</p>
<p><b>UN16.</b> Due to your last menstruation, were there any social activities, school or work days that you did not attend?</p>	<p>YES..... 1  NO..... 2</p> <p>DK / NOT SURE / NO SUCH ACTIVITY ..... 8</p>	
<p><b>UN17.</b> During your last menstrual period were you able to wash and change in privacy while at home?</p>	<p>YES..... 1  NO..... 2</p> <p>DK..... 8</p>	
<p><b>UN18.</b> Did you use any materials such as sanitary pads, tampons or cloth?</p>	<p>YES..... 1  NO..... 2</p> <p>DK..... 8</p>	<p>2 ⇒End  8 ⇒End</p>
<p><b>UN19.</b> Were the materials reusable?</p>	<p>YES..... 1  NO..... 2</p> <p>DK..... 8</p>	

ATTITUDES TOWARD DOMESTIC VIOLENCE		DV
<p><b>DV1.</b> 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:</p> <p>[A] If she goes out without telling him?</p> <p>[B] If she neglects the children?</p> <p>[C] If she argues with him?</p> <p>[D] If she refuses to have sex with him?</p> <p>[E] If she burns the food?</p>	<p style="text-align: right;">YES NO DK</p> <p>GOES OUT WITHOUT TELLING..... 1 2 8</p> <p>NEGLECTS CHILDREN ..... 1 2 8</p> <p>ARGUES WITH HIM ..... 1 2 8</p> <p>REFUSES SEX ..... 1 2 8</p> <p>BURNS FOOD..... 1 2 8</p>	

VICTIMISATION		VT
<p><b>VT1.</b> <i>Check for the presence of others. Before continuing, ensure privacy.</i> 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</p> <p>NO ..... 2</p> <p>DK ..... 8</p>	<p>2 ⇒ VT9B</p> <p>8 ⇒ VT9B</p>
<p><b>VT2.</b> 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><b>VT3.</b> 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>	

<b>VT4.</b> Check VT3: One or more times?	ONE TIME, VT3=1 ..... 1 MORE THAN ONCE OR DK, VT3=2, 3 OR 8 ..... 2	1 ⇒VT5A 2 ⇒VT5B
<b>VT5A.</b> When this happened, was anything stolen from you?  <b>VT5B.</b> The last time this happened, was anything stolen from you?	YES..... 1 NO ..... 2  DK / NOT SURE ..... 8	
<b>VT6.</b> Did the person(s) have a weapon?	YES..... 1 NO ..... 2  DK / NOT SURE ..... 8	2 ⇒VT8 8 ⇒VT8
<b>VT7.</b> Was a knife, a gun or something else used as a weapon?  <i>Record all that apply.</i>	YES, A KNIFE..... A YES, A GUN..... B YES, SOMETHING ELSE ..... X	
<b>VT8.</b> Did you or anyone else report the incident to the police?  <i>If 'Yes', probe:</i> Was the incident reported by you or someone else?	YES, RESPONDENT REPORTED..... 1 YES, SOMEONE ELSE REPORTED..... 2 NO, NOT REPORTED ..... 3  DK / NOT SURE ..... 8	
<b>VT9A.</b> 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?  <b>VT9B.</b> 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?  <i>If 'No', probe:</i> 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>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>	YES..... 1 NO ..... 2  DK ..... 8	2 ⇒VT20 8 ⇒VT20
<b>VT10.</b> Did this last happen during the last 12 months, that is, since ( <i>month of interview</i> ) ( <i>year of interview minus 1</i> )?	YES, DURING THE LAST 12 MONTHS..... 1 NO, MORE THAN 12 MONTHS AGO ..... 2  DK / DON'T REMEMBER ..... 8	2 ⇒VT12B 8 ⇒VT12B
<b>VT11.</b> How many times did this happen in the last 12 months?  <i>If 'DK/Don't remember', probe:</i> Did it happen once, twice, or at least three times?	ONE TIME..... 1 TWO TIMES..... 2 THREE OR MORE TIMES ..... 3  DK / DON'T REMEMBER ..... 8	1 ⇒VT12A 2 ⇒VT12B 3 ⇒VT12B 8 ⇒VT12B

<p><b>VT12A.</b> Where did this happen?</p> <p><b>VT12B.</b> 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><b>VT13.</b> 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><b>VT14A.</b> At the time of the incident, did you recognize the person?</p> <p><b>VT14B.</b> 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><b>VT17.</b> 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><b>VT18.</b> 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><b>VT19.</b> 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><b>VT20.</b> How safe do you feel walking alone in your neighbourhood after dark?</p>	<p>VERY SAFE ..... 1</p> <p>SAFE..... 2</p> <p>UNSAFE ..... 3</p> <p>VERY UNSAFE..... 4</p> <p>NEVER WALK ALONE AFTER DARK ..... 7</p>	
<p><b>VT21.</b> How safe do you feel when you are at home alone after dark?</p>	<p>VERY SAFE ..... 1</p> <p>SAFE..... 2</p> <p>UNSAFE ..... 3</p> <p>VERY UNSAFE..... 4</p> <p>NEVER ALONE AFTER DARK..... 7</p>	

<b>VT22.</b> In the past 12 months, have you <u>personally</u> felt discriminated against or harassed on the basis of the following grounds:  [B] Sex?  [D] Age?  [E] Religion or belief?  [F] Disability?  [G] Nationality?  [X] For any other reason?		YES	NO	DK	
	SEX.....	1	2	8	
	AGE.....	1	2	8	
	RELIGION / BELIEF.....	1	2	8	
	DISABILITY.....	1	2	8	
	NATIONALITY.....	1	2	8	
OTHER REASON.....	1	2	8		

<b>ADULT FUNCTIONING</b>		<b>AF</b>
<b>AF1.</b> Check WB4: Age of respondent?	AGE 15-17 YEARS ..... 1 AGE 18-49 YEARS ..... 2	1 ⇨ End
<b>AF2.</b> Do you use glasses or contact lenses?  <i>Include the use of glasses for reading.</i>	YES..... 1 NO..... 2	
<b>AF3.</b> Do you use a hearing aid?	YES..... 1 NO..... 2	
<b>AF4.</b> I will now ask you about difficulties you may have doing a number of different activities. For each activity there are four possible answers: Please tell me if you have: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty or 4) that you cannot do the activity at all.  <i>Repeat the categories during the individual questions whenever the respondent does not use an answer category:</i> Remember, the four possible answers are: 1) no difficulty, 2) some difficulty, 3) a lot of difficulty, or 4) that you cannot do the activity at all.		
<b>AF5.</b> Check AF2: Respondent uses glasses or contact lenses?	YES, AF2=1 ..... 1 NO, AF2=2..... 2	1 ⇨ AF6A 2 ⇨ AF6B
<b>AF6A.</b> When using your glasses or contact lenses, do you have difficulty seeing?  <b>AF6B.</b> Do you have difficulty seeing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT SEE AT ALL ..... 4	
<b>AF7.</b> Check AF3: Respondent uses a hearing aid?	YES, AF3=1 ..... 1 NO, AF3=2..... 2	1 ⇨ AF8A 2 ⇨ AF8B
<b>AF8A.</b> When using your hearing aid(s), do you have difficulty hearing?  <b>AF8B.</b> Do you have difficulty hearing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT HEAR AT ALL..... 4	

<b>AF9.</b> Do you have difficulty walking or climbing steps?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT WALK/ CLIMB STEPS AT ALL ..... 4	
<b>AF10.</b> Do you have difficulty remembering or concentrating?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT REMEMBER/ CONCENTRATE AT ALL ..... 4	
<b>AF11.</b> Do you have difficulty with self-care, such as washing all over or dressing?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3 CANNOT CARE FOR SELF AT ALL..... 4	
<b>AF12.</b> Using your usual language, do you have difficulty communicating, for example understanding or being understood?	NO DIFFICULTY ..... 1 SOME DIFFICULTY ..... 2 A LOT OF DIFFICULTY ..... 3	

TOBACCO USE		TA
<b>TA1.</b> Have you ever tried cigarette smoking, even one or two puffs?	YES ..... 1 NO ..... 2	2 ⇒ TA6
<b>TA2.</b> How old were you when you smoked a whole cigarette for the first time?	NEVER SMOKED A WHOLE CIGARETTE.....00 AGE..... ____	00 ⇒ TA6
<b>TA3.</b> Do you currently smoke cigarettes?	YES ..... 1 NO ..... 2	2 ⇒ TA6
<b>TA4.</b> In the last 24 hours, how many cigarettes did you smoke?	NUMBER OF CIGARETTES ..... ____	
<b>TA5.</b> During the last one month, on how many days did you smoke cigarettes?  <i>If less than 10 days, record the number of days. If 10 days or more but less than a month, record '10'. If 'Every day' or 'Almost every day', record '30'.</i>	NUMBER OF DAYS ..... <u>0</u> ____  10 DAYS OR MORE BUT LESS THAN A MONTH.....10  EVERY DAY / ALMOST EVERY DAY .....30	
<b>TA6.</b> Have you ever tried any smoked tobacco products other than cigarettes, such as cigars, water pipe, cigarillos or pipe?	YES ..... 1 NO ..... 2	2 ⇒ TA10
<b>TA7.</b> During the last one month, did you use any smoked tobacco products?	YES ..... 1 NO ..... 2	2 ⇒ TA10
<b>TA8.</b> What type of smoked tobacco product did you use or smoke during the last one month?  <i>Record all mentioned.</i>	CIGARS.....A WATER PIPE .....B CIGARILLOS .....C PIPE.....D  OTHER ( <i>specify</i> ) ..... X	
<b>TA9.</b> During the last one month, on how many days did you use ( <i>names of products mentioned in TA8</i> )?  <i>If less than 10 days, record the number of days. If 10 days or more but less than a month, record '10'. If 'Every day' or 'Almost every day', record '30'.</i>	NUMBER OF DAYS ..... <u>0</u> ____  10 DAYS OR MORE BUT LESS THAN A MONTH.....10  EVERY DAY / ALMOST EVERY DAY .....30	
<b>TA10.</b> Have you ever tried any form of smokeless tobacco products, such as chewing tobacco, or electronic cigarette/vape?	YES ..... 1 NO ..... 2	2 ⇒ END
<b>TA11.</b> During the last one month, did you use any smokeless tobacco products?	YES ..... 1 NO ..... 2	2 ⇒ END

<p><b>TA12.</b> What type of smokeless tobacco product did you use during the last one month?</p> <p><i>Record all mentioned.</i></p>	<p>CHEWING TOBACCO.....A  ELECTRONIC CIGARETTE/VAPE.....D</p> <p>OTHER (<i>specify</i>) _____ X</p>	
<p><b>TA13.</b> During the last one month, on how many days did you use (<i>names of products mentioned in TA12</i>)?</p> <p><i>If less than 10 days, record the number of days.  If 10 days or more but less than a month, record '10'.  If 'Every day' or 'Almost every day', record '30'.</i></p>	<p>NUMBER OF DAYS ..... <u>0</u> ____</p> <p>10 DAYS OR MORE BUT LESS THAN A MONTH.....10</p> <p>EVERY DAY / ALMOST EVERY DAY .....30</p>	

**LIFE SATISFACTION**

**LS**

**LS1.** I would like to ask you some simple questions on happiness and satisfaction.

First, taking all things together, would you say you are very happy, somewhat happy, neither happy nor unhappy, somewhat unhappy or very unhappy?

I am now going to show you pictures to help you with your response.

Show smiley card and explain what each symbol represents. Record the response code selected by the respondent.

- VERY HAPPY ..... 1
- SOMEWHAT HAPPY ..... 2
- NEITHER HAPPY NOR UNHAPPY ..... 3
- SOMEWHAT UNHAPPY ..... 4
- VERY UNHAPPY ..... 5

**LS2.** Show the picture of the ladder.

Now, look at this ladder with steps numbered from 0 at the bottom to 10 at the top.

Suppose we say that the top of the ladder represents the best possible life for you and the bottom of the ladder represents the worst possible life for you.

On which step of the ladder do you feel you stand at this time?

Probe if necessary: Which step comes closest to the way you feel?

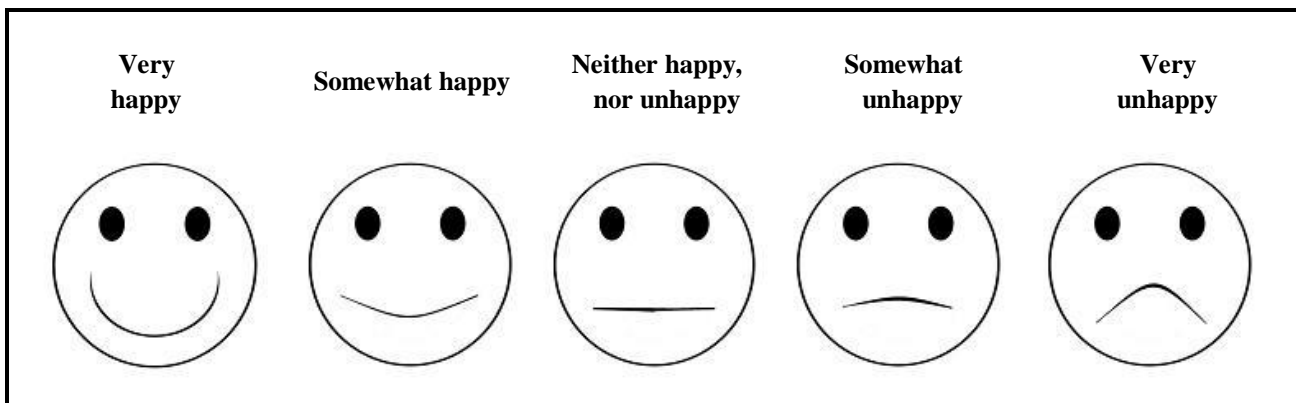
LADDER STEP ..... \_\_\_\_

**LS3.** Compared to this time last year, would you say that your life has improved, stayed more or less the same, or worsened, overall?

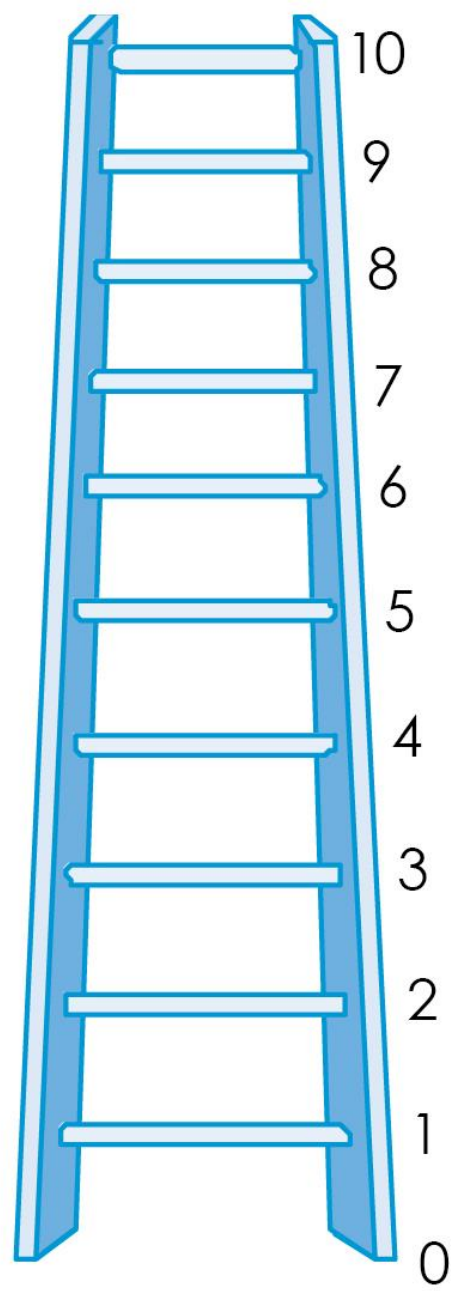
- IMPROVED ..... 1
- MORE OR LESS THE SAME ..... 2
- WORSENEDED ..... 3

**LS4.** And in one year from now, do you expect that your life will be better, will be more or less the same, or will be worse, overall?

- BETTER ..... 1
- MORE OR LESS THE SAME ..... 2
- WORSE ..... 3



**Best Possible Life**



**Worst Possible Life**

<b>WM10.</b> <i>Record the time.</i>	HOURS AND MINUTES..... __ __ : __ __	
<b>WM11.</b> <i>Was the entire interview completed in private or was there anyone else during the entire interview or part of it?</i>	<p>YES, THE ENTIRE INTERVIEW WAS COMPLETED IN PRIVATE .....1</p> <p>NO, OTHERS WERE PRESENT DURING THE ENTIRE INTERVIEW (specify) _____ 2</p> <p>NO, OTHERS WERE PRESENT DURING PART OF THE INTERVIEW (specify) _____ 3</p>	

**MICS PLUS AND QUALITY CONTROL CONSENT**

**MP**

<p><b>WM15A.</b> Check the name and line number of this questionnaire's respondent (WM3).</p>	<p>YES, ALREADY INTERVIEWED (WM3=HH47) .....1</p> <p>NO, FIRST INTERVIEW (WM3≠HH47) .....2</p>	<p>1 ⇒WM16</p>
<p><b>WM15A1.</b> Have you already been interviewed with any other questionnaire?</p>	<p>YES .....1</p> <p>NO .....2</p>	<p>1 ⇒WM16</p>
<p><b>WM15B.</b> Check HC7[A] and HC12: Does this household have a fixed telephone line or does any member of the household own a mobile phone?</p>	<p>YES, HC7[A]=1 OR HC12=1 .....1</p> <p>NO, HC7[A]=2 AND HC12=2 .....2</p>	<p>2 ⇒WM16</p>
<p><b>WM15C.</b> Thank you for your participation.</p> <p>The Central Administration of Statistics will be conducting a telephone quality control of some of the actual data, and a phone survey about the situation of children and households in the future. We would like to invite you to participate in this survey. If you agree to participate, we will ask you to share a phone number we can reach you at and convenient times to contact you. The phone interview will take about 20 minutes, and we may call you a few times over a period of a few months. Participation in this phone survey is voluntary, and even if you agree to participate now, you may decide to withdraw from participation in the future. There will be no costs to you for participating in the phone survey. Please know that all the information you share during future phone interviews will remain strictly confidential, and your phone number will not be shared with anyone outside our team. Would you like to participate?</p>		
<p>YES .....1</p> <p>NO .....2</p>		<p>2 ⇒WM16</p>

<p><b>WM15D.</b> Do you have a personal phone number or does your household have a communal number where you can be reached?</p>	<p>YES ..... 1</p> <p>NO..... 2</p>	<p>2 ⇒WM16</p>
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**WM15E.**  
**You may share your personal phone number and/or a household communal number. Please do not share any personal phone numbers that belong to individual members of your household.**

	[P1] BEST NUMBER	[P2] 2 <sup>ND</sup> NUMBER	[P3] 3 <sup>RD</sup> NUMBER
<b>WM15F.</b> Ask for and record phone number.	_____	_____	_____
<b>WM15G.</b> Just to confirm, the number is (number from WM15F)?  If no, return to WM15F and correct entry.	YES..... 1 NO..... 2 ☺ WM15F	YES ..... 1 NO ..... 2 ☺ WM15F	YES ..... 1 NO ..... 2 ☺ WM15F
<b>WM15J.</b> Remember, you may share your household communal number, but please, do not share any personal phone numbers that belong to individual members of your household. Do you have another personal or communal phone number where you can be reached?	YES..... 1 ☺ [P2] NO..... 2 ☺ WM16	YES ..... 1 ☺ [P3] NO ..... 2 ☺ WM16	YES ..... 1 ☺ [P4] NO ..... 2 ☺ WM16
			Tick here if additional questionnaire used: ..... <input type="checkbox"/>

**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 5-17 selected for QUESTIONNAIRE FOR CHILDREN AGE 5-17?
  - 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 5-17 in this household?
    - Yes ⇒ Go to WM17 in WOMAN'S INFORMATION PANEL and record '01'. Then go to the QUESTIONNAIRE FOR CHILDREN AGE 5-17 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**