

STRICTLY CONFIDENTIAL

CENTRAL STATISTICAL OFFICE,  
P.O. BOX 31908,  
LUSAKA.

REPUBLIC OF ZAMBIA

QUESTIONNAIRE SERIAL NO:

FORM 

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QUESTIONNAIRE NO. 

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 OF 

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THE SOCIAL DIMENSIONS OF ADJUSTMENT SURVEY (1991)

QUESTIONNAIRE IDENTIFICATION				
1. PROVINCE NAME	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>			
2. DISTRICT NAME	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td></tr></table>			
3. CSA NUMBER	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td></tr></table>			
4. RURAL...1 URBAN...2	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>			
5. SEA NUMBER	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>			
6. SURVEY BUILDING NUMBER (SBN)	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td></tr></table>			
7. HOUSING UNIT NUMBER (HUN)	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td></tr></table>			
8. HOUSEHOLD NUMBER (HHN)	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>			
OTHER IDENTIFICATION				
9. VILLAGE/LOCALITY NAME				
10. CHIEF'S AREA				
11. WARD	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td><td> </td></tr></table>			
12. SELECTED HOUSEHOLD	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td><td> </td></tr></table>			
NAME OF THE HEAD _____ RESIDENTIAL ADDRESS _____ SERIAL NO. OF HOUSEHOLD -----				
13. NUMBER OF VISITS				
14. INTERVIEW STATUS				
ACCEPTED INTERVIEW.....1 >> SECTION 00 DIFFERENT HOUSEHOLD.....2 >> 15 DWELLING NOT FOUND.....3 ILLNESS/DEATH.....4 REFUSAL.....5 OTHER, SPECIFY .....6 _____ >> NEXT SELECTED HOUSEHOLD				
15. HOUSEHOLD TO BE INTERVIEWED				
NAME OF THE HEAD _____ RESIDENTIAL ADDRESS _____				
DATA COLLECTION:				
Interviewer.....	Date .....			
Supervisor.....	Checking date.....			

## SECTION 0: HEAD OF HOUSEHOLD (PERSON RESPONSIBLE FOR MAIN DECISIONS)

SEC-ID 

0	0
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No.	QUESTIONS	CATEGORIES AND CODES	SKIP TO	
1.	Nationality of the Head of household	ZAMBIAN..1 NON ZAMBIAN..2		<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>
*2.	Is the head of the household present or absent?	PRESENT..... 1 ABSENT..... 2	>> 5	<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>
3.	How long has he/she been away?	NO TIME AWAY ..... 1 LESS THAN 1 WEEK ....2 1 WEEK TO 1 MONTH ...3 BETWEEN 1 MONTH AND 3 MONTHS .....4 OVER 3 MONTHS .....5		<div style="border: 1px solid black; width: 20px; height: 20px; margin: 0 auto;"></div>
*4.	In this person's absence, who is responsible for main decisions?  Name _____	INSERT SERIAL NUMBER OF HOUSEHOLD MEMBER AFTER COMPLETING SECTION 01		<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"><div style="border: 1px solid black; width: 15px; height: 15px;"></div><div style="border: 1px solid black; width: 15px; height: 15px;"></div></div>
*5.	PERSON INTERVIEWED Name of person interviewed  Name _____	INSERT SERIAL NUMBER OF HOUSEHOLD MEMBER AFTER COMPLETING SECTION 01		<div style="border: 1px solid black; width: 30px; height: 20px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"><div style="border: 1px solid black; width: 15px; height: 15px;"></div><div style="border: 1px solid black; width: 15px; height: 15px;"></div></div>

HOUSEHOLD ROSTER	
SEC ID 0 1	*1 LIST SERIALY NAMES OF HOUSEHOLD MEMBERS WHO NORMALLY LIVE AND EAT TOGETHER, STARTING WITH THE HEAD
SERIAL NUMBER OF HOUSEHOLD MEMBERS	
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3	
4	
5	
6	
7	
8	
9	
0	
1	
2	
3	
4	
5	
6	
7	
8	
9	
0	

FOR ALL PERSONS

*2	*3	4	*5	6	*7	8	9	10
Residence status USUAL MEMBER PRESENT.....1 USUAL MEMBER ABSENT.....2 VISITOR.....3>>NEXT PERSON	Relationship with the head of household HEAD.....1 SPOUSE.....2 OWN CHILD.....3 STEP CHILD.....4 BROTHER/ SISTER.....5 OTHER RELATIVE.....6 OTHER.....7	Sex MALE....1 FEMALE..2	How old is .... now? YEARS .... 1 MONTHS ... 2 RECORD AGE IN MONTHS FOR THOSE 0 TO 60 MONTHS OLD. THE BEST RECORD IN COMPLETED YEARS	Marital status FOR THOSE 12 YEARS AND OVER MARRIED...1 SEPARATED..2 DIVORCED...3 WIDOWED...4 NEVER MARRIED...5	Has .... had a health consul- tation in the last 3 months? YES.1 NO..2 >>11	Who was the last person consulted? TRADITIONAL HEALER.....1 CLINICAL OFFICER/DOCTOR..2 MIDWIFE/NURSE...3 OTHER.....4	What type of health institution did ... go to? GOVERNMENT..1 MISSIONS...2 INDUSTRIAL..3 PRIVATE....4	How much did .... pay for the last consul- tation including treatment? KWACHA
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EDUCATION FOR THOSE 5 YEARS AND ABOVE								
11	12	*13	*14	15	16	*17	*18	19
Has ... ever attended school? YES .. 1 NO ... 2 >> NEXT PERSON	Is the school ... are attending or the last school ... attended a private or a public one PUBLIC....1 PRIVATE....2	IF OVER 30 YEARS >> 18 Is ... currently attending school? YES..1 NO...2 >>15	What grade is ... currently attending? ENTER CODE >> 16	What is the main reason for not attending school now? WORKING.....1 EXPENSIVE.....2 TOO FAR.....3 NOT SELECTED/FAILED.....4 OTHER (Specify)....5	Was ... attending school last year? YES..1 NO...2 >>18	What grade was ... attending last year? ENTER CODE	What is/was the highest grade attained? ENTER CODE	Which year was this highest grade attained? ENTER YEAR
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[illegible]

CURRENT MAIN JOB									
Has... worked during last 7 days?	Has... been looking for work during the last 7 days?	If not looking for work is ..... avail- able for work?	What is your current main job?	Is this the same job/busine ss you were doing most of the last 12 months?	What type of product/servic e is produced in this main job?	How many yrs in this job?  ENTER NUMBER OF YEARS	Wh t is your employment status? SELF-EMPLD..1 GVT-EMPLYE..2 PARA.EMPLYE.3 PRVT.SEC.EMP.4 EMPLOYER.....5 UNPAID FAMILY WORKER.....6 OTHER.....7	How much is earned from this job	
YES...1 >> 10 NO...2	YES...1 >> 24 NO....2	YES...1 >> 24 NO.2>>24	SPECIFY IN THE SPACE PROVIDED	YES..1>>17 NO....2	SPECIFY IN THE SPACE PROVIDED			AMOUNT PER UNIT	UNIT: DAY..1 WK..2 MON.3 YR..4
7	8	9	10	11	12	13	14	15	16
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SECTION 2B: OTHER SOURCES OF HOUSEHOLD INCOME. QUESTION TO BE ASKED TO ALL HOUSEHOLD MEMBERS 7 YEARS AND ABOVE:

How much income did ..... receive during the last 12 months from the following sources?

How much income did ..... receive during the last 12 months from the following sources?

[illegible]



**SECTION 3A: HOUSING AND FACILITIES, HOUSING AMENITIES**

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NUMBER	QUESTIONS	CATEGORIES AND CODES	
1.	Did this household exist 12 months ago?	YES..... 1 NO..... 2	<input style="width: 30px; height: 20px;" type="checkbox"/>
2.	How Long has this household been living in this dwelling?	NUMBER OF MONTHS  NUMBER OF YEARS	<div style="display: flex; justify-content: space-between; width: 100%;"> <div><input style="width: 30px; height: 20px;" type="text"/></div> <div><input style="width: 30px; height: 20px;" type="text"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div><input style="width: 30px; height: 20px;" type="text"/></div> <div><input style="width: 30px; height: 20px;" type="text"/></div> </div>
3.	On what basis does the household occupy the dwelling, now?  ... and 12 months ago	OWNED..... 1 RENTED ..... 2 FREE OF CHARGE..... 3 OTHER..... 4 N/A..... 5	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>
4.	What is the main source of drinking water, now?  ... and 12 months ago	RIVER, LAKE..... 1 PROTECTED WELL..... 2 UNPROTECTED WELL..... 3 PUBLIC TAP..... 4 OWN TAP..... 5 OTHER..... 6 N/A..... 7	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>
5.	Does the household treat/boil drinking water now  ... and 12 months ago	YES..... 1 NO..... 2 N/A..... 3	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>
6.	What is the main source of energy for lighting now?  ... and 12 months ago?	KEROSINE..... 1 ELECTRICITY..... 2 CANDLE..... 3 OTHER..... 4 N/A..... 5	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>
7.	What is the main type of cooking fuel, now?  ... and 12 months ago?	COLLECTED FIREWOOD..... 1 PURCHASED FIREWOOD..... 2 CHARCOAL..... 3 KEROSINE..... 4 GAS..... 5 ELECTRICITY..... 6 CROP/LIVESTOCK RESIDUES..... 7 OTHER..... 8 N/A..... 9	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>
8.	What is main toilet facility now?  ... and 12 months ago	FLUSH TOILET..... 1 PIT LATRINE ..... 2 BUCKET ..... 3 AQUA PRIVY. .... 4 OTHER..... 5 N/A..... 6	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>
9.	What is the main method of garbage/sewage disposal now?  ... and 12 months ago	REFUSE COLLECTION..... 1 PIT..... 2 DUMPING..... 3 N/A..... 4	<div style="display: flex; justify-content: space-between; width: 100%;"> <div>NOW</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div> <div style="display: flex; justify-content: space-between; width: 100%;"> <div>12 MONTHS AGO</div> <div><input style="width: 30px; height: 20px;" type="checkbox"/></div> </div>

SECTION 3B: ACCESS TO FACILITIES. ASK QUESTION 1-4 FOR EACH FACILITY

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FACILITIES

NO.	QUESTIONS	CATEGORIES AND CODES	SKIP TO	A FOOD MARKET	B POST OFFICE	C PRIMARY SCHOOL	D SECONDARY SCHOOL	E HEALTH CEN CLINIC/ HOSPITAL	F BUS STATIO BOAT SERV/ TAXI SERV.	G SOURCE- DRINKING WATER																		
1. *	How far is the nearest ..... facility?	DISTANCE KM IF LESS THAN A KILOMETRE ENTER 00		34 <table border="1"><tr><td>1</td></tr></table>	1	<table border="1"><tr><td>2</td></tr></table>	2	<table border="1"><tr><td>3</td></tr></table>	3	<table border="1"><tr><td>4</td></tr></table>	4	<table border="1"><tr><td>5</td></tr></table>	5	<table border="1"><tr><td>6</td></tr></table>	6	<table border="1"><tr><td>7</td></tr></table>	7											
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2.	Does any member of the household use this facility now?	YES...1 NO...2	>> 4	37 <table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td>8</td></tr></table>	8											
8																												
3.	What is the main reason for not using this facility?  WHEN ANSWERED, CONTINUE FROM QUESTION 1 i.e. next facility	EXPENSIVE... 1 TOO FAR..... 2 POOR QUALITY SERVICE..... 3 FACILITY DOES NOT OFFER FULL SERVICE.....4 OTHER.....5 NOT RELEVANT.6	>>1	38 <table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td></td></tr></table>		<table border="1"><tr><td>8</td></tr></table>	8											
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4.	What is the usual mode of transport used by the household to reach this facility now?  ..... and 12 months ago?  WHEN ANSWERED CONTINUE FROM QUESTION 1 i.e. next facility	FOOT..... 1 BICYCLE..... 2 MOTORCYCLE.. 3 OWN VEHICLE. 4 PUBLIC TRANS.5 PROVIDED BY EMPLOYER.... 6 WATER TRANSPORT....7 OTHER.....8 N/A.....88	>>1	39 40 <table border="1"><tr><td></td><td></td></tr></table>  41 42 <table border="1"><tr><td></td><td></td></tr></table>					<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td></td><td></td></tr></table>			<table border="1"><tr><td>8</td><td>8</td></tr></table>  <table border="1"><tr><td>8</td><td>8</td></tr></table>	8	8	8	8
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**SECTION 4: MIGRATION**

SEC-ID 0 4

NO.	QUESTIONS	CATEGORIES AND CODES	SKIP TO	
*1.  *p342X	Where was the household residing 12 months ago?	SAME DWELLING, LOCALITY/VILLAGE/ TOWN ..... 1 DIFFERENT DWELLING, SAME LOCALITY/ VILLAGE/TOWN ..... 2 DIFFERENT DWELLING, DIFFERENT LOCALITY/VILLAGE/TOWN..... 3 DIFFERENT DISTRICT ..... 4 FOREIGN COUNTRY ..... 5 HOUSEHOLD DID NOT EXIST 12 MONTHS AGO ..... 6	>>4 >>2 >> 3 >> 4	<input type="checkbox"/>
*2.	Was this different locality/district situated in a rural or urban area?	RURAL..... 1 URBAN..... 2		<input type="checkbox"/>
3.	What was the main reason for migration?	JOB OPPORTUNITY..... 1 TRANSFER OF HEAD OF HOUSEHOLD.... 2 RESETTLEMENT..... 3 ACQUIRED OWN ACCOMMODATION ..... 4 OTHER (SPECIFY)..... 5		<input type="checkbox"/>
4.	Have any members of your household been away for more than 6 months to look for, or take a job in the last 12 months?	YES..... 1 NO..... 2	>>Sect.5A	<input type="checkbox"/>
5.	How many males were away in total?	NUMBER. 00 FOR NONE		<input type="checkbox"/>
6.	How many females were away in total?	NUMBER. 00 FOR NONE		<input type="checkbox"/>
7.	Was the household head one of these?	YES..... 1 NO..... 2		<input type="checkbox"/>
8.	Was the spouse referred to in section 1 one of these people?	YES..... 1 NO..... 2		<input type="checkbox"/>

## SECTION 5A: AGRICULTURE, HOLDING

SEC-ID 5 1

NO.	QUESTION	CATEGORIES AND CODES	SKIP TO	
*1.	Does any member of the household engage in any agricultural activity for this Household?	YES..... 1 NO..... 2	>>SECT. 6A	<input type="checkbox"/>
*2.	What is the total size of the holding?	SIZE GIVEN IN HECTARE, ACRE OR LIMA		HA. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ACRE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> LIMA <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
*3.	What was the total area under crop during the 1990/91 crop season?	SIZE GIVEN IN HECTARE, ACRE OR LIMA		HA. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> ACRE <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> LIMA <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

## SECTION 5B: AGRICULTURE, CROP PRODUCTION

SEC-ID 5 2

NO.	QUESTION	CATEGORIES AND CODES	SKIP TO	
1.1	<b>HYBRID MAIZE</b> Did any member of the household plant any hybrid maize for grain during the 1990/91 season	YES..... 1 NO..... 2	>> 2.1	<input type="checkbox"/>
1.2 *	Which members of the household planted hybrid maize during this season?	FILL IN CODES,  YES..... 1 NO..... 2  FOR DIFFERENT HOUSEHOLD MEMBERS		HEAD <input type="checkbox"/>  SPOUSE <input type="checkbox"/>  OTHER <input type="checkbox"/>
1.3	Did you harvest any hybrid maize from the area planted?	YES..... 1 NO..... 2	>> 2.1	<input type="checkbox"/>
1.4	How many 90 kg bags of hybrid maize did you harvest?	NUMBER OF 90 KG BAGS		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
1.5	How many 90 kg bags of hybrid maize did you sell?	NUMBER OF 90 KG BAGS  000000 FOR NONE		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2.1	<b>LOCAL MAIZE</b> Did any member of the household plant any local maize for grain during the 1990/91 season	YES..... 1 NO..... 2	>> 3.1	<input type="checkbox"/>
2.2 *	Which members of the household planted local maize during this season?	FILL IN CODES,  YES..... 1 NO..... 2  FOR DIFFERENT HOUSEHOLD MEMBERS		HEAD <input type="checkbox"/>  SPOUSE <input type="checkbox"/>  OTHER <input type="checkbox"/>
2.3	Did you harvest any local maize from the area planted?	YES..... 1 NO..... 2	>> 3.1	<input type="checkbox"/>
2.4	How many 90 kg bags of local maize did you harvest?	NUMBER OF 90 KG BAGS		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2.5	How many 90 kg bags of local maize did you sell?	NUMBER OF 90 KG BAGS  000000 FOR NONE		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
3.1	<b>CASSAVA</b> Did any member of the household have cassava under production during the 1990/91 season	YES..... 1 NO..... 2	>> Sect.5C	<input type="checkbox"/>
3.2 *	Which members of the household had cassava under production during this season?	FILL IN CODES,  YES..... 1 NO..... 2  FOR DIFFERENT HOUSEHOLD MEMBERS		HEAD <input type="checkbox"/>  SPOUSE <input type="checkbox"/>  OTHER <input type="checkbox"/>
3.3	Did you harvest any cassava from the area under production since 1st October 1990?	YES..... 1 NO..... 2	>> Sect.5C	<input type="checkbox"/>
3.4	How many 90 kg bags of cassava flour did you harvest?	NUMBER OF 90 KG BAGS		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

3.5	How many 90 kg bags of cassava flour did you sell?	NUMBER OF 90 KG BAGS 000000 FOR NONE		<input type="text"/>
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# SECTION 5C: AGRICULTURE, VEGETABLES

SEC-ID  5  3

1.	Did any member of the household plant any vegetables during the 1990/91 season?	YES..... 1 NO..... 2	>> SECT.5D	<input type="text"/>
*2.	Which members of the household planted vegetables during this season?	FILL IN CODES, YES..... 1 NO..... 2  FOR DIFFERENT HOUSEHOLD MEMBERS		HEAD <input type="text"/>  SPOUSE <input type="text"/>  OTHER <input type="text"/>
3.	Did you harvest any vegetables from the area planted?	YES..... 1 NO..... 2	>> SECT.5D	<input type="text"/>
4.	How much vegetables did you harvest? (SPECIFY TYPE OF VEGETABLES AND UNIT)	1. ----- 2. ----- 3. ----- 4. -----		1. <input type="text"/> <input type="text"/> <input type="text"/> 2. <input type="text"/> <input type="text"/> <input type="text"/> 3. <input type="text"/> <input type="text"/> <input type="text"/> 4. <input type="text"/> <input type="text"/> <input type="text"/>
5.	How much vegetables did you sell? (SPECIFY TYPE OF VEGETABLES AND UNIT)	1. ----- 2. ----- 3. ----- 4. -----		1. <input type="text"/> <input type="text"/> <input type="text"/> 2. <input type="text"/> <input type="text"/> <input type="text"/> 3. <input type="text"/> <input type="text"/> <input type="text"/> 4. <input type="text"/> <input type="text"/> <input type="text"/>

# SECTION 5D LIVESTOCK AND POULTRY

SEC-ID  5  4

	QUESTION	CATEGORIES AND CODES	SKIP TO	
1.1	LIVESTOCK Does any member of the household own cattle of any kind?	YES..... 1 NO..... 2	>> 1.3	<input type="text"/>
1.2	What is the total number of cattle you own today?	NUMBER OF CATTLE		<input type="text"/>
1.3	Does any member of the household own any goats?	YES..... 1 NO..... 2	>> 1.5	<input type="text"/>
1.4	What is the total number of goats you own today?	NUMBER OF GOATS		<input type="text"/>
1.5	Does any member of the household own any sheep?	YES..... 1 NO..... 2	>> 1.7	<input type="text"/>
1.6	What is the total number of sheep you own today?	NUMBER OF SHEEP		<input type="text"/>
1.7	Does any member of the household own other livestock?	YES..... 1 NO..... 2	>> 2.1	<input type="text"/>
1.8	What is the total number of other livestock owned today?	NUMBER OF OTHER LIVESTOCK		<input type="text"/>



NO.	QUESTION	CATEGORIES AND CODES	SKIP TO	
2.1	Does any member of the household own any chicken?	YES..... 1 NO..... 2	>> 2.3	<input type="checkbox"/>
2.2	What is the total number of chicken you own today?	NUMBER OF CHICKEN		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2.3	Does any member of the household own any ducks?	YES..... 1 NO..... 2	>> 2.5	<input type="checkbox"/>
2.4	What is the total number of ducks you own today?	NUMBER OF DUCKS		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2.5	Does any member of the household own any other poultry?	YES..... 1 NO..... 2	>> SECT.6A	<input type="checkbox"/>
2.6	What is the total number of other poultry you own today?	NUMBER OF OTHER POULTRY		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

# SECTION 6A NON-FARM ENTERPRISE, GENERAL INFORMATION

SEC-ID 

6	1
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NO.	QUESTIONS	CATEGORIES AND CODES	SKIP TO	
1	Did any member of the household operate any non-farm enterprise during the last 12 months	YES..... 1 NO..... 2	>>Sect.7	<input type="checkbox"/>
*2	List the three most important non-farm enterprise activities in terms of their contribution to household income.  1. _____  2. _____  3. _____	TO BE CODED IN OFFICE  TO BE CODED IN OFFICE  TO BE CODED IN OFFICE		<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"/> <input type="text"/> <input type="text"/>
3	How much income did the household receive during the last 12 months from these three enterprises?	ENTERPRISE NO. 1  ENTERPRISE NO. 2  ENTERPRISE NO. 3		<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"/> <input type="text"/> <input type="text"/>  <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4	Has any enterprise other than those listed above closed down in the last 12 months?	YES..... 1 NO..... 2	>>Sect6B	<input type="checkbox"/>
5	What was the main reason for closing down?  IF MORE THAN ONE ENTERPRISE IS CLOSED DOWN, ASK QUESTION 5 AND 6 FOR THE BIGGEST ONE.	LACK OF BUSINESS...1 LACK OF CREDIT....2 LACK OF RAW MATERIALS.....3 HIGH COST OF PRODUCTION.....4 OTHER(SPECIFY).....5		<input type="checkbox"/>
*6	What was the main activity of this enterprise?  4. _____	TO BE CODED IN OFFICE		<input type="checkbox"/>

SECTION 6B: ENTERPRISE DETAILS. ASK QUESTION 1-11 FOR EACH ENTERPRISE MENTIONED IN SECTION 6A, QUESTION 2.  
IF NONE, SKIP TO SECTION 7.

SEC-ID 

6	2
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ENTERPRISES

NO.	QUESTIONS	CATEGORIES AND CODES	SKIP TO	1st ENTERPRISE	2nd ENTERPRISE	3rd ENTERPRISE												
				1	2	3												
1	ENTERPRISE	TO BE CODED IN OFFICE		<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td><td></td></tr></table>					<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td><td></td></tr></table>					<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td><td></td></tr></table>				
2	Serial number of household member responsible for this enterprise	SERIAL NO OF HOUSEHOLD MEMBER FROM SECTION 01		<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>			<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>			<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>								
3	Did this enterprise start operating during the last 12 months?	YES..... 1 NO..... 2	>> 5	<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>										
4	How many years has this enterprise been in operation?	ENTER NUMBER OF YEARS		<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>			<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>			<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>								
5	How many months has this enterprise been in operation during the last 12 months?	ENTER NUMBER OF MONTHS		<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>			<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>			<table border="1" style="display: inline-table; width: 30px; height: 20px;"><tr><td></td><td></td></tr></table>								
6	Is this enterprise still operating?	YES..... 1 NO..... 2	>> 8	<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>										
7	How many employees are working in this enterprise now?	ENTER NUMBER OF EMPLOYEES		<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td></tr></table>				<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td></tr></table>				<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td></tr></table>						
8	How many employees were working in this enterprise 12 months ago	ENTER NUMBER OF EMPLOYEES		<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td></tr></table>				<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td></tr></table>				<table border="1" style="display: inline-table; width: 40px; height: 20px;"><tr><td></td><td></td><td></td></tr></table>						
*9	Is/was any equipment used for this enterprise?	YES..... 1 NO..... 2		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>										
*10	Has new equipment been bought in the last 12 months	YES..... 1 NO..... 2		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>										
*11	Has any equipment been sold in the last 12 months	YES..... 1 NO..... 2		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>		<table border="1" style="display: inline-table; width: 20px; height: 20px;"><tr><td></td></tr></table>										

SECTION 7: HOUSEHOLD EXPENSES  
(INCLUDE REMITTANCES FROM OUTSIDE FOR PURPOSES BELOW IF RECORDED IN SECTION 2B).

SEC-ID	0	7
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NO.	QUESTIONS	CATEGORIES AND CODES
*1.	EDUCATION EXPENSES How much was spent on the following during the past school year?	GIVE THE AMOUNTS IN KWACHA. 000000 FOR NONE
	.. School fees including exam fees	[ ][ ][ ][ ][ ][ ] [0][1]
	.. School uniforms	[ ][ ][ ][ ][ ][ ] [0][2]
	.. Contribution to school/PTA	[ ][ ][ ][ ][ ][ ] [0][3]
	.. Private tuition	[ ][ ][ ][ ][ ][ ] [0][4]
*2.	How much was spent on books and stationery during the past school year?	[ ][ ][ ][ ][ ][ ] [0][5]
*3.	MEDICAL EXPENSES How much was spent on the following during the past 3 months on...	
	.. Medicines?	[ ][ ][ ][ ][ ][ ] [0][6]
	.. Fees to Doctor/Health Assistant/Midwife/Nurse/ Traditional Healer?	[ ][ ][ ][ ][ ][ ] [0][7]
	.. Payments to hospital/health center?	[ ][ ][ ][ ][ ][ ] [0][8]
4.	CLOTHING AND FOOTWEAR How much was spent on clothing and footwear, excluding school uniforms during the past 3 months	[ ][ ][ ][ ][ ][ ] [0][9]
5.	HOUSING How much was spent during the past 1 month on ..	GIVE THE AMOUNTS IN KWACHA. 000000 FOR NONE
	.. Rent	[ ][ ][ ][ ][ ][ ] [1][0]
	.. Water	[ ][ ][ ][ ][ ][ ] [1][1]
	.. Electricity	[ ][ ][ ][ ][ ][ ] [1][2]
	.. Candle	[ ][ ][ ][ ][ ][ ] [1][3]
	.. Paraffin	[ ][ ][ ][ ][ ][ ] [1][4]
	.. Charcoal	[ ][ ][ ][ ][ ][ ] [1][5]
	.. Firewood	[ ][ ][ ][ ][ ][ ] [1][6]
	.. Other housing expenses	[ ][ ][ ][ ][ ][ ] [1][7]

NO.	QUESTIONS	CATEGORIES AND CODES	
*6.	REMITTANCES How much was spent on cash remittances during the past month?		[ ][ ][ ][ ][ ] [1][8]
	How much of this money was paid to urban and to rural areas?	GIVE THE PORTION FOR URBAN AND RURAL IN PERCENT.	% URBAN [ ][ ] [1][9] % RURAL [ ][ ] [2][0]
*7.	What is the cash value of remittances paid in kind during the past month?	GIVE THE AMOUNTS IN KWACHA. 000000 FOR NONE	[ ][ ][ ][ ][ ][ ] [2][1]
	How much of this was paid to urban and to rural areas?	GIVE THE PORTION FOR URBAN AND RURAL IN PERCENT.	% URBAN [ ][ ] [2][2] % RURAL [ ][ ] [2][3]
*8.	TRANSPORT How much was spent on transport during the past 1 month? .. To and from work	GIVE THE AMOUNTS IN KWACHA. 000000 FOR NONE	[ ][ ][ ][ ][ ][ ][ ] [2][4]
	.. To and from school		[ ][ ][ ][ ][ ][ ][ ] [2][5]
	.. Other kinds of transport		[ ][ ][ ][ ][ ][ ][ ] [2][6]
9.	FOOD How much was spent on maize meal last month?	GIVE THE AMOUNTS IN KWACHA 000000 FOR NONE	[ ][ ][ ][ ][ ][ ][ ] [2][7]
	How much was spent on the following kinds of food during the last 2 weeks:		
	.. Rice		[ ][ ][ ][ ][ ][ ][ ] [2][8]
	.. Bread/buns/fritters		[ ][ ][ ][ ][ ][ ][ ] [2][9]
	.. Kapenta		[ ][ ][ ][ ][ ][ ][ ] [3][0]
	.. Beans		[ ][ ][ ][ ][ ][ ][ ] [3][1]
	.. Vegetables		[ ][ ][ ][ ][ ][ ][ ] [3][2]
	.. Fish		[ ][ ][ ][ ][ ][ ][ ] [3][3]
	.. Sugar		[ ][ ][ ][ ][ ][ ][ ] [3][4]
	.. Salt		[ ][ ][ ][ ][ ][ ][ ] [3][5]
	.. Cooking oil,		[ ][ ][ ][ ][ ][ ][ ] [3][6]
	.. Eggs		[ ][ ][ ][ ][ ][ ][ ] [3][7]



SECTION 88: OTHER HOUSEHOLD PROPERTY. ASK QUESTION A AND B FOR EACH HOUSEHOLD ASSET

SEC-ID 

8	2
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NO.	QUESTION A	CATEGORIES AND CODES	QUESTION B CATEGORIES AND CODES				
	Does the household own .....  ↓  V	YES..... 1 NO..... 2	Has the number of this asset decreased, increased or stayed the same the last 12 months?  DECREASED..... 1 STAYED THE SAME ..... 2 INCREASED..... 3 NOT OWNED 12 MONTHS AGO..... 4				
1.	.. Plough	<table border="1"><tr><td>0</td><td>1</td><td></td></tr></table> ---->	0	1		<table border="1"><tr><td></td></tr></table>	
0	1						
2.	.. Crop sprayer	<table border="1"><tr><td>0</td><td>2</td><td></td></tr></table> ---->	0	2		<table border="1"><tr><td></td></tr></table>	
0	2						
3.	.. Fishing boat	<table border="1"><tr><td>0</td><td>3</td><td></td></tr></table> ---->	0	3		<table border="1"><tr><td></td></tr></table>	
0	3						
4.	.. Bicycle	<table border="1"><tr><td>0</td><td>4</td><td></td></tr></table> ---->	0	4		<table border="1"><tr><td></td></tr></table>	
0	4						
5.	.. Motorcycle	<table border="1"><tr><td>0</td><td>5</td><td></td></tr></table> ---->	0	5		<table border="1"><tr><td></td></tr></table>	
0	5						
6.	.. Car/van/truck	<table border="1"><tr><td>0</td><td>6</td><td></td></tr></table> ---->	0	6		<table border="1"><tr><td></td></tr></table>	
0	6						
7.	.. Tractor	<table border="1"><tr><td>0</td><td>7</td><td></td></tr></table> ---->	0	7		<table border="1"><tr><td></td></tr></table>	
0	7						
8.	.. Handgrinding mill	<table border="1"><tr><td>0</td><td>8</td><td></td></tr></table> ---->	0	8		<table border="1"><tr><td></td></tr></table>	
0	8						
9.	.. Hammer mill	<table border="1"><tr><td>0</td><td>9</td><td></td></tr></table> ---->	0	9		<table border="1"><tr><td></td></tr></table>	
0	9						
10.	.. TV	<table border="1"><tr><td>1</td><td>0</td><td></td></tr></table> ---->	1	0		<table border="1"><tr><td></td></tr></table>	
1	0						
11.	.. Radio	<table border="1"><tr><td>1</td><td>1</td><td></td></tr></table> ---->	1	1		<table border="1"><tr><td></td></tr></table>	
1	1						
12.	.. Refrigerator	<table border="1"><tr><td>1</td><td>2</td><td></td></tr></table> ---->	1	2		<table border="1"><tr><td></td></tr></table>	
1	2						
13.	.. Canoe	<table border="1"><tr><td>1</td><td>3</td><td></td></tr></table> -->	1	3		<table border="1"><tr><td></td></tr></table>	
1	3						
14.	.. Fishing net	<table border="1"><tr><td>1</td><td>4</td><td></td></tr></table> ---->	1	4		<table border="1"><tr><td></td></tr></table>	
1	4						

SECTION 9. ANTHROPOMETRY. TO BE COMPLETED FOR CHILDREN 3 MONTHS TO 60 MONTHS OLD.

SEC-ID 0 9

NO.	QUESTION	CATEGORIES AND CODES	SKIP TO	IF MORE THAN FIVE, USE A FRESH QUESTIONNAIRE, NUMBER IT ON THE FIRST PAGE AND USE THE SAME IDENTIFICATION PARTICULARS AS ON THIS ONE.				
*1.	SERIAL NUMBER FOR HOUSEHOLD MEMBERS 5 YEARS OR YOUNGER (FROM SECTION 1)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
*2.	SERIAL NUMBER FOR THE CHILD'S NATURAL MOTHER (FROM SECTION 1)			<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3.	AGE GIVEN IN MONTHS	MONTHS		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4.	Has the child visited under 5 clinic during the last month?	YES.....1 NO.....2	>> 6	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5.	Why has the child not visited under 5 clinic?	ABSENCE.....1 ILLNESS.....2 REFUSAL.....3 OTHER SPECIFY .....4		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6.	WEIGHT	NEAREST 0.1 KG		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
*7.	HEIGHT	CM		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
*8.	Who usually cares for the child in the absence of parents	NURSERY SCHOOL/ PRESCHOOL... 1 NANNY.....2 OLDER SISTER/ BROTHER.....3 OTHER RELATIVES....4 NEIGHBOUR....5 NONE.....6		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>