

HARMONISED CASH TRANSFER SURVEY (HSCT) 2017

HOUSEHOLD QUESTIONNAIRE

ENGLISH

QUESTIONNAIRE NUMBER:

DIST	TRICT	WA	RD	НН		

IDENTIFICATION PANEL	Questionnaire number:
13a.Interviewer name and number:	1. Day / Month / Year of interview:
Name	// 2 0 17
4. Province	5. District
6. Ward	7. Village/locality name
	14.Team Leader name and number:
7a. Household number:	Name
READ OUT HOUSEHOLD CONSENT. IF PERMISSION IS GIVEN, BEGIN THE IN	
□Yes, permission is given \Rightarrow Go to 2 to record the time and then beg □No, permission is not given \Rightarrow Circle 04 in 19. Discuss this result w	
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).
16.Main language used by enumerator during this interview:	17.Main language used by respondent during this interview:
Shona01	Shona01
Ndebele02	Ndebele
English	English03
Tonga04	Tonga04
Shangani05	Shangani05
Nambya06	Nambya06
Other (specify)96	Other (specify)96
18. Was a translator used?	
Yes01	
No02	8.PID of Main Respondent:
19.Result of household interview:	
Completed01	
Not at home02	8a.PID of Household Head:
Household absent for an extended period03	
Refused04	22. National ID of Household Head:
Dwelling vacant05	
Dwelling destroyed06	
Dwelling not found07	
Other(specify)96	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 : :	3. Record interview end time : :
(hour and minute)	(hour and minute)

SECTION A1: Household Composition Confirmation

Enumerator: [COPY PANEL MEMBER INFORMATION FROM A PRINTED SHEET PROVIDED INTO THE TABLE BELOW AND USE IT TO VERIFY MEMBERSHIP STATUS. OUESTIONS 1 THROUGH 6 SHOULD BE FILLED IN AT CAMP, BEFORE THE INTERVIEW, QUESTIONS 7 THROUGH 12 SHOULD BE FILLED IN DURING THE INTERVIEW,]

1	2		3	38	9	3b	4	5	5a	6	6a	7	8		9	9a	12
PID	Name of member	Ag [NAM May, 20 1=YI 2=MC	e of /IE] in /June	Age [NAM May/ 20 1=YE 2=MO	of IE] in June 14	If age discrepancy, confirm correct age 1= Correct age in 2013 2= Correct age in 2014 3= Ages inconsistent	Sex of [NAME] 1= MALE 2= FEMA -LE	Relations -hip to Main Responde -nt in 2013 [SEE CODES BELOW]	Relation -ship to Main Respon -dent in 2014 [SEE CODES BELO-W]	Intervi e -wed for youth modul e in 2013? 1=YE S 2=NO	Intervi -ewed for youth modul e in 2014? 1=YE S 2=NO	Is [NAME] currently a member of the household? 1=YES >>NEXT MEMBER / SECTION 2=NO [If Code 1 in Q6 and Code 2 in	Why is [NAME] no longer in the household? [SEE CODES BELOW] [CODE 4/15 RESPON- SE SKIP TO NEXT	When did [NAME] leave the household? [CHECK DATE SHOULD NOT BE LESS THAN 2013]		Where did [NAME] move to? 1=SAME VILLAGE 2=NEIGHB - OURING VILLAGE 3= GROWTH POINT/OT -HER TOWN 4=HARARE 5=BULAWA	Is [NAME] likely to return to live in this househol d in the next three years?
		AGE	CODE	AGE	COD E	CODE						Q7, fill youth tracking form]	PERSON/ SECTION	Month MM	Year YYYY	-YO 6=OUTSIDE COUNTRY 7=OTHER (SPECIFY)	3=MAY BE
											_	_	_				

RELATIONSHIP TO MAIN RESPONDENT (Q5)

1= MAIN RESPONDENT 9=NEPHEW/NIECE

2=SPOUSE 10=BROTHER/SISTER-IN-LAW

3=OWN/BIOLOGICAL CHILD 11=PARENT

4=STEP CHILD 12=PARENT-IN-LAW 5=ADOPTED CHILD 13=OTHER RELATIVE

6=GRAND CHILD 14=MAID/NANNY/HOUSE SERVANT

7=BROTHER/SISTER 15=NON-RELATIVE

8=COUSIN

MAIN REASON PERSON IS NO LONGER MEMBER (Q8)

1=LEFT TO FIND A JOB 9=ATTEND SCHOOL (Boarding)

2=SEPARATED 10=ATTEND SCHOOL (living with friend/relative)

3=MARRIED AWAY 11=GOT PREGNANT

4=DECEASED>>**NEXT PERSON** 12= TO LOOK AFTER PARENT(S)

5=DIVORCED 13= DISAGREED WITH HEAD 6=LIVING WITH OTHER RELATIVES 14=REASON NOT GIVEN

7=ESTABLISHED OWN HOME 15=NEVER A MEMBER >>**NEXT PERSON**

8=LEFT WITH MOTHER/FATHER 16=OTHER (SPECIFY)

Section A2 New Household Members Listing

12. ARE THERE USUAL HOUSEHOLD MEMBERS LIVING IN THIS HOUSEHOLD CURRENTLY THAT WERE NOT LIVING IN THE HOUSEHOLD THE LAST TIME WE MET [CURRENT MEMBER NOT LISTED IN TABLE A1]? INCLUDE VISITORS WHO HAVE LIVED WITH THE HOUSEHOLD FOR SIX MONTHS OR MORE AND SHARE THE SAME ECONOMIC RESOURCES (EAT FROM THE SAME 'POT') AND SLEEP UNDER THE SAME ROOF. INCLUDE USUAL MEMBERS, WHO ARE AWAY VISITING, IN HOSPITAL, AT BOARDING SCHOOLS OR COLLEGE OR UNIVERSITY, ETC.

1=YES: 2=NO >>INSTRUCTION 20 BELOW

[LIST NEW HOUSEHOLD MEMBERS NOT LISTED IN SECTION A1]

13	14	15	16	17a	17b	18	2	1	22
What is person's	What is	New Member	Why did [NAME] join	When did [N		Where did the same	How old is [NAM	IE]?	If older than 24
first name?	person's last	ID	this household?	the househol	d?	person come from?			years, what was
	name?	FA GGEGNIED	rann aonna	TEOD MEN	DODLY		[RECORD EXACT AGE IN COMPLETED YEARS		the highest grade
		[ASSIGN ID	[SEE CODES	[FOR NEW		1=SAME VILLAGE	FOR THOSE AG		[NAME] attained?
		STARTING WITH 301,	BELOW]	BABIES EN DATE OF B		2=NEIGHBOURING			attained?
		302, 303, ETC]	[IF CODE 4 IS THE RESPONSE, SKIP TO NEXT PERSON/SECTION]	AND SKIP		VILLAGE 3= GROWTH POINT/ OTHER TOWN 4=HARARE 5=BULAWAYO 6=OUTSIDE COUNTRY	AND ABOVE. FOR THOSE 0-59 MONTHS OLD, RECCORD THE AGE IN MONTHS. USE UNDER FIVE CLINIC CARD IF AVAILABLE] [SPECIFY AGE CODE BELOW] 1 YEARS		[USE GRADE CODES BELOW]
				Month (MM)	Year (YYYY)	7=OTHER (SPECIFY)	1 YEARS 2 MONT		
				(IVIIVI)	(1111)		AGE	CODE	

Reason the new member joined the housel	hold (Q16)			
1=Married into the family	4=Household member missed	7=Widowed	12=Worker for the household	17=Needed help, not sick
2=Returned to household to help	during previous	8=To go to school	13=Followed the parent	18=Inherited brother's wife
with activities	surveys	9=Returned from school	14=New born	19=Other
3=Returned to the household	5=Lost parents	10=Old age; to be cared for	15=Pregnancy	(specify)
because he/she is sick	6=Fostered	11=Divorced/ Separated	16=Visiting, decided to stay	
GRADE CODES (Q22)				
00= Preschool	05= Grade 5, Std 4	10= Form 3		15= Bachelors' degree
01= Grade 1, Sub Std	06= Grade 6, Std 5	11= Form 4 (GCE C	0)	16=Post-graduate certificate/ diploma
02= Grade 2, Std 1	07= Grade 7, Std 6	12= Form 5 (GCE A	A), Lower 6	17=Masters'/Doctorate Degre88= Never been
03= Grade 3, Std 2	08= Form 1	13= Form 6 (CGE A	A), Upper 6	to school
04= Grade 4, Std 3	09= Form 2	14= Certificate/Dipl	loma	

- 20. <u>Enumerator</u>: [NOW GO TO ROSTER AND COMPLETE FOR ALL MEMBERS CURRENTLY LIVING IN THE HOUSEHOLD. THAT IS, PAST RESIDENTS WHO STILL RESIDE IN THE HOUSEHOLD FROM SECTION A1 AND NEW MEMBERS FROM A2 (IF APPLICABLE)]
- 21. Supervisor: [PLEASE ENSURE THAT ALL MEMBERS ARE LISTED IN THE ROSTER.]

	SECTION 1: HO	USEHOLD ROST	TER		
1	2		3	4	5
MEMBER ID NUMBER [PID]	[TRANSFER ALL MEMBERS CURRENTLY LIVING IN THE HOUSEHOLD. THAT IS, PAST RESIDENTS WHO STILL RESIDE IN THE HOUSEHOLD FROM SECTION A1 AND NEW MEMBERS FROM A2 (IF APPLICABLE). REMEMBER TO START WITH THE MAIN RESPONDENT FROM 2017] [FIRST NAME, LAST NAME]	ABOVE. FOR THOSE 0- OLD.RECORD MONTHS. USE CARD IF AVAI	ACT AGE IN YEARS GED 5 YEARS AND 59 MONTHS THE AGE IN UNDER FIVE CLINIC ILABLE] C CODE BELOW]	What is the relationship of [NAME] to the main respondent? 01=MAIN RESPONDENT 02=SPOUSE 03=BIOLOGICAL CHILD 04=STEP CHILD 05=ADOPTED CHILD 06=GRAND CHILD 07=BROTHER/SISTER 08=COUSIN 09=NIECE/NEPHEW 10=BROTHER/SISTER-IN LAW 11=CHILD-IN-LAW 12=PARENT 13=PARENT-IN-LAW 14=OTHER RELATIVE	Is [NAME] male or female? 1=MALE 2=FEMALE
		AGE	CODE	15=MAID/NANNY/HOUSE-SERVANT 16=NON-RELATIVE	

		\$	SECTION 1: HOUS	SEHOLD RO	OSTER (Continued)			
	8	8a	9	9a	12	17	18	19
	AGED 12 AN	D ABOVE	FOI	R THOSE AC	GED 0-18	FOR T	HOSE AGE	ED 5-18
PID	What is the marital status of [NAME]? 1=NEVER MARRIED >>Q9 2=MARRIED 3=SEPARATED >>Q9 4=DIVORCED >>Q9 5=WIDOWED >>Q9 6=CO-HABITING	PID of spouse 99=SPOUSE DOES NOT LIVE IN HOUSE -HOLD	Is the biological mother of [NAME] alive? YES, MOTHER LIVES IN HOUSEHOLD = MOTHER PID >>Q12 77=YES, BUT MOTHER NOT IN HOUSEHOLD 88=NO, MOTHER IS DEAD 99=DON'T KNOW	PID of caregiver in household	Is the biological father of [NAME] alive? YES, FATHER LIVES IN HOUSEHOLD = FATHER PID 77=YES, BUT FATHER NOT IN HOUSEHOLD 88= IF NO, FATHER IS DEAD 99=DON'T KNOW	Does [NAME] have a blanket? (EITHER SHARED OR OWNED) 1=YES 2=NO 9=DK	Does [NAME] have a pair of shoes? 1=YES 2=NO 9=DK	Does [NAME] have at least 2 sets of clothes? 1=YES 2=NO 9=DK
L	I	l	l	I	l	l .	1	

			SEC	TION 2: EDU	CATION – FO	OR ALL PI	ERSONS AGE 3 to	o 24						
INTRO	DDUCTION: I am now going	g to ask you	about the educati	onal status o	f members o	of this hou	isehold age 3 to	24						
	OPENING					CUI	RRENTLY ATTE	NDING						
	1	2	3	4	5		6	7a	7b	7c	7d	7e	7f	7g
PID [ENTER PID FOR AGE 3-24]	Is [NAME] currently attending school? [INCLUDE THOSE IN COLLEGES AND UNIVERSITIES] 1=YES, NURSERY/PRE-SCHOOL >>Q6 2=YES, OTHER GRADE/FORMS 3=YES, CORRESPONDENCE 4=YES ADULT LITERACY CLASS >> Q8	What grade level of education is [NAME] currently attending?	What grade was [NAME] attending last year? [USE GRADE CODES BELOW] [IF NOT ATTENDING SCHOOL LAST YEAR E.G. JUST	How many days did [NAME] attend school in the past week? [0-5 DAYS] 8=HOLIDAY	Did [NAME] obtain a scholarshi p from BEAM for school fees last term? 1=YES 2=NO	Did [NAME] receive support for school fees last term from other outside sources [LIST UP TO TWO SOURCES]? BEAM for ichool 2=MOTHER ichool 2=MOTHER ichool 3= RELATIVE ichool 4= OTHER GOVT. ASSISTANCE 1=YES 5=NGO		[IF NOTHING IN A CATEGORY, WRITE 0] [PLEASE ROUND TO THE NEAREST DOLLAR]						
	5=YES TERTIARY SCHOOL 6=OTHER (SPECIFY) 7=NO >> Q10	CODES BELOW]	STARTED SCHOOL, RECORD 88]			7=OTHE	R, (SPECIFY)	FEES	UNIFORM	TRANS- PORT	NARY & BOOKS		EXTRA LESSONS	OTHER, SPECIFY
											1			
											1			
			<u> </u>			<u> </u>								

GRADE CODES: 00= Preschool 01= Grade 1, Sub Std 02= Grade 2, Std 1 03= Grade 3, Std 2 04= Grade 4, Std 3 05= Grade 5, Std 4 06= Grade 6, Std 5 07= Grade 7, Std 6 08= Form 1 09= Form 2 10= Form 3 11= Form 4 (GCE O) 12= Form 5 (GCE A), Lower 6 13= Form 6 (CGE A), Upper 6 14= Certificate/Diploma 15= Bachelors' degree 16=Post-graduate certificate/ diploma 17=Masters'/Doctorate degree 88= Never attended school

	SECTION 2: EDUCATION-FOR ALL PERSONS AGE 3 to 24 (CONT'D)										
CU	RRENTLY ATTENDING (Con't)			CURRENTLY	Y NOT ATTENDING					
	8	9	9a	10	13	14					
PID [ENTER PID S FOR AGE 3-24]	Is the school that [NAME] is currently attending, a Government, Community, Mission/Religious, Industrial or private school? 1=GOVERNMENT 2=COMMUNITY/ COUNCIL 3=MISSION/RELIGIOUS 4=INDUSTRIAL 5=PRIVATE 6=OTHER (SPECIFY)	How many minutes does it take for [NAME] to get to school?	On average, how many hours in the last seven days did [NAME] spend on schoolwork outside of school? >> [GO TO NEXT PERSON/ SECTION] ENTER # OF HOURS	Has [NAME] ever attended school? 1=YES 2=NO >> NEXT PERSON/ SECTION	What was the highest grade [NAME] attained? [USE GRADE CODES BELOW]	What was the main reason for [NAME] leaving school at the time? 01=STARTED WORKING/BUSINESS= 02=EXPENSIVE 03=TOO FAR 04=NOT SELECTED/FAILED 05=PREGNANCY 06=MADE GIRL PREGNANT. 07=COMPLETED STUDIES/SCHOOL 08=GOT MARRIED 09=NO NEED TO CONTINUE SCHOOL 10=SCHOOL NOT IMPORTANT 11=UNSAFE TO TRAVEL TO SCHOOL 12=EXPELLED 13=LACK OF FINANCIAL SUPPORT 14=NEEDED TO HELP OUT AT HOME 15=ILLNESS/INJURY/DISABLED 16=ABUSIVE TEACHER 17=OTHER (SPECIFY) >> GO TO NEXT PERSON/SECTION					

GRADE CODES:- 00= Preschool 01= Grade 1, Sub Std 02= Grade 2, Std 1 03= Grade 3, Std 2 04= Grade 4, Std 3 05= Grade 5, Std 4 06= Grade 6, Std 5 07= Grade 7, Std 6 08= Form 1 09= Form 2 10= Form 3 11= Form 4 (GCE O) 12= Form 5 (GCE A), Lower 6 13= Form 6 (CGE A), Upper 6 14= Certificate/Diploma 15= Bachelors' degree 16=Post-graduate certificate/ diploma 17=Masters'/Doctorate degree 88= Never attended school

			SECTION	3A: HEALTH	I FOR ALL	PERSONS				
INTROD	UCTION: I am	now going to ask you about the hea	alth status of the m	embers of the h						
		LAST 30 DAYS				AST 12 MONTHS	-MAIN RESPOND		MAIN RESP	
	1	2	3	4	5	6	7	8	9	10
PID [ENTER PIDS FOR ALL FROM HH ROSTER]	Was [NAME] sick or injured during the last thirty days? 1=YES SICK 2=YES INJURED >> Q3 3=YES BOTH 4=NO >>Q5 9=DON'T KNOW >>Q5	What was [NAME] mainly suffering from? 01=FEVER/MALARIA 02=COUGH/COLD/CHEST INFECTION 03=TUBERCULOSIS (TB) 04=ASTHMA 05=BRONCHITIS/PNEUMONIA/CH EST PAIN 06=DIARRHEA 07=VOMITING 08=ABDOMINAL PAINS 09=SKIN RASH/SKIN INFECTION 10=PARALYSIS OF ANY KIND 11=HYPERTENSION 12=DIABETES/SUGAR DISEASE 13=EYE INFECTION 14=TOOTHACHE/MOUTH INFECTION 15=HEADACHE 16=BACKACHE 17=HIV/AIDS 18=OTHER (SPECIFY)	What was the main health facility/person visited? 1=PUBLIC HEALTH FACILITY 2=PRIVATE HEALTH FACILITY 3=MISSION HEALTH FACILITY 4=MINE/FARM HEALTH FACILITY 5=TRADITIONA L HEALER 6=PHARMACY 7=OTHER 8=NONE	How much in total was spent on medical consultations, treatment and drugs for [NAME] in the last thirty days? [INCLUDE BOTH CASH AND IN KIND' [GIVE AMOUNT IN USD] [ENTER '0'IF NONE]	Have you been continuously ill, for at least 3 months in the last 12 months? 1=YES 2=NO>>Q9	Have you received any external care or support services for this illness? 1=HEALTH FACILITY SERVICES >> Q8 2=HOME_BASED CARE SERVICES >> Q8 3=OTHER (SPECIFY) >> Q8 4=NO 5=BOTH HEALTH FACILITY AND HOME BASED CARE SERVICES	Why did you not seek care for this condition? 1=DID NOT REQUIRE 2=DON'T KNOW WHERE TO GO 3=FACILITY TOO FAR 4=SERVICE TOO COSTLY 5=NO SERVICES 6=OTHER (SPECIFY)	Have you been able to carry out his/her normal activities during the period of illness? 1=YES 2=SOMETIMES 3=NO	How would you rate your health in general? 1=POOR 2=FAIR 3=GOOD 4=VERY GOOD 5=EXCELLENT [COULD USE FLASH CARD TO SHOW SCALE]	Compared with one year ago, would you say that your health is: 1=BETTER 2=ABOUT THE SAME 3=WORSE

SECTION 3A: HEALTH FOR ALL PERSONS (Continued)

(Conti	inued)		
Ask ma	ain respon	dent only	
	11	12	13
	Do you have any disability?	What is your disability?1=TOTALLY BLIND 2=DIFFICULTY SEEING 3=DEAF	Have you ever received any services for this
PID	1=YES 2=NO	4= DIFFICULTY HEARING 5= DIFFICULTY SPEAKING	disability?
[ENTER PID FOR MAIN RESPOND ENT]	>>NEXT PERSON	6=DIFFICULTY MOVING (PHYSICAL DISABILITY) 7=DIFFICULTY LEARNING/MENTAL HANDICAP 8=STRANGE BEHAVIOR/MENTAL ILLNESS 9=CHRONIC FITS 10=LACK OF FEELING IN HANDS OR LEGS/LEPROSY 11=ALBINISM 12=OTHER (SPECIFY) [RECORD ONE DISABILITY]	1= YES 2=NO

	SECTIO	N 3B: HEALTH (ON	ILY FOR MAIN RE	ESPONDENT)	
	1	2	3	4	5
PID [ENTER PID FOR MAIN RESPON DENT]	Can you engage in vigorous activities (such as run, lift a heavy load, lift a bucket of water)? 1=EASILY 2=WITH DIFFICULTY 3=NOT AT ALL	Can you engage in moderate activities (such as work on the farm, carry a baby, or walk 5 km)? 1=EASILY 2=WITH DIFFICULTY 3=NOT AT ALL	Can you carry a 10 KG bag of shopping for 500 meters? [SHOW DISTANCE] 1=EASILY 2=WITH DIFFICULTY 3=NOT AT ALL	Can you bend, squat, or kneel? 1=EASILY 2=WITH DIFFICULTY 3=NOT AT ALL	Can you walk 2 KMS? 1=EASILY 2=WITH DIFFICULTY 3=NOT AT ALL

8

			ITO RF ('OMF			ON 3C: YOU CHILDREN A				THS ONLYI			
	2	3	4	OIVII	5	DION	6	7	8	9	10	11	12	13
PID OF CHILD	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, CERTIFI- CATE SEEN 2=YES, CERTIFI- CATE 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	[REG OR 1 CER IF A DD/I	t is [NA date? CORD : LTH C BIRTH C TIFIC. VAILA MM/YY UBLE CCK W CORDE TER.	FROM CARD ATE, BLE.] YYY HAT IS D ON OSTER	Has [NAME] been taken to a baby clinic (SCARO) for a check-up in the last 6 months? 1=YES 2=NO	Has [NAM E] had diarrho ea 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/FAR M HEALTH FACILITY 5=TRADITIONAL HEALER 6=PHARMACY 7=OTHER	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=TRADITIO -NAL HEALER 6=PHAR-MACY 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=PHARMA-CY 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
									8= DID NOT SEEK					

SECTION 6A: Time Use

ENUMERATOR: ASK OF ALL HH MEMBERS 5 YEARS OF AGE & ABOVE (INCLUSIVE). LIST PID FOR THOSE AGE 5+, THEN PROCEED WITH QUESTION 1.

LIVOIV	LIATOR.		TIC CHORES	ING 5 TEMNS OF	NGL & NDOVL	FARMING	TID FOR THOS	AGE 51, THEN		OTHER ACTIVITIE	ES	
	1	2	3	3a	4	5	6	7	8	9	10	10a
PID CODE	How many hours did [NAME] spend yesterda y collectin g water?	How many hours did [NAME] spend yesterday collecting firewood (or other fuel materials)?	How many hours did [NAME] spend yesterday taking care of children, cooking or cleaning?	How many hours did [NAME] spend yesterday taking care of sick/elderly/di sabled individuals?	How many days in the past agricultural season did [NAME] spend in land preparation or planting (e.g. ploughing)?	How many days in the past agricultural season did [NAME] spend in weeding, fertilizing, other non-harvest work?	How many days in the past agricultural season did [NAME] spend harvesting?	How many hours in the last seven days did [NAME] run or help in any of the household's non-agricultural or non-fishing household businesses?	How many hours in the last seven days did [NAME] spend in livestock herding, preparing fodder or other livestock activities?	How many hours in the last seven days did [NAME] spend collecting nuts or other tree fruits, honey, or other products from forests, either for food consumption, medicine or sales?	How many hours in the last seven days did [NAME] engage in casual or parttime maricho labour outside the household? IF 00>>Q11	What was the average daily wage in cash or in kind, that [NAME] received for days worked at casual or maricho labor during the last 7 days?
	Hours	Hours	Hours	Hours	Days	Days	Days	Hours	Hours	Hours	Hours	USD
							_		_			

SECTION 6B: Labour
ENUMERATOR: ASK OF ALL HH MEMBERS 10 YEARS OF AGE & ABOVE (INCLUSIVE). LIST PID FOR THOSE AGE 10+,

	THEN PROCEED WITH QUESTION 11.									
	WAGE LABOUR			UAL MARICHO LA	ABOUR					
	11	20	21	22	23	24				
PID CODE	How many hours in the last seven days did [NAME] do any work for a wage, salary, commission, or any payment in kind, excluding <i>maricho</i> labor, for anyone who is not a member of your household?	At any time over the last 12 months did [NAME] do any casual <i>maricho</i> labour for anyone who is not a member of your household? 1=YES 2=NO >>NEXT PERSON/ SECTION	In the last 12 months, approximately how many months did [NAME] work at this job?	In the last 12 months, approximately how many weeks per month did [NAME] work at this job?	In the last 12 months, approximately how many days per week did [NAME] work at this job?	What was the average daily wage in cash or in kind, that [NAME] received for days worked at casual or maricho labor during the last 12 months?				
	Hours		Months	Weeks/Mon	Days/Wk	USD				

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 1 = YESproduces goods or services or has anyone in your household owned a shop or operated a trading business? 2 = NO >>(Enterprises might include; for example, making bricks, or charcoal; mason; firewood selling; metalwork; tailoring; repair **Section 8** work; food processing, petty trading, food selling or trading, etc.) 3a 3b 7a What income-generating enterprises did individuals in your Who makes the decisions for this How many In what year did the household operate over the past 12 months? business? enterprise start months **ENTERPRISE CODE** during the past operating? ENUMERATOR: COLLECT INFORMATION ON 2 12 months MOST IMPORTANT ENTERPRISES HERE BEFORE did you operate GOING ON TO Q3a. this enterprise? [ENUMERATOR: LIST UP TO [SELECT THOSE WITH HIGHEST REVENUE] TWO HH MEMBERS] **Business Code [SEE** First HH Member | Second HH Member **Written Description** Months Year CODES BELOW] ID CODE ID CODE 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 INDICATE FIRS PROFIT OR LOS CORRESPONDI 1= PROFIT 2= LOSS >>NEXT ENTE	T WHETHER SS, THEN NG AMOUNT				
	# HH MEMBERS	14- NONE		USD	USD	USD	Profit/ Loss	USD				
1												
2												

		SECTION 8	3: TRANSFERS RECEIVE	ED AND MADE		
TRA	ANSFERS RECEIVED					
	SOURCE	1	2	3	4	5
Source ID	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 I	RECEIVED AND MADE (cont'd)	
TRA	NSFERS MADE				
	SOURCE	6	7	8	9
Source ID	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 9: OTHER INCOME											
Source ID	SOURCE	During the last 12 months, did you or any members of your household receive any [SOURCE]? 1=YES 2=NO >> NEXT SOURCE OF INCOME	How much [SOURCE] did your household receive in total during the last 12 months?									
			USD									
1	Income from rentals (land, animals, machinery)											
2	Income from selling of assets											
3	Pension from government or private sector											
4	Welfare payment from DSS(including HSCT)											
5	Cash or food from NGOs (e.g. Camfed, World Vision, Oxfam, ADRA)											

			SECTION	10: CREDIT		
	1	2	3	4	6	8
still ow any loa	our household be money for an contracted July 2016?	How much does your household still owe?	In the last 12 months did you or anyone in your household borrow money from any person or institution	In the last 12 months, did you or anyone in your household apply for a loan?	Would someone lend to you or anyone in your household if you applied?	If you were certain you could obtain a loan would you apply for one?
before sury 2010.			(Excluding purchase on credit)?		1= YES >> Q17	1=YES
1=YES 2= NO >>Q3		1=YES >> Q17 2=NO	2= NO 9=DK	2= NO ALL RESPONSES >>GO		
		USD	2-110			TO Q17

			SECTION 10: CRED	OIT (CON'T)			
		EACH SOURCE OF LOA	AN: ASK MAIN RESPONDE	NT ABOUT TV	VO MOST IM	PORTANT LO	ANS
	10	11	12	13	14	15	16
LOAN ID	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)										
	PURCHASE	S 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	How much has your household purchased on credit?	How much have you paid back on these purchases in cash or inkind? [ESTIMATE IN KIND VALUE]	How much do you still owe on these purchases?	Could you have purchased more on credit if you wanted? 1=YES 2=NO				
			SECTION	USD	USD	USD					

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 smaller meal than you felt you needed 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 worry 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			11	[SAME CODES AS Q6]	
		TIMES) 4=OFTEN (MORE THAN TEN TIMES)			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</u> <u>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	N'T)
14e. Does the household own the following?	A. Radio	
1=YES $2=NO$	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		
I am now going to read a list of ten words to you. Please listen carefully. Later I will ask y [ENUMERATOR: Respondent should not take notes or write down the words. This is Stone Shoes Girl House Water Sky School Picture Hill Family		or me if you can.
15a. Can you now please say as many words as you can remember from the list I just gave you?	1 1 6 41	
[ENUMERATOR: Write down the number of words the respondent correctly remember.]	bered from the	
[Stone Shoes Girl House Water Sky School Picture Hill Family]		
Q16-26 Interviewer script: I am going to read some statements. Please tell me the extent to which [SHOW CARD WITH BARS TO PERSON]		
One means you strongly disagree and five means you strongly agree. The higher the bar (number) to [ENTER CODES 1-5]	he more you agree with the	e statement.
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 amount? [WRITE NUMBER OF PEOPLE]	d help you with this	

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?												
t year, what is the chanc												
you suddenly find that a	relative has left you \$100	0. You can choose to receive the \$100 now or a different										
ater date? What would yo	ou choose?											
1 = \$100 today	OR	2= \$75 in one month. Which do you choose?										
1= \$100 today	OR	2= \$300 in one month. Which do you choose?										
1= \$100 today	OR	2= \$150 in one month. Which do you choose?										
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?												
	tyear, what is the chance tyear, what is the chance you suddenly find that a stater date? What would you suddenly to today 1= \$100 today 1= \$100 today 1= \$100 today	t year, what is the chance you will need to seek for the year, what is the chance you will fall ill and no you suddenly find that a relative has left you \$100 attendate? What would you choose? 1= \$100 today OR 1= \$100 today OR 1= \$100 today OR 1= \$100 today OR	tyear, what is the chance you will need to seek financial assistance from someone? It year, what is the chance you will fall ill and not be able to conduct your daily activities? You suddenly find that a relative has left you \$100. You can choose to receive the \$100 now or a different atter date? What would you choose? 1= \$100 today OR 2= \$75 in one month. Which do you choose? 1= \$100 today OR 2= \$300 in one month. Which do you choose? 1= \$100 today OR 2= \$150 in one month. Which do you choose? 2= \$200 in one month. Which do you choose?									

SECTION 11: SELF ASSES	SSED POVERTY, FO	OOD SECURITY, EXPECTATIONS (CON'T)	
38. 8 – 4 – 2 – 3	[Yes=1, New	[o=2>> Q41]	
39. 7 – 9 – 6 – 4 – 8	[Yes=1, New	[o=2>> Q41]	
40. 5 – 7 – 2 – 8 – 9 – 3	[Yes=1, New	[o=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)	A [1St maggar]
3= SCHOOL FEES/SCHOOLING EXPENSES	A. [1 st reason]
4= TO BUY NEW CLOTHING/SHOES	
5= MEDICAL EXPENSES/HEALTH CARE	B. [2 nd reason]
6= TO REPAY DEBTS	
7= TO PURCHASES HOUSEHOLD DURABLE ASSETS (FURNITURE, POTS/PANS, RADIO ETC.)	C. [3 rd reason]
8= TO PURCHASE LIVESTOCK	C. [5 Teason]
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	

Sl	ECTION 14: Shocks and	Social Networks
1	2	3a
In the last 12 months, have you or any of your household members experienced [SHOCK]? 1=YES >>Q2 2=NO >> NEXT ITEM	As a result of this [SHOCK], did your income decrease? [ENUMERATOR: ASK FOR EACH SHOCK THAT HAS OCCURRED. IF A GIVEN SHOCK OCCURRED MORE THAN ONCE ASK ABOUT MOST RECENT] 1=YES>>Q3 2=NO >> NEXT SHOCK	What did your household do in response to this [SHOCK] to try to regain your former welfare level? [LIST MOST IMPORTANT COPING MECHANISM. USE CODES PROVIDED BELOW]
a. Flood		
b. Drought		
c. Storm		
d. Severe water shortage		
e. Crop disease		
f. Crop failure		
g. Crop theft		
k. Livestock theft		
1. 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
- Received help from government
 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)

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

					Purch	ases			Own Productio	n	Gifts,	Food for Work, Re	elief Food
			C	21	Q2	Q3		Q4		Q5	Qé		Q7
		Last 2 Weeks [ITEM] during the last 2 weeks? Read Out 1=YES Fill in Per Row PROMOTE TRIVING Did this household consume [ITEM] during the last 2 weeks? 1=YES 2=NO >>NEXT ITEM 0-DON'T KNOW		he last 2	How much did your household spend on [ITEM] consumed during the last 2 weeks? [IN TOTAL]	How many [UNITS your household pu amount?] of [ITEM] did rchase for that	During the last 2 weeks, how many [UNITS] of own produced [ITEM] did your household consume? [IF DID NOT PRODUCE, LEAVE		How much would this [ITEM] cost if you were to buy it?	During the last 2 we [UNITS] of [ITEM] d consume without pa	id your household yment? IVE, LEAVE	How much would this [ITEM] cost if you were to buy it?
			9=DON'T KNO	W	[IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q4]			BLANK AND SKIP	>>Q6]		BLANK AND SKIP	>>NEXT ITEM]	
			>>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)
	Cerea	als—During Last	t 2 Weeks										
	1.	Maize grain ur	nshelled										
	2.	Maize grain sh	nelled										
	3.	Breakfast mea (porridge)	ılie meal										
	4.	Roller meal (N	laize)										
S	5.	Maize meal -	Straight run										
FOODS	6.	Pounded maiz	e meal										
ENT FO	7.	Samp/Broken rice	maize/mealie										
FREQUENT	8.	Millet (Mhunga /nzembwe) gra											
-	9.	Mhunga meal										l '	
	10.	Cost of milling											
	11.												
	12.												
	13.	Sorghum grain	า										
	14.	Sorghum (mila	a) 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	В	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

			Purch	ases			Own Production	n	Gifts, I	Food for Work, R	elief Food
		Q1	Q2	Q3		Q4		Q5	Q6	1	Q7
		Did this household consume	How much did your household	How many [UNITS]	of [ITEM] did	During the last 2 we	eks, how many	How much would this	During the last 2 we	eks, how many	How much would this
		Last 2 Weeks [ITEM] during the last 2	spend on [ITEM] consumed during	your household pui	chase for that	[UNITS] of own prod	uced [ITEM] did	[ITEM] cost if you	[UNITS] of [ITEM] di	d your household	[ITEM] cost if you
		weeks? Read Out 1=YES	the last 2 weeks? [IN TOTAL]	amount?		your household cons	sume?	were to buy it?	consume without page	yment?	were to buy it?
		Fill in Per Row 2=NO	[IF DID NOT PURCHASE, LEAVE		}	[IF DID NOT PRODU	JCE. LEAVE	1	[IF DID NOT RECEI	VE. LEAVE	
		>>NEXT ITEM	BLANK AND SKIP >>Q4]			BLANK AND SKIP			BLANK AND SKIP		
		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)
		ing Last 2 Weeks			1			1	1		1
	15	Rice, shelled									
	16	MI VE									
	17	Wheat/Flour									
	18	Bread/Bread rolls									
	19 20	Buns/Biscuits/Cookies									
	21	Buils/Biscuits/Cookies									
	22	Other cereal/bread items									
		otter cerearbread items ots and Tubers—During Last 2 Weeks									
	23	Sweet potatoes							1		
	24	Potatoes									
	25	. Graneses									
	26										
	27	Yams									
SO	27a	Others(e.g cassava)									
100	Puls	ses and Legumes—During Last 2 Weeks									
Ę	28	Fresh beans (excl green beans),									
I E		unshelled									
FREQUENT FOODS	29	Fresh beans (excl green beans),									
臣	30	shelled									
	31	Soya beans, shelled									
	32	Dried beans									
	33	Groundnuts, unshelled									
	34	Groundnuts, shelled									
	35	Nyimo/ indlubu/ roundnuts, shelled									
		Nyimo/ indlubu/ roundnuts,									
	36	unshelled									
	37	Cowpeas, unshelled									
	38	Peas									
	39	Other pulses, legumes									
		etables—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	В	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

			Q1	, Q2	Q3		Q4	1	Q5	Qé	j	Q7
			Did this household consume	How much did your household	How many [UNITS]	of [ITEM] did	During the last 2 we	eks, how many	How much would this	During the last 2 we	eks, how many	How much would this
		Last 2 Weeks	[ITEM] during the last 2	spend on [ITEM] consumed during	your household pu	rchase for that	[UNITS] of own prod	luced [ITEM] did	[ITEM] cost if you	[UNITS] of [ITEM] di	d your household	[ITEM] cost if you
			weeks?	the last 2 weeks?	amount?		your household cons	sume?	were to buy it?	consume without pa	yment?	were to buy it?
		Read Out	1=YES	[IN TOTAL]						[IF DID NOT RECEI		
		Fill in Per Row	2=NO	[IF DID NOT PURCHASE, LEAVE			[IF DID NOT PRODU	UCE, LEAVE		BLANK AND SKIP	>>NEXT ITEM]	
			>>NEXT ITEM 9=DON'T KNOW	BLANK AND SKIP >>Q4]			BLANK AND SKIP	>>Q6]				
			>>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)
	Vege	tables (Cont) —	During Last 2 Weeks	Value III OOD (X.XX)	Quantity	Offic Code	Quantity	Offit Code	Value III OSD (X.XX)	Quantity	Onit Code	Value III OSD (X.XX)
		Rape/ Covo/ Ch	=	11				1			1	
		Okra	iomouliei									
		Pumpkin leaves		1								
	46	Tumplanteaves										
	46a	sweet potato lea	aves									
		Bondwe (amara										
		Cowpea leaves										
		Cucumber										
	50											
	51	Carrots										
		Pumpkin										
	53	Green mealies										
	54											
ODS	55 56											
F0	57											
E	58											
no	59	Pepper/Chili (ml	hiripiri)									
	60	. оррононы (на										
		Other Veg (Nye	ve, Runi, Tsine,									
	01	Howa)										
		—During Last 2	2 Weeks	11	1				,		1	
		Oranges										
		Apples										
		Mangoes Bananas		<u> </u>				1				
		Pawpaws		-								
		Watermelons						1				
		Lemons/ Lime										
	69	LOTHOTIS/ LITTLE										
	70											
	71	Guavas										

Uı	nit 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	В	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

		Q1		Q2	Q3		Q	4	Q5	Q	6	Q7
	Last 2 Weeks	Did this household co during the last 2 wee	onsume [ITEM] eks?	How much did your household spend on [ITEM] consumed during the last 2 weeks?	How many [UNITS your household pu amount?] of [ITEM] did	During the last 2 we [UNITS] of own procyour household con	eeks, how many duced [ITEM] did	How much would this [ITEM] cost if you were to buy it?	During the last 2 we [UNITS] of [ITEM] d consume without page	eeks, how many id your household	How much would this [ITEM] cost if you were to buy it?
	Read Out Fill in Per Row	>>NEXT ITEM 9=DON'T KNOW		[IN TOTAL] [IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q4]			[IF DID NOT PROD BLANK AND SKIP			[IF DID NOT RECEIVE, LEAVE BLANK AND SKIP >>NEXT ITEM]		
		>>NEXT ITEM	1	Value in USD (X.XX)	Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
<u> </u>	72 Avocado											
Ļ	73 Wild fruit											
	74 Sugarca Munzimb	ne (Nzimbe/Inzimbe/ e										
<u> </u>	75											
<u> </u>	76 Dried From Tries											
	77 Other fru											
	Fish—During						1 1					
	78 Kapenta fish)	Matemba (small dried										
	79 Tiger fish	ı										
	80 Bream (f	resh/ frozen)										
		ried/ smoked)										
'.t)	82 Mackere											
S	83											
SC	84											
		n (fresh or frozen)										
H F		n (dried/smoked)										
EN L		n and fish products										
E E		try —During Last 2 We	eks (fresh, froz	zen and dried)								
	88 Chicken											
_	89 Other po	ultry		<u> </u>								
_	90 Beef											
<u>_</u>	91 Pork incl											
Į.	92 Goat me	at										
<u> </u>	93											
<u> </u>	94 Game m											
<u> </u>		Madora/Mawungu						<u> </u>				
<u> </u>	96 Casings											
Į.	97											
<u> </u>		als e.g. liver, kidneys		{								
<u> </u>	99											
ļ.	100 Insects			 								
	101 Other me	eat										

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	В	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

		Purchases				Own Production	n	Gifts,	Food for Work, R	elief Food
	Q1	Q2	Q3		Q	•	Q5	Q	-	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 your household pu amount?	of [ITEM] did rchase for that	During the last 2 we [UNITS] of own proc your household con:	duced [ITEM] did	How much would this [ITEM] cost if you were to buy it?	During the last 2 we [UNITS] of [ITEM] d consume without pa	id your household	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]			[IF DID NOT PROD BLANK AND SKIP			[IF DID NOT RECE BLANK AND SKIP		
		Value in USD (X.XX)	Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
Dairy Products and	Eggs—During Last 2 Weeks									<u> </u>
102 Milk (fresh)										
103 Milk (powdere	d, excl baby milk)									
104 Sour/Fermente	ed Milk									
105 Eggs										
106										
107 Other dairy pro										
Fats & Oils—During	g Last 2 Weeks									
108										
109 Margarine/butt	ter									
110 Peanut butter										
111 Cooking Oil										
112 Other fats (exc										
	-During Last 2 Weeks									
113 Sugar										
114 Honey/ Jam/ C										
115 Cocoa and cho	ocolate									
116 Ice Cream										
117 Other sweets										
	erages—During Last 2 Weeks									
118 Tea leaves/tea										
	blend, or instant)									
120										
121 Juice										
122 Soft drinks										
123										
124										
125 Maheu (amah	ewu/ Mahewu)									
126 Other nonalco	holic 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	В	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

				Purchases				Own Production	1	Gifts, F	ood for Work, R	elief Food
		Q1		Q2	Q3		Q4		Q5	Q6		Q7
	Look 2 Weeks	Did this household of [ITEM] during the laweeks?		How much did your household spend on [ITEM] consumed during the last 2 weeks?	How many [UNITS] your household pur amount?	of [ITEM] did chase for that	During the last 2 wer [UNITS] of own produ your household cons	uced [ITEM] did	How much would this [ITEM] cost if you were to buy it?	During the last 2 wee [UNITS] of [ITEM] did consume without pay	d your household	How much would this [ITEM] cost if you were to buy it?
	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]			[IF DID NOT PRODUBLANK AND SKIP >			[IF DID NOT RECEIVE BLANK AND SKIP		
				Value in USD (X.XX)	Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
Alco	holic Beverages	—During Last 2 We	eks									
	Spirits											
	Wines											
129												
130	Clear beer											
131	Opaque beer											
132	Traditional brew Spirit) (Chibuku doro rematanda	/Chigodokhaya /										
133	Other alcoholic	beverages										
Baby	/ Food—During	Last 2 Weeks										
134												
Food	From Kiosks, (Cafés, Restaurants-	-During Last	2 Weeks								
135												
Othe	r Food and Bev	erages—During Las	st 2 Weeks									
136	Chips & Crisps											
137	Sweet reed											
	Other foods and (specify)	· ·										
		cco—During Last 2	Weeks									
	Cigarettes											
139 a	Tobacco											
	Snuff											
	Other Tobacco											
Non		—During Last 2 We	eks									
3 142												
142 143 144	Spices											
144	Mixed Condime	nts 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	В	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

ı	IOTE: CHA	OTE: CHANGE OF REFERENCE PERIOD Q8		Purch	ases			Own Productio	n	Gifts,	Food for Work, R	elief Food
			Q8	Q9	Q10)	Q1°	1	Q12	Q1		Q14
	Read	Did this household consume (use) [ITEM] during the last 4 weeks? Read Out 1=YES Fill in Per Row 2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM		How much did your household spend on [ITEM] consumed (used) during the last 4 weeks? [IN TOTAL] [IF DID NOT PURCHASE, LEAVE BLANK AND SKIP >>Q11]	How many [UNITS your household puramount?	of [ITEM] did rchase for that	During the last 4 we [UNITS] of own prod your household cons [IF DID NOT PRODU BLANK AND SKIP >	uced [ITEM] did sume (used)? JCE, LEAVE	How much would this [ITEM] cost if you were to buy it?	During the last 4 we [UNITS] of [ITEM] or did your household payment? [IF DID NOT RECE BLANK AND SKIP	onsumed (used) receive without VE, LEAVE	How much would this [ITEM] cost if you were to buy it?
		•		Value in USD (X.XX)	Quantity	Unit Code	Quantity	Unit Code	Value in USD (X.XX)	Quantity	Unit Code	Value in USD (X.XX)
	Other Non-	n-frequent E	xpenditure—During Last 4 W	/eeks								
	furnis blank	sehold textile shings e.g. b kets, towels,	ped sheets, curtains									
	glass	sware, plates										
	148 Mops	s, brooms ar	nd brushes									
		niture e.g. be resses, table ets										
HOUSING EXPENDITURES	(plum		d maintenance ng, stove repairs, n									
<u>S</u>	151 Rent	t of dwelling										
XPE	152											
G E	153 Wate	er and sewa	ge charges									
SIN	154											
no l	155 Elect	tricity										
	156 Gas											
	157 Firew	wood										
Ĺ	158 Char	rcoal										
	159											
	160 Parat	affin										
	161											
	162 Othe	er fuel for cod	oking/lighting									
	163 Batte match	eries, light bu ches, candle:	ulbs, lighters, s									
Ī	164 Othe	er housing ex	kpenses									

Ţ	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	В	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

				Purchases	Gifts
			Q8	Q9	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	During the last 4 weeks , what was the value of [ITEM] your household consumed (used)
		Read Out	1=YES	last 4 weeks?	which was received without
		Fill in Per Row	2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM	[IN TOTAL] [IF NOTHING SPENT, LEAVE BLANK >> Q14]	payment? [IN TOTAL] [IF NOTHING RECIEVED, LEAVE BLANK>> NEXT ITEM]
				Value in USD (X.XX)	Value in USD (X.XX)
	165	Bath/handwashi	ng soap		
	166	Laundry deterge	nt		
	167	Toothpaste and	toothbrushes		
	168	Sanitary towels			
	169	Toilet paper and	other tissues		
	170	Cosmetics (e.g., glycerin, make-uetc.)	lotion, creams, ip, petroleum jellies,		
HYGIENE	171		perming, braiding, ampooing; haircuts,		
Ξ	172				
	173				
	174	cleansers, hand			
	175	Insecticides			
	176	Other hygiene e	xpenses		
COMMUNICATI ON	177	Mobile phones (time excl cost of	connection fees, air phone)		
ΙĔΖ	178				
₹ 0	179				
Ö	180				
	181	Other communic	cation expenses		

					Purchases	Gifts
			Q8		Q9	Q14
		Last 4 Weeks Read Out Fill in Per Row	Was [ITEM] consumed (used) during the last 4 weeks? 1=YES 2=NO >>NEXT ITEM 9=DON'T KNOW		How much did your household spend on [ITEM] consumed (used) during the last 4 weeks?	During the last 4 weeks, what was the value of [ITEM] your household consumed (used) which was received without payment?
			>>NEXT ITEM		[IF NOTHING SPENT, LEAVE BLANK >> Q14]	[IN TOTAL] [IF NOTHING RECIEVED, LEAVE BLANK >> NEXT ITEM]
	Puhli	 ic Transportation	า	_	Value in USD (X.XX)	Value in USD (X.XX)
			to and from work	┪		
	183		to/from school incl			
	103	boarding school				
	184		nsport (e.g., to/from			
_		church, visits)				
TRANSPORT	Priva	te Transportation	n			
ISP	185	Petrol/diesel/oil				
RA S	186					
=	187	Motorbike repair	s (tires/tubes, oil, etc.)			
	188	Bicycle repairs (etc.)	tires, tubes, solution,			
	189					
	190	Scotch cart				
	191	Other private tra	nsport			
	1400	1				
	192	_				
	193	Domestic servar	nts			
꿈	194					
OTHER	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	В	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 I	REFERENCE PERIOD		Purchases		G	ifts
			Q15		Q16		0	17
		Last Year	Did this household purchase/pay for or red the following items dur the current school ye	ring	During the current school year, how much		During the cur year, what was [ITEM] your ho received withou	s the value of usehold
		Read Out	1=YES		did your		TOTAL]?	, , -
		Fill in Per Row	2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM		household spend on [ITEM]?		[IF NOTHING LEAVE BLAN ITEM]	
					[IN TOTAL] [IF NOTHING SPENT, LEAVE BLANK >> Q17]			
	Ldi	vestion. Anouer	Separately for 1st and	and Co	Value in USD (X.XX)	2017	Value in l	JSD (X.XX)
	199		l examination fees,	2na Sc		2017	1st term	1
	199	and boarding fe			1st term 2nd term		2nd term	
	200	Contributions to	school/PTA/SDA		1st term		1st term	
					2nd term		2nd term	
	201	Private tuition			1st term		1st term	
					2nd term		2nd term	
	202	Textbooks			1st term		1st term	
-DUCATION					2nd term		2nd term	
3	203	School stationer	y (exercise, books,		1st term		1st term	
EDO	200	pens, pencils, ru mathematical se	ilers, rubbers,		2nd term		2nd term	
	204		er school requisites		1st term		1st term	
		(e.g., for boarde biscuits, tinned	ers-snacks, mazoe, foods, etc.)		2nd term		2nd term	
	205		(incl shoes, socks,		1st term		1st term	
		ties, materials, t	ailoring charges)		2nd term		2nd term	
	206	Other education	expenses		1st term		1st term	
		money, pocket r	emonies, tuck shop money for students, dging for students, tudents, etc.)		2nd term		2nd term	

					Purchases		Gifts
			Q15		Q16		Q17
		Last Year	Did this household purchase/pay for or the following items of last 12 months?	receive during the	During the last 12 me how much did your household spend on		During the last 12 months, what was the value of [ITEM] your household received without payment [IN TOTAL]?
		Read Out	1=YES				
		Fill in Per Row	2=NO >>NEXT ITEM 9=DON'T KNOW >>NEXT ITEM		[IN TOTAL] [IF NOTHING SPEN' LEAVE BLANK >> C		[IF NOTHING RECIEVED, LEAVE BLANK >> NEXT ITEM]
					Value in USD (X	.XX)	Value in USD (X.XX)
	207	Purchase of me					
	208	Fees for doctors					
	209	Fees for nurses,	midwives				
	210						
	211	Fees for hospita					
НЕАСТН	212	Fees for health a					
EAI	213	Fees for tradition	nal healers				
エ	214	Payments to hos surgery	spital/health center/				
	215	Pre-payment sc	heme				
	216	Payments for tra					
	217	Other health exp	enses				
		'					
WATER	218	Treatment table	s, chemicals, etc				
WA	219	Other water trea	tment				
	Inclu	ding Clothing, S	hoes, Repairs – Ex	cluding La	undry, Excluding Sch	ool Unifo	orms
	220	Zambias	·				
	221	Children's clothi	ng				
	222	Men's clothing	_				
NG	223	Women's clothir	ng (excl Zambias)				
CLOTHING	224	Fabric/material	· ·				
70	225	Tailoring charge	S				
	226	Men's footwear	e.g. shoes, sandals				
	227	Women's footwe	0				
	228	Children's footw	ear				
	229	Footwear repair	charges				
	000			1	1	1	·
-l s	230	Loan repayment					
CE	231	Contributions (c	nurch, mosque.)				
FINANCIAL SERVICES	232						
ES	233	Funerals, gifts, of brideprice (lubol					

					SECTI	ON 18A: AG	RICULTURA	AL PRODUCTION	(NEW)			
								questions about Agr				
1.	Did any member of 2016 and now ?	of this hous	ehold <u>or an</u>	ybody on the	eir behalf gro	ow any crops	in the last agri	cultural season, that	is, between	October	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 planted un crop? 1=HECTA 2=ACRE 3=METER	nder this	How much total harve agricultura UNITS 1=KILOGR 2=25 KG B. 3=50 KG B. 4=75 KG B. 5=90 KG B. 6=OTHER [OBTAIN A SHELLED] IF 00>>Q8	AM AG AM AMOUNT	How much of harvested crin total? UNITS 1=KILOGRA 2=25 KG BA 3=50 KG BA 4=75 KG BA 5=90 KG BA 6=OTHER (S [OBTAIN AN SHELLED] IF 00>>Q7	AM G G G G G G FPECIFY)	What was the total value of [CROP] sales? [ESTIMATE THE VALUE OF INKIND PAYMENTS]	How much harvested of currently historage? UNITS 1=KILOGR 2=25 KG B 3=50 KG B 4=75 KG B 5=90 KG B 6=OTHER [OBTAIN A SHELLED]	AM AG AM AM AG AM	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:

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

SECTION 19B: FRUIT AND VEGETABLE PRODUCTION (LAST MONTH)						
	[This section refers prin	narily 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: AGRIC	CULTURAL INPUTS and	d PRODUCTIVE ASSETS - LA	AST 12 MON	THS	
		1	2	3	4	5
CODE	ITEM	During the last 12 months, did you use or own any [INPUT/ ASSET]? 1=YES 2=NO >>NEXT INPUT/ASSET	Do you own, rent for pay, borrow or use [ASSET] as part of a sharing arrangement? 1= OWN 2=RENT >>Q5 3= BORROW>>Next item 4=SHARING AGREEMENT>>Q5	How many [ASSETs] do you use/ own?	Did you purchase [INPUT/ASSET] in the last 12 months? 1=YES 2=NO >>NEXT INPUT/ASSET	During the last 12 months, how much did you spend in cash and in kind on [INPUT/ ASSET] including transport ? 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			

S	SECTION 21: HIRED LABOUR FOR CROP, LIVESTOCK AND NON AGRICULTURAL ENTERPRISE ACTIVITIES										
			1			2					
ACTIVITY CODE	TYPE OF ACTIVITY	During the last [RECALL PERIOD], did you hire any non-household member to work on [ACTIVITY]? PERIOD RECALL PERIOD 1=YES 2=NO >>NEXT ACTIVITY [NO		YPE OF ACTIVITY RECALL PERIOD 1=YES		children PERIOD]	to work o	s did you hir n [ACTIVITY] REN SHOULI	during th	ie [RECALL	
ACT				2a1	2a2	2b1	2b2	2c1	2c2		
				MA	LES	FEMA	LES	CHILI	DREN		
				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									

		SEC	CTION 22: LI	VESTOCK			
	1	2	3	5	6	7	10
ANIMAL ID	LIVESTOCK TYPE	During the last 12 months, have you or any member of your household raised or owned any [LIVESTOCK]? 1=YES 2=NO >> GO TO NEXT ANIMAL [RECORD AN ANSWER FOR EACH TYPE OF LIVESTOCK BEFORE GOING THROUGH THE ENTIRE MODULE FOR EACH APPLICABLE ROW, ONE ROW AT A TIME.]	How many [LIVESTOCK] are owned by your household now (present at your farm or away)? [IF NONE, RECORD 0]	In the last 12 months, how many [LIVESTOCK] did you consume?	During the last 12 months, how many [LIVESTOCK] did your household buy? [IF NONE, RECORD 0 >> Q10]	How much did you pay over the last 12 months?	During the last 12 months, how many [LIVESTOCK] did your household sell? [IF NONE, RECORD 0 >> NEXT ANIMAL]
			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)								
		11	14a	14b	15				
		Did your household produce any [PRODUCT] during the last 12	How much of the	e [PRODUCT] produced	What was the total value of sales of				
		months?	did you sell in th	e last 12 months?	[PRODUCT] in the last 12 months?				
	PRODUCT NAME	[RECORD AN ANSWER FOR EACH TYPE OF LIVESTOCK PRODUCT BEFORE COLLECTING DATA ON EACH.]			[ESTIMATE THE VALUE OF IN- KIND PAYMENTS]				
<u>a</u>		1=YES	[SEE WEIGHTS CODES]						
PRODUCT ID		2=NO >>NEXT PRODUCT							
PRO			If 0 >> NEXT P	RODUCT					
			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
В	Box/Carton	GR	Gram	CU	Cup/Mug	BD	Bundle
Р	Piece/Number	LT	Litre	PL	Plate	ОТ	Other
D	Dozen	ML	Millilitre	LBK	Large Basket	SBK	Small Basket

	SECTION 25	S: 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
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
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
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	1 = YES					
	Ministry of Public Service, abour and social Welfare?	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 EVER received payments from the HSCT	1= YES					
	programme?	2= NO>>SKIP TO END OF HH QUESTIONNAIRE					
9	Why do you think you were selected to receive the transfer?	A= I TAKE CARE OF ORPHANS	A				
		B= I TAKE CARE OF MANY CHILDREN	В				
	[DO NOT PROMPT- CIRCLE ALL THAT APPLY]	C= I AM SICK	С				
		D= I AM WIDOWED	D				
		E = I AM NOT ABLE TO WORK	E				
	[ENUMERATOR; IF THE INTENDED RESPONDENT	F = I AM HANDICAPPED					
	DOES NOT HAVE MORE INFORMATION ABOUT	G = I AM OLD	F				
	THE HSCT PROGRAMME LET THEM CONSULT	H = I AM VERY POOR	G				
	MOST KNOWLEDGEABLE HOUSEHOLD MEMBER	I = I DO NOT HAVE ENOUGH TO EAT	Н				
	WRITE MEMBER'S PID IN QA1]	J = I DO NOT KNOW	I				
		K = OTHER (SPECIFY)	J				
			K				
11	Do you think that the eligibility criteria for the HSCT program	5=STRONGLY AGREE					
	are clear?	4=AGREE					
		3=NEITHER AGREE NOR DISAGREE					
	[SHOW FLASH CARD]	2=DISAGREE					
		1=STRONGLY DISAGREE					
12	Are you or any member of the household <u>currently</u> a	1 = YES					
	beneficiary of the HSCT program?	2 = NO >> SKIP TO END OF HH QUESTIONNAIRE					
A1	PID code of most knowledgeable person about HSCT	PID					
	programme if not Main Respondent						
12c.	Who usually collects the payment from the payment point?	PID					
	[NOTE PID OF PERSON. IF NOT MEMBER OF THE						
	HOUSEHOLD, ENTER '99']						
	,						

	SECTION 25: OPERATI	ONAL PERFORMANCE (CON	T'D)	
	Payment s	ystems 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]	MONTH	YEAR	
15	How much did you receive? [ENTER "999" IF THE RESPONDENT DOES NOT KNOW]	AMOUNT IN \$		
16	When do you expect to receive the next payment?	1=IN NEXT TWO MONTHS 2=IN NEXT TWO-SIX MONTHS 3=IN NEXT SIX - TWELVE MONTHS	4=GREATER THAN TWELVE MONTHS 5=NEVER 6=DON'T KNOW	
17	How long in the future do you expect to continue receiving this money?	1= 0-6 MONTHS 2= 6 MONTHS - 1 YEAR 3= 1-2 YEARS	4= 2-5 YEARS 5=LONGER/FOR THE REST OF LIFE	
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]	DAYS	HOURS MI	NUTES
	In general, at the payment point how long did you have to wait to get your money? [CODE '-' FOR CELLS NOT USED]	DAYS	HOURS MINUTE	S
	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]	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?	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?	1 = YES 2 = NO 99=CAN'T SAY						
	[This does not include the alternative recipient / representative or Payment point staff.]							

	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	A=DISABILITY RELATED B=HIV RELATED C=HEALTH SERVICE RELATED D= LEGAL ASSISTANCE RELATED	A B C D		
	PROMPT]	E= CHILD HELPLINE FOR CHILD ABUSE/EXPLOITATION RELATED F=COUNSELLING G=EDUCATION SERVICE RELATED H=OTHER	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: OPERAT	TONAL PERFORMANCE (CONT'D)	
41	For problems with payment or other parts of the HSCT programme, who can you contact:	A = COMMUNITY LEADER(VILLAGE HEAD, HEADMAN, CHIEF) B= GOVERNMENT REPRESENTATIVE, COUNCILLOR C = ANOTHER BENEFICIARY	1st
	[LIST UP TO THREE OF THE MOST IMPORTANT]	D = OTHER COMMUNITY MEMBER E = FAMILY MEMBER F = PAYMENT POINT STAFF (DEPT OF SOCIAL WELFARE, PAYMENT	2nd
		AGENT) G = NGOS AT PAYMENT POINT H=CHILD PROTECTION COMMITTEE I=PAYPOINT HELP DESK J = OTHER SPECIFY	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	1st 2nd
		AGENT) G = NGOS AT PAYMENT POINT H=CHILD PROTECTION COMMITTEE I =PAYPOINT HELP DESK J = OTHER SPECIFY	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.
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	

17 H. Yes, why would it be a problem if others know you are receiving payments from the cash transfer programme? 20 - MAY BE ASKED FOR MONNY BY OTHERS 2478, Most Important Proceedings of the Concerns of the Conce		SECTION 24: OPERATIONAL PERFORMANCE (CONT'D)				
abc Dayments from the cash transfer programme? Do NOT READ PROMPT. LET THE RESPONDENT STATE THEIR RESPONDENT TO INDICATE NO MORE THAN ONE CONCERN IS SHARED, ASK THE RESPONDENT TO INDICATE NO MORE THAN THIREE (3) AND TO RANK THEM IN ORDER THAN ONE CONCERN IS SHARED, ASK THE RESPONDENT TO INDICATE NO MORE THAN THIREE (3) AND TO RANK THEM IN ORDER THAN THE RESPONSES ARE PROVIDED, ENTER '98' IN ORDER TO CONTINUE CONCERNS AND THE SUPPORT PROGRAM (10) THE RESPONSE CELLS) THE FEWER THAN THIREE RESPONSES ARE PROVIDED, ENTER '98' IN ORDER TO CONTINUE CONCERNS (10) THE RESPONSE CELLS THE PROGRAM (10) THE PRO	47			47a, Most		
Display Disp		j,j				
CONCERNS 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] 50 Do families participating in the HSCT programme have to follow any rules in order to continue receiving payments? 51 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? 15 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? 15 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? 15 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? 15 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? 16 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? 17 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? 18 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? 19 Can you please list the rules that you think cash transfer families have to follow the rules? 10 Can you please list the rules that you think cash transfer families have to follow the rules? 10 Can you please list the rules that you think cash transfer families have to follow the rules? 10 Can you please list the rules of the HSCT programme? 11 Can you please list the rules that you think cash transfer families have to follow the rules? 12 Can you please list the rules that you thin	abc	payments from the easi transfer programme.	= EMBARRASSED			
CONCERNS) IF MORE THAN ONE CONCERN IS SHARED, ASK THE RESPONDENT TO NOTICATE 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] Do families participating in the HSCT programme have to follow any rules in order to continue receiving payments? 1 - YES 2 - NON-2056 1 - YES 2 - NON-2056 Do families participating in the HSCT programme have to follow any rules in order to continue receiving payments? 1 - YES 2 - NON-2056 1 - YES 2 - NON-2056 3 - A ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 4 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AT IEDANCE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056 A - ENCOMENT AND A TRIBLE IN PRIMARY SCHOOLS 5 - NON-2056						
RESPONDENT TO INDICATE NO MORE THAN THREE (3) AND TO RAIN THEM IN ORDER OF IMPORTANCE). IF FEWER THAN THREE RESPONSES ARE PROVIDED, ENTER '98' 10 CONCERNED WILL BE REMOVED FROM OTHER SUPPORT PROGRAMS (8) = MAY NOT GET ADDITIONAL HELP IN TIMES OF NEED 20 CONCERNED WILL BE REMOVED FROM OTHER SUPPORT PROGRAMS (8) = MAY NOT GET ADDITIONAL HELP IN TIMES OF NEED 47c. Third Most limpt 47c. Third Most limpt		CONCERN(S) IF MORE THAN ONE CONCERN IS SHARED. ASK THE				
RANK THEM IN ORDER OF IMPORTANCE]. IF FEWER THAN THREE RESPONSES ARE PROVIDED, ENTER '98' TO ANY NON-RESPONSE CELLS 50		RESPONDENT TO INDICATE NO MORE THAN THREE (3) AND TO		Most Impt		
IF FEWER THAN THREE RESPONSES ARE PROVIDED, ENTER '98' TO ANY NON-RESPONSE CELLS 47c, Third Most Impt		RANK THEM IN ORDER OF IMPORTANCE!				
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TO ANY NON-RESPONSE CELLS Perceptions of beneficiary responsibilities						
The Formation of Demeticiary responsibilities		TO ANY NON DECRONCE CELLCI		Impt		
Do families participating in the HSCT programme have to follow any rules in order to continue receiving payments? Can you please list the rules that you think eash transfer families have to follow in order to continue receiving payments? Can you please list the rules that you think eash 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 Selection of the HSCT programme? Learn of the HSCT programme		- 11				
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BO NOT PROMPT IN MORE THAN ORE RULE IS LISTED, ASK THE RESPONDENT TO INDICATE NO MORE THAN THREE (3) AND TO RANK THEM IN ORDER OF IMPORTANCE]						
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F ADEQUATE FOOD AND NUTRITION FOR CHILDREN STOCK						
IFFEWER THAN THREE RESPONSES ARE PROVIDED, ENTER '98' TO ANY NON-RESPONSE CELLS G = CLEAN AND APPROPRIATE CLOTHING FOR CHILDREN H = BIRTH CERTIFICATE FOR CHILDREN Sic, Third Most Impt Sic, Third		RANK THEM IN ORDER OF IMPORTANCE]		Most Impt		
ANY NON-RESPONSE CELLS] I = INVEST IN FARM OR NON-FARM BUSINESS 51c, Third Most Impt			G = CLEAN AND APPROPRIATE CLOTHING FOR CHILDREN			
PAY OFF DEBT K = OTHER, SPECIFY L = DON'T KNOW			H = BIRTH CERTIFICATE FOR CHILDREN			
Second		ANY NON-RESPONSE CELLS]	I = INVEST IN FARM OR NON-FARM BUSINESS			
L = DON'T KNOW			J = PAY OFF DEBT	Most Impt		
How did you learn about the rules of the HSCT programme? A = HSCT PROGRAMME REPRESENTATIVE (IE. AT COMMUNITY A AWARENESS SESSION) B = FLYER C C C PAYMENT POINT D = NEIGHBOUR/FRIEND E = VILLAGE ELDER F = VILLAGE CHIEF G = ANOTHER BENEFICIARY H = WARD MEMBER J = OTHER, SPECIFY K = DON'T REMEMBER J = OTHER, SPECIFY K = DON'T REMEMBER T = RELATIVE/FAMILY MEMBER T = YES			K = OTHER, SPECIFY			
AWARENESS SESSION) B B E F F C C						
B = FLYER C C PAYMENT POINT D D D D D D D D D	52	How did you learn about the rules of the HSCT programme?				
C = PAYMENT POINT D NEIGHBOUR/FRIEND E VILLAGE ELDER F VILLAGE ELDER G G ANOTHER BENEFICIARY H WARD MEMBER I = RELATIVE/FAMILY MEMBER J OTHER, SPECIFY K E DON'T REMEMBER I = YES 2 = NO>>Q55 What will happen to a cash transfer families do not follow all of the rules? I = NOTHING I = NOTHIN						
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 53 Do you know what will happen if cash transfer families do not follow the rules? 54 What will happen to a cash transfer family if they do not follow all of the rules? 55 Is anyone checking to see if cash transfer families are following the rules? 1 = YES 2 = NO> **Q55** 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 5 = OTHER 5 = NO		[DO NOT PROMPT]				
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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	53	7				
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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	54	What will happen to a cash transfer family if they do not follow all of the				
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		rules?				
5 = OTHER 5s Is anyone checking to see if cash transfer families are following the rules? 1 = YES 2 = NO						
Is anyone checking to see if cash transfer families are following the rules? $1 = YES$ 2 = NO						
2 = NO	FF	I amount the limit of the first transfer from Time of the firs				
	33	is anyone enecking to see it easn transfer families are following the rules?				
99 = DOIN I KINOW						
			77 - DON I 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 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 B = MEAT/FISH/POULTRY C = BUYING FOOD PREPARED OUTSIDE THE HOUSEHOLD D = CELL PHONE/AIRTIME E= LIVESTOCK F = AGRICULTURAL INPUTS G = FORMAL GOVERNMENT EDUCATION (FEES, TEXTBOOKS, UNIFORMS ETC.) H = OTHER EDUCATION (NURSERY, OTHER RELIGIOUS SCHOOL)/ I = HEALTH CARE J = SHELTER / ACCOMMODATION / RENT K = CLOTHING / SHOES (DOES NOT INCLUDE SCHOOL UNIFORMS) L = INVESTMENT/SMALL BUSINESS M = FORMAL SOCIAL OCCASIONS SUCH AS WEDDINGS / FUNERALS N = SAVINGS/MUKANDO/ MAROUND O = OTHER SPENDING, SPECIFY P = DON'T KNOW / CAN'T SAY	A B C D E F G H I J K L M N O 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 B= GOVERNMENT DROUGHT RELIEF C= GOVERNMENT FARMING INPUTS SUPPORT D=NGO PROGRAMMES (LIVELIHOODS SUPPORT, LEAN SEASON SUPPORT, ETC.) E = OTHER SPECIFY	A B C D E		
66	Do you think that shopkeepers charge higher prices during the HSCT payment period?	1=YES 2=NO			