#### FORM IHS-2

post enumerator training corrected version, March 2004

#### **STRICTLY CONFIDENTIAL**



| Questionnaire |  |
|---------------|--|
| number        |  |

Malawi Government National Statistical Office

# SECOND INTEGRATED HOUSEHOLD SURVEY, 2004

THIS SURVEY IS BEING CONDUCTED BY THE NATIONAL STATISTICAL OFFICE UNDER THE AUTHORITY OF THE 1967 STATISTICS ACT.

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## HOUSEHOLD CHARACTERISTICS, INCOME AND EXPENDITURE QUESTIONNAIRE

#### **MODULE A-1: HOUSEHOLD IDENTIFICATION** WRITE CODES FOR TA, STA, OR TOWN: EA: AND HH ID. WRITE NAME OF DISTRICT: TA; VILLAGE: AND HOUSEHOLD HEAD. CODE NAME A01. DISTRICT: A02. TA, STA, or TOWN: MARK BOX WITH AN 'X' AND NUMBER FORMS BELOW IF YOU USE MORE THAN THIS SINGLE FORM TO A03. ENUMERATION AREA: COLLECT INFORMATION FROM THIS HOUSEHOLD. A04. PLACE / VILLAGE NAME: IF SO. BE SURE TO MARK IN THE SAME WAY THE OTHER FORMS USED FOR THIS HOUSEHOLD. A05. HOUSEHOLD ID (FROM LIST): FORM OF FORMS IN TOTAL A06. NAME OF HOUSEHOLD HEAD:

| A07. DWELLING STRUCTURE NO.            | . (FROM LIST): CODE |                         |  |
|--|---------------------|-------------------------|--|
| A08. DESCRIPTION OF LOCATION           |                     |                         | J<br>CHARACTERISTICS OF DWELLING, NAME OF NEIGHBOURING HOUSEHOLDS & KEY<br>NE NUMBER (IF ANY). SKETCH MAP OF DWELLING LOCATION IN SPACE AT PAGE BOTTOM.  |
|  | LINWA               | INCINI CONTACTO, I FICI | TELEPHONE NO.:   |
|  |                     |                         | CONTACT NAMES: a)  |
|  |                     |                         | b)   |
| A09. DOES THIS HOUSEHOLD REF           | PLACE ANOTHER SAMPI | LE HOUSEHOLD CHOS       | SEN FOR THE SURVEY YES1; NO2 (»A12)  |
| A10. WHICH HOUSEHOLD IN THIS           | EA DOES IT REPLACE? |                         | OF ORIGINALLY<br>CTED HOUSEHOLD  |
| A11. WHY WAS ORIGINALLY SELE           | CTED HOUSEHOLD REF  | PLACED?                 | 1 - DWELLING FOUND, BUT NO HH MEMBER COULD BE FOUND. 2 - DWELLING FOUND, BUT RESPONDENT REFUSED. 3 - DWELLING FOUND, BUT APPEARS UNOCCUPIED. 4 - DWELLING FOUND, BUT NOT A RESIDENTIAL BUILDING. 5 - DWELLING DESTROYED. 6 - DWELLING NOT FOUND. |
| MODULE A-2: SURVEY ST                  | AFF DETAILS         |                         |  |
| A12. NAME OF ENUMERATOR:               |                     |                         | A24. NAME OF DATA VALIDATION CLERK:  |
| A13. ENUMERATOR CODE:                  |                     |                         | A25. DATA VALIDATION CLERK CODE:   |
| A14. DATE OF INTERVIEW:                | / /                 | (ENUMERATOR »NEXT       | ACC DATE OF DATA MALIDATION  |
| A15. NAME OF FIELD SUPERVISOR:         |                     |                         | (SKETCH MAP OF DWELLING LOCATION)  |
| A16. FIELD SUPERVISOR CODE:            |                     |                         |  |
| A17. DATE OF QUESTIONNAIRE INSPECTION: | / /                 |                         |  |
| A18. NAME OF ZONE SUPERVISOR:          |                     |                         |  |
| A19. ZONE SUPERVISOR CODE:             |                     | ]                       |  |
| A20. DATE OF QUESTIONNAIRE INSPECTION: | / /                 |                         |  |
| A21. NAME OF DATA ENTRY CLERK:         |                     |                         |  |
| A22. DATA ENTRY CLERK CODE:            |                     |                         |  |
| A23. DATE OF DATA ENTRY:               | / /                 |                         |  |

#### INTRODUCTION TO THE HOUSEHOLD TO BE INTERVIEWED

#### CONVEY THE FOLLOWING INFORMATION TO THE RESPONDENT:

Every five years the National Statistical Office in Zomba selects at random several hundred households in each district of the country to ask them questions about how they are living. The responses which are provided by the households to these questions are intended to help the government of Malawi do a better job in meeting the needs of all Malawians.

Your household was selected as one of those to which the IHS questions will be asked this time. You were not selected for any specific reason. Simply your name appeared on a list of all of the households in this area, and your name was chosen randomly.

I would like to ask the questions in this form to you as head of household or spouse of the head. I will also need to ask questions to other members of your household, as well as weigh and measure the height of any children under age 5 years who live in your household. These questions will take several hours to complete. All of your answers will be held in confidence. The answers which you and the members of your household might give me will only be used by the NSO or under its supervision.

Before I start, do you have any questions or is there anything which I have said on which you would like any further clarification? May I proceed with interviewing you and members of your household?

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|      |           |  |

IN ORDER TO MAKE A COMPREHENSIVE LIST OF INDIVIDUALS CONNECTED TO THE HOUSEHOLD. USE THE FOLLOWING PROBE QUESTIONS:

First, give me the names of all the members of your immediate family who normally live and eat their meals together here.

WRITE DOWN NAMES, SEX, AND RELATIONSHIP TO HH HEAD (B02 to B04). LIST HOUSEHOLD HEAD ON LINE 1.

Then, give me the names of any other persons related to you or other household members who normally live and eat their meals together here. FILL IN B02 to B04.

Are there any other persons not here now who normally live and eat their meals here? For example, household members studying elsewhere or traveling.

FILL IN B02 to B04.

Then, give me the names of any other persons not related to you or other household members, but who normally live and eat their meals together here, such as servants, lodgers, or other who are not relatives. FILL IN B02 to B04.

Finally, are there any other persons who slept here last night, but who do not normally live here? FILL IN B02 to B04.

IF MORE THAN 12 INDIVIDUALS, USE SECOND QUESTIONNAIRE. MAKE SURE TO MARK BOX ON FIRST PAGE OF BOTH QUESTIONNAIRES.

|          | MODULE B: HOUSEHOLD ROSTER |  |       |                    |  |        |          |   |        |  |  |  |  |
|----------|----------------------------|--|-------|--------------------|--|--------|----------|---|--------|--|--|--|--|
|          | B01                        | B02  | B03   | B04                | B05  | B06    |          |   | B07    |  |  |  |  |
| ).       | D C O D                    | MAKE A COMPLETE LIST OF ALL INDIVIDUALS WHO NORMALLY LIVE AND EAT THEIR MEALS TOGETHER IN THIS HOUSEHOLD, STARTING WITH THE HEAD OF HOUSEHOLD (CONFIRM THAT HOUSEHOLD HEAD HERE IS SAME AS HOUSEHOLD HEAD LISTED ON COVER.)  FILL IN B02 TO B04 BEFORE COMPLETING QUESTIONS B05 AND FOLLOWING. | SEX   | FATHER/MOTHER      | How old is [NAME]' IF 6 YEARS AND OVER, GIVE YEARS ONLY. IF LESS THAN 6 YEARS IN AGE, GIVE YEARS AND MONTHS. | birth? | [NAME]'s | For how many months during the past 12 months (since MONTH/ YEAR) has [NAME] been away from this household? |        |  |  |  |  |
|          |                            |  | LE .2 | OTHER (SPECIFY) 16 | YEARS MONTHS   | DAY    | MONTH    | YEAR  | MONTHS |  |  |  |  |
|          | 1                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 2                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 3                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 4                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 5                          |  |       |                    |  |        |          |   |        |  |  |  |  |
| )        | 6                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 7                          |  |       |                    |  |        |          |   |        |  |  |  |  |
| 0        | 8                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 9                          |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 10                         |  |       |                    |  |        |          |   |        |  |  |  |  |
| <u> </u> | 11                         |  |       |                    |  |        |          |   |        |  |  |  |  |
|          | 12                         |  |       |                    |  |        |          |   |        |  |  |  |  |

| B01              |   | B08  |  | B09                               | B10                        | B11   | B12  | B13  | B14                             | B15  | B16                             | B17                                    | B18  |
|------------------|---|--|--|-----------------------------------|----------------------------|---|--|--|---------------------------------|--|---------------------------------|--|--|
| ı                | TO CLASSIFY IN B8 EACH PERSON AS A HOUSEHOLD MEMBER OR NOT, LOOK AT THE ANSWER TO B07:  | HOUSE-<br>HOLD<br>MEMBER?                                  | FOR THE  | WAS<br>INFOR-<br>MATION<br>ON THE | HOUSE-<br>HOLD             | WHY WAS<br>INDIVIDUAL<br>NOT INTER-<br>VIEWED?                                  | Where were you<br>born?  | Where is<br>your father?                   | What<br>was<br>your<br>age      | Where is<br>your<br>mother?                | What<br>was<br>your<br>age      | Have you<br>always<br>lived in<br>this | How long is it since you came to stay                |
| C<br>O<br>D<br>E | ALL PERSONS FOR WHOM THE ANSWER IN B7 IS 9 MONTHS OR LESS ARE HOUSEHOLD MEMBERS. THAT IS, HOUSEHOLD MEMBERS SHOULD HAVE BEEN RESIDENT | CHECK<br>CRITERIA<br>AT LEFT<br>FOR HH<br>MEMBER-<br>SHIP. | REST OF THE<br>QUESTION-<br>NAIRE, ONLY<br>COLLECT<br>INFORMA-<br>TION ON<br>HOUSEHOLD | INDIVID-<br>UAL PRO-              | PRO-                       | ON SHORT ABSENCE (<2 WKS)1 ON LONG ABSENCE (>2 WKS)2                            | THIS VILLAGE 1 OTHER VILLAGE IN THIS DISTRICT 2 VILLAGE IN OTHER DISTRICT 3 THIS TOWN OR | IF FATHER IS MEMBER OF HH, COPY ID. (>B15) | when<br>your<br>father<br>died? | IF MOTHER IS MEMBER OF HH, COPY ID. (»B17) | when<br>your<br>mother<br>died? | village or<br>urban<br>location?       | here, in<br>this<br>village or<br>urban<br>location? |
|                  | IN THE HOUSEHOLD FOR AT<br>LEAST 3 MONTHS OVER THE<br>PAST 12 MONTHS.   |  | MEMBERS .  IGNORE THOSE  | OR HER-<br>SELF?                  | OF THE<br>INDIVID-<br>UAL? | AT BOARDING<br>SCHOOL OR<br>OTHER<br>INSTITUTION.3<br>PRESENT, BUT<br>UNWILLING | URBAN CENTRE 4 OTHER TOWN OR URBAN CENTER IN THIS DISTRICT 5 TOWN OR URBAN               | LIVING OUTSIDE OF HH . 97 (**B15*) DEAD 98 |                                 | LIVING OUTSIDE OF HH . 97 (**B17) DEAD98   |                                 |  |  |
|                  | - GUESTS WHO HAVE COME<br>TO VISIT FOR 3 MONTHS OR<br>MORE ARE CONSIDERED   | YES1<br>NO2  | PRESENTLY IN THE HOUSEHOLD   | YES1<br>(»B12)<br>NO2             | ID CODE                    | TO BE INTERVIEWED.4 OTHER (SPEC).5  | CENTRE IN OTHER DISTRICT 6 OUTSIDE MALAWI 7  | DOES NOT<br>KNOW99<br>(»B15)               | YEARS                           | DOES NOT<br>KNOW99<br>(»B17)               | YEARS                           | YES1<br>(»B21)<br>NO2                  | YEARS  |
| 1                | HOUSEHOLD MEMBERS.  |  | WHO ARE<br>NOT   |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 2                | - HOWEVER, <u>SERVANTS,</u><br><u>HIRED WORKERS, AND</u><br>LODGERS ARE <b>NOT</b>  |  | HOUSEHOLD<br>MEMBERS.  |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 3                | HOUSEHOLD MEMBERS IF THEY HAVE THEIR OWN  |  | LIST ALL<br>MEMBERS,   |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 4                | FAMILY ELSEWHERE.   |  | AND ONLY<br>MEMBERS,   |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 5                | IF THE ANSWER TO B7 IS MORE THAN 9 MONTHS (RESIDENT IN HOUSEHOLD LESS THAN 3  |  | ON THE<br>HOUSEHOLD<br>ROSTER FLAP   |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 6                | MONTHS), ONLY THE FOLLOWING ARE HOUSEHOLD   |  | OF THE<br>QUESTION-  |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 7                | MEMBERS:  |  | NAIRE NOW.   |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 8                | - HOUSEHOLD HEAD.<br>- YOUNG INFANTS.   |  | MAKE SURE<br>TO ASSIGN<br>EACH TO  |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 9                | - NEW SPOUSES.<br>- HOUSEHOLD MEMBERS   |  | THEIR  |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 10               | RESIDING IN AN INSTITUTION ELSEWHERE, BUT STILL DEPENDENT ON THE  |  | ROW.   |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 11               | HOUSEHOLD (e.g. BOARDING SCHOOL STUDENT).   |  |  |                                   |                            |   |  |  |                                 |  |                                 |  |  |
| 12               | 23322.3.32111).   |  |  |                                   |                            |   |  |  |                                 |  |                                 | _                                      |  |

| B01 | B19   | B20   | B21   | B22   | B23   | B24   | B25                                      | B26  |  |  | B27  | B28   | B29  |
|-----|---|---|---|---|---|---|--|--|--|--|--|---|--|
|     | Why did you move here?  PARENTS MOVED1 TO LIVE WITH RELATIVES2 SCHOOLING3 MARRIAGE4 FAMILY QUARREL .5 DIVORCE6 RETURN FROM WORK ELSEWHERE7 JOB TRANSFER8 LOOK FOR WORK9 START NEW JOB OR BUSINESS . 10 LOOKING FOR LAND TO FARM. 11 TO RECOVER FROM ILLNESS . 12 OTHER (SPEC.) . 13 | DISTRICT 3 OTHER TOWN OR URBAN CENTER IN THIS DISTRICT . 5 TOWN OR URBAN CENTRE IN OTHER DISTRICT 6 | ASK OF ALL AGED 10 AND OVER. (UNDER AGE 10 »NEXT MODULE)  What has been your main activity during the last 7 days? FARMER (MLIMI) | MEMBERS <u>AGED 12</u><br>YEARS AND OLDER.<br>(UNDER AGE 12 | What is your present marital status? MONOGAMOUS MARRIED OR NON-FORMAL UNION | IS RE- SPOND- ENT THE HOUSE- HOLD HEAD?  YES1 (**B29) NO2 (**NEXT MOD.) | your spouse live in this house-hold now? | IF MORE THAN ONE WIFE, COPY ID CODES OF ALL WIVES RESIDENT IN HOUSEHOLD. (THEN, IF FEMALE »B29. MEN »NEXT QUESTION.) |  |  | have a spouse living outside of this house-hold now? | many<br>spouses<br>do you<br>have who<br>are<br>residing<br>else-<br>where? | ASK OF HH HEAD. How many children aged under 15 years who are children of an adult in this household live elsewhere than in this household? NUMBER |
| 1   |   |   |   |   |   |   |  |  |  |  |  |   |  |
| 2   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 3   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 4   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 5   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 6   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 7   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 8   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 9   |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 10  |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 11  |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |
| 12  |   |   |   |   |   |   |  |  |  |  |  |   | N/A  |

## **MODULE C: EDUCATION**

[ASK ALL PERSONS AGED 5 YEARS AND OLDER.]

|                            | [ASK ALL F  | PERSONS A  | GED 5 YEA                        | RS AND OL               | DER.]                                  |                  |                                   |             |                             |   |                               |     |  |  |
|----------------------------|---|--|----------------------------------|-------------------------|--|------------------|-----------------------------------|-------------|-----------------------------|---|-------------------------------|-----|--|--|
| C01                        | C02   | C03  | C04                              | C05                     | C06                                    | C07              | C08                               | C09         | C10                         | C11   |                               | C12 | C13  | C14  |
| I<br>D<br>C<br>O<br>D<br>E | PUT AN 'X' FOR ALL INDI- VIDUALS WHO ARE AGED 4 YEARS AND YOUNGER.  DO NOT ADMIN- ISTER THIS MODULE TO THESE INDI- VIDUALS. | What language do you speak at home? CHEWA. 1 NYANJA 2 YAO. 3 TUMBUKA. 4 LOMWE. 5 NKHONDE. 6 NGONI. 7 SENA . 8 NYAKYUSA 9 TONGA10 LAMBYA .11 SENGA12 SUKWA13 ENGLISH.14 OTHER15 | read a one-<br>page letter<br>in | write a one page letter | <u>read</u> a<br>one-page<br>letter in | write a one-page | <u>read</u> a one-<br>page letter | write a one | ever<br>attended<br>school? | What was the result of result of the result | TO ATTEND  TO ATTEND  SCHOOLS | =   | highest<br>educational<br>qualification<br>you have<br>acquired? | In which calendar year did you begin school for the very first time? |
| 1                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 2                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| _                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 3                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 4                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 5                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 6                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 7                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 8                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 9                          |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 10                         |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 11                         |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |
| 12                         |   |  |                                  |                         |  |                  |                                   |             |                             |   |                               |     |  |  |

| C01         | C15      | C16  | C17  | C18   | C19  |                                    | C20  | C21  | C22   | C23   | C24                              |   |
|-------------|----------|--|--|---|--|------------------------------------|--|--|---|---|----------------------------------|---|
| I D C O D E | were you | attend school in the last completed academic year? | What class were you in during the last completed academic year?  NURSERY/ PRE-SCHOOL-0 FORM 5 - 13 PRIMARY FORM 6 - 14 STND. 1 - 1 UNIVERSITY STND. 2 - 2 UNIV. 1 - 15 STND. 3 - 3 UNIV. 2 - 16 STND. 4 - 4 UNIV. 3 - 17 STND. 5 - 5 UNIV. 4 - 18 STND. 6 - 6 UNIV. 5 & STND. 7 - 7 ABOVE - 19 STND. 8 - 8 TRAINING SECONDARY COLLEGE FORM 1 - 9 TC YR. 1 - 20 FORM 2 - 10 TC YR. 2 - 21 | Are you currently attending school or, if school is not now in session, did you attend school in the session just completed and plan to attend next session?  YES1 (»C21) | Why did you not education?  ACQUIRED ALL EDUC NO MONEY FOR FEES TOO OLD TO CONTIN MARRIED / BECAME ILLNESS OR DISABI FOUND WORK NOT INTERESTED, I PARENTS TOLD ME T HAD TO WORK OR HE POOR/CROWDED SCHC POOR QUALITY INST TEACHERS OFTEN AE SCHOOL TOO DANGER SCHOOL TOO FAR FR SCHOOL TOO FAR FR SCHOOL CONFLICT W FAILED PROMOTION DISMISSED / EXPEL OTHER (SPECIFY) . | ATION WANTED . 1 COR UNIFORM 2 UUE | In which calendar year did you last attend school?  CALENDAR YEAR (IF WITHIN PAST 12 MONTHS "C30) (OTHERWISE, WITHIN WISE, WIS | What type of school do you attend?  PRIMARY LEA/GOVERNMENT | Are you a day scholar or a boarder at the school? | you get to school each day?  FOOT . 1 BICYCLE . 2 BUS/MINI- BUS . 3 PRIVATE | get to sci<br>means of<br>[C23]? | g does it ake you to hool by this f transport |
|             | YEARS    | NO2 (»C18)   | FORM 3 - 11 TC YR. 3 - 22<br>FORM 4 - 12 TC YR. 4 - 23   | NO2   | 1st reason   | 2nd reason                         | »NEXT<br>MODULE)   | TRAINING COLLEGE 32<br>OTHER TERTIARY 33                   | BOARDER . 2<br>(»C25)                             | VEHICLE 4<br>OTHER 5  | TIME<br>AMOUNT                   | UNIT  |
| 1           |          |  |  |   |  |                                    |  |  | <u> </u>  |   |                                  |   |
| '           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 2           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 3           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 4           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 5           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 6           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 7           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 8           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 9           |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 10          |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 11          |          |  |  |   |  |                                    |  |  |   |   |                                  |   |
| 12          |          |  |  |   |  |                                    |  |  |   |   |                                  |   |

| C01         | C25  | C26   | C27    | C28  | C29   | C30                        |               |                                  |               |  |   |                   |                            |
|-------------|--|---|--------|--|---|----------------------------|---------------|----------------------------------|---------------|--|---|-------------------|----------------------------|
| I D C O D E | How many hours did you spend yesterday attending classes at school or university, or in some other | you<br>spend<br>yester-<br>day doing<br>home-<br>work, that<br>is, school | past 2 | many<br>days did<br>you<br>attend<br>school in<br>the past 2<br>weeks? | At any time in<br>the past 12<br>months, did<br>you ever<br>temporarily<br>withdraw from<br>school, so<br>that you<br>missed more<br>than two | How much v<br>friends for: | was spent o   | n your edu                       | cation in the | e last 12 months   | s by the house  | ehold, famil      | ly, and                    |
|             | training course?   | work to be done at home?  | NUMBER |  | instruction?  | including                  | books & other | C. School<br>uniform<br>clothing |               | E. Contri-<br>bution for<br>school<br>building or<br>maintenance | F. Parent<br>associa-<br>tion &<br>other school<br>related fees | G. Other expenses | TOTAL  (»NEXT  MODULE)  MK |
| 1           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 2           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 3           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 4           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 5           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 6           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 7           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 8           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 9           |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 10          |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 11          |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |
| 12          |  |   |        |  |   |                            |               |                                  |               |  |   |                   |                            |

### **MODULE D: HEALTH**

[ASK OF ALL PERSONS IN THE HOUSEHOLD. MOTHERS OR GUARDIANS TO ANSWER FOR CHILDREN UNDER 10 YEARS OF AGE.]

| -                          | •  |  |  |  | JIANS TO ANSWER FOR CHILDREN UNDER 10 YEARS   |   |           |  |           |  |  |   | n   |   |
|----------------------------|--|--|--|--|---|---|-----------|--|-----------|--|--|---|---|---|
| D01                        | D02  | D03                                    | D04  | D05  |   | D06   |           | D07  |           | D08  | D09  | D10   | D11   | D12   |
| I<br>D<br>C<br>O<br>D<br>E | INFORMATION<br>SELF-<br>REPORTED<br>OR IS IT<br>BEING<br>PROVIDED BY | ING THE<br>INFORM-<br>ATION<br>FOR THE | During the past 2 weeks have you suffered from an illness or injury? | What was the illnes:  FEVER, MALARIA 1 1  DIARRHEA . 2  STOMACH ACHE . 3  VOMITING . 4  SORE THROAT . 5  UPPER RESPIRATORY  (SINUSES) . 6  LOWER RESPIRATORY  (CHEST, LUNGS) . 7  FLU 8  ASTHMA 9  HEADACHE 10  FAINTING 11  SKIN PROBLEM . 12  DENTAL PROBLEM . 13  EYE PROBLEM . 14  EAR/NOSE/THROAT . 15  BACKACHE 16 | BLOOD PRESSURE .18 PAIN WHEN PASS- ING URINE .19 DIABETES20 MENTAL DISORDER .21 TB22 SEXUALLY TRANSMITTED DISEASE23 BURN24 FRACTURE25 WOUND26 POISONING27 PREGNANCY28 UNSPECIFIED LONG-TERM ILLNESS29 | MEDICAL WORKER (DOCTOR, CLINICAL OFFICER, NURSE) AT HOSPITAL 1 MEDICAL WORKER AT OTHER HEALTH FACILITY 2 TRADITIONAL HEALER 3 NON-HH MEMBER (NOT MEDICAL) 4 |           | find relief for your illness?  DID NOTHING, NOT SERIOUS . 1 DID NOTHING, NO MONEY 2 USED MEDICINE HAD IN STOCK 3 PERSONALLY KNOWN REMEDIES. 4 SOUGHT TREATMENT AT GOVT. HEALTH FACILITY 5 SOUGHT TREATMENT AT CHURCH/MISSION FACILITY . 6 SOUGHT TREATMENT AT PRIVATE HEALTH FACILITY . 7 WENT TO LOCAL PHARMACY . 8 WENT TO LOCAL GROCERY FOR MEDICINE 9 SOUGHT TREATMENT WITH TRADITIONAL HEALER 10 SOUGHT TREATMENT WITH FAITH HEALER |           | you have to<br>stop your<br>normal<br>activities<br>because of<br>this (these) | For how<br>many<br>days in<br>the past<br>two<br>weeks<br>did you<br>have to<br>stop your<br>normal<br>activities? | past 2 weeks did anyone else in the household have to stop their normal activities to care for you?  YES1 | weeks<br>did<br>someone<br>stop their<br>normal | How much in total did you spend in the past 4 weeks for all illnesses and injuries, including for medicine, tests, consultation, & inpatient fees, if any? INCLUDE ESTIMATED VALUE OF ANY IN- |
|                            | ANOTHER HH   |  | NO2  | HEART PROBLEM17  | OTHER (SPECIFY).30  | SELF  | 6         | OTHER (SPECIFY)  | )12       | NO2  |  | NO2   |   | KIND PAYMENTS.  |
|                            | MEMBER .2  | ID CODE                                | (»D12)   | Problem 1  | Problem 2   | Problem 1   | Problem 2 | Problem 1  | Problem 2 | (»D12)   | DAYS   | (»D12)  | DAYS  | MK  |
| 1                          | 1  |  | I  | 1  |   |   |           |  |           |  |  |   |   |   |
|                            |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 2                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 3                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 4                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 5                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 6                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 7                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 8                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 9                          |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 10                         |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 11                         |  |  |  |  |   |   |           |  |           |  |  |   |   |   |
| 12                         |  |  |  |  |   |   |           |  |           |  |  |   |   |   |

| D01         | D13   | D14  | D15   | D16  | D17  | D18   | D19  | D20                                      | D21  | D22                       | D23   |   |                             | D24   | D25         | D26   |
|-------------|---|--|---|--|--|---|--|--|--|---------------------------|---|---|-----------------------------|---|-------------|---|
| I D C O D E | total did you spend in the past 4 weeks for medical care not related to an illness - preventative health care, prenatal visits, check-ups, etc., if any? INCLUDE ESTIMATED VALUE OF ANY IN-KIND | for non-<br>prescription<br>medicines -<br>Panadol,<br>Fansidar,<br>cough syrup, | last <u>12</u><br>months,<br>were you<br><u>hospital-</u><br><u>ized</u> or had<br>an | the total<br>cost of<br>your<br>hospital-<br>ization(s)<br>or<br>overnight | other<br>members<br>of your<br>household<br>have to<br>borrow<br>money or<br>sell assets<br>in order to<br>pay for | last 12<br>months,<br>did you<br>stay over-<br>night(s) at<br>a<br>traditional<br>healer's or<br>faith<br>healer's<br>dwelling? | the total<br>cost of<br>your<br>stay(s) at<br>the<br>traditional<br>healer or<br>faith | other<br>members<br>of your<br>household | what it was at this time last year?  MUCH BETTER 1 SOMEWHAT BETTER 2 ABOUT THE SAME 3 SOMEWHAT WORSE 4 MUCH WORSE 5 CHILD LESS | physically<br>or mentally | MISSI:<br>MISSI:<br>LAME<br>BLIND<br>DEAF<br>UNABL<br>SPEA<br>MENTA | CAPPE ALL  NG HAN  NG FOO   E TO  K  LLLY | D .1<br>T .2<br>3<br>4<br>5 | sweep the<br>floor of your<br>house,<br>could you<br>do so easily,<br>with<br>difficulty, or<br>not at all? | walk for 5  | Do you suffer from a chronic illness?  YES1 NO2 |
|             | PAYMENTS.<br>MK   | MK   | (»D18)  | MK   | NO2  | (»D21)  | MK   | NO2                                      | THAN ONE<br>YEAR OLD .6  | (»D24)                    | DISA<br>OTHER   | BLED.<br>(SPEC                            | 7                           | TOO YOUNG 4   | TOO YOUNG 4 | (»D30)  |
|             | 1   |  | I   |  |  | 1   | I  |  | )<br>  | <u> </u>                  |   |   |                             | I   |             |   |
| 1           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 2           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 3           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 4           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 5           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 6           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 7           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 8           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 9           |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 10          |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 11          |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |
| 12          |   |  |   |  |  |   |  |  |  |                           |   |   |                             |   |             |   |

| D01      | D27   |             | D28  | D29  | D30                                     | D31                             | D32                           | D33                                  | D34                        | D35   | D36  | D37 | D38   |
|----------|---|-------------|--|--|---|---------------------------------|-------------------------------|--------------------------------------|----------------------------|---|--|-----|---|
| - D СООШ | What chronic do you suffe LIST UP TO 2. CHRONIC MALAI TUBERCULOSIS. DIABETES ASTHMA BILHARZIA/ SCHISTOSOMIA ARTHRITIS/ RHEUMATISM. NERVE DISORDISOTSORES THAT DO NOT HEAL . CANCER PNEUMONIA . OTHER (SPEC. ILLNESS 1 | RIA/FEVER.1 | you suffered<br>from this<br>illness (these<br>illnesses)? | MEDICAL WORKER (DOCTOR, CLINICAL OFFICER, NURSE) AT HOSPITAL 1 MEDICAL WORKER AT OTHER HEALTH FACILITY 2 TRADITIONAL HEALER 3 NON-HH MEMBER (NOT MEDICAL) 4 HH MEMBER 5 S SELF 6 | Have you lost a lot of weight recently? | usually<br>feverish<br>(feeling | have a<br>cough all<br>of the | Are you continually having diarrhea? | RESPOND-<br>ENT A<br>WOMAN | did you give birth to a child, even if born dead? | regularly go<br>to a health<br>clinic when |     | Who delivered this child?  DOCTOR OR CLINICAL OFFICER . 1 NURSE 2 MIDWIFE 3 TRADITIONAL BIRTH ATTENDANT . 4 FRIEND OR RELATIVE . 5 SELF 6 OTHER 7 |
| 1        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 2        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 3        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 4        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 5        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 6        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 7        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 8        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 9        |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 10       |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 11       |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |
| 12       |   |             |  |  |   |                                 |                               |                                      |                            |   |  |     |   |

## **MODULE E: TIME USE & LABOUR**

(ASK ALL HOUSEHOLD MEMBERS AGED 5 YEARS AND OLDER.) IF DID NOT DO TASK, WRITE ZERO; LESS THAN 1/2 HOUR, WRITE '0.5'; OTHERWISE, ROUND TO NEAREST HOUR.

|             |  |             |  |   |   |   | JER.) IF DID NOT D   |     |   |  |   |          |   | 1= 1   |
|-------------|--|-------------|--|---|---|---|--|-----|---|--|---|----------|---|--|
| E0          | E02                                    | E03         | E04                                    | E05   | E06   | E07   | E08  | E09 | E10   | E11  | E12                                       | E13      | E14   | E15  |
| I D C O D E | FOR ALL<br>INDI-<br>VIDUALS<br>WHO ARE | WAS<br>WHAT | YESTER-<br>DAY A<br>PUBLIC<br>HOLIDAY? | How many hours did you spend yesterday cooking, doing laundry, cleaning your house, and the like? | many hours did you spend yester- day collect- | you spend<br>yesterday<br>collecting<br>firewood<br>(or other<br>fuel | hours in the last seven days did you spend on household agricultural activities (including livestock) or |     | hours in the last seven days did you help in any of the household's non-agricultural or non-fishing household businesses, | days did you<br>engage in<br>casual, part- | last seven<br>days did you<br>do any work | AT THESE | any activities in the last seven days, do you have a job, business, or other economic or farming activity | What is the main reason you did not work at this activity during the last seven days?  ON LEAVE1 ILL2 BUSINESS CLOSED TEMPOR-ARILY3 NOT FARMING SEASON 4 OTHER (specify) . 5 (THEN »E18) |
| 1           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 2           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 3           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 4           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 5           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 6           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 7           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 8           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 9           |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 10          |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 11          |  |             |  |   |   |   |  |     |   |  |   |          |   |  |
| 12          |  |             |  |   |   |   |  |     |   |  |   |          |   |  |

| E01    | E16   | E17   | E18  | E19   |                          | E20   |                      | E21  |
|--------|---|---|--|---|--------------------------|---|----------------------|--|
| I<br>D | four weeks have you taken any action to look for any kind | offered a<br>job, would<br>you be<br>willing to<br>accept the | the <u>past 12</u><br><u>months</u> , were<br>you <u>employed</u><br><u>for a wage,</u><br>salary, | Describe your <u>main employed occupation</u> over the pmonths? | oast 12                  | Describe what kind of trade or business your main occupation over the past 12 months is connected | n employed<br>with?  | Is your main employer for your main occupation in the last 12 months |
| O<br>D | of work or<br>start any kind<br>of business /<br>income   |   | commission<br>or any<br>payment in<br>kind,  |   |                          |   |                      | RESPONSES)  a private company.1 a private                            |
| -      | generating  |   | excluding  | 1.7   | Supervisor               | 1   | (Supervisor          | individual 2 government 3  |
|        | activity?   |   | ganyu?   | I   | to put in                |   | to put in            | a state-owned<br>enterprise  |
|        |   |   |  | oc  | ccupational              |   | industry             | (parastatal)4<br>MASAF or other                                      |
|        |   |   | YES1   |   | code <u>after</u>        |   | code <u>after</u>    | public works   |
|        | YES1<br>NO2   | YES1<br>NO2   | NO2<br>(»E29)  |   | interview)<br>CCUP. CODE | WRITTEN DESCRIPTION   | interview) IND. CODE | program 5<br>Other (specify)6  |
|        | 101112  | 1101112   | (**223)  | INTITIAL BESONITION   | 0001. 0002               | MATILE BESONET TEST   | 11.5. 0052           |  |
| 1      |   |   |  |   |                          |   |                      |  |
| 2      |   |   |  |   |                          |   |                      |  |
| 3      |   |   |  |   |                          |   |                      |  |
| 4      |   |   |  |   |                          |   |                      |  |
| 5      |   |   |  |   |                          |   |                      |  |
| 6      |   |   |  |   |                          |   |                      |  |
| 7      |   |   |  |   |                          |   |                      |  |
| 8      |   |   |  |   |                          |   |                      |  |
| 9      |   |   |  |   |                          |   |                      |  |
| 10     |   |   |  |   |                          |   |                      |  |
| 11     |   |   |  |   |                          |   |                      |  |
| 12     |   |   |  |   |                          |   |                      |  |

| E01                        | E22                                       |                                   | E23   | E24   | E25      | E26                                    |                 | E27                                 | E28  |                 | E29   | E30   | E31   |
|----------------------------|---|-----------------------------------|---|-------|----------|--|-----------------|-------------------------------------|--|-----------------|---|---|---|
| I<br>D<br>C<br>O<br>D<br>E | For how lotime periodo this wollast 12 mo | d did you<br>ork during<br>onths? | many <u>days</u><br><u>per month</u><br>did you<br>normally<br>do this<br>work? |       | was your | What periodo each of salary pay cover? | f your ments    | allowances or gratuities, including | Over what<br>time are you<br>reporting y<br>allowance<br>gratuity pa | TIME UNIT       | ganyu labour<br>for anyone<br>who is not a<br>member of<br>your<br>household? | For how many total days did you do <i>ganyu</i> labour over the past 12 months? | What was the average daily wage you received for these days worked at ganyu over the past 12 months?  ESTIMATE CASH VALUE OF ANY IN-KIND PAYMENTS RECEIVED. |
|                            |   | TIME UNIT                         |   |       |          | NUMBER OF                              | DAY3<br>WEEK .4 | PAYMENTS RECEIVED.                  | NUMBER OF  | DAY3<br>WEEK .4 | YES1<br>NO2   |   |   |
|                            | NUMBER                                    | MONTH. 5                          | DAYS  | HOURS | MK       | TIME UNITS                             |                 | MK                                  | TIME UNITS   |                 | (»NEXT MODULE)  | DAYS  | (»NEXT MODULE)  |
| 1                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 2                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 3                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 4                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 5                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 6                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 7                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 8                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 9                          |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 10                         |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 11                         |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |
| 12                         |   |                                   |   |       |          |  |                 |                                     |  |                 |   |   |   |

## **MODULE F: SECURITY & SAFETY**

(ASK OF ALL MEMBERS OF HOUSEHOLD AGED 10 YEARS AND OLDER.)

|          |   |                 |  | LD AGED 10 Y   | EAKS AI  |   |  | _   |  |                                     |     |     |  |                                 |  |
|----------|---|-----------------|--|--|--|---|--|---|--|-------------------------------------|-----|-----|--|---------------------------------|--|
| F01      | F02   | F03             | F04  | F05  | F06  |   | F07  | F08   | F09  |                                     | F10 | F11 | F12  | F13                             | F14  |
| I D CODE | FOR ALL INDI- VIDUALS WHO ARE AGED 9 YEARS AND YOUNGER.  DO NOT ADMIN- ISTER THIS MODULE TO THESE INDI- | your own house? | walking alone in your neighborhood or village during the day, how safe do you feel | in your<br>neighborhood<br>or village <u>at</u><br><u>night</u> , how<br>safe do you<br>feel against<br>criminals? | If 'Unsafe 'Fairly sa are the the CAN LIST TWO.  ARMED ROE BURGLARS ARMED) OTHER CRI | VERED FE' TO 7. E, ASK.) E' Or fe', what hreats? UP TO  BBERS. 1 (NOT 2 | year, would<br>you say that<br>crime<br>increased, | personally<br>attacked,<br>physically<br>beaten, or<br>threatened<br>with | Was the individua househo member relative, neighbo a strang CAN LIS TO TWO | al a al a bld a a ur, or er? T UP . |     |     | report<br>any of<br>these<br>offenses<br>to the<br>police? | whole,<br>were you<br>satisfied | Why did you fail to report this incident to the police?  CRIME NOT SERIOUS.1 POLICE TOO FAR 2 POLICE CORRUPT 3 REPORTING WOULD CAUSE TROUBLE 4 NEIGHBOURHOOD ISSUE, DIDN'T WANT POLICE 5 OTHER (SPEC.) 6 |
|          | VIDUALO.  |                 | UNSAFE 3   |  | OTHER  |   | THE SAME . 3                                       | (»F15)  | STRANGE  |                                     | NO2 | NO2 | (»F14)   | »F15)                           |  |
|          |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 1        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 2        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 3        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 4        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 5        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 6        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 7        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 8        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 9        |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 10       |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 11       |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |
| 12       |   |                 |  |  |  |   |  |   |  |                                     |     |     |  |                                 |  |

#### [ASK OF HOUSEHOLD HEAD, OR. IF UNAVAILABLE, ANOTHER INFORMED HOUSEHOLD MEMBER.]

## **MODULE G: HOUSING**

[ASK OF HOUSEHOLD HEAD.]

| G01                     | G02  | G03        |                                    | G04   |  | G05                         | G06  | G07   | G08  | G09  | G10  |
|-------------------------|--|------------|------------------------------------|---|--|-----------------------------|--|---|--|--|--|
| this house, is it       | dwelling today,<br>how much would<br>you receive for it? |            | ited this<br>exactly like it<br>n? | How much o<br>to rent this o<br>(MK PER TIM | dwelling?                                  |                             | OF<br>DWELLING<br>DOES THE<br>HOUSE-   | TYPE OF CONSTRUCTION MATERIALS ARE USED FOR THE | DWELLING OF THE<br>HOUSEHOLD ARE   | MAIN DWELLING IS<br>PREDOMINANTLY  | THE FLOOR OF THE MAIN DWELLING IS PREDOMI- NANTLY MADE OF WHAT MATERIAL? |
| rent this house?  OWNED | МК   | (THEN »G05 | DAY 3 WEEK . 4 MONTH. 5 YEAR . 6   | МК  | DAY 3 WEEK . 4 MONTH. 5 YEAR . 6 TIME UNIT | DO NOT<br>KNOW .99<br>YEARS | SINGLE HOUSE 1 SEVERAL SEPARATE STRUCTURES . 2 FLAT 3 ROOM IN LARGER DWELLING 4 IMPROVISED HOUSING 5 OTHER 6 | MODERN MATERIALS                                | GRASS 1 MUD (YOMATA) . 2 COMPACTED EARTH (YAMDINDO) . 3 MUD BRICK (UNFIRED) . 4 BURNT BRICKS . 5 CONCRETE 6 WOOD 7 IRON SHEETS . 8 OTHER 9 | GRASS 1 IRON SHEETS 2 CLAY TILES 3 CONCRETE 4 PLASTIC SHEETING 5 OTHER 6 | SAND 1 SMOOTHED MUD. 2 SMOOTH CEMENT 3 WOOD 4 TILE 5 OTHER 6             |
|                         |  |            |                                    |   |  |                             |  |   |  |  |  |

| G11            | G12                      | G13               | G14          | G15       | G16                    | G17          |             | G18                | G19                | G20                    | G21                 |
|----------------|--------------------------|-------------------|--------------|-----------|------------------------|--------------|-------------|--------------------|--------------------|------------------------|---------------------|
| How many       | What is your             | What is your      | Do you ever  | Do you    | Where do               | How long de  | oes it take | Of the firewood    | What is the total  | Do you have            | Is your electricity |
| separate rooms | main source of           | main source of    | use firewood | ever      | you go to              | you to walk  | from your   | you used in the    | value of the       | electricity working in | from ESCOM, a       |
| do the members | lighting fuel?           | cooking fuel?     | for fuel?    | collect   | collect                | dwelling to  | where you   | past week, how     | firewood you used  | your dwelling?         | generator, solar    |
| of your        |                          |                   |              | firewood? | firewood?              | usually go t | -           | much of it did you | -                  | Š                      | panels, or some     |
| household      |                          |                   |              |           |                        | firewood?    |             |                    | whether gathered   |                        | other source?       |
| occupy?        |                          |                   |              |           |                        |              |             | 1 -                | or purchased?      |                        |                     |
| cocupy.        |                          | COLLECTED         |              |           |                        |              |             |                    | (Estimate purchase |                        |                     |
| (DO NOT COUNT  | COLLECTED                | FIREWOOD 1 (»G16) |              |           |                        |              |             |                    | ,                  |                        |                     |
| BATHROOMS,     |                          | PURCHASED         |              |           |                        |              |             |                    | cost of gathered   |                        |                     |
| TOILETS,       | PURCHASED                | FIREWOOD 2        |              |           | OWN<br>WOODLOT .1      |              |             | ALL 1              | firewood.)         |                        |                     |
| STOREROOMS, OR | FIREWOOD2                | (»G15)            |              |           | COMMUNITY              |              |             | ALMOST             |                    |                        |                     |
| GARAGE)        |                          | PARAFFIN 3        |              |           | WOODLOT .2             |              |             | ALL2               |                    |                        |                     |
|                | PARAFFIN 4 ELECTRICITY 5 |                   |              |           | FOREST                 |              |             | MORE THAN HALF 3   |                    |                        |                     |
|                | GAS 6                    |                   |              |           | RESERVE .3<br>UNFARMED |              | MINUTE. 1   | HALF 4             |                    |                        | ESCOM1              |
|                |                          | CROP RESIDUE 7    | YES1         | YES1      | AREAS OF               |              | HOUR 2      | LESS THAN          |                    | YES1                   | GENERATOR2          |
| MMDED 05       | CELL (TORCH).7           |                   |              |           | COMMUN-                |              | HOUR Z      | HALF 5             |                    |                        |                     |
| NUMBER OF      |                          | ANIMAL WASTE 9    | NO2          | NO2       | ITY4                   | TIME         |             | A LITTLE. 6        |                    | NO2                    | SOLAR PANEL.3       |
| ROOMS          | OTHER 9                  | OTHER10           | (»G20)       | (»G19)    | OTHER5                 | AMOUNT       | UNIT        | NONE 7             | MK                 | (»G24)                 | OTHER 4             |
|                | I                        | 1                 | I I          | I 1       | T                      | I            |             | T                  | 1                  | I .                    | 1                   |
|                |                          |                   |              |           |                        |              |             |                    |                    |                        |                     |
|                |                          |                   |              |           |                        |              |             |                    |                    |                        |                     |

| G22                | G23        |             | G24               | G25             | G26        | G27          |            | G28          | G29                 | G30   | G31         |                  |
|--------------------|------------|-------------|-------------------|-----------------|------------|--------------|------------|--------------|---------------------|---|-------------|------------------|
| What was the       |            | _           | Although you      | Is there a      | What was   | To what ler  | •          |              |                     | , <u>—</u>                                    |             | does it take you |
| total cost for     | time doe   | s this      | do not have       | <u>landline</u> | the total  | does this la | ndline     | someone in   | cost for cell phone | drinking water over the past                  | to walk (Of | NE WAY) to the   |
| electricity in the | cost for e | electricity | electricity here, | telephone in    | cost for   | telephone of | ost refer? | the          | service for all     | month?  | water sour  | ce from your     |
| household over     | refer?     |             | is there          | working         | landline   |              |            | household    | household           |   | dwelling?   | ·                |
| the last period?   |            |             | electricity       | condition in    | telephone  |              |            | own a        | members last        |   |             |                  |
|                    |            |             | within 100        | the dwelling    | service in |              |            | cellular     | month?              | PIPED INTO DWELLING.(»G33) .1                 |             |                  |
| IF ESCOM, LAST     |            |             | meters of this    | unit?           | the house- |              |            | telephone    |                     | PIPED OUTSIDE DWELLING,                       |             |                  |
| BILL RECEIVED.     | (THEN      |             | dwelling,         |                 | hold over  |              |            | (cell phone) |                     | PERSONAL.(»G33) 2                             | 1           |                  |
|                    |            |             | whether from      |                 | the last   |              |            | in working   |                     | COMMUNAL STANDPIPE 3                          |             |                  |
|                    |            |             | ESCOM, a          |                 | period?    |              |            | condition?   |                     | PERSONAL HANDPUMP.(»G33)4 COMMUNAL HANDPUMP 5 |             |                  |
|                    |            |             |                   |                 | ponou.     |              |            | corrainerr.  |                     | PROTECTED SPRING 6                            |             |                  |
|                    |            | DAY3        | generator, a      |                 | LAST BILL  |              | DAY3       |              |                     | PERSONAL OPEN, UNPROTECTED                    |             |                  |
|                    |            | WEEK4       | solar panel, or   |                 | AMOUNT     |              | WEEK4      |              |                     | WELL.(»G33)                                   |             |                  |
|                    |            | MONTH .5    | some other        |                 |            |              | MONTH .5   |              |                     | COMMUNAL OPEN, UNPROTECTED                    | l           | MINUTE. 1        |
|                    |            | YEAR6       | source?           | YES1            |            |              | YEAR6      | YES1         |                     | WELL8 RIVER/SPRING9                           |             | HOUR 2           |
|                    | TIME       | TIME        | YES1              | NO2             |            | TIME         | TIME       | NO2          |                     | LAKE/RESERVOIR 10                             | TIME        |                  |
| MK                 | AMOUNT     | UNIT        | NO2               | (»G28)          | MK         | AMOUNT       | UNIT       | (»G30)       | MK                  | OTHER   | AMOUNT      | TIME UNIT        |
|                    | 1          |             | 1                 | 1               |            | 1            |            | 1            | 1                   |   |             |                  |
|                    |            |             |                   |                 |            |              |            |              |                     |   | I           |                  |
|                    |            |             |                   |                 |            |              |            |              |                     |   |             |                  |

| G32                        | G33                          | G34                       | G35        | G36                   | G37             | G38                        | G39                | G40              | G41                                 |
|----------------------------|------------------------------|---------------------------|------------|-----------------------|-----------------|----------------------------|--------------------|------------------|-------------------------------------|
| Typically when you get to  | Do you use this source       | In the other season, what | What was   | What kind             | Is this toilet  | What kind of               | Do any members     | Has/have         | (ASK ONLY IF HOUSEHOLD              |
| the [WATER SOURCE],        | for your drinking water      | is your main source of    | the total  | of toilet             | facility for    | rubbish disposal           | of your household  | the bed          | HAS CHILDREN AGED FIVE              |
| how much time do you       | all year round, only in      | drinking water?           | cost of    |                       | the use of:     | facilities does your       | sleep under a bed  | net(s) ever      | AND UNDER)                          |
| have to wait in a queue to |                              |                           | drinking   | does your             | READ            | household use?             | net to protect     | been             |                                     |
| collect the water?         | in the rainy season?         |                           | water for  | household             |                 |                            | against mosquitoes |                  | Do the children under 5 in          |
|                            |                              |                           | your house | use?                  |                 |                            | at some time       | insecticide      | the household sleep under           |
|                            |                              |                           | hold last  |                       |                 |                            |                    | against          | a bed net at those times of         |
|                            |                              |                           | month?     | FLUSH<br>TOILET . 1   |                 |                            |                    | mosaui-          | the year when there are             |
|                            |                              |                           |            | VIP                   |                 |                            |                    | toes in the      | mosquitoes present?                 |
|                            |                              | USE CODES FOR G30         |            | LATRINE. 2<br>TRADIT. |                 |                            |                    | past six         |                                     |
|                            |                              | OSE CODES FOR GSO         |            | LATRINE               | HH Mem-         | COLLECTED FROM             |                    | months?          |                                     |
|                            |                              |                           |            | W/ROOF . 3            | bers            | RUBBISH BIN1               |                    |                  | YES, FOR <u>ALL</u> CHILDREN        |
| 1                          | ALL YEAR 1                   |                           | ENTER      | TRADIT.<br>LATRINE    | only1           | RUBBISH PIT 2<br>BURNING 3 |                    | NO 2<br>ALL NETS | UNDER FIVE 1 YES, FOR SOME CHILDREN |
| MINUTE.1<br>HOUR2          | (»G35)<br>ONLY DRY SEASON. 2 |                           | 'ZERO'     | W/O ROOF 4            | Other           | PUBLIC RUBBISH             | YES1               | TREATED &        | UNDER FIVE 2                        |
| TIME TIME                  | ONLY RAINY                   |                           | IF NONE.   | NONE                  | house-<br>holds | HEAP 4                     | NO2                |                  | NO, NONE OF THE CHILDREN            |
| AMOUNT UNIT                | SEASON 3                     |                           | MK         | (»G38) . 5<br>OTHER 6 |                 | OTHER 6                    | (»NEXT MODULE)     | 6 MTHS.          | UNDER FIVE 3 NO CHILDREN UNDER 5 9  |
| 111.001.1                  | <u> </u>                     | <u> </u>                  | 7.110      | 1                     |                 |                            | ( HODOLL)          |                  |                                     |
|                            |                              |                           |            |                       |                 |                            |                    |                  |                                     |
|                            |                              |                           |            |                       |                 |                            |                    |                  |                                     |

## MODULE H: CONSUMPTION OF SELECTED FOOD OVER PAST THREE DAYS

|                                       | H01    | H02  | H03      |           | H04           | H05                        |
|---------------------------------------|--------|------|----------|-----------|---------------|----------------------------|
| Over the past three days, did you or  | •'     |      | How much | did you   | What is the   | What was the               |
| others in your household consume any  |        |      | consume? |           | estimated     | source of the food?        |
| [] which you did not purchase, but    |        |      |          |           | value of this |                            |
| produced yourself, received as a gift |        |      |          |           | food?         |                            |
| or as wages, or received it in some   | YES1   |      |          |           |               | OWN PRODUCTION .1          |
| other manner without purchase?        | NO2    |      |          | UNIT      |               | BARTER 2<br>WAGE-IN-KIND 3 |
|                                       | (»NEXT | ITEM |          | (CODES    |               | GIFT 4                     |
|                                       | ITEM)  | CODE | QUANTITY | AT RIGHT) | MK            | OTHER 5                    |
| Ufa (maize flour) mgaiwa              |        | 11   |          |           |               |                            |
| Ufa (maize flour) refined             |        | 12   |          |           |               |                            |
| Cassava flour                         |        | 13   |          |           |               |                            |
| Groundnut                             |        | 14   |          |           |               |                            |
| Nkhwani                               |        | 15   |          |           |               |                            |
| Poultry                               |        | 16   |          |           |               |                            |

| <b>UNIT</b><br>KILOGRÆ |      |     |    | .1  |
|------------------------|------|-----|----|-----|
| 50 KG.                 | BAG  | 3.  |    | . 2 |
| 90 KG.                 | BAG  | 3.  |    | . 3 |
| PAIL (S                | SMAI | L)  |    | . 4 |
| PAIL (1                | LARC | E)  |    | .5  |
| No. 10                 | PLF  | ATE |    | .6  |
| No. 12                 | PLF  | ATE |    | .7  |
| BUNCH.                 |      |     |    | .8  |
| PIECE.                 |      |     |    | .9  |
| HEAP .                 |      |     |    | 10  |
| BALE .                 |      |     |    | 11  |
| BASKET                 | (DE  | ENG | U) |     |
| (SHE                   | LLEI | )). |    | 12  |
| BASKET                 | ( DE | ENG | U) |     |
| (UNSHI                 | ELLE | ED) |    | 13  |
| X-CAR                  | Г    |     |    |     |
| (UNSHI                 | ELLE | ED) |    | 14  |
| LITRE.                 |      |     |    | 15  |
| CUP                    |      |     |    | 16  |
| ΓIN                    |      |     |    | 17  |
| GRAM .                 |      |     |    | 18  |
| MILLIL                 | ITRE | · . |    | 19  |
|                        |      |     |    | 20  |

### MODULE I: CONSUMPTION OF FOOD OVER PAST ONE WEEK

|  | I01    | 102  | 103                    |                | 104       |            | 105               | 106       |           | 107                   |             |                                    |
|--|--------|------|------------------------|----------------|-----------|------------|-------------------|-----------|-----------|-----------------------|-------------|------------------------------------|
| Over the past one week (7 days), did                       |        |      |                        | n in total did |           |            |                   |           |           |                       | n came from |                                    |
| you or others in your household consume any []?            |        |      | your hous<br>consume i |                | purchases | <b>3</b> ? | did you<br>spend? | own-produ | uction?   | gifts and on sources? | otner       |                                    |
| consume any []?  |        |      | week?                  | in the past    |           |            | spenu (           |           |           | sources?              |             |                                    |
| INCLUDE FOOD BOTH EATEN                                    | YES1   |      |                        |                |           |            |                   |           |           |                       |             |                                    |
| COMMUNALLY IN THE HOUSEHOLD                                | NO2    |      |                        | UNIT           |           | UNIT       |                   |           | UNIT      |                       | UNIT        |                                    |
| AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. | (»NEXT | ITEM |                        | (CODES         |           | (CODES     |                   |           | (CODES    |                       | (CODES      |                                    |
|  | ITEM)  | CODE | QUANTITY               | AT RIGHT)      | QUANTITY  | AT RIGHT)  | MK                | QUANTITY  | AT RIGHT) | QUANTITY              | AT RIGHT)   |                                    |
| Cereals, grains, cereal products                           |        | ī    |                        |                | Г         |            | 1                 |           |           |                       |             |                                    |
| Maize <i>ufa mgaiwa</i> (normal flour)                     |        | 101  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Maize <i>ufa</i> refined (fine flour)                      |        | 102  |                        |                |           |            |                   |           |           |                       |             | <u>UNIT</u><br>KILOGRAMME          |
| Maize <i>ufa madeya</i> (bran flour)                       |        | 103  |                        |                |           |            |                   |           |           |                       |             | 50 KG. BAG                         |
| Maize grain (not as <i>ufa</i> )                           |        | 104  |                        |                |           |            |                   |           |           |                       |             | 90 KG. BAG PAIL (SMALL)            |
| Green maize  |        | 105  |                        |                |           |            |                   |           |           |                       |             | PAIL (LARGE)<br>No. 10 PLATE       |
| Rice   |        | 106  |                        |                |           |            |                   |           |           |                       |             | No. 12 PLATE                       |
| Finger millet ( <i>mawere</i> )                            |        | 107  |                        |                |           |            |                   |           |           |                       |             | BUNCH                              |
| Sorghum  |        | 108  |                        |                |           |            |                   |           |           |                       |             | HEAP 1<br>BALE 1                   |
| Pearl millet (mchewere)                                    |        | 109  |                        |                |           |            |                   |           |           |                       |             | BASKET ( <i>DENGU</i> ) (SHELLED)1 |
| Wheat flour  |        | 110  |                        |                |           |            |                   |           |           |                       |             | BASKET (DENGU)                     |
| Bread  |        | 111  |                        |                |           |            |                   |           |           |                       |             | (UNSHELLED) 1<br>OX-CART           |
| Buns, scones   |        | 112  |                        |                |           |            |                   |           |           |                       |             | (UNSHELLED) 1                      |
| Biscuits   |        | 113  |                        |                |           |            |                   |           |           |                       |             | CUP 1                              |
| Spaghetti, macaroni, pasta                                 |        | 114  |                        |                |           |            |                   |           |           |                       |             | TIN 1                              |
| Breakfast cereal   |        | 115  |                        |                |           |            |                   |           |           |                       |             | MILLILITRE 1<br>OTHER (SPECIFY). 2 |
| Infant feeding cereals                                     |        | 116  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Other (specify)  |        | 117  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Roots and tubers, plantain                                 |        |      |                        |                |           |            |                   |           |           |                       |             |                                    |
| Cassava tubers   |        | 201  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Cassava flour  |        | 202  |                        |                |           |            |                   |           |           |                       |             |                                    |
| White sweet potato   |        | 203  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Orange sweet potato  |        | 204  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Irish potato   |        | 205  |                        |                |           |            |                   |           |           |                       |             |                                    |
| Potato crisps  |        | 206  |                        |                |           |            |                   |           |           |                       |             |                                    |

| Over the past one week (7 days), did  | 102             | 103      |                             | 104      |                             | 105 | 106      |                             | 107      |                             |   |
|---|-----------------|----------|-----------------------------|----------|-----------------------------|-----|----------|-----------------------------|----------|-----------------------------|---|
| Over the past one week (7 days), did you or others in your household consume any []?  |                 |          | in total did<br>ehold       |          | n came from                 |     |          | came from                   |          | n came from<br>other        |   |
| INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS.  YES NO ("NEX" ITEM) | 2  <br>r   ITEM | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | MK  | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) |   |
| Plantain, cooking banana  | 207             |          |                             |          |                             |     |          |                             |          |                             |   |
| Cocoyam ( <i>masimbi</i> )  | 208             |          |                             |          |                             |     |          |                             |          |                             |   |
| Other (specify)   | 209             |          |                             |          |                             |     |          |                             |          |                             |   |
| Pulses  | -               |          |                             |          |                             |     |          |                             |          |                             |   |
| Bean, white   | 301             |          |                             |          |                             |     |          |                             |          |                             |   |
| Bean, brown   | 302             |          |                             |          |                             |     |          |                             |          |                             |   |
| Pigeonpea (nandolo)   | 303             |          |                             |          |                             |     |          |                             |          |                             |   |
| Groundnut   | 304             |          |                             |          |                             |     |          |                             |          |                             | UNIT                                    |
| Groundnut flour   | 305             |          |                             |          |                             |     |          |                             |          |                             | KILOGRAMME1<br>50 KG. BAG2              |
| Soyabean flour  | 306             |          |                             |          |                             |     |          |                             |          |                             | 90 KG. BAG 3 PAIL (SMALL) 4             |
| Ground bean ( <i>nzama</i> )  | 307             |          |                             |          |                             |     |          |                             |          |                             | PAIL (LARGE)5<br>No. 10 PLATE6          |
| Cowpea (khobwe)   | 308             |          |                             |          |                             |     |          |                             |          |                             | No. 12 PLATE7                           |
| Other (specify)   | 309             |          |                             |          |                             |     |          |                             |          |                             | BUNCH 9                                 |
| Vegetables  |                 |          |                             |          |                             |     | •        |                             | •        |                             | HEAP 10<br>BALE 11                      |
| Onion   | 401             |          |                             |          |                             |     |          |                             |          |                             | BASKET ( <i>DENGU</i> )                 |
| Cabbage   | 402             |          |                             |          |                             |     |          |                             |          |                             | (SHELLED) 12<br>BASKET ( <i>DENGU</i> ) |
| Tanaposi/Rape   | 403             |          |                             |          |                             |     |          |                             |          |                             | (UNSHELLED) 13<br>OX-CART               |
| Nkhwani   | 404             |          |                             |          |                             |     |          |                             |          |                             | (UNSHELLED) 14                          |
| Chinese cabbage   | 405             |          |                             |          |                             |     |          |                             |          |                             | CUP 16                                  |
| Other cultivated green leafy vegetables   | 406             |          |                             |          |                             |     |          |                             |          |                             | TIN 17  GRAM 18  MILLILITRE 19          |
| Gathered wild green leaves  | 407             |          |                             |          |                             |     |          |                             |          |                             | OTHER (SPECIFY). 20                     |
| Tomato  | 408             |          |                             |          |                             |     |          |                             |          |                             |   |
| Cucumber  | 409             |          |                             |          |                             |     |          |                             |          |                             |   |
| Pumpkin   | 410             |          |                             |          |                             |     |          |                             |          |                             |   |
| Okra / Therere  | 411             |          |                             |          |                             |     |          |                             |          |                             |   |

|  | I01                            | 102          | 103                |                             | 104      |                             | 105 | 106      | -00+ Integrate              | 107      | a darvey Tio                | usenoia questionnaire - page .<br>     |
|--|--------------------------------|--------------|--------------------|-----------------------------|----------|-----------------------------|-----|----------|-----------------------------|----------|-----------------------------|--|
| Over the past one week (7 days), did you or others in your household consume any []?                           | Tio i                          | 102          | How much your hous |                             |          | n came from                 |     |          |                             |          | h came from<br>other        |  |
| INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS. | YES1<br>NO2<br>(»NEXT<br>ITEM) | ITEM<br>CODE | QUANTITY           | UNIT<br>(CODES<br>AT RIGHT) | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | мк  | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) |  |
| Tinned vegetables (specify:  |                                | 412          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Other vegetables (specify:   |                                | 413          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Meat, Fish, and Animal products  |                                |              |                    |                             |          |                             |     |          |                             |          |                             |  |
| Eggs   |                                | 501          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Dried fish   |                                | 502          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Fresh fish   |                                | 503          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Beef   |                                | 504          |                    |                             |          |                             |     |          |                             |          |                             | <u>UNIT</u>                            |
| Goat   |                                | 505          |                    |                             |          |                             |     |          |                             |          |                             | KILOGRAMME1<br>50 KG. BAG2             |
| Pork   |                                | 506          |                    |                             |          |                             |     |          |                             |          |                             | 90 KG. BAG3                            |
| Chicken  |                                | 507          |                    |                             |          |                             |     |          |                             |          |                             | PAIL (SMALL)4 PAIL (LARGE)5            |
| Other poultry - guinea fowl, doves, etc.   |                                | 508          |                    |                             |          |                             |     |          |                             |          |                             | No. 10 PLATE6<br>No. 12 PLATE7         |
| Small animal – rabbit, mice, etc.  |                                | 509          |                    |                             |          |                             |     |          |                             |          |                             | BUNCH 8 PIECE 9                        |
| Termites, other insects  |                                | 510          |                    |                             |          |                             |     |          |                             |          |                             | HEAP 10                                |
| Tinned meat or fish  |                                | 511          |                    |                             |          |                             |     |          |                             |          |                             | BALE 11<br>BASKET ( <i>DENGU</i> )     |
| Other (specify)  |                                | 512          |                    |                             |          |                             |     |          |                             |          |                             | (SHELLED)12<br>BASKET ( <i>DENGU</i> ) |
| Fruits   | •                              |              |                    |                             |          | •                           | •   |          | •                           | •        | '                           | (UNSHELLED) 13                         |
| Mango  |                                | 601          |                    |                             |          |                             |     |          |                             |          |                             | OX-CART<br>(UNSHELLED) 14              |
| Banana   |                                | 602          |                    |                             |          |                             |     |          |                             |          |                             | LITRE 15<br>CUP 16                     |
| Citrus – naartje, orange, etc.   |                                | 603          |                    |                             |          |                             |     |          |                             |          |                             | TIN 17                                 |
| Pineapple  |                                | 604          |                    |                             |          |                             |     |          |                             |          |                             | GRAM 18<br>MILLILITRE 19               |
| Papaya   |                                | 605          |                    |                             |          |                             |     |          |                             |          |                             | OTHER (SPECIFY). 20                    |
| Guava  |                                | 606          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Avocado  |                                | 607          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Wild fruit (masau, mlambe, etc.)   |                                | 608          |                    |                             |          |                             |     |          |                             |          |                             |  |
| Apple  |                                | 609          |                    |                             |          |                             |     |          |                             |          |                             |  |

|   | I01                            | 102          | 103      |                             | 104      |                             | 105 | 106      |                | 107      | ,                           | iseriola questioririaire - page 24      |
|---|--------------------------------|--------------|----------|-----------------------------|----------|-----------------------------|-----|----------|----------------|----------|-----------------------------|---|
| Over the past one week (7 days), did you or others in your household consume any []?                                    |                                |              |          | n in total did<br>ehold     |          | n came from<br>s?           |     |          | h came from    |          |                             |   |
| INCLUDE FOOD BOTH EATEN<br>COMMUNALLY IN THE HOUSEHOLD<br>AND THAT EATEN SEPARATELY BY<br>INDIVIDUAL HOUSEHOLD MEMBERS. | YES1<br>NO2<br>(»NEXT<br>ITEM) | ITEM<br>CODE | OUANTITY | UNIT<br>(CODES<br>AT RIGHT) | OUANTITY | UNIT<br>(CODES<br>AT RIGHT) | MK  | OUANTITY | UNIT<br>(CODES | OUANTITY | UNIT<br>(CODES<br>AT RIGHT) |   |
| Other fruits (specify)  |                                | 610          | ~        | ,                           |          |                             |     |          |                | ~        |                             |   |
| Cooked Foods from Vendors   | !                              |              |          |                             |          |                             |     | <u> </u> |                | I        |                             |   |
| Maize - boiled or roasted (vendor)  |                                | 820          |          |                             |          |                             |     |          |                |          |                             |   |
| Chips (vendor)  |                                | 821          |          |                             |          |                             |     |          |                |          |                             |   |
| Cassava - boiled (vendor)   |                                | 822          |          |                             |          |                             |     |          |                |          |                             |   |
| Eggs - boiled (vendor)  |                                | 823          |          |                             |          |                             |     |          |                |          |                             |   |
| Chicken (vendor)  |                                | 824          |          |                             |          |                             |     |          |                |          |                             |   |
| Meat (vendor)   |                                | 825          |          |                             |          |                             |     |          |                |          |                             | UNIT                                    |
| Fish (vendor)   |                                | 826          |          |                             |          |                             |     |          |                |          |                             | KILOGRAMME1<br>50 KG. BAG2              |
| Mandazi, doughnut (vendor)  |                                | 827          |          |                             |          |                             |     |          |                |          |                             | 90 KG. BAG 3 PAIL (SMALL) 4             |
| Samosa (vendor)   |                                | 828          |          |                             |          |                             |     |          |                |          |                             | PAIL (LARGE)5 No. 10 PLATE6             |
| Meal eaten at restaurant  |                                | 829          |          |                             |          |                             |     |          |                |          |                             | No. 12 PLATE7                           |
| Other (specify)   |                                | 830          |          |                             |          |                             |     |          |                |          |                             | BUNCH                                   |
| Milk and Milk Products  |                                |              |          |                             | •        |                             |     |          |                |          |                             | HEAP 10<br>BALE 11                      |
| Fresh milk  |                                | 701          |          |                             |          |                             |     |          |                |          |                             | BASKET (DENGU)                          |
| Powdered milk   |                                | 702          |          |                             |          |                             |     |          |                |          |                             | (SHELLED) 12<br>BASKET ( <i>DENGU</i> ) |
| Margarine   |                                | 703          |          |                             |          |                             |     |          |                |          |                             | (UNSHELLED) 13<br>OX-CART               |
| Butter  |                                | 704          |          |                             |          |                             |     |          |                |          |                             | (UNSHELLED) 14<br>LITRE 15              |
| Chambiko - soured milk  |                                | 705          |          |                             |          |                             |     |          |                |          |                             | CUP 16                                  |
| Yoghurt   |                                | 706          |          |                             |          |                             |     |          |                |          |                             | TIN 17<br>GRAM 18                       |
| Cheese  |                                | 707          |          |                             |          |                             |     |          |                |          |                             | MILLILITRE 19<br>OTHER (SPECIFY). 20    |
| Infant feeding formula (for bottle)   |                                | 708          |          |                             |          |                             |     |          |                |          |                             | •                                       |
| Other (specify)   |                                | 709          |          |                             |          |                             |     |          |                |          |                             |   |
| Sugar, Fats, and Oil  |                                |              |          |                             |          |                             |     |          |                |          |                             |   |
| Sugar   |                                | 801          |          |                             |          |                             |     |          |                |          |                             |   |
| Sugar Cane  |                                | 802          |          |                             |          |                             |     |          |                |          |                             |   |

|   | I01                            | 102          | 103      |                             | 104      |                             | 105 | 106      | oo i miograto               | 107      | a carrey Tie                | usenoid questionnaire - page 2<br>        |
|---|--------------------------------|--------------|----------|-----------------------------|----------|-----------------------------|-----|----------|-----------------------------|----------|-----------------------------|---|
| Over the past one week (7 days), did you or others in your household consume any []?                                    | 1101                           | 102          |          | n in total did<br>ehold     |          | n came from<br>6?           |     |          |                             |          | n came from<br>other        |   |
| INCLUDE FOOD BOTH EATEN<br>COMMUNALLY IN THE HOUSEHOLD<br>AND THAT EATEN SEPARATELY BY<br>INDIVIDUAL HOUSEHOLD MEMBERS. | YES1<br>NO2<br>(»NEXT<br>ITEM) | ITEM<br>CODE | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | MK  | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) | QUANTITY | UNIT<br>(CODES<br>AT RIGHT) |   |
| Cooking oil   |                                | 803          |          |                             |          |                             |     |          |                             |          |                             |   |
| Other (specify)   |                                | 804          |          |                             |          |                             |     |          |                             |          |                             |   |
| Beverages   |                                |              |          |                             |          |                             |     |          |                             |          | _                           |   |
| Tea   |                                | 901          |          |                             |          |                             |     |          |                             |          |                             |   |
| Coffee  |                                | 902          |          |                             |          |                             |     |          |                             |          |                             |   |
| Squash (Sobo drink concentrate)   |                                | 903          |          |                             |          |                             |     |          |                             |          |                             |   |
| Fruit juice   |                                | 904          |          |                             |          |                             |     |          |                             |          |                             | <u>UNIT</u><br>KILOGRAMME1                |
| Freezes (flavoured ice)   |                                | 905          |          |                             |          |                             |     |          |                             |          |                             | 50 KG. BAG2                               |
| Soft drinks (Coca-cola, Fanta, Sprite, etc.)  |                                | 906          |          |                             |          |                             |     |          |                             |          |                             | 90 KG. BAG                                |
| Chibuku/Napolo (commercial traditional-style beer)  |                                | 907          |          |                             |          |                             |     |          |                             |          |                             | PAIL (LARGE)5 No. 10 PLATE6 No. 12 PLATE7 |
| Bottled / canned beer (Carlsberg, etc.)   |                                | 908          |          |                             |          |                             |     |          |                             |          |                             | BUNCH 8                                   |
| Local sweet beer (thobwa)   |                                | 909          |          |                             |          |                             |     |          |                             |          |                             | PIECE                                     |
| Traditional beer (masase)   |                                | 910          |          |                             |          |                             |     |          |                             |          |                             | BALE 11<br>BASKET ( <i>DENGU</i> )        |
| Wine or commercial liquor   |                                | 911          |          |                             |          |                             |     |          |                             |          |                             | (SHELLED) 12                              |
| Locally brewed liquor (kachasu)   |                                | 912          |          |                             |          |                             |     |          |                             |          |                             | BASKET ( <i>DENGU</i> )<br>(UNSHELLED) 13 |
| Other (specify)   |                                | 913          |          |                             |          |                             |     |          |                             |          |                             | OX-CART (UNSHELLED) 14                    |
| Spices & Miscellaneous  |                                |              |          |                             |          |                             |     |          |                             |          |                             | LITRE 15 CUP 16                           |
| Salt  |                                | 810          |          |                             |          |                             |     |          |                             |          |                             | TIN 17                                    |
| Spices  |                                | 811          |          |                             |          |                             |     |          |                             |          |                             | GRAM 18<br>MILLILITRE 19                  |
| Yeast, baking powder, bicarbonate of soda   |                                | 812          |          |                             |          |                             |     |          |                             |          |                             | OTHER (SPECIFY). 20                       |
| Tomato sauce (bottle)   |                                | 813          |          |                             |          |                             |     |          |                             |          |                             |   |
| Hot sauce (Nali, etc.)  |                                | 814          |          |                             |          |                             |     |          |                             |          |                             |   |
| Jam, jelly, honey   |                                | 815          |          |                             |          |                             |     |          |                             |          |                             |   |
| Sweets, candy, chocolates   |                                | 816          |          |                             |          |                             |     |          |                             |          |                             |   |
| Other (specify)   |                                | 817          |          |                             |          |                             |     |          |                             |          |                             |   |

## MODULE J: NON-FOOD EXPENDITURES - Past one week & one month

PROMPT FOR EACH ITEM ON THE LIST.

#### **ONE WEEK RECALL**

|  | J01    | J02  | J03               |
|--|--------|------|-------------------|
| Over the past one week (7 days), did you | 1      |      | How much did      |
| purchase any []?                         |        |      | you pay in total? |
|  | YES1   |      |                   |
|  | NO2    |      |                   |
|  | (»NEXT | ITEM |                   |
|  | ITEM)  | CODE | MK                |
| Charcoal                                 |        | 101  |                   |
| Paraffin or kerosene                     |        | 102  |                   |
| Cigarettes or other tobacco              |        | 103  |                   |
| Matches                                  |        | 104  |                   |
| Newspapers or magazines                  |        | 105  |                   |
| Public transport – bus fare, taxi fare   |        | 106  |                   |

#### **ONE MONTH RECALL**

|   | J01                             | J02          | J03                            |
|---|---------------------------------|--------------|--------------------------------|
| Over the past <u>one month</u> , did you purchase or pay for any []?            |                                 |              | How much did you pay in total? |
|   | YES1<br>NO2<br>(>>NEXT<br>ITEM) | ITEM<br>CODE | MK                             |
| Milling fees, grain   |                                 | 201          | 1110                           |
| Bar soap (body soap or clothes soap)  |                                 | 202          |                                |
| Clothes soap (powder)   |                                 | 203          |                                |
| Toothpaste, toothbrush  |                                 | 204          |                                |
| Toilet paper  |                                 | 205          |                                |
| Glycerine, Vaseline, skin creams  |                                 | 206          |                                |
| Other personal products (shampoo, razor blades, cosmetics, hair products, etc.) |                                 | 207          |                                |
| Household cleaning products (dish soap, toilet cleansers, etc.)                 |                                 | 208          |                                |
| Light bulbs   |                                 | 209          |                                |
| Postage stamps or other postal fees   |                                 | 210          |                                |
| Donation - to church, charity, beggar, etc.                                     |                                 | 211          |                                |
| Petrol or diesel  |                                 | 212          |                                |
| Motor vehicle service, repair, or parts   |                                 | 213          |                                |
| Bicycle service, repair, or parts   |                                 | 214          |                                |
| Wages paid to servants  |                                 | 215          |                                |
| Mortgage - regular payment to purchase house                                    |                                 | 216          |                                |
| Repairs & maintenance to dwelling   |                                 | 217          |                                |
| Repairs to household and personal items (radios, watches, etc.)                 |                                 | 218          |                                |

## MODULE K: NON-FOOD EXPENDITURES – Past three months

PROMPT FOR EACH ITEM ON THE LIST.

| FROMF1 FOR EAGITIE        | K01        | K02  | K03               |
|---------------------------|------------|------|-------------------|
| Over the past three month |            | NU2  | How much did      |
| purchase or pay for any [ |            |      | you pay in total? |
|                           | YES1       |      |                   |
|                           | NO2 (»NEXT | ITEM |                   |
|                           | ITEM)      | CODE | MK                |
| Infant clothing           |            | 301  |                   |
| Baby nappies/diapers      |            | 302  |                   |
| Boy's trousers            |            | 303  |                   |
| Boy's shirts              |            | 304  |                   |
| Boy's jackets             |            | 305  |                   |
| Boy's undergarments       |            | 306  |                   |
| Boy's other clothing      |            | 307  |                   |
| Men's trousers            |            | 308  |                   |
| Men's shirts              |            | 309  |                   |
| Men's jackets             |            | 310  |                   |
| Men's undergarments       |            | 311  |                   |
| Men's other clothing      |            | 312  |                   |
| Girl's blouse/shirt       |            | 313  |                   |
| Girl's dress/skirt        |            | 314  |                   |
| Girl's undergarments      |            | 315  |                   |
| Girl's other clothing     |            | 316  |                   |
| Lady's blouse/shirt       |            | 317  |                   |
| Chitenje cloth            |            | 318  |                   |
| Lady's dress/skirt        |            | 319  |                   |
| Lady's undergarments      |            | 320  |                   |
| Lady's other clothing     |            | 321  |                   |
| Boy's shoes               |            | 322  |                   |
| Men's shoes               |            | 323  |                   |

|  | K01             | K02          | K03                            |
|--|-----------------|--------------|--------------------------------|
| Over the past three months, did you purchase for any []?     | e or pay        |              | How much did you pay in total? |
|  | YES1<br>NO2     |              |                                |
|  | (»NEXT<br>ITEM) | ITEM<br>CODE | MK                             |
| Girl's shoes   |                 | 324          |                                |
| Lady's shoes   |                 | 325          |                                |
| Cloth, thread, other sewing material                         |                 | 326          |                                |
| Laundry, dry cleaning, tailoring fees                        |                 | 327          |                                |
| Bowls, glassware, plates, silverware, etc.                   |                 | 328          |                                |
| Cooking utensils (cookpots, stirring spoons and wisks, etc.) |                 | 329          |                                |
| Cleaning utensils (brooms, brushes, etc.)                    |                 | 330          |                                |
| Torch / flashlight   |                 | 331          |                                |
| Umbrella   |                 | 332          |                                |
| Paraffin lamp (hurricane or pressure)                        |                 | 333          |                                |
| Stationery items (not for school)                            |                 | 334          |                                |
| Books (not for school)                                       |                 | 335          |                                |
| Music or video cassette or CD                                |                 | 336          |                                |
| Tickets for sports / entertainment events                    |                 | 337          |                                |
| House decorations  |                 | 338          |                                |
| Night's lodging in rest house or hotel                       |                 | 339          |                                |

## MODULE L: NON-FOOD EXPENDITURES - Past twelve months

PROMPT FOR EACH ITEM ON THE LIST.

|  | L01             | L02          | L03               |
|--|-----------------|--------------|-------------------|
| Over the past one year (twelve months),                            | •               |              | How much did      |
| did you purchase or pay for any []?                                | YES1            |              | you pay in total? |
|  | NO2             |              |                   |
|  | (»NEXT<br>ITEM) | ITEM<br>CODE | MK                |
| Carpet, rugs, drapes, curtains                                     | IIIM)           | 401          | PIIC              |
| Linen - towels, sheets, blankets                                   |                 | 402          |                   |
| Mat - sleeping or for drying maize flour                           |                 | 403          |                   |
| Mosquito net   |                 | 404          |                   |
| Mattress   |                 | 405          |                   |
| Sports & hobby equipment, musical instruments, toys                |                 | 406          |                   |
| Film, film processing, camera                                      |                 | 407          |                   |
| Builiding items - cement, bricks, timber, iron sheets, tools, etc. |                 | 408          |                   |
| Council rates  |                 | 409          |                   |
| Insurance - health (MASM, etc.), auto, home, life                  |                 | 410          |                   |
| Losses to theft (value of items or cash lost)                      |                 | 411          |                   |
| Fines or legal fees  |                 | 412          |                   |
| Lobola (bridewealth) costs   |                 | 413          |                   |
| Marriage ceremony costs  |                 | 414          |                   |
| Funeral costs  |                 | 415          |                   |

#### Non-food items that may not have been purchased.

|   | L01                   | L02  | L03  | L04  |
|---|-----------------------|------|--|--|
| Over the past one year did you gather, purchase, or pay for any []? | YES1<br>NO2<br>(»NEXT | ITEM | What was the estimated total value of [] consumed? | What was the cost of that which you purchased? |
|   | ITEM)                 | CODE | MK   | MK   |
| Woodpoles, bamboo   |                       | 416  |  |  |
| Grass for thatching roof or other use                               |                       | 417  |  |  |

## **MODULE M: DURABLE GOODS**

[ASK OF HOUSEHOLD HEAD.]

| [ASK OF HOUSEHOLD HEAD           | . <u>J</u><br>M01                                  | M02                              | M03                                      | M04                           | M05   | M06                                     | M07  |
|----------------------------------|--|----------------------------------|--|-------------------------------|---|---|--|
|                                  | Does<br>your<br>house-<br>hold<br>own a<br>[ITEM]? | D G<br>U O<br>A D<br>B<br>L<br>E | How<br>many<br>[ITEM]s<br>do you<br>own? | What is<br>the age<br>of this | If you wanted to sell one of this [ITEM] today, how much would you receive?  IF MORE THAN ONE, AVERAGE VALUE. | Did you own any in the past five years? | When did<br>you sell it<br>(them)?<br>IF<br>STOLEN,<br>LOST, OR<br>GIVEN<br>AWAY,<br>USE CODE<br>55. |
| ITEM                             | NO2 (»M06)   | ITEM<br>CODE                     | NUMBER                                   | YEARS                         | »NEXT ITEM)<br>MK   | (»NEXT<br>ITEM)                         | CALENDAR<br>YEAR   |
| Mortar/pestle ( <i>mtondo</i> )  | , , ,  | 501                              |  |                               |   | ,                                       |  |
| Bed                              |  | 502                              |  |                               |   |   |  |
| Table                            |  | 503                              |  |                               |   |   |  |
| Chair                            |  | 504                              |  |                               |   |   |  |
| Fan                              |  | 505                              |  |                               |   |   |  |
| Air conditioner                  |  | 506                              |  |                               |   |   |  |
| Radio ('wireless')               |  | 507                              |  |                               |   |   |  |
| Tape or CD player; HiFi          |  | 508                              |  |                               |   |   |  |
| Television & VCR                 |  | 509                              |  |                               |   |   |  |
| Sewing machine                   |  | 510                              |  |                               |   |   |  |
| Kerosene/paraffin stove          |  | 511                              |  |                               |   |   |  |
| Electric or gas stove; hot plate |  | 512                              |  |                               |   |   |  |
| Refrigerator                     |  | 513                              |  |                               |   |   |  |
| Washing machine                  |  | 514                              |  |                               |   |   |  |
| Bicycle                          |  | 515                              |  |                               |   |   |  |
| Motorcycle/scooter               |  | 516                              |  |                               |   |   |  |
| Car                              |  | 517                              |  |                               |   |   |  |
| Mini-bus                         |  | 518                              |  |                               |   |   |  |
| Lorry                            |  | 519                              |  |                               |   |   |  |

|                                 | M01  |              | M02                                      | M06   | M07   |
|---------------------------------|--|--------------|--|---|---|
|                                 | Does<br>your<br>house-<br>hold<br>own a<br>[ITEM]? |              | How<br>many<br>[ITEM]s<br>do you<br>own? | Did you<br>own any<br>in the<br>past five<br>years? | When did<br>you sell it<br>(them)?                          |
| ITEM                            | YES1<br>NO2<br>(»M06)                              | ITEM<br>CODE | NUMBER                                   | YES1<br>NO2<br>(*NEXT<br>ITEM)                      | IF STOLEN, LOST, OR GIVEN AWAY, USE CODE 55.  CALENDAR YEAR |
| Beer brewing drum               |  | 520          |  |   |   |
| Boat or canoe                   |  | 521          |  |   |   |
| Fishing net                     |  | 522          |  |   |   |
| Upholstered chair, sofa set     |  | 523          |  |   |   |
| Coffee table (for sitting room) |  | 524          |  |   |   |
| Cupboard, drawers, bureau       |  | 525          |  |   |   |
| Lantern (paraffin)              |  | 526          |  |   |   |
| Desk                            |  | 527          |  |   |   |
| Clock                           |  | 528          |  |   |   |
| Iron (for pressing clothes)     |  | 529          |  |   |   |
| Ox-cart                         |  | 530          |  |   |   |
| Wheelbarrow                     |  | 531          |  |   |   |
| Hand sprayer                    |  | 532          |  |   |   |
| Panga                           |  | 533          |  |   |   |
| Hoe                             |  | 534          |  |   |   |
| Axe                             |  | 535          |  |   |   |
| Sickle                          |  | 536          |  |   |   |

## **MODULE N: AGRICULTURE - General**

[ASK OF THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST COMPLETED CROPPING SEASON.

|   |  |                            |        |                 |  | -   |                         |                            |   |  |  |                  |                                |                               |                                     |
|---|--|----------------------------|--------|-----------------|--|---|-------------------------|----------------------------|---|--|--|------------------|--------------------------------|-------------------------------|-------------------------------------|
| N01   | N02  | N03                        | N04    | •               | N05  | N06   | N07                     |                            | N08   | N09  | N10  | N11              | N12                            | N13                           | N14                                 |
| engage in<br>any<br>agricultural<br>activities or | WHICH IS<br>THE LAST<br>COM-<br>PLETED<br>CROP-PING<br>SEASON?<br>2002/03 or<br>2003/04? | COM-<br>PLETED<br>CROPPING |        | ou rent<br>ers? | of the rental payment received?  IF RENT PAID IN KIND, ESTIMATE VALUE. | COM-<br>PLETED<br>CROPPING<br>SEASON],<br>did your<br>household | ACRE.<br>HECTA<br>SQUAR | ou leave d? 1 RE .2 ERS .3 | season, was the amount of land you used for farming or owned and let others use in [LAST COMPLETED CROPPING SEASON] | farming on<br>a tobacco<br>estate in<br>[LAST COM-<br>PLETED | visits from<br>an agricul-<br>tural Field<br>Assistant<br>(FA) did you<br>receive in<br>the [LAST<br>COMPLETED<br>CROPPING | crop<br>product- | was the quality of the advice? | receive<br>advice<br>from the | What was the quality of the advice? |
|   |  |                            | (SPEC. | .).4            |  |   | (SPE                    | C.).4                      | Much less1<br>Less2   |  |  |                  | NOT VERY                       |                               | NOT VERY                            |
| YES1  |  | YES1                       |        |                 |  | YES1  |                         |                            | Same amount .3  |  |  | YES1             | USEFUL.2                       | YES1                          | USEFUL.2                            |
| NO2   | 2002/03 .1   | NO2                        | AREA   | AREA            |  | NO2   | AREA                    | AREA                       | More 4  | YES1   | (IF ZERO,  | NO2              | AVERAGE.3                      | NO2                           | AVERAGE.3                           |
| (»NEXT MODULE)                                    | 2004/04 .2   | (»N06)                     | AMOUNT | UNIT            | MK   | (»N08)  | AMOUNT                  | UNIT                       | Much more5  | NO2  | »NEXT MODULE   | (»N13)           | USEFUL .4                      | (»N15)                        | USEFUL .4                           |
|   | 1  |                            |        |                 | 1  | 1   |                         |                            | <u> </u>  |  | 1  |                  |                                | 1                             |                                     |
|   |  |                            |        |                 |  |   |                         |                            |   |  |  |                  |                                |                               |                                     |
|   |  |                            | 1      |                 |  |   |                         |                            |   |  |  |                  |                                |                               |                                     |

| N15             | N16         | N17        | N18        | N19         | N20         | N21            | N22        | N23              | N24         | N25         | N26         | N27         | N28        | N29       | N30        |
|-----------------|-------------|------------|------------|-------------|-------------|----------------|------------|------------------|-------------|-------------|-------------|-------------|------------|-----------|------------|
| Did you         | What was    | Did you    | What       | Did you     | What was    | Did you        | What       | Did you          | What was    | Did you     | What was    | Did you     | What       | Did you   | What       |
| receive         | the quality | receive    | was the    | receive     | the quality | receive        | was the    | receive          | the quality | receive     | the quality | receive     | was the    | receive   | was the    |
| advice from     | of the      | advice     | quality of | advice      | of the      | advice         | quality of | advice           | of the      | advice      | of the      | advice from | quality of | advice    | quality of |
| the FA on       | advice?     | from the   | the        | from the    | advice?     | from the       | the        | from the         | advice?     | from the    | advice?     | the FA on   | the        | from the  | the        |
| fertilizer use? |             | FA on pest | advice?    | FA on       |             | FA on          | advice?    | FA on            |             | FA on       |             | access to   | advice?    | FA on     | advice?    |
|                 |             | control?   |            | irrigation? |             | <u>general</u> |            | <u>animal</u>    |             | market-ing/ |             | credit?     |            | growing   |            |
|                 |             |            |            |             |             | <u>animal</u>  |            | <u>disease</u>   |             | <u>crop</u> |             |             |            | & selling |            |
|                 |             |            |            |             |             | care?          |            | or <u>animal</u> |             | sales?      |             |             |            | tobacco?  |            |
|                 |             |            |            |             |             |                |            | vaccina-         |             |             |             |             |            |           |            |
|                 |             |            |            |             |             |                |            | tions?           |             |             |             |             |            |           |            |
|                 |             |            |            |             |             |                |            |                  |             |             |             |             |            |           |            |
|                 | USELESS.1   |            | USELESS.1  |             | USELESS.1   |                | USELESS.1  |                  | USELESS.1   |             | USELESS.1   |             | USELESS.1  |           | USELESS.1  |
|                 | NOT VERY    |            | NOT VERY   |             | NOT VERY    |                | NOT VERY   |                  | NOT VERY    |             | NOT VERY    |             | NOT VERY   | YES1      | NOT VERY   |
| YES1            | USEFUL.2    | YES1       | USEFUL.2   | YES1        | USEFUL.2    | YES1           | USEFUL.2   | YES1             | USEFUL.2    | YES1        | USEFUL.2    | YES1        | USEFUL.2   | NO2       | USEFUL.2   |
| NO2             | AVERAGE.3   | NO2        | AVERAGE.3  | NO2         | AVERAGE.3   | NO2            | AVERAGE.3  | NO2              | AVERAGE.3   | NO2         | AVERAGE.3   | NO2         | AVERAGE.3  | (»NEXT    | AVERAGE.3  |
| (»N17)          | USEFUL .4   | (»N19)     | USEFUL .4  | (»N21)      | USEFUL .4   | (»N23)         | USEFUL .4  | (»N25)           | USEFUL .4   | (»N27)      | USEFUL .4   | (»N29)      | USEFUL .4  | MODULE)   | USEFUL .4  |
| Γ               | T           | <u> </u>   | 1          | 1           |             | I              | 1          | 1                |             | П           |             | Ι           | 1          | 1         | 1          |
|                 |             |            |            |             |             |                |            |                  |             |             |             |             |            |           |            |
|                 |             |            |            |             |             |                |            |                  |             |             |             |             |            |           |            |

#### **MODULE O: AGRICULTURE - Rainfed cultivation**

[ASK OF ALL THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST COMPLETED CROPPING SEASON.

LIST IN 003 ALL PLOTS BEFORE COLLECTING DETAILS ON EACH. A PLOT IS DEFINED AS AN AREA IN WHICH A UNIFORM, CONSISTENT CROP MANAGEMENT SYSTEM WAS USED, EVEN IF INTERCROPPED.

O01: Did any member of the household engage in rainfed farming in [LAST COMPLETED CROPPING SEASON], whether self-employed or as a tenant?

|                            | or as a tenant?  |  |                                      |          |   |   |   |   |   |    |   |  |   | Z (»MODULE   |   |
|----------------------------|--|--|--------------------------------------|----------|---|---|---|---|---|----|---|--|---|--|---|
| O02                        | O03  | O04  | O05                                  |          | O06   | O07   | O08   |   |   |    |   | O09  | O10   | O11  | O12   |
| P<br>L<br>O<br>T<br>I<br>D | LIST OF PLOTS CULTIVATED BY HOUSEHOLD DURING RAINS.  LIST ALL BEFORE COLLECT- ING INFORMATION ON EACH.  Please list for me each plot of land that a HH member farmed during [LAST COMPLETED CROPPING SEASON]?  WRITE A NAME TO IDENTIFY PLOT | Who in the household makes the decisions on input use and the timing of cropping activities on this plot?  IF PRESENT, ASK FOLLOWING TO THIS PERSON. | ACRE.<br>HECTARI<br>SQ. MET<br>OTHER | ne plot? | What is the general texture of the soil on this plot:  READ ANSWERS  sandy 1 between sand & clay 2 clay 3 | What is the slope of this plot: READ ANSWERS  flat1 slight slope2 moderate slope .3 steep, hilly4 | CROPPI<br>LIST MOST<br>LOCAL M<br>COMPOSI<br>HYBRID<br>CASSAVA<br>SWEET P<br>IRISH P<br>GROUNDN<br>(NZAMA<br>RICE<br>FINGER<br>(MAWER<br>SORGHUM<br>PEARL M | NG SEAS IMPORTAN AIZE TE MAIZE OTATO OTATO BEAN ) MILLET E) | SON]? NT FIRST.  1 BE; 2 SON 3 PIG 4 BUI 5 TOI 6 CON 7 SUG CAI 8 TAI 9 NKII 10 TOI 11 ON: | AN | 13<br>14<br>15<br>CCO.16<br>ER .17<br>18<br>19<br>20<br>21<br>22<br>A23<br>24<br>25 | How did your household acquire this plot?  GRANTED BY LOCAL LEADERS 1 INHERITED 2 THROUGH FAMILY OF SPOUSE 3 PURCHASED WITH TITLE 4 PURCHASED WITH NO TITLE 5 LEASEHOLD 6 (**O12*)  RENT SHORT-TERM. 7 (**O12*)  FARMING AS A TENANT 8 (**O13*)  OTHER (SPEC.) 9 | Do people buy and sell farmland in this area? | If you were to sell this plot today, how much could you sell it for? | How much did you pay in total for your lease or rent on this plot in [LAST COMPLETED CROPPING SEASON]?  ESTIMATE VALUE OF ANY IN-KIND PAYMENTS. |
|                            |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 1                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 2                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 3                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 4                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 5                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 6                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 7                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 8                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 9                          |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |
| 10                         |  |  |                                      |          |   |   |   |   |   |    |   |  |   |  |   |

| O02         | O13  | O14     |           |                                  |   |                |   |          |   | O15  | O16  | O17                              | O18  | O19 | O20   | O21  | O22   |
|-------------|--|---------|-----------|----------------------------------|---|----------------|---|----------|---|--|--|----------------------------------|--|-----|---|--|---|
| P L O T I D | Did you apply any fertilizer to this plot in [LAST CROP-PING SEA-SON]? | in [LAS | E 21:0+4S | .1<br>.2<br>.3<br>.4<br>.5<br>.6 | UNIT<br>KILOGRA<br>50 KG B<br>OTHER<br>(SPECI | M1 AG .2 FY).3 | TRADER RELATI NEIGHE LOCAL ADMARC COOPER ASSOC PRIVAT STARTE NGO. | PARTILIZ | 1<br>2<br>3<br>4<br>5<br>R<br>6<br>NY7<br>TIP .8<br>9<br>Y). 10 | did you pay<br>for all the<br>fertilizer<br>used on this<br>plot in [LAST<br>COMPLETED | apply any manure to this plot in [LAST COMPLETED CROPPING SEASON]? | any purchased seeds or seedlings | Where did you acquire the seeds or seedlings? LIST UP TO TWO.  TRADER 1 RELATIVE 2 NEIGHBOR 3 LOCAL MARKET 4 ADMARC 5 COOP/ASSOC. 6 PRIVATE COMPANY 7 NGO 9 OTHER (SPEC.) . 10 |     | hire any ganyu labour to work on this plot in [LAST COMPLET-ED CROP-PING SEASON]? | days of ganyu did you hire? Include all tasks - clearing, ridging, planting, weeding, harvest. | How much did you pay for the total amount of ganyu labour used on this plot in [LAST COMPLETED CROPPING SEASON]?  ESTIMATE VALUE OF ANY IN-KIND PAYMENTS. |
| 1           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 2           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 3           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 4           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 5           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 6           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 7           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 8           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 9           |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |
| 10          |  |         |           |                                  |   |                |   |          |   |  |  |                                  |  |     |   |  |   |

#### **MODULE P: AGRICULTURE - Rainfed crop sales**

[ASK OF THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST COMPLETED CROPPING SEASON. COMPLETE P01 TO IDENTIFY ALL CROPS GROWN BEFORE COLLECTING DETAILS ON EACH.

|   | P01   | P02         | P03   |                  | P04      |                                | P05 | P06   |                      | P07   | P08   | P09   |  | P10  |  | P11  |   |
|---|---|-------------|---|------------------|----------|--------------------------------|-----|---|----------------------|---|---|---|--|--|--|--|---|
| LOOK AT THE CROP IN QUESTION 008 C PREVIOUS SECTION EVERY CROP MENT MARK THE YES/NO BELOW AS "YES". T FOR CROPS NOT MENTIONED IN 008  Did you harvest and during [LAST COM CROPPING SEASO | DF N. FOR FIONED, COLUMN FO PROBE ASK:  y [] PLETED | C R O P C O | How much you harvest [LAST COMPLETE CROPPING SEASON] for your plots which [] w planted? | ED  Tom all s in |          | vested<br>GT<br>ED<br>G<br>vas |     | To whom sell this [NOTE UPBUYERS.  TRADER. RELATIV. NEIGHBOLLOCAL MARKET ADMARC. COOPERA' /ASSOC PRIVATE COMPAN AUCTION FLOOR. OTHER (SPEC. 1st | ]?1 E2 R345 TIVE6 Y7 | Why did you choose to sell to the first buyer?  ALWAYS SELL TO THIS TRADER. 1 CLOSEST BUYER. 2 BEST PRICE 3 CONTRACTED TO SELL TO BUYER. 4 OTHER (SPEC.). 5 | What portion of your sales of this crop were to the first buyer?  LESS THAN 25% .1 25-50%2 50-75%3 MORE THAN 75% .4 | After it wharveste much [ given to labourer make ot payment JF NONE ZERO. | ed, how<br>.] was<br>pay<br>s or<br>her<br>ts? | How mu the [] harveste already   consume member your househo IF NONE ZERO. | ed has<br>been<br>ed by<br>es of<br>old? | being<br>stored b<br>househo<br>IF NONE<br>ZERO. | ed<br>_AST<br>ETED<br>ING<br>N] is <u>still</u><br>y your<br>old? |
| CROP NAME   | CROP)   |             | QUANTITY  | BETOM            | QUANTITY | BELOW                          | MK  | ISL   | Zna                  | (SPEC.)3  | THAN 75% .4   | QIY   | BELOW  | QIY  | BETOM                                    | QIY  | BETOM   |
| LOCAL MAIZE   |   | 1           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| COMPOSITE<br>MAIZE  |   | 2           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| HYBRID MAIZE  |   | 3           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| CASSAVA   |   | 4           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| SWEET POTATO  |   | 5           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| IRISH POTATO  |   | 6           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| GROUNDNUT   |   | 7           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| GROUND BEAN (nzama)   |   | 8           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |
| RICE  |   | 9           |   |                  |          |                                |     |   |                      |   |   |   |  |  |  |  |   |

**SEE NEXT PAGE ALSO** 

UNIT

PAIL (SMALL). 4 BUNCH . 8 BASKET (DENGU)

KILOGRAMME. . 1 PAIL (LARGE). 5 PIECE . 9 (SHELLED) . .12

OX-CART

50 KG. BAG. . 2 No. 10 PLATE. 6 BALE. .11 BASKET (*DENGU*) 90 KG. BAG. . 3 No. 12 PLATE. 7

(UNSHELLED).14 OTHER

(UNSHELLED) .13 (SPECIFY). .20

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|   | P01  | P02     | P03   |                    | P04      |                                | P05   | P06             |                               |  | P08                    | P09  |   | P10   | •                               | P11  |   |
|---|--|---------|---|--------------------|----------|--------------------------------|---|-----------------|-------------------------------|--|------------------------|--|---|---|---------------------------------|--|---|
| LOOK AT THE CRO IN QUESTION 008 PREVIOUS SECTIC EVERY CROP MEN MARK THE YES/NO BELOW AS "YES". FOR CROPS NOT MENTIONED IN 000 Did you harvest ar during [LAST CON CROPPING SEAS | OF ON. FOR ITIONED, O COLUMN TO PROBE 8 ASK: ON [] | C R O P | How much you harvest [LAST COMPLETE CROPPING SEASON] for your plots which [] w planted? | during  D  rom all |          | vested<br>ST<br>ED<br>S<br>vas | What was the total value you earned from the [] you sold? | sell this [     | ]?<br>1<br>E2<br>R3<br>4<br>5 | Why did you choose to sell to the first buyer?  ALWAYS SELL TO THIS TRADER. 1 CLOSEST BUYER . 2 BEST PRICE 3 | of this crop           | After it w<br>harveste<br>much [<br>given to<br>labourer<br>make otl<br>payment<br>IF NONE,<br>ZERO. | ed, how<br>] was<br>pay<br>s or<br>her<br>ts? | How mu<br>the []<br>harveste<br>already l<br>consume<br>member<br>your<br>househo<br>IF NONE<br>ZERO. | ed has<br>been<br>ed by<br>s of | How muthe [] harvesteduring [LCOMPLICROPPISEASON being stored by householders. | d<br>AST<br>ETED<br>NG<br>I] is <u>still</u><br>/ your<br>Id? |
|   | YES1   |         |   | ı                  |          |                                |   | AUCTION FLOOR.  |                               | CONTRACTED<br>TO SELL  | THAN 25% .1<br>25-50%2 |  |   |   |                                 | ZERO.  | .   |
|   | NO2<br>(»NEXT                                      |         |   | UNIT               |          | UNIT                           |   | OTHER<br>(SPEC. | ) 9                           | TO BUYER. 4  | 50-75%3<br>MORE        |  | UNIT  |   | UNIT                            |  | UNIT  |
| CROP NAME   | CROP)  |         | QUANTITY  | BELOW              | QUANTITY | BELOW                          | MK  | 1st             | 2nd                           | (SPEC.)5   | THAN 75% .4            | QTY  | BELOW   | QTY   | BELOW                           | QTY  | BELOW   |
| FINGER MILLET (mawere)  |  | 10      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| SORGHUM   |  | 11      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| PEARL MILLET (mchewere)   |  | 12      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| BEAN  |  | 13      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| SOYABEAN  |  | 14      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| PIGEONPEA<br>(nandolo)  |  | 15      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| COTTON  |  | 18      |   |                    |          |                                |   |                 |                               |  |                        |  |   | N/A   | N/A                             |  |   |
| SUGAR CANE  |  | 19      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| OTHER   |  | 27      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |
| OTHER   |  | 28      |   |                    |          |                                |   |                 |                               |  |                        |  |   |   |                                 |  |   |

| <u>UNIT</u>  | PAIL (SMALL). 4 | BUNCH . 8 | BASKET (DENGU)  | OX-CART        |
|--------------|-----------------|-----------|-----------------|----------------|
| KILOGRAMME 1 | PAIL (LARGE). 5 | PIECE . 9 | (SHELLED)12     | (UNSHELLED).14 |
| 50 KG. BAG 2 | No. 10 PLATE. 6 | BALE11    | BASKET (DENGU)  | OTHER          |
| 90 KG. BAG 3 | No. 12 PLATE, 7 |           | (UNSHELLED) .13 | (SPECIFY)20    |

## **MODULE Q: AGRICULTURE - Tobacco**

[ASK OF THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.]

| Q01                | Q02                | Q03       | Q04               | Q05       | Q06     |        |              |                     |            |             |          |         | Q07         |   |          |           | Q08 |        |                  |         |
|--------------------|--------------------|-----------|-------------------|-----------|---------|--------|--------------|---------------------|------------|-------------|----------|---------|-------------|---|----------|-----------|-----|--------|------------------|---------|
| Have you or anyone | Have you<br>been a |           | How many years in |           | Which o |        | lowing are/v | vere <u>benef</u> i | its you er | njoyed froi | m member |         | Is or was y |   | acco clu | b         |     |        | opping<br>the pa |         |
| in your            |                    | -         | ,                 | member of |         | olab.  |              |                     |            |             |          |         |             | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |          |           |     |        | ave you          |         |
| household          |                    | , ,       | you been a        |           |         |        |              |                     |            |             |          |         |             |   |          |           |     | n toba | •                | -       |
| grown any          | tobacco            | club for  | tobacco           | club?     |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |
| kind of            | <u>club</u> in     | the first | club              |           |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |
| tobacco in         | the past 5         | time?     | member            |           |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |
| the past 5         | years?             |           | since you         |           |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |
| cropping           |                    |           | first             |           |         |        |              | YES.                |            |             |          |         |             | YE                                      | ES1      |           | _   | W TOB  | ACCO .           | 1       |
| seasons?           |                    |           | joined?           |           |         |        |              | NO .                | . 2        |             |          |         |             | NO                                      | 2        |           |     |        | GROW             | 2       |
|                    |                    |           |                   |           |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |
|                    |                    |           |                   |           |         |        |              |                     |            | Quota,      |          |         |             |   |          |           |     |        |                  |         |
| YES1               |                    |           |                   |           |         | Timely |              |                     |            | access      | Trans-   |         |             |   |          |           |     |        |                  |         |
| NO2                | YES1               |           |                   |           |         | input  | Lower        | Better              | Exten-     | to          | port of  |         | (a)         | (b)                                     | (c)      | (d)       |     |        |                  |         |
| (»NEXT             | NO2                | CALENDAR  |                   | YES1      |         | pro-   | prices for   | tobac-co            | sion       | auction     | bales to | Other   |             |   |          | Other     |     | 2000 2 | 2001 20          | 02 2003 |
| MODULE)            | (»Q08)             | YEAR      | YEARS             | NO2       | Credit  | vision | inputs       | prices              | advice     | floor       | market   | (spec.) | NASFAM      | TAMA                                    | MRFC     | (specify) | -00 | -01  - | 02 -0            | 3 -04   |
|                    | Π                  |           |                   |           | l I     |        |              |                     |            |             |          |         | 1           |   |          |           | П Т |        |                  |         |
|                    |                    |           |                   |           |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |
|                    |                    |           |                   |           |         |        |              |                     |            |             |          |         |             |   |          |           |     |        |                  |         |

| Q09   | Q10   | Q11  | Q12   | Q13  | Q14   |   | Q15                                |                   | Q16   | Q17                                   | Q18  |  | Q19   | Q20                               |
|---|---|--|---|--|---|---|------------------------------------|-------------------|---|---------------------------------------|--|--|---|-----------------------------------|
| HOLD<br>GROW<br>TOBACCO<br>IN THE<br>[LAST COM- | RESPONSES)  | grow burley tobacco in [LAST COM- PLETED CROPPING SEASON]? | grow any other kinds of tobacco in [LAST COM- |  | BURLEY TOBACCO IN LAST COM- PLETED CROPPING | ALL REMAIN- ING QUEST- IONS IN MODULE CON- CERN BURLEY    | How muc<br>did you p<br>burley tol | lant to<br>pacco? | Did you<br>apply<br>fertilizer<br>to your<br>burley<br>tobacco? | you able<br>to apply<br>the<br>recom- | How much tobacco did harvest?                              | d you  | leaves?   | bale the burley tobacco?          |
| YES1<br>(»Q11)<br>NO2                           | NO CREDIT AVAIL3 NO INPUTS AVAIL4 INADEQUATE TRANSPORT 5 PRICES TOO POOR .6 TRIED ANOTHER CASH CROP INSTEAD | YES1<br>NO2  | YES1<br>NO2<br>(»Q14)                         | FLUE-CURED . FIRE-CURED, CHIKOPA . ORIENTAL . NDDF OTHER (SPEC.) . | 2 YES1<br>NO2<br>(*NEXT                     | TOBACCO GROWN IN LAST COM- PLETED CROP- PING SEASON ONLY. | ACRE<br>HECTI<br>SQ. I<br>OTHE     | ARE               | YES1<br>NO2<br>(»Q18)   | tobac-co?                             | KILOGRAMM 50 KG. BA 90 KG. BA BUNCH. BALE . OTHER (SPECIFY | AG .2<br>AG .3<br>8<br>. 11<br>() 20<br>UNIT | DID NOT GRADE 1 GRADED MYSELF 2 HIRED LOCAL GRADERS. 3 SENT TO COMMERCIAL | BALER 3 USED CLUB'S BALER 4 OTHER |
|   |   |  |   |  |   |   |                                    |                   |   |                                       |  |  |   |                                   |

| Q21   | Q22   | Q23   | Q24  | Q25   |
|---|---|---|--|---|
| How much did you earn in total from the sales of your burley tobacco? (NET: SALES LESS COSTS) | How much burley tobacco from [LAST COMPLETED CROPPING SEASON] did you not sell, but remains in storage?  UNIT  KILOGRAMME .1 50 KG. BAG .2 90 KG. BAG .3 BUNCH8 BALE 11 | Did you use <u>credit</u> to purchase inputs or for other burley tobaccorelated activities? | Were you able to repay the credit from your tobacco sales? | What did you do?  SOLD OTHER CROPS 1 USED SAVINGS . 2 SOLD ASSETS . 3 BORROWED FROM RELATIVE 4 BORROWED FROM NEIGHBOUR 5 BORROWED FROM KATAPILA 6 ARRANGED NEW PAYMENT PLAN 7 DEFAULTED 8 |
| MK  | CODES   | (»Q26)  | NO2  | OTHER (SPEC.).9   |
|   |   |   |  |   |

THE FOLLOWING QUESTIONS REFER TO EACH OF THE BURLEY TOBACCO SALES CHANNELS LISTED IN THE FIRST COLUMN.

|                            | Q26<br>Buyer<br>code | Did you sell any burley tobacco to []?  YES1 NO2 ("NEXT BUYER) | What quanti<br>tobacco did<br>sell to []<br>UNIT<br>KILOGRA<br>50 KG.<br>90 KG.<br>BUNCH.<br>BALE. | you AMME .1 BAG .2 BAG .38 | What was the total value of your | you sell the burley tob]?  JAN .1 FEB .2 MAR .3 APR .4 MAY .5 | onth did<br>ne most | did you so tobacco? | ocation<br>ell the<br>1 URBAN<br>CENTRE. 4<br>OTHER<br>(SPEC).5 | What is t<br>distance<br>location of<br>from whe<br>co was k | to the<br>of sale<br>ere tobac- | BICYCLE 2 OX-CART 3 PICK-UP 4 | What was total transport cost for all tobacco | Q35  ASK ONLY IF SOLD AT AUCTION FLOORS AND ALSO SOLD ELSEWHERE.  Why did you not sell all of your tobacco at the auction floors? PRINCIPAL REASON.  CODES BELOW |
|----------------------------|----------------------|--|--|----------------------------|----------------------------------|---|---------------------|---------------------|---|--|---------------------------------|-------------------------------|---|--|
| Auction floors             | 1                    |  |  |                            |                                  |   |                     |                     |   |  |                                 |                               |   |  |
| ADMARC                     | 2                    |  |  |                            |                                  |   |                     |                     |   |  |                                 |                               |   | NEEDED CASH IMMEDIATELY 1  |
| Tobacco club               | 3                    |  |  |                            |                                  |   |                     |                     |   |  |                                 |                               |   | NO TRANSPORT2 HAVE BEEN CHEATED AT FLOORS IN PAST .3   |
| Neighboring estate         | 4                    |  |  |                            |                                  |   |                     |                     |   |  |                                 |                               |   | NO LICENSE 4  DON'T WANT LOAN  DEDUCTIONS FROM   |
| Intermediate buyer, trader | 5                    |  |  |                            |                                  |   |                     |                     |   |  |                                 |                               |   | SALES 5<br>OTHER (SPECIFY) 6   |
| Other (specify)            | 6                    |  |  |                            |                                  |   |                     |                     |   |  |                                 |                               |   |  |

#### MODULE R: AGRICULTURE - Dry-season (Dimba) cultivation

[ASK OF THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST COMPLETED DRY SEASON. LIST IN R04 ALL PLOTS BEFORE COLLECTING DETAILS ON EACH.

| R01. WHICH IS THE LAST COMPLETED DRY SEASON?               | 2003 . 1<br>2004 . 2            | YES. 1            |
|--|---------------------------------|-------------------|
| R02. Did anyone in your household cultivate a dimba garden | in [LAST COMPLETED DRY SEASON]? | NO . 2 (»MODULE T |

| R0               | R04   | R05   | R06   |       | R07            |   |                                      |  |     | R08   | R09                                | R10   | R11   | R12  | R13   |
|------------------|---|---|---|-------|----------------|---|--------------------------------------|--|-----|---|------------------------------------|---|---|--|---|
| P<br>L<br>O<br>T | LISTING OF DIMBA PLOTS CULTIVATED BY HOUSEHOLD DURING DRY SEASON.  Please list for me each dimba plot members of your household have rights | household<br>is most<br>familiar with<br>this plot?<br>IF PRESENT,<br>ASK THE | What is the plo                               |       | What <u>cr</u> | LOCAL<br>COMPO<br>HYBRI<br>SWEET<br>IRISH<br>RICE.<br>BEAN. | MAIZE SITE MAI D MAIZE POTATO POTATO | 'SEASO  1 IZE 2 3 5 6 9 13             | N]? | How did your household acquire this plot?  GRANTED BY LOCAL LEADERS 1 INHERITED 2 THROUGH FAMILY OF SPOUSE 3 PURCHASED WITH TITLE 4 | relatively<br>common<br>for people | today, how<br>much could<br>you <u>sell</u> it for? | did you pay in total for your <u>lease or rent</u> on this plot in [LAST COM-PLETED DRY |  |   |
| D                | to <u>and</u> which a HH member farmed during [LAST <u>COMPLETED</u> DRY SEASON]?  WRITE A NAME TO IDENTIFY PLOT                            | FOLLOWING<br>QUESTIONS<br>TO THIS<br>INDIVIDUAL.                              | ACRE HECTARE SQ. MET OTHER (SPECI AREA AMOUNT | ERS.3 | 1st            | CABBA<br>TANAP<br>NKHWA<br>THERE<br>TOMAT<br>ONION<br>PEAS. | CANE.  GE                            | 20<br>21<br>22<br>23<br>24<br>25<br>26 | 5th | PURCHASED WITH  NO TITLE 5  LEASEHOLD 6  (»R11)  RENT SHORT-TERM. 7  (»R11)  FARMING AS A  TENANT 8  (»R12)  OTHER (SPEC.) 9        | YES1<br>NO2<br>(>R12)              | MK<br>(»R12)  | SEASON]?  | WATERING CAN 1 HOSEPIPE . 2 SPRINKLER. 3 FLOOD 4 OTHER (SPEC.) . 5 IRRIGATION NOT NEEDED 9 (**R14) | FROM WELL.2 HANDPUMP FROM WELL.3 TREADLE PUMP4 MOTORPUMP .5 GRAVITY-FED PIPELINE .6 OTHER (SPECIFY).7 |
| 21               |   |   |   |       |                |   |                                      |  |     |   |                                    |   |   |  |   |
| 22               |   |   |   |       |                |   |                                      |  |     |   |                                    |   |   |  |   |
| 23               |   |   |   |       |                |   |                                      |  |     |   |                                    |   |   |  |   |
| 24               |   |   |   |       |                |   |                                      |  |     |   |                                    |   |   |  |   |
| 25               |   |   |   |       | _              |   |                                      |  |     |   |                                    |   |   |  |   |
| 26               |   |   |   |       |                |   |                                      |  |     |   |                                    |   |   |  |   |

| R03         | R14 | R15   | R16                        | R17  | R18  | R19  | R20  | R21   | R22  | R23   |
|-------------|-----|---|----------------------------|--|--|--|--|---|--|---|
| P L O T I D |     | fertilizer? LIST UP TO 2.  TRADER 1 RELATIVE 2 NEIGHBOR 3 LOCAL MARKET 4 ADMARC 5 COOPERATIVE /ASSOC 6 PRIVATE COMPANY 7 STARTER PACK/TIP 8 | did you pay<br>for all the | apply any manure to this plot in [LAST CROPPING SEASON]?  ANIMAL MANURE, COMPOST, GREEN MANURE | any purchased seeds or seedlings on this plot in [LAST | seeds or seedlings? LIST UP TO 2.  TRADER 1 RELATIVE 2 NEIGHBOR 3 LOCAL MARKET 4 ADMARC 5 COOPERATIVE /ASSOC 6 PRIVATE COMPANY . 7 | did you pay<br>for the<br>purchased<br>seeds or<br>seedlings | any ganyu or<br>other labour<br>to work on<br>this plot in<br>[LAST<br>COMPLETED<br>DRY<br>SEASON]? | days of ganyu or other labour did you hire? Include all tasks - preparing, planting, irrigating, weeding, harvest. | How much did you pay for the total amount of labour used on this plot?  ESTIMATE VALUE OF ANY IN-KIND PAYMENTS. |
| 21          |     |   |                            |  |  |  |  |   |  |   |
| 22          |     |   |                            |  |  |  |  |   |  |   |
| 23          |     |   |                            |  |  |  |  |   |  |   |
| 24          |     |   |                            |  |  |  |  |   |  |   |
| 25          |     |   |                            |  |  |  |  |   |  |   |
| 26          |     |   |                            |  |  |  |  |   |  |   |

#### MODULE S: AGRICULTURE - Dry-season (Dimba) crop sales

[ASK OF THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST COMPLETED DRY SEASON.

COMPLETE S01 TO IDENTIFY ALL CROPS GROWN BEFORE COLLECTING DETAILS ON EACH.

|   |   |                  |  | I OILL O                      | S04  | ILO OIVE            |   | S06  |     | S07                    |   | S08  |  | S09  |   |
|---|---|------------------|--|-------------------------------|--|---------------------|---|--|-----|------------------------|---|--|--|--|---|
| LOOK AT THE CROIN QUESTION R07 OPREVIOUS MODULI EVERY CROP MEN' MARK THE YES/NO BELOW AS "YES". FOR CROPS NOT MENTIONED IN R07 Did you harvest any [LAST COMPLETED SEASON]? | DF E. FOR TIONED, COLUMN TO PROBE 'ASK: | C<br>R<br>O<br>P | How much of [] you harvest during [LAST COMPLE] DRY SEASON] for your plots in was planted? | ng<br>TED<br>rom all<br>rhich | How much of the you harvested di [LAST COMPLE] DRY SEASON] v sold?  IF NONE, ENTE ZERO. (»s07) | uring<br>TED<br>was | What was the total value you earned from the [] you sold? | To whom did you sell this []? UP TO 2 BUYERS.  TRADER 1 RELATIVE 2 NEIGHBOR 3 LOCAL MARKET 4 ADMARC 5 COOPERATIVE /ASSOC 6 PRIVATE |     | the []                 | ed<br>LAST<br>ETED<br>ASON]<br>en to<br>sor | How mu the [] harvesteduring [LCOMPLIDRY SE has alreaded by your househo | ed<br>LAST<br>ETED<br>ASON]<br>ady<br>nsumed | How mu the [] harveste during [L COMPL DRY SE is still be stored b househo | ed<br>_AST<br>ETED<br>:ASON]<br>eing<br>by your |
| CROP NAME   | ON]?    YES1   UNI'   CODE              |                  | UNIT<br>CODES<br>RIGHT   | CODES                         |  | MK                  | PRIVATE COMPANY7 OTHER (SPEC.)9 1st   2nd                 |  | AMT | UNIT<br>CODES<br>RIGHT | AMT   | UNIT<br>CODES<br>RIGHT   | AMT  | UNIT<br>CODES<br>RIGHT   |   |
|   |   | I .              |  | ·<br>                         | II   |                     | 1   |  |     |                        |   |  |  |  |   |
| LOCAL MAIZE  COMPOSITE  |   | 1                |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| MAIZE   |   | 2                |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| HYBRID MAIZE  |   | 3                |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| SWEET POTATO  |   | 5                |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| IRISH POTATO  |   | 6                |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| RICE  |   | 9                |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| BEAN  |   | 13               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| CABBAGE   |   | 20               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| TANAPOSI  |   | 21               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| NKHWANI   |   | 22               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| THERERE /<br>OKRA   |   | 23               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| TOMATO  |   | 24               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| ONION   |   | 25               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| PEAS  |   | 26               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |
| OTHER (specify)   | _                                       | 27               |  |                               |  |                     |   |  |     |                        |   |  |  |  |   |

#### UNIT

KILOGRAMME. . 1 50 KG. BAG. . 2 90 KG. BAG. . 3 PAIL (SMALL). 4 PAIL (LARGE). 5 No. 10 PLATE. 6 No. 12 PLATE. 7 BUNCH . . . 8 PIECE . . . 9 BALE. . . . .11 BASKET (DENGU) (SHELLED). .12 BASKET (DENGU) (UNSHELLED) .13 OX-CART (UNSHELLED).14 OTHER (SPECIFY). .20

## **MODULE T: AGRICULTURE - Tree crop production & sales**

[ASK OF THOSE CONCERNED WITH FARMING IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST COMPLETED HARVEST SEASON FOR THE TREE CROP.

T01. Did anyone in your household harvest any tree crops in the [LAST COMPLETED HARVEST SEASON FOR THE TREE CROP]?

|  | J   | (> | »NEXT | MODULE) |
|--|-----|----|-------|---------|
|  | NO  |    | 2     |         |
|  | YES | 3. | 1     |         |

|                              | TOO        | TOO      | T04               | TOE             | 1        | TOG      | T07                 |        | T08                 |         | T09                | T10                  | 1        | T11                    |               | 1                                      |
|------------------------------|------------|----------|-------------------|-----------------|----------|----------|---------------------|--------|---------------------|---------|--------------------|----------------------|----------|------------------------|---------------|--|
|                              | •          | 103      |                   | T05             |          | T06      |                     |        |                     |         | 109                |                      |          |                        |               |  |
| Did you harvest a            | ny []      | •        |                   | What is th      |          |          |                     |        | How much            |         | What was           |                      |          | How much o             |               |  |
| during [LAST<br>COMPLETED HA | DVEST      | C<br>R   |                   | of the pla      | ntation? |          |                     |        | [] you har          |         | the total          | sell this [          |          | you harvest            |               |  |
| SEASON FOR TH                |            | 0        | a planta-         |                 |          | [] trees |                     |        | during [LAS         |         | <u>value</u> you   | UP TO 2 BU           | JYERS.   | [LAST COM              |               |  |
| TREE CROP]?                  |            | P        | tion or           |                 |          |          | COMPLET!<br>HARVEST |        | COMPLETI<br>HARVEST |         | earned<br>from the |                      |          | HARVEST S<br>FOR THE T |               |  |
| 1                            |            |          | scat-<br>tered in |                 |          |          | SEASON F            |        | SEASON F            |         | [] you             | TRADER .             | 1        | CROP] was              |               |  |
|                              |            | С        | a field?          |                 |          |          |                     |        | THE TREE            |         |                    | RELATIVE<br>NEIGHBOR |          | rotting after          |               |  |
|                              |            | 0        | a liciu:          |                 |          |          | from all of         | -      | was sold?           | CIXOI ] | Solu :             | LOCAL                |          | Totting arter          | ilaivest:     |  |
|                              |            | D<br>E   |                   | ACRE            | 1        |          | trees?              | oui    | was sola:           |         |                    | MARKET.<br>ADMARC .  |          | IF NONE, EN            | TER ZERO.     |  |
|                              |            | _        |                   | HECTARE         |          | o. op .  |                     |        | IF NONE, E          | NTER    |                    | COOPERATI            | IVE      | (»NEXT TRE             |               |  |
|                              |            |          | PLANTA-           | SQ. MET         | ERS.3    |          |                     |        | ZERO. (»1           |         |                    | /ASSOC.<br>PRIVATE   | 6        |                        |               | UNIT                                   |
|                              | YES1       |          | TION .1           | OTHER<br>(SPECI | FY).4    |          |                     |        |                     |         |                    | COMPANY              | 7        |                        |               | KILOGRAMME 1                           |
|                              | NO2 (»NEXT |          | SCATTE-<br>RED2   | AREA            | AREA     |          |                     | UNIT   |                     | UNIT    |                    | OTHER                |          |                        | UNIT<br>CODES | 50 KG. BAG 2                           |
| CROP NAME                    | CROP)      |          | (»T06)            | AMOUNT          | UNIT     | NUMBER   | AMOUNT              | RIGHT  |                     | RIGHT   | MK                 | (SPEC.)              | 9<br>2nd | AMOUNT                 | RIGHT         | 90 KG. BAG 3<br>PAIL (SMALL). 4        |
| CROI WANE                    | CRO1 )     |          | (#100)            | APIOUNT         | ONII     | NONDER   | AMOUNT              | KIGIII | AMOUNT              | KIGIII  | M                  | 150                  | ZIIG     | APOONT                 | KIOIII        | PAIL (SMALL). 4 PAIL (LARGE). 5        |
| MANGO                        |            | 31       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | No. 10 PLATE. 6                        |
|                              |            | <u> </u> |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | No. 12 PLATE. 7 BUNCH 8                |
| BANANA                       |            | 32       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | PIECE 9<br>BALE                        |
| NAARTJE                      |            | 33       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | BASKET ( <i>DENGU</i> )                |
| (TANGERINE)                  |            | 55       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | (SHELLED)12<br>BASKET ( <i>DENGU</i> ) |
| GUAVA                        |            | 34       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | (UNSHELLED) .13                        |
|                              |            |          |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | OX-CART (UNSHELLED).14                 |
| PAPAYA                       |            | 35       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | OTHER (SPECIFY)20                      |
| AVOCADO                      |            | 36       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               | (SPECIFY)20                            |
|                              |            |          |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               |  |
| TEA                          |            | 37       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               |  |
| COFFEE                       |            | 38       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               |  |
| OTHER<br>(specify)           |            | 39       |                   |                 |          |          |                     |        |                     |         |                    |                      |          |                        |               |  |

#### **MODULE U: AGRICULTURE - Livestock & livestock sales**

[ASK OF THOSE CONCERNED WITH ANIMAL HUSBANDRY IN THE HOUSEHOLD.] THE TIME REFERENCE IS THE LAST TWELVE MONTHS.

U01: Has any member of your household raised or owned livestock or poultry during the past 12 months?

YES. 1

NO . 2

(\*NEXT MODULE)

|  |            |        |  |                                |  |   |         |                           |  | •       | I MODULE) |                             |   |   |
|--|------------|--------|--|--------------------------------|--|---|---------|---------------------------|--|---------|-----------|-----------------------------|---|---|
| U02  |            | U03    | U04                                    | U05                            | U06  | U07   | U08     | U09                       | U10  | U11     | U12       | U13                         | U14                                     | U15   |
| During the last<br>twelve months, has<br>any member of<br>your household<br>raised any []? | YES1       | N<br>I | [] does your household own at present? | those []<br>today, how<br>much | of your []<br>did you <u>sell</u><br>during the<br>last 12 | did your<br>household<br>receive for<br>the sale of | months? | of your []<br>died during | of your [] were lost or were stolen during the |         | [] did    | did you pay<br>in total for | [] were born during the last 12 months? | How many [] were received as gifts by your household during the last 12 months? |
|  | NO2 (»NEXT |        | NUMBER<br>OF                           |                                | No. OF   |   | No. OF  | No. OF                    | No. OF   | No. OF  | No. OF    |                             | No. OF                                  | No. OF  |
| ANIMAL   | ANIMAL)    |        | ANIMALS                                | MK                             | ANIMALS  | MK  | ANIMALS | ANIMALS                   | ANIMALS  | ANIMALS | ANIMALS   | MK                          | ANIMALS                                 | ANIMALS   |
| CATTLE   |            | 51     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| OXEN (trained to pull cart or plow)  |            | 52     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| GOATS  |            | 53     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| SHEEP  |            | 54     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| PIGS   |            | 55     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| CHICKENS   |            | 56     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| OTHER POULTRY  |            | 57     |  |                                |  |   |         |                           |  |         |           |                             |   |   |
| OTHER (specify)  | _          | 58     | _                                      |                                | _  |   |         |                           |  |         |           |                             |   |   |

|                                     |    | U16  | U17                   | U18   |      | U19  |
|-------------------------------------|----|--|-----------------------|---|------|--|
|                                     |    | How much did you spend in total on the upkeep of these [] over the past 12 months, e.g., feed, herdboys, vaccinations & medicine, building a kola? | sell any              | What was the byproduct?  EGGS MILK SKIN MEAT MANURE OTHER (SPECIFY_ |      | How much did you obtain in total from the sales of these [] byproducts during the last 12 months?  INCLUDE VALUE OF IN-KIND PAYMENTS |
| 277777                              |    | 200  | YES1<br>NO2<br>(»NEXT | 1 cm  | OMD. | 200  |
| ANIMAL                              |    | MK   | ANIMAL)               | 1ST   | 2ND  | MK   |
| CATTLE                              | 51 |  |                       |   |      |  |
| OXEN (trained to pull cart or plow) | 52 |  |                       |   |      |  |
| GOATS                               | 53 |  |                       |   |      |  |
| SHEEP                               | 54 |  |                       |   |      |  |
| PIGS                                | 55 |  |                       |   |      |  |
| CHICKENS                            | 56 |  |                       |   |      |  |
| OTHER POULTRY                       | 57 |  |                       |   |      |  |
| OTHER (specify)                     | 58 |  |                       |   |      |  |

| Malari 2004 lata anata di Marada di Arada da Marada di Arada da Marada di Arada da Marada di Arada da Marada d |
|--|
| Malawi 2004 Integrated Household Survey - Household questionnaire - page 42                                    |
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#### **MODULE V: HOUSEHOLD ENTERPRISES**

[ASK OF HOUSEHOLD HEAD. THEN ASK OF ENTERPRISE MANAGER.]

V01. Over the <u>past month</u>, has anyone in your household operated any <u>non-agricultural</u> income-generating enterprise which produces goods or services or has anyone in your household owned a shop or operated a trading business?

(Enterprises might include, for example, fishing, making mats, bricks, or charcoal; mason; firewood selling; metalwork; tailoring; repair work; food processing, fish marketing, petty trading, etc.)

|     | () | »NEXT | MODULE) |
|-----|----|-------|---------|
| NO  |    | 2     |         |
| YES | 3. | 1     |         |

LIST IN V03 ALL ENTERPRISES BEFORE COLLECTING DETAILS ON EACH.

| V02           | V03  |  | V04                           |         | V05  | V06                                    |                      | V07  | V08  | V09                                      | V10  |
|---------------|--|--|-------------------------------|---------|--|--|----------------------|--|--|--|--|
| E<br>N<br>T   | What income-generating enterprises did individual household operate over the past month? | als in your  | Who in the owns this e        |         |  | Who in the<br>household<br>this enterp | manages              |  | Where do you operate the enterprise?   | How many yearnd months hithis enterprise | s enterprise                               |
| E R P R I S E | OLLECT INFORMATION ON ALL ENTERPRISES HERE FORE GOING ON TO COLLECT DETAILS ON EACH.     |  | CAN LIST UP TO<br>TWO OWNERS. |         | household<br>are co-<br>owners of the<br>enterprise? | IF CO-MANAGERS,<br>LIST BOTH.          |                      | past year<br>did you<br>operate<br>this<br>enterprise? | HOME, INSIDE RESIDENCE. 1 HOME OUTSIDE RESIDENCE. 2  | been in<br>existence?                    | registered<br>with the<br>govern-<br>ment? |
| N<br>O        |  | (Supervisor<br>to put in<br>code after<br>interview)<br>INDUSTRY | OWNER 1                       | OWNER 2 | WRITE 0.   | FOLLOWI<br>QUESTIO<br>MANAGER          | NG<br>NS TO<br>R(S). | NUMBER OF  | INDUSTRIAL SITE 3 TRADITIONAL MARKET 4 COMMERCIAL AREA SHOP . 5 ROADSIDE 6 OTHER FIXED PLACE 7 |  | YES1<br>NO2<br>DOES NOT                    |
|               | WRITTEN DESCRIPTION  | CODE   | ID CODE                       | ID CODE | NUMBER   | ID CODE                                | ID CODE              | MONTHS   | MOBILE 8   | YEARS MON'                               | HS KNOW3                                   |
| 1             |  |  |                               |         |  |  |                      |  |  |  |  |
| 2             |  |  |                               |         |  |  |                      |  |  |  |  |
| 3             |  |  |                               |         |  |  |                      |  |  |  |  |
| 4             |  |  |                               |         |  |  |                      |  |  |  |  |
| 5             |  |  |                               |         |  |  |                      |  |  |  |  |
| 6             |  |  |                               |         |  |  |                      |  |  |  |  |
| 7             |  |  |                               |         |  |  |                      |  |  |  |  |
| 8             |  |  |                               |         |  |  |                      |  |  |  |  |

| V02           | V11   | V12   | V13   | V14   |  |  | V15        |                                      | V16  | V17   |             |                 |                 |             | V18   | V19                                    |
|---------------|---|---|---|---|--|--|------------|--------------------------------------|--|---|-------------|-----------------|-----------------|-------------|---|--|
| ENTERPRISE NO | How many<br>household<br>members<br>are<br>engaged in | How many employees are there who are not household members? | When the enterprise is running, how many hours per week does each | PROCEEDS F BUSINESS OWN SAVING OWN SAVING NON-GANY AGRICULTUR NON-AGRICU BANK OR O LOAN FROM INHERITED. | apital for to a company apital for to a company apital family/friested and another and a company apital family api | SOURCE OF his  REE.  ENDS 1 ENDS 2 3 R 4 VU 5 ICULTURE 6 7 REDIT . 8 JIT, FUTION . 9 ER 10 |            | FUMERS .12 L SS3 BBLISHED SNS4 SNS56 | What were the total sales for the enterprise last month? | What were the <u>business costs</u> last month in the following categories?  Purchase Salaries, of goods wages, for sale  Raw |             |                 |                 |             | Over the past month, did you earn a profit, make a loss, or just break even?  EARNED A PROFIT .1 LOSS2 BROKE EVEN 3 | What was the amount you earned or lost |
|               |   | HH MEMBER<br>EMPLOYEES                                      |   | OTHER (SPE  | CIFY)  |  | OTHER (SPE |                                      | MK   | insurance<br>MK   | (inventory) | Transport<br>MK | materials<br>MK | Other<br>MK | (»NEXT<br>ENTERPRISE)   | MK                                     |
| 1             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 2             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 3             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 4             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 5             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 6             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 7             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |
| 8             |   |   |   |   |  |  |            |                                      |  |   |             |                 |                 |             |   |  |

## **MODULE W: OTHER INCOME**

| tori recognitional file and the second file an |                    |            |                 |             |            |           |              |               |                           |               |                |             |  |
|--|--------------------|------------|-----------------|-------------|------------|-----------|--------------|---------------|---------------------------|---------------|----------------|-------------|--|
| W01  | W02                | W03        |                 | W04         | W05        | W06       |              | W07           | W08                       | W09           | W10            | W10         |  |
| Over the past 12   | How much does      | Over what  | period of time  | Over the    | How        | Over wha  | at period of | Over the past | What sort of              | How much      | Over what per  | iod of time |  |
| months, did any  | your household in  | are you re | porting this    | past 12     | much       | time are  | you          | 12 months,    | property?                 | does your     | are you report | ing this    |  |
| members of your  | total usually      | savings in | terest or other | months,     | does your  | reporting | this         | did any       |                           | household in  | rental income? | ?           |  |
| household  | receive in savings | investmen  | t income?       | did any     | house-     | pension i | ncome?       | members of    |                           | total usually |                |             |  |
| receive any  | interest or other  |            |                 | members     | hold in    |           |              | your          |                           | receive in    |                |             |  |
| regular income   | investment         |            |                 | of your     | total      |           |              | household     |                           | rental        |                |             |  |
| from savings   | income?            |            |                 | household   | usually    |           |              | receive any   |                           | income?       |                |             |  |
| interest or other  |                    |            |                 | receive     | receive in |           |              | regular       |                           |               |                |             |  |
| investment   |                    |            |                 | any regular | pension    |           |              | income from   |                           |               |                |             |  |
| income?  |                    |            |                 | income      | income?    |           |              | rental of     |                           |               |                |             |  |
|  |                    |            |                 | from a      |            |           |              | property (not |                           |               |                |             |  |
|  |                    |            |                 | pension?    |            |           |              | agricultural  | HOUSE1                    |               |                |             |  |
|  |                    |            | TIME UNIT       |             |            |           | TIME UNIT    | land)?        | COMMERCIAL<br>BUILDING .2 |               |                | TIME UNIT   |  |
| YES1   |                    | NUMBER     | WEEK .4         | YES1        |            | NUMBER    | WEEK .4      | YES1          | OTHER                     |               | NUMBER         | WEEK .4     |  |
| NO2  |                    | OF TIME    | MONTH.5         | NO2         |            | OF TIME   | MONTH.5      | NO2           | PROPERTY                  |               | OF TIME        | MONTH.5     |  |
| (»W04)   | MK                 | UNIT       | YEAR .6         | (»W07)      | MK         | UNIT      | YEAR .6      | (»W11)        | (SPECIFY).3               | MK            | UNIT           | YEAR .6     |  |
|  | ·                  |            | ·               |             | <u> </u>   |           |              | ·             | ·                         | <u> </u>      | <u> </u>       |             |  |
|  |                    |            |                 |             |            |           |              |               |                           |               |                |             |  |
|  |                    |            |                 | I           |            |           |              | lí            |                           |               |                | I           |  |

| W11  | W12                               | W13   | W14  |           |  |
|--|-----------------------------------|---|--|-----------|--|
| Over the past 12 months, did any members of your household receive any regular income of any other type? | What sort of income?<br>(SPECIFY) | How much does your household in total usually receive from this other income? | Over what patime are you reporting the income? | u         |  |
|  |                                   |   |  | TIME UNIT |  |
| YES1   |                                   |   | NUMBER   | WEEK .4   |  |
| NO2  |                                   |   | OF TIME  | MONTH.5   |  |
| (»NEXT MODULE)   |                                   | MK  | UNIT   | YEAR .6   |  |
| П  |                                   | 1   | l  |           |  |
|  |                                   |   |  |           |  |
| Ц  |                                   |   |  |           |  |

# MODULE X: GIFTS RECEIVED AND GIVEN BY HOUSEHOLD

| X01                   | X02                | X03                | X04                | X05                   | X06                 | X07                 | X08                |
|-----------------------|--------------------|--------------------|--------------------|-----------------------|---------------------|---------------------|--------------------|
| Over the past 12      | What was the       | What was the       | What was the       | Over the past 12      | What was the        | What was the        | What was the       |
| months, did you or    | total value of all | total value of all | total value of all | months, did you or    | total value of all  | total value of all  | total value of all |
| anyone in your        | cash received      | food received as   | other in-kind      | anyone in your        | cash given as a     | food given as a     | other in-kind      |
| household receive     | as a gift from     | a gift from        | gifts received     | household give any    | gift to individuals | gift to individuals | gifts to           |
| any gifts (in cash or | individuals in the | individuals in the | from individuals   | gifts (in cash or in- | in the last 12      | in the last 12      | individuals in the |
| in-kind) from any     | last 12 months?    | last 12 months?    | in the last 12     | kind) from any        | months?             | months?             | last 12 months?    |
| individuals           |                    |                    | months?            | individuals           |                     |                     |                    |
| (friends/family)      |                    |                    |                    | (friends/family)      |                     |                     |                    |
| outside your          |                    |                    |                    | outside your          |                     |                     |                    |
| household?            |                    |                    |                    | household?            |                     |                     |                    |
|                       |                    |                    |                    |                       |                     |                     |                    |
| YES1                  |                    |                    |                    | YES1                  |                     |                     |                    |
| NO2                   |                    |                    |                    | NO2                   |                     |                     |                    |
| (»X05)                | MK                 | MK                 | MK                 | (»NEXT MODULE)        | MK                  | MK                  | MK                 |
|                       |                    |                    |                    | 1                     |                     |                     |                    |
|                       |                    |                    |                    |                       |                     |                     |                    |
|                       |                    |                    |                    |                       |                     |                     |                    |

## **MODULE Y: SOCIAL SAFETY NETS**

|   | Y01                            | Y02                    | Y03                                |      |         | Y04   | Y05            |   |
|---|--------------------------------|------------------------|------------------------------------|------|---------|---|----------------|---|
| Has anyone in your household benefited in the past three years from the following programme?          | YES1<br>NO2<br>(»NEXT<br>ITEM) | PROG-<br>RAMME<br>CODE | years did<br>benefit fr<br>program |      | usehold | (ASK ONLY IF BEN<br>2003.)<br>How much did yo<br>receive in benefit<br>programme? | our house-hold | FOR NON-CASH<br>BENEFITS IN Y04:<br>What was the<br>estimated value of<br>this benefit? |
| Free food/maize distribution.   | ,                              | 11                     | 2001                               | 2002 | 2000    | 11011221  | O.V.I.T        |   |
| Food-for-work programme or cash-for-work<br>programme - e.g. MASAF Public Works<br>Programme (PWP)    |                                | 12                     |                                    |      |         |   |                |   |
| Inputs-for work programme   |                                | 13                     |                                    |      |         |   |                |   |
| Free distribution of Likuni Phala to children and mothers (Targeted Nutrition Programme - TNP)        |                                | 14                     |                                    |      |         |   |                |   |
| Supplementary feeding for malnourished children at a nutritional rehabilitation unit.                 |                                | 15                     |                                    |      |         |   |                |   |
| Starter Pack (TIP) distribution of agricultural inputs (seed/fertilizer) for the <u>rainy</u> season. |                                | 16                     |                                    |      |         |   | MK             |   |
| Starter Pack (TIP) distribution of agricultural inputs (seed/fertilizer) for the <u>dimba</u> season. |                                | 17                     |                                    |      |         |   | MK             |   |
| Other (not Starter Pack) free agricultural inputs distributions                                       |                                | 18                     |                                    |      |         |   |                |   |
| Scholarships or bursaries for secondary education. (e.g., GABLE support for girls)                    |                                | 19                     |                                    |      |         |   | MK             |   |
| Scholarships or bursaries for tertiary education (GABLE, university scholarship, upgrading teachers). |                                | 20                     |                                    |      |         |   | MK             |   |
| Tertiary Loan Scheme (Government loan for university and other tertiary education).                   |                                | 21                     |                                    |      |         |   | MK             |   |
| Direct cash transfers (from Government).  |                                | 22                     |                                    |      |         |   | MK             |   |
| Other education bursaries (specify).  |                                | 23                     |                                    |      |         |   | MK             |   |

## **MODULE Z: CREDIT**

[ASK OF HOUSEHOLD HEAD AND PERSONS RESPONSIBLE FOR LOANS LISTED.]

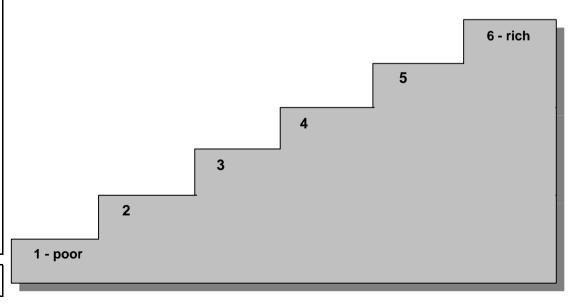
|             |                                      |                              |  |   | or larming purposes, receiving either cash or inputs: |  |                        |                     |   |            |  |  |   | ASK OF HOUSEHOLD HEAD                  |                               |              |   |   |  |
|-------------|--------------------------------------|------------------------------|--|---|---|--|------------------------|---------------------|---|------------|--|--|---|--|-------------------------------|--------------|---|---|--|
| Z02         | Z03                                  | Z04                          | Z05                                      | Z06   | Z07   | Z08  |                        | Z09                 | Z10   |            | Z11  |  | Z12   | )                                      | Z13                           |              | Z14   |   |  |
| L O A N N O | What are the names of the persons or | CODE<br>SOURCE<br>OF<br>LOAN | Which<br>house-<br>hold<br>member<br>was | What was main reason for obtaining loan? Was it: [READ]  PURCHASE LAND1  PURCHASE LAND1  PURCHASE AGRI- CULTURAL INPUTS  FOR FOOD CROP .2  PURCHASE INPUTS  FOR TOBACCO3  PURCHASE INPUTS  FOR OTHER CASH CROPS4  BUSINESS START- UP CAPITAL5  PURCHASE NON- FARM INPUTS6  OTHER (SPECIFY). 7 | How much was borrowed?                                | When d get the l within the 12 month of 12 | oan<br>ne past<br>ths? | Is the loan repaid? | Approxin when do expect to back the money?  JAN. 1 FEB. 2 MAR. 3 APR. 4 MAY. 5 JUN. 6 JUN. 6 JUL. 7 AUG. 8 SEP. 9 OCT. 10 NOV. 11 DEC. 12 | you<br>pay | you p<br>you e<br>have<br>total v<br>(will h<br>off thi<br>(inter-<br>princi<br>(GO<br>LOAN. |  | you<br>fror<br>out:<br>hou<br>fror<br>tutio<br>turr | 0                                      | Who tur<br>you dov<br>LIST UP | vn?<br>TO 2. | Why did you attempt to be the last 12 r [WRITE UP TO ANSWERS IN 0 IMPORTANCE.  NO NEED .  NO NEED .  TOO EXPENSIVE TOO MUCH TRO FOR WHAT IT INADEQUATE COD NOT LIKE IN DEBT .  DO NOT KNOW OTHER (SPECILES) | Orrow in nonths? TWO DRDER OF 1  LLD BE |  |
| 1           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  |   |  |                               |              |   |   |  |
| 2           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  | Щ   |  | <u> </u>                      |              |   |   |  |
| 3           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  |   | CODES FOR                              |                               | .1           |   |   |  |
| 4           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  |   | NEIGHBOUR.<br>GROCERY/LOO<br>MERCHANT  | CAL                           |              |   |   |  |
| 5           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  |   | MONEY LENDI<br>(KATAPILA<br>EMPLOYER . |                               |              |   |   |  |
| 6           |                                      |                              |  |   |   |  |                        | _                   |   |            |  |  |   | RELIGIOUS INSTITUTIO                   |                               |              |   |   |  |
| 7           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  |   | SACCO<br>BANK (COMMINGO                | ERCIAL).                      | . 9          |   |   |  |
| 8           |                                      |                              |  |   |   |  |                        |                     |   |            |  |  |   | OTHER (SPEC                            | CIFY)                         | 11           |   |   |  |

## **MODULE AA: SUBJECTIVE ASSESSMENT OF WELL-BEING**

[ASK OF THE HEAD OF HOUSEHOLD.] INTRODUCE BY STATING: "I would like to ask you several questions on your opinion of your household's standard of living."

| AA01   | AA02   | AA03  | AA04  | AA05                  | AA06  | AA07   | AA08  | AA09  | AA10   | AA11       | AA12                          |                                 |
|--|--|---|---|-----------------------|---|--|---|---|--|------------|-------------------------------|---------------------------------|
| food<br>consumption<br>over the past<br>one month,   | ing your<br>housing,<br>which of<br>the<br>following is<br>true? | ing your<br>house-<br>hold's<br><u>clothing,</u><br>which of<br>the<br>following is | the standard<br>of <u>health care</u><br>you receive<br>for household | step, the sixtl       | rst step, stan<br>le, and on the<br>h, stand the ri | d the<br>e highest<br>ich.                                   | true? Your current income [READ]:  allows you to build your savings 1 allows you to save just a little 2            | your household economic well-being, are you better off, the same as, or worse off than this same time a year ago? | your household economic well-being, in a year from now do you expect to be better off, the same as, or worse off | personally | of time and consideri minimum | re you<br>ng this               |
| It was less than adequate for household needs. 1 It was just adequate for household needs 2 It was more than adequate for household needs. 3  (NOTE THAT 'ADEQUATE' MEANS NO MORE OR NO LESS THAN WHAT THE RESPONDENT CONSIDERS TO BE THE MINIMUM CONSUMPTION NEEDS OF THE HOUSEHOLD.) |  |   | eds2<br>d needs.3   | On which step are you | On which step are most of your neighbors            | On which<br>step are<br>most of<br>your<br>friends<br>today? | so you need to use your savings to meet expenses4 is really not sufficient, so you need to borrow to meet expenses5 | MUCH BETTER.1 BETTER 2 NO CHANGE 3 WORSE OFF 4  | MUCH BETTER.1<br>BETTER 2  | МК         | NUMBER<br>OF TIME<br>UNITS    | TIME UNITO DAY3 WEEK .4 MONTH.5 |
|  |  |   |   |                       |   |  |   |   |  |            |                               |                                 |

| AA13  | AA14   | AA15   | AA16   | AA17   |
|---|--|--|--|--|
| Overall, how satisfied (content, happy) are you with your life? Are you                                 | How many<br>changes of<br>clothes do<br>you (HH<br>HEAD)<br>own? | What do you (HH HEAD)<br><u>sleep on</u> ?   |  | What do<br>you (HH<br>HEAD)<br>sleep under<br>in the hot<br>season<br>(October)? |
| very unsat- isfied 1 unsatisfied 2 neither unsatisfied or satis- fied 3 satisfied . 4 very satisfied. 5 | (NUMBER OF TROU- SERS FOR MEN; SKIRTS/ DRESSES FOR WOMEN)        | BED & MATTRESS 1 BED & MAT (GRASS). 2 BED ALONE 3 MATTRESS ON FLOOR. 4 MAT (GRASS) ON FLOOR 5 CLOTH/SACK ON FLOOR 6 FLOOR (NOTHING ELSE) 7 OTHER (SPECIFY) . 8 | BLANKET ONLY SHEETS ONLY CHITENJE CI FERTILIZER SACK CLOTHES NOTHING | 5  |
|   |  |  |  |  |



# MODULE AB: RECENT SHOCKS TO HOUSEHOLD WELFARE

| [KOK OF FIGURE FIGURE FIELD.]  | AB01                           | AB02 | AB03   |                   | AB04  | AB05 | AB06                |   | AB07                           |   |                                    |
|--|--------------------------------|------|--|-------------------|---|------|---------------------|---|--------------------------------|---|------------------------------------|
| Over the past <u>five years</u> , was your household severely affected negatively by any of the following events?  GO THROUGH ENTIRE LIST BEFORE PROCEEDING. | YES1<br>NO2<br>(»NEXT<br>ITEM) | CODE | Rank the three<br>most significant<br>shocks you<br>experienced - most<br>severe (1), second<br>most severe (2),<br>third (3). |                   | [THIS SHOCK] caused a reduction in income, in the assets you have, or both?  INCOME LOSS .1 ASSET LOSS .2 LOSS OF BOTH .3 |      | did [THIS<br>SHOCK] | 3 | respons<br>to try to<br>former | regain<br>welfare<br>TO 3 BY 0<br>RTANCE, | s shock<br>your<br>level?<br>ORDER |
| Lower crop yields due to drought or floods   |                                | 101  |  | THE               |   |      |                     |   |                                |   |                                    |
| Crop disease or crop pests   |                                | 102  |  | QUEST-<br>IONS TO |   |      |                     |   |                                |   |                                    |
| Livestock died or were stolen  |                                | 103  |  | THE<br>RIGHT      |   |      |                     |   |                                |   |                                    |
| Household business failure, non-agricultural   |                                | 104  |  | SHOULD<br>ONLY BE |   |      |                     |   |                                |   |                                    |
| Loss of salaried employment or non-payment of salary   |                                | 105  |  | ASKED<br>CON-     |   |      |                     |   |                                |   |                                    |
| End of regular assistance, aid, or remittances from outside HH   |                                | 106  |  | CERNING<br>THE    |   |      |                     |   |                                |   |                                    |
| Large fall in sale prices for crops  |                                | 107  |  | THREE<br>MOST     |   |      |                     |   |                                |   |                                    |
| Large rise in price of food  |                                | 108  |  | SEVERE<br>SHOCKS, |   |      |                     |   |                                |   |                                    |
| Illness or accident of household member  |                                | 109  |  | AS<br>NOTED IN    |   |      |                     |   |                                |   |                                    |
| Birth in the household   |                                | 110  |  | AB03.             |   |      |                     |   |                                |   |                                    |
| Death of HH head   |                                | 111  |  | LEAVE             |   |      |                     |   |                                |   |                                    |
| Death of working member of household   |                                | 112  |  | ALL<br>OTHER      |   |      |                     |   |                                |   |                                    |
| Death of other family member   |                                | 113  |  | ROWS              |   |      |                     |   |                                |   |                                    |
| Break-up of the household  |                                | 114  |  | BLANK.            |   |      |                     |   |                                |   |                                    |
| Theft  |                                | 115  |  |                   |   |      |                     |   |                                |   |                                    |
| Dwelling damaged, destroyed  |                                | 116  |  |                   |   |      |                     |   |                                |   |                                    |
| Other 1  |                                | 117  |  |                   |   |      |                     |   |                                |   |                                    |
| Other 2  |                                | 118  |  |                   |   |      |                     |   |                                |   |                                    |

| SPENT CASH SAVINGS 1          |
|-------------------------------|
| SENT CHILDREN TO LIVE WITH    |
| RELATIVES                     |
| SOLD ASSETS (TOOLS,           |
| FURNITURE, ETC.)              |
| SOLD FARMLAND 4               |
| RENTED OUT FARMLAND 5         |
| SOLD ANIMALS 6                |
| SOLD MORE CROPS               |
| WORKED LONGER HOURS,          |
| WORKED MORE 8                 |
| OTHER HH MEMBERS WHO          |
| WEREN'T WORKING WENT          |
| TO WORK                       |
| STARTED A NEW BUSINESS 10     |
| REMOVED CHILDREN FROM         |
| SCHOOL TO WORK 11             |
| WENT ELSEWHERE TO FIND        |
| WORK FOR MORE THAN            |
| A MONTH                       |
| BORROWED MONEY FROM           |
| RELATIVES                     |
| BORROWED MONEY FROM MONEY     |
| LENDER (KATAPILA) 14          |
| BORROWED MONEY FROM           |
| INSTITUTION (BANK,            |
| MRFC, ETC.) 15                |
| RECEIVED HELP FROM            |
| RELIGIOUS INSTITUTION 16      |
| RECEIVED HELP FROM            |
| LOCAL NGO 17                  |
| RECEIVED HELP FROM            |
| INTERNATIONAL NGO 18          |
| RECEIVED HELP FROM            |
| GOVERNMENT 19                 |
| REDUCED FOOD CONSUMPTION . 20 |
| CONSUMED LOWER COST, BUT      |
| LESS PREFERRED FOODS 21       |
| REDUCED NON-FOOD              |
| EXPENDITURES 22               |
| SPIRITUAL EFFORT - PRAYER,    |
| SACRIFICES, CONSULTED         |
| DIVINER                       |
| DID NOT DO ANYTHING 24        |
| OTHER (SPECIFY) 25            |
|                               |
|                               |

## **MODULE AC: DEATHS IN HOUSEHOLD**

[ASK OF HOUSEHOLD HEAD.]

AC01. Over the <u>past two years</u>, did any member of your household die, including any infants?

|  | YES | 3. | 1 |        |         |
|--|-----|----|---|--------|---------|
|  | NO  |    | 2 | (»NEXT | MODULE) |

| AC02           | AC03                | AC04   | AC05               | AC06   |     | AC07  | AC08  | AC09  | AC10 |               | AC11       |                       | AC12  | AC13   | AC14    |
|----------------|---------------------|--|--------------------|--|-----|---|---|---|------|---------------|------------|-----------------------|---|--|---------|
| S E R I A L NO | NAME OF<br>DECEASED | RELATION-<br>SHIP TO<br>HEAD OF<br>HOUSEHOLD | MALE1<br>FEMALE. 2 | AGE AT I<br>IF UNDER<br>YEARS,<br>INCLUDE<br>MONTHS<br>IF UNDER<br>(»AC08) | R 5 | What kind of work did [NAME] do for most of his/her life?  FARMING 1 FISHING 2 TRADER/MERCHANT . 3 TRANSPORT 4 TRADESMAN (MASON, CARPENTER, ETC) . 5 CIVIL SERVANT 6 TEACHER 7 DOCTOR/NURSE/ETC . 8 OTHER PROFESSION . 9 CLERK/SECRETARY . 10 FACTORY WORKER 11 RESTAURANT, BAR . 12 GENERAL LABOURER . 13 HOME WORKER 14 STUDENT 15 OTHER 16 | [NAME] die of old age, an illness, or of some other cause?  OLD AGE .1 (»AC13) ILLNESS .2 (»AC10) OTHER | What was the [NON-ILLNESS] cause of [NAME]'s death?  THEN (*AC13)  TRAFFIC ACCIDENT 1 OTHER ACCIDENT OR INJURY 2 CHILDBIRTH OR COMPLICATIONS . 3 MURDER 4 SUICIDE 5 WITCHCRAFT/ SORCERY 6 OTHER (SPEC.) . 7 | 1ST  | at<br>NAME]'s | this illne | AME]<br>g from<br>ess | cause of<br>death<br>diagnosed,<br>or is this<br>only your<br>own<br>percep-<br>tion? | After this person died, did you or members of your household lose any land or other assets due to inheritance traditions?  YES1 NO2 (*NEXT DECEASED) | land or |
| 31             |                     |  |                    |  |     |   |   |   |      |               |            |                       |   |  |         |
| 32             |                     |  |                    |  |     |   |   |   |      |               |            |                       |   |  |         |
| 33             |                     |  |                    |  |     |   |   |   |      |               |            |                       |   |  |         |
| 34             |                     |  |                    |  |     |   |   |   |      |               |            |                       |   |  |         |
| 35             |                     |  |                    |  |     |   |   |   |      |               |            |                       |   |  |         |
| 36             |                     |  |                    |  |     |   |   |   |      |               |            |                       |   |  |         |

| WIFE/HUSBAND 2           | GRANDFATHER/MOTHER 10    |
|--------------------------|--------------------------|
| CHILD/ADOPTED CHILD3     | FATHER/MOTHER-IN-LAW. 11 |
| GRANDCHILD 4             | OTHER RELATIVE 12        |
| NIECE/NEPHEW 5           | SERVANT OR SERVANT'S     |
| FATHER/MOTHER 6          | RELATIVE 13              |
| SISTER/BROTHER 7         | TENANT OR TENANT'S       |
| SON/DAUGHTER-IN-LAW8     | RELATIVE 14              |
| BROTHER/SISTER-IN-LAW .9 | OTHER NON-RELATIVE 15    |

#### ILLNESS CODES

| MALARIA1         | HIGH BLOOD  | SEXUALLY          |
|------------------|-------------|-------------------|
| MEASLES2         | PRESSURE OR | TRANSMITTED       |
| DIARRHEA 3       | CIRCULATORY | DISEASE 15        |
| PNEUMONIA 4      | PROBLEM 10  | DIABETES          |
| MENINGITIS5      | STROKE 11   | COMPLICATION. 16  |
| MALNUTRITION6    | CANCER 12   | DOES NOT KNOW. 17 |
| TUBERCULOSIS7    | KIDNEY      | REFUSED TO        |
| HIV/AIDS 8       | DISEASE 13  | ANSWER 18         |
| HEART DISEASE .9 | LIVER       | OTHER (SPEC.). 19 |
|                  | DISEASE 14  |                   |

# MODULE AD: CHILD ANTHROPOMETRY

| [ON         | [ONLY FOR CHILDREN AGED SIX TO 60 MONTHS.]   |   |   |                        |                                 |   |  |  |  |  |                |   |                                |
|-------------|--|---|---|------------------------|---------------------------------|---|--|--|--|--|----------------|---|--------------------------------|
| ADO         | 1 AD02   | AD03  | AD04  | -                      | AD05                            | AD06  | AD07   | AD08   | AD09   | AD10                                     | AD11           | AD12  | AD13                           |
| I D C O D E | PUT AN 'X' FOR ALL INDIVIDUALS WHO ARE AGED UNDER SIX MONTHS OR OLDER THAN EXACTLY FIVE YEARS OLD (60 MONTHS).  DO NOT ADMINISTER THIS MODULE TO THESE | MOTHER /<br>GUARDIAN<br>OF THE<br>CHILD IN<br>THE<br>HOUSE-<br>HOLD | How old is<br>RECONFIR<br>AGE - MUS<br>INCLUDE E<br>YEARS AN<br>MONTHS. | RM EXACT<br>ST<br>BOTH | WAS<br>[NAME]<br>MEAS-<br>URED? | NOT HOME<br>DURING                                      | WEIGHT OF<br>CHILD   | HEIGHT / LENGTH OF CHILD  CHILDREN AGED UNDER 24 MONTHS SHOULD BE MEASURED LYING DOWN. ALL OTHERS, STANDING. | HEIGHT /<br>LENGTH<br>MEASURED<br>WITH CHILD<br>STANDING OR<br>LYING DOWN? | MENT OF THE<br>CHILD DONE<br>IN A NORMAL | Does the child | GUARDIAN:<br>Does the<br>child<br>participate<br>in an <u>under</u><br>five clinic? | OEDEMA<br>(SWELLING<br>THAT IS |
|             | INDIVIDUALS.  IF NONE AGED SIX TO 60 MONTHS,  *END.  | Roster<br>ID  | YEARS   | MONTHS                 | YES1<br>(»AD07)<br>NO2          | SURVEY PERIOD1 TOO ILL2 UNWILLING.3 OTHER4 (THEN *AD11) | IN KG TO ONE DECIMAL PLACE. (IF LESS THAN 10 KG, PUT ZERO IN FIRST BLANK.) | IN CM, TO ONE DECIMAL PLACE. (IF LESS THAN 100 CM, PUT ZERO IN FIRST BLANK.)                                 | STANDING1<br>LYING DOWN.2  |  | YES1<br>NO2    | YES1 NO2  (IF CHILD NOT MEASURED »END)  | YES1<br>NO2                    |
|             | 1  | 1   |   |                        | 1                               |   | T  | П  | 1  | 1  | 1              |   |                                |
| 1           |  |   |   |                        |                                 |   |  |  |  |  |                |   |                                |
| 2           |  |   |   |                        |                                 |   |  |  |  |  |                |   |                                |
| 3           |  |   |   |                        |                                 |   |  |  |  |  |                |   |                                |
| 4           |  |   |   |                        |                                 |   |  | ·  |  |  |                |   |                                |
| 5           |  |   |   |                        |                                 |   | ·  | ·  |  |  |                |   |                                |
| 6           |  |   |   |                        |                                 |   | ·  |  |  |  |                |   |                                |
| 7           |  |   |   |                        |                                 |   | ·  |  |  |  |                |   |                                |
| 8           |  |   |   |                        |                                 |   | ·  | ·  |  |  |                |   |                                |
| 9           |  |   |   |                        |                                 |   | ·  |  |  |  |                |   |                                |
| 10          | 1  |   |   |                        |                                 |   | ·  | ·_   |  |  |                |   |                                |
| 11          |  |   |   |                        |                                 |   | ·  |  |  |  |                |   |                                |
| 12          |  |   |   |                        |                                 |   | ·  | ·  |  |  |                |   |                                |
|             |  |   |   |                        |                                 |   | l —— · ——  | l ·  |  |  |                |   |                                |

#### SURVEY HOUSEHOLD MEMBER LIST

|        | SURVEY HOUSEHOLD ME                     |        |       |        |
|--------|---|--------|-------|--------|
| B1     | B2                                      | B3     | B5    |        |
|        | NAMES OF HOUSEHOLD<br>MEMBERS           | SEX    | AGE   |        |
| I<br>D | ONLY LIST HOUSEHOLD MEMBERS, NO OTHERS. |        |       |        |
| CODE   |   |        |       |        |
|        |   |        |       |        |
|        |   | MALE.1 |       |        |
|        |   | FEMA-  |       | l      |
|        |   | LE .2  | YEARS | MONTHS |
| 1      |   |        |       |        |
| 2      |   |        |       |        |
| 3      |   |        |       |        |
| 4      |   |        |       |        |
| 5      |   |        |       |        |
| 6      |   |        |       |        |
| 7      |   |        |       |        |
| 8      |   |        |       |        |
| 9      |   |        |       |        |
| 10     |   |        |       |        |
| 11     |   |        |       |        |
| 12     |   |        |       |        |