



**FORM 2 : EDUCATION**

## SECTION 1 : AREA IDENTIFICATION

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|                    |     |                                    |     |                        |     |
|--------------------|-----|------------------------------------|-----|------------------------|-----|
| Need to Work       | -01 | Marriage                           | -05 | Under School age       | -09 |
| Family not willing | -02 | illness                            | -06 | To old to go to School | -10 |
| Too Expensive      | -03 | Disabled                           | -07 | Other                  | -11 |
| No school around   | -04 | Do not know the value of education | -08 |                        |     |

## FORM 3

| 1      |   |   | 2 Region |   |   | 3 Zone |  |   | 4 Wereda |   |   | 5 Town |  |    | 6 Kefele Ketema /k/w |  |    | 7 Kebele/F. |  |    | 8 EA code |    |  | 9 House Hold ser. No |  |    | 10 House Hold Size |  |  | 11 Agr. Holding |    | 12 Head of household |    |
|--------|---|---|----------|---|---|--------|--|---|----------|---|---|--------|--|----|----------------------|--|----|-------------|--|----|-----------|----|--|----------------------|--|----|--------------------|--|--|-----------------|----|----------------------|----|
| Job ID |   |   |          |   |   |        |  |   |          |   |   |        |  |    |                      |  |    |             |  |    |           |    |  |                      |  |    |                    |  |  |                 |    |                      |    |
| 1      | 2 | 3 |          | 4 | 5 |        |  | 6 | 7        | 8 | 9 |        |  | 10 |                      |  | 11 | 12          |  | 13 | 14        | 15 |  |                      |  | 18 | 19                 |  |  | 20              | 21 | Yes=1                | 22 |
| W      | 0 | 2 |          |   |   |        |  |   |          |   |   |        |  |    |                      |  |    |             |  |    |           |    |  |                      |  |    |                    |  |  |                 |    | No =2                |    |

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**WELFARE MONITORING SURVEY QUESTIONNAIRE 2004**

**FORM 5 : HOUSING AMENITIES**

**FORM 5**

**SECTION 1 : AREA IDENTIFICATION**

| 1      | 2      | 3    | 4      | 5    | 6 Kifle Ketema/<br>Keftegnal/ Wereda | 7        | 8                | 9              | 10                | 11                | 12 |
|--------|--------|------|--------|------|--------------------------------------|----------|------------------|----------------|-------------------|-------------------|----|
| Job ID | Region | Zone | Woreda | Town | Kebele FA                            | EA Code  | Household Ser. N | Household size | Agri. Holding     | Head of household |    |
| 1 2 3  | 4 5    | 6 7  | 8 9    | 10   | 11 12                                | 13 14 15 | 18 19            | 20 21          | Yes = 1<br>No = 2 | 22                |    |
| W 0 2  |        |      |        |      |                                      |          |                  |                |                   |                   |    |

**SECTION 2 : HOUSING AMENITIES**

| 13      | 14                                       | 15   | 16   | 17            | 18   | 19   | 20  | 21  | 22   |
|---------|--|--|--|---------------|--|--|---|---|--|
| Ser. No | Does this household exist 12 months ago? | How long has this household been living in this dwelling unit?   | On what basis does the household occupy the dwelling unit?                         |               | Main construction material of the wall ?   | Main construction material of the roof ?   | What is the main source of light?   | Was there any electric power interrupt (Lasting for more than an hour) during the past week ?                 | What is the main source of cooking fuel ?  |
|         | Yes = 1<br>No = 2                        | owned = 0<br>From employer (Free of charge or subsidized) = 1<br>From relative (Free of charge or subsidized) = 2<br>Rented from employer = 3<br>Rented from Gov't Rent Agency = 4<br>Rented from Kebele = 5<br>Rented from other NGO'S = 6<br>Rented from Relatives = 7<br>Rented from non-relative household = 8<br>Others = 9 | How many rooms does the dwelling unit has ?<br><br>(Excluding kitchen and toilets) |               | Wood & mud =1<br>Wood & Grass =2<br>Reed & Bamboo =3<br>Mud & Stone =4<br>Cement & Stones =5<br>Hollow Blocks =6<br>Bricks =7<br>Others =8 | Corrugated iron sheet =1<br>Thatch & Grass =2<br>Wood & Mud =3<br>Reed & bamboo =4<br>Clay =5<br>Others =6 | Kerosene = 1<br>Electricity(Private) = 2<br>Electricity(shared) = 3<br>Firewood = 4<br>Candle = 5<br>Others (specify) = 6 | Do not use electric power = 1<br>No interruption = 2<br>Only once = 3<br>Twice = 4<br>Three or more times = 5 | Mainly collected fire wood = 1<br>Mainly purchased fire wood = 2<br>Charcoal = 3<br>Kerosene = 4<br>Butane gas = 5<br>Electricity = 6<br>Crop residue = 7<br>Don't use cooking fuel = 8<br>Other /specify/ = 9 |
| 23 24   |  | Year<br>25 26 27 28 29   | Month<br>30  |               | 31 32  | 33   | 34  | 35  | 36   |
| 0 1     |  |  |  | Now           | Now  | Now  | Now   |   | Now  |
| 0 2     |  |  |  | 12 months ago |  |  | 12 months ago   |   | 12 months ago  |
| 0 3     |  |  |  | 5 years ago   |  |  | 5 years ago   |   | 5 years ago  |

**SECTION 2 : HOUSING AMENITIES (Cont' d)**

| 23      | 24   | 25   | 26   | 27  | 28  | 29  |
|---------|--|--|--|---|---|---|
| Ser. No | What is the main source of drinking water in rainy season?   | What is the main source of drinking water in dry season ?  | Does the Household have a habit of boiling water before drinking ? | Does the household use iodated salt ?<br>(Test the salt)<br>Yes =1<br>No =2 | What type of toilet facility does the household use ?   | What type of waste disposal facility does the household use ?   |
|         | Tap inside the house =1<br>Tap in compound (private) = 2<br>Tap in compound (shared) = 3<br>Tap water outside the compound (shared) = 4<br>Protected well/Spring = 5<br>unprotected well/Spring = 6<br>Rain water =7<br>River, lake, pond ... etc =8 | Tap inside the house = 1<br>Tap in compound (private) = 2<br>Tap in compound (shared) = 3<br>Tap water outside the compound (shared) = 4<br>Protected well/Spring = 5<br>unprotected well/Spring = 6<br>River, lake, pond ... etc =7 | Yes = 1<br>No = 2  |   | Flush toilet (private ) = 1<br>Flush toilet (shared) = 2<br>Pit latrine (private ) = 3<br>Pit latrine (shared) = 4<br>Container (household utensils) = 5<br>Field /forest = 6<br>Others( specify) = 7 | Use waste disposal vehicle/ = 1<br>Use container = 2<br>Uses dug-outs = 3<br>Throw away = 4<br>Use as fertilizer = 5<br>Burning the waste = 6<br>Others( specify) = 7 |
| 38 39   | 40   | 41   | 42   | 43  | 44  | 45  |
| 0 1     | Now  | Now  | Now  | Now   | Now   | Now   |
| 0 2     | 12 months ago  | 12 months ago  | 12 months ago  | 12 months ago   | 12 months ago   | 12 months ago   |
| 0 3     | 5 years ago  | 5 years ago  | 5 years ago  | 5 years ago   | 5 years ago   | 5 years ago   |

**FORM 6 : BASIC FACILITIES ACCESS , UTILIZATION AND SATISFACTION**

FORM 6

## SECTION 1 : AREA IDENTIFICATION

| 1      |   |   | 2      |  |  | 3    |   |  | 4      |   |  | 5    |   |  | 6 Kifle Ketema/<br>Keftegna/ Wereda |  |    | 7         |  |    | 8       |    |  | 9                 |    |  | 10             |    |                   | 11            |  |  | 12                |  |  |
|--------|---|---|--------|--|--|------|---|--|--------|---|--|------|---|--|-------------------------------------|--|----|-----------|--|----|---------|----|--|-------------------|----|--|----------------|----|-------------------|---------------|--|--|-------------------|--|--|
| Job ID |   |   | Region |  |  | Zone |   |  | Woreda |   |  | Town |   |  |                                     |  |    | Kebele FA |  |    | EA Code |    |  | Household Ser. No |    |  | Household size |    |                   | Agri. Holding |  |  | Head of household |  |  |
| 1      | 2 | 3 |        |  |  | 4    | 5 |  | 6      | 7 |  | 8    | 9 |  | 10                                  |  | 11 | 12        |  | 13 | 14      | 15 |  | 18                | 19 |  | 20             | 21 | Yes = 1<br>No = 2 | 22            |  |  |                   |  |  |
| W      | 0 | 2 |        |  |  |      |   |  |        |   |  |      |   |  |                                     |  |    |           |  |    |         |    |  |                   |    |  |                |    |                   |               |  |  |                   |  |  |

## SECTION 2 : ACCESS AND UTILIZATION OF BASIC FACILITIES

| 13           |                  | 14  |    |    |    | 15   |               |              |                    | 16  |                         |       |    | 17  |   |    |    | 18   |    | 19 |    |  |  | 20 |  |
|--------------|------------------|---|----|----|----|--|---------------|--------------|--------------------|---|-------------------------|-------|----|---|---|----|----|--|----|----|----|--|--|----|--|
| Serial<br>No | Type of facility | How far is the nearest facility ?<br><br>(If the distance is less than a kilometer enter '00' ) |    |    |    | To what extent does the household use this facility ? Ask for each<br><br>Do not use at all = 1<br>Use occasionally = 2<br>Use often = 3<br>Use always = 4 |               |              |                    | If code 1 or 2 in column 16   |                         |       |    | If the household utilizes the service (if code 2, 3 and 4 in column 16) |   |    |    | What mode of transport does the household mostly use to reach the nearest facility ? |    |    |    |  |  |    |  |
|              |                  |   |    |    |    |  |               |              |                    | Main reason for non-use or occasional use of the facility with the service<br><br>Yes = 1<br>No = 2 |                         |       |    | Are you satisfied with the service?                                     | How does the quality of the service compare with that of 12 months ago? |    |    |  |    |    |    |  |  |    |  |
|              |                  |   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
|              |                  |   |    |    |    | Too far away   | Too expensive | Poor service | No staff/equipment | Inadequate facilities   | No need or /not applic. | Other |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 23           | 24               | 25  | 26 | 27 | 28 | 29   | 30            | 31           | 32                 | 33  | 34                      | 35    | 36 | 37  | 38  | 39 | 40 | 41   | 42 | 43 | 44 |  |  |    |  |
| 0            | 1                | Primary school  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 2                | Secondary school  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 3                | Health post   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 4                | Clinic  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 5                | Health center   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 6                | Hospital  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 7                | prenatal/postnatal care   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 8                | Telecommunication   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 0            | 9                | postal service  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 0                | Public transport  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 1                | Milling service   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 2                | Drinking water (dry season)   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 3                | Drinking water (rainy season)   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 4                | Food market   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 5                | All weather road  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 6                | Dry weather road  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 7                | Agricultural extension service  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 8                | Veternary service   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 1            | 9                | Fertilizer provider   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 2            | 0                | Improved seeds provider   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 2            | 1                | Pesticides/Herbicides/Insecticides provider   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 2            | 2                | Police station  |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 2            | 3                | Primary court   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 2            | 4                | Micro finance   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |
| 2            | 5                | Source of fire wood   |    |    |    |  |               |              |                    |   |                         |       |    |   |   |    |    |  |    |    |    |  |  |    |  |

## WELFARE MONITORING SURVEY QUESTIONNAIRE 2004

FORM 7

## FORM 7: ASSET OWNERSHIP

## SECTION 1 : AREA IDENTIFICATION

| 1<br>Job ID |   |   | 2<br>Region |   | 3<br>Zone |   | 4<br>Woreda |   | 5<br>Town |    | 6 Kefetegna<br>Wereda ( K/ Ketema) |    | 7<br>Kebele FA |    |  | 8 EA<br>Code |    | 9 Househo<br>Sr. No |    | 10 Househo<br>Size |  | 11 Agri.<br>holding |  | 12<br>Head of household |  |
|-------------|---|---|-------------|---|-----------|---|-------------|---|-----------|----|------------------------------------|----|----------------|----|--|--------------|----|---------------------|----|--------------------|--|---------------------|--|-------------------------|--|
| 1           | 2 | 3 | 4           | 5 | 6         | 7 | 8           | 9 | 10        | 11 | 12                                 | 13 | 14             | 15 |  | 18           | 19 | 20                  | 21 | Yes = 1            |  | 22                  |  |                         |  |
| W           | 0 | 2 |             |   |           |   |             |   |           |    |                                    |    |                |    |  |              |    |                     |    | No = 2             |  |                     |  |                         |  |

## SECTION 2: OWNERSHIP OF LAND, DWELLINGS AND OTHER BUILDINGS

| 13            |  | 14  |  | 15  |   | 16                     |               | 17            |      | #    |      | 19               |    | 20 |    | 21  |    |    |    |    |    |    |               |
|---------------|--|---|--|---|---|------------------------|---------------|---------------|------|------|------|------------------|----|----|----|---|----|----|----|----|----|----|---------------|
| Serial Number | Does this household exist 12 months ago? | Does any member of the household (including the head of the household) own dwellings or other buildings ? | How many dwellings or other buildings are owned in all ? | Does any member of the household (including the head of the household) own any land holding ? | How many plots / piece of land does the household own ? | If code 1 in column 17 |               |               |      |      |      |                  |    |    |    | How does the size of land / plots compare to the amount 12 months ago/ 5 years ago? |    |    |    |    |    |    |               |
|               |  |   |  |   |   | Total area of the land |               |               |      |      |      |                  |    |    |    |   |    |    |    |    |    |    |               |
|               |  |   |  |   |   |                        | In local unit |               |      |      |      | In standard unit |    |    |    |   |    |    |    |    |    |    |               |
|               |  |   |  |   |   |                        | Name          | Code          | Area | Name | Code | Area             |    |    |    |   |    |    |    |    |    |    |               |
| 23            | 24                                       | 25  | 26   | 27  | 28  | 29                     | 30            | 31            | 32   | 33   | 34   | 35               | 36 | 37 | 38 | 39  | 40 | 41 | 42 | 43 | 44 | 45 | 46            |
| 0             | 1  | Now   | Now  | Now   | Now   | Now                    | Now           | Now           |      |      |      |                  |    |    |    |   |    |    |    |    |    |    | Now           |
| 0             | 2  | 12 months ago   | 12 months ago  | 12 months ago   | 12 months ago   | 12 months ago          | 12 months ago | 12 months ago |      |      |      |                  |    |    |    |   |    |    |    |    |    |    | 12 months ago |
| 0             | 3  | 5 years ago   | 5 years ago  | 5 years ago   | 5 years ago   | 5 years ago            | 5 years ago   | 5 years ago   |      |      |      |                  |    |    |    |   |    |    |    |    |    |    | 5 years ago   |

## SECTION 2: OWNERSHIP OF LAND, DWELLINGS AND OTHER BUILDINGS (Cont'd)

| 22  |  | 23   |                        | 24 |  | 25 |  | 26 |  |
|---|--|--|------------------------|----|--|----|--|----|--|
| How does the household use land it does not own ? | How many plots / piece of land that is not owned use that it doesn't own ? | How does the size of land/plots that is not owned by the household compare with the amount 12 months ago ? | Total area of the land |    |  |    |  |    |  |
|   |  |  |                        |    |  |    |  |    |  |
|   |  |  |                        |    |  |    |  |    |  |
|   |  |  |                        |    |  |    |  |    |  |
| Do not use = 1                                    |  |  |                        |    |  |    |  |    |  |
| Rented = 2  |  |  |                        |    |  |    |  |    |  |
| Share cropped = 3                                 |  |  |                        |    |  |    |  |    |  |
| Rent free = 4                                     |  |  |                        |    |  |    |  |    |  |
| Others = 5  |  |  |                        |    |  |    |  |    |  |
| 47  | 48   | 49   | 50                     |    |  |    |  |    |  |
| Now   | Now  | Now  | Now                    |    |  |    |  |    |  |
| 12 months ago                                     | 12 months ago  |  |                        |    |  |    |  |    |  |
| 5 years ago                                       | 5 years ago  |  |                        |    |  |    |  |    |  |

## FORM 7: ASSET OWNERSHIP

## SECTION 3: OWNERSHIP OF OTHER HOUSEHOLD ASSET

| 27            | 28                             | 29   | 30                                |    |    | 31   |    |
|---------------|--------------------------------|--|-----------------------------------|----|----|--|----|
| Serial Number | Household assets               | Does the household currently own _____ ?               | If yes in column 29               |    |    | How does the amount currently owned compare with 12 months ago ? |    |
|               |                                | Yes = 1<br>No = 2<br>Go to col.31<br>Not applicable =3 | How many does the household own ? |    |    | More now =1<br>Same now =2<br>Less now =3<br>Not applicable = 4  |    |
| 65            | 66                             |  | 67                                | 68 | 69 | 70   | 71 |
| 0             | 1 Cattle                       |  |                                   |    |    |  |    |
| 0             | 2 Ploughing animals            |  |                                   |    |    |  |    |
| 0             | 3 Pack-animals                 |  |                                   |    |    |  |    |
| 0             | 4 Equine animals               |  |                                   |    |    |  |    |
| 0             | 5 Sheep and goats              |  |                                   |    |    |  |    |
| 0             | 6 Poultry/chicken              |  |                                   |    |    |  |    |
| 0             | 7 'Mofer & Kember'             |  |                                   |    |    |  |    |
| 0             | 8 Sickle/ 'Mecha'              |  |                                   |    |    |  |    |
| 0             | 9 Axe/ 'Gejera'                |  |                                   |    |    |  |    |
| 1             | 0 Pick axe/ 'Geso'             |  |                                   |    |    |  |    |
| 1             | 1 Plough                       |  |                                   |    |    |  |    |
| 1             | 2 Stoves /Gas,electric/        |  |                                   |    |    |  |    |
| 1             | 3 Blanket/"Gabi"               |  |                                   |    |    |  |    |
| 1             | 4 Mattersses and/or beds       |  |                                   |    |    |  |    |
| 1             | 5 Watches or clocks            |  |                                   |    |    |  |    |
| 1             | 6 Iron (electric or charcol)   |  |                                   |    |    |  |    |
| 1             | 7 Telephone(Landline/Mobile/   |  |                                   |    |    |  |    |
| 1             | 8 Radio                        |  |                                   |    |    |  |    |
| 1             | 9 Television                   |  |                                   |    |    |  |    |
| 2             | 0 Video deck                   |  |                                   |    |    |  |    |
| 2             | 1 Sofa set                     |  |                                   |    |    |  |    |
| 2             | 2 Table and chair              |  |                                   |    |    |  |    |
| 2             | 3 Bicycle                      |  |                                   |    |    |  |    |
| 2             | 4 Cart                         |  |                                   |    |    |  |    |
| 2             | 5 Sewing machine               |  |                                   |    |    |  |    |
| 2             | 6 Loom                         |  |                                   |    |    |  |    |
| 2             | 7 Refrigerator                 |  |                                   |    |    |  |    |
| 2             | 8 Car (Private or commercial ) |  |                                   |    |    |  |    |
| 2             | 9 Jewellery (Gold/Silver)      |  |                                   |    |    |  |    |

**WELFARE MONITORING SURVEY QUESTIONNAIRE 2004**  
**FORM 8: SELECTED INDICATORS OF HOUSEHOLDS LIVING CONDITIONS**

**FORM 8**

**SECTION 1 : AREA IDENTIFICATION**

|        |   |      |   |   |   |   |   |    |    |    |    |
|--------|---|------|---|---|---|---|---|----|----|----|----|
| Job ID | 2 | Zone | 4 | 5 | 6 | 7 | 8 | 9  | 10 | 11 | 12 |
| 1      | 3 | 4    | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
| W      | 2 |      |   |   |   |   |   |    |    |    |    |

**SECTION 2: INDICATORS OF HOUSEHOLDS LIVING CONDITIONS**

|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|---------------|--|---|--|--|--|--|---|--|--|---|--|---|---|
| 13            | 14   | 15  | 16   | 17   | 18   | 19   | 20  | 21   | 22   | 23  | 24                                     | 25  |   |
| Serial Number | Has this household suffered food shortage during the last 12 months? | If Yes in Column 14 For how many months suffered food shortage during the last 12 months? | How is this household's current living standard with respect to food compare with 12 months ago? | How is this household's current living standard with respect to clothing compare with 12 months ago? | How is the overall living standard of the household compare with 12 months ago?          | How is the overall living standard of the community compare with 12 months ago?          | For how many months do you think your current year crop production lasts in subsisting the household? | Is the household capable to raise 100 Birr within a week time in case of any emergency need? | If "yes" in column 21 How would the household obtain the 100 Birr?   | What is the main source of income of the household? | Major Shocks During the last 12 months | If code 1 in column 24 How did the household cope with the shock? | How many times does this household experienced the Major Shock over the last 5 years? |
|               | Yes=1<br>No=2  | (If less than one month enter 00)   | Much worse =1<br>Worse now =2<br>Same =3<br>A little better now =4<br>Much better now =5         | Much worse =1<br>Worse now =2<br>Same =3<br>A little better now =4<br>Much better now =5             | Much worse =1<br>Worse now =2<br>Same =3<br>A little better now =4<br>Much better now =5 | Much worse =1<br>Worse now =2<br>Same =3<br>A little better now =4<br>Much better now =5 | Don't know =6   | Yes<br>No  | Sale of animals/products =01<br>Sale of crops =02<br>Sale of forest products =03<br>Own cash =04<br>Withdrawal from Bank/Saving =05<br>'Equib' =06<br>Edir' =07<br>Loan from Bank or other institutions =08<br>Loan from Relatives =09<br>Gift from Relatives =10<br>Loan from non-relatives =11<br>Gift from non-relatives =12<br>Sale of household assets =13<br>Sale of personal items (Jewelleries , etc.) =14<br>Others (specify) =15 | (In cash or in kind)<br>Yes = 1<br>No = 2           | Yes = 1<br>No = 2                      | Yes = 1<br>No = 2   | (Ask for each of the Specified Major Shock In Col. 24)                                |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
|               |  |   |  |  |  |  |   |  |  |   |  |   |   |
| 23            | 25   | 26  | 27   | #  | 29   | #  | 31  | 32   | 33   | 34  | #                                      | 34  | 36  |
| 0             |  |   |  |  |  |  |   |  |  |   |  |   |   |

**Codes for column 23 :**

|  |     |   |     |   |     |
|--|-----|---|-----|---|-----|
| From own agricultural enterprise                         | =01 | Collected free (wood,Water, ...etc)           | =07 | Income from house rent                                      | =13 |
| From household enterprise other than agriculture         | =02 | Wages salaries,bounes,overtime and allowances | =08 | Income from rent other than house rent                      | =14 |
| Gift and remittance received from gov. organization      | =03 | Pension and other social security benefits    | =09 | From Sale of household fixed assets and personal care goods | =15 |
| Gift and remittance received from NGOs                   | =04 | From saving (Bank and other, saving account)  | =10 | Other current transfers                                     | =16 |
| Gift and remittance received from households/individuals | =05 | Interests and royalties received              | =11 |   |     |
| Gift and remittance received from abroad                 | =06 | Dividends                                     | =12 |   |     |

## Form-9

## Form-9

## SECTION 1 : AREA IDENTIFICATION

| SECTION 1: AREA IDENTIFICATION |   |   |             |   |   |           |   |   |             |    |    |           |    |    |                |    |    |                |    |                   |              |                       |                      |                     |                         |
|--------------------------------|---|---|-------------|---|---|-----------|---|---|-------------|----|----|-----------|----|----|----------------|----|----|----------------|----|-------------------|--------------|-----------------------|----------------------|---------------------|-------------------------|
| 1<br>Job ID                    |   |   | 2<br>Region |   |   | 3<br>Zone |   |   | 4<br>Woreda |    |    | 5<br>Town |    |    | 6<br>Kefetegna |    |    | 7<br>Kebele FA |    |                   | 8.EA<br>Code | 9 Household<br>Sr. No | 10 Household<br>Size | 11 Agri.<br>holding | 12<br>Head of household |
| 1                              | 2 | 3 | 4           | 5 | 6 | 7         | 8 | 9 | 10          | 11 | 12 | 13        | 14 | 15 |                | 18 | 19 | 20             | 21 | Yes = 1<br>No = 2 | 22           |                       |                      |                     |                         |
| W                              | 0 | 2 |             |   |   |           |   |   |             |    |    |           |    |    |                |    |    |                |    |                   |              |                       |                      |                     |                         |

**SECTION 2: HIV/AIDS (ALL HOUSEHOLDS)**

| 13            |    | 14   |  | 15                                      |  | 16  |  | 17  |  |     |  |      |  |    |  | 18   |  |  | 19  |                 | 20  |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|---------------|----|--|--|---|--|---|--|---|--|-----|--|------|--|----|--|--|--|--|---|-----------------|---|------------|--|--------------|--|----|--|----|--|----|--|-----------------|--|----|--|----|--|----|--|----|--|
| Serial Number |    | DO You know the existence of HIV/AIDS?<br><br>Yes=1<br><br>No=2<br><br>(End Questions) |  | If Yes in COL.14                        |  | Did you realize any person (sick / dead) of HIV/AIDS in your village during the last twelve months?<br><br>Yes =1<br>No =2<br>I don't Know =3<br>Not willing to answer =4 |  | If 'yes' in Column 16<br><br>Would you please specify the number of persons whom you think were Sick /Dead of HIV/AIDS in your Village during the last 12 Months? |  |     |  |      |  |    |  | Which HIV/AIDS Protection Methods do you know ?<br><br>Yes =1<br>No =2<br>Not willing to Answer =3 |  |  | If yes in Column 18<br><br>Have you ever used any of the protection methods in the last twelve months ?<br><br>Yes =1<br>No =2<br>Not willing to Answer=3 |                 | If code1 (Yes ) in Col 19<br><br>To what extent did you use the protection methods ?<br><br>Always =1<br>Most of the time =2<br>Some times =3<br><br>(Please ask for each of the method stated below) |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  | Do you know HIV/AIDS Transmission ways? |  |   |  |   |  |     |  |      |  |    |  |  |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  |   |  |   |  |   |  |     |  |      |  |    |  |  |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  |   |  |   |  |   |  |     |  |      |  |    |  |  |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  |   |  |   |  |   |  |     |  |      |  |    |  |  |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  | Sexual Intercourse                      |  | Blood   |  | Mother to Child   |  | Age |  | Sick |  |    |  | Dead   |  |  |   | Being Faithfull |   | Abstinence |  | Using Condom |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  |   |  |   |  |   |  |     |  | Male |  |    |  | Female   |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |
|               |    |  |  |   |  |   |  |   |  |     |  | 30   |  |    |  | 31   |  |  |   | 32              |   | 33         |  | 34           |  | 35 |  | 36 |  | 37 |  | 38              |  | 39 |  | 40 |  | 41 |  | 42 |  |
| 23            | 24 |  |  | 25                                      |  | 26  |  | 27  |  | 28  |  |      |  | 29 |  | Below age 15   |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  | Being Faithfull |  |    |  |    |  |    |  |    |  |
| 0             | 1  |  |  |   |  |   |  |   |  |     |  |      |  |    |  | 15-64  |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  | Abstinence      |  |    |  |    |  |    |  |    |  |
| 0             | 2  |  |  |   |  |   |  |   |  |     |  |      |  |    |  | 65 and above   |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  | Condom          |  |    |  |    |  |    |  |    |  |
| 0             | 3  |  |  |   |  |   |  |   |  |     |  |      |  |    |  |  |  |  |   |                 |   |            |  |              |  |    |  |    |  |    |  |                 |  |    |  |    |  |    |  |    |  |