



SUSENAS

VSENP07.K

The Central Bureau of Statistics (BPS)

## National Social Economic Survey of 2007

Main Information on Household and Household Members

[Panel – February 2007]

### Confidential

I. LOCATION IDENTIFICATION			
1	Province		
2	District/City *)		
3	Sub-district		
4	Village/kelurahan *)		
5	Village/kelurahan classification	1. Urban      2. Rural	
6	a. Census block number		
	b. Census sub-block number		
7	Sample code number		
8	Household sample sequential number		
9	Is the household included in the 2005 Susenas sample?	1. Yes 2. No, replacement household 3. No, new sample	
10	Address (road/street name, alley, RT/RW)		

II. HOUSEHOLD INFORMATION		
1	Name of the head of household	
2	Total household members (HM)	Age 0 – 4 years
		Age 5 – 9 years
		Age 10+ years
		Total household members

III. OFFICIAL INFORMATION			
1	Census taker code		
2	Census taker name: _____	Census date: _____	Signature: _____
3	Team coordinator name: _____	Verification date: _____	Signature: _____

\*) Cross out as necessary

IV. HOUSEHOLD MEMBER INFORMATION							
No	Household member name (People who live and eat in the household, including adult, children and toddler)	Relation with head of household (code)	Gender 1. M 2. F	Age (year)	Marital status (code)	HM age 0-4 years	HM age 2-6 years
						Have birth certificate from register office? Can be shown? (code)	Ever/ on pre-school education? (code)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1		1					
2							
3							
4							
5							
6							
7							
8							
9							
10							
<b>Column 3 Code</b> <u>Relation to the head of household</u> 1. Head of household 2. Wife/husband 3. Child 4. In-law 5. Grandchild 6. Parent/in-law		<b>Column 6 Code</b> <u>Marital Status</u> 1. Not married 2. Married 3. Divorced 4. Divorce due to death		<b>Column 7 Code</b> <u>Birth Certificate</u> 1. Yes, can be shown 2. Yes, cannot be shown 3. Do not have 4. Do not know		<b>Column 8 Code</b> <u>Pre-school</u> 1. Yes, kindergarten/BA/RA 2. Yes, playgroup 3. Yes, daycare 4. Yes, early childhood education center 5. Yes, other agency 6. No	



20. Do you have work/business, but temporarily not working for the past one week? 1. Yes                      2. No								
21. Are you looking for work? 1. Yes                      2. No								
22. Are you preparing for business during the past one week? 1. Yes                      2. No								
<b>ONLY FOR WORKING HOUSEHOLD MEMBER</b> <b>[R.19.a.1 = 1 or R.20 = 1]</b>								
23. a. Total work day: ____ days b. Total work hour from <b>all work</b> every day in the past one week:								
Mon	Tue	Wed	Thu	Fri	Sat	Sun	Total (hour)	
24. Main business/job from workplace in the past one week: 1. Agriculture, plantation, forestry, hunting and fisheries 2. Mining and quarrying 3. Processing industry 4. Electricity, gas and drinking water 5. Construction 6. Trade, restaurant and accommodation services 7. Transportation, warehousing and communications 8. Financial agency, real estate, rental business and enterprise services 9. Public, social and individual services								
25. Type of work/position of the main job in the past one week: (Write as complete as possible) _____						[Filled by editor]		
26. Position/status of the main job in the past one week: 1. Self-owned business/freelance 2. Self-owned business with non-permanent/non-paid worker 3. Self-owned business with permanent/paid worker 4. Worker/employee/staff 5. Freelancer 6. Non-paid worker								
<b>V.E. FERTILITY &amp; FAMILY PLANNING</b> <b>(FOR WOMEN AGE 10 YEARS AND UP)</b>								
<b>WOMEN WITH A STATUS OF MARRIED, DIVORCED,</b> <b>DIVORCE DUE TO DEATH OF SPOUSE</b> <b>(Block IV Column 4 = 2 &amp; Column 6 = 2, 3 or 4)</b>								
27. Age when married for the first time ____ years								
28. Total years in marriage: ____ years								
29. Total child born from marriage						M	F	M+F
a. Member of household, live birth								
b. Member of household, still alive								
c. Member of household, already deceased								
30. The use/wearing of family planning device/method? 1. Using it now 2. No longer use it -> [other household member]								
3. Never use it -> [other household member]								
31. If currently using ( <b>R.30 = 1</b> ), the selected family planning device/method:								
1. Women/tubectomy				6. Birth control pill				
2. Men/vasectomy				7. Condom/rubber				
3. IUD/spiral				8. Intravag/tissue/women condom				
4. Injection				9. Traditional method				
5. Implant/norplant								
<b>VI. HOUSING</b>								
1. Building status:								
1. Owned				5. Company house				
2. Lease				6. Owned by parents/sibling/family				
3. Rent				7. Other				
4. Free lease								
2. Type of most roof material:								
1. Concrete				5. Asbestos				
2. Roof tile				6. Fiber/palm				
3. Shingle				7. Other				
4. Iron sheet								
3. Type of most wall material:								
1. Concrete				3. Bamboo				
2. Wood				4. Other				
4. Type of most flooring material:								
1. Not soil				2. Soil/earth				
5. Floor area: ____ square meter								
6.a. Source of drinking water:								
1. Bottled water -> [R.8]				6. Protected spring				
2. Pipe				7. Unprotected/uncovered spring				
3. Pump				8. River				
4. Protected/covered well				9. Rainwater				
5. Unprotected/uncovered well				0. Other				
b. If <b>R.6.a = any of 3 to 7</b> (pump/well/spring), distance to the closest feces containment:								
1. ≤ 10 m				3. Do not know				
2. > 10 m								
7. If <b>R.6.a ≠ 1</b> , drinking water facility use:								
1. Personal				3. Public				
2. Mutual				4. None				
8. Method to obtain drinking water:								
1. Buying				2. Not buying				
9.a. Defecation facility use:								
1. Personal				3. Public				
2. Mutual				4. None -> [R.9.c]				
b. Type of toilet:								
1. Goose neck/leher angsa				3. Squat toilet/cemplung				
2. Pit toilet/plengsengan				4. None				
c. Final disposal location:								
1. Tank/septic tank				4. Pit hole				
2. Pool/field				5. Beach/open field/farm				
3. River/lake/sea				6. Other				
10. Source of light:								
1. PLN electricity				4. Oil lamp/torch				

2. Non-PLN electricity	5. Other
3. Paraffin lamp/petromak	
<b>IX. OTHER SOCIO-ECONOMIC INFORMATION</b>	
1. Is the household received unconditional cash transfer/direct cash subsidy (BLT/SLT)? 1. Yes                      2. No	
2. a. Any household member who received free health service in the past 6 months? 1. Yes                      2. No -> [R.3.a] b. If "yes" (R.2.a = 1), the type of card used: 1. Health insurance for poor people ( <i>Akseskin</i> ) 2. Fuel compensation card ( <i>KKB</i> ) 3. Health card ( <i>Kartu sehat</i> ) 4. Other: _____	
3. a. Is the household ever purchased cheap rice/rice for poor people in the <b>past 3 months</b> ? 1. Yes      2. No -> (R.4.a) b. If "yes" (R.3.a = 1) the amount of rice purchased: ____ kg c. How much <b>per kg</b> paid by the household for the last purchase of cheap rice? Rp _____	
4. a. Is the household ever received a business credit in the past one year? 1. Yes      2. No -> [STOP] b. Type of credit received: 1. Sub-district development program 2. P2KP (Urban Poverty Alleviation) program 3. Other government program 4. Bank program 5. Cooperatives/foundation program 6. Individual 7. Other	