



REPUBLIC OF THE GAMBIA

NATIONAL PLANNING COMMISSION/GAMBIA BUREAU OF STATISTICS POVERTY AND SOCIAL IMPACT ANALYSIS 2009

Strictly confidential information

National Planning Commission in collaboration with GBOS is conducting a study to provide information on the burden of accessing basic education (grade 1-9) and basic clinical care package on individuals and households. The information being collected will assist policy makers, planners, program managers and development partners in a number of important ways that include; providing additional information on the likely challenges of the attainment of the MDGs and the overall poverty reduction objectives.

A. DATA COLLECTION

Interviewer Interview Date
Supervisor Checking date

B. DATA ENTRY

Operator Entry date
Supervisor Editing date
Coder/verifier.....Code:

L.G.A.	Banjul	1
	KMC	2
	Brikama	3
	Mansakonko	4
	Kerewan	5
	Kuntaur	6
	Janjangbureh	7
	Basse	8

District name..... [][]

Settlement Name: [][][]

Area 1 - Urban 2 - Rural []
E.A. Number [][][]
Selected household number (1 -20) [][]

Name of Household Head

Time interview commenced

[:]

Address:

Time interview ends

[:]

Tel:

Survey form number for this household [] of []

the tel. numbers would be used to contact
the respondents to confirm details submitted

Time interview started: [][]

Section 0: HOUSEHOLD PARTICULARS

No.	Questions	Categories & code	Code
1	Has the above household been identified and accepted to be interviewed?	<p>Yes 1 >> Q3</p> <p>No, different household 2 } Refer to</p> <p>No, dwelling not found 3 } supervisor</p> <p>No, illness, death 4 } for repla-</p> <p>No, refusal 5 } cement and</p> <p style="text-align: right;">>> Q2</p> <p>No, dwelling empty 6</p> <p>No, Other 9</p> <p>specify:</p>	[]
2	HOUSEHOLD TO BE INTERVIEWED Name of head Address Telephone	Supervisor will code this question after assigning a new household for interview	[]

HEAD OF HOUSEHOLD (Person responsible for main decisions)

No.	Questions	Categories & code	Code
3	Sex of the household head?	Male 1 Female 2	[]
4	Is the head of household present?	Yes 1 >> skip to Q7 No 2	[]
5	How long has he/she been absent?	Less than one week 1 Between 1 week and 1 month 2 Between 1 and 3 months 3 More than 3 months 4	[]
6	In this person's absence, who is responsible for the main decisions?	Insert ID number after completing Q9	[]

INTERVIEW DETAILS

No.	Questions	Categories & code	Code
7	Language used by respondent at interview?	Mandinka 1 Wollof 2 Fula 3 Other 4 specify:	[]
8	Interpreter?	Yes 1 No 2	[]

Write down the name of the head of the household and all persons who normally live and eat together in this household: (6 out of last 12 months)				
Q9	Name	PLEASE USE CARBON		Age
1	Head			
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
10a	Are there any other members of the household not now present who normally live and eat here such as persons temporarily away for marriage, seasonal work, illness, giving birth or school? (if 'yes', add these names to the list)	Yes	1	
		No	2	[]
10b	Are there any other persons who are part of the household because they acknowledge the Head's authority and who live in the household? (if 'yes', add these names to the list)	Yes	1	
		No	2	[]
10c	Number of usual members of this household _____			

REMOVE THIS PAGE AS REFERENCE TO EASE INTERVIEW PROCESS

Write down the name of the head of the household and all persons who normally live and eat together in this household: (6 out of last 12 months)			
Q9	Name	Age	
1	Head		
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
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21			
22			
23			
24			
25			
10a	Are there any other members of the household not now present who normally live and eat here such as persons temporarily away for marriage, seasonal work, illness, giving birth or school? (if 'yes', add these names to the list)	Yes No	1 2 []
10b	Are there any other persons who are part of the household because they acknowledge the Head's authority and who live in the household? (if 'yes', add these names to the list)	Yes No	1 2 []
10c	Number of usual members of this household _____		

Section 1: HOUSEHOLD ROSTER

[illegible]

SECTION 2a: HEALTH

[illegible]

SECTION 2a: HEALTH cont.[illegible]

SECTION 2b: HEALTH EXPENDITURE[illegible]

SECTION 2c: MORTALITY

Q2a. Is there a Household member who lived in this household and died in the last 12 months

(do not not include foetus)

Yes =1 (Go to 2b)

No=2 (go to section 3)

2b). If yes to Q 2A, how many have died?_____

[illegible]

Q1 response options

Head of Household =1 Parent in-law =9

Wife/Husband/Partner= Other Relatives=10

2

Co-Wife=3 Adopted/Foster/ Stepchild=11

Son or Daughter =4 Not related=12

Sister/Brother=5 Other (specify)=98

Son or Daughter in-law Don't Know=99

=6

Grandchild = 7

Parent=8

SECTION 3: EDUCATION AND LITERACY (For all persons 3 Years and Above)[illegible]

**(For Persons 15 Years and Above and Not
Currently at School)**

Section 3a: NON-FORMAL TRAINING AND LITERACY

[illegible]

Section 3b: EDUCATION EXPENDITURE (for children in Grades 2-10 only)

[illegible]

Section 4: EMPLOYMENT (for all persons 7 years plus)

[illegible]

Section 5: HOUSEHOLD INCOME

Please record the total income of all members of household corresponding to the source in the appropriate column (i.e. total wages

*Income from other sources - (1) Property income (rent interest, dividends, etc.); (2) Current Transfers and Benefits (remittance received, pension, life insurance annuities, social security benefit, etc.

Code	Sources of Income	Amount	
		Last month	Last year
(1)	(2)	(3)	(4)
01	Sale of Crop (fruits, tubers, vegetables, etc)		
02	Livestock & Livestock Products		
03	Fishing		
04	Other Farming Income (wood, hunting, ...)		
05	Non-Farm Enterprise		
06	Public Sector Salary		
07	Parastatal salary		
08	Private Sector Salary		
09	Rent Received		
10	Remittances Received (cash or kind)		
11	Transfer Payments Received (pensions, scholarships, etc.)		
99	Other Sources, specify.....		

SECTION 6: HOUSEHOLD EXPENDITURE (In Dalasi)

To be answered by household head or any other person who knows better on the expenditure in the household
Theses expenditures relate to all household members

Enter 00 if no expenditure for the group

Code	Description	Last month	Last 3 months	Last 12 months
1	Expenditure on clothing and footwear			
2	Expenditure on housing, fuel and power			
3	Expenditure on furniture, furnishings			
4	Expenditure on household equipment and maintenance			
5	Expenditure on health			
6	Expenditure on transport			
7	Expenditure on leisure, entertainment and cultural			
8	Expenditure on education			
9	Jewelry and watches			
10	Communications			
11	Taxes and Insurances			
12	Transfer payments made by the household (in cash)			
13	Household expenditures on Food (PURCHASE)			
14	Consumption of own produce-Food			
15	Any other expenditure			

SECTION 7: HOUSING AMENITIES											
1. How many rooms does this household occupy?	2. On what basis does the household occupy the dwelling?	3. What is the main source of drinking water?	4. What is the main source of light?	5. What is the main source of cooking energy to this household?	6. What type of toilet has the dwelling got?	7. Main construction materials of outside walls?	8. Main roofing material	9. Main flooring material	10. How is this household's solid waste disposed of usually?		
(Do not include bath-rooms, Stores toilets & Kitchens)	Owning 1	Piped indoors/compound 1	Electricity 1	Firewood 1	Own flush toilet 1	Mud (dung) 1	Thatch 1	Mud/earth 1	Burning 1		
	Renting 2		Kerosene 2	Charcoal 2	Shared flush toilet 2	Wood 2	Corrugated 2		Cart/Wheel barrow 2		
	Provided 3	Public stand pipe 2	Candles 3	Gas 3	Own bucket/pan 3	Brick 3	iron 2	Wood 2	Tipped 3		
	Rent Free 3	Well in compound 3	Solar 4	Electricity 4	Shared bucket/pan 4	Cement/ 4	Asbestos 3	Tiles 3	Recycled 4		
	owner occupied 4	Well with pump (public) 4	Other 5	Solar 5	Own pit latrine 5	concrete 5	Cement/ 4	Cement/ 4	Private firm 5		
	Other 9	Well without pump (public) 5	(Specify) 5	Don't cook 6	Public pit 6	Thatched\ 6	concrete 4	concrete 4	Municipal/ Area Council 6		
		Stream/River 6		Other (specify) 9	Improved pit latrine 8	grass 7	Other 9	Other 9	throw at backyard 7		
		Other,specify... 9			No Toilet (bush) 7	Other,spec 9			Other,spec 9		
					Other,specify 9						

Section 8: OWNERSHIP OF ASSETS

12. Do you or any household members own the following items? (Yes = 1 ; No = 2)			
Name of items	Response options	Name of Items	Response options
12a. Motor Car	1 2	12k. Musical instrument	1 2
12b. Motor Cycle / Scooter	1 2	12l. Sewing Machine	1 2
12c. Other motorised vehicle	1 2	12m. Refrigerator / Freezer	1 2
12d. Cycle	1 2	12n. Electric/Gas Cooker / Oven	1 2
12e. Radio	1 2	12o. Washing Machine / Dryer	1 2
12f. Television	1 2	12p. Generator	1 2
12g Video /Cassette	1 2	12q. Any other electrical appliance	1 2
12h. Fixed telephone line	1 2	12r. Iron	1 2
12i. Mobile telephone	1 2	12s. Horse cart/Donkey cart/oxen	1 2
12j. Computer	1 2	12t. Wheel barrow	1 2

(1) Are you aware of the health policy? Yes =1 No=2 >>skip to Q3

(2) Have you ever participated in any orientation on this policy (health) ? Yes=1 No=2

(3) Are you aware of the education policy? Yes=1 No=2 >>END INTERVIEW

(4) Have you ever participated in any orientation on this policy (education)? Yes=1 No=2

THANK THE RESPONDENT!