Subject: Reason for household subsampling for men
Posted by kokbent on Mon, 02 Jan 2017 21:07:53 GMT
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Hi,

I'm currently working on the Malaria data in the West African countries. I'm using standard DHS dataset. One of the issue I have is about half of the <5 years old children were not tested for Malaria.

I found out that the reason can be attributed to the sampling methods, whereby only 50% of the household surveyed was selected for male survey, and only these household was subjected to malaria screening, among other surveys (anaemia, height weight info and etc). Thus far, I know at least Ghana and Cote d'Ivoire have this type of method and I'm sure other countries such as Guinea, Mali and Toga used similar subsampling method.

I couldn't seem to find the underlying reason behind such subsampling methods, can anyone point me to the right documents that explain why subsampling was conducted to only the male survey (and hence the haemoglobin module) instead of female survey? was it to plainly reduce number of sample to a manageable size? Or is there a cultural or household structural significance to this?

Thank you very much and happy new year by the way :)

Ben

Subject: Re: Reason for household subsampling for men
Posted by Liz-DHS on Thu, 12 Jan 2017 03:09:29 GMT
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A response from malaria expert, Fred Arnold:
Quote:
You're right that the main reason for choosing a subsample for some biomarkers in some DHS surveys is to keep the sample to a manageable size. Biomarker tests can be time consuming and expensive, and they have the potential to distract attention from the interviews. Since the subsamples are always based on a random selection of households, the biomarker results are based on a random sample of households and individuals, even though the ultimate sample size will be reduced.