REPUBLIC OF NIGER
Fraternity - Work - Progress
Ministry of the Economy and Finances
National Institute of Statistics

NATIONAL SURVEY ON HOUSEHOLD LIVING CONDITIONS AND AGRICULTURE 2011

HOUSEHOLD QUESTIONNAIRE
FIRST WAVE

DO NOT DISTRIBUTE WITHOUT THE AUTHORIZATION OF THE NATIONAL INSTITUTE OF STATISTICS

STRICTLY CONFIDENTIAL

GPS Coordinates of the household

Latitude   N

Longitude   E

Last name & name of household head _____

Address of household head _____

TABLE OF CONTENTS

SECTION 0: CONTROL INFORMATION

A. Information on the collection of data

1.-	Team number	
2.-	Interviewer LAST NAME & NAME	CODE:

		Date	Hour	Result Code
3.-	Start of the collection	☐☐ / ☐☐ / ☐☐	☐☐ ☐☐	
4.-	End of the collection	☐☐ / ☐☐ / ☐☐	☐☐ ☐☐	
5.-	Result for household questionnaire			
6.-	Completion of household questionnaire			

RESULT CODES
1 Completed with the selected household
2 Completed with a replacement household because of refusal
3 Completed with replacement household because of absence
4 Refusal
5 Absent

COMPLETION CODES
1 Questionnaire complete
2 Questionnaire incomplete

7.-	Date of correction in the field	**DD/MM/YY**	☐☐ / ☐☐ / ☐☐
8.-	Controller LAST NAME & NAME:		CODE: ☐☐
9.-	Date of final control in the field	**DD/MM/YY**	☐☐ / ☐☐ / ☐☐

B. Household Identification (from the household listing)

10.-	Region	NAME:		CODE:
11.-	Department	NAME:		CODE:
12.-	Commune/canton	NAME:		CODE:
13.-	Village/Quartier	NAME:		
14.-	Number of ZD	NAME:		CODE:
15.-	Location 1. Urban community 2. Urban 3. Rural			CODE:
16.-	Number of the household on the listing of the ZD			CODE:
17.-	Lifestyle 1 Sedentary 2 Nomad			CODE:
18.-	Last name & name of household head			
19.-	Cell phone number of household head			
20.-	Address of the household			

21.-	GPS CODE:	LATITUDE	**N**	☐☐	☐☐☐☐☐
		LONGITUDE	**E**	☐☐	☐☐☐☐☐

C.- Summary of the household

22.-	Total number of people in the household	
23.-	Number of women aged 12 to 49 years	
24.-	Name and ID code of the principal respondent to Section 1	
25.-	Name and ID code of the principal respondent to Section 9	
26.-	Name and ID code of the principal respondent to Section 13	
27.-	Number of household questionnaires used	
28.-	Number of questionnaire used in this household	

D.- Contact information for the household

29.- Last name and name of other member of household	ID Code:
30.- Cell phone number	
31.- Last name and name of other member of household	ID Code:
32.- Cell phone number	
33.- Last name and name of other member of household	ID Code:
34.- Cell phone number	
35.- Last name and name of other member of household	ID Code:
36.- Cell phone number	

Information on the first reference person from outside the household

37.- Name and last name	
38.- Relationship to household head	
39.- Cell phone number	
40.- Region	
41.- Department	
42.- Commune/canton	
43.- Village/Quartier	
44.- Number of ZD	

Information on the second reference person from outside the household

45.- Name and last name	
46.- Relationship to household head	
47.- Cell phone number	
48.- Region	
49.- Department	
50.- Commune/canton	
51.- Village/Quartier	
52.- Number of ZD	

Information on the third reference person from outside the household

53.- Name and last name	
54.- Relationship to household head	
55.- Cell phone number	
56.- Region	
57.- Department	
58.- Commune/canton	
59.- Village/Quartier	
60.- Number of ZD	

LIST OF MEMBERS - FLAP

ID CODE	RECORD THE NAMES IN THE FOLLOWING ORDER Make a list of all the people who live in the household 1 HOUSEHOLD HEAD 2 CHILDREN OF HEAD WHOSE MOTHER IS NOT A MEMBER OF THE HOUSEHOLD 3 FIRST SPOUSE FOLLOWED BY HER CHILDREN (FROM YOUNGEST TO OLDEST) 4 2ND, 3RD … WIFE AND THEIR CHILDREN 5 BROTHERS & SISTERS OF HEAD 6 FATHER & MOTHER OF HEAD 7 GRANDCHILDREN OF HEAD 8 OTHER RELATIVE OF HEAD &/OR SPOUSES 9 OTHER NON RELATIVES OF HEAD **IF MORE THAN 15 MEMBERS, USE ANOTHER QUESTIONNAIRE**	SEX COPY FROM (1.01) 1 Male 2 Female	AGE COPY FROM (1.06)	
	NAMES & LAST NAMES	**CODE**	**YEARS**	**MONTHS**
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SECTION 1 : SOCIO-DEMOGRAPHIC CHARACTERISTICS OF HOUSEHOLD MEMBERS

ID CODE	(1.01) SEX	(1.02) Relationship with household head?	(1.03) Does [NAME] have a birth certificate?	(1.04) Is the birth certificate available?	(1.05) IF Q (1.04) =1 COPY BIRTH DATE, BUT ASK IF THIS IS THE CORRECT DATE			(1.06) How old was [NAME] on his/her last birthday?		(1.07) Does the father of [NAME] live in the household?	(1.08) WRITE THE ID CODE OF [NAME's] FATHER	(1.09) Is the father of [NAME] alive?
	1 Male 2 Female	01 Household head 02 Spouse 03 Child 04 Parent 05 Grandchild 06 Grandparent 07 Sibling 08 Step child 09 Nephew, niece 10 Cousin 11 Brother-in-law, sister-in-law 12 Father-in-law, mother-in-law 13 Other relative of head or spouse 14 Other non related person (not related) 15 Domestic or relative of domestic	1 Yes 2 No ► (1.06)	1 Yes 2 No	IF (1.04)=2 ASK THE QUESTION What is your birth date ?			For children less than 5 years old (0 -59 months) write age in months and years. For people older than 5 years old, age in years at the last birthday. (As of the date of the interview)		1 Yes 2 No ► (1.09)	►► (1.10)	1 Yes 2 No
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					98	98	9998					
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SECTION 1 : SOCIO-DEMOGRAPHIC CHARACTERISTICS OF THE HOUSEHOLD MEMBERS

ID CODE	(1.10) Does the mother of [NAME] live in the household ? 1 Yes 2 No ► (1.12)	(1.11) WRITE THE ID CODE OF [NAME's] MOTHER ► ► (1.13)	(1.12) Is the mother of [NAME] alive? 1 Yes 2 No	(1.13) What department was [NAME] born in ? 88 IN A FOREIGN COUNTRY		(1.14) Does [NAME] live in the same village/town where s/he was born? 1 Yes 2 No	(1.15) What is [NAME's] marital status? 1 Never married ► (1.18) 2 Monogamous marriage 3 Polygamous marriage 4 Widow(er) ► (1.18) 5 Divorced ► (1.18) 6 Separated ► (1.18)	(1.16) Does [NAME's] spouse live in the household? 1 Yes 2 No ► (1.18)	(1.17) WRITE THE ID CODES FOR THE SPOUSE(S)			
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SECTION 1 : SOCIO-DEMOGRAPHIC CHARACTERISTICS OF HOUSEHOLD MEMBERS

ID CODE	(1.18) Is]NAME] present at the time of the interview? 1 Present & seen 2 Present, but not seen 3 Absent	(1.19) During the last 12 months, how many months did [NAME] live in this household? WRITE 0 FOR LESS THAN 1 MONTH IF THE PERSON HAS BEEN IN THE HOUSEHOLD AT LEAST 6 MONTHS ► (1.21)	(1.20) Does [NAME] intend to stay in the household at least 6 months? 1 Yes 2 No	(1.21) During the last 12 months, how long was [NAME] absent from the household? IF NOT ABSENT, WRITE 0 IF 0 ► (1.24) **CODES UNITE** 1 Day 2 Month		(1.22) What is the principal reason for [NAME's] absence? 01 Seasonal work 02 Travel for work 03 Military service 04 Attend a ceremony (marriage, death, baptism, etc.) 05 Other family reasons/vacation 06 Health reasons 07 Temporarily called to help a household member 08 Pilgrimage/Mouloud/Religious reasons 09 Trip with animals to search for pasturage, water 10 Attending school outside of the area 11 Other	(1.23) Where did [NAME] go for this trip? 1 Same region 2 Other region in Niger 3 Neighboring country (Nigeria, Burkina, Tchad, Mali, Cameroun, Bénin) 4 Other African country 5 Foreign country (outside Africa)	(1.24) What is [NAME's] ethnicity? 01 Arab 02 Djerma/Songhai 03 Gourmantche 04 Haoussa 05 Kanouri-Manga 06 Peul 07 Touareg 08 Toubou 09 Other Nigerien ethnicity 10 Foreigner (non Nigerien)
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SECTION 2: EDUCATION ET ACCES TO ITC
PART A: EDUCATION (INDIVIDUALS 4 YEARS AND OLDER)

ID CODE	(2.00) ID CODE of the respondent	(2.01) Can [NAME] read a short text any language ? 1 Yes 2 No ► (2.04)	(2.02) Can [NAME] write a letter in any language ? 1 Yes 2 No ► (2.04)	(2.03) Can [NAME] do a calculation in any language ? 1 Yes 2 No	(2.04) Has [NAME] ever studied in a school or in a private course? 1 Formal school ► (2.06) 2 Koranic school 3 Literacy course 4 No	(2.05) What is the principal reason [NAME] has never studied in a formal school? **PERSONAL REASONS** **01** The classes were too difficult, drop out **02** The content of the education was not adapted **03** Work; studies finished/ **04** Marriage/ **05** Wants to be self-taught **06** Sickness disabled / **07** Couldn't understand the language **08** Too young to go to school/ **09** Too old to go to school **FAMILY REASONS** **10** The child must work/ **11** Studies are not productive **12** School fees too high **13** Lack of financial means/ **14** Family refusal **15** Pastoralism/ **16** Migration **ENVIRONMENTAL REASONS** **17** School is too far away **18** There is no teacher/ **19** There is no school **20** school is closed **21** Lack of guardian **22** Other ►► (2.26)	(2.06) How old was [NAME] when s/he entered school?	(2.07) Did [NAME] attend a school during the 2009/10 school year? 1 Yes 2 No ► (2.10)	(2.08) Who managed the school that [NAME] attended during the 2009/10 school year ? 1 Government 2 Religious Organization 3 Private 4 Community 5 Other (specify)	(2.09) What result did [NAME] achieve during school year 2009/10? 1 Diploma, finished studies 2 Passed to the next class 3 Failed 4 Drop out	(2.10) Did [NAME] attend school during the 2010/11 school year? 1 Yes ► (2.12) 2 No
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SECTION 2: EDUCATION AND ACCESS TO ITC
PART A: EDUCATION (INDIVIDUALS 4 YEARS AND OLDER)

ID CODE	(2.11) What was the principal reason you did not attend school in 2010/11? **PERSONAL REASONS** **01** The classes were too difficult, drop out **02** The content of the education was not adapted **03** Work; studies finished/ **04** Marriage/ **05** Wants to be self-taught **06** Sickness disabled / **07** Couldn't understand the language **08** Too young to go to school/ **09** Too old to go to school **FAMILY REASONS** **10** The child must work/ **11** Studies are not productive **12** School fees too high **13** Lack of financial means/ **14** Family refusal **15** Pastoralism/ **16** Migration **ENVIRONMENTAL REASONS** **17** School is too far away **18** There is no teacher/ **19** There is no school **20** school is closed **21** Lack of tutor **22** Other ►► (2.23)	(2.12) What is the instruction level that [NAME] attended in 2010/11? **1** Preschool **2** Primary **3** Secondary first cycle - general **4** Secondary first cycle technical & professional **5** Secondary second cycle general **6** Secondary second cycle technical & professional **7** Superior	(2.13) How many years did [NAME] study in this cycle? DO NOT COUNT REPEATED YEARS	(2.14) Is [NAME] satisfied with the service received at school? 1 Very satisfied 2 Satisfied 3 A little satisfie 4 Not at all satisfied	(2.15) As part of his/her schooling did [NAME] encounter any of the following problems? *Write 1 for YES or 2 for NON* *In the appropriate boxes*							(2.16) Who manages the school that [NAME] attends? 1 Government 2 Religious Organization 3 Private 4 The community 5 Other (specify)
					A Lack of books/supplies	B Mediocre teaching	C Overcrowded classrooms	D Lack of teachers	E Lack of toilets	F Frequency of fee demands	G Classroom in a bad state	
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SECTION 2: EDUCATION AND ACCESS TO ITC
PART A: EDUCATION (INDIVIDUALS 4 YEARS AND OLDER)

ID CODE	(2.17) How much was the tuition fee for [NAME] (including fees and premiums) for the 2010/2011 school year? **WRITE ZERO IF NOTHING WAS SPENT**	(2.18) How much was spent for supplies for [NAME] (books, notebooks, uniforms, etc..) for the 2010/2011 school year? **WRITE ZERO IF NOTHING WAS SPENT**	(2.19) How much was spent for accommodation at school or university for [NAME] for the academic year 2010/2011? **WRITE ZERO IF NOTHING WAS SPENT**	(2.20) How much was spent for school lunches or meals for [NAME] for the academic year 2010/2011? **WRITE ZERO IF NOTHING WAS SPENT**	(2.21) How much was spent on transportation costs for [NAME] for the academic year 2010/2011? **WRITE ZERO IF NOTHING WAS SPENT**	(2.22) What is the amount of the grant / financial aid that [NAME] received in the past 12 months? **WRITE ZERO IF THE PERSON DID NOT RECEIVE A GRANT OR ALLOWANCE** ►► (2.26)	(2.23) What is the highest level of instruction that [NAME] has achieved ? 1 Preschool 2 Primary 3 Secondary first cycle - general 4 Secondary first cycle technical & professional 5 Secondary second cycle general 6 Secondary second cycle technical & professional 7 Superior	(2.24) How many years did [NAME] study in this cycle? DO NOT COUNT REPEATED YEARS	(2.25) What was the year that [NAME] left school for the last time ? **Write 9998 if DK**
	AMOUNT IN FCFA	AMOUNT IN FCFA	AMOUNT IN FCFA	AMOUNT IN FCFA	AMOUNT IN FCFA	AMOUNT IN FCFA	CODE	YEARS	YEAR
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SECTION 2: EDUCATION AND ACCESS TO ITC
PART B: ACCESS TO ITC (INDIVIDUALS 15 YEARS OLD AND OLDER)

ID CODE	(2.26) Does [NAME] own a mobile telephone? 1 Yes ► (2.29) 2 No	(2.27) Even if [NAME] doesn't own a mobile telephone, has s/he used a mobile telephone in the last 30 days? 1 Yes 2 No ► (2.29)	(2.28) In what location or whose mobile telephone did [NAME] borrow? 1 Telephone of a household member 2 Someone who is not a household member 3 Phone box 4 Other	(2.29) Has [NAME] used a computer during the last 12 months? 1 Yes 2 No	(2.30) Has [NAME] used the internet (regardless of connection method) during the last 12 months? 1 Yes ► (2.32) 2 No	(2.31) Why hasn't [NAME] used the internet? 1 Doesn't understand the internet 2 No internet where s/he lives 3 Costs too much 4 No need for the service ►► NEXT SECTION	(2.32) Where has [NAME] used the internet? **Write 1 for YES and 2 for NO** A At home/External wireless adapter	B In the workplace	C Cybercafé	D Other	(2.33) How often has [NAME] used the internet during the last 12 months? 1 At least once a day 2 At least once a week 3 At least once a month 4 On average less than once a month
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SECTION 3: HEALTH
PART A: GENERAL HEALTH

ID CODE	(3.00) ID CODE of respondent	(3.01) Has [NAME] had a health problem, sickness or accident during the last 4 weeks? 1 Yes 2 No ▶ (3.21)	(3.02) What was the principal problem that [NAME] had? 1 Fever/Malaria 2 Diarrhea 3 Accident/Wound 4 Dental problem 5 Skin problem 6 Eye illness 7 Blood pressure problem 8 Typhoid fever 9 Ulcer 10 Ear/nose/throat 11 Diabetes 12 Meningitis 13 Other	(3.03) Did the health problem prevent [NAME] from his/her normal activities? 1 Yes 2 No ▶ (3.05)	(3.04) How long did the problem keep [NAME] from his/her normal activities? 1 Less than one week 2 Between one and two weeks 3 More than two weeks	(3.05) Did [NAME] consult a health service, a healer or a faith healer during the last 4 weeks for this health problem? 1 Yes ▶ (3.07) 2 No	(3.06) What is the principal reason that [NAME] didn't consult anyone? 1 Not necessary 2 Too expensive 3 Too far away 4 Self-medicated 5 No time/too occupied 6 Fear of the results 7 Family member refused 8 Lack of money 9 Other (specify) ▶▶ (3.21)	(3.07) Where did [NAME] consult for the first time for this health problem? **Public** 1 National Hospital or Regional Hospital 2 District Hospital 3 Maternity Center 4 Integrated Health Center 5 Health post **Private** 6 Private clinic 7 Private Christian Clinic/NGO 8 Pharmacy 9 Other	(3.08) Who did [NAME] consult the first time for this health problem? 1 Doctor 2 Nurse 3 Midwife 4 Community Health Worker 5 Pharmacist 6 Other modern method 7 Healer/faith healer	(3.09) Was [NAME] satisfied with the service provided at this first consultation? 1 Very satisfied 2 Satisfied 3 A little satisfied 4 Not at all satisfied
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SECTION 3: HEALTH
PART A: GENERAL HEALTH

ID CODE	(3.10) Did [NAME] have any of the following problems during the course of his/her visit? *Write 1 for YES and 2 for NO*								(3.11) How far from the dwelling did [NAME] travel to the location of this first consultation? 1 Less than 1 Km 2 1 to 5 Km 3 5 to 10 Km 4 10 to15 Km 5 15 Km or more	(3.12) How much did [NAME] pay for the consultation for this health problem in the last 4 weeks? **If the consultation was free, write 00** If 0, ► (3.15)	(3.13) Does [NAME] have health insurance or medical care that covers this kind of medical benefits? 1 Yes 2 No ► (3.15)	(3.14) Did the consultant fee declared in 3.12 cover the entire consultation fee or only the amount not covered by insurance? 1 The total cost 2 The amount not covered by insurance	(3.15) What was the amount for medical examination fees for this health problem during the last 4 weeks? **If the examination was free, write 00** If 0, ► (3.18)	(3.16) Does [NAME] have health insurance or medical care that covers this kind of medical benefits? 1 Yes 2 No ► (3.18)
	A	B	C	D	E	F	G	H						
	ESTABLISHMENT NOT CLEAN	LONG WAIT	UNQUALIFIED PERSONNEL	TOO EXPENSIVE	NO MEDICINES	INEFFECTIVE TREATMENT	UNPLEASANT ATTITUDES	OTHER	CODE	AMOUNT IN FCFA	CODE	CODE	AMOUNT IN FCFA	CODE
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SECTION 3: HEALTH
PART A: GENERAL HEALTH

ID CODE	(3.17) Did the examination fees declared in 3.15, cover the entire cost or only the amount not covered by insurance? 1 The total cost 2 The amount not covered by insurance	(3.18) How much was spent for medicine for this health problem during the last 4 weeks? **If the medicine was received for free, write 00** If 0, ▶ (3.21)	(3.19) Does [NAME] have health insurance or medical care that covers this kind of medical benefits? 1 Yes 2 No ▶ (3.21)	(3.20) Did the medicine costs declared in 3.18 cover the the entire cost or only the amount not covered by insurance? 1 The total cost 2 The amount not covered by insurance	(3.21) Was [NAME] hospitalized for this health problem or for any other health problem during the last 12 months? 1 Yes 2 No ▶ (3.27)	(3.22) What was the amount paid for hospitalization during the last 12 months? **If the hospitalization was free, write 00** If 0, ▶ (3.25)	(3.23) Does [NAME] have health insurance or medical care that covers this kind of medical benefits? 1 Yes 2 No ▶ (3.25)	(3.24) Did the hospital fees declared in 3.22 cover the entire cost or only the amount not covered by insurance? 1 The total cost 2The amount not covered by insurance	(3.25) Did [NAME] receive assistance from family or friends for this hospitalization? 1 Yes 2 No ▶ (3.27)	(3.26) How much assistance was received from relatives or friends?	(3.27) Did [NAME] have any other health expenses (self-medication, preventive care, purchase of preventive medicines, circumcision fees, etc) during the last 12 months? 1 Yes 2 No ▶ (3.29)
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SECTION 3: HEALTH
PART A: GENERAL HEALTH

ID CODE	(3.28) How much was spent for these expenses?	(3.29) Did [NAME] have any non-conventional health expenses (pay for a hospital bed, unexpected consultation fees, gifts in cash or in-kind for services, etc.) during the last 12 months?	(3.30) How much was spent for non-conventional health expenses?	(3.31) Does [NAME] a mosquito net?	(3.32) Did [NAME] sleep under a mosquito net last night?	(3.33) What type of mosquito net?	(3.34) Is [NAME] 15 years old or younger?	(3.35) What did [NAME] have for breakfast yesterday?
		1 Yes 2 No ▶ (3.31)		1 Yes 2 No ▶ (3.34)	1 Yes 2 No ▶ (3.34) 8 DK ▶ (3.34)	1 Simple 2 Dipped 8 Don't know	1 Yes 2 No ▶ (3.36)	00 No breakfast 01 Bean beignet (Awara) 17 Tuber ragout 02 Porridge 18 Cereal Couscous/Dambou 03 Millet pancake 19 Eggs 04 Wheat beignet 20 Gari with sugar and milk 05 Café au lait/Milk and bread 21 Gari with sugar 06 Millet beignet (Saala) 07 Cowpea rice 22 Gari prepared with oil & other condiments 08 **Dan waké** 23 Soup made with vegetables & meat 09 Bean bread & beignet 24 Plate of beans 10 Fresh milk/sour milk/yogurt 25 **Boule** 11 Yogurt + bread 26 Green leaves (Kopto) 12 Fried rice 27 Pancakes made from other cereals 13 Rice plus sauce 28 Breastmilk 14 Paste of cereal and sauce 29 Other 15 Pasta 16 Boiled tubers ▶▶ (3.38)
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SECTION 3: HEALTH
PART B: TOBACCO CONSUMPTION
INDIVIDUALS AGE 15 OR OLDER

SECTION 3: HEALTH
PART C: REPRODUCTIVE HEALTH (WOMEN FROM 12 TO 49 YEARS)

ID CODE	(3.36) Does [NAME] currently smoke cigarettes? 1 Yes 2 No ► (3.38)	(3.37) How often does [NAME] smoke cigarettes? 1 Several times a day 2 Once a day 3 Occasionally 4 Don't know	(3.38) Has [NAME] had at least one live birth during her life? 1 Yes 2 No ► (3.40)	(3.39) How old was [NAME] when she gave birth to her first child?	(3.40) Has [NAME] had at least one pregnancy during the last 12 months? 1 Yes 2 No ► (3.49)	(3.41) Did [NAME] receive pre-natal care during this pregnancy? 1 Yes 2 No ► (3.44)	(3.42) Who provided [NAME] with the pre-natal care during the pregnancy? 1 Doctor 2 Nurse 3 Midwife 4 Trained traditional birth attendant/Matron 5 Untrained traditional birth attendant 6 Other	(3.43) Where did [NAME] receive her pre-natal care during this pregnancy? **Public** 1 National Hospital or Regional Hospital 2 District Hospital 3 Maternity center 4 Integrated Health Center 5 Health post **Private** 6 Private clinic 7 Religious private clinic/NGO 8 Other	(3.44) What is the cost of the pre-natal care for [NAME] during this pregnancy?	(3.45) Did the pregnancy that [NAME] had during the last 12 months result in a live birth? 1 Yes 2 No 3 Currently pregnant ► Next section
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SECTION 3: HEALTH
PART C: REPRODUCTIVE HEALTH (WOMEN FROM 12 TO 49 YEARS)

CODE ID	(3.46) Who attended [NAME] during her last childbirth/abortion? 1 Doctor 2 Nurse 3 Midwife 4 Trained traditional birth attendant/Matron 5 Untrained traditional birth attendant 6 Other	(3.47) Where did [NAME] have her last childbirth or abortion? **Public** 1 National Hospital or Regional Hospital 2 District Hospital 3 Maternity Center 4 Integrated Health Center 5 Health post **Private** 6 Private clinic 7 Religious private clinic/NGO 8 Home 9 Other	(3.48) How much did [NAME] pay for her last childbirth/abortion?	(3.49) Does [NAME] or her husband currently use a contraception method to avoid a pregnancy? 1 Yes 2 No ▶ (3.51)	(3.50) What is the principal method used by [NAME] or her husband? 01 Female sterilization 02 Male sterilization 03 Pills 04 Intrauterine Device 05 Injections 06 Implants 07 Condoms 08 Breastfeeding 09 Periodic abstinence 10 Withdrawal 11 Traditional methods 12 Other ▶▶ Next section	(3.51) What is the principal reason that [NAME] or her husband do not use contraception? 1 Not married, widowed, divorced 2 Wants to have children 3 Partner doesn't want to 4 Forbidden by religion 5 Don't know modern methods 6 Too expensive 7 Not accessible 8 Other
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SECTION 4: EMPLOYMENT
PART A: REPORTED ACTIVITIES (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.00) Write the ID CODE of the respondent	(4.01) During the last 30 days, did [NAME] work at least one hour for an enterprise, for the state, for an employer or other person who is not a member of the household?	(4.02) And during the last 12 months?	(4.03) During the last 30 days, did [NAME] work at least one hour, with or without pay, in a field or garden that belongs to him/her or belongs to another member of the household? Or did [NAME] raise livestock?	(4.04) And during the last 12 months?	(4.05) During the last 30 days, did [NAME] work for at least one hour, with or without pay, in a business, processing activities, provide service for his own business or for the business of another household member? For example as an artisan, businessman, or independent fisherman, lawyer, doctor or other independent work?	(4.06) And during the last 12 months?	(4.07) During the last 30 days, did [NAME] work at least one hour as an occasional worker or part time?	(4.08) And during the last 12 months?	(4.09) During the last 30 days, did [NAME] work at least one hour as an apprentice with or without pay?	(4.10) And during the last 12 months?	(4.11) Among the responses to questions 4.01, 4.03, 4.05, 4.07 et 4.09 are there any affirmative responses (CODE 1)?
		1 Yes ► (4.03) 2 No	1 Yes 2 No	1 Yes ► (4.05) 2 No	1 Yes 2 No	1 Yes ► (4.07) 2 No	1 Yes 2 No	1 Yes ► (4.09) 2 No	1 Yes 2 No	1 Yes ► (4.11) 2 No	1 Yes 2 No	1 Yes ► PART B 2 No
	CODE ID	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE
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SECTION 4: EMPLOYMENT
PART A: REPORTED ACTIVITIES (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.12) Even if [NAME] didn't work during the last 30 days, does [NAME] have a job s/he would have worked during the last 30 days? 1 Yes 2 No ▶ (4.14)	(4.13) Why didn't [NAME] work during the last 30 days? 1 Holiday, vacation 2 Maternity leave 3 Temporary stop for his/her own reasons 4 Sick leave 5 Strike 6 Temporary suspension 7 En training 8 Other (specify) ▶▶ PART B	(4.14) Did [NAME] look for paid work during the last 30 days? 1 Yes 2 No ▶ (4.16)	(4.15) When is [NAME] available to work? 1 Immediately ▶ (4.17) 2 In less than a month ▶ (4.17) 3 More than a month	(4.16) What is the principal reason [NAME] did not look for work during the last 30 days or cannot work immediately? 01 Does not want to work 02 Student 03 Too young 04 Sickness/handicap 05 Housework 06 Too old/retired 07 Waiting to start own business 08 Waiting response to employment demand 09 Lack of employment 10 Don't know how to look 11 Seasonal unemployment 12 Other (specify) ▶▶ (4.22)	(4.17) How many months has [NAME] been unemployed?	(4.18) How many months has [NAME] been looking for work?
	CODE	CODE	CODE	CODE	CODE	MONTHS	MONTHS
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SECTION 4: EMPLOYMENT
PART A: REPORTED ACTIVITIES (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.19) Why is [NAME] looking for work? 1 Loss of previous job 2 In search of a first job **CODE**	(4.20) What methods has [NAME] used to look for work? Write 1 if YES and 2 if NO **in the appropriate boxes**							(4.21) What does [NAME] do to subsidize his/her needs? 1 Receives a pension 2 Receives rents 3 Receives grant/transfers 4 Lives on savings 5 Lives on the products from the last harvest 6 Receives free transfers 7 The family takes care of him/her 8 Begging 9 Other (specify) **CODE**	(4.22) At any time during the last 12 months, did [NAME] have paid work for a salary (for the state, a local collective or an enterprise) or work in his/her field or his/her garden, or for he own account or for another member of the household in a business, processing activities, a service? (For example, as an artisan, businessman, or independent fisherman, lawyer, doctor or other independent worker, excluding occasional work) 1 Yes ▶ PART B 2 No ▶ PART E **CODE**
		Personal relationships, family	Competitive exams, Requests to employers	Small announcements, Internet	ANPE	Employment office	Create own work	Other		
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SECTION 4: EMPLOYMENT
PART B: PRINCIPAL EMPLOYMENT DURING THE LAST 12 MONTHS (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.23) I would like to ask some questions on the principal employment that you have had during the last 12 months (or that you usually do, for the people on holiday, for example). Please describe the occupation or profession that [NAME] has done during the last 12 months. What is it that you do as part of this employment? (In the column on the left, write the description of the employment or the profession; in the column on the right, write the corresponding code after the interview. The codes for employment/profession are found in the annex of the Interviewer Manual.)		(4.24) What is the activity of the enterprise in which [NAME] worked or what products (services) are made or furnished by it? (In the column on the left write the description of the activity; in the column on the right write the correpsonding code after the interview. The codes for the activities are found in the annex of the Interviewer Manual.)		(4.25) What is [NAME's] socio-professional category in this employment? **Salaried** 1 Superior executive 2 Middle executive or Master Agent 3 Qualified worker or employee 4 Non qualified worker or employee 5 Laborer **Non Salaried** 6 Owner 7 Self employed worker 8 Family aide 9 Trainee or apprentice	(4.26) What is [NAME's] principal employer in this job? *READ ALL THE RESPONSES* 1 State/Local Collective ► (4.28) 2 Public enterprise 3 Large private enterprise 4 Individual enterprise 5 Business associations 6 Household ► (4.28) 7 International organization/Embassy ► (4.28)	(4.27) How many people work in the business (include the boss of the business)? 1 1 2 2 to 3 3 4 to 10 4 11 to 20 5 21 to 50 6 51 to 100 7 101 to 200 8 More than 200	(4.28) What is [NAME's] status in this employment? 1 Permanent 2 For a specific period 3 Temporary (Seasonal)
	EMPLOYMENT/PROFESSION	**CODE**	**ACTIVITY**	**CODE**	**CODE**	**CODE**	**CODE**	**CODE**
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SECTION 4: EMPLOYMENT
PART B: PRINCIPAL EMPLOYMENT DURING THE LAST 12 MONTHS (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.29) How many months has [NAME] done this work during the last 12 months?	(4.30) How many hours per day does [NAME] usually devote to this work?	(4.31) How many days per week does [NAME] usually devote to this work?	(4.32) What has been [NAME's] renumeration for this work during the last 12 months? TIME UNIT 1 DAY 2 WEEK 3 MONTH 4 YEAR For self-employed, calculate the operating surplus by subtracting the amount of sales		(4.33) Does [NAME] receive at least one of the following benefits (other than meals) with this employment? *Write 1 for YES and 2 for NO* *If all are 2 "No" ▶ (4.35)* Housing compensation	Clothing compensation	Fuel or transport compensation	Domestic worker compensation	Communication compensation	Water-Electricity compensation	School fee compensation	Family grants or other benefits	(4.34) What is the value that you would give to these benefits (only those not included in the salary)? If DK write 999998 If the benefits are all included in the salary, write 0 TIME UNIT CODE 1 DAY 2 WEEK 3 MONTH 4 YEAR	
	MONTHS	HOURS	DAYS	AMOUNT IN FCFA	TIME UNIT									AMOUNT IN FCFA	TIME UNIT
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SECTION 4: EMPLOYMENT
PART B: PRINCIPAL EMPLOYMENT DURING THE LAST 12 MONTHS (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.35) Do you receive meals as part of this employment? 1 Yes 2 No ▶ (4.37)	(4.36) What is the value that you would give to these meals? IF DK WRITE 99998 TIME UNIT CODE 1 DAY 2 WEEK 3 MONTH 4 YEAR		(4.37) Did [NAME] work in the same enterprise 12 months ago? 1 Yes 2 No ▶ (4.39) 3 Not applicabl ▶ (4.40)	(4.38) Did [NAME] have the same occupation 12 months ago? 1 Yes 2 No	(4.39) How has [NAME's] income changed since 12 months ago? (not including the benefits) 1 Lowered 2 Raised 3 Unchanged 4 Not applicable	(4.40) Are the taxes already taken from the income that [NAME] received? 1 Yes 2 No	(4.41) Does [NAME] benefit from retirement as part of this employment? 1 Yes 2 No	(4.42) Does [NAME] benefit from payed vacation as part of this employment? 1 Yes 2 No	(4.43) Does [NAME] benefit from sick leave as part of this employment? 1 Yes 2 No	(4.44) Does [NAME] benefit from health insurance as part of this employment? 1 Yes 2 No	(4.45) Does [NAME] benefit from free or subsidized medical care as part of this employment? 1 Yes 2 No	(4.46) Does [NAME] have a contract (where the salary is detailed) as part of this employment? 1 Yes 2 No	(4.47) Is there a union in the place where [NAME] works? 1 Yes 2 No ▶ (4.49)	(4.48) Does [NAME] belong to the union? 1 Yes 2 No	(4.49) Is [NAME's] principal employment as just described the same as the work that [NAME] has done for the last 30 days? 1 Yes 2 No ▶ PART C 3 Not applicable	(4.50) Did [NAME] have another job during the last 12 months, a job with a salary in a enterprise, agricultural salary, shopkeeper, artisan, independent or all activities generating income? 1 Yes 2 No ▶ PART D
	CODE	AMOUNT IN FCFA	TIME UNIT	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE	CODE
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SECTION 4: EMPLOYMENT
PART C: SECONDARY EMPLOYMENT DURING THE LAST 12 MONTHS (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.51) I would like to ask some questions on the secondary employment that you have had during the last 12 months (or that you usually do, for the people on holdiay, for example). Please describe the occupation or profession that [NAME] has done during the last 12 months. What is it that you do as part of this employment? (In the column on the left, write the description of the employment or the profession; in the column on the right, write the corresponding code after the interview. The codes for employment/profession are found in the annex of the Interviewer Manual.)		(4.52) What is the activity of the enterprise in which [NAME] worked or what products (services) are made or furnished by it? (In the column on the left write the description of the activity; in the column on the right write the correpsonding code after the interview. The codes for the activities are found in the annex of the Interviewer Manual.)		(4.53) What is [NAME's] socio-professional category in this employment? **Salaried** 1 Superior executive 2 Middle executive or Master Agent 3 Qualified worker or en 4 Non qualified worker or employee 5 Laborer **Non Salaried** 6 Owner 7 Self employed worker 8 Family aide 9 Trainee or apprentice	(4.54) What is [NAME's] principal employer in this job? 1 State/Local Collective 2 Public enterprise 3 Large private enterprise 4 Individual enterprise 5 Business association 6 Household 7 International organization/Embassy	(4.55) How many months has [NAME] done this work during the last 12 months?	(4.56) How many hours per day does [NAME] usually devote to this work?	(4.57) How many days per week does [NAME] usually devote to this work?	(4.58) What income does [NAME] earn in this employment (and include the income from benefits and services **TIME UNIT** 1 DAY 2 WEEK 3 MONTH 4 YEAR	
	EMPLOYMENT/PROFESSION	CODE	ACTIVITY	CODE	CODE	CODE	MONTHS	HOURS	DAYS	AMOUNT IN FCFA	TIME UNIT
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SECTION 4: EMPLOYMENT
PART C: SECONDARY EMPLOYMENT DURING THE LAST 12 MONTHS (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.59) Did [NAME] work in the same enterprise 12 months ago? 1 Yes 2 No ▶ (4.61) 3 Not applicable ▶ (4.62)	(4.60) Did [NAME] have the same occupation 12 months ago? 1 Yes 2 No	(4.61) How has [NAME's] income changed since 12 months ago? 1 Lowered 2 Increased 3 Unchanged 4 Not applicable	(4.62) Are the taxes already taken from the income that [NAME] received? 1 Yes 2 No	(4.63) Does [NAME] receive bonuses, commisions, or incentives for this employment? 1 Yes 2 No	(4.64) Is there a union in the place where [NAME] works? 1 Yes 2 No ▶ (4.66)	(4.65) Does [NAME] belong to this union? 1 Yes 2 No	(4.66) Other than the principal and secondary employment, did [NAME] have other employment during the last 12 months? 1 Yes 2 No ▶ PART D	(4.67) What is the total income that [NAME] has from thiese other employments? (And include the amounts received in the form of goods and services) TIME UNIT 1 DAY 2 WEEK 3 MONTH 4 YEAR	
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SECTION 4: EMPLOYMENT
PART D: SEARCH FOR SUPPLEMENTARY EMPLOYMENT (INDIVIDUALS 5 YEARS OLD AND OLDER)

ID CODE	(4.68) Has [NAME] looked for paid supplementary employment during the last 30 days? 1 Yes 2 No ► PART E CODE	(4.69) What methods had [NAME] used to search for this employment? *Write 1 for YES and for NO iin the appropriate box* Personal relationships, family	Competitive exams, Requests to employers	Small announcements, Internet	ANPE	Employment office	Create own work	Other	(4.70) What type of work has [NAME] looked for in the last 30 days? Work 1 Independent 2 Salaried 3 Both CODE	In the 1 Private 2 Public 3 Both CODE	Work 1 Agricultural 2 Non agric. 3 Both CODE	(4.71) Why did [NAME] look for supplementary work? 1 End of contract 2 Seasonal work 3 Insufficient income 4 Looking for better working conditions 5 Looking for work that corresponds to his/her qualifications 6 Seeking employment to increase revenues 7 Other (specify) CODE
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SECTION 4: EMPLOYMENT
PART E: TIME USE (INDIVIDUAL5 YEARS OLD AND OLDER)

ID CODE	(4.72) During the last 7 days, did [NAME] spend any time gathering firewood for the household? 1=Yes 2=No ► 4.75	(4.73) How many days did [NAME] collect firewood during the last 7 days?	(4.74) On average how many minutes per day did [NAME] spend collecting firewood during the last 7 days, and include the time taken to go to and return from the place where the wood was collected.	(4.75) During the last 7 days, did [NAME] spend any time fetching water for the household? 1=Yes 2=No ► 4.78	(4.76) How many days did [NAME] fetch water during the last 7 days?	(4.77) On average how many minutes per day did [NAME] spend fetching water during the last 7 days, and include the time taken to go to and return from the place where the water was collected.	(4.78) During the last 7 days, did [NAME] spend any time cooking for the household? 1=Yes 2=No ► 4.81	(4.79) How many days did [NAME] cooking during the last 7 days?	(4.80) On average how many minutes per day did [NAME] spend cooking during the last 7 days.
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SECTION 4: EMPLOYMENT
PART E: TIME USE (INDIVIDUAL5 YEARS OLD AND OLDER)

ID CODE	(4.81) During the last 7 days, did [NAME] spend any time doing the laundry for the household? 1=Yes 2=No ▶ 4.84	(4.82) How many days did [NAME] do laundry during the last 7 days?	(4.83) On average how many minutes per day did [NAME] spend doing laundry during the last 7 days.	(4.84) During the last 7 days, did [NAME] spend any time ironing clothes for the household? 1=Yes 2=No ▶ 4.87	(4.85) How many days did [NAME] ironing clothes during the last 7 days?	(4.86) On average how many minutes per day did [NAME] spend ironing clothes during the last 7 days.	(4.87) During the last 7 days, did [NAME] spend any time cleaning the household? 1=Yes 2=No ▶ 4.90	(4.88) How many days did [NAME] do the cleaning during the last 7 days?	(4.89) On average how many minutes per day did [NAME] spend cleaning during the last 7 days.
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SECTION 4: EMPLOYMENT
PART E: TIME USE (INDIVIDUAL5 YEARS OLD AND OLDER)

ID CODE	(4.90) During the last 7 days, did [NAME] spend any time doing the shopping for the household? 1=Yes 2=No ▶ 4.93	(4.91) How many days did [NAME] do the shopping during the last 7 days?	(4.92) On average how many minutes per day did [NAME] spend shopping during the last 7 days.	(4.93) During the last 7 days, did [NAME] spend any time studying or reviewing lessons? 1=Yes 2=No ▶ Next person	(4.94) How many days did [NAME] study or review lessons during the last 7 days?	(4.95) On average how many minutes per day did [NAME] spend studying or reviewing lessons during the last 7 days.
	CODE	JOURS	MINUTES	CODE	JOURS	MINUTES
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SECTION 5: NON-AGRICULTURAL ENTERPRISES
PART A: EXISTENCE OF NON-AGRICULTURAL ENTERPRISES

(5.01)	Write the ID CODE of the respondent	
(5.02)	During the last 12 months, did a member of your household transform agricultural products or meat for resale (for example transform wheat to make beignets; grill beef, lamb, or chicken; make fruit juice - ginger, bissap - to sell, sell ice cream, make beer from corn or millet, modern bakery, etc)? **1. Yes** **2. No**	
(5.03)	During the last 12 months, did a member of your household own, in the dwelling or somewhere else, a small enterprise to make clothing (tailor), to make sandals, or other shoes? **1. Yes** **2. No**	
(5.04)	During the last 12 months, did a member of your household own, in the dwelling or somewhere else, an enterprise in the housing construction field (masonry, electricity, plumbing) or in field of carpentry (making furniture, beds, doors, windows) in wood or in metal like iron or aluminum? **1. Yes** **2. No**	
(5.05)	During the last 12 months, did a member of your household own, in the dwelling or somewhere else, a business enterprise (boutique, tablier, selling construction materials, or computers, or telephone cards or cigarettes on the side of the road, etc.)? **1. Yes** **2. No**	
(5.06)	During the last 12 months, did a member of your household practice a liberal profession for his/her own account (doctor, lawyer, architect with his own office or as an associate, pharmacist with his own office, translator or interpreter working as his own boss, engineer having his own office) or practicing traditional medicine? **1. Yes** **2. No**	
(5.07)	During the last 12 months, did a member of your household own an enterprise providing all other services; services for the repairs and maintenance (cars, motos, radios, computers, TV, refrigerator, air conditioners, etc.) washing cars; polishing shoes; real estate agent; telephone cabin, word processing, photocopying documents, etc? **1. Yes** **2. No**	
(5.08)	During the last 12 months, did a member of your household own a taxi, a transport bus, or other transport method for a commercial activity? **1. Yes** **2. No**	
(5.09)	During the last 12 months, did a member of your household own a restaurant or bar? **1. Yes** **2. No**	
(5.10)	During the last 12 months, did a member of your household own any other non-agricultural enterprise, even if it was a small activity practiced in the dwelling or in the street (example: making artisan objects, carpets, jewelry, hair dressing, etc.)? **1. Yes** **2. No**	

IF THE RESPONSE TO ONE OF THE QUESTIONS 5.02 TO 5.10 IS YES, GO TO PART B.
IF THE RESPONSE TO ALL OF THE QUESTIONS 5.02 TO 5.10 IS NO, GO TO SECTION 6.
INCLUDE ALL OF THE ACTIVITIES THAT HAVE FUNCTIONED DURING THE LAST 12 MONTHS EVEN IF THEY ARE TEMPORARILY
OR PERMANENTLY CLOSED AT THE MOMENT OF THE INTERVIEW

SECTION 5: No AGRICULTURAL ENTERPRISES
PART B : CHARACTERISTICS OF THE NON-AGRICULTURAL ENTERPRISES

(5.00) Write the number of enterprises owned by the household :

ID CODE OF ENTERPRISE	(5.11) Indicate the principal good and/or service produced by this enterprise.	(5.12) Activity Code	(5.13) What is the ID CODE of the principal respondent for this enterprise?	(5.14) What is the ID CODE of the owner(s) of this enterprise? (Maximum of 2)		(5.15) What is the ID CODE of the person(s) who manage(s) this enterprise? (Maximum of 2)		(5.16) Since what date has this enterprise been in business?		(5.17) How many non-household members are co-owners of this enterprise? IF ZERO ▶ 5.19
		ACTIVITY CODE		**Owner 1**	**Owner 2**	**Mgr 1**	**Mgr 2**			
	Product/Service		**ID CODE**	**ID CODE**	**ID CODE**	**ID CODE**	**ID CODE**	**MONTH**	**YEAR**	**NUMBER**
1										
2										
3										
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5										
6										

ID CODE OF THE ENTERPRISE	(5.18) What part of the profits come to the household? 1. Almost None 2. 25% 3. 50% 4. 75% 5. Almost all	(5.19) Where was this enterprise operated? 1 Professional premises (office, workshop, store, garage, etc.) 2 Fixed location on a public road 3 Mobile location on a public road 4 In the dwelling 5 In the dwelling of the clients 6 Car/Moto 7 Street peddler 8 Other	(5.20) Does the enterprise have electricity? 1. Yes 2. No	(5.21) Does the enterprise have running water? 1. Yes 2. No	(5.22) Does this enterprise or its manager have a telephone? 1. Yes 2. No	(5.23) Does the enterprise have written accounts? 1. Yes 2. No	(5.24) Does the enterprise have a fiscal identification number (NIF)? 1. Yes 2. No	(5.25) Is the enterprise registered in the Commercial Register (RC)? 1. Yes 2. No	(5.26) Are the workers in the enterprise registered in the CNSS? 1. Yes 2. No 3. NA	(5.27) What is the legal form of this enterprise? 1. Individual enterprise 2. Other
	CODE	**CODE**	**CODE**	**CODE**	**CODE**	**CODE**	**CODE**	**CODE**	**CODE**	**CODE**
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SECTION 5: NON AGRICULTURAL ENTERPRISES
PART B : CHARACTERISTICS OF THE NON AGRICULTURAL ENTERPERISES

ID CODE OF THE ENTERPRISE	(5.28) How much did you spend to purchase merchandise to resale as is, without transformation, **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)	(5.29) How much did you spend for primary materials **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)	(5.30) How much did you spend for other intermediate expenditures (telephone, transport, supplies, etc.) **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)	(5.31) How much did you spend in rent, water and electricity **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)	(5.32) How much did the enterprise pay in taxes **during the last 12 months** ? (WRITE 0 IF NO EXPENSES)	(5.33) What is the amount obtained from the resale of merchandise purchased and resold as is **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)	(5.34) What is the amount obtained from the sale of products transformed by the enterprise **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)	(5.35) What is the amount obtained for services rendered by the enterprise **during the last 30 days or during the last month the enterprise was in business**? (WRITE 0 IF NO EXPENSES)
	AMOUNT IN FCFA	**AMOUNT IN FCFA**	**AMOUNT IN FCFA**	**AMOUNT IN FCFA**	**AMOUNT IN FCFA**	**AMOUNT IN FCFA**	**AMOUNT IN FCFA**	**AMOUNT IN FCFA**
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SECTION 5: NON AGRICULTURAL ENTERPRISES
PART B : CHARACTERISTICS OF THE NON AGRICULTURAL ENTERPRISES

| ID CODE OF THE ENTERPRISE | (5.36) Is this enterprise currently in business? 1. Yes 2. No | (5.37) How many months during the last 12 months was the enterprise in business? If 12 ► 5.39 | (5.38) Why wasn't the enterprise in business for all of the last 12 months? 1. Bankruptcy 2. Seasonal activity 3. Lack of workers 4. Lack of primary materials/technical problems 5. Created within last 12 months 6. Closed for non-payment of taxes 7. Other (specify) | (5.39) Family workers who worked in the enterprise during the last 12 months. For each household member who worked in the business, provide the information below, beginning with the head of the enterprise A. ID CODE of the person B. Number of months during the last 12 months that the person worked in the enterprise C. Number of days per months that the person dedicated to the enterprise D. Number of hours per day that the person dedicated to the enterprise | | | | | | | | | | | | | | | |

		NUMBER OF MONTHS	CODE	Person 1				Person 2				Person 3				Person 4			
				ID	Months	Days	H	ID	Months	Days	H	ID	Months	Days	H	ID	Months	Days	H
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2																			
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4																			
5																			
6																			

SECTION 5:NON AGRICULTURAL ENTERPRISES
PART B : CHARACTERISTICS OF NON AGRICULTURAL ENTERPRISES

ID CODE OF THE ENTEPRISE	(5.40) Salaried workers in the enterprise in the last 30 days or the last month that the enterprise was in business A. Number of people in the category that worked in the enterprise during his period B. Number of days that a person in the category worked in the enterprise during this period C. Number of hours per day that a person in the category worked in the enterprise during this period D. Salary paid to a person of the category who worked in the enterprise during this period											
	Men				Women				Children (less than 15 years old)			
	A	B	C	D	A	B	C	D	A	B	C	D
1												
2												
3												
4												
5												
6												

SECTION 6 : CHARACTERISTICS OF THE DWELLING

(6.00) Write the ID CODE of the principal respondent to this section : ☐☐

(6.01) Type of accommodation ? ☐
   1   Apartment in a building, Studio
   2   Room (for sleeping)
   3   Traditional hut, isolated or in a concession
   4   Traditional individual house
   5   Modern house in a concession
   6   Modern villa
   7   Célibatérium
   8   Other

(6.02) How many rooms are there in the dwelling?
            NUMBER: ☐
**DO NOT INCLUDE KITCHENS, BATHROOMS,
CORRIDORS OR BALCONIES**

(6.03) What is your occupation status ? ☐
   1   Owner with land title/property act   (6.08)
   2   Owner without land title or property act   (6.08)
   3   Owner/family with land title   (6.08)
   4   Owner/family without land title   (6.08)
   5   Tenant
   6   Installment plan   (6.08)
   7   Free lodging (relative, friends)   (6.10)
   8   Lodging that comes with work   (6.10)
   9   Other   (6.10)

(6.04)   What is the monthly rent? (FCFA)
☐☐☐☐☐☐☐

(6.05) Is the rent paid partially or totally by someone who is not a member of the household? ☐
   1 Yes
   2 No   ▶   (6.10)

(6.06) Who is the non-household member who partially or totally pays the rent?
(Indicate the most important) ☐
   1   Relative
   2   Friend or other person
   3   Private employer
   4   Government
   5   Public enterprise
   6   Other

(6.07) How much of the monthly rent, including the utilities (water, electricity, telephone etc.) is paid by this No-household member? (FCFA)
☐☐☐☐☐☐☐
        ▶▶   (6.10)

(6.08) During the last 12 months, has the household paid the bills for this dwelling ? ☐
   1 Yes
   2 No ▶ (6.10)

(6.09) How much are the monthly bills ? (FCFA)
☐☐☐☐☐☐☐

(6.10) What is the principal construction material of the exterior walls? ☐
   1   Dirt
   2   Cement/Concrete/Stones with cement
   3   Stones with mud
   4   Wood/Straw
   5   Sheet metal
   6   Bricks
   7   Stabilized earth
   8   Other

(6.11) What is the principal material of the roof? ☐
   1 Sheet metal
   2 Tile
   3 Concrete
   4 Hides/skins
   5 Wood
   6 Dirt
   7 Straw
   8 Other

(6.12) What is the principal material covering the floor of the dwelling? ☐
   1   Dirt/sand
   2   Cement/concrete
   3   Tiles/marble
   4   Carpet/polished wood
   5   Other

(6.13) Is the dwelling connected to the SEEN water network ? ☐
   1 Yes
   2 No   ▶ (6.16)

(6.14) Is the running water system included in the rent or the utilities of the dwelling? ☐
   1 Yes ▶ (6.16)
   2 No
   3 Not applicable

(6.15) How much was the water bill last month ?
(In FCFA)
☐☐☐☐☐☐

SECTION 6 : DWELLING (cont'd.)

(6.16) Does the household have any other water expenses (other than those already mentioned)?

    1 Yes

    2 No ► (6.18)

(6.17) What is the amount of these other expenses during the last 30 days? (In FCFA)

    ☐ ☐ ☐ ☐ ☐ ☐

(6.18) what is the principal source of drinking water for the household?

    WATER FROM A TAP
    11 Inside the dwelling
    12 In the courtyard/concession   **Dry season**
    13 Neighbor's tap
    14 Neighborhood fountain/public tap   ☐ ☐
    OPEN WELL
    15 Open well in the dwelling
    16 Open well in the courtyard/concession
    17 Open well somewhere else
    COVERED WELL OR BOREHOLE
    18 Covered well in the dwelling
    19 Covered well in the courtyard/concession
    20 Protected well somewhere else
    21 Borehole   **Rainy season**
    SURFACE WATER
    22 Organized source   ☐ ☐
    23 Non organized source
    24 River/Lake/Dam
    OTHER SOURCES
    25 Tanker truck
    26 Traveling vendors (Garoua)
    27 Bottled water
    28 Mini AEP
    29 Rain water
    30 Other

(6.19) What is the distance (in meters) that separates the dwelling and the principal source of drinking water during the dry season?

If the source is in the dwelling, write 0 ► (6.21)   ☐ ☐ ☐ ☐

(6.20) How long (in minutes) does it take to go to the principal source of drinking water during the dry season?

Time taken to go   **Minutes**   ☐ ☐

Time taken to collect the water once at the source   **Hours/Minutes**   ☐ ☐ / ☐ ☐

(6.21) What is the distance (in meters) that separates the dwelling and the principal source of drinking water during the rainy season?

If the source is in the dwelling, write 0 ► (6.23)   ☐ ☐ ☐ ☐

(6.22) How long (in minutes) does it take to go to the principal source of drinking water during the rainy season ?

Time taken to go   **Minutes**   ☐ ☐

Time taken to collect the water once at the source   **Hours/Minutes**   ☐ ☐ / ☐ ☐

(6.23) Is the household connected to the NIGELEC electricity network ?

    1 Yes

    2 No ► (6.26)

(6.24) Is the electricity service included in the rent or the utilities of the dwelling?

    1 Yes   ► (6.26)

    2 No

    3 Not applicable

(6.25) What was the amount of the electricity bill last month? (IN FCFA)

    ☐ ☐ ☐ ☐ ☐ ☐

(6.26) What is the principal source of lighting in your dwelling?

    1 Electricity
    2 Generator ► (6.31)
    3 Oil lamp ► (6.31)
    4 Battery lamp ► (6.31)
    5 Other ► (6.31)

(6.27) During the last 7 days was there at least one electricity cut in your dwelling?

    1 Yes

    2 No ► (6.31)

(6.28) How many days did you have an interruption to the electricity in your dwelling during the last 7 days?

Number of days   ☐

(6.29) How many cuts, on average, per day?

    ☐

(6.30) how long does the average cut last?

    1 Less than 15 minutes
    2 15 to 30 minutes
    3 30 minutes to an hour
    4 From 1 to 3 hours
    5 More than 3 hours

(6.31) Does the household have any other expenses for electricity (other than those already mentioned)?

    1 Yes

    2 No ► (6.33)

SECTION 6 : DWELLING (End)

(6.32) What is the amount of these other expenses during the last 30 days? (In FCFA)

☐ ☐ ☐ ☐ ☐ ☐

(6.33) Is the dwelling connected to the SONITEL telephone network (landline)?

1 Yes
2 No ► (6.36)

☐

(6.34) Is the landline telephone service included in the rent?

1 Yes ► (6.36)
2 No
3 Not applicable

☐

(6.35) How much was the landline telephone bill last month or how much did you spend to recharge your landline telephone? (FCFA)

☐ ☐ ☐ ☐ ☐ ☐

(6.36) Is the household connected to an internet network (including Internet external wireless connections)?
1 Yes
2 No ► (6.40)

☐

(6.37) Is the internet service included in the rent?
1 Yes ► (6.40)
2 No
3 Not applicable

☐

(6.38) What was the amount of the internet bill last month or how much did you spend for your Internet external wireless connection? (In FCFA)

☐ ☐ ☐ ☐ ☐ ☐

(6.39) What is the principal internet network to which the household is connected?

1 SONITEL   4 SAHELCOM
2 AIRTEL   5 ORANGE
3 MOOV   6 AUTRE

☐

(6.40) Does the household subscribe to television through cable, satellite or ADSL?

1 Yes
2 No ► (6.43)

☐

(6.41) Is the subscription through cable, satellite or ADSL included in the rent?

1 Yes ► (6.43)
2 No
3 Not applicable

☐

(6.42) What was the amount of the bill last month? (In FCFA)

☐ ☐ ☐ ☐ ☐ ☐

(6.43) What are the two sources of fuel used by the household for cooking?
1   Gathered firewood
2   Purchased firewood   1 ☐
3   Wood charcoal
4   Gas
5   Electricity
6   Oil
7   Biomass   2 ☐
8   Other

(6.44) How does the household get rid of its household garbage?
1 Public dump/ Container
2 Private collection
3 Thrown out by the household
4 Burned by the household
5 Buried by the household
6 Other

☐

(6.45) What type of toilet does the household have?

1 Flush toilet
2 Improved covered latrine
3 Uncovered improved latrine
4 Pit/open hole
5 No toilet (outside)   ► (6.49)
6 Other

☐

(6.46) Does the household share the toilet with other households ?

1 Yes
2 No   ►   (6.48)

☐

(6.47) How many other households use the toilets?

Number: ☐ ☐

(6.48) How does the household get rid of its waste?

1   Vacuum truck
2   Transfer into a hole
3   Rainwater, river
4   Other

☐

(6.49) What is the principal method to get rid of waste water in the household?
1 Sump (modern pit)
2 Open hole
3 Gutter
4 In nature
5 Other

☐

SECTION 7: DURABLE GOODS

(7.01) CODE D'ARTICLE	ARTICLES	(7.02) Does any member of the household own [ARTICLE] in good working order? 1 Yes 2 No ► NEXT ARTICLE	(7.03) How many [ARTICLE]?	(7.04) How long have you been in possession of [ARTICLE]? (IF SEVERAL, CONSIDER THE AGE OF THE NEWEST)	(7.05) What is the purchase value of the [ARTICLE]? (IF SEVERAL CONSIDER THE NEWEST)	(7.06) What is the current value (or selling price) of the [ARTICLE]? (IF SEVERAL, CONSIDER THE NEWEST)
		CODE	NUMBER	YEARS	AMOUNT IN FCFA	AMOUNT IN FCFA
141	Armchair					
142	Living room set (armchairs & table)					
143	Chair					
144	Table					
145	Dining table and chairs					
146	Simple bed					
147	Simple mattress					
148	Bed and mattress					
149	Other furniture					
150	Iron					
151	Gas stove					
152	Oil stove					
153	Sewing machine					
154	Moulinex/Food processor					
155	Gas cooker					
156	Improved stove					
157	Refrigerator/freezer					
158	Fan					
159	Air conditioner/split					
160	Simple radio/Radio cassette					
161	Television set					
162	Tape player/CD/DVD					
163	Parabolic antenna/decoder					
164	Private car (not used for business)					
165	Moped					
166	Bicycle					
167	Camera					
168	Musical instrument					
169	Landline telephone					
170	Portable telephone					
171	Computer					
172	Video camera					
173	Generator					
174	Wheelbarrow					

SECTION 8 : NON EMPLOYMENT REVENUE

(8.01) CODE	Source of the non employment revenues	(8.02) Has any member of your household benefitted from [REVENUE SOURCE]? 1 Yes 2 No ► Next source	(8.03) ID CODE of the household members benefitting from the [REVENUE SOURCE] and the annual amounts received									
			First person		Second person		Third person		Fourth person		Fifth person	
			ID CODE	AMOUNT IN FCFA	ID CODE	AMOUNT IN FCFA	ID CODE	AMOUNT IN FCFA	ID CODE	AMOUNT IN FCFA	ID CODE	AMOUNT IN FCFA
1	Retirement pension (civil and military, and including veterans)											
2	Widow pension (in case of loss of spouse)											
3	Disability pension (in case of an accident at work)											
4	Alimony (in case of divorce)											
5	Housing rental											
6	Capital and financial income (dividends from shares, interest on investments, etc.)											

SECTION 9 : RETROSPECTIVE NON FOOD EXPENDITURES
PART A: NON FOOD EXPENDITURES DURING THE LAST 7 DAYS

(9.01) Product Code	PRODUCT	(9.02) Has your household purchased [PRODUCT] during the last 7 days? 1. Yes 2 No ► Next product CODE	(9.03) How much was spent during the last 7 days? Amount in FCFA
101	Matches		
102	Firewood for heat		
103	Wood charcoal/Coal		
104	Batteries, candles		
105	Kerosene		
106	Urban transport in taxi, bus, moto		
107	Prepaid telephone cards/Shap Shap for mobile telephone		
108	Newspapers and magazines		
109	Fee to mill grains		

PART B: NON FOOD EXPENDITURES DURING THE LAST 30 DAYS

(9.01) Product Code	PRODUCT	(9.02) Has your household purchased [PRODUCT] during the last 30 days? 1. Yes 2 No ► Next product CODE	(9.03) How much was spent during the last 30 days? Amount in FCFA
201	Domestic gas		
202	Fuel for vehicles (Gas, gas mix; gas-oil)		
203	Lubricants (motor oil; brake fluid; battery acid; grease; other lubricants n.d.a.)		
204	Repair & maintenance services (oil change, grease, etc.) for personal transportation (cars, motos, bicycles, etc.)		
205	Household soap, powdered detergent, detergents (bleach, etc.)		
206	Insecticide, anti-mosquito twist		
207	Bath soap		
208	Skin cream (glycérine, vaseline, etc.)		
209	Feminine hygiene products, disposable diapers for baby, etc.		
210	Other beauty products (razor, shampoo, cotton balls, etc.)		
211	Expenses for hairdressing for men & women (salon, braiding, hair cut, etc.), manicure, pedicure		
212	Toothpaste		
213	Toothbrush		
214	Toilette paper		
215	Light bulbs		
216	Expenses for postage stamps, money orders, sending faxes, etc.		
217	Expenses for using telephones in a phone box		
218	Fee to use internet in a cybercafé		
219	Legalization fees (preparation) of administrative documents (acts of civil status, degrees, etc.).		
220	Expenses to photocopy documents		
221	Expenses to pick up household garbage		
222	Fee to launder clothing, linens, etc. (Pressing)		
223	Wages for household domestics (guard, boy, driver, etc.)		
224	Transport by boat		
225	Transport in an animal powered vehicle		
226	Inter-urban transport in bus, car, taxi		

PART C: NON FOOD EXPENDITURES DURING THE LAST 6 MONTHS

(9.01) Product Code	PRODUCT	(9.02) Has your household purchased [PRODUCT] during the last 6 months? 1. Yes 2 No ► Next product CODE	(9.03) How much was spent during the last 6 months? Amount in FCFA
301	Cloth for clothing: cloth fabric, cloth weaver's cloth, synthetic fabric, etc..		
302	Clothing for men (15 years & older): shirt, pants, jacket, suit, work clothes, etc.		
303	Under clothes for men (15 years & older): underwear, socks, tee shirt & undershirt, etc.		
304	Clothing for women (15 years & older): dress, skirt, pants, suit, etc.		
305	Under clothes for women (15 years & older): underwear, slip, tee shirt, bra, panty hose, etc.		
306	Children's clothing (0-14 years): clothes for baby, shirts, boys pants, girls dresses, children's underwear, blouses, etc.		
307	Other articles of clothing: veils/scarves, ties, belts, hats/bonnets, cloth handkerchiefs, notions (buttons, thread, etc.)		
308	Expenses to make and repair men's clothing: suit, pants, shirts, repairs, clothing rental, etc.		
309	Expenses to make and repair women's clothing: dress, pants, skirt, suit, repair, rental, etc.		
310	Expenses to make and repair children's clothing		
311	Men's shoes		
312	Women's shoes		
313	Children's shoes		
314	Shoe repair: resole, polish, etc.		
315	Household linens and associated articles (bath towels, sheets, blanket, bed cover, pillows, mosquito nets, mats, curtains, etc.)		
316	Crockery: plates, knives, forks, spoons, tumblers, glasses, etc.		
317	Cooking utensils: saucepan, pot, local sieve, repair of cooking utensils, etc.		
318	Other household utensils: bucket, kettle, baby bottle, trash can, cups, non electric coffee maker, teapot, gourd, ladle, jar, mortar, pestle, etc.		
319	Food, Expenses for care, Expenses for veterinary services for household pets (dogs, cats, etc.)		
320	Household tools: electric lamps, flashlight, oil lamp, tools (hammer, screwdriver, etc.); garden tools (shovel, rake, wheelbarrow, etc.);		
321	Material to maintain and repair the dwelling		
322	Labor and services for maintenance and repairs for the dwelling (clean the septic tank, labor for maintenance of the dwelling, etc.)		
323	Detachable parts for household transportation: tires, batteries, spark plugs, carburetor, etc.		
324	Small electronic materials for personal use: cassettes, CD/DVD, USB key, ink for printers, photo paper, film, etc.		
325	Furniture repair (armchairs, chairs, beds, armoires, etc.)		
326	Repair of electrical equipment (iron, fridge, cooker, oven, stove, air conditioner, fan, water heater, etc.)		
327	Repair of electronic devices: radio, radio-cassettes, TV, camera, CD/DVD reader, computer, etc.		
328	Sports and relaxation equipment: ball, games, petanque balls, card games, games for children, video games, small musical instruments, etc.		
329	Tickets for sporting events, cinema, concert, theatre, museum, expositions, etc.		
330	Other recreation services: PMU tickets, photographer services (developing, printing), identification photo, etc.		

PART C: NON FOOD EXPENDITURES DURING THE LAST 6 MONTHS

(9.01) Product Code	PRODUCT	(9.02) Has your household purchased [PRODUCT] during the last 6 months? 1. Yes 2 No ► Next product **CODE**	(9.03) How much was spent during the last 6 months? **Amount in FCFA**
331	Other cultural services: non-school books, comic strips, ream of paper, envelopes, drawing materials (brushes, paper, paints, etc.), etc.		
332	Personal care articles: perfume & toilette water, beauty products (nail polish, lipstick, relaxer etc.), hair products, wigs, etc.		
333	Lodging services: hotel rooms, etc.		
334	Watches, alarm clocks		
335	Earrings, necklaces, bracelets, jewelry, other articles of jewelry n.d.a.		
336	Other personal articles: suitcase, suitcase, handbag, sunglasses, umbrellas, parasol, walking stick, purse, wallet, smoking articles (ashtray etc.); articles for the baby (stroller, car seat), funeral articles, etc.		
337	Other services: announcements on the radio, in the newspaper, on television, funeral director, etc.		

PARTIE D: DEPENSES NON ALIMENTAIRES DES 12 DERNIERS MOIS

(9.01) Product Code	PRODUCT	(9.02) Has your household purchased [PRODUCT] during the last 12 months? 1. Yes 2 Non ► Next product **CODE**	(9.03) How much was spent during the last 12 months? **Amount in FCFA**
401	Private courses		
402	Professional training		
403	Expenses for adult courses		
404	Corrective lenses, glasses frames		
405	Hearing device		
406	Dental prosthesis		
407	Wheel chair and handicapped bike with or without motor		
408	Crutches		
409	Other therapeutic or orthopedic devices n.d.a.		
410	Expenses for health insurance, travel insurance, life insurance, etc.		

PART D: NON FOOD EXPENDITURES DURING THE LAST 12 MONTHS

(9.01) Product Code	PRODUCT	(9.02) Has your household purchased [PRODUCT] during the last 12 months? 1. Yes 2 No ► Next product CODE	(9.03) How much was spent during the last 12 months? Amount in FCFA
411	Expenses for transportation insurance (auto, moto, etc.)		
412	Automobile/moto tax disk		
413	Fee to subscribe to the network of water distribution		
414	Fee for the subscription to the network for electricity distribution		
415	Housing taxes (buildings and undeveloped), taxes for garbage collection		
416	Vehicle rental for person al use: car, moto/vélo, etc.		
417	Domestic and foreign air transport		
418	Expenses for visas, airport taxes		
419	Expenses for pilgramage		
420	Expenses to move house		
421	Portable telephone		
422	Computer, printer, typewriter, etc.		
423	Living room and dining room furniture (armchairs, table, chairs, armoires, etc.)		
424	Bed, mattresses, and other bedroom furniture		
425	Household electrical appliances: fridge, air conditioner, stove, oven, cooker, washing machine, water heater, iron, etc.		
426	Music and photo devices: radio, radio-cassette, hi fi system, TV, CD/DVD reader, camera, camcorder, etc.		
427	Purchase of personal transportation (car, moto, bicycle, etc.)		
428	Construction materials or large masonry repairs : cement, bricks, concrete, sand, gravel, etc.		
429	Other construction or large repair materials: tile, wood, planks, slats, plywood, straw, paint, lime, electric materials, plumbing, etc.		
430	Labor & Expenses for construction/large repairs to the dwelling: masonry, electricity, plumbing, carpentry, painting, flooring, etc.		
431	Expenses to acquire land or a dwelling		
432	Expenses for studies and architecture, connection expenses (electricity, water, telephone)		

SECTION 9 : RETROSPECTIVE NON FOOD EXPENDITURES

PART E: EXPENDITURES FOR HOLIDAYS AND CEREMONIES DURING THE LAST 12 MONTHS

Code événement	(9.04) During the last 12 months, did you have any expenditures for ceremonies, (expenditures not already mentioned)? 1=Yes 2=No ► Next line **ASK FIRST FOR ALL THE EVENTS PUTTING 1 FOR YES AND 2 FOR NO IN THE CORRESPONDING COLUMN**	(9.05)	(9.06) What was the total amount of food expenses? **AMOUNT IN FCFA**	(9.07) What was the total amount spent for drinks? **AMOUNT IN FCFA**	(9.08) What was the total amount spent for clothing and shoes? **AMOUNT IN FCFA**	(9.09) What was the total amount spent in renting rooms, chairs and other rentals? **AMOUNT IN FCFA**	(9.10) What was the total amount spent in other non food expenditures ? **AMOUNT IN FCFA**
01	End of Ramadan						
02	Tabaski						
03	Other Muslim religious ceremonies						
04	Christmas						
05	Easter						
06	New Year						
07	Marriage						
08	Baptism/communion						
09	Funerals/deaths						
10	Other event						

SECTION 10: TRANSFERS
PART A : TRANSFERS RECEIVED (SENT IN CASH OR IN KIND)

(10.00) Write the ID CODE of the principal respondent to the section ▢▢

(10.01) During the last 12 months, did the household receive cash or goods from other households?

FILL IN COLUMN BY COLUMN

1 YES						
2 NO ▶ PART B						

	TRANSFER					
	1	2	3	4	5	6
(10.02) ID CODE of the household member who received	▢▢	▢▢	▢▢	▢▢	▢▢	▢▢
(10.03) Relationship to the sender? 1 Spouse 6 Unrelated persons 2 Parent 3 Child 4 Sibling 5 Other relative	▢	▢	▢	▢	▢	▢
(10.04) What is the nature of the good or service? 1 Money 2 Food goods 3 Non food goods	▢	▢	▢	▢	▢	▢
(10.05) Place of residence of the sender 1 In the same area 7 Nigeria 2 Niamey 8 Other UEMOA countries 3 Other city in Niger 4 Rural 9 Other African countries 5 Benin 6 Côte d'Ivoire 10 Outside Africa UEMOA: Benin, Burkina Faso, Côte d'Ivoire, Guinea Bissau, Mali, Niger, Togo, Senegal	▢	▢	▢	▢	▢	▢
(10.06) What is the principal reason for the transfer ? 5 Help with work in the field 1 Family needs 2 Education 6 Help commercial activities 3 Health/sickness 4 Baptism/marriage 7 Other	▢	▢	▢	▢	▢	▢
(10.07) What is the total amount of money received or the value of the goods received during the last 12 months? (IN FCFA)						

45

SECTION 10: TRANSFERS
PART B : TRANSFERS SENT (BOTH MONEY AND GOODS)

(10.08) During the last 12 months, did the household
send money or goods to another household ?

FILL IN COLUMN BY COLUMN

		RECIPIENT					
1 YES 2 NO ► SECTION 11		1	2	3	4	5	6
(10.09) ID CODE of the member who sent		☐☐	☐☐	☐☐	☐☐	☐☐	☐☐

(10.10) Relationship with the recipient?
    1 Spouse   6   Unrelated person
    2 Parent
    3 Child
    4 Sibling
    5 Other relative
		☐	☐	☐	☐	☐	☐

(10.11) What was the nature of the good or service
    1   Money
    2   Food goods
    3   Non food goods
		☐	☐	☐	☐	☐	☐

(10.12) Place of residence of the recipient
    1 In the same area   7 Nigeria
    2 Niamey   8 Other UEMOA
    3 Other city in Niger   country
    4 Rural   9 Other African
    5 Benin   country
    6 Côte d'Ivoire   10 Outside Africa
 	
UEMOA: Benin, Burkina Faso, Côte d'Ivoire, Guinea Bissau, Mali, Niger, Togo, Senegal
		☐	☐	☐	☐	☐	☐

(10.13) What was the principal reason for the transfer 5 Help with field 1 Family needs work 2 Education 6 Help commercial 3 Health/sickness activities 4 Baptism/Marriage 7 Other		☐	☐	☐	☐	☐	☐
(10.14) What is the total amount of money or the goods sent during the last 12 months ? (IN FCFA)							

SECTION 11: SHOCKS AND STRATEGIES FOR SURVIVAL

Questions (11.04) & (11.05) (below) are only filled in for the 3 most important shocks reported in question (11,03). The others are left blank

(11.00) Write the ID CODE for the principal respondent to the section :									

(11.01) Code	(11.01) Nature of the shock	(11.02) During the last 12 months, was the household negatively effected by the following problem? 1 Yes 2 No ▶ **Next shock**	(11.03) Determine the 3 most important problems - the most severe **(1), second (2), least severe of the three (3).**	(11.04) As a consequence of the shock, did your household have an increase or drop of […] following (Read each of the proposed responses for each column) Increase.......1 Drop........2 Unchanged..3					(11.05) What strategy was adopted by the household after the [SHOCK] in order to face the situation? (For each shock, give up to 3 strategies in order of importance. If the shock was experienced several times in the last 12 months, consider the most recent event. Use the codes at the right).			Codes for (11.05)
				Revenues	Assets	Food production	Stock of food products	Purchase of food products	1ère	2ème	3ème	1. Use of savings 2. Help from relatives or friends 3. Government/state aid 4. Aid from religious organizations or ONGs 5. Marry the children 6. Change consumption habits (purchase less expensive food, reduce number of meals per day, reduce quantities eaten, etc.) 7. Working household members have taken supplementary work 8. Non working or unemployed adult members (at least 15 years old) have gotten work
101	Drought/irregular rain											
102	Floods											9. Children less than 15 have been asked to work
103	Elevated rate of crop disease											10. Children taken out of school
104	Elevated rate of animal sickness											11. Migration of one or more members of household
105	Large decrease in the price of agricultural products											12. Reduction of expenses in health/education
106	High prices for agricultural inputs											13. Obtain credit
107	High prices for food products											14. Sale of agricultural tools
108	Loss of regular transfers from other households											15. Sale of household durable goods
109	Large loss of non agricultural household revenue (other than from accident or sickness)											16. Sale of land/furniture/dwellings
110	Bankruptcy of a household non agricultural enterprise											17. Sale of food stocks
111	Large loss of wage revenues (other than from an accident or sickness)											18. Sale of animals
112	Loss of a wage earning household member											19. Increase fishing activities
113	Grave sickness or accident of a household member											20. Send children to other households
114	Death of a earning member of the household											21. Engage in spiritual activities (prayers, sacrifices, consultation with witches, ...)
115	Death of another member of the household											
116	Divorce, separation											22. Grow food in the contre saison
117	Theft of money, goods, harvest											23. Other (specify)
118	Conflict/Violence/Insecurity											24. Nothing
119	Other (specify)											

SECTION 12: FOOD SECURITY

(12.00) Write the ID CODE of the principal respondent to the section: ☐☐

(12.01) During the last 7 days, were you worried about having enough to eat? 1. Yes 2. No	(12.02) During the last 7 days, how many days did you or another member of the household have to:					(12.03) How many meals, including breakfast, have been eaten by the household every day during the last 7 days?		(12.04) During the last 12 months, did you face a situation where you did not have sufficient food for the entire household? 1. YES 2. NO ► NEXT SECTION
	A. Eat less expensive foods than usual?	B.Reduce the quantities consumed each time?	C. Reduce the number of meals per day?	D. Reduce the quantities consumed by adults to increase that for children?	E. Borrow food, or ask for help from relatives or friends?	A. Adults	B.Children (6-59 months) LEAVE BLANK IF THERE ARE NO CHILDREN IN THE HOUSEHOLD	
	DAYS	DAYS	DAYS	DAYS	DAYS	NUMBER	NUMBER	

(12.05) In which month did you encounter the problem during the last 12 months? PUT 1=YES FOR EACH MONTH WHERE THE HOUESHLD DID NOT HAVE SUFFICIENT TO EAT & 2=NO IN THE OTHER CASE	(12.06) What were the causes of the situation? LIST NO MORE THAN 3 CAUSES, IN ORDER OF IMPORTANCE, USING THE CODES TO THE RIGHT.	CODES FOR (12.06)

2010

July	Aug	Sep	Oct	Nov	Dec

2011

Jan	Feb	Mar	April	May	June

2011

July	Aug	Sep	Oct	Nov	Dec

a. 1st	b. 2nd	c. 3rd

CODES FOR (12.06)

01 Low harvests because of drought

02 Low harvests because of insect attacks

03 Low harvests because of lack of access to cultivatable land

04 Low harvests due to lack of inputs

05 Low harvests due to bad soil

06 High cost of products on the market

07 Difficult access to markets because of high costs of transport

08 Low financial resources

09 Lack of food products in the market

10 Floods

11 Other (specify)

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code		(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ▶ Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
701	Corn										
702	Millet										
703	Rice										
704	Wheat flour										
705	Sorghum										
706	Fonio										
707	Other grains										
708	Cornstarch										
709	Cassava flour (attiéké, gari, tapioca, etc.).										
710	Pasta										
711	Bread										
712	Biscuit										
713	Bean fritters										
714	Corn fritters										
715	Cakes										
716	Others pastries (cakes, pastries)										

Note on (13.01): READ THE NAME OF EACH PRODUCT. WRITE THE RESPONSE FOR EACH PRODUCT BEFORE ASKING QUESITONS 13.02 TO 13.05

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code		(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ▶ Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
717	Salad (lettuce)										
718	Fresh onion										
719	Fresh okra										
720	Fresh tomato										
721	Fresh pepper										
722	Eggplant										
723	Carrot										
724	Green bean										
725	Cucumber										
726	Pea										
727	Squash, zucchini										
728	Other vegetables n.e.c.										
729	Dried tomato										
730	Dry Okra										
731	Beans										
732	Dry pea										
733	Bambara groundnut										
734	Others pulses n.e.c.										
735	Maggi Cube										
736	Tomato paste										
737	Peanuts in shell										
738	Shelled peanuts										

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01)		(13.02) Did your household consume [PRODUCT] during the last 7 days?	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days?			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days?			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days?		
Product Code	READ THE NAME OF EACH PRODUCT WRITE THE RESPONSE FOR EACH PRODUCT BEFORE ASKING QUESITONS 13.02 TO 13.05	1=Yes 2=No ▶ Next product	01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
739	Groundnut cake										
740	Soumbala (base of sorrel or deny)										
741	Baobab leaves										
742	Yodo (Foye youto)										
743	Other leafy vegetables										
744	Malahya (Fakkou)										
745	Salt										
746	Pimento										
747	Others spices and seasonings (garlic, ginger, etc.).										
748	Cassava tuber										
749	Yam tuber										
750	Potato										
751	Taro and cocoyam										
752	Sweet potato										
753	Others tubers n.e.c.										
754	Mango										

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code		(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ▶ Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days?			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days?			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days?		
	READ THE NAME OF EACH PRODUCT WRITE THE RESPONSE FOR EACH PRODUCT BEFORE ASKING QUESITONS 13.02 TO 13.05		01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
755	Pineapple										
756	Orange										
757	Other citrus (mandarin, lemon, grapefruit)										
758	Sweet banana										
759	Watermelon										
760	Dates										
761	Sugar cane										
762	Melon										
763	Palmyra / Doumier (fruit)										
764	Cola nut										
765	Other fruits and pineapple n.e.c.										
766	Beef										
767	Camel meat										
768	Mutton										

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code		(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ► Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days?			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days?			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days?		
			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
769	Goat meat										
770	Poultry										
771	Giblets										
772	Game										
773	Other meats n.e.c.										
774	Fresh fish										
775	Smoked Fish										
776	Stockfish										
777	Canned fish										
778	Other canned fish products										
779	Palm oil										
780	Peanut oil										
781	Cottonseed oil										
782	Corn oil										
783	Other n.e.c. oils (soy, shea butter, etc.).										
784	Peanut butter										
785	Eggs										

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code	READ THE NAME OF EACH PRODUCT WRITE THE RESPONSE FOR EACH PRODUCT BEFORE ASKING QUESITONS 13.02 TO 13.05	(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ► Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days? 01=Bunch 08=Gram 02=Tia 09=Unit 03=Basket 10=Liter 04=Tongolo 11=Centiliter 05=50Kg sack 12=Sachet 06=100Kg sack 13=Heap 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
786	Fresh milk										
787	Curd										
788	Powdered milk										
789	Cheese										
790	Butter										
791	Yogurt / solani										
792	Other dairy products										
793	Sugar										
794	Cocoa / Chocolate										
795	Honey										
796	Confectionery										
797	Others Food										
798	Tobacco (chew, snuff or smoking)										
799	Cigarette										
800	Coffee in cans or bags										
801	Tea bag or package										
802	Other teas and infusions n.e.c.										
803	Fruit juice										
804	Juice powder										
805	Soft Drinks										
806	Mineral water, other soft drinks										

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code		(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ► Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days?			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days?			(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days?		

READ THE NAME OF EACH PRODUCT. WRITE THE RESPONSE FOR EACH PRODUCT BEFORE ASKING QUESITONS 13.02 TO 13.05

Unit codes (for 13.03, 13.04, 13.05):
01=Bunch, 02=Tia, 03=Basket, 04=Tongolo, 05=50Kg sack, 06=100Kg sack, 07=Kg, 08=Gram, 09=Unit, 10=Liter, 11=Centiliter, 12=Sachet, 13=Heap, 14=Other

Code	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
807	Alcoholic beverages (beer, wine and spirits)										
808	Bowl of millet with milk										
809	Bowl of millet without milk / porridge of millet										
810	Preparation based on millet plus green leaves (no meat, fish)										
811	Preparation of sorghum over green leaves (no meat, fish)										
812	Preparations made from corn over green leaves (no meat, fish)										
813	Others preparations based on millet, sorghum or maize										
814	Boiled Beans										
815	Rice cowpea										
816	Rice with baobab leaf sauce										

SECTION 13: FOOD CONSUMPTION DURING THE LAST 7 DAYS

(13.01) Product Code	READ THE NAME OF EACH PRODUCT WRITE THE RESPONSE FOR EACH PRODUCT BEFORE ASKING QUESITONS 13.02 TO 13.05	(13.02) Did your household consume [PRODUCT] during the last 7 days? 1=Yes 2=No ►Next product	(13.03) What was the total quantity and value of [PRODUCT] consumed by the household that was purchased during the last 7 days? 01=Bunch 08=Gram / 02=Tia 09=Unit / 03=Basket 10=Liter / 04=Tongolo 11=Centiliter / 05=50Kg sack 12=Sachet / 06=100Kg sack 13=Heap / 07=Kg 14=Other			(13.04) What was the total quantity and value of [PRODUCT] consumed by the household that was taken from its own production during the last 7 days? 01=Bunch 08=Gram / 02=Tia 09=Unit / 03=Basket 10=Liter / 04=Tongolo 11=Centiliter / 05=50Kg sack 12=Sachet / 06=100Kg sack 13=Heap / 07=Kg 14=Other		(13.05) What is the total quantity and value of [PRODUCT] consumed by the household that was received as a gift, as compensation for work, or as barter during the last 7 days? 01=Bunch 08=Gram / 02=Tia 09=Unit / 03=Basket 10=Liter / 04=Tongolo 11=Centiliter / 05=50Kg sack 12=Sachet / 06=100Kg sack 13=Heap / 07=Kg 14=Other		
	PRODUCT	CODE	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA	QUANTITY	UNIT	AMOUNT IN FCFA
817	Rice & tomato sauce										
818	Fried rice with fish / chicken										
819	Rice with peanut butter sauce										
820	Pasta, without meat or chicken, or fish										
821	Other meal purchased or eaten outside of home										
822	Coffee hot drink										
823	Tea hot drink										
824	Non-alcoholic beverages made outside the home										
825	Alcoholic beverages taken out of home										

56

SECTION 14: COMPLEMENT TO THE FOOD CONSUMPTION DURING THE LAST 7 DAYS

(14.01) CODE		(14.02) During the last 7 days, during how many days did your household consume the following products? **Number of Days**
01	**Cereals and cereal products** (products 701 to 711) (Millet/millet flour, sorghum, fonio, maize/maize flour, rice, bread, pasta, wheat flour, etc.)	
02	**Tubers & plantains** (products 748 to 753) (Potatoes, yams, plantain, manioc, taro, etc.)	
03	**Legumes et seeds** (products 730 to 734, 737 à 739, 784) (Cowpeas, beans, groundnuts & groundnut paste, etc.)	
04	**Vegetables** (products 717 to 729) (Lettuce, tomatoes, okra, eggplant, pepper, green beans, cucumber, peas, etc.)	
05	**Fish and meat** (products 766 to 777) (Beef, lamb, chicken, fresh and dried fish, etc.)	
06	**Fruits** (products 754 to 763, 765) (mango, orange, lemon, watermelon, melon, pineapple, dates, etc.)	
07	**Milk and milk products** (products 785 to 788, 791 & 792) (Fresh milk, powdered milk, yogurt, cheese, etc.)	
08	**Oil and grease** (products 779 to 783, 790) (Butter, palm oil, groundnut oil, etc.)	
09	**Sugar** (products 793 to 796) (Sugar in powdered form and in cubes, candies, honey)	
10	**Spices and condiments** (products 735, 740, 745 to 747) (Soumbala, pepper, salt, Maggi cubes, garlic, ginger, etc.)	

(14.03) During the last 7 days, did anyone who is not a member of the household eat at least one meal with the household? **(If NO, End of questionnaire)**

1 YES   2 NO

(14.04)		(14.05) During how many days was a meal shared with non members of the household? **Number of Days**	(14.06) How many meals were shared with non members of the household ? **Number of Meals**
01	Children 0-5 years		
02	Children 6-16 years		
03	Adults 16-65 years		
04	Adults older than 65		

OBSERVATIONS