Morary

ETHICAL REVIEW COMMITTEE ICDDR, B.

Principal Investigator Dr. Bogdan Wojtyniak Transe Investigator (if any) Application No. 84-025 Supporting Agency (if Non-ICDDR, B) CIDA Title of Study Demographic Surveillance Project status: New Study <u>Systems - Matlab</u> Continuation with change No change (do not fill out rest of form) Circle the appropriate answer to each of the following (If Not Applicable write NA). Source of Population: 5. Will signed consent form be required: (a) Ill subjects (No (a) From subjects Yes (No) (b) Non-ill subjects From parent or guardian · (b) (c) Minors or persons (if subjects are minors) Yes (No. under guardianship Will precautions be taken to protect Does the study involve: anonymity of subjects Physical risks to the (a) Check documents being submitted herewith to subjects Yes Committee: (b) Social Risks Yes (No) V Umbrella proposal - Initially submit an Psychological risks (c) overview (all other requirements will to subjects Yes be submitted with individual studies). Discomfort to subjects (d) Yes Protocol (Required) (e) Invasion of privacy (Yes) Abstract Summary (Required) Disclosure of informa-(f) Statement given or read to subjects on tion damaging to subnature of study, risks, types of questject or others Yes (No ions to be asked, and right to refuse Does the study involve: to participate or withdraw (Required) (a) Use of records, (hosp-Informed consent form for subjects ital, medical, death, Informed consent form for parent or birth or other) guardian (b) Use of fetal tissue or Procedure for maintaining confidentialabortus Yes Use of organs or body (c) Questionnaire or interview schedule \* fluids Yes (No) \* If the final instrument is not completed . Are subjects clearly informed about: prior to review, the following information Nature and purposes of should be included in the abstract summary: study A description of the areas to be (b) Procedures to be covered in the questionnaire or followed including interview which could be considered alternatives used either sensitive or which would (c) Physical risks constitute an invasion of privacy. (d) Sensitive questions Yes Examples of the type of specific Benefits to be derived (e) Yes questions to be asked in the sensitive (f) Right to refuse to areas. participate or to with-An indication as to when the questiondraw from study naire will be presented to the Cttee. Confidential handling (g) for review. of data. No Compensation &/or treat-(h) ment where there are risks or privacy is involved in any particular procedure (Yes) No.

We agree to obtain approval of the Ethical Review Committee for any changes involving the rights and welfare of subjects before making such change.

Principal Investigator

27 JUNIARA Trainee

## SECTION I: RESEARCH PROTOCOL

1.	Title	: Demographic Surveillance System (DSS), Matlab
2.	Principal Investigator	: Bogdan Wojtyniak
	Co-Investigator	: Abbas Bhuiya and M.A. Kashem Shaikh
3.	Starting date	: 1 January 1984
4.	Completion date	: 31 December 1987
5.	Total direct cost	: US \$2,626,003
6.	Scientific Program Head:	
	This protocol has been ap	pproved by the Community Services Research Working
	Signature o	E the Acting Asso. Director for CSRWG W. SQ Date: 18 June 1989
7.	Abstract Summary:	
•	field surveillance progration of this protocol. This will other protocols, pilot puthe basic demographic data is hoped that these or	the purpose, rationale and costs of the Matlab am - an invaluable institutional resource of the neses and analytical work are not proposed under the addressed by interested investigators under rotocols or limited study protocols that require the collected under the purview of this protocol. There analytical studies would fulfill ICDDR,B's igations under a current CIDA grant.
8.	Reviews:	· ·
	a) Ethical Review Commi	ttee:
	b) Research Review Comm	ittee:
	c) Director:	

### SECTION II: RESEARCH PLAN

### A. INTRODUCTION

## 1. Objectives:

obtain accurate information on vital events and other demographic characteristics of the Matlah study population and to monitor their changes over time. Unlike others, this protocol does not address a specific research hypothesis but rationalize the operations of an invaluable ICDDR, B institutional resource, essential for the conduct of a broad range of field research. The availability of this information, in conjunction with the operation of an integrated village-based MCR-FP programme in half of the Matlab DSS area and other research programmes availing DSS data, should assist in the selection of the most appropriate and effective technologies and delivery systems for health and family planning services, with the ultimate goal of achieving improvements in the health and welfare of individuals and the community.

## 2. Background:

Beginning in 1966 the ICDDR,B (formerly Cholera Research Laboratory) has operated a demographic surveillance system in selected villages within, and adjacent to, Matlab thana in Comilla district, Bangladesh. The system combined periodic censuses of the study population with continuous registration of vital events - births, deaths and since 1975 also marital unions and dissolutions - as well as migration movements. The size of the study area has changed twice and since October 1978 it has comprised 149 villages, with an estimated population at the last census (1982) of about 188,000.

Over the past years the Matlab DSS has generated an enormous volume of unusually reliable data not only on vital events and migration but also on selected socio-economic characteristics of households collected in periodic censuses. The results of the most recent 1982 census will be published in the near future.

A comprehensive review of the scientific output from the DSS is beyond the scope of this protocol. Research has included, among others, studies on cholera and other infectious diseases epidemiology; vaccine efficacy; effectiveness of oral therapy and selected antimicrobials; nutritional status and growth and development; beliefs in food/feeding/health; social relationships and community structure; biosocial determinants and correlates of fertility, mortality, migration and marriage.

#### 3. Rationale:

The DSS constitutes one of the most valuable institutional resources of the ICDDR, B, vital for the conduction of many types of field research in diarrhoeal diseases, nutrition, population and health care. This protocol ensures the continuing operation of this resource for all relevant field studies. Some of these studies will involve analysis of demographic data; others will require census or vital events data to compute denominators; still others will utilize selected aspects of the data, either as background material or to complement a specific study. In these cases, further protocols or pilot protocols will be submitted by the relevant investigator(s).

Seven broad areas in which the system possesses distinct comparative adventages can be identified:

- a) The Matlab surveillance system is necessary for health, nutrition and demographic research which requires an accurate count of the population for computation of rates, particularly for the assessment of the impact of various programmatic or technological interventions (e.g. vaccine, oral therapy, contraception).
- b) The surveillance system provides accurate sampling frames to carry out sample surveys or in-depth studies.

- c) Longitudinal and precise age data strengthen selected research in health, nutrition and population.
- d) The continuous relationship of the ICDDR,B with the Matlab population, including the provision of health services, may facilitate studies requiring client cooperation in this area, when compared to other areas in Bangladesh.
- e) The longitudinal hature of the surveillance system facilitates prospective research designs, including the documentation of trends over time.
- f) The data which document contemporary demographic trends and patterns may provide an indication of national tendencies enabling assessment of determinants and consequences of contemporary changes in the population development and thus may be useful for national administrators and policy makers.
- g) The surveillance area may be employed as a field training area in epidemiological, population, nutrition and health care research.

#### Some weaknesses of the system are as follows:

- a) It provides reliable measurements of outcome variables (such as births and deaths) but frequently does not contain sufficient information on antecedent biosocial causes or processes responsible for the observed outcomes.
- b) Post intervention research, current health services and multiple, concurrent research designs are only a few of the factors that may "contaminate" the study design of any individual study in the surveillance area, sometimes affecting the research design by an unquantifiable bias.

#### B. SPECIFIC AIMS

- To develop a population register to provide a continuous registration system of vital events, migration and related information through data linkage, and establishment of a data base system.
- 7. To undertake research on the measurements, determinants and dynamics of the fertility, mortality, nuptiality and migration. This major component of the project will be carried out using new computer, on the basis of the new data files created out of existing files and currently collected data. These research will facilitate formulation of more effective program strategies and policy planning in Bangladech and other developing countries.
  - 3. To provide a small-area vital registration system to facilitate:
    - assessment of the effectiveness, safety and acceptability of the ICDDR,B's Matlab Community Health Services Project (CHSP), an integrated action-research health and family planning project which operates in part of the Matlab DSS area;
    - ii) various research on epidemiology of diarrhoeal and other infectious diseases:
    - iii) new cholera vaccine field trial
- 4. To assess and improve the quality of the Surveillance System in order to maximize its efficient utilization through-evaluation of the completeness and accuracy of reporting of vital events, modification of the data collection forms and development of lay reporting of cause of death.
- 5. To develop a demographic field site, to be used for training of program planners, researchers and implementors of national and developing country programs. A detailed documentation of the DSS procedures and operation will be prepared and disseminated.
- 6. To share the results of the DSS with interested agencies in Bangladesh and other developing countries.

#### C. METHODS AND PROCEDURES

The operations of the DSS primarily involve three branches of ICDDR,B. The Field Station at Matlab is responsible for the field operation and collection of the surveillance data. The Data Management Branch in Dhaka is responsible for checking and coding of the data collection forms, editing and correcting of the computer file records, and preparation of the routine demographic reports. The Computer Information Services Branch is responsible for development of required computer software and data processing. All three branches are part of the Community Services Research Working Group.

The current Matlab Demographic Surveillance System is a program which runs continuously throughout the whole year collecting information on the vital events and migration in 149 villages with a population of about 188 thousand. The base level workers in the DSS are the Community Health Workers (CHWs), who are female, 20-40 years of age, with a minimum of seven year of education. The primary responsibility of the CHW is to detect vital events occuring in the households in her area. Each CHW is responsible for about 1000 population in the half of DSS area where MCH-FP services are also provided (called the Community Health Services Area) and for some 3000 population in the remaining comparison area. A CHW in the Health Services Area visits about 20-25 families a day and a CHW in the comparison area visits about 100-140 families a day. The former visits each household bi-weekly and the later weekly. The CHW writes down all detected demographic events in her exercise book which is the main record she maintains. The actual reporting of vital events on the standard registration forms is performed by the Health Assistants (HAs), who are males, and normally at least high school graduates. They visit each household once a month and using the CHW's not book as well as making additional inquiries ascertain all demographic events which have occurred to household members in the month since their last visit. Each HA is responsible for about 3000 households and visits 100-140 families in a day. Fortnightly the HAs deliver the demographic registration forms to the Matlab Field Station to be prepared for forwarding to Dhaka. The field work of HAs is checked by Senior Health Assistants (SHAC) who are each responsible for the work of two HAs and visit every household in his area 4 times annually. All these workers are supervised by the Senior Field Research Officer, the Field Research Officer and the Assistant Supervisors who prepare the field work schedule of the entire system and randomly check on the quality and completeness of the field work.

The completed registration forms are checked in Matlab office and the events are recorded in the Matlab copy of the census volume. The forms are then sent to Data Management Branch in Dhaka usually every fortnight where checking and coding is done, and afterward the computer files for each event are separately created by the Computer Information Services Branch. Only after careful editing consisting of the checking of code range, consistency, duplicate records, etc., are the data files ready for analysis.

## Proposed Modification:

- 1. To ensure the continued usefulness of the data collected through the DSS, reviews of currently obtained, as well as proposed future information would be undertaken continuously. The review of the registration forms contents, as well as their design will also be undertaken with the aim to standardize the methods of demographic surveillance carried out in different study area by ICDDR,B.
- 2. The data on cause of death are provided by field workers who do not have formal medical training and are thus not qualified to provide precise diagnosis. As "lay reporting" is now considered an extremely important part of the statistical information system for health care in developing countries, there are plans to enlarge the DSS death form taking into account results of previous study on "lay reporting and DSS cause of death forms."
- 3. While the vital events and migration registration forms are actually filled out by the Health Assistants during their monthly visits, these events are generally first brought to the attention of CHWs who make

inquiries during their weekly (in comparison area) or bi-weekly (in treatment area) visits and record the information in their copy books. It will be checked whether different frequency of CHWs visit in treatment and comparison area affects the quality of events reporting and whether the twice inquiry (first by the CHW and then by the HA) is necessary.

- 4. Computer data processing will be modified by CIS and the data base system will be attempted to implement after installation of the new IBM System 4331.
- 5. A system of annual reporting of DSS results will be still improved.

  After installation of the new IBM 4331 and establishing of the data
  base the contents of the reports will be broaden.
- 6. Some additional modifications aimed to improve the operation of the DSS may be proposed in the future after completing of the detail review of the entire DSS.

#### D. SIGNIFICANCE

The DSS Matlab is an invaluable institutional resource of the ICDDR, B providing a unique base for scientific research possibly unparalleled in other developing countries. The research programs that will depend upon the DSS include among others cholera vaccine trial, the MCH-FP program and the measles survey. The DSS is being funded by a specific project grant from the Canadian International Development Agency.

## ABSTRACT SUMMARY IN PARTICULAR ITEMS

- 1. The population for the DSS of necessity includes all people living in the study area, since a census approach has been adopted.
- 2. The only potential risk is invasion of privacy.
- 3. Subjects are fully informed of kinds of information needed, of their right to refuse to participate, and of the confidentiality of their responses.
- 4. Only staff of the Matlab Field Station, Data Management Branch in Dhaka and investigators working under approved protocols have access to the source documents that display persons identification. The staff members are trained and aware of their confidential nature. Data that are published are aggregated and there will be no possibility of identifying individuals from published data.
- 5. Although the DSS involves some invasion of privacy as for example information about marital status the nature of the demographic data collection is that no information will be collected which is unknown to the near neighbours of the respondent.
  - Potential studies mentioned by this protocol, such as the one involving questions about socioeconomic variables, will be covered by separate protocols, issues of confidentiality in those studies will be covered in the appropriate protocol.
- 6. The DSS involves frequent short interviews conducted in the subject's home to determine occurrence of vital events during past period.
- 7. There is no immediate benefit from DSS to the individual subject except the delivery of ORS to people with diarrhoea, but the benefit to society at large of continuing this collection of basic demographic information is immeasurable.
- 8. Study involves continuation of DSS records only.

## Statement about Confidentiality

Verbal consent will be obtained annually from at least one adult subject in each household - those who will be answering the questions. Implied consent will be assumed for other family members (see Appendix II).

Identifying information (name, census number) appears on the questionnaire forms (see Appendix I). Becuase it is necessary to link events using this information it cannot be deleted. However, the staff who have access to these questionnaires is trained and aware of their confidential nature.

Only aggregate information is published and there is no way to identify individuals.

## SECTION III: DETAILED BUDGET

(DSS-Matlab)

PERSONNEL SERVICES		Person Year	Annual Projec	ct Requirements
Position	% Effort	cost	Taka	Dollar
l Principal Investigator	90	\$60,000		54,000
l Senior National Scientist	100	245,096	245,096	New York
1 Junior National Scientist	100	167,758	167,758	-
1 International Scientist	. 80	\$60,000	-	48,000
1 International Scientist	50	\$60,000		30,000
Field Surveillance				
1 Station Head	10	299,633	29,963	
1 Manager	3.00	173,620	173,620	
1 Sr. Field Research Officer	100	143,053	143,053	-
3 Field Research Officer	100	86,943	260,829	-
7 Sr. Health Assistant	1.00	74,781	523,467	-
16 Health Assistant	100	57,055	912,878	-
l Clerk	100	64,269	64,269	-
30 Community Health Worker	100	17,890	536,700	_
80 Community Health Worker	25	17 <b>,</b> 890	357,800	ual
l Security Guard	100	29,825	29,825	•••
l Cleaner	100	29,825	29,825	~
3 Speedboat Driver	100	39,725	119,175	<b>~</b>
2 ORS Production Helper	100	29,825	59,650	
Data Management Branch		•		
1 Head, Biometric & Data Management Branch	50	194,440	97,220	~
1 Sr. Statistical Officer	100	106,917	106,917	-
l Data Management Officer	100	76,421	76,421	<del>40</del> 1
1 Statistical Officer	100	68,020	68,020	<del></del>
l Data Processing Assistant	100	50,843	50,843	***
3 Coding Assistant	100	44,463	133,390	-
l Cleaner	100	29,825	29,825	-
		•		

			Person Year	Annual Project	Requirements
	Computer Branch	% Effort	Cost	Taka	Dollar
	1 Computer Manager	10	741,973	74,197	<b>→</b>
	l System Analyst	100	147,364	147,364	
	2 Computer Programmer	100	108,824	217,847	
	1 System Operator	100	114,941	114,941	**
	2 Senior Data Entry Tech.	100	57,958	115,916	-
			-		
	Secretarial Service				
	1 Senior Secretary	70	115,000	80,500	
	Administrative Support				
	Personnel in Dhaka & Matlab	•		1,150,000	
			Sub-total	6,117,110	\$132,000
2.	SUPPLIES AND MATERIALS				
	Oral therapy packets			200,000	***
	Computer tapes for 1985 (\$500 for each of 1986 and	1987)		~	1,500
	Computer paper			oga.	3,000
	Equipment spares			<b>~</b>	3,000
	Office supplies & stationer	ies		125,000	2,000
	Electric supplies			25,000	•
	Supplies for CIS			· -	3,000
			Sub-total	350,000	\$ 8,000
3.	EQUIPMENT		Jan Locar	330,000	, o,oo
	Micro bus/coaster 2			***	20,000
	Speedboat hulls & engines			-	12,000
	Photocopy machine			<b></b> -	4,000
	Bi-cycle 2			4,000	<b>,</b>
	Polythene sealer 4			10,000	-
	Calculator 10			12,500	750
	Programmable calculator 2			-	750 1,500
	Personal computer software			<b>-</b>	2,400
	Eelectric typewriter 2			_	450
	Manual typewriter l File cabinet 6			12,500	<b>43</b> 0
	Weighing scale 4			سان و شد	400
	Eelectric fan 4			10,000	
	Furniture			65,000	
	Cycle-style duplicating made	chine		, - ·	1,000
	Air-conditioner 2			-	1,000
			Sub-total	114,000	\$43,500

		Annual Proje	ct Requirements
		Taka	Dollar
4.	PATIENT HOSPITALIZATION - None	-	-
5.	OUT-PATIENT CARE - None	-	-,
6.	ICDDR,B TRANSPORT		
	Dhaka car - 5,000 miles	75,000	-
	Dhaka-Matlab-Dhaka and Matlab-Dhaka-Matlab car	87,000	-
	Matlab car - 2,500 miles	36,250	_
	Matlab speedboat, 3 boats, 4 hours daily	998,400	
	Matlab countryboat (20 boats 12 months and 35 boats 6 months)	371,250	
	Sub-total	1,567,900	\$ -
7.	TRAVEL AND TRANSPORTATION OF PERSONS		
	Matlab-Dhaka-Matlab, 2 persons, 25 trips, 4 days stay	45,000	-
	Dhaka-Matlab-Dhaka, 4 persons, 25 trips, 4 days stay	120,000	-
	Dhaka-New Project-Dhaka, 4 persons, 2 trips and 4 days stay	16,000	-
	Matlab-New Project-Matlab, 10 persons, 2 trips and 4 days stay	40,000	-
	International Travel:		
	International staff travel Bangladesh- Europe-North America	 	4,000
	2 Regional Asia trips		4,000
	Sub-total	221,000	\$8,000
8.	TRANSPORTATION OF THINGS - None	-	-
9.	RENT, COMMUNICATION AND UTILITIES		
	Premises rental	30,000	-
	Computer software rental (from 1985)		24,500
	Sub-total	30,000	\$ 24,500

		Annual Project	Requirements
		Taka	Dollar
10.	PRINTING AND REPRODUCTION		
	Report printing and binding	125,000	-
11.	OTHER CONTRACTUAL SERVICES		
	Computer charges	300,000*	/ Pan
12.	CONSTRUCTION, RENOVATION & ALTERATIONS		
	Office maintenance	50,000	-
13.	MISCELLANEOUS COMPONENTS		•
	Maintenance of the computer hardware (from 1985)	-	26,000
	Operation and maintenance of other equipment	125,000	-
j	Sundry expenses	PV.	10,000
7	Expertise service and staff development	<b>⇔</b> ** .	32,000
	Training materials		3,500
	Sub-tota	1 125,000	\$45,500

This is to be charged out as new computer is provided free of charge for DSS. However, \$4,000 will be required in 1984.

B. SUMMARY BUDGET

(DES-Matlab)

SE4000

Taka 6,728,821

2,626,003	2,62	396	734,896	681,723	681	XII
\$1,027,536	580,125 39,961,672	\$277,776	11,427,980	65,670 \$266,160	151,250	59,700
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4,000	1,192,300	ı	399,300*	1	363,000*	ì
1.	580,125	<b>1</b>	166,375	i	151,250	<b>1</b>
81,095	139,230	29,645	39,930	26,950	36,300	24,500
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37, 128	1,025,661	10,648	294,151	089	267,410	8,800
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53,706	1,624,350	15,246	465,850	13,860	423,500	13,600
565,000	28,389,507	150,000	8,141,873	150,000	7,401,703	133,000
Total Dollar	Taka <sup>1</sup>	37 Dollar	1987 Taka:	86 Dollar	1986 Ta <b>ka</b>	85 Dollar
£ 4	Ē	ŗ	701	y	Č	ı

imputer is provided free of charge for DSS.

ie CIDA grant for the DSS for the computer system IBM 4331 (hardware, ie control of the Computer Selection Committée.

## APPENDIX - I

## BIRTH REGISTRATION FORM

## ICDDR, B-MATIAB

Serial No. Village 4.6	Date	of birth:	D MM 7-12	Ϋ́Υ
Mother's Name: Current id. No.	Mother's date of Registration No.	DD	ММ 13-18	ΥΥ
	Father's date of	birthDD	MM 39-44	YY
Current id. No. 45-54	Registration No.	55-64		
Litter size: 1 Single 2 '1	win 3	Triplet		65
Result: 1 Mis. Indu. 2 N	1is. Spon. 3	Still	4 Live	66
Sex: 1 Male 2 F	emale 3	UNK		67
If live birth  tame:  68-87  current id. No.  Flace of birth: Village P. S.	Registration No	98-107 Dist.	Code	108
MOTHER'S PRI	EGNANCY HISTO	ORY		
so, of previous pregnancy to mother	109-110	(Exclude	this birth)	
No. of living children (Total)		Sons		
No. of children born alive now dead ( Total )	1 1-112	Sons		
No. of miscarriage & still birth	114-115		116	
Reported by:	Entered by:	and the state of t		
Late:	Date:	rannagariya , isaniray nahiyarangiyaya, lipabahangi misiri aham ahas	Land of Selection Co.	
Dated entered: Field Vol.	Matlab Vol.			
Remarks:	and the second of the second o	and the expension of the second secon	<sub>a</sub> , a complete as as	grander and the second second
			P.T.O.	

Mis. Indu.	2 Mis. Spon.  2 Female	3 Still 3 UNK	4 Live	66
08-87		Vo98-107		67
Mis. Indu. Male	2 Mis. Spond 2 Female	3 Still 3 UNK	4 Live	66
68-87	Registration No.	98-107		67
	68-87 88-97 Mis. Indu. Male	Male 2 Female  68-87  Registration N  Mis. Indu. 2 Mis. Spond  Male 2 Female  68-87  Registration No.	Male       2       Female       3       UNK         68-87       Registration No.       98-107         Mis. Indu.       2       Mis. Spond       3       Still         Male       2       Female       3       UNK	Male       2       Female       3       UNK         68-87       Registration No.       98-107         Mis. Indu.       2       Mis. Spond       3       Still       4       Live         Male       2       Female       3       UNK

# DEATH REGISTRATION FORM

## ICDDR,B-MATLAB

Serial No.	Village :	Date of dea	uh 1	
· [	46	•	CD I	7-12
Name of deceased:	Date of birth : DD	Sex MM YY	:/T/M/2/	F/3/UNK
Current id. No.	The state of the s	13—18 0		
Mother's current id. No.				et et
Marital Status at the time of death	ne szereszenten et a byroszereszereszereszereszere azott algazzereszereszereszereszereszereszereszer	engen kraulik (rijelera i sapannikan persentan engen engen engen engen en	n de la companya del companya de la companya del companya de la companya del la companya de la c	
Never Married [ Macried	$\sqrt{2}$ / Widowed $\sqrt{3}$ / S	eparated /4/	Divorced $\sqrt{5}$	1 1
Fducation at death:	Occupa	ion at death:	63-64	Market 1991
Events and symptoms leading up	to death:	£		
Measics / 02 /	Diarrhoea : Acute	[ 07 / ]	Chronic /	08. /
Tetanus / 03	Dysentery: Acute	/ 09 /	Chronia /	10 /
Drowing 64	Childbirth	<u>/                                    </u>		
Murder 05	Jaundice	/ 12 /	All the	
Suicide / 06 /	Other not covered	/ [3]		# ·
Symptoms leading up to death ;				9.3.*
		man stephen in the "American II in the Committee of the C		1,50
	en e	ه مياه مناه مستويان للقوائد ان خورسيده و با بنسان الماشتور از ديد ما بنده استوي	garanting roman is der mary market produce of the first produce of the f	
	and a state of the	d .	يه والمخطَّف عليات من عليه المناطقة الم	2
Place of death 1 Village	P. S.	Dist	Code /	
Type of Doctor Consulted:	t e e	e e e e e e e e e e e e e e e e e e e		8/
Allopath / I / Allopath quack / 2 /	Homeopath/3/Kabiraj/	4/other/5/Do	ctor not consulte	d[6][]
Reported by:	· · · · · · · · · · · · · · · · · · ·	Entered by :		
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Date entered: Field Vol.		Matlab Vol.		· ·
Remarks:	distribution of the second of		endantique e e e encretation na demandique encretarionem	. At the second of the second
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# MARITAL STATUS REGISTRATION FORM

## ICDDR, B / MATLAB

Serial No.	Village	Date of event	
1-3	46		DD MH YY 7—12
	Event 1 17 Ma	avrlage : / 2 / r	Divorce
Information ( Male partner )			
Name	Date of birth / age_	DD MM Y	<del></del>
Current fd. No. / 20-29 Education 40-41		1419	· -
Education 40-41	Occupation	42—43	
Marital status prier to this event; N	Never marr, 11 Matried	21 Widowed 31	Divorced 4 /
If Prior status was married, wido	owed or divorced, then specify	y the duration of that	44
status in months			
Usual residence: Village	P.S.	Dist	
Information ( Female partner )			
Name	Date of birt	h / ageDDMM	
Current id. No.		47	
Education 7374	Occupation	75 <del>_76</del>	
Marital status prior to this event: No	ever matried 1 Matried	2 / Widowed/3/Div	orced 4 /
If prior status was married, widowe			$\overline{n}$
-tatus in months	• •		
Usual residence: Village			Code / / /
Reported by :	and the second section of the second section of the second section between the second section of the second section of the second secon		
Date ·		······	
admarks			

Family Informa	
( If creating ne	tion: w family
Religion:	<u> 1/H</u> /
For each Indiv	idual :
Nam	•
A.I.	•60
Reported by	

7

	AND WORATION REGISTRATION FORM
	ICDDR,B-MATLAB
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	13-16				•		32-34			35-37
Where	rom:	Vill	age	V	P.S		Dist			39-40
Registration No-	Date of birth	Sex	Relation to Head	Marital Status	Spouse's Reg. No.	Mother's Reg. No.	For e	LD BL	DS BDD I	Cause o movement
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71-80	81-86 Date :				ered by :					

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## MIGRATION OUT REPORT

ICDDR,B/Matlab

: No.	Vil	lage	Code Study No.			<b></b>	
Date of	movement : Day	Month	Year Event	: Moved	d out		
	•		Wh	ole family		Partial	family
	•			, 1		1 <b> 1</b>	
otal	VTS No.	Census No.	Name	Age	Sex	Type of	Reason for Movement
No.	1968/1970	1974	·			Age	
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Date	entered in Field V	ol.	Matlab				

#### APPENDIX II

### Verbal Consent Statement

The International Centre for Diarrhoeal Disease Research, Bangladesh, formerly the Cholera Research Laboratory, is planning to continue its demographic surveillance study for the next year. We are collecting information about births, deaths, migrations and changes in marital status. Everyone in the study area is asked to participate and the study will continue as it has in the past; workers will come at regular intervals to your house and in a short interview ask you about the events mentioned above. All answers you give will be treated as confidential.

We request your continued participation in the study. You may at any time refuse to answer questions or aks that workers stop visiting your house. If you have any questions we will try to answer them.

Do you have any questions now?

Do you agree to continue to participate, giving us information about yourself and your family during the next year?

कुछे द्याक्षेत्र इंतुका उद्धा। कुछे द्याक्षेत्र इंतुका उद्धा। किस्मित्र वस्त्रीयर किसे सम्बेद्धि क्षेत्री, जन्मकार्यात्र स्त्रीय क्षेत्रीय क्षेत्र स्त्रीय क्षेत्र क्षेत्र

(मिन्नी, क्षेत्र) काक्ष्मकं कि. (क्ष्म क्षिमें क्ष्मकं हें।
काक्षमकं (क्ष्म क्षिमें भाकिष्म क्षमकं क्षमं हें) मिन क्षमाकं (क्ष्म क्षिमें भाकिष्म क्षमकं क्षमं हें) मिन क्षमाकं क्षम्भा क्षम्भा क्षम्भा क्षम्भा क्षम् क्षम् क्षमं क्

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