



**SECTION 1: HOUSEHOLD ROSTER**

1.	2. Name:  1. START WITH LIST OF PEOPLE THE CORE RESPONDENT LIVED WITH IN THE LAST ROUND. FOR EACH PREVIOUS HH MEMBER, COMPLETE Q3, Q6-15.  2. THEN ADD NAMES OF ANY NEW PEOPLE THE CORE RESPONDENT LIVES WITH NOW. FOR EACH NEW PERSON, COMPLETE Q4-15.	INFORMATION FROM LAST INTERVIEW PREPRINTED BY INTERVIEWER		3. ASK FOR ALL ROSTER NAMES FROM LAST INTERVIEW  Does [...] still live in this household with you?  1 = Yes >> Q6 2 = No >> Next row	NEW HOUSEHOLD MEMBERS		6. What is the highest level of education [NAME] has attended?  0 = None 1 = Pre-school 2 = Primary 3 = Secondary 4 = University 5 = Training college	7. Relationship to head:  1 = Head 2 = Wife/husband 3 = Child/adopted child 4 = Grandchild 5 = Niece/nephew 6 = Father/mother 7 = Sister/brother 8 = Son/daughter-in-law 9 = Brother/sister-in-law 10 = Grandfather/mother 11 = Father/mother-in-law 12 = Other relative 13=Servant or servant's rel. 14 =Lodger/lodger's rel. 15 = Other non-relative, (specify)
		Age at last interview	Sex		4. Sex:	5. How old is [NAME]?		
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
11								
12								

**SECTION 1: HOUSEHOLD ROSTER (CONTINUED)**

1.	8. IS THIS PERSON A MTM CORE RESPONDENT?  C O D E  MARK "X" TO INDICATE IF PERSON IS MTM CORE RESPONDENT.  HOUSEHOLD CAN HAVE MORE THAN 1 CORE RESPONDENT.	9. IS THIS PERSON A SPOUSE OF MTM CORE RESPONDENT?  MARK "X" TO INDICATE IF PERSON IS SPOUSE OF MTM CORE RESPONDENT.	10. Is [NAME]'s biological father in the household/ alive?  IF IN HH: ENTER ROSTER ID	11. Is [NAME]'s biological mother in the household/ alive?  IF IN HH: ENTER ROSTER ID	If age is less than 12 years old >> Next row	12. What is [NAME]'s marital status?  1= Monogamous 2= Polygamous 3 = Separated 4 = Divorced 5 = Widow /Widower 6 = Never married  IF 3-6 >> NEXT ROW	13. Does [NAME]'s spouse live in this household now?	14. COPY THE SPOUSE ID FROM THE HH ROSTER:  IF ONE WIFE (IF Q12=1), COPY ID CODES OF WIFE AND HUSBAND RESIDENT IN HOUSEHOLD UNDER SPOUSE  IF MORE THAN ONE WIFE (IF Q12=2), COPY ID CODES OF ALL WIVES RESIDENT IN HOUSEHOLD	15. How many spouses does [NAME] have residing outside this HH?  ENTER 0 IF NONE	
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										

## SECTION 2: DWELLING CHARACTERISTICS

<p>1. Do you own or are purchasing this house, is it provided to you by an employer, do you use it for free, or do you rent this house?</p> <p>1 = Owned 2 = Being purchased 3 = Employer provides 4 = Free, authorized 5 = Free, not authorized 6 = Rented</p>	<p>2. What type of dwelling does the household live in?</p> <p>1 = Single house 2 = Several separate structures 3 = Flat 4 = Room in larger dwelling 5 = Improvised housing 6 = Other, specify</p>	<p>3. What general type of construction materials are used for the dwelling?</p> <p>1 = Permanent 2 = Semi-permanent 3 = Traditional Semi-permanent is a mix of traditional (grass, mud) &amp; modern materials (iron sheet, cement).</p>	<p>4. The outer walls of the main dwelling are predominantly made of what material?</p> <p>1 = Grass 2 = Mud (yomata) 3 = Compacted earth (yamdingo) 4 = Mud brick (unfired) 5 = Burnt bricks 6 = Concrete 7 = Wood 8 = Iron sheets 9 = Other, specify</p>	<p>5. The roof of the main dwelling is predominantly made of what material?</p> <p>1 = Grass 2 = Iron sheets 3 = Clay tiles 4 = Concrete 5 = Plastic sheeting 6 = Other, specify</p>	<p>6. The floor of the main dwelling is predominantly made of what material?</p> <p>1 = Natural (earth/sand/mud/dung) 2 = Rudimentary (wood/broken brick) 3 = Finished (polished wood/cement/tile) 4 = Other, specify</p>	<p>7. How many separate rooms do the members of your household occupy?</p> <p>INCLUDE THE ROOM(S) IN THE MAIN HOUSE PLUS ANY DWELLING UNITS. DO NOT COUNT BATHROOMS, TOILETS, STOREROOMS, OR GARAGE. NUMBER OF ROOMS</p>	<p>8. What is the main source of lighting fuel for the dwelling?</p> <p>1 = Collected firewood 2 = Purchased firewood 3 = Grass 4 = Paraffin 5 = Electricity 6 = Gas 7 = Cell (torch) 8 = Candles 9 = Other, specify</p>	<p>9. What is the main source of cooking fuel for this household?</p> <p>1 = Collected firewood 2 = Purchased firewood 3 = Paraffin 4 = Electricity 5 = Gas 6 = Charcoal 7 = Crop residue 8 = Saw dust 9 = Animal waste 10 = Other, specify</p>
<p>10. Do you have electricity working in your dwelling?</p> <p>1 = Yes 2 = No (&gt;&gt; 12)</p>	<p>11. Is your electricity from ESCOM, a generator, solar panels, or some other source?</p> <p>1 = ESCOM 2 = Generator 3 = Solar panel 4 = Other, specify (&gt;&gt; 13)</p>	<p>12. Although you do not have electricity here, is there electricity within 100 meters of this dwelling, whether from ESCOM, a generator, a solar panel, or some other source?</p> <p>1 = Yes 2 = No</p>	<p>13. Is there a landline telephone in working condition in the dwelling?</p> <p>1 = Yes 2 = No</p>	<p>14. Does someone in the household own a cellular telephone (cell phone) in working condition?</p> <p>1 = Yes 2 = No</p>	<p>15. What was your main source of drinking water over the past month?</p> <p>1 = Piped into dwelling 2 = Piped outside dwelling, personal 3 = Communal standpipe 4 = Personal handpump/borehole 5 = Communal handpump/borehole 6 = Protected spring 7 = Personal open, unprotected well 8 = Communal open, unprotected well 9 = River/spring 10 = Lake/reservoir 11 = Other, specify</p>	<p>16. What kind of toilet facility does your household use?</p> <p>1 = Flush toilet 2 = VIP pit latrine (lid, cement floor, fly trap) 3 = Standard pit latrine (cement floor, iron roof) 4 = Traditional pit latrine (mud floor, thatched roof) 5 = No facility (bush, field, throw away)</p>	<p>17. What kind of rubbish disposal facilities does your household use?</p> <p>1 = Collected from rubbish bin 2 = Rubbish pit 3 = Burning 4 = Public rubbish heap 5 = Other 6 = None</p>	

**SECTION 3: DURABLE GOODS**

1. Does your household own a [ITEM]?		Yes	No
C	ITEM		
O			
D			
E			
1	Mortar/pestle ( <i>mtondo</i> )	1	2
2	Bed	1	2
3	Table	1	2
4	Chair (un-upholstered)	1	2
5	Radio ('wireless')	1	2
6	Tape or CD player; HiFi	1	2
7	Television	1	2
8	Bicycle	1	2
9	Beer brewing drum	1	2
10	Upholstered chair or sofa set	1	2
11	Coffee table (for sitting room)	1	2
12	Cupboard, drawers, wardrobe	1	2
13	Lantern (paraffin)	1	2
14	Clock	1	2
15	Iron (for pressing clothes)	1	2
16	Panga	1	2
17	Hoe	1	2
18	Axe	1	2
19	Sickle	1	2
20	Mattress	1	2

3.	How much land is owned by you or any member of your household, including land which is farmed but also land which is fallow?  ENTER 0 IF NO LAND OWNED. DO NOT LEAVE BLANK	a) Acres [ ]	b) Hectares [ ]	c) Football pitches [ ]														
4.	In the last rainy season, did your household harvest and sell for cash any of the following crops?	<table border="1"> <thead> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> </thead> <tbody> <tr> <td>a) Maize</td> <td>1</td> <td>2</td> </tr> <tr> <td>b) Tobacco</td> <td>1</td> <td>2</td> </tr> <tr> <td>c) Cotton</td> <td>1</td> <td>2</td> </tr> <tr> <td>d) Any other crop grown and sold for cash, specify: _____</td> <td>1</td> <td>2</td> </tr> </tbody> </table>			Yes	No	a) Maize	1	2	b) Tobacco	1	2	c) Cotton	1	2	d) Any other crop grown and sold for cash, specify: _____	1	2
	Yes	No																
a) Maize	1	2																
b) Tobacco	1	2																
c) Cotton	1	2																
d) Any other crop grown and sold for cash, specify: _____	1	2																

**SECTION 4: CONSUMPTION OF FOOD OVER PAST ONE WEEK**

1.	2. Over the past one week (7 days), did you or others in your household consume any [ . . . ]?  INCLUDE FOOD BOTH EATEN COMMUNALLY IN THE HOUSEHOLD AND THAT EATEN SEPARATELY BY INDIVIDUAL HOUSEHOLD MEMBERS.  YES..1 NO...2 (if NO, »NEXT ITEM)	3. How much in total did your household consume in the past week?  QUANTITY   UNIT (CODES AT RIGHT)	4. How much came from purchases?  QUANTITY   UNIT (CODES AT RIGHT)	5. How much did you spend?  MK	6. How much came from own-production?  QUANTITY   UNIT (CODES AT RIGHT)	7. How much came from gifts and other sources?  QUANTITY   UNIT (CODES AT RIGHT)
<b>Cereals, grains, cereal products</b>						
1	Maize ufa ngaiwa (normal flour)					
2	Maize ufa refined (fine flour)					
3	Green maize					
<b>Pulses</b>						
4	Beans					
5	Groundnut					
<b>Vegetables</b>						
6	Nkhwani					
7	Thanaposi/rape					
8	Gathered wild green leaves					
<b>Meat, Fish, and Animal products</b>						
9	Dried fish					
10	Fresh fish					
11	Chicken					
12	Goat					
13	Eggs					
14	Beef					
<b>Sugar, Fats, and Oil</b>						
15	Sugar					
16	Sugar Cane					
17	Cooking oil					

**UNIT**

- 1= KILOGRAMME
- 2 = 50 KG. BAG
- 3 = 90 KG. BAG
- 4 = PAIL (SMALL)
- 5 = PAIL (LARGE)
- 6 = No. 10 PLATE
- 7 = No. 12 PLATE
- 8 = BUNCH
- 9 = PIECE
- 10 = HEAP
- 11 = BALE
- 12 = BASKET (DENGU) (SHELLED)
- 13 = BASKET (DENGU) (UNSHELLED)
- 14 = OX-CART (UNSHELLED)
- 15 = LITRE
- 16 = CUP
- 17 = TIN
- 18 = GRAM
- 19 = MILLILITRE
- 20 = OTHER (SPECIFY)

**SECTION 5: ECONOMIC SHOCKS**

1.	2.	3.	4.	5.	6.	7.
C O D E	Over the past <u>12 MONTHS</u> , was your household severely affected negatively by any of the following events?  GO THROUGH ENTIRE LIST BEFORE PROCEEDING TO Q3.	Rank the three most significant shocks your household experienced: 1 = Most severe 2 = 2nd most severe 3 = 3rd most severe	Did [THIS SHOCK] cause a reduction in household income, assets, both, or none? 1 = Income loss 2 = Asset loss 3 = Loss of both 4 = None	[THIS SHOCK] affected: [READ] 1 = Own HH only 2 = Some other HHs too 3 = Most HHs in community 4 = All HHs in community	When did [this shock] occur? Month Year	What did you do in response to this shock to try to regain your former welfare level? LIST UP TO 3 BY ORDER OF IMPORTANCE, CODES AT RIGHT
	1 = Yes 2 = No (For all » Next event)				1ST 2ND 3RD	
1	Lower crop yields due to drought or floods					
2	Crop disease or crop pests					
3	Livestock died or were stolen					
4	Household business failure, non-agricultural					
5	Loss of salaried employment or non-payment of salary					
6	End of regular assistance, aid, or remittances from outside HH					
7	Large fall in sale prices for crops					
8	Large rise in price of food					
9	Illness or accident of household member					
10	Birth in the household					
11	Death of HH head					
12	Death of working member of household					
13	Death of other family member					
14	Break-up of the household					
15	Theft					
16	Dwelling damaged, destroyed					
17	Other 1 _____					
18	Other 2 _____					

- 1 = SPENT CASH SAVINGS
- 2 = SENT CHILDREN TO LIVE WITH RELATIVES
- 3 = SOLD ASSETS (TOOLS, FURNITURE, ETC.)
- 4 = SOLD FARMLAND
- 5 = RENTED OUT FARMLAND
- 6 = SOLD ANIMALS
- 7 = SOLD MORE CROPS
- 8 = WORKED LONGER HOURS, WORKED MORE
- 9 = OTHER HH MEMBERS WHO WERENT WORKING WENT TO WORK
- 10 = STARTED A NEW BUSINESS
- 11 = REMOVED CHILDREN FROM SCHOOL TO WORK
- 12 = WENT ELSEWHERE TO FIND WORK FOR MORE THAN A MONTH
- 13 = BORROWED MONEY FROM RELATIVES
- 14 = BORROWED MONEY FROM MONEY LENDER (KATAPILA)
- 15 = BORROWED MONEY FROM INSTITUTION (BANK, MRFC, ETC.)
- 16 = RECEIVED HELP FROM RELIGIOUS INSTITUTION
- 17 = RECEIVED HELP FROM LOCAL NGO
- 18 = RECEIVED HELP FROM INTERNATIONAL NGO
- 19 = RECEIVED HELP FROM GOVERNMENT
- 20 = REDUCED FOOD CONSUMPTION
- 21 = CONSUMED LOWER COST, BUT
- 22 = LESS PREFERRED FOODS
- 23 = REDUCED NON-FOOD EXPENDITURES
- 24 = SPIRITUAL EFFORT - PRAYER, SACRIFICES, CONSULTED DIVINER
- 25 = DID NOT DO ANYTHING
- 26 = OTHER (SPECIFY):

**SECTION 6: SAFETY NETS**

1. C O D E	2. Over the past 12 MONTHS, has anyone in your household benefited from any of the following programmes?  1 = Yes 2 = No (if NO » NEXT)	3. During that period, how much did your household receive in benefits from this programme?  1 = MK 3 = Packet 2 = KG 4 = Other, specify  NUMBER/AMOUNT UNIT	4. FOR NON-CASH/ VOUCHER BENEFITS IN Q3: What was the estimated value of this benefit in MK?  MK
1	Free food/maize distribution.		
2	Food-for-work programme or cash-for-work programme - e.g. MASAF Public Works Programme (PWP)		
3	Inputs-for-work programme		
4	Free distribution of Likuni Phala to children and mothers (Targeted Nutrition Programme - TNP)		
5	Supplementary feeding for malnourished children at a nutritional rehabilitation unit.		
6	Starter Pack (TIP) distribution of agricultural inputs (seed/fertilizer)		
7	Agricultural Input Supply Programme (Fertilizer Voucher)		
8	Other (not Starter Pack or voucher) free agricultural inputs distributions		
9	Scholarships or bursaries for secondary education. (e.g., GABLE support for girls)		
10	Scholarships or bursaries for tertiary education (GABLE, university scholarship, upgrading teachers).		
11	Direct cash transfers (from Government, donor, NGO or church).		
12	Other program by government, donors, NGO or church groups. Describe: _____		

**SECTION 7: WELL-BEING**

<p>1. Concerning your household's <u>food consumption</u> over the <u>past one month</u>, which of the following is true?</p> <p>1 = It was <u>less than adequate</u> for household needs                  2 = It was <u>just adequate</u> for household needs                  3 = It was <u>more than adequate</u> for household needs</p> <p>NOTE THAT 'ADEQUATE' MEANS NO MORE OR LESS THAN WHAT THE RESPONDENT CONSIDERS TO BE THE MINIMUM CONSUMPTION NEEDS OF THE HOUSEHOLD</p>	<p>2. Concerning your <u>housing</u>, which of the following is true?</p>	<p>3. Concerning your household's <u>clothing</u>, which of the following is true?</p>	<p>4. Concerning the standard of <u>health care</u> you receive for household members, which of the following is true?</p>	<p>5. Imagine six steps, where on the bottom, the first step, stand the poorest people in your community, and on the highest step, the sixth, stand the rich in your community.</p> <p>SHOW THE PICTURE OF THE STEPS.</p>	<p>6.</p>	<p>7.</p>	<p>8. Which of the following is true? Your current income . . . [READ]:</p> <p>1 = allows you to build your savings                  2 = allows you to save just a little                  3 = only just meets your expenses                  4 = is not sufficient, so you need to use your savings to meet expenses                  5 = is really not sufficient, so you need to borrow to meet expenses</p>	<p>9. What income level do you personally consider to be <u>absolutely minimal</u> - below which your household could not make ends meet?</p> <p>MK</p>	<p>10. Is this for one day, one week, one month, or one year?</p> <p>TIME UNIT                  1 = DAY                  2 = WEEK                  3 = MONTH                  4 = YEAR</p>
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**SECTION 8: DEATHS OF HOUSEHOLD MEMBERS**

1. Over the past 12 MONTHS, did any member of your household die, including any infants?

1 = YES  
2 = NO (NEXT SECTION)

2. SERIAL NO	3. NAME OF DECEASED	4. DECEASED'S RELATIONSHIP TO HEAD OF HOUSEHOLD	5. DECEASED'S RELATIONSHIP TO THE MTM CORE RESPONDENT (SEE HH ROSTER QUESTIONS 7 & RELATIONSHIP TO HEAD FROM LAST INTERVIEW)	6. SEX	7. AGE AT DEATH	8. What kind of work did [NAME] do for most of his/her life?	9. Did [NAME] die of old age, an illness, or of some other cause?	10. What was the cause of [NAME]'s death?	11. What was the illness that caused [NAME]'s death? CAN NOTE UP TO TWO.	12. For how long was [NAME] suffering from this illness before he/she died?	13. Was this cause of death diagnosed, or is this only your own perception?	14. After this person died, did you or any land or members of your household hold lose any land or other assets due to inheritance traditions?	15. What was the value of the land and/or assets lost?	
1				1=MALE 2=FEMALE	IF 6-11 MONTHS, ROUND TO 1 MONTHS, IF <6 MONTHS, WRITE 0 IF < 12 YRS (y9)	CODES BELOW	1 = OLD AGE (y14) 2 = ILLNESS (y11) 3 = OTHER CAUSE	1 = TRAFFIC ACCIDENT OR INJURY 2 = OTHER 3 = CHILDBIRTH OR RELATED COMPLICATION 4 = MURDER 5 = SUICIDE 6 = WITCHCRAFT/SORCERY 7 = OTHER (SPECIFY):	CODES BELOW 1ST ILLNESS 2ND ILLNESS AMOUNT UNIT	1 = DAY 2 = WEEK 3 = MONTH 4 = YEAR	1 = MEDICAL DIAGNOSIS 2 = NON-MEDICAL DIAGNOSIS 3 = OWN PERCEPTION	YES..1 NO..2 (IF NO = NEXT DECEASED)	MK	
2														
3														
4														
5														

**Q4 & Q5: RELATIONSHIP CODES**

- 1 = HEAD
- 2 = WIFE/HUSBAND
- 3 = CHILD/ADOPTED CHILD
- 4 = GRANDCHILD
- 5 = NIECE/NEPHEW
- 6 = FATHER/MOTHER
- 7 = SISTER/BROTHER
- 8 = SON/DAUGHTER-IN-LAW
- 9 = BROTHER/SISTER-IN-LAW
- 10 = GRANDFATHER/MOTHER

**Q8: JOB CODES**

- 1 = FARMING
- 2 = FISHING
- 3 = TRADER/MERCHANT
- 4 = TRANSPORT
- 5 = TRADESMAN (MASON, CARPENTER, ETC.)
- 6 = CIVIL SERVANT
- 7 = TEACHER
- 8 = DOCTOR/NURSE/ETC
- 9 = OTHER PROFESSIONAL
- 10 = CLERK/SECRETARY
- 11 = FACTORY WORKER

**Q11: ILLNESS CODES**

- 1 = MALARIA
- 2 = MEASLES
- 3 = DIARRHEA
- 4 = PNEUMONIA
- 5 = MENINGITIS
- 6 = MALNUTRITION
- 7 = TUBERCULOSIS
- 8 = HIV/AIDS
- 9 = HEART DISEASE
- 10 = HIGH BLOOD PRESSURE OR CIRCULATORY PROBLEM
- 11 = STROKE
- 12 = CANCER
- 13 = KIDNEY DISEASE
- 14 = LIVER DISEASE
- 15 = SEXUALLY TRANSMITTED DISEASE
- 16 = DIABETES COMPLICATION
- 17 = DOES NOT KNOW
- 18 = REFUSED TO ANSWER
- 19 = OTHER (SPECIFY)

