



0317-E

This table must be completed and used by the enumerator  
whenever there is more than one household at a visiting point

Household number	Number of persons in the household	Cumulative total
1		
2		
3		
4		
5		
6		
7		
8		

FOR OFFICIAL USE ONLY

	INITIALS	DATE	ID
COVER PAGE			
CLASSIFY			
CHECK			
CONTROL			
CAPTURE			
CONTROL			

P B D

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# October household survey 1996

## PARTICULARS OF THE VISITING POINT

Physical address of the visiting point: .....

Suburb/village/settlement: .....

City/town/farm/tribal authority: .....

Magisterial district: (name) .....

Magisterial district No: ..... 

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Enumerator area No: ..... 

--	--	--

Visiting point No: ..... 

--	--	--

Substitute visiting point No: (if applicable) ..... 

--	--	--

Reason for substitution: (if applicable) .....

Telephone number of enumerated household: (if any) 

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Number of households at the enumerated visiting point: ..... 

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## INTERVIEW DETAILS

Name of Interviewer: .....

Date of Interview: ..... 

DD	MM	YY

Name of Fieldwork Controller: .....

Date of fieldwork control: ..... 

DD	MM	YY



# FLAP

This section covers particulars of each person in the household

Interviewer: *The following information must be obtained in respect of every person who normally resides at least 4 nights a week in this household. Do not forget babies.*

QUESTION	1	2
	(Head/ acting head)	
A. First name or initials (Write down the name or initials of each member of the household, starting with the Head or Acting head)		
B. Gender 1 = Male 2 = Female	1 2	1 2
C. Age in completed years (Less than 1 year = 0) Year of birth.....	34 19.....	32 19.....
D. How would (the person) describe himself/herself? 1 = African/Black 2 = Coloured 3 = Indian/Asian 4 = White	1 2 3 4	1 2 3 4
E. Please indicate the person who answered the questions in Section 1. (Circle the applicable respondent number)	1	2

PERSON (RESPONDENT NUMBER)							
3	4	5	6	7	8	9	10
1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2
12 19.....	9 19.....	11 19.....	5 19.....	25 19.....	22 19.....		
1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4
3	4	5	6	7	8	9	10

Go to section 2. Keep flap unfolded so that it forms a heading for each page.







### SECTION 3 (CONTINUED)

	1	2
<b>ASK EVERY PERSON WHO WAS ABSENT FROM WORK</b>		
<b>3.3 Why did (the person) not work during the past week?</b>		
01 = Illness or injury	01	01
02 = Strike or stay-away	02	02
03 = Bad weather	03	03
04 = Problems with transport	04	04
05 = Vacation, leave	05	05
06 = Study or training leave	06	06
07 = Maternity or paternity leave	07	07
08 = Off-season activity	08	08
09 = Unrest (violence)	09	09
10 = Reduction in economic activity such as: lower production due to less demand; shortage of irrigation water or shortage of raw materials	10	10
11 = Other reason (specify in column)	.....	.....
<b>If (the person) was absent from work due to illness or injury, [Ask] What was the nature of the illness or injury?</b>		
<i>(Describe in as much detail as possible)</i>		
<b>Go to 3.5</b>		

3	4	5	6	7	8	9	10
01	01	01	01	01	01	01	01
02	02	02	02	02	02	02	02
03	03	03	03	03	03	03	03
04	04	04	04	04	04	04	04
05	05	05	05	05	05	05	05
06	06	06	06	06	06	06	06
07	07	07	07	07	07	07	07
08	08	08	08	08	08	08	08
09	09	09	09	09	09	09	09
10	10	10	10	10	10	10	10
XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX	XXXXXXXXXXXX







SECTION 3

This section covers information regarding workers (formal and informal), the unemployed and persons who are not economically active.

QUESTION	1	2
	(Head/ acting head)	
<b>ASK FOR ALL PERSONS 15 YEARS OR OLDER</b>		
3.1 During the <b>past 7 days</b> , did (the person) actually do work for pay, profit or family gain? for example - formal work for a salary or wage. - informal work such as making things for sale, selling things or providing a service. - work on a farm or land, whether for a wage or as part of the household's farming activities.		
1 = Yes, Full time } 2 = Yes, Part time } (Go to 3.5)	1 2	1 2
3 = No (Go to 3.2)	3	3

3	4	5	6	7	8	9	10
					40		
1 2	1 2	1 2	1 2	1 2	1 2	1 2	1 2
					6400		
					7400		
					Parow		
					Cape Town		
					w/Cape		

### SECTION 3 (CONTINUED)

	1	2
3.10 Which is the <b>main</b> type of transport that (the person) uses/used to get to and from work? ( <b>main=longest distance</b> )		
01 = Bus	01	01
02 = Metered taxi	02	02
03 = Minibus taxi	03	03
04 = Train	04	04
05 = Bicycle	05	05
06 = Car	06	06
07 = Motorbike	07	07
08 = Truck/lorry	08	08
09 = Donkey cart/horseback	09	09
10 = On foot	10	10
11 = Not applicable (e.g. working from home)	11	11
12 = Other (specify in column)	.....	.....
<b>Who owns this transport?</b>		
1 =Not applicable (working from home, travel on foot)	1	1
2 =Public transport (transport that anyone in the public can use, e.g. bus, train, taxi)	2	2
3 =Private transport (transport not available for the public, e.g. own car, lift club)	3	3
4 =Transport supplied by employer	4	4
3.11 Who does/did (the person) work for?		
1 = Someone else (Go to 3.12)	1	1
2 = Him/herself (Go to 3.19)	2	2
3 = Both someone else and him/herself (Go to 3.12)	3	3

3	4	5	6	7	8	9	10
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7





### SECTION 3 (CONTINUED)

	1	2
<b>ASK ALL EMPLOYEES WHO WERE EMPLOYED DURING THE PAST 7 DAYS</b>		
3.12 What is the name of (the person's) employer? (firm, institution or private individual). If employed by an individual, write "private individual".	Pick & Pay	Domestic Worker
3.13 What is the main activity of (the person's) firm, institution or private employer?  Note: Describe the activity in as much detail as possible	Sign Makers	Cleaning
3.14 What kind of work is (the person) doing at his/her main job? (the main job is where the employee spends most time)  (Give a full description of the kind of work)	Packer	Clean the house
3.15 When did (the person) start working with the employer mentioned above? (State year and month)	Year 19 96 Month June	Year 19 91 Month Jan
3.16 Is (the person) a member of a trade union? 1 = Yes 2 = No	① 2	1 ②

3	4	5	6	7	8	9	10
1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3	1 2 3
4 5 6 7 8	4 5 6 7 8	4 5 <u>6</u> 7 8	4 5 6 7 8	4 5 6 7 8	4 5 6 7 8	4 5 6 7 8	4 5 6 7 8
1 2	1 2	<u>1</u> 2	1 2	1 2	1 2	1 2	1 2
<u>1</u> 2	<u>1</u> 2	<u>1</u> 2	<u>1</u> 2	<u>1</u> 2	<u>1</u> 2	1 2	1 2

## SECTION 2 (CONTINUED)

	1	2
<b>ASK FOR ALL PERSONS WHO CONSULTED A HEALTH WORKER</b>		
2.22 If (the person) consulted a health worker, [Ask] Where did this consultation take place?		
1 - 3 = <b>Public sector</b> (i.e. government, provincial or community institution)		
1 = Hospital	1	1
2 = Clinic	2	2
3 = Other	3	3
4 - 8 = <b>Private sector</b> (including private clinics, surgery, private hospitals and sangomas)		
4 = Hospital	4	4
5 = Clinic	5	5
6 = Private doctor/specialist	6	6
7 = Traditional healer	7	7
8 = Other	8	8
2.23 Did the household have to pay for this service?		
1 = Yes	1	1
2 = No	2	2
<b>ASK FOR EVERY PERSON IN THE HOUSEHOLD</b>		
2.24 Does (the person) smoke?		
1 = Yes	1	1
2 = No	2	2

3	4	5	6	7	8	9	10
					Big Gosh Pond beakers		
					Pond beakers		
					Pond beakers		
19 .....	19 .....	19 .....	19 .....	19 .....	19 9/1 Jan.	19 .....	19 .....
1 2	1 2	1 2	1 2	1 2	① 2	1 2	1 2





### SECTION 3 (CONTINUED)

	1	2
<p><b>ASK ALL EMPLOYEES WHO WERE EMPLOYED DURING THE PAST 7 DAYS AND ALL PERSONS WHO WORKED SOMETIME DURING THE PAST YEAR</b></p> <p>3.18 In addition to the main occupation that (the person) did in the past 7 days or the past year, did (the person) also do any other <b>work for him/herself</b>, such as making things for sale, selling things or providing a service?</p> <p>1 = Yes (Go to 3.19 ) 2 = No (Go to 3.26 )</p>	<p>1 2</p>	<p>1 2</p>
<p><b>ASK ALL EMPLOYERS AND SELF-EMPLOYED PERSONS</b></p> <p>3.19 Describe the work (the person) does/did for him/herself</p> <p><b>Note:</b> <i>Describe the type of work in as much detail as possible</i></p>		
<p>3.20 Now I would like to determine whether (the person's) job/business is/was <b>formal</b> (registered) or <b>informal</b> (unregistered).</p> <p><b>READ OUT:</b> <i>There are several ways of registering a business such as, registration at Registrar of companies, Commissioner of unemployment insurance or Commissioner of workmen's compensation. Many small businesses do not register at any of the above offices:</i></p> <p><b>[Now ask]</b> Do you consider your work/business to be <b>formal</b> or <b>informal</b>?</p> <p>1 = Formal 2 = Informal</p>	<p>1 2</p>	<p>1 2</p>
<p>3.21 Does/did (the person) have a VAT number</p> <p>1 = Yes 2 = No</p>	<p>1 2</p>	<p>1 2</p>

[illegible]

## SECTION 2 (CONTINUED)

	1	2
<b>ASK FOR EVERY PERSON ATTENDING PRIMARY SCHOOL</b>  2.16 Does (the person) get <b>free food</b> through the school feeding scheme? 1 = Yes 2 = No	1 2	1 2
<b>ASK FOR EVERY PERSON IN THE HOUSEHOLD</b>  <b>PRIMARY HEALTH CARE</b>  2.17 Has (the person) been ill during the <b>past month</b> ? 1 = Yes 2 = No	1 2	1 2
2.18 Has (the person) been injured during the <b>past month</b> ? 1 = Yes 2 = No	1 2	1 2
2.19 Has (the person) been admitted to a hospital during the <b>past month</b> ? 1 = Yes 2 = No	1 2	1 2
2.20 Does (the person) have access to a medical aid scheme? 1 = Yes 2 = No	1 2	1 2

[illegible]











### SECTION 3 (CONTINUED)

	1	2
<b>ASK ALL PERSONS 15 YEARS AND OLDER WHO DID NOT WORK DURING THE PAST 7 DAYS BECAUSE THEY DID NOT HAVE A JOB</b>		
<b>3.27 Since (the person) did not work for the past 7 days and does not have any job; if a suitable job is offered, will he/she accept it?</b>		
1 = Yes	1	1
2 = No (Go to 3.32)	2	2
<b>If "Yes" [Ask] How soon can (the person) start work?</b>		
3 = Within a week	3	3
4 = Within 2 weeks	4	4
5 = After 2 weeks	5	5
<b>3.28 How long has (the person) been seeking work?</b>		
1 = Less than a month	1	1
2 = 1 month - less than 6 months	2	2
3 = 6 months - less than 1 year	3	3
4 = 1 year - less than 3 years	4	4
5 = More than 3 years	5	5
<b>3.29 In the past 4 weeks, what has (the person) done to find work?</b>		
1 = Nothing, but still wants work	1	1
2 = Nothing, wants work but already has a job to start at a definite date in the future	2	2
3 = Waited/ registered at employment agency/trade union	3	3
4 = Enquired at workplaces, farms, factories or called on other possible employers	4	4
5 = Placed/answered advertisement(s)	5	5
6 = Sought assistance from relatives or friends	6	6
7 = Looked for land, building, equipment or applied for permit to start own business or farming	7	7
8 = Sought/underwent training	8	8
<b>3.30 Has (the person) ever worked in the past for pay, profit or family gain?</b>		
1 = Yes	1	1
2 = No (Go to 3.32)	2	2

[illegible]

## SECTION 2 (CONTINUED)

	1	2
<b>FOR THE PERSON WHO HAS MOVED</b>		
2.11 In what type of dwelling did (the person) live at the previous place of residence, mentioned in Question 2.10 above?		
1 = Formal house or brick structure on a separate stand or yard	1	1
2 = Traditional dwelling/hut/structure made of traditional materials	2	2
3 = Flat or apartment in a block of flats	3	3
4 = Town/cluster/semi-detached house (simplex, duplex or triplex)	4	4
5 = Formal dwelling/house/flat/room, in back yard	5	5
6 = Informal dwelling/shack, in back yard	6	6
7 = Informal dwelling/shack NOT in back yard, e.g. in an informal/squatter settlement	7	7
8 = Room in hostel/compound for workers provided by employer or municipality	8	8
9 = Other (specify in column)	.....	.....
<b>ASK FOR EVERY PERSON IN THE HOUSEHOLD</b>		
2.12 Does (the person) presently attend school, college, technikon or university? (This includes study by correspondence but excludes crèche and pre-school)		
1 = Yes, full-time	1	1
2 = Yes, part-time	2	2
3 = No	3	3

[illegible]



## SECTION 2 (CONTINUED)

	1	2
<p><b>2.10 In which year did (the person) move to the dwelling</b>  <b>(e.g. house, room, shack, flat where he/she usually</b>  <b>lives?</b></p> <p><b>Write in the year when he/she moved</b></p> <p><b>(If never moved, circle 0) (Go to 2.12)</b></p> <p><b>For the person who has moved.</b>  <b>[Ask] From where did (the person) move? (State previous</b>  <b>place of residence)</b></p>	<p>19 <u>91</u></p> <p>0</p>	<p>19 <u>91</u></p> <p>0</p>
<b>Town/place name</b>	Green Point	Green Point
<b>Magisterial district</b>	M/Pain	M/Pain
<b>Province (new)</b>	EC	EC
<b>Country (only if not RSA)</b>		

3	4	5	6	7	8	9	10
01	01	01	01	01	01	01	01
02	02	02	02	02	02	02	02
03	03	03	03	03	03	03	03
04	04	04	04	04	04	04	04
05	05	05	05	05	05	05	05
06	06	06	06	06	06	06	06
07	07	07	07	07	07	07	07
08	08	08	08	08	08	08	08
09	09	09	09	09	09	09	09
10	10	10	10	10	10	10	10
.....	.....	.....	.....	.....	.....	.....	.....
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9

## SECTION 4

This section covers information regarding migrant workers

- 4.1 Are there any persons who are usually regarded as members of this household, but who were away for a month or more in the last year because they are migrant workers? (A migrant worker is someone who is absent from home for more than a month each year to work or seek work).

Yes	1
No	2

If "Yes", please complete the following table for all the migrant workers.

	Migrant worker 1
4.2 First name	
4.3 Is this person the: 1 = Head of the household 2 = Other member of the household	1 2
4.4 Gender 1 = Male 2 = Female	1 2
4.5 What kind of work is (the person) doing as a migrant worker.  (Describe the type of work in as much detail as possible)	

3	4	5	6	7	8	9	10
1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6	1 2 3 4 5 6
khosa	khosa	khosa	khosa	khosa	khosa		
Mr Fekela	Heidelberg	Mr Fekela	Mr Fekela	Mr Fekela	Thamaburg		
Eastern Cape	Eastern Cape	Eastern Cape	Eastern Cape	Eastern Cape	Gauteng		

SECTION 2 (CONTINUED)

	1	2
2.6 What is (the person's) present marital status? 1 = Never married 2 = Married - civil 3 = Married - traditional (customary) 4 = Living together with partner 5 = Widower/widow 6 = Divorced/separated	1 2 3 4 5 6	1 2 3 4 5 6
2.7 If (the person) is married, give respondent number of spouse if he/she is part of the household (e.g. if respondent No.1 is married to respondent No.2, then write "2" in column 1 and "1" in column 2).	2	1
2.8 Which language does (the person) speak most often at home?	Xhosa	Xhosa
2.9 Place of birth		
Town/place name	Mt Fletcher	Mt Fletcher
Magisterial district		
Province (new)	Eastern Cape	Eastern Cape
Country (only if not RSA)		

Migrant worker 2	Migrant worker 3	Migrant worker 4
1 2	1 2	1 2
1 2	1 2	1 2



## SECTION 4 (CONTINUED)

	Migrant worker 1
4.6 What is the <b>highest</b> level of education that (the person) has completed?	
00 = No schooling	00
01 = Sub A/ grade 1	01
02 = Sub B/grade 2	02
03 = Std 1	03
04 = Std 2	04
05 = Std 3	05
06 = Std 4	06
07 = Std 5	07
08 = Std 6 / Form 1	08
09 = Std 7 / Form 2	09
10 = Std 8 / Form 3	10
11 = Std 9 / Form 4	11
12 = Std 10 / Form 5	12
13 = NTC I	13
14 = NTC II	14
15 = NTC III	15
16 = Diploma/certificate with Std 9 or lower	16
17 = Diploma/certificate with Std 10	17
18 = Degree	18
19 = Other (specify in column)	.....
4.7 How much money if any has (the person) given to this household during the past 12 months.	R .....

3	4	5	6	7	8	9	10
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3
2	2	2	2				
2	2	2	2				
	1	1	1				

## SECTION 2

This section covers particulars of each person in the household

Interviewer: Start from the left (person No.1) and complete Section 2 (pages 24 to 43) for each person in the household separately. Circle the applicable code

	1	2
2.1 What is (each individual's) relationship to (the person listed in column 1)? 1 = HEAD/acting head of household 2 = Husband/wife/partner 3 = Son/daughter/stepchild/adopted child 4 = Brother/sister 5 = Father/mother 6 = Grandparent 7 = 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
2.2 Is (the person's) own mother still alive? 1 = Yes 2 = No 3 = Do not know	1 2 3	1 2 3
2.3 Is (the person's) own father still alive? 1 = Yes 2 = No 3 = Do not know	1 2 3	1 2 3
2.4 Give respondent number of (the person's) mother if she is part of the household (e.g. if respondent No.1 is the mother of respondent No.3, then write "1" in column 3)	.....	.....
2.5 Give respondent number of (the person's) father if he is part of the household (e.g. if respondent No.2 is the father of respondent No.3, then write "2" in column 3)	.....	.....

Migrant worker 2	Migrant worker 3	Migrant worker 4
00	00	00
01	01	01
02	02	02
03	03	03
04	04	04
05	05	05
06	06	06
07	07	07
08	08	08
09	09	09
10	10	10
11	11	11
12	12	12
13	13	13
14	14	14
15	15	15
16	16	16
17	17	17
18	18	18
.....	.....	.....
R .....	R .....	R .....

## SECTION 4 (CONTINUED)

	Migrant worker 1
4.8 Where does/did (the person) work? Town/place name	
Magisterial district	
Province (new)	
Country (only if not RSA)	
4.9 What is the main activity of (the person's) firm, institution or private employer?  (Describe the activity in as much detail as possible)	
4.10 How often does (the person) come home? 1 = Every weekend 2 = About once in 2 weeks 3 = About once a month 4 = About once in 3 months 5 = About once in 6 months 6 = About once a year 7 = Less frequently than once a year	1 2 3 4 5 6 7

ASK EVERY HOUSEHOLD

1.48 How far is the nearest social welfare service point?

Less than 1km	1
1km - less than 5km	2
5km or more	3
Do not know	4

Go to flap

- 1.46 What means of transport do the members of this household **mainly** use to get to the health facility? *-mainly = longest distance* (Circle only one code).

Ambulance	1
Own transport (car, minibus, etc.)	2
Train	3
Taxi	④
Bus (public)	5
On foot	6
Other transport (specify)	7

- 1.47 Where is this health care person/facility where household members usually go? (State place name, magisterial district and province).

Place name	Magisterial district	Province (New)
Khayalitshe	Mitchells Plain	Western Cape

Migrant worker 2	Migrant worker 3	Migrant worker 4
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7

## SECTION 5

This section covers information regarding deaths in the household

- Interviewer:** - This section must be answered by a senior member of the household (PREFERABLY A WOMAN)
- Record all the deaths of household members that occurred since **1 January 1995**
  - Make sure that **babies and elderly persons** are not omitted.
  - Stillbirths must **NOT** be included.

5.1 Were there any deaths in this household since **1 January 1995**?

Yes	(Go to 5.2)	1
No	(Go to Section 6)	2

5.2	5.3		5.4	5.5(a)	5.5(b)
Name/relationship (optional)	Gender		Age (years) Note: Less than 1 year = 0	Give month of death since 1/1/95	Give year since 1/1/95 of death
	M	F			
1.	1	2			
2.	1	2			
3.	1	2			
4.	1	2			
5.	1	2			

### ASK EVERY HOUSEHOLD

1.44 How far is the hospital/clinic/doctor where the household members usually go? (Circle only one code)

Less than 1 km	1
1km - less than 5km	2
5km - less than 10km	3
10km - less than 15km	4
15km or more	5

1.45 How long does it usually take to get there?

Less than 15 minutes	1
15 minutes - less than 30 minutes	2
30 minutes - less than 1 hour	3
1 hour - less than 2 hours	4
2 hours or more	5

- 1.42 If there were any unusual cash purchases during the past month or past year, [Ask] How much did the household spend on them all together?

Past month	R .....
Past year (please do not include purchases for the past month)	R <u>1000</u> ...

## ASK EVERY HOUSEHOLD

- 1.43 If anyone in this household gets ill or injured and decides to seek medical help, where do they usually go first? (Circle only one code)

Public Sector	Hospital	1
	Clinic	2
	Other (specify) .....	3
Private Sector	Hospital	4
	Clinic	5
	Private doctor/specialist	6
	Traditional healer	7
	Other (specify) .....	8

5.6		5.7			
Was the death Registered		Cause of death: Indicate whether the death was due to:			
Yes	No	Natural causes	Accident	Violence	Other
1	2	1	2	3	4
1	2	1	2	3	4
1	2	1	2	3	4
1	2	1	2	3	4
1	2	1	2	3	4

Go to Section 6.

## SECTION 6

This section covers information regarding births. This section must be completed for all women younger than 55 years who have ever given birth. A SEPARATE FORM MUST BE COMPLETED FOR EACH WOMAN

**Interviewer:** Please read the instructions on this and the opposite page before you start with Question 6.1.

First name of woman (a): .....

6.1	6.2		6.3		6.4		6.5
Name (starting with last born)  <b>Interviewer:</b> Record twins on separate lines and mark with a bracket	Is/was (the child) a boy or a girl?		Is (the child) still alive?		If alive: Is (the child) currently living with this house- hold?		If alive: How old is he/ she? <b>Interviewer:</b> Record age in completed years. Less than 1 year = 0
Name of child (optional)	Boy	Girl	Yes	No	Yes	No	Age in years
1.	1	(2)	(1)	2	(1)	2	5
2.	1	(2)	(1)	2	(1)	2	9
3.	(1)	2	(1)	2	(1)	2	11
4.	1	(2)	(1)	2	(1)	2	12
5.	1	2	1	2	1	2	
6.	1	2	1	2	1	2	
7.	1	2	1	2	1	2	
8.	1	2	1	2	1	2	
9.	1	2	1	2	1	2	
10.	1	2	1	2	1	2	

## ASK EVERY HOUSEHOLD

1.38 Compared to one year ago, how would you say things are for this household?

Things are better	1
Things are about the same	(2)
Things are worse	3

1.39 How much money did this household spend in total, on all items (including food, clothing, housing, transport, medical care, etc), during the past month?

R. 2000 .....

1.40 How much did the household spend on food during the past month?

R. 600 .....

1.41 Were there any unusual cash purchases (e.g. car, fridge, furniture, etc.) during the past month and/or the past year?

	Past month	Past year
Yes	1	(1)
No	(2)	2

## ASK EVERY HOUSEHOLD

**1.35 Do you have any street lighting where you live?**

Yes	1
No	2

1.36 In the past year, was there ever a time when you could not afford to feed the children in the household?

Yes	1
No	2
Not applicable (no children)	3

1.37 Taking everything into account, how satisfied is this household with the way it lives these days?

Very satisfied	1
Satisfied	2
Neither satisfied nor dissatisfied	3
Dissatisfied	④
Very dissatisfied	5

**Record all live births starting with the last born. Do not include still births and children adopted by the mother. Remember to include children who have died and children who are not currently part of the household.**

Respondent No: 2

[illegible]



## SECTION 6

This section covers information regarding births. This section must be completed for all women younger than 55 years who have ever given birth. A SEPARATE FORM MUST BE COMPLETED FOR EACH WOMAN

**Interviewer:** Please read the instructions on this and the opposite page before you start with Question 6.1.

First name of woman (b): .....

6.1	6.2		6.3		6.4		6.5
Name (starting with last born)  <b>Interviewer:</b> Record twins on separate lines and mark with a bracket	Is/was (the child) a boy or a girl?		Is (the child) still alive?		If alive: Is (the child) currently living with this house- hold?		If alive: How old is he/ she? <b>Interviewer:</b> Record age in completed years. Less than 1 year = 0
Name of child (optional)	Boy	Girl	Yes	No	Yes	No	Age in years
1.	1	2	1	2	1	2	
2.	1	2	1	2	1	2	
3.	1	2	1	2	1	2	
4.	1	2	1	2	1	2	
5.	1	2	1	2	1	2	
6.	1	2	1	2	1	2	
7.	1	2	1	2	1	2	
8.	1	2	1	2	1	2	
9.	1	2	1	2	1	2	
10.	1	2	1	2	1	2	

1.34 In the past 12 months, has any member of this household been a victim of crime? (this crime could have happened anywhere)

Yes	①
No (Go to 1.35)	2

If any member of the household has been a victim of crime, [Ask] Which type of crime?

[READ OUT the list below and circle all applicable codes]

Mugging	1
Robbery/burglary/housebreaking	②
Rape	3
Domestic violence (e.g child abuse, woman abuse)	4
Murder	5
Abduction/kidnapping	6
Car hijacking	7
White collar crime (e.g. fraud, scam)	8
Other (Specify).....	9

## ASK EVERY HOUSEHOLD

## Let us talk about your safety and perceived quality of life

1.31 How safe do you feel living in this particular neighbourhood?

Very safe	1
Rather safe	2
Rather unsafe	3
Very unsafe	4

1.32 How safe do you feel living in your own dwelling?

Very safe	1
Rather safe	2
Rather unsafe	3
Very unsafe	4

1.33 Do you feel safer, about the same, or less safe, than you felt a year ago?

Safer	1
The same	②
Less safe	3

**Record all live births starting with the last born. Do not include still births and children adopted by the mother. Remember to include children who have died and children who are not currently part of the household.**

Respondent No: .....

[illegible]

## SECTION 6

This section covers information regarding births. This section must be completed for all women younger than 55 years who have ever given birth. A SEPARATE FORM MUST BE COMPLETED FOR EACH WOMAN

**Interviewer:** Please read the instructions on this and the opposite page before you start with Question 6.1.

First name of woman (c): .....

6.1	6.2		6.3		6.4		6.5
Name (starting with last born)  <b>Interviewer:</b> Record twins on separate lines and mark with a bracket	Is/was (the child) a boy or a girl?		Is (the child) still alive?		If alive: Is (the child) currently living with this house- hold?		If alive: How old is he/ she? <b>Interviewer:</b> Record age in completed years. Less than 1 year = 0
Name of child (optional)	Boy	Girl	Yes	No	Yes	No	Age in years
1.	1	2	1	2	1	2	
2.	1	2	1	2	1	2	
3.	1	2	1	2	1	2	
4.	1	2	1	2	1	2	
5.	1	2	1	2	1	2	
6.	1	2	1	2	1	2	
7.	1	2	1	2	1	2	
8.	1	2	1	2	1	2	
9.	1	2	1	2	1	2	
10.	1	2	1	2	1	2	

1.29 Is there a telephone in this dwelling? (Please **DO NOT** include cellular telephones)

Yes	1
No	2

1.30 If there is no telephone in the dwelling(s) [Ask] How far from this household is the nearest available telephone?

Less than 100 m	1
100 m - less than 200 m	2
200 m - less than 1 km	3
1 km - less than 5 km	4
5 km - less than 10 km	5
10 km or more	6
Do not know	7

## ASK EVERY HOUSEHOLD

**Refuse disposal:**

1.27 How is the refuse or rubbish of this household disposed of? (Circle only one code)

Removed by local authority at least once a week	①
Removed by local authority less often	2
Removed by community members at least once a week	3
Removed by community members less often	4
Communal refuse dump/communal container	5
Own refuse dump	6
No rubbish removal	7
Other (Specify) .....	8

## Telecommunication

**1.28 Does anyone in this household have a cellular telephone?**

Yes	①
No	2

**Record all live births starting with the last born. Do not include still births and children adopted by the mother. Remember to include children who have died and children who are not currently part of the household.**

Respondent No: .....

[illegible]

## SECTION 6

**This section covers information regarding births. This section must be completed for all women younger than 55 years who have ever given birth. A SEPARATE FORM MUST BE COMPLETED FOR EACH WOMAN**

**Interviewer:** Please read the instructions on this and the opposite page before you start with Question 6.1.

**First name of woman (d):** .....

6.1	6.2		6.3		6.4		6.5
Name (starting with last born)  <b>Interviewer:</b> Record twins on separate lines and mark with a bracket	Is/was (the child) a boy or a girl?		Is (the child) still alive?		If alive: Is (the child) currently living with this house- hold?		If alive: How old is he/ she? <b>Interviewer:</b> Record age in completed years. Less than 1 year = 0
Name of child (optional)	Boy	Girl	Yes	No	Yes	No	Age in years
1.	1	2	1	2	1	2	
2.	1	2	1	2	1	2	
3.	1	2	1	2	1	2	
4.	1	2	1	2	1	2	
5.	1	2	1	2	1	2	
6.	1	2	1	2	1	2	
7.	1	2	1	2	1	2	
8.	1	2	1	2	1	2	
9.	1	2	1	2	1	2	
10.	1	2	1	2	1	2	

**1.25 If the toilet is not in the dwelling [Ask]** How far is the nearest toilet facility to which the household has access?

Less than 25m	1
25m- less than 50m	2
50m- less than 100m	3
100m or more	4

**1.26 If the facility is a bucket toilet [Ask]** How frequently is it removed?

Once a week or more often	1
About once a fortnight	2
About once a month	3
Less often than once a month	4

## ASK EVERY HOUSEHOLD

## Sanitation

(Circle only one code)

Toilet facility	In dwelling	On site	Off site
1. Flush toilet	1	1	1
2. Chemical toilet		2	2
3. Pit latrine		3	3
4. Bucket toilet		4	4
5. Other/None			5

**1.24 Is the toilet facility shared with other households?**

Yes	1
No	2

**Record all live births starting with the last born. Do not include still births and children adopted by the mother. Remember to include children who have died and children who are not currently part of the household.**

Respondent No: .....

[illegible]

## SECTION 6

**This section covers information regarding births. This section must be completed for all women younger than 55 years who have ever given birth. A SEPARATE FORM MUST BE COMPLETED FOR EACH WOMAN**

**Interviewer:** Please read the instructions on this and the opposite page before you start with Question 6.1.

**First name of woman (e):** .....

6.1	6.2		6.3		6.4		6.5
Name (starting with last born)  <b>Interviewer:</b> Record twins on separate lines and mark with a bracket	Is/was (the child) a boy or a girl?		Is (the child) still alive?		If alive: Is (the child) currently living with this house- hold?		If alive: How old is he/ she? <b>Interviewer:</b> Record age in completed years. Less than 1 year = 0
Name of child (optional)	Boy	Girl	Yes	No	Yes	No	Age in years
1.	1	2	1	2	1	2	
2.	1	2	1	2	1	2	
3.	1	2	1	2	1	2	
4.	1	2	1	2	1	2	
5.	1	2	1	2	1	2	
6.	1	2	1	2	1	2	
7.	1	2	1	2	1	2	
8.	1	2	1	2	1	2	
9.	1	2	1	2	1	2	
10.	1	2	1	2	1	2	

1.20 Does the household have to pay for the wood?

Always	1
Sometimes	2
Never	3

1.21 Does the household have to fetch wood?

Yes	1
No	2

1.22 How far is the wood if it has to be fetched?

Less than 100m	1
100m - less than 200m	2
200m - less than 500m	3
500m - less than 1km	4
1 km or more	5

**IF WOOD IS THE MAIN SOURCE OF FUEL FOR THE HOUSEHOLD,  
(FOR EITHER COOKING OR HEATING OR BOTH, ANSWER QUES-  
TIONS 1.18 TO 1.22)**

1.18 From where does the household get its wood? Indicate the **main** source.  
(Circle one code)

Woodlot	1
Commercial plantations	2
Indigenous trees	3
Veld	4
Home yard trees	5
Merchants	6

**1.19 Is the wood obtained enough for normal household purposes?**

Always	1
Mostly yes	2
Mostly no	3
No	4

**Record all live births starting with the last born. Do not include still births and children adopted by the mother. Remember to include children who have died and children who are not currently part of the household.**

**Respondent No:** .....

[illegible]



## SECTION 7

This section covers information regarding **household income** from other sources (**excluding income from employment and self-employment**)

## [READ OUT]

You have already told me about the income earned by members of this household from employment and self-employment. Many households also receive income from various other sources. Now, I would like to know how much income the household received from each of the following sources. (*Enter either monthly or annual income in the appropriate column*)

7.1 Financial support from relatives/persons not in the household

7.2 State pensions (including old age/civil pension)

7.3 Private pensions

7.4 Social grants/disability grants

7.5 Other grants  
(including old age grants, maintenance grants, care dependant grants)

7.6 Gratuities and other lumpsum payments

7.7 Unemployment benefits

7.8 Any other source of income (specify) .....

## ASK EVERY HOUSEHOLD

1.17 What is the **main** source of energy/fuel for this household?  
(Circle one code for each source)

Energy/fuel source	Cooking	Heating	Lighting
Electricity	①	①	①
Gas	2	2	2
Paraffin	3	3	3
Wood	4	4	
Coal	5	5	
Candles			6
Animal dung	7	7	
Other (Specify)	..... .....	..... .....	..... .....

1.14 Is the water obtained enough for normal household purposes? (Circle only one code)

Always	①
Mostly yes	2
Mostly no	3
No	4

1.15 If the water source is outside the dwelling(s) [Ask] How far is the water source from the dwelling(s)?

Less than 100 m	1
100 m - less than 200 m	2
200 m - less than 500 m	3
500 m - less than 1 km	4
1 km or more	5
Not applicable (water on site)	6

1.16 Does the household have to pay for its water?

Yes	①
Sometimes	2
No	3

Monthly	Annual
R.....	R.....
R.....	R.....
R.....	R.....
R.....	R.....
R.....	R.....
R.....	R.....
R.....	R.....
R.....	R.....
R.....	R.....

Go to Section 8.

## SECTION 8

**This section covers information regarding domestic workers employed by the household in the past month**

8.1 Did this household make use of a domestic worker during the past month?

Yes = 1

No = 2

If "Yes" Go to 8.2

If "No" *You have come to the end of the interview for this household. Thank the respondent for his/her cooperation.*

### 8.2 PARTICULARS OF DOMESTIC WORKERS AS AT THE END OF PAST MONTH

This question must be completed only for those who answered "Yes" to question 8.1.

Particulars of Domestic workers		
Type of domestic work	Number of domestic workers	Total number of hours usually worked per month
General	01 .....	08 .....
Nurse maid	02 .....	09 .....
Chauffeur	03 .....	10 .....
Clothes washer or ironer	04 .....	11 .....
Gardener	05 .....	12 .....
Other	06 .....	13 .....
Total	07 .....	14 .....

### ASK EVERY HOUSEHOLD

**Services available for the dwelling:**

1.13 What is this household's **main** source of water?

(Circle only one code)

Piped (tap) water, in dwelling	①
Piped (tap) water, on site or in yard	2
Public tap	3
Water-carrier/tanker	4
Borehole on site	5
Borehole: off site/communal	6
Rain-water tank on site	7
Flowing water/stream	8
Dam/pool/stagnant water	9
Well	10
Spring	11
Other (specify)	12

IF THE HOUSEHOLD DOES OWN THE DWELLING(S), ANSWER QUESTIONS 1.11 TO 1.12)

1.11 Since this dwelling is owned by the household, [Ask] Is this ownership:

Full title (including free-hold and lease-hold)	1
Sectional title	2
Do not know	3

If 'Sectional title' what was the levy paid last month?

R.....

1.12 Is this household presently paying off a bond on the dwelling(s)?

Yes	1
No	2

If 'Yes' how much did you pay last month?

R.....

Total monthly remuneration to domestic workers during past month (to the nearest rand)				
Cash wage, including transport allowance	Contributions to personnel funds (such as pension and medical aid)	Estimated value of free food	Estimated value of free accommodation	Free clothing, health care etc
15 R.....	22 R.....	29 R.....	36 R.....	43 R.....
16 R.....	23 R.....	30 R.....	37 R.....	44 R.....
17 R.....	24 R.....	31 R.....	38 R.....	45 R.....
18 R.....	25 R.....	32 R.....	39 R.....	46 R.....
19 R.....	26 R.....	33 R.....	40 R.....	47 R.....
20 R.....	27 R.....	34 R.....	41 R.....	48 R.....
21 R.....	28 R.....	35 R.....	42 R.....	49 R.....

1.8 Is this rent subsidised?

Yes	1
No	②
Do not know	3

1.9 Do you rent this dwelling with or without furniture ?

With furniture	1
Without furniture	②

1.10 Is the dwelling the property of:

Landlord/private owner	①
Employer (eg. Eskom, AE&CI, Transnet).	2
Government (national, provincial or local)	3
Charity organisation	4
Other (specify).....	5

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4

- 1.4 What is the total number of rooms in the dwelling(s) that the household occupies?

Total number of rooms **including living rooms, bedrooms and kitchens** (excluding bathrooms and toilets)

6

- 1.5 Is this dwelling (main dwelling, if more than one) owned by a member of the household (even if not yet fully paid)?

Yes (Go to question 1.11)

1

No (Continue)

2

IF THE HOUSEHOLD DOES NOT OWN THE DWELLING(S), ANSWER QUESTIONS 1.6 TO 1.10

- 1.6 If the dwelling(s) is/are not owned by the household, [Ask] Are you required to pay rent for the dwelling(s)?

Yes (continue)

1

No (Go to question 1.10 )

2

- 1.7 What was the rent that was charged last month?

R.....500.....

1.3 What is the **MAIN material** used for the roof and the walls of the *(main)* dwelling? (Circle one code in each column)

Material	Roof	Walls
Bricks		01
Cement block/concrete	02	02
Prefab	03	03
Corrugated iron/zinc	04	04
Wood	05	05
Plastic	06	06
Cardboard	07	07
Mixture of mud and cement	08	08
Wattle and daub	09	09
Tile	10	
Mud		11
Thatching	12	12
Asbestos	13	13
Other (specify)	.....	.....

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2

- 1.2 Which type of dwelling(s) does this household occupy? If the household lives in more than one dwelling, indicate the type of the **main dwelling**. (Circle only one code)

Formal house or brick structure on a separate stand or yard	①
Traditional dwelling/hut/structure made of traditional materials	2
Flat or apartment in a block of flats	3
Town/cluster/semi-detached house (simplex, duplex or triplex)	4
Formal dwelling/house/flat/room, in back yard	5
Informal dwelling/shack, in back yard	6
Informal dwelling/shack NOT in back yard, e.g. in an informal/squatter settlement	7
Room in hostel/compound for workers provided by employer or municipality	8
Other (specify)	9



# SECTION 1

## HOUSEHOLD INFORMATION

0317-E

1

**This section covers information regarding the dwellings, services and perceived quality of life of the household.**

*Interviewer: Please start with this section and complete each section separately*

- 1.1 How many dwellings does this household occupy on this particular site? *By household we mean a person or a group of persons who live together at least four nights a week at the same address, eat together and share resources.*

Less than one dwelling (sharing a dwelling with other households)	①
One dwelling	2
Two dwellings	3
Three dwellings	4
More than three dwellings	5