



HPTN 052 (096)

IDW-1 (005)

**Index ID**

-    -    -    -

Site Number      Index Number      Partner      Chk

**Index Demographics—  
Malawi**

**Form Completion Date**

*dd*      *MMM*      *yy*

**Instructions:** Complete this form for Enrollment only.

1. What is the participant's ethnic group or tribe? *Mark all that apply.*

- Chewa
- Ngoni
- Yao
- Tumbuka
- Other African tribe, specify: *Local Language* \_\_\_\_\_ *English* \_\_\_\_\_
- other, specify: *Local Language* \_\_\_\_\_ *English* \_\_\_\_\_

2. What is the participant's current form of employment? *Mark all that apply.*

- |                                     |                                      |  |  |
|-------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> unemployed | <input type="checkbox"/> technical   | <input type="checkbox"/> domestic worker | <input type="checkbox"/> accounting      |
| <input type="checkbox"/> housewife  | <input type="checkbox"/> health care | <input type="checkbox"/> student         | <input type="checkbox"/> religion        |
| <input type="checkbox"/> business   | <input type="checkbox"/> teacher     | <input type="checkbox"/> military/police | <input type="checkbox"/> skilled labor   |
| <input type="checkbox"/> farming    | <input type="checkbox"/> government  | <input type="checkbox"/> driver          | <input type="checkbox"/> unskilled labor |

3. How many children does the participant have? *# of children*

4. Does the participant have electricity in their home?      *yes*      *no*

    

5. What is the participant's main source of drinking water? *Mark only one.*

- piped water
- unprotected well
- protected well
- borehole
- surface water (spring, river/stream, pond/lake, dam)

07-MAR-07

Language

Staff Initials / Date

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## Index Demographics—Malawi (IDW-1)

### Item-specific Instructions:

- **Item 1:** Record the participant's self-identified ethnic group or tribe. Specify "other" reason in local language, as applicable. Record in English prior to faxing.
- **Item 3:** Record the number of biological children.