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| **INTERVIEWER READS**: The following are some basic questions regarding your background to help us know what type of people participated in this study. All the information you provide will be kept confidential and will not be shared with anyone else besides the research study staff. |
|  | What is your gender? | [ ] 1 Female [ ] 0 Male |
|  | What is your date of birth?  | [ ] [ ]  [ ] [ ] [ ]  [ ] [ ]  or dd MMM yyIf unknown, record age: [ ] [ ]  |
| 1.
 | [*For females*] How many children have you had who were alive at birth? [*For males*] How many children have you fathered (that you know of)? | [ ] [ ]  |
|  | How many total children are you currently taking care of (i.e. children, grandchildren, etc.)? | [ ] [ ]  |
|  | What is your ethnic group or tribe? (*mark ethnic group/tribe code*)  | [ ] [ ]  Ethnic Tribe Code Other, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | What is the language most spoken at home? (*mark language code)*  | [ ] [ ]  Language Code Other, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Do you currently earn an income of your own? | [ ] 1 Yes[ ] 0 No 🡪 **If No, go to item 9** |
|  | How do you earn your current income? (*mark all that apply*)  | [ ] 1 Formal employment[ ] 1 Self-employment[ ] 1 Other, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | What is your highest level of education? (*mark one*) | [ ] 1 No schooling[ ] 2 Primary school, not complete[ ] 3 Primary school, complete[ ] 4 Secondary school, not complete[ ] 5 Secondary school, complete[ ] 6 Attended college or university, not complete[ ] 7 Attended college or university, complete |
|  | What is your religion? (*mark one*)  | [ ] 1 Christian[ ] 2 Muslim[ ] 3 Other specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ] 9 None 🡪 **If None, go to item 12** |
|  | How many times a week do you attend religious services? (*mark one*) | [ ] 4 More than once a week[ ] 3 Once a week[ ] 2 Less than once a week[ ] 1 Never |
|  | Name of area/location where you currently live:  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | For how long have you lived in this location/area? (*mark one*) | [ ] [ ]  or [ ] [ ] months years  |
|  | Do you consider this your home? | [ ] 1 Yes[ ] 0 No, *specify*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Do you, or does someone in your family, own the household you are currently living in? | [ ] 1 Yes [ ] 0 No |
|  | How many rooms are in the household you are currently living in? | [ ] [ ]  |
|  | Does your household have:…? [*read options and mark all that apply*] | [ ] 1 Electricity[ ] 1 A radio[ ] 1 A television[ ] 1 A mobile telephone[ ] 1 A non-mobile telephone[ ] 1 A refrigerator[ ] 1 A washing machine[ ] 1 A table[ ] 1 A motor vehicle[ ] 1 A motorcycle[ ] 1 A bicycle |
|  | What kind of toilet facility does your household have? *[mark toilet facility code]* | [ ] [ ]  Toilet Facility Code Other, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | What is the main source of drinking water for members of your household? [*mark water source code]* | [ ] [ ]  Water Source Code Other, specify:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Do you own a mobile phone? | [ ] 1 Yes[ ] 0 No  |
|  | In the past four weeks, how often did you worry that you would not have enough food? [*Read options and mark one*] | [ ] 1 Never[ ] 2 Rarely (once or twice)[ ] 3 Sometimes (3-10 times)[ ] 4 Often (more than 10 times) |

**MTN-032 Demographic Information Form (DEM)**

**Item-Specific Instructions:**

* **Item 2:** If any portion of the date of birth is unknown, record age at time of screening. If age is unknown, record the participant’s best estimate of her age. Do not complete both answers.
* **Item 3:** Record the total number of reported live births, not the total number of pregnancies, or other birth outcomes.
* **Item 4**: Record the total number of children the participant is caring for, including natural children, grandchildren, nieces, nephews, etc. This may be interpreted differently by different people, and may include any children, in the home or otherwise who the participant considers herself to be taking caring of in some way (e.g. financially, physically, emotionally).
* **Item 5:** Record the 2-digit country-specific code below that is associated with the participant’s ethnic group or tribe. If the participant responds with “other,” record, “26”and the participant’s verbatim (word-for-word) response. If the participant identifies with more than one ethnic group or tribe, enter “26 - Other” and specify all the groups identified.

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| **Malawi** | **South Africa** | **Uganda** | **Zimbabwe** |
| 27 – Chewa28 – Lomwe29 – Tumbuka30 – Yao22 – White25 – Other African Tribe26 – Other | 23 – Xhosa 24 – Zulu 11 – Indian10 – Colored22 – White25 – Other African Tribe26 – Other | 01 – Acholi02 – Baganda 03 – Bagisu04 – Bakiga05 – Banyankore 06 – Banyaruanda 07 – Banyoro 08 – Basoga 09 – Batoro | 12 – Iteso 14 – Karamojong16 – Lango 17 – Lugbara 22 – White25 – Other African Tribe26 – Other | 21 – Shona20 – Ndebele22 – White25 – Other African Tribe26 – Other |

* **Item 6:** Record the 2-digit country-specific code below that is associated with the participant’s language. If the participant speaks multiple languages at home, she should specify which language is MOST spoken at home. If the participant responds with “other,” record “99”and the participant’s verbatim (word-for-word) response.

|  |  |  |  |
| --- | --- | --- | --- |
| **Malawi** | **South Africa** | **Uganda** | **Zimbabwe** |
| 08 – Chichewa04 - English99 – Other | 01 – IsiZulu02 – Sesotho03 – IsiXhosa | 04 – English99 – Other | 04 – English05 – Luganda99 – Other | 04 – English06 – Shona | 07 – Ndebele99 – Other |

* **Item 8:** Record whether the participant’s source(s) of income are from formal employment (for example: shop clerk, farmer, seamstress, teacher), self-employment (ex: shop owner, artist, restaurant owner), or other type of employment. If “other, specify” box is marked, record the participant’s verbatim (word-for-word) response on the line. If the participant responds in a language other than English, provide the English translation of the response on the line.
* **Item 9:** If the participant attended or completed a post-secondary diploma or certificate program, mark the “attended college or university, complete” box.
* **Item 13:** Mark either months **or** years. If the participant has lived in the same location for greater than or equal to 12 months, mark response in years. If less than 12 months, mark response in months. If participant responds with years and months, round to the nearest year (ex: 7 years 2 months should be rounded to 7 years).
* **Item 14:** This item intends to determine whether the participant identifies the current location where she lives as her home. It is okay if different participants have differing interpretations of what is meant by “home.” If they do not consider the location specified in item 11 to be their home, record the location/area that the participant considers their home verbatim (word-for-word) in the space provided.
* **Item 16:** Do not count bathrooms as rooms.
* **Item 17:** A washing machine refers to a machine that is used to wash clothing.
* **Item 18:** Record the 2-digit code below to indicate the type of toilet facility used in the household. If ‘other’ is selected, specify type.

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| 01 – Flush or pour flush toilet,02 – Ventilated Improved Pit (VIP) latrine (lid, cement floor, fly trap)  | 03 – Traditional pit latrine (mud floor) 04 – No facility/bush/field 99 – Other |

* **Item 19:** Record the 2-digit code below to indicate the type of water source used in the household. If ‘other’ is selected, specify type.

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| --- | --- |
| 01 – Piped (dwelling/compound)02 – Piped (public/shared)03 – Borehole/well (dwelling/compound) | 04 – Borehole/well (public/shared)05 – Spring/river/pond/dam99 – Other |

**Item 20:** Record whether participant owns her own mobile phone. If she has access to a cell phone or shares one but she doesn’t own it herself, she should respond “No.”