

## HOUSEHOLD INTERVIEW

### 1. To be completed by Enumerator

*Please complete before the Interview*

<b>Please complete before the interview:</b>		
<b>0.1 -</b>	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _  <i>Name enumerator</i>	
<b>0.2 -</b>	_ _ _  <i>Interviewer ID</i>	
<b>0.3 -</b>	<b>Date:</b>  _ _ _  /  _ _ _  / <b>2005</b> <i>Day</i> <i>Month</i>	
<b>0.4 -</b>	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _  <i>District</i>	
<b>0.5 -</b>	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _  <i>Sub-County</i>	
<b>0.6 -</b>	_ _ _ _ _ _ _ _ _ _ _ _ _ _ _  <i>Village or Camp</i>	
<b>0.7 -</b>	_ _ _ _ _ _ _  <i>Quest Code</i>	
<b>0.8-</b>	Household skipped before reaching this respondent and reason for skipping: <b><u>coding :</u></b> 1 = HH Refused 2 = House was empty: 3 = No one older than 15 home	HH 1: ____ HH2: ____ HH3: ____

Please read the following consent form: "My name is [your name]. We are collecting information here in [district]. I would like to ask you to participate in a one-to one interview on food security and nutrition. The discussion will take about one hour and half and will be followed by weighting and measurements at a nearby location. Please answer all the questions truthfully. You will not be judged on your responses and we ask you to be sincere in your responses.

There is no direct benefit, money or compensation to you in participating in this study. Your participation is voluntary. You may refuse to answer any question and you may choose to stop the discussion at any time. Refusing to participate will not affect you or your family in any way. However, we hope that the research will benefit Uganda by helping us understand what people need in order to help the country move forward.

The researchers will keep your responses confidential and only researchers involved in this study will review the discussion notes. You do not need to use your real name in the interview. Your full name will not be written down anywhere nor will there be any way to identify you. Do you have any questions for me? You may ask questions about this study at any time."

<b>0.9-</b>	Native Language of the interviewee:	1	Ateso - Ngakarimojong		
		2	Luganda - Lusoga		
		3	Lugbara - Madi		
		4	Luo		
		5	Runyankole - Rukiga		
		6	Runyoro - Rutoro		
		7	English		
		8	Other, specify _____		
<b>0.10-</b>	Language in which the interview will be conducted:	1	Ateso - Ngakarimojong		
		2	Luganda - Lusoga		
		3	Lugbara - Madi		
		4	Luo		
		5	Runyankole - Rukiga		
		6	Runyoro - Rutoro		
		7	English		
		8	Other, specify _____		
<b>0.11-</b>	Is there an interpreter?	1	Yes	2	No

**Signature of interviewer:**

**2. To be completed by Supervisor:**

<b>0.0- Questionnaire Number:</b>		
_ _ _ _ _  <i>Dist. code</i>	_ _ _ _ _  <i>Loc. code</i>	_ _ _ _ _  <i>Quest. code</i>
<b>0.12 - Date:</b>  _ _ _  /  _ _ _  / <b>2005</b> Day Month		
<b>0.13-</b>  _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _  Name of supervisor		
<b>Remarks:</b>		
<b>Signature of supervisor:</b>		

### 3. To be completed by Data Entry Operator

<p><b>0.14 - Date:</b>  __ __  /  __ __  / <b>2005</b></p> <p style="text-align: center;"><i>Day                      Month</i></p>	
<p><b>0.15-</b>  __ __ __ __ __ __ __ __ __ __ </p> <p style="text-align: center;"><i>Name of data entry operator</i></p>	
<p><b>Remarks:</b></p> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>	
<p><b>Signature of data entry:</b></p>	

***Unless specified otherwise, do not read the answer and circle only one answer per questions. Where writing is required, write clearly using capital letters.***



**SECTION 1 – DEMOGRAPHICS:** Read - "I would now like to ask you a few questions on the composition of your household"

A household is defined as a group of people currently living and **eating** together "under the same roof" (or in same compound if the HH has 2 structures)

<b>1.1 -</b>	How many people are currently living in your household?	_ _			
<b>1.2a -</b>	What is the gender (sex) of the household head?	1	Male	2	Female → <b>1.3</b>
<b>1.2b -</b>	How many wives does he have?	_ _			
<b>1.3 -</b>	What is the age of the household head?	_ _			
<b>1.4 -</b>	What is the marital status of the household head?	1	Married		
		2	Partner		
		3	Divorced → <b>1.6</b>		
		4	Living apart not divorced → <b>1.6</b>		
		5	Widow or widower → <b>1.6</b>		
		6	Never married → <b>1.6</b>		
<b>1.5 -</b>	What is the age of the household head SPOUSE?	_ _			
<b>1.6 -</b>	<i>Please, complete this household's demographics table on the right. Make sure to differentiate between males and females.</i>	<b>Male</b>		<b>Female</b>	
	<b>a - 0 – 5 years</b>	_ _		_ _	
	<b>b - 6 – 12 years</b>	_ _		_ _	
	<b>c - 13 – 15 years</b>	_ _		_ _	
	<b>d - 16 – 18 years</b>	_ _		_ _	
	<b>e - 19 – 49 years</b>	_ _		_ _	
	<b>f - 50 – 60 years</b>	_ _		_ _	
	<b>g - 61 + years</b>	_ _		_ _	
<b>1.7 -</b>	Can the Household Head / Spouse read and write a simple message?	<b>Household Head</b>		<b>Spouse (if any)</b>	
		1	Yes	2	No
		1	Yes	2	No
<b>1.8 -</b>	What is the level of education of the household head / spouse (use codes below)	<b>Household Head</b>		<b>Spouse (if any)</b>	
	<div> 1 = No School  2 = Some Primary (P1-P6 but not P7)  3 = Completed Primary-P7  4 = Vocational School  5 = Some Secondary School (S1-S3, not S4) </div> <div> 6 = Completed Secondary  7 = Completed Advance level or "A" level  8 = Some / Completed Tertiary  9 = Some / Completed University </div>	_		_	
<b>1.9 -</b>	Is anyone in your household attending primary school?	1	Yes, How many?  _ _	2	No
<b>1.10 -</b>	Is anyone in your household attending secondary school?	1	Yes, How many?  _ _	2	No
<b>1.11 -</b>	Is anyone in your household attending university?	1	Yes, How many?  _ _	2	No
<b>1.12 -</b>	Did anyone miss school for at least <u>1 week</u> in the last <u>6 months</u>	1	Yes	2	No → <b>1.14</b>
<b>1.13 -</b>	If yes, why?	1	Sickness		
	<b>CIRCLE ALL THAT APPLY</b>	2	Work for money or food		
		3	Domestic work (gardening, fetching water)		
		4	Take care of siblings		
		5	Long distance to school		
		6	No money for school fee		
		7	Insecurity		
		8	Refused to go		



<b>1.14 -</b>	Is anyone in your household chronically ill or disabled?	1	Yes	2	No → <b>1.17</b>	
<b>1.15 -</b>	Is the head of the household chronically ill or disabled?	1	Yes	2	No	
<b>1.16 -</b>	Please complete table on the right for each chronically ill member		<b>Age</b>	<b>Gender</b>	<b>Disease</b>	<b>Disability</b>
	<b>Chronic disease</b> 01 = HIV/AIDS 02 = cardio-vascular 03 = Diabetes 04 = Cancer 0 = None 12 = Unsure 13 = Don't know 14 = Other, Specify: _____					
	<b>Disability</b> 05 = Amputee 06 = Deaf 07 = Blindness 08 = Lame-polio 09 = Mentally Retarded 10 = Lame - injury 11 = Mad	1	1	Male	2	Female
		2	1	Male	2	Female
		3	1	Male	2	Female
		4	1	Male	2	Female
<b>1.17 -</b>	In the past <u>6 months</u> , has any member of your household died? (request for the exact date of death or for a significant event to date the death and make sure it was within the last 6 months)	1	Yes	2	No → <b>Section 2</b>	
<b>1.18 -</b>	Please complete table on the right for each deceased member		<b>Age</b>	<b>Gender</b>	<b>Disease</b>	<b>Disability</b>
	Use code 1.16	1	1	Male	2	Female
		2	1	Male	2	Female
		3	1	Male	2	Female
		4	1	Male	2	Female

**SECTION 2 – CONTEXTUAL INFORMATION**

<b>2.1 -</b>	Has your household ever been displaced from your normal place of living?	1	Yes	2	No → <b>2.7</b>
<b>2.2 -</b>	Why did you or members of your households move?  <b>CIRCLE ALL THAT APPLY</b>	1	Was forced by the government		
		2	Because of insecurity		
		3	Property was destroyed		
		4	Because of poverty / economic reason		
		5	Family / Clan / neighbors moved		
		6	Because of drought / bad weather		
		7	Other, specify _____		
<b>2.3 -</b>	Are you or members of your household currently resettled in your normal place of living?	1	Yes → <b>2.7</b>	2	No
<b>2.4 -</b>	If not, what problems have prevented you from returning to your normal place of living?  <b>CIRCLE ALL THAT APPLY</b>	1	Government policy		
		2	Insecurity		
		3	No landholding in place of origin		
		4	Property was destroyed		
		5	Property is occupied by others		
		6	No resources to go back		
		7	Poverty in normal place of living		
		8	Other, specify _____		
<b>2.5 -</b>	Are you or your household in contact with community members of your original place of residence?	1	Yes	2	No
<b>2.6 -</b>	What did you or members of your households rely on to sustain your life before you were displaced?  <b>CIRCLE ALL THAT APPLY</b>	1	Agriculture		
		2	Unskilled wage labour		
		3	Trader (Self-Employed, Commercial)		
		4	Teacher		
		5	Medical Worker		
		6	Other government worker		
		7	Artisan Skilled labor		
		8	External aid, assistance		
		9	Work for international organization		
		10	Other, specify _____		



<b>2.7 -</b>	What do you or members of your households currently rely on to sustain your life?  <b>CIRCLE ALL THAT APPLY</b>	1	Agriculture		
		2	Unskilled wage labour		
		3	Trader (Self-Employed, Commercial)		
		4	Teacher		
		5	Medical Worker		
		6	Other government worker		
		7	Artisan Skilled labor		
		8	External aid, assistance		
		9	Work for international organization		
		10	Other, specify _____		
<b>2.8 -</b>	Over the last one year did your household experience any of the following ...				
<b>2.8a -</b>	Have your house damaged	1	Yes	2	No
<b>2.8b -</b>	Have productive resources looted or stolen	1	Yes	2	No
<b>2.8c -</b>	Have a household member killed	1	Yes	2	No → <b>2.8e</b>
<b>2.8d -</b>	Have the head of the household killed?	1	Yes	2	No
<b>2.8e -</b>	Have a household member abducted or threatened to death	1	Yes	2	No
<b>2.8f -</b>	Have a household member physically maimed or injured	1	Yes	2	No

**SECTION 3 – HOUSING AND FACILITIES**

<b>3.1 -</b>	When did your household move to this current settlement? <i>If don't know, write 9999</i>	Year	_ _ _ _		
<b>3.2 -</b>	Do you or your household own or rent this dwelling?	1	Own → <b>3.4</b>		
		2	Don't own but live for free → <b>3.4</b>		
		3	Rent,		
<b>3.3 -</b>	How much do you pay per month (in Ug. Sh.) <i>If payment in kind, write 9999 and specify</i>	_____ Ug. Sh.			
<b>3.4 -</b>	Which of the following best describes the dwelling?  <b>IF POSSIBLE, DON'T ASK, ANSWER BASED ON YOUR OBSERVATION</b>	1	Single family house- concrete/burned bricks		
		2	Separate apartment- concrete/burned bricks		
		3	Mudhouse		
		4	Mudhouse with multiple units		
		5	Shelter		
		6	Other, specify _____		
<b>3.5 -</b>	What is the major construction material of the outside walls?  <b>IF POSSIBLE, DON'T ASK, ANSWER BASED ON YOUR OBSERVATION</b>	1	Concrete / burned bricks		
		2	Mud blocks		
		3	Mud and straw		
		4	Wood		
		5	Plastic shelter		
		6	Other, specify _____		
<b>3.6 -</b>	What is the major material of the roof?  <b>IF POSSIBLE, DON'T ASK, ANSWER BASED ON YOUR OBSERVATION</b>	1	Concrete		
		2	Tiles		
		3	Straw (grass, papyrus, banana fibres)		
		4	Wood		
		5	Plastic shelter		
		6	Galvanized iron		
		7	Other, specify _____		
<b>3.7 -</b>	What is the major material of the floor?  <b>IF POSSIBLE, DON'T ASK, ANSWER BASED ON YOUR OBSERVATION</b>	1	Concrete		
		2	Mud		
		3	Straw		
		4	Wood		
		5	Plastic sheeting		
		6	Tiles		
		7	Other, specify _____		



3.8 -	How many sleeping rooms do you have?	Rooms	_ _
3.9 -	How many people usually sleep in this dwelling?	People	_ _
3.10 -	What kind of toilet facility does your household use?	1	Flush latrine
		2	Traditional pit latrine
		3	Open pit (no walls)
		4	Mobilets – Mobile toilets
		5	None / bush, stream
3.11 -	What is the main source of lighting for this house?	1	Electricity
		2	Kerosene, oil or gas lamp
		3	Candles or battery flashlights
		4	No lighting
3.12 -	What fuel do you use most often for cooking?	1	Gas
		2	Electricity
		3	Wood, Charcoal
		4	Kerosene
		5	Other, specify _____
3.13 -	What is the nearest road to your household?	1	Trunk road (tarmac)
		2	Trunk road (murrum)
		3	Feeder road
		4	Community road
3.14 -	How far is the nearest road from your household? <i>Record both time in minutes and distance in km to access road. Write 99 if don't know, Write 00 if on premise</i>	_ _	Minutes
		_ _ .	_ _  Km
3.15 -	What is the major constraint you find when using the road?	1	None
		2	Poor road maintenance
		3	Insecurity
		4	No transportation
		5	Other, specify _____
3.16 -	What mode of transportation do you usually use?	1	By foot
		2	Donkey
		3	Bicycle
		4	Motorbike
		5	Bus / car
		6	Don't know
3.17 -	Over the LAST MONTH, how often did you go to the market to buy food	1	Never → 3.21
		2	Once a month
		3	Two to three times a month
		4	Four to ten times a month
		5	More than 11 times a month
3.18 -	What type of market did you most often go to?	1	Small daily market in the village
		2	Weekly village market
		3	Large "auction market"
		4	Shops, commercial center
3.19 -	How far is that market from your household? <i>Record both time in minutes and distance in km to access road Write 99 if don't know, Write 00 if on premise</i>	_ _	Minutes
		_ _ .	_ _  Km
3.20 -	How far is the nearest health centre from your household? <i>Record both time in minutes and distance in km to access road Write 99 if don't know, Write 00 if on premise</i>	_ _	Minutes
		_ _ .	_ _  Km
<b>For each of the following question, please distinguish between rainy and dry season, use the codes in the grey areas.</b>		<b>Dry Season</b>	<b>Rainy Season</b>
3.21 -	What is the main source of water for your household?  <div> 1 = Public tap/ piped water      5 = Pond, lake, river or stream  2 = Tubewell/borehole with pump      6 = Rain water  3 = Protected dug well or spring      7 = Mobile tanker  4 = Unprotected well or spring      8 = Vendor </div>	_	_
3.22 -	How far is the main source of water for your household? <i>Record both time in minutes and distance in km to access source Write 99 if don't know, Write 00 if water on premise</i>	_ _	Minutes
		_ _ .	_ _  Km
		_ _	Minutes
		_ _ .	_ _  Km



**SECTION 4 – HOUSEHOLD ASSETS AND PRODUCTIVE ASSETS**

<b>4.2a-</b>	Does your household have access to agriculture / farming land?	1	yes	2	No → <b>4.17</b>
<b>4.2b-</b>	Total land owned	_ _  parcels		_ _ .  _  acres	
<b>4.2c-</b>	Total land rented in, sharecropped <u>in</u> or borrowed	_ _  parcels		_ _ .  _  acres	
<b>4.2d-</b>	Total land rented out, sharecropped <u>out</u> or lent <u>out</u>	_ _  parcels		_ _ .  _  acres	
<b>4.2e-</b>	Total land under cultivation <u>last year</u>	_ _  parcels		_ _ .  _  acres	
<b>4.3</b>	How many adults men (>18) in your household usually participate in farming work?	_ _  men household members			
<b>4.4</b>	How many adults women (>18) in your household usually participate in farming work?	_ _  women household members			
<b>4.5</b>	How many children in your household usually participate in farming work?	_ _  children household members			

In the last year, did you pay people (cash or in-kind) to help you with the following agricultural activities?

<b>4.6 -</b>	Land preparation	1	Yes	2	No
<b>4.7 -</b>	Weeding	1	Yes	2	No
<b>4.8 -</b>	Harvesting	1	Yes	2	No

Please complete the following table one crop at the time, use the codes outlined for each question

<b>a -</b> What are the main crops cultivated by your household?  <i>Please enter code for up to 8 main crops from list below. If respondents list less than 8 crops, write 00 in empty spaces.</i>	<b>b -</b> What is your normal <b>annual</b> production of [crop] in kg?  <i>Please provide estimate if answer is in other unit</i>	<b>c -</b> Does your production of [crop] usually last till next harvest?  1 = Yes 2 = No	<b>d -</b> What proportion of your production of [crop] do you sell?  (% - write 000 if none sold, write 100 if cash crop)	<b>e -</b> How do you usually acquire [crop] seeds  1 = Purchase 2 = Exchange with farmers 3 = Gift from relatives/family 4 = Reserved from previous harvest 5 = received from NGOs, govt,... 6 = Other, specify: _____
<b>4.9 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.10 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.11 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.12 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.13 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.14 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.15 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %
<b>4.16 -</b>	_ _	_ _ _ _ .  _	_	_ _ _  %

01 = Maize	06 = Irish Potato	11 = Kidney beans	16 = Garden/field peas	21 = Tobacco
02 = Millet	07 = Sweet Potato	12 = Cow peas	17 = Ground nuts	22 = Sugarcane
03 = Sorghum	08 = Cassava	13 = Pigeon peas	18 = Simsim	23 = Other cash crop
04 = Rice	09 = Other roots/tuber	14 = Soy beans	19 = Tea	
05 = Other cereals	10 = Matooke	15 = Other vegetables	20 = Coffee	

(Use this space for calculation or comments on production, if needed)



HOUSEHOLD INTERVIEW

<b>4.17 -</b>	Does your household own any fruit or nut trees?	1	Yes	2	No
<b>4.18 -</b>	Do you have a household vegetable plot /garden?	1	Yes	2	No
<b>4.19 -</b>	How do you usually store your cereals?	1	Sacks		
		2	Granary / Crib		
		3	Pots/Gourds		
		4	Store house		
		5	No storage		
		6	Other, specify _____		
<b>4.20 -</b>	Does your household own any farm-animal?	1	yes	2	No → <b>Section 5</b>
<b>4.21 -</b>	If yes, please how many of each of the following animals do you own? (write 00 if none)				
<b>a -</b>	Chicken			<b>g -</b>	Pigs
<b>b -</b>	Ducks			<b>h -</b>	Bulls
<b>c -</b>	Other birds			<b>k -</b>	Cows
<b>d -</b>	Rabbits			<b>l -</b>	Oxen
<b>e -</b>	Goats			<b>m -</b>	Donkey
<b>f -</b>	Sheep			<b>n -</b>	Camels

**SECTION 5 – INCOME**

<b>Please complete the table one activity at the time, using the codes below, for the YEAR</b>		<b>a. -</b> What are your household's main income activities throughout the year? (use activity code, up to four activities)	<b>b. Who participates in this activity?</b> (use member code)	<b>c. Who is in charge of managing the income?</b> (use member code)	<i>Using proportional piling or 'divide the pie' methods, please estimate the relative contribution to total income of each activity.</i>	
					<b>d. %</b>	<b>e. Ug. Sh.</b>
<b>5.1</b>	<b>Main</b>					
<b>5.2</b>	<b>Second</b>					
<b>5.3</b>	<b>Third</b>					
<b>5.4</b>	<b>Fourth</b>					
<b>5.5</b>	<b>Other activities (don't specify)</b>					

**Income activity codes**

01 = Crop sales  
 02 = Animal sales / animal product sales  
 03 = Fishing  
 04 = Brewing  
 05 = Unskilled wage labour  
 06 = Skilled labour (artisan)  
 07 = Handicrafts  
 08 = Use of nat. resources (firewood, charcoal, bricks, grass, wild foods)  
 09 = Petty trading  
 10 = Seller, commercial activity  
 11 = Remittance / kinship  
 12 = Salaries, wages (employees)  
 13 = Rental of property (parcels, building)  
 14 = Savings, credit  
 15 = Begging, assistance  
 16 = Government allowance (pension, disability benefit)  
 17 = Others, specify \_\_\_\_\_

**Member code**

1 = Head of the Household only  
 2 = Spouse of the head of the Household only  
 3 = Men only  
 4 = Women only  
 5 = Adults only  
 6 = Children only  
 7 = Women & children  
 8 = Men & children  
 9 = Everybody

<b>5.6 -</b>	Do you have access to a place to borrow money?  <b>circle all that apply</b>	1	Yes – relatives / friends		
		2	Yes – charities / NGOs		
		3	Yes - local lender – loan account		
		4	No → <b>Section 6</b>		
<b>5.7-</b>	Did you purchase food on credit or borrow money to purchase food in the <u>last 6 months</u> ?	1	Yes	2	No → <b>Section 6</b>
<b>5.8-</b>	Are you currently in debt because of credit for food?	1	Yes	2	No → <b>Section 6</b>
<b>5.9-</b>	How much do you owe...	_____ Ug. Sh.			


**SECTION 6 – EXPENDITURE**

Did you spend money on [item] <b>last month</b> for domestic consumption?  <i>If no, write 0 if don't know, write 999 and go to next item</i>		a. – Estimated total expense  Ug. Sh.	Probe : If useful use the following to estimate expenses				a. – Estimated total expense  Ug. Sh.	Probe : If useful use the following to estimate expenses	
			b. – Estimated amount (quantity)	c. – Unit cost Ug. Sh.				b. – Estimated amount (quantity)	c. – Unit cost Ug. Sh.
6.1 -	Maize				6.14 -	Meat			
6.2 -	Maize meal/flour				6.15 -	Eggs			
6.3 -	Rice				6.16 -	Oil, fat, butter			
6.4 -	Other cereals - Millet, Sorghum				6.17 -	Sugar			
6.5 -	Roots and tubers (potatoes, cassava)				6.18 -	Salt			
6.6 -	Cassava meal/flour				6.19 -	Milk			
6.7 -	Bread				6.20 -	Water			
6.8 -	Matooke				6.21 -	Alcohol and tobacco			
6.9 -	Beans and peas				6.22 -	Soap			
6.10 -	Other vegetables				6.23 -	Transport			
6.11 -	Groundnuts, sim sim				6.24 -	Firewood, charcoal			
6.12 -	Fresh fruits				6.25 -	Paraffin			
6.13 -	Fish				6.26 -	Rent (house / land)			

In the past **6 MONTHS** (semester), how much money have you spent on each of the following items or service?  
Use the following table, write 0 is no expenditure.

		Ug. Sh.			Ug. Sh.
6.27 -	Equipment, tools, seeds, animals		6.32 -	Celebrations, social events	
6.28 -	Hiring labour		6.33 -	Fines, taxes	
6.29 -	Medical expenses, health care		6.34 -	Debts	
6.30 -	Education, school fee		6.35 -	Construction, house repair	
6.31 -	Clothing, shoes				




**SECTION 7 – FOOD SOURCES AND CONSUMPTION**

Read : I would now like to ask you a few questions about food consumption in your household

<b>7.1</b>	Yesterday, how many times did the <u>adults</u> in this household eat?	_ _  times	
<b>7.2</b>	Yesterday, how many times did the <u>children</u> in this household eat?	_ _  times	

Could you please tell me how many days in the **past ONE WEEK** your household has eaten the following foods and what the source was  
(**use codes on the right, write 0 for items not eaten over the last 7 days and if several sources, write up to two**)

	Food Item	# of days eaten last 7 days	Food Source (write all)	<b>Food Source codes</b> 1 = Own production (crops, animals) 2 = hunting, fishing, gathering 3 = exchange labour/items for food 4 = borrowed 5 = purchases 6 = gift (food) from family/relatives 7 = food aid (NGos,...)
<b>7.3a-</b>	Maize	_	_ , _	
<b>7.3b-</b>	Rice	_	_ , _	
<b>7.3c-</b>	Other cereals (Sorghum, millet, ...)	_	_ , _	
<b>7.3d-</b>	Roots and tubers (potatoes, cassava, ...)	_	_ , _	
<b>7.3e-</b>	Bread	_	_ , _	
<b>7.3f-</b>	Matooke	_	_ , _	
<b>7.3g-</b>	Beans and Peas	_	_ , _	
<b>7.3h-</b>	Other vegetables	_	_ , _	
<b>7.3i-</b>	Ground nuts, Sim sim	_	_ , _	
<b>7.3j-</b>	Fresh fruits	_	_ , _	
<b>7.3k-</b>	Fish	_	_ , _	
<b>7.3l-</b>	Meat	_	_ , _	
<b>7.3m-</b>	Eggs	_	_ , _	
<b>7.3n-</b>	Oil, fat, butter	_	_ , _	
<b>7.3p-</b>	Sugar	_	_ , _	
<b>7.3q-</b>	Milk	_	_ , _	

**In one year**, what is the contribution of [source] to your annual food consumption? Use proportional piling or 'divide the pie' methods; please estimate the relative contribution of each of the following food source to total food consumption.

<b>7.4a -</b>	Own production (crops, animals)	_ _  %
<b>7.4b -</b>	Hunting, fishing, gathering	_ _  %
<b>7.4c -</b>	Purchases	_ _  %
<b>7.4d -</b>	Gift, borrowing	_ _  %
<b>7.4e -</b>	Food aid	_ _  %
		<b>100 %</b>

<b>7.5 -</b>	Did you or your household give food to others in need in the <u>last 6 months</u> ?	1	yes	2	No
<b>7.6 -</b>	Has any member of your household received food aid or food gift in the <u>last 6 months</u> ?	1	yes	2	No → <b>7.13</b>
<b>7.7 -</b>	If yes, please specify the type of program and the number of beneficiary in your household?  <b>circle all that apply and specify number of beneficiaries in the last column</b>	<b>Type of Program</b> 1 Gift from family/relatives 2 General food ration 3 School feeding 4 Supplementary feeding 5 Therapeutic feeding 6 Food for work/for assets 7 Other, specify _____		<b># Benef.</b>  _ _   _ _   _ _   _ _   _ _   _ _   _ _	
<b>7.8 -</b>	Did your household sell or exchange food <u>aid</u> in the last <u>6 months</u> ?	1	yes	2	No → <b>7.10</b>
<b>7.9 -</b>	Why did you sell/exchange food aid?	1 to get non food items 2 to get other types of food 3 to pay medical/education expenses 4 to get cash for other expenses 5 other, specify _____			



HOUSEHOLD INTERVIEW

<b>7.10 -</b>	Did your household give food aid outside of your family/household in the <u>last 6 months</u> ?	1	yes	2	No
<b>7.11 -</b>	Did your household have problem to receive food aid in the <u>last 6 months</u> ?	1	yes	2	No → <b>7.13</b>
<b>7.12 -</b>	What was the problem?	1	Registration		
		2	Food not available		
		3	Irregular distribution		
		4	Insecurity		
		5	Other, specify _____		
<b>7.13 -</b>	Has any member of your household received any other type of external assistance <u>beside food aid</u> in the <u>last 6 months</u> ?	1	yes	2	No → <b>Section 8</b>
<b>7.14 -</b>	If yes, from whom?  <b>Circle all that apply</b>	1	Friends, relatives		
		2	World Food Programme		
		3	Save the Children		
		4	UNICEF		
		5	Oxfam		
		6	Red Crescent & Red Cross		
		7	Faith based organizations (Caritas, CRS, WorldVision, islamic)		
		8	The government (O.P.M.)		
		9	Other, specify _____		
<b>7.15 -</b>	If yes, what type of assistance?  <b>Circle all that apply</b>	1	Food products		
		2	Money allowances		
		3	For education (fee, books, uniforms)		
		4	For medical services		
		5	Construction material, building		
		6	Seeds and tools		
		7	Other, specify _____		



# SECTION 8 – SHOCKS AND FOOD SECURITY

Read: For each of the following statements, please tell me if it was true or false over the last year

<b>8.1a-</b>	<b>Were you concerned</b> that your food would run out before you got enough money to buy more."	1	True	2	False
<b>8.1b-</b>	<b>Were you concerned</b> that your food would run out before you could produce more ourselves."	1	True	2	False
<b>8.1c-</b>	You did not eat <b>foods of the quality or variety</b> you preferred because you didn't produce enough or have enough money to purchase them."	1	True	2	False

If the respondent replied no for the three questions, **→ to section 9**, else, continue with the following questions

<b>8.2-</b>	By order of importance, what were the main causes for the problems you just mentioned? Do not read options, write number in front of the identified cause by order of importance				
	<input type="text"/> A. Drought/irregular rains, prolonged dry spell	<input type="text"/> G. Unusually high level of human disease	<input type="text"/> L. Serious illness or accident of household member		
	<input type="text"/> B. Floods	<input type="text"/> H. High prices for food	<input type="text"/> M. Death of a working household member		
	<input type="text"/> C. Landslides, erosion	<input type="text"/> I. High costs of agric. inputs (seed, fertilizer, etc.)	<input type="text"/> N. Death of other household member		
	<input type="text"/> D. Unusually high level of crop pests & disease	<input type="text"/> J. Loss of employment for a household member	<input type="text"/> P. Theft of productive resources		
	<input type="text"/> E. Unusually high level of livestock diseases	<input type="text"/> K. Reduced income of a household member	<input type="text"/> Q. Insecurity/violence		
	<input type="text"/> F. Lack of employment				

For the four first main shocks above, please complete the following table using the codes. Please be consistent in the ranking. Complete one line at the time.

Rank & Cause <i>(copy code from above the four main causes)</i>	<b>8.3-</b> Did [cause] create a decrease or loss for your household of:  1 = Income & in-kind receipts 2 = Assets (e.g. livestock, cash savings) 3 = Both income and assets 4 = No change	<b>8.4-</b> Did [cause] create a decrease in your household's ability to have enough food to eat for a period of time (not including the annual 'lean season')?  1 = Yes 2 = No 3 = Don't know	<b>8.5-</b> What did the household do to compensate or resolve these problems caused by the shock  Use codes below, record all used	<b>8.6 -</b> Has the household recovered from the inability to have enough food?  1 = Not recovered at all 2 = Partially recovered 3 = Completely recovered
1. _____	<input type="text"/>	<input type="text"/>	1. <input type="text"/> <input type="text"/> <input type="text"/> , 2. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
2. _____	<input type="text"/>	<input type="text"/>	1. <input type="text"/> <input type="text"/> <input type="text"/> , 2. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
3. _____	<input type="text"/>	<input type="text"/>	1. <input type="text"/> <input type="text"/> <input type="text"/> , 2. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>
4. _____	<input type="text"/>	<input type="text"/>	1. <input type="text"/> <input type="text"/> <input type="text"/> , 2. <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>

01 = Rely on less preferred, less expensive food

02 = borrowed food, helped by relatives

03 = purchased food on credit

04 = consumed more wild foods or hunted

05 = consumed seed stock held for next season

06 = Reduced the proportions of the meals for all

07 = Adults ate less so that children could eat

08 = Reduced number of meals per day

09 = Skipped days without eating

10 = Some HH members migrated temporarily (< 6 months)

11 = Some HH members migrated permanently (> 6 months)

12 = Reduced expenditures on health and education

13 = spent savings

14 = borrowed money

15 = sold HH articles (utensils, blankets) or jewelry

16 = sold agricultural tools, seeds,...

17 = sold building materials

18 = sold HH furniture

19 = sold HH poultry, birds, ducks

20 = sold small animals – goats, sheep, pigs

21 = sold big animals – oxen, cow, bulls

22 = rented out land

23 = sold land

24 = worked for food only


**SECTION 9 – HIV AIDS**

<b>9.1-</b>	Have you ever heard of an illness called AIDS?	1	Yes	2	No → <b>Section 10</b>
<b>9.2-</b>	Is there anything a person can do to avoid getting HIV or the virus that causes AIDS?	1	Yes		
		2	No → <b>9.4 e</b>		
		3	Don't know → <b>9.4 e</b>		
<b>9.3-</b>	What can a person do to avoid getting HIV or the virus that causes AIDS?  <b>CIRCLE ALL WAYS MENTIONED,</b>  <b>DO NOT READ RESPONSES</b>	1	Abstain from sex		
		2	Use condoms		
		3	Limit sex to one partner/stay faithful to one partner		
		4	Avoid sex with prostitutes		
		5	Avoid sex with persons who have many partners		
		6	Avoid sex with persons who inject drugs intravenously		
		7	Avoid blood transfusions		
		8	Avoid injections		
		9	Avoid sharing razors/blades		
		10	Avoid kissing		
		11	Avoid mosquito bites		
		12	Seek protection from traditional healers		
		13	Avoid touching a person with AIDS		
		14	Avoid sharing food		
		15	Other, specify _____		
<b>9.4a</b>	Can people reduce their chances of getting the AIDS virus by having just one sex partner who is not infected and who has no other partners?	1 Yes	2 No	3 Don't know	
<b>9.4b</b>	Can a person get the AIDS virus from mosquito bites?	1 Yes	2 No	3 Don't know	
<b>9.4c</b>	Can people reduce their chances of getting the AIDS virus by using a condom every time they have sex?	1 Yes	2 No	3 Don't know	
<b>9.4d</b>	Can people get the AIDS virus by sharing food with a person who has AIDS?	1 Yes	2 No	3 Don't know	
<b>9.4e</b>	Is it possible for a healthy-looking person to have the AIDS virus?	1 Yes	2 No	3 Don't know	
<b>9.4f</b>	Do you personally know someone who has the virus that causes AIDS or someone who died from AIDS?	1 Yes	2 No	3 Don't know	
<b>9.4g</b>	Can the AIDS virus be transmitted from a mother to a child?	1 Yes	2 No	3 Don't know	
<b>9.4h</b>	Can the AIDS virus be transmitted from a mother to her child during pregnancy?	1 Yes	2 No	3 Don't know	
<b>9.4i</b>	Can the AIDS virus be transmitted from a mother to her child during delivery?	1 Yes	2 No	3 Don't know	
<b>9.4j</b>	Can the AIDS virus be transmitted from a mother to a child by breastfeeding?	1 Yes	2 No	3 Don't know	



SECTION 10 – MATERNAL HEALTH AND NUTRITION					
Read: Now I would like to ask you some questions about the women and children in this household. Please get an overview of how many children aged < 59 months live in the household and their respective mother/care taker.					
10.1a-	Are there children 6 - 59 months in this household?	1	Yes → 10.2	2	No
10.1b-	Are there children < 6 months in this household?	1	Yes → 10.2	2	No
10.1c-	Are there women between 15 and 49 years old in this household?	1	Yes	2	No → END
10.2-	List first names of mothers or care takers (if mothers are absent) of the children in the category age that apply. If no children, list the first names of the women aged 15 – 49 years. If more than one and select alphabetically. Circle the number of the one selected.	1	_____		
		2	_____		
		3	_____		
To the selected mother/care taker/woman:					
10.3a-	What is your age?	_ _			
10.3b-	Can you read and write simple messages?	1	Yes	2	No
10.3c-	What is your level of education?	1	No School		
		2	Some Primary (P1-P6 but not P7)		
		3	Completed Primary-P7		
		4	Vocational School		
		5	Some Secondary School (S1-S3, not S4)		
		6	Completed Secondary or "O" level		
		7	Completed Advanced level or "A" level		
		8	Some / Completed Tertiary		
		9	Some / Completed University		
10.4 -	Are you currently pregnant or breastfeeding?  <b>CIRCLE ONLY ONE</b>	1	pregnant		
		2	Breastfeeding → 10.6		
		3	Neither → 10.6		
		4	both		
		5	don't know → 10.6		
10.5 -	If pregnant, how many months pregnant?	_ _  months			
10.6 -	How many times have you been pregnant (including a current pregnancy, write 00 if never)?	_ _  pregnancies if 00 → 10.15			
10.7 -	When you were pregnant, did you see anyone for antenatal care?	1	Yes	2	No → 10.9
10.8-	When you were pregnant, did you receive iron-folate tablets (small red tablets)?	1	Yes	2	No
10.9-	How many times have you suffered a miscarriage?	_ _  miscarriages			
10.10-	How many times have you suffered a stillbirth?	_ _  stillbirths			
10.11-	How many living children have you given birth to?	_ _  children			
10.12-	How many of those children have died?	_ _  children			
10.13-	How old were you at your first delivery?	_ _  years			
10.14-	Immediately after the birth of your last child, did you receive a vitamin A capsule (red color capsule)?	1	Yes	2	No
10.15-	In the past 2 weeks have you been ill with Diarrhoea?	1	Yes	2	No
10.16-	In the past 2 weeks have you been ill with Fever?	1	Yes	2	No
10.17-	Last night, did you sleep under a mosquito net?	1	Yes	2	No
10.18-	Do you boil (and then cool down) the water before consumption for your children < 5 years?	1	Yes, always		
		2	Yes, sometimes		
		3	No		



<b>10.19-</b>	When do you wash your hands?  <b>DO NOT READ, CIRCLE THE ANSWERS THAT ARE MENTIONED</b>	1	before preparing meals
		2	before eating
		3	after going to the toilet
		4	after cleaning a child when they go to the toilet
		5	when they are dirty
		6	never
<b>10.20-</b>	After visiting the toilet, what do you use to wash your hands?	1	water only
		2	Home made soap/ash & water
		3	washing soap & water
		4	nothing

**SECTION 11 – CHILD HEALTH AND NUTRITION**

ASK TO THE SELECTED RESPONDENT ONLY IF THERE ARE CHILDREN < 59 MONTHS IN THE HOUSEHOLD, ELSE, TERMINATE  
Read: Now I would like to ask you some questions about your children (*Continue the interview with the same woman*)

*Starting with the youngest child, please enter the names of the three youngest children and ask the following question for one child at the time:*

	Last born child	Second last born child	Third last born child
<b>11.1</b>	(child number) First name	(1) _____	(2) _____
<b>11.2-</b>	Birth month	_ _	_ _
<b>11.3-</b>	Birth year	_ _ _ _	_ _ _ _
<b>11.4-</b>	Child's age in months	_ _  months	_ _  months
<b>11.5-</b>	Child gender?	1 Male 2 Female	1 Male 2 Female
<b>11.6-</b>	Are you the mother of [Name]	1 Yes 2 No → <b>11.12a</b>	1 Yes 2 No → <b>11.12a</b>
<b>11.7-</b>	When you were pregnant with [NAME], did you get antenatal care? (if yes, whom)	1 Doctor	1 Doctor
		2 Nurse	2 Nurse
		3 Midwives	3 Midwives
		4 Relative. Friend	4 Relative. Friend
		5 Other	5 Other
		6 No one	6 No one
<b>11.8-</b>	When you were pregnant with [NAME] were you given an injection in the arm to prevent the baby from getting convulsions after birth? (anti-tetanus shot – an injection at the top of the arm or shoulder).	1 Yes 2 No 3 Don't know	1 Yes 2 No 3 Don't know
<b>11.9-</b>	When [NAME] was born, was he/she [read options]?	1 Very large	1 Very large
		2 Larger than normal	2 Larger than normal
		3 Normal	3 Normal
		4 Smaller than normal	4 Smaller than normal
		5 very small	5 very small
<b>11.10a</b>	Did you ever breastfeed [NAME]? (if no, → <b>11.11</b> )	1 Yes 2 No	1 Yes 2 No
<b>11.10b</b>	Is [NAME] still being breastfed?	1 Yes 2 No	1 Yes 2 No
<b>11.10c</b>	How long after birth did you first put [NAME] to the breast? <i>If less than 1 hour, write 0. If less than 24 hours, record hours. Otherwise, record days.</i>	_ _  hours	_ _  hours
		_ _  days	_ _  days



**HOUSEHOLD INTERVIEW**

	(child number) First name	(1) _____			(2) _____			(3) _____		
<b>11.11-</b>	<b>Only for youngest child, and if child &lt; 24 months –</b>  Since this time yesterday, did [NAME] receive any of the following?  <b>CIRCLE ALL THAT APPLY</b>	1	Tinned, powdered or fresh milk		<b>DO NOT ASK - ONLY FOR YOUNGEST CHILD</b>	<b>DO NOT ASK - ONLY FOR YOUNGEST CHILD</b>	1	2	3	
		2	Plain water							
		3	Sugar/glucose water or juice							
		4	Salt and Sugar/ Oral Rehydration Solution-ORS							
		5	Traditional medicine							
		6	Tea, infusions							
		7	Any other liquids							
		8	Solid or semi-solid (mushy) food							
<b>11.12a-</b>	Has [NAME] ever received a vitamin A capsule (supplement) like this one? <i>Show capsule</i>	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.12b-</b>	If yes, how many months ago did [NAME] take the last dose? ( <i>write 99 if don't know</i> )	_ _  months			_ _  months			_ _  months		
<b>11.13a-</b>	Has [NAME] been ill with a fever at any time in the past 2 weeks?	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.13b-</b>	If yes, Was [NAME] seen at a health facility during this illness?	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.13c-</b>	If yes, Was [NAME] prescribed an anti-malaria drug?	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.14a-</b>	Has [NAME] been ill with a cough at any time in the past 2 weeks?	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.14b-</b>	If yes, when [NAME] had the cough, did he/she breathe faster than usual with short, rapid breaths?	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.15a-</b>	Has [NAME] been ill with diarrhea at any time in the past 2 weeks? ( <i>Diarrhea: perceived by mother as 3 or more loose stools per day or one large watery stool or blood in stool</i> )	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.15b-</b>	If yes, was [NAME] seen at a health facility during this illness?	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.16-</b>	Has [NAME] ever received a measles vaccination – an injection in the arm at the age of 9 months or older? ( <i>check yellow card if available</i> )	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know
<b>11.17-</b>	Has [NAME] received deworming tablets in the last 6 months	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know	1 Yes	2 No	3 Don't know

<b>Measurements- children 6-59 months</b>	(1) _____	(2) _____	(3) _____
---	-----------	-----------	-----------

*Read to the selected woman:* Would you please join me to a nearby location to continue this interview. We would like you to come with your three youngest children aged 6 to 59 months. We would like to measure and weight them as part of our assessment. Again, no name will be recorded and the results will remain confidential.

*It is very important that children are measured so please be persuasive. Please assist women in transportation if need be.*

<b>11.18-</b>	<b>Child height/length</b> ( <i>in centimetres, with 1 decimal place</i> )	_ _ _ . _  cm		_ _ _ . _  cm		_ _ _ . _  cm			
<b>11.19-</b>	Child measurement made lying or standing? ( <i>If &lt; 24 months, must be measured lying down</i> )	1 Lying		2 Standing		1 Lying		2 Standing	
<b>11.20-</b>	Does the child have bilateral pitting oedema? ( <i>Check both feet for oedema</i> )	1	Yes	2	No	1	Yes	2	No
<b>11.21-</b>	<b>Child weight</b> – Enter weight in kilograms, with one decimal place.	_ _ _ . _  kg		_ _ _ . _  kg		_ _ _ . _  kg			

<b>Measurements- mother :</b>
-------------------------------

<b>11.22-</b>	<b>Mother's height</b> (in centimetres)	_ _ _ _ . _  cm
<b>11.23-</b>	<b>Mother's weight</b> (in kilograms)	_ _ _ _ . _  kg <b>only for non-pregnant mother!</b>