



THE GOVERNMENT OF THE GAMBIA

SOCIAL DIMENSIONS
OF ADJUSTMENT

1993-94 HOUSEHOLD EDUCATION AND HEALTH SURVEY

Household Survey Section
Central Statistics Department
Ministry of Finance and Economic Affairs

A. DATA COLLECTION

Interviewer Date
Supervisor Checking Date

B. DATA ENTRY

Operator Entry date
Supervisor Editing date
Operator Re-entry date

Division	Banjul	B	<input type="checkbox"/>
	Kombo-St Mary	K	<input type="checkbox"/>
	Western	W	<input type="checkbox"/>
	Lower River	L	<input type="checkbox"/>
	McArthy Island	M	<input type="checkbox"/>
	Upper River	U	<input type="checkbox"/>
	North Bank	N	<input type="checkbox"/>

Survey form number of

Time interview commenced

District

EA Number

Selected Household

Name of Head.....

Address.....

.....

SECTION 0: HOUSEHOLD PARTICULARS

No.	Questions	Categories and Codes	Skip to	
1	Has the above household been identified and accepted to be interviewed?	Yes Y No, Different household D No, Dwelling not found N No, Illness, death I No, Refusal R No, Dwelling empty E No, Other [specify] O	>>3 } Refer to } supervisor } for repla- } ment and >> Q.2	<input type="text"/>
2	HOUSEHOLD TO BE INTERVIEWED Name of Head..... Address..... 	Supervisor will code this question after assigning a new household for interview		<input type="text"/>

HEAD OF HOUSEHOLD [Person Responsible for Main Decisions]

No.	Questions	Categories and Codes	Skip to	
3	Ethnicity of head of household	Mandinka M Wolof W Fula F Serahuleh S Jola J Other [specify]..... O		<input type="text"/>
4	What is the nationality of the head of household?	Gambian G Non-Gambian N		<input type="text"/>
5	Is the head of household present?	Yes Y No N	>>8	<input type="text"/>
6	How long has he/she been away?	Less than 1 week 1 Between 1 week and 1 month 2 Between 1 and 3 months 3 Over 3 months 4		<input type="text"/>
7	In this person's absence, who is responsible for the main decisions? Name.....	Insert ID number after completing Q10		<input type="text"/>

INTERVIEW DETAILS

No.	Questions	Categories and Codes	Skip to	
8	Language used by respondent at interview 	Mandinka M Wolof W Fula F Other [specify]..... O		<input type="text"/>
9	Interpreter	Yes Y No N		<input type="text"/>

SECTION 2: EDUCATION - for all persons 6 years plus

ID No	1. Has (name) ever attended school? (School includes formal school and madrassa) Yes >> Q3 No >> Q35	2. Why has (name) never attended school? Work Too Expensive Too far Not useful Married Not appropriate Too young Handicap Other, specify >> Non formal education	3. What kind of primary school did (name) attend? Government (>> Q5) Private (>> Q5) Madrassa	4. Why did (name) attend madrassa? Economic Religious Nearness Appropriate for girls Other, specify:	5. What was the highest grade completed?	6. Did (name) have an interruption for a term or more during primary studies? Yes No (>> Q9)	7. For how long did (name) stay away all in all? RECORD TOTAL MONTHS	8. What was the reason for the interrup-tion? Unable to pay fees Necessity to work Illness Suspension Travel Other, specify:
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EDUCATION - secondary school, vocational school and tertiary education

ID No	9. Did (name) ever attend secondary school?	10. Which kind of secondary school did (name) attend?	11. What was the highest form completed?	12. What was the highest certificate obtained (from secondary School)?	13. Has (name) ever attended a vocational school?	14. How long has (name) attended vocational school?	15. Has (name) ever attended a higher educational institution after secondary school?	16. What was the last institution attended?
	Yes Y No N (> > Q13)	Government G Private P Islamic I		Sec. Tec. S O-level E A-level A None N Other, specify	Yes Y No N (> > Q 15)	RECORD TOTAL IN MONTHS	Yes Y No N (> > Q 20)	Gambia G College C University U Seminary S Other, specify
	9.	10.	11.	12.	13.	14.	15.	16.
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EDUCATION - tertiary education (continued), current school attendance

ID No	17. For how many years did (name) attend higher educational institutions all together? RECORD NUMBER OF YEARS	18. Who funded (name)'s studies? Gambia Government scholarship G Foreign donor F Private (individual or family) P Other, specify	19. What was (name)'s main subject in this institution? Economics/- Business B Social science S Engineering E Science C Medicine/- health M Agriculture A Teacher's training T Religion R Other, specify: >> Q22	20. Is (name) presently attending school? Yes Y (>> Q22) No N (If age 25 plus >> Non formal education)	21. Why is (name) not presently attending school? Work W Too Expensive E Too far F Not useful U Married M Not appropriate N Completed C Too young Y Illness I Other, specify:	22. Has (name) attended school for the past 12 months? Yes Y No N (>> Non formal education)	23. How much time did (name) spend going to and from school daily?	
							Hours	Minutes
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EDUCATION EXPENDITURES

ID No.	During the past school year what were the expenses (in dalasis) for (name) for:										
	24. School and registration fees	25. Contributions to parents associations?	26. Uniforms and sports clothes	27. Books	28. School supplies	29. Transport to and from school	30. Lunch and pocket money at school	31. Examination fees	32. Private tuition?	33. Other expenses, specify:	34. Total expenses (only if respondent cannot give detailed breakdown)
	24.	25.	26.	27.	28.	29.	30.	31.	32.	33.	34.
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EDUCATION - non-formal training and literacy

ID No	35. Has (name) ever attended a literacy course?		36. Has (name) ever attended a non-formal training course?		37. Can (name) read or write a simple sentence in English?		38. Can (name) read or write a simple sentence in any other language?		39. Can (name) write a simple letter in English?		40. Can (name) do written calculations? (with modern, arabic or any other numbers)	
	Yes No	Y N	Yes No	Y N	Yes No	Y N	Yes No	Y N	Yes No	Y N	Yes No	Y N
	FOR PERSONS 16 YEARS AND ABOVE		FOR PERSONS 16 YEARS AND ABOVE									
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SECTION 3: HEALTH

1. ID No.	2. During the past two weeks has (name) suffered from an illness or injury? Yes Y No N (>> Q6)	3. Which of these symptoms did (name) have? Fever F Diarrhea D Vomiting V Abdominal pain A Coughing C Skin rash K Swelling W Headache H	4. How long ago did this illness or injury start? Last 2 weeks 1 3-4 weeks 2 1-6 months 3 7-12 months 4 more than one year 5	5. For how many days during the past two weeks was (name) too ill to do his/her usual work (activities) ? Yes Y No N >> Q17	6. During the past two weeks has (name) had a health consulta- tion? Yes Y No N >> Q17	7. Whom did (name) consult? Traditional healer/- Marabout T Health assistant/- dispenser H Midwife/nurse M Doctor D Other ,specify:	8. Was this (health care provi- der) public or private? Public U Private I	9. What was the reason for this visit? Illness L Injury N Vaccination V Prenatal R Postnatal S Checkup C Other, specify:
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HEALTH (continued)

ID No.	10. Did (name) pay to see the (health care provider)?	11. How much did (name) pay to see the (health care provider)?	12. Did (name) pay for medicine pre-scribed?	13. How much did (name) pay for the medicine pre-scribed?	14. How much did (name) pay to travel to and from the health care facility?	15. How long did it take (name) to travel to and from the health care facility?		16. How long did (name) wait for the services to be rendered?		17. Does (name) have a physical handicap?
	Yes No (> > Q12)	Y N	Yes No (> > Q14)	Y N		hours	min	hours	min	Yes (> > Handicap) No (> > Next)
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SECTION 6: HOUSING

No	Question	Categories and Codes	
1	Did this household exist 12 months ago?	Yes Y No N	_____
2	How long has this household been living in this dwelling/compound?	Duration	_____
3		Unit of time: Month M Year Y	_____
4	On what basis does the household occupy the dwelling/compound, now?	Owned W Rented R Free of charge F Not applicable N Other, specify: O	Now _____
5	....and 12 months ago?		12 months ago _____
6	What is the construction material of the dwelling/compound?	Permanent P Semi-permanent S Non-permanent N Other O	_____
7	What is the main source of drinking water, now?	River, lake R Traditional well W Pump well P Public tap U Own tap T Other O Not appl. N	Now _____
8	....and 12 months ago?		12 months ago _____
9	What is the main source of lighting fuel, now?	Candles C Kerosene K Electricity E Other O Not applicable N	Now _____
10	....and 12 months ago?		12 months ago _____
11	What is the main type of cooking fuel, now?	Coll firewood F Purchased firewood P Charcoal C Kerosene K Gas G Electricity E Crop residues R Other O Not applicable N	Now _____
12	....and 12 months ago?		12 months ago _____
13	What is the main type of stove used?	Three stones T Mud stove U Metal stove M Pottery stove P Other O Not applicable N	_____

SECTION 7: Employment of head

No	Question	Categories and codes	Skip to	Head
1	ID Number	From roster [Sec O, Q 10]		1
2	Current main job	..... ..... ..... .....	{Occupation code} If "none" >>Next section	_____
3	What type of business is this?	..... ..... .....	{Industry code}	_____
4	How many years in this work?	{Years}		_____
5	Employment status?	Own account A Family helper F Public sect. employee P Private sect employee V Employer E Other O		_____
6	How much is earned from this work?	{Amount per time unit}		_____
7		Unit: day D week W month M year Y		_____
8	Is [name] entitled to a pension with this job?	Yes Y No N		_____
9	Is [name] entitled to paid leave with this job?	Yes Y No N		_____
10	For how long has this person worked in the past year? [Use same units as Q7]	Number of days, weeks, months or year		_____
11	How has the income from this work changed compared with 12 months ago?	Increased I Same S Decreased D		_____

SECTION 8: Livestock and Agricultural holdings

No.	Questions	Categories and codes	Skip to	
1	Is livestock being kept by any member of the household?	Yes	Y	_____
		No	N >> 8	
2	How many cattle are being kept now?	By men		_____
		By women		_____
3	How does this number compare with 12 months ago?	More	M	_____
		Same	S	
		Less	L	
4	How many sheep are being kept now?	By men		_____
		By women		_____
5	How does this number compare with 12 months ago?	More	M	_____
		Same	S	
		Less	L	
6	How many goats are being kept now?	By men		_____
		By women		_____
7	How does this number compare with 12 months ago?	More	M	_____
		Same	S	
		Less	L	
8	Do any members of the household operate an agricultural holding?	Yes	Y	_____
		No	N >> Section 10	
9	What is the total size of all	[No. of units]		_____
10	holdings operated by the household, including fallow land?	Acres	A	_____
		Hectares	H	
		Plots	P	

Section 9: Crop Production

[In the third crop column insert name of the most important crop grown apart from Groundnuts and Rice]

No	Question	Categories and codes	Skip to	Ground-nuts	Rice	.....
1	Was this crop grown in the last 24 months?	Yes No	Y N >> Next	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	Is this crop grown mainly by men or women?	Men Women Both	M W B	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	How much do you expect to harvest this season? [93/94]	[No. of units]		<input type="text"/>	<input type="text"/>	<input type="text"/>
4		[Kind of units]		<input type="text"/>	<input type="text"/>	<input type="text"/>
5	Was any of this sold?	Yes No	Y N >> 9	<input type="text"/>	<input type="text"/>	<input type="text"/>
6	How much was sold? [Use the same units as Q.3]	[No. of units]		<input type="text"/>	<input type="text"/>	<input type="text"/>
7	What was the main outlet?	Roadside stall Village market Large market/Luomo Trader Cooperative Marketing Board Other	R V L T C M O	<input type="text"/>	<input type="text"/>	<input type="text"/>
8	What was the unit price obtained? [Use the same units as in Q.4]	[Price per unit]		<input type="text"/>	<input type="text"/>	<input type="text"/>
9	What was the production in the previous season? [92/93]	[No of units]		<input type="text"/>	<input type="text"/>	<input type="text"/>
10	Was the area in 93/94 bigger, smaller or the same as in 93/93?	Increased Same Decreased	I S D	<input type="text"/>	<input type="text"/>	<input type="text"/>
11	What was the main reason for the answer in Q10?	Credit availability Mkt. opportunity Labour availability Fertiliser availability Price change Other, specify:	C M L F P	<input type="text"/>	<input type="text"/>	<input type="text"/>
12	Did you use hired labour this season[93/94]?	Yes No	Y N	<input type="text"/>	<input type="text"/>	<input type="text"/>
13	Was this more, less or the same as the previous season [92/93]?	More Same Less	M S L	<input type="text"/>	<input type="text"/>	<input type="text"/>
14	Was any extension advice given for this crop?	Yes No	Y N	<input type="text"/>	<input type="text"/>	<input type="text"/>
15	Was any fertiliser used on this crop?	Yes No	Y >> 17 N	<input type="text"/>	<input type="text"/>	<input type="text"/>
16	Why not?	Too expensive Not available Not needed Credit availability Don't know how to use Other, specify:	E A N C D	<input type="text"/>	<input type="text"/>	<input type="text"/>
17	Was any credit obtained for crop production	Yes No	Y N >> Next section			<input type="text"/>
18	What was the source of the credit?	Formal Informal	F I			<input type="text"/>

SECTION 10: Non-farm enterprises - General information

No.	Question	Categories and codes	Skip to	
1	Did any member of the household operate any non-farm business during the last 12 months?	Yes Y No N	>> Section 12	<input type="text"/>
2	Which activities contributed most to your household income? 1.....	[Code according to industry list]		<input type="text"/>
3	2.....			<input type="text"/>
4	3.....			<input type="text"/>
5	Has any business [other than those listed above] closed down in the last 12 months?	Yes Y No N	>> Section 11	<input type="text"/>
6	What was the main activity of this business? 4.....	[Code according to industry list]		<input type="text"/>

SECTION 11: Non-farm enterprise details

No	Question	Categories and codes	Skip to	1st Enterprise	2nd Enterprise	3rd Enterprise
1	Enterprise code	[code from previous Section]		<input type="text"/>	<input type="text"/>	<input type="text"/>
2	ID of the household member responsible for this enterprise	[ID from roster]		<input type="text"/>	<input type="text"/>	<input type="text"/>
3	Did this enterprise start up during the last 12 months?	Yes Y No N	>> 5	<input type="text"/>	<input type="text"/>	<input type="text"/>
4	How many years has this enterprise been in operation?	[Years]		<input type="text"/>	<input type="text"/>	<input type="text"/>
5	How many months has this enterprise been operating in the last 12 months?	[Months]		<input type="text"/>	<input type="text"/>	<input type="text"/>
6	Is this enterprise still operating?	Yes Y No N	>> 12	<input type="text"/>	<input type="text"/>	<input type="text"/>
7	How many employees are working in this enterprise?	[Number]		<input type="text"/>	<input type="text"/>	<input type="text"/>
8	How many employees were working in this enterprise 12 months ago?	[Number]		<input type="text"/>	<input type="text"/>	<input type="text"/>
9	Is special equipment used for this enterprise?	Yes Y No N	>> Next enterprise	<input type="text"/>	<input type="text"/>	<input type="text"/>
10	Has new equipment been bought in the last 12 months?	Yes Y No N		<input type="text"/>	<input type="text"/>	<input type="text"/>
11	Has equipment been sold in the last 12 months?	Yes Y No N		<input type="text"/>	<input type="text"/>	<input type="text"/>
12	How has the overall value of all the equipment changed in the past 12 months?	Increased I Same S Decreased D		<input type="text"/>	<input type="text"/>	<input type="text"/>

SECTION 12: Household expenditure

No	Question	Categories and code	Skip to	
	Medical expenses How much was spent on the following during the past 1 month?			
1	Traditional medicines	{Amount}		_____
2	Marabout	{Amount}		_____
3	Modern medicines	{Amount}		_____
4	Private doctor/midwife/nurse	{Amount}		_____
5	Hospital/health centre	{Amount}		_____
6	Clothing How much was spent on clothing during the past 3 months?	{Amount}		_____
7	Rent How much was spent on rent during the past 12 months?	{Amount}		_____
	Remittances How much was spent on remittances during the past 12 months?			
8	In cash	{Amount}		_____
9	In kind	{Amount}		_____
10	Transport How much was spent on personal transport during the past 2 weeks?	{Amount}		_____
	Key foods How much was spent on the following items during the past 2 weeks?			
11	Rice	{Amount}		_____
12	Oil [include vegetable, groundnut & palm oil]	{Amount}		_____
13	Coarse grains	{Amount}		_____
14	Fish/Meat	{Amount}		_____
15	Vegetables	{Amount}		_____

SECTION 13: Property and land

Household assets include assets that fully belong to the household, even with mortgage, but excluding those owned on a partnership basis

No	Question	Categories and codes	Skip to	
1	Does any member of the household own any dwellings, other buildings or urban land?	Yes Y No N	>> 3	_____
2	How many properties are owned in all? Enter the total number, including the present dwelling if owned by the household			_____
3	Twelve months ago, did any member of the household own any properties?	Yes Y No N	>> 5	_____
4	How many properties were owned in all? Enter the total number, including the present dwelling if owned by the household			_____
5	Does any member of the household own any agricultural land?	Yes Y No N	>> Sect 14	_____
6	How has the size of this land changed during the last 12 months?	Increased I Same S Decreased D		_____

SECTION 14: Household Income

No	Sources of Income	A. How much income did this household receive during the last 12 months from each of the following sources?	B Was this more, less or the same as last year? More M Less L Same S Not applicable N Use 'Not applicable' when no income in column 1
1	Sale of export crop	<input type="text"/>	<input type="text"/>
2	Sale of food crop	<input type="text"/>	<input type="text"/>
3	Livestock & livestock products	<input type="text"/>	<input type="text"/>
4	Other farming income	<input type="text"/>	<input type="text"/>
5	Non farm enterprise 1 [from Section 11]	<input type="text"/>	<input type="text"/>
6	Non farm enterprise 2 [from Section 11]	<input type="text"/>	<input type="text"/>
7	Non farm enterprise 3 [from Section 11]	<input type="text"/>	<input type="text"/>
8	Other non farm enterprises	<input type="text"/>	<input type="text"/>
9	Public and parastatal sector salary	<input type="text"/>	<input type="text"/>
10	Private sector salary	<input type="text"/>	<input type="text"/>
11	Rent received	<input type="text"/>	<input type="text"/>
12	Remittances	<input type="text"/>	<input type="text"/>
13	Transfer payments [pensions, scholarships, insurance etc]	<input type="text"/>	<input type="text"/>
14	Other sources [please specify]	<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/>

