

## CONFIDENTIAL



Federal Republic of Nigeria  
National Bureau of Statistics Abuja, Nigeria

**GENERAL HOUSEHOLD SURVEY-PANEL**  
**Wave 2 (2012/13) Post-Planting Visit**  
**Household Questionnaire**



THE WORLD BANK

*THIS INFORMATION IS STRICTLY CONFIDENTIAL AND IS TO BE USED FOR STATISTICAL PURPOSES ONLY.*

**SECTION A-1: HOUSEHOLD IDENTIFICATION**

	Name	Code
1. Zone	<input type="text"/>	<input type="text"/>
2. STATE:	<input type="text"/>	<input type="text"/> <input type="text"/>
3. LGA	<input type="text"/>	<input type="text"/> <input type="text"/>
4. SECTOR (Urban=1, Rural=2)	<input type="text"/>	
5. EA	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6. RIC	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
7. HOUSEHOLD NO.	<input type="text"/> <input type="text"/> <input type="text"/>	

INDICATE THE PLACE OF THIS QUESTIONNAIRE IN THE SET OF  
QUESTIONNAIRES COMPLETED FOR THIS HOUSEHOLD

QUESTIONNAIRE \_\_\_\_ OF \_\_\_\_ TOTAL

AG1. Did a member of this household practice any agricultural activity such as crop, livestock or fish farming ☐ YES.....1  
NO.....2

AG2. Does a member of this household own land that was not cultivated ☐ YES.....1  
NO.....2

AG3. Agricultural questionnaire required ☐ YES.....1  
NO.....2

## 8. WHAT ARE THE GPS COORDINATES OF THE DWELLING?

LATITUDE (N)									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

LONGITUDE (E)									
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

9. NAME OF HOUSEHOLD HEAD: 10. ADDRESS OF HOUSEHOLD HEAD: 11. NAME OF INTERVIEWER:

12. NAME OF SUPERVISOR: \_\_\_\_\_

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HHID [ \_ | \_ | \_ | \_ | \_ | \_ ]

INTERVIEW AND DATA ENTRY STATUS RESPONSES: 1-Completed, 2-Partially completed, 3-Refused 4-OTHER SPECIFY \_\_\_\_\_

[DAY / MONTH / YEAR]

13. DATE OF FIRST INTERVIEW:

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14a. TIME FIRST INTERVIEW STARTED

:
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14b. TIME FIRST INTERVIEW ENDED

:
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15a. INTERVIEW STATUS AFTER FIRST VISIT:

COVER	Section 1 ROSTER	Section 2 EDUCATION	Section 3A LABOR	Section 3B LABOR OPTION	Section 4 CREDIT/ SAVINGS	Section 4B FINANCIAL CAPABILITY	Section 5 ASSETS	Section 6 NON-FARM ENTRPRISE	Section 7 FOOD EXPENSE	Section 8 NON-FOOD EXPENSE	Section 9 FOOD SECURITY	Section 10 OTHER INCOME	CONTACT INFO.	AGRIC. QUEST.

15b. DATA ENTRY STATUS AFTER FIRST VISIT:

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1-COMPLETE, NO QUESTIONNAIRE ERRORS  
2-COMPLETE, WITH QUESTIONNAIRE ERRORS  
3-NOT COMPLETE

[DAY / MONTH / YEAR]

16. DATE OF SECOND INTERVIEW:

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17a. TIME SECOND INTERVIEW STARTED

:
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17b. TIME SECOND INTERVIEW ENDED

:
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18a. INTERVIEW STATUS AFTER SECOND VISIT:

COVER	Section 1 ROSTER	Section 2 EDUCATION	Section 3A LABOR	Section 3B LABOR OPTION	Section 4 CREDIT/ SAVINGS	Section 4B FINANCIAL CAPABILITY	Section 5 ASSETS	Section 6 NON-FARM ENTRPRISE	Section 7 FOOD EXPENSE	Section 8 NON-FOOD EXPENSE	Section 9 FOOD SECURITY	Section 10 OTHER INCOME	CONTACT INFO.	AGRIC. QUEST.

18b. DATA ENTRY STATUS AFTER SECOND VISIT:

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1-COMPLETE, NO QUESTIONNAIRE ERRORS  
2-COMPLETE, WITH QUESTIONNAIRE ERRORS  
3-NOT COMPLETE

[DAY / MONTH / YEAR]

19. DATE OF THIRD INTERVIEW:

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20a. TIME THIRD INTERVIEW STARTED

:
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20b. TIME THIRD INTERVIEW ENDED

:
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21a. INTERVIEW STATUS AFTER THIRD VISIT:

COVER	Section 1 ROSTER	Section 2 EDUCATION	Section 3A LABOR	Section 3B LABOR OPTION	Section 4 CREDIT/ SAVINGS	Section 4B FINANCIAL CAPABILITY	Section 5 ASSETS	Section 6 NON-FARM ENTRPRISE	Section 7 FOOD EXPENSE	Section 8 NON-FOOD EXPENSE	Section 9 FOOD SECURITY	Section 10 OTHER INCOME	CONTACT INFO.	AGRIC. QUEST.

21b. DATA ENTRY STATUS AFTER THIRD VISIT:

--

1-COMPLETE, NO QUESTIONNAIRE ERRORS  
2-COMPLETE, WITH QUESTIONNAIRE ERRORS  
3-NOT COMPLETE

**OBSERVATIONS ON THE INTERVIEW**

RECORD GENERAL NOTES ABOUT THE INTERVIEW AND RECORD ANY SPECIAL INFORMATION THAT WILL BE HELPFUL FOR SUPERVISORS AND THE ANALYSIS OF THIS QUESTIONNAIRE.

-----THIS SECTION TO BE COMPLETED BY SUPERVISOR-----

**1. STATUS OF QUESTIONNAIRE**☐**2. STATUS OF DATA ENTRY**☐

## Response Status

1. Completed
2. Partially completed
3. Not at Home
4. Refused
5. Household not located
6. Moved away
7. Other (specify) \_\_\_\_\_

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## DEFINITIONS/INSTRUCTIONS

### BRIEF DEFINITION OF A HOUSEHOLD:

1. A household is a group of people who have usually slept in the same dwelling and share their meals together. Examples of households are:

A household consisting of a man and his wife/wives and children, father/mother, nephew and other relatives.

A household consisting of a single person

A household consisting of a couple or several couples with or without children.

2. All listed persons that have been away from the household for more than six months are not considered to be household members except:

The person identified as the head of household even if he or she has not been with the household for more than 6 months

Newly born children (or newly adopted)

Students and seasonal workers who have not been living in or as part of another household

New spouses

**FOR EVERY PERSON WHO WAS INTERVIEWED BEFORE AND IS STILL RESIDENT IN NIGERIA (IN THE SAME VILLAGE OR DIFFERENT STATE) FILL OUT A TI (TRACKING FORM 1) BEFORE CONTINUING WITH THE NEXT PERSON.**

## SECTION 1: HOUSEHOLD ROSTER

PLEASE OPEN FLAP A

I N D I V I D U A L  I D	5.	6.	7.			8.	9.	10.	11.			
	INTERVIEWER: IS THIS PERSON A <b>NEW MEMBER</b> OF THE HOUSEHOLD (ADDED ON THIS VISIT)?  YES..1 NO...2	How old is [NAME] (IN COMPLETED YEARS)?  IF RESPONDENT DOESN'T KNOW, USE YEAR OF BIRTH TO CALCULATE AGE OR USE MAJOR EVENTS LISTED IN ENUMERATOR MANUAL TO PROMPT RESPONDENT.	In what day, month and year was [NAME] born?  WRITE "99" FOR MONTHS AND DAYS IF RESPONDENT DOES NOT KNOW. IF THE AGE IS GIVEN THE YEAR IS NOT KNOWN, THE YEAR SHOULD BE ESTIMATED FROM THE AGE IN Q6.  CHECK THAT AGE IN QUESTION 6 AND YEAR OF BIRTH IN THIS QUESTION ARE CONSISTENT.			What is [NAME]'s marital status?  Married (monogamous) ..1 Married (polygamous) ..2 Informal Union.....3 Divorced.....4 (► Q14) Separated.....5 (► Q14) Widowed.....6 (► Q14) Never Married.....7 (► Q14)	INTERVIEWER: IS THIS PERSON A MALE IN A POLYGAMOUS MARRIAGE?  YES..1 NO...2 (► Q12)	How many wives do you currently have?	In what year, did you get married to each of your wives respectively?  LIST THE <b>YEAR</b> FOR YOUR FIRST WIFE AND THEN THE YEAR OF MARRIAGE FOR UP TO 3 OTHER MOST RECENT WIVES.			
		YEARS	DAY	MONTH	YEAR			NUMBER	WIFE 1	WIFE 2	WIFE 3	WIFE 4
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## SECTION 1: HOUSEHOLD ROSTER

I N D I V I D U A L  I D	12.	13.	14.	15.	16.	17.	18.	19.
	Does [NAME]'s spouse/ partner live in this household now? [ASK ABOUT FIRST WIFE FOR RESPONDENT WITH MULTIPLE WIVES].	WRITE ID CODE OF CURRENT SPOUSE (OR IN THE CASE OF A POLYGOMOUS MARIAGE, FIRST WIFE AMONG THOSE) WHO LIVE(S) IN THE HOUSEHOLD.	INTERVIEWER: WAS THIS PERSON A MEMBER OF THIS HOUSEHOLD IN THE PREVIOUS ROUND OF THE SURVEY (FEB.-APR. 2011)?	Does [NAME] still live in this household?	When did [NAME] join this household?  Before April 2011.....1 Apr-Jun. 2011..2 Jul-Sep. 2011..3 Oct-Dec. 2011..4 Jan-Mar. 2012..5 Apr-Jun 2012...6 July 2012.....7 Aug. 2012.....8	Why did [NAME] join this household?  NEW BORN.....01 ADOPTED CHILD.....02 MARRIAGE /COHABITATION. 03 DIVORCE / SEPERATION.....04 RETURNED FROM COLLEGE/ UNIV.....05 RETUREND FROM INSTITUTION.....06 MOVED IN WITH PARENT OR RELATIVE.....07 SHARED ACCOMODATION.....08 RETURN FROM WORK MIGRATION.....09 MISTAKENLY NOT REPORTEDD OR FORGOTTEN LAST VISIT.10 OTHER, SPECIFCY.....11	What is [NAME]'S main religion?  CHRISTIANITY.1 ISLAM .....2 TRADITIONAL..3 OTHER (Specify) ....4	Does [NAME]'s biological father live in this household?
	YES..1 NO...2 (► Q14)	COPY SPOUSE ID FROM ROSTER	YES...1 NO...2 (► Q16)	YES...1 (► NEXT SECTION) NO...2 (► Q29)				YES..1 NO...2 (► Q21)
		ID CODE			CODE			
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12								

## SECTION 1: HOUSEHOLD ROSTER

I N D I V I D U A L  I D	20.	21.	22.	23.	24.	25.	26.
	What is the individual ID of [NAME]'s biological father?	Is [NAME]'s biological father alive?	What was the highest educational level completed by [NAME'S] biological father?	What was the industry of occupation of [NAME'S] biological father?	Does [NAME]'s biological mother live in this household?	What is the person ID of [NAME]'s biological mother?	Is [NAME]'s biological mother alive?
			None.....00      Lower 6.....27 N1.....01      Upper 6.....28 N2.....02      Teacher P1.....11      training...31 P2.....12      Vocational/ P3.....13      Technical..32 P4.....14      Modern P5.....15      school....33 P6.....16      NCE.....34 JS1.....21      Poly/prof...41 JS2.....22      1st degree..42 JS3.....23      Higher SS1.....24      degree....43 SS2.....25      Quaranic...51 SS3.....26      Integrated Quaranic...52 Adult Education..61	AGRICULTURE.....01 MINING.....02 MANUFACTURING.....03 PROFFESIONAL, SCIENTIFIC, TECHNICAL ACTIVITIES.....04 ELECTRICITY.....05 CONSTRUCTION.....06 TRANSPORTATION.....07 BUYING AND SELLING.....08 FINANCIAL SERVICES.....09 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION.....13 OTHER, SPECIFY.....14			
	COPY ID FROM ROSTER  (► Q24)	YES..1  NO...2	LEVEL		YES..1  NO...2 (► Q26)	COPY ID FROM ROSTER  (► NEXT PERSON)	YES..1  NO...2

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## SECTION 1: HOUSEHOLD ROSTER

27.	28.	29.	30.	31.
What was the highest educational level completed by [NAME'S] biological mother?	What was the industry of occupation of [NAME'S] biological mother?	Why did [NAME] leave this household?	In which month did [NAME] leave this household?	Does [NAME] reside in Nigeria or outside Nigeria now?
None.....00    Lower 6.....27 N1.....01    Upper 6.....28 N2.....02    Teacher P1.....11    training...31 P2.....12    Vocational/ P3.....13    Technical..32 P4.....14    Modern P5.....15    school....33 P6.....16    NCE.....34 JS1.....21    Poly/prof...41 JS2.....22    1st degree..42 JS3.....23    Higher SS1.....24    degree....43 SS2.....25    Quaranic....51 SS3.....26    Integrated Quaranic...52 Adult Education..61	AGRICULTURE.....01 MINING.....02 MANUFACTURING.....03 PROFESSIONAL, SCIENTIFIC, TECHNICAL ACTIVITIES.....04 ELECTRICITY.....05 CONSTRUCTION.....06 TRANSPORTATION.....07 BUYING AND SELLING.....08 FINANCIAL SERVICES.....09 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION.....13 OTHER, SPECIFY.....14	DIVORCE/SEPARATION.....1 LEFT FOR STUDIES/ EDUCATIONAL OPPORTUNITY.....2 LEFT FOR WORK.....3 LEFT TO FIND BETTER LAND.4 HEALTH REASONS.....5 SECURITY REASONS.....6 FOR MARRIAGE/ COHABITATION.....7 TO JOIN THEIR FAMILY ALREADY LIVING IN ANOTHER LOCATION.....8 MOVED WITH FAMILY.....9 LEFT TO SET UP OWN HOME.10 DEAD.....11 OTHER, (SPECIFY).....12	Before April 2011.....1 Apr-Jun. 2011..2 Jul-Sep. 2011..3 Oct-Dec. 2011..4 Jan-Mar. 2012..5 Apr-Jun 2012...6 July 2012.....7 Aug. 2012.....8	Inside Nigeria..1  Outside of Nigeria..2 (►Q33)
LEVEL	(► NEXT PERSON)			

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## SECTION 1: HOUSEHOLD ROSTER

I N D I V I D U A L  I D	32. Which LGA and state did [NAME] move to?				33. What country does [NAME] reside in at present?	34. How many months has [NAME] been abroad?	35. What was the most important reason [NAME] migrated abroad?	36. Has [NAME] found work or started work?
	USE LGA AND STATE CODES FROM ABOVE  <b>SUPERVISOR CODE AFTER INTERVIEW</b>  <b>(► NEXT PERSON)</b>				USE COUNTRY CODES ABOVE		TO WORK, LOOK FOR WORK.....1 TO FIND BETTER OR MORE LAND.....2 HEALTH.....3 TO JOIN FAMILY.....4 TO MARRY.....5 MOVED TO LIVE WITH FAMILY.....6 TO STUDY.....7 FOR SECURITY.....8 OTHER, SPECIFY.....9	YES.....1 NO.....2 DON'T KNOW..3
	LGA NAME	CODE	STATE NAME	CODE	COUNTRY CODE	No. OF MONTHS		(►Q39)
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## SECTION 1: HOUSEHOLD ROSTER

I N D I V I D U A L  I D	37.	38.	39.	40.	41.	42.
	What is [NAME's] occupation?	What is the main economic activity of the enterprise that [NAME] is working in or of [NAME's] own business?	Who provided information on where to go and/or how to find work during [NAME's] move? (MAIN SOURCE)	From whom did [NAME] mainly obtain money in order to migrate for this move? (MAIN SOURCE)	While travelling or at the final destination did anyone else help [NAME]?	Who helped [NAME]? (SECOND SOURCE)
		AGRICULTURE.....1 MINING.....2 MANUFACTURING.....3 PROFESSIONAL, SCIENTIFIC, TECHNICAL ACTIVITIES.....4 ELECTRICITY.....5 CONSTRUCTION.....6 TRANSPORTATION.....7 BUYING AND SELLING.....8 FINANCIAL SERVICES.....9 PERSONAL SERVICES.....10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION...13 OTHER, SPECIFY.....14	FAMILY.....1 FRIENDS.....2 NEIGHBORS...3 RADIO OR TV.4 INTERNET...5 EMPLOYERS...6 GOVERNMENT...7 SELF.....8 OTHER (SPECIFY)...9	FAMILY.....1 FRIENDS.....2 NEIGHBORS...3 EMPLOYERS...4 GOVERNMENT..5 SELF.....6 OTHER (SPECIFY)..7	YES...1 NO..2 (► NEXT PERSON) DON'T KNOW...3 (► NEXT PERSON)	FAMILY.....1 FRIENDS.....2 Acquaintances..3 STRANGERS.....4 NGOS.....5 RELIGIOUS ORGANIZATION..6 GOVERNMENT ORGANIZATION..7 OTHER.....8 (► NEXT PERSON)
	OCCUP. CODE TO BE CODED AFTER THE INTERVIEW					
	DESCRIPTION					

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## SECTION 2: EDUCATION

**FOR ALL HOUSEHOLD MEMBERS 5 YEARS AND ABOVE, PLEASE ASK THE INDIVIDUAL THE FOLLOWING QUESTIONS.**

[illegible]

## SECTION 2: EDUCATION

	10.	11.	12.	13.	14.	15.	16.	17.	18.	
I N D I V I D U A L  I D	Were you in school during the 2011-2012 school year?	Why are you not currently in school?  HAD ENOUGH SCHOOLING...01 AWAITING ADMISSION...02 NO SCHOOL/LACK OF TEACHERS .....03 NO TIME/NO INTEREST...04 LACK OF MONEY.....05 MARITAL OBLIGATION ..06 SICKNESS.....07 DISABILITY.....08 SEPARATION OF PARENTS.09 DEATH OF PARENTS.....10 TOO OLD TO ATTEND ...11 DOMESTIC OBLIGATION ..12 OTHER (SPECIFY) .....13	What kind of organization runs the school that you are attending?  FEDERAL GOVT....1 STATE GOVT.....2 LOCAL GOVT.....3 COMMUNITY.....4 RELIGIOUS BODY..5 PRIVATE.....6 NGO.....7 OTHER (SPECIFY) .....8	By what means does NAME go to school?  FOOT .....1 BICYCLE .....2 MOTORCYCLE...3 PRIVATE CAR..4 TAXI.....5 BUS.....6 CAMEL/DONKEY.7 OTHERS (SPECIFY) .....8	How much time does it take you to get to school? (in minutes)  0 - 15...1 16 - 30...2 31 - 45...3 46 - 60...4 61 - 90...5 91 - 120..6 120 +.....7	Did you have a scholarship during the 2011-2012 school year?  YES..1 NO...2 (► Q19)	What was the amount of the scholarship you received in the 2011-2012 school year?	How many years did the scholarship cover?	From which organisation, did you receive the scholarship?  FEDERAL GOVT..1 STATE GOVT...2 LOCAL GOVT...3 COMMUNITY....4 RELIGIOUS BODY.....5 PRIVATE.....6 NGO.....7 OTHER (SPECIFY) .....8	
	YES..1 (► Q12) NO...2	(► 24)								
					CODE		NAIRA	YEARS		
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## SECTION 2: EDUCATION

I N D I V I D U A L  I D	19.								
	How much was spent on your education in the last 12 months by members of your household:								
	<div style="border: 1px solid black; padding: 10px; text-align: center;">             IF THERE WAS NO EXPENDITURE, WRITE '0'           </div>								
	RECORD TOTAL EXPENDITURE IN COLUMN I ONLY IF RESPONDENT CANNOT DIVIDE SCHOOL EXPENSES INTO PREVIOUS CATEGORIES								
	A. School fees and registration	B. Contributions to school repairs, Parents-Teachers Association	C. Uniforms and sports clothes	D. Books and school supplies	E. Transportation to and from school	F. Food, board and lodging at school	G. Extra-tuition (extra classes)	H. Other expenses cash and in kind that can't be categorized	I. Aggregate Expenditure
	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA
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## SECTION 2: EDUCATION

	20.	21.	22.	23.	24.
<b>I N D I V I D U A L  I D</b>	Did you ever repeat any class in primary or secondary school?	What was the last class you repeated?	What was your main reason for repeating the grade specified in Q21?	How many times have you repeated the class specified in Q21?	Do you plan to attend school in the next school year?
	YES, PRIMARY ONLY.....1 YES, SECONDARY ONLY.....2 YES, BOTH.....3 NONE.....4 (► Q24)	None.....00 N1.....01 N2.....02 P1.....11 P2.....12 P3.....13 P4.....14 P5.....15 P6.....16 JS1.....21 JS2.....22 JS3.....23 SS1.....24 SS2.....25 SS3 .....26 Lower 6...27 Upper 6...28	FAILED EXAMS.....1 PREGNANCY.....2 ILLNESS.....3 DISABILITY.....4 WORK COMMITMENT.....5 NO MONEY FOR BOOKS..6 LACK OF FEES.....7 ILLNESS OR INJURY OF OTHER HH MEMBER.....8 OTHER (SPECIFY).....9		YES...1  NO....2

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## SECTION 3A: LABOR

ASK THESE QUESTIONS FROM ALL INDIVIDUALS 5 YEARS AND ABOVE.

	1.	2.	3.	4.	5.	6.	7.	8.	9.
I N D I V I D U A L  I D	IS THE HOUSEHOLD MEMBER 5 YEARS OR OLDER?	IS THIS PERSON ANSWERING FOR HIMSELF/HERSELF?	WRITE THE ID CODE OF THE RESPONDENT	During the past 7 days, have you worked for someone who is not a member of your household, for example, an enterprise, company, the government or any other individual?	During the past 7 days, have you worked on a farm owned or rented by a member of your household, either in cultivating crops or in other farming tasks, or have you cared for livestock belonging to yourself or a member of your household?	During the past 7 days, have you worked on your own account or in a business enterprise belonging to you or someone in your household, for example, as a trader, shop-keeper, barber, dressmaker, carpenter or taxi driver?	INTERVIEWER: IS THERE A "YES" RESPONSE IN QUESTIONS 4, 5 OR 6?	Have you taken any steps within the past 7 days to look for work?	What is the main reason you did not look for a job in the past 7 days?  MOST IMPORTANT REASON  STUDENT.....01 HOUSEWIFE/CHILDCARE..02 TOO OLD/RETIRED.....03 SICKNESS/ILLNESS.....04 DISABILITY.....05 WAITING FOR REPLY FROM EMPLOYER.....06 WAITING FOR RECALL BY EMPLOYER.....07 ON LEAVE.....08 WAITING FOR BUSY SEASON.....09 OTHER (SPECIFY) .....10
	YES..1 NO...2 (► NEXT PERSON)	YES..1 (► Q4) NO...2	ID CODE	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2	YES..1 (► Q13) NO...2	YES..1 (► 10) NO...2	(► Q12)
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### MAIN /PRIMARY EMPLOYMENT

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## SECTION 3A: LABOR

I N D I V I D U A L  I D	15.	16.	17.	18.	19.	20.	21.		
	Who is the employer in this job?	During the last 12 months how many months did you work in this employment?	During these months, how many weeks in total did you work in this employment?	During the last seven days, how many hours did you work in this job?	Have you received wages, salary or other payments either in cash or in other forms from this employment for this work?	What is the main reason you received no payment for this work?	How much was your last payment? IF RESPONDENT HAS NOT YET BEEN PAID, ASK: What payment do you expect? What period of time did this payment cover?		
	FEDERAL GOV.....01 STATE GOV.....02 LOCAL GOV.....03 PARASTATAL.....04 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....05 NGO.....06 CO-OPERATIVES.....07 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....08 RELIGIOUS ORGANIZATION.....09 SELF-EMPLOYED.....10 OTHER (SPECIFY).....11	MONTHS	WEEKS	HOURS	YES...1 (► 21) NO....2	JUST STARTED WORK, WAITING FOR FIRST PAYMENT.....1 UNPAID FAMILY WORKER.....2 APPRENTICESHIP OR UNPAID TRAINEESHIP.....3 PAYING OFF DEBT.....4 PAYMENT UPON COMPLETION OF WORK.....5 OWED BY EMPLOYER.....6 OTHER (SPECIFY).....7	(►25)	<b>TIME UNIT</b> HOUR.....1 DAY.....2 WEEK.....3 FORTNIGHT..4 MONTH.....5 QUARTER....6 HALF YEAR..7 YEAR.....8	NAIRA
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## SECTION 3A: LABOR

## SECOND JOB

I N D I V I D U A L  I D	22.	23.	24.	25.	26.		
	Who in your household decides on the use of these earnings? LIST UP TO TWO MEMBERS	Do you receive any in-kind payment or allowance for this work in any other form?  [APART FROM SALARY]  YES...1 NO....2 (► 25)	What is the value of those payments? Over what time interval?  TIME UNIT HOUR.....1 DAY.....2 WEEK.....3 FORTNIGHT..4 MONTH.....5 QUARTER....6 HALF YEAR..7 YEAR.....8	Were you engaged in a second job?  YES..1 NO...2 ( ► 38)	What was your main activity in your second job?		
	ID CODE	ID CODE	NAIRA	TIME UNIT	WRITTEN DESCRIPTION		OCCUPATION CODE CODE AFTER INTERVIEW
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## SECTION 3A: LABOR

	27.	28.	29.	30.	31.	32.	33.
	In what sector is this main activity?	Who is the employer in this job?	During the last 12 months how many months did you work in this employment?	During these months how many weeks did you work in this employment?	During the last seven days, how many hours did you work in this job?	Do you receive wages, salary or other payments either in cash or in other forms from this employer for this work?	What is the main reason you received no payment for this work?
INDIVIDUAL ID	AGRICULTURE.....01 MINING.....02 MANUFACTURING.....03 PROFESSIONAL/ SCIENTIFIC/ TECHNICAL ACTIVITIES....04 ELECTRICITY/WATER/ GAS/ WASTE.....05 CONSTRUCTION.....06 TRANSPORTATION.....07 BUYING AND SELLING...08 FINANCIAL/INSURANCE/ REAL EST. SERVICES.09 PERSONAL SERVICES..10 EDUCATION.....11 HEALTH.....12 PUBLIC ADMINISTRATION..13 OTHER, SPECIFY.....14	FEDERAL GOV.....01 STATE GOV.....02 LOCAL GOV.....03 PARASTATAL.....04 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....05 NGO.....06 CO-OPERATIVES.....07 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....08 RELIGIOUS ORGANIZATION.....09 SELF-EMPLOYED.....10 OTHER (SPECIFY).....11				YES...1 (► 34) NO....2	JUST STARTED WORK, WAITING FOR FIRST PAYMENT.....1 UNPAID FAMILY WORKER.....2 APPRENTICESHIP OR UNPAID TRAINEESHIP.....3 PAYING OFF DEBT.....4 PAYMENT UPON COMPLETION OF WORK.....5 OWED BY EMPLOYER...6 OTHER (SPECIFY) .....7
			MONTHS	WEEKS	HOURS		
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## SECTION 3A: LABOR

								OTHER ACTIVITIES						
I N D I V I D U A L  I D	34.		35.		36.		37.		38.		39.		40.	
	How much was your last payment? IF RESPONDENT HAS NOT YET BEEN PAID, ASK: What payment do you expect? What period of time did this payment cover?		Who in your household decides on the use of these earnings? LIST UP TO TWO MEMBERS		Do you receive any payment in-kind or allowance for this work in any other form?  [APART FROM SALARY]		What is the amount of those payments? Over what time interval?		Do you contribute to the National Health Insurance Scheme (NISH)?		How many hours did you spend <u>yesterday</u> collecting/chopping firewood (or other fuel materials) in total?		How many hours did you spend <u>yesterday</u> collecting/ fetching water in total including waiting time?	
	<b>TIME UNIT</b>  HOUR.....1 DAY.....2 WEEK.....3 FORTNIGHT..4 MONTH.....5 QUARTER....6 HALF YEAR..7 YEAR.....8				<b>YES...1</b> <b>NO....2 (► 38)</b>		<b>TIME UNIT</b>  HOUR.....1 DAY.....2 WEEK.....3 FORTNIGHT..4 MONTH.....5 QUARTER....6 HALF YEAR..7 YEAR.....8		<b>YES..1</b> <b>NO...2</b>					
	NAIRA	TIME UNIT	ID CODE	ID CODE		NAIRA	TIME UNIT			HOURS	MINUTES	HOURS	MINUTES	
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## SECTION 3B: LABOR - 12 MONTHS

ASK THESE QUESTIONS FROM ALL INDIVIDUALS 5 YEARS AND ABOVE.

I N D I V I D U A L  I D	1.	2.	3.	4.	5.	
	During the past 12 months, have you worked for anyone else who is not a member of your household, for example, an enterprise, company, the government or any other individual?	During the past 12 months, have you worked on a farm owned or rented by a member of your household, either in cultivating crops or in other farming tasks, or have you cared for livestock belonging to yourself or a member of your household?	During the past 12 months, have you worked <i>on your own account or in a business enterprise</i> belonging to you or someone in your household, for example, as a trader, shop-keeper, barber, dressmaker, carpenter or taxi driver?	INTERVIEWER: IS THERE A "YES" RESPONSE IN QUESTIONS 1, 2 OR 3?	What was the primary activity you were engaged in during the past 12 months?	
	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2 (► NEXT SECTION)		
	OCCUPATION DESCRIPTION				OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW	

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## SECTION 3B: LABOR - 12 MONTHS

I N D I V I D U A L  I D	6.		7.	8.	9.
	Please describe what kind of trade or industry or business this primary activity is connected with (e.g. agriculture, fishing, mining, etc)		During the past 12 months how many months did you work in this primary employment?	During the past 12 months how many hours per week did you work in this primary employment?	Who is the employer in this primary job?  FEDERAL GOV.....1 STATE GOV.....2 LOCAL GOV.....3 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....4 NGO.....5 CO-OPERATIVES.....6 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....7 RELIGIOUS ORGANIZATION..8 SELF-EMPLOYED.....9 OTHER (SPECIFY) .....10
	INDUSTRY DESCRIPTION		INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW	MONTHS	

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## SECTION 3B: LABOR - 12 MONTHS

I N D I V I D U A L  I D	10.	11.	
	Were you engaged in a secondary activity during the past 12 months?	What was the secondary activity you were engaged in during the past 12 months?	
	YES...1 NO....2 (► Next section)		
	OCCUPATION DESCRIPTION		OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW

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## SECTION 3B: LABOR - 12 MONTHS

I N D I V I D U A L  I D	12.		13.	14.	15.
	Please describe what kind of trade or industry or business this secondary activity is connected with (e.g. agriculture, fishing, mining, etc)		During the past 12 months how many months did you work in this secondary employment?	During the past 12 months how many hours per week did you work in this primary employment?	Who is the employer in this secondary job?  FEDERAL GOV.....01 STATE GOV.....02 LOCAL GOV.....03 PARASTATAL.....04 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....05 NGO.....06 CO-OPERATIVES.....07 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....08 RELIGIOUS ORGANIZATION..09 SELF-EMPLOYED.....10 OTHER (SPECIFY).....11
	INDUSTRY DESCRIPTION		INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW	MONTHS	HOURS

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## ASK THESE QUESTIONS FROM ALL INDIVIDUALS 5 YEARS AND ABOVE.

	1.	2.	3.	4.	5.	
I N D I V I D U A L  I D	During the past 6 months, have you worked for anyone else who is not a member of your household, for example, an enterprise, company, the government or any other individual?	During the past 6 months, have you worked on a farm owned or rented by a member of your household, either in cultivating crops or in other farming tasks, or have you cared for livestock belonging to yourself or a member of your household?	During the past 6 months, have you worked <i>on your own account or in a business enterprise</i> belonging to you or someone in your household, for example, as a trader, shop-keeper, barber, dressmaker, carpenter or taxi driver?	INTERVIEWER: IS THERE A "YES" RESPONSE IN QUESTIONS 1, 2 OR 3?	What was the primary activity you were engaged in during the past 6 months?	
	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2 (► NEXT SECTION)	OCCUPATION DESCRIPTION	OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW

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## SECTION 3B: LABOR - 6 MONTHS

I N D I V I D U A L  I D	6.		7.	8.	9.	10.
	Please describe what kind of trade or industry or business this primary activity is connected with (e.g. agriculture, fishing, mining, etc)		During the past 6 months how many months did you work in this primary employment?	During the past 6 months, how many hours per week did you work in this primary employment?	Who is the employer in this primary job?	Were you engaged in a secondary activity during the past 6 months?
	INDUSTRY DESCRIPTION	INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW	MONTHS	HOURS	FEDERAL GOV.....1 STATE GOV.....2 LOCAL GOV.....3 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....4 NGO.....5 CO-OPERATIVES.....6 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....7 RELIGIOUS ORGANIZATION..8 SELF-EMPLOYED.....9 OTHER (SPECIFY).....10	YES...1 NO....2 (► NEXT SECTION)
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## SECTION 3B: LABOR - 6 MONTHS

I N D I V I D U A L  I D	11.		12.	
	What was the secondary activity you were engaged in during the past 6 months?		Please describe what kind of trade or industry or business this secondary activity is connected with (e.g. agriculture, fishing, mining, etc)	
	OCCUPATION DESCRIPTION	OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW	INDUSTRY DESCRIPTION	INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW
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## SECTION 3B: LABOR - 6 MONTHS

I N D I V I D U A L  I D	13.	14.	15.
	During the past 6 months how many months did you work in this secondary employment?	During the past 6 months, how many hours per week did you work in this primary employment?	Who is the employer in this secondary job?  FEDERAL GOV.....01 STATE GOV.....02 LOCAL GOV.....03 PARASTATAL.....04 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....05 NGO.....06 CO-OPERATIVES.....07 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....08 RELIGIOUS ORGANIZATION..09 SELF-EMPLOYED.....10 OTHER (SPECIFY).....11
	MONTHS	HOURS	

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## SECTION 3B: LABOR ACTIVITY TABLE

For each person in the household 5 years old or above, please ask the following question.

I N D I V I D U A L  I D	1																																				
	Many people work many different jobs in a six month period, either at the same time (a day and a night job, or a week-day job that is different from a week-end job) or one after the other (farming during planting and harvesting, but then processing crops to make other foods or working for someone else in the off-season). Please think back over the past 6 months (from March of this year until the present month). For each month, please tell me the three primary labor market activities that you were engaged in.																																				
	<p><b>ACTIVITY CODES</b></p> <table border="0"> <tr> <td>AGRICULTURE.....01</td> <td>FINANCIAL/INSURANCE/ REAL EST.</td> </tr> <tr> <td>MINING.....02</td> <td>SERVICES.....9</td> </tr> <tr> <td>MANUFACTURING.....03</td> <td>PERSONAL SERVICES.....10</td> </tr> <tr> <td>PROFESSIONAL/ SCIENTIFIC/</td> <td>EDUCATION.....11</td> </tr> <tr> <td>TECHNICAL ACTIVITIES.....04</td> <td>HEALTH.....12</td> </tr> <tr> <td>ELECTRICITY/WATER/</td> <td>PUBLIC ADMINISTRATION..13</td> </tr> <tr> <td>GAS/WASTE.....05</td> <td>NONE.....14</td> </tr> <tr> <td>CONSTRUCTION.....06</td> <td>SEARCHING FOR WORK.....15</td> </tr> <tr> <td>TRANSPORTATION.....07</td> <td>OTHER, SPECIFY.....16</td> </tr> <tr> <td>BUYING AND SELLING....08</td> <td></td> </tr> </table>																		AGRICULTURE.....01	FINANCIAL/INSURANCE/ REAL EST.	MINING.....02	SERVICES.....9	MANUFACTURING.....03	PERSONAL SERVICES.....10	PROFESSIONAL/ SCIENTIFIC/	EDUCATION.....11	TECHNICAL ACTIVITIES.....04	HEALTH.....12	ELECTRICITY/WATER/	PUBLIC ADMINISTRATION..13	GAS/WASTE.....05	NONE.....14	CONSTRUCTION.....06	SEARCHING FOR WORK.....15	TRANSPORTATION.....07	OTHER, SPECIFY.....16	BUYING AND SELLING....08
AGRICULTURE.....01	FINANCIAL/INSURANCE/ REAL EST.																																				
MINING.....02	SERVICES.....9																																				
MANUFACTURING.....03	PERSONAL SERVICES.....10																																				
PROFESSIONAL/ SCIENTIFIC/	EDUCATION.....11																																				
TECHNICAL ACTIVITIES.....04	HEALTH.....12																																				
ELECTRICITY/WATER/	PUBLIC ADMINISTRATION..13																																				
GAS/WASTE.....05	NONE.....14																																				
CONSTRUCTION.....06	SEARCHING FOR WORK.....15																																				
TRANSPORTATION.....07	OTHER, SPECIFY.....16																																				
BUYING AND SELLING....08																																					
March 2012			April 2012			May 2012			June 2012			July 2012			August 2012																						
1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd	1st	2nd	3rd																				

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## SECTION 3B: LABOR ACTIVITY TABLE

INDIVIDUAL ID	2.		3.		4.
	Out of the activities you mentions (IN QUESTION 1), which was the primary activity you were engaged in during the 6 months beginning in March?		Please describe what kind of trade or industry or business this primary activity is connected with (e.g. agriculture, fishing, mining, etc)		During those 6 months, how many months did you work in this primary employment?
	OCCUPATION DESCRIPTION	OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW	INDUSTRY DESCRIPTION	INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW	MONTHS

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## SECTION 3B: LABOR ACTIVITY TABLE

INDIVIDUAL	5.	6.	7.	8.	
	During the past 6 months, how many hours per week did you work in this primary employment?	Who is the employer in this primary job?  FEDERAL GOV.....1 STATE GOV.....2 LOCAL GOV.....3 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....4 NGO.....5 CO-OPERATIVES.....6 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....7 RELIGIOUS ORGANIZATION..8 SELF-EMPLOYED.....9 OTHER (SPECIFY).....10	Were you engaged in a secondary activity during the past 6 months?          YES...1 NO....2 (► NEXT SECTION)	Out of the activities you mentioned in question 1, which was the secondary activity you were engaged in during the 6 months beginning in March?	
	HOURS			OCCUPATION DESCRIPTION	OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW

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## SECTION 3B: LABOR ACTIVITY TABLE

I N D I V I D U A L  I D	9.		10.	11.	12.
	Please describe what kind of trade or industry or business this secondary activity is connected with (e.g. agriculture, fishing, mining, etc)		During those 6 months, how many months did you work in this secondary employment?	During the past 6 months, how many hours per week did you work in this primary employment?	Who is the employer in this secondary job?  FEDERAL GOV.....01 STATE GOV.....02 LOCAL GOV.....03 PARASTATAL.....04 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....05 NGO.....06 CO-OPERATIVES.....07 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....08 RELIGIOUS ORGANIZATION..09 SELF-EMPLOYED.....10 OTHER (SPECIFY).....11
	INDUSTRY DESCRIPTION	INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW	MONTHS	HOURS	

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## SECTION 3B: LABOR ACTIVITY SUMMARY

For each person in the household 5 years old or above, please ask the following question.

I N D I V I D U A L  I D	1				
	<p>Please tell me all of the jobs you have had during the last 12 months, including any work you have done for someone who is not a member of your household like an employer, the government another person, and any work you have done on your own farm or a farm owned by a household member on crops or livestock, or any work on your own account or in a business enterprise belonging to someone in your household.</p> <div style="border: 1px solid black; padding: 10px; margin: 20px auto; width: 60%;"> <p>INTERVIEWER: LIST EACH DIFFERENT ACTIVITY IN A SEPARATE SPACE.</p> </div>				
	1st	2nd	3rd	4th	5th

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## SECTION 3B: LABOR ACTIVITY SUMMARY

I N D I V I D U A L  I D	2.		3.	
	Out of the activities you mentions (IN QUESTION 1), which was the primary activity you were engaged in during the 6 months beginning in March?		Please describe what kind of trade or industry or business this primary activity is connected with (e.g. agriculture, fishing, mining, etc)	
	OCCUPATION DESCRIPTION	OCCUPATION CODE TO BE CODED AFTER THE INTERVIEW	INDUSTRY DESCRIPTION	INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW

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### SECTION 3B: LABOR ACTIVITY SUMMARY

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## SECTION 3B: LABOR ACTIVITY SUMMARY

INDIVIDUAL	9.		10.	11.	12.
	Please describe what kind of trade or industry or business this secondary activity is connected with (e.g. agriculture, fishing, mining, etc)		During those 6 months, how many months did you work in this secondary employment?	During the past 6 months, how many hours per week did you work in this primary employment?	Who is the employer in this secondary job?  FEDERAL GOV.....01 STATE GOV.....02 LOCAL GOV.....03 PARASTATAL.....04 PRIVATE SECTOR (INCLUDE PAID APPRENTICES).....05 NGO.....06 CO-OPERATIVES.....07 INTERNATIONAL ORGANIZATION /DIPLOMATIC MISSION.....08 RELIGIOUS ORGANIZATION..09 SELF-EMPLOYED.....10 OTHER (SPECIFY).....11
	INDUSTRY DESCRIPTION	INDUSTRY CODE TO BE CODED AFTER THE INTERVIEW	MONTHS	HOURS	

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## SECTION 4: CREDIT AND SAVINGS

ASK THESE QUESTIONS FROM ALL INDIVIDUALS 15 YEARS AND ABOVE.

I N D I V I D U A L  I D	1.	2.			3.	4.	5.	6.
	Some people like to keep their money in an account at a bank. Do you have a bank account?	In which bank(s) do you have your account(s)?  IF THE HOUSEHOLD MEMBERS HAVE BANK ACCOUNTS IN MORE THAN THREE BANKS, ASK FOR THE THREE BANKS THAT THEY USED THE MOST.			Before you got this bank(s) account(s), did you search for information from a range of sources?	Did you consider many alternatives before you decided which bank(s) account(s) to get?	Did you check the detailed terms and conditions of the bank(s) account(s) before you got it?	Did you check the detailed terms and conditions of the bank(s) account(s) carefully or just to get a rough idea of what they were?
	YES..1  NO...2 (► Q7)	<b>BANK CODES</b>  ACCESS BANK.....01      SKYE BANK.....16 AFRIBANK NIGERIA PLC..02      SPRING BANK PLC.....17 DIAMOND BANK.....03      STANBIC BANK.....18 ECOBANK.....04      STANDARD CHARTERED BANK..19 ETB.....05      STERLING BANK.....20 FCMB.....06      UBA.....21 FIDELITY BANK.....07      UNION BANK.....22 FIRST BANK.....08      UNITY BANK.....23 FIN BANK.....09      WEMA BANK.....24 GTB.....10      ZENITH BANK.....25 IBTC.....11      KEYSTONE BANK.....26 MAINSTREAM BANK.....27 OTHER.....28			YES..1  NO...2	YES..1  NO...2	YES..1  NO...2 (► Q7)	CHECKED CAREFULLY ...1  CHECKED <b>TO</b> HAVE A ROUGH IDEA.....2
	BANK 1	BANK 2	BANK 3					

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## SECTION 4: CREDIT AND SAVINGS

I N D I V I D U A L  I D	7.	8.	9.					
	Is there someone who lets you cash cheques, transfer funds, or do other banking transactions using their account?	Now think of all the ways that you save money, in other words, where you put money to use later. In the last 6 months, have you used a cooperative, savings association or micro-finance institution to save money?	<p>Apart from banks, what is (are) the name(s) of the financial institution(s) such as cooperative society (ies), savings association (s), or micro-finance institution (s) that you used to save money in the last 6 months?</p> <p>IF THE RESPONDENT DEALS WITH MORE THAN THREE INSTITUTIONS, EXCLUDING BANKS, FOR SAVINGS AND/OR LOAN ACCOUNTS, WRITE IN THE NAMES OF THE TWO MOST USED SAVINGS AND LOAN INSTITUTIONS IN THE SPACES BELOW. ALSO, USING THE CODES, INDICATE THE TYPE OF INSTITUTION AND IF IT IS USED FOR SAVINGS, LOANS OR BOTH.</p> <p style="text-align: center;"><b>INSTITUTION TYPE CODE</b></p> <p>COOPERATIVE SOCIETY...1 SAVINGS ASSOCIATION...2 MICRO-FINANCE.....3 BANK.....4</p>					
	YES..1  NO...2	YES..1  NO...2 (► Q10)						
			INSTITUTION 1	TYPE	INSTITUTION 2	TYPE	INSTITUTION 3	TYPE
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## SECTION 4: CREDIT AND SAVINGS

INDIVIDUAL ID	10.	11.	12.						13.	14	15.
	Have you used any informal savings groups (adashi/esusu/ajo) to save money in the past 6 months?	Many people borrow money or buy things on credit. In the last 6 months, have you used an institution such as a bank, cooperative society, savings association or micro-finance institution to borrow money?	What is (are) the name(s) of the financial institutions such as banks, cooperative society (ies), savings association (s), or micro-finance institution (s) that you used to borrow money in the last 6 months?  IF THE RESPONDENT DEALS WITH MORE THAN THREE INSTITUTIONS FOR LOAN ACCOUNTS, WRITE IN THE NAMES OF THE THREE MOST USED LOAN INSTITUTIONS IN THE SPACES BELOW. ALSO, USING THE CODES, INDICATE THE TYPE OF INSTITUTION.  <b>INSTITUTION TYPE CODE</b>  COOPERATIVE SOCIETY...1 SAVINGS ASSOCIATION...2 MICRO FINANCE.....3 BANK.....4						Have you used any informal groups (adashi/esusu/ajo) to borrow money in the past 6 months?	Have you borrowed any money from friends, relatives or money lenders in the last 6 months?	Did you try to borrow money during the last 6 months but were unable to/ were turned down?
	YES..1 NO...2	YES..1 NO...2 (► Q13)	INSTITUTION 1	TYPE	INSTITUTION 2	TYPE	INSTITUTION 3	TYPE	YES..1 NO...2	YES..1 NO...2	YES..1 NO...2
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## SECTION 4: CREDIT AND SAVINGS

INDIVIDUAL	16.	17					
	Some people insure themselves and their possessions against unexpected circumstances. Have you used any institution to insure yourselves (life, health) or property (household goods, house, vehicle and the like) in the past 6 months?	What is (are) the name(s) of the institution(s) that you have used to insure yourselves (life, health) or your property (household goods, house, vehicle and the like) in the past 6 months? IF YOU HAVE MORE THAN THREE INSTITUTIONS, WRITE IN THE NAMES OF THE THREE MOST IMPORTANT INSTITUTIONS IN THE SPACES BELOW AND INDICATE THE INSURANCE TYPE IN EACH CASE. IF THERE ARE MULTIPLE INSURANCE TYPES, WRITE ALL SEPARATED BY COMMAS					
		<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>INSURANCE COMPANIES CODE</b></p> <p>ADIC INSURANCE.....1</p> <p>AFRICAN ALLIANCE INSURANCE .....2</p> <p>AIICO INSURANCE.....3</p> <p>ALLIANCE &amp; GENERAL INSURANCE.....4</p> <p>ANCHOR INSURANCE.....5</p> <p>CAPITAL EXPRESS INSURANCE.....6</p> <p>CONSOLIDATED HALLMARK INSURANCE...7</p> <p>CONTINENTAL REINSURANCE.....8</p> <p>CORNERSTONE INSURANCE.....9</p> <p>CRUSADER INSURANCE.....10</p> <p>EQUITY INDEMNITY INSURANCE.....11</p> <p>EQUITY LIFE INSURANCE PLC.....12</p> <p>FORTUNE ASSURANCE COMPANY.....13</p> <p>GOLDLINK INSURANCE .....14</p> <p>GREAT NIGERIA INSURANCE.....15</p> <p>GUARANTY TRUST ASSURANCE.....16</p> <p>GUARDIAN EXPRESS ASSURANCE.....17</p> <p>GUINEA INSURANCE.....18</p> <p>INDUSTRIAL AND GENERAL INSURANCE.19</p> <p>INTERCONTINENTAL WAPIC INSURANCE.20</p> <p>INTERNATIONAL ENERGY INSURANCE...21</p> <p>INVESTMENT &amp; ALLIED ASSURANCE...22</p> </div> <div style="width: 45%;"> <p>CAPITAL INSURANCE COMPANY.....23</p> <p>LASACO ASSURANCE PLC.....24</p> <p>LAW UNION AND ROCK INSURANCE.....25</p> <p>LEADWAY ASSURANCE.....26</p> <p>LINKAGE ASSURANCE.....27</p> <p>MUTUAL BENEFIT ASSURANCE.....28</p> <p>NEM INSURANCE.....29</p> <p>NIGER INSURANCE.....30</p> <p>NIGERIAN AGRICULTURAL INSURANCE CORP...31</p> <p>OASIS INSURANCE.....32</p> <p>OCEANIC INSURANCE.....33</p> <p>PRESTIGE ASSURANCE.....34</p> <p>REGENCY ALLIANCE INSURANCE.....35</p> <p>ROYAL EXCHANGE ASSURANCE.....36</p> <p>ROYAL PRUDENTIAL ASSURANCE.....37</p> <p>SOVEREIGN TRUST INSURANCE.....38</p> <p>STANDARD LIFE ASSURANCE.....39</p> <p>STANDARD TRUST ASSURANCE (STACO) .....40</p> <p>STERLING ASSURANCE NIGERIA.....41</p> <p>YANKARI INSURANCE.....42</p> <p>ZENITH GENERAL INSURANCE.....43</p> <p>OTHER.....44</p> </div> <div style="width: 10%; text-align: right;"> <p><b>INSURANCE TYPE</b></p> <p>HEALTH.....1</p> <p>LIFE.....2</p> <p>PROPERTY.....3</p> <p>MOTOR VEHICLE.....4</p> <p>OTHER SPECIFY.....5</p> </div> </div>					
	YES..1						
	NO...2 (► NEXT SECTION)						
		INSTITUTION 1	INSURANCE TYPE	INSTITUTION 2	INSURANCE TYPE	INSTITUTION 3	INSURANCE TYPE
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## SECTION 4B: FINANCIAL CAPABILITY

ASK THESE QUESTIONS FROM ALL INDIVIDUALS 15 YEARS AND ABOVE.

	1.	2.	3.	4.	5.	6.	7.	8.
I N D I V I D U A L  I D	Do you contribute to the household budget?	Do you participate in household decisions about money and financial matters or for household spending?	Are you mainly or partly responsible for your own personal spending?	INTERVIEWER: DID THIS PERSON ANSWER "NO" TO BOTH QUESTIONS 2 AND 3?	When you receive money, do you plan how it will be used?	Do you keep to the plan you make for using your money?	I would like now to ask you some questions about spending on food and paying for other necessary items such as rent, electricity, gas, water, telephone, transport and other regular expenses.  First, do you ever have any money left over after you have paid for food and other necessary items?	Do you ever run short of money for food or other necessary items?
	YES..1	YES..1	YES, MAINLY..1	ANSWERED NO TO BOTH Q2 AND Q3...1 (►SECT5)	YES, ALWAYS.....1	YES, ALWAYS.....1	YES, REGULARLY....1	YES, REGULARLY..1
	NO...2	NO...2	YES, PARTLY...2 NO.....3	ANSWERED YES TO EITHER Q2 OR Q3....2	YES, SOMETIMES.2 NO.....3 (► Q7)	YES, SOMETIMES.2 NO.....3	YES, SOMETIMES...2 NO.....3	Yes, SOMETIME...2 NO.....3 (► Q11)

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## SECTION 4B: FINANCIAL CAPABILITY

INDIVIDUAL		9.	10	11.	12.	13.	14.	15.
		Why do you run short of money for food or other necessary items?  LIST THE THREE MOST IMPORTANT REASONS  INSUFFICIENT/LOW INCOME.....01 FLUCTUATING/UNRELIABLE INCOME.....02 LOOKING FOR WORK.....03 BUSINESS LOSSES.....04 UNABLE TO WORK (E.G. BECAUSE SICK/HAVE TO LOOK AFTER FAMILY)...05 UNEXPECTED EXPENSES/EVENTS.....06 INCREASED COST OF FOOD AND OTHER NECESSARY ITEMS....07 HAVE TO PROVIDE FINANCIAL HELP TO OTHERS.....08 OVERSPENDING.....09 FAILURE TO PLAN AHEAD/BUDGET...10 OTHER.....11	Do you <u>ever</u> use credit or borrow money to buy food or pay for other necessary items because you have run short of money?  INTERVIEWER NOTE: INCLUDE FOOD, OTHER DAY-TO-DAY ESSENTIAL ITEMS AND REGULAR EXPENSE BOUGHT ON CREDIT AT A LOCAL SHOP, BOUGHT USING A LOAN, AN OVERDRAFT OR USING A CREDIT CARD THAT IS NOT PAID IN FULL EACH MONTH. DO NOT INCLUDE INFORMAL LOANS FROM FAMILY OR FRIEND.  YES, REGULARLY....1  YES, SOMETIMES...2  NO.....3	Do you and your household ever have to borrow money to pay off debts you owe?  YES, REGULARLY..1  YES, SOMETIMES..2  NO.....3	Do you know how much money you spent personally in the past 7 days?  YES, EXACTLY....1  YES, ROUGHLY..2  NO.....3	Do you know how much money you have available for day-to-day spending at the moment?  YES, EXACTLY....1  YES, ROUGHLY..2  NO.....3	Do you currently have to repay any money that you have borrowed?  YES..1  NO...2 (► Q16)	Please tell me which statement best describes how you feel about the amount of money you have borrowed.  INTERVIEWER: READ THE OPPTIONS  I could afford to borrow more if I/We wanted or needed to.....1  I have borrowed to my/our limit and could not afford to borrow more...2  I have borrowed more than I can really afford..3
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## SECTION 4B: FINANCIAL CAPABILITY

	16.	17.	18.	19.	20.	21.
I N D I V I D U A L  I D	Please can you tell me whether you agree or disagree that the following statement describes you personally. "I am very disciplined when it comes to managing money."	Many people spend money on things they know are not necessary. How often do you personally buy things that are not necessary before you have bought food and paid for other necessary items? Is it...	And how often do you personally buy things that you know are not necessary even though you know you can't afford them? Is it...	Taking into account all the things we have just discussed, who is mainly responsible for managing day-to-day money in your household?	In the next 12 months, do you expect to have any major expense or bill of at least the amount that your household earns or receives in a month (four weeks)? This might be Christmas/Eid or other religious holiday, a celebration such as a wedding or a birthday, a major purchase, a known bill, annual school fees, home repairs or improvements, remittances or money that you have to give to others or other expenses.	Thinking about the most important of these expected expenses, if you had to meet this expense tomorrow could you cover it <u>in full</u> and without borrowing money that you would have to repay?
	AGREE STRONGLY....1	Regularly...1	Regularly...1	MAINLY RESPONDENT...1 MAINLY RESPONDENT'S HUSBAND/WIFE /PARTNER.....2		
	AGREE TO SOME EXTENT.....2	Sometimes...2	Sometimes...2	RESPONDENT AND HUSBAND/WIFE /PARTNER JOINTLY...3		
	DISAGREE TO SOME EXTENT...3	Rarely.....3	Rarely.....3	RESPONDENT AND SOMEONE ELSE IN THE HOUSEHOLD JOINTLY...4		
	DISAGREE STRONGLY...4	Never.....4	Never.....4	MAINLY SOMEONE ELSE IN THE HOUSEHOLD.....5 NOBODY AT ALL.....6	YES..1 NO...2(► Q22)	YES..1 NO...2
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## SECTION 4B: FINANCIAL CAPABILITY

	22.	23.	24.	25.	26.	27.	28.
I N D I V I D U A L  I D	<p>The next questions are about major unexpected expenses, by that I mean things such as an unexpected bill, having to replace a major household appliance that breaks down, unexpected home repairs, unexpected requests for money from family or others, unexpected medical or doctor's costs, or funerals.</p> <p>If tomorrow you had to meet a major unexpected expense of at least the amount that your household earns/receives in a month, could you cover it in full and without borrowing money that you would have to repay?</p>	<p>Have you <u>done</u> anything to make sure you could cover such an unexpected expense in full without borrowing money that you would have to repay?</p>	<p>Have you <u>thought</u> about doing anything to make sure you could cover such an unexpected expense in full without borrowing money that you would have to repay?</p>	<p>How worried are you about being able to cover such an unexpected expense in full? Are you..</p> <p>NOT WORRIED AT ALL...1</p> <p>A BIT WORRIED...2</p> <p>VERY WORRIED...3</p>	<p>I am now going to read out some statements that other people have made about planning for the future generally. Please tell me whether these statements describe you personally.</p> <p>"I try to save money for the future." Does this describe you personally?</p>	<p>"I try to save some money regularly, even if it is only a little." Does this describe you personally?</p>	<p>"I always try to have some provision for emergencies or unexpected expenses." Does this describe you personally?</p>
	<p>YES..1 (► Q25)</p> <p>NO...2</p>	<p>YES..1 (► Q25)</p> <p>NO...2</p>	<p>YES..1</p> <p>NO...2</p>		<p>YES, VERY WELL.....1</p> <p>YES, TO SOME EXTENT..2</p> <p>NO...3</p>	<p>YES, VERY WELL.....1</p> <p>YES, TO SOME EXTENT..2</p> <p>NO...3</p>	<p>YES, VERY WELL.....1</p> <p>YES, TO SOME EXTENT..2</p> <p>NO...3</p>
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## SECTION 5: HOUSEHOLD ASSETS

		1. How many of the following items does your household own? WRITE THE TOTAL NUMBER OF ITEMS THAT THE HOUSEHOLD POSSESSES. IF NONE PUT '0'
ITEM	ITEM CODE	NUMBER OF ITEMS

Furniture (3/4 piece sofa set)	301	
Furniture (chairs)	302	
Furniture (table)	303	
Mattress	304	
Bed	305	
Mat	306	
Sewing machine	307	
Gas cooker	308	
Stove (electric)	309	
Stove gas (table)	310	
Stove (kerosene)	311	
Fridge	312	
Freezer	313	
Air conditioner	314	
Washing Machine	315	
Electric Clothes Dryer	316	
Bicycle	317	
Motorbike	318	
Cars and other vehicles	319	
Generator	320	
Fan	321	
Radio	322	
Cassette recorder	323	
Hi-Fi (Sound System)	324	
Microwave	325	

		2. Who is the person that owns this item?  WRITE THE ID OF THE PERSON WHO OWNS THE ITEM. IF THE ITEM IS OWNED BY THE HOUSEHOLD IN COMMON, WRITE "98".	3. How long ago was [ITEM] acquired? (IF LESS THAN ONE YEAR ENTER 0)	4. If you wanted to sell one of this [ITEM] today, how much would you receive?
I T E M	LIST ALL THE ITEMS IN QUESTION 1 AND THE OWNER OF THE ASSET IN QUESTION 2. IF MORE THAN ONE ITEM, WRITE A DESCRIPTION OF THE ITEM BELOW, OTHERWISE WRITE ONLY THE CODE OF THE ITEM.			
	DESCRIPTION	ITEM CODE	ID CODE	YEARS
				NAIRA

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		1. How many of the following items does your household own? WRITE THE TOTAL NUMBER OF ITEMS THAT THE HOUSEHOLD POSSESSES. IF NONE PUT '0'
ITEM	ITEM CODE	NUMBER OF ITEMS
Iron	326	
TV Set	327	
Computer	328	
DVD Player	329	
Satellite Dish	330	
Musical Instrument	331	
Mobile Phone	332	
Inverter	333	
Other (Specify)	334	

# SECTION 5: HOUSEHOLD ASSETS

OWNERS OF HOUSEHOLD ASSETS					
ITEM	1. LIST ALL THE ITEMS IN QUESTION 1 AND THE OWNER OF THE ASSET IN QUESTION 2. IF MORE THAN ONE ITEM, WRITE A DESCRIPTION OF THE ITEM BELOW, OTHERWISE WRITE ONLY THE CODE OF THE ITEM.		2. Who is the person that owns this item?  WRITE THE ID OF THE PERSON WHO OWNS THE ITEM. IF THE ITEM IS OWNED BY THE HOUSEHOLD IN COMMON, WRITE "98".	3. How long ago was [ITEM] acquired? (IF LESS THAN ONE YEAR ENTER 0)	4. If you wanted to sell one of this [ITEM] today, how much would you receive?
	DESCRIPTION	ITEM CODE	ID CODE	YEARS	NAIRA
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**PREFILL THIS FLAP BEFORE INTERVIEW AND USE WITH SECTIONS 1, 2, 3A, 3B, 4, 4B & 5**

I N D I V I D U A L  I D	1.	2.	3.	4.
	<p><b>NAME</b></p> <div> <p>LIST HOUSEHOLD HEAD ON LINE 1. MAKE A COMPLETE LIST OF ALL INDIVIDUALS WHO NORMALLY LIVE AND EAT THEIR MEALS TOGETHER IN THIS HOUSEHOLD, STARTING WITH THE HEAD OF HOUSEHOLD.</p> <p>(CONFIRM THAT HOUSEHOLD HEAD HERE IS SAME AS HOUSEHOLD HEAD LISTED ON IDENTIFICATION PAGE.)</p> </div>	<p><b>What is the sex of [NAME]?</b></p> <p>MALE.....1 FEMALE..2</p>	<p><b>What is [NAME]'s relationship to the head of household?</b></p> <p>HEAD.....01 SPOUSE.....02 OWN CHILD.....03 STEP CHILD.....04 ADOPTED CHILD..05 GRANDCHILD.....06 BROTHER/SISTER.07 NIECE/NEPHEW...08 BROTHER/ SISTER-IN-LAW.09 PARENT.....10 PARENT-IN-LAW..11 DOMESTIC HELP (RESIDENT).....12 DOMESTIC HELP (NON RESIDENT).13 OTHER RELATION (SPECIFY )....14 OTHER NON- RELATION (SPECIFY).....15</p>	<p>Is [NAME] still a member of this household?</p> <p>YES...1 NO...2 (► Q29)</p>

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## SECTION 6: NON-FARM ENTERPRISES AND INCOME GENERATING ACTIVITIES

E N T E R P R I S E  N O	1.			2.	3.	4.	5.		
	<b>ENUMERATOR:</b> CHECK POST HARVEST QUESTIONNAIRES FOR ANY HOUSEHOLD ENTREPRISES --INCOME GENERATING ACTIVITIES--COPY THE NAME, INDUSTRY CODE AND ENTERPRISE ID OF EACH INCOME-GENERATING ACTIVITY HERE. FOR EACH ACTIVITY / ENTERPRISE, ANSWER QUESTION 2. THEN ASK:  <b>Please tell me about any other business, trade or work as self-employed craftsman done by a household member that is not already listed here.</b>  LIST ANY NEW ENTERPRISES OR ACTIVITIES.  NOW ASK QUESTIONS 3-26 FOR EACH ENTERPRISE /ACTIVITY. COLLECT INFORMATION ON ALL ACTIVITIES/ ENTERPRISES HERE BEFORE GOING ON TO COLLECT DETAILS ON EACH.			INTERVIEWER: IS THIS A NEW OR ORIGINAL INCOME GENERATING ACTIVITY?	Is this [INCOME GENERATING ACTIVITY] currently operating or closed permanently, temporarily or seasonally?	Why did this [INCOME GENERATING ACTIVITY] stop?          LEGAL PROBLEMS.....1 COULD NOT OBTAININPUTS...2 LACK OF DEMAND.....3 LOW PROFITS....4 COULD NOT OBTAIN CREDIT.....5 TOO MUCH DEBT..6 SECURITY ISSUES.....7 OTHER, SPECIFY _____....8	Who in the household owns this [INCOME-GENERATING ACTIVITY]?          CAN LIST UP TO TWO OWNERS.		
	<b>IF THERE IS NO NON-FARM ENTERPRISE OPERATED BY ANY MEMBER OF THIS HOUSEHOLD (► NEXT SECTION)</b>			ORIGINAL.1 NEW...2 (►Q5)				OWNER 1	OWNER 2
								ID CODE	ID CODE
	TYPE OF ACTIVITY			INDUSTRY CODE	ORIGINAL ENTERPRISE ID CODE		(► NEXT ACTIVITY)	ID CODE	ID CODE
1									
2									
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8									

## SECTION 6: NON-FARM ENTERPRISES AND INCOME GENERATING ACTIVITIES

E N T E R P R I S E  N O	6.		7.		8.	9.	10.	11.	12.	13.						
	Who in your household decides on the use of the earnings from this [INCOME-GENERATING ACTIVITY]?		Who in the household manages this [INCOME-GENERATING ACTIVITY] or is most familiar with it?		INTERVIEWER: CHECK PRINT OUT: ARE THESE THE SAME OWNERS OR MANAGERS OF THE INCOME GENERATING ACTIVITY LISTED IN THE PRINTOUT?	Why did the ownership or management of this business change?  ILLNESS OF ORIGINAL OWNER OR MANAGER.....1 ORIGINAL OWNER OR MANAGER TOO BUSY.....2 NEW OWNER OR MANAGER MORE SKILLED.....3 DEBT OF ORIGINAL OWNER OR MANAGER.....4 LEGAL PROBLEMS OF ORIGINAL OWNER OR MANAGER.....5 ORIGINAL OWNER OR MANAGER MOVED.....6 OTHER SPECIFY...7	Who is the respondent providing information about this [INCOME- GENERATING ACTIVITY]?	How many months since the last interview did you operate this [INCOME- GENERATING ACTIVITY]?	Where do you operate this [INCOME- GENERATING ACTIVITY]?	Is this [INCOME- GENERATING ACTIVITY]? officially registered with the government?						
			IF CO-MANAGERS, LIST BOTH.								YES.....1 ((►Q10) NO.....2 INCOME GENERATING ACTIVITY NOT PRESENT IN FIRST VISIT...3 (►Q10)				HOME (INSIDE RESIDENCE)... ..1 HOME (OUTSIDE RESIDENCE)... ..2 INDUSTRIAL SITE.....3 TRADITIONAL MARKET.....4 COMMERCIAL AREA SHOP.....5 ROADSIDE.....6 OTHER FIXED PLACE.....7 MOBILE/NO FIXED LOCATION.....8 OTHER (SPECIFY)..9	YES...1  NO...2
			IF PRESENT, ASK THIS QUESTION FROM MANAGER(S).													
ID CODE	ID CODE	ID CODE	ID CODE				ID CODE	MONTHS								

1										
2										
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## SECTION 6: NON-FARM ENTERPRISES AND INCOME GENERATING ACTIVITIES

E N T E R P R I S E  N O	14.		15.		16.			17.	18.	19.	20.	
	Who are the household members engaged in this [INCOME-GENERATING ACTIVITY]?		How many <u>employees</u> are there who are <u>not</u> household members?		What was the main source of start-up capital for this [INCOME-GENERATING ACTIVITY]? CAN LIST UP TO THREE IN ORDER OF IMPORTANCE.			Since our last interview, did you try to get credit for this [INCOME GENERATING ACTIVITY] from banks and other formal financial agencies?	Did you eventually get the credit from the banks OR other formal financial agencies for this [INCOME GENERATING ACTIVITY]?	Since our last interview, did you use any credit to operate this enterprise [INCOME GENERATING ACTIVITY]?	Since our last interview, what was the source of credit that has been used to operate this enterprise [INCOME GENERATING ACTIVITY]?	
	IF MORE THAN ONE HOUSEHOLD MEMBER, PUT ALL ID CODES SEPARATED BY COMMA				HOUSEHOLD SAVINGS.....1 NGO SUPPORT.....2 LOAN FROM BANK (COMMERCIAL, MICRO FINANCE, CREDIT UNION)..3 MONEY LENDER.....4 ESUSU/ADASHI.....5 OTHER LOANS.....6 DISTRICT/TOWN ASSOCIATION SUPPORT.....7 COOPERATIVE/TRADE ASSOCIATIONS.8 REMITTANCES FROM ABROAD.....9 PROCEEDS FROM FAMILY FARM.....10 CHURCH/MOSQUE ASSISTANCE.....11 PROCEEDS FROM FAMILY NON-ENTERPRISE.....12 RELATIVES/FRIENDS.....13 OTHER (Specify).....14			YES...1 NO...2 (► Q19)	YES.....1 NO.....2	YES.....1 NO.....2 (► Q22)	LOAN FROM BANK (COMMERCIAL, MICRO FINANCE, CREDIT UNION).....1 MONEY LENDER.....2 ESUSU/ADASHI.....3 OTHER LOANS.....4 COOPERATIVE/TRADE ASSOCIATIONS.....5 RELATIVES/FRIENDS....6 OTHER (Specify).....7	
	PAID	UNPAID	MALE	FEMALE	1	2	3				1	2
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3												
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## SECTION 6: NON-FARM ENTERPRISES AND INCOME GENERATING ACTIVITIES

E N T E R P R I S E  N O	21.	22.	23.	24.		25.	26.	27.	28.	29.	30.
	Since our last interview, how much have you borrowed for this [INCOME GENERATING ACTIVITY]?	Since our last interview, did the [INCOME GENERATING ACTIVITY] have any loans that it was repaying (in cash or kind)?	Since our last interview, what is the amount of naira repaid on loans for [INCOME-GENERATING ACTIVITY]?	To whom do you sell your products or services?  LIST UP TO 2 BUYERS IN ORDER OF IMPORTANCE.		In operating this [INCOME GENERATING ACTIVITY], do you use a generator?	Do you own or rent the generator that you use in this business?	What is the current value of your physical capital stock, including all tools, equipment, buildings, land, vehicles for the business?	What is the total value of your current stock of inputs or supplies?	What is the total value of your current stock of finished merchandise (goods for sale)?	What were the <u>total sales</u> for the [INCOME GENERATING ACTIVITY] during the last month?
	NAIRA	YES...1 NO...2 (► Q24)	NAIRA	1	2	YES...1 NO...2 (► Q27)	OWN.....1 RENT.....2 OTHER (SPECIFY) ..3	NAIRA	NAIRA	NAIRA	NAIRA
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## SECTION 6: NON-FARM ENTERPRISES AND INCOME GENERATING ACTIVITIES

E N T E R P R I S E  N O	31.									
	What were the <u>business costs</u> last month in the following categories?									
	SALARIES AND WAGES	PURCHASE OF GOODS FOR SALE (INVENTORY)	TRANSPORT	FUEL FOR GENERATOR	MAINTENANCE OF GENERATOR	INSURANCE	RENT	INTEREST	RAW MATERIALS	OTHER
	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA	NAIRA
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# SECTION 6: NON-FARM ENTERPRISES AND INCOME GENERATING ACTIVITIES

32. List three most important constraints to non-farm business operations and growth?			33. List up to three primary constraints preventing HH members from opening a non-farm enterprise.		
REFER TO CONSTRAINT CODES ON THE RIGHT			REFER TO CONSTRAINT CODES ON THE RIGHT		
1ST	2ND	3RD	1ST	2ND	3RD

## CODES FOR Q31 & Q32 CONSTRAINTS

### ELECTRICITY

- 11 = ACCESS
- 12 = QUALITY
- 13 = COST

### TELECOMMUNICATIONS

- 21 = ACCESS
- 22 = QUALITY
- 23 = COST

### WATER

- 31 = ACCESS
- 32 = QUALITY
- 33 = COST

### POSTAL SERVICES

- 41 = ACCESS
- 42 = QUALITY
- 43 = COST

### TRANSPORTATION

- 61 = ROAD ACCESS
- 62 = ROAD QUALITY
- 63 = COST
- 64 = FACILITIES TO TRANSPORT GOODS

### FINANCIAL SERVICES

- 71 = DIFFICULTY TO BORROW FROM FAMILY, FRIENDS OR OTHERS
- 72 = DIFFICULTY TO BORROW FROM FORMAL FINANCIAL INSTITUTIONS
- 73 = HIGH INTEREST RATES
- 74 = COMPLICATED BANK LOAN PROCEDURES (TOO MANY FORMS)
- 75 = FEAR OF NOT BEING ABLE TO PAY LOAN INSTALLMENTS

### MARKETS

- 81 = ACCESS TO MARKETS (DISTANCE AND COST)
- 82 = DIFFICULT TO OBTAIN INFORMATION ON YOUR PRODUCT'S MARKET
- 83 = LOW DEMAND FOR GOODS AND SERVICES PRODUCED

### GOVERNMENT

- 91 = CORRUPTION
- 92 = UNCERTAIN ECONOMIC POLICY
- 93 = RESTRICTIVE LAWS AND REGULATIONS

### SAFETY

- 101 = CRIMINALITY, THEFT AND LAWLESSNESS
- 102 = CONFLICTS AND SOCIAL FRICTION

### TECHNOLOGY

- 111 = LACK OF TRAINING
- 112 = RESEARCH COSTS
- 113 = ACCESS TO COMPUTERS
- 114 = ACCESS TO INFORMATION AND TECHNOLOGY

### REGISTRATION AND PERMITS

- 121 = TIME AND COST OF REGISTERING ENTERPRISE
- 122 = Time and cost of obtaining enterprise permits
- 123 = COMPLICATED ENTERPRISE REGISTRATION AND PERMIT REGULATIONS

### TAXATION

- 131 = HIGH TAXES
- 132 = UNOFFICIAL LEVIES

## SECTION 7A: MEALS AWAY FROM HOME

	I T E M  C O D E	1. In the <u>past 7 days</u> , did members of this household consume any of the following meals or drinks away from home?	2. How much did you or other household members pay, in total in the last 7 days for [MEAL]? If free, please estimate what it would have cost if you had to pay.
		YES....1 NO....2(► NEXT ITEM)	NAIRA

## MEALS PREPARED AND CONSUMED OUTSIDE THE HOME

Full meals (e.g rice and stew, pounded yam and egusi, etc)	Breakfast	1		
	Lunch	2		
	Dinner	3		
Side dishes like pepper soup, nkwoobi, suya etc.		4		
Snacks such as sandwiches, biscuits, meatpies, donuts, pofpof, etc		5		
Dairy based beverages such as milk, yoghurt etc.		6		
Vegetables and roasted or boiled items such as(carrot, pears, boiled/roasted corn, plantain, sugar cane etc)		7		
Non alcoholic drinks		8		
Alcoholic drinks		9		

## SECTION 7B: FOOD EXPENDITURE

		1. Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] within the household?  PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD.  ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING ON TO THE NEXT QUESTIONS FOR ITEMS WITH YES  YES...1 NO...2 (► NEXT ITEM)	2. How much in total did your household consume of this [ITEM] in the <u>past 7 days</u> ?  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBOWU.....15	3. How much did the household purchase of this [ITEM] during the <u>past 7 days</u> ?  IF NONE WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK (►Q5)  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBOWU.....15	4. How much did your household spend on this [ITEM] during the <u>past 7 days</u> ?  THIS QUESTION REFERS TO THE QUANTITY IN QUESTION 3	5. How much of consumption of this [ITEM] came from purchases made during the <u>past 7 days</u> or before?  IF NONE WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBOWU.....15	6. How much of consumption of this [ITEM] came from own-production during the <u>past 7 days</u> ?  IF NONE WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBOWU.....15	7. How much of consumption of this [ITEM] came from gifts and other sources during the <u>past 7 days</u> ?  EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD  IF NONE ,WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBOWU.....15					
			QUANTITY	UNIT	QUANTITY	UNIT	NAIRA	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT

**GRAINS AND FLOURS**

Guinea corn/sorghum	10												
Millet	11												
Rice - local	13												
Rice - imported	14												
Maize flour	16												
Yam flour	17												
Cassava flour	18												
Wheat flour	19												
Maize (Unshelled/On the cob)	20												
Maize (Shelled)	21												
Other grains and flour	22												

**BAKED/PROCESSED PRODUCTS**

Bread	25												
Cake	26												
Buns/Pofpof/Donuts	27												
Biscuits	28												
Meat Pie/Sausage Roll	29												



## SECTION 7B: FOOD EXPENDITURE

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			QUANTITY	UNIT	QUANTITY	UNIT	NAIRA	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT

<b>STARCHY ROOTS, TUBERS &amp; PLANTAIN</b>													
Cassava - roots	30												
Yam - roots	31												
Gari - white	32												
Gari - yellow	33												
Cocoyam	34												
Plantains	35												
Sweet potatoes	36												
Potatoes	37												
Other roots and tuber	38												
<b>PULSES, NUTS AND SEEDS</b>													
Soya beans	40												
Brown beans	41												
White beans	42												
Groundnuts	43												
Other nuts/seeds/pulses	44												
<b>OIL AND FATS</b>													
Palm oil	50												
Butter/ Margarine	51												
Groundnuts Oil	52												
Other oil and Fat	53												

## SECTION 7B: FOOD EXPENDITURE

		1	2.	3.	4.	5.	6.	7.
		Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] within the household?	How much in total did your household consume of this [ITEM] in the <u>past 7 days</u> ?	How much did the household purchase of this [ITEM] during the <u>past 7 days</u> ?	How much did your household spend on this [ITEM] during the past 7 days?	How much of consumption of this [ITEM] came from purchases made during the past 7 days or before?	How much of consumption of this [ITEM] came from own-production during the past 7 days?	How much of consumption of this [ITEM] came from gifts and other sources during the past 7 days?
	<b>I T E M  C O D E</b>	PLEASE ONLY LIST ITEMS CONSUMED WITHIN THE HOUSEHOLD AND EXCLUDE FOOD CONSUMED OUTSIDE THE HOUSEHOLD.  ASK THIS QUESTION FOR ALL ITEMS, BEFORE MOVING ON TO THE NEXT QUESTIONS FOR ITEMS WITH YES  YES...1 NO...2 (► NEXT ITEM)	UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBLOWU.....15	IF NONE WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK (►Q5)  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBLOWU.....15	THIS QUESTION REFERS TO THE QUANTITY IN QUESTION 3	IF NONE WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBLOWU.....15	IF NONE WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBLOWU.....15	EXCLUDE FOOD TAKEN OUTSIDE THE HOUSEHOLD  IF NONE ,WRITE 0 FOR QUANTITY AND LEAVE UNIT BLANK  UNIT CODE KILOGRAMS (kg)...01 GRAMS (g).....02 LITRE (l).....03 CENTILITRE (cl)..04 MUDU.....05 OLODO.....06 CONGO.....07 PAINT RUBBER....08 LARGE DERICA....09 MEDIUM DERICA...10 SMALL DERICA....11 MILK CUP.....12 CIGARETTE CUP...13 TIYA.....14 KOBLOWU.....15
			QUANTITY UNIT	QUANTITY UNIT	NAIRA	QUANTITY UNIT	QUANTITY UNIT	QUANTITY UNIT

## FRUITS

Bananas	60												
Orange/tangerine	61												
Mangoes	62												
Avocado pear	63												
Pineapples	64												
Fruit canned	65												
Other fruits	66												

## VEGETABLES

Tomatoes	70												
Tomato puree (canned)	71												
Onions	72												
Garden eggs/egg plant	73												
Okra - fresh	74												
Okra - dried	75												
Pepper	76												
Leaves (Cocoyam, Spinach, etc.)	77												
Other vegetables (fresh or canned)	78												

## SECTION 7B: FOOD EXPENDITURE

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			QUANTITY	UNIT	QUANTITY	UNIT	NAIRA	QUANTITY	UNIT	QUANTITY	UNIT	QUANTITY	UNIT

**POULTRY AND POULTRY PRODUCTS**

Chicken	80												
Duck	81												
Other domestic poultry	82												
Agricultural eggs	83												
Local eggs	84												
Other eggs (not chicken)	85												

**MEAT**

Beef	90												
Mutton	91												
Pork	92												
Goat	93												
Wild game meat	94												
Canned beef/corned beef	95												
Other meat (excl. poultry)	96												

## SECTION 7B: FOOD EXPENDITURE

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			QUANTITY UNIT	QUANTITY UNIT	NAIRA	QUANTITY UNIT	QUANTITY UNIT	QUANTITY UNIT

## FISH AND SEAFOOD

Fish - fresh	100												
Fish - frozen	101												
Fish - smoked	102												
Fish - dried	103												
Snails	104												
Seafood (lobster, crab, prawns, etc)	105												
Canned fish/seafood	106												
Other fish or seafood	107												

## MILK AND MILK PRODUCTS

Fresh milk	110												
Milk powder	111												
Baby milk powder	112												
Milk tinned (unsweetened)	113												
Cheese (wara)	114												
Other milk products	115												

## COFFEE, TEA, COCOA AND THE LIKE BEVERAGES

Coffee	120												
Chocolate drinks (including Milo)	121												
Tea	122												

## SECTION 7B: FOOD EXPENDITURE

		1	2.	3.	4.	5.	6.	7.
		Within the <u>past 7 days</u> , did the members of this household eat/drink any of this [ITEM] within the household?	How much in total did your household consume of this [ITEM] in the <u>past 7 days</u> ?	How much did the household purchase of this [ITEM] during the <u>past 7 days</u> ?	How much did your household spend on this [ITEM] during the past 7 days?	How much of consumption of this [ITEM] came from purchases made during the past 7 days or before?	How much of consumption of this [ITEM] came from own-production during the past 7 days?	How much of consumption of this [ITEM] came from gifts and other sources during the past 7 days?
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		YES..1 NO...2 (► NEXT ITEM)						
			QUANTITY UNIT	QUANTITY UNIT	NAIRA	QUANTITY UNIT	QUANTITY UNIT	QUANTITY UNIT

**SUGAR, SWEETS AND CONFECTIONARY**

Sugar	130											
Jams	131											
Honey	132											
Other sweets and confectionary	133											

**OTHER MISCELLANEOUS FOODS**

Condiments (salt, spices, pepper, etc)	140											
--	-----	--	--	--	--	--	--	--	--	--	--	--

**NON-ALCOHOLIC DRINKS**

Bottled water	150											
Sachet water	151											
Malt drinks	152											
Soft drinks (Coca Cola, spirit, etc)	153											
Fruit juice canned/Pack	154											
Other non-alcoholic drinks	155											

**ALCOHOLIC DRINKS (BOTTLE AND CAN)**

Beer (local and imported)	160											
Palm wine	161											
Pito	162											
Gin	163											
Other alcoholic beverages	164											

## SECTION 8: NON-FOOD EXPENDITURE

**7 DAYS**

	I T E M	1. Over the past 7 days, did the household purchase any [...]?	2. How much did the household purchase in total?
ITEM		YES....1 NO....2 (► NEXT ITEM)	NAIRA
Cigarettes or tobacco	101		
Matches	102		
Newspaper and magazines	103		
Public transport (bus, rail, boat, etc) EXCLUDE EDUCATION RELATED EXPENSES	104		

**ONE MONTH RECALL**

	I T E M	3. Over the past 30 days, did the household purchase or pay for any [...]?	4. How much did the household purchase in total?
ITEM		YES....1 NO....2 (► NEXT ITEM)	NAIRA
Light bulbs/globes	311		
Water	312		
Soap and Washing powder	313		
Toilet paper	314		
Personal care goods (razor blades, cosmetics)	315		
Vitamin supplements	316		
Insecticides, disinfectant and cleaners	317		
Postal (incl. Stamps, courier)	318		
Recharge cards	319		
Landline charges	320		
Internet Services	321		
Recreational (Cinemas, video/DVD rental)	322		
Motor vehicle service, repair, or parts	323		
Bicycle service, repair, or parts	324		
Wages paid to staff/maid/lawnsboy	325		
Mortgage - regular payment to purchase house	326		
Repairs & maintenance to dwelling	327		
Repairs to household and personal items (radios, watches, etc.)	328		
House Rent	329		

**ONE MONTH RECALL**

	I T E M	3. Over the past 30 days, did the household purchase or pay for any [...]?	4. How much did the household purchase in total?
ITEM		YES....1 NO....2 (► NEXT ITEM)	NAIRA
Kerosene	301		
Palm Kernel Oil	302		
Gas (for lighting/cooking)	303		
Other liquid cooking fuel	304		
Electricity, including electricity vouchers	305		
Candle	306		
Firewood	307		
Charcoal	308		
Petrol	309		
Diesel	310		

## SECTION 8: NON-FOOD EXPENDITURE

## 6 month recall

	I T E M  C O D E	5. Over the past 6 months, did the household purchase or pay for any [...]?	6. How much did the household purchase in total?
		YES.....1 NO.....2 (► NEXT ITEM)	
Infant Clothing	401		
Baby nappies/diapers	402		
Boys Tailored clothes	403		
Boys dress (ready made)	404		
Girls Tailored clothes	405		
Girls dress (ready made)	406		
Men Tailored clothes	407		
Men dress (ready made)	408		
Women Tailored clothes	409		
Women dress (ready made)	410		
Ankara, George materials	411		
Other clothing materials	412		
Boy's shoes	413		
Men's shoes	414		
Girl's shoes	415		
Lady's shoes	416		
Tailoring charges	417		
laundry and dry cleaning	418		
Bowls, glassware, plates, silverware, etc.	419		
Cooking utensils (cookpots, stirring spoons and wisks, etc.)	420		
Cleaning utensils (brooms, brushes, etc.)	421		
Torch / flashlight	422		
Umbrella and raincoat	423		
Paraffin lamp (hurricane or pressure)	424		
Stationery items (not for school)	425		
Books (not for school)	426		
House decorations	427		
Night's lodging in rest house or hotel	428		
Donations to church, mosque, other religious group	429		
Health expenditures (excluding insurance)	430		

## 12 months recall

	I T E M  C O D E	7. Over the past 12 months, did the household purchase or pay for any [...]?	8. How much did the household purchase in total?
		YES.....1 NO.....2 (► NEXT ITEM)	
Carpeta,rug,draper,curtans	501		
Linen - towels, sheets, blankets	502		
Mat - sleeping or for drying maize flour	503		
Mosquito net	504		
Mattress	505		
Sports & hobby equipment, musical instruments, toys	506		
Film, film processing, camera	507		
Building items - cement, bricks, timber, iron sheets, tools, etc.	508		
Council rates	509		
Health insurance	510		
Auto insurance	511		
Home insurance	512		
Life insurance	513		
Fines or legal fees	514		
Dowry costs	515		
Marriage ceremony costs	516		
Funeral costs	517		

## 12 MONTHS RECALL: Non-food items that may not have been purchased.

	I T E M  C O D E	9. Over the past one year did the household gather, purchase, or pay for any [...]?	10. What was the estimated total value of [...] consumed by the household?	11. What was the cost of that which the household purchased?
		YES.....1 NO.2 (► NEXT ITEM)	NAIRA	NAIRA
Woodpoles, bamboo	518			
Grass for thatching roof or other use	519			

## SECTION 9: FOOD SECURITY

**[ASK SENIOR FEMALE OR PERSON MOST KNOWLEDGABLE ABOUT FOOD CONSUMPTION]**1. In the past 7 days, how many days have you or someone in your household had to: **(if no days, write '0')**

Rely on less preferred foods?	Limit the variety of foods eaten?	Limit portion size at meal-times?	Reduce number of meals eaten in a day?	Restrict consumption by adults in order for small children to eat?	Borrow food, or rely on help from a friend or relative?	Have no food of any kind in your household?	Go to sleep at night hungry because there is not enough food?	Go a whole day and night without eating anything?
a.	b.	c.	d.	e.	f.	g.	h.	i.
<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>	<b>DAYS</b>

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2 How many meals, including breakfast are taken per day in your household?		3 Do all household members eat roughly the same diet?		4 Who in the household usually eats a more diverse variety of foods, a less diverse variety of foods?  Rank in order from more diverse to less diverse (1, 2, and 3)		5 In the past 12 months, have you been faced with a situation when you did not have enough food to feed the household?		6 When did you experience this incident ?  IF MORE THAN ONCE, LIST ALL APPLICABLE MONTHS IN CORRECT YEAR COLUMN, SEPARATED BY A COMMA.  JANUARY..01 JULY.....07 FEBRUARY.02 AUGUST....08 MARCH....03 SEPTEMBER.09 APRIL....04 OCTOBER...10 MAY.....05 NOVEMBER..11 JUNE.....06 DECEMBER..12		7 What was the cause of this situation?  LIST UP TO 3 IN ORDER OF IMPORTANCE; USE CODES ON THE RIGHT.			<b>CODES FOR Q7:</b> Inadequate household stocks due to drought/poor rains.....01 Inadequate household food stocks due to crop pest damage.....02 Inadequate household food stocks due to small land size.....03 Inadequate household food stocks due to lack of farm inputs.....04 Food in the market was very expensive.....05 Unable to reach the market due to high transportation costs...06 No food in the market..07 Floods/water logging...08 Unable to reach the market due to civil unrest/riot.....09 Other (Specify).....10	
a. Adults	b. Children (6-59 months)	YES.1 (►5) NO..2		a. Male	b. Female	c. Children (6-59 months)	YES.1 NO..2 (► NEXT SECTION)				a.	b.		c.
NUMBER	NUMBER								2011	2012	1ST	2ND		3RD

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## SECTION 10: OTHER HOUSEHOLD INCOME

ASK THESE QUESTIONS OF THE HEAD OF HOUSEHOLD WHICH CONCERN ALL INDIVIDUALS 15 YEARS AND ABOVE.

1.	2.	3.		4.	5.	6.		7.	8.	9.	10.	11.	
Since the last interview, did any members of your household receive any regular income from <u>savings interest</u> or other investment income?	Since the last interview, how much did your household receive in savings interest or other investment income?	Who in your household decides on the use of this income?		Since the last interview, did any members of your household receive any regular income from <u>rental of property</u> (not agricultural land)?	What sort of property?  HOUSE.....1 COMMERCIAL BUILDING....2 OTHER PROPERTY (SPECIFY ) _____3	Since the last interview, how much did your household receive in total in rental income?		Who in your household decides on the use of this income?	Since the last interview, did any members of your household receive any <u>regular income</u> of any other <u>type</u> ?	What sort of income? (SPECIFY)	Since the last interview, how much did your household receive from this other income, in total?	Who in your household decides on the use of this income?	
YES..1 NO...2 (► Q4)				YES..1 NO...2(► Q8)				YES..1 NO...2 (► NEXT SECTION)					
	NAIRA	ID CODE	ID CODE			NAIRA	ID CODE	ID CODE			NAIRA	ID CODE	ID CODE

**1. In order for us to be able to contact you in the future, could you kindly provide us with your telephone numbers?**

PHONE NUMBER FOR HOUSEHOLD HEAD:

LANDLINE

CELL

1A NAME : \_\_\_\_\_ PHONE : \_\_\_\_\_ / \_\_\_\_\_

**2. In case we are not able to make contact with you, could you kindly provide us with the telephone numbers of some other adult members of this household ?**

PHONE NUMBERS FOR OTHER HOUSEHOLD MEMBERS:

2A. NAME : \_\_\_\_\_ ID (FROM ROSTER) \_\_\_\_\_ PHONE : \_\_\_\_\_

2B. NAME : \_\_\_\_\_ ID (FROM ROSTER) \_\_\_\_\_ PHONE : \_\_\_\_\_

2C. NAME : \_\_\_\_\_ ID (FROM ROSTER) \_\_\_\_\_ PHONE : \_\_\_\_\_

**3. If you were to move in the next two years, who are the people in this village/town/city who would be most likely to know your new address?**CONTACT INFORMATION FOR **REFERENCE PERSON 1**

3A1. NAME : \_\_\_\_\_

3A2. RELATION TO HEAD : \_\_\_\_\_

3A3. PHONE (LANDLINE) : \_\_\_\_\_

3A4. PHONE (CELL) : \_\_\_\_\_

3A5. ADDRESS

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CONTACT INFORMATION FOR **REFERENCE PERSON 2**

3B1. NAME : \_\_\_\_\_

3B2. RELATION TO HEAD : \_\_\_\_\_

3B3. PHONE (LANDLINE) : \_\_\_\_\_

3B4. PHONE (CELL) : \_\_\_\_\_

3B5. ADDRESS

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