

Respondent name: _____ Line number: _____ Household number: _____ Bari serial number: _____

Section 1: Household Schedule. **List the people that usually sleep and take meals in this household below.**

HR1	HR2	HR3	HR4	HR5	HR6	HR7	HR8	HR9	HR10	HR11	HR12	HR13	HR14a	HR14b
HH Member	Name	Relation-ship to head (codes below)	Gender 1 = male 2 = female	Age in years	Age in months (if less than two years)	If female ages 18 to 49 or child under six years old (888 = not available to be measured)		If age 10 or older, marital status (codes below)	HR1 line number for spouse (00 is spouse not in household)	Kinship between spouses? (codes below)	Highest education level completed (see codes below)	Father residing in bari? 1 = yes 2 = no (>> HR15) 3 = deceased (>> HR15)	Enter father's code, then >> HR16	
						Height (cm)	Weight (kg)						HH number	line number
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														

Code for relationship with household head (HR3)		Marital Status (HR9)		Type Of Kinship Code (HR11)		Education Code (HR12)	
01= male head	10= Brother/sister-in-law	1= Never married		The husband is...		0=enrolled in school, but has not completed grade 1 yet	
02= female head	11= Paternal uncle/aunt	2= Currently married		01= Father's own brother's son/daughter		1-9=Grades completed	
03= husband/wife	12= Paternal/maternal Nephew/niece	3= Divorced		02= Father's own sister's son/Mother's own brother's daughter		10=SSC	
04= Son/daughter	13= Maternal aunt-uncle	4= Widower or widow		03= Mother's own brother's son/father's own sisters daughter		12=HSC	
05= Daughter-in-law/son-in-law	14= Foster child/step child	5= Separated		04= Mother's own sister's son/daughter		14=B.A./B.Sc./B.Com	
06= Grand son/daughter	15= Servant/cleric/lodging teacher			05= Second cousin		16=Post B.A.	
07= Parents	96= Others (specify)			06= Other relative (specify)		17= Doctor/engineer /advocate	
08= Father/mother-in-law				07= No kinship		98 = never attended school	
09= Brother/sister				08= Refuse		DK = don't know	
				97= Don't know			

HR1	HR2	HR3	HR4	HR5	HR6	HR7	HR8	HR9	HR10	HR11	HR12	HR13	HR14a	HR14b
HH Member	Name	Relation-ship to head (codes below)	Gender 1 = male 2 = female	Age in years	Age in months (if less than two years)	If female 18+ years old or child under six years old (888 = not available to be measured)	Height (cm)	Weight (kg)	If age 10 or older, marital status (codes below)	HR1 line number for spouse	Kinship between spouses? (codes below)	Highest education level completed (see codes below)	Father residing in bari? 1 = yes 2 = no (>> HR15)	Enter father's code, then >> HR16
						HH number								line number
11														
12														
13														
14														
15														
16														
17														
18														
19														
20														

Code for relationship with household head (HR3)	Marital Status (HR9)	Type Of Kinship Code (HR11)	Education Code (HR12)	
01= male head 02= female head 03= Son/daughter 04= Daughter-in-law/son-in-law 05= Grand son/daughter 06= Parents 07= Father/mother-in-law 08= Brother/sister	09= Brother/sister-in-law 10= Paternal uncle/aunt 11= Paternal/maternal Nephew/niece 12= Maternal aunt-uncle 13= Foster child/step child 14= Servant/cleric/lodging teacher 96= Others (specify)	1= Never married 2= Currently married 3= Divorced 4= Widower or widow 5= Separated	The spouse is... 01= Father's own brother's son/daughter 02= Father's own sister's son/Mother's own brother's daughter 03= Mother's own brother's son/father's own sisters daughter 04= Mother's own sister's son/daughter 05= Second cousin 06= Other relative (specify) 07= No kinship 08= Refuse 97= Don't know	0=enrolled in school, but has not completed grade 1 yet 1-9=Grades completed 10=SSC 12=HSC 14=B.A./B.Sc./B.Com 16=Post B.A. 17= Doctor/engineer /advocate 98 = never attended school DK = don't know

	HR15	HR16	HR17a	HR17b	HR18	HR19	HR20	HR21	HR22	HR23	HR24	HR25a	HR25b	HR26	H27
Member	Father's highest education achieved (see codes below)	Mother residing in bari? 1 = yes 2 = no (if no >> HR18) 3 = deceased (>> HR18)	Enter mother's code, then >> HR19 HH number Line number		Mother's highest education achieved (see codes below)	Where was [name] born? (see codes below)	Thana code (if answered 4 to question HR19) 1=Dharmai 2=Savar 3 = Kaliakur 4 = Gazipur 5 = other thana	District code (if answered 6 to question HR19)	How many years has [name] lived in this village? (years) (code NA if HR19 = 1 or 2)	(for members ages 8 and older) Does [name] work outside of home, for wages? 1 = yes (>> HR26) 2 = no	Has [name] ever worked outside the home? 1 = yes 2 = no (if no >> next line)	At what ages did [name] work outside the home? (now go to next line) Age began Age stopped	Does [name] work in a garment factory? 1 = yes (>> HR37) 2 = no	What type of industry does [name] work in? (use same codes as DHS)	
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
Education Code (HR15, HR18)			Location Code (HR19)			District Codes (HR21)									
0=enrolled in school, but has not completed grade 1 yet 1-9=Grades completed 10=SSC 12=HSC 14=B.A./B.Sc./B.Com 16=Post B.A. 17= Doctor/engineer /advocate 98 = never attended school DK = don't know			1 = this bari 2 = different bari but same village 3 = different village but same thana 4 = different thana but same district (other than Dhaka city) 5 = Dhaka city 6 = outside district but same country 7 = different country			1 Bagerhat 29 Faridpur 48 Kishoreganj 65 Narail 81 Rajshahi 4 Bandarban 30 Feni 49 Kurigram 67 82 Rajbari 6 Barguna 32 Gaibandah 50 Kushtia 68 Narayanganj 84 Rangamati 9 Barisal 33 Gazipur 51 Lakshmipur 69 Narsingdi 85 Rangpur 10 Bhola 35 Gopalganj 52 Lalmonirhat 69 Natore 86 Shariatpur 12 Bogra 36 Habiganj 54 Madaripur 70 Nawabganj 87 Satkhira 13 Brahmanbaria 38 Joypurhat 55 Magura 72 Netrokona 88 Sirajgonj 15 Chandpur 39 Jamalpur 56 Manikganj 73 Nilphamari 89 Sherpur 16 Comilla 41 Jessore 57 Meherpur 75 Noakhali 90 Sunamganj 18 Chittagong 42 Jalokati 58 Maulvibazar 76 Pabna 91 Sylhet 19 Chuadanga 44 Jhenaidah 59 Munshiganj 77 Panchagarh 93 Tangail 22 Cox's Bazaar 46 Khagrachhari 61 Mymensingh 78 Patuakhali 94 Tahkurgaon 26 Dhaka 47 Khulna 64 Naogaon 79 Pirojpur									

		27 Dinajpur				
--	--	-------------	--	--	--	--

	HR15	HR16	HR17a	HR17b	HR18	HR19	HR20	HR21	HR22	HR23	HR24	HR25a	HR25b	HR26	H27
Member	Father's highest education achieved (see codes below)	Mother residing in bari? 1 = yes 2 = no (if no >> HR18)	Enter mother's code, then >> HR19 HH number Line number		Mother's highest education achieved (see codes below)	Where was [name] born? (see codes below)	Thana code (if answered 4 to question HR19) 1=Dharmai 2=Dohar 3 = Keraniganj 4 = Keraniganj 5 = Nawabganj	District code (if answered 6 to question HR19)	In what year did [name] move to this village? (code NA if HR19 = 1 or 2)	(for members ages 8 and older) Does [name] work outside of home, for wages? 1 = yes (>> HR26) 2 = no	Has [name] ever worked outside the home? 1 = yes 2 = no (if no >> next line)	At what ages did [name] work outside the home? (now go to next line) Age began Age stopped		Does [name] work in a garment factory? 1 = yes (>> HR37) 2 = no	What type of industry does [name] work in? (use same codes as DHS)
11															
12															
13															
14															
15															
16															
17															
18															
19															
20															
Education Code (HR15, HR18)			Location Code (HR19)			District Codes (HR21)									
0=enrolled in school, but has not completed grade 1 yet 1-9=Grades completed 10=SSC 12=HSC 14=B.A./B.Sc./B.Com 16=Post B.A. 17= Doctor/engineer /advocate 98 = never attended school DK = don't know			1 = this bari 2 = different bari but same village 3 = different village but same thana 4 = different thana but same district (other than Dhaka city) 5 = Dhaka city 6 = outside district but same country 7 = different country			1 Bagerhat 29 Faridpur 4 Bandarban 30 Feni 6 Barguna 32 Gaibandah 9 Barisal 33 Gazipur 10 Bhola 35 Gopalganj 12 Bogra 36 Habiganj 13 Brahmanbaria 38 Joypurhat 15 Chandpur 39 Jamalpur 18 Chittagong 41 Jessore 19 Chuadanga 42 Jalokati 22 Cox's Bazaar 44 Jhenaidah 26 Dhaka 46 Khagrachhari 27 Dinajpur 47 Khulna 48 Kishoreganj 65 Narail 49 Kurigram 67 50 Kushtia Narayanganj 51 Lakshmipur 68 Narsingdi 52 Lalmonirhat 69 Natore 54 Madaripur 70 Nawabganj 55 Magura 72 Netrokona 56 Manikganj 73 Nilphamari 57 Meherpur 75 Noakhali 58 Maulvibazar 76 Pabna 59 Munshiganj 77 Panchagarh 61 Mymensingh 78 Patuakhali 64 Naogaon 79 Pirojpur 81 Rajshahi 82 Rajbari 84 Rangamati 85 Rangpur 86 Shariatpur 87 Satkhira 88 Sirajgonj 89 Sherpur 90 Sunamganj 91 Sylhet 93 Tangail 94 Tahkurgaon									

Respondent name: _____ Line number: _____ Household number: _____ Bari serial number: _____

Section 2: Kinship

Skip if respondent is not male head.

HKIN1	Do you think marrying within the family affects the general health of the children produced, or is there no effect on this?	1 = More adverse effect 2 = Less adverse effect .. 3 = No effect .. 4 = Don't know .. 8 = God knows ..	HKIN2	Do you think marrying within the family makes the marriage work better or worse, or is there no effect on this?	1 = Better .. 2 = Worse .. 3 = No effect .. 4 = Don't know .. 8 = God knows ..
HKIN3	Do you think marrying within the family affects the intelligence of the children produced, is there no effect on this?	1 = More intelligent .. 2 = Less intelligent .. 3 = No effect .. 4 = Don't know .. 8 = God knows ..	HKIN4	Do you think marrying within the family improves your relationship with your in-laws?	1 = Better .. 2 = Worse .. 3 = No effect .. 4 = Don't know .. 8 = God knows ..
HKIN5	What are the other positive effects of marrying within the family? (circle all that apply)	0 = don't know/can't think of any A = Lower dowry B = Don't have to split inherited property C = Child gets more care from grandparents on both sides Z = other: specify...	HKIN6	What are the other negative effects of marrying within the family? (circle all that apply)	0 = don't know/can't think of any A = Children are ill most of the time Z = other: specify...

If *not* currently married to a cousin (i.e. if HR11 = 7):

HKIN7	Did your parents consider marrying you to a relative?	1 = yes 2 = no 7 = don't know ..	HKIN8	If no, why not? (check all that apply)	A = Did not have cousin of the right age B = Cousins of right age were already married C = My cousin's family could not afford the dowry required D = My family was able to find a better match outside the family X = don't know Z = other: specify
--------------	---	--	--------------	--	--

Section 3: HOUSING INFORMATION AND ASSETS

HI1. How many rooms (bedroom, living room, kitchen) are in the house?	(rooms) <input type="text"/> <input type="text"/>
HI3. What is the flooring type of the main bedroom?	01. Pucca/Cement 02. Dirt 03. Wood 04. Bamboo 05. Other, specify
HI5. What is the ownership status of the house?	1. Self-owned---> GO TO ASSET ROSTER 2. Occupying without rent ---> GO TO ASSET ROSTER 3. Rented 4. Government land without rent ---> GO TO ASSET ROSTER

HI2. Does the house have electricity [solar power included]?	1 = yes 2= no
HI4. What is the roof type of the main bedroom?	01. Pucca/Cement 02. Tin 03. Bamboo 04. Wood 05. Mud 06. Leaves/Straw 07. Other, Specify
HI6. What rent do you pay per month?	(Tk) <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

HA1. Type of asset <i>(leave HA2 – HA4 blank if the household doesn't have that asset)</i>	HA2. Current value of the asset Owned by the household (in Taka)	HA3. How was the asset obtained? <i>(see codes)</i>
A. Agri land		
B. Homestead (including house)		
C. Other real estate		
D. Rickshaw		

HA1. Type of asset <i>(leave HA2 – HA4 blank if the household doesn't have that asset)</i>	HA2. Current value of the asset (in Taka)	HA3. How was the asset obtained? <i>(see code)</i>
H. Radio/cassette player		
I. TV		
J. Bicycle		
K. Wall/table clock		

E. Cart/van		
F. Cows/buffalo/goat		
G. Fan		

L. Furniture		
M. Sewing machine		
N. Freezer		
O. Mobile Phone		
P. Other		

Respondent name: _____ Line number: _____ Household number: _____ Bari serial number: _____

Section 4: HOUSEHOLD ECONOMY

4a) AGRICULTURAL PRODUCTION

Did the household produce any crops (for home consumption or sale) in the previous 12 months? _____ (1=yes; 2=no >> next section)

List up to 5 main crops:

	Crop 1	Crop 2	Crop 3	Crop 4	Crop 5	
HAG1. Crop name						
HAG2. Which bari members work on each crop? (list up to 5, using hh and line numbers from bari roster)	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>
HAG3. Any of [crop] sold? (1=yes; 2=no)						
HAG4. Value produced of [crop] (Tk)						
HAG5. Total farming costs of [crop] (Tk) <i>(wages paid to hired labour, seeds, fertilizer, etc.)</i>						

4b) HOUSEHOLD ENTERPRISE

Note: skip stock business. But include income from rentals.

HENT0a. Did any member of the household run any business in last month? _____ (1=yes; 2=no >> next section)

HENT0b. What type of business (free response) _____
(separate column for each business)

HENT1. Business name					
HENT2. Which bari members work in that business? (list up to 4, using hh and line)	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/> HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>

numbers from bari roster)	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>	HH: <input type="checkbox"/> <input type="checkbox"/> Line: <input type="checkbox"/> <input type="checkbox"/>
HENT3. Value of revenues in month (taka)				
HENT4. Total costs in past month (taka), include wages paid to hired labour, operational costs, rent, utilities, etc.				

Respondent name: _____ Line number: _____ Household number: _____ Bari serial number: _____

Section 5: Male Household Head's Cousins (first 3 pages of section 5 relate to cousins on father's side; next 3 pages relate to mother's side)

Instructions if respondent is not household head: answer about the cousins of the household head, if this information is known. Otherwise skip to section 6. If respondent is unmarried, skip this section. If respondent married but female-headed, cousin information about husband.

How many siblings did your father have?		HFC1a. Brothers _____		HFC1b. Sisters _____	
	HFC2a	HFC3a	HFC4a	HFC5a	
Name of uncle (Father's brothers)	No. of sons this uncle had (88 = don't know >> next uncle)	No. of sons of within 8 years of your age that this uncle had	No. of daughters this uncle had	No. of daughters of within 8 years of your age that this uncle had (including your wife, if you married your cousin)	
1. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
2. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
3. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
4. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
5. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
6. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
7. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	
	HFC2b	HFC3b	HFC4b	HFC5b	

Name of aunt (Father's sisters)	No. of sons this aunt had (88 = don't know >> next aunt)	No. of sons within 8 years of your age that this aunt had	No. of daughters this aunt had	No. of daughters within 8 years of your age that this aunt had (including your wife, if you married your cousin)
1. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. _____	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

HFC6a	HFC7a	HFC8a	HFC9a	HFC10a
Names of father's brothers' daughters within 8 years of your age identified in HFC5a (including your wife, if she is your father's brother's daughter)	Is (NAME) older or younger to you? Older=1 Younger=2 Same age=3	How many years older/younger?	Was she married before or after you were married? Before=1 After=2 Not married=3 Same day=4	Did she marry a relative who is also related to you? YES=1 NO=2 Not applicable=3
A1. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A2. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A3. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A4. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A5. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3

A6. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A7. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A8. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A9. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A10. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3

Instruction to Interviewer for Question HFC10a: all cousins apply (first cousin or more distant relation), but the cousin's spouse must also be related to person interviewed.

HFC6b	HFC7b	HFC8b	HFC9b	HFC10b
Names of father's sisters' daughters within 8 years of your age identified in HFC5b (including your wife, if she is your father's sister's daughter)	Is (NAME) older or younger to you? Older=1 Younger=2 Same age=3	How many years older/younger?	Was she married before or after you were married? Before=1 After=2 Not married=3 Same day=4	Did she marry a cousin that is also related to you? YES=1 NO=2 Not applicable=3
A1. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A2. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A3. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A4. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A5. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A6. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A7. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A8. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A9. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A10. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3

Instruction to Interviewer for Question HFC10b: all cousins apply (first cousin or more distant relation), but the cousin's spouse must also be related to person interviewed.

How many siblings did your mother have?	HFC12a. Brothers _____	HFC12b. Sisters _____
---	------------------------	-----------------------

	HFC13a	HFC14a	HFC15a	HFC16a																																																								
Name of uncle (Mother's brothers)	No. of sons this uncle had <i>(88 = don't know >> next uncle)</i>	No. of sons within 8 years of your age that this uncle had	No. of daughters this uncle had	No. of daughters within 8 years of your age that this uncle had (including your wife, if you married your cousin)																																																								
1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
Name of aunt (Mother's sisters)	No. of sons this aunt had <i>(88 = don't know >> next aunt)</i>	No. of sons of within 8 years of your age that this aunt had	No. of daughters this aunt had	No. of daughters of within 8 years of your age that this aunt had (including your wife, if you married your cousin)																																																								
1. _____ 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<table style="margin: auto;"> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> <tr><td><input type="checkbox"/></td><td><input type="checkbox"/></td></tr> </table>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											
<input type="checkbox"/>	<input type="checkbox"/>																																																											

HFC17a	HFC18a	HFC19a	HFC20a	HFC21a
Names of mother's brothers' daughters within 8 years of your age identified in HFC16a (including your wife, if she is your mother's brother's daughter)	Is (NAME) older or younger to you? Older=1 Younger=2 Same age=3	How many years older/younger?	Was she married before or after you were married? Before=1 After=2 Not married=3 Same day=4	Did she marry a cousin that is also related to you? YES=1 NO=2 Not applicable=3
A1. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A2. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A3. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A4. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A5. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A6. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A7. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A8. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A9. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A10. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3

Instruction to Interviewer for Question HFC21a: all cousins apply (first cousin or more distant relation), but the cousin's spouse must also be related to person interviewed.

HFC17b	HFC18b	HFC19b	HFC20b	HFC21b
Names of mother's sisters' daughters within 8 years of your age identified in HFC16b (including your wife, if she is your mother's sisters' daughter)	Is (NAME) older or younger to you? Older=1 Younger=2 Same age=3	How many years older/younger?	Was she married before or after you were married? Before=1 After=2 Not married=3 Same day=4	Did she marry a cousin that is also related to you? YES=1 NO=2 Not applicable=3
A1. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A2. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A3. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A4. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A5. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A6. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A7. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A8. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A9. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3
A10. _____	1 2 3	<input type="checkbox"/> <input type="checkbox"/>	1 2 3	1 2 3

Instruction to Interviewer for Question HFC21b: all cousins apply (first cousin or more distant relation), but the cousin's spouse must also be related to person interviewed.

Respondent name: _____ Line number: _____ Household number: _____ Bari serial number: _____

Section 6: Additional information on non-resident daughters: How many daughters in total have you ever had? _____

Currently residing in the bari? _____ Not currently in bari? _____

(Enumerator: list the names of all daughters not currently residing in the bari in column two below.)

HD1	HD2a	HD2b	HD3	HD4	HD5	HD6	HD7	HD8	HD9	HD10	HD11	HD12	HD13	HD14
	Daughter Name	Has [name] ever been married? 1 = yes (>> HD8) 2 = no (>> HD8)	What was [name's] dowry? (Taka)	What was the total value of any other gifts you gave to [name] and her husband at the time of marriage? (Taka)	What was the total amount that you spent on [name's] wedding? (Taka)	Husband's family's land-holding (decimals)	What is the wealth of [name's] husband's family, compared to your family? (see codes below)	Has [name] ever worked outside the home? 1 = yes (>> next line) 2 = no (>> next line)	In what year did she start working? YYYY	Is she currently working outside the home? 1 = yes (>> H12) 2 = no	In what year did she stop working outside the home? YYYY	Let's talk about the main job, the job she spent most of her time working. Was the job in the garment sector? 1 = yes (>> HD14) 2 = no	What industry/type of job was the job is/was it? (use DHS codes)	What is her current monthly wage (or was just before she quit, if no longer working)? (Tk.) 888 = don't know
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														

Wealth codes: 1 = much wealthier; 2 = wealthier; 3 = about the same; 4 = less wealthy; 5 = much less wealthy