

**LIBERIA MALARIA BEHAVIOR SURVEY  
HOUSEHOLD QUESTIONNAIRE**

**IDENTIFICATION PAGE**

IDENTIFICATION				
Liberia				
University of Liberia – Pacific Institute for Research & Evaluation (UL-PIRE) Africa Center				
TYPE OF PLACE OF RESIDENCE: URBAN ..... 1                      RURAL..... 2                       __				
NAME OF County: _____				
NAME OF District: _____				
Town/community: .....				
CLUSTER NUMBER _____  __ __ __				
HOUSEHOLD NUMBER.....  __ __				
LINE NUMBER OF RESPONDENT IN HOUSEHOLD SCHEDULE .....  __ __				
INTERVIEWER VISITS				
	1	2	3	FINAL VISIT
DATE	_____	_____	_____	DAY             __ __  MONTH         __ __  YEAR         __ __ __
INTERVIEWER'S NAME	_____	_____	_____	INT. NUMBER  __ __ __
RESULT*	_____	_____	_____	RESULT         __
NEXT VISIT      DATE TIME	_____	_____		TOTAL NUMBER OF VISITS =  __
<b>*RESULT CODES</b> <div style="display: flex; justify-content: space-between;"> <div> 1    COMPLETED  2    NOT AT HOME  3    POSTPONED  7    OTHER </div> <div> 4    REFUSED  5    PARTLY COMPLETED  6    INCAPACITATED            <i>(specify)</i> </div> </div>				
SUPERVISOR				
<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>NAME             __ __ </div> </div>				

## LIBERIA MALARIA BEHAVIOR SURVEY : HOUSEHOLD QUESTIONNAIRE

HOUSEHOLD SCHEDULE									
LINE NO.	USUAL RESIDENTS AND VISITORS	SEX	RESIDENCE		AGE	CHILDREN AGES 0-4	LINE NUMBER OF MOTHER	LINE NUMBER OF FATHER	SELECTED FOR INDIVIDUAL INTERVIEW*
1	2	3	4	5	6	7	8	9	10
	Please give me the nick names or first names <b>only</b> of the persons who usually live in your household and guests of the household who stayed here last night, starting with the respondent.	Is (NAME) female or male?	Does (NAME) usually live here?	Did (NAME) stay here last night?	How old is (NAME)?  IF 65 OR MORE, RECORD '65'	CIRCLE LINE NUMBER OF ALL CHILDREN AGES 0-4 (0-59 months of age)	FOR EACH CHILD AGES 0-4, WRITE IN THE LINE NUMBER OF THAT CHILD'S MOTHER.	FOR EACH CHILD AGES 0-4, WRITE IN THE LINE NUMBER OF THAT CHILD'S FATHER	
01		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	01	_ _ _	_ _ _	
02		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	02	_ _ _	_ _ _	
03		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	03	_ _ _	_ _ _	
04		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	04	_ _ _	_ _ _	
05		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	05	_ _ _	_ _ _	
06		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	06	_ _ _	_ _ _	
07		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	07	_ _ _	_ _ _	
08		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	08	_ _ _	_ _ _	
09		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	09	_ _ _	_ _ _	

# LIBERIA MALARIA BEHAVIOR SURVEY : HOUSEHOLD QUESTIONNAIRE

10		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	10	_ _ _	_ _ _	
11		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	11	_ _ _	_ _ _	
12		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	12	_ _ _	_ _ _	
13		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	13	_ _ _	_ _ _	
14		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	14	_ _ _	_ _ _	
15		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	15	_ _ _	_ _ _	
16		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	16	_ _ _	_ _ _	
17		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	17	_ _ _	_ _ _	
18		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	18	_ _ _	_ _ _	
19		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	19	_ _ _	_ _ _	
20		F = 1 M = 2	Y = 1 N = 2	Y = 1 N = 2	_ _ _	20	_ _ _	_ _ _	

CHECK COLUMN 6:

ALL WOMEN AGED 18 – 49 YEARS WILL BE SELECTED FOR INDIVIDUAL INTERVIEW

IN ONE THIRD OF HOUSEHOLDS, IN ADDITION TO ALL ELIGIBLE WOMEN, THE HUSBAND OF ONE OF THE ELIGIBLE WOMEN, AGED 18 – 59 YEARS, WILL BE RANDOMLY SELECTED FOR INDIVIDUAL INTERVIEW.

# LIBERIA MALARIA BEHAVIOR SURVEY : HOUSEHOLD QUESTIONNAIRE

## Household characteristics

BACKGROUND INFORMATION: HOUSEHOLD CHARACTERISTICS					
NO.	QUESTION	CODING CATEGORIES			SKIP TO
101.	How many rooms do members of this household usually use for sleeping?	NUMBER OF ROOMS.....__ __			
102.	<p>Main material of the dwelling floor.</p> <p>RECORD OBSERVATION.</p> <p>IF DIFFERENT ROOMS HAVE DIFFERENT FLOOR MATERIAL, CIRCLE THE CODE FOR THE MOST COMMON, I.E., WHAT COVERS THE LARGEST AREA.</p>	<p><b>NATURAL FLOOR</b></p> <p>EARTH / SAND/MUD ..... 11</p> <p>DUNG ..... 12</p> <p><b>RUDIMENTARY FLOOR</b></p> <p>WOOD PLANKS..... 21</p> <p>PALM/BAMBOO ..... 22</p> <p><b>FINISHED FLOOR</b></p> <p>PARQUET OR POLISHED WOOD ..... 31</p> <p>VINYL OR ASPHALT STRIPS..... 32</p> <p>CERAMIC TILES..... 33</p> <p>CONCRETE, CEMENT ..... 34</p> <p><b>OTHER (specify)..... 96</b></p>			
103.	<p>Main material of the roof.</p> <p>Record observation.</p> <p>If observation is not possible, ask the respondent to determine the material of the roof.</p>	<p><b>NATURAL ROOFING</b></p> <p>NO ROOF ..... 11</p> <p>THATCH / PALM LEAF ..... 12</p> <p>SOD ..... 13</p> <p><b>RUDIMENTARY ROOFING</b></p> <p>RUSTIC MATS ..... 21</p> <p>PALM / BAMBOO ..... 22</p> <p>WOOD PLANKS..... 23</p> <p>CARDBOARD ..... 24</p> <p><b>FINISHED ROOFING</b></p> <p>ZINC, METAL ..... 31</p> <p>WOOD ..... 32</p> <p>CALAMINE / CEMENT FIBER..... 33</p> <p>CONCRETE, CEMENT ..... 34</p> <p>ASBESTOS SHEETS, SHINGLES ..... 35</p> <p><b>OTHER (specify)..... 96</b></p>			
104.	<p>Please tell me how far away from your house are the following and how long does it take to get there by walking and by car or bus?</p> <p>FOR THE TIME IN MINUTES WALKING, PUT 9998 IF THE PERSON SAYS IT IS TOO FAR TO WALK;</p> <p>FOR ALL MODALITIES, IF THE PERSON DOES NOT KNOW, PUT 9999</p>	<p><b>STRUCTURE</b></p> <p><b>NEAREST GOVT HOSPITAL</b></p> <p><b>NEAREST GOVT HEALTH CENTER</b></p> <p><b>NEAREST GOVT CLINIC</b></p> <p><b>NEAREST PRIVATE HOSPITAL/ CLINIC</b></p>	<p><b>DISTANCE IN KILOMETERS</b></p>	<p><b>TIME IN MINUTES WALKING</b></p>	<p><b>TIME IN MINUTES BY CAR/BUS</b></p>

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		NEAREST PRIVATE HEALTH CENTER			
		NEAREST PRIVATE NURSING/ MATERNITY HOME			
		NEAREST PHARMACY			
		NEAREST CHEMIST/PMV			
105.	<p><i>Main material of the exterior walls.</i></p> <p><i>Record observation.</i></p>	<p><b>NATURAL WALLS</b></p> <p>NO WALLS..... 11</p> <p>CANE / PALM / TRUNKS..... 12</p> <p>DIRT ..... 13</p> <p><b>RUDIMENTARY WALLS</b></p> <p>BAMBOO WITH MUD ..... 21</p> <p>STONE WITH MUD ..... 22</p> <p>UNCOVERED ADOBE..... 23</p> <p>PLYWOOD ..... 24</p> <p>CARDBOARD ..... 25</p> <p>REUSED WOOD ..... 26</p> <p><b>FINISHED WALLS</b></p> <p>CEMENT..... 31</p> <p>STONE WITH LIME/CEMENT ..... 32</p> <p>BRICKS ..... 33</p> <p>CEMENT BLOCK..... 34</p> <p>COVERED ADOBE ..... 35</p> <p>WOOD PLANKS / SHINGLES ..... 36</p> <p><b>OTHER (specify)..... 96</b></p>			
106.	Are the eaves of the house or building occupied by this household open or closed?	<p>COMPLETELY OPEN .....1</p> <p>PARTIALLY OPEN .....2</p> <p>CLOSED .....4</p>			
107.	Does the part of the house or building occupied by the household have a ceiling?	<p>NO, NONE ..... 1</p> <p>YES, PARTIAL/POORLY SEALED/WORN OUT ..... 2</p> <p>YES, COMPLETE AND SEALED ..... 3</p>			
108.	Are the windows and any airbrick gaps in the house or building boarded up, glazed or screened against mosquito entry with netting?	<p>YES, COMPLETELY .....1</p> <p>YES, COMPLETE, BUT WITH HOLES.....2</p> <p>YES, INCOMPLETE OR BADLY DAMAGED .....3</p> <p>NO, ABSENT .....4</p>	➔ 110		
109.	What is the <u>primary</u> material used to board up, glaze or screen windows or airbrick gaps?	<p>WOODEN BOARDS ..... 1</p> <p>GLASS ..... 2</p> <p>METAL NETTING..... 3</p> <p>FABRIC NETTING..... 4</p> <p>PLASTIC NETTING ..... 5</p> <p>POLYESTER..... 6</p>			

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110.	Does your household have electricity?	YES..... 1 NO ..... 2																									
111.	Does your household have the following items which are in good working order?  ASK ABOUT EACH ITEM SEPARATELY.  [*add additional items, as applicable]	<table style="width: 100%; border: none;"> <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>RADIO .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>TELEVISION .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>COMPUTER .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>REFRIGERATOR .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>ACCESS TO INTERNET .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>ELECTRIC FAN.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>AIR CONDITIONER.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>		YES	NO	RADIO .....	1	2	TELEVISION .....	1	2	COMPUTER .....	1	2	REFRIGERATOR .....	1	2	ACCESS TO INTERNET .....	1	2	ELECTRIC FAN.....	1	2	AIR CONDITIONER.....	1	2	
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112.	Does any member of your household own:  ASK ABOUT EACH ITEM SEPARATELY  [*add additional items, as applicable]	<table style="width: 100%; border: none;"> <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>WATCH .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>SIMPLE MOBILE PHONE.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>SMARTPHONE/TABLET .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>BICYCLE.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>MOTORCYCLE / SCOOTER .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>CAR / TRUCK / VAN .....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> <tr> <td>BOAT WITH MOTOR.....</td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </tbody> </table>		YES	NO	WATCH .....	1	2	SIMPLE MOBILE PHONE.....	1	2	SMARTPHONE/TABLET .....	1	2	BICYCLE.....	1	2	MOTORCYCLE / SCOOTER .....	1	2	CAR / TRUCK / VAN .....	1	2	BOAT WITH MOTOR.....	1	2	
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BOAT WITH MOTOR.....	1	2																									
113.	Does any member of your household own agricultural land?	YES..... 1 NO ..... 2	→ 115																								
114.	How many hectares of agricultural land do members of this household own? <i>If less than 1, record '00'.</i>	HECTARES ..... ____ 95 OR MORE ..... 95 DON'T KNOW..... 98																									
115.	Does this household own any livestock, herds, other farm animals, or poultry?	YES..... 1 NO ..... 2	→ 117																								
116.	How many of the following animals does this household have?  ASK FOR EACH TYPE OF ANIMALS SEPARATELY  **[include additional animals as applicable]  <i>If none, record '00'. If 95 or more, record '95'.</i> <i>If unknown, record '98'.</i>	<table style="width: 100%; border: none;"> <thead> <tr> <th style="width: 80%;"></th> <th style="width: 20%; text-align: center;">NUMBER</th> </tr> </thead> <tbody> <tr> <td>COWS .....</td> <td style="text-align: center;">____</td> </tr> <tr> <td>OTHER CATTLE .....</td> <td style="text-align: center;">____</td> </tr> <tr> <td>HORSES.....</td> <td style="text-align: center;">____</td> </tr> <tr> <td>GOATS .....</td> <td style="text-align: center;">____</td> </tr> <tr> <td>SHEEP .....</td> <td style="text-align: center;">____</td> </tr> <tr> <td>CHICKENS OR OTHER POULTRY.....</td> <td style="text-align: center;">____</td> </tr> <tr> <td>PIGS.....</td> <td style="text-align: center;">____</td> </tr> </tbody> </table>		NUMBER	COWS .....	____	OTHER CATTLE .....	____	HORSES.....	____	GOATS .....	____	SHEEP .....	____	CHICKENS OR OTHER POULTRY.....	____	PIGS.....	____									
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117.	QUESTIONS 118 – 122 ARE ONLY RELEVANT IN AREAS WITH IRS PROGRAM AND HAVE BEEN DELETED																										
123.	When was the last time that any house in this community was sprayed?	LESS THAN THREE MONTHS AGO..... 1 3 – 5 MONTHS AGO..... 2 6 – 11 MONTHS AGO..... 3 ONE YEAR OR MORE ..... 4 NEVER..... 5 DON'T KNOW..... 8																									

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124.	Does your household have any mosquito nets that can be used while sleeping?	YES.....1 NO .....2	➔ 125B
125.	How many mosquito nets does your household have?	NUMBER OF MOSQUITO NETS .....  __ __	
125A.	Did your household receive mosquito nets from the last mass distribution campaign?	YES.....1 NO ..... 2 DON'T KNOW ..... 8	
125B.	How many mosquito nets did your household receive from the last mass campaign?	NUMBER OF MOSQUITO NETS .....  __ __	

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## Net roster

ITN: NET ROSTER				
135. Ask the respondent to show you all the nets in the household. If more than 3 nets, use additional questionnaire.				
		1 <sup>ST</sup> NET	2 <sup>ND</sup> NET	3 <sup>RD</sup> NET
A.	INDICATE WHETHER YOU ARE ABLE TO PHYSICALLY OBSERVE THE NET OR NOT.	OBSERVED ..... 1 NOT OBSERVED ..... 2	OBSERVED ..... 1 NOT OBSERVED ..... 2	OBSERVED ..... 1 NOT OBSERVED ..... 2
B.	How many months ago did your household get the bed net? <i>If less than one month, record '00'.</i>	MONTHS AGO ..... > 36 MONTHS AGO ..... 95 DK / NOT SURE ..... 98	MONTHS AGO ..... > 36 MONTHS AGO ..... 95 DK / NOT SURE ..... 98	MONTHS AGO ..... > 36 MONTHS AGO ..... 95 DK / NOT SURE ..... 98
C.	Observe or ask the brand/type of bed net. <i>If brand is unknown and you cannot observe the net, show pictures of typical net brand/types to the respondent</i> [THE RESPONSE OPTIONS TO THIS QUESTIONS SHOULD BE ADAPTED TO REFLECT LOCALLY AVAILABLE BED NETS]	<b>ITN</b> PERMANET ..... 10 DAWA PLUS ..... 11 OLYSET ..... 12 NETPROTECT ..... 13 INTERCEPTOR ..... 14 DURANET ..... 15 YORKKOL ..... 16 MAGNET ..... 17 ROYAL SENTRY ..... 18 OTHER ITN BRAND ..... 19 UNTREATED NET ..... 31 OTHER BRAND ..... 96 <i>(specify)</i> DON'T KNOW BRAND ..... 98	<b>ITN</b> PERMANET ..... 10 DAWA PLUS ..... 11 OLYSET ..... 12 NETPROTECT ..... 13 INTERCEPTOR ..... 14 DURANET ..... 15 YORKKOL ..... 16 MAGNET ..... 17 ROYAL SENTRY ..... 18 OTHER ITN BRAND ..... 19 UNTREATED NET ..... 31 OTHER BRAND ..... 96 <i>(specify)</i> DON'T KNOW BRAND ..... 98	<b>ITN</b> PERMANET ..... 10 DAWA PLUS ..... 11 OLYSET ..... 12 NETPROTECT ..... 13 INTERCEPTOR ..... 14 DURANET ..... 15 YORKKOL ..... 16 MAGNET ..... 17 ROYAL SENTRY ..... 18 OTHER ITN BRAND ..... 19 UNTREATED NET ..... 31 OTHER BRAND ..... 96 <i>(specify)</i> DON'T KNOW BRAND ..... 98
D.	Did you get the net through a [local name of] mass distribution campaign, during an antenatal care visit, or during an immunization visit? [Revise responses 1-3 per local context]	YES, NAME OF CAMPAIGN. 1→H YES, ANC ..... 2→H YES, IMMUNIZATION VISIT 3→H  NO, THE NET IS FROM ANOTHER SOURCE ..... 4	YES, NAME OF CAMPAIGN .1→H YES, ANC ..... 2→H YES, IMMUNIZATION VISIT .3→H  NO, THE NET IS FROM ANOTHER SOURCE ..... 4	YES, NAME OF CAMPAIGN .1→H YES, ANC ..... 2→H YES, IMMUNIZATION VISIT. 3→H  NO, THE NET IS FROM ANOTHER SOURCE ..... 4



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E.	Where did you get the net?	GOVERNMENT HEALTH FACILITY..... 01 PRIVATE HEALTH FACILITY ..... 02 PHARMACY..... 03 SHOP / MARKET / STREET VENDOR ..... 04 COMMUNITY HEALTH WORKER ..... 05 RELIGIOUS INSTITUTION..... 06 SCHOOL..... 07 FRIEND/RELATIVE ..... 08 OTHER ..... 96 DK ..... 98	GOVERNMENT HEALTH FACILITY..... 01 PRIVATE HEALTH FACILITY..... 02 PHARMACY..... 03 SHOP / MARKET / STREET VENDOR ..... 04 COMMUNITY HEALTH WORKER..... 05 RELIGIOUS INSTITUTION ..... 06 SCHOOL..... 07 FRIEND/RELATIVE ..... 08 OTHER ..... 96 DK ..... 98	GOVERNMENT HEALTH FACILITY .....01 PRIVATE HEALTH FACILITY .....02 PHARMACY .....03 SHOP / MARKET / STREET VENDOR .....04 COMMUNITY HEALTH WORKER .....05 RELIGIOUS INSTITUTION .....06 SCHOOL.....07 FRIEND/RELATIVE.....08 OTHER.....96 DK.....98
F.	Did you pay any money for this net?	YES..... 1 NO.....2→J DK / NOT SURE..... 8	YES..... 1 NO ..... 2→J DK / NOT SURE..... 8	YES.....1 NO ..... 2→J DK / NOT SURE .....8
G.	How much did you pay? (Record in local currency)	COST..... _ _ _ _ _	COST..... _ _ _ _ _	COST ..... _ _ _ _ _
H.	Did anyone sleep under this bed net last night?	YES..... 1 NO.....2→M DK / NOT SURE..... 8	YES..... 1 NO ..... 2→M DK / NOT SURE..... 8	YES.....1 NO ..... 2→M DK / NOT SURE .....8
I.	Was the net used indoors or outdoors last night?	INDOORS ..... 1 OUTDOORS..... 2	INDOORS..... 1 OUTDOORS..... 2	INDOORS.....1 OUTDOORS .....2
J.	Who slept under this bed net last night?  <i>Record the person's line number from the LIST OF HOUSEHOLD MEMBERS.</i>  <i>If someone not in the LIST OF HOUSEHOLD MEMBERS slept under the bed net, record '00' for LINE NUMBER.</i>  <i>Go to "L" after entering name/line # of the last user</i>	NAME #1 _____  LINE NUMBER ..... _ _  NAME #2 _____  LINE NUMBER ..... _ _  NAME #3 _____  LINE NUMBER ..... _ _  NAME #4 _____  LINE NUMBER ..... _ _	NAME #1 _____  LINE NUMBER ..... _ _  NAME #2 _____  LINE NUMBER ..... _ _  NAME #3 _____  LINE NUMBER ..... _ _  NAME #4 _____  LINE NUMBER ..... _ _	NAME #1 _____  LINE NUMBER..... _ _  NAME #2 _____  LINE NUMBER..... _ _  NAME #3 _____  LINE NUMBER..... _ _  NAME #4 _____  LINE NUMBER..... _ _

## LIBERIA MALARIA BEHAVIOR SURVEY : HOUSEHOLD QUESTIONNAIRE

K.	<p>What is the <u>main</u> reason that nobody slept under this bed net last night?</p> <p><b>RECORD ONE ANSWER</b></p>	<p>NO MOSQUITOES..... 1</p> <p>THERE IS NO MALARIA..... 2</p> <p>TOO HOT ..... 3</p> <p>DON'T LIKE SMELL..... 4</p> <p>FEEL 'CLOSED IN' ..... 5</p> <p>NET TOO OLD OR TORN..... 6</p> <p>NET TOO DIRTY ..... 7</p> <p>NET NOT AVAILABLE LAST NIGHT (WASHING) ..... 8</p> <p>USUAL USER DID NOT SLEEP HERE LAST NIGHT..... 9</p> <p>NET WAS NOT NEEDED LAST NIGHT.....10</p> <p>NO PLACE TO HANG IT..... 11</p> <p>OTHER (<i>specify</i>).....96</p> <p>DON'T KNOW.....98</p>	<p>NO MOSQUITOES.....1</p> <p>THERE IS NO MALARIA .....2</p> <p>TOO HOT .....3</p> <p>DON'T LIKE SMELL.....4</p> <p>FEEL 'CLOSED IN' .....5</p> <p>NET TOO OLD OR TORN.....6</p> <p>NET TOO DIRTY .....7</p> <p>NET NOT AVAILABLE LAST NIGHT (WASHING) .....8</p> <p>USUAL USER DID NOT SLEEP HERE LAST NIGHT.....9</p> <p>NET WAS NOT NEEDED LAST NIGHT.....10</p> <p>NO PLACE TO HANG IT ..... 11</p> <p>OTHER (<i>specify</i>) .....96</p> <p>DON'T KNOW.....98</p>	<p>NO MOSQUITOES ..... 1</p> <p>THERE IS NO MALARIA..... 2</p> <p>TOO HOT..... 3</p> <p>DON'T LIKE SMELL ..... 4</p> <p>FEEL 'CLOSED IN' ..... 5</p> <p>NET TOO OLD OR TORN ..... 6</p> <p>NET TOO DIRTY..... 7</p> <p>NET NOT AVAILABLE LAST NIGHT (WASHING) ..... 8</p> <p>USUAL USER DID NOT SLEEP HERE LAST NIGHT ..... 9</p> <p>NET WAS NOT NEEDED LAST NIGHT ..... 10</p> <p>NO PLACE TO HANG IT ..... 11</p> <p>OTHER (<i>specify</i>)..... 96</p> <p>DON'T KNOW ..... 98</p>
L.	<p>Where was the net found? (Reference observation of net location in the HH)</p>	<p>HANGING LOOSE OVER SLEEPING PLACE .....1→P</p> <p>HANGING AND FOLDED UP AND TIED .....2→P</p> <p>NOT HANGING BUT NOT STORED..... 3</p> <p>STORED AWAY UNPACKED ..... 4</p> <p>STORED AWAY STILL IN PACKAGE ..... 5</p>	<p>HANGING LOOSE OVER SLEEPING PLACE.....1→P</p> <p>HANGING AND FOLDED UP AND TIED .....2→P</p> <p>NOT HANGING BUT NOT STORED .....3</p> <p>STORED AWAY UNPACKED .....4</p> <p>STORED AWAY STILL IN PACKAGE .....5</p>	<p>HANGING LOOSE OVER SLEEPING PLACE..... 1→P</p> <p>HANGING AND FOLDED UP AND TIED..... 2→P</p> <p>NOT HANGING BUT NOT STORED ..... 3</p> <p>STORED AWAY UNPACKED..... 4</p> <p>STORED AWAY STILL IN PACKAGE ..... 5</p>
M.	<p>What is the reason the net is not hanging for sleeping</p>	<p>NET TOO DIFFICULT TO HANG . A</p> <p>THE NET IS TOO SHORT ..... B</p> <p>NO SPACE TO HANG NET ..... C</p> <p>NO ONE TO HANG NET ..... D</p> <p>WILL HANG IT LATER .....E</p> <p>WE ONLY HANG IT AT NIGHT ....F</p> <p>SAVING A NEW NET UNTIL OTHERS ARE WORN ..... G</p> <p>OTHER ..... X</p> <p>DON'T KNOW.....Y</p>	<p>NET TOO DIFFICULT TO HANG . A</p> <p>THE NET IS TOO SHORT .....B</p> <p>NO SPACE TO HANG NET .....C</p> <p>NO ONE TO HANG NET ..... D</p> <p>WILL HANG IT LATER .....E</p> <p>WE ONLY HANG IT AT NIGHT ....F</p> <p>SAVING A NEW NET UNTIL OTHERS ARE WORN ..... G</p> <p>OTHER .....X</p> <p>DON'T KNOW.....Y</p>	<p>NET TOO DIFFICULT TO HANG..A</p> <p>THE NET IS TOO SHORT..... B</p> <p>NO SPACE TO HANG NET..... C</p> <p>NO ONE TO HANG NET .....D</p> <p>WILL HANG IT LATER..... E</p> <p>WE ONLY HANG IT AT NIGHT ... F</p> <p>SAVING A NEW NET UNTIL OTHERS ARE WORN.....G</p> <p>OTHER..... X</p> <p>DON'T KNOW ..... Y</p>

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N.	How many nights has this net been used in the last week?	ALL NIGHTS..... 1 MOST NIGHTS (5-6)..... 2 SOME NIGHTS (1-4)..... 3 NOT USED LAST WEEK..... 4 NET IS NOT USED AT ALL ..... 5 DON'T KNOW.....98	ALL NIGHTS.....1 MOST NIGHTS (5-6).....2 SOME NIGHTS (1-4).....3 NOT USED LAST WEEK.....4 NET IS NOT USED AT ALL .....5 DON'T KNOW.....98	ALL NIGHTS ..... 1 MOST NIGHTS (5-6) ..... 2 SOME NIGHTS (1-4) ..... 3 NOT USED LAST WEEK ..... 4 NET IS NOT USED AT ALL..... 5 DON'T KNOW ..... 98
O.	What is the color of the net?	WHITE .....1 BLUE.....2 GREEN .....3 BLACK.....4 OTHER COLOR.....6 (SPECIFY)	WHITE .....1 BLUE.....2 GREEN .....3 BLACK.....4 OTHER COLOR.....6 (SPECIFY)	WHITE..... 1 BLUE ..... 2 GREEN..... 3 BLACK ..... 4 OTHER COLOR ..... 6 (SPECIFY)
P.	Has this net ever been washed?	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8 IF 2 OR 8 →V	YES .....1 NO .....2 DON'T KNOW.....8 IF 2 OR 8 →V	YES ..... 1 NO ..... 2 DON'T KNOW ..... 8 IF 2 OR 8 →V
Q.	How many times has this net been washed in the last six months? IF NONE, ENTER 00	NUMBER OF TIMES .....  __ __	NUMBER OF TIMES .....  __ __	NUMBER OF TIMES.....  __ __
R.	For the last wash, what was used in addition to water?	BAR SOAP ..... 1 DETERGENT ..... 2 BLEACH..... 3 MIX (specify) ..... 4 NOTHING..... 5	BAR SOAP .....1 DETERGENT .....2 BLEACH.....3 MIX (specify) .....4 NOTHING.....5	BAR SOAP..... 1 DETERGENT..... 2 BLEACH ..... 3 MIX (specify)..... 4 NOTHING ..... 5
S.	Where was the net dried	OUTSIDE IN THE SHADE ..... 1 OUTSIDE IN THE SUN..... 2 INSIDE..... 3 OTHER (specify)..... 5	OUTSIDE IN THE SHADE.....1 OUTSIDE IN THE SUN.....2 INSIDE .....3 OTHER (specify) .....5	OUTSIDE IN THE SHADE ..... 1 OUTSIDE IN THE SUN ..... 2 INSIDE ..... 3 OTHER (specify) ..... 5
T.	<i>Is there another net? Probe for any nets not currently used or in storage.</i>	YES ..... 1 ♡ Next Net NO..... 2 ♡ End	YES..... 1 ♡ Next Net NO..... 2 ♡ End	YES.....1 ♡ Next Net NO .....2 ♡ End