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# IDEWS 2017

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## Section 1. Household identification and selection

### 1.1 Place

In which village are you?

Expects a single option response (required)

1 [1]

2 [2]

3 [3]

4 [4]

### 1.2 study\_id\_number

What is the study ID number of the household where you are?

Expects a numeric response (required)

### 1.3 gps\_location

Please capture the GPS location of the household:

Expects a latitude and longitude coordinate (optional)

### 1.4 respondent\_qualification\_wiling

Is there someone that's willing to answer the questions? We prefer to speak to the person in the household who makes decisions about energy usage or who participates in cooking and heating. Or if this is not possible to any other informed adult.

Expects a single option response (required)

Yes [1]

There's nobody home [2]

No household member wants to take part [3]

There is no suitable respondent [4]

I feel unsafe to enter this house [5]

Branches

If response Not Equal 'Yes [1]' then skip to *end (15.1)*

### 1.5 respondent\_name\_surname

What is the respondent's name and surname?

Expects a single line text response (required)

## Section 2. Demography and socio-economic status

### 2.1 country\_born

In which country were you born?

Expects a single option response (required)

South Africa [1]

Other [2]

Prerequisites

Skip when *country\_born* (2.1) Not Equal 'Other [2]'

### 2.2 country\_other

Please specify in which country you were born

Expects a single line text response (required)

Prerequisites

Skip when *country\_born* (2.1) Not Equal 'South Africa [1]'

### 2.3 country\_province

In which PROVINCE were you born?

Expects a single option response (required)

Eastern Cape [1]

Free State [2]

Gauteng [3]

KwaZulu-Natal [4]

Limpopo [5]

Mpumalanga [6]

Northern Cape [7]

North West [8]

Western Cape [9]

Not born in South Africa [10]

### 2.4 number\_people

How many people live on this stand, i.e. within the boundaries of the yard?

Expects a numeric response (required)

### 2.5 number\_households

How many separate households live on this plot? A household is a group of people who usually eat together.

Expects a numeric response (required)

### 2.6 households\_family

Please complete the sentence: Are all households

Expects a single option response (required)

Part of the same family [1]

not family members – simply renting space [2]

2.7 main\_household

The remaining questions of this section is about the main household.

---

2.8 people\_main

How many people, including you, make up this main household?

Expects a numeric response (required)

2.9 household\_children

How many children under five years of age are part of this household? If there are no children under five, type 0

Expects a numeric response (required)

2.10 household\_language

What is the main language spoken in this (the main/primary) household?

Expects a single option response (required)

- Afrikaans [1]
  - English [2]
  - Ndebele [3]
  - Sepedi [4]
  - Sesotho [5]
  - Setswana [6]
  - Swati [7]
  - Tsonga [8]
  - Venda [9]
  - Xhosa [10]
  - Zulu [11]
  - Other [12]
- 

2.11 household\_years

How long has this household been living in this house?

(required)

---

2.12 instruction\_people

The following section will repeat for the number of persons in this household.

---

2.13 instruction\_write down persons

Please write down the names of every person who lives here, starting with the respondents as Person 1, and there after from the oldest to youngest member.

---

## Section 3. Household member information

### 3.1 person\_name

What is REPEAT IDX name?

Expects a single line text response (required)

### 3.2 person\_age

How old is REPEAT IDX ?

Expects a numeric response (required)

### 3.3 person\_sex

Is REPEAT IDX male or female?

Expects a single option response (required)

Male [1]

Female [2]

### 3.4 person\_education

What is the highest achieved educational qualification for REPEAT IDX ?

Expects a single option response (required)

None [1]

Primary [2]

Secondary [3]

Tertiary [4]

Not applicable [5]

Child is under 5 years old [6]

### 3.5 person\_activity

Please state the main weekly activity for REPEAT IDX ?

Expects multiple selected options (required)

Full time job [1]

Part time job [2]

Unemployed [3]

Housewife / husband [4]

Informal job [5]

Tertiary education [6]

School [7]

Crèche [8]

Other [9]

## Section 4. Household information

### 4.1 household\_income

What is the average monthly income for this household - excluding grants & pensions?

Expects a single option response (required)

- No income [1]
- < R1000 [2]
- R1001- R5000 [3]
- > R5001 [4]
- Don't know [5]

### 4.2 household\_Oldage\_grant

How many people in the household receive Old age grant/pension?

Expects a numeric response (required)

### 4.3 household\_grand\_Disability

How many people in this household receive disability grant?

Expects a numeric response (required)

### 4.4 household\_grant\_child

How many people in this household receive Child support grant?

Expects a numeric response (required)

### 4.5 household\_grant\_other

Does anyone in this household receive other grants?

Expects a single option response (required)

- Yes [1]
- No [2]

#### Prerequisites

Skip when *household\_grant\_other* (4.5) Not Equal 'Yes [1]'

### 4.6 Household\_grant\_specify

Please specify what grant

Expects a single line text response (required)

#### 4.7 household\_own

Please state whether members of this household OWN any of the following items (in working order)

Expects multiple selected options (required)

- Radio [1]
  - Television [2]
  - Satellite television (e.g. DSTV or M-Net) [3]
  - Refrigerator [4]
  - Washing machine [5]
  - Video/DVD machine [6]
  - Microwave [7]
  - Car [8]
  - Computer [9]
  - Telephone (landline) [10]
  - Cellular phone (plain) [11]
  - Cellular smart phone [12]
  - iPad or Tablet [13]
  - Internet access [14]
-

## Section 5. Environmental services and practices

### 5.1 water\_drinking

Where do you mainly get your drinking water from?

Expects a single option response (required)

- Tap inside dwelling [1]
  - Outdoor on-site tap [2]
  - Communal tap-offsite [3]
  - Private water seller [4]
  - Water tanker/ truck [5]
  - Borehole [6]
  - Rain water tank [7]
  - River/stream/dam [8]
  - Other [9]
- 

### 5.2 water\_available

If you main source of drinking water is not available, where do you get your drinking water from?

Expects a single option response (required)

- Tap inside dwelling [1]
  - Outdoor on-site tap [2]
  - Communal tap-offsite [3]
  - Private water seller [4]
  - Water tanker/ truck [5]
  - Borehole [6]
  - Rain water tank [7]
  - River/stream/dam [8]
  - Other [9]
- 

### 5.3 water\_storage

Do you store water for drinking or cooking in a container? (such as a bucket or 5-litre water container)

Expects a single option response (required)

- Yes [1]
- No [2]

Branches

If response Not Equal 'Yes [1]' then skip to *water\_swim (5.14)*

---

#### 5.4 water\_container

##### Is the container

Expects a single option response (required)

- Metal, totally open [1]
- Metal, large hole-Big enough to get hand in [2]
- Metal, small hole-Too small to get fist in [3]
- Plastic, totally open [4]
- Plastic, large hole-Big enough to get hand in [5]
- Plastic, small hole-Too small to get fist in [6]
- Other, totally open [7]
- Other, large hole-Big enough to get hand in [8]
- Other, small hole-Too small to get fist in [9]
- Not applicable [10]

---

#### 5.5 Container\_lid

##### Does the container have a lid?

Expects a single option response (required)

- Yes [1]
- No [2]

---

#### 5.6 container\_clean

##### What do you do or add to the water to make it and keep it clean before drinking

Expects multiple selected options (required)

- Nothing [1]
- Boil the water [2]
- Add Jik [3]
- Add Chlorine [4]
- Add Jeyes Fluid [5]
- Other [6]

##### Prerequisites

Skip when *container\_clean* (5.6) Excludes 'Other [6]'

---

#### 5.7 container\_clean\_specify

##### What else do you do or add to the water to make it and keep it clean?

Expects a single line text response (required)

---

#### 5.8 container\_wash

##### How often do you wash your drinking water storage container?

Expects a single option response (required)

- Daily [1]
  - Once or twice a week [2]
  - Monthly [3]
  - Never [4]
  - Other [5]
-



Prerequisites

Skip when *container\_wash (5.8)* Not Equal 'Other [5]'

5.9 container\_wash\_other

You chose other, please explain when you wash your container

Expects a single line text response (required)

5.10 container\_fresh

When do you add a fresh supply of water to the container?

Expects a single option response (required)

If totally empty [1]

When half empty [2]

5.11 container\_take\_water

How do you take water out of the container?

Expects a single option response (required)

Using a utensil (scoop, cup, jug) [1]

Hands [2]

Other [3]

Prerequisites

Skip when *container\_take\_water (5.11)* Not Equal 'Other [3]'

5.12 container\_take\_water\_other

You chose other, please specify how you take water out of the container

Expects a single line text response (required)

5.13 container\_cup

Is there one special cup that everyone uses for scooping and drinking water from the container?

Expects a single option response (required)

Yes [1]

No [2]

5.14 water\_swim

Does anyone in the family ever swim in a nearby water body such as a water reservoir, dam, river?

Expects a single option response (required)

Yes [1]

No [2]

#### 5.15 household\_toilet

What type of toilet does the household mainly use?

Expects a single option response (required)

- Flush [1]
- Chemical [2]
- Pit latrine [3]
- Communal toilet [4]
- Bucket [5]
- Open field [6]
- Other [7]

---

#### 5.16 refuse\_located

Where is your refuse container (bin) located?

Expects a single option response (required)

- Kept indoors [1]
- Outdoors [2]
- Do not own a bin [3]

Branches

If response Equals 'Do not own a bin [3]' then skip to *refuse\_collection (5.18)*

---

#### 5.17 refuse\_lid

Does your bin have a properly fitting lid?

Expects a single option response (required)

- Yes [1]
- No [2]

---

#### 5.18 refuse\_collection

How often is your waste/refuse collected by local authority?

Expects a single option response (required)

- Daily [1]
- Weekly [2]
- Monthly [3]
- Sporadically [4]
- Never [5]
- Other [6]

Prerequisites

Skip when *refuse\_collection (5.18)* Not Equal 'Other [6]'

---

#### 5.19 refuse\_collection\_other

You chose other, please specify when

Expects a single line text response (required)

#### 5.20 refuse\_not\_collected

If your waste is not collected, how do you dispose of your waste?

Expects multiple selected options (required)

- Burn [1]
- Bury [2]
- Dump (close to the house) [3]
- Dump within 100m of house [4]
- Dump at municipal dump site [5]
- Dump in river [6]
- Other [7]

---

**Prerequisites**

Skip when *refuse\_not\_collected (5.20)* Excludes 'Other [7]'

#### 5.21 refuse\_not\_collected\_other

You use another option, please specify

Expects a single line text response (required)

---

#### 5.22 animals\_yard

What types of pets/ animals are in the house or the yard?

Expects multiple selected options (required)

- Cats [1]
- Dogs [2]
- Rodents e.g. Hamster, mice [3]
- Goats [4]
- Sheep [5]
- Chickens [6]
- Birds (such as budgies/pigeons) [7]
- None [8]
- Other [9]

---

**Prerequisites**

Skip when *animals\_yard (5.22)* Excludes 'Other [9]'

#### 5.23 animals\_yard\_other

You chose other animals, please specify

Expects a single line text response (required)

## Section 6. Housing infrastructure

### 6.1 instruction\_fieldworker

Please record the type of dwelling used by the main household. (please choose one)

Expects a single option response (required)

- Formal house built by a professional builder [1]
- Formal house that was self-built [2]
- Informal dwelling [3]
- Backyard dwelling-formal [4]
- Backyard dwelling-informal [5]
- Flat [6]
- Traditional dwelling [7]
- Other [8]

#### Prerequisites

Skip when *instruction\_fieldworker (6.1)* Not Equal 'Other [8]'

### 6.2 instruction\_specify

What type of dwelling is used?

Expects a single line text response (required)

### 6.3 dwelling\_age

Approximately how old is the house in years?

Expects a numeric response (required)

### 6.4 dwelling\_rooms

How many separate rooms are there in this dwelling/ house?

Expects multiple selected options (required)

- Kitchen (for cooking only) [1]
- Bathrooms / toilets [2]
- Dining rooms [3]
- Lounge [4]
- Bedrooms [5]

### 6.5 dwelling\_mould

Is there mould or mildew (usually black or brown spots) growing on any damp or moist surface inside the home? (e.g. on walls, wallpaper, carpets, ceilings, shower, curtains, etc.)

Expects a single option response (required)

- Yes [1]
- No [2]

### 6.6 dwelling\_dampness

Do you have any dampness in the dwelling?

Expects a single option response (required)

- Yes [1]
- No [2]

6.7 dwelling\_leaks

Do you have any leaks in the roof or leaking water pipes in or around the dwelling?

Expects a single option response (required)

Yes [1]

No [2]

---

## Section 7. Indoor environmental conditions

### 7.1 weather\_indoors

When the weather is warm, how does the house feel indoors?

Expects a single option response (required)

- Cooler than outside [1]
- Same as outside [2]
- Warmer than outside [3]

---

### 7.2 weather\_hot

During very hot weather, what do you do to cope? (Respondents can choose more than one)

Expects multiple selected options (required)

- Sleep [1]
- Sit or lie on the floor indoors [2]
- Sit under a tree or other shaded areas outdoors [3]
- Use a fan [4]
- Use an air conditioner [5]
- Take a cold bath/shower [6]
- Drink cold water/ beverages [7]
- Drink hot tea/coffee/ beverages [8]
- Remove clothing [9]
- Open windows [10]
- Open doors [11]
- Open curtains/ blinds [12]
- Switch off lights [13]
- Do nothing [14]
- Swim [15]
- Wet your clothing [16]
- Other [17]

---

#### Prerequisites

Skip when *weather\_hot (7.2)* Excludes 'Other [17]'

### 7.3 weather\_hot\_other

You chose other, please specify what you do during very hot weather

Expects a single line text response (required)

#### 7.4 weather\_hot\_children

During hot weather, what do you do to help your children cope? (Respondents can choose more than one)

Expects multiple selected options (required)

- Encourage child to take a nap [1]
- Sit or lie on the floor indoors [2]
- Sit under a tree or other shaded areas [3]
- Use a fan [4]
- Use an air conditioner [5]
- Take a cold bath / shower [6]
- Drink cold water/ beverages [7]
- Drink hot tea / coffee [8]
- Remove clothing [9]
- Open windows [10]
- Open doors [11]
- Open curtains/ blinds [12]
- Switch off lights [13]
- Do nothing [14]
- Swim [15]
- Wet your clothing [16]
- Other [17]

#### Prerequisites

Skip when *weather\_hot\_children (7.4)* Excludes 'Other [17]'

#### 7.5 weather\_hot\_children\_other

You chose other, please specify what you do to help your children cope

Expects a single line text response (required)

#### 7.6 weather\_cold

During very cold weather, do you use any of the following systems to heat your home?

Expects multiple selected options (required)

- Wood or coal stove [1]
- Imbhawula [2]
- Fireplace [3]
- Gas [4]
- Electric heater (oil, bar or asbestos) [5]
- Paraffin heater [6]

#### Prerequisites

Skip when *weather\_cold (7.6)* Excludes 'Wood or coal stove [1]'

#### 7.7 often\_wood

How often do you use the Wood / coal stove?

Expects a single option response (required)

- About everyday [1]
- 2-3 times a week [2]
- 2-3 times a month [3]
- Seldom [4]
- Never [5]

Prerequisites

Skip when *weather\_cold* (7.6) Excludes 'Imbhawula [2]'

7.8 often\_Imbhawula

How often do you use the Imbhawula?

Expects a single option response (required)

- About everyday [1]
  - 2-3 times a week [2]
  - 2-3 times a month [3]
  - Seldom [4]
  - Never [5]
- 

Prerequisites

Skip when *weather\_cold* (7.6) Excludes 'Fireplace [3]'

7.9 often\_Fireplace

How often do you use the Fireplace?

Expects a single option response (required)

- About everyday [1]
  - 2-3 times a week [2]
  - 2-3 times a month [3]
  - Seldom [4]
  - Never [5]
- 

Prerequisites

Skip when *weather\_cold* (7.6) Excludes 'Gas [4]'

7.10 often\_Gas

How often do you use the Gas?

Expects a single option response (required)

- About everyday [1]
  - 2-3 times a week [2]
  - 2-3 times a month [3]
  - Seldom [4]
  - Never [5]
- 

Prerequisites

Skip when *weather\_cold* (7.6) Excludes 'Electric heater (oil, bar or asbestos) [5]'

7.11 often\_Electric heater

How often do you use the Electric heater?

Expects a single option response (required)

- About everyday [1]
  - 2-3 times a week [2]
  - 2-3 times a month [3]
  - Seldom [4]
  - Never [5]
-



Prerequisites

Skip when *weather\_cold* (7.6) Excludes 'Paraffin heater [6]'

7.12 **often\_paraffin heater**

How often do you use the paraffin heater?

Expects a single option response (required)

- About everyday [1]
- 2-3 times a week [2]
- 2-3 times a month [3]
- Seldom [4]
- Never [5]

7.13 **cooking\_daily**

Do you do your daily cooking in the

Expects a single option response (required)

- Kitchen (part of the house) [1]
- Kitchen (separated from the house) [2]
- Segotlo [3]

7.14 **cooking\_fuel**

What fuel do you mainly use for cooking?

Expects a single option response (required)

- Electricity [1]
- Paraffin [2]
- Gas [3]
- Wood [4]
- Coal [5]
- Crop waste / cow dung [6]
- Other [7]

Prerequisites

Skip when *cooking\_fuel* (7.14) Not Equal 'Other [7]'

7.15 **cooking\_daily\_other**

You chose other, please specify what fuel you use for cooking

Expects a single line text response (required)

7.16 **together\_family**

Does the family sit in the same room around the stove or cooking fire - when cooking takes place?

Expects a single option response (required)

- Yes [1]
- No [2]

7.17 **together\_children**

Are children and babies in the same room- around the stove or cooking fire - when cooking is taking place?

Expects a single option response (required)

- Yes [1]
- No [2]

7.18 fire\_burn

If you use an open fire, for how many hours are the fires kept burning?

Expects a numeric response (required)

---

7.19 fire\_per day

How many times per day is a fire made?

Expects a numeric response (required)

---

7.20 fire\_time

Please specify when fires are made

Expects multiple selected options (required)

Morning [1]

Midday [2]

Evening [3]

---

## Section 8. Personel and domestic hygiene

### 8.1 fruit\_buy

Where do you mainly get your fruit and vegetables from?

Expects multiple selected options (required)

- Shop [1]
  - Roadside vendor [2]
  - Own garden [3]
- 

### 8.2 fruit\_wash

Do you and members of your household wash raw fruit and vegetables before eating it?

Expects a single option response (required)

- Always [1]
  - Often [2]
  - Sometimes [3]
  - Never [4]
- 

### 8.3 food\_store

If you store food, do you store it in a sealed container?

Expects a single option response (required)

- Yes [1]
  - No [2]
- 

### 8.4 food\_store\_container

When you need to store cooked/perishable food, do you store the food in a

Expects a single option response (required)

- Fridge [1]
  - Food cupboard [2]
  - Other [3]
- 

### 8.5 clean\_toilet

How often do you clean your toilet?

Expects a single option response (required)

- Daily [1]
  - Weekly [2]
  - Seldom [3]
- 

### 8.6 food\_soil

Do you or any of your household members eat soil?

Expects a single option response (required)

- Yes [1]
  - No [2]
-

Prerequisites

Skip when *food\_soil* (8.6) Not Equal 'Yes [1]'

8.7 *food\_soil\_person*

Please specify by person code, who. (P1, P2 ect)

Expects multiple selected options (required)

- P1 [1]
- P2 [2]
- P3 [3]
- P4 [4]
- P5 [5]
- P6 [6]
- P7 [7]
- P8 [8]
- P9 [9]
- P10 [10]

---

8.8 *food\_nonfood*

Does anyone in household eat other non-food items?

Expects a single option response (required)

- Yes [1]
- No [2]

Branches

If response Not Equal 'Yes [1]' then skip to *nonfood\_nails* (8.14)

---

8.9 *food\_nonfood\_specify*

If yes, please specify- type of non-food item

(required)

---

8.10 *nonfood\_age*

What age is the person? (in years)

Expects a numeric response (required)

---

8.11 *nonfood\_sex*

Is the person male or female?

Expects a single option response (required)

- male [1]
- female [2]

---

8.12 *nonfood\_duration*

For how long has this person being eating this?

(required)

**8.13 nonfood\_pregnancy**

**Was it done during pregnancy?**

Expects a single option response (required)

Yes [1]

No [2]

---

**8.14 nonfood\_nails**

**Does anyone in this household especially children bite their nails or suck fingers?**

Expects a single option response (required)

Yes [1]

No [2]

---

## Section 9. Health status

### 9.1 health\_symptoms

Has **REPEAT\_IDX** experienced the following symptoms related to high temperature in the past month?

Expects multiple selected options (required)

- Diarrhoea [1]
- Dizziness [2]
- Headaches [3]
- Nausea [4]
- Vomiting [5]
- Rapid breathing [6]
- Weakness in the body [7]
- Fatigue [8]
- Fainting [9]
- Fever [10]
- Hot dry skin [11]
- Lack of sweating [12]
- Profuse sweating [13]
- Dark coloured urine [14]
- None of the above [15]

---

**Prerequisites**

Skip when *health\_symptoms* (9.1) Excludes 'Diarrhoea [1]'

### 9.2 treatment\_Diarrhoea

Where did you go for treatment for Diarrhoea?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
- Clinic [2]
- Doctor [3]
- Traditional healer [4]
- Self-medicated [5]
- Other [6]

---

**Prerequisites**

Skip when *health\_symptoms* (9.1) Excludes 'Dizziness [2]'

### 9.3 treatment\_Dizziness

Where did you go for treatment for Dizziness?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
-

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Headaches [3]'

9.4 treatment\_Headaches

Where did you go for treatment for Headaches?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Nausea [4]'

9.5 treatment\_Nausea

Where did you go for treatment for Nausea?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Vomiting [5]'

9.6 treatment\_Vomiting

Where did you go for treatment for Vomiting?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Rapid breathing [6]'

9.7 treatment\_Rapid breathing

Where did you go for treatment for Rapid breathing?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
-

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Weakness in the body [7]'

9.8 treatment\_Weakness in the body

Where did you go for treatment for Weakness in the body?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Fatigue [8]'

9.9 treatment\_Fatigue

Where did you go for treatment for Fatigue?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Fatigue [8]'

9.10 treatment\_Fainting

Where did you go for treatment for Fainting?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Fever [10]'

9.11 treatment\_Fever

Where did you go for treatment for Fever?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
-



Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Hot dry skin [11]'

9.12 treatment\_Hot dry skin

Where did you go for treatment for Hot dry skin?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Lack of sweating [12]'

9.13 treatment\_Lack of sweating

Where did you go for treatment for Lack of sweating?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Profuse sweating [13]'

9.14 treatment\_Profuse sweating

Where did you go for treatment for Profuse sweating?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
- 

Prerequisites

Skip when *health\_symptoms (9.1)* Excludes 'Dark coloured urine [14]'

9.15 treatment\_Dark coloured urine

Where did you go for treatment for Dark coloured urine?

Expects multiple selected options (required)

- Did not seek medical treatment at all [1]
  - Clinic [2]
  - Doctor [3]
  - Traditional healer [4]
  - Self-medicated [5]
  - Other [6]
-

**9.16 health\_other**

**Is there another place where you go for treatment?**

Expects a single option response (required)

Yes [1]

No [2]

---

**Prerequisites**

Skip when *health\_other (9.16)* Not Equal 'Yes [1]'

**9.17 health\_other\_specify**

**Please specify where you go for treatment**

(required)

---

## Section 10. Past medical history

### 10.1 medical\_history

Has REPEAT IDX in the past year been diagnosed with any of the following illnesses?

Expects multiple selected options (required)

- Hypertension EVER [1]
- Diabetes EVER [2]
- Heart disease EVER [3]
- Asthma EVER [4]
- Chronic Lung disease EVER [5]
- Pneumonia [6]
- Tuberculosis [7]
- High Cholesterol EVER [8]
- Anaemia [9]
- HIV (EVER) [10]

---

### 10.2 medical\_smoke

Does REPEAT IDX use tobacco?

Expects a single option response (required)

- Yes [1]
- No [2]

Branches

If response Not Equal 'Yes [1]' then skip to *medical\_alcohol* (10.5)

---

### 10.3 medical\_tobacco

What type of tobacco?

Expects multiple selected options (required)

- Cigarettes [1]
- Pipe [2]
- Snuff [3]
- Chewing tobacco [4]
- Hookah pipe [5]
- Other [6]

Prerequisites

Skip when *medical\_tobacco* (10.3) Excludes 'Other [6]'

---

### 10.4 medical\_tobacco\_specify

Please specify what type of tobacco

(required)

---

### 10.5 medical\_alcohol

Does REPEAT IDX drink alcohol?

Expects a single option response (required)

- Yes [1]
  - No [2]
-

## Section 11. Medical history 2

### 11.1 medical\_died

Has anyone in this dwelling died in the last 12 months?

Expects a single option response (required)

Yes [1]

No [2]

Branches

If response Not Equal 'Yes [1]' then skip to *medical\_breastfed (11.5)*

---

### 11.2 medical\_died\_age

If yes, how old was he/she?

Expects a numeric response (required)

### 11.3 medical\_died\_sex

Please state sex

Expects a single option response (required)

Male [1]

Female [2]

---

### 11.4 medical\_died\_cause

What did he/she die of?

(required)

---

### 11.5 medical\_breastfed

How many children are currently being breastfed?

Expects a numeric response (required)

Repeat this section for value of *medical\_breastfed (11.5)*

## Section 12. Breastfeeding

### 12.1 breastfed\_duration

Was REPEAT\_IDX exclusively breastfed in the first six month of his/her life?

Expects a single option response (required)

Yes [1]

No [2]

---

## Section 13. Malaria risk assessment

### 13.1 malaria\_prevention

What is done to prevent a person from getting malaria?

Expects multiple selected options (required)

- Use bed nets [1]
  - Wear protective clothing [2]
  - Use insect repellent [3]
  - Use flying-insect spray indoors [4]
  - Take medicine before and after visiting malaria areas [5]
- 

### 13.2 malaria\_spray

At any time in the past 12 months, have the inside walls of your home been sprayed?

Expects a single option response (required)

- Yes [1]
- No [2]

Branches

If response Equals 'No [2]' then skip to *mosquitoes\_inside (13.5)*

---

### 13.3 malaria\_spray\_wash

Did you wash or clean your walls within 1 month after spraying?

Expects a single option response (required)

- Yes [1]
  - No [2]
- 

### 13.4 malaria\_walls

Since your walls have been sprayed, have you covered the walls with anything such as new paint or plaster?

Expects a single option response (required)

- Yes [1]
  - No [2]
- 

### 13.5 mosquitoes\_inside

What do you use to get rid of mosquitoes that are inside your house?

Expects multiple selected options (required)

- Insecticidal sprays [1]
  - Vaporisation mats [2]
  - Mosquito coils [3]
  - Ceiling fans or air conditioners [4]
  - Nothing [5]
-

### 13.6 mosquitoes\_nets

Do you use mosquito nets in your home?

Expects a single option response (required)

Yes [1]

No [2]

Branches

If response Not Equal 'Yes [1]' then skip to *insect\_repellent (13.9)*

---

### 13.7 mosquitoes\_nets\_condition

If you use nets, what is the condition of the mosquito nets?

Expects a single option response (required)

no holes [1]

1-4 holes [2]

> 5 holes [3]

Unused [4]

---

### 13.8 mosquitoes\_nets\_treated

Do you know if the nets that you used have been treated with chemicals to kill mosquitoes?

Expects a single option response (required)

Yes [1]

No [2]

Don't know [3]

---

### 13.9 insect\_repellent

Do you use insect repellent to stop mosquitoes from biting you?

Expects a single option response (required)

Yes [1]

No [2]

---

### 13.10 dwelling\_water

Is your house within 100m of a marshy area or water body?

Expects a single option response (required)

Yes [1]

No [2]

---

### 13.11 dwelling\_water\_drainage

Does your house have good drainage of rainwater and household water away from the house?

Expects a single option response (required)

Yes [1]

No [2]

---

### 13.12 evening\_out

Do you or any members of your household often go out at night/in the evening or spend time outside your house in the evening?

Expects a single option response (required)

Yes [1]

No [2]

---





## Section 14. Population movement

### 14.1 movement\_travel

Have you or members of the household travelled to another country or province in the past 6 months?

Expects a single option response (required)

Yes [1]

No [2]

Branches

If response Not Equal 'Yes [1]' then skip to *movement\_family (14.5)*

---

### 14.2 movement\_person

Please specify who

Expects a single line text response (required)

### 14.3 movement\_country

If yes, which country/province was visited?

Expects a single line text response (required)

### 14.4 movement\_malaria

Among those who travelled, did they take any medicine to prevent getting malaria?

Expects a single option response (required)

Yes [1]

No [2]

### 14.5 movement\_family

Do you have a friend or family member from another province or country living with you from time to time?

Expects a single option response (required)

Yes [1]

No [2]

Prerequisites

Skip when *movement\_family (14.5)* Not Equal 'Yes [1]'

### 14.6 movement\_family\_province

If yes, which country/province do they come from?

Expects a single line text response (required)

## Section 15. End

15.1 end

This is the end of the questionnaire. Thank you very much for your participation.

---