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Subject: Re: calculating height for age for children in Ghana

Posted by [Trevor-DHS](#) on Mon, 22 Mar 2021 14:49:50 GMT

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As mentioned by Nichola, you can use either the PR file or the KR file, but you should be aware of the difference. The PR file is the main file and contains entries for all usual household members plus visitors who stayed overnight. The KR file is a restricted subset of the children, limited to children whose mothers were interviewed. If you are using the PR file this includes both de jure and de facto household members, and you need to select for one of these two groups. Both are valid groups of the population and either could be used, however, as the children are weighed and measured for the anthropometry, de facto members are more likely to be available for measurement than de jure members as they were physically in the household the night before the survey (the de jure, non-de facto children are less likely to be measured). In practice most household members are both de jure and de facto - there is usually a 90-95% overlap between these two groups. You do have to select one of the two groups though as not selecting the group would include double counting of the population (effectively counting something like 105% of the population as some people can be de jure members in one household and de facto members in another household).

For most analyses of stunting and wasting we recommend that you use the PR file, however, the data on diarrhea that you mention is only available in the KR file, so for this analysis you will need to use the KR file. When using the KR file, you don't need to worry about whether you use de jure or de facto as the women's file is restricted to de facto women and the KR file includes the children of these women. If you want to use the water and sanitation indicators you would need to link the water and sanitation data from the HR file to the KR file (using the cluster number and household number as the keys for merging).

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