



A.12 Reference Number  

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**CONFIDENTIAL**

**REPUBLIC OF GHANA**

**CORE WELFARE INDICATORS QUESTIONNAIRE (CWIQ)**

**A - GENERAL INFORMATION**

A.1 ENUMERATOR'S NAME

A.3 RESPONDENT'S NAME

A.4 REGION NAME

A.5 DISTRICT NAME

A.2 Enumerator's ID number

0	0	0
1	1	1
2	2	2
3	3	3
4	4	4
5	5	5
6	6	6
7	7	7
8	8	8
9	9	9

A.6 ENTER TODAY'S DATE	A.7 ENTER TIME NOW	A.8 RESPONDENT NUMBER (from household roster on next page)																																																																																																																																																																																														
<table border="1" style="width: 100%; text-align: center;"> <tr> <th colspan="3">DAY</th> <th colspan="3">MONTH</th> <th colspan="3">YEAR</th> </tr> <tr> <td></td><td></td><td></td> <td></td><td></td><td></td> <td></td><td></td><td></td> </tr> <tr> <td>0</td><td>0</td><td>0</td> <td>0</td><td>0</td><td>0</td> <td>0</td><td>0</td><td>0</td> </tr> <tr> <td>1</td><td>1</td><td>1</td> <td>1</td><td>1</td><td>1</td> <td>1</td><td>1</td><td>1</td> </tr> <tr> <td>2</td><td>2</td><td>2</td> <td>2</td><td>2</td><td>2</td> <td>2</td><td>2</td><td>2</td> </tr> <tr> <td>3</td><td>3</td><td>3</td> <td>3</td><td>3</td><td>3</td> <td>3</td><td>3</td><td>3</td> </tr> <tr> <td>4</td><td>4</td><td>4</td> <td>4</td><td>4</td><td>4</td> <td>4</td><td>4</td><td>4</td> </tr> <tr> <td>5</td><td>5</td><td>5</td> <td>5</td><td>5</td><td>5</td> <td>5</td><td>5</td><td>5</td> </tr> <tr> <td>6</td><td>6</td><td>6</td> <td>6</td><td>6</td><td>6</td> <td>6</td><td>6</td><td>6</td> </tr> <tr> <td>7</td><td>7</td><td>7</td> <td>7</td><td>7</td><td>7</td> <td>7</td><td>7</td><td>7</td> </tr> <tr> <td>8</td><td>8</td><td>8</td> <td>8</td><td>8</td><td>8</td> <td>8</td><td>8</td><td>8</td> </tr> <tr> <td>9</td><td>9</td><td>9</td> <td>9</td><td>9</td><td>9</td> <td>9</td><td>9</td><td>9</td> </tr> </table>	DAY			MONTH			YEAR												0	0	0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	2	2	2	3	3	3	3	3	3	3	3	3	4	4	4	4	4	4	4	4	4	5	5	5	5	5	5	5	5	5	6	6	6	6	6	6	6	6	6	7	7	7	7	7	7	7	7	7	8	8	8	8	8	8	8	8	8	9	9	9	9	9	9	9	9	9	<table border="1" style="width: 100%; text-align: center;"> <tr> <th colspan="2">HOURS</th> <th colspan="2">MIN</th> <th></th> </tr> <tr> <td></td><td></td> <td></td><td></td> <td></td> </tr> <tr> <td>0</td><td>0</td> <td>0</td><td>0</td> <td>A AM</td> </tr> <tr> <td>1</td><td>1</td> <td>1</td><td>1</td> <td>P PM</td> </tr> <tr> <td>2</td><td>2</td> <td>2</td><td>2</td> <td></td> </tr> <tr> <td>3</td><td>3</td> <td>3</td><td>3</td> <td></td> </tr> <tr> <td>4</td><td>4</td> <td>4</td><td>4</td> <td></td> </tr> <tr> <td>5</td><td>5</td> <td>5</td><td>5</td> <td></td> </tr> <tr> <td>6</td><td>6</td> <td>6</td><td>6</td> <td></td> </tr> <tr> <td>7</td><td>7</td> <td>7</td><td>7</td> <td></td> </tr> <tr> <td>8</td><td>8</td> <td>8</td><td>8</td> <td></td> </tr> <tr> <td>9</td><td>9</td> <td>9</td><td>9</td> <td></td> </tr> </table>	HOURS		MIN								0	0	0	0	A AM	1	1	1	1	P PM	2	2	2	2		3	3	3	3		4	4	4	4		5	5	5	5		6	6	6	6		7	7	7	7		8	8	8	8		9	9	9	9		<table border="1" style="width: 100%; text-align: center;"> <tr> <td></td><td></td> </tr> <tr> <td>0</td><td>0</td> </tr> <tr> <td>1</td><td>1</td> </tr> <tr> <td>2</td><td>2</td> </tr> <tr> <td>3</td><td>3</td> </tr> <tr> <td>4</td><td>4</td> </tr> <tr> <td>5</td><td>5</td> </tr> <tr> <td>6</td><td>6</td> </tr> <tr> <td>7</td><td>7</td> </tr> <tr> <td>8</td><td>8</td> </tr> <tr> <td>9</td><td>9</td> </tr> </table>			0	0	1	1	2	2	3	3	4	4	5	5	6	6	7	7	8	8	9	9
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**QUESTIONNAIRE INSTRUCTIONS**

**STEP 1: BUBBLE IN ALL THE ANSWERS. VERIFY THERE IS ONLY ONE ANSWER PER QUESTION, UNLESS OTHERWISE SPECIFIED.**

**STEP 2: EXAMINE ALL NUMBER GRIDS AND MAKE SURE THE NUMBERS BUBBLED IN MATCH THE NUMBERS WRITTEN IN THE BOX ABOVE EACH GRID.**

A.9a REGION ID	A.9b DISTRICT ID	A.10 EA's ID	A.11 HOUSEHOLD																																																																																																			
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**!!! IMPORTANT!!!**

Create a unique reference number above, by combining region, district, ea and household number. Write this number **NOW** on top of all odd numbered pages, including this one.

COMMENTS









# F - HOUSEHOLD ASSETS

**F.1 Does the household or a household member own this dwelling ?**

- Own the dwelling 1
- Does not own and pays rent 2
- Uses dwelling without paying rent 3

**F.5 Does the household operate land it does not own?**

- N/A 1
- Rented 2
- Sharecropped 3
- Private land provided free 4
- Open access land 5

**F.9 How does this number of livestock compare to the number one year ago?**

- N/A 1
- Same now 2
- Less now 3
- More now 4
- Don't know 5

**F.2 How many separate rooms are there in your dwelling?**

<input type="radio"/>	0	<input type="radio"/>	1	<input type="radio"/>	2	<input type="radio"/>	3	<input type="radio"/>	4	<input type="radio"/>	5	<input type="radio"/>	6	<input type="radio"/>	7	<input type="radio"/>	8	<input type="radio"/>	9
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**F.6 Number of acres of non-owned land the household operates.**

<input type="radio"/>	0	<input type="radio"/>	1	<input type="radio"/>	2	<input type="radio"/>	3	<input type="radio"/>	4	<input type="radio"/>	5	<input type="radio"/>	6	<input type="radio"/>	7	<input type="radio"/>	8	<input type="radio"/>	9
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**F.10 How many sheep, goats and other medium size animals are owned currently by the household?**

<input type="radio"/>	0	<input type="radio"/>	1	<input type="radio"/>	2	<input type="radio"/>	3	<input type="radio"/>	4	<input type="radio"/>	5	<input type="radio"/>	6	<input type="radio"/>	7	<input type="radio"/>	8	<input type="radio"/>	9
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**F.3 How many acres of land are owned by the household (with 1 decimal , e.g 24.7) ?**

<input type="radio"/>	0	<input type="radio"/>	1	<input type="radio"/>	2	<input type="radio"/>	3	<input type="radio"/>	4	<input type="radio"/>	5	<input type="radio"/>	6	<input type="radio"/>	7	<input type="radio"/>	8	<input type="radio"/>	9
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**F.7 How does the amount of land operated but not-owned compare with one year ago?**

- N/A 1
- Same now 2
- Less now 3
- More now 4
- Don't know 5

**F.11 How does this number of animals compare with one year ago?**

- N/A 1
- Same now 2
- Less now 3
- More now 4
- Don't know 5

**F.4 How does the amount of land owned compare with one year ago?**

- N/A 1
- Same now 2
- Less now 3
- More now 4
- Don't know 5

**F.8 How many heads of cattle and other large livestock are owned currently by the household?**

<input type="radio"/>	0	<input type="radio"/>	1	<input type="radio"/>	2	<input type="radio"/>	3	<input type="radio"/>	4	<input type="radio"/>	5	<input type="radio"/>	6	<input type="radio"/>	7	<input type="radio"/>	8	<input type="radio"/>	9
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**F.12 Does the household own any of the following ?** *Interviewer, include items only if they are in working order*

	Owned and more than 1 year old	Owned and 1 year old or less
Electric Iron	A	A
Refrigerator	B	B
Television	C	C
Video deck	D	D
Radio	E	E
Stereo system	F	F
Mattress or bed	G	G
Watch or clock	H	H
Sewing machine	I	I
Modern stove	J	J
Bicycle	K	K
Motorcycle	L	L
Car or truck	M	M

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# G - HOUSEHOLD AMENITIES

Reference Number

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<p><b>G.1 What is the material of the roof of the house ?</b></p> <p>Mud <b>1</b>                  Thatch <b>2</b>                  Wood <b>3</b>                  Iron sheets <b>4</b>                  Cement / concrete <b>5</b>                  Roofing tiles <b>6</b>                  Asbestos <b>7</b>                  Other _____ <b>8</b></p>	<p><b>G.5 What is the main source of cooking fuel?</b></p> <p>Firewood <b>1</b>                  Charcoal <b>2</b>                  Kerosine/Oil <b>3</b>                  Gas <b>4</b>                  Electricity <b>5</b>                  Crop residue/Sawdust <b>6</b>                  Animal waste <b>7</b>                  Other _____ <b>8</b></p>	<p><b>G.7 How long does it take from here to reach the nearest... C. Public transportation</b></p> <p>Near the dwelling <b>1</b>                  10 Minutes <b>2</b>                  20 Minutes <b>3</b>                  30 Minutes <b>4</b>                  40 Minutes <b>5</b>                  50 Minutes <b>6</b>                  60 Minutes or more <b>7</b></p> <p><i>Include average waiting period if applicable.</i></p>
<p><b>G.2 What is the material of the walls of the house ?</b></p> <p>Mud/Mud bricks <b>1</b>                  Stone <b>2</b>                  Burnt bricks <b>3</b>                  Cement / Sandcrete <b>4</b>                  Wood / Bamboo <b>5</b>                  Iron sheets <b>6</b>                  Cardboard <b>7</b>                  Other _____ <b>8</b></p>	<p><b>G.6 What is the main source of lighting fuel?</b></p> <p>Kerosine/Paraffin <b>1</b>                  Gas <b>2</b>                  Electricity <b>3</b>                  Candles <b>4</b>                  Firewood <b>5</b>                  Other _____ <b>6</b></p>	<p><b>D. Primary School</b> <i>Interviewer, code to nearest 10 minutes</i></p> <p>Near the dwelling <b>1</b>                  10 Minutes <b>2</b>                  20 Minutes <b>3</b>                  30 Minutes <b>4</b>                  40 Minutes <b>5</b>                  50 Minutes <b>6</b>                  60 Minutes or more <b>7</b></p>
<p><b>G.3 What is the main source of drinking water?</b></p> <p>Piped into dwelling or compound <b>1</b>                  Public outdoor tap <b>2</b>                  Borehole <b>3</b>                  Protected well <b>4</b>                  Unprotected well <b>5</b>                  River, lake, pond <b>6</b>                  Vendor, truck <b>7</b>                  Other _____ <b>8</b></p>	<p><b>G.7 How long does it take from here to reach the nearest... A. supply of drinking water?</b></p> <p>Near the dwelling <b>1</b>                  10 Minutes <b>2</b>                  20 Minutes <b>3</b>                  30 Minutes <b>4</b>                  40 Minutes <b>5</b>                  50 Minutes <b>6</b>                  60 Minutes or more <b>7</b></p>	<p><b>E. Secondary School</b></p> <p>Near the dwelling <b>1</b>                  10 Minutes <b>2</b>                  20 Minutes <b>3</b>                  30 Minutes <b>4</b>                  40 Minutes <b>5</b>                  50 Minutes <b>6</b>                  60 Minutes or more <b>7</b></p>
<p><b>G.4 What kind of toilet facility does your household use?</b></p> <p>None (bush) <b>1</b>                  Flush toilet (WC) <b>2</b>                  Pan/Bucket <b>3</b>                  Covered pit latrine <b>4</b>                  Uncovered pit latrine <b>5</b>                  K V I P <b>6</b>                  Other _____ <b>7</b></p>	<p><b>B. Food Market</b> <i>Interviewer, code to nearest 10 minutes</i></p> <p>Near the dwelling <b>1</b>                  10 Minutes <b>2</b>                  20 Minutes <b>3</b>                  30 Minutes <b>4</b>                  40 Minutes <b>5</b>                  50 Minutes <b>6</b>                  60 Minutes or more <b>7</b></p>	<p><b>F. Health clinic or hospital</b></p> <p>Near the dwelling <b>1</b>                  10 Minutes <b>2</b>                  20 Minutes <b>3</b>                  30 Minutes <b>4</b>                  40 Minutes <b>5</b>                  50 Minutes <b>6</b>                  60 Minutes or more <b>7</b></p>

# H - POVERTY PREDICTORS

<p><b>H.1 Does the household use toilet paper rolls?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>	<p><b>H.7 How many times was a meal w/ meat prepared in your hhd in the past week? (exclude fish and chicken)</b></p> <p><b>0 1 2 3 4 5 6 7 8 9</b></p>
<p><b>H.2 Does the household use toothbrush and toothpaste ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>	<p><b>H.8 Can your household afford 2 decent meals per day ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>
<p><b>H.3 Does the household use packaged soap for bathing?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>	<p><b>H.9 Can your household afford decent clothing ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>
<p><b>H.4 Can the household afford transport on a regular, as needed basis ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>	<p><b>H.10 Does the household have access to drinking water for the most part of the year ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>
<p><b>H.5 Do you have any savings or easily convertible assets ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>	<p><b>H.11 Do you owe individuals and/or intitutions (Banks, schools etc.) for which you are unable to pay despite constant reminders?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>
<p><b>H.6 Can you afford medical care (doctor/dentist) and medications on a regular, as needed basis ?</b></p> <p>YES <b>Y</b>                  NO <b>N</b></p>	

