

**CONFIDENTIAL**



United Republic of Tanzania  
National Bureau of Statistics

## NATIONAL PANEL SURVEY (NPS 2018/2019)

*This information is collected under the Act of the Parliament (Act No. 1 of 2002)*

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

### LIVESTOCK QUESTIONNAIRE

#### SECTION A-1: HOUSEHOLD IDENTIFICATION

CODE

NAME

1. REGION:

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.....

2. DISTRICT

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.....

3. WARD

--	--	--

.....

3\_1. KIJILI / MTAA

--	--

.....

4. VILLAGE/ENUMERATION AREA

--	--	--

.....

5. KITONGOJI OR MTAA NAME

.....

7. HOUSEHOLD ID (FROM LIST) :

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.....

8. NAME OF HOUSEHOLD HEAD:

.....

9. FULL HOUSEHOLD IDENTIFICATION FROM NPS YEAR 4:

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9\_1. (REFER TO HOUSEHOLD QUESTIONNAIRE) ROSTER ID NUMBER FROM COVER, Q13:

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9\_2. ROSTER ID OF MAIN RESPONDENT OF THE LIVESTOCK QUESTIONNAIRE

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## SECTION 2. LIVESTOCK STOCK

		OWNERSHIP				BORN		PURCHASED		GIFTS		
C O D E		1. Did anyone in this household own, or keep, any [ANIMAL] in the last 12 months? <b>IF NOT INDICATED SEPERATELY, INCLUDE BABIES</b>  YES...1 NO...2 ▶NEXT	2. Number of [ANIMAL] owned/kept two years ago.	3. Number of [ANIMAL] owned/kept 12 months ago.	4. How many [ANIMAL] does this household currently own /keep?  Indigenous Improved/ Exotic	5. How many [ANIMAL] were born in the past 12 months?  NUMBER	6. Have you, or anyone in this household, bought any [ANIMAL] alive in the past 12 months?  YES...1 NO...2 ▶9	7. How many [ANIMAL] have you, and anyone else in this household, bought alive in the last 12 months?  NUMBER	8. What was the total value of these purchases?  T-SHILLINGS	9. Did you, or anyone in this household, receive any [ANIMAL] as a gift or payment for some services provided in the last 12 months?  YES...1 NO...2 ▶12	10. How many [ANIMAL] were receive as gifts or payment for some services provided in the past 12 months?  NUMBER	11. From whom did you receive most of these [ANIMAL]?  FRIEND/ RELATIVE...1 NGO.....2 OTHER, SPECIFY...3
	LARGE RUMINANTS	1										
2												
3												
4												
5												
6												
SMALL RUMINANTS	7											
	8											
PIGS	9											
POULTRY	10											
	11											
	12											
OTHER ANIMALS	13											
	14											
	15											
	16											

## SECTION 2. LIVESTOCK STOCK

C O D E	GIFTS			DISEASE			THEFT			INJURIES		
	12. Did you, or any member of this household, give any [ANIMAL] as a gift or payment for some services provided in the last 12 months?  YES...1 NO....2 ▶15	13. How many [ANIMAL] did you, and members of this household, give as gifts or payment for some services provided in the past 12 months?  NUMBER	14. To whom were most of these [ANIMAL] gifted to?  FRIEND/ RELATIVE...1 NGO.....2 OTHER, SPECIFY...3	15. Have you, and members of this household, lost any [ANIMAL] to DISEASE in the past 12 months?  YES...1 NO....2 ▶18	16. How many [ANIMAL] have you, and members of this household, lost to DISEASE in the past 12 months?  NUMBER	17. What was the value of these [ANIMAL]s lost to disease?  T-SHILLINGS	18. Have you lost any [ANIMAL] to THEFT in the past 12 months?  YES...1 NO....2 ▶21	19. How many [ANIMAL] have you, and members of this household, lost to THEFT in the past 12 months?  NUMBER	20. What was the value of these [ANIMAL]s lost to THEFT?  T-SHILLINGS	21. Have you, and members of this household, lost any [ANIMAL] to INJURY / ACCIDENT / NATURAL CALAMITY in the past 12 months?  YES...1 NO....2 ▶24	22. How many [ANIMAL] have you, and members of this household lost to INJURY / ACCIDENT / NATURAL CALAMITY in the past 12 months?  NUMBER	23. What was the value of these [ANIMAL]s lost to INJURY / ACCIDENT / NATURAL CALAMITY?  T-SHILLINGS
1												
2												
3												
4												
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												

## SECTION 2. LIVESTOCK STOCK

### SALES

### SLAUGHTER

C O D E	24. Have you, or members of this household sold any [ANIMAL] alive in the past 12 months?	25. How many [ANIMAL] have you, and members of this household, sold alive in the past 12 months?	26. What was the total value of sales?	27. Who in your household decided what to do with these earnings?		28. Where did you sell most [ANIMAL]?	29. Did you, or any member of this household, slaughter any [ANIMAL] in the past 12 months?	30. How many [ANIMAL] did you, and members of this household, slaughter in the past 12 months?	31. What was the live weight, on average, of the [ANIMAL] that this household slaughtered?	32. How many of the [ANIMAL] slaughtered did this household sell?	33. What was the total value of the sold slaughtered [ANIMAL]?	34. Where did you sell most [ANIMAL] that you slaughtered?	35. Who in your household decided what to do with these earnings?	
	YES...1 NO...2 ▶29	NUMBER	T-SHILLINGS	INDICATE UP TO 2 PEOPLE IN HH		CODE LOCATION	YES...1 NO...2 ▶NEXT	NUMBER	KG/HEAD	IF '0' ▶ NEXT NUMBER	T-SHILLINGS	CODE LOCATION	INDICATE UP TO 2 PEOPLE IN HH	
1														
2														
3														
4														
5														
6														
7														
8														
9														
10														
11														
12														
13														
14														
15														
16														

SECTION 2. LIVESTOCK STOCK

		HOUSEHOLD OWNED [ANIMAL] IN THE LAST 12 MONTHS  YES...1 NO....2
	CODE	

LARGE RUMINANTS	1	BULLS	
	2	COWS	
	3	STEERS	
	4	HEIFERS	
	5	MALE CALVES	
	6	FEMALE CALVES	
SMALL RUMINANTS	7	GOATS	
	8	SHEEP	
PIGS	9	PIGS	
POULTRY	10	CHICKENS	
	11	DUCKS	
	12	OTHER POULTRY_____	
OTHER ANIMALS	13	RABBITS	
	14	DONKEYS	
	15	DOGS	
	16	OTHER_____	

### SECTION 3: ANIMAL HEALTH

		VACCINATION				DEWORMING							
C O D E	1. <b>CAPI:</b> REFER TO SECTION 1, QUESTION 1: DID THE HOUSEHOLD OWN / KEEP ANY OF THESE TYPES OF ANIMALS?	2. What kind of diseases did [ANIMAL] suffer in the past 12 months?				3. Did you vaccinate your [ANIMAL] in the past 12 months?	4. Who provided the vaccine (or vaccinated) your [ANIMAL]?	5. Against which diseases did you vaccinate your [ANIMAL]?				6. During the last 12 months have you, or members of this household, used dewormers on your [ANIMAL]?	7. Who administered the dewormer treatment to your [ANIMAL]?
	YES...1 NO....2 ▶NEXT	<div>USE CODES BELOW</div>				YES, ALL ANIMALS AT LEAST ONCE.....1 YES, SOME....2 NO.....3 ▶6	PRIVATE VET CLINIC.....1 DISTRICT VET CLINIC.....2 NGO/PROJECT...3 OTHER, SPECIFY.4	<div>USE CODES BELOW</div>				YES, ALL ANIMALS...1 YES, SOME.....2 NO.....3 ▶8	PRIVATE VET CLINIC.....1 DISTRICT VET CLINIC.....2 NGO/PROJECT...3 OTHER, SPECIFY..4
		#1	#2	#3	#4			#1	#2	#3	#4		
1													
2													
3													
4													
5													
6													

### SECTION 3: ANIMAL HEALTH

TICKS				CURATIVE TREATMENTS		EXPENDITURE	
C O D E	8. During the last 12 months, have you taken any preventative measures for your [ANIMAL] against tick borne diseases?	9. What preventive measures did this household take for your [ANIMAL]?	10. During the last 12 months have your [ANIMAL] been treated against ticks?	11. Who administered the tick treatment to your [ANIMAL]?	12. During the last 12 months have your [ANIMAL] receive some curative treatments?	13. Who administered the curative treatment to your [ANIMAL]?	14. How much did you spend in total on vaccines, preventive measures, treatments and other veterinary costs in the last 12 months?
	YES, ALL ANIMALS...1 YES, SOME.....2 NO.....3 ▶10	DIPPING/ DIP TANK...1 SPRAYING.....2 OTHER, SPECIFY.....3	YES, ALL ANIMALS...1 YES, SOME.....2 NO.....3 ▶12	PRIVATE VET CLINIC.....1 DISTRICT VET CLINIC.....2 NGO/PROJECT.....3 OTHER, SPECIFY..4	YES, ALL ANIMALS...1 YES, SOME.....2 NO.....3 ▶14	PRIVATE VET CLINIC.....1 DISTRICT VET CLINIC.....2 NGO/PROJECT.....3 OTHER, SPECIFY..4	T-SHILLINGS
1							
2							
3							
4							
5							
6							

#### SECTION 4. FEED, WATER, HOUSING, BREEDING

## FODDER

# WATER

## HOUSING

## BREEDING

	FODDER		WATER		HOUSES		BREEDING						
C O D E	1.	2.	3.	4.	5.	6.	7.	8.	9.	10.	11.	12.	13.
	What have been for this household the major feeding practices for [ANIMAL] in the last 12 months?	Did you purchase any feed / fodder for your [ANIMAL] in the past 12 months?	In which months did you purchase feed/fodder in the past 12 months?	How much has this household paid to feed the [ANIMAL] in the past 12 months?	How frequently, on average, has this household watered [ANIMAL] in the past 12 months?	What have been the main sources of water for [ANIMAL] in the past 12 months?	Has this household ever paid to water [ANIMAL] in the past 12 months?	How much has this household paid to access the main water sources for [ANIMAL] in the past 12 months?	What housing system for [ANIMAL] has this household mainly used in the past 12 months?	Has this household practiced any controlled mating or other breeding strategy for [ANIMAL] in the past 12 months?	What have been the main controlled mating or breeding strategies used by this household for [ANIMAL] in the past 12 months?		
	ONLY GRAZING/SCAVENGING...1 MAINLY GRAZING/SCAVENGING WITH SOME FEEDING.....2 MAINLY FEEDING WITH SOME GRAZING/SCAVENGING.....3 ONLY FEEDING (NO GRAZING AND NO SCAVENGING).....4 TETHERING.....5 OTHER, SPECIFY.....6	YES...1 NO...2 ►5	CIRCLE ALL THAT APPLIES	T-SHILLINGS	ANIMALS GET ON THEIR OWN FROM AVAILABLE SOURCES.....1 ►11 ONCE A DAY.....2 TWICE A DAY.....3 THRICE A DAY.....4 THROUGHOUT THE DAY.5 OTHER, SPECIFY.....6	<div>USE CODES BELOW</div>	YES...1 NO...2 ►11	T-SHILLINGS	NONE.....1 CONFINED IN SHEDS.2 CONFINED IN PADDOCKS.....3 CONFINED FENCES...4 CAGE.....5 BASKET.....6 OTHER, SPECIFY...7 KEPT IN DWELLING..8	YES.....1 NO.....2 (►NEXT SECTION)	<div>USE CODES BELOW</div>	LIST UP TO TWO 1   2	

[illegible]

CODES FOR Q6

TAP WATER.....	1
BOREHOLE.....	2
DAM.....	3
WELL.....	4
RIVER.....	5
SPRING.....	6

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STREAM.....7
CONSTRUCTED WATER POINTS...8
RAINWATER HARVESTING.....9
OTHER, SPECIFY.....10

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BREEDING CODES FOR Q13

NATURAL MATING, SIRE SELECTED	
FROM WITHIN HERD	2
NATURAL MATING, SIRE PURCHASED	3
NATURAL MATING, SIRE EXCHANGED	4
ARTIFICIAL INSEMINATION	5
DAM PURCHASED	6
DAM EXCHANGED	7
NONE BREEDING MALES CASTRATED	8
OTHER, SPECIFY	



# SECTION 4A: LIVESTOCK EXTENSION SERVICES

C O D E	SOURCE	1. In the last 12 months, did you receive any advice from [SOURCE] about ...?  YES...1 NO....2							2. <b>CAPI:</b> ENUMERATOR: DID THE RESPONDENT ANSWER YES FOR ANY TYPE OF ADVICE IN QUESTION 1?  YES...1 NO....2 (▶NEXT)	3. Who in your household received advice from [SOURCE]? LIST UP TO				4. How would you rate the advice received from [SOURCE]?  GOOD....1 AVERAGE..2 BAD.....3	5. Did you pay anything in order to receive the advice from [SOURCE]?  YES...1 NO....2 (▶7)	6. How much did you pay?  T-SHILLINGS	7. How many times did Extension Advisor from [SOURCE] visit your farm in the last 12 months?  PUT '0' IF NEVER
		A. Animal Breeding	B. Feeds and Feeding	C. Housing and Husbandry practices	D. Livestock Identification and Registration (BRANDING/ HEAR TAGS)	E. Processing of Livestock products	F. Livestock Marketing	G. Prevention of Livestock diseases		ID#1	ID#2	ID#3	ID#4				
1	Government																
2	NGO																
3	Cooperative/Farmer's Association																
4	Large Scale Farmer																
5	Other, Specify																

C O D E	SOURCE	8. In the last 12 months, did anyone in your household receive any information about livestock prices from [SOURCE]?  YES ... 1 NO. ....2 > NEXT ROW	9. Did you pay anything in order to receive the information?  YES ... 1 NO. .... 2 > NEXT ROW	10. How much did you pay?  T - SHILLINGS
1	Government			
2	NGO			
3	Cooperative/Farmer's Association			
4	Large Scale Farmer			
5	Radio/Television			
6	Publication			
7	Neighbour			
8	Other (Specify)			

## SECTION 5. LIVESTOCK- LABOUR

C O D E	1 In principal, who is responsible for keeping [ANIMAL]?		2 Who in your household mainly provided labor for feeding/watering of [ANIMAL]?		3 Who in your household mainly provided the labour for selling the animals and animal products?		4 Who in your household mainly provided labour for grazing of [ANIMAL]?		5 Did you hire any labor to help you with the [ANIMAL] in the past 12 months?		6 In which months did you hire help?		7 What was the total cost of this labor for [ANIMAL] in the past 12 months?										
	LIST UP TO TWO FROM HOUSEHOLD ROSTER		LIST UP TO TWO FROM HOUSEHOLD ROSTER		LIST UP TO TWO FROM HOUSEHOLD ROSTER		LIST UP TO TWO FROM HOUSEHOLD ROSTER		YES...1 NO...2 (▶NEXT)		CIRCLE ALL THAT APPLIES		T-SHILLINGS										
	ID #1	ID #2	ID #1	ID #2	ID #1	ID #2	ID #1	ID #2															
1											J	F	M	A	M	J	J	A	S	O	N	D	
2											J	F	M	A	M	J	J	A	S	O	N	D	
3											J	F	M	A	M	J	J	A	S	O	N	D	
4											J	F	M	A	M	J	J	A	S	O	N	D	
5	RECORDING OF LABOR FOR OTHER ANIMALS																						
6	RECORDING OF LABOR FOR OTHER ANIMALS																						

## SECTION 6. MILK

C O D E	1 How many [ANIMAL] were milked in the last 12 months?  IF 0, SKIP TO NEXT ANIMAL	2 How many months on average, were [ANIMAL] milked for?	3 During this period, what was the average milk production per day per milked [ANIMAL]?  INCLUDE ALL CONSUMED, SOLD AND PROCESSED MILK	4 During this period in which month was milk production per animal the highest?		5 During this period in which month was milk production per animal the lowest?		6 In general, were your [ANIMAL] suckling during the time the [ANIMAL] were being milked?  LIMITED SUCKLING...1 UNLIMITED SUCKLING...2	7 During this period, how much of the milk produced by [ANIMAL] was consumed by your household each day either in the form of liquid milk?	8 During this period, how many litres of [ANIMAL] liquid milk did you sell per day?	9 During this period, how much milk did you convert each day into processed dairy products?  IF 0 ► 11	10 How much of this production of processed dairy products did you sell per day?	11 How much did you earn on average per day from these sales of milk and processed dairy products?	12 Where did you sell most of the milk and processed dairy products from [ANIMAL] that you sold?  NETWORK ROSTER CODE LOCATION		13 Who in your household decided what to do with these earnings?  LIST UP TO TWO FROM HOUSEHOLD ROSTER ID #1 ID #2	
	NUMBER	MONTHS	LITRES	MONTH	LITRES/DAY	MONTH	LITRES/DAY		LITRES/DAY	LITRES/DAY	LITRES/DAY	LITRES/DAY	TSH/DAY				
1																	
2																	
3																	
4																	
5																	
6																	

## SECTION 7. ANIMAL POWER & DUNG

C O D E	1. Has this household made any use of the dung produced by [ANIMAL] in the past 12 months?	2. What have been the major uses of the dung from [ANIMAL] in the last 12 months?  <b>LIST UP TO TWO</b>  MANURE.....1 ▶4 COOKING FUEL.....2 ▶4 FEED TO OTHER ANIMALS...3 ▶4 CONSTRUCTION OF BUILDING.....4 ▶4 SALES.....5 OTHER, SPECIFY....6 ▶4		3. What was the total value of sales of the dung from [ANIMAL] in the last 12 months?	4. What was the total quantity of dung produce [ANIMAL] over the last 12 months?  <b>WRITE '99' IF ANIMALS WERE LEFT TO GRAZE ON FIELD</b>  KG.....1 LITER..2		5. Has this household used any of its [ANIMAL] for its own transport (persons, crops, etc.) in the past 12 months?	6. Has this household used any of its [ANIMAL] for ploughing its own field in the past 12 months?
	YES...1 NO....2 ▶5	1	2	TSH	QUANTITY	UNIT	YES...1 NO....2	YES...1 NO....2
1								
2								
3								
4								
5								
6								

ANIMALS FLAP

C O D E		DID THE HOUSEHOLD OWN ANY OF [ANIMAL]?  YES...1 NO....2
	ANIMAL	

1	<b>LARGE RUMINANTS</b> Bulls, cows, steers, heifers, male calves, female calves	
2	<b>SMALL RUMINANTS</b> Goats, sheep	
3	<b>PIGS</b>	
4	<b>POULTRY</b> Chickens, ducks, etc	
5	<b>DONKEYS</b>	
6	<b>DOGS</b>	

## SECTION 8. OTHER LIVESTOCK PRODUCTS

C O D E		1. Did your households produce any [PRODUCT] in the last 12 months?	2. During the last 12 months, for how many months did your household produce any [PRODUCT]?	3. During these months, what was the average quantity of [PRODUCT] produced per month?	4. Did you sell any of the [PRODUCT] that you produced in the last 12 months?	5. How much of the [PRODUCT] produced did you sell in the last 12 months?	6. What was the total value of the sale of [PRODUCT] in the last 12 months?	7. Where did you sell most of the [PRODUCT] that you sold?	8. Who in your household decided what to do with these earnings?
		YES...1 NO....2 (▶NEXT ITEM)	MONTH	LITRES..1 KG.....2 PIECES..3 QUANTITY   UNIT	YES...1 NO....2 (▶NEXT ITEM)	LITRES..1 KG.....2 PIECES..3 QUANTITY   UNIT	T-SHILLINGS	NETWORK ROSTER CODE   LOCATION	ID #1   ID #2
1	EGGS								
2	HONEY								
3	SKIN/HIDES								

TIME FINISHED

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## NETWORK ROSTER CARD

### NETWORK CODES

RELATIVE.....1  
NEIGHBOR.....2  
FRIEND.....3  
MARKET.....4  
OPEN MARKET.....5  
COOPERATIVE UNION..6  
FARMERS PARTY.....7  
MAIN PLOT/FARM.....8  
PRIVATE BUSINESS  
    PERSON.....9  
MAIN MARKET.....10  
BUSINESS CONTACT...11  
ABATTORI/FACTORY...12  
EMPLOYER.....13  
RELIGIOUS  
    INSTITUTION.....14  
BANK (COMMERCIAL)..15  
GROCERY/LOCAL  
    MERCHANT.....16  
MONEY LENDER.....17  
NGO.....18  
DISTRIBUTION  
    OFFICER.....19

### NETWORK LOCATION CODES

WITHIN THE VILLAGE..1  
NEAR THE VILLAGE...2  
NEAR THE TOWN.....3  
OTHER DISTRICT.....4  
OTHER REGION.....5  
ACROSS THE BORDER...6