

[4] particulars of living facilities: drinking water, bathroom, sanitation, etc.				
srl. no.	item			code/entry
(1)	(2)			(3)
	[if the household has no member of a specific category, record '3' against the respective category to indicate not applicable cases]	26.4	female of age 15 years and above	

continued to next page

E. problem of flies and mosquitoes				
27.	whether the household faced problem of flies/mosquitoes during last 365 days (yes: severe-1, moderate-2; no-3)			
28.	whether any effort was made by the Local Bodies/State Government during last 365 days to tackle problem of flies/mosquitoes (yes-1, no-2, not known-3)			
29.	whether any effort was made by the household during last 365 days to tackle problem of flies/mosquitoes (yes-1, no-2, not applicable - 3)			
F. specific types of illness of the household members during last 30 days				
30.	whether any of the household member(s) suffered from the types of illness specified in items 30.1 to 30.4 during last 30 days	30.1	stomach problem (yes-1, no-2)	
		30.2	malaria (yes-1, no-2)	
		30.3	skin disease (yes-1, no-2)	
		30.4	fever due to disease other than malaria (yes-1, no-2)	
G. electricity				
31.	whether the household has electricity for domestic use? (yes-1, no-2)			
32.	if code 1 in item 31, type of electric wiring (conduit wiring – 1, fixed to the walls – 2, temporary – 3)			