



HARMONISED CASH TRANSFER SURVEY (HSCT) 2017

HOUSEHOLD QUESTIONNAIRE

ENGLISH

QUESTIONNAIRE NUMBER:

DISTRICT			WARD		HH	

IDENTIFICATION PANEL		Questionnaire number: _____	
13a. Interviewer name and number: Name _____		1. Day / Month / Year of interview: ____ / ____ / 2 0 1 7	
4. Province _____		5. District _____	
6. Ward _____		7. Village/locality name _____	
7a. Household number: _____		14. Team Leader name and number: Name _____	
<p>READ OUT HOUSEHOLD CONSENT. IF PERMISSION IS GIVEN, BEGIN THE INTERVIEW.</p> <p><input type="checkbox"/> Yes, permission is given ⇒ Go to 2 to record the time and then begin the interview.</p> <p><input type="checkbox"/> No, permission is not given ⇒ Circle 04 in 19. Discuss this result with your supervisor.</p> <p>After all questionnaires for the household have been completed, fill in the following information (16, 17, 18, 19, 8, 8a, 20, 22, 23, 24 and 25).</p>			
16. Main language used by enumerator during this interview: Shona01 Ndebele.....02 English.....03 Tonga.....04 Shangani.....05 Nambya.....06 Other (specify).....96		17. Main language used by respondent during this interview: Shona 01 Ndebele 02 English..... 03 Tonga 04 Shangani 05 Nambya 06 Other (specify) 96	
18. Was a translator used? Yes01 No...02		8. PID of Main Respondent: _____	
19. Result of household interview: Completed.....01 Not at home.....02 Household absent for an extended period03 Refused.....04 Dwelling vacant05 Dwelling destroyed06 Dwelling not found.....07 Other(specify)..... 96		8a. PID of Household Head: _____	
		22. National ID of Household Head: _____	
		24. No. of Youths eligible for interview: _____	
25. No. of Youths questionnaires completed: _____		26. Main data entry Clerk's name and number: Name _____	
2. Record interview start time ____ : ____ (hour and minute)		3. Record interview end time ____ : ____ (hour and minute)	

SECTION 3C: YOUNG CHILD HEALTH

[TO BE COMPLETED FOR CHILDREN AGED 0 MONTHS TO 59 MONTHS ONLY]

	2	3	4	5			6	7	8	9	10	11	12	13												
PID OF CHILD [FROM HOUSE - HOLD ROSTER FOR 0-59 MONTH CHILDREN]	PID FOR CHILD'S PRIMARY CARE-TAKER IF BIO-LOGICAL MOTHER NOT IN HOUSE-HOLD. [FROM ROSTER]	Does child have a birth certificate? 1=YES, CERTIFICATE SEEN 2=YES, CERTIFICATE NOT SEEN 3=NO 9=DONT KNOW	Does child have a Health Card? [IF YES, PLEASE ASK TO SEE CARD.] 1=YES, CARD SEEN 2=YES, CARD NOT SEEN 3=NO 9=DONT KNOW	What is [NAME's] birth date? [RECORD FROM HEALTH CARD OR BIRTH CERTIFICATE, IF AVAILABLE.] DD/MM/YYYY [DOUBLE CHECK WHAT IS RECORDED ON ROSTER. ADJUST ROSTER IF NECESSARY]			Has [NAME] been taken to a baby clinic (SCARO) for a check-up in the last 6 months? 1=YES 2=NO	Has [NAME] had diarrhoea in the past 2 weeks? 1=YES 2=NO >>Q9	Where did you first seek treatment for [NAME] for this condition? 1=PUBLIC HEALTH FACILITY 2=PRIVATE HEALTH FACILITY 3=MISSION HEALTH FACILITY 4=MINE/FARM HEALTH FACILITY 5=TRADITIONAL HEALER 6=PHARMACY 7=OTHER 8= DID NOT SEEK	Has [NAME] been ill with fever in the last 2 weeks? 1=YES 2=NO >>Q11	Where did you first seek treatment for [NAME] for this condition? 1=PUBLIC HEALTH FACILITY 2=PRIVATE HEALTH FACILITY 3=MISSION HEALTH FACILITY 4=MINE/FARM HEALTH FACILITY 5=TRADITIONAL HEALER 6=PHARMACY 7=OTHER 8 = DID NOT SEEK	Has [NAME] had an illness with a cough at any time in the last 2 weeks? 1=YES 2=NO >>Q13	Where did you first seek treatment for [NAME] for this condition? 1=PUBLIC HEALTH FACILITY 2=PRIVATE HEALTH FACILITY 3=MISSION HEALTH FACILITY 4=MINE/FARM HEALTH FACILITY 5=TRADITIONAL HEALER 6=PHARMACY 7=OTHER 8 = DID NOT SEEK	How many times is [NAME] currently given solid foods in a day (rice, porridge, sadza, cerelac, etc)? 0=NONE 1=ONCE 2=TWICE 3=THRICE 4=FOUR TIMES 5= FIVE OR MORE TIMES												
															DD	MM	YYYY									

SECTION 7: HOUSEHOLD ENTERPRISES

ENUMERATOR: ASK THE MAIN RESPONDENT. THEN ASK THE ENTERPRISE MANAGER.

1. Over the past 12 months has anyone in your household operated any (non-farm) income-generating enterprise which produces goods or services or has anyone in your household owned a shop or operated a trading business?

(Enterprises might include; for example, making bricks, or charcoal; mason; firewood selling; metalwork; tailoring; repair work; food processing, petty trading, food selling or trading, etc.)

1 = YES
2 = NO >>

Section 8

	2	3a	3b	4	7a	
ENTERPRISE CODE	What income-generating enterprises did individuals in your household <u>operate</u> over the past 12 months? ENUMERATOR: COLLECT INFORMATION ON 2 MOST IMPORTANT ENTERPRISES HERE BEFORE GOING ON TO Q3a. [SELECT THOSE WITH HIGHEST REVENUE]	Who makes the decisions for this business? [ENUMERATOR: LIST UP TO TWO HH MEMBERS]		How many months during the past 12 months did you operate this enterprise?	In what year did the enterprise start operating?	
	Written Description	Business Code [SEE CODES BELOW]	First HH Member ID CODE	Second HH Member ID CODE	Months	Year
	1					
2						

BUSINESS CODES:

- 1=Tuck Shop
- 2=Petty trader/Vendor/Flea or Open Market
- 3=Butchery
- 4=Bottle Shop/Grocery/General Dealer
- 5=Clothing/Shoe Store
- 6=Hardware Store
- 7=Agricultural Inputs Store
- 8=Selling Airtime
- 9=Mill
- 10=Charcoal
- 11=Mechanic/Tire Repair
- 12=Traditional Healer
- 13=Taxi/Transportation
- 14=Bar/Restaurant/Take-Away
- 15=Electronics/Phone Repair
- 16=Agricultural Inputs and Tools Rental
- 17=Seamstress/Tailor/Clothes Repair
- 18=Hairdresser/Barber
- 19=Making Bricks
- 20=Home Brewery
- 21=Construction
- 22=Carpenter
- 23=Crafts (Basket Making, Reedmat Making)
- 24=Other (specify): _____

SECTION 7: HOUSEHOLD ENTERPRISES (CONT.)

	8	9	10	11	14	15	16a	16b
ENTERPRISE CODE	How many household members are engaged in this enterprise?	What was the main source of start-up capital for this enterprise? 1= LOAN FROM FAMILY/FRIENDS 2= GIFT FROM FAMILY/FRIENDS 3= SALE OF ASSETS OWNED 4= PROCEEDS FROM ANOTHER BUSINESS 5= OWN SAVINGS 6= CREDIT, from BANK/OTHER FINANCIAL INSTITUTION 7 = LOAN FROM MONEY LENDER/TRADE MAN 8= CREDIT, OTHER (SPECIFY) 9= MAROUND/MUKANDO 10= RESOURCES FROM NGO 11= RESOURCES FROM HSCT PROGRAM 12= RESOURCES FROM OTHER GOV PROGRAM 13= OTHER (SPECIFY) 14= NONE	Do you own any specific assets for exclusive use in the businesses (e.g. storefront, vehicle, generator)? 1= YES 2= NO >> Q14	How much could you obtain for these assets, if you were to sell them today?	How much did you spend on inputs or items for resale in the last month of operation (excluding hired labor)? [ENUMERATOR: If inputs are home produced, ask for value]	What were the total sales for the enterprise last month in operation?	What was the amount you earned or lost from this enterprise over the last operating month? INDICATE FIRST WHETHER PROFIT OR LOSS, THEN CORRESPONDING AMOUNT 1= PROFIT 2= LOSS >> NEXT ENTERPRISE	
	# HH MEMBERS			USD	USD	USD	Profit/ Loss	USD
	1							
2								

SECTION 8: TRANSFERS RECEIVED AND MADE

TRANSFERS RECEIVED						
Source ID	SOURCE	1	2	3	4	5
	ENUMERATOR: PLEASE ASK FOR TRANSFERS FROM INDIVIDUALS WHO DO NOT LIVE IN THE HOUSEHOLD. THIS CAN BE FAMILY, FRIENDS OR NEIGHBORS.	During the last 12 months, did you or any members of your household receive any [SOURCE] from individuals who do not live in the household? 1=YES 2=NO >> Q5	How much [SOURCE] did your household receive in total during the last 12 months? [ESTIMATE THE CASH VALUE OF IN-KIND TRANSFERS]	Who in your household kept/decided what to do with these earnings? [LIST ONE PID FROM HOUSEHOLD ROSTER.]	Did you, or will you, have to give something back in return? 1=YES, all 2=YES, in part 3=NO >> NEXT SOURCE/Q6	If you did not receive any [SOURCE], is there someone you could ask to provide [SOURCE] in case of need? 1=YES 2=NO >> NEXT SOURCE/Q6
			USD	PID		
1	Cash					
2	Food and other consumables					
3	Labor or time					
4	Agricultural implements or inputs					

SECTION 8: TRANSFERS RECEIVED AND MADE (cont'd)

TRANSFERS MADE					
Source ID	SOURCE	6	7	8	9
	ENUMERATOR: PLEASE ASK FOR TRANSFERS TO INDIVIDUALS WHO DO NOT LIVE IN THE HOUSEHOLD. THIS CAN BE FAMILY, FRIENDS OR NEIGHBORS.	During the last 12 months, did you or any members of your household provide any [SOURCE] to individuals who do not live in the household? 1=YES 2=NO >> NEXT SOURCE	How much [SOURCE] did your household provide in total during the last 12 months? [ESTIMATE THE CASH VALUE OF IN-KIND TRANSFERS MADE]	Who in your household decided to provide this [SOURCE] [LIST ONE PID FROM HOUSEHOLD ROSTER.]	Will the recipient have to give something back in return? 1=YES, all 2=YES, in part 3=NO>> NEXT SOURCE/ SECTION
			USD	PID	
1	Cash				
2	Food and other consumables				
3	Labor or time				
4	Agricultural implements or inputs				

SECTION 10: CREDIT (CON'T)

SECTION 10: CREDIT (CON'T)							
LOAN ID	EACH SOURCE OF LOAN: ASK MAIN RESPONDENT ABOUT TWO MOST IMPORTANT LOANS						
	10	11	12	13	14	15	16
	Who in the household received each loan? [PLEASE REPORT THE ROSTER ID]	Who provided the loan? 1= RELATIVE 2= NEIGHBOR/FRIEND 3= GROCERY/LOCAL MERCHANT 4= MONEY LENDER 5= EMPLOYER 6= RELIGIOUS INSTITUTION 7= BANK 8= NGO LOCAL TRUST MICRO FINANCE 9= MUKANDO/MAROUND/BURIAL SOCIETY 10= OTHER (SPECIFY)	What was the loan used for? 1= FARM ACTIVITY 2= OFF-FARM BUSINESS ACTIVITY 3= EDUCATION 4= CONSUMPTION 5= BUY OR IMPROVE LAND/BUILDING/EQUIP 6= HEALTH 7= OTHER (SPECIFY)	How much did your household borrow overall [from each source], in the last 12 months?	Do you have to pay interest on this loan? 1=YES 2=NO	How much do you still owe? [INCLUDE BOTH INTEREST AND CAPITAL]	Would you have wanted a larger loan at the same interest rate? 1=YES 2=NO>>NEXT LOAN, then Q17
PID			USD		USD		
1							
2							

SECTION 10: CREDIT (CON'T)

SECTION 10: CREDIT (CON'T)							
PURCHASES ON CREDIT				Ask for the last time credit was obtained			
17	18	20	22	24	25	26	27
In the last 12 months, has anyone in your household purchased food or other goods on credit? 1=YES>> Q24 2=NO	In the last 12 months has anyone in your household asked to purchase on credit and been denied? 1=YES >>NEXT SECTION 2=NO	Could you purchase on credit if you asked? 1=YES >>NEXT SECTION 2=NO	If you were certain to gain approval to purchase on credit, would you ask? 1=YES 2=NO >>GO TO NEXT SECTION	How much has your household purchased on credit? USD	How much have you paid back on these purchases in cash or in kind? [ESTIMATE IN KIND VALUE] USD	How much do you still owe on these purchases? USD	Could you have purchased more on credit if you wanted? 1=YES 2=NO

SECTION 11: SELF ASSESSED POVERTY, FOOD SECURITY, EXPECTATIONS

INTRODUCTION: I am now going to ask about your household welfare.

0. WRITE THE PID OF MAIN RESPONDENT _____

No.	QUESTION	CATEGORY AND CODE	CODE	No.	QUESTION	CATEGORY AND CODE	CODE
1	Compared to 12 months ago , do you consider your household to be better off, the same or worse off now?	1=BETTER OFF 2=THE SAME 3=WORSE OFF		9	In the past four weeks , did you or any household member have to eat a <u>smaller meal than you felt you needed</u> because there was not enough food?	[SAME CODES AS Q6]	
2	How many meals excluding snacks do you normally have in a day? [with sadza, rice, potatoes or any other source of starch]	1=ZERO 4=THREE 2=ONE 5=MORE THAN 3=TWO THREE		10	In the past four weeks , did you or any household member have to eat <u>fewer meals in a day</u> because there was not enough food?	[SAME CODES AS Q6]	
6	In the past 4 weeks , did you <u>worry</u> that your household would not have enough food?	[FIRST PROMPT FOR 'YES' OR 'NO'. IF 'YES', ASK HOW OFTEN] 1=NO 2=RARELY (ONCE OR TWICE) 3=SOMETIMES (THREE TO TEN TIMES) 4=OFTEN (MORE THAN TEN TIMES)			11	[SAME CODES AS Q6]	
					12	[SAME CODES AS Q6]	
7	In the past 4 weeks, were you or any household member not able to eat the kinds of food you preferred because of a lack of resources?	[SAME CODES AS Q6]			13	[SAME CODES AS Q6]	
8	In the past four weeks , did you or any household member <u>have to eat some foods that you really did not want to eat</u> because of a lack of resources to obtain other types of food?	[SAME CODES AS Q6]			14	[SAME CODES AS Q6]	

SECTION 11: SELF ASSESSED POVERTY, FOOD SECURITY, EXPECTATIONS (CON'T)		
14e. Does the household own the following? 1=YES 2= NO	A. Radio	
	B. TV	
	C. Motorcycle	
	D. Car	
	E. Solar Panel	
	F. Mobile Telephone	
15. Do you think your life will be better in one year from now? 1=YES 2= NO		
<p>I am now going to read a list of ten words to you. Please listen carefully. Later I will ask you to recall these word for me if you can. [ENUMERATOR: Respondent should not take notes or write down the words. This is a memory test.]</p> <p>Stone Shoes Girl House Water Sky School Picture Hill Family</p>		
15a. Can you now please say as many words as you can remember from the list I just gave you?		
<p>[ENUMERATOR: Write down the number of words the respondent correctly remembered from the list.] [Stone Shoes Girl House Water Sky School Picture Hill Family]</p>		
<p>Q16-26 Interviewer script: I am going to read some statements. Please tell me the extent to which you agree with the statement. [SHOW CARD WITH BARS TO PERSON] One means you strongly disagree and five means you strongly agree. The higher the bar (number) the more you agree with the statement. [ENTER CODES 1-5]</p>		
16. In most ways my life is close to my ideal		
17. The conditions of my life are excellent		
18. I am satisfied with my life		
19. So far I have gotten the important things I want in life		
20. If I could live my life over, I would change almost nothing		
21. I feel positive about my future.		
22. I generally feel happy.		
23. It is easy for me to borrow salt from my neighbors.		
23a. Suppose you need to borrow \$25 for an emergency. How many people do you know that would help you with this amount? [WRITE NUMBER OF PEOPLE]		

Q24-26 Interviewer script: I will now ask you several questions about the chance that certain events will occur in the next year. Please choose the bar to express what you think the chance is that the event will occur. If you point to the tallest bar it means you are sure the event WILL happen. If you point to the shortest bar it means you are sure it WILL NOT happen. For example, what is the chance it will rain in the next year? [Show respondent the card she/he should pick highest bar, as it is virtually assured that it will rain at least once in the next year.]

[ENTER CODES 1-5]

24. In the next year what is the chance you will have a food shortage?	
25. In the next year, what is the chance you will need to seek financial assistance from someone?	
26. In the next year, what is the chance you will fall ill and not be able to conduct your daily activities?	
27. Suppose you suddenly find that a relative has left you \$100. You can choose to receive the \$100 now or a different amount at a later date? What would you choose?	
E. 1= \$100 today OR 2= \$75 in one month. Which do you choose?	
A. 1= \$100 today OR 2= \$300 in one month. Which do you choose?	
D. 1= \$100 today OR 2= \$150 in one month. Which do you choose?	
B. 1= \$100 today OR 2= \$200 in one month. Which do you choose?	
F. 1= \$100 today OR 2= \$450 in one month. Which do you choose?	

SECTION 11: SELF ASSESSED POVERTY, FOOD SECURITY, EXPECTATIONS (CON'T)	
38. 8 – 4 – 2 – 3	[Yes=1, No=2>> Q41]
39. 7 – 9 – 6 – 4 – 8	[Yes=1, No=2>> Q41]
40. 5 – 7 – 2 – 8 – 9 – 3	[Yes=1, No=2]

41. Some people try to save some money for emergencies or to buy something special in the future. Are you currently saving (in cash)? Yes=1 No=2 >> NEXT SECTION	
42. How much have you saved in cash in the last one month? [\$]	
43. What are the three most important things for which you are saving money? 1= TO PURCHASE BULK OR OTHER FOOD ITEMS 2=TO PURCHASE HOUSEHOLD CONSUMABLES (LIGHTING, FUEL, WASHING POWDER) 3= SCHOOL FEES/SCHOOLING EXPENSES 4= TO BUY NEW CLOTHING/SHOES 5= MEDICAL EXPENSES/HEALTH CARE 6= TO REPAY DEBTS 7= TO PURCHASES HOUSEHOLD DURABLE ASSETS (FURNITURE, POTS/PANS, RADIO ETC.) 8= TO PURCHASE LIVESTOCK 9= TO PURCHASE AGRICULTURAL INPUTS OR TOOLS 10= TO PURCHASES ASSETS TO START A NEW SMALL BUSINESS/INCOME GENERATING ACTIVITY 11= TO MAKE HOME IMPROVEMENTS (NEW ROOF, LATERINE) 12= TO PURCHASE NEW LAND OR HOUSE 13= TO SPEND ON SERVICES (HAIR, BEAUTY, SPORTING, BUY INTO ASSOCIATIONS, RELIGIOUS FUNCTIONS ETC.) 14= OTHER, SPECIFY	A. [1 st reason] _____ B. [2 nd reason] _____ C. [3 rd reason] _____

SECTION 14: Shocks and Social Networks

1	2	3a
<p>In the last 12 months, have you or any of your household members experienced [SHOCK]?</p> <p>1=YES >>Q2 2=NO >> NEXT ITEM</p>	<p>As a result of this [SHOCK], did your income decrease?</p> <p>[ENUMERATOR: ASK FOR EACH SHOCK THAT HAS OCCURRED. IF A GIVEN SHOCK OCCURRED MORE THAN ONCE ASK ABOUT MOST RECENT]</p> <p>1=YES>>Q3 2=NO >> NEXT SHOCK</p>	<p>What did your household do in response to this [SHOCK] to try to regain your former welfare level?</p> <p>[LIST MOST IMPORTANT COPING MECHANISM. USE CODES PROVIDED BELOW]</p>
a. Flood		
b. Drought		
c. Storm		
d. Severe water shortage		
e. Crop disease		
f. Crop failure		
g. Crop theft		
k. Livestock theft		
l. High food prices		
m. High input prices		
o. Inability to pay loan		
r. Severe illness		
s. Death of bread earner		
w. Crop eaten/destroyed by wild animals		

COPING STRATEGIES CODES:

1. Relied on own-savings
2. Received help from relatives/friends
3. Received help from government
4. Received help from NGO/Religious Inst.
5. Changed eating patterns
6. Employed HH members took on more employment
7. Adult HH member who were not working had to find a job
8. HH members migrated
9. Reduced expenditure on health and/or education
10. Obtained credit
11. Sold agricultural assets
12. Sold durable assets

13. Sold land/building
14. Sold crop stocks
15. Sold livestock
16. Intensify fishing
17. Sent children to live elsewhere
18. Engaged in spiritual effort
19. Intensify gardening
20. Did not do anything
21. Other (Specify)

Section 15A: Household Expenditure – Food (Last 2 weeks)

I am now going to find out how much this household spent on different items as well as how much was consumed in the last two weeks

	Last 2 Weeks	Purchases										Own Production			Gifts, Food for Work, Relief Food		
		Q1		Q2		Q3		Q4		Q5		Q6		Q7			
		Did this household consume [ITEM] during the last 2 weeks?		How much did your household spend on [ITEM] consumed during the last 2 weeks?		How many [UNITS] of [ITEM] did your household purchase for that amount?		During the last 2 weeks, how many [UNITS] of own produced [ITEM] did your household consume?		How much would this [ITEM] cost if you were to buy it?		During the last 2 weeks, how many [UNITS] of [ITEM] did your household consume without payment?		How much would this [ITEM] cost if you were to buy it?			
Read Out	1=YES	[IN TOTAL]		[IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q4]		[IF DID NOT PRODUCE, LEAVE BLANK AND SKIP >>Q6]		[IF DID NOT RECEIVE, LEAVE BLANK AND SKIP >>NEXT ITEM]									
Fill in Per Row	2=NO >>NEXT ITEM	Value in USD (X.XX)		Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)			
Cereals—During Last 2 Weeks																	
1.	Maize grain unshelled																
2.	Maize grain shelled																
3.	Breakfast mealie meal (porridge)																
4.	Roller meal (Maize)																
5.	Maize meal – Straight run																
6.	Pounded maize meal																
7.	Samp/Broken maize/mealie rice																
8.	Millet (Mhunga/Inyawuthi /nzembwe) grain																
9.	Mhunga meal																
10.	Cost of milling																
11.																	
12.																	
13.	Sorghum grain																
14.	Sorghum (mila) meal																

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15A: Household Expenditure – Food (Last 2 weeks)

		Purchases						Own Production			Gifts, Food for Work, Relief Food		
		Q1		Q2		Q3		Q4		Q5	Q6		Q7
Last 2 Weeks		Did this household consume [ITEM] during the last 2 weeks?		How much did your household spend on [ITEM] consumed during the last 2 weeks?		How many [UNITS] of [ITEM] did your household purchase for that amount?		During the last 2 weeks, how many [UNITS] of own produced [ITEM] did your household consume?		How much would this [ITEM] cost if you were to buy it?	During the last 2 weeks, how many [UNITS] of [ITEM] did your household consume without payment?		How much would this [ITEM] cost if you were to buy it?
Read Out Fill in Per Row		1=YES		[IN TOTAL]				[IF DID NOT PRODUCE, LEAVE BLANK AND SKIP >>Q6]			[IF DID NOT RECEIVE, LEAVE BLANK AND SKIP >>NEXT ITEM]		
		2=NO >>NEXT ITEM											
		9=DON'T KNOW >>NEXT ITEM		Value in USD (X.XX)		Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
During Last 2 Weeks													
15	Rice, shelled												
16													
17	Wheat/Flour												
18	Bread/Bread rolls												
19													
20	Buns/Biscuits/Cookies												
21													
22	Other cereal/bread items												
Roots and Tubers—During Last 2 Weeks													
23	Sweet potatoes												
24	Potatoes												
25													
26													
27	Yams												
27a	Others(e.g cassava)												
Pulses and Legumes—During Last 2 Weeks													
28	Fresh beans (excl green beans), unshelled												
29	Fresh beans (excl green beans), shelled												
30													
31	Soya beans, shelled												
32	Dried beans												
33	Groundnuts, unshelled												
34	Groundnuts, shelled												
35	Nyimo/ indlubu/ roundnuts, shelled												
36	Nyimo/ indlubu/ roundnuts, unshelled												
37	Cowpeas, unshelled												
38	Peas												
39	Other pulses, legumes												
Vegetables—During Last 2 Weeks													
40	Onions												
41	Tomatoes												
42	Cabbages												

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15A: Household Expenditure – Food (Last 2 weeks)

Last 2 Weeks	Q1		Q2		Q3		Q4		Q5		Q6		Q7	
	Did this household consume [ITEM] during the last 2 weeks?		How much did your household spend on [ITEM] consumed during the last 2 weeks?		How many [UNITS] of [ITEM] did your household purchase for that amount?		During the last 2 weeks, how many [UNITS] of own produced [ITEM] did your household consume?		How much would this [ITEM] cost if you were to buy it?		During the last 2 weeks, how many [UNITS] of [ITEM] did your household consume without payment?		How much would this [ITEM] cost if you were to buy it?	
	Read Out Fill in Per Row		[IN TOTAL] [IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q4]		Quantity		Quantity		Value in USD (X.XX)		Quantity		Value in USD (X.XX)	
1=YES 2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM		Value in USD (X.XX)		Unit Code		Unit Code		Value in USD (X.XX)		Unit Code		Value in USD (X.XX)		
72	Avocados													
73	Wild fruits													
74	Sugarcane (Nzimbe/Inzimbe/Munzimbe)													
75														
76	Dried Fruits													
77	Other fruits													
Fish—During Last 2 Weeks														
78	Kapenta/ Matemba (small dried fish)													
79	Tiger fish													
80	Bream (fresh/ frozen)													
81	Bream (dried/ smoked)													
82	Mackerel													
83														
84														
85	Other fish (fresh or frozen)													
86	Other fish (dried/smoked)													
87	Other fish and fish products													
Meat and Poultry —During Last 2 Weeks (fresh, frozen and dried)														
88	Chicken													
89	Other poultry													
90	Beef													
91	Pork incl Bacon													
92	Goat meat													
93														
94	Game meat													
95	Macimbi/ Madora/Mawungu													
96	Casings													
97														
98	Other Offals e.g. liver, kidneys													
99														
100	Insects													
101	Other meat													

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15A: Household Expenditure – Food (Last 2 weeks)

Last 2 Weeks Read Out Fill in Per Row	Q1	Purchases			Own Production			Gifts, Food for Work, Relief Food		
	Did this household consume [ITEM] during the last 2 weeks?	Q2	Q3		Q4	Q5		Q6	Q7	
	How much did your household spend on [ITEM] consumed during the last 2 weeks?	How many [UNITS] of [ITEM] did your household purchase for that amount?	Value in USD (X.XX)	Quantity	Unit Code	During the last 2 weeks, how many [UNITS] of own produced [ITEM] did your household consume?	How much would this [ITEM] cost if you were to buy it?	During the last 2 weeks, how many [UNITS] of [ITEM] did your household consume without payment?	How much would this [ITEM] cost if you were to buy it?	Value in USD (X.XX)
	1=YES	[IN TOTAL] [IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q4]	[IF DID NOT PRODUCE, LEAVE BLANK AND SKIP >>Q6]	[IF DID NOT RECEIVE, LEAVE BLANK AND SKIP >>NEXT ITEM]	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
	2=NO				Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
	>>NEXT ITEM				Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
	9=DON'T KNOW									
	>>NEXT ITEM									

Dairy Products and Eggs—During Last 2 Weeks										
102	Milk (fresh)									
103	Milk (powdered, excl baby milk)									
104	Sour/Fermented Milk									
105	Eggs									
106										
107	Other dairy products									
Fats & Oils—During Last 2 Weeks										
108										
109	Margarine/butter									
110	Peanut butter									
111	Cooking Oil									
112	Other fats (excl cooking oil)									
Sugar and Sweets—During Last 2 Weeks										
113	Sugar									
114	Honey/ Jam/ Glucose									
115	Cocoa and chocolate									
116	Ice Cream									
117	Other sweets									
Non-Alcoholic Beverages—During Last 2 Weeks										
118	Tea leaves/tea bags									
119	Coffee (fresh, blend, or instant)									
120										
121	Juice									
122	Soft drinks									
123										
124										
125	Maheu (amahewu/ Mahewu)									
126	Other nonalcoholic beverages									

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15A: Household Expenditure – Food (Last 2 weeks)

	Last 2 Weeks	Purchases						Own Production			Gifts, Food for Work, Relief Food		
		Q1	Q2		Q3		Q4		Q5	Q6		Q7	
		Did this household consume [ITEM] during the last 2 weeks?	How much did your household spend on [ITEM] consumed during the last 2 weeks?		How many [UNITS] of [ITEM] did your household purchase for that amount?		During the last 2 weeks, how many [UNITS] of own produced [ITEM] did your household consume?		How much would this [ITEM] cost if you were to buy it?	During the last 2 weeks, how many [UNITS] of [ITEM] did your household consume without payment?		How much would this [ITEM] cost if you were to buy it?	
Read Out Fill in Per Row	1=YES 2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM	[IN TOTAL] [IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q4]		Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)		
Alcoholic Beverages—During Last 2 Weeks													
127	Spirits												
128	Wines												
129													
130	Clear beer												
131	Opaque beer												
132	Traditional brews (incl Cane Spirit) (Chibuku/Chigodokhaya / doro rematanda)												
133	Other alcoholic beverages												
Baby Food—During Last 2 Weeks													
134													
Food From Kiosks, Cafés, Restaurants—During Last 2 Weeks													
135													
Other Food and Beverages—During Last 2 Weeks													
136	Chips & Crisps												
137	Sweet reed												
138	Other foods and beverages, (specify)												
Cigarettes and Tobacco—During Last 2 Weeks													
139	Cigarettes												
139	Tobacco												
140	Snuff												
141	Other Tobacco (incl Mbanje)												
Non Frequent Foods—During Last 2 Weeks													
142	Salt												
143	Spices												
144	Mixed Condiments e.g. Royco												
145	Other (specify)												

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15B: Household Expenditure –Non Food (Last 4 weeks)

NOTE: CHANGE OF REFERENCE PERIOD

Last 4 Weeks <i>Read Out</i> <i>Fill in Per Row</i>	Q8	Purchases			Own Production			Gifts, Food for Work, Relief Food				
	Did this household consume (use) [ITEM] during the last 4 weeks?	Q9	Q10		Q11	Q12		Q13	Q14			
	How much did your household spend on [ITEM] consumed (used) during the last 4 weeks?	How many [UNITS] of [ITEM] did your household purchase for that amount?	Quantity	Unit Code	During the last 4 weeks, how many [UNITS] of own produced [ITEM] did your household consume (used)?	How much would this [ITEM] cost if you were to buy it?	Quantity	Unit Code	Value in USD (X.XX)	During the last 4 weeks, how many [UNITS] of [ITEM] consumed (used) did your household receive without payment?	How much would this [ITEM] cost if you were to buy it?	
	1=YES	[IN TOTAL] [IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q11]	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
	2=NO											
	9=DON'T KNOW											
	>>NEXT ITEM											
	>>NEXT ITEM											

Other Non-frequent Expenditure—During Last 4 Weeks												
HOUSING EXPENDITURES	146	Household textiles and furnishings e.g. bed sheets, blankets, towels, curtains										
	147	Household utensils e.g. cutlery, glassware, plates, cups										
	148	Mops, brooms and brushes										
	149	Furniture e.g. beds and mattresses, tables, chairs, carpets										
	150	Home repairs and maintenance (plumbing, painting, stove repairs, etc.), construction										
	151	Rent of dwelling										
	152											
	153	Water and sewage charges										
	154											
	155	Electricity										
	156	Gas										
	157	Firewood										
	158	Charcoal										
	159											
	160	Paraffin										
	161											
162	Other fuel for cooking/lighting											
163	Batteries, light bulbs, lighters, matches, candles											
164	Other housing expenses											

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15B: Household Expenditure –Non Food (Last 4 weeks)

		Q8		Purchases Q9	Gifts Q14
Last 4 Weeks		Was [ITEM] consumed (used) during the last 4 weeks?		How much did your household spend on [ITEM] consumed (used) during the last 4 weeks? [IN TOTAL] [IF NOTHING SPENT, LEAVE BLANK >> Q14]	During the last 4 weeks, what was the value of [ITEM] your household consumed (used) which was received without payment? [IN TOTAL] [IF NOTHING RECEIVED, LEAVE BLANK>> NEXT ITEM]
Read Out <i>Fill in Per Row</i>	1=YES				
	2=NO >>NEXT ITEM				
	9=DON'T KNOW >>NEXT ITEM				
		Value in USD (X.XX)		Value in USD (X.XX)	
HYGIENE	165	Bath/handwashing soap			
	166	Laundry detergent			
	167	Toothpaste and toothbrushes			
	168	Sanitary towels			
	169	Toilet paper and other tissues			
	170	Cosmetics (e.g., lotion, creams, glycerin, make-up, petroleum jellies, etc.)			
	171	Hair care (e.g., perming, braiding, conditioning, shampooing; haircuts, etc.)			
	172				
	173				
	174	Cleaning agents (excl soap and laundry detergents) (e.g., Ajax, dishwashing liquids or pastes, toilet cleansers, handy andy, air fresheners, cobra/polish, other cleaning agents, etc.)			
175	Insecticides				
176	Other hygiene expenses				
COMMUNICATION	177	Mobile phones (connection fees, air time excl cost of phone)			
	178				
	179				
	180				
	181	Other communication expenses			

		Q8		Purchases Q9	Gifts Q14
Last 4 Weeks		Was [ITEM] consumed (used) during the last 4 weeks?		How much did your household spend on [ITEM] consumed (used) during the last 4 weeks? [IN TOTAL] [IF NOTHING SPENT, LEAVE BLANK >> Q14]	During the last 4 weeks, what was the value of [ITEM] your household consumed (used) which was received without payment? [IN TOTAL] [IF NOTHING RECEIVED, LEAVE BLANK >> NEXT ITEM]
Read Out <i>Fill in Per Row</i>	1=YES				
	2=NO >>NEXT ITEM				
	9=DON'T KNOW >>NEXT ITEM				
		Value in USD (X.XX)		Value in USD (X.XX)	
TRANSPORT	Public Transportation				
	182	Public transport to and from work			
	183	Public transport to/from school incl boarding school and abroad			
	184	Other public transport (e.g., to/from church, visits)			
	Private Transportation				
	185	Petrol/diesel/oil			
	186				
	187	Motorbike repairs (tires/tubes, oil, etc.)			
	188	Bicycle repairs (tires, tubes, solution, etc.)			
	189				
190	Scotch cart				
191	Other private transport				
OTHER	192				
	193	Domestic servants			
	194				
	195				
	196				
	197				
198	Other expenses				

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	B	Box/Carton	GR	Gram	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML	CU	Cup/Mug	BD	Bundle
B50	50 KG Bag	P05	0.5 KG Packet	P	Piece/Number	LT	Litre	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML	PL	Plate	OT	Other
KG	Kilograms	P10	0.25 KG Packet	D	Dozen	ML	Millilitre	BOT375	Bottle/Tin 375 ML	TN	Tonne	LBK	Large Basket	SBK	Small Basket

Section 15C: Household Expenditure –Non Food (Current school year)

NOTE: CHANGE OF REFERENCE PERIOD

		Q15	Purchases Q16	Gifts Q17
Last Year		Did this household purchase/pay for or receive the following items during the current school year?	During the current school year, how much did your household spend on [ITEM]?	During the current school year, what was the value of [ITEM] your household received without payment [IN TOTAL]?
	Read Out <i>Fill in Per Row</i>	1=YES 2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM	[IN TOTAL] [IF NOTHING SPENT, LEAVE BLANK >> Q17]	[IF NOTHING RECIEVED, LEAVE BLANK >> NEXT ITEM]
			Value in USD (X.XX)	Value in USD (X.XX)
Education: Answer Separately for 1st and 2nd School Terms of 2017				
EDUCATION	199	School fees (incl examination fees, and boarding fees)	1st term 2nd term	1st term 2nd term
	200	Contributions to school/PTA/SDA	1st term 2nd term	1st term 2nd term
	201	Private tuition	1st term 2nd term	1st term 2nd term
	202	Textbooks	1st term 2nd term	1st term 2nd term
	203	School stationery (exercise, books, pens, pencils, rulers, rubbers, mathematical sets, paper, etc.)	1st term 2nd term	1st term 2nd term
	204	Purchase of other school requisites (e.g., for boarders-snacks, mazoe, biscuits, tinned foods, etc.)	1st term 2nd term	1st term 2nd term
	205	School uniforms (incl shoes, socks, ties, materials, tailoring charges)	1st term 2nd term	1st term 2nd term
	206	Other education expenses (graduation ceremonies, tuck shop money, pocket money for students, boarding and lodging for students, remittances to students, etc.)	1st term 2nd term	1st term 2nd term

		Q15	Purchases Q16	Gifts Q17
Last Year		Did this household purchase/pay for or receive the following items during the last 12 months?	During the last 12 months, how much did your household spend on [ITEM]?	During the last 12 months, what was the value of [ITEM] your household received without payment [IN TOTAL]?
	Read Out <i>Fill in Per Row</i>	1=YES 2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM	[IN TOTAL] [IF NOTHING SPENT, LEAVE BLANK >> Q17]	[IF NOTHING RECIEVED, LEAVE BLANK >> NEXT ITEM]
			Value in USD (X.XX)	Value in USD (X.XX)
HEALTH	207	Purchase of medicines		
	208	Fees for doctors		
	209	Fees for nurses, midwives		
	210			
	211	Fees for hospital stays		
	212	Fees for health assistant		
	213	Fees for traditional healers		
	214	Payments to hospital/health center/ surgery		
	215	Pre-payment scheme		
	216	Payments for transportation to health facility		
	217	Other health expenses		
WATER	218	Treatment tablets, chemicals, etc		
	219	Other water treatment		
Including Clothing, Shoes, Repairs – Excluding Laundry, Excluding School Uniforms				
CLOTHING	220	Zambias		
	221	Children's clothing		
	222	Men's clothing		
	223	Women's clothing (excl Zambias)		
	224	Fabric/material		
	225	Tailoring charges		
	226	Men's footwear e.g. shoes, sandals		
	227	Women's footwear		
	228	Children's footwear		
	229	Footwear repair charges		
FINANCIAL SERVICES	230	Loan repayments		
	231	Contributions (church, mosque.)		
	232			
	233	Funerals, gifts, dowries or brideprice (lubola)		

SECTION 18A: AGRICULTURAL PRODUCTION (NEW)

INTRODUCTION: I am now going to ask you questions about Agricultural Production

1.	Did any member of this household or anybody on their behalf grow any crops in the last agricultural season, that is, between October 2016 and now?										1=YES 2=NO>> NEXT SECTION	
Q	2.	3	4	5	6	7	8	10				
	Which crops did you plant? [RECORD AN ANSWER FOR EACH TYPE OF CROP - STARTING WITH CROPS WITH THE LARGEST AREA CULTIVATED-BEFORE COLLECTING DATA ON EACH. USE CROP CODES BELOW]	What was the area planted under this crop? 1=HECTARES 2=ACRE 3=METER ²	How much was the total harvest last agricultural season? <u>UNITS</u> 1=KILOGRAM 2=25 KG BAG 3=50 KG BAG 4=75 KG BAG 5=90 KG BAG 6=OTHER (SPECIFY) [OBTAIN AMOUNT SHELLED] IF 00>>Q8	How much of the harvested crop was sold in total? <u>UNITS</u> 1=KILOGRAM 2=25 KG BAG 3=50 KG BAG 4=75 KG BAG 5=90 KG BAG 6=OTHER (SPECIFY) [OBTAIN AMOUNT SHELLED] IF 00>>Q7	What was the total value of [CROP] sales? [ESTIMATE THE VALUE OF IN-KIND PAYMENTS]	How much of the harvested crop is currently held in storage? <u>UNITS</u> 1=KILOGRAM 2=25 KG BAG 3=50 KG BAG 4=75 KG BAG 5=90 KG BAG 6=OTHER (SPECIFY) [OBTAIN AMOUNT SHELLED]	Is the plot where the crop is grown irrigated?	Who is primarily responsible for management decisions on this crop? [Write PID from roster]				
	Crop Code	Area	Unit	QTY	UNIT	QTY	UNIT	USD	QTY	UNIT	Yes=1 NO=2	
1												
2												
3												
4												

CROP CODES:

- | | | | | | |
|-------------|---------------|-----------------|--------------------|------------|------------|
| 1=Rice | 2=Wheat | 3=Finger Millet | 4=Pearl Millet | 5=Sorghum | 6=Maize |
| 7=Cassava | 8=Potato | 9=Yams | 10=Beans | 11=Lentils | 12=Peas |
| 13=Soybeans | 14=Groundnuts | 15=Roundnuts | 16=Other (Specify) | 17=Cotton | 18=Tobacco |

SECTION 19B: FRUIT AND VEGETABLE PRODUCTION (LAST MONTH)			
[This section refers primarily to kitchen plots]			
1	2	3	4
Did anyone in the household plant and/or harvest fruits and/or vegetables? 1=Yes 2=No >> NEXT SECTION	Did anyone in this household sell any of the fruits and vegetables production during the last month? 1=Yes 2=No >> NEXT SECTION	How many times did the household sell and/or barter fruits and vegetable production during the last month?	On average, how much did the household obtain for selling and/or bartering fruits and vegetables each time it sold?
		NUMBER	USD

SECTION 20: AGRICULTURAL INPUTS and PRODUCTIVE ASSETS - LAST 12 MONTHS						
		1	2	3	4	5
CODE	ITEM	During the last 12 months, did you use or own any [INPUT/ ASSET]?	Do you own, rent for pay, borrow or use [ASSET] as part of a sharing arrangement?	How many [ASSETs] do you use/ own?	Did you purchase [INPUT/ASSET] in the last 12 months?	During the last 12 months, how much did you spend in cash and in kind on [INPUT/ ASSET] including transport ?
		1=YES 2=NO >> NEXT INPUT/ASSET	1= OWN 2=RENT >> Q5 3= BORROW>> Next item 4=SHARING AGREEMENT>> Q5		1=YES 2=NO >> NEXT INPUT/ASSET	
						USD
102	Chemical fertilizer					
103	Organic fertilizer					
104	Pesticides					
105	Fodder					
105a	Seeds					
105b	Draft animal costs					
109	Axe					
111	Panga machete/Slasher					
112	Sickle					
114	Watering Can					

115	Chains					
116	Yokes					
118	Ox Cart (scotch car)					
119	Ox Plough					
125	Chicken House					
126	Livestock corral (kraal)					
127	Storage house/Granary					

SECTION 21: HIRED LABOUR FOR CROP, LIVESTOCK AND NON AGRICULTURAL ENTERPRISE ACTIVITIES										
			1	2						
ACTIVITY CODE	TYPE OF ACTIVITY	RECALL PERIOD	During the last [RECALL PERIOD], did you hire any non-household member to work on [ACTIVITY]? 1=YES 2=NO >>NEXT ACTIVITY	For how many days did you hire men, women, and children to work on [ACTIVITY] during the [RECALL PERIOD]? [NOTE THAT CHILDREN SHOULD BE CONSIDERED <18 YEARS OF AGE.]						
				2a1	2a2	2b1	2b2	2c1	2c2	
				MALES		FEMALES		CHILDREN		
				number	days	number	days	number	days	
1	Land preparation and planting	Last rainy season								
2	Weeding, fertilizing, or any other non-harvest activity	Last rainy season								
3	Harvesting	Last rainy season								
4	Livestock production	Last 12 months								
5	Non agricultural household enterprise	Last 12 months								

SECTION 22: LIVESTOCK

	1	2	3	5	6	7	10
ANIMAL ID	LIVESTOCK TYPE	<p>During the last 12 months, have you or any member of your household raised or owned any [LIVESTOCK]?</p> <p>1=YES 2=NO >> GO TO NEXT ANIMAL</p> <p>[RECORD AN ANSWER FOR EACH TYPE OF LIVESTOCK BEFORE GOING THROUGH THE ENTIRE MODULE FOR EACH APPLICABLE ROW, ONE ROW AT A TIME.]</p>	<p>How many [LIVESTOCK] are owned by your household now (present at your farm or away)?</p> <p>[IF NONE, RECORD 0]</p>	<p>In the last 12 months, how many [LIVESTOCK] did you consume?</p>	<p>During the last 12 months, how many [LIVESTOCK] did your household buy?</p> <p>[IF NONE, RECORD 0 >> Q10]</p>	<p>How much did you pay over the last 12 months?</p>	<p>During the last 12 months, how many [LIVESTOCK] did your household sell?</p> <p>[IF NONE, RECORD 0 >> NEXT ANIMAL]</p>
			NUMBER	NUMBER	NUMBER	USD	NUMBER
201	Calf						
202	Ox						
203	Bull						
204	Cattle Adult Female						
205	Goats						
206	Chickens						
206a	Duck, Geese						
207	Donkeys, Mule						
208	Sheep						
211	Pigs						
211a	Guinea Pigs						
212	Other _____						

SECTION 22: LIVESTOCK BY-PRODUCTS (last 12 months) (Cont...)

PRODUCT ID	PRODUCT NAME	11	14a	14b	15
		Did your household produce any [PRODUCT] during the last 12 months? [RECORD AN ANSWER FOR EACH TYPE OF LIVESTOCK PRODUCT BEFORE COLLECTING DATA ON EACH.] 1=YES 2=NO >>NEXT PRODUCT	How much of the [PRODUCT] produced did you sell in the last 12 months? [SEE WEIGHTS CODES] If 0 >> NEXT PRODUCT	What was the total value of sales of [PRODUCT] in the last 12 months? [ESTIMATE THE VALUE OF IN-KIND PAYMENTS]	
			QUANTITY	UNIT	USD
1	COW MILK				
3	EGGS				
6	MEAT				
8	SKINS AND HIDES				
9	OTHER, e.g. butter/goat milk/honey (SPECIFY) _____				

Unit Codes	Units	Unit Codes	Units	Unit Codes	Units	Unit Codes	Units
B90	90 KG Bag	T20	20 Litre Tin/ Bucket	BOT250	Bottle/Tin 250 ML	BOT500	Bottle/Tin 500 ML
B50	50 KG Bag	P05	0.5 KG Packet	BOT300	Bottle/Tin 300 ML	BOT750	Bottle/Tin 750 ML
KG	Kilograms	P10	0.25 KG Packet	BOT375	Bottle/Tin 375 ML	TN	Tonne
B	Box/Carton	GR	Gram	CU	Cup/Mug	BD	Bundle
P	Piece/Number	LT	Litre	PL	Plate	OT	Other
D	Dozen	ML	Millilitre	LBK	Large Basket	SBK	Small Basket

SECTION 25: OPERATIONAL PERFORMANCE

Targeting / Selection

5	Can you name some child support/protection services that are available in this community? [DO NOT PROMPT - CIRCLE ALL THAT APPLY]	A = Health services B = Schooling related services C = Food/Nutrition related services D = Psychological support E = Legal Assistance F= Child helpline (toll free hotline service) G= Other, specify F = Don't know	A B C D E F
1	Over the past year, has any child in your household been referred for child protection/support services?	1=YES 2=NO >> Q5a	
2	What type of services was the child/s referred to? [CIRCLE ALL THAT APPLY]	A = Health services B = Schooling related services C = Food/Nutrition related services D = Psychological support E = Legal Assistance F= Child helpline (toll free hotline service) G= Other, specify	A B C D E F G
3	Did the child/s use or receive any of those services? [CIRCLE ALL THAT APPLY]	A = Health services B = Schooling related services C = Food/Nutrition related services D = Psychological support E = Legal Assistance F= Child helpline (toll free hotline service) G = Other, specify	A B C D E F G
5a	Do you know any Community Childcare Workers (CCW) in this Ward?	1=YES 2=NO >> Q6	
5b	Do you know what the CCW's are supposed to do?	1=YES 2=NO>> Q6	
5c	What duties does the CCW in this community perform? [DO NOT PROMPT – CIRCLE ALL THAT APPLY]	A = Provide information on HSCT payment date B = Provide assistance at the HSCT Payment point C= Assist with registration of HSCT payment collection representatives D= Assist community to access services such as birth registration, health and education E= Assist community to report cases of child abuse & neglect to District Social Welfare Office F = Assist community to report cases of child abuse & neglect to Police G = Assist community to report cases of child abuse & neglect to NGOs H = Other (Specify) _____	A B C D E F G H

SECTION 25: OPERATIONAL PERFORMANCE (CONT'D)

6	Are you aware of the HSCT programme that is operated by the Ministry of Public Service, labour and social Welfare?	1 = YES 2 = NO >> SKIP TO END OF HH QUESTIONNAIRE [IF 'NO', EXPLAIN WHAT THE HSCT PROGRAMME IS TO DOUBLE-CHECK RESPONDENT'S AWARENESS.]	
7	Has your household <u>EVER</u> received payments from the HSCT programme?	1= YES 2= NO>>SKIP TO END OF HH QUESTIONNAIRE	
9	Why do you think you were selected to receive the transfer? [DO NOT PROMPT- CIRCLE ALL THAT APPLY] [ENUMERATOR; IF THE INTENDED RESPONDENT DOES NOT HAVE MORE INFORMATION ABOUT THE HSCT PROGRAMME LET THEM CONSULT MOST KNOWLEDGEABLE HOUSEHOLD MEMBER WRITE MEMBER'S PID IN QA1]	A= I TAKE CARE OF ORPHANS B= I TAKE CARE OF MANY CHILDREN C= I AM SICK D= I AM WIDOWED E = I AM NOT ABLE TO WORK F = I AM HANDICAPPED G = I AM OLD H = I AM VERY POOR I = I DO NOT HAVE ENOUGH TO EAT J = I DO NOT KNOW K = OTHER (SPECIFY) _____	A
			B
			C
			D
			E
			F
			G
			H
			I
			J
K			
11	Do you think that the eligibility criteria for the HSCT program are clear? [SHOW FLASH CARD]	5=STRONGLY AGREE 4=AGREE 3=NEITHER AGREE NOR DISAGREE 2=DISAGREE 1=STRONGLY DISAGREE	
12	Are you or any member of the household <u>currently</u> a beneficiary of the HSCT program?	1 = YES 2 = NO >> SKIP TO END OF HH QUESTIONNAIRE	
A1	PID code of most knowledgeable person about HSCT programme if not Main Respondent	PID [] [] []	
12c.	Who usually collects the payment from the payment point? [NOTE PID OF PERSON. IF NOT MEMBER OF THE HOUSEHOLD, ENTER '99']	PID [] [] []	

SECTION 25: OPERATIONAL PERFORMANCE (CONT'D)

Payment systems and operations

14	When was the last time the household received a HSCT payment? [LIST MONTH AND YEAR NUMERICALLY] (MM YYYY) [ENTER "9999" IN THE YYYY BOXES IF THE RESPONDENT DOES NOT KNOW]	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 20px; height: 20px;" type="text"/> </div> </div> <p align="center">MONTH YEAR</p>	
15	How much did you receive? [ENTER "999" IF THE RESPONDENT DOES NOT KNOW]	AMOUNT IN \$ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> <input style="width: 30px; height: 20px;" type="text"/> </div>	
16	When do you expect to receive the next payment?	1=IN NEXT TWO MONTHS 4=GREATER THAN TWELVE MONTHS 2=IN NEXT TWO-SIX MONTHS 5=NEVER 3=IN NEXT SIX - TWELVE MONTHS 6=DON'T KNOW	
17	How long in the future do you expect to continue receiving this money?	1= 0-6 MONTHS 4= 2-5 YEARS 2= 6 MONTHS - 1 YEAR 5=LONGER/FOR THE REST OF LIFE 3= 1-2 YEARS	
18a	For the LAST payment, what method of transport did you (or your representative) use to and from travel to the Payment point to collect the payment? [CIRCLE ALL THAT APPLY]	A = CAR/TAXI B= BUS/MINIBUS C= KOMBI D= MOTOR BIKE E = BICYCLE F= WALK G= DON'T KNOW/CAN'T SAY H=OTHER (SPECIFY)/ _____	A B C D E F G H
19a	In general, how long does it take you (or your representative) to travel from your home to the Payment point and back again? [TWO-WAY TOTAL FOR GOING FROM HOUSEHOLD TO PAYMENT POINT AND BACK AGAIN. THIS DOES NOT INCLUDE TIME / DAYS SPENT WAITING AT PAYMENT POINT. CODE '-' FOR CELLS NOT USED]	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 30px; height: 20px;" type="text"/> </div> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> </div> <p align="center">DAYS HOURS MINUTES</p>	
19b	In general, at the payment point how long did you have to wait to get your money? [CODE '-' FOR CELLS NOT USED]	<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 30px; height: 20px;" type="text"/> </div> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> <div style="border: 1px solid black; padding: 2px;"> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> </div> </div> <p align="center">DAYS HOURS MINUTES</p>	
20a.	Did you ever have to go to the payment point more than once to receive your payment? (i.e same payment)	1 = YES 2 = NO	
20b.	Did you ever lose your payment because you missed the designated payment period?	1 = YES 2 = NO	

SECTION 25: OPERATIONAL PERFORMANCE (CONT'D)

24	When the payment becomes available for collection at the Payment point, how many days do you have to collect it from the Payment point before it expires? [CODE '999' FOR DON'T KNOW]	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 30px; height: 20px;"></td> <td style="width: 30px; height: 20px;"></td> <td style="width: 30px; height: 20px;"></td> </tr> <tr> <td align="center" colspan="3">NUMBER OF DAYS</td> </tr> </table>				NUMBER OF DAYS		
NUMBER OF DAYS								
25	In the future how many days do you think will be reasonable for the collection of payment at the payment point before it expires?	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="width: 30px; height: 20px;"></td> <td style="width: 30px; height: 20px;"></td> </tr> <tr> <td align="center" colspan="2">NUMBER OF DAYS</td> </tr> </table>			NUMBER OF DAYS			
NUMBER OF DAYS								
26	Have you identified somebody that can represent you at the Payment point to collect your payment if you are sick, injured or not able to collect the payment yourself?	1 = YES >>Q28 2= NO						
27	Will you be willing to designate a representative to collect the payment for you on your behalf?	1 = YES 2= NO GO TO Q30						
28	What is your relationship to the representative you have identified for the HSCT Programme?	1 = FAMILY MEMBER / RELATIVE THAT LIVES IN YOUR HOUSEHOLD 2 = FAMILY MEMBER / RELATIVE THAT LIVES OUTSIDE OF YOUR HOUSEHOLD 3 = FRIEND 4 = ANOTHER BENEFICIARY 5 = OTHER COMMUNITY MEMBER 6 = COMMUNITY ELDER / LEADER 7 = CHIEF / GOVERNMENT REPRESENTATIVE 8= OTHER, SPECIFY: _____						
29	Have you EVER sent your representative to collect the payment from the Payment point?	1 = YES 2= NO						
30	If you (and/or your representative, if designated) are not able to collect your payment in a payment cycle, will you still receive that payment in the future?	1 = YES, THE FULL AMOUNT OF THE MISSED PAYMENT WILL BE ADDED TO THE NEXT PAYMENT 2= NO, THE MISSED PAYMENT WILL BE LOST / NOT BE PAID 3= OTHER, SPECIFY _____ 99=DON'T KNOW						
31	Have you ever had to pay any money (cash or in-kind) to the Payment point staff when you went to collect your payment?	1 = YES 2 = NO 99=CAN'T SAY						
32	Has anyone at the payment point ever asked you for money (gift) [USE LOCAL EXPRESSION] before or after payment of the HSCT transfer?	1 = YES 2= NO						
34	Has anyone in the community ever asked you for money (gift) [USE LOCAL EXPRESSION] before or after payment of the HSCT transfer?	1= YES 2= NO						
35	Have you ever had to pay any money [USE LOCAL EXPRESSION] to anybody in the community (eg. village elder / chief) when you go to collect your payment? [This does not include the alternative recipient / representative or Payment point staff.]	1 = YES 2 = NO 99=CAN'T SAY						

SECTION 24: OPERATIONAL PERFORMANCE (CONT'D)

37	In general, do you feel safe collecting your money from the Payment point?	1= YES 2= NO	
37a	In general do you feel safe with your money when you return home from the Payment point?	1=YES 2=NO	
38	In general, are you happy with the way you are treated by the Payment point staff when you go to collect your payment?	1 = YES 2 = NO 99=DON'T KNOW	
39a	Are there other services or information provided to beneficiaries at the payment points?	1=YES 2=NO >>Q40 99=DK	
39b	What types of information or services are provided? [MARK AS MANY AS MENTIONED BY RESPONDENT. DO NOT PROMPT]	A=DISABILITY RELATED B=HIV RELATED C=HEALTH SERVICE RELATED D= LEGAL ASSISTANCE RELATED E= CHILD HELPLINE FOR CHILD ABUSE/EXPLOITATION RELATED F=COUNSELLING G=EDUCATION SERVICE RELATED H=OTHER	A B C D E F G H
39d	The information or services are useful. [SHOW FLASH CARD]	5=STRONGLY AGREE 4=AGREE 3=NEITHER AGREE NOR DISAGREE 2=DISAGREE 1=STRONGLY DISAGREE	
39e	Have you ever made use of the services or information provided at the payment point?	1=YES 2=NO	
39f	Have you received any follow up contact (such as home visit) by anyone after you have accessed information and/or services at the Payment point?	1=YES 2=NO>>Q40	
39g	If YES, who contacted you?	1=Government Departments 2= NGO 3= CCWs 4=Other	
40	If you are having problems with payment or any other part of the HSCT programme, is there anyone to contact?	1 = YES 2 = NO>>Q46 99=DON'T KNOW>>Q46	

SECTION 25: OPERATIONAL PERFORMANCE (CONT'D)

41	For problems with payment or other parts of the HSCT programme, who can you contact: [LIST UP TO THREE OF THE MOST IMPORTANT]	A = COMMUNITY LEADER(VILLAGE HEAD, HEADMAN, CHIEF) B= GOVERNMENT REPRESENTATIVE, COUNCILLOR C = ANOTHER BENEFICIARY D = OTHER COMMUNITY MEMBER E = FAMILY MEMBER F = PAYMENT POINT STAFF (DEPT OF SOCIAL WELFARE, PAYMENT AGENT) G = NGOS AT PAYMENT POINT H=CHILD PROTECTION COMMITTEE I=PAYPOINT HELP DESK J = OTHER SPECIFY _____	1st
			2nd
			3rd
42	Have you contacted anyone?	1 = YES 2 = NO>> Q46	
43	Whom did you contact? [LIST UP TO THREE OF THE MOST IMPORTANT]	A = COMMUNITY LEADER(VILLAGE HEAD, HEADMAN, CHIEF) B = GOVERNMENT REPRESENTATIVE, COUNCILLOR C = ANOTHER BENEFICIARY D = OTHER COMMUNITY MEMBER E = FAMILY MEMBER F = PAYMENT POINT STAFF (DEPT OF SOCIAL WELFARE, PAYMENT AGENT) G = NGOS AT PAYMENT POINT H=CHILD PROTECTION COMMITTEE I =PAYPOINT HELP DESK J = OTHER SPECIFY _____	1st
			2nd
			3rd
44	For what problem did you contact them to resolve? [CIRCLE UP TO THREE OF THE MOST IMPORTANT PROBLEMS]	A = TRANSPORTATION COSTS B= TRAVEL TIME C= PROBLEMS WITH GETTING INFORMED OF PAYMENT D= EXPIRED PAYMENTS E= MISSING PAYMENTS F= BRIBES/GIFTS G = UNSAFE PAYMENT PICKUPS H= UNHAPPY WITH TREATMENT FROM PAYPOINT STAFF I= UNHAPPY WITH TREATMENT FROM HSCT PROGRAMME STAFF J = OTHER SPECIFY _____	A.
			B.
			C.
			D.
			E.
			F.
			G.
			H.
			I.
			J.
45	How helpful was the person/group you contacted? [SHOW FLASH CARDS]	1 = NO RESPONSE WAS RECEIVED 2 = NOT HELPFUL 3 = SLIGHTLY HELPFUL 4 = MODERATELY HELPFUL 5 = VERY HELPFUL	
46	Do other people in the community know that you are receiving payments from the HSCT programme?	1 = YES 2 = NO 99=DON'T KNOW	
47	Is / would it be a problem for you if others in the community know that you are receiving payments from the HSCT programme?	1 = YES 2 = NO >> Q50 99=DON'T KNOW >> Q50	

SECTION 24: OPERATIONAL PERFORMANCE (CONT'D)

47 abc	If yes, why would it be a problem if others know you are receiving payments from the cash transfer programme? [DO NOT READ PROMPT. LET THE RESPONDENT STATE THEIR CONCERN(S) IF MORE THAN ONE CONCERN IS SHARED, ASK THE RESPONDENT TO INDICATE NO MORE THAN THREE (3) AND TO RANK THEM IN ORDER OF IMPORTANCE]. [IF FEWER THAN THREE RESPONSES ARE PROVIDED, ENTER '98' TO ANY NON-RESPONSE CELLS]	01 = MAY BE ASKED FOR MONEY BY OTHERS 02 = MAY BE ASKED TO CARE FOR OTHER FAMILY MEMBERS 03 = EMBARRASSED 04 = CONCERNED FOR SAFETY 05 = JEALOUSY 06 = WITCHCRAFT 07 = CONCERNED WILL BE REMOVED FROM OTHER SUPPORT PROGRAMS 08 = MAY NOT GET ADDITIONAL HELP IN TIMES OF NEED 09 = DON'T ACTUALLY QUALIFY FOR THE PROGRAM 10 = CAN'T SAY/DON'T KNOW 11 = OTHER (SPECIFY) _____	47a, Most Important
			47b, Second Most Impt
			47c, Third Most Impt

Perceptions of beneficiary responsibilities

50	Do families participating in the HSCT programme have to follow any rules in order to continue receiving payments?	1 = YES 2 = NO>> Q56 99=DON'T KNOW>> Q56	
51 abc	Can you please list the rules that you think cash transfer families have to follow in order to receive the full payment from the HSCT programme? [DO NOT PROMPT. IF MORE THAN ONE RULE IS LISTED, ASK THE RESPONDENT TO INDICATE NO MORE THAN THREE (3) AND TO RANK THEM IN ORDER OF IMPORTANCE] [IF FEWER THAN THREE RESPONSES ARE PROVIDED, ENTER '98' TO ANY NON-RESPONSE CELLS]	A = ENROLMENT / ATTENDANCE IN PRIMARY SCHOOLS B = ENROLMENT / ATTENDANCE IN SECONDARY SCHOOLS C = PURCHASE OF SCHOOL SUPPLIES (BOOKS, UNIFORM, ETC) D = ATTENDANCE TO HEALTH FACILITY FOR IMMUNIZATIONS/OBTAIN UNDER 5 HEALTH CARD E = ATTENDANCE TO HEALTH FACILITY FOR GROWTH MONITORING F= ADEQUATE FOOD AND NUTRITION FOR CHILDREN G = CLEAN AND APPROPRIATE CLOTHING FOR CHILDREN H = BIRTH CERTIFICATE FOR CHILDREN I = INVEST IN FARM OR NON-FARM BUSINESS J = PAY OFF DEBT K = OTHER, SPECIFY _ _____ L = DON'T KNOW	51a, Most Important
			51b, Second Most Impt
			51c, Third Most Impt
52	How did you learn about the rules of the HSCT programme? [DO NOT PROMPT]	A = HSCT PROGRAMME REPRESENTATIVE (IE. AT COMMUNITY AWARENESS SESSION) B = FLYER C = PAYMENT POINT D = NEIGHBOUR/FRIEND E = VILLAGE ELDER F = VILLAGE CHIEF G = ANOTHER BENEFICIARY H = WARD MEMBER I = RELATIVE/FAMILY MEMBER J = OTHER, SPECIFY _____ K = DON'T REMEMBER	A
			B
			C
			D
			E
			F
			G
			H
			I
			J
			K
53	Do you know what will happen if cash transfer families do not follow the rules?	1= YES 2= NO>> Q55	
54	What will happen to a cash transfer family if they do not follow all of the rules?	1 = NOTHING 2 = KICKED OUT OF THE PROGRAMME 3 = GO TO JAIL 4 = A PENALTY FINE WILL BE DEDUCTED FROM THE NEXT PAYMENT 5 = OTHER _____	
55	Is anyone checking to see if cash transfer families are following the rules?	1 = YES 2 = NO 99 = DON'T KNOW	

USE OF CASH TRANSFER							
56	In this household, who generally decides how the payment from the HSCT programme is used (member id from roster-pid)?	NAME OF MAIN DECISION MAKER _____ PID OF MAIN DECISION MAKER <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 40px;">PID</td><td style="width: 40px;"></td><td style="width: 40px;"></td><td style="width: 40px;"></td></tr></table>	PID				
PID							
57	[REFER TO THE NAME OF MAIN DECISION MAKER PROVIDED IN Q56] In general, who does [NAME] consult with when deciding how to use the payment from the HSCT programme?	1 = ALONE 2 = SPOUSE 3 = OTHER ADULT FAMILY MEMBERS (NOT SPOUSE) 4 = CHILDREN	5 = ALL FAMILY MEMBERS 6 = SOMEONE ELSE IN THE COMMUNITY 99 = DON'T KNOW				
58	Is the payment from the HSCT programme kept separate from the rest of the household's sources of income?	1 = YES 2 = NO 99 = DON'T KNOW					
60	In general, list the main things that the payment from the HSCT programme is used for. [CIRCLE ALL THAT APPLY / DO NOT PROMPT OR GIVE EXAMPLES]	A = FOOD		A			
		B = MEAT/FISH/POULTRY		B			
		C = BUYING FOOD PREPARED OUTSIDE THE HOUSEHOLD		C			
		D = CELL PHONE/AIRTIME		D			
		E= LIVESTOCK		E			
		F = AGRICULTURAL INPUTS		F			
		G = FORMAL GOVERNMENT EDUCATION (FEES, TEXTBOOKS, UNIFORMS ETC.)		G			
		H = OTHER EDUCATION (NURSERY, OTHER RELIGIOUS SCHOOL)/		H			
		I = HEALTH CARE		I			
		J = SHELTER / ACCOMMODATION / RENT		J			
		K = CLOTHING / SHOES (DOES NOT INCLUDE SCHOOL UNIFORMS)		K			
		L = INVESTMENT/SMALL BUSINESS		L			
		M = FORMAL SOCIAL OCCASIONS SUCH AS WEDDINGS / FUNERALS		M			
N = SAVINGS/MUKANDO/ MAROUND		N					
O = OTHER SPENDING, SPECIFY _____		O					
P = DON'T KNOW / CAN'T SAY		P					
61	Since you started receiving payments, have you been asked to take care of other family members outside your original household	1 = YES 2 = NO					
62	Since you started receiving payments, are you more likely to be asked for help from someone in financial need?	1=YES 2=NO					
64	Have you been excluded from accessing other programs because you are a beneficiary of the HSCT programme?	1=YES 2=NO >>Q66					
65	Which programmes? [INDICATE ALL THAT APPLY]	A=BEAM		A			
		B= GOVERNMENT DROUGHT RELIEF		B			
		C= GOVERNMENT FARMING INPUTS SUPPORT		C			
		D=NGO PROGRAMMES (LIVELIHOODS SUPPORT, LEAN SEASON SUPPORT, ETC.)		D			
		E = OTHER SPECIFY _____		E			
66	Do you think that shopkeepers charge higher prices during the HSCT payment period?	1=YES 2=NO					