Questionnaire ID

Statistics South Africa

Preferred supplier of quality statistics

General Household Survey 2006

Particulars of the dwelling

PSU number

Dwelling unit number

Physical identification of the dwelling unit/household

Telephone number of enumerated household (if any)

Total number of persons in the household

Questionnaire no. for this household (for persons no. 01 - 10 = 1, etc.)

Households at the selected dwelling

Household number for this household

Total number of households at the selected dwelling

Field staff

Interviewer		Number	Interview date	
Supervisor		Number	Date checked	
R / PSM /QA		Number	Date checked	

Survey start date 1 7 0 7 2 0 0 6

For office use

Response details

Visit no	Date (actual)	Result code	Next visit (planned)
1			
2			
3			
4			

FINAL RESULT

Comments and full details of all non-response/unusual circumstances

RESULT CODES (for response details)

1	Completed	
2	Non-contact	**Comment and give full details above of all non-response**
3	Refused	
4	Partly complete	
5	No usable information	
6	Vacant dwelling	**Comment and give full details above of all out-of scope cases**
7	Listing error	
8	Other	
9	Unoccupied dwelling	
0	Ended at question B	

Questionnaire id

Locality Information:

Plot / stand no.:

Street no:

Street name:

Street type:

Village / suburb / locality:

Identifiers (unit / other no):

Building / school / flat / farm name:

Further identification:

Surname of household head:

First name of household head:

For hostels: Block no: Room no: Bed no:

Codes for street type:

Street type	Abbreviation	Street type	Abbreviation
Avenue/Laan	AVE	Road	RD
Circle/sirkel	CR	Rylaan	RLA
Close	CL	Singel	SGL
Crescent	CRES	Street/Straat	STR
Drive	DR	Way	W
Grove	GR	Boulevard	BVR
Lane	LN		

INTERVIEW START TIME:

FLAP **This section covers particulars of each person in the household**

The following information must be obtained for every person who has stayed in this household for at least four nights on average per week during the last four weeks.
Do not forget babies. *If there are more than 10 persons in the household, use a second questionnaire.*

		Person (respondent) number									
	*Ask who the **head** (or the **acting head**) of the household is and record that person in column 01.*	01	02	03	04	05	06	07	08	09	10
A	**First name and surname** **First name:** *Write down first name and surname of each member of the household, starting with the head or acting head.*										
	If more than one head or acting head, take the oldest **Surname:** *Write sideways if necessary*										
B	**Has ..... stayed here (in this household) for at least four nights on average per week during the last four weeks?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO → ***End of questions for this person***	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
C	**Is ..... a male or a female?**										
	1 = MALE	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = FEMALE	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
D	**How old is .....?** *(In completed years - In whole numbers)* *Less than 1 year = 00*										
E	**What population group does ..... belong to?**										
	1 = AFRICAN/BLACK	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = COLOURED	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = INDIAN/ASIAN	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = WHITE	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = OTHER, *specify in the box at the bottom*	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
F	**Is there any other person residing in this household, other than those already mentioned, who is not presently here?**	☐ YES ☐ NO	→ ***If "YES", Go back to A***								

Questionnaire id

SECTION 1 This section covers particulars of each person in the household

		01	02	03	04	05	06	07	08	09	10
1.1	**What is ……'s relationship to the head of the household? (i.e. to the person in column 1)** 1 = *Mark the head/acting head* 2 = HUSBAND/WIFE/PARTNER 3 = SON/DAUGHTER/STEPCHILD/ADOPTED CHILD 4 = BROTHER/SISTER/STEP BROTHER/STEP SISTER 5 = FATHER/MOTHER/STEP FATHER/STEP MOTHER 6 = GRANDPARENT/GREAT GRANDPARENT 7 = GRANDCHILD/GREAT GRANDCHILD 8 = OTHER RELATIVE (E.G. IN-LAWS OR AUNT/UNCLE) 9 = NON-RELATED PERSONS	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9
1.2.a	**What is ……'s present marital status?** 1 = MARRIED 2 = LIVING TOGETHER LIKE HUSBAND AND WIFE 3 = WIDOW/WIDOWER 4 = DIVORCED OR SEPARATED → ***Go to Q 1.3.a*** 5 = NEVER MARRIED	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
1.2.b	**Does ……'s spouse/partner live in this household?** 1 = YES 2 = NO → ***Go to Q 1.3.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.2.c	**Which person is the spouse/partner of ……?** *Give person number*										
1.3.a	**Is ……'s biological father still alive?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to Q1.4.a***	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
1.3.b	**Is ……'s biological father part of this household?** 1 = YES 2 = NO → ***Go to Q1.4.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

		01	02	03	04	05	06	07	08	09	10
1.3.c	**Which person is ……'s biological father?** *Give person number*										
1.4.a	**Is ……'s biological mother still alive?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to Q1.5.a***	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
1.4.b	**Is ……'s biological mother part of this household?** 1 = YES 2 = NO → ***Go to Q1.5.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.4.c	**Which person is ……'s biological mother?** *Give person number*										
1.5.a	**In the last seven days, did …… spend at least one hour fetching water for home use (not for sale) from a source outside the property?** 1 = YES 2 = NO → ***Go to Q 1.6.a***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.5.b	**How many hours did …… spend on fetching water from a source outside the property in the last seven days?**										
1.6.a	**In the last seven days, did …… spend at least one hour fetching wood/dung for home use (not for sale) from a source outside the property?** 1 = YES 2 = NO → ***Go to Q 1.7***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.6.b	**How many hours did …… spend on fetching wood/dung from a source outside the property in the last seven days?**										

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EDUCATION

Ask for everyone in the household

Read out: **Now I am going to ask you questions related to education for each member of the household**

		01	02	03	04	05	06	07	08	09	10
1.7	**Can ..... read in at least one language?** 1 = YES 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.8	**Can ..... write in at least one language?** 1 = YES 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

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		01	02	03	04	05	06	07	08	09	10
1.9	**What is the highest level of education that ..... has successfully completed?**										
	00 = NO SCHOOLING	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00	☐ 00
	01 = GRADE R/0	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = GRADE 1/ SUB A	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = GRADE 2 / SUB B	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = GRADE 3/STANDARD 1	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = Grade 4/ STANDARD 2	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = GRADE 5/ STANDARD 3	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = GRADE 6/STANDARD 4	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = GRADE 7/STANDARD 5	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = GRADE 8/STANDARD 6/FORM 1	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = GRADE 9/STANDARD 7/FORM 2	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = GRADE 10/ STANDARD 8/ FORM 3	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = GRADE 11/ STANDARD 9/ FORM 4	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
	13 = GRADE 12/STANDARD 10/FORM 5/MATRIC	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13
	14 = NTC I	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14
	15 = NTC II	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15
	16 = NTC III	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16
	17 = CERTIFICATE WITH LESS THAN GRADE 12/STD 10	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17	☐ 17
	18 = DIPLOMA WITH LESS THAN GRADE 12/STD 10	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18	☐ 18
	19 = CERTIFICATE WITH GRADE 12/STD 10	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19	☐ 19
	20 = DIPLOMA WITH GRADE 12/STD 10	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20	☐ 20
	21 = BACHELORS DEGREE	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21	☐ 21
	22 = BACHELORS DEGREE AND DIPLOMA	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22	☐ 22
	23 = HONOURS DEGREE	☐ 23	☐ 23	☐ 23	☐ 23	☐ 23	☐ 23	☐ 23	☐ 23	☐ 23	☐ 23
	24 = HIGHER DEGREE (MASTERS, DOCTORATE)	☐ 24	☐ 24	☐ 24	☐ 24	☐ 24	☐ 24	☐ 24	☐ 24	☐ 24	☐ 24
	25 = OTHER, *specify in the box at the bottom*	☐ 25	☐ 25	☐ 25	☐ 25	☐ 25	☐ 25	☐ 25	☐ 25	☐ 25	☐ 25
	26 = DON'T KNOW	☐ 26	☐ 26	☐ 26	☐ 26	☐ 26	☐ 26	☐ 26	☐ 26	☐ 26	☐ 26

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	Diplomas or certificates should be of at least six months study duration full-time (or equivalent)									

		01	02	03	04	05	06	07	08	09	10
1.10	**Is ..... currently attending school or any other educational institution?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO → ***Go to Q 1.17***	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
1.11	**Which of the following educational institutions does ..... attend?** *Include distance and correspondence education*										
	1 = Pre-school (including day care, crèche, pre-primary)	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = School	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = University	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = Technikon	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = College	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = Adult basic education and training/literacy classes	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6
	7 = Other adult educational classes	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7
	8 = Other than any of the above	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8
1.12	**Is it a correspondence/distance educational institution?**										
	1 = YES → ***Go to Q 1.14***	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
1.13	**How long does it take ..... to get to the school/educational institution where he/she attends?**										
	1 = LESS THAN 15 MINUTES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = 15 - 30 MINUTES	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = MORE THAN 30 MINUTES	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = DON'T KNOW	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4

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		01	02	03	04	05	06	07	08	09	10
1.14	**What is the total amount of tuition fees paid for ..... in a year?** *Do not include the cost of uniforms, books and other learning materials.* 01 = R1 – R100 02 = R101 – R200 03 = R201 – R300 04 = R301 – R500 05 = R501 – R1000 06 = R1001 – R2000 07 = R2001 – R3000 08 = R3001 – R4000 09 = R4001 – R8000 10 = R8001 – R12000 11 = MORE THAN R12000 12 = NONE 13 = DON'T KNOW	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12 ☐ 13
1.15	**This academic year, has ..... benefited from any fee exemptions and/or bursaries?** 1 = YES 2 = NO 3 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

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		01	02	03	04	05	06	07	08	09	10
1.16	**During the past 12 months, what problems, if any, did ..... experience at the school** (or other educational institution)?	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Lack of books	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	2 = Poor teaching	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	3 = Lack of teachers	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	4 = Facilities in bad condition	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	5 = Fees too high	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	6 = Classes too large/too many learners	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	7 = Other, *specify in the box at the bottom*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	→ ***Go to Q 1.18***										

Ask if "no" in Q1.10

1.17	**What is the main reason why ..... is currently not attending school or any other education institution?**										
	01 = TOO OLD/YOUNG	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = HAS COMPLETED SCHOOL/EDUCATION	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = SCHOOL/EDUCATION INSTITUTION IS TOO FAR AWAY	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = NO MONEY FOR FEES	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = HE/SHE IS WORKING (AT HOME OR JOB)	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = EDUCATION IS USELESS OR UNINTERESTING	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = ILLNESS	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = PREGNANCY	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = FAILED EXAMS	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = GOT MARRIED	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = FAMILY COMMITMENT (CHILD MINDING, ETC.)	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = OTHER, *specify in the box at the bottom*	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12

Questionnaire ID

HEALTH

Ask for everyone in the household

Read out: **Now I am going to ask you health-related questions for each member of the household**

		01	02	03	04	05	06	07	08	09	10
1.18	**Is ..... covered by a medical aid or medical benefit scheme or other private health insurance?** 1 = YES 2 = NO 3 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
1.19	**During the past month, did ..... suffer from any illnesses or injuries?** 1 = YES 2 = NO → ***Go to Q 1.28***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.20	**What sort of illnesses or injuries did ..... suffer from? Did ..... suffer from .....** 01 = Flu or acute respiratory tract infection 02 = Diarrhoea 03 = Severe trauma *(e.g. due to violence, motor vehicle accident, gunshot, assault, beating)* 04 = TB or severe cough with blood 05 = Abuse of alcohol or drugs 06 = Depression or mental illness 07 = Diabetes 08 = High or low blood pressure 09 = HIV/AIDS 10 = Other sexually transmitted disease 11 = Other illness or injury	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
1.21	**During the past month, did ..... consult a health worker such as a nurse, doctor or traditional healer as a result of illness or injury?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO → ***Go to Q 1.27***	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
1.22	**For .....'s most recent consultation, what kind of health worker did he/she consult?**										
	1 = NURSE	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = DOCTOR	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = MEDICAL SPECIALIST	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = PHARMACIST/CHEMIST	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = DENTIST	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = SPIRITUAL HEALER (CHURCH RELATED)	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6
	7 = TRADITIONAL HEALER	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7	☐ 7
	8 = ANY OTHER HEALTH CARE PROVIDER *Including psychologist, physiotherapist, chiropractor, homeopath, optometrist*	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8	☐ 8
	9 = DON'T KNOW	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9	☐ 9

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
1.23	**Where did the consultation take place?** *If more than one consultation, ask about the most recent one.*										
	Public sector (*i.e. government, provincial or community institution)*										
	01 = HOSPITAL	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = CLINIC	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = OTHER IN PUBLIC SECTOR, *specify*	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	Private sector (*including private clinics, surgery, private hospitals and sangomas*)										
	04 = HOSPITAL	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = CLINIC	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = PRIVATE DOCTOR/SPECIALIST	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = TRADITIONAL HEALER	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = PHARMACY/CHEMIST	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = HEALTH FACILITY PROVIDED BY EMPLOYER	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = ALTERNATIVE MEDICINE, E.G. HOMEOPATHIST	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = OTHER IN PRIVATE SECTOR, *specify*	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = DON'T KNOW	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
1.24	**Did ..... experience any of the following during this particular visit to the health worker?**	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Facilities not clean	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	2 = Long waiting time	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	3 = Opening times not convenient	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	4 = Too expensive	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	5 = Drugs that were needed, not available	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	6 = Staff rude or uncaring or turned patient away	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	7 = Incorrect diagnosis	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	8 = Other, *specify in the box at the bottom*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.25	**How satisfied was ..... with the service he/she received?**										
	1 = VERY SATISTFIED	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = SOMEWHAT SATISFIED	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = NEITHER SATISFIED NOR DISSATISFIED	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = SOMEWHAT DISSATISFIED	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = VERY DISSATISFIED	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
	6 = DON'T KNOW	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6

		01	02	03	04	05	06	07	08	09	10
1.26	**Did ..... have to pay for this service?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to Q 1.28***	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3

Ask only if "NO" to Q 1.21

1.27	**Why did ..... not consult any health worker during the past month?** 1 = TOO EXPENSIVE 2 = TOO FAR 3 = Not necessary 4 = Don't know 5 = Other, *specify in the box at the bottom*	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Questionnaire ID

DISABILITY

Ask for everyone in the household

Read out: **I am now going to ask about disabilities experienced by any persons within the household.**

		01	02	03	04	05	06	07	08	09	10
1.28	**Is ..... limited in his/her daily activities, at home, at work or at school, because of a long-term physical, sensory, hearing, intellectual, or psychological condition, lasting six months or more?** 1 = YES 2 = NO → ***Go to Q1.30***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
1.29	**What difficulty or difficulties does ..... have? Is it .....**	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Sight *(blind/severe visual limitation)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	2 = Hearing *(deaf, profoundly hard of hearing)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	3 = Communicating *(speech impairment)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	4 = Physical *(e.g. needs wheel chair, crutches or prosthesis; limb or hand usage limitation)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	5 = Intellectual *(serious difficulties in learning, mental retardation)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	6 = Emotional *(behavioural, psychological problems)*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
	7 = Other, *specify in the box at the bottom*	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
1.30	**During the past 12 months, did ..... make use of a welfare office or services?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO → ***Go to Q1.33***	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
1.31	**Which of the following services/assistance did ... make use of?**										
	a. Social worker										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	b. Social grant										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	c. Poverty relief										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3

Questionnaire ID

	01	02	03	04	05	06	07	08	09	10
1.32 ***Ask only if there is a "YES" in any part of Q 1.31*** **How satisfied was ..... with the service/assistance rendered at the welfare office?**										
1 = Very satisfied	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
2 = Somewhat satisfied	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
3 = Neither satisfied nor dissatisfied	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
4 = Somewhat dissatisfied	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
5 = Very dissatisfied	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5
6 = DON'T KNOW	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6	☐ 6

Questionnaire ID

Read out: **Now I am going to ask you about social grants for each member in the household**

		01	02	03	04	05	06	07	08	09	10
1.33	**Does ... receive any of the following Welfare grants?**										
	a) Old age pension										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	b) Disability grant										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	c) Child support grant										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	d) Care dependency grant										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	e) Foster care grant										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	f) Grant in aid										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	g) Social relief										
	1 = Yes	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = No	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Don't know	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3

Questionnaire ID

SECTION 2 **This section covers activities of household members aged 15 and above in the last seven days, unemployment and non-economic activities.**

Ask for all household members aged 15 and above. ***It is very important that you try to ask these questions of each person themselves if at all possible.***
Read out: **Now I am going to ask some questions about activities in the last seven days for each household member aged 15 and above**

		01	02	03	04	05	06	07	08	09	10
2.0	*Interviewer to answer* ***Is the person him/herself responding to questions?*** 1 = YES 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
2.1	**In the last seven days did ..... do any work for a wage, salary, commission or any payment in kind (excl. domestic work)?** *Examples: a regular job, contract, casual or piece work for pay, work in exchange for food or housing.* 1 = YES → ***Go to Q 2.5*** 2 = NO	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2

Questionnaire ID

		01	02	03	04	05	06	07	08	09	10
2.2	**In the last seven days, did ..... do any of the following activities, even for only one hour?** *Show prompt card 2.*	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	a) Run or do any kind of business, big or small, for himself/herself or with one or more partners? *Examples: Selling things, making things for sale, repairing things, guarding cars, brewing beer, hairdressing, crèche businesses, taxi or other transport business, having a legal or medical practice, etc.*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	b) Do any work <u>as a domestic worker</u> for a wage, salary, or any payment in kind?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	c) Help unpaid in a household business of any kind? *Examples: Help to sell things, make things for sale or exchange, doing the accounts, cleaning up for the business, etc. Don't count normal housework.*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	d) Do any work on his/her own or the household's plot, farm, food garden, cattle post or kraal or help in growing farm produce or in looking after animals for the household? *Examples: ploughing, harvesting, looking after livestock.*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	e) Do any construction or major repair work on his/her own home, plot, cattle post or business or those of the household?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	f) Catch any fish, prawns, shells, wild animals or other food for sale or household food?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	g) Beg for money or food in public?	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2

If "YES" for a person to any part of Question 2.2→ Go to Q 2.5 for that person.

If "NO" to all options for a person, continue with next question.

		01	02	03	04	05	06	07	08	09	10
2.3	*If* "NO" *to all parts of Question 2.2* **Even though ..... did not do any of these activities in the last seven days, does he/she have a job, business, or other economic or farming activity that he/she will definitely return to?** *For agricultural activities, the off season in agriculture is not a temporary absence.* 1 = YES 2 = NO →***Go to Q 2.12***	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2	☐ 1 ☐ 2
2.4	**What was the main reason ..... was absent from this activity in the last seven days?** *Mark only one reason.* 01 = OWN ILLNESS OR INJURY	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = CARING FOR FAMILY OR OTHERS (EXCEPT MATERNITY/ PATERNITY LEAVE)	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = MATERNITY OR PATERNITY LEAVE	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = OTHER FAMILY/COMMUNITY OBLIGATIONS (FUNERALS, MEETINGS)	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = STRIKE/STAY-AWAY/LOCKOUT	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = PROBLEMS WITH TRANSPORT	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = BAD WEATHER	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = VACATION, LEAVE	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = STUDY OR TRAINING LEAVE	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = UNREST (VIOLENCE)	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = TEMPORARILY LAID OFF/REDUCTION IN ECONOMIC ACTIVITY	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = OTHER REASON, *specify*	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12

		01	02	03	04	05	06	07	08	09	10
2.5	*Read out*: **You said ..... was doing these activities during the last seven days** (or was temporarily absent). *Refer to Q 2.1* **What kind of work did ..... do in his/her <u>main</u> job during the last seven days** (or usually does, even if he/she was absent in the last seven days)**? Give occupation or job title.** *Work includes all the activities mentioned earlier* *Record at least two words: Car sales person, Office cleaner, Vegetable farmer, Primary school teacher, etc.* *For agricultural work on own/family farm/plot, state whether for <u>own</u> use or for <u>sale</u> mostly.*										
2.6	**What were .....'s <u>main</u> tasks or duties in this job?** *Examples: Selling fruit, repairing watches, keeping accounts, feeding and watering cattle.*										
	CODE BOX FOR OFFICE USE										

		01	02	03	04	05	06	07	08	09	10
2.7	**What is the name of ……'s place of work?** *For government or large organisations, give the name of the establishment and branch or division: e.g. Education Dept – Rapele Primary School; ABC Gold Mining, Maintenance Div.* *Write 'Own house' or 'No fixed location', if relevant.*										
2.8	**What are the main goods and services produced at ……'s place of work? What are its main functions?** *Examples: Repairing cars, Selling commercial real estate, Sell food wholesale to restaurants, Retail clothing shop, Manufacture electrical appliances, Bar/ restaurant, Primary Education, Delivering newspapers to homes.*										
	CODE BOX FOR OFFICE USE										
2.9	**What is ……'s total salary/pay at his/her <u>main</u> job?** *Including overtime, allowances and bonus, before any tax or deductions.* *Give amount in whole figures, without any text or decimals* ***If "NONE", "REFUSE" or "DON'T KNOW"→ Go to Q 2.11***										

		01	02	03	04	05	06	07	08	09	10
2.10	***Ask only if an amount is given in Q 2.9*** **Is this ....**										
	1 = Per week	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = Per month	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = Annually	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
2.11	***Only if "NONE", "REFUSE" or "DON'T KNOW" in Q 2.9*** *Show the categories. Make sure the respondent points at the **correct income column** (weekly, monthly, annually) on **prompt card 3** and mark the applicable code.*										
	Weekly / **Monthly** / **Annually**										
01	NONE / NONE / NONE	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
02	R1 - R46 / R1 - R200 / R1 - R2 400	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
03	R47 - R115 / R201 - R500 / R2 401 - R6 000	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
04	R116 - R231 / R501 – R1 000 / R6 001 - R12 000	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
05	R232 - R346 / R1 001 - R1 500 / R12 001 - R18 000	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
06	R347 = R577 / R1 501 = R2 500 / R18 001 - R30 000	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
07	R578 - R808 / R2 501 - R3 500 / R30 001 - R42 000	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
08	R809 - R1 039 / R3 501 - R4 500 / R42 001 - R54 000	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
09	R1 040 - R1 386 / R4 501 - R6 000 / R54 001 - R72 000	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
10	R1 387 - R1 848 / R6 001 - R8 000 / R72 001 - R96 000	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
11	R1 849 - R2 540 / R8 001 - R11 000 / R96 001 - R132 000	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
12	R2 541 - R3 695 / R11 001 - R16 000 / R132 001 - R192 000	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
13	R3 696 - R6 928 / R16 001 - R30 000 / R192 001 - R360 000	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13
14	R6 929 OR MORE / R30 001 OR MORE / R360 001 OR MORE	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14	☐ 14
15	DON'T KNOW / DON'T KNOW / DON'T KNOW	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15	☐ 15
16	REFUSE / REFUSE / REFUSE	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16	☐ 16

→ ***Go to Q2.19.*** **The following questions cover unemployment and non-economic activities**

Ask for all household members aged 15 and above who did not work and were not absent from work (i.e. for those whose answer on Q 2.3 = 2).

Read out: **Now I am going to ask some questions about whether you (.....) wanted and were (was) available for any of the types of work mentioned earlier**

		01	02	03	04	05	06	07	08	09	10
2.12	**How does ..... support him/herself?**	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO	YES NO
	1 = Did odd jobs during the past seven days	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	2 = Supported by persons in the household	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	3 = Supported by persons not in the household	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	4 = Supported by charity, church, welfare, etc.	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	5 = Unemployment Insurance Fund (UIF)	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	6 = Savings or money previously earned	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	7 = Old age or disability pension	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	8 = Other sources, e.g. bursary, study loan, *specify in the box at the bottom*	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2	☐1 ☐2
	If "YES" to response category 1 → *Go back to Q 2.2 for that person*										

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		01	02	03	04	05	06	07	08	09	10
2.13	**Why did ..... not work during the past seven days?**										
	01 = HAS FOUND A JOB, BUT IS ONLY STARTING AT A DEFINITE DATE IN THE FUTURE → ***Go to Q 2.17***	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01	☐ 01
	02 = SCHOLAR OR STUDENT AND PREFERS NOT TO WORK	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02	☐ 02
	03 = HOUSEWIFE/HOMEMAKER AND PREFERS NOT TO WORK	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03	☐ 03
	04 = RETIRED AND PREFERS NOT TO SEEK FORMAL WORK	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04	☐ 04
	05 = ILLNESS, INVALID, DISABLED OR UNABLE TO WORK (HANDICAPPED)	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05	☐ 05
	06 = TOO YOUNG OR TOO OLD TO WORK	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06	☐ 06
	07 = SEASONAL WORKER, E.G. FRUIT PICKER, WOOL-SHEARER	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07	☐ 07
	08 = LACK OF SKILLS OR QUALIFICATIONS FOR AVAILABLE JOBS	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08	☐ 08
	09 = CANNOT FIND ANY WORK	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09	☐ 09
	10 = CANNOT FIND SUITABLE WORK (SALARY, LOCATION OF WORK OR CONDITIONS NOT SATISFACTORY)	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10	☐ 10
	11 = CONTRACT WORKER, E.G. MINE WORKER RESTING ACCORDING TO CONTRACT	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11	☐ 11
	12 = RETRENCHED	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12	☐ 12
	13 = OTHER REASON	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13	☐ 13
2.14	**If a suitable job is offered, will ..... accept it?**										
	1 = YES	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = NO	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = DON'T KNOW → ***Go to Q 2.17***	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
2.15	**How soon can ..... start work?**										
	1 = WITHIN A WEEK	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1	☐ 1
	2 = WITHIN TWO WEEKS	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2	☐ 2
	3 = WITHIN FOUR WEEKS	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3	☐ 3
	4 = LATER THAN FOUR WEEKS FROM NOW	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4	☐ 4
	5 = DON'T KNOW	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5	☐ 5

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		01	02	03	04	05	06	07	08	09	10
2.16	**During the past four weeks, has ..... taken any action** 1 = to look for any kind of work 2 = to start any kind of business	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2
2.17	**Has ..... ever worked before?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to Section 3***	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3	☐ 1 ☐ 2 ☐ 3
2.18	**How long ago was it since ..... last worked?** 01 = 1 WEEK - LESS THAN 1 MONTH 02 = 1 MONTH - LESS THAN 2 MONTHS 03 = 2 MONTHS - LESS THAN 3 MONTHS 04 = 3 MONTHS - LESS THAN 4 MONTHS 05 = 4 MONTHS - LESS THAN 5 MONTHS 06 = 5 MONTHS - LESS THAN 6 MONTHS 07 = 6 MONTHS - LESS THAN 1 YEAR 08 = 1 YEAR - LESS THAN 2 YEARS 09 = 2 YEARS - LESS THAN 3 YEARS 10 = 3 YEARS OR MORE 11 = DON'T KNOW	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11

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Section 3

This section covers information about trips taken by one or more members of the household in the past 12 months that lasted at least one night away from home where a person/s did not receive any remuneration (did not make any profit) at that destination.

Note: People who went on business or professional trips do qualify for this section since they do not get paid at their destination.

Read out: **Now I am going to ask some questions about trips undertaken in the past 12 months that lasted at least one night away from home for each household member**.

3.1	**During the past 12 months did one or more members of the household undertake any trip/s that lasted at least one night away from home?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to section 4***		☐ 1 ☐ 2 ☐ 3
3.2	**How many trips of this nature did one or more members of the household take …**		
	In the past 4 weeks?		
	In the past 12 months?		
3.3	**How many of these trips were …**	NUMBER OF TRIPS	DON'T KNOW
	1. Trips where all nights were spent only in South Africa.		☐
	2. Trips where all nights were spent only outside South Africa. → ***Go to section 4***		☐
	3. Trips that included nights spent in South Africa and outside South Africa → ***Go to section 4***		☐
	4. Total		☐
	Add 1 + 2 + 3 to confirm 4		

Read out: **I am now going to ask you some questions about the last domestic trip**

3.4	**Considering the last domestic trip undertaken by one or more members of the household, what was the main reason for this trip? Was it a …** 1 = Leisure/vacation/holiday trip 2 = Trip visiting friends or family 3 = Business/conference or professional trip 4 = Medical 5 = Religious 6 = Funeral 7 = Study trip 8 = Other	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8
3.5	**What was the household's principal destination in this last domestic trip? Was it…** 1 = Western Cape 2 = Eastern Cape 3 = Northern Cape 4 = Free State 5 = Kwa-Zulu Natal 6 = North West 7 = Gauteng 8 = Mpumalanga 9 = Limpopo	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9

3.6	**How many nights were members of this household away from home on the last domestic trip?**	NUMBER OF NIGHTS	DON'T KNOW
	a. Number of nights spent away from home?		☐

3.7	**How many members of this household went on this last domestic trip?**	NUMBER OF HOUSEHOLD MEMBERS	DON'T KNOW
	a. Children aged 12 years or less		☐
	b. Persons aged 13 to 20 years		☐
	c. Persons aged 21 to 64 years		☐
	d. Persons aged 65 years or more		☐
	e. Total		
	Add a + b + c + d to confirm e.		

3.8	**Was this last domestic trip a package deal with an all-inclusive price?**	
	1 = Yes 2 = No → ***Go to Q3.11*** 3 = Don't know	☐ 1 ☐ 2 ☐ 3

3.9	**Please indicate which of the following items were included in the package and state the value of each item, ...**	INCLUDED **YES** **NO**	VALUE	DON'T KNOW
	a. Airfare	☐ 1 ☐ 2		☐
	b. Land transport	☐ 1 ☐ 2		☐
	c. Accommodation	☐ 1 ☐ 2		☐
	d. Food and beverages	☐ 1 ☐ 2		☐
	e. Recreation and entertainment (*eg payments to a botanical garden, zoo etc)*	☐ 1 ☐ 2		☐
	f. Medical expenses	☐ 1 ☐ 2		☐
	g. Shopping	☐ 1 ☐ 2		☐
	h. Other	☐ 1 ☐ 2		☐
	i. Total trip			☐
	Add a – h to confirm i			

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3.10	How much did the members of the household spend/consume/ use on the following, which was NOT included in the package, during this last domestic trip?	AMOUNT SPENT/ CONSUMED/USED	DON'T KNOW
	a. Airfare		☐
	b. Land transport		☐
	c. Accommodation		☐
	d. Food and beverages		☐
	e. Recreation and entertainment *eg payments to a botanical garden, zoo etc)*		☐
	f. Medical expenses		☐
	g. Shopping		☐
	h. Other		☐
	i. Total		☐
	Add a – h to confirm i		
	Go to Q3.12		

Ask only if "No" or " Don't know" to Q 3.8

3.11	How much did the members of the household spend/consume/ use on the following during this last domestic trip?	AMOUNT SPENT/ CONSUMED/USED	DON'T KNOW
	a. Airfare		☐
	b. Land transport		☐
	c. Accommodation		☐
	d. Food and beverages		☐
	e. Recreation and entertainment *e.g payments to a botanical garden, zoo etc)*		☐
	f. Medical expenses		☐
	g. Shopping		☐
	h. Other		☐
	i. Total		☐
	Add a – h to confirm i		

3.12	**What type of accommodation did the members of the household use during the stay on this last domestic trip?**	**YES NO**	**If yes, number of nights spent**
	1 = Hotel	☐ 1 ☐ 2	
	2 = Bed and breakfast establishment	☐ 1 ☐ 2	
	3 = Guest House	☐ 1 ☐ 2	
	4 = Lodge	☐ 1 ☐ 2	
	5 = Self catering establishment	☐ 1 ☐ 2	
	6 = Stayed with friends or family	☐ 1 ☐ 2	
	7 = Other *(specify)*.....	☐ 1 ☐ 2	
3.13	**What was the principal mode of transport that the members of the household used during this last domestic trip?**		
	1 = TRAIN		☐ 1
	2 = BUS		☐ 2
	3 = TAXI		☐ 3
	4 = AIRCRAFT		☐ 4
	5= OTHER *(Specify)*.....		☐ 5

3.14	**Did this household incur any trip-related expenses before setting out on the last domestic trip** *(including travel insurance, buying clothes for the trip, camera film, batteries, etc)***?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to Q3.16***	☐ 1 ☐ 2 ☐ 3
3.15	*If yes in Q3.14* **How much did the household spend (total pre-trip spend)? (R)**	
3.16	**Did this household incur any trip-related expenses after returning from the last domestic trip** *(including development of films, etc)***?** 1 = YES 2 = NO 3 = DON'T KNOW → ***Go to section 4***	☐ 1 ☐ 2 ☐ 3
3.17	*If yes in Q3.16* **How much did the household spend (total post-trip spend)? (Rands)**	

Questionnaire ID

SECTION 4 This section covers information regarding the household.

Ask a responsible adult in the household

4.1	Indicate the type of main dwelling and other dwelling that the household occupies?	Main dwelling	Other dwelling
	01 = DWELLING/HOUSE OR BRICK STRUCTURE ON A SEPARATE STAND OR YARD OR ON FARM	☐ 01	☐ 01
	02 = TRADITIONAL DWELLING/HUT/STRUCTURE MADE OF TRADITIONAL MATERIALS	☐ 02	☐ 02
	03 = FLAT OR APARTMENT IN A BLOCK OF FLATS	☐ 03	☐ 03
	04 = TOWN/CLUSTER/SEMI-DETACHED HOUSE (*Simplex, Duplex or Triplex*)	☐ 04	☐ 04
	05 = UNIT IN RETIREMENT VILLAGE	☐ 05	☐ 05
	06 = DWELLING/HOUSE/FLAT/ROOM IN BACKYARD	☐ 06	☐ 06
	07 = INFORMAL DWELLING/SHACK IN BACKYARD	☐ 07	☐ 07
	08 = INFORMAL DWELLING/SHACK NOT IN BACKYARD, E.G. IN AN INFORMAL/SQUATTER SETTLEMENT OR ON FARM	☐ 08	☐ 08
	09 = ROOM/FLATLET ON A PROPERTY OR A LARGER DWELLING/ SERVANTS QUARTERS/GRANNY FLAT	☐ 09	☐ 09
	10 = CARAVAN/TENT	☐ 10	☐ 10
	11 = OTHER, *specify*	☐ 11	☐ 11

4.2	Thinking back five years ago, what type of dwelling/dwellings did this household occupy?	Main dwelling	Other dwelling
	01 = DWELLING/HOUSE OR BRICK STRUCTURE ON A SEPARATE STAND OR YARD OR ON FARM	☐ 01	☐ 01
	02 = TRADITIONAL DWELLING/HUT/STRUCTURE MADE OF TRADITIONAL MATERIALS	☐ 02	☐ 02
	03 = FLAT OR APARTMENT IN A BLOCK OF FLATS	☐ 03	☐ 03
	04 = TOWN/CLUSTER/SEMI-DETACHED HOUSE (*Simplex, Duplex or Triplex*)	☐ 04	☐ 04
	05 = UNIT IN RETIREM ENT VILLAGE	☐ 05	☐ 05
	06 = DWELLING/HOUSE/FLAT/ROOM IN BACKYARD	☐ 06	☐ 06
	07 = INFORMAL DWELLING/SHACK IN BACKYARD	☐ 07	☐ 07
	08 = INFORMAL DWELLING/SHACK NOT IN BACKYARD, E.G. IN AN INFORMAL/SQUATTER SETTLEMENT OR ON FARM	☐ 08	☐ 08
	09 = ROOM/FLATLET ON A PROPERTY OR A LARGER DWELLING/ SERVANTS QUARTERS/GRANNY FLAT	☐ 09	☐ 09
	10 = CARAVAN/TENT	☐ 10	☐ 10
	11 = OTHER, *specify*.....	☐ 11	☐ 11
	12 = HOUSEHOLD DID NOT EXIST	☐ 12	☐ 12

Questionnaire ID

4.3	What is the main material used for the walls and the roof of the main dwelling? *Mark one code in each column.*	Walls	Roof
	01 = BRICKS	☐ 01	☐ 01
	02 = CEMENT BLOCK/CONCRETE	☐ 02	☐ 02
	03 = CORRUGATED IRON/ZINC	☐ 03	☐ 03
	04 = WOOD	☐ 04	☐ 04
	05 = PLASTIC	☐ 05	☐ 05
	06 = CARDBOARD	☐ 06	☐ 06
	07 = MIXTURE OF MUD AND CEMENT	☐ 07	☐ 07
	08 = WATTLE AND DAUB	☐ 08	☐ 08
	09 = TILE	☐ 09	☐ 09
	10 = MUD	☐ 10	☐ 10
	11 = THATCHING	☐ 11	☐ 11
	12 = ASBESTOS	☐ 12	☐ 12
	13 = OTHER, *specify*	☐ 13	☐ 13
4.4	**In what condition are the walls and the roof of the main dwelling?**	**Walls**	**Roof**
	1 = Very weak	☐ 1	☐ 1
	2 = Weak	☐ 2	☐ 2
	3 = Needs minor repairs	☐ 3	☐ 3
	4 = Good	☐ 4	☐ 4
	5 = Very good	☐ 5	☐ 5

4.5	**What is the total number of rooms in the dwelling(s) that the household occupies?** *Excluding toilets and bathrooms*	
4.6	**Is the dwelling ....**	
	1 = Owned and fully paid off → ***Go to Q4.12.3***	☐ 1
	2 = Owned, but not yet fully paid off → ***Go to Q4.12***	☐ 2
	3 = Rented ⟶ ***Go to Q4.7.a***	☐ 3
	4 = Occupied rent-free as part of employment contract of family member or yourself → ***Go to Q4.7.b***	☐ 4
	5 = Occupied rent-free not as part of employment contract of family member → ***Go to Q4.7.b***	☐ 5
	6 = Occupied as a Boarder ⟶ ***Go to Q4.8***	☐ 6

Ask if answer to Q4.6 is 3 (dwelling rented)

4.7.a	**What is the amount of rent paid for this dwelling?**	**Costs for the past month**
	1.1 Amount paid by you excluding amount subsidised	
	1.2 Amount subsidised (e.g. by employer)	
	1.3 Amount paid for garage and/or domestic worker's room if rented separately	
	1. 4 Total rent paid , for this dwelling unit	
	Add 1.1, 1.2 and 1.3 to confirm 1.4	
	GO TO Q4.9	

Ask if answer to Q4.6 is 4 or 5 (dwelling occupied rent-free)

Questionnaire ID

4.7.b	**What is the value of monthly rent you would pay?** *(for only those who occupy dwellings rent free Q4.6)* → ***GO TO Q4.10***	

Ask if answer to Q4.6 is 6 (dwelling occupied as a boarder)

4.8	**What is the amount of boarding or lodging (in this dwelling) paid for the past month?** (*This item only covers permanent boarding and also includes amounts paid to members of your family if you board with them, excluding meals)* (**Rands**) → ***GO TO Q4.10***	

→ ***GO TO Q4.18***

4.9	**How much levy did you pay in the last month?** *(in the case of dwelling-units under sectional title or share-holding / block scheme)*	
4.10	**Does the rent / boarding include ...?** 1 = Electricity 2 = Water 3 = Garage/parking space 4 = Refuse removal 5 = Levy 6 = Other, specify	YES NO ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2 ☐ 1 ☐ 2
4.11	**Is this dwelling unit rented with or without furniture?** 1 = UNFURNISHED 2 = SEMI-FURNISHED 3 = FURNISHED	 ☐ 1 ☐ 2 ☐ 3

Questionnaire ID

Ask if answer to Q4.6 is 2(dwelling owned but not fully paid off)

4.12	**PAYMENT ON THE DWELLING** (*including additional payments for immovable improvements) you can ask for a copy of mortgage bond statement).*		**Cost for the past month**
4.12.1	**Monthly instalment for the past month** (including voluntary additional monthly payment but excluding insurance)		
	a. Capital		
	b. Interest		
4.12.2	**Subsidy** (Amount received from employer, or value of reduction in instalment if loan is repaid at a rate lower than the current interest rate)		

Ask if answer to Q4.6 is 1 or 2 (dwelling owned)

4.12.3	**Please state the amount of <u>levy</u> paid for the past month (Rands)**	

Ask if answer to Q4.6 is 1 or 2 (dwelling owned) otherwise go to Q4.18

4.13	**ADDITIONAL SINGLE AMOUNT PAID TO BANK/BUILDING SOCIETY REGARDING MORTGAGE BOND** (*You can ask for a copy of the loan statement)*	**Cost for the past 12 months**
4.13.1	**Capital payments** (including deposit)	
4.13.2	**Other payments such as transfers duty and transfer costs and registration of mortgage bond**	
4.13.3	**Contributions made towards communal provision of housing services, such as water facilities and electricity supply** (e.g. communal tap)	
4.13.4	**Payment for right to access a piece of land** (tribal/shacks)	

4.14	**Did the household do any repairs and improvements to this dwelling-unit of which payments were not included in the dwelling-unit mortgage bond above in the past 12 months?**	
	1 = YES	☐ 1
	2 = NO → ***Go to Q4.16***	☐ 2

4.15	Amount paid on:	**Cost for the past 12 months**
	a. **Maintenance and repair of dwelling** (existing buildings, swimming pools, etc. Including paints, wallpaper, etc.)	
	b. **Services for maintenance and repair of dwelling** (plumbers, electricians, carpenters, etc)	
	c. **Improvements** (Additions and alterations including installation of security systems, build-in furniture, solar energy systems, swimming pools and garden lay-outs)	
	d. **Services for improvements** (carpenters, electricians, etc)	
	e. **Security structures** (including fences, electric gates)	
	f. **Security systems** (including alarms, panic buttons)	
	g. **Security Services** (including reaction services and neighbourhood watch)	
	h. **Building materials not included in (a) or (c)** (e.g. for building houses)	
4.16	**What is the value of rent you could collect per month, if you were to rent this dwelling out?**	

		Amount	**Don't know**
4.17	**State the estimated reasonable market value for which this property could be sold** (Rands)		☐

Ask all households

4.18	**Did any member of this household receive a government housing subsidy, such as RDP housing subsidy, to obtain this dwelling or any other dwelling?** *Do not include housing subsidies for government employees.*	
	1 = YES	☐ 1
	2 = NO	☐ 2
	3 = DON'T KNOW	☐ 3

WATER

Ask all households

			Drinking	**Other**
4.19	**What is the household's main source of water?** *Mark one code only*			
	01 = PIPED (TAP) WATER IN DWELLING	***Go to Q 4.21***	☐ 01	☐ 01
	02 = PIPED (TAP) WATER ON SITE OR IN YARD		☐ 02	☐ 02
	03 = BOREHOLE ON SITE		☐ 03	☐ 03
	04 = RAIN-WATER TANK ON SITE		☐ 04	☐ 04
	05 = NEIGHBOUR'S TAP		☐ 05	☐ 05
	06 = PUBLIC/COMMUNAL TAP		☐ 06	☐ 06
	07 = WATER-CARRIER/TANKER		☐ 07	☐ 07
	08 = BOREHOLE OFF SITE/COMMUNAL		☐ 08	☐ 08
	09 = FLOWING WATER/STREAM/RIVER		☐ 09	☐ 09
	10 = STAGNANT WATER/DAM/POOL		☐ 10	☐ 10
	11 = WELL		☐ 11	☐ 11
	12 = SPRING		☐ 12	☐ 12
	13 = OTHER, *specify*		☐ 13	☐ 13

Questionnaire ID

Ask if water is not in dwelling, yard or on site, otherwise go to Q4.21

4.20	**How far is the water source for drinking from the dwelling, yard or site (200m is equal to two football fields)?** 1 = LESS THAN 200M 2 = B ETWEEN 201M – 500M 3 = B ETWEEN 501M – 1KM 4 = MORE THAN 1 KM 5 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4.21	**Is the water from the main source of drinking water…..**	YES	NO
	1 = Safe to drink?	☐ 1	☐ 2
	2 = Clear (have no colour / free of mud)?	☐ 1	☐ 2
	3 = Good in taste?	☐ 1	☐ 2
	4 = Free from bad smells?	☐ 1	☐ 2
4.22	**Do household members treat the water used for drinking?** 1 = Yes, always 2 = Yes, sometimes 3 = No, never		☐ 1 ☐ 2 ☐ 3

4.23	**Does this household have access to piped water from a local municipality?** 1 = Yes 2 = No → **Go to 4.30**	☐ 1 ☐ 2

4.24	**How do you rate the municipal water services you receive?** 1 = GOOD 2 = AVERAGE 3 = POOR	☐ 1 ☐ 2 ☐ 3
4.25	**Does the household pay for water?** 1 = YES → *GO TO Q 4.27* 2 = No → *GO TO Q 4.26*	☐ 1 ☐ 2

4.26	**Why does the household not pay for water?**	YES	NO
	01 = Metering system is irregular	☐ 1	☐ 2
	02 = No metering system is in place	☐ 1	☐ 2
	03 = Billing system is irregular	☐ 1	☐ 2
	04 = No billing system is in place	☐ 1	☐ 2
	05 = Meter is broken	☐ 1	☐ 2
	06 = Can't afford to pay for water	☐ 1	☐ 2
	07= Unhappy with the level of service provided	☐ 1	☐ 2
	08 = The government should supply all water free	☐ 1	☐ 2
	09 = Others do not pay for water	☐ 1	☐ 2
	10 = The household only uses the free basic amount	☐ 1	☐ 2
	11 = Other, *specify*……	☐ 1	☐ 2

4.27	**How often does the household have water interruptions in its piped water supply?** 1 = DAILY 2 = WEEKLY 3 = MONTHLY 4 = 6 MONTHLY 5 = YEARLY 6 = ALMOST NEVER → ***Go to Q 4.30***	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6
4.28	**What normally causes the interruption?** 1 = Burst Pipes 2 = Pump not working 3 = General Maintenance 4 = Not enough water in the system (demand too high) 5 = Water only delivered at fixed times 6 = non-payment for services (cutt off) 7 = Vandalism 8 = Other, specify 9 = Don't know	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9
4.29	**The last time it happened, when was the problem rectified?** 1 = THE SAME DAY 2 = WITHIN TWO DAYS 3 = WITHIN A WEEK 4 = LONGER THAN A WEEK 5 = LONGER THAN A MONTH, *specify*..... 6 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

SANITATION

Ask all households

4.30 What type of toilet facility is available for this household? *Main type*

Toilet facility	In dwelling	On site	Off site
1 = FLUSH TOILET WITH OFFSITE DISPOSAL	☐ 11	☐ 12	☐ 13
2 = FLUSH TOILET WITH ON SITE DISPOSAL (SEPTIC TANK)	☐ 21	☐ 22	☐ 23
3 = CHEMICAL TOILET		☐ 32	☐ 33
4 = PIT LATRINE WITH VENTILATION PIPE		☐ 42	☐ 43
5 = PIT LATRINE WITHOUT VENTILATION PIPE		☐ 52	☐ 53
6 = BUCKET TOILET		☐ 62	☐ 63
7 = NONE → ***Go to Q 4.31***			☐ 73

Ask if the toilet is not in dwelling, otherwise Go to Q 4.**32**

4.31	**How far is the nearest toilet facility to which the household has access?** 1 = LESS THAN 2 MINUTES (LESS THAN 200M) 2 = 2 MINUTES BUT LESS THAN 5 MINUTES (201M - 500M) 3 = MORE THAN 5 MINUTES (MORE THAN 500M)	☐ 1 ☐ 2 ☐ 3

4.32	**Is the toilet facility shared with other households?** 1 = YES 2 = NO	☐ 1 ☐ 2

Ask if answer to Q 4.30 is "BUCKET TOILET". Otherwise Go to Q 4.34

Questionnaire ID

4.33	How frequently is it removed?	
	1 = ONCE A WEEK OR MORE OFTEN	☐ 1
	2 = ABOUT ONCE A FORTNIGHT	☐ 2
	3 = ABOUT ONCE A MONTH	☐ 3
	4 = LESS OFTEN THAN ONCE A MONTH	☐ 4

ELECTRICITY

Ask all households

4.34	Does this household have a connection to the MAINS electricity supply?	
	1 = YES	☐ 1
	2 = NO → *Go to Q 4.37*	☐ 2
4.35	**Does this household receive free electricity?**	
	1 = YES	☐ 1
	2 = NO	☐ 2

4.36	Was electricity cut off for non-payment for this household in the past month?	
	1 = YES	☐ 1
	2 = No	☐ 2

4.37	What is the main source of energy/fuel for this household?	Cooking	Heating	Lighting
	01 = ELECTRICITY FROM MAINS	☐ 01	☐ 01	☐ 01
	02 = ELECTRICITY FROM GENERATOR	☐ 02	☐ 02	☐ 02
	03 = GAS	☐ 03	☐ 03	☐ 03
	04 = PARAFFIN	☐ 04	☐ 04	☐ 04
	05 = WOOD	☐ 05	☐ 05	
	06 = COAL	☐ 06	☐ 06	
	07 = CANDLES			☐ 07
	08 = ANIMAL DUNG	☐ 08	☐ 08	
	09 = SOLAR ENERGY	☐ 09	☐ 09	☐ 09
	10 = OTHER, *specify*.....	☐ 10	☐ 10	☐ 10
	11 = NONE	☐ 11	☐ 11	☐ 11

4.38	Thinking back five years ago, did this household have a connection to the MAINS electricity supply, then?	
	1 = YES	☐ 1
	2 = NO	☐ 2
	3 = HOUSEHOLD DID NOT EXIST	☐ 3
	4 = DON'T KNOW	☐ 4

Questionnaire ID

4.39	**How is the refuse or rubbish for this household taken care of?** 1 = REMOVED BY LOCAL AUTHORITY AT LEAST ONCE A WEEK 2 = REMOVED BY LOCAL AUTHORITY LESS OFTEN THAN ONCE A WEEK 3 = REMOVED BY COMMUNITY MEMBERS AT LEAST ONCE A WEEK 4 = REMOVED BY COMMUNITY MEMBERS LESS OFTEN THAN ONCE A WEEK 5 = COMMUNAL REFUSE DUMP/COMMUNAL CONTAINER 6 = OWN REFUSE DUMP 7 = NO RUBBISH REMOVAL 8 = OTHER, *specify*.....	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

Ask if answer to Q4.39 is 3, 4, 5, 6, 7 or 8 otherwise go to Q4.41

4.40	**Would this household be willing to pay rates for a refuse service?** 1 = YES 2 = NO 3 = ALREADY PAYING 4 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4

Ask for all households

4.41	**How far is the nearest buy back center, if any, from this dwelling? (e.g. a recycling center that exchanges recyclables for cash)** 1 = LESS THAN 100 M 2 = 100 M – LESS THAN 200 M 3 = 200 M - LESS THAN 1 KM 4 = 1 KM – LESS THAN 5 KM 5 = 5 KM – LESS THAN 10 KM 6 = 10 KM OR MORE 7 = DON'T KNOW THE DISTANCE TO BUY BACK CENTRE 8 = DON'T KNOW IF THERE IS ANY BUY BACK CENTER NEARBY 9 = NO BUY BACK CENTRE	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9
4.42	**Does your neighbourhood have a community / school programme for recycling?** 1 = YES 2 = NO 3 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3
4.43	**Does this household collect waste for recycling?** 1 = YES 2 = NO → ***Go to Q 4.46***	☐ 1 ☐ 2

Questionnaire ID

4.44	**Which of the following does the household collect for recycling?**	YES NO
	a) Paper, cardboard / boxes	☐ 1 ☐ 2
	b) Glass / glass bottles	☐ 1 ☐ 2
	c) Plastic/plastic bags / plastic bottles	☐ 1 ☐ 2
	d) Aluminium cans / metal	☐ 1 ☐ 2
	e) Oil (household / automotive)	☐ 1 ☐ 2
	f) Ash, rubble and bricks	☐ 1 ☐ 2
4.45	**Why does the household collect waste for recycling?**	YES NO
	a) To reduce waste	☐ 1 ☐ 2
	b) To get money from recycled items	☐ 1 ☐ 2
	c) To save energy/natural resources	☐ 1 ☐ 2
	d) To save landfill space	☐ 1 ☐ 2
	e) To reduce litter and pollution	☐ 1 ☐ 2
	f) Don't know	☐ 1 ☐ 2
4.46	**Does any member of this household earn a living by collecting waste for recycling?**	
	1 = YES	☐ 1
	2 = NO	☐ 2
	→ ***Go to Q 4.49***	

Ask if answer is "No" to Q 4.43. Otherwise Go to Q4.50

4.47	**How does this household currently dispose of the following?**	**THROUGH GENERAL GARBAGE DISPOSAL**	**OWN REFUSE DUMP**	**OTHER**
	a) Paper, cardboard / boxes	☐ 1	☐ 2	☐ 3
	b) Glass / glass bottles	☐ 1	☐ 2	☐ 3
	c) Plastic bags / plastic bottles	☐ 1	☐ 2	☐ 3
	d) Aluminium cans / metal	☐ 1	☐ 2	☐ 3
	e) Oil (household / automotive)	☐ 1	☐ 2	☐ 3
	f) Ash, rubble and bricks	☐ 1	☐ 2	☐ 3
4.48	**Why does the household not collect waste for recycling?**			
	1 = THROWN OUT INTO DUSTBIN FOR REFUSE COLLECTION			☐ 1
	2 = DON'T THINK IT IS IMPORTANT			☐ 2
	3 = DO NOT HAVE ADEQUATE FACILITIES			☐ 3
	4 = TOO FEW RECYCLABLES			☐ 4
	5 = NOT ENOUGH FINANCIAL BENEFIT			☐ 5
	6 = NO TIME TO COLLECT WASTE			☐ 6
	7 = DON'T KNOW			☐ 7
4.49	**Does this household make compost from .....**			YES NO
	1 = Kitchen waste?			☐ 1 ☐ 2
	2 = Garden waste?			☐ 1 ☐ 2
	If No to both Go to Q 4.51			

Questionnaire ID

4.50	How much waste does this household compost on average per week from	LESS THAN 1 LARGE REFUSE REMOVAL BAG	1 – 3 LARGE REFUSE REMOVAL BAGS	MORE THAN 3 LARGE REFUSE REMOVAL BAGS	NO COMPOST FROM THIS SOURCE
	a) Kitchen waste	☐ 1	☐ 2	☐ 3	☐ 4
	b) Garden waste	☐ 1	☐ 2	☐ 3	☐ 4

4.51	Which of the following environmental problems do you experience in your community?	YES	NO
	a) Waste removal / littering	☐ 1	☐ 2
	b) Water pollution	☐ 1	☐ 2
	c) Outdoor/indoor air pollution	☐ 1	☐ 2
	d) Land degradation / overutilisation of natural resources (e.g. soil erosion, potholes and dongas, overgrazing, cutting of trees for firewood)	☐ 1	☐ 2
	e) Excessive noise/noise pollution	☐ 1	☐ 2
	f) Other, specify	☐ 1	☐ 2

4.52	In the past 12 months have you or any member of your household	YES	NO
	1= Deliberately used public transport, walked or cycled instead of using a car?	☐ 1	☐ 2
	2 = Used pesticides in your dwelling?	☐ 1	☐ 2
	3 = Used pesticides in your garden/yard?	☐ 1	☐ 2
	4 = Used herbicides/weed killers in your garden/yard?	☐ 1	☐ 2

4.53	Does the household	YES	NO
	a) Deliberately cut down on the amount of water use?	☐ 1	☐ 2
	b) Deliberately cut down on the use of electricity/gas?	☐ 1	☐ 2
	c) Make sure that your noise do not disturb others?	☐ 1	☐ 2
	d) Have a car?	☐ 1	☐ 2

4.54	Does this household have a functional/working landline telephone in the dwelling?	
	1 = YES	☐ 1
	2 = NO	☐ 2

4.55	Is there a cellular telephone available to this household for regular use?	
	1 = YES	☐ 1
	2 = NO	☐ 2

Ask if answer is "No" to both Q 4.54 and Q 4.55. Otherwise Go to Q4.57

4.56	How far does it take from here, to the nearest accessible telephone, using your usual means of transport?	
	1 = 14 MIN OR LESS	☐ 1
	2 = 15 - 29 MIN	☐ 2
	3 = 30 – 44 MIN	☐ 3
	4 = 45 – 59 MIN	☐ 4
	5 = 60 MIN OR MORE	☐ 5

Questionnaire ID

Ask for all households

4.57	**Thinking back five years ago, did this household have a functional/working landline telephone in the dwelling then?** 1 = YES 2 = NO 3 = HOUSEHOLD DID NOT EXIST 4 = DON'T KNOW	☐ 1 ☐ 2 ☐ 3 ☐ 4
4.58	**How does this household receive most of its mail/post?** 1 = DELIVERED TO THE DWELLING 2 = DELIVERED TO A POST BOX/PRIVATE BAG 3 = THROUGH FRIEND OR NEIGHBOUR 4 = THROUGH A SHOP 5 = THROUGH A SCHOOL 6 = THROUGH A WORKPLACE 7 = THROUGH A TRIBAL/LOCAL AUTHORITY OFFICE 8 = DO NOT RECEIVE MAIL 9 = OTHER, *specify*.....	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9

4.59 **What means of transport are usually, or would usually be used by members of this household to get to the nearest of each of these facilities?**

If more than one means of transport, take the one used over the longest distance

Facility	WALKING	MINIBUS TAXI	BUS (PUBLIC)	TRAIN	OWN TRANS-PORT	OTHER, *specify below*
a) Food market	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
b) Public transport	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
c) Pre-Primary/Pre-school centre	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
d) Primary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
e) Secondary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
f) Clinic	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
g) Hospital	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
h) Post office or post office agent	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
i) Welfare office	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6

If "other" in Q4.58 , specify: .....

Questionnaire ID

4.60	How long in minutes does it take or would it take, from here to reach the nearest .....using the usual means of transport?						
Facility		**14 MIN OR LESS**	**15 - 29 MIN**	**30 - 44 MIN**	**45 - 59 MIN**	**60 MIN OR MORE**	**DON'T KNOW**
a)	Food market	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
b)	Public transport	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
c)	Pre-Primary/Pre-school centre	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
d)	Primary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
e)	Secondary school	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
f)	Clinic	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
g)	Hospital	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
h)	Post office or post office agent	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6
i)	Welfare office	☐ 1	☐ 2	☐ 3	☐ 4	☐ 5	☐ 6

4.61	Does this household have access to land that is or could be used for agricultural purposes?	
	1 = YES (*Exclude communal grazing land*)	☐ 1
	2 = NO → ***Go to Q 4.65***	☐ 2

4.62	How many square meters or hectares of land does the household have access to for agricultural purposes, if any?	
	1 = LESS THAN 5000 M^2 (*5000 m^2 is approximately one soccer field*)	☐ 1
	2 = 5000M^2 - 9999M^2	☐ 2
	3 = 1 BUT LESS THAN 5 HA	☐ 3
	4 = 5 BUT LESS THAN 10 HA	☐ 4
	5 = 10 BUT LESS THAN 20 HA	☐ 5
	6 = 20 HA OR MORE	☐ 6
	7 = DON'T KNOW	☐ 7
4.63	**On what basis does the household have access to the land?**	
	1 = OWNS THE LAND	☐ 1
	2 = RENTS THE LAND	☐ 2
	3 = SHARECROPPING	☐ 3
	4 = TRIBAL AUTHORITY	☐ 4
	5 = OTHER, *specify*.....	☐ 5
	6 = DON'T KNOW	☐ 6

4.64	What farming activities, if any, take place on the land? Is it.....?	YES	NO
	1 = Field crops	☐ 1	☐ 2
	2 = Horticulture	☐ 1	☐ 2
	3 = Livestock	☐ 1	☐ 2
	4 = Poultry	☐ 1	☐ 2
	5 = Orchards	☐ 1	☐ 2
	6 = Other, (*Specify*).....	☐ 1	☐ 2

Questionnaire ID

Ask for all households

4.65	**In the past 12 months, did any adult (18 years and above) in this household go hungry because there wasn't enough food?** 1 = NEVER 2 = SELDOM 3 = SOMETIMES 4 = OFTEN 5 = ALWAYS 6 = NOT APPLICABLE (NO ADULTS IN HOUSEHOLD)	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6
4.66	**In the past 12 months, did any child (17 years or younger) in this household go hungry because there wasn't enough food?** 1 = NEVER 2 = SELDOM 3 = SOMETIMES 4 = OFTEN 5 = ALWAYS 6 = NOT APPLICABLE (NO CHILDREN IN HOUSEHOLD)	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6
4.67	**In the past 12 months, was there any young person, aged 5 – 17 years, who has left this household, and you do not know his/her whereabouts or to live on the streets?** 1 = YES 2 = NO 3 = DON'T KNOW 4 = NOT APPLICABLE (NO CHILDREN IN HOUSEHOLD)	☐ 1 ☐ 2 ☐ 3 ☐ 4

4.68	**What is the main source of income for this household?** 1 = SALARIES AND/OR WAGES 2 = REMITTANCES 3 = PENSIONS AND GRANTS 4 = SALES OF FARM PRODUCTS AND SERVICES 5 = OTHER NON-FARM INCOME 6 = NO INCOME	☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6
4.69	**What was the total household expenditure in the last month?** *Include everything that the household and its members spent money on, including food, clothing, transport, rent and rates, alcohol and tobacco, school fees, entertainment and any other expenses.* 01 = R 0 – R 399 02 = R 400 – R 799 03 = R 800 – R 1 199 04 = R 1 200 – R 1 799 05 = R 1 800 – R 2 499 06 = R 2 500 – R 4 999 07 = R 5 000 – R 9 999 08 = 10 000 OR MORE 09 = DON'T KNOW 10 = REFUSE	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10

4.70	**How much did this household spend on the following in the last month? (Rands only)**	
	a) Transport	
	b) Housing	
	c) Clothing	
	d) Food	
	e) Personal appearance	
	f) Other	
4.71	**During the past 12 months, has any member of this household .....**	YES NO
	a) had things stolen?	☐ 1 ☐ 2
	b) been harassed or threatened by a household member?	☐ 1 ☐ 2
	c) been harassed or threatened by someone outside the household?	☐ 1 ☐ 2
	d) been sexually molested by a household member?	☐ 1 ☐ 2
	e) been sexually molested by someone outside the household?	☐ 1 ☐ 2
	f) been beaten up or hurt by a household member?	☐ 1 ☐ 2
	g) been beaten up or hurt by someone outside the household?	☐ 1 ☐ 2
	h) been murdered by a household member	☐ 1 ☐ 2
	i) been murdered by someone outside the household	☐ 1 ☐ 2

4.72	**If anyone in this household gets ill and decides to seek medical help, where do they usually go first?**	
	Public sector (*i.e. government, provincial or community institution)*	
	01 = HOSPITAL	☐ 01
	02 = CLINIC	☐ 02
	03 = OTHER IN PUBLIC SECTOR, *specify*	☐ 03
	Private sector (*including private clinics, surgery, private hospitals and sangomas*)	
	04 = Hospital	☐ 04
	05 = Clinic	☐ 05
	06 = Private doctor/specialist	☐ 06
	07 = Traditional healer	☐ 07
	08 = Pharmacy/chemist	☐ 08
	09 = Health facility provided by employer	☐ 09
	10 = Other in private sector, specify	☐ 10
	11 = Don't know	☐ 11
4.73	**Is the facility you / this household consult(s) open 24 hours?**	
	1= YES	☐ 1
	2= NO	☐ 2

4.74	**From what time does the facility you / this household consult(s) open?**	H H M M

Questionnaire ID

		H	H	M	M
4.75	**What time does the facility you/this household consult(s) close?**				

		Yes	No
4.76	**Does the household own any of the following?**		
	a) Television	☐ 1	☐ 2
	b) Radio	☐ 1	☐ 2
	c) Books	☐ 1	☐ 2

INTERVIEW END TIME

End of interview.

Thank the respondent!

Interviewer to answer questions on next page.

4.77	***Indicate the column number of the person who answered the questions in Section 4***	
4.78	***In what language was the main part of the interview conducted?*** 01 = AFRIKAANS 02 = ENGLISH 03 = ISINDEBELE/SOUTH NDEBELE/NORTH NDEBELE 04 = ISIXHOSA/XHOSA 05 = ISIZULU/ZULU 06 = SEPEDI/NORTHERN SOTHO 07 = SESOTHO/SOUTHERN SOTHO/SOTHO 08 = SETSWANA/TSWANA 09 = SISWATI/SWAZI 10 = TSHIVENDA/VENDA 11 = XITSONGA/TSONGA 12 = OTHER, *specify*	☐ 01 ☐ 02 ☐ 03 ☐ 04 ☐ 05 ☐ 06 ☐ 07 ☐ 08 ☐ 09 ☐ 10 ☐ 11 ☐ 12
4.79	***What is the type of these living quarters?*** 1 = PRIVATE DWELLING 2 = WORKERS HOSTEL	☐ 1 ☐ 2