



h1. To be completed by Interviewer

Please complete before the Interview

0.1 - **Interviewer ID** |__|__||__|__|

0.2 - **Date:** |__|__| / |__|__| / 2010
Day Month

0.3 - **Province code** |__|__|__|__|__|__|

0.4 - **County code** |__|__|__|__|__|__|

0.5 - **Village code** |__|__|__|__|__|__|

0.6 - **Household code** |__|__|

0.7 - **Name of household respondent**

Sex _____ **Ethnic** _____
Telephone _____

0.8 - **Interview location** |__| 1 = At household
2 = In central location (not at home)

Please read the following consent form:

“My name is. We are collecting information here in XXX. I would like to ask you to participate in a one-to-one interview. Please answer all the questions truthfully. There are no wrong answers to the questions that will be asked.

The researchers will keep your responses confidential. You do not need to use your real name in the interview. Your full name will not be written down anywhere and there will be no way to identify you. Only researchers involved in this study will view the discussion notes.

There is no direct benefit to you in participating to this study.

However, we hope that the research will benefit XXX by helping us understand what people need in order to help the country move forward. You will not receive money if you join this study.

Your participation is voluntary. You may refuse to answer any question and you may choose to stop the discussion at any time. Refusing to participate will not affect you or your family in any way. Do you have any questions for us? You may ask questions about this study at any time.

May I begin the interview now?" Yes No

Signature of Interviewer:

2. To be completed by Team Leader:

0.9- **Questionnaire Number:**
 |__|__|__|__|__|__| |__|__|
Village-code + Household-code

0.10 - **Date:** |__|__| / |__|__| / 2010
Day Month

0.11- **Team Leader Code** |__|__|

Remarks:

Signature of Team Leader:

3. To be completed by Data Entry

0.12 - **Date:** |__|__| / |__|__| / 2010
Day Month

0.13- |__|__|__|__|__|__|__|__|__|__|__|__|
Name of data entry operator

Remarks:

Signature of data entry:



SECTION 1 – DEMOGRAPHICS: Read - "I would now like to ask you a few questions on the composition of your household"			
<i>A household is defined as a group of people currently living and eating together "under the same roof" (or in same compound if the HH has 2 structures)</i>			
1.1	How many people are currently living in your household? (living means eating meals here daily)	_ _	
1.2	How many people are part of this household but migrate away for work? (this should not include those counted above)	_ _	
1.3	What is the gender (sex) of the household head?	_	1 = Male 2 = Female
1.4	What is the age of the household head (<i>in years</i>)?	_ _	
1.5	What is the marital status of the household head?	_	1 = Married 2 = Partner 3 = Divorced → 1.7 4 = Living apart not divorced → 1.7 5 = Widow or widower → 1.7 6 = Never married → 1.7
1.6	What is the age of the household head's <u>spouse</u> ?	_ _	
1.7	<i>Please, complete this household's demographics table on the right. This is to record the number of individuals in each age category. Make sure to differentiate between males and females.</i>	Male	Female
	a -0- 5 years	_ _	_ _
	b - 6 - 14 years	_ _	_ _
	c - 15 - 25 years	_ _	_ _
	d - 26 - 40 years	_ _	_ _
	e - 41 - 64 years	_ _	_ _
	f - 65 + years	_ _	_ _
1.8	What is the level of education of the household head / spouse (<i>use codes below</i>)	Household Head	Spouse (if any)
	1 = No School 2 = Some Elementary (but not finished) 3 = Completed Elementary 4 = Completed Junior High School 5 = Completed High School 6 = Some / Completed Tertiary/University or college 7 = Other, specify	_ if other, specify: _____	_ if other, specify: _____
1.9	Did the household head / spouse complete at least 2 months of vocational school? (1 = Yes, 2 = No)	_	_
1.10	Number of children attending primary school now	Male	Boarding
		_ _	_
	Number of children attending junior middle school now	_ _	_
	Number of children attending senior middle school now	_ _	_
1.11	Did anyone miss school for at least 1 month in the last 1 year	_	1 = Yes 2 = No → 1.13
1.12	If yes, why? Use the codes below for males and females		
	Male Children	Female Children	1 = Sickness 2 = Work for money or food 3 = Domestic work (gardening, fetching water) 4 = Take care of siblings 5 = Long distance to school 6 = No money for school fee 7 = Refused to go 8 = Other, specify
	_ if other, specify: _____	_ if other, specify: _____	



1.13	Among the adults aged 15-64 year old living in this household, is there anyone who has not been fully functional for at least 3 months over the last 12 months?	<input type="checkbox"/>	1 = Yes 2 = No → 1.15									
1.14	For those with such a condition, please complete the following											
	Relationship to the household head	Condition	Has the conditions effected their ability to work?									
	<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>									
	1 = head 2 = spouse 3 = other, specify	1 = chronic illness 2 = disabled	1 = yes, able to work the same amount 2 = no, working less than before 3 = completely unable to work									
1.15	Did any household members migrate in the last year?	<input type="checkbox"/>	1 =Yes 2 = No → Section 2									
1.16	If yes, please give the reason and activity for each migrated member	HH member	Reason for leaving	Activity	Duration							
		<input type="checkbox"/>	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/>							
		<input type="checkbox"/>	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/>							
		<input type="checkbox"/>	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/>							
		<input type="checkbox"/>	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Other: _____	<input type="checkbox"/>							
	Member: 1 = Male 0-5 years 2 = Female 0-5 years 3 = Male 6-14 years 4 = Female 6-14 years 5 = Male 15-64 years 6 = Female 15-64 years 7 = Male 65+ 8 = Female 65+	Reasons: 1 = education 2 = for better income 3 = not enough land / resources 4 = better living conditions 5 = other, specify above	Activity: 1 = work in same county (agriculture) 2 = work in same county (non-agriculture) 3 = work outside county (agriculture) 4 = work outside county (non-agriculture) 5 = other, specify above	Duration: 1 = < 3 months 2 = 3-6 months 3 = 6-9 months 4 = 9-12 months 5 = > 1 year								
1.17	Indicate the general timing of migration Check all that apply											
HH member	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



SECTION 2 – HOUSING AND FACILITIES

2.1	Do you or your household own or rent this dwelling?	_	1 = Own 2 = Don't own but live for free 3 = Pay Rent					
2.2	How many square meters of useful floor are in the house?	_ _ _	square meters _ _ _ Rooms					
2.3	What is the major material of the roof of your house? <i>Observe and record. Do not ask question!</i>	_	1 = Steel 2 = Steel and Reinforced Concrete 3 = Tile 4 = Bamboo 5 = Grass 6 = Other, specify _____					
2.5	What is the major material of the wall of your house? <i>Observe and record. Do not ask question!</i>	_	1 = Steel 2 = Steel and Reinforced Concrete 3 = Reinforced Concrete and Brick 4 = Brick 5 = Wood 6 = Bamboo 7 = Earth 8 = Other, specify _____					
2.6	Where do the members of your household normally go to the toilet? <i>Do not read answers.</i>	_	1 = Flush latrine/toilet with water 2 = Traditional pit latrine (no water) 3 = (Partly) open pit (no roof or no wall) 4 = Communal Latrine 5 = None/bush (go to forest)					
2.7	What is your main source of energy for cooking? <i>Do not read answers.</i>	_	1 = Electricity 2 = Parafin 3 = Wood 4 = Coal 5 = Charcoal 6 = Sawdust 7 = Gas 8 = Straw 9 = Other, specify _____					
2.8	What is the main source of drinking water for your household?	_	1 = Piped water in/out side 2 = Well/borehole protected 3 = Well/borehole unprotected 4 = River, stream or dam 5 = Mountain source (incl. gravity water feeder system) 6 = Rain water from tank 7 = Other, specify _____					
2.9	How far is the main source of water for your household? (walking) <i>Record travel time to access source and return home. Write 888 if water at home, Write 999 if don't know</i>	_ _ _	Minutes					
2.10	Is your main water source available throughout the whole year?	_	1 = Yes → Section 3 2 = No					
2.11	If not, indicate months when the main water source is unavailable? <i>Check all that apply</i>							
_		January	_	April	_	July	_	October
_		February	_	May	_	August	_	November
_		March	_	June	_	September	_	December



SECTION 3 – PRODUCTIVE AND HOUSEHOLD ASSETS, REMITTANCES AND ACCESS TO CREDIT					
3.1	Does your household own any of the following assets? Check all that apply	Productive/transport assets			
		<input type="checkbox"/>	1.Tractor	<input type="checkbox"/>	8.Car
		<input type="checkbox"/>	2.Hand tractor	<input type="checkbox"/>	9. Boat/canoe
		<input type="checkbox"/>	3.Harvester	<input type="checkbox"/>	10. Motorcycle
		<input type="checkbox"/>	4.Pesticide machine	<input type="checkbox"/>	11. Bicycle
		<input type="checkbox"/>	5.Mill (fuel or electricity)	<input type="checkbox"/>	12. Cart
		<input type="checkbox"/>	6.Mill (foot or hand)	<input type="checkbox"/>	13.Grind
		<input type="checkbox"/>	7. Weaving tool	<input type="checkbox"/>	14.Thresher
				<input type="checkbox"/>	15.Others
		Household assets			
		<input type="checkbox"/>	1.Television	<input type="checkbox"/>	9. Microwave oven
		<input type="checkbox"/>	2.CD / DVD player	<input type="checkbox"/>	10.Rice cooker
		<input type="checkbox"/>	3.Cassette recorder	<input type="checkbox"/>	11.Washing machine
		<input type="checkbox"/>	4.Radio	<input type="checkbox"/>	12.Telephone
		<input type="checkbox"/>	5.Air conditioner	<input type="checkbox"/>	13.Mobile phone
		<input type="checkbox"/>	6.Electric fan	<input type="checkbox"/>	14.Camera
<input type="checkbox"/>	7.Refrigerator	<input type="checkbox"/>	15.Sewing machine		
<input type="checkbox"/>	8.Induction cooker	<input type="checkbox"/>	16.Computer		
3.2	Has your household received any money or support in kind from family members living outside your household in the past year?	<input type="checkbox"/>	1 = Yes 2 = No → 3.5		
3.3	How much support do you receive in the past year?	<input type="checkbox"/>	1 = 1-500 RMB 2 = 501-1000 RMB 3 = 1001-2000 RMB 4 = 2001-3000 RMB 5 = 3001-4000 RMB 6 = >4000 RMB		
3.4	Do you expect to continue to receive such support in the coming year?	<input type="checkbox"/>	1 = Yes 2 = No		
3.5	Do you have access to a place to borrow money? Check all that apply	<input type="checkbox"/>	1.Yes – relatives / friends		
		<input type="checkbox"/>	2.Yes – charities / NGOs		
		<input type="checkbox"/>	3.Yes – local lender		
		<input type="checkbox"/>	4.Yes – bank		
		<input type="checkbox"/>	5.Yes – co-operatives		
		<input type="checkbox"/>	6.Yes – village head		
		<input type="checkbox"/>	7.Yes – company/middle men		
		<input type="checkbox"/>	8.No access to credit		
3.6	Does your household have any loan/debt to pay back at the moment?	<input type="checkbox"/>	1 = Yes 2 = No → Section 4		
3.7	Are you able to payback this debt?	<input type="checkbox"/>	1 = Yes 2 = No		
3.8	What is the size of your debt in relation to your annual income?	<input type="checkbox"/>	1 = <25% 2 = 25% - 49% 3 = 50% - 74% 4 = 75% - 99% 5 = >100%		
3.9	For what purpose was the loan taken?	<input type="checkbox"/>	1 = education 2 = wedding or funeral		



- 3 = illness
- 4 = housing, house improvement
- 5 = agricultural inputs
- 6 = food purchase
- 7 = non-food purchase
- 8 = other, specify _____

Section 4 – Agriculture						
4.1	Do you have agricultural land in your current location?		_	1 = Yes 2 = No →4.16		
4.2	How many pieces of land do you have?		_ _ plots of land			
4.3	What is the total size of your land?		_ _ _ _ _ . _ _ mu			
4.4	What type of land do you have?		_	1 = Arable land _ _ _ _ _ . _ _ mu 2 = Paddy field _ _ _ _ _ . _ _ mu 3 = Forest _ _ _ _ _ . _ _ mu 4 = Orchard _ _ _ _ _ . _ _ mu 5 = Grassland _ _ _ _ _ . _ _ mu		
4.5	How much land have you cultivated this season?		_ _ _ _ _ . _ _ mu			
4.6	How many times do you cultivate crops per year on your land?		_ times per year			
4.7	How long does it take to walk to the farthest piece of land?		_ _ _ minutes			
4.8	What is the main source of water for your cultivated land?		_	1 = rain water 2 = irrigated–canals/dam 3 = irrigated–pump (well) 4 = irrigated–river 5 = other (specify) _____		
4.9	What are the three main crops (ranked) you cultivated on your land this season? Use the codes below to indicate the crop, it's main use and the source of seed, the area harvested and the approximate amount harvested					
	Crop code If other, specify on the right		Main use	Source of seed	Area harvested	Amount harvested
Main crop	_ _	Other: _____	_	_	_ _ _ _ _ . _ _ mu	_ _ _ _ kg
Second crop	_ _	Other: _____	_	_	_ _ _ _ _ . _ _ mu	_ _ _ _ kg
Third crop	_ _	Other: _____	_	_	_ _ _ _ _ . _ _ mu	_ _ _ _ kg
<u>Crop codes</u>		<u>Main use codes</u>		<u>Source of seed codes</u>		
01 = glutinous rice	10 = fruits	1 = More for household consumption		1 = purchase		
02 = white rice	11 = tobacco	2 = More for fodder (own livestock)		2 = own stock		
03 = wheat	12 = groundnuts and other nuts/seeds	3 = More for market		3 = government		
04 = maize	13 = rapeseed	4 = Loss of crop		4 = purchase and own stock		
05 = soybean	14 = cotton	9 = Not applicable		5 = NGO / INGO		
06 = beans	15 = sugar cane			6 = borrow / exchange		
07 = cassava	16 = other, specify above			7 = shared from neighbors / relatives		
08 = potatoes				8 = contract farming		
09 = vegetables				9 = government subsidized		
4.10	What do you use to cultivate your land?		_	1 = hand tools 2 = horse / ox / buffalo plough 3 = hand tractor 4 = big tractor		
4.11	What do you use to harvest your land?		_	1 = hand tools 2 = horse / ox / buffalo plough 3 = hand tractor 4 = big tractor		
4.12	Where do you store your crop harvest?		_	1 = indoors – in basket or barrel 2 = indoors – in bags 3 = indoors – open storage		



			4 = storage hut 5 = inside house in storage room (without bags or barrel) 6 = in rice bank/communal storage 7 = Other, specify _____ 8 = Not applicable
4.13	What type of fertilizers do you use?	_	1 = chemical fertilizers 2 = natural fertilizers 3 = both chemical & natural fertilizers 4 = micronutrient enriched 5 = none
4.14	How much chemical fertilizer do you use?	_ _ _ _	kg/mu
	How much natural fertilizer do you use?	_ _ _ _	kg/mu
4.15	Do you use chemical pesticides / herbicides ?	_	1 = Yes 2 = No
4.16	Do you have a kitchen garden?	_	1 = Yes 2 = No → 4.18
4.17	Which of the following do you currently grow in this kitchen garden? Check all that apply	_ 1 = maize _ 2 = beans _ 3 = cassava _ 4 = potatoes _ 5 = vegetables	_ 6 = fruits _ 7 = tobacco _ 8 = sugar cane _ 9 = herbs _ 10 = other, specify _____
4.18	Does your household own any farm-animals?	_	1 = Yes 2 = No → section 5
4.19	If yes, how many of each of the following animals do you own?		
	Cows / bullocks	_ _ _ _	Turkeys
	Buffaloes	_ _ _ _	Horses
	Goats / sheep	_ _ _ _	Pigs
	Chicken	_ _ _ _	Foxes
	Ducks	_ _ _ _	Other _____
	Geese	_ _ _ _	



SECTION 5 – LIVELIHOODS

A – Identify the 3 main activities for the past **YEAR** using the activity codes below.
 B – For each activity use proportional piling to estimate the relative contribution of each activity to household income, including own consumption (total = 100%).
 C – Estimate the RMB value of this activity including own-consumption

Activities	A. What are your household's main activities throughout the last year? Rank up to 3 income activities <i>(use activity code)</i>		B. Relative contribution of this activity to household income (including own consumption) <i>(use proportional piling)</i>	C. Estimate the RMB value of this income activity(including own-consumption)
5.1 Main	_ _	Other: _____	_ _ _ %	_ _ _ _ _ _ _ _ RMB
5.2 Second	_ _	Other: _____	_ _ %	_ _ _ _ _ _ _ _ RMB
5.3 Third	_ _	Other: _____	_ _ %	_ _ _ _ _ _ _ _ RMB
			total = 100%	

A) Income activity codes

01 = Production and sale of agricultural crops 02 = Livestock rearing and / or selling 03 = Brewing 04 = Fishing 05 = Collection of aquatic animal resources other than fish 06 = Seasonal labour – agriculture 07 = Seasonal labour – non-agriculture 08 = Non-seasonal labour – agriculture 09 = Non-seasonal labour – non-agriculture	10 = Salaried (employees, longer-term) 11 = Handicrafts /Artisan 12 = Collection and/or sale of Forest Products (plants) 13 = Petty trading 14 = Trade, commerce, shop keeper 15 = Remittances (outside support) 16 = Government allowance (pension, disability benefit) 17 = Government subsidy (production subsidies, emergency assistance, etc.) 18 = Other, specify above
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SECTION 6 – EXPENDITURE

<i>Read: In the past MONTH, how much money have you spent on each of the following items or service? If goods have been exchanged, please give a value in RMB from local market list. (for human consumption)</i>		Total units consumed	Total units purchased from market	Market price per unit	Total Expenditure
6.1	Glutinous rice	_ _ _ kg	_ _ _ kg	_ _ RMB/kg	_ _ RMB
6.2	White rice	_ _ _ kg	_ _ _ kg	_ _ RMB/kg	_ _ RMB
6.3	Maize	_ _ _ kg	_ _ _ kg	_ _ RMB/kg	_ _ RMB
6.4	Wheat	_ _ _ kg	_ _ _ kg	_ _ RMB/kg	_ _ RMB
6.5	Pulses, lentils, bean curd	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.6	Tofu	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.7	Roots and tubers(carrot, radish, onion etc)	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.8	Vegetables(tomato, cucumber, eggplant, leafy vegetables, etc)	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.9	Milk / milk products	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.10	Fresh fruits	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.11	Nuts and seeds	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.12	Fish	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.13	Chicken, duck, goose, turkey	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.14	Pork	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.15	Goat, sheep	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.16	Beef, buffalo	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.17	Eggs	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.18	Animal fat (grease)	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.19	Oil, butter	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.20	Soy sauce, vinegar	_ _ kg	_ _ kg	_ _ RMB/kg	_ _ RMB
6.21	MSG		_ _ RMB		
6.22	Sugar		_ _ RMB		
6.23	Salt		_ _ RMB		
6.24	Alcohol, rice wine		_ _ RMB		
6.25	Other food		_ _ RMB		
6.26	Tobacco		_ _ RMB		
6.27	Soap		_ _ RMB		
6.28	Transport		_ _ _ RMB		
6.29	Firewood, charcoal		_ _ RMB		
6.30	Kerosene, petrol		_ _ _ RMB		
6.31	Telephone bill		_ _ RMB		
6.32	Electricity bill		_ _ RMB		
6.33	Water bill		_ _ RMB		
6.34	Other fees		_ _ RMB		



In the past **12 MONTHS**, how much money have you spent to acquire each of the following items or service?

Use the following table, write 0 if no expenditure.

		RMB		RMB	
6.35	Farming equipment, tools (including rental and buying)	_ _ _ _ _ _ _	6.38	Medical expenses, health care	_ _ _ _ _ _ _
6.36	Agricultural inputs	_ _ _ _ _ _ _	6.39	Education, (school fees/uniforms)	_ _ _ _ _ _ _
6.36 a	Seed	_ _ _ _ _ _ _	6.40	Clothing, shoes	_ _ _ _ _ _ _
6.36 b	Fertilizer and pesticides	_ _ _ _ _ _ _	6.41	Veterinary expenses	_ _ _ _ _ _ _
6.36 c	pesticides and Plastic film	_ _ _ _ _ _ _	6.42	Celebrations, social events, funerals, weddings	_ _ _ _ _ _ _
6.36 d	hire animal or machine to cultivate farmland	_ _ _ _ _ _ _	6.43	Fines / taxes / local fees	_ _ _ _ _ _ _
6.36 e	Irrigation	_ _ _ _ _ _ _	6.44	Debts	_ _ _ _ _ _ _
6.36 f	fuel expenditure in agriculture production	_ _ _ _ _ _ _	6.45	Construction, house repair	_ _ _ _ _ _ _
6.36 g	Newborn animal poultry Aberdeen expenditure	_ _ _ _ _ _ _	6.46	Rent (housing)	_ _ _ _ _ _ _
6.36 h	feed	_ _ _ _ _ _ _	6.47	Electronic appliances (washing machine, microwave, etc)	_ _ _ _ _ _ _
6.36 i	other agriculture input expense	_ _ _ _ _ _ _	6.48	Prepare feasts	_ _ _ _ _ _ _
6.37	Hiring labor	_ _ _ _ _ _ _	6.49	Other, specify: _____	_ _ _ _ _ _ _



SECTION 7 – FOOD SOURCES AND CONSUMPTION

Could you please tell me how many **times/days** in the **past week** your household has eaten the following foods and what the source was (**use codes on the right, write 0 for items not eaten over the last 7 days**)

	Food Item	# of days eaten last 7 days	Food Source (use codes)	Food Source codes				
7.1a	Glutinous rice	__	__	1 = own production (crops, animals)				
7.1b	White rice	__	__	2 = hunting, fishing, gathering				
7.1c	Maize	__	__	3 = borrowed				
7.1d	Wheat	__	__	4 = purchase with cash				
7.1e	Other roots and tubers (potatoes, yam)	__	__	5 = purchase on credit				
7.1f	Fish	__	__	6 = barter				
7.1g	Other aquatic animals (crabs, snails, shrimps, etc)	__	__	7 = gift (food) from family relatives				
7.1h	White meat - poultry	__	__	8 = government food aid				
7.1i	Pork	__	__					
7.1j	Red meat - goat, sheep	__	__					
7.1k	Red meat -Beef, Buffalo	__	__					
7.1l	Wild meat – large body wild life	__	__					
7.1m	Wild meat – small animals such as squirrels, birds	__	__					
7.1n	Eggs	__	__					
7.1o	Pulses, lentils, tofu, bean curd	__	__					
7.1p	Vegetables (tomato, cucumber, eggplant, etc)	__	__					
7.1q	Green, leafy vegetables	__	__					
7.1r	Bamboo shoots, mushrooms	__	__					
7.1s	Oil, butter	__	__					
7.1t	Fresh fruits	__	__					
7.1u	Sugar (sweets)	__	__					
7.1v	Salt	__	__					
7.1w	Milk, milk products	__	__					
7.1x	Condiments	__	__					
7.2	How many meals did the members of your household eat yesterday?		Male adults	__	Female adults	__	Children (24-59 months only)	__



Section 8 shocks and coping strategy		
8.1 Has your household experienced any of these shocks that has made it difficult to obtain sufficient means of livelihood in the last 12 months? Circle all that apply and then rank in the next column.	8.2 Rank top three shocks 1= main 2 = second 3= third	8.3 Did [cause] decrease your household's ability to produce or purchase food? 1 = Yes 2 = No 3 = Don't know
1 Drought/irregular rains	__	__
2 Floods	__	__
3 Hail	__	__
4 Frost	__	__
5 Unusually high temperature	__	__
6 Hot winds	__	__
7 Landslides, erosion	__	__
8 Severely high level of crop pests & disease	__	__
9 Severely high level of livestock diseases	__	__
10 Lack or loss of employment	__	__
11 Fire	__	__
12 High costs of agricultural inputs (seed, fertilizer, etc.)	__	__
13 Earthquake	__	__
14 Reduced income of a household member	__	__
15 Serious illness or accident of household member	__	__
16 Death of a working household member	__	__
17 Death of other household member	__	__
18 Theft of money/valuables	__	__
19 Theft of animals	__	__
20 Conflict	__	__
21 High food / fuel prices	__	__
22 Crop destroyed by wildlife	__	__
23 Other, specify _____	__	__



8.4 What did the household do to compensate for this loss of income and/or assets			
Rank up to three coping strategies (use the codes to the right):		01 - Rely on less preferred, less expensive food 02 - Borrowed food, helped by relatives 03 - Purchased food on credit 04 - Consumed seed stock held for next season 05 - Reduced the proportions of the meals 06 - Reduced number of meals per day (i.e. reduce from 3 meals to 2 meals) 07 - Skipped days without eating 08 - Some HH members migrated 09 - Sold durable household goods 10 - Sent children to live with relatives 11 - Reduced expenditures on health and education 12 - Spent savings 13 - Reduced expenditures on everyday living 14- Reduced expenditures on visiting 15- Reduced expenditures on outside sightseeing 16- Reduced saving 17 - Gathered food 18 - Reduced expenditures on agricultural input 19 - Sold or consumed livestock 20 - Sold agricultural tools, seeds or other inputs 21 - Sold crop before harvest 22 - Borrowed money 23 - Other, specify	
First	_ _ Other: _____		
Second	_ _ Other: _____		
Third	_ _ Other: _____		

8.5	In the past 7 days, were there times when you did not have enough food or money to buy food?	_	1 = Yes 2 = No
How often (number of days in a week) did your household have to:		Frequency (0-7)	
8.6	Rely on less preferred and less expensive foods?	_	
8.7	Borrow food, or rely on help from a friend or relative?	_	
8.8	Limit portion size at mealtimes?	_	
8.9	Restrict consumption by adults in order for small children to eat?	_	
8.10	If more than 0 for question above, did mostly females or males reduce their meals?	_	1 = females 2 = males 3 = both
8.11	Reduce number of meals eaten in a day?	_	